



Health Questionnaire

(Exemplary extract)

German Health
Interview and
Examination
Survey for Adults

Personal details

1 When were you born?

X	X			1	9		
Day		Month		Year			

2 What is your sex?

Male Female

3 How is your health in general?

Very good Good Fair Bad Very bad

4 Do you have any long standing chronic illness?

Chronic illnesses are long-term illnesses necessitating constant treatment and monitoring, e. g. diabetes or heart diseases.

Yes No Don't know

5 For at least the past six months, to what extent have you been limited because of a health problem in activities people usually do?

Severely limited

Limited but not severely.....

Not limited at all

Don't know

9 Please state how many times in the last 12 months you have seen an office-based doctor practicing in the following fields.
Please include house calls.

	Yes	Number of times
General practitioner	<input type="radio"/>	<input style="width: 20px; height: 20px; border: 1px solid black; border-collapse: collapse; display: inline-block; vertical-align: middle;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black; border-collapse: collapse; display: inline-block; vertical-align: middle;" type="text"/>
Internist (e. g. cardiologist, pneumologist, diabetologist)	<input type="radio"/>	<input style="width: 20px; height: 20px; border: 1px solid black; border-collapse: collapse; display: inline-block; vertical-align: middle;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black; border-collapse: collapse; display: inline-block; vertical-align: middle;" type="text"/>
Gynaecologist	<input type="radio"/>	<input style="width: 20px; height: 20px; border: 1px solid black; border-collapse: collapse; display: inline-block; vertical-align: middle;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black; border-collapse: collapse; display: inline-block; vertical-align: middle;" type="text"/>
Eye specialist (Ophthalmologist)	<input type="radio"/>	<input style="width: 20px; height: 20px; border: 1px solid black; border-collapse: collapse; display: inline-block; vertical-align: middle;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black; border-collapse: collapse; display: inline-block; vertical-align: middle;" type="text"/>
Orthopaedist	<input type="radio"/>	<input style="width: 20px; height: 20px; border: 1px solid black; border-collapse: collapse; display: inline-block; vertical-align: middle;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black; border-collapse: collapse; display: inline-block; vertical-align: middle;" type="text"/>
Ear-nose-throat specialist	<input type="radio"/>	<input style="width: 20px; height: 20px; border: 1px solid black; border-collapse: collapse; display: inline-block; vertical-align: middle;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black; border-collapse: collapse; display: inline-block; vertical-align: middle;" type="text"/>
Psychiatrist, neurologist.....	<input type="radio"/>	<input style="width: 20px; height: 20px; border: 1px solid black; border-collapse: collapse; display: inline-block; vertical-align: middle;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black; border-collapse: collapse; display: inline-block; vertical-align: middle;" type="text"/>
Medical/psychological psychotherapist.....	<input type="radio"/>	<input style="width: 20px; height: 20px; border: 1px solid black; border-collapse: collapse; display: inline-block; vertical-align: middle;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black; border-collapse: collapse; display: inline-block; vertical-align: middle;" type="text"/>
Surgeon	<input type="radio"/>	<input style="width: 20px; height: 20px; border: 1px solid black; border-collapse: collapse; display: inline-block; vertical-align: middle;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black; border-collapse: collapse; display: inline-block; vertical-align: middle;" type="text"/>
Dermatologist.....	<input type="radio"/>	<input style="width: 20px; height: 20px; border: 1px solid black; border-collapse: collapse; display: inline-block; vertical-align: middle;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black; border-collapse: collapse; display: inline-block; vertical-align: middle;" type="text"/>
Radiologist.....	<input type="radio"/>	<input style="width: 20px; height: 20px; border: 1px solid black; border-collapse: collapse; display: inline-block; vertical-align: middle;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black; border-collapse: collapse; display: inline-block; vertical-align: middle;" type="text"/>
Urologist.....	<input type="radio"/>	<input style="width: 20px; height: 20px; border: 1px solid black; border-collapse: collapse; display: inline-block; vertical-align: middle;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black; border-collapse: collapse; display: inline-block; vertical-align: middle;" type="text"/>
Other specialist,	<input type="radio"/>	<input style="width: 20px; height: 20px; border: 1px solid black; border-collapse: collapse; display: inline-block; vertical-align: middle;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black; border-collapse: collapse; display: inline-block; vertical-align: middle;" type="text"/>
please specify (not including therapists):		
Dentist, orthodontist.....	<input type="radio"/>	<input style="width: 20px; height: 20px; border: 1px solid black; border-collapse: collapse; display: inline-block; vertical-align: middle;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black; border-collapse: collapse; display: inline-block; vertical-align: middle;" type="text"/>
I have not seen a doctor in the last 12 months.	<input type="radio"/>	

21 What kind of health insurance cover do you have?

Statutory health insurance.....

i. e

Allgemeine Ortskrankenkasse (AOK) (statutory health insurance).....

Ersatzkrankenkasse (e. g. Barmer, TK, DAK, KKH)
(alternative health insurance)

Betriebskrankenkasse (BKK)
(company health insurance)

Innungskrankenkasse (IKK)
(trade association health insurance)

Other insurance provider, e. g. See-Krankenkasse (maritime health insurance), Landwirtschaftliche Krankenkasse (agricultural health insurance), Knappschaft (miners' insurance), Deutsche Rentenversicherung (German pension insurance scheme), Knappschaft-Bahn-See (marine and railway insurance).....

Do you have a private supplementary insurance policy in addition to your statutory health insurance?

Yes..... No

or

Financial assistance for civil servants

Do you have a private supplementary insurance policy in addition to financial assistance for civil servants?

Yes..... No

or

Private health insurance providing full cover.....

or

Foreign health insurance

or

Other entitlement to healthcare (e. g. free medical welfare, social-welfare recipient, war-disablement pension, equalization of burdens [Lastenausgleich])

or

Not insured, self-paying patient


If you don't know which category your health insurance belongs to, please write the full name of the company you are insured with here:

Injuries and poisonings

22 Have you had medical treatment for an injury or poisoning in the last 12 months?

Yes

No

 Please proceed to question 23



If yes, how many times?

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122 Who shares your household with you?

For example: if you live together with your partner, mother and stepdaughter, enter the information as shown in the following example. Please give their age and sex.

Example:

Person	Age	Sex	
		Male	Female
1. Yourself	<input type="text"/> <input type="text"/>	<input type="radio"/>	<input type="radio"/>
2. <input type="text" value="Partner"/>	<input type="text" value="38"/>	<input checked="" type="radio"/>	<input type="radio"/>
3. <input type="text" value="Mother"/>	<input type="text" value="64"/>	<input type="radio"/>	<input checked="" type="radio"/>
4. <input type="text" value="Stepdaughter"/>	<input type="text" value="5"/>	<input type="radio"/>	<input checked="" type="radio"/>

Your details:

Person	Age	Sex	
		Male	Female
1. Yourself	<input type="text"/> <input type="text"/>	<input type="radio"/>	<input type="radio"/>
2. <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="radio"/>	<input type="radio"/>
3. <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="radio"/>	<input type="radio"/>
4. <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="radio"/>	<input type="radio"/>
5. <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="radio"/>	<input type="radio"/>
6. <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="radio"/>	<input type="radio"/>
7. <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="radio"/>	<input type="radio"/>
8. <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="radio"/>	<input type="radio"/>
9. <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="radio"/>	<input type="radio"/>
10. <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="radio"/>	<input type="radio"/>

Education

123 What is your highest general school-leaving certificate?

- Elementary school (Haupt-/Volksschule)
- Secondary school (Realschule/Mittlere Reife)/
vocational secondary school (Fachschule).....
- Polytechnic institute qualification ("Polytechnische
Oberschule" or POS), or class 10 (before 1965: 8 years)
- Technical college qualification (Fachhochschulreife/
Abschluss einer Fachoberschule)
- A-levels (Abitur), general or subject-specific qualification
for a place at university
- Other school-leaving qualification (e. g. obtained abroad)
- Left school without qualification
- Do not yet have school-leaving qualification

124 Are you currently attending a school?

- No
- Yes, and I'm aiming for:
- A lower secondary-school diploma (Hauptschule)
- An intermediate secondary-school diploma
 (Realschulabschluss/Mittlere Reife/Fachschulreife)
- Technical college qualification (Fachhochschulreife/
 Abschluss einer Fachoberschule)
- A-levels (Abitur), general or subject-specific qualification
 for a place at university
- Other school-leaving qualification

125 What is your highest professional qualification/university degree?

- Still in professional training (trainee, student, occupational orientation year)
- No professional qualification (also did not undergo training)
- I have completed a company apprenticeship (Lehre)
- I have completed vocational training in college (vocational school [Berufsfachschule], business school, preparation course for the middle grade in public administration ["mittlerer Dienst"])
- I have completed training at specialist college (e. g. master craftsman's technical college, vocational or specialist training academy)
- I have graduated from a college/university with a bachelor's degree
- I have graduated with a different degree from a technical college or an engineering college (Fachhochschule, Ingenieurschule)
- I have graduated from a university, polytechnic
- Other training qualification

126 Are you currently in vocational training or studying?

- No
- Yes, I am doing of the following:
- A company apprenticeship (Lehre)
- College training (vocational school [Berufsfachschule], business school, preparation course for the middle grade in public administration ["mittlerer Dienst"])
- Training at technical college (Fachschule, Meisterschule, Technikerschule, Berufsakademie, Fachakademie)
- A degree at college/university
- A different course of training

Career

142 Have you ever been gainfully employed?

Yes

No

➔ Please proceed to question 146

143 What is currently your main occupation/job?

If you are no longer employed, what was your most recent job in your previous main occupation?

Please describe the occupation precisely. Does this occupation/job have a particular name? Please give the exact name, i. e. not “electrician” but “electrical fitter”; not “shop assistant” but “shoe seller”; not “clerk” (Sachbearbeiter) but “accountant” (Buchhalter).

144 In which sector of the economy are you currently working (or did you last work)?

Please relate your answer as precisely as possible to the place where you are working/used to work, not to the company as a whole. For example: “machine tool manufacture” (not “factory”), “retail food trade” (not “retail trade”), “hospital” (not “services”).

145 What is your current position at work (or if you are currently unemployed, what was your last position at work)?

Worker

- Semi-skilled worker
- Qualified worker
- Qualified worker and specialist
- Supervisor, foreman (Vorarbeiter/in, Kolonnenführer/in)
- Master craftsman, brigadier (Meister/in, Polier/in, Brigadier/in)

Self-employed

Self-employed farmer or member of an agricultural cooperative (“Genossenschaftsbauer”) ...

- with up to 10 hectares in agricultural use
- with 10 or more hectares in agricultural use
- member of an agricultural cooperative

Liberal profession (doctor, lawyer, tax consultant, etc.) with ...

- no staff/colleagues
- 1–4 staff/colleagues
- 5 or more staff/colleagues

Other form of self-employment, including “Ich-AG” or “PGH” member, with ...

- no staff/colleagues
- 1–4 staff/colleagues
- 5 or more staff/colleagues
- PGH member (ex-East German cooperative)

Public servant, judge, professional soldier...

- lower grade servant (“einfacher Dienst” up to and including “Oberamtsmeister/in”)
- clerical service servant (“mittlerer Dienst” from “Assistent/in” up to and including “Hauptsekretär/in”, “Amtsinspektor/in”)
- higher grade servant (“gehobener Dienst” from “Inspektor/in” up to and including “Oberamtsrat/-rätin”)
- Senior civil servant (“höherer Dienst”, judge, professor (above “Rat/Rätin”)

Employee...

following general instructions (e.g. cashier, shop assistant, typist, janitor/doorman, etc.)

qualified job working according to instructions (e.g. clerk, accountant, engineering draughtsman)

working independently on responsible tasks or with technical responsibility for staff (e.g. research assistant ("wissenschaftliche/r Mitarbeiter/in"), "Prokurist/in", department manager, employed master craftsman)

with comprehensive managerial functions and decision-making authority (e.g. director, general manager, board member)

Assisting family member

Other (e.g. trainee/apprentice, school pupil, student, person doing military or community service, etc.)

146 Are you the main earner in your household?

The main earner is the person with the highest income (including pensions, alimony, social welfare, income from letting and leasing, and other forms of income).

Yes

No

➔ Please proceed to question 148

147 What is the main earner's current position at work (or if he/she is currently unemployed, what was his/her most recent position at work)?

Worker

- Semi-skilled worker
- Qualified worker
- Qualified worker and specialist
- Supervisor, foreman (Vorarbeiter/in, Kolonnenführer/in)
- Master craftsman, brigadier (Meister/in, Polier/in, Brigadier/in)

Self-employed

Self-employed farmer or member of an agricultural cooperative ("Genossenschaftsbauer") ...

- with up to 10 hectares in agricultural use
- with 10 or more hectares in agricultural use
- member of an agricultural cooperative

Liberal profession (doctor, lawyer, tax consultant, etc.) with ...

- no staff/colleagues
- 1–4 staff/colleagues
- 5 or more staff/colleagues

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- no staff/colleagues
- 1–4 staff/colleagues
- 5 or more staff/colleagues
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Public servant, judge, professional soldier...

- lower grade servant ("einfacher Dienst" up to and including "Oberamtsmeister/in")
- clerical service servant ("mittlerer Dienst" from "Assistent/in" up to and including "Hauptsekretär/in", "Amtsinspektor/in")
- higher grade servant ("gehobener Dienst" from "Inspektor/in" up to and including "Oberamtsrat/-rätin")
- Senior civil servant ("höherer Dienst", judge, professor (above "Rat/Rätin")

Employee...

following general instructions (e.g. cashier, shop assistant,
typist, janitor/doorman, etc.)

qualified job working according to instructions (e.g. clerk,
accountant, engineering draughtsman)

working independently on responsible tasks or with
technical responsibility for staff (e.g. research assistant
("wissenschaftliche/r Mitarbeiter/in"), "Prokurist/in",
department manager, employed master craftsman)

with comprehensive managerial functions and decision-making
authority (e.g. director, general manager, board member)

Assisting family member

**Other (e.g. trainee/apprentice, school pupil, student,
person doing military or community service, etc.)**

Income

148 What is your household's total monthly net income?

This is the sum of all wages, salaries, income from self-employed work and pensions. Please add any income from public allowances, letting and leasing, housing assistance, child benefits or other sources of income. Then deduct taxes, business expenses and social insurance contributions.

€ per month  **If you have entered an answer here, please proceed to question 149**

If you can't state the exact amount, please cross one of the categories below:

- Below € 500
- € 500 to below € 750
- € 750 to below € 1,000
- € 1,000 to below € 1,250
- € 1,250 to below € 1,500
- € 1,500 to below € 1,750
- € 1,750 to below € 2,000
- € 2,000 to below € 2,250
- € 2,250 to below € 2,500
- € 2,500 to below € 3,000
- € 3,000 to below € 3,500
- € 3,500 to below € 4,000
- € 4,000 to below € 4,500
- € 4,500 to below € 5,000
- € 5,000 to below € 6,000
- € 6,000 to below € 8,000
- € 8,000 and over

Origin

149 What is your country of birth?

Please give the name used today, even if the area used to be part of another country (e.g. "Czech Republic", not "Czechoslovakia").

In Germany (in today's borders)

In another country,

please specify:

150 How long have you been living in the Federal Republic of Germany, i. e. within today's borders (including the former East Germany [GDR])?

All my life

Since

--	--	--	--	--

151 Where were you living in 1988?

In the former East Germany

In the former West Germany

In neither of the above

152 Which country was your mother born in?

Please give the name used today, even if the area used to be part of another country.

In Germany (in today's borders)

In another country,

please specify:

153 Which country was your father born in?Please give the name used today, even if the area used to be part of another country.In Germany (in today's borders) In another country, please specify: **154 What is/are your nationality/nationalities?**

Please cross all applicable answers.

German Other(s), please specify:

➔ Please proceed to question 156

155 Do you have a ...?permanent residence permit temporary residence permit **156 What is your native language?**

Please cross all applicable answers.

German Other, please specify: **157 If German isn't your first language, how good would you say your German is?**

Very good

Good

Average

Poor

Bad

Thank you very much for answering the questions.