

D80+: Questionnaire D80+ High Age in Germany

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Questionnaire

D80+ High age in Germany

Dear participant,

Thank you very much for your support of our research! This study is funded by the Federal Ministry for Family Affairs, Senior Citizens, Women and Youth.

We would like to find out what constitutes quality of life for you and how the living conditions of older people in Germany can be improved.

Based on the results of the study, we want to make recommendations for an age-friendly society.
and improving the well-being of older people in Germany.
To get a little closer to this goal

We have developed this questionnaire to help us find answers to the most important questions, as personal interviews are not possible due to corona. Please support us with your answers to these most important questions.

**Once again, thank you very much for your support
in our research!**

Jacket sheet:

Inside of the
abbreviated title
page



Carried out by:

infas

Funded by:



Questionnaire

D80+ High age in Germany

infas Institute for Applied Social Science GmbH

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Dear participant,

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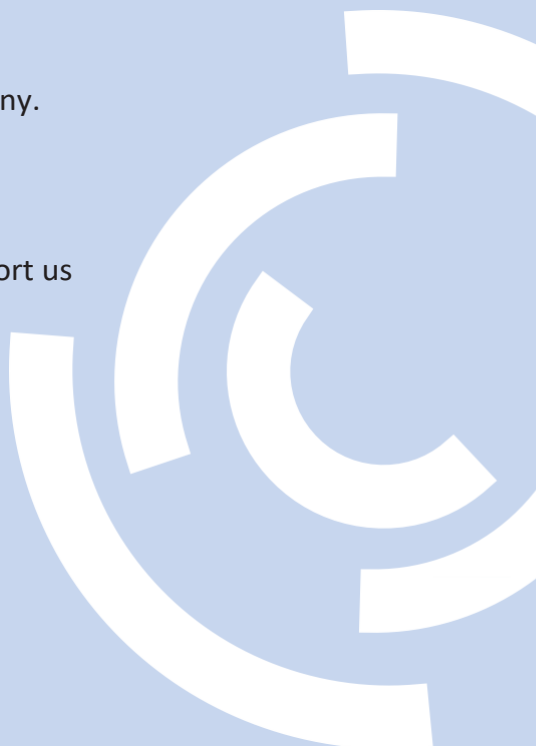
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7164/HE/2020/<LFD>

<barcode>

What happens to your details...

The protection of your data is a high priority for us. The infas Institute for Applied Social Sciences and ceres, a research centre of the University of Cologne, bear full responsibility under data protection law.

All your information will be treated confidentially.

All data are only analysed in anonymised form, i.e. without name and address, and only summarised with the data of the other respondents.

The results do not allow any conclusions to be drawn about which person gave which information.

You can find more details on the processing of your data in the enclosed data protection declaration.

Answering the questions is **voluntary**. However, the quality of the results depends on the completeness of your answers. We therefore ask you to answer all questions if possible.

Put the completed questionnaire in the enclosed postage-paid return envelope and send it back to infas.

How to fill in the questionnaire:

There are no right or wrong answers and no special knowledge is required to complete it.

- Answer each question as it applies to you personally.
- Please use the enclosed pen to complete the questionnaire.
- Please tick the appropriate answer options in the boxes provided:



- If you have ever made a mistake with an answer,
cross out this box:




and tick the correct answer:



- In the large boxes please enter
the numbers or information requested in each c

35

- Please answer the questions one after the other in the given order.
- When filling in the form, please pay attention to the instructions for the individual questions:
 *Please make only one entry.*
- Please pay attention to corresponding notes on skipping questions:
→ Please continue with question xx, page xx

Sociodemographics

1 Which gender do you have according to your identity card/passport?

gender

Male

☐

Female

☐

Divers

☐

2 When were you born?

Day

Month

Year

3 Where were you born? And where were your mother and father born?

Please enter the country with the current name, e.g. France instead of Alsace.

	She herself <small>Ursprung1</small>	Mother <small>herkunft1</small>	Father <small>herkunft2</small>
	1	2	3
Area of the present			
Germany; old			
like new federal states	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Former German eastern territories	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

The former German eastern territories include (old name):

Posen, Pomerania, Brandenburg Province, Bohemian Switzerland and Prussia:

– East Prussia

with Southern East Prussia, Northern East Prussia, Memelgebiet/Memelland

– West Prussia incl. Free City of Gdansk

– Prussian Province of Silesia

with Hultschiner Ländchen and the present-day voivodships of Silesia,

Lower Silesia, Opole, Lubuskie, Greater Poland, Lesser Poland

Former Czechoslovakia	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Former Yugoslavia	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Former Soviet Union	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other country, namely:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please state the present name of the country:

<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------

4 Between 1949 and 1990, did you live mainly in the GDR, in the old Federal Republic or outside present-day Germany?

origin3

 Please make only one entry.

GDR ☐ 1

Old Federal Republic ☐ 2

Outside of today's Germany ☐ 3

5 Since when have you had German citizenship?

 Please make only one entry.

Always, from birth ☐ 1 origin4

Since the year:

No German citizenship ☐ 3 origin4

6 In which country did you last attend school?

bildu1

 Germany: including old FRG incl. West Berlin, GDR incl. East Berlin, former German eastern territories, present-day Germany.

 Please make only one entry.

In Germany ☐ 1 → Please continue with question 7

In another country ☐ 2 → Please continue with question 8

No school ☐ 3 → Please continue with question 10, page 6

7 What is your highest general school-leaving qualification?

bilDu2

 Please make only one entry.

No degree 1 ☐

Elementary school leaving certificate,
lower secondary school leaving certificate 2 ☐


Realschulabschluss (Mittlere Reife) or equivalent
qualification (e.g. commercial school) 3 ☐

Polytechnic secondary school of the
GDR with completion of grade 8 or 4 ☐

Polytechnic Secondary School of
the GDR with completion of the 5 ☐

Advanced technical college
entrance qualification, 6 ☐

General or subject-linked higher education
entrance qualification/ Abitur (Gymnasium,
Lyceum or Erweiterte Oberschule (EOS), also EOS
with apprenticeship) 7 ☐

Other school-leaving qualification,
namely:  Please enter 8 ☐

→ Please continue with question 10, page

6

8 How many years did you attend school?

bilDu3

Year(s)

9 With what kind of degree did you finish school?

bilDu4


 Please make only one entry.

Without degree 1 ☐

Compulsory school with 2 ☐

Secondary school with graduation 3 ☐

10 In which country did you do vocational training or study?

form1  *Germany: including old FRG incl. West Berlin, GDR incl. East Berlin, former German eastern territories, present-day Germany.*

 *Please make only one entry.*

Only in Germany 1 ☐

In Germany and in another country 2 ☐

→ Please continue with question 11

In another country 3 ☐

→ Please continue with question 13

No training or studies 4 ☐

→ Please continue with question 14, page 8

11 What is your highest vocational training qualification?

form2  *Please make only one entry.*

No vocational qualification 1 ☐

Vocational-in-company vocational training (apprenticeship) 2 ☐

Vocational-school education (Berufsfachschule, Kollegschule) 3 ☐

→ Please continue with question 14, page 8

Training at a technical school in the GDR 4 ☐

Training at a technical school, master craftsman's school, technical school, administrative school and Business academy or technical academy 5 ☐

Bachelor 6 ☐

→ Please continue with question 12

Diploma 7 ☐

Master's degree, state examination, Master 8 ☐

Promotion 9 ☐

Training to become an educator 10 ☐

2 to 3 years of training at a health care school 11 ☐

1-year training at a school of health care 12 ☐

→ Please continue with question 14, page 8

Preparatory Service for the Intermediate Service in public administration 13 ☐

Other professional qualification, namely: 14 ☐

 *Please enter*



12 At which institution did you obtain this degree?

ausbil2_1

 Please make only one entry.

University of Cooperative Education 1 ☐

University of Applied Administrative Sciences 2 ☐

University of Applied Sciences,
Engineering school, other
non-university higher education institution 3 ☐

University (scientific university, also: art college,
teacher training college,
Theological University) 4 ☐

☐



Please continue with question 14, page 8

13 What kind of education was this? Please indicate only your highest professional training.

form3

 Please make only one entry.

Trained in a company 1 ☐

Longer training in a company 2 ☐

Vocational school attended 3 ☐

University visited 4 ☐

Other 5 ☐

Living

14 How do you live?

dwelling_8

 Please make only one entry.

In a private apartment/house 1 ☐

In a retirement home/nursing home
(facility with full inpatient care, residents do not run their own household and are not tenants/owners) 2 ☐

In a residential care group
(group-based living mostly within a retirement or nursing home usually combined with full inpatient care) 3 ☐

In a multigenerational house
(Residential building with self-contained housing units, residents are tenants/owners of different ages who support each other). 4 ☐


In a retirement home
(Facility with well-equipped, self-contained flats, outpatient care is possible across all care levels). 5 ☐

In a retirement home/residential complex with assisted living flats
(grouping of self-contained, age-appropriate flats, service and care services are offered) 6 ☐

In an outpatient assisted house or shared apartment
(residential building or flat, residents are tenants/owners, outpatient care and nursing services are jointly organised and used) 7 ☐

15 Are you receiving full inpatient care?

dwelling

 A person is provided with full inpatient care if he or she
1. lives in a nursing home/retirement home and
2. is in need of medication and
3. can rely on 24-hour care, support and nursing, and
4. the care, support and nursing is always possible through a nursing specialist.

No 0 ☐ → Please continue with question 20

Yes 1 ☐

16 Do you feel safe and secure in the facility?

secure

No 0 ☐

Yes 1 ☐

17 Do you have enough privacy in the facility?

private sp

No ☐ 0

Yes ☐ 1

→ Please continue with question 19

18 Do you use an outpatient care service or do you make use of day care?

 Please make an entry in each line.

Yes

1

No

0

grooming1

outpatient care service

☐☐

grooming2

Day care

☐☐

If you answer both questions with
have answered "No": Please

19 Are you treated with respect and courtesy by the staff?

would

No ☐ 0

Yes ☐ 1

20 Would you recommend the facility / care service to your family members and friends?

empf_pfl

No ☐ 0

Yes ☐ 1

21 Asked again: Are you receiving full inpatient care?

if1_residenti

No ☐ 0

Yes ☐ 1

→ Please continue with question 28, page 1 0

22 Are you cared for privately by someone, e.g. relatives or acquaintances?

grou3

No ☐ 0

→ Please continue with question 24

Yes ☐ 1

23 With what amount of hours per week does this person/these persons care for you?

grooming3

 Please round up to full hours if necessary.

Hours

24 Do you yourself privately care for another person?

nurture4

No ☐ 0

Yes ☐ 1

25 What type of building do you occupy?

artgeb

 Please make only one entry.

Agricultural residential building 1 ☐

Detached 1-/2-family house 2 ☐

1-/2-family house as terraced or semi-detached ☐

Residential house with 3-4 flats 4 ☐

Residential building with 5-8 flats 5 ☐

Residential building with 9 or more flats 6 ☐

High-rise building (9 or more) 7 ☐

Other 8 ☐

→ Please continue with question 27

26 Is there a lift?

lift

No 0 ☐

Yes 1 ☐

27 On which floor is the flat located?

stock

 Please make only one entry.

Ground 1 ☐

4th floor or higher 5 ☐

1st floor 2 ☐

Over several floors 6 ☐

2nd 3 ☐

Other 7 ☐

3rd 4 ☐

floor

28 How would you rate the condition of the house/facilities?

state

 Please make only one entry.

Good to very 1 ☐

Average 2 ☐

In need of renovation 3 ☐

29 How suitable is your non-domestic living environment for getting around or doing things on foot or with a wheelchair?

walkab

 Please make only one entry.

Not at all suitable 1 ☐

Rather not suitable 2 ☐

Rather 3 ☐

Very suitable 4 ☐

30 How closely do you feel connected to your living environment?

wohnr

 Please make only one entry.

- | | | |
|-------------------|---|--------------------------|
| Not narrow at all | 1 | <input type="checkbox"/> |
| Rather not | 2 | <input type="checkbox"/> |
| Rather | 3 | <input type="checkbox"/> |
| Very | 4 | <input type="checkbox"/> |

31 Can you trust the people in your neighbourhood?

sozkoh

Neighbours outside the residential building, neighbours in the house, other residents or staff are to be included.

 Please make only one entry.

- | | | |
|-------------|---|--------------------------|
| Does not | 1 | <input type="checkbox"/> |
| Rather not | 2 | <input type="checkbox"/> |
| Applies | 3 | <input type="checkbox"/> |
| More likely | 4 | <input type="checkbox"/> |
| Applies | 5 | <input type="checkbox"/> |

32 The Corona pandemic had many impacts on our daily lives. Perhaps you would have answered some of our questions differently before the Corona pandemic.

covid1_1

How much has the Corona pandemic affected your confidence in your neighbourhood?

 Please make only one entry.

- | | | |
|-------------|---|--------------------------|
| Not at all | 1 | <input type="checkbox"/> |
| A little | 2 | <input type="checkbox"/> |
| Moderate | 3 | <input type="checkbox"/> |
| Strong | 4 | <input type="checkbox"/> |
| Very strong | 5 | <input type="checkbox"/> |

→ Please continue with question 34, page 1 2

33 How positive or negative have you experienced this change?

FF_covid1_1

 Please make only one entry.

- | | | |
|------------------|---|--------------------------|
| Predominantly | 1 | <input type="checkbox"/> |
| Overall balanced | 2 | <input type="checkbox"/> |
| Predominantly | 3 | <input type="checkbox"/> |

Family and household

34 What is your marital status?

famst1

 Please make only one entry.

Married / Registered civil partnership ☐

→ Please continue with question 35

Married / Registered civil partnership,
but separated from the (marriage) partner ☐

Divorced / registered civil partnership annulled ☐

→ Please continue with question 36

Widowed /
Registered partner deceased ☐

Singl ☐

→ Please continue with question 37

35 Since which year have you been married/living in a registered civil partnership?

Since the
year:

→ Please continue with question 39

36 Since which year have you had the marital status indicated above?

Since the year:

37 you currently have a steady partner?

famst7

No ☐ → Please continue with question 39

Yes ☐

38 Since which year have you had this firm partnership?

Since the year:

39 Do you have or have had children and if so, how many?

 This means both your own children and children who have grown up with you.

No ☐ → Please continue with question 42

children1

Yes ☐

1

children2

Child(ren)

40 Do you have or have had grandchildren and if so, how many?

grandchild

No ☐ ₀ → Please continue with question 42

Yes ☐ ₁ → Grandchild(ren)

grandchild

41 Do you have or have had great-grandchildren and if so, how many?

grandchild

No ☐ ₀

Yes ☐ ₁ → Great-grandson

grandchild

42 Again: Are you receiving full inpatient care?

IF2_residenti

No ☐ ₀

Yes ☐ ₁ → Please continue with question 45, page 1 5

43 How many people live permanently in your household, including yourself?

This household includes all persons who live and work here together (e.g. joint shopping).
Please also consider all children living in the household.

👉 Please make only one entry.

I live alone ☐ ₁ → Please continue with question 45, page 1 5

hhgroe1

Multi-person household ☐ ₂ → with a total of persons

hhgroe2

44 Please provide information for up to three people from your household.

Please answer the questions for each person in columns.

Please do not make any entries here for yourself as a household member.

	Person 1	Person 2	Person 3
What gender is this person?	hhzusa1_2	hhzusa2_2	hhzusa3_2
<i>Please make only one entry.</i>			
Male	1 <input type="checkbox"/>	1 <input type="checkbox"/>	1 <input type="checkbox"/>
Female	2 <input type="checkbox"/>	2 <input type="checkbox"/>	2 <input type="checkbox"/>
What is this person's relationship to you?	hhzusa1_3	hhzusa2_3	hhzusa3_3
<i>Please make only one entry.</i>			
Parents	1 <input type="checkbox"/>	1 <input type="checkbox"/>	1 <input type="checkbox"/>
Parents-in-law (parents of the partner)	2 <input type="checkbox"/>	2 <input type="checkbox"/>	2 <input type="checkbox"/>
(Spouse) Partner	3 <input type="checkbox"/>	3 <input type="checkbox"/>	3 <input type="checkbox"/>
Daughter-in-law/son-in-law (partner of the child)	4 <input type="checkbox"/>	4 <input type="checkbox"/>	4 <input type="checkbox"/>
Brother-in-law (brother/sister of the partner)	5 <input type="checkbox"/>	5 <input type="checkbox"/>	5 <input type="checkbox"/>
Ex-partner	6 <input type="checkbox"/>	6 <input type="checkbox"/>	6 <input type="checkbox"/>
Child	7 <input type="checkbox"/>	7 <input type="checkbox"/>	7 <input type="checkbox"/>
Grandchild	8 <input type="checkbox"/>	8 <input type="checkbox"/>	8 <input type="checkbox"/>
Great-grandchild	9 <input type="checkbox"/>	8 <input type="checkbox"/>	9 <input type="checkbox"/>
Siblings	10 <input type="checkbox"/>	10 <input type="checkbox"/>	10 <input type="checkbox"/>
Aunt/uncle (siblings of parents)	11 <input type="checkbox"/>	11 <input type="checkbox"/>	11 <input type="checkbox"/>
Cousin (child of aunt/uncle)	12 <input type="checkbox"/>	12 <input type="checkbox"/>	12 <input type="checkbox"/>
Niece/nephew (child of sibling)	13 <input type="checkbox"/>	13 <input type="checkbox"/>	13 <input type="checkbox"/>
Other relatives	14 <input type="checkbox"/>	14 <input type="checkbox"/>	14 <input type="checkbox"/>
Boyfriend/girlfriend	15 <input type="checkbox"/>	15 <input type="checkbox"/>	15 <input type="checkbox"/>
(former) work colleagues	16 <input type="checkbox"/>	16 <input type="checkbox"/>	16 <input type="checkbox"/>
Members of the association or organisation	17 <input type="checkbox"/>	17 <input type="checkbox"/>	17 <input type="checkbox"/>
Volunteers (e.g. from social institutions)	18 <input type="checkbox"/>	18 <input type="checkbox"/>	18 <input type="checkbox"/>
Paid helpers (e.g. caregiver)	19 <input type="checkbox"/>	19 <input type="checkbox"/>	19 <input type="checkbox"/>
Known	20 <input type="checkbox"/>	20 <input type="checkbox"/>	20 <input type="checkbox"/>
Other person	21 <input type="checkbox"/>	21 <input type="checkbox"/>	21 <input type="checkbox"/>

45 Has the Corona pandemic changed your household composition?

covid1_2

Please make only one entry.

No ☐ ₀

→ Please continue with question 47

Y ☐ ₁

46 How positive or negative have you experienced this change?

FF_covid1_2

Please make only one entry.

Predominantly negative ☐ ₁

Overall balanced ☐ ₂

Predominantly positive ☐ ₃

Financial situation

47 What is the total average monthly net income of your household? This is made up of all sources of income minus taxes and social security contributions.

net2

You can be sure that your information will only be evaluated for scientific purposes and anonymously.

In the case of self-employed persons, please state the average net earnings, i.e. less operating expenses and taxes, indicate

under 150 Euro ☐ ₁

3,000 to under 3,250 euros ☐ ₁₃

150 to 450 Euro ☐ ₂

3,250 to under 3,500 euros ☐ ₁₄

451 to 850 euros ☐ ₃

3,500 to under 3,750 euros ☐ ₁₅

851 to under 1,000 euros ☐ ₄

3,750 to under 4,000 euros ☐ ₁₆

1,000 to under 1,250 euros ☐ ₅

4,000 to under 4,500 euros ☐ ₁₇

1,250 to under 1,500 euros ☐ ₆

4,500 to under 5,000 euros ☐ ₁₈

1,500 to under 1,750 euros ☐ ₇

5,000 to under 5,500 euros ☐ ₁₉

1,750 to under 2,000 euros ☐ ₈

5,500 to under 6,000 euros ☐ ₂₀

2,000 to under 2,250 euros ☐ ₉

6,000 to under 7,500 euros ☐ ₂₁

2,250 to under 2,500 euros ☐ ₁₀

7,500 to under 10,000 euros ☐ ₂₂

2,500 to under 2,750 euros ☐ ₁₁

10,000 to under 20,000 euros ☐ ₂₃

2,750 to under 3,000 euros ☐ ₁₂

20,000 euros and more ☐ ₂₄

48 How much has the Corona pandemic affected your financial situation?

covid1_3



Please make only one entry.

Not at all 1 ☐

→ Please continue with question 50

A little 2 ☐

Moderate 3 ☐

Strong 4 ☐

Very strong 5 ☐

49 How positive or negative have you experienced this change?

FF_covid1_3



Please make only one entry.

Predominantly 1 ☐

Overall balanced 2 ☐

Predominantly 3 ☐

Experiencing one's own

50 Do you shape your life according to your own ideas?

autonomo

 Please make only one entry.

Does not apply at ☐ 1

Rather not ☐ 2

More likely ☐ 3

Applies exactly ☐ 4

51 the following, we would like to find out how you experience your own ageing. We are interested in whether and to what extent you perceive certain changes that can accompany ageing.

 Please make an entry in each line.

	Gar not 1	A little 2	Mode rate 3	Stron g 4	Very stron gly 5
alter1 ... You relationships and other people appreciate much more?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
alter2 ... you give your health more Pay attention?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
alter3 ... your mental capacity decreases?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
alter4 ... you have more experience and knowledge, to assess things and people?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
alter5 ... you have a better feel for it, what is important to you?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
alter6 ... you have to limit your activities?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
alter7 ... you have less energy?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
alter8 ... Get more from the help feel dependent on others?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
alter9 ... you have more freedom, To live your days the way you want?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
alter10 ... you find it harder to motivate yourself?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

52

In the following, we would like to know to what extent you feel valued by society. It is not so much a question of recognition and appreciation by your immediate environment, but rather your assessment of society's view and attitude towards older people.

 Please make an entry in each line.

	Meet s not	Meets rather	Meets rather	Meets accurate
Do you have the feeling ...				
... to be needed in today's society?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
valuea1 ... that today's society values you for that, what you have done and achieved in your life?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
valuea2 ... that in today's society you are treated as if you were a burden (e.g. because of				
valuea3 of physical impairments)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... more appreciated today and to be respected than in the past?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

valuEa4

How much has the Corona pandemic affected your feeling of being valued by society?

covid1_4

53

 Please make only one entry.

Not at all	1 <input type="checkbox"/>
A little	2 <input type="checkbox"/>
Moderate	3 <input type="checkbox"/>
Strong	4 <input type="checkbox"/>
Very strong	5 <input type="checkbox"/>

→ Please continue with question 55

54

How positive or negative have you experienced this change?

FF_covid1_4

 Please make only one entry.

Predominantly	1 <input type="checkbox"/>
Overall balanced	2 <input type="checkbox"/>
Predominantly	3 <input type="checkbox"/>

Health

55 How would you generally describe your state of health in the last 4 weeks?

general

 Please make only one entry.

Very bad 1 ☐

Rather bad 2 ☐

Rather 3 ☐

Very 4 ☐

56 If you had pain, how severe was your pain in the last 4 weeks?

pain

 Please make only one entry.

No pain 1 ☐

Easy 2 ☐

Mode 3 ☐

Stron 4 ☐

Very 5 ☐

57 How tall are you? And how much do you weigh approximately?

gewgr1

Size: cm

gewgr2

Weight: kg

58 Have you unintentionally lost significant weight in the last 12 months?


gewgr3

No 0 ☐

Yes 1 ☐

59 Please indicate which of the following disease areas you are currently receiving medical treatment for (e.g. with medically prescribed drugs or other forms of therapy).

 Please make an entry in each line.

	Yes 1	No 0
<input type="text" value="multmor1"/> Heart attack	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text" value="multmor2"/> Heart failure (e.g. cardiac insufficiency)	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text" value="multmor3"/> High blood pressure	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text" value="multmor4"/> Stroke	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text" value="multmor5"/> Mental or psychiatric illness (e.g. Alzheimer's disease, anxiety, depression)	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text" value="multmor6"/> Cancer	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text" value="multmor7"/> Diabetes	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text" value="multmor8"/> Respiratory or lung disease	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text" value="multmor9"/> Back pain	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text" value="multmor10"/> Stomach or intestinal disease	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text" value="multmor11"/> Kidney disease	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text" value="multmor12"/> Liver disease	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text" value="multmor13"/> Blood disease (e.g. anaemia)	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text" value="multmor14"/> Joint or bone disease (e.g. osteoarthritis, osteoporosis, arthritis)	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text" value="multmor15"/> Bladder problems	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text" value="multmor16"/> Sleep disorder	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text" value="multmor17"/> Eye disease or visual impairment (e.g. macular degeneration, glaucoma or cataract)	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text" value="multmor18"/> Ear disease or hearing loss	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text" value="multmor19"/> Neurological disease (e.g. Parkinson's disease, stroke with paralysis)	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text" value="multmor21"/> (Blood) vascular disease	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text" value="multmor22"/> Thyroid disease	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text" value="multmor20"/> Other chronic illness, namely:  Please enter	<input type="checkbox"/>	<input type="checkbox"/>



60 In the last 4 weeks, have you had difficulty lifting heavier everyday objects, such as shopping bags, due to health impairments?

weak

No ☐ 0

Yes ☐ 1

61 Have you had a fall in the last 12 months?

fall

No ☐ 0

Yes ☐ 1

62 How many different medicines prescribed by a doctor do you take on an average day?

medicate1

 Please also think about insulin, ointments, sleeping pills or longer-acting depot medication.

I take Medication per day

63 Which care degree or care level do you have?

pspgr1_1

 Please make only one entry.

No care degree / no care level ☐ 0

Care level 1 ☐ 1


Care level 2
(This corresponds to care level 1 or care level 0) ☐ 2


Care level 3
(This corresponds to care level 1 with limited everyday competence or care level 2) ☐ 3

Care level 4
(This corresponds to care level 2 with limited everyday competence or care level 3) ☐ 4

Care level 5
(This corresponds to care level 3 with limited everyday competence or care level 3 with hardship) ☐ 5

64 How much help do you need for the following activities?

 This refers to help from other people as well as help from aids such as a walking stick or bath lift.

 Please make in each line an indication.

	Only with Help possible 0	A little Help 1	None Help 2
funkges8 Using the telephone	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
funkges9 Getting somewhere you can't get yourself can go there on foot (e.g. the organisation a taxi ride, taking the bus, etc.).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
funkges10 Buy food or clothes yourself, if you are taken there if necessary	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
funkges11 Prepare your own meals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
funkges12 Do housework	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
funkges13 Taking medication (Organise and carry out)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
funkges14 Arrangement of financial matters	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

65 How much has the Corona pandemic affected your health?

covid1_5  Please make only one entry.

Not at all	1 <input type="checkbox"/>	→ Please continue with question 67
A little	2 <input type="checkbox"/>	
Moderate	3 <input type="checkbox"/>	
Strong	4 <input type="checkbox"/>	
Very strong	5 <input type="checkbox"/>	

66 How positive or negative have you experienced this change?

FF_covid1_5  Please make only one entry.

Predominantly	1 <input type="checkbox"/>
Overall balanced	2 <input type="checkbox"/>
Predominantly	3 <input type="checkbox"/>

Everyday life and lifestyle

- 67** We are also interested in what interests you have and how you organise your free time. Free time or leisure time means the time that you are free to organise according to your own wishes.

Please make an entry in each line.

How often ...	Never 1	Rarely 2	Manch- times 3	Often 4	Very Often 5
live1_1_2 ... spend time with other people (relatives, acquaintances or friends), exchange ideas or do something together?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
live1_2_2 ... do you move physically?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
live1_3_2 ... do you have peace and time for yourself?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
live1_4_2 ... sit down with something deeper or study a topic in more detail?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
live1_5_2 ... Are you creatively active or do you deal with something imaginatively?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- 68** Now please think about how you have specifically spent your free time in the last 12 months.

A Have you been active in sports, e.g. gymnastics, dancing, swimming, hiking or something else?

active1

Y ☐ No ☐ → Please continue with B, page 24

If you have been involved in sports: What exactly did you do?

Please enter

→

active1_1 How often did you exercise in total?

Please make only one entry.

Daily	<input type="checkbox"/>
Weekly	<input type="checkbox"/>
Monthly	<input type="checkbox"/>
Several times a year	<input type="checkbox"/>
Once a year	<input type="checkbox"/>

active1_2

Where did you do most of that?

Please make only one entry.

At home/in the	<input type="checkbox"/>
In the immediate vicinity	<input type="checkbox"/>
In the wider surroundings	<input type="checkbox"/>

B Have you had a hobby in the last 12 months, e.g. stamp collecting, handicrafts, needlework, gardening or something else?

active8

Y ☐ No ☐ → Please continue with C



If you have practised a hobby: What exactly did you do? Please fill in



active8_1 How often have you practised a hobby in total?

Please make only one entry.

Daily ☐

Weekly ☐

Monthly ☐

Several times a year ☐

Once a year ☐

active8_2

Where did you do most of that?

Please make only one entry.

At home/in the ☐

In the immediate vicinity ☐

In the wider surroundings ☐

C Have you taken any walks in the last 12 months?

active13

Yes ☐ No ☐ → Please continue with question 69



active13_1 How often did you do that?

Please make only one entry.

Daily ☐

Weekly ☐

Monthly ☐

Several times a ☐

Once a year ☐

69 How much has the Corona pandemic influenced your everyday life and leisure time?

covid1_6

Please make only one entry.

Not at all ☐ → Please continue with question 71

A little ☐

Mode ☐

Stron ☐

Very ☐

70 How positive or negative have you experienced this change?

FF_covid1_6

 Please make only one entry.

Predominantly _____ 1 ☐

Overall balanced _____ 2 ☐

Predominantly _____ 3 ☐

Internet use

71 For more and more people, the use of modern technology is also part of everyday life.

technu2

Have you used the internet in the last 12 months?

Use" refers to active use. This also includes the use of internet-linked apps. It does not mean, for example, having someone else look up information for you on the internet.

No _____ 0 ☐ → Please continue with question 74, page 2 6

Yes _____ 1 ☐

72 How much did the Corona pandemic influence your internet use?

covid1_7

 Please make only one entry.

Not at all _____ 1 ☐

A little _____ 2 ☐

Moderate _____ 3 ☐

Strong _____ 4 ☐

Very strong _____ 5 ☐

→ Please continue with question 74, page 2 6

73 How positive or negative have you experienced this change?

FF_covid1_7

 Please make only one entry.

Predominantly _____ 1 ☐

Overall balanced _____ 2 ☐

Predominantly _____ 3 ☐

Social inclusion

Social contacts and relationships with other people can look completely different in older age.

Therefore, it is now about people who are important to you and with whom you are in contact. These can be neighbours, friends and acquaintances as well as household members and relatives.

74 Which people are important to you? Please give details for the up to six most important people.

Please answer the questions for each person in columns.

	Person 1	Person 2	Person 3	Person 4	Person 5	Person 6
What gender is this person?	socnet3_1	socnet3_2	socnet3_3	socnet3_4	socnet3_5	socnet3_6
Male	1 <input type="checkbox"/>	1 <input type="checkbox"/>	1 <input type="checkbox"/>	1 <input type="checkbox"/>	1 <input type="checkbox"/>	1 <input type="checkbox"/>
Female	2 <input type="checkbox"/>	2 <input type="checkbox"/>	2 <input type="checkbox"/>	2 <input type="checkbox"/>	2 <input type="checkbox"/>	2 <input type="checkbox"/>
How often do you have contact with this person, e.g. through visits, letters, phone calls, text messages or e-mail?	socnet5_1	socnet5_2	socnet5_3	socnet5_4	socnet5_5	socnet5_6
Daily	1 <input type="checkbox"/>	1 <input type="checkbox"/>	1 <input type="checkbox"/>	1 <input type="checkbox"/>	1 <input type="checkbox"/>	1 <input type="checkbox"/>
Weekly	2 <input type="checkbox"/>	2 <input type="checkbox"/>	2 <input type="checkbox"/>	2 <input type="checkbox"/>	2 <input type="checkbox"/>	2 <input type="checkbox"/>
Monthly	3 <input type="checkbox"/>	3 <input type="checkbox"/>	3 <input type="checkbox"/>	3 <input type="checkbox"/>	3 <input type="checkbox"/>	3 <input type="checkbox"/>
Several times a year	4 <input type="checkbox"/>	4 <input type="checkbox"/>	4 <input type="checkbox"/>	4 <input type="checkbox"/>	4 <input type="checkbox"/>	4 <input type="checkbox"/>
Rarer	5 <input type="checkbox"/>	5 <input type="checkbox"/>	5 <input type="checkbox"/>	5 <input type="checkbox"/>	5 <input type="checkbox"/>	5 <input type="checkbox"/>
How closely do you feel connected to this person today?	socnet6_1	socnet6_2	socnet6_3	socnet6_4	socnet6_5	socnet6_6
Not narrow at all	1 <input type="checkbox"/>	1 <input type="checkbox"/>	1 <input type="checkbox"/>	1 <input type="checkbox"/>	1 <input type="checkbox"/>	1 <input type="checkbox"/>
Less narrow	2 <input type="checkbox"/>	2 <input type="checkbox"/>	2 <input type="checkbox"/>	2 <input type="checkbox"/>	2 <input type="checkbox"/>	2 <input type="checkbox"/>
Narrow	3 <input type="checkbox"/>	3 <input type="checkbox"/>	3 <input type="checkbox"/>	3 <input type="checkbox"/>	3 <input type="checkbox"/>	3 <input type="checkbox"/>
Very narrow	4 <input type="checkbox"/>	4 <input type="checkbox"/>	4 <input type="checkbox"/>	4 <input type="checkbox"/>	4 <input type="checkbox"/>	4 <input type="checkbox"/>

- Continuation of the question on the next page -

- Continuation of question 74 -

	Person 1	Person 2	Person 3	Person 4	Person 5	Person 6
What is this person's relationship to you?	socnet4_1	socnet4_2	socnet4_3	socnet4_4	socnet4_5	socnet4_6
Parents	1 <input type="checkbox"/>	1 <input type="checkbox"/>	1 <input type="checkbox"/>	1 <input type="checkbox"/>	1 <input type="checkbox"/>	1 <input type="checkbox"/>
Parents-in-law (parents of the partner)	2 <input type="checkbox"/>	2 <input type="checkbox"/>	2 <input type="checkbox"/>	2 <input type="checkbox"/>	2 <input type="checkbox"/>	2 <input type="checkbox"/>
(Spouse) Partner	3 <input type="checkbox"/>	3 <input type="checkbox"/>	3 <input type="checkbox"/>	3 <input type="checkbox"/>	3 <input type="checkbox"/>	3 <input type="checkbox"/>
Daughter-in-law/son-in-law (partner of the child)	4 <input type="checkbox"/>	4 <input type="checkbox"/>	4 <input type="checkbox"/>	4 <input type="checkbox"/>	4 <input type="checkbox"/>	4 <input type="checkbox"/>
Brother-in-law/sister-in-law (brother/sister of the partner)	5 <input type="checkbox"/>	5 <input type="checkbox"/>	5 <input type="checkbox"/>	5 <input type="checkbox"/>	5 <input type="checkbox"/>	5 <input type="checkbox"/>
Ex-partner	6 <input type="checkbox"/>	6 <input type="checkbox"/>	6 <input type="checkbox"/>	6 <input type="checkbox"/>	6 <input type="checkbox"/>	6 <input type="checkbox"/>
Child	7 <input type="checkbox"/>	7 <input type="checkbox"/>	7 <input type="checkbox"/>	7 <input type="checkbox"/>	7 <input type="checkbox"/>	7 <input type="checkbox"/>
Grandchild	8 <input type="checkbox"/>	8 <input type="checkbox"/>	8 <input type="checkbox"/>	8 <input type="checkbox"/>	8 <input type="checkbox"/>	8 <input type="checkbox"/>
Great-grandchild	9 <input type="checkbox"/>	8 <input type="checkbox"/>	9 <input type="checkbox"/>	9 <input type="checkbox"/>	8 <input type="checkbox"/>	9 <input type="checkbox"/>
Siblings	10 <input type="checkbox"/>	10 <input type="checkbox"/>	10 <input type="checkbox"/>	10 <input type="checkbox"/>	10 <input type="checkbox"/>	10 <input type="checkbox"/>
Aunt/uncle (siblings of parents)	11 <input type="checkbox"/>	11 <input type="checkbox"/>	11 <input type="checkbox"/>	11 <input type="checkbox"/>	11 <input type="checkbox"/>	11 <input type="checkbox"/>
Cousin (Child of aunt/uncle)	12 <input type="checkbox"/>	12 <input type="checkbox"/>	12 <input type="checkbox"/>	12 <input type="checkbox"/>	12 <input type="checkbox"/>	12 <input type="checkbox"/>
Niece/nephew (Child of sibling)	13 <input type="checkbox"/>	13 <input type="checkbox"/>	13 <input type="checkbox"/>	13 <input type="checkbox"/>	13 <input type="checkbox"/>	13 <input type="checkbox"/>
Other relatives	14 <input type="checkbox"/>	14 <input type="checkbox"/>	14 <input type="checkbox"/>	14 <input type="checkbox"/>	14 <input type="checkbox"/>	14 <input type="checkbox"/>
Boyfriend/girlfriend	15 <input type="checkbox"/>	15 <input type="checkbox"/>	15 <input type="checkbox"/>	15 <input type="checkbox"/>	15 <input type="checkbox"/>	15 <input type="checkbox"/>
(former) work colleagues	16 <input type="checkbox"/>	16 <input type="checkbox"/>	16 <input type="checkbox"/>	16 <input type="checkbox"/>	16 <input type="checkbox"/>	16 <input type="checkbox"/>
Neighbours	17 <input type="checkbox"/>	17 <input type="checkbox"/>	17 <input type="checkbox"/>	17 <input type="checkbox"/>	17 <input type="checkbox"/>	17 <input type="checkbox"/>
Members of the association or organisation	18 <input type="checkbox"/>	18 <input type="checkbox"/>	18 <input type="checkbox"/>	18 <input type="checkbox"/>	18 <input type="checkbox"/>	18 <input type="checkbox"/>
Volunteers (e.g. from social institutions)	19 <input type="checkbox"/>	19 <input type="checkbox"/>	19 <input type="checkbox"/>	19 <input type="checkbox"/>	19 <input type="checkbox"/>	19 <input type="checkbox"/>
Paid helpers (e.g. caregiver)	20 <input type="checkbox"/>	20 <input type="checkbox"/>	20 <input type="checkbox"/>	20 <input type="checkbox"/>	20 <input type="checkbox"/>	20 <input type="checkbox"/>
Known	21 <input type="checkbox"/>	21 <input type="checkbox"/>	21 <input type="checkbox"/>	21 <input type="checkbox"/>	21 <input type="checkbox"/>	21 <input type="checkbox"/>
Other person	22 <input type="checkbox"/>	22 <input type="checkbox"/>	22 <input type="checkbox"/>	22 <input type="checkbox"/>	22 <input type="checkbox"/>	22 <input type="checkbox"/>

75 If you could indicate more than 6 people who are important to you: How many more people would you have indicated?

soznetz7

I am other people are important.

No other persons

76 How much did the Corona pandemic influence your private contacts?

covid1_8

 Please make only one entry.

Not at all

→ Please continue with question 78

A little

More

Strongly

Very

77 How positive or negative did you experience this change?

FF_covid1_8

 Please make only one entry.

Predominantly

Overall balanced

Predominantly

78 How often have you felt lonely in the last week?

lonely

 Please make only one entry.

Never or almost

Sometime

Mostly

Always or almost

79 The following is about the support you have received from others or given yourself in the past 12 months.

	No 0	Yes 1
A In the past 12 months, have you given money to someone as a gift? <small>sozunt1</small> or made larger gifts in kind?	<input type="checkbox"/>	<input type="checkbox"/>
<small>sozunt2</small> Have you yourself received money as a gift or larger gifts in kind in the past 12 months?	<input type="checkbox"/>	<input type="checkbox"/>

B Please do not include paid services.

How often ...	Never 1	Rarely 2	Manch- times 3	Often 4	Always 5
<small>sozunt3</small> ... Have you helped other people with their Did you help with any tasks or errands?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<small>sozunt4</small> ... have you received help from other people with tasks and accomplishments?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

How often ...	Never 1	Rarely 2	Manch- times 3	Often 4	Always 5
<small>sozunt5</small> ... you have comforted other persons or cheered up?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<small>sozunt6</small> ... were <u>you</u> comforted <u>yourself</u> or cheered up?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

80 In the following, we would like to find out how important it is to you to pass on experiences, convey social values and be a role model, and how often you do this.

Please make one entry for each question, i.e. two entries in each line.

	How important is that to					How often do you do			
	Gar not import ant 1	Rather not import ant 2	Rather import ant 3	Very import ant 4		Ne ver 1	Rather rarely 2	Some- times 3	Often 4
<small>generat1</small> Your experience at Pass on younger	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	→	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<small>generat2</small> Teaching social values to younger people (e.g. helpfulness)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	→	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<small>generat3</small> Being a role model for younger people	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	→	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

81 In the following, we would like to know how you feel about your relationship to today's society.

covid1_11

 Please make an entry in each line.

Do you have the feeling ...

Meet s not to	Meets rather not too	Mee ts rather to	Mee ts to
------------------------	----------------------------	---------------------------	-----------------

... with today's social way of life
to cope worse and worse?

anomy1

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	--------------------------	--------------------------

... that your own values are becoming less and less in
line with the values of today's
Society fit?

anomy2

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	--------------------------	--------------------------

... that today's society is changing so quickly that you no
longer know what you are
should orientate?

anomy3

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	--------------------------	--------------------------

82 Do you feel that the Corona pandemic has alienated you from society?

covid1_11

 Please make only one entry.

Not at all 1 ☐

A little 2 ☐

Mode 3 ☐

Stron 4 ☐

Very 5 ☐

83 The following questions are about what is important to you in your life and actions.

 Please make an entry in each line.

How important is it to you to ...	Not at all import ant	Rather not import ant	Rather import ant	Very import ant
indValue ... to do things your own way?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
indValue ... to be wealthy, to have a lot of money and afford expensive things?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
indValue ... avoid what is dangerous and to have a safe environment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
indValue ... to have a good time and enjoy yourself?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
indValue ... do something good for society?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
indValue ... that other people recognise your achievements?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
indValue ... to take a risk sometimes, to experience adventures and live an exciting life?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
indValue ... to avoid offending others?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
indValue ... to take care of nature and the environment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
indValue1 ... Traditions you learned from your family or religion have learned to respect?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

84 How important is your faith or spirituality in your life? This can also be detached from a particular religion.

spirit1_1

 Please make only one entry.

Not important at	1 <input type="checkbox"/>
Rather not	2 <input type="checkbox"/>
Rather	3 <input type="checkbox"/>
Very	4 <input type="checkbox"/>

85 How easy is it for you to accept that one day you will die and be dead?

mortal1

 Please make only one entry.

Not at all easy	1 <input type="checkbox"/>
Rather not easy	2 <input type="checkbox"/>
Rather	3 <input type="checkbox"/>
Very light	4 <input type="checkbox"/>

86

How much does the thought of being dead weigh on you?
Attitudes and values

stertod2

*Please make only one entry.*Not strong at 1 ☐Rather not 2 ☐Rather 3 ☐Very 4 ☐

87

How strong is your fear of your own death?

stertod3

*Please make only one entry.*Not strong at 1 ☐Rather not 2 ☐Rather 3 ☐Very 4 ☐

88

How much did the Corona pandemic influence your thoughts on your own death and dying?

covid1_9

*Please make only one entry.*Not at all 1 ☐A little 2 ☐Moderate 3 ☐Strong 4 ☐Very strong 5 ☐[→ Please continue with question 90](#)

89

How positive or negative have you experienced this change?

FF_covid1_9

*Please make only one entry.*Predominantly 1 ☐Overall balanced 2 ☐Predominantly 3 ☐

90 The following statements deal with feelings.

Approximately how often have you experienced the following feelings in the last 12 months?

 Please make an entry in each line.

How often did you feel ...	Never	rarely 1	Rather sometimes 2	Some- times 3	Often 4	Very often 5
panas1 ... enthusiastic?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
panas2 ... attentive?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
panas3 ... joyfully excited, expectant?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
panas4 ... stimulated?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
panas5 ... determined?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

91 For the following questions, please think about how you have felt most of the time during the last 14 days.

 Please make an entry in each line.

	Yes 1	No 0
depress1 Do you feel depressed?	<input type="checkbox"/>	<input type="checkbox"/>
depress2 Do you find it difficult to pull yourself together?	<input type="checkbox"/>	<input type="checkbox"/>
depress3 Can you enjoy your life, even if some things are harder for you?	<input type="checkbox"/>	<input type="checkbox"/>
depress4 Do you have to brood a lot?	<input type="checkbox"/>	<input type="checkbox"/>

92 Well-being and life satisfaction

The following questions are about your attitude to life.

 Please make an entry in each line.

	No 0	Neither Still 1	Yes 2
valofli1 Do you feel rather optimistic at the moment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
valofli2 Are there many things you look forward to every day?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
valofli3 Do you feel that your current life is useful?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
valofli4 Do you have a strong will to live at the moment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
valofli5 Does life have meaning for you?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
valofli6 Do you feel able to achieve your goals in life?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Due to your personal attitude towards life (e.g. beliefs), are you			
valofli7 are you more hopeful in principle?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
valofli8 Do you plan to make the most of your life?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
valofli9 Do you have many ideas, to get out of a difficult situation again?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
valofli10 Can you imagine many possibilities, to achieve the things that are important to you?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
valofli11 Always find a way to solve a problem, even when others have already given up?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
valofli12 Do you generally achieve the goals you set for yourself?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

93 How good do you feel when you think about all the things you have done in the past?

meanli1  Please make only one entry.

Very bad	1 <input type="checkbox"/>
Rather bad	2 <input type="checkbox"/>
Partly/pa	3 <input type="checkbox"/>
Rather	4 <input type="checkbox"/>
Very	5 <input type="checkbox"/>

94 How well do you manage to make sense of even the unpleasant things that have happened in the past?

meanli2

 Please make only one entry.

Very bad	1	<input type="checkbox"/>
Rather bad	2	<input type="checkbox"/>
Partly/pa	3	<input type="checkbox"/>
Rather	4	<input type="checkbox"/>
Very	5	<input type="checkbox"/>

95 All in all, how satisfied are you with your life at present?

at

 Please make only one entry.

Compl etely dissatisfied											Complet ely satisfied
0	1	2	3	4	5	6	7	8	9	10	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

96 How much has the Corona pandemic affected your well-being?

covid1_10

 Please make only one entry.

Not at all	1	<input type="checkbox"/>
A little	2	<input type="checkbox"/>
Moderate	3	<input type="checkbox"/>
Strong	4	<input type="checkbox"/>
Very strong	5	<input type="checkbox"/>

→ Please continue with question 98, page 3 6

97 How positive or negative have you experienced this change?

FF_covid1_10

 Please make only one entry.

Predominantly	1	<input type="checkbox"/>
Overall balanced	2	<input type="checkbox"/>
Predominantly	3	<input type="checkbox"/>

Biography

98

brfzp2_1
brfep2_1

Have you ever been gainfully employed?

brfzp1

 Please make only one entry.

Been gainfully employed ☐ ₁ → Please continue with

question 100 Never been employed ☐ ₂ → Please continue with

☐☐

99

question 99 Still employed full-time ☐ ₃ → Please continue with

question 101

If you have never been gainfully employed yourself: If possible, please answer the following questions about your occupation for your last spouse.

IF3

 Please make only one entry.

I am providing the information for my last
(Spouse) partner/my last (spouse) partner. ☐ ₁

I cannot provide any information for my
last (spouse)/partner.

(Spouse) partner. ☐ ₀ → Please continue with question 104, page 38

100 Up to which year were you employed full-time?

Until the year:



brf2_1
brfzp2_1
brfep2_1 Please make only one entry.

Self-employed farmer:

with a utilised agricultural area of less than 10ha 11 ☐with a utilised agricultural area of 10ha and more 12 ☐Cooperative farmers (former LPG) 13 ☐

Academics in a liberal profession:

No further employees 21 ☐1 to 4 employees 22 ☐5 and more employees 23 ☐

Self-employed, Ich-AG or PGH member:

No further employees 31 ☐1 to 5 employees 32 ☐5 and more employees 33 ☐PGH member (PGH = Produktionsgenossenschaft des Handwerks) 34 ☐

Civil servant, judge, professional soldier:

in the ordinary service or in a comparable category 41 ☐in the intermediate service or in a comparable category 42 ☐in the higher service or in a comparable category 43 ☐in the higher service or in a comparable category 44 ☐

Employee:

with executive activity according to general instructions
(e.g. salesperson, data typist, secretarial assistant, nursing assistant) 51 ☐with qualified work that is done according to instructions
(e.g. clerk, accountant, technical draughtsman) 52 ☐with independent performance in a responsible position
or with specialist responsibility for personnel (e.g. scientific staff, authorised
signatories, heads of department or foremen in salaried employment) 53 ☐with comprehensive management tasks and decision-making
powers (e.g. directors, managing directors, members of the board of directors) 54 ☐

Workers:

unskilled 61 ☐semi-skilled 62 ☐Skilled worker 63 ☐Foreman, column leader 64 ☐Foreman, Foreman, Brigadier 65 ☐

102 Does this profession still have a special designation?

brf3
brfzp3
brfep3

Y

1

☐

No

0

☐

Job title:  Please enter



103 Which occupational activity did you/do you last carry out in your previous main occupation?
Describe the professional activity in detail. Job description:

 Please enter



Everyday life

104 What could be done to improve your concrete everyday life?

 Please make a note.

 Please make a note.

Corona pandemic

105 Were you or have you yourself contracted COVID-19 from the coronavirus?

covid2

Yes, I had a diagnosis,
but I have recovered in the meantime 1 ☐

Yes, I am currently ill 2 ☐

Don't know 8 ☐


106 Were or have your relatives or acquaintances fallen ill or even died from COVID-19 due to the coronavirus?


 Please give details in each line.

	Sick		Deceased	
	Yes 1	No 0	Yes 1	No 0
(Life/marriage) partner(s)	covid3_1 <input type="checkbox"/>	<input type="checkbox"/>	covid4_1 <input type="checkbox"/>	<input type="checkbox"/>
In the family environment	covid3_2 <input type="checkbox"/>	<input type="checkbox"/>	covid4_2 <input type="checkbox"/>	<input type="checkbox"/>
In the circle of friends/acquaintances	covid3_3 <input type="checkbox"/>	<input type="checkbox"/>	covid4_3 <input type="checkbox"/>	<input type="checkbox"/>

107 Have you been affected by one or more of the following protection measures?

 Please make an entry in each line.

	Yes 1	No 0
covid5_1 Quarantine	<input type="checkbox"/>	<input type="checkbox"/>
covid5_2 Contact or visitation ban	<input type="checkbox"/>	<input type="checkbox"/>
covid5_3 Other, namely:  Please enter	<input type="checkbox"/>	<input type="checkbox"/>



108 What experiences have you had in connection with the Corona pandemic?

 Please make a note.

109 Were there any other people present while you were filling in the questionnaire?

third No ☐ ₀

Yes ☐ ₁

Thank you very much for completing the questionnaire.

Please return the completed questionnaire to infas in the enclosed envelope.

We will pay the postage for you!

infas Institute for Applied

Social Science GmbH Postfach

240101

53154 Bonn

110

panel

It is planned to continue this research project with another survey at a later date.

May we keep your address so that we can contact you again in due course? Of course, participation in the next survey is also voluntary.

No 0
☐

Yes 1
☐

Has your address changed?

Then please provide us with your current contact details here.
We assure you that the cover pages with the contact details will be sent to infas immediately after receipt of the questionnaire. be separated. The information from the questionnaire is never stored together with your contact details.

First name
Last name
Street and house number
Postcode and city
Phone
Telephone (mobile)
E-mail

Thank you very much for completing the questionnaire.

Please return the completed questionnaire to infas in the enclosed envelope.

We will pay the postage for you! infas

Institute for Applied Social Science
GmbH

PO Box 240101
53154 Bonn

Jacket sheet:

shortened reverse

side

D80+: Old age in Germany

Template CATI Module 1 (based on PAPI) ZP interview & proxy interview

Status: 28.04.2021

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General Notes

For the output of the data in SPSS format, the codes for missing values defined in Table 1 are implemented following the DEAS:

Table 1. transcoding table for missing codes

Reason for non-availability of information	DEAS	Stata	SPSS output
Denies	-1	.V	-1
don't know	-2	.W	-2
Does not apply (overfiltered)	-3	.T	-3
not surveyed (sample)	-4	.A	-4
No drop-off	-5		
Not specified	-6		
deleted	-7	.G	-7
Double nomination	-8		
Not possible (visual difficulties)		.U	-9
Not possible (problems with writing)		.X	-10
Aggregate value not formed (quality assurance)		.Q	-11
Not possible (hand gripping force)		.K	-12

The following meta-information is defined for each variable contained in the dataset:

- Variable name (VARIABLENAME),
- the assigned variable label (VARIABLENLABEL),
- the wording of the question (QUESTION TEXT),
- any notes to the interviewers (INTERVIEWER NOTE),
- if applicable, the condition under which the corresponding information is recorded (FILTERED),
- the format associated with the variable (OUTPUT FORMAT)
- the intended stored characteristics of the variables, if applicable the value range (VALUE)
- and the value labels provided by the linked format for the output (VALUE LABEL).

0 Intro

VARIABLENAME **interviewee** VARIABLENLABEL

Respondent: ZP vs PX

PROGRAMMING NOTEThis

info comes from the EKP!

OUTPUT FORMAT	VALUE	VALUE LABEL
.	1Target	person (ZP)
	2	Proxy interview (PX)

VARIABLENAME **sex p**

VARIABLENLABELProxy : Gender

QUESTION TEXT **What is the gender of the (proxy) respondent?** INTERVIEWER NOTE

Please document without asking! If not clear, please ask FILTER GUIDE

interviewee IN (2)

OUTPUT FORMAT	VALUE	VALUE LABEL
GESCHL2F.	1	Male
	2	Female
	-1	Denied

VARIABLENAME **alterp**

VARIABLENLABELProxy : Age

QUESTION TEXT **How old are you?**

FILTER GUIDE interviewee IN (2)

OUTPUT FORMAT	VALUE	VALUE LABEL
BEST8.	(0-120)	Age indication
	-1	Denied
	-2	Don't know

VARIABLENAME **beziehp**

VARIABLENLABELProxy : Relationship to ZP

QUESTION TEXT **What is your relationship with Mr/Mrs [name ZP]?**

INTERVIEWER NOTE *Please do NOT read out answer options!*

FILTER GUIDE interviewee IN (2)

OUTPUT FORMAT	VALUE	VALUE LABEL
BEZZP4P.	1	Wife/Husband
	2	Son/Daughter
	3	(Professional) nurse
	4	Other:[open: beziehpx]

-2Don't know

-1

Denied

VARIABLENAME **beziehpx**

VARIABLE LABEL Proxy: Relationship to ZP: Other

FILTERSUPPLY interviewee IN (2) AND
interviewee IN (4)

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

\$900.	Indication	
--------	------------	--

VARIABLENAME **AGREE6**

VARIABLENLABEL Consent Participation

QUESTION TEXT ZP **As we informed you in the documents sent to you in advance, this study is being carried out by the infas Institute for Applied Social Science on behalf of the University of Cologne.**

Your participation in the study is of course voluntary.

You can end the conversation at any time, even without giving a reason. If you do not want us to use what you tell us or parts of it, you have the right to have the information deleted at any time.

The interview will focus on questions about the housing situation, health and social relationships. We would like to ask for your consent.

Do you agree with this?

FILTER GUIDE interviewee IN (1) PROGRAMMING NOTE

Code 2 "No" results in an interview termination

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

J1N2F.	1	yes
--------	---	-----

	2	no
--	---	----

Intermediate screen

VARIABLENAME	Screen0
VARIABLE LABEL	Intermediate screen 0 - General note at the beginning of the interview
QUESTION TEXT	<p>In order for us to be able to make reliable and valid statements with this study, we must adhere to high scientific standards. In doing so, it is important that we conduct our interviews in a comparable way, i.e. we ask all respondents the same questions. For most questions we give different answer options (e.g. yes/no) so that the answers can be compared with each other. If you are unsure about a question, please simply choose the answer option that seems most appropriate to you. Since we are interested in your personal opinion, there are no right or wrong answers.</p> <p>Please answer all questions as spontaneously as you can.</p> <p>If you do not want to answer a question (e.g. for personal reasons) or cannot answer the question (because you do not have the information), please contact us. missing), please tell me.</p>

From here start PAPI questionnaire

1 Socio-demographics

QUESTION NUMBER PAPI 1

VARIABLENAME **gender**

VARIABLENLABEL Gender according to identity card

QUESTION TEXT ZP **According to your identity card/passport, what is your gender?**

QUESTION TEXT PX **What is the gender of Mr/Mrs [name ZP] according to his/her identity card/passport?**

INTERVIEWER'S NOTE

DATA PREPARATION New Code 3: diverse

OUTPUT FORMAT	VALUE	VALUE LABEL
GESCHL2F.	1	Male
	2	Female
	3	Divers
	-2	Don't know

QUESTION NUMBER PAPI 2

VARIABLENAME **gebdat1**

VARIABLENLABEL Date of birth (day)

QUESTION TEXT ZP **When were you born? Please tell me the day, the month and the year.**

QUESTION TEXT PX **Mr/Mrs [name ZP] was born [year of birth]. Can you please also tell me the day and month when Mr/Mrs [name ZP] was born?**

PROGRAMMING NOTE If PX: Show year of birth from registration office data.

Please display gebdat1 - gebdat3 on one screen.

OUTPUT FORMAT	VALUE	VALUE LABEL
2.	(1 - 31)	Day specification
	-1	Denied
	-2	Don't know

VARIABLENAME **gebdat2**

VARIABLE LABEL Date of birth (month)

OUTPUT FORMAT	VALUE	VALUE LABEL
2.	(1 - 12)	Month indication
	-1	Denied
	-2	Don't know

VARIABLENAME **gebdat3**

VARIABLENLABEL Date of birth (year)

FILTER GUIDE interviewee IN (1)

PROGRAMMING NOTE If worth ne year of birth from MA data, then alert

For alert the following standard text: "Please check if this entry is correct". Please create a dichotomous variable for all alerts.

OUTPUT FORMAT	VALUE	VALUE LABEL
4.	(1900 - 1940)	Indication of the year
	-1	Denied
	-2	Don't know

ASK NUMBER PAPI

3

VARIABLENAME **origin1**

VARIABLENLABEL Origin : Country

QUESTION TEXT ZP **Where were you born?**

QUESTION TEXT PX **Where was Mr/Mrs [name ZP] born?**

INTERVIEWER NOTE *Please read out answers, enter answer directly if necessary.*

PROGRAMMING NOTE For code 2: Insert a kind of pop-up here so that the interviewer can identify the countries of the former German eastern territories (see help text).

DATA PROCESSING query can be taken over in the structure from CAPI (but without herkun1_1_1, herkun1_1_2, herkun1_1_3: here the data is recorded equally open).

OUTPUT FORMAT VALUE LABEL

GEBORT3F.	1	Territory of today's Germany; old and new federal states □ continue with herkun3
	2	Former German Eastern Territories
	4	Former Czechoslovakia, as it stands today, the[open: herkun1_4x]
	5	Former Yugoslavia, as things stand today.[open: herkun1_5x]
	6	Former Soviet Union, as things stand today.[open: herkun1_6x]
	3	Other country and namely[open: herkun1x]
	-2	Don't know
	-1	Denied

Help textThe former German eastern territories include (old name):

- Poznan (today Poland)
- Pomerania (today Poland)
- Province of Brandenburg (part east of the Oder, now part of Poland)
- Bohemian Switzerland (today Czech Republic)
- Prussia
 - East Prussia
 - * Southern East Prussia (today Poland)
 - * Northern East Prussia (today Russia)
 - * Memelgebiet/ Memelland (today Lithuania)
 - West Prussia incl. Free City of Danzig (today Poland)
 - Prussian Province of Silesia
 - * Hultschiner Ländchen (today Czech Republic)
 - * Today's voivodships Silesia, Lower Silesia, Opole, Lubuskie, Greater Poland, Lesser Poland (today Poland)

VARIABLENAME **herkun1x**

VARIABLENLABELOrigin : Country Other (open)

QUESTION TEXT **Other Country of origin:**

INTERVIEWER NOTE *Please state the country with the current name e.g. France instead of Alsace*

FILTER FEEDINGherkun1 IN (3)

OUTPUT FORMAT	VALUE	VALUE LABEL
\$900.	IndicationCountry indication	
		-2Don't know
	-1	Denied

VARIABLENAME **herkun1_4x**

VARIABLE LABEL Origin: former Czechoslovakia: present country (open) INTERVIEWER

NOTE *Please indicate the country with the current name e.g. France instead of*

Alsace QUESTION TEXT **Former Czechoslovakia, according to today's ...** FILTER FEEDING

herkun1 IN (4)

OUTPUT FORMAT	VALUE	VALUE LABEL
\$900.	IndicationCountry indication	
		-2Don't know
	-1	Denied

VARIABLENAME **herkun1_5x**

VARIABLE LABEL Origin: former Yugoslavia: present country (open)

QUESTION TEXT **Former Yugoslavia, according to today's ...**

INTERVIEWER NOTE *Please state the country with the current name e.g. France instead of Alsace*

FILTER FEEDINGherkun1 IN (5)

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

\$900. IndicationCountry indication

-2Don't know

-1

Denied

VARIABLENAME **herkun1_6x**

VARIABLE LABEL Origin: former Soviet Union: present country (open)

QUESTION TEXT **Former Soviet Union, according to today's ...**

INTERVIEWER NOTE *Please state the country with the current name e.g. France instead of Alsace*

FILTER FEEDING herkun1 IN (6)

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

\$900. IndicationCountry indication

-2Don't know

-1

Denied

ASK NUMBER PAPI 3_Mother

NOTE TO PROGRAMMING The structure of the query can be taken over from CAPI (but without herkunelt1_1_1, herkunelt1_1_2, herkunelt1_1_3: here the data is recorded openly).

VARIABLENAME **herkunelt1**

VARIABLENLABELOrigin Mother: Country

QUESTION TEXT ZP **Where was your mother born?**

QUESTION TEXT PX **Where was the mother of Mr/Mrs [name ZP] born?**

INTERVIEWER NOTE *Please read out answers, enter answer directly if necessary.*

PROGRAMMING NOTEFor Code 2: Insert a kind of pop-up here so that the interviewer can identify the countries of the former German Eastern territories (see

OUTPUT FORMAT	VALUE	LABEL
---------------	-------	-------

help text).

GEBORT3F. 1Area of present-day Germany; old as well as new federal states

2 Former German Eastern Territories

4 Former Czechoslovakia, as things stand today, that's ... [open: herkunelt1_4x]

5 Former Yugoslavia, as things stand today.....[open: herkunelt1_5x]

6 Former Soviet Union, as things stand today.....[open: herkunelt1_6x]

3 Other country, namely: [open: herkunelt1x]

-2Don't know

-1 Denied

Help textThe former German eastern territories include (old name):

- Poznan (today Poland)
- Pomerania (today Poland)
- Province of Brandenburg (part east of the Oder, now part of Poland)
- Bohemian Switzerland (today Czech Republic)
- Prussia
 - East Prussia
 - * Southern East Prussia (today Poland)
 - * Northern East Prussia (today Russia)
 - * Memelgebiet/ Memelland (today Lithuania)
 - West Prussia incl. Free City of Danzig (today Poland)
 - Prussian Province of Silesia
 - * Hultschiner Ländchen (today Czech Republic)
 - * Today's voivodships Silesia, Lower Silesia, Opole, Lubuskie, Greater Poland, Lesser Poland (today Poland)

VARIABLENAME **herkunelt1x**

VARIABLENLABELOrigin Mother:

Country Other (open) QUESTION TEXT **Other Country of origin:**

INTERVIEWER NOTE *Please state the country with the current name e.g. France instead of Alsace*

FILTER FEEDINGherkunelt1 IN (3)

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

\$900.	Indication	Country indication
--------	------------	--------------------

-2Don't know

-1 Denied

VARIABLENAME **herkunelt1_4x**

VARIABLENLABELORIGIN Mother: former Czechoslovakia: present country (open) QUESTION

TEXT **Former Czechoslovakia, according to today's ...** INTERVIEWER NOTE

Please state the country with the current name e.g. France instead of

Alsace FILTER FEEDING herkunelt1 IN (4)

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

\$900.	Indication	Country indication
--------	------------	--------------------

-2Don't know

-1 Denied

VARIABLENAME **herkunelt1_5x**

VARIABLE LABEL Origin Mother: former Yugoslavia: present country (open) QUESTION

TEXT **Former Yugoslavia, according to today's ...** INTERVIEWER NOTE

Please state the country with its current name e.g. France instead of

Alsace FILTER FEEDING herkunelt1 IN (5)

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

\$900. IndicationCountry indication

-2 Don't know
-1 Denied

VARIABLENAME **herkunelt1_6x**
VARIABLE LABEL Origin Mother: former Soviet Union: present country (open)
QUESTION TEXT **Former Soviet Union, according to today's ...** INTERVIEWER NOTE
Please state the country with the current name e.g. France instead of Alsace
FILTER FEEDING herkunelt1 IN (6)

OUTPUT FORMAT	VALUE	VALUE LABEL
\$900.	IndicationCountry indication	

-2 Don't know
-1 Denied

ASK NUMBER PAPI

3_Father

VARIABLENAME **herkunelt2**
VARIABLE LABEL Origin Father: Country
QUESTION TEXT ZP **Where was your father born?**
QUESTION TEXT PX **Where was the father of Mr/Mrs [name ZP] born?**
INTERVIEWER NOTE *Please read out answers, enter answer directly if necessary.*
PROGRAMMING NOTE *For code 2: Insert a kind of pop-up here so that the interviewer can identify the countries of the former German eastern territories (see help text).*

OUTPUT FORMAT	VALUE LABEL
GEBORT3F.	1 Area of present-day Germany; old as well as new federal states

2	Former German Eastern Territories
4	Former Czechoslovakia, as it stands today.[open: herkunelt2_4x]
5	Former Yugoslavia, as things stand today.....[open: herkunelt2_5x]
6	Former Soviet Union, as things stand today.[open: herkunelt2_6x]
3	Other country, namely: ... [open: herkunelt2x]
-2	Don't know
-1	Denied

Help textThe former German eastern territories include (old name):

- Poznan (today Poland)
- Pomerania (today Poland)
- Province of Brandenburg (part east of the Oder, now part of Poland)
- Bohemian Switzerland (today Czech Republic)
- Prussia

East

Prussia

- * Southern East Prussia (today Poland)
- * Northern East Prussia (today Russia)
- * Memelgebiet/ Memelland (today Lithuania)
- West Prussia incl. Free City of Danzig (today Poland)
- Prussian Province of Silesia
- * Hultschiner Ländchen (today Czech Republic)
- *Today's voivodships Silesia, Lower Silesia, Opole, Lubuskie, Greater Poland, Lesser Poland (today Poland)

-2Don't know

-1 Denied

VARIABLENAME **herkunelt2x**

VARIABLENLABELOrigin Father:

Country Other (open) QUESTION TEXT **Other Country of origin:**

INTERVIEWER NOTE *Please state the country with the current name e.g. France instead of Alsace*

FILTER FEEDINGherkunelt2 IN (3)

OUTPUT FORMAT	VALUE	VALUE LABEL
\$900.		SpecificationCountry Other (open)

-2Don't know

-1 Denied

VARIABLENAME **herkunelt2_4x**

VARIABLENLABELORIGIN Father: former Czechoslovakia: present country (open) QUESTION

TEXT **Former Czechoslovakia, according to today's ...** INTERVIEWER NOTE

Please state the country with the current name e.g. France instead of

Alsace. FILTER FEED herkunelt2 IN (4)

OUTPUT FORMAT	VALUE	VALUE LABEL
\$900.		IndicationCountry indication

-2Don't know

-1 Denied

VARIABLENAME **herkunelt2_5x**

VARIABLENLABELORIGIN Father: former Yugoslavia: present country (open)

QUESTION TEXT **Former Yugoslavia, according to today's ...**

INTERVIEWER'S NOTE *Please state the country with the current name e.g. France instead of Alsace.*

FILTER FEEDINGherkunelt2 IN (5)

OUTPUT FORMAT	VALUE	VALUE LABEL
\$900.	Indication	Country indication
	-2	Don't know
	-1	Denied

VARIABLENAME **herkunelt2_6x**

VARIABLENLABELORIGIN Father: former Soviet Union:

present country (open) QUESTION TEXT **Former Soviet Union, according to today's ...**

INTERVIEWER'S NOTE *Please state the country with the current name e.g. France instead of Alsace.*

FILTER FEEDINGherkunelt2 IN (6)

OUTPUT FORMAT	VALUE	VALUE LABEL
\$900.	Indication	Country indication
		-2Don't know
	-1	Denied

ASK NUMBER PAPI

4

VARIABLENAME **origin2**

VARIABLENLABELORIGIN : in Germany since

QUESTION TEXT ZP **How long have you lived in Germany, meaning both old and new federal states?**

QUESTION TEXT PX **Since when has Mr/Mrs [name ZP] lived in Germany, meaning both old and new federal states?**

FILTER FEEDherkun1 IN (2,3,4,5,6)

PROGRAMMING NOTE if value < gebdat3, then alert

For alert the following standard text: "Please check if this entry is correct". Please create a dichotomous variable for all alerts.

OUTPUT FORMAT	VALUE	VALUE LABEL
HERKUN2F.	1	Always, by which we mean from birth 2Since the year[herkun2_1]
		-2Don't know
	-1	Denied

VARIABLENAME **origin2_1**

VARIABLENLABELORIGIN : in Germany since (year)

FILTERFÜHRUNGherkun2 IN (2)

The variable herkun2_1 (origin: in Germany since (year) records the year; previously, age was recorded under the same variable name (origin: in Germany since (age)).

OUTPUT FORMAT	VALUE	VALUE LABEL
4.	(1900 - draw date)	Since the year

-2Don't know

-1

Denied

ASK NUMBER PAPI 5VARIABLENAME **origin3**

VARIABLENLABELOrigin : Place of residence 1949-1990

QUESTION TEXT ZP **Between 1949 and 1990, did you live mainly in the GDR, in the old Federal Republic or outside of present-day Germany?**QUESTION TEXT PX **Between 1949 and 1990, did Mr/Mrs [name ZP] live mainly in the GDR, in the old Federal Republic or outside present-day Germany?**INTERVIEWER NOTE *Please read out answers, enter answer directly if necessary.*

OUTPUT FORMAT	VALUE	VALUE LABEL
WOHNOR3F.	1	DDR
	2	Old Federal Republic
	3	Outside of today's Germany
		-2Don't know
	-1	Denied

ASK NUMBER PAPI 6VARIABLENAME **herkun4_0**

VARIABLE LABEL Origin: Possession of German nationality

QUESTION TEXT ZP **Do you have German citizenship?**QUESTION TEXT PX **Does Mr/Mrs [name ZP] have German citizenship?**

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes
		-2Don't know
	-1	Denied

ASK NUMBER PAPI 6VARIABLENAME **origin4**

VARIABLENLABELOrigin : German nationality

QUESTION TEXT ZP **Since when have you had German citizenship?**QUESTION TEXT PX **Since when has Mr/Mrs [name ZP] had German citizenship?**FILTER FEED **herkun4_0 IN (1)**

OUTPUT FORMAT	VALUE	VALUE LABEL
	1	Always, by that we mean from birth
	2	Since the year.....[herkun4_1]

-2Don't know

-1

Denied

VARIABLENAME **herkun4_1**

VARIABLENLABELORIGIN : German nationality: since (YYYY)

QUESTION TEXT. **Since the year ...**

FILTER FEEDINGherkun4 IN (2)

<i>OUTPUT FORMAT</i>	<i>VALUE</i>	<i>VALUE LABEL</i>
4.	(1900 - Drawing date)	Indication of the year

-2

Don't know

-1

Denied

Intermediate screen

VARIABLENAME **screen1**

VARIABLE LABEL Intermediate screen 1

QUESTION TEXT ZP **Now I would like to talk about your school years and vocational training.**

QUESTION TEXT PX **Now I would like to talk about the school years and vocational training of Mr/Mrs [name ZP].**

ASK NUMBER PAPI 7

VARIABLENAME **imagedu1**

VARIABLENLABEL Education : School attendance Country

QUESTION TEXT ZP **In which country did you last attend school?**

QUESTION TEXT PX **In which country did Mr/Mrs [name ZP] last attend school?**

INTERVIEWER NOTE *Please read out answers, enter directly if necessary.*
Germany: including old FRG incl. West Berlin, GDR incl. East Berlin, former German eastern territories, present-day Germany

OUTPUT FORMAT	VALUE	VALUE LABEL
SCHLAN3F.	1	In Germany
	2	In another country
	3	No school attendance
	-2	Don't know
	-1	Denied

ASK NUMBER PAPI 8

VARIABLENAME **bildu2**

VARIABLENLABEL Education : highest general school-leaving qualification

QUESTION TEXT ZP **What is your highest general education <u>school leaving certificate</u>?**

QUESTION TEXT PX **What is the highest general education <u>school leaving certificate</u> that Mr/Mrs [name ZP] has?**

INTERVIEWER NOTE *Please read out answers, enter answer directly if necessary.*
If the assignment is unclear, ask exactly or enter it under "other school-leaving qualification"! If asked: EOS = extended secondary school

FILTER FEEDBACKbildu1 IN (1)

OUTPUT FORMAT	VALUE	LABEL
SCHOOL9F.	1	No degree
	2	Elementary school leaving certificate, lower secondary school leaving certificate or equivalent qualification
	3	Realschulabschluss (Mittlere Reife) or equivalent qualification (e.g. commercial school)
	4	Polytechnic secondary school of the GDR with completion of grade 8 or 9
	5	Polytechnic Secondary School of the GDR with completion of the 10th grade
	6	Advanced technical college entrance qualification, completion of a specialised upper secondary school
	7	General or subject-linked higher education entrance qualification (Gymnasium,

8 Other school-leaving qualification, namely: [open: bildu2x]

-2Don't know

-1 Denied

VARIABLENAME **bildu2x**

VARIABLENLABEL Education: Other highest general school leaving certificate (open)

QUESTION TEXT **Other school-leaving qualification:**

FILTER GUIDE bildu1 IN (1) AND bildu2 IN (8)

OUTPUT FORMAT	VALUE	VALUE LABEL
\$900.	Specify	Other school-leaving qualification
		-2Don't know
	-1	Denied

ASK NUMBER PAPI 9

VARIABLENAME **imagedu3**

VARIABLE LABEL Education: Duration of schooling abroad

QUESTION TEXT ZP **How many years did you attend school?**

QUESTION TEXT PX **How many years did Mr/Mrs [name ZP] attend the school?**

FILTER FEEDBU1 IN (2)

OUTPUT FORMAT	VALUE	VALUE LABEL
BEST8.	(0 - 20)	Number of years:
	-1	Denied
	-2	Don't know

ASK NUMBER PAPI 10

VARIABLENAME **bildu4**

VARIABLENLABEL Education : School-leaving certificate abroad

QUESTION TEXT ZP **What kind of degree did you finish school with?**

QUESTION TEXT PX **With what kind of degree did Mr/Mrs [name ZP] finish school?**

INTERVIEWER'S NOTE *Please read out answers.*

FILTER FEEDBU1 IN (2)

OUTPUT FORMAT	VALUE	VALUE LABEL
SCHAUS3F.	1	Without conclusion
	2	Compulsory school with graduation
	3	Secondary school with graduation

- 2 Don't know
- 1 Denied

ASK NUMBER PAPI 11VARIABLENAME **form1**

VARIABLENLABEL Education : in Germany

QUESTION TEXT ZP **In which country did you do vocational training or study?**QUESTION TEXT PX **In which country did Mr/Mrs [name ZP] do vocational training or study?**INTERVIEWER'S NOTE *Please read out answers.*

Germany: including old FRG incl. West Berlin, GDR incl. East Berlin, former German eastern territories, present-day Germany

OUTPUT FORMAT VALUE LABEL

- AUSBLA4F.
- 1 Only in Germany
 - 2 In Germany and in another country
 - 3 In another country
 - 4 Did not do any training or study

- 2 Don't know
- 1 Denied

ASK NUMBER PAPI 12VARIABLENAME **form2**

VARIABLENLABEL Education : highest vocational training qualification

QUESTION TEXT ZP **What is your highest <u>vocational training qualification</u>?**QUESTION TEXT PX **Which highest</u> vocational training qualification</u> does Mr/Mrs [name ZP] have?**INTERVIEWER NOTE *Please read out answers, enter answer directly if necessary.*

If assignment is unclear, ask exactly or enter in "another vocational qualification"!

If unskilled and semi-skilled occupations are mentioned, then select "no vocational qualification".

FILTER LEADING TRAINING1 IN (1,2)

OUTPUT FORMAT VALUE LABEL

- AUSAB14F.
- 1 No vocational qualification
 - 2 Vocational-in-company training (apprenticeship) completed
 - 3 Vocational-school education (vocational school, college) completed
 - 4 Training completed at a technical school in the GDR
 - 5 Completed training at a technical school, master craftsman's school, technical school, administration and business academy or specialised academy
 - 6 Bachelor
 - 7 Diploma

- 8 Master's degree, state examination, Master
- 9 Promotion
- 11 Training as an educator completed
- 12 2 to 3 years of training completed at a health care school
- 13 Completed 1-year training at a school of health care
- 14 Preparatory service for the intermediate civil service in public administration completed
- 10 Another vocational qualification, namely: [open: ausbil2x]
- 2 Don't know
- 1 Denied

ASK NUMBER PAPI 13VARIABLENAME **ausbil2_1**VARIABLENLABEL Education : highest vocational training qualification: Institution academic degree QUESTION
TEXT ZP. **At which institution did you obtain this degree?**QUESTION TEXT PX **At which institution did Mr/Mrs [name ZP] obtain this degree?**INTERVIEWER NOTE *Please read out answers, enter answer directly if necessary. –*

FILTERSFILTERINGfrom1 IN (1,2) AND from2 IN (6,7,8)

OUTPUT FORMAT VALUE LABEL

- | | | |
|-------|----|---|
| AKAD. | 1 | University of Cooperative Education |
| | 2 | University of Applied Administrative Sciences |
| | 3 | University of Applied Sciences, engineering school, other non-university higher education institution |
| | 4 | University (scientific university, also: art college, teacher training college, theological college) |
| | -2 | Don't know |
| | -1 | Denied |

VARIABLENAME **ausbil2x**

VARIABLENLABEL Education : highest vocational qualification (open)

QUESTION TEXT **Other vocational qualification:**

FILTERSFILTERSFILL1 IN (1,2) ANDFILTER2 IN (10)

OUTPUT FORMAT VALUE VALUE LABEL

- | | | |
|--------|-----------------|-----------------------------------|
| \$900. | IndicationOther | vocational training qualification |
| | -2 | Don't know |
| | -1 | Denied |

ASK NUMBER PAPI 14VARIABLENAME **form3**

VARIABLENLABEL Education : highest vocational training abroad

QUESTION TEXT ZP **What kind of education was that? Please tell me only your highest professional training.**QUESTION TEXT PX **What kind of education was it? Please tell me only the highest professional training of Mr/Mrs [name ZP].**INTERVIEWER NOTE *Please read out answers, enter answer directly if necessary.*

FILTER FEEDING TRAIN1 IN (3)

OUTPUT FORMAT	VALUE LABEL
AUAUSL5F.	1Taught in a company
	2 Trained in a company for a longer period of time
	3 Vocational school attended
	4 University visited
	5 Other
	-2Don't know
	-1 Denied

2 Living

ASK NUMBER PAPI

15

VARIABLENAME

residentT_8

VARIABLE LABEL

Type of housing

QUESTION TEXT ZP

How do you live?

QUESTION TEXT PX

How does Mr/Mrs [name ZP] live?

INTERVIEWER NOTE

Please read out answers, enter answer directly if necessary.

OUTPUT FORMAT

VALUE	VALUE LABEL
-------	-------------

WHERE9F.

- | | |
|----|--|
| 1 | In a private apartment/house |
| 2 | In a retirement home/nursing home
(facility with full inpatient care, residents do not run their own household and are not tenants/owners) |
| 3 | In a residential care group
(group-based living mostly within a retirement or nursing home usually combined with full inpatient care) |
| 4 | In a multigenerational house
(Residential building with self-contained housing units, residents are tenants/owners of different ages who support each other). |
| 5 | In a retirement home
(Facility with well-equipped, self-contained flats, outpatient care is possible across all care levels). |
| 6 | In a retirement home/residential complex with assisted living flats (group of self-contained, age-appropriate flats, service and care services are provided). |
| 7 | In an outpatient assisted house or shared apartment
(residential building or flat, residents are tenants/owners, outpatient care and nursing services are organised and used jointly) |
| -2 | Don't know |
| -1 | Denied |

ASK NUMBER PAPI

16

VARIABLENAME

dwellingf1

VARIABLE LABEL Type of residence : full inpatient care

QUESTION TEXT ZP

Are you receiving full inpatient care?

QUESTION TEXT PX

Is Mr/Mrs [name ZP] being cared for as a full inpatient?

INTERVIEWER NOTE

Criteria for full inpatient care/ nursing:
 A person receives full inpatient care if you
 (1) lives in a nursing home / old people's home and
 (2) is in need of care and
 (3) can fall back on 24-hour care, support and nursing, and
 (4) the care, support and nursing is always possible by a nursing FACH-kraft.

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

N0J1F.

0

No

1

Yes

-2Don't know
-1 Denied

ASK NUMBER PAPI**17**VARIABLENAME **secure**

VARIABLENLABLE safe and secure

QUESTION TEXT ZP **Do you feel safe and secure in the facility?**QUESTION TEXT PX **Does Mr/Mrs [name ZP] feel safe and secure in the facility?**FILTER FEED wohnf1 IN (1) *OUTPUT FORMAT**VALUE* *VALUE LABEL*

N0J1F. 0 No
1 Yes

-2Don't know
-1 Denied

ASK NUMBER PAPI**18**VARIABLENAME **private sp**

VARIABLE LABEL Privacy

QUESTION TEXT ZP **Do you have enough privacy in the facility?**QUESTION TEXT PX **Does Mr/Mrs [name ZP] have enough privacy in the facility?**

FILTER FEEDING livingf1 IN (1)

OUTPUT FORMAT *VALUE* *VALUE LABEL*

N0J1F. 0 No
1 Yes

-2Don't know
-1 Denied

QUESTION NUMBER PAPI 19_1VARIABLENAME **grou1**

VARIABLE LABEL Care use: outpatient care service

QUESTION TEXT ZP **Do you use an outpatient care service?**QUESTION TEXT PX **Does Mr/Mrs [name ZP] use an outpatient care service?**

FILTER FEED livingf1 IN (0)

OUTPUT FORMAT *VALUE* *VALUE LABEL*

N0J1F. 0 No
1 Yes

-2Don't know
-1 Denied

QUESTION NUMBER PAPI 19_2

VARIABLENAME grou2

VARIABLENLABELCare use : Day care

QUESTION TEXT ZP **Do you use day care?**

QUESTION TEXT PX **Does Mr/Mrs [name ZP] use day care?**

FILTER FEED livingf1 IN (0)

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes

-2Don't know
-1 Denied

ASK NUMBER PAPI 20

VARIABLENAME wuerd

VARIABLENLABELActing with respect and feeling

QUESTION TEXT ZP **Are you treated with respect and courtesy by the staff?**

QUESTION TEXT PX **Is Mr/Mrs [name ZP] treated with respect and courtesy by the staff?**

FILTERS dwellingf1 IN (1) OR pflegnu1 IN (1) OR pflegnu2 IN (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes
	-2	Don't know
	-1	Denied

ASK NUMBER PAPI 21

VARIABLENAME empf_pfl

VARIABLENLABELRecommendation Care

QUESTION TEXT **Would you recommend the facility / care service to your family members and friends?**

FILTER FEED livingf1 IN (1) OR pflegnu1 (1) OR pflegnu2 (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes

-1 Denied

-2Don't know

QUESTION NUMBER PAPI 22 -> informal filter: Wohnf1

QUESTIONNAIRE PAPI 23

VARIABLENAME grou3

VARIABLENLABELCare use : be cared for privately

QUESTION TEXT ZP Are you <u>privately</u> cared for by someone, e.g. a relative or acquaintance?

QUESTION TEXT PX Is Mr/Mrs [name ZP] cared for privately by someone, e.g. a relative or acquaintance?

FILTER FEED livingf1 IN (0)

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes
	-2	Don't know
	-1	Denied

ASK NUMBER PAPI 24

VARIABLENAME pflegnu3_1

VARIABLENLABELCare use : to be cared for privately: Hours per week

QUESTION TEXT ZP With what amount of hours per week does this person/these persons care for you?

QUESTION TEXT PX With what amount of hours per week is Mr/Mrs [name ZP] cared for by this person/these persons?

FILTER FEED livingf1 IN (0) AND pflegnu3 IN (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
BEST8.	(1 - 168)	hours per week
	-1	Denied
	-2	Don't know

QUESTION NUMBER PAPI 25

VARIABLENAME grou4

VARIABLENLABELCare use : private care

QUESTION TEXT ZP Do you yourself care for another person privately?

QUESTION TEXT PX Does Mr/Mrs [name ZP] himself privately care for another person?

FILTER FEED livingf1 IN (0)

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes
		-2Don't know
	-1	Denied

ASK NUMBER PAPI**26**

VARIABLENAME

artgeb

VARIABLENLABELType of building

QUESTION TEXT ZP

What type of building do you occupy?

QUESTION TEXT PX

What type of building does Mr/Mrs [name ZP] live in?INTERVIEWER NOTE *Please read out answers, enter answer directly if necessary.*

FILTER FEED livingf1 IN (0)

OUTPUT FORMAT	VALUE	VALUE LABEL
GEBAEU8F.	1	Agricultural residential building
	2	Detached 1-/2 family house
	3	1-/2-family house as terraced or semi-detached house
	4	Residential house with 3-4 flats
	5	Residential building with 5-8 flats
	6	Residential building with 9 or more flats
	7	High-rise building (9 or more storeys)
	8	Other
	-2	Don't know
	-1	Denied

ASK NUMBER PAPI**27**

VARIABLENAME

lift

VARIABLE LABEL

Lift available QUESTION

TEXT

Is a lift available?

FILTER FEED

livingf1 IN (0) AND artgeb IN (4,5,6,7,8)

OUTPUT FORMAT	VALUE	VALUE LABEL
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N0J1F.	0	No
	1	Yes
		-2Don't know
	-1	Denied

ASK NUMBER PAPI**28**VARIABLENAME **stock**

VARIABLE LABEL Floor

QUESTION TEXT **On which floor is the flat located? INTERVIEWER**NOTE *Please read out answers, enter answer directly if necessary.* FILTER FEED

wohnf1 IN (0)

OUTPUT FORMAT

VALUE

VALUE LABEL

STOCK7F.

1

Ground floor

2

1st floor

3

2nd floor

4

3rd floor

5

4th floor or higher

6

Over several floors

7

Other

-2

Don't know

-1

Denied

ASK NUMBER PAPI**29**VARIABLENAME **state1**

VARIABLENLABEL State of the house

QUESTION TEXT ZP **How would you rate the condition of the house/facility?**INTERVIEWER'S NOTE *Please read out answers!*

OUTPUT FORMAT

VALUE

VALUE LABEL

ZUST3F.

1

Good to very good

2

Average

3

In need of renovation

-2

Don't know

-1

Denied

ASK NUMBER PAPI**30**VARIABLENAME **walkab**

VARIABLE LABEL Walkability

QUESTION TEXT ZP **How suitable is your non-domestic living environment for <u>walking</u> or <u>To be out and about in a wheelchair</u> or to get things done?**QUESTION TEXT PX **How suitable is the non-domestic living environment of Mr/Mrs [name ZP] for this, <u>to be on foot</u> or <u>with a wheelchair</u> or to do things do?**INTERVIEWER'S NOTE *Please read out answers.*

OUTPUT FORMAT VALUE

VALUE LABEL

SUITABLE4F.

1Gar not suitable

- 2 Rather not suitable
- 3 Rather suitable
- 4 Very suitable

- 2 Don't know
- 1 Denied

ASK NUMBER PAPI**31**VARIABLENAME **wohnv**

VARIABLENLABEL Residential Connectedness

QUESTION TEXT ZP **How closely do you feel connected to your living environment?**QUESTION TEXT PX **How close does Mr/Mrs [name ZP] feel to his/her living environment?
connected?**INTERVIEWER'S NOTE *Please read out answers.*

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

- | | | |
|--------|---|-------------------|
| ENG4F. | 1 | Not narrow at all |
| | 2 | Rather not narrow |
| | 3 | Rather narrow |
| | 4 | Very narrow |

- 2 Don't know
- 1 Denied

ASK NUMBER PAPI**32**VARIABLENAME **sozkoh**

VARIABLENLABEL Social cohesion

QUESTION TEXT ZP **Can you trust the people in your neighbourhood?**QUESTION TEXT PX **Can Mr/Mrs [name ZP] trust the people in his/her neighbourhood?**INTERVIEWER'S NOTE *Please read out answers.**Neighbours outside the residential building, neighbours in the house or other residents of the home are to be included*

OUTPUT FORMAT	WE RT VALUE LABEL
---------------	----------------------

- | | | |
|---------|---|-----------------------|
| ZUTR5F. | 1 | Does not apply |
| | 2 | Rather not applicable |
| | 3 | Applies partly/partly |
| | 4 | More likely to apply |
| | 5 | Applies |

- 2 Don't know
- 1 Denied

ASK NUMBER PAPI**33**

VARIABLENAME covid1_1

VARIABLE LABEL COVID19: Influence Survey area: housing

QUESTION TEXT ZP **The Corona pandemic had many impacts on our daily lives. Maybe you would have answered some of our questions differently before the Corona pandemic.****How much has the Corona pandemic affected your confidence in your neighbourhood?**QUESTION TEXT PX **The Corona pandemic had many impacts on our daily lives. Maybe you would have answered some of our questions differently before the Corona pandemic.****How much has the Corona pandemic affected Mr/Mrs [name ZP]'s confidence in his/her neighbourhood?**INTERVIEWER'S NOTE *Please read out answers. OUTPUT*

FORMAT	VALUE	VALUE LABEL
covidF.	1	Not at all
	2	A little
	3	Moderate
	4	Strong
	5	Very strong
		-2Don't know
	-1	Denied

ASK NUMBER PAPI**34**

VARIABLENAME ff_covid1_1

VARIABLENLABELCOVID19 : Influence Survey area: Housing QUESTION TEXT ZP

How positively or negatively did you experience this change?QUESTION TEXT PX **How positively or negatively did Mr/Mrs [name ZP] experience this change?**INTERVIEWER'S NOTE *Please read out answers. FILTER*

GUIDE covid1_1 IN (2,3,4,5) OUTPUT

FORMAT	VALUE	VALUE LABEL
covidF.	1	Predominantly negative
	2	Overall balanced
	3	Predominantly positive
		-2Don't know
	-1	Denied

3 Family and Household

ASK NUMBER PAPI

35

VARIABLENAME **famst1**
 VARIABLE LABEL Marital status
 QUESTION TEXT ZP **What is your marital status?**
 QUESTION TEXT PX **What is the marital status of Mr/Mrs [name ZP]?**
 INTERVIEWER NOTE *Please read out answers, enter directly if necessary.*

OUTPUT FORMAT	VALUE	LABEL
FAM9F.	1	Married / Registered civil partnership
	2	Married / registered civil partnership, but separated from (spouse) partner
	3	Divorced / registered civil partnership annulled
	4	Widowed / registered partner deceased
	5	Single
		-2Don't know
	-1	Denied

ASK NUMBER PAPI

36

VARIABLENAME **famst4**
 VARIABLENLABELFamily status : when married (YYYY)
 QUESTION TEXT ZP **How long have you been married/living in a registered partnership? Civil partnership?**
 QUESTION TEXT PX **Since which year has Mr/Woman [name ZP] been married/living in a registered civil partnership?**
 FILTER FEEDINGfamst1 IN (1)
 PROGRAMMING NOTEif value < gebdat3, then alert
 Default text for alert: "Please check if this entry is correct".

OUTPUT FORMAT	VALUE	VALUE LABEL
4.	(1900 - current year of the survey)	Indication of the year
	-1	Denied
	-2	Don't know

QUESTION NUMBER PAPI

37_2

VARIABLENAME **famst2**
 VARIABLENLABELFamily status : when divorced / dissolved (YYYY)
 QUESTION TEXT ZP **Since which year have you been divorced/Which year has your civil partnership been dissolved?**
 QUESTION TEXT PX **Since which year has Mr/Mrs [name ZP] been divorced/ In which year has his/her civil partnership been dissolved?**

FILTER FEEDfamst1 IN (3)
 PROGRAMMING NOTEif value < gebdat3, then alert
 Standard text for alert: "Please check if this entry is correct".

OUTPUT FORMAT VALUE	VALUE LABEL
4. (1900 - current year of the survey)	Indication of the year
-1	Denied
-2	Don't know

QUESTION NUMBER PAPI 37_3

VARIABLENAME famst3

VARIABLENLABELFamily status : when widowed/partner deceased (YYYY)

QUESTION TEXT ZP **Since which year have you been widowed/Which year did your partner die?**

QUESTION TEXT PX **Since which year has Mr/Mrs [name ZP] been widowed / In which year did his/her partner die?**

FILTER FEEDINGfamst1 IN (4)
 PROGRAMMING NOTEif value < gebdat3, then alert
 Default text for alert: "Please check if this entry is correct".

OUTPUT FORMAT VALUE	VALUE LABEL
4. (1900 - current year of the survey)	Indication of the year
-1	Denied
-2	Don't know

QUESTION NUMBER PAPI 37_5

VARIABLENAME famst5

VARIABLE LABEL Marital status: when separated (YYYY)

QUESTION TEXT ZP **How long have you been separated?**

QUESTION TEXT PX **Since which year has Mr/Mrs [name ZP] been living separately?**

FILTER FEEDINGfamst1 IN (2)
 PROGRAMMING NOTEif value < gebdat3, then alert
 Standard text for alert: "Please check if this entry is correct".

OUTPUT FORMAT VALUE	VALUE LABEL
4. (1900-act. year of the survey date)	Indication of the year
-1	Denied
-2	Don't know

ASK NUMBER PAPI**38**

VARIABLENAME famst7

VARIABLENLABELFamily status : currently stable partnership

QUESTION TEXT ZP **Do you currently have a steady partner?**QUESTION TEXT PX **Does Mr/Mrs [name ZP] currently have a steady partner?**

FILTER FEEDfamst1 IN (2,3,4,5)

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes
	-2	Don't know
	-1	Denied

ASK NUMBER PAPI**39**

VARIABLENAME famst8

VARIABLENLABELFamily status : when partnership (YYYY)

QUESTION TEXT ZP **How long have you had this firm partnership?**QUESTION TEXT PX **Since which year has Mr/Mrs [name ZP] had this firm partnership?**

FILTER FEEDINGfamst1 IN (2,3,4,5) AND famst7 IN (1)

PROGRAMMING NOTEif value < gebdat3, then alert

Standard text for alert: "Please check if this entry is correct".

OUTPUT FORMAT	VALUE	VALUE LABEL
4.	(1900 - current year of the survey)	Indication of the year
	-1	Denied
	-2	Don't know

ASK NUMBER PAPI**40**

VARIABLENAME children1

VARIABLENLABELChildren present

QUESTION TEXT ZP **Do you have or have had children? I mean both your own children and children who grew up with you.**QUESTION TEXT PX **Does Mr/Mrs [name ZP] have or have had children? I mean both your own children and children who grew up with Mr./Mrs.**

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes
	-2	Don't know
	-1	Denied

QUESTION NUMBER PAPI 40_1VARIABLENAME **children2**

VARIABLENLABELChildren : Number

QUESTION TEXT **How many?**

FILTERgulDEchildren1 IN (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
BEST8.	(1 - 20)	Number of children
	-1	Denied
	-2	Don't know

ASK NUMBER PAPI**41**VARIABLENAME **grandchild1**

VARIABLENLABEL Grandchildren and great-grandchildren: Number of grandchildren

QUESTION TEXT ZP **Do you have or have had grandchildren and if so, how many?**QUESTION TEXT PX **Does Mr/Mrs [name ZP] have or had grandchildren and if so, how many? INTERVIEWER**NOTE *Ask only for grandchildren, not great-grandchildren. If no grandchildren, please enter 0.*

FILTER GUIDE children1 IN (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
BEST8.	(0 - 50)	Number of grandchildren
	-1	Denied
	-2	Don't know

ASK NUMBER PAPI**42**VARIABLENAME **grandchild2**

VARIABLENLABEL Grandchildren and great-grandchildren: Number of great-grandchildren

QUESTION TEXT ZP **Do you have or have had great-grandchildren and if so, how many?**QUESTION TEXT PX **Does or did Mr/Mrs [name ZP] have any great-grandchildren and if so, how many?**INTERVIEWER NOTE *Ask only for great-grandchildren, not grandchildren. If no grandchildren, please enter 0.*

FILTER GUIDE children1 IN (1) AND grandchildren1 GT 0

OUTPUT FORMAT	VALUE	VALUE LABEL
BEST8.	(0 - 50)	Number of great-grandchildren
	-1	Denied
	-2	Don't know

QUESTION NUMBER PAPI 43 -> informal filter IF2_wohnf1**ASK NUMBER PAPI****44**

VARIABLENAME	hhgroe
VARIABLE LABEL	Household size
QUESTION TEXT ZP	How many people live in your household all the time, including yourself? This household includes all persons who live and work here together (e.g. joint shopping). Please also consider all children living in the household.
QUESTION TEXT PX	How many people live permanently in the household of Mr/Mrs [name ZP], he/she included himself/herself? This household includes all persons who live and work together (e.g. joint shopping). Please also consider all children living in the household.
FILTER FEED	livingf1 IN (0)

OUTPUT FORMAT	VALUE	VALUE LABEL
BEST8.	(1 - 30)	Number of persons in household
	-1	Denied
	-2	Don't know

QUESTION NUMBER PAPI 45_1. Person

VARIABLENAME	hhzusa1_1x
VARIABLENLABEL	Household composition : Person 1: Name (open)
QUESTION TEXT ZP	Please give details for up to three people from your household. First, please tell me the first names of the people you live with. Please also include small children or persons who normally live here but are currently absent, e.g. in hospital or on holiday. Let's start with the first person.
QUESTION TEXT PX	Please provide information for up to three persons from the household of Mr/Mrs Name ZP. First of all, please tell me the first names of the persons with whom Mr/Mrs [name ZP] lives. Please also include small children or persons who normally live there but are currently absent, e.g. in hospital or on holiday. Let's start with the first person.
INTERVIEWER NOTE ZP	<i>Please do <u>not</u> provide <u>any</u> information here for <u>yourself</u> as a household member.</i> <i>If ZP does not want to name names, read out the following text:</i> <i>"Stating the name is only to help clarify which person we are talking about in the further course of the interview. If you want, you can also use a made-up name."</i>
INTERVIEWER NOTE PX	<i>Please do <u>not</u> provide information here for Mr/Mrs [name ZP] as a household member.</i> <i>If PX does not want to name names, read out the following text:</i> <i>"Stating the name is only to help clarify which person we are talking about in the further course of the interview. If you want, you can also use a made-up name."</i>

FILTER FEED livingf1 IN (0) AND hhgroe GT 1

OUTPUT FORMAT	VALUE	VALUE LABEL
\$900.		SpecificationPerson - First name/Note

-2 Don't know
-1 Denied

VARIABLENAME **hhzusa1_2**

VARIABLENLABEL Household composition : Person 1: Gender QUESTION TEXT
What is the sex of this person?

INTERVIEWER NOTE *Gender: if clear, answer by interviewer*

FILTER FEED livingf1 IN (0) AND hhgroce GT 1

OUTPUT FORMAT	VALUE	VALUE LABEL
GESCHL2F.	1	Male
	2	Female

-2 Don't know
-1 Denied

VARIABLENAME **hhzusa1_3**

VARIABLE LABEL Household composition: Person 1: Relationship

QUESTION TEXT ZP **What is the relationship of this person to you?**

QUESTION TEXT PX **What is the relationship between this person and Mr/Mrs [name ZP]?**

INTERVIEWER NOTE *Categorisation by interviewer. Do not read out!*

FILTER FEED livingf1 IN (0) AND hhgroce GT 1

PROGRAMMING INSTRUCTION If (value IN (201) AND children1 IN (0)) OR (value IN (301) AND grandchildren1 IN (0)) OR (value IN (351) AND grandson2 IN (0)), then alert
(Default text for alert: "Please check if this entry is correct").
Display the questions about a person (name, gender and relationship) on a screen.

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

PERSHORTF.

102	Parents
104	Parents-in-law (parents of the partner)
106	(Spouse) Partner
107	Daughter-in-law/son-in-law (partner of the child)
111	Brother-in-law (brother/sister of the partner)
120	Ex-partner
201	Child
301	Grandchild
351	Great-grandchild
451	Siblings
401	Aunt/uncle (siblings of parents)
403	Cousin (child of aunt/uncle)
405	Niece/nephew (child of sibling)

- 407 Other relatives
- 501 Boyfriend/girlfriend
- 601 (former) work colleagues
- 603 Association or organisation members
- 701 Volunteers, e.g. from social institutions
- 702 Paid helpers (e.g. caregiver)
- 801 Known
- 901 Other person
- 2 Don't know
- 1 Denied

QUESTION NUMBER PAPI 45_2. Person

VARIABLENAME hhzusa2_1x

VARIABLENLABEL Household composition : Person 2: Name (open)

QUESTION TEXT ZP **Now we come to the second person you live with.**
First of all, please tell me the first name of the second person.

QUESTION TEXT PX **Now we come to the second person with whom Mr/Mrs [name ZP] lives.**
First of all, please tell me the first name of the second person.

INTERVIEWER'S NOTE *If necessary: Please also include small children or people who normally live here but are currently absent, e.g. in hospital or on holiday.*

FILTER FEED livingf1 IN (0) AND hhgroec GT 2

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

\$900.	Specification	Person - First name/Note about the person
--------	---------------	---

-2 Don't know

-1 Denied

VARIABLENAME hhzusa2_2

VARIABLENLABEL Household composition : Person 2: Gender QUESTION TEXT

What is the sex of this person?

INTERVIEWER NOTE *Gender: if clear, answer by interviewer*

FILTER FEED livingf1 IN (0) AND hhgroec GT 2

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

GESCHL2F.	1	Male
	2	Female

-2 Don't know

-1 Denied

VARIABLENAME **hhzusa2_3**

VARIABLE LABEL Household composition: Person 2: Relationship

QUESTION TEXT ZP **What is this person's relationship to you?**

QUESTION TEXT PX **What is the relationship between this person and Mr/Mrs [name ZP]?**

INTERVIEWER NOTE *Categorisation by interviewer. Do not read out!*

FILTER FEED livingf1 IN (0) AND hhgroec GT 2

PROGRAMMING INSTRUCTIONif (value IN (201) AND children1 IN (0)) OR(value IN (301) AND grandchild1 IN (0)) OR(value IN (351,) AND grandchildren2 IN (0)), then alert (Default text for alert: "Please check if this entry is correct").

Display the questions about a person (name, gender and relationship) on a screen.

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

PERSHORTF.

102	Parents
104	Parents-in-law (parents of the partner)
106	(Spouse) Partner
107	Daughter-in-law/son-in-law (partner of the child)
111	Brother-in-law (brother/sister of the partner)
120	Ex-partner
201	Child
301	Grandchild
351	Great-grandchild
451	Siblings
401	Aunt/uncle (siblings of parents)
403	Cousin (child of aunt/uncle)
405	Niece/nephew (child of sibling)
407	Other relatives
501	Boyfriend/girlfriend
601	(former) work colleagues
603	Members of the association or organisation
701	Volunteers, e.g. from social institutions
702	Paid helpers (e.g. caregiver)
801	Known
901	Other person
-2	Don't know
-1	Denied

QUESTION NUMBER PAPI 45_3. Person

VARIABLENAME **hhzusa3_1x**

VARIABLENLABELHousehold composition : Person 3: Name (open)

QUESTION TEXT ZP **Now we come to the third person you live with.**
First of all, please tell me the first name of the third person,

QUESTION TEXT PX **Now we come to the third person with whom Mr/Mrs [name ZP] lives.**
First of all, please tell me the first name of the third person,

INTERVIEWER'S NOTE *If necessary: Please also include small children or people who normally live here but are currently absent, e.g. in hospital or on holiday.*

FILTER FEED livingf1 IN (0) AND hhgroee GT 3

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

\$900.	Specification	Person - First name/Note about the person
--------	---------------	---

-2Don't know

-1 Denied

VARIABLENAME **hhzusa3_2**

VARIABLENLABELHousehold composition : Person 3: Gender QUESTION TEXT

What is the sex of this person?

INTERVIEWER NOTE *Gender: if clear, answer by interviewer*

FILTER FEED livingf1 IN (0) AND hhgroee GT 3

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

GESCHL2F.	1	Male
-----------	---	------

	2	Female
--	---	--------

-2Don't know

-1 Denied

VARIABLENAME **hhzusa3_3**

VARIABLE LABEL Household composition: Person 3: Relationship

QUESTION TEXT ZP **What is the relationship of this person to you?**

QUESTION TEXT PX **What is the relationship between this person and Mr/Mrs [name ZP]?**

INTERVIEWER NOTE *Categorisation by interviewer. Do not read out!*

FILTER FEED livingf1 IN (0) AND hhgroee GT 3

PROGRAMMING INSTRUCTIONif (value IN (201) AND children1 IN (0)) OR(value IN (301) AND grandchildren1 IN (0)) OR(value IN (351) AND grandson2 IN (0)), then alert
(Default text for alert: "Please check if this entry is correct").
Display the questions about a person (name, gender and relationship) on a screen.

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

PERSHORTF.

	102	Parents
--	-----	---------

	104	Parents-in-law (parents of the partner)
--	-----	---

	106	(Spouse) Partner
--	-----	------------------

107	Daughter-in-law/son-in-law (partner of the child)
111	Brother-in-law (brother/sister of the partner)
120	Ex-partner
201	Child
301	Grandchild
351	Great-grandchild
451	Siblings
401	Aunt/uncle (siblings of parents)
403	Cousin (child of aunt/uncle)
405	Niece/nephew (child of sibling)
407	Other relatives
501	Boyfriend/girlfriend
601	(former) work colleagues
603	Members of the association or organisation
701	Volunteers, e.g. from social institutions
702	Paid helpers (e.g. caregiver)
801	Known
901	Other person
-2	Don't know
-1	Denied

ASK NUMBER PAPI 46VARIABLENAME **covid1_2**

VARIABLENLABELCOVID19 : Influence Survey area: family and household

QUESTION TEXT ZP **Has the Corona pandemic changed your household composition?**QUESTION TEXT PX **Has the Corona pandemic changed the household composition of Mr/Mrs [name ZP]?**

OUTPUT FORMAT	VALUE	VALUE LABEL
covidF.	0	No
	1	Yes
	-2	Don't know
	-1	Denied

ASK NUMBER PAPI 47VARIABLENAME **FF_covid1_2**

VARIABLENLABELCOVID19 : Influence Survey area: Family and household QUESTION

TEXT ZP **How positively or negatively did you experience this change?**

QUESTION TEXT PX **How positively or negatively did Mr/Mrs [name ZP] experience this change?**

INTERVIEWER'S NOTE *Please read out answers.*

FILTER FEED covid1_2 IN (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
covidF.	1	Predominantly negative
	2	Overall balanced
	3	Predominantly positive
	-2	Don't know
	-1	Denied

4 Financial Situation

ASK NUMBER PAPI

48

NOTE TO
PROGRAMMING

This question net2 is based on the CAPI question net2, but with different question text.

VARIABLENAME

net2

VARIABLE LABEL

Net household income: Income group

QUESTION TEXT ZP

What is the total average monthly net income of your household?**This is made up of all sources of income minus taxes and social security contributions.****You can be sure that your information will only be evaluated for scientific purposes and anonymously.**

QUESTION TEXT PX

What is the total average monthly net income of the household of Mr/Mrs [name ZP]?**This is made up of all sources of income minus taxes and social security contributions.****You can be sure that your information will only be evaluated for scientific purposes and anonymously.**

INTERVIEWER'S NOTE

*Read out answers, enter directly if necessary.**In the case of self-employed persons, ask for the average net remuneration, i.e. minus business expenses and taxes.*

OUTPUT FORMAT VALUE	VALUE LABEL
---------------------	-------------

Programming / Interviewer Template

NETHH2F.	1	B-under 150 euros
	2	P-150 to 450 euros
	3	T-451 up to 850 Euro
	4	E-851 up to under 1,000 euros
	5	H-1,000 to under 1,250 euros
	6	L-1,250 to under 1,500 euros
	7	N-1,500 to under 1,750 euros
	8	R-1,750 to under 2,000 euros
	9	M-2,000 to under 2,250 euros
	10	S-2,250 to under 2,500 euros
	11	K-2,500 to under 2,750 euros
	12	Q-2,750 to under 3,000 euros
	13	G-3,000 to under 3,250 euros
	14	G-3,250 to under 3,500 euros
	15	U-3,500 to under 3,750 euros
	16	J-3,750 to under 4,000 euros
	17	V-4,000 to under 4,500 euros
	18	A-4,500 to under 5,000 euros
	19	Z-5,000 to under 5,500 euros
	20	X-5,500 to under 6,000 euros
	21	Q-6,000 to under 7,500 euros

- 22 W-7,500 to under 10,000 euros
 23 D-10,000 to under 20,000 euros
 24 Y-20,000 and more
- 2 Don't know
- 1 Denied

ASK NUMBER PAPI 49

VARIABLENAME covid1_3

VARIABLENLABELCOVID19 : Influence Survey domain: Financial situation QUESTION TEXT

ZP How much has the Corona crisis influenced your financial situation?QUESTION TEXT PX How much did the Corona pandemic affect the financial situation of Mr/Mrs [name ZP]?

INTERVIEWER'S NOTE Please read out your answers.

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

covidF.	1	Not at all
	2	A little
	3	Moderate
	4	Strong
	5	Very strong
	-2	Don't know
	-1	Denied

ASK NUMBER PAPI 50

VARIABLENAME FF_covid1_3

VARIABLENLABELCOVID19 : Influence Survey area: Financial situation QUESTION

TEXT ZP How positively or negatively did you experience this change?

QUESTION TEXT PX How positively or negatively did Mr/Mrs [name ZP] experience this change?

INTERVIEWER'S NOTE Please read out your answers.

FILTER FEED covid1_3 IN (2,3,4,5)

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

covidF.	1	Predominantly negative
	2	Overall balanced
	3	Predominantly positive
	-2	Don't know
	-1	Denied

5 Dealing with Age

ASK NUMBER PAPI 51VARIABLENAME **autonomous**

VARIABLE LABEL Autonomy

QUESTION TEXT ZP **Do you shape your life according to your own ideas?**QUESTION TEXT PX **Does Mr/Mrs [name ZP] organise his/her life according to his/her own ideas?**INTERVIEWER NOTE *Please read out answers.*

OUTPUT FORMAT	VALUE	VALUE LABEL
ZUTR4_2F.	1	Does not apply at all
	2	Rather not applicable
	3	More likely to apply
	4	Applies exactly
	-2	Don't know
	-1	Denied

ASK NUMBER PAPI 52VARIABLENAME **alter1**

VARIABLENLABELiving old age : Valuing relationships and other people more

QUESTION TEXT ZP **In the following we would like to know how you experience your own ageing. We are interested in whether and to what extent you perceive certain changes that can accompany ageing.****As you get older, how much do you notice that****...you value relationships and other people much more?**QUESTION TEXT PX **In the following, we would like to find out how Mr/Mrs [name ZP] experiences his own ageing. We are interested in whether and to what extent Mr./Mrs. [name of the person] perceives certain changes that can go hand in hand with getting older.****How much does Mr/Woman [name ZP] notice with his/her increasing age that****...he/she values relationships and other people much more?**INTERVIEWER'S NOTE *Please read out your answers, enter them directly if necessary.*

OUTPUT FORMAT	VALUE	VALUE LABEL
AARC5F.	1	Not at all
	2	A little
	3	Moderate
	4	Strong
	5	Very strong
	-2	Don't know
	-1	Denied

VARIABLENAME **alter12**

VARIABLENLABELiving old age : Paying more attention to health

QUESTION TEXT ZP **...you pay more attention to your health?**

QUESTION TEXT PX **...he/she pays more attention to his/her own health?**

<i>OUTPUT FORMAT</i>	<i>VALUE</i>	<i>VALUE LABEL</i>
----------------------	--------------	--------------------

AARC5F.	1	Not at all
	2	A little
	3	Moderate
	4	Strong
	5	Very strong
	-2	Don't know
	-1	Denied

VARIABLENAME **alterl3**

VARIABLENLABEL Ageing experience : mental capacity decreases

QUESTION TEXT ZP **...your mental capacity decreases?**

QUESTION TEXT PX **...his/her mental capacity decreases?**

<i>OUTPUT FORMAT</i>	<i>VALUE</i>	<i>VALUE LABEL</i>
----------------------	--------------	--------------------

AARC5F.	1	Not at all
	2	A little
	3	Moderate
	4	Strong
	5	Very strong
	-2	Don't know
	-1	Denied

VARIABLENAME **alterl4**

VARIABLENLABEL Ageing experience : more experience to assess things and people

QUESTION TEXT ZP **...you have more experience and knowledge to assess things and people?**

QUESTION TEXT PX **...he/she has more experience and knowledge to assess things and people?**

<i>OUTPUT FORMAT</i>	<i>VALUE</i>	<i>VALUE LABEL</i>
----------------------	--------------	--------------------

AARC5F.	1	Not at all
	2	A little
	3	Moderate
	4	Strong
	5	Very strong
	-2	Don't know
	-1	Denied

VARIABLENAME **alter15**

VARIABLENLABEL Ageing experience : a better sense of what is important

QUESTION TEXT ZP **...you have a better sense of what is important to you?**

QUESTION TEXT PX **...he/she has a better sense of what is important to him/her?**

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

AARC5F.	1	Not at all
	2	A little
	3	Moderate
	4	Strong
	5	Very strong
	-2	Don't know
	-1	Denied

VARIABLENAME **age16**

VARIABLE LABEL Ageing experience: Restriction of activities

QUESTION TEXT ZP. **...you have to limit your activities? QUESTION**

TEXT PX **...he/she has to limit his/her activities?**

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

AARC5F.	1	Not at all
	2	A little
	3	Moderate
	4	Strong
	5	Very strong
	-2	Don't know
	-1	Denied

VARIABLENAME **alter17**

VARIABLENLABEL Ageing experience : less energy

QUESTION TEXT ZP **...you have less energy?**

QUESTION TEXT PX **...he/she has less energy?**

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

AARC5F.	1	Not at all
	2	A little
	3	Moderate
	4	Strong
	5	Very strong

-2Don't know
-1 Denied

VARIABLENAME **alterl8**
VARIABLE LABEL Ageing experience: Dependence on the help of others
QUESTION TEXT ZP **...you feel more dependent on the help of others?**
QUESTION TEXT PX **...he/she feels more dependent on the help of others?**

OUTPUT	FORMAT	VALUE	VALUE LABEL
--------	--------	-------	-------------

AARC5F.	1	Not at all	
	2	A little	
	3	Moderate	
	4	Strong	
	5	Very strong	

-2Don't know
-1 Denied

VARIABLENAME **alterl9**
VARIABLE LABEL Ageing experience: Freedom to live days as you wish QUESTION
TEXT ZP **...you have more freedom to live your days the way you want?**
QUESTION TEXT PX **...he/she has more freedom to live his/her days the way he/she wants?**

OUTPUT	FORMAT	VALUE	VALUE LABEL
--------	--------	-------	-------------

AARC5F.	1	Not at all	
	2	A little	
	3	Moderate	
	4	Strong	
	5	Very strong	

-2Don't know
-1 Denied

VARIABLENAME **alterl10**
VARIABLE LABEL Ageing experience: Motivation is more difficult
QUESTION TEXT ZP **...you find it harder to motivate yourself?**
QUESTION TEXT PX **...he/she finds it harder to motivate him/herself?**

OUTPUT	FORMAT	VALUE	VALUE LABEL
--------	--------	-------	-------------

AARC5F.	1	Not at all	
	2	A little	
	3	Moderate	
	4	Strong	

5 Very strong

-2Don't know

-1 Denied

ASK NUMBER PAPI

53

VARIABLENAME

valuea1

VARIABLENLABELValues by others: to be used

QUESTION TEXT ZP

In the following we would like to know to what extent you feel valued by society.

It is not so much a question of recognition and appreciation by your immediate environment, but rather your assessment of society's view and attitude towards older people.

Do you feel that you are needed in today's society?

QUESTION TEXT PX

In the following we would like to know to what extent Mr/Mrs [name ZP] feels valued by society.

It is not so much a matter of recognition and appreciation by his/her immediate environment, but rather his/her assessment of society's view and attitude towards older people.

Does Mr/Mrs [name ZP] feel needed in today's society?

INTERVIEWER'S NOTE

Please read out your answers, enter them directly if necessary.

OUTPUT FORMAT VALUE

VALUE LABEL

ZUTR4_3F.

1Does not apply

2

Rather not applicable

3

More likely to apply

4

Applies exactly

-2Don't know

-1

Denied

VARIABLENAME

valuea2

VARIABLENLABELValue by others: to be valued for achievements .

QUESTION TEXT ZP

Do you feel that today's society values you for what you have done and achieved in your life?

QUESTION TEXT PX

Does Mr/Mrs [name ZP] feel that today's society values him/her for what he/she has done and achieved in his/her life?

OUTPUT FORMAT VALUE

VALUE LABEL

ZUTR4_3F.

1Does not apply

2

Rather not applicable

3

More likely to apply

4

Applies exactly

-2 Don't know
-1 Denied

VARIABLENAME **valuea3**

VARIABLE LABEL Appreciation by others: being treated as a burden

QUESTION TEXT **Do you feel that in today's society you are treated as if you are a burden (e.g. because of physical impairments)?**

ZP

QUESTION TEXT **Does Mr/Mrs [name ZP] feel that he/she is treated as if he/she is a burden in today's society (e.g. due to physical impairments)?**

PX

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

ZUTR4_3F.	1	Does not apply
	2	Rather not applicable
	3	More likely to apply
	4	Applies exactly
	-2	Don't know
	-1	Denied

VARIABLENAME **valuEa4**

VARIABLE LABEL Appreciation by others: being appreciated more than before

QUESTION TEXT **Do you feel that you are more appreciated and respected today than in the past?**

ZP

QUESTION TEXT **Does Mr/Mrs [name ZP] feel more appreciated and respected today than in the past?**

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

PX

ZUTR4_3F.	1	Does not apply
	2	Rather not applicable
	3	More likely to apply
	4	Applies exactly
	-2	Don't know
	-1	Denied

ASK NUMBER PAPI 54

VARIABLENAME **covid1_4**

VARIABLE LABEL COVID19 : Influence Survey area: Dealing with age

QUESTION TEXT ZP **How much has the Corona pandemic affected your feeling of being valued by society?**

QUESTION TEXT PX **How much has the Corona pandemic affected Mr/Mrs [name ZP]'s feeling of being valued by society?**

INTERVIEWER'S NOTE *Please read out your answers.*

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

covidF.	1	Not at all
	2	A little
	3	Moderate
	4	Strong
	5	Very strong
	-2	Don't know
	-1	Denied

ASK NUMBER PAPI**55**VARIABLENAME **FF_covid1_4**

VARIABLENLABELCOVID19 : Influence Survey area: Dealing with age QUESTION TEXT

ZP **How positively or negatively have you experienced this change?**QUESTION TEXT PX **How positively or negatively did Mr/Mrs [name ZP] experience this change?**INTERVIEWER'S NOTE *Please read out your answers.*

FILTER FEED covid1_4 IN (2,3,4,5)

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

covidF.		1Predominantly negative
	2	Overall balanced
	3	Predominantly positive
		-2Don't know
	-1	Denied

6 Health

ASK NUMBER PAPI 56

VARIABLENAME **general**

VARIABLENLABEL General health assessment

QUESTION TEXT ZP **Another important area for quality of life is often health, which is why we are also interested in your health in our study.**

How would you generally describe your state of health in the last 4 weeks?

Was he...

QUESTION TEXT PX **Another important area for quality of life is often health, which is why we are also interested in the health of Mr/Mrs [name ZP] in our study.**

How would you generally describe the state of health of Mr/Mrs [name ZP] in the last 4 weeks?

Was he...

INTERVIEWER NOTE *Please read out answers.*

OUTPUT FORMAT	VALUE	VALUE LABEL
ALLGES4F.	1	Very bad
	2	Rather bad
	3	Rather good
	4	Very good
	-2	Don't know
	-1	Denied

ASK NUMBER PAPI 57

VARIABLENAME **pain**

VARIABLE LABEL Pain

QUESTION TEXT ZP **If you had pain, how severe was your pain in the last 4 weeks?**

QUESTION TEXT PX **If Mr/Mrs [name ZP] has had pain, how severe has his/her pain been in the last 4 weeks?**

INTERVIEWER NOTE *Please read out answers.*

OUTPUT FORMAT	VALUE	VALUE LABEL
PAIN5F.	1	No pain
	2	Easy
	3	Moderate
	4	Strong
	5	Very strong
	-2	Don't know
	-1	Denied

QUESTION NUMBER PAPI 58_1

VARIABLENAME **gewgr1**
 VARIABLENLABEL Weight and size: Size (cm)
 QUESTION TEXT ZP **Can you please tell me how tall you are?**
 QUESTION TEXT PX **Can you please tell me how tall Mr/Mrs [name ZP] is?**
 PROGRAMMING NOTE If 150 > gewgr1 > 190 then alert
 Standard text for alert: "Please check if this entry is correct".

OUTPUT FORMAT	VALUE	VALUE LABEL
BEST8.	(40 - 250)	Size (in cm)
	-1	Denied
	-2	Don't know

QUESTION NUMBER PAPI 58_2

VARIABLENAME **gewgr2**
 VARIABLE LABEL Weight and height: Weight (kg)
 QUESTION TEXT ZP **And how much do you weigh approximately?**
 QUESTION TEXT PX **And how much does Mr/Mrs [name ZP] weigh approximately?**
 PROGRAMMING NOTE Please calculate BMI (kg/m²) using the inputs of gewgr1 and gewgr2. Alert when 22 > BMI > 33; If height is missing, then 30 > gewgr2 > 150
 Standard text for alert: "Please check if this entry is correct".

OUTPUT FORMAT	VALUE	VALUE LABEL
BEST8.	(35 - 300)	Weight (kg)
	-1	Denied
	-2	Don't know

ASK NUMBER PAPI 59

VARIABLENAME **gewgr3**
 VARIABLENLABEL Weight and size: weight loss
 QUESTION TEXT ZP **Have you unintentionally lost significant weight in the last 12 months?**
 QUESTION TEXT PX **Has Mr/Mrs [name ZP] unintentionally lost significant weight in the last 12 months?**

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes
	-2	Don't know
	-1	Denied

ASK NUMBER PAPI 60

VARIABLENAME **multmor1**

VARIABLE LABEL Multimorbidity: Heart attack

QUESTION TEXT ZP **I will now read out individual disease areas to you.**
Can you please tell me which of these following disease areas in you
<u>currently</u> receiving medical treatment (e.g. medically prescribed drugs or other
forms of therapy)?

Are you receiving medical treatment for ...?

... of a heart attack

QUESTION TEXT PX **I will now read out individual disease areas to you.**
Can you please tell me which of these following disease areas Mr/Mrs [name ZP] <u>is
currently</u> being treated for medically (e.g. with medically prescribed medication or
other forms of therapy)?

Is Mr/Mrs [name ZP] receiving medical treatment for ...?

... of a heart attack

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F	0	No
.	1	Yes
		-2Don't know
	-1	Denied

VARIABLENAME **multmor2**

VARIABLE LABEL Multimorbidity: Heart failure

QUESTION TEXT **... a cardiac insufficiency (among other things heart failure)**

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F	0	No
.	1	Yes
		-2Don't know
	-1	Denied

VARIABLENAME **multmor3**

VARIABLE LABELMultimorbidity : hypertension

QUESTION TEXT **... Hypertension**

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F	0	No
.	1	Yes
		-2Don't know
	-1	Denied

VARIABLENAME **multmor4**

VARIABLENLABELMultimorbidity : Stroke

QUESTION TEXT ... of a stroke

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F	0	No
.	1	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME **multmor5**

VARIABLENLABELMultimorbidity : mental illness

QUESTION TEXT ... a mental or psychiatric illness (including Alzheimer's disease, anxiety, depression)

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F	0	No
.	1	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME **multmor6**

VARIABLENLABELMultimorbidity :

cancer QUESTION TEXT ... cancer

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F	0	No
.	1	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME **multmor7**

VARIABLENLABELMultimorbidity : diabetes

QUESTION TEXT ... diabetes

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F	0	No
.	1	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME **multmor8**

VARIABLENLABELMultimorbidity : respiratory or pulmonary disease

QUESTION TEXT **... a respiratory or pulmonary disease**

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F	0	No
.	1	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME **multmor9**

VARIABLENLABELMultimorbidity : Back pain

QUESTION TEXT **... back pain**

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F	0	No
.	1	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME **multmor10**

VARIABLENLABELMultimorbidity : gastric or intestinal disease

QUESTION TEXT **... of a gastric or intestinal disease**

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F	0	No
.	1	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME **multmor11**

VARIABLENLABELMultimorbidity : Kidney disease

QUESTION TEXT **... of kidney disease**

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F	0	No
.	1	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME **multmor12**

VARIABLENLABELMultimorbidity : liver disease

QUESTION TEXT **... liver disease**

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F	0	No
.	1	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME **multmor13**

VARIABLE LABEL Multimorbidity: Blood disorder

QUESTION TEXT **... a blood disorder (including anaemia)**

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F	0	No
.	1	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME **multmor14**

VARIABLENLABELMultimorbidity : joint or bone disease

QUESTION TEXT **... a joint or bone disease (including osteoarthritis, osteoporosis, arthritis)**

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F	0	No
.	1	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME **multmor15**

VARIABLENLABELMultimorbidity : bladder

condition QUESTION TEXT **... of a bladder**

condition

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F	0	No
.	1	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME **multmor16**

VARIABLENLABELMultimorbidity : Sleep disorders

QUESTION TEXT **... Sleep disorders**

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F	0	No
.	1	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME **multmor17**

VARIABLENLABELMultimorbidity : eye disease or visual impairment.

QUESTION TEXT **... an eye disease or visual disorder (including macular degeneration, glaucoma or cataract).
This does not refer to a visual impairment typical of old age.**

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F	0	No
.	1	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME **multmor18**

VARIABLENLABELMultimorbidity : ear disease or hearing loss

QUESTION TEXT **... an ear disease or hearing loss**

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F	0	No
.	1	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME **multmor19**

VARIABLE LABEL Multimorbidity: neurological disease

QUESTION TEXT **... a neurological disease (including Parkinson's disease, stroke with paralysis)**

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F	0	No
.	1	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME **multmor21**

VARIABLENLABELMultimorbidity : (blood) vascular
disease QUESTION TEXT ... of a (blood) vascular disease

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F	0	No
.	1	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME **multmor22**

VARIABLENLABELMultimorbidity : Thyroid disease
QUESTION TEXT ... thyroid disease

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F	0	No
.	1	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME **multmor20**

VARIABLENLABELMultimorbidity : further chronic disease

QUESTION TEXT ... another chronic disease that has not been mentioned yet?

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F	0	No
.	1	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME **multmor20x**

VARIABLENLABELMultimorbidity : other chronic disease (open) QUESTION

TEXT **Which?**

FILTER FEEDINGmultmor20 IN (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
\$900.		Disclosure of other chronic disease

-2Don't know

-1 Denied

ASK NUMBER PAPI 61

VARIABLENAME weak

VARIABLE LABEL Weakness

QUESTION TEXT ZP **In the last 4 weeks, have you had difficulty lifting heavier everyday objects, such as shopping bags, due to health impairments?**

QUESTION TEXT PX **In the last 4 weeks, has Mr/Mrs [name ZP] had difficulty lifting heavier everyday objects, such as shopping bags, due to health impairments?**

OUTPUT FORMAT	VALUE LABEL	
N0J1F.	0	No
	1	Yes
	-2	Don't know
	-1	Denied

ASK NUMBER PAPI 62

VARIABLENAME fall1

VARIABLE LABEL Fall incidents

QUESTION TEXT ZP **Have you fallen in the last 12 months?**

QUESTION TEXT PX **Has Mr/Mrs [name ZP] fallen in the last 12 months?**

OUTPUT FORMAT	VALUE LABEL	
N0J1F.	0	No
	1	Yes
	-1	Denied
	-2	Don't know

QUESTION NUMBER PAPI 63

VARIABLENAME mediA1

VARIABLE LABEL Medication : Quantity

QUESTION TEXT ZP **How many different medicines prescribed by a doctor do you take on an average day?**

Please also consider insulin, ointments, sleeping pills or longer-acting depot medication.

QUESTION TEXT PX **How many different medicines prescribed by a doctor does Mr/Mrs [name ZP] take on an average day?**

Please also consider insulin, ointments, sleeping pills or longer-acting depot medication.

OUTPUT FORMAT	VALUE	VALUE LABEL
BEST8.	Number	Number of medicines
	-1	Denied

-2Don't know

VARIABLENAME **pspgr1**
 VARIABLE LABEL Care level/degree of care
 QUESTION TEXT ZP **Do you have a care degree or a care level?**
 QUESTION TEXT PX **Does Mr/Mrs [name ZP] have a care degree or a care level?**
 LISTLIST 27

INTERVIEWER NOTE *Please read out answers and present list 27.*

DATA PREPARATION *Here, response categories 1 and 2 were merged into 1*

OUTPUT FORMAT VALUE	VALUE LABEL
0	No
1	Yes, a care degree or care level exists
	-2Don't know
-1	Denied

ASK NUMBER PAPI 64

VARIABLENAME **pspgr1_1**
 VARIABLENLABELPflegestufe/Pflegegrad : Care degree Designation
 FRAGETEXT ZP **Which care level do you have?**
 QUESTION TEXT PX **Which care level does Mr/Mrs [name ZP] have?**
 INTERVIEWER NOTE *Please read out answers, enter answer directly if necessary.*
 FILTER FEED pspgr1 IN (1)

OUTPUT FORMAT VALUE LABEL	
PFLEGR6F.	1Grade of care 1
2	Care level 2 (This corresponds to care level 1 or care level 0)
3	Care level 3 (This corresponds to care level 1 with limited everyday competence or care level 2)
4	Care level 4 (This corresponds to care level 2 with limited everyday competence or care level 3)
5	Care level 5 (This corresponds to care level 3 with limited everyday competence or care level 3 with hardship case)
	-2Don't know
-1	Denied

ASK NUMBER PAPI 65

VARIABLENAME **funkges8**
 VARIABLENLABELFunctional health: Using the telephone

QUESTION TEXT ZP

**Now I would like to ask you about some activities of daily life.
How much help do you need for the following activities?**

Using the phone

QUESTION TEXT PX

**Now I would like to ask you about some activities of daily life of Mr/Mrs [name ZP].
How much help does Mr/Mrs [name ZP] need for the following activities?**

Using the phone

INTERVIEWER NOTE

Please read out answers, enter directly if necessary.

This refers to help from other people as well as help from aids, such as a walking stick or bath lift.

OUTPUT FORMAT VALUE	VALUE LABEL
ADL3F.	0Only possible with help
1	A little help
2	No help
	-2Don't know
-1	Denied

VARIABLENAME

funkges9

VARIABLENLABELFunctional health: Organise routes outside walking range (bus, taxi)

QUESTIONEXT ZP

**Getting somewhere you cannot walk yourself (e.g. the
Organising a taxi ride, taking the bus, etc.)**

QUESTION TEXT PX

**Getting somewhere that Mr/Mrs [name ZP] cannot walk to themselves (e.g.
organising a taxi ride, going by bus, etc.).**

OUTPUT FORMAT VALUE	VALUE LABEL
ADL3F.	0Only possible with help
1	A little help
2	No help
	-2Don't know
-1	Denied

VARIABLENAME

funkges10

VARIABLENLABELFunctional health: buying food and clothes yourself

QUESTION TEXT ZP

Buying food or clothes yourself if you are taken there if necessary

QUESTION TEXT PX

Buying food or clothes yourself if you take him/her there if necessary

OUTPUT FORMAT VALUE	VALUE LABEL
ADL3F.	0Only possible with help
1	A little help
2	No help

-2Don't know

-1 Denied

VARIABLENAME **funkges11**

VARIABLENLABELFunctional health: preparing own

meals QUESTION TEXT **Prepare own meals**

<i>OUTPUT FORMAT</i>	<i>VALUE</i>	<i>VALUE LABEL</i>
ADL3F.		0Only possible with help
	1	A little help
	2	No help
		-2Don't know
	-1	Denied

VARIABLENAME **funkges12**

VARIABLENLABELFunctional health: Doing

housework QUESTION TEXT **Doing housework**

<i>OUTPUT FORMAT</i>	<i>VALUE</i>	<i>VALUE LABEL</i>
ADL3F.		0Only possible with help
	1	A little help
	2	No help
		-2Don't know
	-1	Denied

VARIABLENAME **funkges13**

VARIABLE LABEL Functional health: Taking medication QUESTION TEXT

Taking medication (organising and carrying out)

<i>OUTPUT FORMAT</i>	<i>VALUE</i>	<i>VALUE LABEL</i>
ADL3F.		0Only possible with help
	1	A little help
	2	No help
		-2Don't know
	-1	Denied

VARIABLENAME **funkges14**

VARIABLENLABELFunctional health: Regulation of

financial matters QUESTION TEXT **Regulation of financial matters**

OUTPUT FORMAT	VALUE	VALUE LABEL
ADL3F.		0Only possible with help
	1	A little help
	2	No help
		-2Don't know
	-1	Denied

ASK NUMBER PAPI 66

VARIABLENAME covid1_5

VARIABLENLABELCOVID19 : Influence Survey domain: Health QUESTION TEXT ZP

How much has the Corona pandemic affected your health?QUESTION TEXT PX **How much has the Corona pandemic affected the health of Mr/Mrs [name ZP]?**INTERVIEWER NOTE *Please read out answers.*

OUTPUT FORMAT	VALUE	VALUE LABEL
covidF.	1	Not at all
	2	A little
	3	Moderate
	4	Strong
	5	Very strong
		-2Don't know
	-1	Denied

ASK NUMBER PAPI 67

VARIABLENAME FF_covid1_5

VARIABLE LABEL Influence Survey area: Health

QUESTION TEXT ZP **How positive or negative have you experienced this change?**QUESTION TEXT PX **How positively or negatively did Mr/Mrs [name ZP] experience this change?**INTERVIEWER'S NOTE *Please read out your answers.*

FILTER FEED covid1_5 IN (2,3,4,5)

OUTPUT FORMAT	VALUE	VALUE LABEL
covidF.	1	Predominantly negative
	2	Overall balanced
	3	Predominantly positive
		-2Don't know
	-1	Denied

7 Everyday life and lifestyle

ASK NUMBER PAPI

68

VARIABLENAME live1_1_2

VARIABLENLABLE lifestyle : spending time with other people: Frequency

QUESTION TEXT ZP **We are also interested in what interests you have and how you organise your free time. Free time or leisure time means the time that you are free to organise according to your own wishes.**

~~<u>How often</u> do you~~ spend time with other people - relatives, acquaintances or friends - exchanging ideas or doing something together?

QUESTION TEXT PX **We are also interested in what interests Mr/Mrs [name ZP] has and how he/she organises his/her free time. By free time or leisure time we mean the time that he/she is free to organise according to his/her own wishes.**

~~<u>How often</u> does Mr/Woman~~ [name ZP] spend time with other people - relatives, acquaintances or friends - exchanging ideas or doing something together?

INTERVIEWER'S NOTE Please read out your answers.

OUTPUT FORMAT	VALUE	VALUE LABEL
HAUF5_2F.	1	Never
	2	Rare
	3	Sometimes
	4	Frequently
	5	Very often
		-2Don't know
	-1	Denied

VARIABLENAME live1_2_2

VARIABLE LABEL Lifestyle: physical activity: Frequency

QUESTION TEXT ZP ~~<u>How often</u> do you~~ take physical exercise?QUESTION TEXT PX ~~<u>How often</u> does Mr/Woman~~ [name ZP] exercise physically?

OUTPUT FORMAT	VALUE	VALUE LABEL
HAUF5_2F.	1	Never
	2	Rare
	3	Sometimes
	4	Frequently
	5	Very often
		-2Don't know
	-1	Denied

VARIABLENAME live1_3_2

VARIABLENLABLE lifestyle : Time for yourself: Frequency

QUESTION TEXT ZP <u>How often</u> do you have peace and time for yourself?

QUESTION TEXT PX <u>How often</u> does Mr/Woman [name ZP] have peace and time to himself/herself?

OUTPUT FORMAT	VALUE	VALUE LABEL
HAUF5_2F.	1	Never
	2	Rare
	3	Sometimes
	4	Frequently
	5	Very often
		-2Don't know
	-1	Denied

VARIABLENAME live1_4_2

VARIABLENLABELifestyle : Study the topic more closely: Frequency

QUESTION TEXT ZP <u>How often</u> do you look into something more deeply or study a topic more closely?

QUESTION TEXT PX <u>How often</u> does Mr/Mrs [name ZP] look into something in more depth or study a topic in more detail?

OUTPUT FORMAT	VALUE	VALUE LABEL
HAUF5_2F.	1	Never
	2	Rare
	3	Sometimes
	4	Frequently
	5	Very often
		-2Don't know
	-1	Denied

VARIABLENAME live1_5_2

VARIABLENLABLE lifestyle : Creative activity: Frequency

QUESTION TEXT ZP <u>How often</u> do you create or engage with something imaginatively?

QUESTION TEXT PX <u>How often</u> does Mr/Woman [name ZP] engage in creative activity or deal with something imaginatively?

OUTPUT FORMAT	VALUE	VALUE LABEL
HAUF5_2F.	1	Never
	2	Rare
	3	Sometimes
	4	Frequently
	5	Very often

-2 Don't know
-1 Denied

QUESTION NUMBER PAPI 69_A

VARIABLENAME active1

VARIABLENLABELActivities : Sport

QUESTION TEXT ZP **Now please think about how you specifically spent your free time in the
last 12 months.**
Which of the following activities did you do there?

**Do you have
do sports, e.g. gymnastics, dancing, swimming, hiking or something else?**

QUESTION TEXT PX **Now please think about how Mr/Mrs [name ZP] has specifically spent his/her free time
in the last 12 months.**
Which of the following activities did Mr/Mrs [name ZP] do there?

**Did Mr/Mrs [name ZP]
do sports, e.g. gymnastics, dancing, swimming, hiking or something else?**

OUTPUT FORMAT	VALUE	VALUE LABEL
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N0J1F.	0	No
	1	Yes

-2 Don't know
-1 Denied

QUESTION NUMBER PAPI 69_A

VARIABLENAME active1x

VARIABLENLABELActivities : Sport: Description (open)

QUESTION TEXT ZP **What exactly did you do there?**

QUESTION TEXT PX **What exactly did Mr/Mrs [name ZP] do there?**

INTERVIEWER NOTE *Please provide specific information about the activity and the context in which it took place (e.g. "visit gym", not just "fitness").*

FILTER FEEDINGActive1 IN (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
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\$900.	Indication	Description Sport
	-2	Don't know
	-1	Denied

QUESTION NUMBER PAPI 69_A

VARIABLENAME active1_1

VARIABLENLABELActivities : Sport: Frequency

QUESTION TEXT ZP **How often did you exercise in total?**

QUESTION TEXT PX **How often did Mr/Mrs [name ZP] exercise in total?**

INTERVIEWER NOTE *Please read out answers.*

If necessary, point out to the interviewee again that it is only about the last year!

FILTER FEEDINGactive1 IN (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
ACTIVEH5F.	1	Daily
	2	Weekly
	3	Monthly
	4	Several times a year
	5	Once a year
	-2	Don't know
	-1	Denied

QUESTION NUMBER PAPI 69_A

VARIABLENAME **active1_2**

VARIABLENLABELActivities : Sport: Place

QUESTION TEXT ZP **Where did you do most of this?**

QUESTION TEXT PX **Where did Mr/Mrs [name ZP] do this predominantly?**

INTERVIEWER NOTE *Please read out answers.*

If necessary, point out to the interviewee again that it is only about the last year!

FILTER FEEDINGactive1 IN (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
AKTIVO3F.	1	At home/in the home
	2	In the immediate vicinity
	3	In the wider surroundings
	-2	Don't know
	-1	Denied

QUESTION NUMBER PAPI 69_B

VARIABLENAME **active8**

VARIABLENLABELActivities : Hobby

QUESTION TEXT ZP **Have you had a hobby in the last 12 months, e.g. stamp collecting, handicrafts, needlework, gardening or something else?**

QUESTION TEXT PX **In the last 12 months, has Mr/Mrs [name ZP] had a hobby, e.g. stamp collecting, handicrafts, needlework, gardening or something else?**

INTERVIEWER NOTE *If necessary, point out to the interviewee again that this is only about the last year!*

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes
	-2	Don't know
	-1	Denied

QUESTION NUMBER PAPI 69_B

VARIABLENAME **active8x**

VARIABLENLABELActivities : Hobby: Description (open)

QUESTION TEXT ZP **What exactly did you do there?**

QUESTION TEXT PX **What exactly did Mr/Mrs [name ZP] do there?**

INTERVIEWER NOTE *Please provide specific information about the activity and the context in which it took place (e.g. "working in the garden", not just "gardening").*

FILTER FEEDINGactive8 IN (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
\$1500.	Indication	Type of hobby
	-2	Don't know
	-1	Denied

VARIABLENAME **active8_1**

VARIABLENLABELActivities : Hobby: Frequency

QUESTION TEXT ZP **How often have you practised a hobby in total?**

QUESTION TEXT PX **How often did Mr/Mrs [name ZP] practise a hobby in total?**

INTERVIEWER NOTE *Please read out answers.*

If necessary, point out to the interviewee again that it is only about the last year!

FILTER FEEDINGactive8 IN (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
ACTIVEH5F.	1	Daily
	2	Weekly
	3	Monthly
	4	Several times a year
	5	Once a year
	-2	Don't know
	-1	Denied

VARIABLENAME **active8_2**

VARIABLENLABELActivities : Hobby: Place

QUESTION TEXT ZP **Where did you do most of this?**

QUESTION TEXT PX **Where did Mr/Mrs [name ZP] do this predominantly?**

INTERVIEWER NOTE *Please read out answers.*

If necessary, point out to the interviewee again that it is only about the last year!

FILTER FEEDINGactive8 IN (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
AKTIVO3F.	1	At home/in the home
	2	In the immediate vicinity
	3	In the wider surroundings
	-2	Don't know
	-1	Denied

QUESTION NUMBER PAPI 69_C

VARIABLENAME **active13**

VARIABLENLABELActivities : Walks

QUESTION TEXT ZP **Have you taken any walks in the last 12 months?**

QUESTION TEXT PX **Has Mr/Mrs [name ZP] taken any walks in the last 12 months?**

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME **active13_1**

VARIABLENLABELActivities : Walks: frequency

QUESTION TEXT ZP **How often did you do this?**

QUESTION TEXT PX **How often did Mr/Mrs [name ZP] do that?**

INTERVIEWER NOTE *Please read out answers.*

If necessary, point out to the interviewee again that it is only about the last year!

FILTER FEEDINGactive13 IN (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
ACTIVEH5F.	1	Daily
	2	Weekly
	3	Monthly
	4	Several times a year
	5	Once a year
	-2	Don't know

-1 Denied

ASK NUMBER PAPI 70

VARIABLENAME covid1_6

VARIABLENLABELCOVID19 : Influence Survey area: everyday activities and leisure time

QUESTION TEXT ZP **How much has the Corona pandemic influenced your everyday life and leisure time?**

QUESTION TEXT PX **How much has the Corona pandemic affected Mr/Mrs [name ZP]'s everyday life and leisure time?**

INTERVIEWER NOTE *Please read out answers.*

OUTPUT FORMAT	VALUE	VALUE LABEL
covidF.	1	Not at all
	2	A little
	3	Moderate
	4	Strong
	5	Very strong
	-2	Don't know
	-1	Denied

ASK NUMBER PAPI 71

VARIABLENAME FF_covid1_6

VARIABLENLABELCOVID19 : Influence Survey area: Daily life and leisure QUESTION TEXT ZP

How positively or negatively did you experience this change?

QUESTION TEXT PX **How positively or negatively did Mr/Mrs [name ZP] experience this change?**

INTERVIEWER'S NOTE *Please read out your answers.*

FILTER FEED covid1_6 IN (2,3,4,5)

OUTPUT FORMAT	VALUE	VALUE LABEL
covidF.	1	Predominantly negative
	2	Overall balanced
	3	Predominantly positive
	-2	Don't know
	-1	Denied

8 Use of technology

ASK NUMBER PAPI 72

VARIABLENAME **technu2**

VARIABLENLABEL Technology use: Internet

QUESTION TEXT ZP **For more and more people, the use of modern technology is also part of everyday life. Have you used the internet in the last 12 months?**

QUESTION TEXT PX **For more and more people, the use of modern technology is also part of everyday life. Has Mr/Mrs [name ZP] used the internet in the last 12 months?**

INTERVIEWER'S NOTE *By "use" we mean active use. This also includes the use of internet-linked apps. It does not mean, for example, having someone else look up information for you on the internet.*

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes
	-2	Don't know
	-1	Denied

ASK NUMBER PAPI 73

VARIABLENAME **covid1_7**

VARIABLENLABELCOVID19 : Influence Survey domain: technology use QUESTION TEXT ZP **How much has the Corona pandemic influenced your internet use?**

QUESTION TEXT PX **How much did the Corona pandemic affect Mr/Mrs [name ZP]'s internet use?**

INTERVIEWER'S NOTE *Please read out your answers.*

FILTER FEEDING technu2 IN (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
covidF.	1	Not at all
	2	A little
	3	Moderate
	4	Strong
	5	Very strong
	-2	Don't know
	-1	Denied

ASK NUMBER PAPI 74

VARIABLENAME **FF_covid1_7**

VARIABLENLABELCOVID19 : Influence Survey area: Use of technology QUESTION TEXT ZP **How positively or negatively did you experience this change?**

QUESTION TEXT PX **How positively or negatively did Mr/Mrs [name ZP] experience this change?**

INTERVIEWER'S NOTE *Please read out your answers.*

FILTER FEEDtechnu2 IN (1) AND covid1_7 IN (2,3,4,5)

OUTPUT FORMAT	VALUE	VALUE LABEL
covidF.	1	Predominantly negative
	2	Overall balanced
	3	Predominantly positive
	-2	Don't know
	-1	Denied

9 Social Inclusiveness

ASK NUMBER PAPI 75

VARIABLENAME **soznet1**

VARIABLENLABELSoc . network

QUESTION TEXT ZP Social contacts and relationships with other people can look completely different in old age.
Therefore, it is now about people who are important to you and with whom you are in contact. These can be neighbours, friends and acquaintances as well as household members and relatives.
Which people are important to you? Please name up to 6 of the most important ones.

QUESTION TEXT PX Social contacts and relationships with other people can look completely different in old age.
Therefore, it is now about people who are important to Mr/Mrs [name ZP] and with whom he/she is in contact. These can be neighbours, friends and acquaintances as well as household members and relatives.
Which people are important to Mr/Mrs [name ZP]? Please name up to 6 of the most important ones.

INTERVIEWER NOTE *If ZP/PX does not wish to name names, read out the following text:
"Stating the name is only to help clarify which person we are talking about in the further course of the interview. If you want, you can also use a made-up name."*

OUTPUT FORMAT VALUE	VALUE LABEL
SOCNET2F.	0Cannot name a person
	1 can name people
	-2Don't know
	-1 Denied

1. Person

VARIABLENAME **soznetz2_1x**

VARIABLELABELSoc . network: 1st person: Name (open)

QUESTION TEXT **Can you please tell me the name of the first person?**

INTERVIEWER'S NOTE *If ZP/PX does not want to name names, read out the following text:
"Stating the name is only to help clarify which person we are talking about in the further course of the interview. If you want, you can also use a made-up name."*

FILTER FEEDsoznetz1 IN (1)

OUTPUT FORMAT VALUE	VALUE LABEL
\$900.	SpecificationName of the first person
	-2Don't know
-1	Denied

VARIABLENAME **soznetz3_1**

VARIABLE LABEL Soc. network: 1st person: gender

QUESTION TEXT **What is the gender of this person?**

INTERVIEWER NOTE *Evaluation by interviewer: Gender.
If it is not clear how to assess, ask.*

FILTER FEEDINGsoznetz1 IN (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
GESCHL2F.	1	Male
	2	Female
		-2Don't know
	-1	Denied

VARIABLENAME **socnet4_1**

VARIABLELABELSoc . network: 1st person: relationship

QUESTION TEXT ZP **What is the relationship between <name> and you?**

QUESTION TEXT PX **What is the relationship between <name> and Mr/Mrs [name ZP]?**

INTERVIEWER NOTE *Categorisation by interviewer. Do not read out!*

FILTER FEEDsoznetz1 IN (1)

PROGRAMMING NOTE if (value IN (201) AND children1 IN (0)) OR (value IN (301) AND grandchildren1 IN (0)) OR (value IN (351) AND grandson2 IN (0)), then alert
(Default text for alert: "Please check if this entry is correct").

OUTPUT FORMAT	VALUE	VALUE LABEL
PERSCARD.	102	Parents
	104	Parents-in-law (parents of the partner)
	106	(Spouse) Partner
	107	Daughter-in-law/son-in-law (partner of the child)

111	Brother-in-law (brother/sister of the partner)
120	Ex-partner
201	Child
301	Grandchild
351	Great-grandchild
451	Siblings
401	Aunt/uncle (siblings of parents)
403	Cousin (child of aunt/uncle)
405	Niece/nephew (child of sibling)
407	Other relatives
501	Boyfriend/girlfriend
601	(former) work colleagues
602	Neighbours
603	Members of the association or organisation
701	Volunteers, e.g. from social institutions
702	Paid helpers (e.g. caregiver)
801	Known
901	Other person
-2	Don't know
-1	Denied

VARIABLENAME socnet5_1

VARIABLELABELSoc . network: 1st person: Frequency Contact

QUESTION TEXT ZP **How often do you have contact with &name&, e.g. through visits, letters, phone calls, SMS or email?**

QUESTION TEXT PX **How often does Mr/Woman [name ZP] have contact with &name&, e.g. through visits, letters, phone calls, text messages or email?**

INTERVIEWER NOTE *Please read out answers.*

FILTER FEEDsoznetz1 IN (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
CONTH5F.	1	Daily
	2	Weekly
	3	Monthly
	4	Several times a year
	5	Rarer
	-2	Don't know
	-1	Denied

VARIABLENAME **soznetz6_1**

VARIABLENLABELSoc . network: 1st person: connectedness

QUESTION TEXT ZP **How closely do you feel connected to <Name> today?**

QUESTION TEXT PX **How closely does Mr/Mrs [name ZP] feel connected to <name> today?**

INTERVIEWER NOTE *Please read out answers.*

FILTER FEEDINGsoznetz1 IN (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
VERBUN4F.	1	Not narrow at all
	2	Less narrow
	3	Narrow
	4	Very narrow
	-2	Don't know
	-1	Denied

2. Person

VARIABLENAME	socnet2_2
VARIABLELABELSoc	. network: 2nd person: no other person
QUESTION TEXT	Is there another person who is important to you? Can you please tell me the name of the next (second) person?
INTERVIEWER'S NOTE	<p><i>If ZP/PX does not want to name names, read out the following text:</i></p> <p><i>"Stating the name is only to help clarify which person we are talking about in the further course of the interview. If you want, you can also use a made-up name."</i></p> <p><i>If the person refuses to be named, but can provide information about the person, please enter "xxx" under names.</i></p>

FILTER FEEDsoznetz1 IN (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
Nopersf.		0can name other person, namely [open: soznetz2_2x].
	1	cannot name another person
		-1Refuses to provide information on another person

VARIABLENAME	soznetz2_2x
VARIABLELABELSoc	. network: 2 Person: Name (open)
QUESTION TEXT	Can you please tell me the name of the second person?
INTERVIEWER'S NOTE	<p><i>If ZP/PX does not want to name names, read out the following text:</i></p> <p><i>"Stating the name is only to help clarify which person we are talking about in the further course of the interview. If you want, you can also use a made-up name."</i></p>

FILTER FEEDINGsoznetz1 IN (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
\$900.		SpecificationName of the second person
		-2Don't know
		-1Refuses to provide information on another person

VARIABLENAME	socnet3_2
VARIABLE LABEL	Soc. network: 2nd person: gender
QUESTION TEXT	What is the gender of this person?
INTERVIEWER NOTE	<i>Evaluation by interviewer: Gender. If it is not clear, ask the interviewer.</i>

FILTER FEED soznetz1 IN (1) AND soznetz2_2 IN (0)

OUTPUT FORMAT	VALUE	VALUE LABEL
GESCHL2F.	1	Male
	2	Female
		-2Don't know
	-1	Denied

VARIABLENAME **socnet4_2**

VARIABLENLABELSoc . network: 2nd person: relationship

QUESTION TEXT ZP **What is the relationship between <name> and you?**

QUESTION TEXT PX **What is the relationship between <name> and Mr/Mrs [name ZP]?**

INTERVIEWER NOTE *Categorisation by interviewer. Do not read out!*

FILTER FEED soznetz1 IN (1) AND soznetz2_2 IN (0)

PROGRAMMING NOTE if (value IN (201) AND children1 IN (0)) OR (value IN (301) AND grandchildren1 IN (0)) OR (value IN (351,) AND grandchild2 IN (0)), then alert
(Default text for alert: "Please check if this entry is correct").

OUTPUT FORMAT	VALUE	VALUE LABEL
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PERSCART.

102	Parents
104	Parents-in-law (parents of the partner)
106	(Spouse) Partner
107	Daughter-in-law/son-in-law (partner of the child)
111	Brother-in-law (brother/sister of the partner)
120	Ex-partner
201	Child
301	Grandchild
351	Great-grandchild
451	Siblings
401	Aunt/uncle (siblings of parents)
403	Cousin (child of aunt/uncle)
405	Niece/nephew (child of sibling)
407	Other relatives
501	Boyfriend/girlfriend
601	(former) work colleagues
602	Neighbours
603	Members of the association or organisation
701	Volunteers, e.g. from social institutions
702	Paid helpers (e.g. caregiver)
801	Known
901	Other person

-2 Don't know
-1 Denied

VARIABLENAME **socnet5_2**
 VARIABLENLABELSoc . network: 2nd person: Frequency Contact
 QUESTION TEXT ZP **How often do you have contact with <name>, e.g. through visits, letters, phone calls, SMS or email?**
 QUESTION TEXT PX **How often does Mr/Woman [name ZP] have contact with <name>, e.g. through visits, letters, phone calls, SMS or email?**
 INTERVIEWER NOTE *Please read out answers.*
 FILTER FEED soznetz1 IN (1) AND soznetz2_2 IN (0)

OUTPUT FORMAT	VALUE	VALUE LABEL
CONTH5F.	1	Daily
	2	Weekly
	3	Monthly
	4	Several times a year
	5	Rarer
	-2	Don't know
	-1	Denied

VARIABLENAME **soznet6_2**
 VARIABLENLABELSoc . network: 2nd person: connectedness
 QUESTION TEXT ZP **How closely do you feel connected to <Name> today?**
 QUESTION TEXT PX **How closely does Mr/Mrs [name ZP] feel connected to <name> today?**
 INTERVIEWER NOTE *Please read out answers.*
 FILTER FEED soznetz1 IN (1) AND soznetz2_2 IN (0)

OUTPUT FORMAT	VALUE	VALUE LABEL
VERBUN4F.	1	Not narrow at all
	2	Less narrow
	3	Narrow
	4	Very narrow
	-2	Don't know
	-1	Denied

3. Person

VARIABLENAME **socnet2_3**

VARIABLENLABELSoc . network: 3rd person: no other person

QUESTION TEXT **Is there another person who is important to you? Can you please tell me the name of the next (third) person?**

INTERVIEWER'S NOTE *If ZP/PX does not want to name names, read out the following text:
"Stating the name is only to help clarify which person we are talking about in the further course of the interview. If you want, you can also use a made-up name."*

If the person refuses to be named, but can provide information about the person, please enter "xxx" under names.

FILTER FEED **soznetz1 IN (1) AND soznetz2_2 IN (0)**

OUTPUT FORMAT VALUE	VALUE LABEL
Nopersf.	0can name other person, namely [open: socnet2_3x]
1	cannot name another person
	-1Refuses to provide information on another person

VARIABLENAME **soznetz2_3x**

VARIABLENLABELSoc . network: 3rd person: Name (open)

FILTERS**soznetz1 IN (1) AND soznetz2_2 IN (0) AND soznetz2_3 IN (0)**

PROGRAMMING NOTEPlease record all the characteristics of a person first (soznetz2_1 to soznetz6_1), then move on to the next person. Up to max. 6 persons

OUTPUT FORUM T	VALUE LABEL
\$900.	(soznetz2_6 to soznetz6_6). Name of the third person
	-2Don't know
-1	Denied

VARIABLENAME **soznetz3_3**

VARIABLE LABEL Soc. network: 3rd person: Gender

QUESTION TEXT **What is the gender of this person?**

INTERVIEWER NOTE *Assessment by interviewer
If it is not possible to assess the situation clearly, ask.*

FILTERS**soznetz1 IN (1) AND soznetz2_2 IN (0) AND soznetz2_3 IN (0)**

OUTPUT FORMAT VALUE	VALUE LABEL
GESCHL2F.	1 Male
	2 Female

-2Don't know

-1

Denied

VARIABLENAME **socnet4_3**

VARIABLENLABELSoc . network: 3rd person: relationship

QUESTION TEXT ZP **What is the relationship between <name> and you?**QUESTION TEXT PX **What is the relationship between <name> and Mr/Mrs [name ZP]?**INTERVIEWER NOTE *Categorisation by interviewer. Do not read out!*

FILTERSsoznetz1 IN (1) AND soznetz2_2 IN (0) AND soznetz2_3 IN (0)

PROGRAMMING NOTE if (value IN (201) AND children1 IN (0)) OR (value IN (301) AND grandchildren1 IN (0)) OR (value IN (351) AND grandson2 IN (0)), then alert
(Default text for alert: "Please check if this entry is correct").

OUTPUT FORMAT	VALUE	VALUE LABEL
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PERSCART.

102	Parents
104	Parents-in-law (parents of the partner)
106	(Spouse) Partner
107	Daughter-in-law/son-in-law (partner of the child)
111	Brother-in-law (brother/sister of the partner)
120	Ex-partner
201	Child
301	Grandchild
351	Great-grandchild
451	Siblings
401	Aunt/uncle (siblings of parents)
403	Cousin (child of aunt/uncle)
405	Niece/nephew (child of sibling)
407	Other relatives
501	Boyfriend/girlfriend
601	(former) work colleagues
602	Neighbours
603	Association or organisation members
701	Volunteers, e.g. from social institutions
702	Paid helpers (e.g. caregiver)
801	Known
901	Other person
-2	Don't know
-1	Denied

VARIABLENAME **socnet5_3**

VARIABLENLABELSoc . network: 3rd person: Frequency Contact

QUESTION TEXT ZP **How often do you have contact with <name>, e.g. through visits, letters, phone calls, SMS or email?**

QUESTION TEXT PX **How often does Mr/Woman [name ZP] have contact with <name>, e.g. through visits, letters, phone calls, SMS or email?**

INTERVIEWER NOTE *Please read out answers.*

FILTERSocnetz1 IN (1) AND soznetz2_2 IN (0) AND soznetz2_3 IN (0)

OUTPUT FORMAT	VALUE	VALUE LABEL
CONTH5F.	1	Daily
	2	Weekly
	3	Monthly
	4	Several times a year
	5	Rarer
	-2	Don't know
	-1	Denied

VARIABLENAME **soznetz6_3**

VARIABLENLABELSoc . network: 3rd person: connectedness

QUESTION TEXT ZP **How closely do you feel connected to <Name> today?**

QUESTION TEXT PX **How closely does Mr/Mrs [name ZP] feel connected to <name> today?**

INTERVIEWER NOTE *Please read out answers.*

FILTERSocnetz1 IN (1) AND soznetz2_2 IN (0) AND soznetz2_3 IN (0)

OUTPUT FORMAT	VALUE	VALUE LABEL
VERBUN4F.	1	Not narrow at all
	2	Less narrow
	3	Narrow
	4	Very narrow
	-2	Don't know
	-1	Denied

4. Person

VARIABLENAME	soznet2_4
VARIABLENLABELSoc	. network: 4th person: no other person
QUESTION TEXT	Is there another person who is important to you? Can you please tell me the name of the next (fourth) person?
INTERVIEWER'S NOTE	<p><i>If ZP/PX does not want to name names, read out the following text:</i></p> <p><i>"Stating the name is only to help clarify which person we are talking about in the further course of the interview. If you want, you can also use a made-up name."</i></p> <p><i>If the person refuses to be named, but can provide information about the person, please enter "xxx" under names.</i></p>

FILTERSocznet1 IN (1) AND soznet2_2 IN (0) AND soznet2_3 IN (0)

OUTPUT FORUM T	VALUE LABEL
Nopersf.	0can name other person, namely: [open: soznet2_4x]
1	cannot name another person
	-1Refuses to provide information on another person

VARIABLENAME	soznet2_4x
VARIABLENLABELSoc	. network: 4th person: Name (open)
FILTERSocznet1 IN (1) AND soznet2_2 IN (0) AND soznet2_3 IN (0) AND soznet2_4 IN (0)	

OUTPUT FORMAT	VALUE	VALUE LABEL
\$900.	Indication.	Name of the fourth person
	-2	Don't know
	-1	Denied

VARIABLENAME	soznet3_4
VARIABLE LABEL	Soc. network: 4th person: gender
QUESTION TEXT	What is the gender of this person?
INTERVIEWER NOTE	<p><i>Evaluation by interviewer: Gender. If it is not clear, ask the interviewer.</i></p> <p>FILTERSocznet1 IN (1) AND soznet2_2 IN (0) AND soznet2_3 IN (0) AND soznet2_4 IN (0)</p>

OUTPUT FORMAT	VALUE	VALUE LABEL
GESCHL2F.	1	Male
	2	Female
	-2	Don't know
	-1	Denied

VARIABLENAME **socnet4_4**

VARIABLENLABELSoc . network: 4th person: relationship

QUESTION TEXT ZP **What is the relationship between <name> and you?**

QUESTION TEXT PX **What is the relationship between <name> and Mr/Mrs [name ZP]?**

INTERVIEWER NOTE *Categorisation by interviewer. Do not read out!*

PROGRAMMING NOTE if (value IN (201) AND children1 IN (0)) OR (value IN (301) AND grandchildren1 IN (0)) OR (value IN (351) AND grandson2 IN (0)), then alert
(Default text for alert: "Please check if this entry is correct").

OUTPUT FORMAT	VALUE	VALUE LABEL
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PERSCART.

102	Parents
104	Parents-in-law (parents of the partner)
106	(Spouse) Partner
107	Daughter-in-law/son-in-law (partner of the child)
111	Brother-in-law (brother/sister of the partner)
120	Ex-partner
201	Child
301	Grandchild
351	Great-grandchild
451	Siblings
401	Aunt/uncle (siblings of parents)
403	Cousin (child of aunt/uncle)
405	Niece/nephew (child of sibling)
407	Other relatives
501	Boyfriend/girlfriend
601	(former) work colleagues
602	Neighbours
603	Association or organisation members
701	Volunteers, e.g. from social institutions
702	Paid helpers (e.g. caregiver)
801	Known
901	Other person
-2	Don't know
-1	Denied

VARIABLENAME **socnet5_4**

VARIABLENLABELSoc . network: 4th person: Frequency Contact

QUESTION TEXT ZP **How often do you have contact with <name>, e.g. through visits, letters, phone calls, SMS or email?**

QUESTION TEXT PX **How often does Mr/Woman [name ZP] have contact with <name>, e.g. through visits, letters, phone calls, text messages or email?**

INTERVIEWER NOTE *Please read out answers.*

FILTERS `soznetz1 IN (1) AND soznetz2_2 IN (0) AND soznetz2_3 IN (0) AND soznetz2_4 IN (0)`

OUTPUT FORMAT	VALUE	VALUE LABEL
CONTH5F.	1	Daily
	2	Weekly
	3	Monthly
	4	Several times a year
	5	Rarer
		-2 Don't know
	-1	Denied

VARIABLENAME **soznetz6_4**

VARIABLENLABEL Soc . network: 4th person: connectedness

QUESTION TEXT ZP **How closely do you feel connected to <Name> today?**

QUESTION TEXT PX **How closely does Mr/Mrs [name ZP] feel connected to <name> today?**

INTERVIEWER NOTE *Please read out answers.*

FILTERS `soznetz1 IN (1) AND soznetz2_2 IN (0) AND soznetz2_3 IN (0) AND soznetz2_4 IN (0)`

OUTPUT FORMAT	VALUE	VALUE LABEL
VERBUN4F.	1	Not narrow at all
	2	Less narrow
	3	Narrow
	4	Very narrow
	-2	Don't know
	-1	Denied

5. Person

VARIABLENAME	soznetz2_5
VARIABLENLABELSoc	. network: 5th person: no other person
QUESTION TEXT	Is there another person who is important to you? Can you please tell me the name of the next (fifth) person?
INTERVIEWER'S NOTE	<p><i>If ZP/PX does not want to name names, read out the following text:</i></p> <p><i>"Stating the name is only to help clarify which person we are talking about in the further course of the interview. If you want, you can also use a made-up name."</i></p> <p><i>If the person refuses to be named, but can provide information about the person, please enter "xxx" under names.</i></p>

FILTERSoznetz1 IN (1) AND soznetz2_2 IN (0) AND soznetz2_3 IN (0) AND soznetz2_4 IN (0)

OUTPUT FORMAT	VALUE	VALUE LABEL
Nopersf.		0can name other person, namely: [open: soznetz2_5x]
	1	cannot name another person
	-1	Refuses to provide information on another person

VARIABLENAME	soznetz2_5x
VARIABLENLABELSoc	. network: 5th person: Name (open)
	FILTERSoznetz1 IN (1) AND soznetz2_2 IN (0) AND soznetz2_3 IN (0) AND soznetz2_4 IN (0) AND soznetz2_5 IN (0)

OUTPUT FORMAT	VALUE	VALUE LABEL
\$900.		Name of the fifth person
	-2	Don't know
	-1	Denied

VARIABLENAME	soznetz3_5
VARIABLE LABEL	Soc. network: 5th person: gender
QUESTION TEXT	What is the gender of this person?
INTERVIEWER NOTE	<p><i>Evaluation by interviewer: Gender. If it is not clear, ask the interviewer.</i></p> <p>FILTERSoznetz1 IN (1) AND soznetz2_2 IN (0) AND soznetz2_3 IN (0) AND soznetz2_4 IN (0) AND soznetz2_5 IN (0)</p>

OUTPUT FORMAT	VALUE	VALUE LABEL
GESCHL2F.	1	Male
	2	Female
	-2	Don't know
	-1	Denied

VARIABLENAME **soznetz4_5**

VARIABLENLABELSoc . network: 5th person: relationship

QUESTION TEXT ZP **What is the relationship between <name> and you?**

QUESTION TEXT PX **What is the relationship between <name> and Mr/Mrs [name ZP]?**

INTERVIEWER NOTE *Categorisation by interviewer. Do not read out!*

 FILTERSoznetz1 IN (1) AND soznetz2_2 IN (0) AND soznetz2_3 IN (0) AND soznetz2_4 IN (0) AND soznetz2_5 IN (0)

PROGRAMMING NOTE if (value IN (201) AND children1 IN (0)) OR (value IN (301) AND grandchildren1 IN (0)) OR (value IN (351) AND grandson2 IN (0)), then alert
(Default text for alert: "Please check if this entry is correct").

OUTPUT FORMAT	VALUE	VALUE LABEL
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PERSCART.

102	Parents
104	Parents-in-law (parents of the partner)
106	(Spouse) Partner
107	Daughter-in-law/son-in-law (partner of the child)
111	Brother-in-law (brother/sister of the partner)
120	Ex-partner
201	Child
301	Grandchild
351	Great-grandchild
451	Siblings
401	Aunt/uncle (siblings of parents)
403	Cousin (child of aunt/uncle)
405	Niece/nephew (child of sibling)
407	Other relatives
501	Boyfriend/girlfriend
601	(former) work colleagues
602	Neighbours
603	Association or organisation members
701	Volunteers, e.g. from social institutions
702	Paid helpers (e.g. caregiver)
801	Known
901	Other person
-2	Don't know
-1	Denied

VARIABLENAME **socnet5_5**

VARIABLENLABELSoc . network: 5th person: Frequency Contact

QUESTION TEXT ZP **How often do you have contact with <name>, e.g. through visits, letters, phone calls, SMS or email?**

QUESTION TEXT PX **How often does Mr/Woman [name ZP] have contact with <name>, e.g. through visits, letters, phone calls, SMS or email?**

INTERVIEWER NOTE *Please read out answers.*

FILTERS `soznetz1 IN (1) AND soznetz2_2 IN (0) AND soznetz2_3 IN (0) AND soznetz2_4 IN (0) AND soznetz2_5 IN (0)`

OUTPUT FORMAT	VALUE	VALUE LABEL
CONTH5F.	1	Daily
	2	Weekly
	3	Monthly
	4	Several times a year
	5	Rarer
		-2Don't know
	-1	Denied

VARIABLENAME **soznetz6_5**

VARIABLENLABELSoc . network: 5th person: connectedness

QUESTION TEXT ZP **How closely do you feel connected to <Name> today?**

QUESTION TEXT PX **How closely does Mr/Mrs [name ZP] feel connected to <name> today?**

INTERVIEWER NOTE *Please read out answers. and present list 50.*

FILTERS `soznetz1 IN (1) AND soznetz2_2 IN (0) AND soznetz2_3 IN (0) AND soznetz2_4 IN (0) AND soznetz2_5 IN (0)`

OUTPUT FORMAT	VALUE	VALUE LABEL
VERBUN4F.	1	Not narrow at all
	2	Less narrow
	3	Narrow
	4	Very narrow
	-2	Don't know
	-1	Denied

6. Person

VARIABLENAME	soznet2_6
VARIABLENLABELSoc	. network: 6th person: no other person
QUESTION TEXT	Is there another person who is important to you? Can you please tell me the name of the next (sixth) person?
INTERVIEWER'S NOTE	<p><i>If ZP/PX does not want to name names, read out the following text:</i></p> <p><i>"Stating the name is only to help clarify which person we are talking about in the further course of the interview. If you want, you can also use a made-up name."</i></p> <p><i>If the person refuses to be named, but can provide information about the person, please enter "xxx" under names.</i></p> <p>FILTERSoznetz1 IN (1) AND soznetz2_2 IN (0) AND soznetz2_3 IN (0) AND soznetz2_4 IN (0) AND soznetz2_5 IN (0)</p>

OUTPUT FORMAT	VALUE	VALUE LABEL
Nopersf.		0can name other person, namely: [open: socnet2_6x]
	1	cannot name another person
		-1Refuses to provide information on another person

VARIABLENAME	soznet2_6x
VARIABLENLABELSoc	. network: 6th person: name (open)
	FILTER Soznetz1 IN (1) AND soznetz2_2 IN (0) AND soznetz2_3 IN (0) AND soznetz2_4 IN (0) AND soznetz2_5 IN (0) AND soznetz2_6 IN (0)
	PROGRAMMING NOTE Please record all the characteristics of a person first (soznetz2_1 to soznetz6_1), then move on to the next person. Up to max. 6 persons

OUTPUT FORMAT	VALUE	VALUE LABEL
		(soznetz2_6 to soznetz6_6).
\$900.		Name of the sixth person
		-2Don't know
	-1	Denied

VARIABLENAME	soznet3_6
VARIABLE LABEL	Soc. network: 6th person: gender
QUESTION TEXT	What is the gender of this person?
INTERVIEWER NOTE	<p><i>Evaluation by interviewer: Gender. If it is not clear, ask the interviewer.</i></p> <p>FILTERSoznetz1 IN (1) AND soznetz2_2 IN (0) AND soznetz2_3 IN (0) AND soznetz2_4 IN (0) AND soznetz2_5 IN (0) AND soznetz2_6 IN (0)</p>

OUTPUT FORMAT	VALUE	VALUE LABEL
GESCHL2F.	1	Male
	2	Female

-2Don't know

-1

Denied

VARIABLENAME **socnet4_6**

VARIABLELABELSoc . network: 6th person: relationship

QUESTION TEXT ZP **What is the relationship between <name>; and you?**

QUESTION TEXT PX **What is the relationship between <name>; and Mr/Mrs [name ZP]?**

INTERVIEWER NOTE *Categorisation by interviewer. Do not read out!*

FILTERSocznetz1 IN (1) AND soznetz2_2 IN (0) AND soznetz2_3 IN (0) AND soznetz2_4 IN (0) AND soznetz2_5 IN (0) AND soznetz2_6 IN (0)

PROGRAMMING NOTE if (value IN (201) AND children1 IN (0)) OR(value IN (301) AND grandchildren1 IN (0)) OR(value IN (351) AND grandson2 IN (0)), then alert
(Default text for alert: "Please check if this entry is correct").

OUTPUT FORMAT	VALUE	VALUE LABEL
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PERSCART.

102	Parents
104	Parents-in-law (parents of the partner)
106	(Spouse) Partner
107	Daughter-in-law/son-in-law (partner of the child)
111	Brother-in-law (brother/sister of the partner)
120	Ex-partner
201	Child
301	Grandchild
351	Great-grandchild
451	Siblings
401	Aunt/uncle (siblings of parents)
403	Cousin (child of aunt/uncle)
405	Niece/nephew (child of sibling)
407	Other relatives
501	Boyfriend/girlfriend
601	(former) work colleagues
602	Neighbours
603	Association or organisation members
701	Volunteers, e.g. from social institutions
702	Paid helpers (e.g. caregiver)
801	Known
901	Other person
-2	Don't know
-1	Denied

VARIABLENAME **socnet5_6**

VARIABLENLABELSoc . network: 6th person: Frequency Contact

QUESTION TEXT ZP **How often do you have contact with <name>;, e.g. through visits, letters, phone calls, SMS or email?**

QUESTION TEXT PX **How often does Mr/Woman [name ZP] have contact with <name>;, e.g. through visits, letters, phone calls, text messages or email?**

INTERVIEWER NOTE *Please read out answers.*

FILTERSocnetz1 IN (1) AND soznetz2_2 IN (0) AND soznetz2_3 IN (0) AND soznetz2_4 IN (0) AND soznetz2_5 IN (0) AND soznetz2_6 IN (0)

OUTPUT FORMAT	VALUE	VALUE LABEL
CONTH5F.	1	Daily
	2	Weekly
	3	Monthly
	4	Several times a year
	5	Rarer
		-2Don't know
	-1	Denied

VARIABLENAME **soznetz6_6**

VARIABLENLABELSoc . network: 6th person: connectedness

QUESTION TEXT ZP **How closely do you feel connected to <Name>; today?**

QUESTION TEXT PX **How closely does Mr/Mrs [name ZP] feel connected to <name>; today?**

INTERVIEWER NOTE *Please read out answers.*

FILTERSocnetz1 IN (1) AND soznetz2_2 IN (0) AND soznetz2_3 IN (0) AND soznetz2_4 IN (0) AND soznetz2_5 IN (0) AND soznetz2_6 IN (0)

OUTPUT FORMAT	VALUE	VALUE LABEL
VERBUN4F.	1	Not narrow at all
	2	Less narrow
	3	Narrow
	4	Very narrow
	-2	Don't know
	-1	Denied

VARIABLENAME **soznet7**

VARIABLENLABELSoc . network: Number of other persons

QUESTION TEXT ZP **If you could name more than 6 people who are important to you.
How many more people would you have named?**

QUESTION TEXT PX **If you could name more than 6 people who are important to Mr/Mrs [name ZP].
How many more people would you have named?**

FILTER Soznetz1 IN (1) AND soznetz2_2 IN (0) AND soznetz2_3 IN (0) AND soznetz2_4 IN (0) AND soznetz2_5 IN (0) AND soznetz2_6 IN (0)

Note from ceres: Please keep the formal definition of the filter condition for the documentation.

OUTPUT FORMAT	VALUE	VALUE LABEL
BEST8.	(0 - 100)	Number of other persons
	-1	Denied
	-2	Don't know

ASK NUMBER PAPI 77

VARIABLENAME **covid1_8**

VARIABLENLABEL COVID19 : Influence Survey domain: Social contacts and social participation QUESTION TEXT ZP **How much has the Corona pandemic influenced your private contacts?**

QUESTION TEXT PX **How much did the Corona pandemic affect Mr/Mrs [name ZP]'s private contacts?**

INTERVIEWER'S NOTE *Please read out your answers.*

OUTPUT FORMAT	VALUE	VALUE LABEL
covidF.	1	Not at all
	2	A little
	3	Moderate
	4	Strong
	5	Very strong
	-2	Don't know
	-1	Denied

ASK NUMBER PAPI 78

VARIABLENAME **FF_covid1_8**

VARIABLENLABEL COVID19 : Influence Survey domain: Social contacts and social participation QUESTION TEXT ZP **How positively or negatively have you experienced this change?**

QUESTION TEXT PX **How positively or negatively did Mr/Mrs [name ZP] experience this change?**

INTERVIEWER'S NOTE *Please read out your answers.*

FILTER FEED covid1_8 IN (2,3,4,5)

OUTPUT FORMAT	VALUE	VALUE LABEL
covidF.	1	Predominantly negative
	2	Overall balanced
	3	Predominantly positive
	-2	Don't know

-1 Denied

ASK NUMBER PAPI 79

VARIABLENAME **lonely**

VARIABLE LABEL Loneliness

QUESTION TEXT ZP **How often have you felt lonely in the last week?**

QUESTION TEXT PX **How often has Mr/Mrs [name ZP] felt lonely in the last week?**

INTERVIEWER NOTE *Please read out answers.*

OUTPUT FORMAT	VALUE	VALUE LABEL
ONE4F.	1	Never or almost never
	2	Sometimes
	3	Mostly
	4	Always or almost always
	-2	Don't know
	-1	Denied

QUESTION NUMBER PAPI 80_A

VARIABLENAME **sozunt1**

VARIABLE LABEL soz . support: greater gifts made

QUESTION TEXT ZP **The following is about the support you have received from others in the past 12 months or have given yourself.**

Have you given money or major gifts in kind to anyone in the past 12 months?

QUESTION TEXT PX **The following is about the support that Mr/Mrs [name ZP] receives from others. has received or given himself in the past 12 months.**

Has Mr/Mrs [name ZP] given money or major gifts in kind to anyone in the past 12 months?

OUTPUT FORMAT	VALUE	LABEL
N0J1F.	0	No
	1	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME **sozunt2**

VARIABLE LABEL soc. support: receive larger gifts

QUESTION TEXT ZP **Have you yourself received money as a gift or larger gifts in kind in the past 12 months?**

QUESTION TEXT PX **In the past 12 months, has Mr/Mrs [name ZP] himself received money as a gift or received major gifts in kind?**

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes
	-2	Don't know
	-1	Denied

QUESTION NUMBER PAPI 80_BVARIABLENAME **sozunt3**

VARIABLENLABELsoz . support: support given

QUESTION TEXT ZP **How often have you helped other people with their chores or tasks?**
We do not mean paid services.

QUESTION TEXT PX **How often did Mr/Mrs [name ZP] help other people with their tasks or errands?**
We do not mean paid services.

INTERVIEWER NOTE *Please read out answers.*

OUTPUT FORMAT	VALUE	VALUE LABEL
HAEUF5F.	1	Never
	2	Rare
	3	Sometimes
	4	Frequently
	5	Always
	-2	Don't know
	-1	Denied

VARIABLENAME **sozunt4**

VARIABLENLABELsoz . support: receive support

QUESTION TEXT ZP **How often have you received help from other people to do tasks and accomplish things?**
We do not mean paid services.

QUESTION TEXT PX **How often did Mr/Mrs [name ZP] receive help from other people with tasks and accomplishments?**
We do not mean paid services.

INTERVIEWER NOTE *Please read out answers.*

OUTPUT FORMAT	VALUE	VALUE LABEL
HAEUF5F.	1	Never
	2	Rare
	3	Sometimes
	4	Frequently
	5	Always
	-2	Don't know

-1 Denied

QUESTION NUMBER PAPI80_C

VARIABLENAME **sozunt5**

VARIABLENLABELsoz . support: comfort given

QUESTION TEXT ZP **How often have you comforted or cheered up other people?**

QUESTION TEXT PX **How often did Mr/Mrs [name ZP] comfort or cheer up other people?**

INTERVIEWER NOTE *Please read out answers.*

OUTPUT FORMAT	VALUE	VALUE LABEL
HAEUF5F.	1	Never
	2	Rare
	3	Sometimes
	4	Frequently
	5	Always
	-2	Don't know
	-1	Denied

VARIABLENAME **sozunt6**

VARIABLENLABELsoz . support: receive comfort

QUESTION TEXT ZP **How often have you been comforted or cheered up yourself?**

QUESTION TEXT PX **How often was Mr/Mrs [name ZP] himself comforted or cheered up?**

INTERVIEWER NOTE *Please read out answers.*

OUTPUT FORMAT	VALUE	VALUE LABEL
HAEUF5F.	1	Never
	2	Rare
	3	Sometimes
	4	Frequently
	5	Always
	-2	Don't know
	-1	Denied

ASK NUMBER PAPI 81

VARIABLENAME **generat1**

VARIABLENLABELGenerativity : Importance: Sharing experiences

QUESTION TEXT ZP **How important is it to you to pass on your experience to younger people?**

QUESTION TEXT PX **How important is it for Mr/Mrs [name ZP] to pass on his/her experience to younger people?**

INTERVIEWER'S NOTE *Please read out your answers.*

OUTPUT FORMAT VALUE	VALUE LABEL
WICHT4F.	
1	Not important at all
2	Rather not important
3	Rather important
4	Very important
-2	Don't know
-1	Denied

VARIABLE NAME **generat1_2**

VARIABLE LABEL Generativity: Frequency: Passing on experiences

QUESTION TEXT **How often do you do that?**

ZP QUESTION **How often does Mr/Mrs [name ZP] do this?**

TEXT PX

INTERVIEWER'S NOTE *Please read out your answers.*

OUTPUT FORMAT VALUE	VALUE LABEL
HAEUF4F.	
1	Never
2	Rather rare
3	Sometimes
4	Frequently
-2	Don't know
-1	Denied

VARIABLENAME **generat2**

VARIABLENLABELGenerativity : Importance: imparting social values

QUESTION TEXT ZP **How important is it to you to teach social values (e.g. helpfulness) to younger people?**

QUESTION TEXT PX **How important is it for Mr/Mrs [name ZP] to teach social values (e.g. helpfulness) to younger people?**

INTERVIEWER'S NOTE *Please read out your answers.*

OUTPUT FORMAT VALUE	VALUE LABEL
WICHT4F.	
1	Not at all important
2	Rather not important
3	Rather important
4	Very important
-2	Don't know
-1	Denied

VARIABLENAME **generat2_2**

VARIABLENLABELGenerativity : Frequency: Teaching social values

QUESTION TEXT ZP **How often do you do that?**
 QUESTION TEXT PX **How often does Mr/Mrs [name ZP] do this?**
 INTERVIEWER NOTE *Please read out the answers.*

OUTPUT FORMAT	VALUE	VALUE LABEL
HAEUF4F.	1	Never
	2	Rather rare
	3	Sometimes
	4	Frequently
	-2	Don't know
	-1	Denied

VARIABLENAME **generat3**
 VARIABLE LABEL Generativity: Importance: Being a role model
 QUESTION TEXT ZP **How important is it for you to be a role model for younger people?**
 QUESTION TEXT PX **How important is it for Mr/Mrs [name ZP] to be a role model for younger people?**
 INTERVIEWER NOTE *Please read out the answers.*

OUTPUT FORMAT	VALUE	VALUE LABEL
WEIGHT4F.	1	Not important at all
	2	Rather not important
	3	Rather important
	4	Very important
	-2	Don't know
	-1	Denied

VARIABLENAME **generat3_2**
 VARIABLE LABEL Generativity: Frequency: Being a role model
 QUESTION TEXT ZP **How often do you do that?**
 QUESTION TEXT PX **How often does Mr/Mrs [name ZP] do this?**
 INTERVIEWER NOTE *Please read out the answers.*

OUTPUT FORMAT	VALUE	VALUE LABEL
HAEUF4F.	1	Never
	2	Rather rare
	3	Sometimes
	4	Frequently
	-2	Don't know
	-1	Denied

ASK NUMBER PAPI 82VARIABLENAME **anomy1**

VARIABLENLABELAnomie: social way of life

QUESTION TEXT ZP **In the following, we would like to know how you feel about your relationship to today's society.****Do you feel that you are getting worse and worse at coping with today's social way of life?**QUESTION TEXT PX **In the following we would like to know how Mr/Mrs [name ZP] feels about his/her relationship to today's society.****Does Mr/Mrs [name ZP] feel that he/she is getting worse and worse at coping with today's way of life in society?**INTERVIEWER NOTE *Please read out answers.*

OUTPUT FORMAT VALUE	VALUE LABEL
---------------------	-------------

ZUTR4_1F.	1Does not apply
2	Rather not applicable
3	More likely to apply
4	Applies
	-2Don't know
-1	Denied

VARIABLENAME **anomy2**

VARIABLENLABELAnomie: values

QUESTION TEXT ZP **Do you have the feeling that your own values fit less and less with the values of today's society?**QUESTION TEXT PX **Does Mr/Mrs [name ZP] feel that his/her own values are becoming less and less in line with the values of today's society?**INTERVIEWER NOTE *Please read out answers, enter directly if necessary.*

OUTPUT FORMAT VALUE	VALUE LABEL
---------------------	-------------

ZUTR4_1F.	1Does not apply
2	Rather not applicable
3	More likely to apply
4	Applies
	-2Don't know
-1	Denied

VARIABLENAME **anomy3**

VARIABLENLABELAnomy : Orientation

QUESTION TEXT ZP **Do you feel that today's society is changing so fast that you no longer know what to look for?**

QUESTION TEXT PX **Does Mr/Mrs [name ZP] feel that today's society is changing so fast that he/she no longer knows what to look for?**

INTERVIEWER NOTE *Please read out answers, enter directly if necessary.*

OUTPUT FORMAT	VALUE	VALUE LABEL
ZUTR4_1F.	1	Does not apply
	2	Rather not applicable
	3	More likely to apply
	4	Applies
	-2	Don't know
	-1	Denied

ASK NUMBER PAPI 83

VARIABLENAME **covid1_11**

VARIABLENLABELCOVID19 : Corona pandemic alienates from society

QUESTION TEXT ZP **Do you feel that the Corona pandemic has alienated you from society?**

QUESTION TEXT PX **Does Mr/Mrs [name ZP] feel that the Corona pandemic has alienated him/her from society?**

INTERVIEWER'S NOTE *Please read out your answers.*

OUTPUT FORMAT	VALUE	VALUE LABEL
covidF.	1	Not at all
	2	A little
	3	Moderate
	4	Strong
	5	Very strong
	-2	Don't know
	-1	Denied

10 Value system

ASK NUMBER PAPI

84

VARIABLENAME indValue1

VARIABLENLABELIndiv . value system: doing things your own way

QUESTION TEXT ZP **Every person has certain ideas that determine their life and behaviour.
We have already touched on a few of them. How
important is it to you**

... do things your own way?

QUESTION TEXT PX **Every person has certain ideas that determine their life and behaviour.
We have already touched on a few of them. How
important is it to Mr/Mrs [name ZP]?**

... to do things his/her own way?

INTERVIEWER NOTE *Please read out answers, enter directly if necessary*

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

WICHT4F.	1	Not at all important
	2	Rather not important
	3	Rather important
	4	Very important
		-2Don't know
	-1	Denied

VARIABLENAME indValue2

VARIABLENLABELIndiv . value system: being wealthy

QUESTION TEXT **... being wealthy, having a lot of money and being able to afford expensive things?**

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

WICHT4F.	1	Not at all important
	2	Rather not important
	3	Rather important
	4	Very important
		-2Don't know
	-1	Denied

VARIABLENAME indValue3

VARIABLENLABELIndiv . value system: avoid dangers and have a safe environment QUESTION

TEXT **... to avoid what is dangerous and have a safe environment?**

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

WICHT4F.	1	Not at all important
----------	---	----------------------

2	Rather not important
3	Rather important
4	Very important
-2	Don't know
-1	Denied

VARIABLENAME **indValue4**
 VARIABLE LABEL Indiv. value system: having a good time
 QUESTION TEXT **... have a good time and enjoy yourself?**

OUTPUT FORMAT	VALUE	VALUE LABEL
WICHT4F.	1	Not important at all
	2	Rather not important
	3	Rather important
	4	Very important
	-2	Don't know
	-1	Denied

VARIABLE NAME **indValue5**
 VARIABLE LABEL Indiv. value system: Doing good for society
 QUESTION TEXT **... to do something good for society?**

OUTPUT FORMAT	VALUE	VALUE LABEL
WICHT4F.	1	Not important at all
	2	Rather not important
	3	Rather important
	4	Very important
	-2	Don't know
	-1	Denied

VARIABLE NAME **indValue6**
 VARIABLE LABEL Indiv. value system: getting achievements recognised
 QUESTION TEXT **... that other people recognise your achievements?**
 ZP **... that other people recognise his/her achievements?**

OUTPUT FORMAT	VALUE	VALUE LABEL
PX		

WICHT4F.	1	Not important at all
	2	Rather not important
	3	Rather important
	4	Very important

-2 Don't know

-1 Denied

VARIABLENAME **indValue7**

VARIABLE LABEL Indiv. value system: taking risks

QUESTION TEXT **... to take a risk, experience adventure and lead an exciting life?**

<i>OUTPUT FORMAT</i>	<i>VALUE</i>	<i>VALUE LABEL</i>
WICHT4F.	1	Not important at all
	2	Rather not important
	3	Rather important
	4	Very important
	-2	Don't know
	-1	Denied

VARIABLENAME **indValue8**

VARIABLE LABEL Indiv. value system: avoid offending others

QUESTION TEXT **... to avoid offending others?**

<i>OUTPUT FORMAT</i>	<i>VALUE</i>	<i>VALUE LABEL</i>
WICHT4F.	1	Not important at all
	2	Rather not important
	3	Rather important
	4	Very important
	-2	Don't know
	-1	Denied

VARIABLENAME **indValue9**

VARIABLE LABEL Indiv. value system: taking care of nature and the environment

QUESTION TEXT **... to take care of nature and the environment?**

<i>OUTPUT FORMAT</i>	<i>VALUE</i>	<i>VALUE LABEL</i>
WICHT4F.	1	Not important at all
	2	Rather not important
	3	Rather important
	4	Very important
	-2	Don't know
	-1	Denied

VARIABLENAME **indValue10**

VARIABLE LABEL Indiv. value system: traditions to be respected

QUESTION TEXT ... respect traditions that you have learned from your family or religion?
 ZP ... respect traditions that he/she has learned from his/her family or religion?

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

PX

WICHT4F.	1	Not important at all
	2	Rather not important
	3	Rather important
	4	Very important
	-2	Don't know
	-1	Denied

ASK NUMBER PAPI**85**

VARIABLENAME spirit8

VARIABLENLABEL Spirituality : importance of faith in life

QUESTION TEXT ZP **How important is your faith or spirituality to you in your life?
 This can also be detached from a particular religion.**

QUESTION TEXT PX **How important is Mr/Mrs [name ZP]'s faith or spirituality in his/her life?
 This can also be detached from a particular religion.**

INTERVIEWER NOTE *Please read out answers, if necessary enter them directly...*

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

WICHT4F.	1	Not at all important
	2	Rather not important
	3	Rather important
	4	Very important
	-2	Don't know
	-1	Denied

ASK NUMBER PAPI**86**

VARIABLENAME stertod1

VARIABLENLABEL Setting on dying and death: Acceptance

QUESTION TEXT ZP **How easy is it for you to accept that one day you will die and be dead?**

QUESTION TEXT PX **How easy is it for Mr/Woman [name ZP] to accept that he/she will die one day and is dead?**

INTERVIEWER NOTE *Please read out answers, enter directly if necessary.*

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

EASY4F.	1	Not easy at all
	2	Rather not easy
	3	Rather light
	4	Very light

-2Don't know
-1 Denied

ASK NUMBER PAPI**87**VARIABLENAME **stertod2**

VARIABLE LABEL Setting. on dying and death: Stressful thought

QUESTION TEXT ZP **How much of a burden is the thought of being dead?**QUESTION TEXT PX **How much does the thought of being dead weigh on Mr/Mrs [name ZP]?**INTERVIEWER'S NOTE *Please read out answers.*

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

STRONG4F.	1	Not strong at all
	2	Rather not strong
	3	Rather strong
	4	Very strong
	-2	Don't know
	-1	Denied

ASK NUMBER PAPI**88**VARIABLENAME **stertod3**

VARIABLE LABEL Setting on dying and death: Fear of

your own dying QUESTION TEXT ZP **How strong is your fear of your own dying?**QUESTION TEXT PX **How strong is Mr/Mrs [name ZP]'s fear of his own death?**INTERVIEWER'S NOTE *Please read out answers.*

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

STRONG4F.	1	Not strong at all
	2	Rather not strong
	3	Rather strong
	4	Very strong
	-2	Don't know
	-1	Denied

ASK NUMBER PAPI**89**VARIABLENAME **covid1_9**

VARIABLE LABEL COVID19 : Influence Survey domain: Values and attitudes

QUESTION TEXT ZP **How much did the Corona pandemic influence your thoughts about your own death and dying?**QUESTION TEXT PX **How much did the Corona pandemic influence Mr/Mrs [name ZP]'s thoughts on his/her own death and dying?**

INTERVIEWER'S NOTE *Please read out your answers.*

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

covidF.	1	Not at all
	2	A little
	3	Moderate
	4	Strong
	5	Very strong
	-2	Don't know
	-1	Denied

ASK NUMBER PAPI **90**

VARIABLENAME **FF_covid1_9**

VARIABLENLABELCOVID19 : Influence Survey area: Values and attitudes QUESTION

TEXT ZP **How positively or negatively did you experience this change?**

QUESTION TEXT PX **How positively or negatively did Mr/Mrs [name ZP] experience this change?**

INTERVIEWER'S NOTE *Please read out your answers.*

FILTER FEED covid1_9 IN (2,3,4,5)

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

covidF.	1	Predominantly negative
	2	Overall balanced
	3	Predominantly positive
	-2	Don't know
	-1	Denied

11 Well-being and Life satisfaction

ASK NUMBER PAPI **91**

VARIABLENAME **panas1**

VARIABLENLABELPANAS : enthusiastic

QUESTION TEXT ZP **The following statements deal with feelings.
Please tell me approximately how often you have experienced the feelings mentioned in the
last 12 months.**
How often have you felt ... in the last year?

... enthusiastic

QUESTION TEXT PX **The following statements deal with feelings.
Please tell me how often Mr/Mrs [name ZP] has the above feelings in the
last 12 months approximately.**
How often has Mr/Mrs [name ZP] felt ... in the last year?

... enthusiastic

INTERVIEWER'S NOTE *Please read out answers.*

OUTPUT FORMAT	VALUE	VALUE LABEL
PANAS5F.	1	Never
	2	Rather rare
	3	Sometimes
	4	Frequently
	5	Very often
		-2Don't know
	-1	Denied

VARIABLENAME **panas2**

VARIABLENLABELPANAS : attentive

QUESTION TEXT **... attentive**

OUTPUT FORMAT	VALUE	VALUE LABEL
PANAS5F.	1	Never
	2	Rarely
	3	Sometimes
	4	Frequently
	5	Very often
		-2Don't know
	-1	Denied

VARIABLENAME **panas3**

VARIABLENLABELPANAS : joyfully excited, expectantly

QUESTION TEXT **... joyfully excited, expectantly**

<i>OUTPUT FORMAT</i>	<i>VALUE</i>	<i>VALUE LABEL</i>
PANAS5F.	1	Never
	2	Rather rare
	3	Sometimes
	4	Frequently
	5	Very often
	-2	Don't know
	-1	Denied

VARIABLENAME **panas4**
VARIABLE LABEL PANAS: animated
QUESTION TEXT **... stimulated**

<i>OUTPUT FORMAT</i>	<i>VALUE</i>	<i>VALUE LABEL</i>
PANAS5F.	1	Never
	2	Rather rare
	3	Sometimes
	4	Frequently
	5	Very often
	-2	Don't know
	-1	Denied

VARIABLE NAME **panas5**
VARIABLE LABEL PANAS: Determined
QUESTION TEXT **... determined**

<i>OUTPUT FORMAT</i>	<i>VALUE</i>	<i>VALUE LABEL</i>
PANAS5F.	1	Never
	2	Rather rare
	3	Sometimes
	4	Frequently
	5	Very often
	-2	Don't know
	-1	Denied

QUESTION TEXT ZP

Now it's about your mood.**For the following questions, please think about how you have felt most of the time during the last 14 days.****Are you feeling depressed?**

QUESTION TEXT PX

Now it is about the mood of Mr/Mrs [name ZP].**For both of the following questions, please think about how Mr/Mrs [name ZP] has felt most of the time during the last 14 days.****Does Mr/Mrs [name ZP] feel depressed?**

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME

depress2

VARIABLE LABEL

Depressiveness: it is hard to get up?

QUESTION TEXT ZP
together?**Do you find it difficult to pull yourself**

QUESTION TEXT PX

Does Mr/Mrs [name ZP] find it difficult to get up?

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME

depress3

VARIABLENLABELDepressiveness

: Enjoying life

QUESTION TEXT ZP

Can you enjoy your life even if some things are harder for you?

QUESTION TEXT PX

Can Mr/Mrs [name ZP] enjoy his/her life even if some things are harder for him/her?

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME

depress4

VARIABLENAME

Depressiveness:

brooding a lot QUESTION TEXT ZP
to brood a lot?**Do you have**

QUESTION TEXT PX

Does Mr/Mrs [name ZP] have to brood a lot?

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes
	-2	Don't know
	-1	Denied

ASK NUMBER PAPI**93**

VARIABLENAME

valofli1

VARIABLENLABELValuation of Life: optimistic

QUESTION TEXT ZP

The following questions are about your attitude to life.**Do you feel rather optimistic at the moment?**

QUESTION TEXT PX

The following questions are about Mr/Mrs [name ZP]'s attitude towards life.**Does Mr/Mrs [name ZP] feel rather optimistic at the moment?**

INTERVIEWER'S NOTE

Please read out answers.

OUTPUT FORMAT	VALUE	VALUE LABEL
NWNJ3F.	0	No
	1	Neither/nor
	2	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME

valofli2

VARIABLE LABEL

Valuation of Life: looking forward to many things every

day QUESTION TEXT ZP **Are there many things you look forward to every day?**

QUESTION TEXT PX

Are there many things that Mr/Mrs [name ZP] looks forward to every day?

INTERVIEWER NOTE

Please read out answers, enter directly if necessary.

OUTPUT FORMAT	VALUE	VALUE LABEL
NWNJ3F.	0	No
	1	Neither/nor
	2	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME

valofli3

VARIABLENLABELValuation of Life: perceive present

life as useful QUESTION TEXT ZP

Do you feel that your current life is**useful?**

QUESTION TEXT PX

Does Mr/Mrs [name ZP] find his/her current life useful?

INTERVIEWER NOTE *Please read out answers, enter directly if necessary.*

OUTPUT FORMAT	VALUE	VALUE LABEL
NWNJ3F.	0	No
	1	Neither/nor
	2	Yes
		-2Don't know
	-1	Denied

VARIABLENAME **valofli5**

VARIABLENLABEL Valuation of Life: strong will to live

QUESTION TEXT ZP **Do you have a strong will to live at the moment?**

QUESTION TEXT PX **Does Mr/Mrs [name ZP] have a strong will to live at the moment?**

INTERVIEWER NOTE *Please read out answers, enter directly if necessary.*

OUTPUT FORMAT	VALUE	VALUE LABEL
NWNJ3F.	0	No
	1	Neither/nor
	2	Yes
		-2Don't know
	-1	Denied

VARIABLENAME **valofli6**

VARIABLENLABEL Valuation of Life:

Life has a meaning QUESTION TEXT ZP **Does life have meaning for you?**

QUESTION TEXT PX **Does life have a meaning for Mr/Mrs [name ZP]?**

INTERVIEWER NOTE *Please read out answers, enter directly if necessary.*

OUTPUT FORMAT	VALUE	VALUE LABEL
NWNJ3F.	0	No
	1	Neither/nor
	2	Yes
		-2Don't know
	-1	Denied

VARIABLENAME **valofli7**

VARIABLENLABEL Valuation of Life: Achieving Life Goals

QUESTION TEXT ZP **Do you feel able to achieve your goals in life?**

QUESTION TEXT PX **Does Mr/Mrs [name ZP] feel able to achieve his/her life goals?**

INTERVIEWER NOTE *Please read out answers, enter directly if necessary.*

OUTPUT FORMAT	VALUE	VALUE LABEL
NWNJ3F.	0	No
	1	Neither/nor
	2	Yes
		-2Don't know
	-1	Denied

VARIABLENAME **valofli8**

VARIABLENLABEL Valuation of Life: hopeful attitude

QUESTION TEXT ZP **Based on your personal attitude to life (e.g. beliefs), are you more hopeful in principle?**

QUESTION TEXT PX **Is Mr/Mrs [name ZP] on principle more hopeful because of his/her personal attitude to life (e.g. principles of faith)?**

INTERVIEWER NOTE *Please read out answers, enter directly if necessary.*

OUTPUT FORMAT	VALUE	VALUE LABEL
NWNJ3F.	0	No
	1	Neither/nor
	2	Yes
		-2Don't know
	-1	Denied

VARIABLENAME **valofli9**

VARIABLE LABEL Valuation of Life: making the most of life QUESTION

TEXT ZP **Do you plan to make the most of your life?**

QUESTION TEXT PX **Does Mr/Mrs [name ZP] intend to make the most of his/her life?**

INTERVIEWER NOTE *Please read out answers, enter directly if necessary.*

OUTPUT FORMAT	VALUE	VALUE LABEL
NWNJ3F.	0	No
	1	Neither/nor
	2	Yes
		-2Don't know
	-1	Denied

VARIABLENAME **valofli10**

VARIABLENLABEL Valuation of Life: Finding ideas out of difficult situations

QUESTION TEXT ZP **Do you have many ideas for getting out of a difficult situation?**

QUESTION TEXT PX **Does Mr/Mrs [name ZP] have many ideas for getting out of a difficult situation?**

INTERVIEWER NOTE *Please read out answers, enter directly if necessary.*

OUTPUT FORMAT	VALUE	VALUE LABEL
NWNJ3F.	0	No
	1	Neither/nor
	2	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME **valofli11**

VARIABLENLABEL Valuation of Life: ways to achieve important things

QUESTION TEXT ZP **Can you think of many ways to achieve the things that are important to you?**

QUESTION TEXT PX **Can Mr/Mrs [name ZP] think of many ways to achieve the things that are important to him/her?**

INTERVIEWER NOTE *Please read out answers, enter directly if necessary.*

OUTPUT FORMAT	VALUE	VALUE LABEL
NWNJ3F.	0	No
	1	Neither/nor
	2	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME **valofli12**

VARIABLENLABEL Valuation of Life: Way to solve problem

QUESTION TEXT ZP **Do you always find a way to solve a problem, even when others have already given up?**

QUESTION TEXT PX **Does Mr/Mrs [name ZP] always find a way to solve a problem even when others have already given up?**

INTERVIEWER NOTE *Please read out answers, enter directly if necessary.*

OUTPUT FORMAT	VALUE	VALUE LABEL
NWNJ3F.	0	No
	1	Neither/nor
	2	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME **valofli13**

VARIABLENLABEL Valuation of Life: achieving self-set goals

QUESTION TEXT ZP **Do you generally achieve the goals you set for yourself?**

QUESTION TEXT PX **Does Mr/Mrs [name ZP] generally achieve the goals **he/she** sets for him/herself?**

INTERVIEWER NOTE *Please read out answers, enter directly if necessary.*

OUTPUT FORMAT VALUE	VALUE LABEL
---------------------	-------------

NWNJ3F.	0	No
	1	Neither/nor
	2	Yes
	-2	Don't know
	-1	Denied

ASK NUMBER PAPI

94

VARIABLENAME **meanli1**

VARIABLENLABEL Meaning in Life: Past: Own doing

QUESTION TEXT ZP **How good do you feel when you think about all the things you have done in the past?**

QUESTION TEXT PX **How good does Mr/Mrs [name ZP] feel when he/she thinks about all the things he/she has done in the past?**

INTERVIEWER'S NOTE *Please read out answers.*

OUTPUT FORMAT VALUE	VALUE LABEL
---------------------	-------------

GOOD5F.	1	Very poor
	2	Rather bad
	3	Partly/partly
	4	Rather good
	5	Very good
	-2	Don't know
	-1	Denied

ASK NUMBER PAPI

95

VARIABLENAME **meanli2**

VARIABLENLABEL Meaning in Life: Past: Meaning even in bad things

QUESTION TEXT ZP **How well do you manage, even in the unpleasant things that happen in the What is the meaning of what has happened in the past?**

QUESTION TEXT PX **How well does Mr/Mrs [name ZP] manage to make sense of even the unpleasant things that have happened in the past?**

INTERVIEWER'S NOTE *Please read out answers.*

OUTPUT FORMAT VALUE	VALUE LABEL
---------------------	-------------

GOOD5F.	1	Very poor
	2	Rather bad
	3	Partly/partly
	4	Rather good

5 Very good

-2 Don't know

-1 Denied

ASK NUMBER PAPI 96

VARIABLENAME **zufri**

VARIABLENLABEL General satisfaction

QUESTION TEXT ZP **All in all, how satisfied are you with your life at present?**
Please answer on a scale from 0 to 10. '0' means that you are completely
!!un!!satisfied, '10' means you are completely satisfied. With the
numbers in between you can grade your judgement.

QUESTION TEXT PX **All in all, how satisfied is Mr/Mrs [name ZP] with his/her life at present?**
Please answer on a scale from 0 to 10. '0' means that Mr/Mrs [name ZP] is completely
!!un!!satisfied, '10' means that Mr/Mrs [name ZP] is completely satisfied.
With the numbers in between you can grade your judgement.

OUTPUT FORMAT	VALUE	VALUE LABEL
ALGZU10F.	0	0=Totally dissatisfied
	1	1
	2	2
	3	3
	4	4
	5	5
	6	6
	7	7
	8	8
	9	9
	10	10=Totally satisfied
	-2	Don't know
	-1	Denied

ASK NUMBER PAPI**97**VARIABLENAME **covid1_10**

VARIABLENLABELCOVID19 : Influence Survey domain: well-being and life satisfaction QUESTION TEXT ZP

How much did the Corona crisis affect your life in the area of wellbeing and Life satisfaction influenced?QUESTION TEXT PX **How much has the Corona pandemic affected the well-being of Mr/Mrs [name ZP]?**INTERVIEWER'S NOTE *Please read out your answers.*

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

covidF.	1	Not at all
	2	A little
	3	Moderate
	4	Strong
	5	Very strong
	-2	Don't know
	-1	Denied

ASK NUMBER PAPI**98**VARIABLENAME **FF_covid1_10**

VARIABLENLABELCOVID19 : Influence Survey domain: Well-being and life satisfaction QUESTION TEXT

ZP **How positively or negatively did you experience this change?**QUESTION TEXT PX **How positively or negatively did Mr/Mrs [name ZP] experience this change?**INTERVIEWER'S NOTE *Please read out your answers.*

FILTER FEED covid1_10 IN (2,3,4,5)

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

covidF.	1	Predominantly negative
	2	Overall balanced
	3	Predominantly positive
	-2	Don't know
	-1	Denied

12 Biography

QUESTION NUMBER PAPI 99

VARIABLENAME **brfzp1**

VARIABLENLABEL Occupational biography Target person: End of full-time

occupation QUESTION TEXT ZP **Have you ever been gainfully employed?**

QUESTION TEXT PX **Has Mr/Mrs [name ZP] ever been gainfully employed?**

INTERVIEWER'S NOTE *Please read out your answers, enter them directly if necessary.*

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

BEREND3F.	1	Been gainfully employed
	2	Never been gainfully employed
	3	Still in full-time employment
	-2	Don't know
	-1	Denied

ASK NUMBER PAPI 101

VARIABLENAME **brfzp1_1**

VARIABLENLABEL Occupational biography Target person: End of main occupation (YYYY)

QUESTION TEXT ZP **Up to what year were you in full-time employment?**

QUESTION TEXT PX **Up to which year was Mr/Mrs [name ZP] employed full-time?**

FILTER FEEDbrfzp1 IN (1)

PROGRAMMING NOTE if value < gebdat3, then alert

Standard text for alert: "Please check if this entry is correct".

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

4.	(1900 - current year of the survey date)	Indication of the year
	-1	Denied
	-2	Don't know

ASK NUMBER PAPI 102

VARIABLENAME **brfzp2**

VARIABLENLABEL Occupational biography Target person: occupational position

QUESTION TEXT ZP **What was your last/do you have in your main occupation?**

QUESTION TEXT PX **What was the occupational status of Mr/Mrs [name ZP] in his/ her last/ main occupation?**

INTERVIEWER'S NOTE *Read aloud categories*
PGH = Production cooperative of the craft sector

FILTER FEEDbrfzp1 IN (1,3)

OUTPUT FORMAT	VALUE	VALUE LABEL
CAREER7F	10	Self-employed farmers or cooperative farmers
	20	Academics in the liberal professions (doctors, lawyers, tax consultants, etc.)
	25	Assisting family members
	30	Self-employed, Ich-AG or PGH member
	40	Civil servants, judges, professional soldiers, namely ...
	50	Employees
	60	Workers
	-2	Don't know
	-1	Denied

VARIABLENAME **brfzp2_1**

VARIABLENLABEL Occupational biography Target person: occupational position -
more specific QUESTION TEXT. **Can you be more specific?**

INTERVIEWER NOTE *Please read out answers, enter answer directly if necessary.*
PGH = Production cooperative of the craft sector

FILTER FEEDbrfzp1 IN (1,3)AND brfzp2 IN (10,20,30,40,50,60)

OUTPUT FORMAT	VALUE	VALUE LABEL
BERUFSUB	11	11 - Self-employed farmer: with a utilised agricultural area of less than 10ha
	12	12 - Self-employed farmers: with a utilised agricultural area of 10ha and more
	13	13 - Self-employed farmers: Cooperative farmers (formerly LPG)
	21	21 - Academics in independent profession no other employees
	22	22 - Academics in independent profession: 1 to 4 employees
	23	23 - Academics in independent profession: 5 and more employees
	31	31 - Self-employed, Ich-AG or PGH member no other employees
	32	32 - Self-employed, Ich-AG or PGH member: 1 to 5 employees
	33	33 - Self-employed, Ich-AG or PGH member: 5 and more employees
	34	34 - Self-employed, Ich-AG or PGH member: PGH member
	41	41 - Civil servants, judges, professional soldiers in the ordinary service or in a comparable category
	42	42 - Officials, judges, professional soldiers: in the intermediate service or in a comparable category
	43	43 - Civil servants, judges, professional soldiers: in the higher service or in a comparable career bracket
	44	44 - Civil servants, judges, professional soldiers: in the higher service or in a comparable category

- 51 51 - Salaried employees: with executive activity according to general instructions (e.g. salesperson, data typist, secretarial assistants, care assistants).
- 52 52 - Salaried employees: with skilled work done according to instructions (e.g. clerk, accountant, technical draughtsman).
- 53 53 - Salaried employees: with independent performance in a responsible position or with specialist responsibility for personnel (e.g. scientific staff, authorised signatories, heads of department or foremen in salaried employment).
- 54 54 - Salaried employees: with comprehensive management tasks and decision-making powers (e.g. directors, managing directors, members of the board of directors).
- 61 61 - unskilled worker
- 62 62 - Labourer: semi-skilled
- 63 63 - Labourer: Skilled worker
- 64 64 - Workers: foreman, column leader
- 65 65 - Workers: foreman, foreman, brigadier
- 2 Don't know
- 1 Denied

ASK NUMBER PAPI**103**VARIABLENAME **brfzp3**

VARIABLENLABEL Occupational biography Target person: has special designation
 QUESTION TEXT **Does this occupation still have a special designation?**

FILTER FEEDbrfzp1 IN (1,3)

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME **brfzp3x**

VARIABLENLABEL Occupational biography Target person: Job title (open)

QUESTION TEXT **Job title (open)**

FILTER FEEDbrfzp1 IN (1,3) AND brfzp3 IN (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
\$900.	Indication	Job title
	-2	Don't know
	-1	Denied

ASK NUMBER PAPI**104**VARIABLENAME **brfzp4x**

VARIABLE LABEL Job biography target person: Job description (open)

QUESTION TEXT ZP **What was the last occupation you did/do in your previous main occupation?**
Describe the professional activity to me in detail.

QUESTION TEXT PX **What was the most recent occupation of Mr/Mrs [name ZP] in his/her previous main occupation/is Mr/Mrs [name ZP] in his/her main occupation?**
Describe the professional activity to me in detail.

FILTER FEEDbrfzp1 IN (1,3)

OUTPUT FORMAT VALUE	VALUE LABEL
---------------------	-------------

\$900.	Specify	Job description
--------	---------	-----------------

-2Don't know

-1 Denied

VARIABLENAME **brfep**

VARIABLENLABEL Occupational biography Spouse: Consent

QUESTION TEXT PX **(Spouse) partner explicitly consents to having his/her last professional status collected.**INTERVIEWER NOTE *Please clarify whether consent can be obtained from the data subject!*

FILTER GUIDE PX respondent IN (2) AND (brfzp1 IN (2) AND famst1 IN (1,2,3,6,7,8))

OUTPUT FORMAT VALUE	VALUE LABEL
---------------------	-------------

N0J1F.	0	No
--------	---	----

1 Yes

VARIABLENAME **brfep1**

VARIABLENLABEL Occupational biography of spouse: End of main occupation QUESTION

TEXT ZP **Has your (spouse)/last spouse ever been gainfully employed?**QUESTION TEXT PX **Has the (spouse)partner/last spouse of Mr/Mrs [name ZP] ever been gainfully employed?**INTERVIEWER'S NOTE *Please read out your answers, enter them directly if necessary.*

FILTER FEED ZPbrfzp1 IN (2)

FILTER GUIDE PXbrfzp1 IN (2) AND ((famst1 IN (1,2,3,5) AND brfep IN (1)) OR famst1 IN (4,))

OUTPUT FORMAT VALUE	VALUE LABEL
---------------------	-------------

BEREND3F.	1Been	gainfully employed
-----------	-------	--------------------

2 Never been gainfully employed

3 Still in full-time employment

-2Don't know

-1 Denied

VARIABLENAME **brfep1_1**

VARIABLENLABEL Biography of spouse: End of main occupation (YYYY)

QUESTION TEXT ZP **Up to which year was your (spouse)partner/your last spouse in full-time employment?**

QUESTION TEXT PX **Up to which year was the (spouse)partner/last spouse of Mr/Mrs [name ZP] in full-time employment?**

FILTER FEED ZPbrfzp1 IN (2) AND brfep1 IN (1)

FILTER GUIDE PX brfzp1 IN (2) AND ((famst1 IN (1,2,3,5) AND brfep IN (1)) OR famst1 IN (4,)) AND brfep1 IN (1)

PROGRAMMING NOTE if value < gebdat3, then alert

Standard text for alert: "Please check if this entry is correct".

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

4.	(1900 - current year of the survey)	Indication of the year
----	-------------------------------------	------------------------

-1	Denied
----	--------

-2	Don't know
----	------------

VARIABLENAME	brfep2
VARIABLENLABEL	Occupational biography Spouse: occupational status
QUESTION TEXT ZP	What was your (spouse's)partner's/last spouse's occupational position in his/her last/has your (spouse's) partner's main occupation?
QUESTION TEXT PX	What was the occupational status of the (spouse)partner/last spouse of Mr/Mrs [name ZP] in his/ her last/ has his/ her (spouse) partner in his/her main gainful activity?
INTERVIEWER'S NOTE	<i>Read aloud categories</i> <i>PGH = Production cooperative of the craft sector</i>
FILTER GUIDE ZP	brfzp1 IN (2) AND brfep1 IN (1,3)
FILTER GUIDE PX	brfzp1 IN (2) AND ((famst1 IN (1,2,3,5) AND brfep IN (1)) OR famst1 IN (4)) AND brfep1 IN (1,3)

OUTPUT FORMAT	VALUE	VALUE LABEL
VOCATION7F	10	Self-employed farmers or cooperative farmers
	20	Academics in independent professions (doctors, lawyers, tax consultants, etc.)
	25	Assisting family members
	30	Self-employed , Ich-AG or PGH member
	40	Civil servants , judges, professional soldiers, namely ...
	50	Employees
	60	Workers
	-2	Don't know
	-1	Denied

VARIABLENAME	brfep2_1
VARIABLENLABEL	Occupational biography of spouse: occupational status - more specific
QUESTION TEXT.	Can you be more specific?
INTERVIEWER NOTE	<i>Please read out answers, enter answer directly if necessary.</i> <i>PGH = Production cooperative of the craft sector</i>
FILTER GUIDE ZP	brfzp1 IN (2) AND brfep1 IN (1 ,3) AND brfep2 IN (10,20,30,40,50,60) FILTER GUIDE
PX	brfzp1IN (2) AND ((famst1 IN (1,2,3,5) AND brfep IN (1)) OR famst1 IN (4)) AND brfep1 IN (1,3) AND brfep2 IN (10,20,30,40,50,60)

OUTPUT FORMAT	VALUE	VALUE LABEL
BERUFSUB	11	11 - Self-employed farmer: with a utilised agricultural area of less than 10ha
	12	12 - Self-employed farmers: with a utilised agricultural area of 10ha and more
	13	13 - Self-employed farmers: Cooperative farmers (formerly LPG)
	2121	Academics in independent profession: no other employees
	2222	Academics in independent profession: 1 to 4 employees

2323 - Academics in independent profession: 5 and more employees

3131 - Self-employed, Ich-AG or PGH member: no other employees

3232 - Self-employed, Ich-AG or PGH member: 1 to 5 employees

3333 - Self-employed, Ich-AG or PGH member: 5 and more employees

3434 - Self-employed, Ich-AG or PGH member: PGH member

4141 - Civil servants, judges, professional soldiers: in the ordinary service or in a comparable category

4242 - Officials, judges, professional soldiers: in the intermediate service or in a comparable category

4343 - Officials, judges, professional soldiers: in the higher service or in a comparable category

4444 - Civil servants, judges, professional soldiers: in the higher service or in a comparable category

5151 - Employee: with executive activity according to general instructions (e.g. salesperson, data typist, secretarial assistant, care assistant)

5252 - Salaried employees: with skilled work done according to instructions (e.g. clerk, accountant, technical draughtsman).

5353 - Salaried employees: with independent performance in a responsible position or with specialist responsibility for personnel (e.g. scientific staff, authorised signatories, heads of department or foremen in salaried employment).

5454 - Salaried employees: with extensive management tasks and decision-making powers (e.g. directors, managing directors, members of the board of directors)

61 61 -
Labourer:
unskilled

62 62 - Labourer: semi-skilled

63 63 - Labourer: Skilled worker

64 64 - Workers: foreman, column leader

65 65 - Workers: foreman, foreman, brigadier

-2Don't know

-1 Denied

VARIABLENAME **brfep3**

VARIABLENLABEL Occupational biography Spouse: has special designation

QUESTION TEXT **Does this occupation have any other special designation?**

FILTER FEED ZPbrfzp1 IN (2) AND brfep1 IN (1,3)

FILTER GUIDE PX brfzp1IN (2) AND ((famst1 IN (1,2,3,5) AND brfep IN (1)) OR famst1 IN (4,)) AND brfep1 IN (1,3)

OUTPUT FORMAT VALUE	VALUE LABEL
---------------------	-------------

N0J1F.	0	No
	1	Yes
		-2Don't know
	-1	Denied

VARIABLENAME **brfep3x**

VARIABLENLABELVEVE Occupational biography Spouse: Job title (open)

QUESTION TEXT **Job title (open)**

FILTER FEED ZPbrfzp1 IN (2) AND brfep1 IN (1,3) AND brfep3 IN (1)

FILTER GUIDE PX brfzp1IN (2) AND ((famst1 IN (1,2,3,5) AND brfep IN (1)) OR famst1 IN (4,)) AND brfep1 IN (1,3) AND brfep3 IN (1)

OUTPUT FORMAT VALUE	VALUE LABEL
---------------------	-------------

\$900.	Indication	Job title
		-2Don't know
	-1	Denied

VARIABLENAME **brfep4x**

VARIABLE LABEL Occupational biography of spouse: Occupational description (open)

QUESTION TEXT ZP **What was your (spouse's)/last spouse's last professional activity in his/her previous main gainful activity/is your (spouse's)/last spouse's last professional activity in his/her main gainful activity?**
Describe the professional activity to me in detail.

QUESTION TEXT PX **What was the last occupation of the (spouse)partner/last spouse of Mr/Mrs [name ZP] in his/her previous main occupation/ does the (spouse)partner/last spouse of Mr/Mrs [name ZP] carry out in his/her previous main occupation/ does the (spouse)partner/last spouse carry out in his/her previous main occupation/ does the (spouse)partner/last spouse carry out in his/her previous main occupation? What is your main occupation? Describe the professional activity in detail.**

FILTER FEED ZPbrfzp1 IN (2) AND brfep1 IN (1,3)

FILTER GUIDE PX brfzp1IN (2) AND ((famst1 IN (1,2,3,5) AND brfep IN (1)) OR famst1 IN (4,)) AND brfep1 IN (1,3)

OUTPUT FORMAT VALUE	VALUE LABEL
---------------------	-------------

\$900.	Specify	Job description
		-2Don't know
	-1	Denied

PAPI QUESTION NUMBER 105VARIABLENAME **request**

VARIABLENLABELWish to politics

QUESTION TEXT ZP **In the last few minutes of the interview, we would like to know what could be done to improve your specific everyday life?****If you allow me, I would like to record the answer, then it is ensured that nothing important is lost to me.**QUESTION TEXT PX **In the last few minutes of the interview, we would like to know what could be done to improve the concrete everyday life of Mr/Mrs [name ZP]?****If you allow me, I would like to record the answer, then it is ensured that nothing important is lost to me.**

INTERVIEWER NOTE *If interviewee indicates "don't know", please record anyway or make an appropriate entry.*

If necessary, start audio recording!

If the CP says little, please motivate him/her to continue by asking questions, e.g. "What do you mean exactly?", "Can you give an example?" or "You have already mentioned many things during our conversation, can you explain again?"

PROGRAMMING NOTEIf audio recording is possible, then start recording;

if no, wunschx variable is shown and filled in.

OUTPUT FORMAT VALUE LABEL

WUNSCH2F.	1Yes	, respondent agrees with the recording
	2	No, respondent does not agree with the recording
	-1	Denied

VARIABLENAME **wunschx**

VARIABLENLABELWish to the policy (open)

QUESTION TEXT ZP **What could be done to improve your concrete everyday life?**QUESTION TEXT PX **What could be done to improve the concrete everyday life of Mr/Mrs [name ZP]?**

INTERVIEWER NOTE *If ZP indicates "don't know", please record anyway or make an appropriate entry.*

If necessary, start audio recording!

If the CP says little, please motivate him/her to continue by asking questions, e.g. "What do you mean exactly?", "Can you give an example?" or "You have already mentioned many things during our conversation, can you explain again?"

FILTER FEED WISH IN (2)

PROGRAMMING NOTE Show the interviewer note also when recording is started so that interviewers can assist here as well.

OUTPUT FORMAT VALUE VALUE LABEL

\$9000.	Specify	Wish
		-2Don't know
	-1	Denied

13 COVID19

ASK NUMBER PAPI

106

VARIABLENAME covid2

VARIABLENLABELCOVID19 : own disease

QUESTION TEXT ZP Were you or have you yourself contracted COVID-19 from the coronavirus? QUESTION

TEXT PX Was or is Mr/Mrs [name ZP] himself/herself ill with COVID-19 due to the coronavirus?

INTERVIEWER'S NOTE Please read out your answers.

OUTPUT FORMAT	VALUE	VALUE LABEL
Covid2F. ZP	0	No
	1	Yes, I was diagnosed with COVID-19, but I have since recovered.
	2	Yes, I currently have COVID-19.
Covid2F. PX	0	No
	1	Yes, he/she had a diagnosis but has recovered in the meantime.
	2	Yes, he/she is currently ill.
	-2	Don't know
	-1	Denied

QUESTION NUMBER PAPI 107_1

VARIABLENAME covid3_1, covid3_2, covid3_3, covid3_4

VARIABLE LABEL

COVID19: Illness Environment: (Life/marital) partner

COVID19: Disease environment: Family environment

COVID19: Disease environment: Friends/acquaintances

COVID19: Disease environment: No

QUESTION TEXT ZP Have any of your relatives or acquaintances contracted COVID-19 from the coronavirus?

QUESTION TEXT PX Were or are relatives or acquaintances of Mr/Mrs [name ZP] ill with COVID-19 due to the coronavirus-?

INTERVIEWER'S NOTE Please read out your answers.

DATA PREPARATIONThis is a new variable!

PROGRAMMING NOTE

Multiple choice

covid3_4 is exclusive category, i.e. if this is selected, no other selection is possible.

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	(0)	not named
	(1)	called
covid3_1	1yes	, (life/marriage) partner/partner
covid3_2	2yes	, in the family environment
covid3_3	3yes	, among friends/acquaintances
covid3_4	4	No

-2Don't know

-1

Denied

QUESTION NUMBER PAPI 107_2**VARIABLENAME covid4_1, covid4_2, covid4_3, covid4_4**

VARIABLENLABELCOVID19 : Death Environment: (Life/marital) partner
 COVID19: Death environment: Family environment
 COVID19: Death environment:
 Friends/acquaintances COVID19: Death
 environment: No

QUESTION TEXT ZP **Have any relatives or acquaintances of yours died from COVID-19 due to the coronavirus?**

QUESTION TEXT PX **Have any relatives or acquaintances of Mr/Mrs [name ZP] died from COVID-19 due to coronavirus?**

INTERVIEWER'S NOTE *Please read out your answers.*

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	(0)	not named
	(1)	called
Covid4_1	1yes	, (life/marriage) partner/partner
Covid4_2	2yes	, in the family environment
Covid4_3	3yes	, among friends/acquaintances
Covid4_4	4	No

-2Don't know

-1

Denied

ASK NUMBER PAPI 108**VARIABLENNAMEcovid5_1 , covid5_2, covid5_3, covid5_4**

VARIABLENLABELCOVID19 : special protection measure: quarantine
 COVID19: special protection measure: visiting ban
 COVID19: special protection measure: other COVID19:
 special protection measure: no

QUESTION TEXT ZP **Have you been affected by one or more of the following protective measures?**

QUESTION TEXT PX **Was Mr/Mrs [name ZP] affected by one or more of the following protective measures?**

INTERVIEWER'S NOTE *Please read out your answers.*

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	(0)	not named
	(1)	called
covid5_1	1	Quarantine
covid5_2	2Ban on	contact or visitation
covid5_3	3	Other (continue with covid5_3x)

14 Conclusion of the conversation

QUESTION NUMBER PAPI 111

VARIABLENAME **panel**

VARIABLE LABEL Panel readiness

QUESTION TEXT **Finally, a completely different question:
It is planned to continue this research project with another survey at a later date.
May we keep your address so that we can contact you again in due course? Of course,
participation in the next survey is also voluntary.**

FILTER GUIDE interviewee IN (1) PROGRAMMING NOTE

ATTENTION: Panel question goes only to ZP!

Panel question not required for proxy interview, must be recorded in advance together with consent in PX interview and documented there.

ceres: Please enter in the intro if consent can be recorded and documented on the phone by interviewers.

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes

VARIABLENAME **address_zp**

VARIABLE LABEL Address recording ZP

QUESTION TEXT ZP **So that we can send you a thank you letter after the interview,
I would now like to briefly record your address.**

INTERVIEWER NOTE ZP *The address mask appears on the next page.*

Please record the full address of the target person here.

*When you have finished, please read out all the information again. Pay attention to
upper and lower case! Check the correctness of the names. If necessary, have the
information spelled out for you.*

FILTER GUIDE ZP respondent IN (1) AND panel IN (1)

VARIABLENAME **address_px**

VARIABLE LABEL Address recording PX

QUESTION TEXT ZP **So that we can reach you again for another survey, I would like to briefly record
your current address and complete your contact details.**

INTERVIEWER NOTE ZP *The address mask appears on the next page.*

*Please include the full address of the deputy here. Please also ask for
telephone numbers and e-mail addresses!*

*When you have finished, please read out all the information again. Pay attention to
upper and lower case! Check the correctness of the names. If necessary, have the
information spelled out for you.*

*If necessary, you can explain: "The address is only for the purpose of sending you a thank you
letter after the survey with a short questionnaire "Feedback on the*

Interview conversation" can send. "

FILTER FEED

ZPinterviewee IN (2)

Intermediate screen

VARIABLENAME

Screen 2

VARIABLE LABEL

Intermediate screen 2

QUESTION TEXT

Now we have reached the end of the interview.

infas: Here reference must still be made to CATI module 2

->now on to the interviewer questions

Please answer interviewer questions

immediately!

FILTER CONFIGURATION interviewee IN (1,2)

PROGRAMMING NOTEContinue to the interview questions (please insert our standard page here) 1: -> now continue to the interview questions

Interview questions on the interview situation

VARIABLENAME **einwill**
 VARIABLENLABEL Consent given
 QUESTION TEXT **How was consent given for the interview?**

OUTPUT FORMAT	VALUE	VALUE LABEL
EINWIL4F.	1	ZP spontaneously decided himself
	2	ZP decided by himself after reflection time
	3	ZP decided after consultation with others
	4	Other person decided for ZP

VARIABLENAME **third**
 VARIABLE LABEL Other persons present besides the target person
 QUESTION TEXT **Were there other people present in the interview? FILTER**
 FEED interviewee IN (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes
	-2	Don't know

VARIABLENAME **third1_1, third1_2, third1_3, third1_4, third1_5, third1_6**
 VARIABLENLABEL Other persons present besides the TARGET PERSON: Partner
 Other persons present besides the TARGET PERSON: Children
 Other persons present besides the TARGET PERSON: Other relatives Other
 persons present besides the TARGET PERSON: Other persons Other persons
 present besides the TARGET PERSON: Carers
 Other persons present besides the TARGET PERSON: not to be assigned
 QUESTION TEXT **Which persons were present?**
 FILTERED interviewer IN (1) AND third IN (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	(0)	not named
	(1)	called
third1_1	1	Partner
third1_2	2	Children
third1_3	3	Other relatives
third1_4	4	Other persons
third1_5	5	Caregivers
third1_6	6	unassignable

VARIABLENAME **thirdp**
 VARIABLENLABEL Other persons present in addition to the EXPRESS PERSON

QUESTION TEXT	Were there any other people present in the interview?	
FILTER	GUIDE interviewee IN (2)	
OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	1	Yes
	0	No
	-2	Don't know

VARIABLENAME	thirdp1_1, thirdp1_2, thirdp1_3, thirdp1_4, thirdp1_5, thirdp1_6, thirdp1_7	
	VARIABLENLABELOther persons present next to the CALLER: Target person Other persons present next to the CALLER: Partner Other persons present next to the CALLER: Children Other persons present in addition to the OUTPUT PERSON: Other relatives Other persons present in addition to the OUTPUT PERSON: Caregivers Other persons present in addition to the OUTCOMING PERSON: Other persons present in addition to the OUTCOMING PERSON: not to be assigned	
QUESTION TEXT	Which persons were present?	
	FILTER CONFIGURATION interviewee IN (2) AND thirdp IN (1)	
OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	(0)	not named
	(1)	called
thirdp1_1	1	Target
thirdp1_2	2	Partner
thirdp1_3	3	Children
thirdp1_4		4Other relatives
thirdp1_5	5	Caregivers
thirdp1_6		6Other persons
thirdp1_7	7	unassignable

VARIABLENAME	third_1	
	VARIABLENLABELOther persons present: Atmosphere influenced	
QUESTION TEXT	Did you feel that the interview atmosphere was influenced by the presence of third parties?	
FILTER GUIDE ZP	respondent IN (1) AND third IN (1) FILTER	
GUIDE PX	respondent IN (2) AND thirdp IN (1)	
OUTPUT FORMAT	VALUE	VALUE LABEL
POSNEG4F.	0	No
	1	Yes, positive
	2	Yes, negative
	3	Yes, positive and negative

VARIABLENAME	third_2	
--------------	----------------	--

VARIABLENLABEL Other persons present: response behaviour influenced

QUESTION TEXT **Did you feel that the respondent's response behaviour was influenced by the presence of third parties?**

FILTER GUIDE ZP respondent IN (1) AND third IN (1) FILTER

GUIDE PX respondent IN (2) AND thirdp IN (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
POSNEG4F.	0	No
	1	Yes, positive
	2	Yes, negative
	3	Yes, positive and negative

VARIABLENAME **third_3**

VARIABLENLABEL Other persons present: Response behaviour influenced: Strength

QUESTION TEXT **How much was the respondent's response behaviour influenced by the presence of third parties?**

FILTER GUIDE ZP respondent IN (1) AND third IN (1) AND third_2 IN (1,2,3) FILTER

GUIDE PX respondent IN (2) AND thirdp IN (1) AND third_2 IN (1,2,3)

OUTPUT FORMAT	VALUE	VALUE LABEL
STRONG5F.	1	Very strong
	2	Strong
	3	Medium
	4	Little
	5	Very little

VARIABLENAME **through**

VARIABLE LABEL Implementation difficulty

QUESTION TEXT **How difficult was it to conduct the interview in the given form?**

OUTPUT FORMAT	VALUE	VALUE LABEL
SCHWIN5F.	1	Very difficult
	2	Difficult
	3	Medium
	4	Not difficult
	5	Not difficult at all

VARIABLENAME **underbr**

VARIABLENLABEL Frequency Interruptions

QUESTION TEXT **How often were there interruptions to the interview, e.g. telephone calls, doorbells, going to the toilet, etc.?**

OUTPUT FORMAT	VALUE	VALUE LABEL
SUBB4F.	1	Frequently (>3)
	2	Sometimes (2-3)
	3	Rare (1)

4 None

VARIABLENAME **underbrx**

VARIABLE LABEL Frequency of interruptions: Causes (open)

QUESTION TEXT **What were the causes of the interruptions?**

FILTER FEEDING IN (1,2,3)

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

\$9000.	Specify	Causes
---------	---------	--------

VARIABLENAME **wirkpers1**

VARIABLENLABELZP appears disturbed, fearful, intimidated

QUESTION TEXT ZP **Did the target seem disturbed, frightened or display intimidating behaviour (e.g. whispering to avoid third parties overhearing)?**

QUESTION TEXT PX **Did the deputy seem disturbed, anxious or show intimidating behaviour (e.g. whispering to avoid third parties overhearing)?**

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

NIFRJA3F.	1Not at	all
	2	Questionable (not clearly yes or no)
	3	Definitely yes

VARIABLENAME **wirkpers2**

VARIABLENLABELZP appears irritable, quick-tempered

QUESTION TEXT ZP **Did the target person seem irritable or quick-tempered to you (e.g. did the person become louder or abusive during the interview)?**

QUESTION TEXT PX **Did the deputy seem irritable or short-tempered to you (e.g. did the person become louder or abusive during the interview)?**

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

NIFRJA3F.	1Not at	all
	2	Questionable (not clearly yes or no)
	3	Definitely yes

VARIABLENAME **IVcomment_1x**

VARIABLE LABEL Interviewer comment (open)

INTERVIEWER NOTE *Here is space for comments on the interview*

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

\$9000.	Indication	Notes on the interview / comments
---------	------------	-----------------------------------

VARIABLENAME **interviewer question_I04_NEW**

VARIABLE LABEL Closing text

FRAGETEXTThis is to certify that I have conducted the interview properly.

<i>OUTPUT FORMAT</i>	<i>VALUE</i>	<i>VALUE LABEL</i>
N0J1F.	1	Yes
	0	No

D80+: Old age in Germany

Template CATI Module 2 (contents in addition to PAPI) **ZP Interview & Proxy Interview**

Status: 07.07.2021

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General notes

For the output of the data in SPSS format, the codes for missing values defined in Table 1 are implemented following the DEAS:

Table 1. transcoding table for missing codes

Reason for non-availability of information	DEAS	Stata	SPSS output
Denies	-1	.V	-1
don't know	-2	.W	-2
does not apply (overfiltered)	-3	.T	-3
not surveyed (sample)	-4	.A	-4
No drop-off	-5		
Not specified	-6		
deleted	-7	.G	-7
Double nomination	-8		
Not possible (visual difficulties)		.U	-9
Not possible (problems with writing)		.X	-10
Aggregate value not formed (quality assurance)		.Q	-11
Not possible (hand gripping force)		.K	-12

For each variable contained in the dataset, the following meta-information is defined in this codebook:

- Variable name (VARIABLENAME),
- the assigned variable label (VARIABLENLABEL),
- the wording of the question (QUESTION TEXT),
- any notes to the interviewers (INTERVIEWER NOTE),
- if applicable, the condition under which the corresponding information is recorded (FILTERED),
- the format associated with the variable (OUTPUT FORMAT)
- the intended stored characteristics of the variables, if applicable the value range (VALUE)
- and the value labels provided by the linked format for the output (VALUE LABEL).

Intro

VARIABLENAME **interviewee** VARIABLENLABEL

Respondent: ZP vs PX

PROGRAMMING NOTE This

info comes from the EKP!

OUTPUT FORMAT	VALUE	VALUE LABEL
.	1	Target person (ZP)
	2	Proxy Interview (PX)

VARIABLENAME **sex p**

VARIABLENLABEL Proxy : Gender

QUESTION TEXT **What is the gender of the (proxy) respondent?** INTERVIEWER NOTE

Please document without asking! If not clear, please ask FILTER GUIDE

interviewee IN (2)

OUTPUT FORMAT	VALUE	VALUE LABEL
GESCHL2F.	1	Male
	2	Female
	-1	Denied

VARIABLENAME **alterp**

VARIABLENLABEL Proxy : Age

QUESTION TEXT **How old are you?**

FILTER GUIDE interviewee IN (2)

OUTPUT FORMAT	VALUE	VALUE LABEL
BEST8.	(0-120)	Age indication
	-1	Denied
	-2	Don't know

VARIABLENAME **beziehp**

VARIABLENLABEL Proxy : Relationship to ZP

QUESTION TEXT **What is your relationship with Mr/Mrs [name ZP]?**

INTERVIEWER NOTE *Please do NOT read out answer options!*

FILTER GUIDE interviewee IN (2)

OUTPUT FORMAT	VALUE	VALUE LABEL
BEZZP4P.	1	Wife/Husband
	2	Son/Daughter
	3	(Professional) nurse
	4	Other:[open: beziehpx]

-2Don't know

-1

Denied

VARIABLENAME **beziehpx**

VARIABLE LABEL Proxy: Relationship to ZP: Other

FILTERSUPPLY interviewee IN (2) AND

interviewee IN (4)

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

\$900.	Indication	
--------	------------	--

VARIABLENAME **AGREE6**

VARIABLENLABEL Consent Participation

QUESTION TEXT ZP As we informed you in the documents sent to you in advance, this study is being conducted by the infas Institute for Applied Social Science on behalf of the University of Cologne.

Your participation in the study is of course voluntary.

You can end the conversation at any time, even without giving a reason. If you do not want us to use what you tell us or parts of it, you have the right to have the information deleted at any time.

The interview will focus on questions about the housing situation, health and social relationships. We would like to ask for your consent.

QUESTION TEXT PX Do you agree with this?

This study is conducted by the infas Institute for Applied Social Science on behalf of the University of Cologne.

Your participation in the study is, of course, voluntary and you can end the interview at any time, even without giving a reason.

If Mr/Mrs [Name ZP] does not want us to use what you tell us or any part of it, Mr/Mrs [Name ZP] has the right to have the information deleted at any time. Questions are asked about the well-being, life history, current housing situation, religion, club memberships, health and social relationships of Mr/Mrs [name ZP].

FILTER FEED Do you agree with this?

respondent IN (1,2) AND agree1 IN (2,3)

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

J1N2F.	1	yes
--------	---	-----

	2	No -> EXIT: Then I thank you anyway for the interview and wish you a nice day.
--	---	--

Intermediate screen

VARIABLENAME	Screen0
VARIABLE LABEL	Intermediate screen 0 - General note at the beginning of the interview
QUESTION TEXT	<p>In order for us to be able to make reliable and valid statements with this study, we must adhere to high scientific standards. In doing so, it is important that we conduct our interviews in a comparable way, i.e. we ask all respondents the same questions. For most questions we give different answer options (e.g. yes/no) so that the answers can be compared with each other. If you are unsure about a question, please simply choose the answer option that seems most appropriate to you. Since we are interested in your personal opinion, there are no right or wrong answers.</p> <p>Please answer all questions as spontaneously as you can.</p> <p>If you do not want to answer a question (e.g. for personal reasons) or cannot answer the question (because you do not have the information), please contact us. missing), please tell me.</p>

VARIABLENAME **gender** VARIABLENLABEL

Gender of the ZP

QUESTION TEXT **Gender of the target person**

INTERVIEWER NOTE *Please document without asking! If not clear, ask.*

OUTPUT FORMAT	VALUE	VALUE LABEL
GESCHL2F.	1	Male
	2	Female
	-1	Denied

VARIABLENAME **gebdat1**

VARIABLENLABEL Date of birth (day)

QUESTION TEXT ZP **When were you born? Please tell me the day, the month and the year.**

QUESTION TEXT PX **Mr/Mrs [name ZP] was born [year of birth]. Can you please also tell me the day and month when Mr/Mrs [name ZP] was born?**

PROGRAMMING NOTE If PX: Show year of birth from registration office data.

Please display gebdat1 - gebdat3 on one screen.

OUTPUT FORMAT	VALUE	VALUE LABEL
2.	(1 - 31)	Day specification
	-1	Denied
	-2	Don't know

VARIABLENAME **gebdat2**

VARIABLE LABEL Date of birth (month)

OUTPUT FORMAT	VALUE	VALUE LABEL
2.	(1 - 12)	Month indication
	-1	Denied
	-2	Don't know

VARIABLENAME **gebdat3**

VARIABLENLABEL DATE OF BIRTH

(year)

FILTERCASES Surveyor

IN (1)

PROGRAMMING NOTE If worth ne year of birth from MA data, then alert

For alert the following standard text: "Please check if this entry is correct". Please create a dichotomous variable for all alerts.

<i>OUTPUT FORMAT</i>	<i>VALUE</i>	<i>VALUE LABEL</i>
4.	(1900 - 1940)	Indication of the year
	-1	Denied
	-2	Don't know

VARIABLENAME **famst1**
 VARIABLE LABEL Marital status
 QUESTION TEXT ZP **What is your marital status?**
 QUESTION TEXT PX **What is the marital status of Mr/Mrs [name ZP]?**
 INTERVIEWER'S NOTE *Please read out your answers, if necessary enter them directly.*

<i>OUTPUT FORMAT</i>	<i>VALUE LABEL</i>
1	Married/ Registered civil partnership
2	Married/registered civil partnership, but separated from spouse
3	Divorced/ registered civil partnership annulled
4	Widowed/ registered partner deceased
5	Single
	-2Don't know
-1	Denied

2 Housing

VARIABLENAME	dwellingf1
VARIABLE LABEL	Type of housing: full inpatient care
QUESTION TEXT ZP	Are you receiving full inpatient care?
QUESTION TEXT PX	Is Mr/Mrs [name ZP] being cared for as a full inpatient?
INTERVIEWER NOTE	<i>Please read out criteria, enter answer directly if necessary.</i>

Criteria for full inpatient care/ nursing:

A person receives full inpatient care if he or she

*(1) lives in a nursing home / old people's home **and***

*(2) is in need of care **and***

*(3) can fall back on 24-hour care, support and nursing, **and***

(4) the care, support and nursing is always possible by a nursing FACH-kraft.

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes
		-2Don't know
	-1	Denied

VARIABLENAME	dwellingf2
VARIABLENLABEL	Type of housing : Number of rooms
QUESTION TEXT ZP	How many rooms does your flat/house have apart from kitchen, bathroom and hallway?
QUESTION TEXT PX	How many rooms does his/her flat/house have apart from kitchen, bathroom and hallway?
FILTER FEED	wohnf1 IN (0)

OUTPUT FORMAT	VALUE	VALUE LABEL
BEST8.	(1 - 20)	Number of rooms
	-1	Denied
		-2Don't know

VARIABLENAME	dwellingf3
VARIABLE LABEL	Type of housing: tenure
QUESTION TEXT ZP	Do you live in this flat or house as a...
QUESTION TEXT PX	Does Mr/Mrs [name ZP] live in this flat or house as...?
INTERVIEWER NOTE	<i>Please read out answers, enter directly if necessary.</i>
FILTER FEED	livingf1 IN (0)

OUTPUT FORMAT	VALUE	VALUE LABEL
WOHNAR4F.	1	Owner
	2	Main tenant
	3	Subtenant

4	Rent-free (e.g. through right of residence or usufruct)
-2	Don't know
-1	Denied

VARIABLENAME **dwellingf4_1**

VARIABLENLABEL Type of housing : apartment/house: since year

QUESTION TEXT ZP **How long have you lived in this flat/house?**

QUESTION TEXT PX **Since which year has Mr/Mrs [name ZP] been living in this flat/house?**

FILTER FEED livingf1 IN (0)

PROGRAMMING NOTE If value < gebdat3, then alert

Default text for alert: "Please check if this entry is correct".

OUTPUT FORMAT	VALUE	VALUE LABEL
4. the	(1900 - current year of time of interview)	Indication of the year
	-1	Denied
	-2	Don't know

VARIABLENAME **dwelling4_2**

VARIABLE LABEL Type of housing: flat/house: since

month QUESTION TEXT ZP **How long have you been living here?**

QUESTION TEXT PX **Since which month has Mr/Mrs [name ZP] been living here?**

FILTERED dwellingf1 IN (0) AND dwellingf4_1 IN (2019, 2020, 2021)

OUTPUT FORMAT	VALUE	VALUE LABEL
2.	(1 - 12)	Indication of the month
	-1	Denied
	-2	Don't know

VARIABLENAME **residentT_9**

VARIABLENLABEL Other persons in the room

QUESTION TEXT ZP **How many other people live in the room with you?**

QUESTION TEXT PX **How many other people live in the room with Mr/Mrs [name ZP]?**

FILTER FEEDING livingf1 IN (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
PPZ4F.	1	No other person
	2	One more person
	3	Two or more other persons
	-1	Denied
	-2	Don't know

VARIABLENAME	residentT_10	
VARIABLENLABEL	Access to balcony, terrace, garden	
QUESTION TEXT ZP	Do you have access to a balcony, terrace or garden?	
QUESTION TEXT PX	Does Mr/Mrs [name ZP] have access to a balcony, terrace or garden?	
INTERVIEWER NOTE	Access inside or outside the home	
FILTER FEEDING	livingf1 IN (1)	
OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes
	-1	Denied
	-2	Don't know

VARIABLENAME	dwelling5_1	
VARIABLENLABEL	Type of residence : Home: since year	
QUESTION TEXT ZP	How long have you been living in this home?	
QUESTION TEXT PX	Since which year has Mr/Mrs [name ZP] been living in this home?	
FILTER FEEDING	livingf1 IN (1)	
PROGRAMMING NOTE	if value < gebdat3, then alert Standard text for alert: "Please check if this entry is correct".	
OUTPUT FORMAT	VALUE	VALUE LABEL
4.	(1900 -act. Year of the time of the interview)	Indication of the year
	-1	Denied
	-2	Don't know

VARIABLENAME	dwelling5_2	
VARIABLE LABEL	Type of residence: Home: since month	
QUESTION TEXT ZP	How long have you been living there?	
QUESTION TEXT PX	Since which month has Mr/Mrs [name ZP] been living there?	
FILTER FEEDING	FILTERED dwellingf1 IN (1) AND dwellingf5_1 IN (2019, 2020, 2021)	
OUTPUT FORMAT	VALUE	VALUE LABEL
2.	(1 - 12)	Indication of the month
	-1	Denied
	-2	Don't know

VARIABLENAME	wohnf6x	
VARIABLE LABEL	Type of residence: previous place of residence of persons in full inpatient care	
QUESTION TEXT ZP	Where did you have your last private residence before moving into residential care?	
QUESTION TEXT PX	Where did Mr/Mrs [name ZP] have his/her last private residence before moving into the home?	
INTERVIEWER'S NOTE	<i>Please ask for the location as clearly as possible, e.g. by using a postcode or stating the district.</i>	
FILTER FEEDING	livingf1 IN (1)	
OUTPUT FORMAT	VALUE	VALUE LABEL
\$900.	Indication	Indication of previous place of residence
	-1	Denied
	-2	Don't know

VARIABLENAME	barwohn1	
VARIABLENLABELBarriered	. Living: Thresholds over 2cm	
QUESTION TEXT ZP	Are there any thresholds in your flat/room over 2cm e.g. at a door or a shower?	
QUESTION TEXT PX	Are there any thresholds in his/her flat/room over 2cm e.g. at a door or a shower?	
FILTER FEED	livingf1 IN (0)	
OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME	barwohn2	
VARIABLENLABELBarriered	. Living: Doors at least 80cm wide	
QUESTION TEXT ZP	Are all doors wide enough for people with a walker or rollator to get through (at least 80cm)?	
QUESTION TEXT PX	Are all doors wide enough for a walker or rollator to pass through (at least 80cm)?	
FILTER FEED	livingf1 IN (0)	
OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME	barwohn3	
--------------	-----------------	--

VARIABLENLABELBarried . Living: Handrails and stair lift

QUESTION TEXT **Are there always handrails or stair lifts on both sides for stairs within the flat, in the stairwell or in the entrance to the house?**

FILTER FEED livingf1 IN (0)

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME **barwohn4**

VARIABLENLABELBarried . Living: Doors WC and bathroom

QUESTION TEXT **Do the doors of both the bathroom and WC open outwards?**

INTERVIEWER NOTE *Enter 'Yes' for sliding door*

FILTER FEED livingf1 IN (0)

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes
	-2	Don't know
	-1	Denied

3 Family and household

VARIABLENAME	children1
VARIABLENLABEL	Children present
QUESTION TEXT ZP	Do you have or have had children? I mean both your own children and children who grew up with you.
QUESTION TEXT PX	Does Mr/Mrs [name ZP] have or have had children? I mean both your own children and children who grew up with Mr./Mrs.

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes
		-2Don't know
	-1	Denied

VARIABLENAME	children2
VARIABLENLABEL	Children : Number
QUESTION TEXT	How many?
FILTER	gulDEchildren1 IN (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
BEST8.	(1 - 20)	Number of children
		-2Don't know
	-1	Denied

VARIABLENAME	children3
VARIABLE LABEL	Children: Number of living children
QUESTION TEXT ZP	How many of your children are still alive?
QUESTION TEXT PX	How many of his/her children are still
alive? FILTER FEED	children1 IN (1) AND children2 GT 1

OUTPUT FORMAT	VALUE	VALUE LABEL
BEST8.	(0 - 20)	Number of living children
		-2Don't know
	-1	Denied

VARIABLENAME	children3_1
VARIABLENLABEL	Children : living child present QUESTION
TEXT ZP	Is your child still alive?
QUESTION TEXT PX	Is his/her child still alive?

FILTERSChildren1 IN (1) AND children2 IN (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes
		-2Don't know
	-1	Denied

VARIABLENAME **children4**

VARIABLENLABELChildren : when birth first child (YYYY)

QUESTION TEXT ZP **In which year was your child/first child born?**

QUESTION TEXT PX **In which year was his/her child/first child born?**

FILTER FEED children1 IN (1)

PROGRAMMING NOTEIf value < gebdat3, then alert

OUTPUT FORMAT	VALUE	VALUE LABEL
4.	(1900-act. Year of the time of interview)	Indication of the year
		-2Don't know
	-1	Denied

VARIABLENAME **grandchild1**

VARIABLE LABEL Grandchildren and great-grandchildren:

Number of grandchildren QUESTION TEXT ZP **How many grandchildren do you have/had?**

QUESTION TEXT PX **How many grandchildren does/was Mr/Mrs [name ZP] have?**

INTERVIEWER'S NOTE *Ask only for grandchildren, no great-grandchildren.*

FILTERgulDEchildren1 IN (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
BEST8.	(0 - 50)	Number of grandchildren
		-2Don't know
	-1	Denied

VARIABLENAME **grandchild2**

VARIABLE LABEL Grandchildren and great-

grandchildren: Number of great-grandchildren QUESTION TEXT

ZP **How many great-grandchildren do you have/had?**

QUESTION TEXT PX **How many great-grandchildren does/was Mr/Mrs [name ZP]?**

INTERVIEWER NOTE *Ask only for great-grandchildren, no grandchildren.*

FILTERSChildren1 IN (1) AND grandchildren1 GT 0

OUTPUT FORMAT	VALUE	VALUE LABEL
BEST8.	(0 - 50)	Number of great-grandchildren

-2Don't know

-1

Denied

VARIABLENAME **grandchild3**

VARIABLENLABEL Grandchildren and great-grandchildren: Contact grandchildren

QUESTION TEXT ZP **How often do you have contact with your grandchildren, e.g. through visits, letters, phone calls, text messages or email?**

QUESTION TEXT PX **How often does Mr/Woman [name ZP] have contact with his/her grandchildren, e.g. through visits, letters, phone calls, text messages or emails?**

INTERVIEWER NOTE *Please read out answers, enter directly if necessary.*
Please ask for the average frequency of contact with all grandchildren.

FILTERSChildren1 IN (1) AND grandchildren1 GT 0

OUTPUT FORMAT	VALUE	VALUE LABEL
CONTH5F.	1	Daily
	2	Weekly
	3	Monthly
	4	Several times a year
	5	Rarer
		-2Don't know
	-1	Denied

VARIABLENAME **grandchild4**

VARIABLENLABEL Grandchildren and great-grandchildren: Contact great-grandchildren

QUESTION TEXT ZP **How often do you have contact with your great-grandchildren, e.g. through visits, letters, phone calls, text messages or emails?**

QUESTION TEXT PX **How often does Mr/Woman [name ZP] have contact with his/her great-grandchildren, e.g. through visits, letters, phone calls, text messages or email?**

INTERVIEWER NOTE *Please read out answers, enter directly if necessary.*
Please ask for the average frequency of contact with all great-grandchildren.

FILTERCONDITIONchildren1 IN (1) AND grandchildren1 GT 0 AND grandchildren2 GT 0

OUTPUT FORMAT	VALUE	VALUE LABEL
CONTH5F.	1	Daily
	2	Weekly
	3	Monthly
	4	Several times a year
	5	Rarer
		-2Don't know
	-1	Denied

VARIABLENAME **care**

VARIABLE LABEL Great-grandchild care

QUESTION TEXT ZP	In the last 12 months, have you regularly or occasionally looked after your great-grandchildren while their parents were away?	
QUESTION TEXT PX	In the last 12 months, has Mr/Mrs [name ZP] regularly or occasionally looked after his/her great-grandchildren while the parents were away?	
INTERVIEWER NOTE	<i>Do not record any gainful employment or voluntary work (e.g. educator/kindergarten teacher).</i>	
	FILTERCONDITIONchildren1 IN (1) AND grandchildren1 GT 0 AND grandchildren2 GT 0	

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME	animals
VARIABLE LABEL	Pets
QUESTION TEXT ZP	Do you have your own pets?
QUESTION TEXT PX	Does Mr/Mrs [name ZP] have any pets of his/her own?
INTERVIEWER NOTE	<i>Spontaneous naming of the type of pet. Please assign without reading aloud.</i>

PROGRAMMING NOTEPlease implement as multiple entries!

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	(0)	not named
	(1)	called
animals_1	1	No
animals_2	2Yes	, dog
animals_3	3Yes	, cat
animals_4	4Yes	, other animal [open: tierex].

4 Financial situation

VARIABLENAME	incom1
VARIABLENLABLE income	: Source: own employment
QUESTION TEXT ZP	<p>We are also interested in the quality of life of people who have different amounts of money at their disposal.</p> <p>You can be sure that your answers will not be evaluated in connection with your name.</p> <p>From which sources does your household/do you draw your income?</p>
QUESTION TEXT PX	<p>Income from own gainful employment</p> <p>We are also interested in the quality of life of people who have different amounts of money at their disposal.</p> <p>You can be sure that the answers will not be evaluated in connection with the name of Mr/Mrs [name ZP].</p> <p>From which sources does Mr/Mrs [name ZP] or his/her household/income derive?</p>
INTERVIEWER NOTE	<p>Income from own gainful employment</p> <p>Please go through "Sources of income" <u>carefully</u> with the target person! Read out categories in order.</p> <p>PROGRAMMING NOTE Please programme as a responsive item battery (einkom1 - einkom15) and the question text and interviewer's note from the second item onwards in grey</p>

OUTPUT FORMAT	VALUE	VALUE LABEL
	font.	
N0J1F.	0	No
	1	Yes
		-2Don't know
	-1	Denied

VARIABLENAME	incom2
VARIABLENLABLE income	: Source: Old-age pension, pension, widow's or survivor's pension, (pension for reduced earning capacity).
QUESTION TEXT	<p>Statutory old-age pension, pension, widow's or survivor's pension, (pension due to reduced earning capacity)</p> <p>PROGRAMMING NOTE Please programme as a responsive item battery (einkom1 - einkom15) and the question text and interviewer's note from the second item onwards in</p>

OUTPUT FORMAT	VALUE	VALUE LABEL
	grey font.	
N0J1F.	0	No
	1	Yes
		-2Don't know
	-1	Denied

VARIABLENAME	incom3
VARIABLENLABLE income	: Source: occupational pension or supplementary pension of the public service

QUESTION TEXT **Company pension or supplementary pension of the public service**

PROGRAMMING NOTE Please programme as a responsive item battery (einkom1 - einkom15) and the question text and interviewer's note from the second item onwards in grey font.

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME **incom9ng**

VARIABLENLABEL income : Source: Regular benefits from a private life insurance policy or from a private pension plan. Pension plans

QUESTION TEXT **Regular benefits from a private life insurance policy or from private pension plans**

PROGRAMMING NOTE Please programme as a responsive item battery (einkom1 - einkom15) and the question text and interviewer's note from the second item onwards in

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.		grey font.
	0	No
	1	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME **incom12**

VARIABLENLABEL Income : Source: long-term care insurance benefits

QUESTION TEXT **Benefits of the statutory long-term care insurance**

PROGRAMMING NOTE Please programme as a responsive item battery (einkom1 - einkom15) and the question text and interviewer's note from the second item onwards in

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.		grey font.
	0	No
	1	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME **incom7**

VARIABLENLABEL Income : Source: Income from renting and leasing QUESTION TEXT

Income from letting and leasing

PROGRAMMING NOTE Please programme as a responsive item battery (einkom1 - einkom15) and the question text and interviewer's note from the second item onwards in

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.		grey font.
	0	No
	1	Yes

-2Don't know

-1

Denied

VARIABLENAME **incom8**

VARIABLENLABELIncome : Source: Interest income and capital assets QUESTION

TEXT. **Interest income and income from capital assets**

PROGRAMMING NOTEPlease programme as a responsive item battery (einkom1 - einkom15) and the question text and interviewer's note from the second item onwards in

OUTPUT FORMAT **VALUE** **VALUE LABEL**

grey font.

N0J1F.

0

No

1

Yes

-2Don't know

-1

Denied

VARIABLENAME **incom10**

VARIABLENLABELIncome : Source: Basic security in old age

QUESTION TEXT **Basic income support in old age**

PROGRAMMING NOTEPlease programme as a responsive item battery (einkom1 - einkom15) and the question text and interviewer's note from the second item onwards in

OUTPUT FORMAT **VALUE** **VALUE LABEL**

grey font.

N0J1F.

0

No

1

Yes

-2Don't know

-1

Denied

VARIABLENAME **incom11**

VARIABLENLABELIncome : Source: Assistance for subsistence

QUESTION TEXT **Current assistance for subsistence or assistance in special circumstances (e.g. assistance for health, assistance for care)**

PROGRAMMING NOTEPlease programme as a responsive item battery (einkom1 - einkom15) and the question text and interviewer's note from the second item onwards in

OUTPUT FORMAT **VALUE** **VALUE LABEL**

grey font.

N0J1F.

0

No

1

Yes

-2Don't know

-1

Denied

VARIABLENAME **incom5**

VARIABLENLABELIncome : Source: Housing benefit

QUESTION TEXT

Housing benefit

PROGRAMMING NOTE Please programme as a responsive item battery (einkom1 - einkom15) and the question text and interviewer's note from the second item onwards in grey font.

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME **incom13**

VARIABLE LABEL income : Source: Family members

QUESTION TEXT **Regular financial support from family members**

PROGRAMMING NOTE Please programme as a responsive item battery (einkom1 - einkom15) and the question text and interviewer's note from the second item onwards in grey

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME **incom15**

VARIABLE LABEL Income: Source: Other

QUESTION TEXT **Other**

PROGRAMMING NOTE Please programme as a responsive item battery (einkom1 - einkom15) and the question text and interviewer's note from the second item onwards in grey

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes [open: incom15x]
	-2	Don't know
	-1	Denied

VARIABLENAME **incom15x**

VARIABLE LABEL Income : Source: Other (open) QUESTION

TEXT **Other**

FILTER FEED Incom15 IN (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
\$900.	Specify	Other
	-2	Don't know
	-1	Denied

VARIABLENAME	net3	
VARIABLENLABEL	Free available amount (pocket money): Amount	
with full stat. QUESTION TEXT ZP	How much money do you have freely available each month?	
QUESTION TEXT PX	How much money does Mr/Mrs [name ZP] have freely available each month?	
INTERVIEWER NOTE	<i>This refers to the amount minus housing, food and utility costs or the "pocket money" usually allocated by family members.</i> <i>Please ask for the pocket money and not the full net income.</i>	
FILTER FEEDING	livingf1 IN (1)	
OUTPUT FORMAT	VALUE	VALUE LABEL
BEST8.	(10 - 50000)	Amount in Euro
	-1	Denied
	-2	Don't know

VARIABLENAME	cost1	
VARIABLENLABEL	Costs : monthly warm rent	
QUESTION TEXT ZP	How much is your monthly rent including all utilities such as electricity, water, heating, rubbish collection, etc.? If you cannot give the exact amount, please give me an approximate estimate.	
QUESTION TEXT PX	How much is Mr./Mrs. [name ZP]'s monthly rent including all utilities such as electricity, gas, water, heating, rubbish collection, etc.? If you cannot give the exact amount, please give me an approximate estimate.	
INTERVIEWER NOTE	<i>Please offer to go through and calculate the individual costs together.</i> <i>Also allow annual or quarterly data.</i> <i>Calculation of the monthly amount for annual or quarterly data by interviewer.</i>	
FILTER FEEDING	habf3 IN (2,3)	
OUTPUT FORMAT	VALUE	VALUE LABEL
BEST8.	(10 - 50000)	Indication in Euro
	-1	Denied
	-2	Don't know

VARIABLENAME	cost1_1	
VARIABLENLABEL	Costs : monthly cold rent or rent without NK	
QUESTION TEXT ZP	How much is the monthly cold rent or rent without service charges? QUESTION	
TEXT PX	What is his/her monthly cold rent or rent excluding utilities? INTERVIEWER	
NOTE	<i>Please offer to go through and calculate the individual costs together.</i> <i>Also allow annual or quarterly data.</i> <i>Calculation of the monthly amount for annual or quarterly data by interviewer.</i>	
FILTER FEED	livingf3 IN (2,3) AND cost1 IN (-2)	
OUTPUT FORMAT	VALUE	VALUE LABEL
BEST8.	(10 - 50000)	Indication in Euro

	-1	Denied
	-2	Don't know
VARIABLENAME	cost2_1	
VARIABLENLABEL	Costs : Incidental costs Total amount in euros	
QUESTION TEXT ZP	What are the approximate monthly costs you spend on electricity, gas, water/sewage, heating, street cleaning/garbage collection and miscellaneous? If you cannot give the exact amount, please give me an approximate estimate.	
QUESTION TEXT PX	What is the approximate monthly cost of electricity, water/sewage, heating, street cleaning/garbage collection and miscellaneous for Mr/Mrs [name ZP]? If you cannot give the exact amount, please give me an approximate estimate.	
INTERVIEWER NOTE	<i>Please offer to go through and calculate the individual costs together.</i> <i>Also allow annual or quarterly data.</i> <i>Calculation of the monthly amount for annual or quarterly data by interviewer.</i>	
FILTER FEEDING	dwellingf1 IN (0) AND dwellingf3 IN (1 ,4)	
OUTPUT FORMAT	VALUE	VALUE LABEL
BEST8.	(10 - 50000)	Total amount in Euro
	-1	Denied
	-2	Don't know
VARIABLENAME	cost2_2	
VARIABLE LABEL	Costs: Service charges: Electricity in Euro	
QUESTION TEXT	You can also tell me the individual amounts. FILTERS dwellingf1 IN (0) AND dwellingf3 IN (1 ,4) AND cost2_1 IN (-1,-2) PROGRAMMING NOTEPlease display the individual amounts (kosten2_2 to kosten2_7) on one screen. For each open nomination own missings (don't know and denied) Please set the range to 0, so that at least the entry of a 0 is necessary.	
OUTPUT FORMAT	VALUE	VALUE LABEL
BEST8.	(0 - 50000)	Electricity in Euro
	-1	Denied
	-2	Don't know
VARIABLENAME	cost2_3	
VARIABLE LABEL	Costs: Service charges: Gas in euros (if not received in heating costs)	
FILTER FEED	wohnf1 IN (0) AND wohnf3 IN (1 ,4) AND kosten2_1 IN (-1,-2) PROGRAMMING NOTEPlease display the individual amounts (kosten2_2 to kosten2_7) on one screen. For each open nomination own missings (don't know and denied) Please set the range to 0, so that at least the entry of a 0 is necessary.	
OUTPUT FORMAT	VALUE	VALUE LABEL
BEST8.	(0 - 50000)	Gas in Euro

-1 Denied
-2 Don't know

VARIABLENAME **cost2_4**
VARIABLENLABELCosts : Service charges: water/waste water in euros FILTER
 FEEDING wohnf1 IN (0) AND wohnf3 IN (1 ,4) AND kosten2_1 IN (-1,-
 2)
 PROGRAMMING NOTEPlease display the individual amounts (kosten2_2 to kosten2_7) on one
 screen.
 Please set the range to 0, so that at least the entry of a 0 is necessary.

OUTPUT FORMAT	VALUE	VALUE LABEL
BEST8.	(0 - 50000)	Water/waste water in Euro
	-1	Denied
	-2	Don't know

VARIABLENAME **cost2_5**
VARIABLENLABELCosts : Service charges: Heating in Euro
 FILTERS dwellingf1 IN (0) AND dwellingf3 IN (1 ,4) AND cost2_1 IN (-1,-2)
 PROGRAMMING NOTEPlease display the individual amounts (kosten2_2 to kosten2_7) on one
 screen.
 For each open nomination own missings (don't know and denied)
 Please set the range to 0, so that at least the entry of a 0 is necessary.

OUTPUT FORMAT	VALUE	VALUE LABEL
BEST8.	(0 - 50000)	Heating in Euro
	-1	Denied
	-2	Don't know

VARIABLENAME **cost2_6**
VARIABLENLABELCosts : Service charges: street cleaning/garbage collection in euros
 FILTERFILLING cost1 IN (0) AND cost3 IN (1 ,4) AND cost2_1 IN (-1,-2)
 PROGRAMMING NOTEPlease display the individual amounts (kosten2_2 to kosten2_7) on one
 screen.
 For each open nomination own missings (don't know and denied)
 Please set the range to 0, so that at least the entry of a 0 is necessary.

OUTPUT FORMAT	VALUE	VALUE LABEL
BEST8.	(0 - 50000)	Street cleaning/garbage collection in Euro
	-1	Denied
	-2	Don't know

VARIABLENAME **cost2_7**
VARIABLENLABELCosts : Incidental costs: Other in euros

FILTERS dwellingf1 IN (0) AND dwellingf3 IN (1,4) AND cost2_1 IN (-1,-2)

PROGRAMMING NOTE Please display the individual amounts (kosten2_2 to kosten2_7) on one screen.

For each open nomination own missings (don't know and denied)
Please set the range to 0, so that at least the entry of a 0 is necessary.

OUTPUT FORMAT	VALUE	VALUE LABEL
BEST8.	(0 - 50000)	Other in Euro
	-1	Denied
	-2	Don't know

VARIABLENAME **cost3**

VARIABLE LABEL Costs: Home loan or mortgage

QUESTION TEXT ZP **Do you still have to make repayments on a home loan or other mortgage for this house/flat?**

QUESTION TEXT PX **Does Mr/Mrs [name ZP] still have to make repayments on a home loan or other mortgage for this house/flat?**

FILTER FEED wohnf1 IN (0) AND wohnf3 IN (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME **cost4**

VARIABLE LABEL Costs: Home loan or mortgage Amount QUESTION TEXT

ZP **What amount do you have to pay monthly for this?**
If you cannot give the exact amount, please give me an approximate estimate.

QUESTION TEXT PX **What amount does Mr/Mrs [name ZP] have to spend on this per month?**
If you cannot give the exact amount, please give me an approximate estimate.

INTERVIEWER NOTE *Calculation of the monthly amount for annual or quarterly data.*

FILTERS dwellingf1 IN (0) AND dwellingf3 IN (1) AND cost3 IN (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
BEST8.	(10 - 50000)	Amount in Euro
	-1	Denied
	-2	Don't know

VARIABLENAME **cost5**

VARIABLE LABEL COSTS : Home stay

QUESTION TEXT ZP **How much do you have to pay monthly for your stay at the home? This is your own contribution**

meant.
If you cannot give the exact amount, please give me an approximate estimate.

QUESTION TEXT PX **How much must be paid monthly for Mr/Mrs [name ZP]'s stay in the home? This refers to his/her own contribution.**
If you cannot give the exact amount, please give me an approximate estimate.

INTERVIEWER NOTE *Calculation of the monthly amount for annual or quarterly data.*

FILTER FEEDING livingf1 IN (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
BEST8.	(10 - 9000)	Amount in Euro
	-1	Denied
	-2	Don't know

VARIABLENAME **debt1**
 VARIABLENLABELLiabilities available

QUESTION TEXT ZP **Once apart from mortgages:**
Do you or your (spouse) partner currently have debts from loans you have taken out, e.g. with a bank or savings bank, with a department store or mail-order company, or with a private individual?

QUESTION TEXT PX **Once apart from mortgages:**
Does Mr/Mrs [name ZP] or his/her (spouse's) partner currently have debts from loans that Mr/Mrs [name ZP] has taken out, e.g. with a bank or savings bank, with a department store or mail-order company or with a private person?

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes
	-1	Denied
	-2	Don't know

VARIABLENAME **guilt2**
 VARIABLENLABELLiabilities : Amount

QUESTION TEXT **What is the approximate amount?**

INTERVIEWER NOTE *Please read out answers, enter directly if necessary.*
Target person should provide information!

FILTER GUIDE DEBT1 IN (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
SCHLD10F.	1	Under €500
	2	500 to under 2.500€
	3	2.500 to under 5.000€
	4	5.000 to under 12.500€
	5	12.500 to under 25.000€
	6	25.000 to under 50.000€

7	50.000 to under 100.000€
8	100.000 to under 250.000€
9	250.000 to under 500.000€
10	500.000€ and more

-2Don't know

-1 Denied

VARIABLENAME **vermoe**

VARIABLENLABELAssets : Amount

QUESTION TEXT ZP **If you think about all your assets, i.e. savings books, building society contracts, life insurance policies, securities and valuables that belong to you or your (spouse) partner, but not real estate:**
What is the approximate amount?

QUESTION TEXT PX **If you think of all the assets of Mr/Mrs [name ZP], i.e. savings books, building society contracts, life insurance policies, securities and valuables belonging to him/her or his/her (spouse) partner, but not to Real estate:**
What is the approximate amount?

INTERVIEWER'S NOTE *Current accounts are included.*
Please read out answers, enter directly if necessary.

PROGRAMMING NOTE *List as drop-down with additional missings as radio buttons. Not applicable, as the answers are read out if required.*

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

List Booklet Template

VERM11BB.	1	Under €500
		2500 to under 2.500€
		32.500 to under 5.000€
		45.000 to under 12.500€
		512,500 to under €25,000
625		.000 to under 50.000€
		750.000 to under 100.000€
8100		,000 to under €250,000
		9250.000 to under 500.000€
		10500.000€ and more
11		No assets
		-2Don't know
-1		Denied

6 Health

Intermediate screen

VARIABLENAME **Screen2**

VARIABLE LABEL Intermediate screen 2

QUESTION TEXT **Many people like to do brain teasers. These are also a part of this survey.
This is not an intelligence test.**

INTERVIEWER NOTE *Please take care not to interfere with the administration of the test.
Please make sure that the person being interviewed hears sufficiently well!*

FILTER GUIDE interviewee IN (1)

PROGRAMMING NOTE The entire "Cognitive Test" block (from Screen2 to DemTest: 3 pass) only goes to target subjects, not in PROXY.

VARIABLENAME **dt1**

VARIABLE LABEL DemTest : Start 1st run - Intro

QUESTION TEXT **I am now going to slowly read you a list of 10 words.
After that, please repeat as many of these words as possible. The order is not important.**

FILTER GUIDE interviewee IN (1)

PROGRAMMING NOTE Technical implementation as multiple entry with option to deny entire run 1 word list.

NOTE FOR DATA PREPARATION The variable dt1 was newly formed (not included in the codebook).

OUTPUT FORMAT VALUE	VALUE LABEL
1	Continue with task
-1	Denied

VARIABLENAME **dt1_start**

VARIABLE LABEL DemTest : Start 1st run - Start QUESTION

TEXT **Ready?**

INTERVIEWER'S NOTE *To start reading aloud, please click on the "Start" button below.*

FILTERED respondent IN (1) AND dt1 IN (1)

NOTE FOR DATA PREPARATION The variable dt1_start was newly created (not included in the codebook).

OUTPUT FORMAT VALUE	VALUE LABEL
	Next button Start

VARIABLENAME **dt1_read out**

VARIABLENLABELDemTect : Start 1st run - Read aloud QUESTION

TEXT

- Plate
- Dog
- Lamp
- Letter
- Apple
- Trousers
- Table
- Meadow
- Glass
- Tree

INTERVIEWER'S NOTE *Please read the words aloud and clearly!*

FILTERED respondent IN (1) AND dt1 IN (1)

PROGRAMMING NOTE Please show the 10 words one by one in sequence (only one word on the screen at a time), using as large a font size as possible.

Timed, clocking: 2 seconds Tachistoscope
element

NOTE FOR DATA PREPARATION The variable dt1_vorlesen was newly created (not included in the codebook).

VARIABLENAME	dt1_1, dt1_2, dt1_3, dt1_4, dt1_5, dt1_6, dt1_7, dt1_8, dt1_9, dt1_10, dt1_11
--------------	---

VARIABLENLABELDemTect: 1st pass: plate

DemTect: 1st passage: dog
DemTect: 1st passage: lamp
DemTect: 1st passage: letter
DemTect: 1st passage: apple
DemTect: 1st passage: trousers
DemTect: 1st passage: table
DemTect: 1st passage: meadow
DemTect: 1st passage: glass
DemTect: 1st passage: tree
DemTect: 1st pass: no correct answer

QUESTION TEXT **Now please tell me all the words you can remember.**

INTERVIEWER NOTE *Please click on the words that the target person remembers.
Do NOT interrupt the interviewee.*

FILTERED respondent IN (1) AND dt1 IN (1)

PROGRAMMING NOTE Multiple choice

dt1_11 is exclusive category, i.e. if this is selected, no other selection is possible.

NOTE FOR DATA PREPARATION

The variable dt1_11 was added. (not included in the codebook).

If the entire run was refused in dt1, please document the refusal in all individual items (dt1_1 to dt1_11).

Data structure then corresponds to the codebook.

The content-related information collected via multiple responses is to be provided to the AG in the form of dichotomous individual items with 1=Yes, 0=No or -1=Refused.

OUTPUT FORMAT VALUE	VALUE LABEL
---------------------	-------------

N0J1F.	(0)	not named
	(1)	called

dt1_1	1	Plate
dt1_2	2	Dog
dt1_3	3	Lamp
dt1_4	4	Letter
dt1_5	5	Apple
dt1_6	6	Trousers
dt1_7	7	Table
dt1_8	8	Meadow
dt1_9	9	Glass
dt1_10	10	Tree
dt1_11	11	No (correct) answer

VARIABLENAME **dt2**

VARIABLENLABELDemTect: 2nd run - Intro

QUESTION TEXT **Thank you very much. Now I will tell you the same 10 words a second time. After that, you should again repeat as many words as possible. The order is not important.**

INTERVIEWER NOTE *Please take care not to interfere with the administration of the test.
Please make sure that the person being interviewed hears sufficiently well!*

FILTERED respondent IN (1) AND dt1 IN (1)

PROGRAMMING NOTE The 2nd pass word list is filtered for whether the first pass was made.

NOTE FOR DATA PREPARATION The variable dt2 was newly formed (not included in the codebook).

OUTPUT FORMAT VALUE	VALUE LABEL
---------------------	-------------

1 Continue with task

-1 Denied

VARIABLENAME **dt2_start**

VARIABLENLABELDemTect: Start 2nd run - Start QUESTION

TEXT **Ready?**

INTERVIEWER'S NOTE *To start reading aloud, please click on the "Start" button below.*

FILTERING respondent IN (1) AND dt1 IN (1) AND dt2 IN (1)

NOTE FOR DATA PREPARATION The variable dt2_start was newly created (not included in the codebook).

OUTPUT FORMAT VALUE	VALUE LABEL
---------------------	-------------

Next button Start

VARIABLENAME	dt2_read out
VARIABLENLABEL	DemTect : 2nd pass - read aloud
QUESTION TEXT	<ul style="list-style-type: none"> - Plate - Dog - Lamp - Letter - Apple - Trousers - Table - Meadow - Glass - Tree
INTERVIEWER'S NOTE	<i>Please read the words out loud and clearly!</i>
FILTERING	interviewee IN (1) AND dt1 IN (1) AND dt2 IN (1) PROGRAMMING NOTE Please insert the 10 words one at a time in order (only one word at a time on the screen), with as large a font size as possible Timed, clocking: 2 seconds, tachistoscope element
NOTE FOR DATA PREPARATION	The variable dt2_vorlesen was newly created (not included in the codebook).

VARIABLENAME	dt2_1, dt2_2, dt2_3, dt2_4, dt2_5, dt2_6, dt2_7, dt2_8, dt2_9, dt2_10, dt2_11
VARIABLENLABEL	DemTect : 2nd pass: plate DemTect: 2nd pass: dog DemTect: 2nd pass: lamp DemTect: 2nd pass: letter DemTect: 2nd pass: apple DemTect: 2nd pass: trousers DemTect: 2nd pass: table DemTect: 2nd pass: meadow DemTect: 2nd pass: glass DemTect: 2nd pass: tree DemTect: 2nd pass: no correct answer
QUESTION TEXT	Now I ask you to repeat as many of these words as possible.
INTERVIEWER NOTE	<i>Please click on the words that the target person remembers. Do NOT interrupt the interviewee.</i>
PROGRAMMING NOTE	FILTERING respondent IN (1) AND dt1 IN (1) AND dt2 IN (1) Multiple choice dt2_11 is exclusive category, i.e. if this is selected, no other selection is possible.

NOTE FOR DATA
PREPARATION

The variable dt2_11 was added (not included in the codebook).

If the entire run is refused in dt2, please document the refusal in all individual items (dt2_1 to dt2_11).

Data structure then corresponds to the codebook.

The content-related information collected via multiple responses is to be provided to the AG in the form of dichotomous individual items with 1=Yes, 0=No or -1=Refused.

OUTPUT FORMAT	VALUE	VALUE LABEL
	(0)	not named
	(1)	called
dt2_1	1	Plate
dt2_2	2	Dog
dt2_3	3	Lamp
dt2_4	4	Letter
dt2_5	5	Apple
dt2_6	6	Trousers
dt2_7	7	Table
dt2_8	8	Meadow
dt2_9	9	Glass
dt2_10	10	Tree
dt2_11	11	No (correct) answer

VARIABLENAME

dt4_intro

VARIABLENLABELDemTect: Number Supermarket - Intro

QUESTION TEXT

Thank you.

Now let's move on to the next task.

Please name as many things as you can buy in the supermarket. You have one minute to do this.

Ready, go!

INTERVIEWER'S NOTE

Please make a tally on a sheet of paper of the number of items mentioned! Only things that can actually be bought in the supermarket count. Multiple entries are only to be counted once.

-> The time measurement starts directly by clicking on "Continue with task".

If the target is silent for 15 seconds at the beginning, repeat the instruction ("Please tell me as many things as you can buy in the supermarket."). The time limit is not extended if this instruction has to be repeated.

Give exactly one minute. If the target stops before the time is up, encourage them to continue ("What else is there?").

FILTER CONDUCTION interviewee IN (1) PROGRAMMING NOTE The

timing starts directly by clicking on "Next".

Stopwatch function 60 seconds

While the stopwatch is running, please display text "Time

running" Acoustic signal when the 60 seconds have elapsed

NOTE FOR DATA
PREPARATION

The variable dt4 was newly formed (not included in the codebook).

OUTPUT FORMAT	VALUE	VALUE LABEL
	1	Continue with task
	-1	Denied

VARIABLENAME **dt4**

VARIABLE LABEL DemTect: Number Supermarket

QUESTION TEXT **Stop. Now the one minute is over.**

INTERVIEWER NOTE *Please enter the number of mentions now. FILTER*

GUIDE interviewer IN (1) AND dt4_intro IN (1) PROGRAMMING

NOTE stopwatch function 60 seconds

While the stopwatch is running, please display the text "Time running".

Acoustic signal after 60 seconds.

OUTPUT FORMAT	VALUE	VALUE LABEL
BEST8.	(0 - 60)	Number of mentions
	-1	Denied

VARIABLENAME **dt5**

VARIABLE LABEL DemTect: Number sequences - Intro

QUESTION TEXT **Now let's move on to the next task.**

**I will now give you a series of numbers, which I would like you to reverse for me.
Repeat the order.**

For example, if I say "four-five", please tell me "five-four".

INTERVIEWER NOTE *Please take care not to interfere with the administration of the test.*

Please make sure that the person being interviewed hears sufficiently well!

FILTER GUIDE interviewee IN (1)

PROGRAMMING NOTE The task is to be terminated if two series of numbers cannot be reproduced correctly one after the other, see filter guidance for the individual items.

NOTE FOR DATA
PREPARATION

The variable dt5 was newly formed (not included in the codebook).

OUTPUT FORMAT	VALUE	VALUE LABEL
	1	Continue with task

-1 Denied

VARIABLENAME **dt5_1_1**

VARIABLENLABELDemTect: Number sequences: 7-2

QUESTION TEXT **7-2**

INTERVIEWER NOTICE *The correct naming would be: 2-7*

FILTERED interviewer IN (1) AND dt5 IN (1)

NOTE FOR DATA PREPARATION If the entire block is denied in dt5, please document the denial in all individual items (dt5_1_1 to dt5_5_2).

The value labels for the answers True / False must be converted to 1=Yes (True) and 0=No (False).

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

	0	Incorrect
--	---	-----------

	-1	Denied
--	----	--------

VARIABLENAME **dt5_1_2**

VARIABLENLABELDemTect : Number sequences: 8-6

QUESTION TEXT **8-6**

INTERVIEWER'S NOTE *The correct naming would be: 6-8*

FILTER FEED (interviewee IN (1) AND dt5 IN (1)) AND dt5_1_1 IN (0)

NOTE FOR DATA PREPARATION If the entire block is denied in dt5, please document the denial in all individual items (dt5_1_1 to dt5_5_2).

The value labels for the answers True / False must be converted to 1=Yes (True) and 0=No (False).

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

N0J1F.	1	Correct
--------	---	---------

	0	Incorrect
--	---	-----------

	-1	Denied
--	----	--------

VARIABLENAME **dt5_2_1**

VARIABLENLABELDemTect : Number sequences: 4-7-9

QUESTION TEXT **4-7-9**

INTERVIEWER'S NOTE *The correct answer would be: 9-7-4*

FILTERED (interviewee IN (1) AND dt5 IN (1)) AND
(dt5_1_1 IN (0) AND dt5_1_2 IN (1)) OR dt5_1_1 IN (1)

NOTE FOR DATA PREPARATION If the entire block is denied in dt5, please document the denial in all individual items (dt5_1_1 to dt5_5_2).
The value labels for the answers True / False must be converted to 1=Yes (True) and 0=No (False).

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	1	Correct
	0	Incorrect
	-1	Denied

VARIABLENAME dt5_2_2

VARIABLENLABELDemTect : Number sequences: 3-1-5

QUESTION TEXT 3-1-5

INTERVIEWER'S NOTE The correct answer would be: 5-1-3

FILTERED (interviewee IN (1) AND dt5 IN (1)) AND
((dt5_1_1 IN (0) AND dt5_1_2 IN (1)) OR dt5_1_1 IN (1)) AND dt5_2_1 IN (0)

NOTE FOR DATA PREPARATION If the entire block is denied in dt5, please document the denial in all individual items (dt5_1_1 to dt5_5_2).
The value labels for the answers True / False must be converted to 1=Yes (True) and 0=No (False).

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	1	Correct
	0	Incorrect
	-1	Denied

VARIABLENAME dt5_3_1

VARIABLENLABELDemTect : Number sequences: 5-4-9-6

QUESTION TEXT 5-4-9-6

INTERVIEWER'S NOTE The correct answer would be: 6-9-4-5

FILTERED (interviewee IN (1) AND dt5 IN (1)) AND
((dt5_1_1 IN (0) AND dt5_1_2 IN (1)) OR dt5_1_1 IN (1)) AND
((dt5_2_1 IN (0) AND dt5_2_2 IN (1)) OR dt5_2_1 IN (1))

NOTE FOR DATA PREPARATION If the entire block is denied in dt5, please document the denial in all individual items (dt5_1_1 to dt5_5_2).
The value labels for the answers True / False must be converted to 1=Yes (True) and 0=No (False).

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	1	Correct
	0	Incorrect
	-1	Denied

VARIABLENAME **dt5_3_2**

VARIABLENLABELDemTect : Number sequences: 1-9-7-4

QUESTION TEXT **1-9-7-4**

INTERVIEWER'S NOTE *The correct answer would be: 4-7-9-1*

FILTERED (interviewee IN (1) AND dt5 IN (1)) AND
((dt5_1_1 IN (0) AND dt5_1_2 IN (1)) OR dt5_1_1 IN (1)) AND
((dt5_2_1 IN (0) AND dt5_2_2 IN (1)) OR dt5_2_1 IN (1)) AND dt5_3_1 IN (0)

NOTE FOR DATA PREPARATION If the entire block is denied in dt5, please document the denial in all individual items (dt5_1_1 to dt5_5_2).
The value labels for the answers True / False must be converted to 1=Yes (True) and 0=No (False).

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	1	Correct
	0	Incorrect
	-1	Denied

VARIABLENAME **dt5_4_1**

VARIABLENLABELDemTect : Number sequences: 2-7-5-3-6

QUESTION TEXT **2-7-5-3-6**

INTERVIEWER'S NOTE *The correct answer would be: 6-3-5-7-2*

FILTERED (interviewee IN (1) AND dt5 IN (1)) AND
((dt5_1_1 IN (0) AND dt5_1_2 IN (1)) OR dt5_1_1 IN (1)) AND
((dt5_2_1 IN (0) AND dt5_2_2 IN (1)) OR dt5_2_1 IN (1)) AND
((dt5_3_1 IN (0) AND dt5_3_2 IN (1)) OR dt5_3_1 IN (1))

NOTE FOR DATA PREPARATION If the entire block is denied in dt5, please document the denial in all individual items (dt5_1_1 to dt5_5_2).
The value labels for the answers True / False must be converted to 1=Yes (True) and 0=No (False).

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	1	Correct
	0	Incorrect
	-1	Denied

VARIABLENAME dt5_4_2

VARIABLENLABELDemTect : Number sequences: 1-3-5-4-8

QUESTION TEXT 1-3-5-4-8

INTERVIEWER'S NOTE *The correct answer would be: 8-4-5-3-1*

FILTERED (interviewee IN (1) AND dt5 IN (1)) AND
 ((dt5_1_1 IN (0) AND dt5_1_2 IN (1)) OR dt5_1_1 IN (1)) AND
 ((dt5_2_1 IN (0) AND dt5_2_2 IN (1)) OR dt5_2_1 IN (1)) AND
 ((dt5_3_1 IN (0) AND dt5_3_2 IN (1)) OR dt5_3_1 IN (1)) AND dt5_4_1 IN (0)

NOTE FOR DATA PREPARATION If the entire block is denied in dt5, please document the denial in all individual items (dt5_1_1 to dt5_5_2).
 The value labels for the answers True / False must be converted to 1=Yes (True) and 0=No (False).

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	1	Correct
	0	Incorrect
	-1	Denied

VARIABLENAME dt5_5_1

VARIABLENLABELDemTect : Number sequences: 8-1-3-5-4-2

QUESTION TEXT 8-1-3-5-4-2

INTERVIEWER'S NOTE *The correct answer would be: 2-4-5-3-1-8*

FILTERED (interviewee IN (1) AND dt5 IN (1)) AND
 ((dt5_1_1 IN (0) AND dt5_1_2 IN (1)) OR dt5_1_1 IN (1)) AND
 ((dt5_2_1 IN (0) AND dt5_2_2 IN (1)) OR dt5_2_1 IN (1)) AND
 ((dt5_3_1 IN (0) AND dt5_3_2 IN (1)) OR dt5_3_1 IN (1)) AND
 ((dt5_4_1 IN (0) AND dt5_4_2 IN (1)) OR dt5_4_1 IN (1))

NOTE FOR DATA PREPARATION If the entire block is denied in dt5, please document the denial in all individual items (dt5_1_1 to dt5_5_2).
 The value labels for the answers True / False must be converted to 1=Yes (True) and 0=No (False).

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	1	Correct
	0	Incorrect
	-1	Denied

VARIABLENAME dt5_5_2

VARIABLENLABELDemTect : Number sequences: 4-1-2-7-9-5

QUESTION TEXT **4-1-2-7-9-5**

INTERVIEWER'S NOTE *The correct answer would be: 5-9-7-2-1-4*

FILTERED
(interviewee IN (1) AND dt5 IN (1)) AND
((dt5_1_1 IN (0) AND dt5_1_2 IN (1)) OR dt5_1_1 IN (1)) AND
((dt5_2_1 IN (0) AND dt5_2_2 IN (1)) OR dt5_2_1 IN (1)) AND
((dt5_3_1 IN (0) AND dt5_3_2 IN (1)) OR dt5_3_1 IN (1)) AND
((dt5_4_1 IN (0) AND dt5_4_2 IN (1)) OR dt5_4_1 IN (1)) AND dt5_5_1 IN (0)

NOTE FOR DATA PREPARATION If the entire block is denied in dt5, please document the denial in all individual items (dt5_1_1 to dt5_5_2).

The value labels for the answers True / False must be converted to 1=Yes (True) and 0=No (False).

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	1	Correct
	0	Incorrect
	-1	Denied

VARIABLENAME **dt6**

VARIABLENLABELDemTect: 3rd run - Intro

QUESTION TEXT **At the beginning of this short test I gave you 10 words.
Can you still remember these words?**

INTERVIEWER NOTE *Please ensure that the test is not disturbed. Attention: In the 3rd round, the word list will NOT be read out again!*

FILTERING respondent IN (1) AND dt1 IN (1) AND dt2 IN (1)

PROGRAMMING NOTE Implementation as multiple answers with blockwise refusal and additionally filtered to the two complete runs Word list at the beginning

NOTE FOR DATA PREPARATION The variable dt6 was newly formed (not included in the codebook).

OUTPUT FORMAT	VALUE	VALUE LABEL
	1	Continue with task
	-1	Denied

VARIABLENAME **dt6_1, dt6_2, dt6_3, dt6_4, dt6_5, dt6_6, dt6_7, dt6_8, dt6_9, dt6_10, dt6_11**

VARIABLENLABELDemTect: 3rd pass: plate

DemTect: 3rd pass: dog DemTect:

3rd pass: lamp DemTect: 3rd pass:

letter DemTect: 3rd pass: apple

DemTect: 3rd pass: trousers

DemTect: 3rd pass: table

DemTect: 3rd pass: meadow

DemTect: 3rd pass: glass

DemTect: 3rd pass: tree

DemTect: 3rd pass: no correct answer

QUESTION TEXT **Please tell me all the words you can remember now.**

INTERVIEWER'S NOTE *Please click on all correct answers!*

Multiple answers possible.

PROGRAMMING NOTE Implementation as multiple answers with blockwise refusal and additionally filtered to the two complete runs word list at the beginning.

Multiple answers

dt6_11 is exclusive category, i.e. if this is selected, no other selection is possible.

NOTE FOR DATA
PREPARATION

The variable dt6_11 was added (not included in the codebook).

If the entire run is refused in dt6, please document the refusal in all individual items (dt6_1 to dt6_10).

Data structure then corresponds to the codebook.

The content-related information collected via multiple responses is to be provided to the AG in the form of dichotomous individual items with 1=Yes, 0=No or -1=Refused.

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	(0)	not named
	(1)	called
dt6_1	1	Plate
dt6_2	2	Dog
dt6_3	3	Lamp
dt6_4	4	Letter
dt6_5	5	Apple
dt6_6	6	Trousers
dt6_7	7	Table
dt6_8	8	Meadow
dt6_9	9	Glass
dt6_10	10	Tree
dt6_11	11	No (correct) answer

VARIABLENAME	kogstat
VARIABLENLABEL	Psychological health: Cognitive status
QUESTION TEXT	Based on the following answer choices, how would you assess the cognitive status of Mr/Mrs [name ZP]?
INTERVIEWER'S NOTE	<i>Please read out all possible answers! Only one nomination.</i>
FILTER	GUIDE interviewee IN (2)

OUTPUT FORMAT	VALUE	VALUE LABEL
KOGSTA7P	1	No cognitive performance losses
	2	Very slight cognitive memory loss (e.g. forgets now and then where certain objects were placed)
	3	Minor cognitive impairment (e.g., mild word-finding difficulties, poorly remembers names).
	4	Moderate cognitive performance deficits (e.g. first clear deficits about current and recent events become visible).
	5	Moderate cognitive impairment (e.g. is clearly dependent on help, still remembers own name and performs meals and toileting independently).
	6	Severe cognitive impairment (e.g. partner's name is no longer remembered, non-cognitive symptoms also increase, memory of recent events is no longer present).
	7	Very severe cognitive impairment (e.g. complete loss of speech, loss of central psychomotor skills).
.	-2	Don't know
	-1	Denied

VARIABLENAME	schwind
VARIABLE LABEL	Vertigo
QUESTION TEXT ZP	Do you often feel dizzy?
QUESTION TEXT PX	Does Mr/Mrs [name ZP] feel dizzy more often?

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME	gulp
VARIABLE LABEL	Swallowing problems
QUESTION TEXT ZP	Do you often have problems swallowing?

QUESTION TEXT PX	Does Mr/Mrs [name ZP] have problems swallowing more often?	
OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME	grou4	
VARIABLENLABEL	Care use : private care	
QUESTION TEXT ZP	Do you yourself care for another person privately?	
QUESTION TEXT PX	Does Mr/Mrs [name ZP] himself privately care for another person?	
FILTER FEED	livingf1 IN (0)	
OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME	grou4_0	
VARIABLENLABEL	Care use : care privately: care recipient	
QUESTION TEXT ZP	What is the relationship between the person you care for privately and you?	
QUESTION TEXT PX	What is the relationship between the person Mr/Mrs [name ZP] cares for privately and Mr/Mrs [name ZP]?	
INTERVIEWER NOTE	<i>Categorisation by interviewer. Do not read out!</i>	
FILTER FEED	livingf1 IN (0) AND pflegnu4 IN (1)	
OUTPUT FORMAT	VALUE	VALUE LABEL
PERSCARF.	101	Grandfather/mother of the respondent or partner
	102	Mother
	103	Father
	104	Mother-in-law/mother of the partner
	105	Father-in-law/partner's father
	106	(Spouse) Partner
	107	Daughter-in-law/partner of the son
	108	Son-in-law/partner of the daughter
	111	Brother-in-law/brother of the partner
	112	Sister-in-law/sister of the partner
	120	Ex-partner
	201	Child
	301	Grandchild
	351	Great-grandchild

451	Brother
452	Sister
401	Auntie
402	Uncle
403	Cousin
404	Cousin
405	Niece
406	Nephew
407	Other relatives
501	Boyfriend/girlfriend
601	(former) work colleagues
602	Neighbours
603	Association or organisation members
701	Volunteers, e.g. from social institutions
702	Paid helpers (e.g. caregiver)
801	Known
901	Other person
-2	Don't know
-1	Denied

VARIABLENAME **grou4_1**

VARIABLENLABELCare use : private care: hours per week

QUESTION TEXT ZP **With what amount of hours per week do you care for this person?**

QUESTION TEXT PX **With what amount of hours per week does Mr/Mrs [name ZP] care for this person?**

FILTER FEED livingf1 IN (0) AND pflegnu4 IN (1)

<i>OUTPUT FORMAT</i>	<i>VALUE</i>	<i>VALUE LABEL</i>
BEST8.	(1 - 168)	Hours per week
	-1	Denied
	-2	Don't know

VARIABLENAME **grou4_2**

VARIABLENLABELCare use : care privately: Dementia

QUESTION TEXT ZP **Does the person you care for privately have dementia?**

FILTERCASE respondent IN (1) AND (wohnf1 IN (0) AND pflegnu4 IN (1))

PROGRAMMING NOTE : This question does not go to proxy, it is only asked in the ZP interview, i.e. if interviewee IN (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME **funkges1**

VARIABLENLABEL Functional Health: Food

QUESTION TEXT ZP **Now I would like to ask you about some activities of daily life.
How much help do you need for the following activities?**

Food

QUESTION TEXT PX **Now I would like to ask you about some activities of daily life of Mr/Mrs [name ZP].
How much help does Mr/Mrs [name ZP] need for the following activities?**

Food

INTERVIEWER NOTE *Please read out answers, enter directly if necessary.
This refers to help from other people as well as help from aids, such as
e.g. a walking stick or bath lift.*

PROGRAMMING NOTE Please programme as a responsive item battery (funkges1 - funkges5) and the question text as well as the interviewer's note from the second item onwards in

OUTPUT FORMAT	VALUE	VALUE LABEL
	grey font.	
ADL3F.		0Only possible with help
	1	A little help
	2	No help
		-2Don't know
	-1	Denied

VARIABLENAME **funkges2**

VARIABLENLABEL Functional health:

dressings and undressing QUESTION TEXT **Dressing and
undressing**

PROGRAMMING NOTE Please programme as a responsive item battery (funkges1 - funkges5) and the question text as well as the interviewer's note from the second item onwards in

OUTPUT FORMAT	VALUE	VALUE LABEL
	grey font.	
ADL3F.		0Only possible with help
	1	A little help
	2	No help
		-2Don't know
	-1	Denied

VARIABLENAME	funkges3
VARIABLE LABEL	Functional health: Personal care
QUESTION TEXT	Body care
PROGRAMMING NOTE	Please programme as a responsive item battery (funkges1 - funkges5) and the question text as well as the interviewer's note from the second item onwards in grey font.

<i>OUTPUT FORMAT</i>	<i>VALUE</i>	<i>VALUE LABEL</i>
ADL3F.	0	Only possible with help
	1	A little help
	2	No help
	-2	Don't know
	-1	Denied

VARIABLENAME	funkges4
VARIABLE LABEL	Functional Health: Walking
QUESTION TEXT	Walking
PROGRAMMING NOTE	Please programme as a responsive item battery (funkges1 - funkges5) and the question text as well as the interviewer's note from the second item onwards in grey font.

<i>OUTPUT FORMAT</i>	<i>VALUE</i>	<i>VALUE LABEL</i>
ADL3F.	0	Only possible with help
	1	A little help
	2	No help
	-2	Don't know
	-1	Denied

VARIABLENAME	funkges5
VARIABLE LABEL	Functional health: getting up from bed

and lying down QUESTION TEXT **Getting out of bed or lying down**

PROGRAMMING NOTE	Please programme as a responsive item battery (funkges1 - funkges5) and the question text as well as the interviewer's note from the second item onwards in grey font.
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<i>OUTPUT FORMAT</i>	<i>VALUE</i>	<i>VALUE LABEL</i>
ADL3F.	0	Only possible with help
	1	A little help
	2	No help
	-2	Don't know
	-1	Denied

VARIABLENAME	funkges5_1
VARIABLE LABEL	Functional health: bedridden
QUESTION TEXT ZP	Are you bedridden?
QUESTION TEXT PX	Is Mr/Mrs [name ZP] bedridden?

FILTER FEED	funkges5 IN (0)	
OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME	funkges6	
VARIABLE LABEL	Functional health: bathing or showering	
QUESTION TEXT ZP	How much help do you need for the following activities?	
	Bath or shower	
QUESTION TEXT PX	How much help does Mr/Mrs [name ZP] need for the following activities?	
	Bath or shower	
INTERVIEWER NOTE	<i>Please read out answers, enter directly if necessary. This refers to help from other people as well as help from aids, such as e.g. a walking stick or bath lift.</i>	
OUTPUT FORMAT	VALUE	VALUE LABEL
ADL3F.		0Only possible with help
	1	A little help
	2	No help
		-2Don't know
	-1	Denied

VARIABLENAME	funkges7	
VARIABLE LABEL	Functional health: Reaching the toilet in time QUESTION	
TEXT ZP	How much help do you need for the following activities?	
	Using the toilet	
QUESTION TEXT PX	How much help does Mr/Mrs [name ZP] need for the following activities?	
	Using the toilet	
INTERVIEWER NOTE	<i>Please read out answers, enter directly if necessary. This refers to help from other people as well as help from aids, such as e.g. a walking stick or bath lift.</i>	
OUTPUT FORMAT	VALUE	VALUE LABEL
ADLWC3F.		0Only possible with help
	1	A little help (e.g. catheter or artificial outlet available)
	2	No help

-2Don't know

-1

Denied

VARIABLENAME **funkges7_1**

VARIABLENLABELFunctional health: frequency problems with bladder and bowel control QUESTION TEXT ZP

How often do you have problems with bladder and bowel control (day and night)?QUESTION TEXT PX **How often does Mr/Mrs [name ZP] have problems with bladder and bowel control (day and night)?**INTERVIEWER NOTE *Please read out answers, enter directly if necessary.*

FILTER FEEDfunkges7 IN (0)

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

ADLH3F. 0Three times a week or more

1 One to two times a week

2 Rarely or never

-2Don't know

-1

Denied

VARIABLENAME **pspgr1** ☐ until 8.7.21

VARIABLE LABEL Care level/degree of care

QUESTION TEXT ZP **Do you have a care degree or a care level?**QUESTION TEXT PX **Does Mr/Mrs [name ZP] have a care degree or a care level?**INTERVIEWER NOTE *Please read out answers.*

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

CARE3F. 0 No

1 Yes, a care degree

2 Yes, a care level

-2Don't know

-1

Denied

VARIABLENAME **pspgr1_new** ☐ as of 9.7.21

VARIABLE LABEL Care level/care degree: Care degree Designation

QUESTION TEXT ZP **Do you have a care degree or a care level?**QUESTION TEXT PX **Does Mr/Mrs [name ZP] have a care degree or a care level?**INTERVIEWER NOTE *Please read out answers, enter answer directly if necessary.*

OUTPUT FORMAT	VALUE	LABEL
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0 No care degree / no care level

PFLEGR6F. 1Grade of care 1

- 2 Care level 2
(This corresponds to care level 1 or care level 0)
- 3 Care level 3
(This corresponds to care level 1 with limited everyday competence or care level 2)
- 4 Care level 4
(This corresponds to care level 2 with limited everyday competence or care level 3)
- 5 Care level 5
(This corresponds to care level 3 with limited everyday competence or care level 3 with hardship case)
- 2 Don't know
- 1 Denied

VARIABLENAME	HelPm1	
VARIABLE LABEL	Use of aids: Hearing aid	
QUESTION TEXT ZP	<u>Do you use</u> a hearing aid (e.g. a hearing aid)?	
QUESTION TEXT PX	<u>Does Mr./Mrs. [name ZP] use a hearing aid (e.g. a hearing aid)?	
OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME	helPm2	
VARIABLE LABEL	Use of aids: Wheelchair	
QUESTION TEXT ZP	<u>Do you use</u> a wheelchair?	
QUESTION TEXT PX	<u>Does Mr./Mrs [name ZP] use a wheelchair?	
OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME	helPm3	
VARIABLE LABEL	Use of aids: Home emergency call system	
QUESTION TEXT ZP	<u>Do you use</u> a home emergency call system?	
QUESTION TEXT PX	<u>Does Mr./Mrs [name ZP] use a home emergency call system?	
OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No

1	Yes
-2	Don't know
-1	Denied

VARIABLENAME **alDm4**
 VARIABLE LABEL Use of aids: private car QUESTION
 TEXT ZP. **<u>Do you use</u> a private car?**
 QUESTION TEXT PX **<u>Does Mr/Mrs [name ZP] use a private car?**
 PROGRAMMING NOTE ZP interview: If respondent IN (1) then answer categories AUTO4F Proxy
 interview: If respondent IN (2) then answer categories AUTO4P.

OUTPUT FORMAT	VALUE	VALUE LABEL
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ZP = interviewee IN (1)

AUTO4F.	0	No
	1	Yes, I drive myself
	2	Yes, as a passenger
	3	Yes, as driver and co-driver
	-2	Don't know
	-1	Denied

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

PX = interviewee IN (2)

AUTO4P.	0	No
	1	Yes, he/she drives himself/herself
	2	Yes, as a passenger
	3	Yes, as driver and co-driver
	-2	Don't know
	-1	Denied

VARIABLENAME **geskom1**
 VARIABLE LABEL Health literacy: Knowledge
 QUESTION TEXT ZP **How often do you know what you need to do to stay healthy, get healthy again or strengthen your health?**
 QUESTION TEXT PX **How often does Mr/Woman [name ZP] know what he/she needs to do to stay healthy, get healthy again or strengthen his/her health?**
 INTERVIEWER NOTE *Please read out answers, enter directly if necessary.*

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

HAEUF4F.	1	Never
	2	Rather rare
	3	Sometimes
	4	Frequently

-2Don't know

-1

Denied

VARIABLENAME **geskom2**
 VARIABLE LABEL Health literacy: Compliance QUESTION
 TEXT ZP **How often do you comply? QUESTION**
 TEXT PX **How often does he/she also comply?**
 INTERVIEWER NOTE *Please read out answers, enter directly if necessary.*
 FILTER GUIDE geskom1 IN (2,3,4)

OUTPUT FORMAT	VALUE	VALUE LABEL
HAEUF4F.	1	Never
	2	Rather rare
	3	Sometimes
	4	Frequently
	-2	Don't know
	-1	Denied

7 Everyday life and lifestyle

VARIABLENAME	live1_1_1
VARIABLENLABLE lifestyle	: spending time with other people: Importance
QUESTION TEXT ZP	<u>How important</u> is it for you to spend time with other people - relatives, acquaintances or friends - to exchange ideas or do something together?
QUESTION TEXT PX	<u>How important</u> is it for Mr/Woman [name ZP] to spend time with other people - relatives, acquaintances or friends - to exchange ideas or do something together?
INTERVIEWER NOTE	<i>Please read out answers, enter directly if necessary.</i>
PROGRAMMING NOTE	Please leave the question text and the interviewer's note in grey for the questions leb1_1_1 to leb1_5_1.

OUTPUT FORMAT	VALUE	VALUE LABEL
WEIGHT5F.	1	Not at all important
	2	Rather not important
	3	Rather important
	4	Very important
	5	Extraordinarily important
	-2	Don't know
	-1	Denied

VARIABLENAME	live1_2_1
VARIABLE LABEL	Lifestyle: physical activity: Importance QUESTION
TEXT ZP	<u>How important</u> is physical activity to you?
QUESTION TEXT PX	<u>How important</u> is physical exercise to Mr/Mrs [name ZP]?
INTERVIEWER NOTE	<i>Please read out answers, enter directly if necessary.</i>
PROGRAMMING NOTE	Please leave the question text and the interviewer hint from the intermediate screen in grey for the questions leb1_1_1 -leb1_5_1.

OUTPUT FORMAT	VALUE	VALUE LABEL
WEIGHT5F.	1	Not at all important
	2	Rather not important
	3	Rather important
	4	Very important
	5	Extraordinarily important
	-2	Don't know
	-1	Denied

VARIABLENAME	live1_3_1
VARIABLENLABLE lifestyle	: Time for yourself: Importance
QUESTION TEXT ZP	<u>How important</u> is rest and time for yourself to you?

QUESTION TEXT PX	<u>How important</u> are rest and time for yourself to Mr/Mrs [name ZP]?	
INTERVIEWER NOTE	<i>Please read out answers, enter directly if necessary.</i>	
PROGRAMMING NOTE	Please leave the question text and the interviewer hint from the intermediate screen in grey for the questions lebst1_1_1 -lebst1_5_1.	
OUTPUT FORMAT	VALUE	VALUE LABEL
WEIGHT5F.	1	Not important at all
	2	Rather not important
	3	Rather important
	4	Very important
	5	Extraordinarily important
	-2	Don't know
	-1	Denied
VARIABLENAME	live1_4_1	
VARIABLENLABLE lifestyle	: Study the topic more closely: Importance	
QUESTION TEXT ZP	<u>How important</u> is it to you to delve deeper into something or to study a topic in more detail?	
QUESTION TEXT PX	<u>How important</u> is it for Mr/Mrs [name ZP] to look at something in more depth or to study a topic in more detail?	
INTERVIEWER NOTE	<i>Please read out answers, enter directly if necessary.</i>	
PROGRAMMING NOTE	Please leave the question text and the interviewer hint from the intermediate screen in grey for the questions lebst1_1_1 - lebst1_5_1.	
OUTPUT FORMAT	VALUE	VALUE LABEL
WEIGHT5F.	1	Not at all important
	2	Rather not important
	3	Rather important
	4	Very important
	5	Extraordinarily important
	-2	Don't know
	-1	Denied
VARIABLENAME	live1_5_1	
VARIABLENLABLE lifestyle	: Creative activity: Importance	
QUESTION TEXT ZP	<u>How important</u> is it to you to be creative or to engage with something imaginatively?	
QUESTION TEXT PX	<u>How important</u> is it for Mr/Woman [name ZP] to be creative or to engage with something imaginatively?	
INTERVIEWER NOTE	<i>Please read out answers, enter directly if necessary.</i>	
PROGRAMMING NOTE	Please leave the question text and the interviewer hint from the intermediate screen in grey for the questions lebst1_1_1 -lebst1_5_1.	
OUTPUT FORMAT	VALUE	VALUE LABEL
WEIGHT5F.	1	Not at all important

	2	Rather not important
	3	Rather important
	4	Very important
	5	Extraordinarily important
		-2Don't know
	-1	Denied
VARIABLENAME	life2_1_0, life2_1_1, life2_1_2, life2_1_3, life2_1_4, life2_1_5, life2_1_6, life2_1_7, life2_1_8, life2_1_9, life2_1_10, life2_1_11, life2_1_miss1, life2_1_miss2	
VARIABLENLABEL	Taste: preferred music style: no music Taste: preferred music genre: opera Taste: preferred music style: classical Taste: preferred music style: operetta Taste: preferred music genre: Modern serious music Taste: preferred music genre: Jazz Taste: Preferred music genre: German Schlager Taste: Preferred music genre: Folk music Taste: Preferred music genre: Musical Taste: Preferred music genre: Pop music Taste: preferred music style: other [open: live2_1_10x] Taste: preferred music style: what is currently being played Taste: preferred music style: don't know Taste: Preferred music style: Refused	
QUESTION TEXT ZP	What is your <u>favourite</u> style of music to listen to?	
QUESTION TEXT PX	What style of music does Mr/Mrs [name ZP] <u>prefer</u> to listen to?	
INTERVIEWER'S NOTE	<i>Do not read out! Assignment by the interviewer!</i> <i>If the target person mentions several directions of his/her own accord, indicate multiple answers!</i>	
PROGRAMMING NOTE	Multiple choice Please show live2_1_0 to live2_1_miss2 on one screen. Categories "don't listen to music", "refused" and "don't know" (live2_1_0, live2_1_miss1 and live2_1_miss2) are exclusive categories, i.e. if these are selected, no other selection is possible.	
NOTE FOR DATA PREPARATION	Missing variables lebst2_1_miss1, lebst2_1_miss2 were added. The content-related information collected via multiple responses is to be provided to the AG in the form of dichotomous individual items 0=No, 1=Yes.	
OUTPUT FORMAT	VALUE	VALUE LABEL
ZP = interviewee IN (1)		
N0J1F.	(0)	not named
	(1)	called
live2_1_0		1I do not listen to music
live2_1_1	2	Opera

live2_1_2	3	Classic
live2_1_3	4	Operetta
live2_1_4	5	Modern serious music (e.g. Hindemith)
live2_1_5	6	Jazz
live2_1_6	7	German hits
live2_1_7	8	Folk music
live2_1_8	9	Musical
live2_1_9	10	Pop music
live2_1_10	11	Other [open: lebst2_1_10x]
live2_1_11	12	what is being played

live2_1_miss1		-2Don't know
live2_1_miss2	-1	Denied

OUTPUT FORMAT	VALUE	VALUE LABEL
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PX = interviewee IN (2)

N0J1F.	(0)	not named
	(1)	called

live2_1_0		1He/she does not listen to music
live2_1_1	2	Opera
live2_1_2	3	Classic
live2_1_3	4	Operetta
live2_1_4	5	Modern serious music (e.g. Hindemith)
live2_1_5	6	Jazz
live2_1_6	7	German hits
live2_1_7	8	Folk music
live2_1_8	9	Musical
live2_1_9	10	Pop music
live2_1_10	11	Other [open: lebst2_1_10x]
live2_1_11	12	what is being played

live2_1_miss1		-2Don't know
live2_1_miss2	-1	Denied

VARIABLENAME **live2_1_10x**

VARIABLENLABELTaste : preferred music genre (open) QUESTION

TEXT. **Other music:**

FILTER FEEDINGyourself2_1_0 IN (0) AND yourself2_1_10 IN (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
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\$900.	SpecificationOther , namely:
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-2Don't know

-1

Denied

VARIABLENAME **live2_2**

VARIABLE LABEL Taste: preferred clothes QUESTION

TEXT ZP **How do you <u>prefer</u> to dress?**QUESTION TEXT PX **How does Mr/Mrs [name ZP] <u>prefer</u> to dress?**INTERVIEWER NOTE *Please read out answers, enter directly if necessary.*

OUTPUT FORMAT	VALUE	VALUE LABEL
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CLOTHU4F.	1	Unobtrusive, correct
-----------	---	----------------------

2	Classic, elegant
---	------------------

3	Simple, comfortable
---	---------------------

4	Original, alternative
---	-----------------------

-2	Don't know
----	------------

-1	Denied
----	--------

VARIABLENAME **live2_3**

VARIABLE LABEL Taste: preferred food QUESTION

TEXT ZP. **What is your <u>favourite</u> food?**QUESTION TEXT PX **What is Mr/Mrs [name ZP] <u>favourite</u> to eat?**INTERVIEWER NOTE *Please read out answers, enter directly if necessary.*

OUTPUT FORMAT	VALUE	VALUE LABEL
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ESSEN4F.	1	Rich and hearty meals, e.g. home cooking
----------	---	--

2	Fine and exquisite food, e.g. delicatessen
---	--

3	Easy-to-prepare meals, e.g. ready-meals and quick meals
---	---

4	Original dishes, e.g. exotic dishes
---	-------------------------------------

-2	Don't know
----	------------

-1	Denied
----	--------

VARIABLENAME **active2**

VARIABLENLABELActivities : Coffee wreath

QUESTION TEXT ZP **Now please think about how you have spent your free time in the last 12 months.****Do you have****attended a coffee party or a regulars' table?**QUESTION TEXT PX **Now please think about how Mr/Mrs [name ZP] has spent his/her free time in the last 12 months in concrete terms.****Did Mr/Mrs [name ZP]****attended a coffee party or a regulars' table?**INTERVIEWER NOTE *If necessary, remind the interviewee that this is only about the last year.*

goes!

PROGRAMMING NOTE Please show the question text from active2 in grey colour.

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME **active2_1**

VARIABLENLABELActivities : Coffee wreath: frequency

QUESTION TEXT ZP **How often did you do this?**

QUESTION TEXT PX **How often did Mr/Mrs [name ZP] do that?**

INTERVIEWER NOTE *Please read out answers, enter directly if necessary.
If necessary, point out to the interviewee again that it is only about the last year!*

FILTER FEEDINGactive2 IN (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
ACTIVEH5F.	1	Daily
	2	Weekly
	3	Monthly
	4	Several times a year
	5	Once a year
	-2	Don't know
	-1	Denied

VARIABLENAME **active2_2**

VARIABLENLABELActivities : Coffee wreath: Place

QUESTION TEXT ZP **Where did you do most of this?**

QUESTION TEXT PX **Where did Mr/Mrs [name ZP] do this predominantly?**

INTERVIEWER NOTE *Please read out answers, enter directly if necessary.
If necessary, point out to the interviewee again that it is only about the last year!*

FILTER FEEDINGactive2 IN (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
AKTIVO3F.	1	At home/in the home
	2	In the immediate vicinity
	3	In the wider surroundings
	-2	Don't know
	-1	Denied

VARIABLENAME	active3
VARIABLENLABELActivities	: Café
QUESTION TEXT ZP	In the last 12 months, have you visited a café, restaurant or pub?
QUESTION TEXT PX	In the last 12 months, has Mr/Mrs [name ZP] visited a café, restaurant or pub?
INTERVIEWER NOTE	<i>If necessary, point out to the interviewee again that this is only about the last year!</i>
PROGRAMMING NOTE	Please show the question text from active2 in grey colour.

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME	active3_1
VARIABLE LABEL	Activities: Café: Frequency
QUESTION TEXT ZP	How often did you do this?
QUESTION TEXT PX	How often did Mr/Mrs [name ZP] do that?
INTERVIEWER NOTE	<i>Please read out answers, enter directly if necessary. If necessary, point out to the interviewee again that it is only about the last year!</i>
FILTER	FEEDINGactive3 IN (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
ACTIVEH5F.	1	Daily
	2	Weekly
	3	Monthly
	4	Several times a year
	5	Once a year
	-2	Don't know
	-1	Denied

VARIABLENAME	active3_2
VARIABLENLABELActivities	: Café: Place
QUESTION TEXT ZP	Where did you do most of this?
QUESTION TEXT PX	Where did Mr/Mrs [name ZP] do this predominantly?
INTERVIEWER NOTE	<i>Please read out answers, enter directly if necessary. If necessary, point out to the interviewee again that it is only about the last year!</i>

FILTER FEED	active3 IN (1)	
OUTPUT FORMAT	VALUE	VALUE LABEL
AKTIVO3F.	1	At home/in the home
	2	In the immediate vicinity
	3	In the wider surroundings
	-2	Don't know
	-1	Denied

VARIABLENAME	active4	
VARIABLENLABEL	Activities : Travel	
QUESTION TEXT ZP	In the last 12 months, have you Travelled for at least 4 days, e.g. to relatives or acquaintances living further away or something else?	
QUESTION TEXT PX	In the last 12 months, has Mr/Mrs [name ZP] Travelled for at least 4 days, e.g. to relatives or acquaintances living further away or something else?	
INTERVIEWER NOTE	<i>If necessary, point out to the interviewee again that this is only about the last year!</i>	
PROGRAMMING NOTE	Please show the question text from active2 in grey colour.	
OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME	active4_1	
VARIABLE LABEL	Activities: Travel: Frequency	
QUESTION TEXT ZP.	How often did you do this?	
QUESTION TEXT PX	How often did Mr/Mrs [name ZP] do that?	
INTERVIEWER NOTE	<i>Please read out answers, enter directly if necessary. If necessary, point out to the interviewee again that it is only about the last year!</i>	
FILTER	FEEDINGactive4 IN (1)	
OUTPUT FORMAT	VALUE	VALUE LABEL
ACTIVEH4F.	2	Weekly
	3	Monthly
	4	Several times a year
	5	Once a year
	-2	Don't know
	-1	Denied

VARIABLENAME	active5
VARIABLENLABELActivities	: Cinema
QUESTION TEXT ZP	In the last 12 months, have you attended a cinema performance or film screening?
QUESTION TEXT PX	In the last 12 months, has Mr/Mrs [name ZP] attended a cinema performance or film screening?
INTERVIEWER NOTE	<i>If necessary, point out to the interviewee again that this is only about the last year!</i>
PROGRAMMING NOTE	Please show the question text from active2 in grey colour.

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME	active5_1
VARIABLE LABEL	Activities: Cinema: Frequency
QUESTION TEXT ZP	How often did you do this?
QUESTION TEXT PX	How often did Mr/Mrs [name ZP] do that?
INTERVIEWER NOTE	<i>Please read out answers, enter directly if necessary. If necessary, point out to the interviewee again that it is only about the last year!</i>
FILTER	FEEDINGactive5 IN (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
ACTIVEH5F.	1	Daily
	2	Weekly
	3	Monthly
	4	Several times a year
	5	Once a year
	-2	Don't know
	-1	Denied

VARIABLENAME	active5_2
VARIABLENLABELActivities	: Cinema: Location
QUESTION TEXT ZP	Where did you do most of this?
QUESTION TEXT PX	Where did Mr/Mrs [name ZP] do this predominantly?
INTERVIEWER NOTE	<i>Please read out answers, enter directly if necessary. If necessary, point out to the interviewee again that it is only about the last year!</i>

FILTER FEED	active5 IN (1)	
OUTPUT FORMAT	VALUE	VALUE LABEL
AKTIVO3F.	1	At home/in the home
	2	In the immediate vicinity
	3	In the wider surroundings
	-2	Don't know
	-1	Denied

VARIABLENAME	active6	
VARIABLENLABELActivities	: concert, theatre, museum	
QUESTION TEXT ZP	In the last 12 months, have you attended a concert, a theatre performance, a museum or an exhibition?	
QUESTION TEXT PX	In the last 12 months, has Mr/Mrs [name ZP] attended a concert, a theatre performance, a museum or an exhibition?	
INTERVIEWER NOTE	<i>If necessary, point out to the interviewee again that this is only about the last year!</i>	
PROGRAMMING NOTE	Please show the question text from active2 in grey colour.	
OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME	active6_1	
VARIABLENLABELActivities	: concert, theatre, museum: frequency	
QUESTION TEXT ZP	How often did you do this?	
QUESTION TEXT PX	How often did Mr/Mrs [name ZP] do that?	
INTERVIEWER NOTE	<i>Please read out answers, enter directly if necessary. If necessary, point out to the interviewee again that it is only about the last year!</i>	
FILTER	FEEDINGACTIVE6 IN (1)	
OUTPUT FORMAT	VALUE	VALUE LABEL
ACTIVEH5F.	1	Daily
	2	Weekly
	3	Monthly
	4	Several times a year
	5	Once a year
	-2	Don't know
	-1	Denied

VARIABLENAME	active6_2
VARIABLE LABEL	Activities: Concert, theatre, museum:
Place QUESTION TEXT ZP	Where did you do most of this?
QUESTION TEXT PX	Where did Mr/Mrs [name ZP] do this predominantly?
INTERVIEWER NOTE	<i>Please read out answers, enter directly if necessary. If necessary, point out to the interviewee again that it is only about the last year!</i>
FILTER	FEEDINGACTIVE6 IN (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
AKTIVO3F.	1	At home/in the home
	2	In the immediate vicinity
	3	In the wider surroundings
	-2	Don't know
	-1	Denied

VARIABLENAME	active7
VARIABLE LABEL	Activities: Artistic. Activity
QUESTION TEXT ZP	In the last 12 months, have you engaged in an artistic activity, e.g. painting, singing, writing poetry, playing a musical instrument or something else?
QUESTION TEXT PX	In the last 12 months, has Mr/Mrs [name ZP] engaged in an artistic activity, e.g. painting, singing, writing poetry, playing a musical instrument or something else?
INTERVIEWER NOTE	<i>If necessary, point out to the interviewee again that this is only about the last year!</i>
PROGRAMMING NOTE	Please show the question text from active2 in grey colour.

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME	active7x
VARIABLENLABEL	Activities : Artistic. Activity: Description (open) QUESTION
TEXT ZP	What exactly do you do?
QUESTION TEXT PX	What exactly is Mr/Mrs [name ZP] doing?
INTERVIEWER NOTE	<i>Please provide specific information about the activity and the context in which it took place (e.g. "writing poetry", not just "poems").</i>
FILTER	FEEDINGactive7 IN (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
\$900.		SpecificationType of activity

-2Don't know

-1

Denied

VARIABLENAME **active7_1**

VARIABLENLABELActivities : Artistic. Activity: Frequency

QUESTION TEXT ZP **How often did you do this?**QUESTION TEXT PX **How often did Mr/Mrs [name ZP] do that?**INTERVIEWER NOTE
*Please read out answers, enter directly if necessary.
If necessary, point out to the interviewee again that it is only about the last year!*

FILTER FEEDINGactive7 IN (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

ACTIVEH5F.	1	Daily
	2	Weekly
	3	Monthly
	4	Several times a year
	5	Once a year

-2Don't know

-1

Denied

VARIABLENAME **active7_2**

VARIABLE LABEL Activities: Artistic. Activity: Place

QUESTION TEXT ZP **Where did you do most of this?**QUESTION TEXT PX **Where did Mr/Mrs [name ZP] do this predominantly?**INTERVIEWER NOTE
*Please read out answers, enter directly if necessary.
If necessary, point out to the interviewee again that it is only about the last year!*

FILTER FEEDINGactive7 IN (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

AKTIVO3F.		1At home/in the home
	2	In the immediate vicinity
	3	In the wider surroundings

-2Don't know

-1

Denied

VARIABLENAME **active9**

VARIABLENLABELActivities : Volunteering

QUESTION TEXT ZP **In the last 12 months, have you
volunteer, e.g. through visiting services, organised help, a position in an association, as
a member of an advisory board or something else?**

QUESTION TEXT PX **Did Mr/Mrs [Name ZP] have been involved in voluntary work in the last 12 months, e.g. through visiting services, organised offers of help, a position in an association, as a member of an advisory board or something else?**

INTERVIEWER'S NOTE *Volunteering refers to all forms of engagement that are linked to an organisation (e.g. club, association, non-profit company) and take place outside private households or outside the family.*

Support services, e.g. for grandchildren or other persons with whom a personal relationship exists, are not included.

PROGRAMMING NOTE Please show the question text from active2 in grey colour.

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

N0J1F.

0

No

1

Yes

-2Don't know

-1

Denied

VARIABLENAME **active9x**

VARIABLENLABELActivities : Volunteering: Description (open)

QUESTION TEXT ZP **What exactly do you do?**

QUESTION TEXT PX **What exactly is Mr/Mrs [name ZP] doing?**

INTERVIEWER NOTE *Please provide specific information about the job and the context in which it took place (e.g. "treasurer in football club", not just "football club").*

FILTER FEEDINGACTIVE9 IN (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
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\$1500.

SpecificationType of honorary office

-2Don't know

-1

Denied

VARIABLENAME **active9_1**

VARIABLE LABEL Activities: Volunteering:

Frequency QUESTION TEXT ZP **How often did you do this?**

QUESTION TEXT PX **How often did Mr/Mrs [name ZP] do that?**

INTERVIEWER NOTE *Please read out answers, enter directly if necessary.
If necessary, point out to the interviewee again that it is only about the last year!*

FILTER FEEDINGACTIVE9 IN (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

ACTIVEH5F.

1

Daily

2

Weekly

3

Monthly

4

Several times a year

5

Once a year

-2Don't know

-1

Denied

VARIABLENAME **active9_2**

VARIABLENLABELActivities : Volunteer: Place

QUESTION TEXT ZP **Where did you do most of this?**QUESTION TEXT PX **Where did Mr/Mrs [name ZP] do this predominantly?**INTERVIEWER NOTE
*Please read out answers, enter directly if necessary.
If necessary, point out to the interviewee again that it is only about the last year!*

FILTER FEEDINGACTIVE9 IN (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

AKTIVO3F.	1	At home/in the home
	2	In the immediate vicinity
	3	In the wider surroundings

-2Don't know

-1

Denied

VARIABLENAME **active10**

VARIABLENLABELActivities : Games

QUESTION TEXT ZP **In the last 12 months, have you
Played games, e.g. board games, skat, skittles, bridge or something similar?**QUESTION TEXT PX **In the last 12 months, has Mr/Mrs [name ZP]
Played games, e.g. board games, skat, skittles, bridge or something similar?**INTERVIEWER NOTE
If necessary, point out to the interviewee again that this is only about the last year!
PROGRAMMING NOTEPlease show the question text from active2 in grey colour.

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

N0J1F.	0	No
	1	Yes

-2Don't know

-1

Denied

VARIABLENAME **active10_1**

VARIABLE LABEL Activities: Games: Frequency

QUESTION TEXT ZP. **How often did you do this?**QUESTION TEXT PX **How often did Mr/Mrs [name ZP] do that?**INTERVIEWER NOTE
*Please read out answers, enter directly if necessary.
If necessary, point out to the interviewee again that it is only about the last year!*

FILTER FEED	active10 IN (1)	
OUTPUT FORMAT	VALUE	VALUE LABEL
ACTIVEH5F.	1	Daily
	2	Weekly
	3	Monthly
	4	Several times a year
	5	Once a year
	-2	Don't know
	-1	Denied
VARIABLENAME	active10_2	
VARIABLENLABEL	Activities : Games: Location	
QUESTION TEXT ZP	Where did you do most of this?	
QUESTION TEXT PX	Where did Mr/Mrs [name ZP] do this predominantly?	
INTERVIEWER NOTE	<i>Please read out answers, enter directly if necessary. If necessary, point out to the interviewee again that it is only about the last year!</i>	
FILTER	FEEDINGactive10 IN (1)	
OUTPUT FORMAT	VALUE	VALUE LABEL
AKTIVO3F.	1	At home/in the home
	2	In the immediate vicinity
	3	In the wider surroundings
	-2	Don't know
	-1	Denied
VARIABLENAME	active11	
VARIABLE LABEL	Activities: Continuing education	
QUESTION TEXT ZP	In the last 12 months, have you learnt something or further educated yourself, e.g. through self-study or by attending lectures and courses?	
QUESTION TEXT PX	In the last 12 months, has Mr/Mrs [name ZP] learnt something or further educated yourself, e.g. through self-study or by attending lectures and courses?	
INTERVIEWER NOTE	<i>If necessary, point out to the interviewee again that this is only about the last year!</i> PROGRAMMING NOTEPlease show the question text from active2 in grey colour.	
OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME **active11x**

VARIABLENLABELActivities : Continuing education: Description

(open) QUESTION TEXT ZP. **What exactly are you doing?**

QUESTION TEXT PX **What exactly is Mr/Mrs [name ZP] doing?**

INTERVIEWER NOTE *Please provide specific information about the activity and the context in which it took place (e.g. "English course at the adult education centre", not just "adult education course").*

FILTER FEEDINGactive11 IN (1)

OUTPUT FORMAT **VALUE** **VALUE LABEL**

\$900. SpecificationType of further education

-2Don't know

-1 Denied

VARIABLENAME **active11_1**

VARIABLENLABELActivities : Continuing education:

Frequency QUESTION TEXT ZP**How often did you do this?**

QUESTION TEXT PX **How often did Mr/Mrs [name ZP] do that?**

INTERVIEWER NOTE *Please read out answers, enter directly if necessary.
If necessary, point out to the interviewee again that it is only about the last year!*

FILTER FEEDINGactive11 IN (1)

OUTPUT FORMAT **VALUE** **VALUE LABEL**

ACTIVEH5F. 1 Daily

2 Weekly

3 Monthly

4 Several times a year

5 Once a year

-2Don't know

-1 Denied

VARIABLENAME **active11_2**

VARIABLENLABELActivities : Continuing education: Place

QUESTION TEXT ZP **Where did you do most of this?**

QUESTION TEXT PX **Where did Mr/Mrs [name ZP] do this predominantly?**

INTERVIEWER NOTE *Please read out answers, enter directly if necessary.
If necessary, point out to the interviewee again that it is only about the last year!*

FILTER FEEDINGactive11 IN (1)

OUTPUT FORMAT **VALUE** **VALUE LABEL**

AKTIVO3F. 1At home/in the home

2 In the immediate vicinity

3 In the wider surroundings

-2Don't know

-1

Denied

VARIABLENAME **active12**

VARIABLE LABEL Activities: polit. Event QUESTION

TEXT ZP **In the last 12 months, have you participated in a political event, e.g. by a party, citizens' initiative, trade union or something similar?**

QUESTION TEXT PX **In the last 12 months, has Mr/Mrs [name ZP] participated in a political event, e.g. by a party, citizens' initiative, trade union or something similar?**

INTERVIEWER NOTE *If necessary, point out to the interviewee again that this is only about the last year!*

PROGRAMMING NOTE Please show the question text from active2 in grey colour.

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

N0J1F.	0	No
	1	Yes

-2Don't know

-1

Denied

VARIABLENAME **active12_1**

VARIABLE LABEL Activities : polit. Event: Frequency QUESTION

TEXT ZP **How often did you do this?**QUESTION TEXT PX **How often did Mr/Mrs [name ZP] do that?**

INTERVIEWER NOTE *Please read out answers, enter directly if necessary.*
If necessary, point out to the interviewee again that it is only about the last year!

FILTER FEEDINGactive12 IN (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

ACTIVEH5F.	1	Daily
	2	Weekly
	3	Monthly
	4	Several times a year
	5	Once a year

-2Don't know

-1

Denied

VARIABLENAME **active12_2**

VARIABLE LABEL Activities: polit. Event: Place QUESTION

TEXT ZP **Where did you do most of this?**QUESTION TEXT PX **Where did Mr/Mrs [name ZP] do this predominantly?**

INTERVIEWER NOTE *Please read out answers, enter directly if necessary.
If necessary, point out to the interviewee again that it is only about the last year!*

FILTER FEEDINGactive12 IN (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
AKTIVO3F.	1	At home/in the home
	2	In the immediate vicinity
	3	In the wider surroundings
	-2	Don't know
	-1	Denied

VARIABLENAME **active14**

VARIABLE LABEL Activities: Receive a visit

QUESTION TEXT ZP **In the last 12 months, have you
Receive visitors (other than nursing or medical professionals)?**

QUESTION TEXT PX **In the last 12 months, has Mr/Mrs [name ZP]
Receive visitors (other than nursing or medical professionals)?**

INTERVIEWER NOTE *If necessary, point out to the interviewee again that this is only about the last year!*

PROGRAMMING NOTEPlease show the question text from active2 in grey colour.

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME **active14_1**

VARIABLE LABELActivities : Receive visit: Frequency

QUESTION TEXT ZP **How often did you do this?**

QUESTION TEXT PX **How often did Mr/Mrs [name ZP] do that?**

INTERVIEWER NOTE *Please read out answers, enter directly if necessary.
If necessary, point out to the interviewee again that it is only about the last year!*

FILTER FEEDINGACTIVE14 IN (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
ACTIVEH5F.	1	Daily
	2	Weekly
	3	Monthly
	4	Several times a year
	5	Once a year

-2	Don't know
-1	Denied

VARIABLENAME	active15
VARIABLE LABEL	Activities: Brain teasers
QUESTION TEXT ZP	In the last 12 months, have you Have you done any brain teasers, e.g. crossword puzzles or memory training?
QUESTION TEXT PX	Has Mr/Mrs [name ZP] in the last 12 months Have you done any brain teasers, e.g. crossword puzzles or memory training?
INTERVIEWER'S NOTE	<i>If necessary, point out to the interviewee again that it is only about the last year!</i>
PROGRAMMING NOTE	Please show the question text from active2 in grey colour.

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes
		-2Don't know
	-1	Denied

VARIABLENAME	active15_1
VARIABLE LABEL	Activities: Brain teasers: Frequency
QUESTION TEXT ZP	How often did you do that?
QUESTION TEXT PX	How often did Mr/Mrs [name ZP] do this?
INTERVIEWER'S NOTE	<i>Please read out answers, enter directly if necessary. If necessary, point out to the interviewee again that it is only about the last year!</i>

FILTER FEED	active15 IN (1)
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OUTPUT FORMAT	VALUE	VALUE LABEL
ACTIVH5F.	1	Daily
	2	Weekly
	3	Monthly
		4Multiple times a year
		5Once a year
		-2Don't know
	-1	Denied

VARIABLENAME	active16
VARIABLE LABEL	Activities: Reading books
QUESTION TEXT ZP	In the last 12 months, have you Books read?
QUESTION TEXT PX	Has Mr/Mrs [name ZP] in the last 12 months Books read?

INTERVIEWER NOTE *If necessary, point out to the interviewee again that this is only about the last year!*

PROGRAMMING NOTE Please show the question text from active2 in grey colour.

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME **active16_1**

VARIABLE LABEL Activities: Reading books:

Frequency QUESTION TEXT ZP **How often did you do this?**

QUESTION TEXT PX **How often did Mr/Mrs [name ZP] do that?**

INTERVIEWER NOTE *Please read out answers, enter directly if necessary.*

If necessary, point out to the interviewee again that it is only about the last year!

FILTER FEEDINGactive16 IN (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
ACTIVEH5F.	1	Daily
	2	Weekly
	3	Monthly
	4	Several times a year
	5	Once a year
	-2	Don't know
	-1	Denied

VARIABLENAME **active17**

VARIABLE LABELActivities : Television

QUESTION TEXT ZP **Do you watch TV?**

QUESTION TEXT PX **Does Mr/Mrs [name ZP] watch TV?**

INTERVIEWER NOTE *Note: conscious television only!*

If necessary, point out to the interviewee again that it is only about the last year!

PROGRAMMING NOTE Please show the question text from active2 in grey colour:

ZP interview: If interviewee IN (1) then response categories TV2F Proxy

interview: If respondent IN (2) then response categories TV2P

OUTPUT FORMAT	VALUE	VALUE LABEL
ZP = interviewee IN (1)		
TV2F.		0I don't watch TV
	1	I watch TV
	-2	Don't know

	-1	Denied
OUTPUT FORMAT	VALUE	VALUE LABEL
PX = interviewee IN (2) TV2P.		0He/she does not watch TV
	1	He/she watches TV
		-2Don't know
	-1	Denied

VARIABLENAME	active17_1	
VARIABLENLABELActivities	: Television: Hours per day	
QUESTION TEXT ZP	How long - in hours - do you watch TV per day on average?	
QUESTION TEXT PX	How long - in hours - does Mr/Mrs [name ZP] watch TV per day on average?	
INTERVIEWER NOTE	<i>If necessary, point out to the interviewee again that this is only about the last year!</i>	
FILTER	FEEDINGACTIVE17 IN (1)	
OUTPUT FORMAT	VALUE	VALUE LABEL
BEST8.	(0 - 24)	Average number of hours per day
	-1	Denied
		-2Don't know

VARIABLENAME	relgem	
VARIABLE LABEL	Religious community	
QUESTION TEXT ZP	Which religious community do you belong to?	
QUESTION TEXT PX	To which religious community does Mr/Mrs [name ZP] belong?	
INTERVIEWER NOTE	<i>Categorisation by interviewer! Do not read out!</i>	
OUTPUT FORMAT	VALUE	VALUE LABEL
RELI7F.	1	Roman Catholic Church
	2	Protestant Church (without free churches)
	3	Evangelical Free Church
	4	Islamic religious community
	5	Jewish religious community
	6	Other religious community, namely: [open: relgemx]
	7	No religious community
		-2Don't know
	-1	Denied

VARIABLENAME	relgemx	
VARIABLE LABEL	Religious community (open)	
QUESTION TEXT.	Other religious community:	

FILTER FEED	relgem IN (6)	
<i>OUTPUT FORMAT</i>	<i>VALUE</i>	<i>VALUE LABEL</i>
\$900.	Indication	Type of religious community
	-2	Don't know
	-1	Denied

VARIABLENAME	association	
VARIABLE LABEL	Association membership	
QUESTION TEXT ZP	Are you an active member of an organisation or association?	
QUESTION TEXT PX	Is Mr/Mrs [name ZP] an active member of an organisation or club?	
<i>OUTPUT FORMAT</i>	<i>VALUE</i>	<i>VALUE LABEL</i>
N0J1F.	0	No
	1	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME	vereinx	
VARIABLENLABEL	: active (open) QUESTION TEXT	
	Which are they?	
FILTER FEEDING	ASSOCIATION IN (1)	
<i>OUTPUT FORMAT</i>	<i>VALUE</i>	<i>VALUE LABEL</i>
\$900.		SpecificationType of organisation or association
		-2Don't know
	-1	Denied

VARIABLENAME	politei1	
VARIABLENLABEL	Political participation: Party	
QUESTION TEXT ZP	Political interests can be very different: Which party - speaking in general terms - do you lean most towards?	
QUESTION TEXT PX	Political interests can be very different: Which party - generally speaking - is Mr/Mrs [name ZP] most inclined to?	
INTERVIEWER NOTE	<i>Categorisation by interviewer! Do not read out!</i>	
<i>OUTPUT FORMAT</i>	<i>VALUE</i>	<i>VALUE LABEL</i>
PART10F.	1	CDU
	2	CSU
	3	SPD
	4	The Left
	5	Alliance 90/The Greens
	6	AfD
	7	FDP

8	NPD
9	Other party
10	No party
	-2Don't know
-1	Denied

VARIABLENAME	politei2
	VARIABLENLABELPolitical participation: Bundestag election
QUESTION TEXT ZP	Some people don't go to the polls these days for various reasons. How is it with you: Did you vote in the last federal election?
QUESTION TEXT PX	Some people don't go to the polls these days for various reasons. How is it with Mr/Mrs [name ZP]: Did Mr/Mrs [name ZP] vote in the last federal election?

<i>OUTPUT FORMAT</i>	<i>VALUE</i>	<i>VALUE LABEL</i>
N0J1F.	0	No
	1	Yes
		-2Don't know
	-1	Denied

8 Use of technology

VARIABLENAME **technu1**

VARIABLENLABEL Technology use : computer or laptop

QUESTION TEXT ZP **For more and more people, the use of modern technology is also part of everyday life. Which of the following techniques have you used in the last 12 months?**

QUESTION TEXT PX **Did you use a computer or laptop?**

For more and more people, the use of modern technology is also part of everyday life. Which of the following techniques has Mr/Mrs [name ZP] used in the last 12 months?

INTERVIEWER'S NOTE **Did Mr/Mrs [name ZP] use a computer or laptop?**

By use we mean active use. It does not mean having someone else find information for you, e.g. on the internet.

PROGRAMMING NOTE Please always display the two related questions (usage and frequency, such as technu1 and technu1_1 etc.) on one screen.

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME **technu1_1**

VARIABLENLABEL Technology use : Computer or laptop: frequency

QUESTION TEXT ZP **How often did you use this technology?**

QUESTION TEXT PX **How often did Mr/Mrs [name ZP] use this technique?**

INTERVIEWER NOTE *Please read out answers, enter directly if necessary.*

FILTER FEEDING technu1 IN (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
ACTIVEH5F.	1	Daily
	2	Weekly
	3	Monthly
	4	Several times a year
	5	Once a year
	-2	Don't know
	-1	Denied

VARIABLENAME **technu2**

VARIABLENLABEL Technology use: Internet

QUESTION TEXT ZP **Have you used the internet?**

QUESTION TEXT PX **Did Mr/Mrs [name ZP] use the internet?**

INTERVIEWER'S NOTE

By use we mean active use. It does not mean having someone else find information for you, e.g. on the internet.

This also includes the use of internet-linked apps.

PROGRAMMING NOTE Please always display the two related questions (usage and frequency, such as technu1 and technu1_1 etc.) on one screen.

Please show the question text from technu1 in grey colour.

OUTPUT FORMAT	VALUE	VALUE LABEL
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N0J1F.

0

No

1

Yes

-2Don't know

-1

Denied

VARIABLENAME **technu2_1**

VARIABLENLABEL Use of technology: Internet: Frequency

QUESTION TEXT ZP **How often did you use this technology?**

QUESTION TEXT PX **How often did Mr/Mrs [name ZP] use this technique?**

INTERVIEWER NOTE *Please read out answers, enter directly if necessary.*

FILTER FEEDING technu2 IN (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

ACTIVEH5F.

1

Daily

2

Weekly

3

Monthly

4

Several times a year

5

Once a year

-2Don't know

-1

Denied

VARIABLENAME **technu3**

VARIABLE LABEL Technology use: Smartphone

QUESTION TEXT ZP **Have you used a smartphone?**

QUESTION TEXT PX **Has Mr/Mrs [name ZP] used a smartphone?**

INTERVIEWER NOTE *(Explanation smartphone: with internet access, usually with touch screen)
By use is meant active use. It does not mean having someone else find information for you, e.g. on the internet.*

PROGRAMMING NOTE Please always display the two related questions (usage and frequency, such as technu1 and technu1_1 etc.) on one screen.

Please show the question text from technu1 in grey colour.

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

N0J1F.

0

No

1

Yes

-2Don't know

-1

Denied

VARIABLENAME **technu3_1**

VARIABLE LABEL Technology use: Smartphone: frequency

QUESTION TEXT ZP **How often did you use this technology?**QUESTION TEXT PX **How often did Mr/Mrs [name ZP] use this technique?**INTERVIEWER NOTE *Please read out answers, enter directly if necessary.*

FILTER FEEDING technu3 IN (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

ACTIVH5F.

1

Daily

2

Weekly

3

Monthly

4

Several times a year

5

Once a year

-2

Don't know

-1

Denied

VARIABLENAME **technu4**

VARIABLE LABEL Technology use: Mobile phone

QUESTION TEXT ZP **Did you use a normal mobile phone?**QUESTION TEXT PX **Did Mr/Mrs [name ZP] use a normal mobile phone?**INTERVIEWER NOTE *(Explanation: no smartphone)**By use is meant active use. It does not mean having someone else find information for you, e . g. on the internet.*

FILTER FEEDING technu3 IN (0)

PROGRAMMING NOTEPlease always display the two related questions (usage and frequency, such as technu1 and technu1_1 etc.) on one screen.

Please show the question text from technu1 in grey colour.

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

N0J1F.

0

No

1

Yes

-2Don't know

-1

Denied

VARIABLENAME **technu4_1**

VARIABLE LABEL Use of technology: Mobile phone:

frequency QUESTION TEXT ZP **How often did you use this technology?**QUESTION TEXT PX **How often did Mr/Mrs [name ZP] use this technique?**INTERVIEWER NOTE *Please read out answers, enter directly if necessary.*

FILTER FEED technu3 IN (0) AND technu4 IN (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
ACTIVH5F.	1	Daily
	2	Weekly
	3	Monthly
	4	Several times a year
	5	Once a year
	-2	Don't know
	-1	Denied

VARIABLENAME **technu5**
 VARIABLE LABEL Technology use: Tablet computer
 QUESTION TEXT ZP **Have you used a tablet computer?**
 QUESTION TEXT PX **Has Mr/Mrs [name ZP] used a tablet computer?**
 INTERVIEWER'S NOTE *By use we mean active use. It does not mean having someone else find information for you, e.g. on the internet.*
 PROGRAMMING NOTE Please always display the two related questions (usage and frequency, such as technu1 and technu1_1 etc.) on one screen.
 Please show the question text from technu1 in grey colour.

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME **technu5_1**
 VARIABLE LABEL Technology use: Tablet computer: frequency
 QUESTION TEXT ZP **How often did you use this technology?**
 QUESTION TEXT PX **How often did Mr/Mrs [name ZP] use this technique?**
 INTERVIEWER NOTE *Please read out answers, enter directly if necessary.*
 FILTER FEEDING technu5 IN (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
ACTIVEH5F.	1	Daily
	2	Weekly
	3	Monthly
	4	Several times a year
	5	Once a year
	-2	Don't know
	-1	Denied

VARIABLENAME	technu6
VARIABLE LABEL	Technology use: Fitness wristband
QUESTION TEXT ZP	Have you used a fitness bracelet or a wristband that measures your body movement ('pedometer')?
QUESTION TEXT PX	Has Mr/Mrs [name ZP] used a fitness wristband or a wristband with which he/she can measure his/her body movement ("pedometer")?
INTERVIEWER'S NOTE	<i>By use we mean active use. It does not mean having someone else find information for you, e.g. on the internet.</i>

PROGRAMMING NOTE Please always display the two related questions (usage and frequency, such as technu1 and technu1_1 etc. to technu6 and technu6_1) on one screen.

Please show the question text from technu1 in grey colour.

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME	technu6_1
VARIABLE LABEL	Technology use : Fitness wristband: frequency
QUESTION TEXT ZP	How often did you use this technology?
QUESTION TEXT PX	How often did Mr/Mrs [name ZP] use this technique?
INTERVIEWER NOTE	<i>Please read out answers, enter directly if necessary.</i>
FILTER FEEDING	technu6 IN (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
ACTIVEH5F.	1	Daily
	2	Weekly
	3	Monthly
	4	Several times a year
	5	Once a year
	-2	Don't know
	-1	Denied

VARIABLENAME	techei1
VARIABLE LABEL	Technique setting: Interest
QUESTION TEXT ZP	How interested are you in new technical things?
QUESTION TEXT PX	How interested is Mr/Mrs [name ZP] in new technical things?
INTERVIEWER'S NOTE	<i>Please read out answers, enter directly if necessary.</i>

OUTPUT FORMAT	VALUE	VALUE LABEL
	1	Not at all
	2	Rather not

3	Partly/partly
4	Rather
5	Very
	-2Don't know
-1	Denied

VARIABLENAME	techei2
VARIABLE LABEL	Technique setting: Difficulty
QUESTION TEXT ZP	The following two questions are about your attitudes towards modern technology. Please think of your personal experiences in dealing with technology or, alternatively, your basic attitude towards modern technology. How difficult is it for you to operate modern digital devices, such as mobile phones, computers, smartphones or tablet computers?
QUESTION TEXT PX	The following two questions are about the attitudes of Mr/Mrs [name of the person] towards modern technology. Please think about the personal experiences of Mr/Mrs [name CB] in dealing with technology or alternatively about his/ her fundamental attitude towards modern technology. How difficult is it for Mr/Mrs [name ZP] to operate modern digital devices, such as mobile phones, computers, smartphones or tablet computers?
INTERVIEWER NOTE	<i>Please read out answers, enter directly if necessary.</i>

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

1	Not at all
2	Rather not
3	Partly/partly
4	Rather
5	Very
	-2Don't know
-1	Denied

VARIABLENAME	techei3
VARIABLE LABEL	Technique setting: Everyday life facilitation
QUESTION TEXT ZP	How much do modern digital devices such as mobile phones, computers, smartphones or tablet computers make your everyday life easier?
QUESTION TEXT PX	How much do modern digital devices, such as mobile phones, computers, smartphones or tablet computers, facilitate the everyday life of Mr/Mrs [name ZP]?
INTERVIEWER NOTE	<i>Please read out answers, enter directly if necessary.</i>

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

1	Not at all
2	Rather not
3	Partly/partly
4	Rather
5	Very

-2Don't know

	-1	Denied
VARIABLENAME	anint1	
	VARIABLENLABEL	Application on the Internet: Emails
QUESTION TEXT ZP	What have you used the internet for in the last 3 months? Do you have	
	... emails sent and received, or would that be interesting for you?	
QUESTION TEXT PX	What did Mr/Mrs [name ZP] use the internet for in the last 3 months? Did Mr/Mrs [name ZP]	
	... sent and received emails, or would that be interesting for him/her?	
INTERVIEWER NOTE	<i>Please read out answers, enter directly if necessary.</i>	
FILTER FEEDING	technu2 IN (1)	
PROGRAMMING NOTE	Please programme as a responsive item battery (anint1 - anint4) and the question text as well as the interviewer's note from the second item onwards in grey font.	
OUTPUT FORMAT	VALUE	VALUE LABEL
JINTN3F.	1	Yes
	2	No, but interesting
	3	No, and not interesting either
	-2	Don't know
	-1	Denied
VARIABLENAME	anint2	
	VARIABLENLABEL	Application on the Internet: Information on health topics
QUESTION TEXT ZP	... looking for information on health topics on the internet, or would that be interesting for you?	
QUESTION TEXT PX	... information about health topics on the Internet sought, or would that be interesting for him/her?	
FILTER FEEDING	technu2 IN (1)	
PROGRAMMING NOTE	Please programme as a responsive item battery (anint1 - anint4) and the question text as well as the interviewer's note from the second item onwards in grey font.	
OUTPUT FORMAT	VALUE	VALUE LABEL
JINTN3F.	1	Yes
	2	No, but interesting
	3	No, and not interesting either
	-2	Don't know
	-1	Denied
VARIABLENAME	anint3	
	VARIABLENLABEL	Application on the internet: social networks
QUESTION TEXT ZP	... participated in social networks such as Facebook or Twitter, or would that be interesting for you?	

QUESTION TEXT PX	... participated in social networks such as Facebook or Twitter, or would that be interesting for him/her?
FILTER FEEDING	technu2 IN (1)
PROGRAMMING NOTE	Please programme as a responsive item battery (anint1 - anint4) and the question text as well as the interviewer's note from the second item onwards in grey font.

OUTPUT FORMAT	VALUE	VALUE LABEL
JINTN3F.	1	Yes
	2	No, but interesting
	3	No, and not interesting either
	-2	Don't know
	-1	Denied

VARIABLENAME	anint4
	VARIABLENLABELApplication on the Internet: Buy or sell goods or services
QUESTION TEXT ZP	... bought or sold goods or services, e.g. on Amazon or Ebay, or would that be interesting for you?
QUESTION TEXT PX	... bought or sold goods or services, e.g. on Amazon or Ebay, or would that be interesting for him/her?
FILTER FEEDING	technu2 IN (1)
PROGRAMMING NOTE	Please programme as a responsive item battery (anint1 - anint4) and the question text as well as the interviewer's note from the second item onwards in grey font.

OUTPUT FORMAT	VALUE	VALUE LABEL
JINTN3F.	1	Yes
	2	No, but interesting
	3	No, and not interesting either
	-2	Don't know
	-1	Denied

11 Value System

Intermediate Screen

VARIABLENAME	Screen3
VARIABLE LABEL	Intermediate screen 3
QUESTION TEXT ZP	The following is about your faith and basic views and experiences, which can also be detached from a particular religion.
QUESTION TEXT PX	The following is about Mr/Mrs [name ZP]'s faith and basic views and experiences, which can also be detached from a particular religion.

VARIABLENAME	spirit1_1
VARIABLENLABEL	Spirituality : Connection to God: Importance
QUESTION TEXT ZP	How important is it to you to feel connected to God or a higher power?
QUESTION TEXT PX	How important is it to Mr/Mrs [name ZP] to feel connected to God or a higher power?
INTERVIEWER NOTE	<i>Please read out answers, enter directly if necessary.</i>

OUTPUT FORMAT	VALUE	VALUE LABEL
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WICHT4F.	1	Not at all important
	2	Rather not important
	3	Rather important
	4	Very important
	-2	Don't know
	-1	Denied

VARIABLENAME	spirit1_2
VARIABLENLABEL	Spirituality : Connection to God: Frequency
QUESTION TEXT ZP	How often do you feel connected to God or a higher power?
QUESTION TEXT PX	How often does Mr/Mrs [name ZP] feel connected to God or a higher power?
INTERVIEWER NOTE	<i>Please read out answers, enter directly if necessary.</i>

OUTPUT FORMAT	VALUE	VALUE LABEL
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HAEUF4F.	1	Never
	2	Rather rare
	3	Sometimes
	4	Frequently
	-2	Don't know
	-1	Denied

VARIABLENAME	spirit2_1
VARIABLENLABEL	Spirituality : connecting with people: Importance
QUESTION TEXT ZP	How important is it to you to feel connected to people?

QUESTION TEXT PX	How important is it for Mr/Mrs [name ZP] to feel connected to people?	
INTERVIEWER NOTE	<i>Please read out answers, enter directly if necessary.</i>	
OUTPUT FORMAT	VALUE	VALUE LABEL
WICHT4F.	1	Not important at all
	2	Rather not important
	3	Rather important
	4	Very important
	-2	Don't know
	-1	Denied
VARIABLENAME	spirit2_2	
VARIABLE LABEL	Spirituality: connection with people: Frequency	
QUESTION TEXT ZP	How often do you feel connected to people?	
QUESTION TEXT PX	How often does Mr/Mrs [name ZP] feel connected to people?	
INTERVIEWER'S NOTE	<i>Please read out answers, enter directly if necessary.</i>	
OUTPUT FORMAT	VALUE	VALUE LABEL
HAEUF4F.	1	Never
	2	Rather rare
	3	Sometimes
	4	Frequently
	-2	Don't know
	-1	Denied
VARIABLENAME	spirit3_1	
VARIABLE LABEL	Spirituality : connection to nature: importance	
QUESTION TEXT ZP	How important is it to you to feel connected to nature?	
QUESTION TEXT PX	How important is it for Mr/Mrs [name ZP] to feel connected to nature?	
INTERVIEWER'S NOTE	<i>Please read out answers, enter directly if necessary.</i>	
OUTPUT FORMAT	VALUE	VALUE LABEL
WICHT4F.	1	Not important at all
	2	Rather not important
	3	Rather important
	4	Very important
	-2	Don't know
	-1	Denied
VARIABLENAME	spirit3_2	
VARIABLE LABEL	Spirituality: Connection to nature: frequency	
QUESTION TEXT ZP	How often do you feel connected to nature?	

QUESTION TEXT PX	How often does Mr/Mrs [name ZP] feel connected to nature?	
INTERVIEWER NOTE	<i>Please read out answers, enter directly if necessary.</i>	
OUTPUT FORMAT	VALUE	VALUE LABEL
HAEUF4F.	1	Never
	2	Rather rare
	3	Sometimes
	4	Frequently
	-2	Don't know
	-1	Denied
VARIABLENAME	spirit4_1	
VARIABLE LABEL	Spirituality: Institutionalisation: Importance	
QUESTION TEXT ZP	How important is it to you to live out your beliefs communally (e.g. in church, congregation, faith community)?	
QUESTION TEXT PX	How important is it for Mr/Woman [name ZP] to live out his/her beliefs communally (e.g. in church, congregation, faith community)?	
INTERVIEWER'S NOTE	<i>Please read out answers, enter directly if necessary.</i>	
OUTPUT FORMAT	VALUE	VALUE LABEL
WICHT4F.	1	Not at all important
	2	Rather not important
	3	Rather important
	4	Very important
	-2	Don't know
	-1	Denied
VARIABLENAME	spirit4_2	
VARIABLE LABEL	Spirituality: Institutionalisation: Frequency	
QUESTION TEXT ZP	How often do you feel part of a community in institutionalised forms (e.g. church, congregation, faith community)?	
QUESTION TEXT PX	How often does Mr/Mrs [name ZP] feel part of a community in institutionalised forms (e.g. church, congregation, faith community)?	
INTERVIEWER'S NOTE	<i>Please read out answers, enter directly if necessary.</i>	
OUTPUT FORMAT	VALUE	VALUE LABEL
HAEUF4F.	1	Never
	2	Rather rare
	3	Sometimes
	4	Frequently
	-2	Don't know
	-1	Denied

VARIABLENAME **spirit4_3**

VARIABLENLABEL Spirituality : institutionalisation: orientation towards specifications

QUESTION TEXT ZP **To what extent do you orientate yourself in your life to guidelines from religious institutions (e.g. dogmas, commandments, prohibitions)?**

QUESTION TEXT PX **To what extent does Mr/Mrs [name ZP] follow the guidelines of religious institutions (e.g. dogmas, commandments, prohibitions) in his/her life?**

INTERVIEWER NOTE *Please read out answers, enter directly if necessary.*

OUTPUT FORMAT	VALUE	VALUE LABEL
STRONG4F.	1	Not strong at all
	2	Rather not strong
	3	Rather strong
	4	Very strong
		-2Don't know
	-1	Denied

VARIABLENAME **spirit5_1**

VARIABLENLABEL Spirituality : part of a greater whole: Importance

QUESTION TEXT ZP **How important is a knowledge of being part of a greater whole to you?**

QUESTION TEXT PX **How important is a knowledge of being part of a bigger whole to Mr/Mrs [name ZP]?**

INTERVIEWER NOTE *Please read out answers, enter directly if necessary.*

OUTPUT FORMAT	VALUE	VALUE LABEL
WICHT4F.	1	Not at all important
	2	Rather not important
	3	Rather important
	4	Very important
		-2Don't know
	-1	Denied

VARIABLENAME **spirit5_2**

VARIABLE LABEL Spirituality: part of a greater whole: Frequency

QUESTION TEXT ZP **How often do you feel part of a greater whole?**

QUESTION TEXT PX **How often does Mr/Mrs [name ZP] feel part of a bigger picture?**

INTERVIEWER NOTE *Please read out answers, enter directly if necessary.*

OUTPUT FORMAT	VALUE	VALUE LABEL
HAEUF4F.	1	Never
	2	Rather rare
	3	Sometimes
	4	Frequently

-2Don't know

-1

Denied

VARIABLENAME spirit6_1

VARIABLENLABELSpirituality : Practising religious practices: Importance

QUESTION TEXT ZP **How important is it to you to regularly engage in faith-based practices (e.g. praying, meditating, pausing, etc.)?**QUESTION TEXT PX **How important is it for Mr/Mrs [name ZP] to engage in faith-based practices (e.g. praying, meditating, pausing, etc.) on a regular basis?**INTERVIEWER NOTE *Please read out answers, enter directly if necessary.*

OUTPUT FORMAT	VALUE	VALUE LABEL
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WICHT4F. 1Not at all important

2 Rather not important

3 Rather important

4 Very important

-2Don't know

-1

Denied

VARIABLENAME spirit6_2

VARIABLENLABELSpirituality : engaging in religious practices: Frequency

QUESTION TEXT ZP **How often do you manage to perform rituals or religious/spiritual practices regularly in your daily life (e.g. attending church services, praying, meditating or consciously pausing, celebrating holidays)?**QUESTION TEXT PX **How often does Mr/Mrs [name ZP] manage to perform rituals or religious/spiritual practices regularly in everyday life (e.g. attend church services, pray, meditate or consciously pause, celebrate holidays)?**INTERVIEWER NOTE *Please read out answers, enter directly if necessary.*

OUTPUT FORMAT	VALUE	VALUE LABEL
---------------	-------	-------------

HAEUF4F. 1 Never

2 Rather rare

3 Sometimes

4 Frequently

-2Don't know

-1

Denied

VARIABLENAME spirit7_1

VARIABLENLABELSpirituality : Relationship with God reconciled

QUESTION TEXT ZP **How reconciled and balanced is your relationship with God or a higher power?**QUESTION TEXT PX **How reconciled and balanced is Mr/Mrs [name ZP]'s relationship with God or a higher power?**INTERVIEWER NOTE *Please read out answers, enter directly if necessary.*

OUTPUT FORMAT	VALUE	VALUE LABEL
STARK4F.	1	Not strong at all
	2	Rather not strong
	3	Rather strong
	4	Very strong
	-2	Don't know
	-1	Denied

VARIABLENAME **spirit7_2**

VARIABLENLABELSpirituality : God as support

QUESTION TEXT ZP **How much of a support is God or a higher power for you in your life?**

QUESTION TEXT PX **How much of a support is God or a higher power for Mr/Mrs [name ZP] in his/her life?**

INTERVIEWER NOTE *Please read out answers, enter directly if necessary.*

OUTPUT FORMAT	VALUE	VALUE LABEL
STARK4F.	1	Not strong at all
	2	Rather not strong
	3	Rather strong
	4	Very strong
	-2	Don't know
	-1	Denied

VARIABLENAME **spirit7_3**

VARIABLENLABELSpirituality : leaving everything behind to go to God

QUESTION TEXT ZP **How strongly do you wish to leave all this behind, to be able to go to God or a higher power?**

QUESTION TEXT PX **How strongly does Mr/Mrs [name ZP] wish to leave all this behind in order to be able to go to God or a higher power?**

INTERVIEWER NOTE *Please read out answers, enter directly if necessary.*

OUTPUT FORMAT	VALUE	VALUE LABEL
STRONG4F.	1	Not strong at all
	2	Rather not strong
	3	Rather strong
	4	Very strong
	-2	Don't know
	-1	Denied

VARIABLENAME **spirit7_4**

VARIABLENLABELSpirituality : God is threatening and punishing

QUESTION TEXT ZP **How much is God or a higher power threatening and punishing for you in your life (e.g. due to ideas of a still pending Last Judgement**

or images of a punishing God)?

QUESTION TEXT PX

How much is God or a higher power threatening and punishing for Mr/Woman [name ZP] in his/her life (e.g. due to ideas of a pending Last Judgement or images of a punishing God)?

INTERVIEWER NOTE

Please read out answers, enter directly if necessary.

OUTPUT FORMAT	VALUE	VALUE LABEL
STARK4F.	1	Not strong at all
	2	Rather not strong
	3	Rather strong
	4	Very strong
	-2	Don't know
	-1	Denied

VARIABLENAME

stertod4

VARIABLENLABELSetting on Dying and Death: Making Thoughts

QUESTION TEXT ZP

How often do you think about dying and being dead?

QUESTION TEXT PX

How often does Mr/Woman [name ZP] think about dying or being dead?

INTERVIEWER'S NOTE

Please read out answers, enter directly if necessary.

OUTPUT FORMAT	VALUE	VALUE LABEL
HAEUF4F.	1	Never
	2	Rather rare
	3	Sometimes
	4	Frequently
	-2	Don't know
	-1	Denied

VARIABLENAME

stertod5

VARIABLE LABEL

Setting. on dying and death: Will

QUESTION TEXT ZP

Have you written a will?

QUESTION TEXT PX

Has Mr/Mrs [name ZP] written a will?

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME

stertod6

VARIABLENLABELsett

. On dying and death: self-determination at the end of life

QUESTION TEXT ZP

In your opinion, should it also be legally possible in Germany to

to determine the end of life for themselves?

QUESTION TEXT PX

In the opinion of Mr/Mrs [name ZP], should it also be legally possible in Germany to determine one's own end of life?

INTERVIEWER NOTE

Please read out answers, enter directly if necessary.

OUTPUT FORMAT	VALUE	VALUE LABEL
SELF4F.	1	No
	2	Rather no
	3	Rather yes
	4	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME

figure1

VARIABLENLABELDisposals : Living will and health care proxy

QUESTION TEXT ZP

Have you made one or more of the following dispositions in the event of severe health limitations?

Living will and health care proxy

QUESTION TEXT PX

Has Mr/Mrs [name ZP] made one or more of the following dispositions in the event of severe health limitations?

Living will and health care proxy

PROGRAMMING NOTEPlease programme as a responsive item battery (verfue1, verfue3) and leave the question text for the next item (verfue3) in grey font.

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME

figure3

VARIABLENLABELDisposals : Care directive QUESTION TEXT

Care directive

PROGRAMMING NOTEPlease programme as a responsive item battery (verfue1, verfue3) and leave the question text for the next item (verfue3) in grey font.

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes
	-2	Don't know
	-1	Denied

12 Personality

VARIABLENAME	eikontr1
VARIABLENLABELExtern	. and intern. Control life: Having life in your own hands
QUESTION TEXT ZP	People perceive the influence on their own lives very differently. Please tell us how well the following views apply to yourself.
QUESTION TEXT PX	Do you have the feeling that you are in control of your own life? People perceive the impact on their own lives very differently. Please tell us how well the following views apply to Mr/Mrs [name ZP]. Does Mr/Mrs [name ZP] feel that he/she is in control of his/her own life?
INTERVIEWER NOTE	<i>Please read out answers, enter directly if necessary.</i> PROGRAMMING NOTEPlease programme as a responsive item battery (eikontr1 - eikontr4) and the question text as well as the interviewer's note from the second item onwards in grey

OUTPUT FORMAT	VALUE	VALUE LABEL
ZUTR4_2F.	font.	
	1	Does not apply at all
	2	Rather not applicable
	3	More likely to apply
	4	Applies exactly
	-2	Don't know
	-1	Denied

VARIABLENAME	eikontr2
VARIABLENLABELExtern	. and intern. Control experience: Success through effort
QUESTION TEXT ZP	Do you feel that if you put in the effort, you will succeed?
QUESTION TEXT PX	Does Mr/Mrs [name ZP] feel that if he/she tries hard, he/she will succeed?
	PROGRAMMING NOTEPlease programme as a responsive item battery (eikontr1 - eikontr4) and the question text as well as the interviewer's note from the second item onwards in grey

OUTPUT FORMAT	VALUE	VALUE LABEL
ZUTR4_2F.	font.	
	1	Does not apply at all
	2	Rather not applicable
	3	More likely to apply
	4	Applies exactly
	-2	Don't know
	-1	Denied

VARIABLENAME	eikontr3
VARIABLENLABELExtern	. and intern. Control life: Life is determined by others
QUESTION TEXT ZP	Do you feel that your life is largely determined by others?
QUESTION TEXT PX	Does Mr/Mrs [name ZP] feel that his/her life is largely determined by others?

is determined?

PROGRAMMING NOTE Please programme as a responsive item battery (eikontr1 - eikontr4) and the question text as well as the interviewer's note from the second item onwards in grey font.

<i>OUTPUT FORMAT</i>	<i>VALUE</i>	<i>VALUE LABEL</i>
ZUTR4_2F.	1	Does not apply at all
	2	Rather not applicable
	3	More likely to apply
	4	Applies exactly
	-2	Don't know
	-1	Denied

VARIABLENAME

eikontr4

VARIABLENLABELExtern

. and intern. Control life: Plans thwarted by fate

QUESTION TEXT ZP

Do you feel that your plans are often thwarted by fate?

QUESTION TEXT PX

Does Mr/Mrs [name ZP] feel that his/her plans are often thwarted by fate?

PROGRAMMING NOTE Please programme as a responsive item battery (eikontr1 - eikontr4) and the question text as well as the interviewer's note from the second item onwards in grey font.

<i>OUTPUT FORMAT</i>	<i>VALUE</i>	<i>VALUE LABEL</i>
ZUTR4_2F.	1	Does not apply at all
	2	There is a tendency not to apply
	3	There is more to it
	4	Applies exactly
	-2	Don't know
	-1	Denied

14 Critical life events

VARIABLENAME	krler1	
VARIABLENLABEL	Load due to life event: Spontaneous	
QUESTION TEXT ZP	Surely there were also not so nice experiences in your life. Were there any experiences or events in your life that still bother you today?	
QUESTION TEXT PX	Surely there were also not so nice experiences in Mr/Mrs [name ZP]'s life. Were there any experiences or events in the life of Mr/Mrs [name ZP] that still bother him/her today?	
<i>OUTPUT FORMAT</i>	<i>VALUE</i>	<i>VALUE LABEL</i>
N0J1F.	0	No
	1	Yes
		-2Don't know
	-1	Denied
VARIABLENAME	krler1_0	
VARIABLENLABEL	Stress due to life event: Spontaneous: Assignment WK2	
QUESTION TEXT ZP	Which event still burdens you the most today?	
QUESTION TEXT PX	Which event still weighs most heavily on Mr/Mrs [name ZP] today?	
INTERVIEWER NOTE	<i>Assignment by interviewer! If it is unclear whether it is related to the Second World War, please ask explicitly whether it had something to do with the Second World War.</i>	
FILTER FEEDING	CRACKER1 IN (1)	
NOTE FOR DATA PREPARATION	New variable name.	
<i>OUTPUT FORMAT</i>	<i>VALUE</i>	<i>VALUE LABEL</i>
KRLERW2F.		0Not related to World War 2
	1	In connection with World War 2
VARIABLENAME	krler1_1	
VARIABLENLABEL	Load due to life event: Spontaneous:	
event WK2 INTERVIEWER NOTE	<i>Assignment by interviewer! Do not read out!</i>	
	FILTER FEED krler1 IN (1) AND krler1_0 IN (1)	
	PROGRAMMING NOTEIf value IN (8) AND children1 IN (0), then alert	
	Standard text for alert: "Please check if this entry is correct".	
<i>OUTPUT FORMAT</i>	<i>VALUE</i>	<i>VALUE LABEL</i>
KRLER12F.		1Physical threat, assault, injury or torture
	2	Victim of rape
	3	Captivity, hostage-taking or kidnapping
	4	Bombing
	5	Expulsion or flight
	6	Death of the parents

7	Death of siblings
8	Death of a child
9	Death of the partner
10	Accident
11	Survived serious illness
12	Other: [open: krler1_1x]
	-2Don't know
-1	Denied

VARIABLENAME **krler1_1x**
 VARIABLENLABELoad of life event: Spontaneous: Event WK2: Other
 (open) QUESTION TEXT **Other event (open)**
 FILTER FEED krler1 IN (1) AND krler1_0 IN (1) AND krler1_1 IN (12)

OUTPUT FORMAT	VALUE	VALUE LABEL
\$1500.		SpecificationOther event
		-2Don't know
	-1	Denied

VARIABLENAME **krler1_2**
 VARIABLENLABELoad due to life event: Spontaneous: Event
 not WK2 INTERVIEWER NOTE. *Assignment by interviewer! Do not read out!*
 FILTER FEED krler1 IN (1) AND krler1_0 IN (0)
 PROGRAMMING NOTEif value IN (3) AND children1 IN (0) OR (value IN (16) AND children1 IN (1), then alert Default text for alert: "Please check if this entry is correct."

OUTPUT FORMAT	VALUE	VALUE LABEL
KRLER21F.	1	Death of the parents
	2	Death of siblings
	3	Death of a child
	4	Death of the partner
	5	Death of a friend(s)
	6	Accident
	7	Natural disasters
	8	Survived serious illness
	9	Persistent severe illness
	10	War events
	11	Physical threat, assault, injury or torture
	12	Victim of rape
	13	Captivity, hostage-taking or kidnapping
	14	Terrorist attack

15	Expulsion or flight
16	Childlessness
17	Marriage problems/ divorce
18	Discord with children/family
19	Disagreements with friends
20	Serious illness of relatives/ friends
21	Other: [open: krler1_2x]
	-2Don't know
-1	Denied

VARIABLENAME	krler1_2x
VARIABLENLABEL	Load of life event: Spontaneous: Event not WK2: Other (open)
QUESTION TEXT	Other event (open)
FILTER FEED	krler1 IN (1) AND krler1_0 IN (0) AND krler1_2 IN (21)

OUTPUT FORMAT	VALUE	VALUE LABEL
\$1500.		SpecificationOther event
		-2Don't know
	-1	Denied

VARIABLENAME	Krler2
VARIABLENLABEL	Load due to life event: Demand: WK2
QUESTION TEXT ZP	Were there any experiences or events <u>in your life related to the 2nd World War? World War</u> that still bother you today?
QUESTION TEXT PX	Were there any experiences or events <u>related to World War 2</u> in Mr/Mrs [name ZP]'s life that still bother him/her today?
FILTERFUL	(krler1 IN (1) AND krler1_0 IN (0)) OR krler1 IN (0)

OUTPUT FORMAT	VALUE	VALUE LABEL
	0	No
N0J1F.	1	Yes
		-2Don't know
	-1	Denied

VARIABLENAME	Krler2_1
VARIABLENLABEL Stress ZP	due to life event: Demand: WK2 Event QUESTION TEXT
QUESTION TEXT ZP	Which event still burdens you the most today?
QUESTION TEXT PX	Which event still weighs most heavily on Mr/Mrs [name ZP] today?
INTERVIEWER NOTE	<i>Assignment by interviewer! Do not read out!</i>
FILTER FEED	((krler1 IN (1) AND krler1_0 IN (0)) OR krler1 IN (0)) AND krler2 IN (1)

PROGRAMMING NOTE If value IN (8) AND children1 IN (0), then alert
Standard text for alert: "Please check if this entry is correct".

OUTPUT FORMAT	VALUE	VALUE LABEL
KRLER12F.	1	Physical threat, assault, injury or torture
	2	Victim of rape
	3	Captivity, hostage-taking or kidnapping
	4	Bombing
	5	Expulsion or flight
	6	Death of the parents
	7	Death of siblings
	8	Death of a child
	9	Death of the partner
	10	Accident
	11	Survived serious illness
	12	Other: [open: krler2_1x]
	-2	Don't know
	-1	Denied

VARIABLENAME **Krler2_1x**
VARIABLENLABEL Load of life event: Demand: WK2 Event: Other (open)

QUESTION TEXT **Other event (open)**

FILTER FEED ((krler1 IN (1) AND krler1_0 IN (0)) OR krler1 IN (0)) AND krler2 IN (1) AND krler2_1 IN (12)

OUTPUT FORMAT	VALUE	VALUE LABEL
\$1500.		SpecificationOther event
	-2	Don't know
	-1	Denied

VARIABLENAME **Krler3**
VARIABLENLABEL Load due to life event: demand: outside WK2

QUESTION TEXT ZP **Were there any experiences or events in your life <u>outside the 2. World War</u> that still bother you today?**

QUESTION TEXT PX **Have there been any experiences or events in the life of Mr/Mrs [name ZP]? <u>outside the 2nd World War</u> that still bother her/him today?**

FILTER FEED krler1 IN (1) AND krler1_0 IN (1)

PROGRAMMING NOTE This is only asked explicitly if load was previously specified, but not if no load was spontaneously specified.

Complementary demand therefore only occurs when war experiences are spontaneously reported.

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	1	Yes
	0	No

-2Don't know

-1

Denied

VARIABLENAME **Krler3_1**

VARIABLENLABEL Stress due to life event: Demand: outside WK2:

Event QUESTION TEXT ZP **Which event still burdens you the most today?**QUESTION TEXT PX **Which event still weighs most heavily on Mr/Mrs [name ZP] today?**INTERVIEWER NOTE *Assignment by interviewer! Do not read out!*

FILTER GUIDE krler1 IN (1) AND krler1_0 IN (1) AND krler3 IN (1)

PROGRAMMING NOTEif (value IN (3) AND children1 IN (0)) OR (value IN (16) AND kinder1 IN (1)), then alert Default text for alert: "Please check if this input is correct."

OUTPUT FORMAT	VALUE	VALUE LABEL
KRLER21F.	1	Death of the parents
	2	Death of siblings
	3	Death of a child
	4	Death of the partner
	5	Death of a friend(s)
	6	Accident
	7	Natural disasters
	8	Survived serious illness
	9	Persistent severe illness
	10	War events
	11	Physical threat, assault, injury or torture
	12	Victim of rape
	13	Captivity, hostage-taking or kidnapping
	14	Terrorist attack
	15	Expulsion or flight
	16	Childlessness
	17	Marriage problems/ divorce
	18	Discord with children/family
	19	Disagreements with friends
	20	Serious illness of relatives/ friends
	21	Other: [open: krler3_1x]
	-2	Don't know
	-1	Denied

VARIABLENAME **Krler3_1x**

VARIABLENLABELoad of life event: Demand: outside WK2: Event: Other (open)

QUESTION TEXT **Other event (open)**

FILTER GUIDE krler1 IN (1) AND krler1_0 IN (1) AND krler3 IN (1) AND krler3_1 IN (21)

OUTPUT FORMAT	VALUE	VALUE LABEL
\$1500.		SpecificationOther event
		-2Don't know
	-1	Denied

Intermediate screen

VARIABLENAME	
VARIABLE LABEL	Intermediate screen 4
QUESTION TEXT	No matter how well you get on with your family, friends, neighbours or even carers, it can be difficult to get along with them. There are always minor or major disputes or differences of opinion that have emotional consequences.
FILTER GUIDE	interviewee IN (1)

VARIABLENAME	ipaus1
VARIABLENLABELInterpers	. Ausei. a. emot. Conseq.: become louder
QUESTION TEXT ZP	In the following, we are interested in how often in the last 12 months you were involved in disputes with people you know, who have given you close to or have frequent contact with have experienced the following feelings. How often have you experienced that someone ... has become louder towards you, making you feel annoyed or insecure?
INTERVIEWER NOTE	<i>Please read out answers, enter directly if necessary.</i>
FILTER	GUIDE interviewee IN (1) PROGRAMMING NOTEPlease programme as a responsive item battery (ipaus1 - ipaus15) and the question text as well as the interviewer's note from the second item onwards in grey

OUTPUT FORMAT	VALUE	VALUE LABEL
	font.	
HAUF5_2F.	1	Never
	2	Rare
	3	Sometimes
	4	Frequently
	5	Very often
		-2Don't know
	-1	Denied

VARIABLENAME	ipaus2
VARIABLENLABELInterpers	. Abus. a. emot. Conseq.: abusive
QUESTION TEXT ZP	... became abusive towards you, so that you were annoyed or made insecure at that moment?
FILTER	GUIDE interviewee IN (1) PROGRAMMING NOTEPlease programme as a responsive item battery (ipaus1 - ipaus15) and the question text as well as the interviewer's note from the second item onwards in grey

OUTPUT FORMAT	VALUE	VALUE LABEL
	font.	
HAUF5_2F.	1	Never
	2	Rare
	3	Sometimes

4	Frequently
5	Very often
-2	Don't know
-1	Denied

VARIABLENAME **ipaus3**

VARIABLENLABELInterpers . Ausei. a. emot. Conseq.: talked about weaknesses

QUESTION TEXT ZP **... talked about your weaknesses or impairments in front of you or other people so that it made you uncomfortable?**

FILTER FURTHER interviewer IN (1)

PROGRAMMING NOTEPlease programme as a responsive item battery (ipaus1 - ipaus15) and the question text as well as the interviewer's note from the second item onwards in grey font.

OUTPUT FORMAT	VALUE	VALUE LABEL
HAUF5_2F.	1	Never
	2	Rare
	3	Sometimes
	4	Frequently
	5	Very often
	-2	Don't know
	-1	Denied

VARIABLENAME **ipaus4**

VARIABLENLABELInterpers . Ausei. a. emot. Conseq.: blame given for an event

QUESTION TEXT ZP **...blamed you for an event or life circumstance so that you felt bad or were upset?**

FILTER GUIDE interviewee IN (1)

PROGRAMMING NOTEPlease programme as a responsive item battery (ipaus1 - ipaus15) and the question text as well as the interviewer's note from the second item onwards in grey font.

OUTPUT FORMAT	VALUE	VALUE LABEL
HAUF5_2F.	1	Never
	2	Rare
	3	Sometimes
	4	Frequently
	5	Very often
	-2	Don't know
	-1	Denied

VARIABLENAME **ipaus5**

VARIABLENLABELInterpers . Ausei. a. emot. Conseq.: Opinion overridden

QUESTION TEXT ZP **... ignored your opinion so that you did not feel taken seriously?**

FILTER	GUIDE interviewee IN (1) PROGRAMMING NOTEPlease programme as a responsive item battery (ipaus1 - ipaus15) and the question text as well as the interviewer's note from the second item onwards in grey font.	
OUTPUT FORMAT	VALUE	VALUE LABEL
HAUF5_2F.	5	Very often
	4	Frequently
	3	Sometimes
	2	Rare
	1	Never
	-2	Don't know
	-1	Denied
VARIABLENAME	ipaus6	
VARIABLENLABELInterpers	. Out. a. emot. Conseq.: to waive wish or right	
QUESTION TEXT ZP	... made you give up your wish or right, so that you felt patronised at that moment?	
FILTER	GUIDE interviewee IN (1) PROGRAMMING NOTEPlease programme as a responsive item battery (ipaus1 - ipaus15) and the question text as well as the interviewer's note from the second item onwards in grey font.	
OUTPUT FORMAT	VALUE	VALUE LABEL
HAUF5_2F.	1	Never
	2	Rare
	3	Sometimes
	4	Frequently
	5	Very often
	-2	Don't know
	-1	Denied
VARIABLENAME	ipaus7	
VARIABLENLABELInterpers	. Ausei. a. emot. Conseq.: no support given	
QUESTION TEXT ZP	... did not give you support in a situation where this was necessary, so that you felt helpless?	
INTERVIEWER'S NOTE	<i>Only give these examples when asked: e.g. going to the toilet, washing, getting dressed.</i>	
FILTER	GUIDE interviewee IN (1)	
PROGRAMMING NOTE	For ipaus7, show the additional interviewer's note (" <i>Only give these examples if asked: e.g. going to the toilet, washing, getting dressed</i> ") in black letters. Please programme as a responsive item battery (ipaus1 - ipaus15) and the question text as well as the interviewer's note from the second item onwards in grey font.	
OUTPUT FORMAT	VALUE	VALUE LABEL
HAUF5_2F.	1	Never
	2	Rare
	3	Sometimes
	4	Frequently

5	Very often
-2	Don't know
-1	Denied

VARIABLENAME **ipaus8**

VARIABLENLABELInterpers . Ausei. a. emot. Conseq.: no time spent

QUESTION TEXT ZP **... did not devote time to you, so that you felt unwanted or neglected?**

FILTER GUIDE interviewee IN (1)

PROGRAMMING NOTEPlease programme as a responsive item battery (ipaus1 - ipaus15) and the question text as well as the interviewer's note from the second item onwards in grey font.

OUTPUT FORMAT	VALUE	VALUE LABEL
HAUF5_2F.	1	Never
	2	Rare
	3	Sometimes
	4	Frequently
	5	Very often
	-2	Don't know
	-1	Denied

VARIABLENAME **ipaus9**

VARIABLENLABELInterpers . Exei. a. emot. Conseq.: shared assets or possessions for own purposes QUESTION

TEXT ZP **... shared your assets or possessions for your own purposes, so that you felt exploited?**

FILTER GUIDE interviewee IN (1)

PROGRAMMING NOTEPlease programme as a responsive item battery (ipaus1 - ipaus15) and the question text as well as the interviewer's note from the second item onwards in grey font.

OUTPUT FORMAT	VALUE	VALUE LABEL
HAUF5_2F.	1	Never
	2	Rare
	3	Sometimes
	4	Frequently
	5	Very often
	-2	Don't know
	-1	Denied

VARIABLENAME **ipaus10**

VARIABLENLABELInterpers . Ausei. a. emot. Conseq.: to endure

QUESTION TEXT ZP **... put up with you (e.g. by not contributing to common expenses), so that you felt taken advantage of?**

FILTER GUIDE interviewee IN (1)

PROGRAMMING NOTE Please programme as a responsive item battery (ipaus1 - ipaus15) and the question text as well as the interviewer's note from the second item onwards in grey font.

OUTPUT FORMAT	VALUE	VALUE LABEL
HAUF5_2F.	1	Never
	2	Rare
	3	Sometimes
	4	Frequently
	5	Very often
	-2	Don't know
	-1	Denied

VARIABLENAME **ipaus11**

VARIABLE LABEL Interpers. Ausei. a. emot. Conseq.: touched firmly or roughly

QUESTION TEXT ZP **... touched you firmly or roughly so that it was unpleasant? FILTER**

FEED interviewee IN (1)

PROGRAMMING NOTE Please programme as a responsive item battery (ipaus1 - ipaus15) and the question text as well as the interviewer's note from the second item onwards in grey font.

OUTPUT FORMAT	VALUE	VALUE LABEL
HAUF5_2F.	1	Never
	2	Rare
	3	Sometimes
	4	Frequently
	5	Very often
	-2	Don't know
	-1	Denied

VARIABLENAME **ipaus12**

VARIABLE LABEL Interpers. Ausei. u. emot. Conseq.: physically rude or inconsiderate QUESTION

TEXT ZP **... has been physically rough or inconsiderate with you, so that it has been was unpleasant?**

FILTER GUIDE interviewee IN (1)

PROGRAMMING NOTE Please programme as a responsive item battery (ipaus1 - ipaus15) and the question text as well as the interviewer's note from the second item onwards in grey font.

OUTPUT FORMAT	VALUE	VALUE LABEL
HAUF5_2F.	1	Never
	2	Rare
	3	Sometimes
	4	Frequently
	5	Very often

-2 Don't know

-1 Denied

VARIABLENAME **ipaus13**

VARIABLENLABELInterpers . Ausei. a. emot. Conseq.: restricted freedom of movement

QUESTION TEXT ZP **... restricted you in your freedom of movement so that it made you frustrated or angry?**

INTERVIEWER'S NOTE *Only give these examples when asked: e.g. by tying them down, raising the edge of the bed, or being locked in a room, flat, house.*

FILTER RUN until 8.7.21 respondent IN (1) AND pspgr1 IN (1,2) respondent IN (1) AND

FILTER FEED as of 9.7.21 pspgr1 IN (1,2,3,4,5)

PROGRAMMING NOTE For ipaus13, please add an additional interviewer's note ("Only give these examples if asked: e.g. by being tied down, raising the edge of the bed, or being locked in a room, flat, house") in black font.
Please programme as a responsive item battery (ipaus1 - ipaus15) and the question text as well as the interviewer's note from the second item onwards in grey font.

OUTPUT FORMAT	VALUE	VALUE LABEL
HAUF5_2F.	1	Never
	2	Rare
	3	Sometimes
	4	Frequently
	5	Very often
		-2Don't know
	-1	Denied

VARIABLENAME **ipaus14**

VARIABLENLABELInterpers . Ausei. a. emot. Conseq.: medication given without agreement

QUESTION TEXT ZP **... given you pills or medication that made you tired without your consent?**

FILTER RUN until 8.7.21 respondent IN (1) AND pspgr1 IN (1,2) respondent IN (1) AND

FILTER FEED as of 9.7.21 pspgr1 IN (1,2,3,4,5)

PROGRAMMING NOTEPlease programme as a responsive item battery (ipaus1 - ipaus15) and the question text as well as the interviewer's note from the second item onwards in grey font.

OUTPUT FORMAT	VALUE	VALUE LABEL
HAUF5_2F.	1	Never
	2	Rare
	3	Sometimes
	4	Frequently
	5	Very often
		-2Don't know
	-1	Denied

VARIABLENAME	ipaus15
VARIABLENLABEL	Interpers . Ausei. a. emot. Conseq.: offensive behaviour
QUESTION TEXT ZP	... behaved offensively towards you in a way that embarrassed or disturbed you?
FILTER	GUIDE interviewee IN (1)
PROGRAMMING NOTE	Please programme as a responsive item battery (ipaus1 - ipaus15) and the question text as well as the interviewer's note from the second item onwards in grey font.

<i>OUTPUT FORMAT</i>	<i>VALUE</i>	<i>VALUE LABEL</i>
HAUF5_2F.	1	Never
	2	Rare
	3	Sometimes
	4	Frequently
	5	Very often
	-2	Don't know
	-1	Denied

15 Biography Intermediate

Screen

VARIABLENAME	Screen5
VARIABLE LABEL	Intermediate screen 5
QUESTION TEXT ZP	Finally, we are interested in your biography and some selected situations in your life.
QUESTION TEXT PX	Now we are interested in the biography and some selected situations in the life of Mr/Mrs [name ZP].

VARIABLENAME	PARENTS
VARIABLE LABEL	Parents
QUESTION TEXT ZP	If you think back to your childhood up to the age of 16: Who did you mainly grow up with during this time?
QUESTION TEXT PX	If you think back to the childhood of Mr/Mrs [name ZP] until the age of 16: With whom did Mr/Woman [name ZP] mainly grow up until he/she was 16 years old?
INTERVIEWER NOTE	<i>Please read out answers, enter directly if necessary. Father and mother also means stepfather and foster father and mother.</i>

OUTPUT FORMAT	VALUE	VALUE LABEL
KINDH4F.		1With father and mother
	2	Only with the father
	3	Only with the mother
	4	For other persons
		-2Don't know
	-1	Denied

VARIABLENAME	sozelt0_1
VARIABLENLABELSoc	. position Parents: Father: deceased
QUESTION TEXT	Is the father of Mr/Mrs [name ZP] already deceased?
FILTER	GUIDE interviewee IN (2)

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F	0	No
.	1	Yes
		-2Don't know
	-1	Denied

VARIABLENAME	sozelt1
VARIABLENLABELSoc	. status Parents: Father: Gainful employment

QUESTION TEXT ZP	Was your father gainfully employed at the time when you were 15 years old?
QUESTION TEXT PX	Was Mr/Mrs [name ZP]'s father gainfully employed at the time when Mr/Mrs [name ZP] was 15 years old?
INTERVIEWER NOTE	<i>Please read out answers, enter directly if necessary.</i>
FILTER FEED ZP	parents IN (1,2)
FILTER FEED PX	sozelt0_1 IN (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
VOCATION5F.	1	Was gainfully employed
	2	unemployed
	3	Pensioner / Retired
	4	Housewife/ Househusband
	5	not gainfully employed for other reasons (military service, in war/imprisonment, in training)
	-2	Don't know
	-1	Denied

VARIABLENAME	sozelt1_1
VARIABLENLABELSoc	. status Parents: Father: occupational status
QUESTION TEXT ZP	In what professional position was your father working at the time when you were 15 years old?
QUESTION TEXT PX	In which professional position was Mr/Mrs [name ZP]'s father working at the time when Mr/Mrs [name ZP] was 15 years old?
INTERVIEWER NOTE	<i>Please read out answers, enter directly if necessary. PGH = Production cooperative of the craft sector</i>
FILTER GUIDE ZP	parents IN (1,2) AND sozelt1 IN (1)
FILTER GUIDE PX	sozelt0_1IN (1) AND sozelt1 IN (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
VOCATION7F.	10	Self-employed farmers or cooperative farmers
	20	Academic in independent profession (doctors, lawyers, tax consultants, etc.) and have/had ...
	25	Assisting family members
	30	Self-employed, Ich-AG or PGH member and have/had ...
	40	Civil servants, judges, professional soldiers, namely ...
	50	Employees, namely ...
	60	Workers, namely ...
	-2	Don't know
	-1	Denied

VARIABLENAME	sozelt1_2
VARIABLE LABEL	Parents' soc. status: Father: occupational status - more
specific QUESTION TEXT ZP	Can you be more specific?
QUESTION TEXT PX	Can you be more specific?

INTERVIEWER NOTE	<i>Please read out answers, enter directly if necessary. PGH = Production cooperative of the craft sector</i>
FILTER GUIDE ZP	parents IN (1,2) AND sozelt1 IN (1) AND sozelt1_1 IN (10,20,30,40,50,60)
FILTER GUIDE PX	sozelt0_1 IN (1) AND sozelt1 IN (1) AND sozelt1_1 IN (10,20,30,40,50,60)
PROGRAMMING NOTE	Please implement technically in such a way that e.g. with 10 only the block of 10 is displayed etc.

OUTPUT FORMAT	VALUE	VALUE LABEL
BERUFSUB		
	11	- Self-employed farmers: with a utilised agricultural area of less than 10ha
	12	- Self-employed farmers: with a utilised agricultural area of 10ha and more
	13	- Self-employed farmers: Cooperative farmers (formerly LPG)
	21	- Academics in independent profession: no other employees
	22	- Academics in independent profession: 1 to 4 employees
	23	- Academics in independent profession: 5 and more employees
	31	- Self-employed, Ich-AG or PGH member: no other employees
	32	- Self-employed, Ich-AG or PGH member: 1 to 5 employees
	33	- Self-employed, Ich-AG or PGH member: 5 and more employees
	34	- Self-employed, Ich-AG or PGH member: PGH member
	41	- Civil servants, judges, professional soldiers: in the ordinary service or in a comparable career bracket
	42	- Civil servants, judges, professional soldiers: in the intermediate service or in a comparable career bracket
	43	- Civil servants, judges, professional soldiers: in the higher service or in a comparable career bracket
	44	- Civil servants, judges, professional soldiers: in the higher service or in a comparable career bracket
	51	- Salaried employees: with executive activity according to general instructions (e.g. salesperson, data typist, secretarial assistants, care assistants).
	52	- Salaried employees: with qualified work that is done according to instructions (e.g. clerk, accountant, technical draughtsman).
	53	- Salaried employees: with independent performance in a responsible position or with specialist responsibility for personnel (e.g. scientific staff, authorised signatories, heads of department or master craftsmen in salaried employment).
	54	- Employees: with comprehensive management tasks and decision-making powers (e.g. directors, managing directors, members of the board of directors).
	61	- Worker: unskilled
	62	- Worker: semi-skilled
	63	- Worker: Skilled worker

64	- Workers: foreman, column leader
65	- Workers: foreman, foreman, brigadier
	-2Don't know
-1	Denied

VARIABLENAME **sozelt0_2**
 VARIABLENLABELSoc . status Parents: Mother: deceased
 QUESTION TEXT **Is the mother of Mr/Mrs [name ZP] already deceased?**
 FILTER GUIDE interviewee IN (2)

OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	0	No
	1	Yes
	-2	Don't know
	-1	Denied

VARIABLENAME **sozelt2**
 VARIABLENLABELSoc . status Parents: Mother: Gainful employment
 QUESTION TEXT ZP **Was your mother gainfully employed at the time when you were 15 years old?**
 QUESTION TEXT PX **Was Mr/Mrs [name ZP]'s mother gainfully employed at the time when he/she was 15 years old?**
 INTERVIEWER NOTE *Please read out answers, enter directly if necessary.*
 FILTER GUIDE ZP parents IN (3)
 FILTER GUIDE PX sozelt0_2 IN (1)

OUTPUT FORMAT	VALUE	VALUE LABEL
VOCATION5F.	1	Was gainfully employed
	2	unemployed
	3	Pensioner/Pensioner
	4	Housewife/Househusband
	5	not gainfully employed for other reasons (military service, in war/imprisonment, in training)
	-2	Don't know
	-1	Denied

VARIABLENAME **sozelt2_1**
 VARIABLENLABELSoc . status Parents: Mother: occupational status
 QUESTION TEXT ZP **What was your mother's professional position at the time when you were 15 years old?**
 QUESTION TEXT PX **In what professional position was Mr/Mrs [name ZP]'s mother working at the time when he/she was 15 years old?**
 INTERVIEWER'S NOTE *Please read out answers, enter directly if necessary.*
PGH = Production cooperative of the craft sector

FILTER GUIDE ZP	parents IN (3) AND sozelt2 IN (1)	
FILTER GUIDE PX	sozelt0_2 IN (1) AND sozelt2 IN (1)	
OUTPUT FORMAT	VALUE	VALUE LABEL
VOCATION7F.	10	Self-employed farmers or cooperative farmers
	20	Academic in independent profession (doctors, lawyers, tax consultants, etc.) and have/had ...
	25	Assisting family members
	30	Self-employed, Ich-AG or PGH member and have/had ...
	40	Civil servants, judges, professional soldiers, namely ...
	50	Employees, namely ...
	60	Workers, namely ...
	-2	Don't know
	-1	Denied
VARIABLENAME	sozelt2_2	
VARIABLE LABEL	Parents' soc. status: Mother: occupational status - more	
specific QUESTION TEXT	Can you be more specific?	
INTERVIEWER NOTE	<i>Please read out answers, enter them directly if necessary, point out the relevant area to the ZP and read out the relevant categories!</i> <i>PGH = Production cooperative of the craft sector</i>	
FILTER FEED	ZParents IN (3) AND sozelt2 IN (1) AND sozelt2_1 IN (10,20,30,40,50,60)	
FILTER GUIDE PX	sozelt0_2 IN (1) AND sozelt2 IN (1) AND sozelt2_1 IN (10,20,30,40,50,60)	
PROGRAMMING NOTE	technically so that e.g. with 10 only the block of 10 is displayed etc.	
OUTPUT FORMAT	VALUE	VALUE LABEL
BERUFSUB	11	- Self-employed farmers: with a utilised agricultural area of less than 10ha
	12	- Self-employed farmers: with a utilised agricultural area of 10ha and more
	13	- Self-employed farmers: Cooperative farmers (formerly LPG)
	21	- Academics in independent profession: no other employees
	22	- Academics in independent profession: 1 to 4 employees
	23	- Academics in independent profession: 5 and more employees
	31	- Self-employed, Ich-AG or PGH member: no other employees
	32	- Self-employed, Ich-AG or PGH member: 1 to 5 employees
	33	- Self-employed, Ich-AG or PGH member: 5 and more employees
	34	- Self-employed, Ich-AG or PGH member: PGH member
	41	- Civil servants, judges, professional soldiers: in the ordinary service or in a comparable career bracket

42	- Civil servants, judges, professional soldiers: in the intermediate service or in a comparable category
43	- Civil servants, judges, professional soldiers: in the higher service or in a comparable career bracket
44	- Civil servants, judges, professional soldiers: in the higher service or in a comparable career bracket
51	- Salaried employees: with executive activity according to general instructions (e.g. salesperson, data typist, secretarial assistants, care assistants).
52	- Salaried employees: with qualified work that is done according to instructions (e.g. clerk, accountant, technical draughtsman).
53	- Salaried employees: with independent performance in a responsible position or with specialist responsibility for personnel (e.g. scientific staff, authorised signatories, heads of department or master craftsmen in salaried employment).
54	54 - Salaried employees: with comprehensive management tasks and decision-making powers (e.g. directors, managing directors, members of the board of directors).
61	- Worker: unskilled
62	- Worker: semi-skilled
63	- Worker: Skilled worker
64	- Workers: foreman, column leader
65	- Workers: foreman, foreman, brigadier
	-2Don't know
-1	Denied

VARIABLENAME	geschw
VARIABLE LABEL	Sibling Quantity
QUESTION TEXT ZP	How many brothers and sisters do you have? I also mean step-siblings, half-siblings and foster siblings or siblings who have already died.
QUESTION TEXT PX	How many brothers and sisters does Mr/Mrs [name ZP] have? I also mean step-siblings, half-siblings and foster siblings or siblings who have already died.

<i>OUTPUT FORMAT</i>	<i>VALUE</i>	<i>VALUE LABEL</i>
BEST8.	(0 - 20)	Number of siblings
	-1	Denied
	-2	Don't know

Intermediate screen

VARIABLENAME	Screen6	
VARIABLE LABEL	Intermediate screen 6	
QUESTION TEXT PX	In addition to information about Mr/Mrs [name ZP], we would finally like to know something about yourself.	
VARIABLENAME	anomiep1	
VARIABLENLABELProxy	: Anomie: social way of life	
QUESTION TEXT	Do you yourself feel that you are getting worse and worse at coping with today's social way of life?	
INTERVIEWER NOTE	<i>Please read out answers, enter directly if necessary.</i>	
FILTER	GUIDE interviewee IN (2)	
OUTPUT FORMAT	VALUE	VALUE LABEL
ZUTR4_1F.	1	Does not apply
	2	Rather not applicable
	3	More likely to apply
	4	Applies
		-2Don't know
	-1	Denied
VARIABLENAME	anomiep2	
VARIABLENLABELProxy	: Anomie: values	
QUESTION TEXT	Do you yourself have the feeling that your own values fit less and less with the values of today's society?	
INTERVIEWER NOTE	<i>Please read out answers, enter directly if necessary.</i>	
FILTER	GUIDE interviewee IN (2)	
OUTPUT FORMAT	VALUE	VALUE LABEL
ZUTR4_1F.	1	Does not apply
	2	Rather not applicable
	3	More likely to apply
	4	Applies
		-2Don't know
	-1	Denied
VARIABLENAME	anomiep3	
VARIABLENLABELProxy	: Anomie: Orientation	
QUESTION TEXT	Do you yourself have the feeling that today's society is changing so quickly that you no longer know what to orient yourself to?	
INTERVIEWER NOTE	<i>Please read out answers, enter directly if necessary.</i>	

FILTER	GUIDE interviewee IN (2)	
<i>OUTPUT FORMAT</i>	<i>VALUE</i>	<i>VALUE LABEL</i>
ZUTR4_1F.		1Does not apply
	2	Rather not applicable
	3	More likely to apply
	4	Applies
		-2Don't know
	-1	Denied

VARIABLENAME	value sap1	
VARIABLENLABELProxy	: Appreciation by others: ZP as support in life	
QUESTION TEXT	Do you experience Mr/Mrs [name ZP] as a support in your life?	
INTERVIEWER NOTE	<i>Please read out answers, enter directly if necessary.</i>	
FILTER	GUIDE interviewee IN (2)	
<i>OUTPUT FORMAT</i>	<i>VALUE</i>	<i>VALUE LABEL</i>
ZUTR4_3F.	1	Does not apply
	2	Rather not applicable
	3	More likely to apply
	4	Applies exactly
	-2	Don't know
	-1	Denied

VARIABLENAME	value sap2	
VARIABLENLABELProxy	: Value by Others: Appreciate ZP for services	
QUESTION TEXT	Do you appreciate Mr/Mrs [name ZP] for what he/she has done and achieved in his/her life?	
INTERVIEWER NOTE	<i>Please read out answers, enter directly if necessary.</i>	
FILTER	GUIDE interviewee IN (2)	
<i>OUTPUT FORMAT</i>	<i>VALUE</i>	<i>VALUE LABEL</i>
ZUTR4_3F.	1	Does not apply
	2	Rather not applicable
	3	More likely to apply
	4	Applies exactly
	-2	Don't know
	-1	Denied

VARIABLENAME	value sap3	
VARIABLENLABELProxy	: Value added by others: ZP as load	

QUESTION TEXT	Dealing with e.g. physically impaired people can be experienced as stressful. Is your behaviour towards Mr/Mrs [name ZP] affected by this?	
INTERVIEWER NOTE	<i>Please read out answers, enter directly if necessary.</i>	
FILTER	GUIDE interviewee IN (2)	
OUTPUT FORMAT	VALUE	VALUE LABEL
ZUTR4_3F.	1	Does not apply
	2	Rather not applicable
	3	More likely to apply
	4	Applies exactly
	-2	Don't know
	-1	Denied
VARIABLENAME	value sap4	
VARIABLENLABELProxy	: Valued by others: Value ZP more than before	
QUESTION TEXT	Do you appreciate and respect Mr/Mrs [name ZP] more today than in the past?	
INTERVIEWER NOTE	<i>Please read out answers, enter directly if necessary.</i>	
FILTER	GUIDE interviewee IN (2)	
OUTPUT FORMAT	VALUE	VALUE LABEL
ZUTR4_3F.	1	Does not apply
	2	Rather not applicable
	3	More likely to apply
	4	Applies exactly
	-2	Don't know
	-1	Denied
VARIABLENAME	wunschpx	
VARIABLENLABELProxy	: Wish to the policy - Proxy situation (open)	
QUESTION TEXT	We are also interested in what you think could be done to improve your own situation in living with and/or caring for Mr/Mrs [name ZP].	
FILTER	GUIDE interviewee IN (2)	
OUTPUT FORMAT	VALUE	VALUE LABEL
\$900.	Specify	Wish
		-2Don't know
	-1	Denied
VARIABLENAME	address_px	
VARIABLE LABEL	Address recording PX	
QUESTION TEXT ZP	So that we can send you a <u>letter of thanks</u> after the interview, I would now like to briefly record your address.	

INTERVIEWER NOTE
ZP

The address mask appears on the next page.

For the deputy, please record only the name and full address. NO telephone number and NO e-mail address!

When you have finished, please read out all the information again. Pay attention to upper and lower case! Check the correctness of the names. If necessary, have the information spelled out for you.

If necessary, you can explain: "The address is only used so that we can send you a thank you letter with a short questionnaire "Feedback on the interview" after the interview. After that, the address will be deleted."

FILTER GUIDE ZP

interviewee IN (2)

PROGRAMMING

NOTEContinue with the Address Tool

Intermediate screen

VARIABLENAME

Screen7

VARIABLE LABEL

Intermediate screen 7

QUESTION TEXT

Now we have reached the end of the interview.

We thank you very much for answering the questions!

FILTER CONFIGURATION interviewee IN (1,2)

PROGRAMMING NOTEContinue to the interview questions (please insert our standard page here) 1: -> now continue to the interview questions

2: -> later on the interviewer questions (put on appointment)

Interviewer questions about the interview situation

VARIABLENAME	einwill	
VARIABLE LABEL	Consent given	
QUESTION TEXT	How was consent given for the interview?	
<i>OUTPUT FORMAT</i>	<i>VALUE</i>	<i>VALUE LABEL</i>
EINWIL4F.	1	ZP spontaneously decided himself
	2	ZP decided by himself after reflection time
	3	ZP decided after consultation with others
	4	Other person decided for ZP
	-3	I cannot judge / interrupted interview was continued
VARIABLENAME	third	
VARIABLE LABEL	Other persons present besides the target person	
QUESTION TEXT	Were there other people present in the interview? FILTER	
FEED	interviewee IN (1)	
<i>OUTPUT FORMAT</i>	<i>VALUE</i>	<i>VALUE LABEL</i>
N0J1F.	0	No
	1	Yes
	-2	Don't know
VARIABLENAME	third1_1, third1_2, third1_3, third1_4, third1_5, third1_6	
VARIABLE LABEL	Other persons besides the TARGET PERSON present: Partner Other persons present besides the TARGET PERSON: Children Other persons present besides the TARGET PERSON: Other relatives Other persons present besides the TARGET PERSON: Other persons Other persons present besides the TARGET PERSON: Carers Other persons present besides the TARGET PERSON: not to be assigned	
QUESTION TEXT	Which persons were present?	
PROGRAMMING NOTE	Multiple choice Ceres: Please add another category to MFN: "not to be assigned" (no mutual exclusion). FILTERED interviewer IN (1) AND third IN (1)	
NOTE FOR DATA PREPARATION	The variables third1_1, third1_2, third1_3, third1_4, third1_5, third1_6 are programmed as multiple... The content-related information collected via multiple responses is to be provided to the AG in the form of dichotomous individual items 0=No, 1=Yes.	
<i>OUTPUT FORMAT</i>	<i>VALUE</i>	<i>VALUE LABEL</i>
N0J1F.	(0)	not named
	(1)	called

third1_1	1	Partner
third1_2	2	Children
third1_3		3Other relatives
third1_4		4Other persons
third1_5	5	Caregivers

VARIABLENAME	thirdp	
VARIABLE LABEL	Other persons present in addition to the INTERVIEWER	
QUESTION TEXT	Were there any other persons present in the interview?	
FILTER	GUIDE interviewee IN (2)	
OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	1	Yes
	0	No
	-2	Don't know

VARIABLENAME	thirdp1_1, thirdp1_2, thirdp1_3, thirdp1_4, thirdp1_5, thirdp1_6, thirdp1_7	
VARIABLE LABEL	Other persons present next to the CALLER: Target Other persons present next to the CALLER: Partner Other persons present next to the CALLER: Children Other persons present in addition to the OUTPUT PERSON: Other relatives Other persons present in addition to the OUTPUT PERSON: Caregivers Other persons present in addition to the OUTCOMING PERSON: Other persons Other persons present in addition to the OUTCOMING PERSON: not to be assigned	
QUESTION TEXT	Which persons were present?	
PROGRAMMING NOTE	Multiple choice ceres: Please add further category to MFN: "not to be assigned" (no mutual exclusion) FILTER CONFIGURATION interviewee IN (2) AND thirdp IN (1)	
NOTE FOR DATA PREPARATION	The variables thirdp1_1, thirdp1_2, thirdp1_3, thirdp1_4, thirdp1_5, thirdp1_6, thirdp1_7 were programmed as multiple responses. The answers not named/named must be converted to 0=No, 1=Yes. The content-related information collected via multiple responses is to be provided to the AG in the form of dichotomous individual items 0=No, 1=Yes.	
OUTPUT FORMAT	VALUE	VALUE LABEL
N0J1F.	(0)	not named
	(1)	called
thirdp1_1	1	Target
thirdp1_2	2	Partner
thirdp1_3	3	Children
thirdp1_4		4Other relatives
thirdp1_5	5	Caregivers
thirdp1_6		6Other persons

VARIABLENAME	third_1	
	VARIABLENLABELOther persons present: Atmosphere influenced	
QUESTION TEXT	Did you feel that the interview atmosphere was influenced by the presence of third parties?	
FILTER GUIDE	ZP respondent IN (1) AND third IN (1)	
FILTER GUIDE PX	interviewee IN (2) AND thirdp IN (1)	
OUTPUT FORMAT	VALUE	VALUE LABEL
POSNEG4F.	0	No
	1	Yes, positive
	2	Yes, negative
	3	Yes, positive and negative

VARIABLENAME	third_2	
	VARIABLENLABELOther persons present: response behaviour influenced	
QUESTION TEXT	Did you feel that the respondent's response behaviour was influenced by the presence of third parties?	
FILTER GUIDE ZP	respondent IN (1) AND third IN (1) FILTER	
GUIDE PX	respondent IN (2) AND thirdp IN (1)	
OUTPUT FORMAT	VALUE	VALUE LABEL
POSNEG4F.	0	No
	1	Yes, positive
	2	Yes, negative
	3	Yes, positive and negative

VARIABLENAME	third_3	
	VARIABLENLABELOther persons present: Response behaviour influenced: Strength	
QUESTION TEXT	How much was the respondent's response behaviour influenced by the presence of third parties?	
FILTER GUIDE ZP	respondent IN (1) AND third IN (1) AND third_2 IN (1,2,3) FILTER	
GUIDE PX	respondent IN (2) AND thirdp IN (1) AND third_2 IN (1,2,3)	
OUTPUT FORMAT	VALUE	VALUE LABEL
STRONG5F.		1Very strong
	2	Strong
	3	Medium
	4	Little
	5	Very little

VARIABLENAME	through	
VARIABLE LABEL	Implementation difficulty	
QUESTION TEXT	How difficult was it to conduct the interview in the given form?	
OUTPUT FORMAT	VALUE	VALUE LABEL
SCHWIN5F.		1Very difficult

2	Difficult
3	Medium
4	Not difficult
5	Not difficult at all

VARIABLENAME **underbr**
 VARIABLENLABEL Frequency Interruptions
 QUESTION TEXT **How often were there interruptions to the interview, e.g. telephone calls, doorbells, going to the toilet, etc.?**

OUTPUT FORMAT	VALUE	VALUE LABEL
SUBB4F.	1	Frequent (>3)
	2	Sometimes (2-3)
	3	Rare (1)
	4	None

VARIABLENAME **underbrx**
 VARIABLE LABEL Frequency of interruptions: Causes (open)
 QUESTION TEXT **What were the causes of the interruptions?**
 FILTER FEEDING IN (1,2,3)

OUTPUT FORMAT	VALUE	VALUE LABEL
\$9000.	Specify	Causes

VARIABLENAME **wirkpers1**
 VARIABLENLABEL ZP appears disturbed, fearful, intimidated
 QUESTION TEXT ZP **Did the target seem disturbed, anxious or display intimidating behaviour (e.g. whispering to avoid third parties overhearing)?**
 QUESTION TEXT PX **Did the deputy seem disturbed, anxious or display intimidating behaviour (e.g. whispering to avoid third parties overhearing)?**

OUTPUT FORMAT	VALUE	VALUE LABEL
NIFRJA3F.	1Not at	all
	2	Questionable (not clearly yes or no)
	3	Definitely yes

VARIABLENAME **wirkpers2**
 VARIABLENLABEL ZP appears irritable, quick-tempered
 QUESTION TEXT ZP **Did the target person seem irritable or quick-tempered to you (e.g. did the person become louder or abusive during the interview)?**
 QUESTION TEXT PX **Did the deputy seem irritable or short-tempered to you (e.g. did the person become louder or abusive during the interview)?**

OUTPUT FORMAT	VALUE	VALUE LABEL
NIFRJA3F.	1Not at	all
		2Questionable (not clearly yes or no)
		3Unique yes

VARIABLENAME	IVcomment_1x
VARIABLE LABEL	Interviewer comment (open)
INTERVIEWER NOTE	<i>Here is space for comments on the interview</i>

<i>OUTPUT FORMAT</i>	<i>VALUE</i>	<i>VALUE LABEL</i>
\$9000.		IndicationNotes on the interview / comments

VARIABLENAME	interviewer question_I04_NEW
VARIABLENLABEL	Confirmation by interviewer
FRAGETEXT	This is to certify that I have conducted the interview properly.

<i>OUTPUT FORMAT</i>	<i>VALUE</i>	<i>VALUE LABEL</i>
N0J1F.	1	Yes
	0	No