

*In Home Questionnaire Code Book, S.6*  
*Public Use Sample*

Frequency	Code	Response	Variable Name	Type/Length
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*Section 6: Physical/Functional Limitations*

*Section 6 determines whether the respondent has a physical or functional limitation. If he does not, he is skipped out of the section. If he does, questions determine the extent to which it interferes with routine daily activities.*

This section will ask about any physical limitations you may have, and the challenging situations you have encountered because of those limitations.

1. Do you have difficulty using your hands, arms, legs, or feet because of a permanent physical condition?			<b>H1PL1</b>	num 1
6352	0	no [skip to Q.5]		
141	1	yes		
5	6	refused [skip to Q.5]		
6	8	don't know [skip to Q.5]		
2. Does the condition involve a heart problem?			<b>H1PL2</b>	num 1
134	0	no		
7	1	yes		
6363	7	legitimate skip		
3. Does the condition involve asthma?			<b>H1PL3</b>	num 1
127	0	no		
13	1	yes		
6363	7	legitimate skip		
1	8	don't know		
4. Does the condition involve breathing difficulties?			<b>H1PL4</b>	num 1
118	0	no		
23	1	yes		
6363	7	legitimate skip		
5. Do you use a cane, crutches, walker, medically prescribed shoes, wheelchair, or scooter to get around because of a permanent physical condition?			<b>H1PL5</b>	num 1
6466	0	no		
27	1	yes		

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5	6	refused		
6	8	don't know		
6. Do you use a brace for your hand, arm, leg, or foot because of a permanent physical condition?			<b>H1PL6</b>	num 1
6341	0	no		
152	1	yes		
5	6	refused		
6	8	don't know		
7. Do you use an artificial hand, arm, leg, or foot?			<b>H1PL7</b>	num 1
6484	0	no		
9	1	yes		
5	6	refused		
6	8	don't know		
<i>If PFL, ask Q.8-38. Otherwise, skip to the next section.</i>				
The next questions are about difficulties you may have in performing certain activities. For each, the question is whether, by yourself and not using aids, you have difficulty with the activity.				
8. Walking up 10 steps without resting. That is, by yourself and not using aids, do you have difficulty walking up 10 steps without resting?			<b>H1PL8</b>	num 1
263	0	no <i>[skip to Q.10]</i>		
12	1	yes		
1	6	refused <i>[skip to Q.10]</i>		
6227	7	legitimate skip <i>[no physical/functional limitations]</i>		
1	8	don't know <i>[skip to Q.10]</i>		
9. How much difficulty do you have?			<b>H1PL9</b>	num 1
5	1	some		
6	2	a lot/unable to do this		
6492	7	legitimate skip		
1	8	don't know		

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Frequency	Code	Response	Variable Name	Type/Length
10. (By yourself and not using aids, do you have difficulty...) walking one-quarter of a mile, or about three city blocks?			<b>H1PL10</b>	num 1
237	0	no <i>[skip to Q.12]</i>		
38	1	yes		
1	6	refused <i>[skip to Q.12]</i>		
6227	7	legitimate skip		
1	8	don't know <i>[skip to Q.12]</i>		
11. How much difficulty do you have?			<b>H1PL11</b>	num 1
31	1	some		
2	2	a lot		
5	3	unable to do this		
6466	7	legitimate skip		
12. (By yourself and not using aids, do you have difficulty...) standing for about 20 minutes?			<b>H1PL12</b>	num 1
244	0	no <i>[skip to Q.14]</i>		
31	1	yes		
1	6	refused <i>[skip to Q.14]</i>		
6227	7	legitimate skip		
1	8	don't know <i>[skip to Q.14]</i>		
13. How much difficulty?			<b>H1PL13</b>	num 1
22	1	some		
6	2	a lot		
3	3	unable to do this		
6473	7	legitimate skip		
14. (By yourself and not using aids, do you have difficulty...) reaching up over your head, or reaching out as if to shake someone's hand?			<b>H1PL14</b>	num 1
267	0	no <i>[skip to Q.16]</i>		
8	1	yes		
1	6	refused <i>[skip to Q.16]</i>		

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6227	7	legitimate skip		
1	8	don't know <i>[skip to Q.16]</i>		
15. How much difficulty?			<b>H1PL15</b>	num 1
5	1	some		
3	2	a lot/unable to do this		
6496	7	legitimate skip		
16. (By yourself and not using aids, do you have difficulty...) using your fingers to grasp or handle something, for example, picking up a glass?			<b>H1PL16</b>	num 1
264	0	no <i>[skip to Q.18]</i>		
11	1	yes		
1	6	refused <i>[skip to Q.18]</i>		
6227	7	legitimate skip		
1	8	don't know <i>[skip to Q.18]</i>		
17. How much difficulty?			<b>H1PL17</b>	num 1
7	1	some		
4	2	a lot/unable to do this		
6493	7	legitimate skip		
18. (By yourself and not using aids, do you have difficulty...) holding a pen or pencil?			<b>H1PL18</b>	num 1
267	0	no <i>[skip to the text before Q.20]</i>		
8	1	yes		
1	6	refused <i>[skip to the text before Q.20]</i>		
6227	7	legitimate skip		
1	8	don't know <i>[skip to the text before Q.20]</i>		
19. How much difficulty?			<b>H1PL19</b>	num 1
5	1	some		
3	2	a lot/unable to do this		
6496	7	legitimate skip		

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Frequency	Code	Response	Variable Name	Type/Length
The next questions are about the help you may need to do various things.				
20. Because of the difficulty in using your hands, arms, legs, or feet, do you need help from another person when eating?			<b>H1PL20</b>	num 1
270	0	no		
5	1	yes		
1	6	refused		
6227	7	legitimate skip		
1	8	don't know		
21. Because of the difficulty in using your hands, arms, legs, or feet, do you need help from another person when bathing?			<b>H1PL21</b>	num 1
267	0	no		
8	1	yes		
1	6	refused		
6227	7	legitimate skip		
1	8	don't know		
22. Because of the difficulty in using your hands, arms, legs, or feet, do you need help from another person when dressing?			<b>H1PL22</b>	num 1
271	0	no		
4	1	yes		
1	6	refused		
6227	7	legitimate skip		
1	8	don't know		
23. Because of the difficulty in using your hands, arms, legs, or feet, do you need help from another person when getting on or off the toilet?			<b>H1PL23</b>	num 1
268	0	no		
7	1	yes		
1	6	refused		
6227	7	legitimate skip		
1	8	don't know		

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Frequency	Code	Response	Variable Name	Type/Length
24. Because of the difficulty in using your hands, arms, legs, or feet, do you need help from another person when shopping?			<b>H1PL24</b>	num 1
264	0	no		
11	1	yes		
1	6	refused		
6227	7	legitimate skip		
1	8	don't know		
25. Because of the difficulty in using your hands, arms, legs, or feet, do you use special equipment in eating, dressing, or getting on or off the toilet?			<b>H1PL25</b>	num 1
271	0	no		
4	1	yes		
1	6	refused		
6227	7	legitimate skip		
1	8	don't know		
26. Because of the difficulty in using your hands, arms, legs, or feet, do you use special equipment in bathing?			<b>H1PL26</b>	num 1
270	0	no		
5	1	yes		
1	6	refused		
6227	7	legitimate skip		
1	8	don't know		
29. Because of the difficulty in using your hands, arms, legs, or feet, do you use special equipment in shopping?			<b>H1PL29</b>	num 1
272	0	no		
3	1	yes		
1	6	refused		
6227	7	legitimate skip		
1	8	don't know		
30. Do you use a cane?			<b>H1PL30</b>	num 1

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273	0	no		
2	1	yes		
1	6	refused		
6227	7	legitimate skip		
1	8	don't know		
31. Do you use crutches or a walker?			<b>H1PL31</b>	num 1
263	0	no		
12	1	yes		
1	6	refused		
6227	7	legitimate skip		
1	8	don't know		
33. Do you use medically prescribed shoes?			<b>H1PL33</b>	num 1
263	0	no		
12	1	yes		
1	6	refused		
6227	7	legitimate skip		
1	8	don't know		
34. Do you use a manual wheelchair, a powered wheelchair, or a scooter?			<b>H1PL34</b>	num 1
268	0	no		
7	1	yes		
1	6	refused		
6227	7	legitimate skip		
1	8	don't know		
37. Do you consider yourself to have a disability?			<b>H1PL37</b>	num 1
247	0	no		
26	1	yes		
1	6	refused		

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6227	7	legitimate skip		
3	8	don't know		
38. Do you think other people consider you to have a disability?			<b>H1PL38</b>	num 1
241	0	no		
33	1	yes		
1	6	refused		
6227	7	legitimate skip		
2	8	don't know		