Utilization of Home- and Community-Based Services, and Life Space

Preload needed:
THIS IS A REINTerview R (Z076=1);
THIS IS A NEW SPOUSE/PARTNER OF A REINTerview R (Z076=0);
THIS IS A NEVER INTERVIEWED R or A NEW INTERVIEW R (Z076=5)

R’s LAST IW MONTH (Z092), YEAR (Z093)

Other section variables needed: None

New Constructed variables needed:
Create new variable: V050_FlagSecGAidsHelp {VALUES 1, 0}
V050_FlagSecGAidsHelp Descriptor: MOD 2 FLAG SEC G REPORTED USE OF AIDS OR HELP
V050 = 1 IF G015=1 OR G017=1 OR G020=1 OR G022=1 OR G024=1 OR G026=1 OR G029=1 OR G031=1 OR G035=1 OR G043=1 OR G046=1 OR G049=1 OR G053=1.
V050 = 0 IF G015<>1 AND G017<>1 AND G020<>1 AND G022 <>1 AND G024 <>1 AND G026 <>1 AND G029 <>1 AND G031<>1 AND G035 <>1 AND G043 <>1 AND G046 <>1 AND G049<>1 AND G053<>1.

Fills: Last IW MO/YR (Z092, Z093)

Variables in this module: V050-V103

IF THIS IS A PROXY INTERVIEW (A009={2 or 3}), GO TO END OF MODULE 2

<V051>
V051_AttendCongMeal
ATTEND CONGREGATE MEAL PROGRAM
If ReIW R (Z076=1)
Since R’s LAST IW MONTH, YEAR, have you attended a congregate or group meal program, such as a senior lunch program, at a senior center or other community organization?

If Not ReIW R (Z076 <> 1)
In the last two years, have you attended a congregate or group meal program, such as a senior lunch program, at a senior center or other community organization?

1. Yes → GO TO V052
5. No → GO TO V054
8. DK → GO TO V054
9. RF → GO TO V054
<V052>
V052_FreqCongMeal
FREQUENCY OF ATTENDING CONGREGATE MEAL
How many days each week do you attend a congregate or group meal program?

[IWER: Enter exact number if answer is 1-7 days per week.]

_________ days (range 1 – 7)
96. Less than once per week
97. Not currently attending
98. DK
99. RF

<V053>
V053_PublicFundCongMeal
CONGREGATE MEAL PROGRAM PUBLICLY FUNDED
Is the congregate or group meal program publicly funded (that is, free or subsidized)?

1. Yes
5. No
8. DK
9. RF

<V054>
V054_HomeDelMeals
RECEIVED HOME DELIVERED MEALS
If R is equal to 1 (Z076=1)
Since R’s LAST IW MONTH, YEAR, has a senior center or other community organization arranged to have meals delivered to your home, such as Meals on Wheels?

If Not R is equal to 1 (Z076 <> 1)
In the last two years, has a senior center or other community organization arranged to have meals delivered to your home, such as Meals on Wheels?

1. Yes → GO TO V055
5. No → GO TO V057
8. DK → GO TO V057
9. RF → GO TO V057
V055_FreqHomeDelMeals
FREQUENCY OF RECEIVING HOME DELIVERED MEALS
How many meals do you receive each week from a home-delivered meal service?

[IWER: Enter exact number if answer is 1-7 meals per week.]

________ meals per week {range 1-7}
95. More than 7 per week
96. Less than one per week
97. Not currently receiving any
98. DK
99. RF

V056_PublicFundHomeMeals
HOME DELIVERED MEAL PROGRAM PUBLICLY FUNDED
Is the home-delivered meal service publicly funded (that is, free or subsidized)?

1. Yes
5. No
8. DK
9. RF
If ReIW R (Z076=1)
Since R’s LAST IW MONTH, YEAR, have you used transportation services provided by a senior center or other community organization (such as a bus or other vehicle that picks seniors up and takes them places such as to the doctor, the senior center, or shopping)?

If Not ReIW R (Z076 <> 1)
In the last two years, have you used transportation services provided by a senior center or other community organization (such as a bus or other vehicle that picks seniors up and takes them places such as to the doctor, the senior center, or shopping)?

1. Yes → GO TO V058
2. No → GO TO V060
3. DK → GO TO V060
4. RF → GO TO V060

If ReIW R (Z076=1)
Since R’s LAST IW MONTH, YEAR, have you used transportation services provided by a senior center or other community organization (such as a bus or other vehicle that picks seniors up and takes them places such as to the doctor, the senior center, or shopping)?

If Not ReIW R (Z076 <> 1)
In the last two years, have you used transportation services provided by a senior center or other community organization (such as a bus or other vehicle that picks seniors up and takes them places such as to the doctor, the senior center, or shopping)?

1. Yes → GO TO V058
2. No → GO TO V060
3. DK → GO TO V060
4. RF → GO TO V060

How often do you use transportation services?

[If R says it varies from week to week, ask for an average frequency]
<V059>
V059_PublicFundTrans
TRANSPORTATION PUBLICLY FUNDED
Are the transportation services publicly funded (that is, free or subsidized)?

1. Yes
5. No
8. DK
9. RF

<V060>
V060_CaseMgmt
RECEIVED CASE MANAGEMENT SERVICES
If ReIW R (Z076=1)
Since R's LAST IW MONTH, YEAR, have you received case management services from a senior center or other community organization? (A case manager is someone who sets up in-home services, such as homemaker or personal care services for you, or calls to check on how you are doing, or how you like your services.)

If Not ReIW R (Z076 <> 1)
In the last two years, have you received case management services from a senior center or other community organization? (A case manager is someone who sets up in-home services, such as homemaker or personal care services for you, or calls to check on how you are doing, or how you like your services.)

1. Yes ➔ GO TO V061
5. No ➔ GO TO V063
8. DK ➔ GO TO V063
9. RF ➔ GO TO V063
<V061>
V061_FreqCaseMgmt
FREQUENCY OF CASE MANAGEMENT SERVICES
How long have you been receiving case management services?

1. 6 months or less
2. More than 6 months but less than 1 year
3. At least 1 year but less than 2 years
4. 2 to 5 years
5. More than 5 years
6. Not currently receiving services
8. DK
9. RF

<V062>
V062_PublicFundCase
CASE MANAGEMENT SERVICE PUBLICLY FUNDED
Are the case management services publicly funded (that is, free or subsidized)?

1. Yes
5. No
8. DK
9. RF
HOME SERVICES ARRANGED
If ReIW R (Z076=1)
Since R’s LAST IW MONTH, YEAR, has a senior center or other community organization arranged for someone to come to your home to provide homemaker or housekeeping services, such as helping seniors with doing light housework, laundry, chores, preparing meals, shopping, etc.?

If Not ReIW R (Z076 <> 1)
In the last two years, has a senior center or other community organization arranged for someone to come to your home to provide homemaker or housekeeping services, such as helping seniors with doing light housework, laundry, chores, preparing meals, shopping, etc.?

1. Yes → GO TO V064
5. No → GO TO V067
8. DK → GO TO V067
9. RF → GO TO V067

FREQUENCY OF RECEIVING HOMEMAKER SERVICES
How often does the homemaker help with housework?

_____ days per week {range 1 – 7}
V064

OR

_____ days per month {range 1-31}
V065

97. Not currently receiving homemaker services
98. DK
99. RF
<V066>
V066_PublicFundHome
HOMEMAKER SERVICE PUBLICLY FUNDED
Is the homemaker service publicly funded (that is, free or subsidized)?

1. Yes
5. No
8. DK
9. RF

<V067>
V067_ProvCare
PROVIDED UNPAID CARE TO RELATIVE OR FRIEND
If ReIW R (Z076=1)
Since R’s LAST IW MONTH, YEAR, have you provided unpaid care to a relative or a friend 18 years or older to help them take care of themselves? Unpaid care may include help with personal needs or household chores. It might be managing a person’s finances, arranging for outside services, or visiting regularly to see how they are doing.

If Not ReIW R (Z076 <> 1)
In the last two years, have you provided unpaid care to a relative or a friend 18 years or older to help them take care of themselves? Unpaid care may include help with personal needs or household chores. It might be managing a person’s finances, arranging for outside services, or visiting regularly to see how they are doing.

1. Yes → GO TO V068
5. No → GO TO V070
8. DK → GO TO V070
9. RF → GO TO V070
RECEIVED CAREGIVER SUPPORT SERVICES

Have you received caregiver support services, from a senior center or other community organization, to help you take care of this person? Caregiver support services include support groups for caregivers, caregiver education or training, family or individual counseling services to help with the stress of caregiving, and respite services which offer temporary, substitute caregiving for the care recipient.

1. Yes → GO TO V069
5. No → GO TO V070
8. DK → GO TO V070
9. RF → GO TO V070

CAREGIVER SUPPORT PUBLICLY FUNDED

Are the caregiver support services publicly funded (that is, free or subsidized)?

1. Yes
5. No
8. DK
9. RF

BEEN OUTSIDE NEIGHBORHOOD BUT IN TOWN

For these next questions, please think about the places you have been during the past four weeks.

During the past four weeks, have you been to places outside of your immediate neighborhood, but within your town or community?

1. Yes
5. No → GO TO V090
8. DK → GO TO V090
9. RF → GO TO V090
V071_FreqInTown
OUTSIDE IMMEDIATE NEIGHBORHOOD BUT IN TOWN
During the past four weeks, how often did you go to places outside of your immediate neighborhood, but within your town or community? Would you say less than once per week, 1-3 times per week, 4-6 times per week, or daily?

1. Less than once per week
2. 1-3 times per week
3. 4-6 times per week
4. Daily
8. DK
9. RF

{IF V050 = 0, GO TO V074}
{Ask IF V050 =1}

V072_AidsInTown
AIDS TO TRAVEL IN TOWN
Did you use physical aids or equipment, such as a wheelchair, cane, or crutch, in order to get to these places?

1. Yes
5. No
8. DK
9. RF

{Ask IF V050 =1}

V073_HelpInTown
HELP TO TRAVEL IN TOWN
Did you need help from another person in order to get to these places?

1. Yes
5. No
8. DK
9. RF
<V074>
V074_OutsideTown
BEEN OUTSIDE TOWN OR COMMUNITY
During the past four weeks, have you been to places outside of your town or community?

1. Yes  
5. No → GO TO V102  
8. DK → GO TO V102  
9. RF → GO TO V102

<V075>
V075_FreqOutsideTown
FREQUENCY OF TRAVEL OUTSIDE TOWN
(During the past four weeks,) how often did you go to places outside of your town or community? (Would you say less than once per week, 1-3 times per week, 4-6 times per week, or daily?)

1. Less than once per week  
2. 1-3 times per week  
3. 4-6 times per week  
4. Daily  
5. No  
8. DK  
9. RF

{IF V050=0, GO TO V078}
{Ask IF V050 = 1}

<V076>
V076_AidsOutsideTown
AIDS TO TRAVEL OUTSIDE TOWN
Did you use physical aids or equipment, such as a wheelchair, cane, or crutch, in order to get to these places?

1. Yes  
5. No  
8. DK  
9. RF

{Ask IF V050 = 1}

<V077>
V077_HelpOutsideTown
HELP TO TRAVEL OUTSIDE TOWN
Did you need help from another person in order to get to these places?

1. Yes  
5. No  
8. DK  
9. RF
V078_BeenOutsideCounty
BEEN OUTSIDE COUNTY
During the past four weeks, have you been to places outside of your county?

1. Yes
5. No → GO TO V102
8. DK → GO TO V082
9. RF → GO TO V102

V079_FreqOutsideCounty
FREQUENCY OF TRAVEL OUTSIDE COUNTY
(During the past four weeks,) how often did you go to places outside of your county? (Would you say less than once per week, 1-3 times per week, 4-6 times per week, or daily?)

1. Less than once per week
2. 1-3 times per week
3. 4-6 times per week
4. Daily
8. DK
9. RF

{IF V050 = 0, GO TO V082}
{Ask IF V050 = 1}
V080_AidsOutsideCounty
AIDS TO TRAVEL OUTSIDE COUNTY
Did you use physical aids or equipment, such as a wheelchair, cane, or crutch, in order to get to these places?

1. Yes
5. No
8. DK
9. RF

{Ask IF V050 = 1}
V081_HelpOutsideCounty
HELP TO TRAVEL OUTSIDE COUNTY
Did you need help from another person in order to get to these places?

1. Yes
5. No
8. DK
9. RF
<V082>
V082_BeenOutsideState
BEEN OUTSIDE STATE
During the past four weeks, have you been to places outside the state?

1. Yes
5. No → GO TO V102
8. DK → GO TO V102
9. RF → GO TO V102

<V083>
V083_FreqOutsideState
FREQUENCY OUTSIDE STATE
During the past four weeks, how many times did you travel outside of the state?

_____ times {range 1 – 35}
98. DK
99. RF

{IF V050 = 0, GO TO V086}
{Ask IF V050 = 1}
<V084>
V084_AidsOutsideState
AIDS TO TRAVEL OUTSIDE STATE
Did you use physical aids or equipment, such as a wheelchair, cane, or crutch, in order to get to these places?

1. Yes
5. No
8. DK
9. RF

{Ask IF V050 = 1}
<V085>
V085_HelpOutsideState
HELP TO TRAVEL OUTSIDE STATE
Did you need help from another person in order to get to these places?

1. Yes
5. No
8. DK
9. RF
During the past four weeks, have you been to places outside this region of the United States?

1. Yes  
5. No → GO TO V102  
8. DK → GO TO V102  
9. RF → GO TO V102

During the past four weeks, how many times did you travel outside of this region?

____ times {range 1 – 35}  
98. DK  
99. RF

Did you use physical aids or equipment, such as a wheelchair, cane, or crutch, in order to get to these places?

1. Yes  
5. No  
8. DK  
9. RF

Did you need help from another person in order to get to these places?

1. Yes  
5. No  
8. DK  
9. RF
V090 BRANCHPOINT: IF V070 = NO, DK, or RF, ASK V090. IF V070 = YES, GO TO V102.

<V090>
V090_ImmNeighborhood
BEEN TO PLACES IN TRAVEL IMMEDIATE NEIGHBORHOOD
During the past four weeks, have you been to places in your immediate neighborhood, but beyond your own property or apartment building?

1. Yes
5. No \(\rightarrow\) GO TO V094
8. DK \(\rightarrow\) GO TO V094
9. RF \(\rightarrow\) GO TO V094

<V091>
V091_FreqImmNeighborhood
FREQUENCY OF TRAVEL TO PLACES IN IMMEDIATE NEIGHBORHOOD
(During the past four weeks,) how often did you go to places in your immediate neighborhood, but beyond your own property or apartment building? (Would you say less than once per week, 1-3 times per week, 4-6 times per week, or daily?)

1. Less than once per week
2. 1-3 times per week
3. 4-6 times per week
4. Daily
8. DK
9. RF

{IF V050 = 0, GO TO V094 BRANCHPOINT}
{Ask IF V050 = 1}
<V092>
V092_AidsImmNeighborhood
AIDS FOR TRAVEL TO IMMEDIATE NEIGHBORHOOD
Did you use physical aids or equipment, such as a wheelchair, cane, or crutch, in order to get to these places?

1. Yes
5. No
8. DK
9. RF
{Ask IF V050 = 1}

<V093>
V093_HelpImmNeighborhood
HELP WITH TRAVEL TO IMMEDIATE NEIGHBORHOOD
Did you need help from another person in order to get to these places?

1. Yes → GO TO V102
5. No → GO TO V102
8. DK → GO TO V102
9. RF → GO TO V102

V094 BRANCHPOINT: IF V090 = NO, DK, or RF, ASK V094. IF V090 = YES, GO TO V102.

<V094>
V094_OutsideHome
BEEN OUTSIDE HOME
During the past four weeks, have you been to an area outside your home such as your porch, deck or patio, hallway of an apartment building, or your garage, own yard, or driveway?

1. Yes
5. No → GO TO V098
8. DK → GO TO V098
9. RF → GO TO V098

<V095>
V095_FreqOutsideHome
FREQUENCY OF GOING TO AREA OUTSIDE HOME
(During the past four weeks,) how often did you go to an area outside your home such as your porch, deck or patio, hallway, garage, yard, or driveway? (Would you say less than once per week, 1-3 times per week, 4-6 times per week, or daily?)

1. Less than once per week
2. 1-3 times per week
3. 4-6 times per week
4. Daily
8. DK
9. RF
{IF V050 = 0, GO TO V098 BRANCHPOINT}
{Ask IF V050 = 1}
<V096>
V096_AidsOutsideHome
AIDS TO GET OUTSIDE HOME
Did you use physical aids or equipment, such as a wheelchair, cane, or crutch, in order to get to these places?

1. Yes
5. No
8. DK
9. RF

{Ask IF V050 = 1}
<V097>
V097_HelpOutsideHome
HELP TO GET OUTSIDE HOME
Did you need help from another person in order to get to these places?

1. Yes  → GO TO V102
5. No → GO TO V102
8. DK → GO TO V102
9. RF → GO TO V102

V098 BRANCHPOINT: IF V094 = NO, DK, or RF, ASK V098. IF V094 = YES, GO TO V102.

<V098>
V098_OtherRooms
BEEN TO OTHER ROOMS IN HOME
During the past four weeks, have you been to other rooms of your home besides the room where you sleep?

1. Yes
5. No → GO TO V102
8. DK → GO TO V102
9. RF → GO TO V102
FREQUENCY OF GOING TO OTHER ROOMS IN HOME
(During the past four weeks,) how often did you go to other rooms of your home besides the room where you sleep?  (Would you say less than once per week, 1-3 times per week, 4-6 times per week, or daily?)

1. Less than once per week
2. 1-3 times per week
3. 4-6 times per week
4. Daily
8. DK
9. RF

{IF V050 = 0, GO TO V102}
{Ask IF V050 = 1}

AIDS TO GET TO OTHER ROOMS IN HOME
Did you use physical aids or equipment, such as a wheelchair, cane, or crutch, in order to get to these places?

1. Yes
5. No
8. DK
9. RF

{Ask IF V050 = 1}

HELP TO GET TO OTHER ROOMS IN HOME
Did you need help from another person in order to get to these places?

1. Yes
5. No
8. DK
9. RF
During the past year, have you been to places outside of the United States?

1. Yes
5. No → GO TO END OF MODULE 2
8. DK → GO TO END OF MODULE 2
9. RF → GO TO END OF MODULE 2

How many times have you travelled outside of the United States in the past year?

_____ times {range: 1-95}
98. DK
99. RF

END OF MODULE 2