

Needs of Spouse Carers of World War II Veterans Before and After Widowhood

Project Report 1, November 2009

Prepared for the Australian Department
of Veterans' Affairs

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1. Executive summary

These initial comparisons have shown little difference between women who are DVA clients and those who are unconnected to DVA on a wide range of demographic, health status, health service use and health insurance measures. Where differences were found they were expected, for example, that DVA clients were more likely to be born in Australia, and to have much lower rates of private hospital or ancillary cover. Women who were not DVA clients had a higher rate of reporting that they had difficulty managing on their income. Women who were DVA clients were more likely to report visits to a physiotherapist, podiatrist or chiroprapist.

Slightly more differences were found between the groups who were spouses/partnered. There were more women who were born in other English speaking countries in the group who were defined as 'Other DVA'. It is possible that this group represents veterans from other Commonwealth countries, who are eligible for DVA service pensions, but not gold cards.

There is some evidence that women who were spouses/partnered but did not care for someone may have slightly poorer health in terms of having a higher prevalence of high blood pressure and more difficulty performing instrumental activities of daily living, but differences on other assessments such as overall health status, physical functioning and prevalence of other medical conditions were not apparent.

2. Introduction

Background to the report

Research aims: The aims of this project are to investigate the physical and mental health, and use of health and aged care services of older women over time in relation to their roles as carers, if or when they are widowed, and their social and economic circumstances.

The purpose of the research is to obtain evidence to inform policy options for the Australian Department of Veterans' Affairs (DVA).

This project has three parts.

1. Comparison of women who are DVA clients, those who are spouse carers of DVA clients, and women who are unconnected to DVA. This will involve data from the Australian Longitudinal Study on Women's Health (ALSWH) and Medicare/DVA data on health and use of health services. The goal will be to identify the areas of differences between these groups to inform DVA of the services and benefits that are most effective and to identify any areas of need.
2. Linkage of DVA data and ALSWH survey data for those women who are DVA clients. This will extend the available information on services used by these women by including DVA data on hospitalisation, allied health services, home care and aged care. Linkage will be conducted using personal information (names, date of birth, address) provided by ALSWH to create a de-identified linked data set of DVA and ALSWH data for analysis.
3. Longitudinal examination of health and use of services for women who are DVA clients before and after widowhood. This will be based on the linked data set. The emphasis will be on the identification of services and benefits that may assist these women at different stages of their lives.

This deliverable will report on:

- Definitions
- Results of part 1
- An update on the progress of part 2

3. Definitions

The project team in consultation with DVA agreed on the following definitions to be used as the basis for all analyses.

Table 3-1 Definitions for all analyses

Group	Definition	No. of ALSWH women
Client	Gold card or in receipt of War Widows Pension	1369
Spouse VTPI/VDP	Spouse has Gold card, spouses' partner in receipt of VTPI or VDP	285
Spouse other	Spouse has Gold card	692
Other DVA	Neither client or spouse but have DVA pension or White Card	272
Not DVA	All other ALSWH participants	4540
Total Number of ALSWH women at survey 4 (2005)		7158

VTPI: Veterans total and permanently incapacitated pension

VDP: Veterans disability pension

4. Part 1

The most important characteristics of older women who provide care for someone because of their long-term illness, disability or frailty are whether or not the women is partnered (as married women are most commonly caring for their spouses) and whether or not the person she cares for lives with her (as caring for someone you live with is generally more demanding).

To compare women who are DVA clients, those who are spouse carers of DVA clients, and women who are unconnected to DVA, the following 13 groupings were created for the analyses.

Table 4-1 Groupings created for analyses

Client	<ul style="list-style-type: none">• These are women who are themselves DVA clients
Spouse VTPI / VDP	<ul style="list-style-type: none">• Caring for someone living with them• Not caring for someone living with them
Spouse other	<ul style="list-style-type: none">• Caring for someone living with them• Not caring for someone living with them
Other DVA	<ul style="list-style-type: none">• Partnered, caring for someone living with them• Partnered, not caring for someone living with them• Not partnered, caring for someone living with them• Not partnered, not caring for someone living with them
Not DVA	<ul style="list-style-type: none">• Partnered caring for someone living with them• Partnered not caring for someone living with them• Not partnered, caring for someone living with them• Not partnered, not caring for someone living with them

Notes on the above groupings

1. The 'client' group was not divided by partner or carer status as the majority of clients were widowed (94%) and did not care for someone living with them (96%).
2. The 'Other DVA' and 'Not DVA' groups were divided by partner and carer status to enable meaningful comparisons.

4.1. Comparisons presented

In determining which of the 13 groups would be compared two principal factors were important: the similarity of the groups (to ensure comparisons were meaningful) and the sample size of the groups.

The following groups were compared:

1. The 'Client' group and 'Not DVA, not partnered' group as these women were the most similar in terms of their demographic profile. The third group which could have also been compared here was 'Other DVA, not partnered'. However given the differences in sample sizes between the groups (n=1369, n=3066, n=156, respectively), it was decided to only report on comparisons between the two largest groups of women without partners.
2. The 'Spouse VTPI / VDP', 'Spouse other', 'Other DVA partnered' and 'Not DVA partnered' groups. For all comparisons, these groups were further split by whether they cared for someone living with them or not. For these comparisons, it was decided to only report on comparisons between the larger groups of women with partners. Therefore, the results for the group 'Other DVA partnered, caring for someone living with them' (n=25) are not reported.

Data for all ALSWH women are also included in the tables.

4.2. Data analysed

The data analysed were from the fourth ALSWH survey (conducted in 2005) of women in the oldest cohort born between 1921 and 1926. This survey was used because it was the first ALSWH survey to include clear definitions of whether the women were DVA clients or spouses of DVA clients. The fourth ALSWH survey is in Appendix C.

The following data were analysed:

4.2.1. The sociodemographic profile of the groups of women

- a. Marital status
- b. Carer status
- c. Area of residence, classified according to the Australian Standard Geographic Classification (based on ARIA+ measures)
- d. Country of birth
- e. Educational qualifications
- f. Ability to manage on income

4.2.2. Health indicators and status, as collected by the ALSWH surveys, namely:

- a. Body weight (body mass index [BMI])
- b. ¹Exercise status
- c. Self-rated health
- d. Health status (Short-form-36, mean scores)[†]
- e. Ability to perform activities of daily living
- f. Ability to perform instrumental (or extended) activities of daily living[†]
- g. Anxiety and depression (Goldberg Anxiety and Depression scale, mean scores)[†]
- h. Cognition (MACQ memory assessment scale)[†]
- i. Social support (Duke Social Support Index social interaction subscale)[†]
- j. Medical conditions (only those reported by at least 10% of women are reported):
 - High blood pressure
 - Osteoporosis
 - Diabetes
 - Cataracts
 - Skin cancer
 - Arthritis
 - Heart disease
 - Respiratory disease
 - Psychiatric disorders
- k. Medical procedures
 - Cataract surgery
 - Other eye surgery
 - Knee surgery / arthroscopy
 - Hip surgery

[†]Definitions of these assessments and how they are scored are included in Appendix 2.

- Heart surgery
- Bone density tests
- Other surgery

4.2.3. Health service use, as collected by ALSWH surveys

- a. General Practitioner consultations in last 12 months
- b. Hospital doctor
- c. Specialist doctor
- d. Optician
- e. Dentist
- f. Physiotherapist
- g. Podiatrist / Chiropodist
- h. Alternative health practitioner
- i. Days in hospital

4.2.4. Health insurance

- a. Private hospital insurance
- b. Private ancillary health insurance

4.3. Results

Tables showing results of all the comparisons are presented in Appendix B.

4.3.1. Sociodemographic profiles (Table B 1 - Table B 5)

There were three notable differences between the DVA 'Client' group and 'Not DVA not partnered' group. The 'Not DVA not partnered' group had a lower percentage of women who were widowed and more women who were divorced and single ($\chi^2_{(5)} = 368.9, p \leq 0.0001$), a higher percentage who were born in countries outside Australia ($\chi^2_{(4)} = 208.9, p \leq 0.0001$), and a higher percentage of women who said it was impossible or difficult to manage on their income ($\chi^2_{(4)} = 131.8, p \leq 0.0001$). The data showing these statistically significant differences are presented in Table 4-2.

Table 4-2 Main differences between women without partners on marital status, country of birth and managing on income: numbers (column percentages)

		DVA client, n (%)	Not DVA, not partnered, n (%)
Marital status	Married	66 (4.8)	0
	Defacto	4 (0.3)	0
	Separated	1 (0.1)	54 (1.8)
	Divorced	3 (0.2)	240 (7.9)
	Widowed	1286 (94.3)	2539 (83.8)
	Single	4 (0.3)	196 (6.5)
Country of birth	Australian born	1197 (93.3)	2162 (74.7)
	Other ESB	74 (5.8)	416 (14.4)
	Europe	7 (0.5)	263 (9.1)
	Asia	2 (0.2)	35 (1.2)
	Other	3 (0.2)	19 (0.7)
Manage on income	Impossible	6 (0.4)	38 (1.3)
	Always difficult	29 (2.1)	217 (7.2)
	Sometime difficult	147 (10.8)	576 (19.0)
	Not too bad	698 (51.5)	1478 (48.8)
	Easy	475 (35.1)	718 (23.7)

There was one notable difference between the four groups who were spouses/partnered. The 'Other DVA partnered' group had a higher percentage who came from non-English speaking countries ($\chi^2_{(24)} = 275.2, p \leq 0.0001$). The data showing these statistically significant differences are presented in Table 4-3.

Table 4-3 Comparisons of country of birth for women with partners: numbers (column percentages)

	Carer (%)			Non carer (%)			
	Spouse VTPI / VDP	Spouse other	Not DVA, partnered	Spouse VTPI / VDP	Spouse other	Other DVA partnered	Not DVA, partnered
Australian born	109 (95.6)	152 (89.9)	207 (70.2)	143 (94.7)	417 (93.1)	36 (44.4)	757 (72.0)
Other ESB	5 (4.4)	16 (9.5)	50 (16.9)	8 (5.3)	23 (5.1)	42 (51.9)	164 (15.6)
Europe	0	1 (0.6)	29 (9.8)	0	7 (1.6)	3 (3.7)	110 (10.5)
Asia	0	0	5 (1.7)	0	1 (0.2)	0	11 (1.0)
Other	0	0	4 (1.4)	0	0	0	9 (0.9)

4.3.2. Health indicators and status (Table B 6 – Table B 10)

For all of the 11 health indicators and health status measures there were no apparent differences between the ‘Client group’ and ‘Not DVA not partnered group’.

There were a few differences between the four groups who were spouses/partnered on the health status measures, medical conditions and medical procedures.

Ability to perform instrumental activities of daily living: Women in the ‘Spouse VTPI / VDP not caring for someone living with’ group had a higher mean score on this assessment indicating more difficulty in performing these activities compared to the other groups ($F_{(6,2276)} = 2.65, p \leq 0.05$). The data showing this statistically significant difference are presented in Table 4-4.

Table 4-4 Comparison of mean scores (standard errors) for instrumental activities of daily living for women with partners mean score.

	Carer			Non carer (mean			
	Spouse VTPI / VDP	Spouse other	Not DVA, partnered	Spouse VTPI / VDP	Spouse other	Other DVA partnered	Not DVA, partnered
Mean (se) IADL score	2.59 (0.3)	2.67 (0.2)	2.68 (0.2)	3.88 (0.4)	3.17 (0.2)	2.39 (0.4)	2.95 (0.1)

High Blood pressure: Women in the ‘Spouse VTPI / VDP not caring for someone living with them’ group had a higher percentage who reported high blood pressure than most of the other groups ($\chi^2_{(6)} = 13.3, p \leq 0.05$). The data showing this statistically significant difference are presented in Table 4-5.

Table 4-5 Comparison of prevalence of high blood pressure for women with partners: numbers (column percentages).

	Carer, n (%)			Non carer, n (%)			
	Spouse VTPI / VDP	Spouse other	Not DVA, partnered	Spouse VTPI / VDP	Spouse other	Other DVA partnered	Not DVA, partnered
High blood pressure							
No	55 (45.5)	77 (43.5)	150 (49.5)	53 (34.2)	215 (45.6)	32 (38.1)	455 (41.7)
Yes	66 (54.5)	100 (56.5)	153 (50.5)	102 (65.8)	257 (54.4)	52 (61.9)	637 (58.3)

Skin cancer: Women in the ‘Spouse VTPI / VDP’ carer and not carers groups had reported higher rates of skin cancer than the other groups ($\chi^2_{(5)} = 35.2, p \leq 0.0001$). The data showing this statistically significant difference are presented in Table 4-6.

Table 4-6 Comparisons of proportions reporting skin cancer for women with partners: numbers (column percentages).

	Carer, n (%)			Non carer, n (%)			
	Spouse VTPI / VDP	Spouse other	Not DVA, partnered	Spouse VTPI / VDP	Spouse other	Other DVA, partnered	Not DVA, partnered
Skin cancer							
No	73 (60.3)	139 (78.5)	248 (81.8)	102 (65.8)	340 (72.0)	67 (79.8)	840 (76.9)
Yes	48 (39.7)	38 (21.5)	55 (18.2)	53 (34.2)	132 (28.0)	17 (20.2)	252 (23.1)

4.3.3. Health service use (Table B 11 – Table B 14)

There were two statistically significant differences between the ‘Client group’ and ‘Not DVA not partnered group’ on health service use.

Physiotherapist: A higher percentage of women in the ‘Client’ group reported visiting a physiotherapist than women in the ‘Not DVA not partnered group’ ($\chi^2_{(1)} = 45.9, p \leq 0.0001$).

Podiatrist / Chiropodist: Women in the ‘Client’ group reported a 20% higher rate of visits to a podiatrist / chiropodist than women in the ‘Not DVA not partnered group’ ($\chi^2_{(1)} = 195.3, p \leq 0.0001$). The data showing these statistically significant differences are presented in Table 4-7 below.

Table 4-7 Comparison of use of health services among women without partners: numbers (column percentages).

		DVA client, n (%)	Not DVA, not partnered, n (%)
Physiotherapist	No	1023 (76.0)	2531 (84.6)
	Yes	323 (24.0)	462 (15.4)
Podiatrist / Chiropodist	No	570 (42.3)	1945 (65.0)
	Yes	776 (57.7)	1048 (35.0)

There were no differences on health service use between the four groups who were spouses/partnered.

4.3.4. Health insurance (Table B 15)

Women in the 'Client' group differed from those in the 'Not DVA, not partnered group' on both questions of health insurance, with those in the 'Client' group having a much lower rate of having private hospital ($\chi^2_{(1)} = 554.1, p \leq 0.0001$) and ancillary ($\chi^2_{(1)} = 379.5, p \leq 0.0001$) insurance compared to 'Not DVA' women. The data showing these statistically significant differences are presented in Table 4-8.

Table 4-8 Comparison of health insurance among women without partners: numbers (column percentages).

		DVA client, n (%)	Not DVA, not partnered, n (%)
Private hospital insurance	No	1275 (93.5)	1753 (58.0)
	Yes	88 (6.5)	1267 (42.0)
Private ancillary health insurance	No	1314 (96.4)	2121 (70.2)
	Yes	49 (3.6)	899 (29.8)

There were also differences between the four groups who were spouses/partnered on the health insurance questions. Higher rates of private hospital insurance ($\chi^2_{(6)} = 24.2, p \leq 0.001$), and ancillary health insurance ($\chi^2_{(6)} = 20.7, p \leq 0.01$), were reported by the 'Spouse VTPI / VDP' carer and not carers groups, and the 'Spouse other' carer or not carer groups compared to the other groups, in particular the "Other DVA, partnered, not caring for someone they live with' group. The data showing these statistically significant differences are presented in Table 4-9.

Table 4-9 Comparison of health insurance among women with partners: numbers (column percentages).

	Carer (%)			Non carer (%)			
	Spouse VTPI / VDP	Spouse other	Not DVA, partnered	Spouse VTPI / VDP	Spouse other	Other DVA, partnered	Not DVA, partnered
Private hospital							
No	50 (41.3)	88 (50.0)	153 (50.7)	49 (31.8)	208 (44.3)	49 (59.8)	520 (47.4)
Yes	71 (58.7)	88 (50.0)	149 (49.3)	105 (68.2)	262 (55.7)	33 (40.2)	577 (52.6)
Ancillary							
No	72 (59.5)	106 (60.2)	213 (70.5)	83 (53.9)	292 (62.1)	60 (73.2)	729 (66.5)
Yes	49 (40.5)	70 (39.8)	89 (29.5)	71 (46.1)	178 (37.9)	22 (26.8)	368 (33.5)

5. Part 2

5.1. Update on progress

5.1.1. Medicare linkages

ALSWH currently receives all claims data for MBS and PBS from Medicare Australia for women who consented to making this information available. Amongst the 1921-26 cohort, 4692 (66%) women gave consent. Included in the MBS claims data are medical services, allied health services and additional medical services funded by DVA to Gold and White Card holders. These services include, dental, podiatry, physiotherapy, optical, community nursing, chiropractic, private hospital, prostheses, and appliances. Item numbers used in these data have been obtained from DVA.

Unfortunately there is no comparable data source for these allied health services for women who are not DVA clients. Nevertheless, these data do provide an opportunity to validate self report items in the ALSWH data for these services. Overall there is quite good agreement between the Medicare data and the self report data for podiatry and dental services, and poorer agreement for optical and physiotherapy services.

There are comparable data for DVA and women who are not DVA clients for all Medicare funded medical services (MBS) and PBS funded pharmaceuticals, and to a limited extent, optical services (eye examination).

5.1.2. Non-Medicare data sources

Data for other services such as hospitalisations, home maintenance, aged care and rehabilitation services are more problematic, as data collection tends to be ad hoc and not easily linked. Additionally, similar data for women who are not DVA clients are either nonexistent or fragmented. It may be possible to link hospitalisations in some states but this would involve a separate linkage of the data and possibly considerable time delays. Therefore it will probably only be practical to use self-reported ALSWH data

Appendix A

Activities of Daily Living (ADLs)

Participants were asked specific questions about their difficulty performing, and dependence on others to help them perform, Basic Activities of Daily Living (BADLs) and Instrumental Activities of Daily Living (IADLs) in the previous month.

- **BADLs** include the personal tasks of daily life, such as washing, dressing or grooming.
- **IADLs** include further life activities, such as managing money or using the telephone.

The scores for BADLs and IADLs were categorized as ‘no difficulty or help required’ or ‘some difficulty and/or help required’. Summary ADL scores for the eight basic ADLs range from 0 – 16. Summary IADL scores for the eight extended IADLs range from 0 – 16. Higher scores indicate higher dependence or difficulty performing activities of daily living.

The Goldberg Anxiety and Depression Scale (GADS)

The Goldberg Anxiety and Depression Scale (GADS) is an 18-item self-report symptom inventory developed from 36 items in the Psychiatric Assessment Schedule (Goldberg et al., 1987). The GADS score is based on responses of ‘yes’ or ‘no’ to nine depression and nine anxiety items, asking how respondents have been feeling in the past month. Anxiety scores of 5 or more or with depression scores of 2 or more are considered to have a 50% chance of a clinically important disturbance (Goldberg et al., 1988)

Memory Assessment Clinic Questionnaire (MACQ)

Age-related memory decline was measured by the Memory Assessment Clinic-Q (Crook, Feher, & Larrabee, 1992). Scores range from 7 to 35 with higher scores indicating greater decline in memory.

Duke Social Support Index

The Duke Social Support Index (DSSI) was included as one measure of social support, to assess the broad impact of caring on women’s lives. The DSSI was developed in the United States as a brief, easily administered instrument to determine an individual’s level of social support (Powers, Goodger et al., 2004). The DSSI’s reliability and validity have been confirmed in a sample of community dwelling older Australian men and women (Goodger, Byles et al., 1999). The DSSI consists of two sub-scales. The first (social interaction) measures the size and structure of the social network, and consists of four items (Questions 13, 15). The second (subjective support) is a six item sub-scale (Question 14) which

measures the perceived satisfaction with the behavioural or emotional support obtained from this network

The social interaction sub-scale is calculated as the sum of re-coded scores for Questions 13 and 15; the sub-scale ranges from 4 to 12 with higher scores indicating more social interaction. The subjective support sub-scale is calculated as the sum of scores for Question 14; the subscale ranges from 6 to 18 with higher scores indicating more social support. There was no imputation of missing items in either sub-scale.

Two subscales of the Duke Social Support Index, social interaction and satisfaction with social support, were used to measure social support in the current study (Powers, Goodger, & Byles, 2004). Social interaction measured the size and structure of the carers' social network, with scores ranging from 4 to 12. Higher scores indicated more social interaction.

Short Form 36 item Health Survey (SF-36)

The Medical Outcomes Study Short-Form 36-item Health Survey (SF-36) is a widely used tool designed to measure health-related quality of life. The instrument provides an 8-scale health profile and 2 component summary scores representing physical and mental health (Q1 – Q11 in Survey 4). Each summary score has a mean of 50 and standard deviation of 10. They represent physical and mental health with higher scores indicating better quality of life.

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Appendix B

Table B 1 Participant marital status (column percentages). Total numbers of women in each group are shown in the last row of the table.

Marital status	All women	DVA client	Carer, live in						Non-carer					
			Spouse VTPI/VDP	Spouse other	Other DVA, partnered	Other DVA, not partnered	Not DVA, partnered	Not DVA, not partnered	Spouse VTPI/VDP	Spouse other	Other DVA, partnered	Other DVA, not partnered	Not DVA, partnered	Not DVA, not partnered
			Married	36.3	4.8	100.0	100.0	100.0	.	99.3	.	98.7	98.1	98.8	.	98.6	.
De Facto	0.3	0.3	.	.	.	.	0.7	.	0.6	.	1.2	.	1.4	.
Separated	0.9	0.1	.	.	.	.	.	3.5	.	0.6	.	0.7	.	1.8
Divorced	3.4	0.2	.	.	.	.	.	12.8	.	0.2	.	2.1	.	7.7
Widowed	56.2	94.3	.	.	.	66.7	.	66.3	0.6	1.1	.	95.1	.	84.2
Single	2.9	0.3	.	.	.	33.3	.	17.4	.	.	.	2.1	.	6.3
Total no. of women	6866	1364	121	178	25	3	307	86	156	476	84	143	1107	2816

* Total numbers exclude women with missing data on carer status.

Table B 2 Area of residence (column percentages). Total numbers of women in each group are shown in the last row of the table.

	All women	DVA client	Carer, live in						Non-carer					
			Spouse VTPI/VDP	Spouse other	Other DVA, partnered	Other DVA, not partnered	Not DVA, partnered	Not DVA, not partnered	Spouse VTPI/VDP	Spouse other	Other DVA, partnered	Other DVA, not partnered	Not DVA, partnered	Not DVA, not partnered
Aria+ grouped														
Major cities of Australia	45.2	42.6	44.6	43.8	52.0	33.3	45.6	52.3	44.2	46.2	60.7	47.3	43.7	46.2
Inner regional Australia	36.5	40.0	42.1	32.6	36.0	33.3	32.9	28.4	41.7	35.3	27.4	38.4	37.5	35.3
Outer regional Australia	16.4	16.0	12.4	23.0	12.0	33.3	17.9	13.6	14.1	16.4	11.9	14.4	16.7	16.6
Remote Australia	1.6	1.3	0.8	0.6	.	.	2.9	5.7	.	1.9	.	.	1.7	1.8
Very Remote Australia	0.2	0.1	.	.	.	.	0.7	.	.	0.2	.	.	0.4	0.2
Total no. of women	6895	1369	121	178	25	3	307	88	156	476	84	146	1106	2836

* Total numbers exclude women with missing data on carer status.

Table B 3 Country of birth (column percentages). Total numbers of women in each group are shown in the last row of the table.

	All women	DVA client	Carer, live in						Non-carer					
			Spouse VTPI/VDP	Spouse other	Other DVA, partnered	Other DVA, not partnered	Not DVA, partnered	Not DVA, not partnered	Spouse VTPI/VDP	Spouse other	Other DVA, partnered	Other DVA, not partnered	Not DVA, partnered	Not DVA, not partnered
Country of birth														
Australian born	79.5	93.3	95.6	89.9	40.0	66.7	70.2	70.6	94.7	93.1	44.4	69.9	72.0	74.7
Other ESB	12.8	5.8	4.4	9.5	52.0	33.3	16.9	14.1	5.3	5.1	51.9	25.0	15.6	14.6
Europe	6.3	0.5	.	0.6	8.0	.	9.8	11.8	.	1.6	3.7	4.4	10.5	8.9
Asia	0.8	0.2	.	.	.	.	1.7	2.4	.	0.2	.	.	1.0	1.2
Other	0.5	0.2	.	.	.	.	1.4	1.2	.	.	.	0.7	0.9	0.6
Total no. of women	6526	1283	114	169	25	3	295	85	151	448	81	136	1051	2685

* Total numbers exclude women with missing data on carer status.

Table B 4 Educational qualifications (column percentages). Total numbers of women in each group are shown in the last row of the table.

	All women	DVA client	Carer, live in						Non-carer					
			Spouse VTPI/VDP	Spouse other	Other DVA, partnered	Other DVA, not partnered	Not DVA, partnered	Not DVA, not partnered	Spouse VTPI/VDP	Spouse other	Other DVA, partnered	Other DVA, not partnered	Not DVA, partnered	Not DVA, not partnered
Highest qualification completed														
No formal	29.6	29.4	23.7	24.7	20.0	.	24.3	32.9	30.1	26.4	35.4	28.1	28.7	31.6
School Certificate	39.9	45.5	46.6	47.1	48.0	50.0	40.9	31.8	45.8	45.1	32.9	41.0	38.5	36.1
Higher school Certificate	13.2	11.1	14.4	11.8	4.0	50.0	14.9	12.9	10.5	11.3	11.0	14.4	13.2	14.6
Trade/Apprentice	3.7	3.2	0.8	2.4	.	.	3.0	4.7	1.3	4.1	4.9	7.2	4.6	3.6
Certificate/Diploma	9.0	8.0	10.2	8.8	28.0	.	10.8	9.4	6.5	9.2	11.0	5.0	10.0	8.9
University degree	3.6	2.2	3.4	4.1	.	.	5.1	7.1	5.9	3.3	4.9	4.3	3.7	3.8
Higher degree	1.1	0.5	0.8	1.2	.	.	1.0	1.2	.	0.7	.	.	1.2	1.5
Total no. of women	6593	1296	118	170	25	2	296	85	153	459	82	139	1056	2712

* Total numbers exclude women with missing data on carer status.

Table B 5 Ability to manage on income available (column percentages). Total numbers of women in each group are shown in the last row of the table.

	All women	DVA client	Carer, live in						Non-carer						
			Spouse VTPI/VDP	Spouse other	Other DVA, partnered	Other DVA, not partnered	Not DVA, partnered	Not DVA, not partnered	Spouse VTPI/VDP	Spouse other	Other DVA, partnered	Other DVA, not partnered	Not DVA, partnered	Not DVA, not partnered	
Manage on the income you have available															
Impossible	0.8	0.4	.	.	.	.	0.3	4.7	.	0.6	.	2.1	0.7	1.1
Difficult always	4.8	2.1	.	3.4	.	33.3	4.3	12.9	1.3	2.1	3.7	7.6	4.2	7.1	
Difficult sometimes	15.2	10.8	7.4	12.6	16.0	.	14.5	16.5	11.7	11.1	11.1	20.1	13.5	19.3	
Not too bad	51.3	51.5	53.7	56.6	48.0	66.7	53.5	54.1	49.4	57.1	60.5	47.9	53.7	48.6	
Easy	27.8	35.1	38.8	27.4	36.0	.	27.4	11.8	37.7	29.0	24.7	22.2	27.9	24.0	
Total no. of women	6828	1355	121	175	25	3	303	85	154	469	81	144	1095	2818	

* Total numbers exclude women with missing data on carer status.

Table B 6 Body Mass Index classification (column percentages). Total numbers of women in each group are shown in the last row of the table.

	All women	DVA client	Carer, live in						Non-carer					
			Spouse VTPI/VDP	Spouse other	Other DVA, partnered	Other DVA, not partnered	Not DVA, partnered	Not DVA, not partnered	Spouse VTPI/VDP	Spouse other	Other DVA, partnered	Other DVA, not partnered	Not DVA, partnered	Not DVA, not partnered
BMI classification														
Underweight, BMI < 18.5	4.3	3.7	2.8	3.1	.	.	3.6	8.9	3.5	3.6	5.1	5.3	3.6	5.1
Healthy weight, 18.5 <= BMI < 25	48.8	46.5	54.1	50.6	45.8	33.3	49.6	50.6	47.9	55.0	43.0	43.2	50.3	48.4
Overweight, 25 <= BMI < 30	33.1	34.0	27.5	32.7	33.3	66.7	31.3	22.8	34.5	32.5	39.2	36.4	33.2	33.1
Obese, 30 <= BMI	13.8	15.8	15.6	13.6	20.8	.	15.5	17.7	14.1	8.9	12.7	15.2	12.9	13.4
Total no. of women	6112	1204	109	162	24	3	278	79	142	416	79	132	989	2495

* Total numbers exclude women with missing data on carer status.

Table B 7 Exercise status (column percentages). Total numbers of women in each group are shown in the last row of the table

Exercise status group	All women	DVA client	Carer, live in						Non-carer					
			Spouse VTPI/VDP	Spouse other	Other DVA, partnered	Other DVA, not partnered	Not DVA, partnered	Not DVA, not partnered	Spouse VTPI/VDP	Spouse other	Other DVA, partnered	Other DVA, not partnered	Not DVA, partnered	Not DVA, not partnered
Nil/sedentary	44.2	45.3	35.4	45.8	56.0	.	46.1	41.8	42.5	46.0	43.6	45.0	46.2	42.8
Low	25.8	25.3	29.2	23.5	28.0	66.7	25.5	35.4	21.9	27.4	21.8	26.4	25.2	25.9
Moderate	13.8	13.7	14.2	16.9	8.0	33.3	16.3	8.9	16.4	11.4	12.8	11.4	12.3	14.6
High	16.2	15.7	21.2	13.9	8.0	.	12.1	13.9	19.2	15.2	21.8	17.1	16.2	16.7
Total no. of women	6332	1238	113	166	25	3	282	79	146	446	78	140	1022	2594

* Total numbers exclude women with missing data on carer status.

Table B 8 Self rated health (column percentages). Total numbers of women in each group are shown in the last row of the table.

	All women	DVA client	Carer, live in						Non-carer						
			Spouse VTPI/VDP	Spouse other	Other DVA, partnered	Other DVA, not partnered	Not DVA, partnered	Not DVA, not partnered	Spouse VTPI/VDP	Spouse other	Other DVA, partnered	Other DVA, not partnered	Not DVA, partnered	Not DVA, not partnered	
Your health is															
Excellent	3.3	2.6	2.5	4.0	4.0	.	4.6	1.1	1.9	2.1	2.4	1.4	2.5	4.3	
Very good	21.0	18.8	28.1	20.5	16.0	.	18.4	28.4	15.6	19.8	28.9	26.0	20.8	21.9	
Good	43.2	43.2	47.1	40.9	56.0	66.7	44.6	37.5	54.5	43.2	37.3	37.7	45.1	42.2	
Fair	28.5	32.2	22.3	29.5	24.0	33.3	28.9	30.7	23.4	30.3	30.1	33.6	26.5	27.4	
Poor	3.9	3.1	.	5.1	.	.	3.6	2.3	4.5	4.6	1.2	1.4	5.1	4.2	
Total no. of women	6863	1362	121	176	25	3	305	88	154	475	83	146	1102	2823	

* Total numbers exclude women with missing data on carer status.

Table B 9 General health status (column percentages). Total numbers of women in each group are shown in the last row of the table

		All women	DVA client	Carer, live in						Non-carer					
				Spouse VTPI/VDP	Spouse other	Other DVA, partnered	Other DVA, not partnered	Not DVA, partnered	Not DVA, not partnered	Spouse VTPI/VDP	Spouse other	Other DVA, partnered	Other DVA, not partnered	Not DVA, partnered	Not DVA, not partnered
MENTAL COMPONENT SCALE-00 - WHA OLD	Mean	51.4	51.2	50.6	48.2	49.9	62.0	51.2	50.8	51.3	51.3	52.3	52.3	51.9	51.6
	S.E.	0.1	0.3	0.9	0.8	2.3	2.7	0.6	1.1	0.9	0.5	1.1	0.8	0.3	0.2
PHYSICAL COMPONENT SCALE-00 - WHA OLD	Mean	46.3	45.4	47.7	46.9	45.2	42.6	45.8	47.9	46.1	46.7	46.8	45.5	46.8	46.3
	S.E.	0.1	0.3	0.9	0.8	2.0	10.6	0.6	1.1	0.8	0.5	1.1	1.0	0.3	0.2
Summary ADL scores	Mean	1.3	1.4	1.0	1.0	0.8	2.3	1.1	1.2	1.5	1.4	0.7	1.2	1.2	1.3
	S.E.	0.0	0.1	0.2	0.2	0.3	2.3	0.2	0.3	0.3	0.1	0.2	0.2	0.1	0.1
Summary IADL scores	Mean	3.0	3.0	2.6	2.7	2.0	3.3	2.7	2.6	3.9	3.2	2.4	2.9	3.0	3.0
	S.E.	0.0	0.1	0.3	0.2	0.4	1.3	0.2	0.4	0.4	0.2	0.4	0.3	0.1	0.1
Goldberg Anxiety Depression Scale	Mean	5.8	5.9	6.1	6.9	8.0	3.3	6.2	6.0	5.9	5.8	5.5	5.5	5.5	5.7
	S.E.	0.1	0.1	0.4	0.3	0.9	2.3	0.3	0.5	0.4	0.2	0.4	0.3	0.1	0.1
MACQ cognitive decline scale	Mean	25.6	25.4	26.2	25.9	25.8	24.7	25.6	24.6	25.7	26.0	24.7	25.3	25.7	25.6
	S.E.	0.1	0.1	0.4	0.3	0.8	1.5	0.3	0.6	0.3	0.2	0.5	0.3	0.1	0.1
DSSI Social Interaction	Mean	8.8	9.0	8.9	8.9	8.8	9.7	8.6	8.3	8.7	8.9	8.7	9.0	8.6	8.9
	S.E.	0.0	0.0	0.1	0.1	0.4	0.9	0.1	0.2	0.1	0.1	0.2	0.1	0.0	0.0

Table B 10 Medical conditions (column percentages). Total numbers of women in each group are shown in the last row of the table.

	All women	DVA client	Carer, live in						Non-carer						
			Spouse VTPI/VDP	Spouse other	Other DVA, partnered	Other DVA, not partnered	Not DVA, partnered	Not DVA, not partnered	Spouse VTPI/VDP	Spouse other	Other DVA, partnered	Other DVA, not partnered	Not DVA, partnered	Not DVA, not partnered	
High blood pressure															
no	43.3	43.4	45.5	43.5	40.0	66.7	49.5	46.6	34.2	45.6	38.1	44.8	41.7	43.3	
yes	56.7	56.6	54.5	56.5	60.0	33.3	50.5	53.4	65.8	54.4	61.9	55.2	58.3	56.7	
Osteoporosis															
no	77.8	76.7	74.4	84.2	76.0	.	81.2	76.1	79.4	77.8	83.3	82.1	78.1	77.3	
yes	22.2	23.3	25.6	15.8	24.0	100.0	18.8	23.9	20.6	22.2	16.7	17.9	21.9	22.7	
Diabetes															
no	88.0	86.4	95.9	88.7	92.0	66.7	90.4	88.6	87.1	88.1	85.7	82.1	88.6	88.3	
yes	12.0	13.6	4.1	11.3	8.0	33.3	9.6	11.4	12.9	11.9	14.3	17.9	11.4	11.7	
Cataract															
no	69.1	67.2	71.9	68.9	68.0	.	72.6	71.6	71.6	73.1	60.7	71.0	71.8	67.9	
yes	30.9	32.8	28.1	31.1	32.0	100.0	27.4	28.4	28.4	26.9	39.3	29.0	28.2	32.1	
Skin cancer															
no	75.1	71.7	60.3	78.5	76.0	66.7	81.8	78.4	65.8	72.0	79.8	71.0	76.9	76.6	
yes	24.9	28.3	39.7	21.5	24.0	33.3	18.2	21.6	34.2	28.0	20.2	29.0	23.1	23.4	
Arthritis															
no	54.5	53.4	52.1	50.8	68.0	.	56.8	55.7	52.3	53.4	56.0	51.0	56.2	54.9	
yes	45.5	46.6	47.9	49.2	32.0	100.0	43.2	44.3	47.7	46.6	44.0	49.0	43.8	45.1	
Heart Disease															
no	68.0	66.8	66.1	74.6	68.0	.	71.6	63.6	70.3	68.0	81.0	72.4	69.0	66.9	
yes	32.0	33.2	33.9	25.4	32.0	100.0	28.4	36.4	29.7	32.0	19.0	27.6	31.0	33.1	

	All women	DVA client	Carer, live in						Non-carer					
			Spouse VTPI/VDP	Spouse other	Other DVA, partnered	Other DVA, not partnered	Not DVA, partnered	Not DVA, not partnered	Spouse VTPI/VDP	Spouse other	Other DVA, partnered	Other DVA, not partnered	Not DVA, partnered	Not DVA, not partnered
Respiratory Disease														
no	85.5	83.2	89.3	87.0	92.0	100.0	85.5	90.9	89.0	89.0	86.9	91.0	86.8	84.6
yes	14.5	16.8	10.7	13.0	8.0	.	14.5	9.1	11.0	11.0	13.1	9.0	13.2	15.4
Psychiatric Disorder														
no	89.0	87.3	87.6	86.4	96.0	66.7	90.8	84.1	83.9	87.9	90.5	88.3	90.5	89.8
yes	11.0	12.7	12.4	13.6	4.0	33.3	9.2	15.9	16.1	12.1	9.5	11.7	9.5	10.2
Total no. of women	6822	1354	121	177	25	3	303	88	155	472	84	145	1092	2803

* Total numbers exclude women with missing data on carer status.

Table B 11 Medical procedures (column percentages). Total numbers of women in each group are shown in the last row of the table.

	All women	DVA client	Carer, live in						Non-carer					
			Spouse VTPI/VDP	Spouse other	Other DVA, partnered	Other DVA, not partnered	Not DVA, partnered	Not DVA, not partnered	Spouse VTPI/VDP	Spouse other	Other DVA, partnered	Other DVA, not partnered	Not DVA, partnered	Not DVA, not partnered
Cataract														
no	71.3	69.2	75.9	74.2	72.0	.	75.0	75.3	69.0	72.7	72.2	73.9	72.1	70.9
yes	28.7	30.8	24.1	25.8	28.0	100.0	25.0	24.7	31.0	27.3	27.8	26.1	27.9	29.1
Other Eye surgery														
no	94.9	94.4	98.1	95.6	96.0	100.0	97.4	94.8	97.2	96.1	89.9	93.3	95.1	94.5
yes	5.1	5.6	1.9	4.4	4.0	.	2.6	5.2	2.8	3.9	10.1	6.7	4.9	5.5
Knee surgery or arthroscopy														
no	94.5	93.1	94.4	89.9	96.0	66.7	94.5	96.1	93.7	93.8	93.7	90.3	95.3	95.6
yes	5.5	6.9	5.6	10.1	4.0	33.3	5.5	3.9	6.3	6.3	6.3	9.7	4.7	4.4
Hip surgery														
no	95.2	95.4	98.1	93.7	100.0	100.0	97.1	97.4	93.0	96.1	91.1	94.0	95.3	94.8
yes	4.8	4.6	1.9	6.3	.	.	2.9	2.6	7.0	3.9	8.9	6.0	4.7	5.2
Heart surgery														
no	95.6	94.7	98.1	94.3	100.0	100.0	95.6	92.2	95.8	95.8	96.2	95.5	96.2	95.7
yes	4.4	5.3	1.9	5.7	.	.	4.4	7.8	4.2	4.2	3.8	4.5	3.8	4.3
Bone Density Test														
no	76.6	74.8	75.9	77.4	80.0	100.0	77.6	77.9	81.7	75.7	63.3	80.6	73.3	78.5
yes	23.4	25.2	24.1	22.6	20.0	.	22.4	22.1	18.3	24.3	36.7	19.4	26.7	21.5
Other surgery														
no	82.5	81.3	77.8	81.1	96.0	100.0	82.4	88.3	76.1	81.5	82.3	80.6	83.8	83.1
yes	17.5	18.7	22.2	18.9	4.0	.	17.6	11.7	23.9	18.5	17.7	19.4	16.2	16.9

	All women	DVA client	Carer, live in						Non-carer					
			Spouse VTPI/VDP	Spouse other	Other DVA, partnered	Other DVA, not partnered	Not DVA, partnered	Not DVA, not partnered	Spouse VTPI/VDP	Spouse other	Other DVA, partnered	Other DVA, not partnered	Not DVA, partnered	Not DVA, not partnered
None of these operations														
no	63.1	66.5	63.0	62.9	52.0	100.0	62.1	57.1	63.4	63.9	74.7	61.2	62.3	61.7
yes	36.9	33.5	37.0	37.1	48.0	.	37.9	42.9	36.6	36.1	25.3	38.8	37.7	38.3
Total no. of women	6232	1240	108	159	25	3	272	77	142	432	79	134	1000	2561

* Total numbers exclude women with missing data on carer status.

Table B 12 GP consultations in previous 12 months (column percentages). Total numbers of women in each group are shown in the last row of the table.

	All women	DVA client	Carer, live in						Non-carer					
			Spouse VTPI/VDP	Spouse other	Other DVA, partnered	Other DVA, not partnered	Not DVA, partnered	Not DVA, not partnered	Spouse VTPI/VDP	Spouse other	Other DVA, partnered	Other DVA, not partnered	Not DVA, partnered	Not DVA, not partnered
Times doctor/GP consulted in last 12 months														
None	0.9	0.7	.	1.7	.	.	2.0	1.2	.	0.9	.	0.7	0.7	0.9
1 or 2 times	9.0	6.0	10.1	8.6	8.3	.	11.6	10.5	3.9	9.5	9.8	5.6	9.6	10.3
3 or 4 times	27.0	24.9	21.8	25.3	29.2	33.3	27.2	30.2	23.9	28.0	28.0	32.4	29.2	27.0
5-8 times	30.4	31.4	35.3	34.5	45.8	.	28.8	31.4	32.3	32.9	25.6	28.2	29.6	29.6
9-12 times	17.7	19.5	16.8	17.2	12.5	33.3	16.9	18.6	23.2	14.4	17.1	15.5	16.1	18.0
13-15 times	6.2	7.1	10.9	5.7	.	33.3	4.0	3.5	7.1	4.9	11.0	8.5	6.7	5.7
16-19 times	2.7	3.3	0.8	2.9	4.2	.	2.6	2.3	2.6	2.2	1.2	2.8	2.2	2.9
20 or more times	6.1	7.2	4.2	4.0	.	.	7.0	2.3	7.1	7.3	7.3	6.3	5.9	5.6
Total no. of women	6772	1342	119	174	24	3	302	86	155	465	82	142	1088	2790

* Total numbers exclude women with missing data on carer status.

Table B 13 Health Professional service use (column percentages). Total numbers of women in each group are shown in the last row of the table.

	All women	DVA client	Carer, live in						Non-carer					
			Spouse VTPI/VDP	Spouse other	Other DVA, partnered	Other DVA, not partnered	Not DVA, partnered	Not DVA, not partnered	Spouse VTPI/VDP	Spouse other	Other DVA, partnered	Other DVA, not partnered	Not DVA, partnered	Not DVA, not partnered
A hospital doctor														
no	79.8	81.3	81.0	79.7	80.0	66.7	82.1	77.9	76.8	82.5	78.3	77.6	79.3	78.9
yes	20.2	18.7	19.0	20.3	20.0	33.3	17.9	22.1	23.2	17.5	21.7	22.4	20.7	21.1
A specialist doctor														
no	50.5	45.2	47.9	50.3	64.0	33.3	57.8	53.5	52.3	52.2	45.8	47.6	51.0	51.9
yes	49.5	54.8	52.1	49.7	36.0	66.7	42.2	46.5	47.7	47.8	54.2	52.4	49.0	48.1
An optician														
no	50.6	49.3	46.3	48.0	40.0	33.3	51.2	48.8	47.7	52.2	47.0	51.0	50.8	51.4
yes	49.4	50.7	53.7	52.0	60.0	66.7	48.8	51.2	52.3	47.8	53.0	49.0	49.2	48.6
A dentist														
no	63.0	62.5	56.2	62.7	48.0	33.3	65.8	66.3	53.5	59.3	68.7	62.9	61.0	65.0
yes	37.0	37.5	43.8	37.3	52.0	66.7	34.2	33.7	46.5	40.7	31.3	37.1	39.0	35.0
A physiotherapist														
no	82.6	76.0	79.3	80.8	84.0	66.7	87.4	86.0	78.1	84.6	86.7	82.5	84.2	84.5
yes	17.4	24.0	20.7	19.2	16.0	33.3	12.6	14.0	21.9	15.4	13.3	17.5	15.8	15.5
A podiatrist or chiropodist														
no	61.0	42.3	62.0	57.6	64.0	33.3	66.1	72.1	57.4	64.6	69.9	60.1	70.8	64.8
yes	39.0	57.7	38.0	42.4	36.0	66.7	33.9	27.9	42.6	35.4	30.1	39.9	29.2	35.2
An alternative health practitioner														
no	90.2	91.2	86.8	91.5	96.0	33.3	92.0	87.2	91.6	89.3	90.4	91.6	90.7	89.5
yes	9.8	8.8	13.2	8.5	4.0	66.7	8.0	12.8	8.4	10.7	9.6	8.4	9.3	10.5

	All women	DVA client	Carer, live in						Non-carer					
			Spouse VTPI/VDP	Spouse other	Other DVA, partnered	Other DVA, not partnered	Not DVA, partnered	Not DVA, not partnered	Spouse VTPI/VDP	Spouse other	Other DVA, partnered	Other DVA, not partnered	Not DVA, partnered	Not DVA, not partnered
None of these people														
no	90.7	94.7	91.7	89.8	92.0	100.0	86.7	93.0	93.5	90.6	90.4	91.6	88.7	89.6
yes	9.3	5.3	8.3	10.2	8.0	.	13.3	7.0	6.5	9.4	9.6	8.4	11.3	10.4
Total no. of women	6783	1346	121	177	25	3	301	86	155	469	83	143	1092	2782

* Total numbers exclude women with missing data on carer status.

Table B 14 Days in hospital in previous 12 months (column percentages). Total numbers of women in each group are shown in the last row of the table.

	All women	DVA client	Carer, live in						Non-carer						
			Spouse VTPI/VDP	Spouse other	Other DVA, partnered	Other DVA, not partnered	Not DVA, partnered	Not DVA, not partnered	Spouse VTPI/VDP	Spouse other	Other DVA, partnered	Other DVA, not partnered	Not DVA, partnered	Not DVA, not partnered	
Number days in hospital last 12 months															
No	63.2	60.2	71.1	66.3	60.0	66.7	69.3	68.2	56.7	60.3	67.9	64.7	64.2	63.5	
Yes, day only	12.7	12.2	13.2	11.4	20.0	33.3	11.5	17.6	16.7	15.5	7.7	14.0	12.9	12.2	
Yes, spent at least one night	24.1	27.6	15.8	22.3	20.0	.	19.3	14.1	26.7	24.2	24.4	21.3	22.8	24.3	
Total no. of women	6599	1298	114	175	25	3	296	85	150	458	78	136	1068	2713	

* Total numbers exclude women with missing data on carer status.

Table B 15 Private insurance (column percentages). Total numbers of women in each group are shown in the last row of the table.

	All women	DVA client	Carer, live in						Non-carer					
			Spouse VTPI/VDP	Spouse other	Other DVA, partnered	Other DVA, not partnered	Not DVA, partnered	Not DVA, not partnered	Spouse VTPI/VDP	Spouse other	Other DVA, partnered	Other DVA, not partnered	Not DVA, partnered	Not DVA, not partnered
Private hospital cover														
no	60.8	93.5	41.3	50.0	72.0	.	50.7	64.0	31.8	44.3	59.8	51.4	47.4	57.6
yes	39.2	6.5	58.7	50.0	28.0	100.0	49.3	36.0	68.2	55.7	40.2	48.6	52.6	42.4
Private ancillary services/extras cover														
no	73.4	96.4	59.5	60.2	72.0	.	70.5	74.4	53.9	62.1	73.2	73.6	66.5	69.7
yes	26.6	3.6	40.5	39.8	28.0	100.0	29.5	25.6	46.1	37.9	26.8	26.4	33.5	30.3
Total no. of women	6829	1363	121	176	25	3	302	86	154	470	82	144	1097	2806

* Total numbers exclude women with missing data on carer status.

Appendix C:

ALSWH Survey 4 of the 1921-26 cohort.

women's
health
australia



*Fourth Survey for
Women over 75*

How to complete this survey

This is the fourth “main” survey for women aged over 75. The project looks at changes over time, and some of the questions are the same as those in previous surveys.

INSTRUCTIONS

- Use a black/blue biro or pencil, preferably 2B
- Erase or correct mistakes
- Please do not fold or bend this survey

Mark the bubble like this:  **Example**

Please answer every question you can. If you are unsure about how to answer a question, mark the response for the closest answer to how you feel.

Please read the instructions above each question **very carefully**. Some require you to answer only those options which are applicable to you. Other questions require you to mark one answer on each line. The questions may also refer to different time periods.

Please write any comments or important information on page 26 only.
We are not able to read comments written throughout the survey.

Example 1: In general, would you say your health is:
(Mark one only)

- Excellent
Very good
Good ← You would mark this bubble if you think your health is good
Fair
Poor

Example 2: What is your postcode?
(PRINT clearly in the boxes)

2	3	0	8
---	---	---	---

If you need help to answer any questions, please ring 1800 068 081
(This is a FREECALL number)

women's health is about using health services

1. In the **LAST 3 YEARS** have you been diagnosed with or treated for:
(Mark all that apply)

		Yes
a	High blood pressure (hypertension)	<input type="radio"/>
b	Osteoarthritis	<input type="radio"/>
c	Rheumatoid arthritis	<input type="radio"/>
d	Other arthritis	<input type="radio"/>
e	Osteoporosis	<input type="radio"/>
f	Angina	<input type="radio"/>
g	Heart attack	<input type="radio"/>
h	Other heart problems	<input type="radio"/>
i	Diabetes (high blood sugar)	<input type="radio"/>
j	Asthma	<input type="radio"/>
k	Bronchitis / Emphysema	<input type="radio"/>
l	Stroke	<input type="radio"/>
m	Cataract	<input type="radio"/>
n	Skin cancer	<input type="radio"/>
o	Other cancer	<input type="radio"/>
p	Depression	<input type="radio"/>
q	Anxiety / Nervous disorder	<input type="radio"/>
r	Alzheimer's Disease or Dementia	<input type="radio"/>
s	None of these conditions	<input type="radio"/>

2. In the **LAST 3 YEARS**, have you had any of the following operations or procedures? (Mark all that apply)

		Yes	I am on a waiting list
a	Cataract	<input type="radio"/>	<input type="radio"/>
b	Other eye surgery	<input type="radio"/>	<input type="radio"/>
c	Knee surgery or arthroscopy	<input type="radio"/>	<input type="radio"/>
d	Hip surgery	<input type="radio"/>	<input type="radio"/>
e	Heart surgery (heart bypass, angioplasty, angiography)	<input type="radio"/>	<input type="radio"/>
f	Bone density test	<input type="radio"/>	<input type="radio"/>
g	Other surgery	<input type="radio"/>	<input type="radio"/>
h	No operations or procedures	<input type="radio"/>	

If there are other conditions, operations or procedures that you would like to tell us about, there is space on page 26.

3. How many times have you consulted a family doctor or another general practitioner in the LAST 12 MONTHS? (Mark one only)

- None
- 1 or 2 times
- 3 or 4 times
- 5-8 times
- 9-12 times
- 13-15 times
- 16-19 times
- 20 or more times

4. Have you consulted any of the following people for YOUR OWN HEALTH in the LAST 12 MONTHS? (Mark all that apply)

- | | Yes |
|--|-----------------------|
| a A hospital doctor (eg in outpatients or casualty) | <input type="radio"/> |
| b A specialist doctor | <input type="radio"/> |
| c An optician | <input type="radio"/> |
| d A dentist | <input type="radio"/> |
| e A physiotherapist | <input type="radio"/> |
| f A podiatrist or chiropodist | <input type="radio"/> |
| g An "alternative" health practitioner
(eg herbalist, chiropractor, naturopath, acupuncturist, etc) | <input type="radio"/> |
| h None of these people | <input type="radio"/> |

5. In the past 12 months have you consulted a specialist doctor?
(Mark one only)

- | | | |
|---|-----------------------|------------|
| No, I needed to see a specialist doctor but did not | <input type="radio"/> | → Go to Q6 |
| No, I did not need to see a specialist doctor | <input type="radio"/> | → Go to Q7 |
| Yes, I saw a specialist doctor | <input type="radio"/> | → Go to Q7 |

6. Why did you not consult a specialist doctor?
(Mark all that apply)

- | | |
|--|-----------------------|
| a The specialist doctor I needed was not available locally | <input type="radio"/> |
| b Travel difficulties – I could not get there | <input type="radio"/> |
| c Long waiting period for an appointment | <input type="radio"/> |
| d I couldn't afford to see a specialist doctor | <input type="radio"/> |

7. Have you been admitted to hospital in the LAST 12 MONTHS?

(Mark one only)

- No
- Yes, day only
- Yes, spent at least one night

8. In the last 12 months, have you been vaccinated against:

(Mark one on each line)

- | | | Yes | No |
|---|-----------|-----------------------|-----------------------|
| a | Flu | <input type="radio"/> | <input type="radio"/> |
| b | Pneumonia | <input type="radio"/> | <input type="radio"/> |

9. In the past 12 months have you consulted a dentist?

(Mark one only)

- | | | |
|---|-----------------------|-------------|
| No, I needed to see a dentist but did not | <input type="radio"/> | → Go to Q10 |
| No, I did not need to see a dentist | <input type="radio"/> | → Go to Q11 |
| Yes, I saw a dentist | <input type="radio"/> | → Go to Q11 |

10. Why did you not consult a dentist?

(Mark all that apply)

- | | | |
|---|---|-----------------------|
| a | No dentist available locally | <input type="radio"/> |
| b | Travel difficulties – I could not get there | <input type="radio"/> |
| c | Long waiting period for an appointment | <input type="radio"/> |
| d | I couldn't afford to see a dentist | <input type="radio"/> |

11. Which of the following types of cover do you have for health services (excluding your Medicare card): *(Mark all that apply)*

- | | | Yes |
|---|---|-----------------------|
| a | Private health insurance for hospital cover | <input type="radio"/> |
| b | Private health insurance for ancillary services / extras cover (eg dental, physiotherapy) | <input type="radio"/> |
| c | Department of Veterans' Affairs Gold Card | <input type="radio"/> |
| d | Department of Veterans' Affairs White Card | <input type="radio"/> |
| e | Commonwealth Seniors Health Card | <input type="radio"/> |
| f | Pensioner Concession Card | <input type="radio"/> |
| g | None of these | <input type="radio"/> |

women's health is about how you are feeling

The questions on this page ask only about NOW – how your health is NOW and about how your health limits certain activities NOW.

12. In general, would you say your health is
(Mark one only)

- Excellent
Very good
Good
Fair
Poor

13. Compared to one year ago, how would you rate your health in general now? (Mark one only)

- Much better now than one year ago
Somewhat better now than one year ago
About the same as one year ago
Somewhat worse now than one year ago
Much worse now than one year ago

14. The following questions are about activities you might do during a typical day. Does YOUR HEALTH NOW LIMIT YOU in these activities? If so, how much? (Mark one on each line)

		Yes, limited a lot	Yes, limited a little	No, not limited at all
a	VIGOROUS ACTIVITIES, such as running, lifting heavy objects, participating in strenuous sports	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b	MODERATE ACTIVITIES, such as moving a table, pushing a vacuum cleaner, bowling or playing golf	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c	Lifting or carrying groceries	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d	Climbing SEVERAL flights of stairs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e	Climbing ONE flight of stairs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f	Bending, kneeling or stooping	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g	Walking MORE THAN ONE kilometre	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
h	Walking HALF a kilometre	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
i	Walking 100 metres	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
j	Bathing or dressing yourself	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

15. During the PAST 4 WEEKS, have you had any of the following problems with your work (including your work outside the home and housework) or other regular daily activities AS A RESULT OF YOUR PHYSICAL HEALTH? (Mark one on each line)

		Yes	No
a	Cut down on the amount of time you spent on work or other activities	<input type="radio"/>	<input type="radio"/>
b	Accomplished less than you would like	<input type="radio"/>	<input type="radio"/>
c	Were limited in the kind of work or other activities	<input type="radio"/>	<input type="radio"/>
d	Had difficulty performing the work or other activities (for example it took extra effort)	<input type="radio"/>	<input type="radio"/>

16. During the PAST 4 WEEKS, have you had any of the following problems with your work or other regular daily activities AS A RESULT OF ANY EMOTIONAL PROBLEMS (such as feeling depressed or anxious)? (Mark one on each line)

		Yes	No
a	Cut down on the amount of time you spent on work or other activities	<input type="radio"/>	<input type="radio"/>
b	Accomplished less than you would like	<input type="radio"/>	<input type="radio"/>
c	Didn't do work or other activities as carefully as usual	<input type="radio"/>	<input type="radio"/>

17. During the PAST 4 WEEKS, to what extent has your physical health or emotional problems interfered with your normal social activities with family, friends, neighbours or groups? (Mark one only)

Not at all	Slightly	Moderately	Quite a bit	Extremely
<input type="radio"/>				

18. How much BODILY pain have you had during the PAST 4 WEEKS? (Mark one only)

No bodily pain	Very mild	Mild	Moderate	Severe	Very severe
<input type="radio"/>					

19. During the PAST 4 WEEKS, how much did PAIN interfere with your normal work (including both work outside the home and housework)? (Mark one only)

Not at all	A little bit	Moderately	Quite a bit	Extremely
<input type="radio"/>				

20. For each question, please give the one answer that comes closest to the way you have been feeling. How much of the time during the PAST 4 WEEKS: (Mark one on each line)

		All of the time	Most of the time	A good bit of the time	Some of the time	A little of the time	None of the time
a	Did you feel full of life?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b	Have you been a very nervous person?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c	Have you felt so down in the dumps that nothing could cheer you up?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d	Have you felt calm and peaceful?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e	Did you have a lot of energy?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f	Have you felt down?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g	Did you feel worn out?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
h	Have you been a happy person?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
i	Did you feel tired?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

21. During the PAST 4 WEEKS, how much of the time has your PHYSICAL HEALTH OR EMOTIONAL PROBLEMS interfered with your social activities (like visiting friends, relatives, etc)? (Mark one only)

All of the time	Most of the time	Some of the time	A little of the time	None of the time
<input type="radio"/>				

22. How TRUE or FALSE is EACH of the following statements for you? (Mark one on each line)

		Definitely true	Mostly true	Don't know	Mostly false	Definitely false
a	I seem to get sick a little easier than other people	<input type="radio"/>				
b	I am as healthy as anybody I know	<input type="radio"/>				
c	I expect my health to get worse	<input type="radio"/>				
d	My health is excellent	<input type="radio"/>				

women's health is about your daily life

23. How tall are you without shoes? cms **OR** ft ins

24. How much do you weigh without clothes or shoes?
 kgs **OR** stones pounds

25. Have you had any of the following problems in the **LAST 12 MONTHS?**
 (Mark one on each line)

		Never	Rarely	Some- times	Often
a	Stiff or painful joints	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b	Back pain	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c	Problems with one or both feet	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d	Allergies, hay fever, sinusitis	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e	Skin problems	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f	Breathing difficulty	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g	Indigestion / heartburn	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
h	Chest pain	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
i	Headaches / migraines	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
j	Severe tiredness	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
k	Urine that burns or stings	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
l	Passing urine more than twice during the night	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
m	Needing to rush to the toilet to pass urine	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
n	Leaking urine	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
o	Constipation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
p	Haemorrhoids (piles)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
q	Other bowel problems	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
r	Poor memory	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
s	Clumsiness	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
t	Dizziness, loss of balance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
u	Tremor / shakes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
v	Difficulty swallowing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
w	Problems with teeth or gums	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
x	Anxiety / panic attacks	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

26. Do you have any of these sleeping problems?

(Mark all that apply)

Yes

- | | | |
|----------|---|-----------------------|
| a | Waking up in the early hours of the morning | <input type="radio"/> |
| b | Lying awake for most of the night | <input type="radio"/> |
| c | Taking a long time to get to sleep | <input type="radio"/> |
| d | Worry keeping you awake at night | <input type="radio"/> |
| e | Sleeping badly at night | <input type="radio"/> |
| f | None of these problems | <input type="radio"/> |

27. Compared with when you were in your twenties, how good are you at:

(Mark one on each line)

Much better now	Somewhat better now	About the same	Somewhat worse now	Much worse now
-----------------------	---------------------------	----------------------	--------------------------	----------------------

- | | | | | | | |
|----------|---|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| a | Remembering the name of a person just introduced to you? | <input type="radio"/> |
| b | Recalling telephone numbers or other numbers that you use on a daily or weekly basis? | <input type="radio"/> |
| c | Recalling where you put objects (such as keys) in your home? | <input type="radio"/> |
| d | Remembering specific facts from a newspaper or magazine article you have just finished reading? | <input type="radio"/> |
| e | Remembering the item(s) you intend to buy when you arrive at the shops? | <input type="radio"/> |
| f | In general, how would you describe your memory compared to when you were in your twenties? | <input type="radio"/> |

28. Do you have difficulty seeing newspaper print, even with glasses?

(Mark one only)

- Yes
No

29. How would you describe the overall condition of your teeth, dentures or gums? *(Mark one only)*

- | | | | | |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| Poor | Fair | Good | Very good | Excellent |
| <input type="radio"/> |

30. Do you wear a hearing aid?

(Mark one only)

- No
- Yes, some of the time
- Yes, most of the time

31. Whether you wear a hearing aid or not, please answer the following questions about your hearing and how it affects your daily life.

If you wear a hearing aid, please answer with respect to when you are wearing your hearing aid. *(Mark one on each line)*

		No	Some- times	Often	
a	Do you have difficulty in hearing a conversation, even with a hearing aid?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	—
b	Does a hearing problem cause you to feel embarrassed when you meet new people?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	—
c	Does a hearing problem cause you to feel frustrated when talking to members of your family?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	—
d	Do you have difficulty hearing when someone speaks in a whisper?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	—
e	Do you feel handicapped by a hearing problem?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	—
f	Does a hearing problem cause you difficulty when visiting friends, relatives or neighbours?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	—
g	Does a hearing problem cause you to attend religious services less often than you would like?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	—
h	Does a hearing problem cause you to have arguments with family members?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	—
i	Does a hearing problem cause you difficulty when listening to TV or radio?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	—
j	Do you feel that any difficulty with your hearing limits or hampers your personal or social life?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	—
k	Does a hearing problem cause you difficulty when in a restaurant with relatives or friends?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	—

32. In our last survey, we asked about major events you had experienced. This question is about events you may have experienced in the LAST THREE YEARS.

(Mark all that apply)

		Yes
a	Major personal illness or injury	<input type="radio"/>
b	Major surgery (not including dental work)	<input type="radio"/>
c	Major decline in health of spouse or partner	<input type="radio"/>
d	Death of spouse or partner	<input type="radio"/>
e	Major decline in health of other close family member or friend	<input type="radio"/>
f	Death of other close family member or friend	<input type="radio"/>
g	Death of your child	<input type="radio"/>
h	Decreased income	<input type="radio"/>
i	Moving house	<input type="radio"/>
j	Being robbed	<input type="radio"/>
k	Moving into hostel / institution	<input type="radio"/>
l	Spouse / partner moving into hostel / institution	<input type="radio"/>
m	Been pushed, grabbed, shoved, kicked or hit	<input type="radio"/>
n	None of these events	<input type="radio"/>



***You are half way through.
Time for a cuppa?***

The following section asks more questions about your health and your community.

Often, there are no 'right' or 'wrong' answers – we are interested only in your opinion or feelings.

If you feel uncomfortable about answering a question, just leave it and go on to the next one, but please try to finish the survey if you can.

33. What is your date of birth? (Please write date in boxes)

Day

Month

19

Year

34. Next are some specific questions about your health and how you have been feeling in the PAST MONTH.

(Mark one on each line)

		Yes	No
a	Have you felt keyed up or on edge?	<input type="radio"/>	<input type="radio"/>
b	Have you been worrying a lot?	<input type="radio"/>	<input type="radio"/>
c	Have you been irritable?	<input type="radio"/>	<input type="radio"/>
d	Have you had difficulty relaxing?	<input type="radio"/>	<input type="radio"/>
e	Have you been sleeping poorly?	<input type="radio"/>	<input type="radio"/>
f	Have you had headaches or neckaches?	<input type="radio"/>	<input type="radio"/>
g	Have you had any of the following: trembling, tingling, dizzy spells, sweating, diarrhoea or needing to pass urine more often than usual?	<input type="radio"/>	<input type="radio"/>
h	Have you been worried about your health?	<input type="radio"/>	<input type="radio"/>
i	Have you had difficulty falling asleep?	<input type="radio"/>	<input type="radio"/>
j	Have you been lacking energy?	<input type="radio"/>	<input type="radio"/>
k	Have you lost interest in things?	<input type="radio"/>	<input type="radio"/>
l	Have you lost confidence in yourself?	<input type="radio"/>	<input type="radio"/>
m	Have you felt hopeless?	<input type="radio"/>	<input type="radio"/>
n	Have you had difficulty concentrating?	<input type="radio"/>	<input type="radio"/>
o	Have you lost weight (due to poor appetite)?	<input type="radio"/>	<input type="radio"/>
p	Have you been waking early?	<input type="radio"/>	<input type="radio"/>
q	Have you felt slowed down?	<input type="radio"/>	<input type="radio"/>
r	Have you tended to feel worse in the mornings?	<input type="radio"/>	<input type="radio"/>

women's health is about your health in the past year

35. In the LAST 12 MONTHS, have you:

(Mark all that apply)

		Yes
a	Slipped, tripped, or stumbled? (not including falls to the ground)	<input type="radio"/>
b	Had a fall to the ground? (does <i>not</i> include stumbles / trips)	<input type="radio"/>
c	Been injured as a result of a fall?	<input type="radio"/>
d	Needed to seek medical attention (eg doctor, hospital) for an injury from a fall?	<input type="radio"/>
e	Had any other injury from an accident at your home? (eg burns, cuts, bruises)	<input type="radio"/>
f	Broken or fractured any bone/s?	<input type="radio"/>
g	None of these	<input type="radio"/>

36. During the last 12 months, have you experienced any of the following:

(Mark one on each line)

	Yes	No	
a	<input type="radio"/>	<input type="radio"/>	If No to both, go to Q38
b	<input type="radio"/>	<input type="radio"/>	

37a. How long does this stiffness last?

(Mark one only)

- About 30 minutes or less
- More than 30 minutes

37b. Does this stiffness go away after exercise or movement in the joint?

(Mark one only)

- Yes
- No

women's health is about having a healthy lifestyle

These questions are about the amount of physical activity you did LAST WEEK.

38. How many *times* did you do each type of activity **LAST WEEK**?

Only count the number of times when the activity lasted for 10 minutes or more.
(If you did **not** do an activity, please write "0" in the box)

a **Walking briskly** (for recreation or exercise, or to get from place to place) times

b **Moderate leisure activity** (like social tennis, golf, bowls, recreational swimming, dancing) times

c **More vigorous leisure activity** (that makes you breathe harder or puff and pant) times

d **Vigorous household or garden chores** (that make you breathe harder or puff and pant) times

39. If you add up all the times you spent in each activity **LAST WEEK**, how much time did you spend **ALTOGETHER** doing each type of activity?

(If you did **not** do an activity, please write "0" in the box)

a **Walking briskly** (for recreation or exercise, or to get from place to place) hours minutes

b **Moderate leisure activity** (like social tennis, golf, bowls, recreational swimming, dancing) hours minutes

c **More vigorous leisure activity** (that makes you breathe harder or puff and pant) hours minutes

d **Vigorous household or garden chores** (that make you breathe harder or puff and pant) hours minutes

40. How many serves of vegetables do you usually eat each day?

(Mark one only)

A serve = half a cup of cooked vegetables or a cup of salad vegetables

None	1 serve	2-3 serves	4 serves	5 serves or more
<input type="radio"/>				

41. How many serves of fruit do you usually eat each day?

(Mark one only)

A serve = one medium piece or two small pieces of fruit or one cup of diced pieces

None	1 serve	2-3 serves	4 serves	5 serves or more
<input type="radio"/>				

42. How many glasses / cups of non-alcoholic drinks do you usually have each day? (eg juice, tea, coffee, water, milk etc)?

(Mark one only)

0-2 glasses	3-5 glasses	6-8 glasses	9 or more glasses
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

43. Which of the following groups have you sought advice or help from in the LAST 6 MONTHS? (Mark all that apply)

		Yes
a	Food services (eg Meals on Wheels)	<input type="radio"/>
b	Nursing or community health services	<input type="radio"/>
c	Respite services (in home, day centre, or inpatient)	<input type="radio"/>
d	Homemaking services (eg home care service, laundry service)	<input type="radio"/>
e	Home maintenance services (eg odd jobs, gardening)	<input type="radio"/>
f	Counselling or other mental health services	<input type="radio"/>
g	Ambulance service	<input type="radio"/>
h	Support and advisory groups (eg Arthritis Foundation, Pensioner Advisory Service, Older Women's Network)	<input type="radio"/>
i	None of these groups	<input type="radio"/>

44. What is your main (or most common) means of transport?

(Mark one only)

- Car (you drive)
- Car (someone else drives)
- Taxi
- Bus
- Train or tram
- Other

45. Is public transport available when you need it?

(Mark one only)

- Yes, all of the time
- Yes, most of the time
- Yes, some of the time
- Yes, a little of the time
- No, none of the time
- Not applicable

46. Do you have a problem with transport?

(Mark one on each line)

		Yes	No
a	Getting to places at night	<input type="radio"/>	<input type="radio"/>
b	Getting to local shops and services	<input type="radio"/>	<input type="radio"/>
c	Getting beyond your local neighbourhood	<input type="radio"/>	<input type="radio"/>

47. During the past month, have you been to:

(Mark one on each line)

		Yes	No
a	Places in your immediate neighbourhood but beyond your property or apartment building (eg to shops, services, neighbours)	<input type="radio"/>	<input type="radio"/>
b	Places outside your immediate neighbourhood	<input type="radio"/>	<input type="radio"/>

48. Do you regularly **NEED** help with daily tasks because of long-term illness, disability or frailty (eg personal care, getting around, preparing meals etc)?
(Mark one only)

Yes
No

49. In the last month **HAVE YOU HAD ANY DIFFICULTY** (for example, needing to take extra time, changing the activity or using a device to help you) in completing any of these activities?

(Mark one on each line)

		No Difficulty	Some Difficulty	Unable to do
a	Grooming (eg brushing hair, applying make-up)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b	Eating (eg cutting meat, lifting glass or cup, opening milk carton)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c	Bathing or taking a shower	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d	Dressing your upper body	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e	Dressing your lower body	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f	Getting up from a chair	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g	Walking inside the house	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
h	Using the toilet	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
i	Shopping for personal items or groceries	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
j	Doing light housework (eg cleaning, washing-up)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
k	Doing heavy housework (eg vacuuming, yard work)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
l	Managing money (eg writing cheques or keeping accounts)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
m	Preparing meals	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
n	Taking medications	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
o	Using the telephone	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
p	Doing leisure activities or hobbies	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

50. In the last month have you needed HELP FROM ANOTHER PERSON to carry out any of these activities?

(Mark one on each line)

		Yes	No
a	Grooming (eg brushing hair, applying make-up)	<input type="radio"/>	<input type="radio"/>
b	Eating (eg cutting meat, lifting glass or cup, opening milk carton)	<input type="radio"/>	<input type="radio"/>
c	Bathing or taking a shower	<input type="radio"/>	<input type="radio"/>
d	Dressing your upper body	<input type="radio"/>	<input type="radio"/>
e	Dressing your lower body	<input type="radio"/>	<input type="radio"/>
f	Getting up from a chair	<input type="radio"/>	<input type="radio"/>
g	Walking inside the house	<input type="radio"/>	<input type="radio"/>
h	Using the toilet	<input type="radio"/>	<input type="radio"/>
i	Shopping for personal items or groceries	<input type="radio"/>	<input type="radio"/>
j	Doing light housework (eg cleaning, washing-up)	<input type="radio"/>	<input type="radio"/>
k	Doing heavy housework (eg vacuuming, yard work)	<input type="radio"/>	<input type="radio"/>
l	Managing money (eg writing cheques or keeping accounts)	<input type="radio"/>	<input type="radio"/>
m	Preparing meals	<input type="radio"/>	<input type="radio"/>
n	Taking medications	<input type="radio"/>	<input type="radio"/>
o	Using the telephone	<input type="radio"/>	<input type="radio"/>
p	Doing leisure activities or hobbies	<input type="radio"/>	<input type="radio"/>

women's health is about your home and neighbourhood

51. a What is your **RESIDENTIAL** postcode?
(where you live)

b What is the postcode of your **POSTAL ADDRESS?** (if different to residential)

52. Which of the following best describes your housing situation?
Do you live in: *(Mark one only)*

A house

A flat / unit / apartment / villa / townhouse

Mobile home / caravan / cabin / houseboat

Retirement village / self care unit

Nursing home

Hostel

Other

53. Who lives with you?
(Mark all that apply)

a No one, I live alone

b Spouse or partner

c Own children

d Other family members

e Non-family members

54. Do you do any volunteer work for any community or social organisations? (eg fundraising, community welfare, church activities, organising groups or classes) *(Mark one only)*

Every day

Every week

Every month

Less than once a month

Not at all

55. Which of the following are sources of income for you and your spouse or partner (if you have one)?

(Mark all that apply)

		Yes
a	Age Pension	<input type="radio"/>
b	Superannuation	<input type="radio"/>
c	Partner Allowance and Wife Pension	<input type="radio"/>
d	Carer Payment or Carer Allowance	<input type="radio"/>
e	Disability Support Pension	<input type="radio"/>
f	Widow Allowance (including Widow B Pension)	<input type="radio"/>
g	War Widow's Pension	<input type="radio"/>
h	Overseas Pension	<input type="radio"/>
i	Veteran's Service Pension	<input type="radio"/>
j	Veteran's Disability Pension	<input type="radio"/>
k	Veteran's TPI	<input type="radio"/>
l	Income from interest, dividends or rent	<input type="radio"/>
m	Income from own business or partnership	<input type="radio"/>
n	Other Government Pension or Allowance	<input type="radio"/>
o	Other income	<input type="radio"/>

56. How do you manage on the income you have available?

(Mark one only)

- It is impossible
- It is difficult all the time
- It is difficult some of the time
- It is not too bad
- It is easy

women's health is about family and friends

57. What is your PRESENT marital status?

(Mark one only)

- Married
- De facto (in a relationship)
- Widowed
- Separated
- Divorced
- Never married

58. If you have been widowed in the last three years, please write date of bereavement on the line.

59. If you are married, does your husband have a Veterans' Affairs Gold Card for health services?

(Mark one only)

- Yes
- No
- Not applicable

60. How many people in your local area do you feel you can depend on or feel very close to (other than members of your family)?

(Mark one only)

- | None | 1-2 people | More than 2 people |
|-----------------------|-----------------------|-----------------------|
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

61. How many times during the past week did you spend time with someone who does not live with you, that is, you went to see them or they came to visit you or you went out together?

(Mark one only)

- None
- One
- Two
- Three
- Four
- Five
- Six
- Seven or more

62. How many times did you talk to someone, (friends, relatives or others) on the telephone in the past week (either they called you, or you called them)?
(Mark one only)

None

One

Two

Three

Four

Five

Six

Seven or more

63. About how often did you go to meetings of clubs, religious meetings, or other groups that you belong to in the past week?
(Mark one only)

None

One

Two

Three

Four

Five

Six

Seven or more

64. The following questions are about the support you receive from other people. (Mark one on each line)

		Often	Sometimes	Never	
a	How often do your children, spouse or relatives make you feel loved and cared for?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
b	How often do your friends make you feel loved and cared for?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
c	How often do you feel that your children, spouse or relatives listen to your worries?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
d	How often do you feel that your friends listen to your worries?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
e	How often can you count on your children, spouse or relatives to help with daily tasks like giving you a lift, shopping or helping with household chores?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
f	How often can you count on your friends to help with daily tasks like giving you a lift, shopping or helping with household chores?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
g	How often do your children, spouse or relatives give you advice or information about medical, financial or family problems?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
h	How often do your friends give you advice or information about medical, financial or family problems?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>

65. Do you regularly **PROVIDE** care or assistance (eg personal care, transport) to any other person because of their long-term illness, disability or frailty? (Mark all that apply)

- | | | |
|---|--------------------------------------|-----------------------|
| a | Yes, for someone who lives with me | <input type="radio"/> |
| b | Yes, for someone who lives elsewhere | <input type="radio"/> |
| c | No, I do not provide care | <input type="radio"/> |

66. Do you regularly provide (unpaid) care for grandchildren or other people's children? (Mark one only)

- | | |
|-------------------|-----------------------|
| Yes, daily | <input type="radio"/> |
| Yes, weekly | <input type="radio"/> |
| Yes, occasionally | <input type="radio"/> |
| No, never | <input type="radio"/> |

67. In the past month, have you: (Mark one on each line)

- | | | Yes | No |
|---|--|-----------------------|-----------------------|
| a | Gone to the movies, theatre, concerts, lectures? | <input type="radio"/> | <input type="radio"/> |
| b | Gone to a sporting event? | <input type="radio"/> | <input type="radio"/> |
| c | Played cards, bingo, pool, or some other game? | <input type="radio"/> | <input type="radio"/> |
| d | Eaten out at a restaurant? | <input type="radio"/> | <input type="radio"/> |
| e | Attended a religious service? | <input type="radio"/> | <input type="radio"/> |
| f | Attended a class or course? | <input type="radio"/> | <input type="radio"/> |

68. In the past month, what activities have you done? Have you: (Mark one on each line)

- | | | Yes | No |
|---|---|-----------------------|-----------------------|
| a | Taken care of houseplants or done any outdoor gardening? | <input type="radio"/> | <input type="radio"/> |
| b | Worked on a hobby or handiwork, like sewing, knitting or woodworking? | <input type="radio"/> | <input type="radio"/> |
| c | Painted pictures or played a musical instrument? | <input type="radio"/> | <input type="radio"/> |
| d | Exercised with a group (eg yoga, walking, aqua-aerobics)? | <input type="radio"/> | <input type="radio"/> |
| e | Written letters, poetry etc, read, did crosswords etc? | <input type="radio"/> | <input type="radio"/> |
| f | Done any paid work? | <input type="radio"/> | <input type="radio"/> |
| g | Other (please write on the line below): | | |
- _____

69. Please write down the names of all your medications prescribed by a doctor. Where possible, copy names from the packets, or obtain a list from your regular pharmacist and return it with your survey.

If you filled in this survey for the participant, please answer the next three questions.

70. Your relationship to participant:

- Family member
- Professional health worker (eg nurse)
- Other (eg friend)

71. When you filled in this survey for the participant, which of the following applied? (Mark one only)

- The participant told me what answers she wanted
- The participant was unable to tell me what answers she wanted and I used my own judgement

72. What was the MAIN reason the participant did not fill in the survey herself? (Please describe)

Consent

Older 4 survey – 2005

I consent to the researchers 'matching' the information provided in this survey with that given in the previous surveys so that any changes in my health can be noted.

Signature:

Date:

 / /

Please sign above and send the completed survey back to us in the envelope supplied as soon as possible. We will detach the consent form and store it in a separate locked room.

Help us keep in touch!

We plan to survey women in your age group again in three years' time. Sometimes we lose touch with participants. It would be helpful if you could give us details of a relative or friend who will be able to help us find you.

Name:

Address:

Postcode:

Phone:
(home)

Relationship
to you:

Name:

Address:

Postcode:

Phone:
(home)

Relationship
to you:

You may like to take a moment to check you have not missed any questions or pages.

**Thank you for taking the time to
complete this survey**

**You are a valuable contributor to
women's health research**

If you have any questions you can contact us by telephoning

1800 068 081

(FREECALL)

or writing to us at the address below.

**women's
health
*australia***



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