sharew8_corona_live

Questions

Page 1

CAA001_

Some time ago, we sent you an invitation letter, which also included a data protection statement. Have you received the statement?

Answer type: Radiobuttons
Categories:
1. Yes
5. No

Page 2

CAA002_

In this case, I will then summarise the most important points of the statement for you. Furthermore, I will be pleased to answer any question regarding the protection of your data that you may have now.

Prof. Marvin Formosa from the University of Malta in cooperation with SHARE-ERIC are responsible for the implementation of the survey. We, EMCS, are commissioned to carry out the interviews.

The purpose of the study is to provide scientists with data on health, socio-economic status and social and family networks to address their research questions in relation to the process of population ageing.

Participating in this interview is voluntary and the information is kept confidential. We will not record the conversation. During the interview, I will enter your answers in a computer. They will be stored together with a code number only. I.e., your contact details and names are strictly stored separately from the information provided by you during the interview. Your contact details and names will be stored until the end of the SHARE study's last wave of data collection only. After the collection of the individual interviews, they will be compiled and later on be used only for research purposes in different analyses, without the individual researcher knowing your identity. The results of the analyses will be presented in an anonymised form only.

If we should come to any question you don't want to answer, just let me know and I will go on to
the next question. Non-participation will not lead to any disadvantages for you. You can also withdraw consent at any time with effect for the future. Furthermore, you have several other data protection rights. In the next step, I will tell you how you can receive more information about your rights.

Do you agree to participate in this study?

*IWER: Answer all questions of R.*

*Answer type: Radiobuttons*

*Categories:*
1. Yes, R consented to participate.
2. No, R refused to participate. No interview possible.

---

**CAA003**

Thank you. For further information, you can contact us by calling 27772777. Furthermore, we can send the data protection statement to you again. Do you want us to send you the statement once more?

*IWER: Provide R sufficient time to note the telephone number.*

*Answer type: Radiobuttons*

*Categories:*
1. Yes, R wants the data protection statement to be sent again
2. No, R has received information to R's satisfaction

---

**CAA004**

If you have questions regarding the data protection statement, I will be pleased to answer them. Let me stress that participating in this interview is voluntary and that the information is kept confidential. We will not record the conversation. Instead, during the interview, I will enter your answers in a computer. Your answers will be used only for research purposes in different analyses, without the individual researcher knowing your identity. If we should come to any question you don't want to answer, just let me know and I will go on to the next question.

Do you agree to participate in this study?

*IWER: Answer all questions of R.*
Answer type: Radiobuttons
Categories:
1. Data protection statement has been provided; R consented to participate.
2. Data protection statement has been provided; R refused to participate. No interview possible.

---

**CAA005_**

*IWER: Are you sure that Respondent has refused to participate?*

Answer type: Radiobuttons
Categories:
1. Yes, R refused. Terminate interview.
2. No, R consented. Continue interview.

---

**CADN042_**

*IWER: Note sex of respondent (ask if unsure).*

Answer type: Radiobuttons
Categories:
1. Male
2. Female

---

**CADN002_**

In which month were you born?

Answer type: Integer

---

**CADN003_**

In which year were you born?

Answer type: Integer
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**CAA006_**

Are you in your usual home now or have you temporarily moved elsewhere due to Corona?

*Answer type: Radiobuttons*

*Categories:*
1. Usual home
2. Lives now temporarily elsewhere

Page 10

**CAA010_**

Now I have a set of questions about how you were affected by Corona.

*Answer type: None*

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**CAPH003_**

Before the outbreak of Corona, would you say your health was excellent, very good, good, fair, or poor?

*Answer type: Radiobuttons*

*Categories:*
1. Excellent
2. Very good
3. Good
4. Fair
5. Poor

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**CAH002_**

If you compare your health with that before the outbreak of Corona, would you say your health has improved, worsened, or stayed about the same?

*Answer type: Radiobuttons*

*Categories:*

1. Improved
2. Worsened
3. About the same

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CAH003_

Since we last interviewed you, were you diagnosed with a major illness or health condition?

*Answer type: Radiobuttons*

*Categories:*

1. Yes
5. No

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CAH004_

Do you have any of the following illnesses or health conditions? Please answer yes or no:

*IWER: With this we mean that a doctor has told you that you have this condition, and that you are either currently being treated for or bothered by this condition.*

*IWER: READ OUT.*

*Question type: Table*

*Answer type: Radiobuttons*

*Subquestions:*

CAH004_1 Hip fracture?
CAH004_2 Diabetes or high blood sugar?
CAH004_3 High blood pressure or hypertension?
CAH004_4 A heart attack including myocardial infarction or coronary thrombosis or any other heart problem including congestive heart failure?
CAH004_5 Chronic lung disease such as chronic bronchitis or emphysema?
CAH004_6 Cancer or malignant tumor, including leukemia or lymphoma, but excluding minor skin cancers?
CAH004_7 An other illness or health condition

*Categories:*

1. Yes
5. No

-1. Don't know
-2. Refusal
CAPH089_

For the past six months at least, have you been bothered by any of the following health conditions? Please answer yes or no:

IWER: READ OUT.

Question type: Table
Answer type: Radiobuttons
Subquestions:
CAPH089_1 Falling down
CAPH089_2 Fear of falling down
CAPH089_3 Dizziness, faints or blackouts
CAPH089_4 Fatigue
Categories:
1. Yes
5. No
-1. Don't know
-2. Refusal

CAH006_

Do you regularly take prescription drugs?

Answer type: Radiobuttons
Categories:
1. Yes
5. No

CAH007_

Do you take any of the following medicine? Please answer yes or no: Medicine for...

IWER: READ OUT.

Question type: Table
CAH007_

Answer type: Radiobuttons
Subquestions:
CAH007_1 High blood cholesterol?
CAH007_2 High blood pressure?
CAH007_3 Coronary or cerebrovascular diseases?
CAH007_4 Other heart diseases?
CAH007_5 Diabetes?
CAH007_6 Chronic bronchitis?
Categories:
1. Yes
5. No
-1. Don't know
-2. Refusal

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CAH010_

Since the outbreak of Corona, have you ever left your home?

Answer type: Radiobuttons
Categories:
1. Yes
5. No

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CAH011_

Since the outbreak of Corona, how often have you done the following activities, as compared to before the outbreak? Not any more, less often, about the same, or more often?

IWER: Read out each activity and check the appropriate answer.

Question type: Table
Answer type: Radiobuttons
Subquestions:
CAH011_1 Going shopping?
CAH011_2 Going out for a walk?
CAH011_3 Meeting with more than 5 people from outside your household?
CAH011_4 Visiting other family members?
Categories:
1. Not any more
CAH012_

How often did you wear a face mask when you went outside your home to a public space? Was it always, often, sometimes, or never?

*Answer type:* Radiobuttons  
*Categories:*  
1. Always  
2. Often  
3. Sometimes  
4. Never

CAH013_

How often did you keep distance to others when you went outside your home? Was it always, often, sometimes, or never?

*Answer type:* Radiobuttons  
*Categories:*  
1. Always  
2. Often  
3. Sometimes  
4. Never

CAH014_

Did you wash your hands more frequently than usual?

*Answer type:* Radiobuttons
Did you use special hand sanitizer or disinfection fluids more frequently than usual?

*Answer type: Radiobuttons*

Categories:

1. Yes
5. No

Did you pay special attention to covering cough and sneeze?

*Answer type: Radiobuttons*

Categories:

1. Yes
5. No

Did you take any drugs or medicine as a prevention against Corona?

*Answer type: Radiobuttons*

Categories:

1. Yes
5. No

In the last month, have you felt nervous, anxious, or on edge?
CAH021_

Has that been more so, less so, or about the same as before the outbreak of Corona?

Answer type: Radiobuttons
Categories:
1. More so
2. Less so
3. About the same

CAMH002_

In the last month, have you been sad or depressed?

IWER: If participant asks for clarification, say 'by sad or depressed, we mean miserable, in low spirits, or blue'.

Answer type: Radiobuttons
Categories:
1. Yes
5. No

CAMH802_

Has that been more so, less so, or about the same as before the outbreak of Corona?

Answer type: Radiobuttons
Categories:
1. More so
2. Less so
3. About the same

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**CAMH007_**

Have you had trouble sleeping recently?

*IWER: DO NOT READ OUT.*

*Answer type: Radiobuttons*  
*Categories:*  
1. Trouble with sleep or recent change in pattern  
2. No trouble sleeping

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**CAMH807_**

Has that been more so, less so or about the same as before the outbreak of Corona?

*Answer type: Radiobuttons*  
*Categories:*  
1. More so  
2. Less so  
3. About the same

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**CAMH037_**

How much of the time do you feel lonely? Often, some of the time, or hardly ever or never?

*Answer type: Radiobuttons*  
*Categories:*  
1. Often  
2. Some of the time  
3. Hardly ever or never

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**CAMH837_**
Has that been more so, less so or about the same as before the outbreak of Corona?

*Answer type:* Radiobuttons  
*Categories:*  
1. More so  
2. Less so  
3. About the same

---

**CAC001**

Now I will ask you about whether you, someone in your family or among your neighbors and friends has been affected by the Corona illness.

*Answer type:* None

---

**CAC002**

Since the outbreak of Corona, did you or anyone close to you experience symptoms that you would attribute to the Covid illness, e.g. cough, fever, or difficulty breathing?

*IWER:* Respondent can think of people who live close, and people who are close in an emotional sense, like family members.

*Answer type:* Radiobuttons  
*Categories:*  
1. Yes  
5. No

---

**CAC003**

Who was it? Please tell me their relationship to you.

*IWER:* Check all that applies and enter the number of persons in the checkbox on the right.  
*IWER:* PROBE: 'Any others?'

*Answer type:* Checkboxes  
*Categories:*
1. Respondent
2. Spouse or partner
3. Parent
4. Child
5. Other household member
6. Other relative outside household
7. Neighbor, friend or colleague
8. Caregiver
97. Other

CAC003_3b

Question type: Inline textfield attached to code 3 of question "CAC003"

CAC003_4b

Question type: Inline textfield attached to code 4 of question "CAC003"

CAC003_5b

Question type: Inline textfield attached to code 5 of question "CAC003"

CAC003_6b

Question type: Inline textfield attached to code 6 of question "CAC003"

CAC003_7b

Question type: Inline textfield attached to code 7 of question "CAC003"

CAC003_8b

Question type: Inline textfield attached to code 8 of question "CAC003"

CAC003_97b

Question type: Inline textfield attached to code 97 of question "CAC003"

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CAC004_
Have you or anyone close to you been tested for the Corona virus and the result was positive, meaning that the person had the Covid disease?

*Answer type:* Radiobuttons

*Categories:*

1. Yes
5. No

**CAC005**

Who was tested positive? Please tell me their relationship to you.

*IWER:* Check all that applies and enter the number of persons in the checkbox on the right.

*IWER: PROBE: 'Any others?'

*Answer type:* Checkboxes

*Categories:*

1. Respondent
2. Spouse or partner
3. Parent
4. Child
5. Other household member
6. Other relative outside household
7. Neighbor, friend or colleague
8. Caregiver
97. Other

**CAC005_3b**

*Question type:* Inline textfield attached to code 3 of question "CAC005"

**CAC005_4b**

*Question type:* Inline textfield attached to code 4 of question "CAC005"

**CAC005_5b**

*Question type:* Inline textfield attached to code 5 of question "CAC005"

**CAC005_6b**
**CAC007_**

Have you or anyone close to you been tested for the Corona virus and the result was negative, meaning that the person did not have the COVID disease or has recovered from it?

*Answer type:* Radiobuttons  
*Categories:*  
1. Yes  
5. No

---

**CAC008**

Who was tested and the result was negative? Please tell me their relationship to you.

*IWER: Check all that applies and enter the number of persons in the checkbox on the right.*  
*IWER: PROBE: 'Any others?'

*Answer type:* Checkboxes  
*Categories:*  
1. Respondent  
2. Spouse or partner  
3. Parent  
4. Child  
5. Other household member  
6. Other relative outside household
7. Neighbor, friend or colleague
8. Caregiver
97. Other

**CAC008_3b**

*Question type:* Inline textfield attached to code 3 of question "CAC008"

**CAC008_4b**

*Question type:* Inline textfield attached to code 4 of question "CAC008"

**CAC008_5b**

*Question type:* Inline textfield attached to code 5 of question "CAC008"

**CAC008_6b**

*Question type:* Inline textfield attached to code 6 of question "CAC008"

**CAC008_7b**

*Question type:* Inline textfield attached to code 7 of question "CAC008"

**CAC008_8b**

*Question type:* Inline textfield attached to code 8 of question "CAC008"

**CAC008_97b**

*Question type:* Inline textfield attached to code 97 of question "CAC008"

---

**CAC010_**

Have you or anyone close to you been hospitalized due to an infection from the Corona virus?

*Answer type:* Radiobuttons

*Categories:*

1. Yes
5. No
CAC011

Who was hospitalized? Please tell me their relationship to you.

*IWER: Check all that applies and enter the number of persons in the checkbox on the right.*
*IWER: PROBE: 'Any others?'

*Answer type: Checkboxes*
*Categories:*
1. Respondent
2. Spouse or partner
3. Parent
4. Child
5. Other household member
6. Other relative outside household
7. Neighbor, friend or colleague
8. Caregiver
9. Other

CAC011_3b

*Question type: Inline textfield attached to code 3 of question "CAC011"

CAC011_4b

*Question type: Inline textfield attached to code 4 of question "CAC011"

CAC011_5b

*Question type: Inline textfield attached to code 5 of question "CAC011"

CAC011_6b

*Question type: Inline textfield attached to code 6 of question "CAC011"

CAC011_7b

*Question type: Inline textfield attached to code 7 of question "CAC011"

CAC011_8b

*Question type: Inline textfield attached to code 8 of question "CAC011"
CAC011_97b

*Question type:* Inline textfield attached to code 97 of question "CAC011"

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CAC013_

Has anyone close to you died due to an infection from the Corona virus?

*Answer type:* Radiobuttons

*Categories:*

1. Yes
5. No

---

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CAC014

I am very sorry. Can you tell me who that was?

*IWER:* Check all that applies and enter the number of persons in the check box on the right.

*Answer type:* Checkboxes

*Categories:*

2. Spouse or partner
3. Parent
4. Child
5. Other household member
6. Other relative outside household
7. Neighbor, friend or colleague
8. Caregiver
97. Other

CAC014_3b

*Question type:* Inline textfield attached to code 3 of question "CAC014"

CAC014_4b

*Question type:* Inline textfield attached to code 4 of question "CAC014"
Now I have some questions about your doctor visits and the healthcare system since the outbreak of Corona.

Answer type: None

Since the outbreak of Corona, did you forgo medical treatment because you were afraid to become infected by the corona virus?

Answer type: Radiobuttons
Categories:
1. Yes
5. No
Which type of medical treatment did you forgo? Please answer yes or no. Did you forgo...

IWER: READ OUT.

Question type: Table
Answer type: Radiobuttons
Subquestions:
CAQ006_1 Check up at a general practitioner?
CAQ006_2 Check up at a specialist, including a dentist?
CAQ006_3 A planned medical treatment, including an operation?
CAQ006_4 Physiotherapy, psychotherapy, rehabilitation?
CAQ006_97 Some other type of medical treatment?
Categories:
1. Yes
5. No
-1. Don't know
-2. Refusal

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CAQ010_

Did you have a medical appointment scheduled, which the doctor or medical facility decided to postpone due to Corona?

Answer type: Radiobuttons
Categories:
1. Yes
5. No

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CAQ011_

Which type of medical treatment had to be postponed? Please answer yes or no:

IWER: READ OUT.

Question type: Table
Answer type: Radiobuttons
Subquestions:
CAQ011_1 Check up at a general practitioner?
CAQ011_2 Check up at a specialist, including a dentist?
CAQ011_3 A planned medical treatment, including an operation?
CAQ011_4 Physiotherapy, psychotherapy, rehabilitation?
CAQ011_97 Some other type of medical treatment?

Categories:
1. Yes
5. No
-1. Don't know
-2. Refusal

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CAQ015_

Did you ask for an appointment for a medical treatment since the outbreak of Corona and did not get one?

Answer type: Radiobuttons
Categories:
1. Yes
5. No

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CAQ016_

Which type of medical treatment were you denied? Please answer yes or no. Were you denied...

IWER: READ OUT.

Question type: Table
Answer type: Radiobuttons
Subquestions:
CAQ016_1 Check up at a general practitioner?
CAQ016_2 Check up at a specialist, including a dentist?
CAQ016_3 A planned medical treatment, including an operation?
CAQ016_4 Physiotherapy, psychotherapy, rehabilitation?
CAQ016_97 Some other type of medical treatment?

Categories:
1. Yes
5. No
-1. Don't know
-2. Refusal

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CAQ025_
Since the outbreak of Corona, were you treated in a hospital?

*Answer type:* Radiobuttons  
*Categories:*  
  1. Yes  
  5. No

CAQ027_
How satisfied were you with the way you were treated? Very satisfied, somewhat satisfied, somewhat dissatisfied, or very dissatisfied?

*Answer type:* Radiobuttons  
*Categories:*  
  1. Very satisfied  
  2. Somewhat satisfied  
  3. Somewhat dissatisfied  
  4. Very dissatisfied

CAQ028
Why were you dissatisfied?

*IWER: Let R mention all reasons and check all that applies.*

*Answer type:* Checkboxes  
*Categories:*  
  1. Long waiting time  
  2. Overcrowded  
  3. Doctor and nurses did not have time for me  
  4. Shortage of equipment and supplies  
  5. Insufficient safety measures against infections  
  97. Other
CAQ020_

Since the outbreak of Corona, did you go to a doctor’s office or a medical facility other than a hospital?

*Answer type:* Radiobuttons  
*Categories:*  
1. Yes  
5. No

---

CAQ021_

Was this related to Corona?

*Answer type:* Radiobuttons  
*Categories:*  
1. Yes  
5. No

---

CAQ022_

How satisfied were you with the way you were treated? Very satisfied, somewhat satisfied, somewhat dissatisfied, or very dissatisfied?

*Answer type:* Radiobuttons  
*Categories:*  
1. Very satisfied  
2. Somewhat satisfied  
3. Somewhat dissatisfied  
4. Very dissatisfied

---

CAQ023

Why were you dissatisfied?

*IWER: Let R mention all reasons and check all that applies.*
CAW001_

I now turn to the economic consequences of the Corona crisis, first to your work situation.

Answer type: None

CAEP805_

At the time when Corona broke out, were you employed or self-employed, including working for family business?

Answer type: Radiobuttons
Categories:
1. Yes
5. No

CAW002_

Due to the Corona crisis have you become unemployed, were laid off or had to close your business?

IWER: Business closure can be both temporarily or permanently.

Answer type: Radiobuttons
Categories:
1. Yes
5. No

---

**CAW003_**

How long were you unemployed, laid off or had to close your business?

*IWER: Number in weeks.*

*Answer type: Integer*

---

**CAW010_**

Since the outbreak of Corona, some people worked at home, some at their usual work place outside their home, some both. How would you describe your situation?

*IWER: If R got unemployed, laid off, or had to close business since the outbreak, R should think of the remaining time he or she worked during the outbreak. None of these means that did not work at all, neither at the usual workplace nor at home.*

*Answer type: Radiobuttons*

*Categories:*
1. Worked at home only
2. Worked at the usual work place
3. Worked from home and at the usual work place
4. None of these

---

**CAW012_**

Did you learn new computer skills?

*Answer type: Radiobuttons*

*Categories:*
1. Yes
5. No
9. Works without computer
CAW013_
Was your Internet connection adequate? Please answer yes or no:

*Answer type:* Radiobuttons  
*Categories:*  
1. Yes  
5. No  
9. Works without internet

---

CAW016_
Did you get any protection such as masks, gloves, protective screens, disinfection fluid at the work place?

*Answer type:* Radiobuttons  
*Categories:*  
1. Yes  
5. No  

---

CAW017_
How safe did you feel health-wise at your work place? Was it very safe, somewhat safe, somewhat unsafe, or very unsafe?

*Answer type:* Radiobuttons  
*Categories:*  
1. Very safe  
2. Somewhat safe  
3. Somewhat unsafe  
4. Very unsafe  

---

CAW020_
How many hours per week did you normally work before the outbreak of Corona? Please include overtime.
CAW021

Did you reduce your working hours since the outbreak of Corona?

*IWER: If R got unemployed, laid off, or had to close business, code 'Yes'.*

*Answer type: Radiobuttons*

*Categories:*

1. Yes
5. No

CAW022

What was the lowest number of hours in a single week?

*IWER: If R got unemployed, laid off, or had to close business, put 0 hours.*

*Answer type: Integer*

CAW023_1

When was that?

*Answer type: Integer*

CAW023_2

In which week of the month was that?

*Answer type: Integer*
Did you increase your working hours since the outbreak of Corona? Please include overtime.

*Answer type: Radiobuttons*

*Categories:*

1. Yes
5. No

---

**CAW025__**

What was the highest number of hours in a single week?

*Answer type: Integer*

---

**CAW026_1**

When was that?

*Answer type: Integer*

---

**CAW026_2**

In which week of the month was that?

*Answer type: Integer*

---

**CAE001__**

*IWER: Are you interviewing the first respondent in this household?*

*Answer type: Radiobuttons*

*Categories:*

1. Yes
5. No

---

**CAE002__**
I now want to ask you to compare your household’s financial situation before and after the outbreak of Corona.

*Answer type: None*

---

**CAHH017**

How much was the overall monthly income, after taxes and contributions, that your entire household had in a typical month before Corona broke out?

*IWER: Enter an amount in Euro.*

*Answer type: Integer*

---

**CAE003**

Did you or any other household member receive additional financial support due to the outbreak of Corona from your employer, the government, relatives, friends, and/or others?

*Answer type: Radiobuttons*

*Categories:*

1. Yes
5. No

---

**CAE004**

Who gave you this financial support?

*IWER: Check all that applies.*

*IWER: Probe: “Any others?”*

*Answer type: Checkboxes*

*Categories:*

1. Employer
2. Government
3. Relatives
4. Friends
CAE005_

What was the lowest overall monthly income, after taxes and contributions, that your entire household had, including any financial support you may have received since the outbreak of Corona?

*Answer type:* Integer

CACO007_

Thinking of your household's total monthly income since the outbreak of Corona, would you say that your household is able to make ends meet with great difficulty, with some difficulty, fairly easily, or easily?

*Answer type:* Radiobuttons

*Categories:*

1. With great difficulty
2. With some difficulty
3. Fairly easily
4. Easily

CAE011_

Since the outbreak of Corona, did you need to postpone regular payments such as rent, mortgage and loan payments, and/or utility bills?

*Answer type:* Radiobuttons

*Categories:*

1. Yes
2. No
CAE012_

Since the outbreak of Corona, did you need to dip into your savings to cover the necessary day-to-day expenses?

Answer type: Radiobuttons
Categories:
1. Yes
5. No

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CAS001_

I would now like to hear about the kinds and frequency of contacts that you have with family and friends from outside your home.

Answer type: None

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CAS003_

Since the outbreak of Corona, how often did you have personal contact, that is, face to face, with the following people from outside your home? Was it daily, several times a week, about once a week, less often, or never?

IWER: Read out each relationship and check the appropriate answer.

Question type: Table
Answer type: Radiobuttons
Subquestions:
CAS003_1 Own children:
CAS003_2 Own parents:
CAS003_3 Other relatives:
CAS003_4 Other non-relatives like neighbors, friends, or colleagues:
Categories:
1. Daily
2. Several times a week
3. About once a week
4. Less often
5. Never
99. Not applicable
-1. Don't know  
-2. Refusal

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**CAS004**

Since the outbreak of Corona, how often did you have contact by phone, email or any other electronic means with the following people from outside your home? (Was it daily, several times a week, about once a week, less often, or never?)

*IWER: Read out each relationship and check the appropriate answer.*

**Question type:** Table  
**Answer type:** Radiobuttons  
**Subquestions:**
CAS004_1 Own children:  
CAS004_2 Own parents:  
CAS004_3 Other relatives:  
CAS004_4 Other non-relatives like neighbors, friends, or colleagues:  
**Categories:**
1. Daily  
2. Several times a week  
3. About once a week  
4. Less often  
5. Never  
99. Not applicable  
-1. Don't know  
-2. Refusal

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**CAS010**

Since the outbreak of Corona, did you help others outside your home to obtain necessities, e.g. food, medications or emergency household repairs?

**Answer type:** Radiobuttons  
**Categories:**
1. Yes  
5. No
CAS011_

Compared to before the outbreak of Corona, how often did you help the following people from outside your home to obtain necessities: less often, about the same, or more often?

IWER: Read out each relationship and check the appropriate answer.

Question type: Table
Answer type: Radiobuttons
Subquestions:
CAS011_1 Own children:
CAS011_2 Own parents:
CAS011_3 Other relatives:
CAS011_4 Other non-relatives like neighbors, friends, or colleagues:
Categories:
1. Less often
2. About the same
3. More often
99. Not applicable
-1. Don’t know
-2. Refusal

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CAS012_

Since the outbreak of Corona, did you provide personal care to others outside your home?

Answer type: Radiobuttons
Categories: Yes
1. Yes
5. No

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CAS013_

How often did you provide personal care to the following people from outside your home compared to before the outbreak of Corona; less often, about the same, or more often?

IWER: Read out each relationship and check the appropriate answer.

Question type: Table

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Answer type: Radiobuttons
Subquestions:
CAS013_1 Own children:
CAS013_2 Own parents:
CAS013_3 Other relatives:
CAS013_4 Other non-relatives like neighbors, friends, or colleagues:
Categories:
1. Less often
2. About the same
3. More often
99. Not applicable
-1. Don't know
-2. Refusal

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CAS015_

Since the outbreak of Corona, did you do any other volunteering activity?

Answer type: Radiobuttons
Categories:
1. Yes
5. No

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CAS016_

Was it less often, about the same, or more often than the volunteering that you did before the outbreak of Corona?

Answer type: Radiobuttons
Categories:
1. Less often
2. About the same
3. More often

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CAS020_
Since the outbreak of Corona, were you **helped by others** from outside of home to obtain necessities, e.g. food, medications or emergency household repairs?

*Answer type: Radiobuttons*

*Categories:*

1. Yes
5. No

---

**CAS021_**

How often did the following people from outside your home help you to obtain necessities, compared to before the outbreak of Corona? Less often, about the same, or more often?

*IWER: Read out each relationship and check the appropriate answer.*

*Question type: Table*

*Answer type: Radiobuttons*

*Subquestions:*

- **CAS021_1** Own children:
- **CAS021_2** Own parents:
- **CAS021_3** Other relatives:
- **CAS021_4** Other non-relatives like neighbors, friends, or colleagues:

*Categories:*

1. Less often
2. About the same
3. More often
99. Not applicable
-1. Don't know
-2. Refusal

---

**CAS025_**

Did you regularly receive home care before the outbreak of Corona?

*Answer type: Radiobuttons*

*Categories:*

1. Yes
5. No
**CAS026_**

Since the outbreak of Corona, did you face more difficulties in getting the amount of home care that you need?

*Answer type:* Radiobuttons  
*Categories:*  
1. Yes  
5. No

---

**CAS027**

Which difficulties were they?

*IWER: Let R mention all difficulties and check all that applies.*

*Answer type:* Checkboxes  
*Categories:*  
1. I had to pay more to get the help I need  
2. People who cared for me could not come to my home  
3. Other difficulties

---

**CAS028_**

Did the people who cared for you wear protective devices such as masks or gloves?

*Answer type:* Radiobuttons  
*Categories:*  
1. Yes  
5. No  
99. No caregiver visited my home since the outbreak.
We now come to the end of the interview. These were a lot of questions about a hard time. But even during hard times there are some good things in life. What was your most uplifting experience since the outbreak of Corona, in other words, something that inspired hope or happiness?

*IWERT DO NOT READ OUT. Let respondent answer and choose appropriate option.*

**Answer type:** Radiobuttons  
**Categories:**  
1. Named something right-away  
2. Hesitated to name something  
3. Did not name anything

---

**CAF002**

Finally, what is it that you are looking most forward to doing once Corona abates?

*IWERT DO NOT READ OUT. Let respondent answer and choose appropriate option.*

**Answer type:** Radiobuttons  
**Categories:**  
1. Named something right-away  
2. Hesitated to name something  
3. Did not name anything

---

**CAF003**

Thank you very much for your kind cooperation. Stay healthy!

**Answer type:** None

---

**CAF004**

*IWERT: Please enter any remarks about this interview you want to tell us.*

**Answer type:** Text
CAF005_

IWER CHECK: Who answered the questions?

Answer type: Radiobuttons
Categories:
1. Respondent only
2. Respondent and proxy
3. Proxy only

Variables

home

Assign variable: String

Routing

if (1 = 1) {
    assign(home,
        'http://localhost:8080/app/index.html#/households/^hhid;/members/')
}
CAA001_
if (CAA001_ = 5) {
    CAA002_
    if (CAA002_ = 1) {
        CAA003_
    }
} elseif (CAA001_ = 1) {
    CAA004_
}
if (CAA002_ = 2 || CAA004_ = 2) {
    CAA005_
} if (CAA002_ = 1 || CAA004_ = 1 || CAA005_ = 2) { 
    CADN042_
    CADN002_ (dk,rf)
    CADN003_ (dk,rf)
    CAA006_ (dk,rf)
    CAA010_ (response)
    CAPH003_ (dk,rf)
    CAH002_ (dk,rf)
    CAH003_ (dk,rf)
    if (CAH003_ = 1) {
        CAH004_
CAPH089_
CAH006_ (dk, rf)
if (CAH006_ = 1) {
    CAH007_
}
CAH010_ (dk, rf)
if (CAH010_ = 1) {
    CAH011_
    CAH012_ (dk, rf)
    CAH013_ (dk, rf)
}
CAH014_ (dk, rf)
CAH015_ (dk, rf)
CAH016_ (dk, rf)
CAH017_ (dk, rf)
CAH020_ (dk, rf)
if (CAH020_ = 1) {
    CAH021_ (dk, rf)
}
CAMH002_ (dk, rf)
if (CAMH002_ = 1) {
    CAMH802_ (dk, rf)
}
CAMH007_ (dk, rf)
if (CAMH007_ = 1) {
    CAMH807_ (dk, rf)
}
CAMH037_ (dk, rf)
if (CAMH037_ = 1 || CAMH037_ = 2) {
    CAMH837_ (dk, rf)
}
CAC001_ (response)
CAC002_ (dk, rf)
if (CAC002_ = 1) {
    CAC003_ (dk, rf)
}
CAC004_ (dk, rf)
if (CAC004_ = 1) {
    CAC005_ (dk, rf)
}
CAC007_ (dk, rf)
if (CAC007_ = 1) {
    CAC008_ (dk, rf)
}
CAC010_ (dk, rf)
if (CAC010_ = 1) {
    CAC011_ (dk, rf)
}
CAC013_ (dk, rf)
if (CAC013_ = 1) {
    CAC014_ (dk, rf)
}
CAQ001_ (response)
CAQ005_ (dk, rf)
if (CAQ005_ = 1) {
    CAQ006_
if (CAQ010_ = 1) {
    CAQ011_
}

if (CAQ015_ = 1) {
    CAQ016_
}

if (CAQ025_ = 1) {
    CAQ027_ (dk,rf)
    if (CAQ027_ = 3 || CAQ027_ = 4) {
        CAQ028 (dk,rf)
    }
}

if (CAQ020_ = 1) {
    CAQ021_ (dk,rf)
    CAQ022_ (dk,rf)
    if (CAQ022_ = 3 || CAQ022_ = 4) {
        CAQ023 (dk,rf)
    }
}

if (CAQ020_ = 1) {
    CAQ021_ (dk,rf)
    CAQ022_ (dk,rf)
    if (CAQ022_ = 3 || CAQ022_ = 4) {
        CAQ023 (dk,rf)
    }
}

if (CAW001_ (response) CAEP805_ (dk,rf) if (CAEP805_ = 1) {
    CAW002_ (dk,rf)
    if (CAW002_ = 1) {
        CAW003_ (dk,rf)
    }
}

if (CAW010_ != 4) {
    if (CAW010_ = 1 || CAW010_ = 3) {
        CAW012_ (dk,rf)
        CAW013_ (dk,rf)
    }
    if (CAW010_ = 2 || CAW010_ = 3) {
        CAW016_ (dk,rf)
        CAW017_ (dk,rf)
    }
}

if (CAW020_ = 1) {
    CAW021_ (dk,rf)
    if (CAW021_ = 1) {
        CAW022_ (dk,rf)
        if (CAW022_ is response) {
            CAW023_ 1 CAW023_ 2 (dk,rf)
        }
    }
}

if (CAW024_ = 1) {
    CAW025_ (dk,rf)
    if (CAW025_ is response) {
        CAW026_ 1 CAW026_ 2 (dk,rf)
    }
}
if (CAE001_ = 1) {
    CAE002_ (response)
    CAHH017_ (dk,rf)
    CAE003 (dk,rf)
    if (CAE003_ = 1) {
        CAE004 (dk,rf)
    }
    CAE005_ (dk,rf)
    CAC0007_ (dk,rf)
    if (CAC0007_ = 1 || CAC0007_ = 2) {
        CAE011_ (dk,rf)
        CAE012_ (dk,rf)
    }
}
CASI01_ (response)
CASI03_
CASI04_
CASI010_ (dk,rf)
if (CASI010_ = 1) {
    CASI011_
}
CASI012_ (dk,rf)
if (CASI012_ = 1) {
    CASI013_
}
CASI015_ (dk,rf)
if (CASI015_ = 1) {
    CASI016_ (dk,rf)
}
CASI020_ (dk,rf)
if (CASI020_ = 1) {
    CASI021_
}
CASI025_ (dk,rf)
if (CASI025_ = 1) {
    CASI026_ (dk,rf)
    if (CASI026_ = 1) {
        CASI027_ (dk,rf)
    }
    CASI028_ (dk,rf)
}
CAF001_ (dk,rf)
CAF002_ (dk,rf)
CAF003_ (response)