

WHI Form 151-B - Activities of Daily Life

Please complete the survey below.

Thank you!

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

- ☐ Excellent
- ☐ Very good
- ☐ Good
- ☐ Fair
- ☐ Poor

/total

2. Overall, how would you rate your quality of life?

- ☐ 0 Worst - As bad or worse than being dead
- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5 Halfway
- ☐ 6
- ☐ 7
- ☐ 8
- ☐ 9
- ☐ 10 Best - Best quality of life

/total

3. Please think about your current level of well-being. When you think about well-being, think about your physical health, your emotional health, any challenges you are experiencing, the people in your life, and the opportunities or resources you have available to you. How would you describe your current level of well-being?

- ☐ Excellent
- ☐ Very good
- ☐ Good
- ☐ Fair
- ☐ Poor
- ☐ Very poor

/total

4. What is your current weight? (In pounds)

4.1 Have you lost more than 10 pounds in the past 2 years?

- ☐ No
- ☒ Yes

/total

4.1.1 Were you trying to lose weight?

- ☐ No
- ☐ Yes

/total

4.2 Have you gained more than 10 pounds in the past 2 years?

- ☐ No
- ☒ Yes

/total

4.2.1 Were you trying to gain weight?

- ☐ No
- ☐ Yes

/total

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This next set of questions are about a typical (or usual) day's activities. Does your health now limit you in these activities and, if so, how much?

	No, not limited at all	Yes, limited a little	Yes, limited a lot	
5. Vigorous activities, such as running, lifting heavy objects, or strenuous sports	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	reset
6. Moderate activities, such as moving a table, vacuuming, bowling, or golfing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	reset
7. Lifting or carrying groceries	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	reset
8. Climbing several flights of stairs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	reset
9. Climbing one flight of stairs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	reset
10. Bending, kneeling, stooping	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	reset
11. Walking more than a mile	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	reset
12. Walking several blocks	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	reset
13. Walking one block	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	reset
14. Bathing or dressing yourself	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	reset

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In the past 7 days...

	Not at all	A little bit	Somewhat	Quite a bit	Very much	
18.1 How much did pain interfere with your day to day activities?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	reset
18.2 How much did pain interfere with work around the home?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	reset
18.3 How much did pain interfere with your ability to participate in social activities?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	reset
18.4 How much did pain interfere with your household chores?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	reset
19. In the <u>past 7 days</u> , how would you rate your pain on average? <div style="display: flex; align-items: flex-start;"> <div style="margin-right: 20px;"> <input type="radio"/> 0 No pain <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> 7 <input type="radio"/> 8 <input type="radio"/> 9 <input type="radio"/> 10 Worse imaginable pain </div> <div>reset</div> </div>						

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This next set of questions ask about how much help (if any) you need to do routine activities for yourself. Help can be defined as getting assistance from another person or using a device.

	By myself without help	With some help	Completely unable to do this by myself	
20. Can you feed yourself?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	reset
21. Can you dress and undress yourself?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	reset
22. Can you get in and out of bed yourself?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	reset
23. Can you take a bath or shower?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	reset
24. Can you do your own grocery shopping?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	reset
25. Can you keep track of and take your medicines?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	reset

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The next questions ask about companionship.

	Hardly ever	Some of the time	Often	
26.1 How often do you feel that you lack companionship?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	reset
26.2 How often do you feel left out?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	reset
26.3 How often do you feel isolated from others?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	reset
27. Do you live alone?	<input type="radio"/> No <input type="radio"/> Yes			reset
28. Please mark the circle that best describes your current living arrangement:	<input type="radio"/> Independently in the community (for example in your home or apartment) <input type="radio"/> With a family member other than your spouse, such as a sibling or daughter/son <input type="radio"/> In an assisted living facility <input type="radio"/> In a skilled nursing facility <input type="radio"/> Other type of living arrangement			reset
29. Does the place (home, apartment, assisted living facility) where you live have special services for older people (such as help with transportation, meals, medicines, or bathing)?	<input type="radio"/> No <input checked="" type="radio"/> Yes			reset
29.1 Are you currently receiving any of these services?	<input type="radio"/> No <input type="radio"/> Yes			reset
30. In the past year, have you stayed in a nursing home?	<input type="radio"/> No <input type="radio"/> Yes			reset

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This next set of questions are about some hard things that sometimes happen to people. Please try to think back over the past year to remember if any of these things happened.

(Mark the answer that seems best.)

Over the past year:

	No	Yes, and it upset me: Not too much	Yes, and it upset me: Moderately (Medium)	Yes, and it upset me: Very much
31. Did your spouse or partner have a serious illness?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
32. Did a close friend or family member die or have a serious illness (other than your spouse or partner)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
33. Did you have any major problems with money?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
34. Did you have a divorce or break-up with a spouse or partner?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
35. Did a family member or close friend have a divorce or break-up?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
36. Did you have a major conflict with children or grandchildren?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
37. Did you have any major accidents, disasters, mugging, unwanted sexual experiences, robberies, or similar events?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
38. Did you or a family member or close friend lose their job or retire?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
39. Were you physically abused by being hit, slapped, pushed, shoved, punched or threatened with a weapon by a family member or close friend?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
40. Were you verbally abused by being made fun of, severely criticized, told you were a stupid or worthless person, or threatened with harm to yourself, your possessions, or your pets, by a family member or close friend?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
41. Did a pet die?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
42. Did your spouse or partner die?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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Since you answered Yes to Question 42, mark the answer that best describes how you feel right now about the person who died.

	Never	Rarely	Sometimes	Often	Always
42.1 I feel myself longing or yearning for my spouse or partner who died-I miss them so much it's hard to care about anything else.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
42.2 I think about this person so much that it's hard for me to do the things I normally do.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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Please answer the following questions about yourself. Try not to let an answer to one question affect your answer to other questions.

	Strongly disagree	Disagree	Neutral (In-between)	Agree	Strongly Agree	
43.1 In unclear times, I usually expect the best.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
						reset
43.2 If something can go wrong for me, it will.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
						reset
43.3 I'm always hopeful about my future.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
						reset
43.4 I hardly ever expect things to go my way.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
						reset
43.5 I rarely count on good things happening to me.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
						reset
43.6 Overall, I expect more good things to happen to me than bad.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
						reset

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This set of questions asks you to think about the future.

	Absolutely Agree	Somewhat Agree	Neutral (In-between)	Somewhat Disagree	Absolutely Disagree	
44.1 I feel that it is impossible to reach the goals I would like to strive for.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
						reset
44.2 The future seems to me to be hopeless, and I can't believe that things are changing for the better.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
						reset
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Rate how intensely you felt each emotion during the past 24 hours.

	Not at all	A little bit	Moderately	A great deal	Extremely	
45.1 Amusement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
45.2 Awe	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	reset
45.3 Gratitude	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	reset
45.4 Hope	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	reset
45.5 Interest	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	reset
45.6 Joy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	reset
45.7 Love	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	reset
45.8 Pride	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	reset
45.9 Serenity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	reset

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Questions 46-51 ask about your feelings during the past week. For each of the statements, indicate the choice that tells how often you felt this way.

	Rarely or none of the time (less than 1 day)	Some or a little of the time (1-2 days)	Occasionally or a moderate amount of time (3-4 days)	Most or all of the time (5-7 days)	
46. You felt depressed (blue or down)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
47. Your sleep was restless	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	reset
48. You enjoyed life	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	reset
49. You had crying spells	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	reset
50. You felt sad	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	reset
51. You felt that people disliked you	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	reset
52. In the past year, have you had <u>2 weeks</u> or more during which you felt sad, blue or depressed, or lost pleasure in things that you usually cared about or enjoyed?	<input checked="" type="radio"/> No <input type="radio"/> Yes				reset
53. Have you had <u>2 years</u> or more in your life when you felt depressed or sad most days, even if you felt okay sometimes?	<input type="radio"/> No <input checked="" type="radio"/> Yes				reset
53.1 Have you felt depressed or sad much of the time in the past year?	<input type="radio"/> No <input type="radio"/> Yes				reset

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This next set of questions are about emotions you may have been feeling.

How true have the following been for you in this past week (7 days)?

	Not at all	A little bit	Somewhat	Quite a bit	Very much
54. I am not interested in activities that will expand my horizons.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
55. I think it is important to have new experiences that challenge how you think about yourself and the world.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
56. When I think about it, I haven't really improved much as a person over the years.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
57. I have the sense that I have developed a lot as a person over time.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
58. For me, life has been a continuous process of learning, changing, and growth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
59. I gave up trying to make big improvements or changes in my life a long time ago.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
60. I do not enjoy being in new situations that require me to change my old familiar ways of doing things	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
61. I live life one day at a time and don't really think about the future.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
62. I have a sense of direction and purpose in life.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
63. I don't have a good sense of what it is I'm trying to accomplish in life.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
64. My daily activities often seem trivial and unimportant to me.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
65. I enjoy making plans for the future and working to make them a reality.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
66. I am an active person in carrying out the plans I set for myself.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
67. Some people wander aimlessly through life, but I am not one of them.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

68. I sometimes feel as if I've done all there is to do in life.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	reset
69. I felt peaceful.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	reset
70. I had a reason for living.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	reset
71. My life has been productive.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	reset
72. I had trouble feeling peace of mind.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	reset
73. I felt a sense of purpose in my life.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	reset
74. I was able to reach down deep into myself for comfort.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	reset
75. I felt a sense of harmony within myself.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	reset
76. My life lacked meaning and purpose.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	reset
77. I found comfort in my faith or spiritual beliefs.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	reset
78. I found strength in my faith or spiritual beliefs.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	reset
79. I am always hopeful about my future.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	reset

Final Instructions

This is the last page of the form. Once you click the Submit button below, your responses will be sent to the WHI Clinical Coordinating Center. Therefore, please take a moment to review your answers and any questions you may have missed.

You may receive a follow-up call to clarify your answers on this form.

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