



UNIK MULTIMEDIA TECHNOLOGIES

Blantyre Training In Data Entry, Management, Analysis And Reporting Using SPSS and Stata

GENERAL HEALTH QUESTIONNAIRE

Questionnaire number _____

Demographic information

D1. Age: _____ D2. Sex: Male Female D3. Family Income (per month):

D4. Marital Status Single Married Divorced/Separated Widowed

D5. Highest Education attained: None PSLCE JCE MSCE Tertiary

General Health Questions

G1. In general, would you say your health is:

Excellent	1
Very good	2
Good	3
Fair	4
Poor	5

G2. Compared to one year ago, how would you rate your health in general now?

Much better now than one year ago	1
Somewhat better now than one year ago	2
About the same	3
Somewhat worse now than one year ago	4
Much worse now than one year ago	5

The following items are about activities you might do during a typical day. Does your health now limit you in these activities? If so, how much?

(Circle One Number on Each Line)

		Yes, Limited a Lot	Yes, Limited a Little	No, Not limited at All
G3	Vigorous activities, such as running, lifting heavy objects, participating in strenuous sports	[1]	[2]	[3]

G4	Moderate activities, such as moving a table, pushing a vacuum cleaner, bowling, or playing golf	[1]	[2]	[3]
G5	Lifting or carrying groceries	[1]	[2]	[3]
G6	Climbing several flights of stairs	[1]	[2]	[3]
G7	Climbing one flight of stairs	[1]	[2]	[3]
G8	Bending, kneeling, or stooping	[1]	[2]	[3]
G9	Walking more than a mile	[1]	[2]	[3]
G10	Walking several blocks	[1]	[2]	[3]
G11	Walking one block	[1]	[2]	[3]
G12	Bathing or dressing yourself	[1]	[2]	[3]

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 your physical health?

(Circle One Number on Each Line)

		Yes	No
G13	Cut down the amount of time you spent on work or other activities	[1]	[2]
G14	Accomplished less than you would like	[1]	[2]
G15	Were limited in the kind of work or other activities	[1]	[2]
G16	Had difficulty performing the work or other activities (for example, it took extra effort)	[1]	[2]

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)?

(Circle One Number on Each Line) Yes

		Yes	No
G17	Cut down the amount of time you spent on work or other activities	[1]	[2]
G18	Accomplished less than you would like	[1]	[2]
G19	Didn't do work or other activities as carefully as usual	[1]	[2]

2G20. During the past 4 weeks, to what extent has your physical health or emotional problems interfered with your normal social activities with family, friends, neighbors, or groups?

- Mild [3]
- Moderate [4]
- Severe [5]
- Very severe [6]

(Circle One Number)

- Not at all [1]
- Slightly [2]
- Moderately [3]
- Quite a bit [4]
- Extremely [5]

G21. How much bodily pain have you had during the past 4 weeks?

(Circle One Number)

- None [1]
- Very mild [2]

G22. During the past 4 weeks, how much did pain interfere with your normal work (including both work outside the home and housework)?

(Circle One Number)

- Not at all [1]
- A little bit [2]
- Moderately [3]
- Quite a bit [4]
- Extremely [5]

These questions are about how you feel and how things have been with you **during the past 4 weeks**. 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** . . .

(Circle One Number 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
G23	Did you feel full of pep?	[1]	[2]	[3]	[4]	[5]	[6]
G24	Have you been a very nervous person?	[1]	[2]	[3]	[4]	[5]	[6]
G25	Have you felt so down in the dumps that nothing could cheer you up?	[1]	[2]	[3]	[4]	[5]	[6]
G26	Have you felt calm and peaceful?	[1]	[2]	[3]	[4]	[5]	[6]
G27	Did you have a lot of energy?	[1]	[2]	[3]	[4]	[5]	[6]
G28	Have you felt downhearted and blue?	[1]	[2]	[3]	[4]	[5]	[6]
G29	Did you feel worn out?	[1]	[2]	[3]	[4]	[5]	[6]
G30	Have you been a happy person?	[1]	[2]	[3]	[4]	[5]	[6]
G31	Did you feel tired?	[1]	[2]	[3]	[4]	[5]	[6]

G32. During the past 4 weeks, how much of the time has your physical health or emotional problems interfered with your social activities (like visiting with friends, relatives, etc.)?

(Circle One Number)

All of the time [1]

Most of the time [2]

Some of the time [3]

A little of the time [4]

None of the time [5]

How TRUE or FALSE is each of the following statements for you.

(Circle One Number on Each Line)

		Definitely True	Mostly True	Don't Know	Mostly False	Definitely False
G33	I seem to get sick a little easier than other people	[1]	[2]	[3]	[4]	[5]
G34	I am as healthy as anybody I know	[1]	[2]	[3]	[4]	[5]
G35	I expect my health to get worse	[1]	[2]	[3]	[4]	[5]
G36	My health is excellent	[1]	[2]	[3]	[4]	[5]