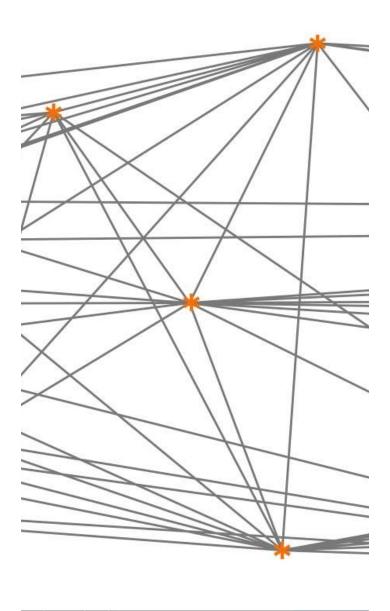


Scales and Multi-Item Indicators



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March 31st, 2017



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About this manual

The purpose of this manual is to provide an informative overview of all scales and item groups that are included in the questionnaire of Wave 1 to Wave 6 of the Survey of Health, Age and Retirement in Europe (SHARE). The manual covers literature based information on the definition and content of the respective scale or multi-item indicator and its operationalisation in SHARE. All scales and multi-item indicators are displayed in English according to the generic version of the SHARE questionnaire.

I. Mental health measures

1. EURO-D

Definition

The EURO-D scale (Prince et al., 1999) was originally developed in an effort to derive a common depression symptoms scale from various instruments on late-life depression used in different European countries. The resulting scale consists of the following items: depression, pessimism, suicidality, guilt, sleep, interest, irritability, appetite, fatigue, concentration (on reading or entertainment), enjoyment, and tearfulness.

Operationalisation in SHARE

SHARE provides the EURO-D variable (*eurod*) and the EURO-D caseness variable (*eurodcat*) as generated variables in the gv_health module. *eurod* is generated from questions in the mental health module (*mh002_ - mh017_*) as a composite index of the sixteen items. Please note that information in *mh005_/mh006_, mh008_/mh009_, mh011_/mh012_* and *mh014_/mh015_* is combined when generating *eurod* so that the list of 16 items in table 1 is reduced to 12 final items. The maximum score a respondent can get is 12 "very depressed" and the minimum score is 0 "not depressed".

The attainment of a scale score of 4 or higher is categorized as "case of depression" and a scale score below 4 as "not depressed". The generated variable *eurodcat* equals 1 if the scale score is 4 or higher.

Table 1: List of relevant EURO-D variables in the mental health module (mh)

Waves: 1, 2, 4, 5, 6	Question text	Response options*	
MH002	In the last month, have you	1. Yes	
	been sad or depressed?	5. No	
	·		
MH003	What are your hopes for the	1. Any hopes mentioned	
	future?	2. No hopes mentioned	
MH004	In the last month, have you	1. Any mention of suicidal feelings or	
	felt that you would rather	wishing to be dead	
	be dead?	2. No such feelings	
MH005	Do you tend to blame	1. Obvious excessive guilt or self	
	yourself or feel guilty about	blame	
	anything?	2. No such feelings	
		3. Mentions guilt or self	
		blame, but it is unclear if these	
		constitute obvious or excessive guilt	
		or self-blame	
MH006	So, for what do you blame	1. Example(s) given constitute	
(if MH005 = 3)	yourself?	obvious excessive guilt or self-blame	
		2. Example(s) do not constitute	
		obvious excessive guilt or	
		self-blame, or it remains unclear if	
		these constitute obvious or excessive	
		guilt or self-blame	
MH007	Have you had trouble	1. Trouble with sleep or re	
	sleeping recently?	cent change in pattern	
NALIOOO	In the least we such a value to	2. No trouble sleeping	
MH008	In the last month, what is	1. Less interest than usual	
	your interest in things?	mentioned 2. No mention of loss of interest	
		3. Non-specific or uncodeable response	
MH009	So, do you keep up your	1. Yes	
(if MH008 = 3)	interests?	5. No	
MH010	Have you been irritable	1. Yes	
IVIIIOIO	recently?	5. No	
MH011	What has your appetite	1. Diminution in desire for food	
14111011	been like?	2. No diminution in desire for food	
	Deen inter	3. Non-specific or uncodeable	
		response	
MH012	So, have you been eating	1. Less	
(if MH011 = 3)	more or less than usual?	2. More	
,		3. Neither more nor less	
MH013	In the last month, have you	1. Yes	
	had too little energy to do	5. No	
	the things		
	you wanted to do?		

Waves: 1, 2, 4, 5, 6	Question text	Response options*
MH014	How is your concentration? For example, can you concentrate on a television programme, film or radio programme?	 Difficulty in concentrating on entertainment No such difficulty mentioned
MH015	Can you concentrate on something you read?	 Difficulty in concentrating on reading No such difficulty mentioned
MH016	What have you enjoyed doing recently?	 Fails to mention any enjoyable activity Mentions ANY enjoyment from activity
MH017	In the last month, have you cried at all?	1. Yes 5. No

^{*}Please note that in wave 5 the response options of these items differ from the other waves and thus from the values shown in table 1 (see the wave 5 questionnaire).

Prince, M. J., Reischies, F., Beekman, A. T. F., Fuhrer, R., Jonker, C., Kivela, S. L., Lawlor, B., Lobo A., Magnusson, H., Fichter, M. M., Van Oyen, H., Roelands, M., Skoog, I., Turrina, C. & Copeland, J. R. (1999). Development of the EURO-D scale – a European Union initiative to compare symptoms of depression in 14 European centres. *The British Journal of Psychiatry*, *174*(4), 330-338.

2. CASP-12

Definition

The original CASP-19 scale (Hyde et al., 2003) is a theoretically grounded measure of quality of life in older age. CASP-12 is the revised 12-item version of CASP-19. The scale is composed of four subscales, the initials of which make up the acronym: control, autonomy, self-realization and pleasure. The 12 items which are presented as questions or statements to survey respondents are assessed on a four point Likert scale ("often", "sometimes", "rarely", "never"). The resulting score is the sum of these 12 items, and ranges from the minimum of 12 to the maximum of 48. A high score indicates high quality of life. The literature does not provide an indication of a threshold which categorizes quality of life in "low" and "high".

Operationalisation in SHARE

In Wave 1, the CASP-12 questions are part of the drop-off (self-completion of a paper-and-pencil questionnaire) leading to a higher share of missing data. In Wave 2, 3, 4, 5, and 6, the CASP-12 questions are part of the regular SHARE questionnaire. SHARE provides the CASP-12 variable (*casp*) as a generated variable in the gv_health module.

Table 2: List of relevant CASP variables in the drop-off questionnaire

Wave: 1	Question text	Subscale
q_2a	My age prevents me from doing the things I	Control
	would like to.	
q_2b	I feel that what happens to me is out of my	Control
	control.	
q_2c	I felt left out of things.	Control
q_2d	I can do the things that I want to do.	Autonomy
q_2e	Family responsibilities prevent me from doing	Autonomy
	what I want to do.	
q_2f	Shortage of money stops me from doing the	Autonomy
	things I want to do.	
q_2g	I look forward to each day.	Pleasure
q_2h	I feel that my life has meaning.	Pleasure
q_2i	On balance, I look back on my life with a	Pleasure
	sense of happiness.	
q_2j	I feel full of energy these days.	Self-Realization
q_2k	I feel that life is full of opportunities.	Self-Realization
q_2l	I feel that the future looks good for me.	Self-Realization

Table 3: List of relevant CASP variables in the activities module (ac)

Waves: 2, 3, 4, 5, 6	Question text	Subscale
AC014	How often do you think your age prevents you	Control
	from doing the things you would like to do?	
AC015	How often do you feel that what happens to	Control
	you is out of your control?	
AC016	How often do you feel left out of things?	Control
AC017	How often do you think that you can do the	Autonomy
	things that you want to do?	
AC018	How often do you think that family	Autonomy
	responsibilities prevent you from doing what	
	you want to do?	
AC019	How often do you think that shortage of	Autonomy
	money stops you from doing the things you	
	want to do?	
AC020	How often do you look forward to each day?	Pleasure
AC021	How often do you feel that your life has	Pleasure
	meaning?	
AC022	How often, on balance, do you look back on	Pleasure
	your life with a sense of happiness?	
AC023	How often do you feel full of energy these	Self-Realization
	days?	
AC024	How often do you feel that life is full of	Self-Realization
	opportunities?	
AC025	How often do you feel that the future looks	Self-Realization
	good for you?	

Hyde, M., Wiggins, R. D., Higgs, P., & Blane, D. B. (2003). A measure of quality of life in early old age: the theory, development and properties of a needs satisfaction model (CASP-19). *Aging & mental health, 7*(3), 186-194.

Von dem Knesebeck, O., Hyde, M., Higgs, P., Kupfer, A., Siegrist, J.: Quality of Life and Well-Being. In: Börsch-Supan, A., Brugiavini, A., Jürges, H., Mackenbach, J., Siegrist, J., Weber, G. (2005). *Health, ageing and retirement in Europe – First results from the Survey of Health, Ageing and Retirement in Europe*. Mannheim: Mannheim Research Institute for the Economics of Aging (MEA).

3. Three-Item Loneliness Scale

Definition

The Three-Item Loneliness Scale (Hughes et al., 2004) is a short version of the R-UCLA Loneliness Scale (Russell et al., 1978). It measures indirect loneliness. The three items companionship, left out, and isolated are answered on a three point Likert scale ("often", "some of the time", "hardly ever or never"). The minimum of the resulting score is 3 ("not lonely") and the maximum is 9 ("very lonely"). The literature does not provide an indication of a threshold which categorizes "lonely" and "not lonely".

Operationalisation in SHARE

SHARE provides the generated Loneliness Scale variable (*loneliness*) as part of the gv_health module. The variable is a sum score based on *mh034_*, *mh035_* and mh036_ from the mental health module that ranges between the values 3 "Not lonely" and 9 "Very lonely".

Table 4: Three-Item Loneliness Scale

Waves: 5, 6	Question text
MH034	How much of the time do you feel you lack companionship?
MH035	How much of the time do you feel left out?
MH036	How much of the time do you feel isolated from others?

Additional information on the respondent's self-assessment of loneliness can be derived from an direct over-all item answered on the same three point Likert scale ("often", "some of the time", "hardly ever or never").

Table 5: Additional information on respondent's self-assessment

Waves: 5, 6	Question text
MH037	How much of the time do you feel lonely?

Russell, D., Peplau, L. A. & Ferguson M. L. (2010) Developing a measure of loneliness. *Journal of Personality Assessment*, 42(3), 290-294.

Russel, D., Peplau, L. A. & Cutrona, C. E. (1980). The revised UCLA Loneliness Scale: concurrent and discriminant validity evidence. *Journal of Personality and Social Psychology*, *39*(3), 472-480.

Russell, D. W. (1996). UCLA Loneliness Scale (Version 3): Reliability, validity, and factor structure. *Journal of Personality Assessment*, *66*(1), 20-40.

Hughes, M. E., Waite, L. J., Hawkley, L. C., & Cacioppo, J. T. (2004). A short scale for measuring loneliness in large surveys results from two population-based studies. *Research on Aging*, 26(6), 655-672.

4. Multi-Item Indicator Anxiety

Definition

The Beck Anxiety Inventory (Beck et al., 1988) is used for measuring the severity of anxiety. The measure asks about common physiological and cognitive symptoms of anxiety that the respondent has had during the past week. The 21 questions are answered on a four point Likert scale ("never", "hardly ever", "some of the time", "most of the time"). A high result score indicates high anxiety.

Operationalisation in SHARE

Anxiety is measured by five items in SHARE. SHARE includes one item about psychological (MH023), two items about physiological (MH025, MH027) and two items about cognitive symptoms (MH024, MH026).

Table 6: Items measuring anxiety

Waves: 4, 5	Question text
MH023 I had fear of the worst happening.	
MH024	I was nervous.
MH025	I felt my hands trembling.
MH026	I had a fear of dying.
MH027	I felt faint.

References

Beck, A. T., Epstein, N., Brown, G., & Steer, R. A. (1988). An inventory for measuring clinical anxiety: psychometric properties. *Journal of Consulting and Clinical Psychology*, *56*(6), 893.

II. Physical health measures

1. Global Activity Limitation Index (GALI)

Definition

The Global Activity Limitation Index¹ (GALI) has been developed as an indicator for comparing health expectancy and disability across Europe. It is a global single-item instrument (with optional additional questions) that measures long-standing activity limitations (six months or more) referring to general health problems and activities people usually do.

Operationalisation in SHARE

SHARE provides the generated variable *gali* as part of the gv_health module. The resulting categories are "limited" and "not limited". It is based on *ph005*_.

Table 7: Measure for GALI in SHARE

Waves: 1, 2, 4, 5, 6	Question text	Response options
PH005	For the past 6 months at least, to	1. Severely limited
	what extent have you been limited	2. Limited, but not
	because of a health problem in	severely
	activities people usually do?	3. Not limited

References

Robine, J. M., & Jagger, C. (2003). Creating a coherent set of indicators to monitor health across Europe. *The European Journal of Public Health*, 13(1), 6-14.

Van Oyen, H., Van der Heyden, J., Perenboom, R., & Jagger, C. (2006). Monitoring population disability: evaluation of a new Global Activity Limitation Indicator (GALI). *Sozial-und Präventivmedizin*, *51*(3), 153-161.

¹ Sometimes also referred to as "General Activity Limitation Index"

2. Activities of Daily Living (ADL)

Definition

The ADL index (Katz et al., 1963) describes the number of limitations with activities of daily living. It refers to people's everyday self-care activities such as dressing, walking, grooming, eating, transferring bed, and toileting, which are fundamental for maintaining independence.

Operationalisation in SHARE

The modified version used in SHARE includes six activities (Nicholas et al., 2003). Thus, the result score ranges from 0 to 6. The higher the index is, the more difficulties with these activities and the lower the mobility of the respondent.

SHARE provides ADL as a generated variable and also ADL2 which reclassifies ADL in two categories: 0 "no ADL limitations" and 1 "1+ ADL limitations" (see gv_health module).

Table 8: Measure of ADL in SHARE

Waves: 1, 2, 4, 5, 6	Question text	Response options
Part of PH049	Please look at card	1. Dressing, including putting
	^SHOWCARD_ID. Please tell me	on shoes and socks
	if you have any difficulty with	2. Walking across a room
	these because of a physical,	3. Bathing or showering
	mental, emotional or memory	4. Eating, such as cutting up
	problem. Exclude any difficulties	your food
	you expect to last less than	5. Getting in or out of bed
	three months.	6. Using the toilet, including
		getting up or down
		96. None of these

References

Katz, S., Ford, A. B., Moskowitz, R. W., Jackson, B. A., & Jaffe, M. W. (1963). Studies of illness in the aged: the index of ADL: a standardized measure of biological and psychosocial function. *Jama*, *185*(12), 914-919.

Nicholas, S., Huppert, F., McWilliams, B., & Melzer, D. (2003). Health, Wealth and Lifestyles of the Older Population in England: the 2002 English Longitudinal Study of Ageing.

3. Instrumental Activities of Daily Living (IADL)

Definition

The IADL index (Lawton & Brody, 1969) describes the number of limitations with instrumental activities of everyday life.

Operationalisation in SHARE

The modified version used in SHARE includes seven activities (Nicholas et al., 2003). Thus, the score ranges from 0 to 7. The higher the index is, the more difficulties with these activities and the lower the mobility of the respondent. SHARE provides *iadl* and *iadl* 2 as generated variables in the gv_health module. The latter reclassifies *iadl* in two categories: 0 "no IADL limitations" and 1 "1+ IADL limitations".

Table 9: Measure of IADL in SHARE

Waves: 1,	Question text	Response options	
2, 4, 5	Question text	Response options	
Part of	Please look at card	7. Using a map to figure out how to get	
PH049	^SHOWCARD ID. Please	around in a strange place	
111045	tell me if you have any	8. Preparing a hot meal	
	difficulty with these	9. Shopping for groceries	
	because of a physical,	10. Making telephone calls	
	· · ·		
	mental, emotional or	11. Taking medications	
	memory problem.	12. Doing work around the house or garden	
	Exclude any difficulties	13. Managing money, such as paying bills	
	you expect to last less	and keeping track of expenses	
		96. None of these	
Wave: 6	Question text	Response options	
Part of	Please look at card	7. Using a map to figure out how to get	
PH049		around in a strange place	
	tell me if you have any	8. Preparing a hot meal	
difficulty with these		9. Shopping for groceries	
because of a physical,		10. Making telephone calls	
mental, emotional or		11. Taking medications	
	memory problem.	12. Doing work around the house or garden	
	Exclude any difficulties	13. Managing money, such as paying bills	
	you expect to last less	and keeping track of expenses	
	than three months.	14. Leaving the house independently and	
		accessing transportation services	
		15. Doing personal laundry	
		96. None of these	

References

Lawton, M.P., & Brody, E.M. (1969). Assessment of older people: Self-maintaining and instrumental activities of daily living. *The Gerontologist*, 9(3), 179-186.

Nicholas, S., Huppert, F., McWilliams, B., & Melzer, D. (2003). Health, Wealth and Lifestyles of the Older Population in England: the 2002 English Longitudinal Study of Ageing.

4. Self-perceived Health – US Version (SPHUS) and EU Version (SPHEU)

Definition

sphus and spheu measure self-perceived health with a single item. Respondents rate their present general health on a five point Likert scale. The difference between the European and the US version is the range of response options. The answer categories in the European version (spheu) range between "very good" and "very poor". The answer categories in the US version (sphus), which are based on the SF-36 questionnaire (Ware and Gandek 1998), range between "excellent" and "poor".

Operationalisation in SHARE

In Wave 1, SHARE contains both versions. Respondents answered the respective question either at the beginning or at the end of the PH module. The generated variables *sphus* and *sphus2* as well as *spheu* and *spheu2* are stored in the gv_health module. *sphus2* and *spheu2* are dichotomised versions with 0 indicating "good or very good health" and 1 "less than good health". From Wave 2 onwards, SHARE contains only the US version. For a comparison between the European and the US version, please see Jürges et al. (2008).

Table 10: Measures of self-perceived health in SHARE

Wave: 1	Waves: 2, 4, 5, 6	Wave: 3	Question text	Response options
PH002			Would you say your	1. Very good
PH052			health is	2. Good
				3. Fair
				4. Bad
				5. Very bad
PH003	PH003	sl_ph003	Would you say your	1. Excellent
PH053			health is	2. Very good
				3. Good
				4. Fair
				5. Poor

References

Ware, J. E., & Gandek, B. (1998). Overview of the SF-36 health survey and the international quality of life assessment (IQOLA) project. *Journal of clinical epidemiology*, 51(11), 903-912.

Jürges, H., Avendano, M. & Mackenbach, J.P. (2008). Are different measures of self-rated health comparable? An assessment in five European countries. *Eur J Epidemiol* 23: 773-781.

5. Multi-Item Indicator Pain

Definition

The Brief Pain Inventory (Cleeland & Ryan, 1991; 1994) is a medical comprehensive instrument for pain assessment developed by the Pain Research Group of the WHO Collaborating Centre for Symptom Evaluation in Cancer Care.

Operationalisation in SHARE

In SHARE, pain perception is measured by four items that are partially based on the Brief Pain Inventory.

Table 11: Measures of pain perception in SHARE

Wave: 5	Wave: 6	Question text	Response options
PH084	PH084	Are you troubled with pain?	1. Yes
			5. No
PH085	PH085	How bad is the pain most of the	1. Mild
		time? Is it	3. Moderate
			5. Severe
PH087	PH087	Look at card ^SHOWCARD_ID. In	1. Back
		which parts of the body do you feel	2. Hips
		pain? [Code all that apply]	3. Knees
			4. Other joints
			5. Mouth/Teeth
			6. Other parts of the
			body, but not joints
			7. All over
PH088		You have just told me that you are	1. Yes
		bothered by pain in your back,	5. No
		knees, hips or another joint. Have	
		you been bothered for the past six	
		months at least by any of these	
		joint pains?	

References

Cleeland, C. S., & Ryan, K. M. (1991). The brief pain inventory. *Pain Research Group, Department of Neurology, University of Wisconsin-Madison.*

Cleeland, C. S., & Ryan, K. M. (1994). Pain assessment: global use of the Brief Pain Inventory. *Annals of the Academy of Medicine, Singapore*, *23*(2), 129-138.

6. Body Mass Index (BMI)

Definition

The Body Mass Index (Quetelet, 1832) is a measure for evaluating body weight in relation to body height. It is defined as the mass divided by the square of the height, universally expressed in units of kg/m².

Operationalisation in SHARE

SHARE provides the generated variables bmi and bmi2 (BMI categorised) in the gv_health module. The values of are derived from the variables ph012_ (weight) and ph013_ (height), and is based on the following formula: BMI = $(ph012_/(ph013_)^2)$ * 10000.

The *bmi2* variable classifies the variable BMI into the standard categories determined by the World Health Organization (WHO, 1995) "underweight" (< 18.5), "normal" (18.5-24.9), "overweight" (25-29.9) and "obese" (> 30).

Table 12: Relevant variables for BMI

Waves: 1, 2, 4, 5, 6	Question text	Response options
PH012	Approximately how much do you weigh?	Weight in kilos
PH013	How tall are you?	Length in centimetres

References

Quetelet, A. (1832). Recherches sur le poids de l'homme aux différents âges. *Nouveaux Memoires de l'Academie Royale des Sciences et Belles-Lettres de Bruxelles*, 1-83.

WHO (1995). Physical status: the use and interpretation of anthropometry. Report of a WHO Expert Committee. WHO Technical Report Series 854. Geneva: World Health Organization.

7. Grip Strength (GS)

Definition

Grip strength predicts disability, morbidity, frailty and mortality (Andersen-Ranberg et al., 2009). It is used as an indicator for overall health and usually declines with age. Grip strength differs by gender, height and weight. Within SHARE, grip strength is measured by using a handheld dynamometer on each hand (Smedley, S Dynamometer, TTM, Tokyo, 100 kg). Two measurements are taken on each hand, alternating between the hands.

Operationalisation in SHARE

SHARE measures the grip strength twice for each hand. The *maxgrip* variable as generated variable is part of the gv_health module. It contains the maximum value of the grip strength measurements of both hands. The variable is only generated for respondents with two valid measures for each hand and if the two measures for one hand do not differ more than 20 kg.

Table 13: Measuring grip strength in SHARE

Waves: 1, 2, 3, 4, 5, 6	Question text	Response options
GS006	Left hand, first measurement.	Between 0 and 100, in kg
GS007	Left hand, second	Between 0 and 100, in kg
	measurement.	
GS008	Right hand, first measurement.	Between 0 and 100, in kg
GS009	Right hand, second	Between 0 and 100, in kg
	measurement.	

References

See Andersen-Ranberg, K., Petersen, I., Frederiksen, H., Mackenbach, J. P., & Christensen, K. (2009). Cross-national differences in grip strength among 50+ year-old Europeans: results from the SHARE study. *European Journal of Ageing*, *6*(3), 227-236.

8. Walking Speed

Definition

Walking speed and steadiness predicts disability and mortality (Zaninotto et al., 2013). It is used as an indicator for overall health and usually declines with age.

Operationalisation in SHARE

In SHARE Waves 1 and 2, walking speed was assessed by measuring the time (in seconds) it takes for a respondent to walk a distance of two and a half meters. Respondents who need more than 0.54 seconds and less than 30 seconds are included. Walking speed is measured twice per respondent and only among respondents aged 75 years or older.

SHARE provides wspeed and wspeed2 as generated variables in the gv_health module. wspeed contains the average speed of the two tests. wspeed2 reclassifies wspeed in two categories: 0 "walking speed > 0.4 meters/second" and 1 "walking speed \leq 0.4 meters/second".

Table 14: Measures of walking speed in SHARE

Waves: 1, 2	Question text	Response options
WS010	Result of first trial	1. Completed successfully
		2. Attempted but unable to complete
		3. Stopped by the interviewer because of safety
		reasons
		4. Not attempted, respondent felt it would be unsafe
		5. Participant unable to understand instructions
		6. Respondent refused
WS011	Time of the first	Time recorded in seconds in two decimal places
	walking speed test	
WS012	Result of second trail	1. Completed successfully
		2. Attempted but unable to complete
		3. Stopped by the interviewer because of safety
		reasons
		4. Not attempted, respondent felt it would be
		unsafe
		5. Participant unable to understand instructions
		6. Respondent refused
WS013	Time of second	Time recorded in seconds in two decimal places
	walking speed test	

References

See Zaninotto, P., Sacker, A., & Head, J. (2013). Relationship between wealth and age trajectories of walking speed among older adults: evidence from the English Longitudinal Study of Ageing. *The Journals of Gerontology Series A: Biological Sciences and Medical Sciences* (68), 1525-1531.

9. Peak Flow

Definition

The peak expiratory flow test or "breathing test" measures the respondent's maximal expiratory air flow in litres per minute (Ayres & Turpin, 2013). The respondent's ability to breath out air is measured by a Mini-Wright peak flow meter (Wright, 1978), a small, handheld device with a disposable mouthpiece placed on it. The respondents take a breath as deep as possible, place the mouthpiece of the peak flow meter in their mouth and blow out as hard and as fast as possible.

Operationalisation in SHARE

In SHARE, two measurements of the respondent's airflow are taken. The higher the value shown on the peak flow meter scale the less constricted are the respondent's airways. Please note that value 993 indicates that the respondent tried but was unable to execute the test and value 999 that the respondent chose not to participate (see table 15).

Table 15: Measuring expiratory lung capacity

Waves: 2, 4, 6	Question text	Response options
PF003	Value first measurement	30 – if less than 60
		890 – if past last tick
		993 – if respondent
		tried but was unable
		999 – if respondent
		chose not to do it
PF004	Value second measurement	30 – if less than 60
		890 – if past last tick
		993 – if respondent
		tried but was unable
		999 – if respondent
		chose not to do it

References

Ayres, J. G., & Turpin, P. J. (2013). *Peak flow measurement: an illustrated guide*. Springer.

Wright, B. M. (1978). A miniature Wright peak-flow meter. *British Medical Journal*, 2(6152), 1627-1628.

8. Chair Stand Test

Definition

The chair stand test or "chair-rising test" measures strength and endurance in the lower body as well as speed and coordination. The performance in this test predicts mobility (Nevitt et al., 1989).

Operationalisation in SHARE

In SHARE, the chair stand test is measured one time per respondent. The respondents fold their arms across their chest and stand up from a sitting position on a chair and sit down again for five times. The time (in seconds) the respondents need to stand up for five times without using their hands, is measured by a stop watch. Please note that in wave 2 the chair stand test was only conducted for respondents aged 75 and below. In wave 5 all respondents – irrespective of age – were asked to perform the test.

Table 16: Chair stand measure in SHARE

Waves: 2, 5	Question text	Response options
CS008	Please stand up straight as quickly as	0-60 – Time in
	you can, without stopping in between.	seconds used for
	After standing up each time, sit down	five stands
	and then stand up again. Keep your	
	arms folded across your chest. I'll be	99 – if respondent
	timing you with a stopwatch. When I	failed to complete
	say "Ready, Stand" I will begin timing	five stands in one
	you.	minute

References

Nevitt, M. C., Cummings, S. R., Kidd, S., & Black, D. (1989). Risk factors for recurrent nonsyncopal falls: a prospective study. *Jama*, *261*(18), 2663-2668.

III. Cognitive functioning measures²

1. Temporal orientation

Definition

The Mini-Mental State Examination (MMSE) or Folstein test (Folstein et al., 1975) measures the respondents' orientation to date, month, year and day of week. It was developed in order to measure cognitive impairment in clinical and research settings.

Operationalisation in SHARE

The respondents' orientation to date is measured by four items in SHARE that are adopted from the MMSE. SHARE provides the variable *orienti* as generated variable in the gv_health module. It is based on *cf003_*, *cf004_*, *cf005_* and *cf006_*. The score ranges from 0 to 4: the higher the score, the better oriented the respondent is ranked.

Table 17: Measuring orientation to date, month, year and day of week

Waves: 1, 2, 4, 5, 6	Question text	Response options
CF003	First, I am going to ask about today's	1. Given correctly
	date. Which day of the month is it?	5. Given
		incorrectly/doesn't know
CF004	Which month is it?	1. Month given correctly
		2. Month given
		incorrectly/doesn't know
		month
CF005	Which year is it?	1. Year given correctly
		2. Year given
		incorrectly/doesn't know
		year
CF006	Can you tell me what day of the week	1. Day of week given
	it is?	correctly
		2. Day of week given
		incorrectly/doesn't know
		day

References

Folstein, M. F., Folstein, S. E., & McHugh, P. R. (1975). "Mini-mental state": a practical method for grading the cognitive state of patients for the clinician. *Journal of Psychiatric Research*, 12(3), 189-198.

² Additional information on measures of cognitive functioning in SHARE is available in: Dewey M.E. & Prince M.J.: *Cognitive Function*. In: Börsch-Supan, A., A. Brugiavini, H. Jürges, J. Mackenbach, J. Siegrist and G. Weber. (2005). *Health, ageing and retirement in Europe – First results from the Survey of Health, Ageing and Retirement in Europe*. Mannheim: Mannheim Research Institute for the Economics of Aging (MEA), pp. 118 - 125.

2. Numeracy

Definition

Numeracy is a measure of the respondents' mathematical performance. The subtraction items used in SHARE were adopted from the Mini-Mental State Examination (MMSE) or Folstein test (Folstein et al., 1975) which examines different cognitive functions.

Operationalisation in SHARE

The respondents' mathematical performance is measured by nine items in SHARE. Five items measure subtraction calculation skills and four items measure percentage calculation skills. The result score contains the number of correct answers and ranges from 0 to 5: the higher the score, the better the respondent's mathematical performance. For Wave 1, 2, 4 and 5, SHARE provides the variable *numeracy* as generated variable in the gv_health module containing a test for percentage calculation. For Wave 4 and 5, SHARE provides also the variable *numeracy2* as generated variable measuring mathematical performance via subtraction. In Wave 6, no longitudinal but only baseline respondents get the numeracy questions which leads to a higher share of missing data.

Table 18: Measuring mathematical performance: subtraction

Waves: 4, 5, 6	Question text	Response options
CF108	Now let's try some subtraction of numbers. One hundred minus 7 equals what?	Open answer
CF109	And 7 from that	Open answer
CF110	And 7 from that	Open answer
CF111	And 7 from that	Open answer
CF112	And 7 from that	Open answer

Table 19: Measuring mathematical performance: percentage

Waves: 1, 2, 4, 5, 6	Question text	Response options (not allowed to be read out by interviewer)
CF012	If the chance of getting a disease is 10	1. 100
	per cent, how many people out of	2. 10
	1,000 (one thousand) would be	3. 90
	expected to get the disease?	4. 900
		97. Other answer
CF013	In a sale, a shop is selling all items at	1. 150
	half price. Before the sale, a sofa costs	2. 600
	300 [currency]. How much will it cost in	97. Other answer
	the sale?	
CF014	A second hand car dealer is selling a car	1. 9,000
	for 6,000 [currency]. This is two-thirds	2. 4,000

	of what it costs new. How much did the	3. 8,000
	car cost new?	4. 12,000
		5. 18,000
		97. Other answer
CF015	Let's say you have 2000 [currency] in a	1. 2420
	savings account. The account earns ten	2. 2020
	per cent interest each year. How much	3. 2040
	would you have in the account at the	4. 2100
	end of two years?	5. 2200
		6. 2400
		97. Other answer

Folstein, M. F., Folstein, S. E., & McHugh, P. R. (1975). "Mini-mental state": a practical method for grading the cognitive state of patients for the clinician. *Journal of Psychiatric Research*, 12(3), 189-198.

3. 10-words recall test

Definition

The 10-words recall test is used to assess cognitive impairment and dementia (Harris & Dowson, 1982). Recall tests are tests of memory performance in which the respondents are presented with stimuli that they are asked to remember after a delay time (Goldstein, 2011). The format of the 10-words recall test used in SHARE is based on the Telephone Interview of Cognitive Status-Modified (TICS-M) (Brandt et al., 1988).

Operationalisation in SHARE

The test consists of verbal registration and recall of a list of 10 words. The respondent listens to a list of words once and gets tested two times, once immediately after the encoding phase (first trial) and once after a delay time (delayed recall). The total scores of the two tests range from 0 to 10 and correspond to the number of words the respondent is able to recall.

In Waves 1 and 2, all respondents get the same list of words for verbal registration and recall. In Waves 4, 5 and 6, there are different lists of words which are randomized and assigned to the respondents. From Wave 4 onwards, SHARE provides the two 10-words list learning variables from the immediate recall (cf008tot) and the delayed recall (cf016tot) as generated variables in the gv_health module.

Table 20: Assessing cognitive impairment and dementia

Waves: 1, 2	Waves: 4, 5, 6	Question text	Response options
CF007	CF007	Now, I am going to read a list of	1. Continue
		words from my computer screen. We	
		have purposely made the list long so	
		it will be difficult for anyone to recall	
		all the words. Most people recall just	
		a few. Please listen carefully, as the	
		set of words cannot be repeated.	
		When I have finished, I will ask you to	
		recall aloud as many of the words as	
		you can, in any order. Is this clear?	
CF008		Now please tell me all the words you	1. Butter
		can recall.	2. Arm
			3. Letter
			4. Queen
			5. Ticket
			6. Grass
			7. Corner
			8. Stone
			9. Book
			10. Stick
			96. None of these
	CF104	Now please tell me all the words you	1. Hotel
	CITOT	can recall.	2. River
		can recan.	3. Tree
			4. Skin
			5. Gold
			6. Market
			7. Paper
			8. Child
			9. King
			10. Book
	CF10F	Now place tell me all the words	96. None of these
	CF105	Now please tell me all the words you can recall.	1. Sky 2. Ocean
		Can recail.	
			3. Flag
			4. Dollar
			5. Wife
			6. Machine
			7. Home
			8. Earth
			9. College
			10. Butter
			96. None of these

Waves: 1, 2	Waves: 4, 5, 6	Question text	Response options
	CF106	Now please tell me all the words you	1. Woman
		can recall.	2. Rock
			3. Blood
			4. Corner
			5. Shoes
			6. Letter
			7. Girl
			8. House
			9. Valley
			10. Engine
			96. None of these
	CF107	Now please tell me all the words you	1. Water
		can recall.	2. Church
			3. Doctor
			4. Palace
			5. Fire
			6. Garden
			7. Sea
			8. Village
			9. Baby
			10. Table
			96. None of these
CF016		A little while ago, I read you a list of	1. Butter
		words and you repeated the ones you	2. Arm
		could remember. Please tell me any	3. Letter
		of the words that you can remember	4. Queen
		now?	5. Ticket
			6. Grass
			7. Corner
			8. Stone
			9. Book
			10. Stick
			96. None of these
	CF113	A little while ago, I read you a list of	1. Hotel
		words and you repeated the ones you	2. River
		could remember. Please tell me any	3. Tree
		of the words that you can remember	4. Skin
		now?	5. Gold
			6. Market
			7. Paper
			8. Child
			9. King
			10. Book
			96. None of these

Waves: 1, 2	Waves: 4, 5, 6	Question text	Response options
	CF114	A little while ago, I read you a list of	1. Sky
		words and you repeated the ones you	2. Ocean
		could remember. Please tell me any	3. Flag
		of the words that you can remember	4. Dollar
		now?	5. Wife
			6. Machine
			7. Home
			8. Earth
			9. College
			10. Butter
			96. None of these
	CF115	A little while ago, I read you a list of	1. Woman
		words and you repeated the ones you	2. Rock
		could remember. Please tell me any	3. Blood
		of the words that you can remember	4. Corner
		now?	5. Shoes
			6. Letter
			7. Girl
			8. House
			9. Valley
			10. Engine
			96. None of these
	CF116	A little while ago, I read you a list of	1. Water
		words and you repeated the ones you	2. Church
		could remember. Please tell me any	3. Doctor
		of the words that you can remember	4. Palace
		now?	5. Fire
			6. Garden
			7. Sea
			8. Village
			9. Baby
			10. Table
			96. None of these

Brandt, J., Spencer, M., & Folstein, M. (1988). The telephone interview for cognitive status. *Cognitive and Behavioural Neurology*, 1(2), 111-118.

Goldstein, B. (2011). *Cognitive Psychology: Connecting Mind, Research, and Everyday Experience (3rd ed.).* Belmont, CA: Wadsworth.

Harris, S. J., & Dowson, J. H. (1982). Recall of a 10-word list in the assessment of dementia in the elderly. *The British Journal of Psychiatry*, *141*, 524-527.

4. Verbal fluency

Definition

Verbal fluency is a test of executive function and thereby an indicator of cognitive impairment, especially in old age (Rosen, 1980). "Animals" is the most popular semantic category due to the advantage that it is clear enough across languages and cultures (see Ardila et al., 2006; Henley, 1969). Thus, it is used in SHARE.

Operationalisation in SHARE

It is measured by one item in SHARE, the category or semantic verbal fluency test. Respondents have to say as many words as possible from a semantic category in 60 seconds. As performance measure the total number of correct words is counted and stored in variable cf010.

Table 21: Measuring cognitive impairment

Waves: 1, 2, 4, 5, 6	Question text	Response options
CF009	Now I would like you to name as many different animals as you can think of. You	1. Continue
	have one minute to do this.	
	Ready, go.	
CF010	Verbal fluency score	0 - 100

References

Ardila, A., Ostrosky-Solís, F., & Bernal, B. (2006). Cognitive testing toward the future: The example of Semantic Verbal Fluency (ANIMALS). *International Journal of Psychology*, *41*(5), 324-332.

Henley, N. M. (1969). A psychological study of the semantics of animal terms. *Journal of Verbal Learning and Verbal Behaviour*, 8(2), 176-184.

Rosen, W. G. (1980). Verbal fluency in aging and dementia. *Journal of Clinical and Experimental Neuropsychology*, 2(2), 135-146.

IV. Occupational measures

1. Effort-Reward Imbalance (ERI) questionnaire

Definition

The Effort-Reward Imbalance Model (Siegrist, 1996) focuses on perceived reciprocity in working life and claims that an imbalance between costs and gains, i.e. high effort/ low reward, causes distress. The questionnaire developed on the basis of the ERI Model (Siegrist et al., 2004), measures the respondents' efforts and received rewards in the job context. To calculate the Effort-Reward ratio, the effort score is put in the numerator and the reward score in the denominator. This ratio is multiplied with a correction factor, adjusting for the different numbers of items of the two scales (effort/ reward * correction factor) (e.g. Hoven et al., 2015; Siegrist et al., 2014).

Operationalisation in SHARE

7 out of the 23 items were selected on the basis of psychometric properties and are presented in SHARE as statements which respondents assess on a four point Likert scale (from "strongly agree" to "strongly disagree").

Table 22: Measuring the respondents' efforts and received rewards in the job context

Waves: 1, 2, 4, 5, 6	Question text	
EP027	My job is physically demanding.	
EP028	I am under constant time pressure due to a heavy workload.	
EP031	I receive adequate support in difficult situations.	
EP032	I receive the recognition I deserve for my work.	
EP033	Considering all my efforts and achievements, my salary is/ my	
	earnings are adequate.	
EP034	My job promotion prospects/ prospects for job advancement/ job	
	promotion prospects are poor.	
EP035	My job security is poor.	

References

Hoven, H., Wahrendorf, M., & Siegrist, J. (2015). Occupational position, work stress and depressive symptoms: a pathway analysis of longitudinal SHARE data. *Journal of epidemiology and community health*.

Siegrist, J. (1996). Adverse health effects of high-effort/low-reward conditions. *Journal of Occupational Health Psychology*, 1(1), 27.

Siegrist, J., Starke, D., Chandola, T., Godin, I., Marmot, M., Niedhammer, I., & Peter, R. (2004). The measurement of effort-reward imbalance at work: European comparisons. *Social Science & Medicine*, *58*(8), 1483-1499.

Siegrist, J., Li, J., & Montano, D. (2014). *Psychometric properties of the Effort-Reward Imbalance Questionnaire*. Department of Medical Sociology, Dusseldorf University, Germany.

2. International Standard Classification of Occupations (ISCO)

Definition

The International Standard Classification of Occupations (International Labour Organization, 2004) is a socio-economic classification system which organizes occupations into groups that allow for international comparisons. Adjusted and improved ISCO versions are adopted every few years.

Operationalisation in SHARE

In SHARE, ISCO-88 (adopted in 1988) and ISCO-08 (adopted in 2008) are used. In Wave 1, ISCO-88 is used to code respondents' answers about their first and second job, their last job, their former partner's job, their mother's job and their father's job. The answers are given on an open question format without response options and get encoded afterwards with a 4-digit using the major, sub-major, minor, and unit groups of the ISCO-88. In addition, there are codes for special values. SHARE provides the variables of the respondent's first job (isco_1job), the respondent's second job (isco_2job), the respondent's last job (isco_ljob), the former partner's job (isco_exp), the mother's job (isco_mo) and the father's job (isco_fa) as generated variables (see gv_isco module).

In Wave 2, 4 and 5, ISCO-88 is used to code respondents' answers about their first job and their last job using the ten major groups of the ISCO-88 as response options.

In Wave 3, ISCO-88 is used to code respondents' answers about their (first) job and the household's main breadwinner's job when the respondent was 10 years old using the ten major groups of the ISCO-88 as response options.

In Wave 6, ISCO-08 is used to code respondents' answers about their first job, their last job, their former partner's job, their mother's job and their father's job using the major, submajor, minor, and unit groups. Thus, the answer is automatically encoded with a 4-digit code of the ISCO-08.

Table 23: Classification of respondents' job

Wave: 1	Question text
EP016_1	What is your main job called? Please give the exact name or title.
EP16_2	What is your secondary job called? Please give the exact name or title.
EP052	Last job – What was your job called? Please give the exact name or
	title.
DN025	What is the most recent job your ex-/late husband/wife had? Please
	give the exact description.
DN029_1	What is or was the last job your mother had? Please give the exact
	description.
DN029_2	What is or was the last job your father had? Please give the exact
	description.

Waves: 2, 4, 5	Question text	Response options
EP016	Current main job –	1. Legislator, senior official or manager
	Please look at card^	2. Professional
	SHOWCARD_ID.	3. Technician or associate professional
	What best describes	4. Clerk
	this job?	5. Service worker and shop and market sales
		worker
		6. Skilled agricultural or fishery worker
		7. Craft and related trades worker
		8. Plant and machine operator or assembler
		9. Elementary occupation
		10. Armed forces
EP052	Last job –	1. Legislator, senior official or manager
	Please look at card	2. Professional
	^SHOWCARD_ID.	3. Technician or associate professional
	What best describes	4. Clerk
	this job?	5. Service worker and shop and market sales
		worker
		6. Skilled agricultural or fishery worker
		7. Craft and related trades worker
		8. Plant and machine operator or assembler
		9. Elementary occupation
		10. Armed forces

Wave: 3	Question text	Response options
RE013	Please look at card	Legislator, senior official or manager
	^SHOWCARD_ID.	2. Professional
	What best describes	3. Technician or associate professional
	your job as?	4. Clerk
		5. Service worker and shop and market sales
		worker
		6. Skilled agricultural or fishery worker
		7. Craft and related trades worker
		8. Plant and machine operator or assembler
		9. Elementary occupation
		10. Armed forces
CS009	Please look at card	1. Legislator, senior official or manager
	^SHOWCARD_ID.	2. Professional
	What best describes	3. Technician or associate professional
	the occupation of	4. Clerk
	the household's	5. Service worker and shop and market sales
	main breadwinner	worker
	when you were 10?	6. Skilled agricultural or fishery worker
		7. Craft and related trades worker
		8. Plant and machine operator or assembler
		9. Elementary occupation
		10. Armed forces

Wave: 6	Question text	Response options
EP616	Current main job – What is this job called? Please give the exact name or title.	JobCode
EP152	Last job – What is this job called? Please give the exact name or title.	JobCode
EX603	What is the most recent job your husband/ wife/ partner had?	JobCode
DN029_1	What was the job your mother/ father had when you were about 10 years old? Please give the exact name or title.	JobCode
DN029_2	What was the job your mother/ father had when you were about 10 years old? Please give the exact name or title.	JobCode

International Labour Organization (2004). *ISCO – International Standard Classification of Occupations*. Retrieved from http://www.ilo.org/public/english/bureau/stat/isco/intro.htm

3. Statistical Classification of Economic Activities in the European Community (NACE)

Definition

The Statistical Classification of Economic Activities in the European Community, referred to as NACE (from the French term "Nomenclature statistique des activités économiques dans la Communauté européenne"), is the industry standard classification system used in the European Union.

Operationalisation in SHARE

In SHARE, the NACE Version 4 Rev. 1 1993 (EUROSTAT, 1996) is used in a modified, summarized form to code respondents' answers about the corresponding industry to their job. SHARE is using broader, fewer categories for the industry codes than NACE does and employs some additional general categories and categories for missing values.

NACE uses four hierarchical levels. Level 1 sections get identified by alphabetical letters, level 2 divisions by two-digit numerical codes, level 3 groups by three-digit numerical codes, and level 4 classes by four-digit numerical codes. The levels go from a specific description of the industry to a broad description of the industry numerically downwards.

In Wave 1, the modified NACE codes are used to classify the industry in which the respondent is pursuing his/ her profession. This is split into two string variables, depending on the respondent's employment status (employed or self-employed). The answers are given on an open question format without response options and get identified afterwards with a 2-digit or 4-digit numerical code. SHARE provides the information of the NACE code of the two respective string questions combined in one variable about the respondent's first job (nace_1job), second job (nace_2job) and last job (nace_ljob) as generated variables, and the corresponding English descriptions of the respective NACE codes (ind_1job, ind_2job and ind ljob) (see gv isco module).

In Wave 2, 4, 5 and 6, the modified NACE codes are used to classify the respondents' answers about the corresponding industries to their current main job and their last job using 14 broad sections as response options.

In Wave 3, the modified NACE codes are used to classify the respondents' answers about the corresponding industries to their jobs using 14 broad sections as response options.

Table 24: Classification of industries

Wave: 1	Question text	
EP018_1	Employed, main job –	
	What kind of business, industry or services do you work in (that is,	
	what do they make or do at the place where you work)?	
EP18_2	Employed, secondary job –	
	What kind of business, industry or services do you work in (that is,	
	what do they make or do at the place where you work)?	
EP054	Employed, last job –	

	What kind of business, industry or services did you work in (that is,	
	what did they make or do at the place where you worked)?	
EP023_1	Self-employed, main job –	
	What kind of business or industry are you in (that is, what do you	
	make or do at the place where you work)?	
EP023_2	Self-employed, secondary job –	
	What kind of business or industry are you in (that is, what do you	
	make or do at the place where you work)?	
EP060	Self-employed, last job –	
	What kind of business or industry were you in (that is, what did you	
	make or do at the place where you worked)?	

Waves: 2, 4, 5, 6	Question text	Response options
EP018	Current main job –	1. Agriculture, hunting, forestry,
	Please look at card	fishing
	^SHOWCARD_ID. What kind of	2. Mining and quarrying
	business, industry or services	3. Manufacturing
	do you work in?	4. Electricity, gas and water supply
		5. Construction
		6. Wholesale and retail trade;
		repair of motor vehicles,
		motorcycles and personal and
		household goods
		7. Hotels and restaurants
		8. Transport, storage and
		communication
		9. Financial intermediation
		10. Real estate, renting and
		business activities
		11. Public administration and
		defence; compulsory social security
		12. Education
		13. Health and social work
		14. Other community, social and
		personal service activities
EP054	Last job –	1. Agriculture, hunting, forestry,
	Please look at card	fishing
	^SHOWCARD_ID. What kind of	2. Mining and quarrying
	business, industry or services	3. Manufacturing
	did you work in?	4. Electricity, gas and water supply
		5. Construction
		6. Wholesale and retail trade;
		repair of motor vehicles,
		motorcycles and personal and
		household goods
		7. Hotels and restaurants
		8. Transport, storage and

	communication
	9. Financial intermediation
	10. Real estate, renting and
	business activities
	11. Public administration and
	defence; compulsory social security
	12. Education
	13. Health and social work
	14. Other community, social and
	personal service activities

Wave: 3	Question text	Response options
RE014	Please look at card	1. Agriculture, hunting, forestry,
	^SHOWCARD_ID. What kind of	fishing
	business, industry or services	2. Mining and quarrying
	were you working in as	3. Manufacturing
	?	4. Electricity, gas and water supply
		5. Construction
		6. Wholesale and retail trade;
		repair of motor vehicles,
		motorcycles and personal and
		household goods
		7. Hotels and restaurants
		8. Transport, storage and
		communication
		9. Financial intermediation
		10. Real estate, renting and
		business activities
		11. Public administration and
		defence; compulsory social security
		12. Education
		13. Health and social work
		14. Other community, social and
		personal service activities

EUROSTAT (1996). *NACE Rev. 1, Statistical classification of economic activities in the European Community.* Luxembourg: Office for Official Publications of the European Communities.

V. Educational measures

1. International Standard Classification of Education (ISCED)

Definition

The International Standard Classification of Education (ISCED) is a statistical standard coding of education for international and national comparisons, maintained by the UNESCO. The ISCED is organized in hierarchical education levels. SHARE uses country specific codes based on the revised versions ISCED-97 (UNESCO, 2006) and ISCED-11 (UNESCO, 2012). Due to the importance of the duration criteria of educational programs for classification, SHARE also asks about years of education derived from the ISCED.

Operationalisation in SHARE

In Wave 1, the ISCED-97 is used to code the educational level of the respondent, the respondent's former spouse (divorced, widowed, living separated), up to four selected children of the respondent and the interviewer. The response options are country specific categories which are comparable across all SHARE countries. SHARE provides the variables about the education of the respondent (*isced1997_r*), the respondent's former spouse (*isced1997_sp*), the respondent's selected child 1 (*isced1997_c1*), the respondent's selected child 2 (*isced1997_c2*), the respondent's selected child 3 (*isced1997_iv*) as generated variables in the gv_isced module. The duration of education is derived from the ISCED-97 coding of the aforementioned variables. SHARE provides the years of education of the respondent (*iscedy_r*), the respondent's former spouse (*iscedy_sp*), the respondent's selected child 1 (*iscedy_c1*), the respondent's selected child 2 (*iscedy_c2*), the respondent's selected child 3 (*iscedy_c3*), the respondent's selected child 4 (*iscedy_c4*) and of the interviewer (*iscedy_i*) as generated variables.

In Wave 2, the ISCED-97 is used to code the educational level of the respondent, the respondent's former spouse (divorced, widowed, living separated) and up to four selected children of the respondent. The response options are country specific categories which are comparable across all SHARE countries. Additionally, the years of education of the respondent and his/ her former spouse are asked. SHARE provides the variables about the education of the respondent (*isced1997_r*), the respondent's former spouse (*isced1997_sp*), the respondent's selected child 1 (*isced1997_c1*), the respondent's selected child 2 (*isced1997_c2*), the respondent's selected child 3 (*isced1997_c3*) and the respondent's selected child 4 (*isced1997_c4*) as generated variables in the gv_isced module.

In Wave 4, the ISCED-97 is used to code the educational level of the respondent, the respondent's former spouse (divorced, widowed, living separated) and all the children of the respondent. The response options are country specific categories which are comparable

across all SHARE countries. Additionally, the years of education of the respondent and his/ her former spouse are asked. SHARE provides the variables about the education of the respondent (*isced1997_r*), the respondent's former spouse (*isced1997_sp*) and all of the respondent's children 1-20 (*isced1997_c1-c20*) as generated variables (see gv_isced module).

In Wave 5 and 6, both ISCED versions, the ISCED-97 and the ISCED-11, are used to code the educational level of the respondent, the respondent's former spouse (divorced, widowed, living separated), all the children of the respondent, the respondent's father and the respondent's mother. The response options are country specific categories which are comparable across all SHARE countries. In Wave 5, additionally, the years of education of the respondent and his/ her former spouse are asked. In Wave 6, additionally, the years of education of the respondent are asked, and if the respondent has already participated once, he or she is asked if their child or any of their children obtained a new educational degree since the last interview and if so, which one.

SHARE provides the variables about the education of the respondent (*isced1997_r*; *isced_2011_r*), the respondent's former spouse (*isced1997_sp*; *isced2001_sp*), all of the respondent's children (*isced1997_c1-c18*; *isced2011_c1-c18*), the respondent's mother (*isced1997_m*; *isced2011_m*) and the respondent's father (*isced1997_f*; *isced2011_f*) as generated variables in the gv_isced module.

Table 25: Measuring education

Wave: 1	Waves: 2, 4	Wave: 5	Wave: 6	Question text
DN010	DN010	DN010	DN010	Please look at card ^SHOWCARD_ID.
				What is the highest school leaving
				certificate or school degree that you
				have obtained?
DN012	DN012	DN012	DN012	Please look at card ^SHOWCARD_ID.
				Which degrees of higher education or
				vocational training do you have?
DN021	DN021	DN021	DN021	Please look at card ^SHOWCARD_ID.
				What is the highest school certificate
				or degree that your ex-/ late
				husband/ wife has obtained?
DN023	DN023	DN023	DN023	Please look at card ^SHOWCARD_ID.
				Which degrees of higher education or
				vocational training does your ex-/ late
				husband/wife have?
		DN051_1	DN051_1	Please look at card ^SHOWCARD_ID.
				What is the highest school certificate
				or degree that your mother has
				obtained?

Wave: 1	Waves: 2, 4	Wave: 5	Wave: 6	Question text
		DN051_2	DN051_2	Please look at card ^SHOWCARD_ID. What is the highest school certificate or degree that your father has obtained?
		DN053_1	DN053_1	Please look at card ^SHOWCARD_ID. Which degrees of higher education or vocational training does your mother have?
		DN053_2	DN053_2	Please look at card ^SHOWCARD_ID. Which degrees of higher education or vocational training does your mother have?
CH017	CH017	CH017	CH017	Please look at card ^SHOWCARD_ID. What is the highest school leaving certificate or school degree has obtained?
CH018	CH018	CH018	CH018	Please look at card ^SHOWCARD_ID. Which degrees of higher education or vocational training does have?
			CH510	What is the highest school leaving certificate or school degree that has obtained?
			CH513	Which degrees of higher education or vocational training has obtained?
IV015				Interviewer – What is the highest school certificate or degree that you have obtained?
IV016				Interviewer – Which degrees of higher education or vocational training do you have?
	DN041	DN041	DN041	How many years have you been in full time education?
	EX102	EX102		How many years has your husband/ wife /partner been in full time education?

UNESCO (2006). *International Standard Classification of Education: ISCED 1997.* Retrieved from http://www.uis.unesco.org/Library/Documents/isced97-en.pdf

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VI. Other

1. Multi-Item Indicator Residential Environment Quality

Definition

The PREQ covers many different facets about respondents' perception of residential environment quality within their neighbourhoods (Bonaiuto et al., 1999; Bonaiuto et al., 2003). It compromises spatial aspects (e.g. architectural planning space, organization and accessibility of space), human aspects (e.g. social relations), functional aspects (e.g. public transportation), and contextual aspects (e.g. environmental health).

Operationalisation in SHARE

The respondents' perception of different aspects in their local area is measured by four items in Wave 5 and 6, and in Wave 5 additionally, the access to some basic services is measured by four items. The items are partially based on the multidimensional perceived residential environment quality (PREQ) questionnaire.

Table 26: Respondents' perception of residential environment quality

Wave: 5	Wave: 6	Question text	Response options
HH022	HH022	I really feel part of this area.	1. Strongly agree
			2. Agree
			3. Disagree
			4. Strongly disagree
HH023	HH023	Vandalism or crime is a big problem	1. Strongly agree
		in this area.	2. Agree
			3. Disagree
			4. Strongly disagree
HH024	HH024	This area is kept very clean.	1. Strongly agree
			2. Agree
			3. Disagree
			4. Strongly disagree
HH025	HH025	If I were in trouble, there are people	1. Strongly agree
		in this area who would help me.	2. Agree
			3. Disagree
			4. Strongly disagree
HH027		How easy is it to get to the nearest	1. Very easy
		bank or cash point?	2. Easy
			3. Difficult
			4. Very difficult
HH028		How easy is it to get to the nearest	1. Very easy
		grocery shop or supermarket?	2. Easy
			3. Difficult
			4. Very difficult
HH029		How easy is it to get to your general	1. Very easy

	practitioner or the nearest health	2. Easy
	centre?	3. Difficult
		4. Very difficult
HH030	How easy is it to get to the nearest	1. Very easy
	pharmacy?	2. Easy
		3. Difficult
		4. Very difficult

Bonaiuto, M., Aiello, A., Perugini, M., Bonnes, M., & Ercolani, A. P. (1999). Multidimensional perception of residential environment quality and neighbourhood attachment in the urban environment. *Journal of Environmental Psychology*, 19, 331-352.

Bonaiuto, M., Fornara, F., & Bonnes, M. (2003). Indexes of perceived residential environment quality and neighbourhood attachment in urban environments: a confirmation study on the city of Rome. *Landscape and Urban Planning*, 65(1), 41-52.

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