Instrumental Activities of Daily Living (IADLs)

Now I'm going to ask about some everyday activities and whether (you have/SP has) any difficulty <u>doing them by (yourself/himself/herself)</u>. [PRESS ENTER TO CONTINUE.]

HS27. Because of a health or physical problem, (do you/does SP) have any difficulty...	(1) using the telephone?		(2) doing light housework (like washing dishes, straightening up, or light cleaning)?		(3) doing heavy housework (like scrubbing floors or washing windows)?		(4) preparing (your/his/her) own meals?		(5) shopping for personal items (such as toilet items or medicines)?		(6) managing money (like keeping track of expenses paying bills)?	
	Yes 1	(NEXT	Yes 1	(NEXT	Yes 1	(NEXT	Yes 1	(NEXT	Yes 1	(NEXT	Yes 1	(INSTR.
	No 2	ACTIV.)	No 2	ACTIV.)	No 2	ACTIV.)	No 2	ACTIV.)	No 2	ACTIV.)	No 2	ABOVE HS29)
	DOESN'T DO 3	(HS28)	DOESN'T DO 3	(HS28)	DOESN'T DO 3	(HS28)	DOESN'T DO 3	(HS28)	DOESN'T DO 3	(HS28)	DOESN'T DO.......... 3	(HS28)
	PRBTELE		**PRBLHWK**		**PRBHHWK**		**PRBMEAL**		**PRBSHOP**		**PRBBILS**	
HS28. Is this because of a <u>health</u> or <u>physical</u> problem?	Yes 1	(NEXT	Yes 1	(NEXT	Yes 1	(NEXT	Yes 1	(NEXT	Yes 1	(NEXT	Yes 1	(INSTR.
	No 2	ACTIV.)	No 2	ACTIV.)	No 2	ACTIV.)	No 2	ACTIV.)	No 2	ACTIV.)	No 2	ABOVE HS29)
	DONTTELE		**DONTLHWK**		**DONTHHWK**		**DONTMEAL**		**DONTSHOP**		**DONTBILS**	

ASK HS29 AND HS30 FOR EACH "YES" IN HS27 OR HS28. IF NO "YES" ANSWERS, GO TO INTRODUCTION ABOVE HS31.

HS29.[Do you/Does SP] receive help from another person with (IADL)?	Yes 1	(HS30)	Yes 1	(HS30)	Yes 1	(HS30)	Yes 1	(HS30)	Yes 1	(HS30)	Yes 1	(HS30)
	No 2	(NEXT ACTIV. CODED YES)	No 2	(NEXT ACTIV. CODED YES)	No 2	(NEXT ACTIV. CODED YES)	No 2	(NEXT ACTIV. CODED YES)	No 2	(NEXT ACTIV. CODED YES)	No 2	(INTRO. ABOVE HS31)
	HELPTELE		**HELPLHWK**		**HELPHHWK**		**HELPMEAL**		**HELPSHOP**		**HELPBILS**	

HS30.   [You mentioned that (you receive/SP receives) help with (IADL). Who gives that help?
     [ENTER ALL HELPERS.] **HLPRTELE HLPRLHWK HLPRHHWK HLPRMEAL HLPRSHOP HLPRBILS**