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- 1 Problems or disability connected with: arms, legs, hands, feet, back, or neck (including arthritis and rheumatism)**
- 2 Difficulty in seeing (other than needing glasses to read normal size print)**
- 3 Difficulty in hearing**
- 4 Skin conditions/allergies**
- 5 Chest/breathing problems, asthma, bronchitis**
- 6 Heart/blood pressure or blood circulation problems**
- 7 Stomach/liver/kidneys or digestive problems**
- 8 Diabetes**
- 9 Anxiety, depression or bad nerves, psychiatric problems**
- 10 Alcohol or drug related problems**
- 11 Epilepsy**
- 12 Migraine or frequent headaches**
- 13 Cancer**
- 14 Stroke**
- 15 Other health problems (please give details)**

- 1 Doing the housework**
- 2 Climbing stairs**
- 3 Dressing yourself**
- 4 Walking for at least 10
minutes**
- 5 None of these**

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- 1 Health visitor, district nurse**
- 2 Home-help/home support**
- 3 Meals on wheels / meals in the home**
- 4 Social worker or welfare officer**
- 5 Carer/personal assistant**
- 6 Volunteer carer**
- 7 Chiropodist**
- 8 Alternative medical practitioner
(eg. homeopath, osteopath)**
- 9 Alternative practitioner
(eg. healer in own community)**
- 10 Psychotherapist (including psychiatrist
or analyst)**
- 11 Speech therapist or occupational therapist**
- 12 Physiotherapist**
- 13 Hospital consultant/outpatients**
- 14 Family planning clinic**
- 15 Any other health or welfare services
(please give details)**

FOR MEN ONLY

- 1 Dental check-up**
- 2 Eyesight test by an optician**
- 3 Chest/other x-rays**
- 4 Blood pressure**
- 5 Cholesterol test**
- 6 Blood test**
- 7 Other (please give details)**

FOR WOMEN ONLY

- 1 Dental check-up**
- 2 Eyesight test by an optician**
- 3 Chest/other x-rays**
- 4 Blood pressure**
- 5 Cholesterol test**
- 6 Blood test**
- 7 Other (please give details)**
- 8 Cervical smear**
- 9 Breast screening**