

MALAYSIA AGEING AND RETIREMENT SURVEY
(MARS)
WAVE 1 - 2018/2019

PACKAGE C
FULL DATA SET

SECTIONS INCLUDED:

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SECTION B1: FAMILY INFORMATION & SUPPORT - CHILDREN
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A3: PERSONAL INFORMATION

Variable Name	Question text
A200b	Were you born in Malaysia?
A201_a - d	In which state, district, country were you born?
A202	What is your ethnicity?
A203	What is your religion?
A204_1	What is your marital status?
A204_2	If widowed, since what year?
A204_3	If divorced or separated, since what year?
A205	What is the highest level of education?
A206_1	What is the language you used most at home? Please state only one.

A207_1	What is your native language? Please state only one
A208	How well do you speak your native language
A209	How proficient are you in writing in your native language?

B1: FAMILY SUPPORT - CHILDREN

Variable Name	Question text
B101	Including step child and adopted child, how many living children do you have?
B102a	Please tell me the first name of your living children, including step children and adopted children, starting with the eldest child/
B102b	How old is [Name]?
B102c	Is [Name] male or female?
B102d	Is [Name] your child from current spouse, child from ex-spouse, child from spouse's previous relationship or adopted child?
B102e	What is [Name] highest level of education?
B102f	What is [Name] working status?
B102g	What is [Name] marital status?
B102i	Including step children and adopted children, how many children does [Name] have?
B103a	Where does [Name] live?
B103b	Did this child move to live with you, you moved to live with this child, you and this child moved to live together or this child has always lived with you?
B103c	Why did you and [Name] live together?
B103d	In the last 12 months, how often did you meet this child in person?
B103e	In the last 12 months, how often have you had contact with [Name], either by phone or email?
B104	Now I would like to ask you about the support you have <u>received</u> from your children. Excluding any shared living cost such as rent, utility and/or food (in case of living together), did you <u>receive</u> any kind of support, either financial/nonmonetary support, from [Name] in the last 12 months?
B104a	Did you <u>receive</u> any financial support from [Name]?

B104b_1	How much did you receive?
B104b_2	(How much did you receive?) RM by (Month/Year)
B104c_1	If you occasionally receive financial support, in which situation would you receive support from [Name]?
B104d	Did you receive non-monetary support from [Name]?
B104e_1(1)	What kind of non-monetary support did you receive from [Name]?
B105	Now I want to ask about the support you have <u>given</u> to your child. Excluding any shared living cost such as rent, utility and/or food (in case of living together), did you <u>give</u> any kind of support, either financial/nonmonetary, to [Name] in the last 12 months?
B105a	Did you <u>give</u> any financial support to [Name]?
B105b_1	If yes, how much did you give?
B105b_2	(How much did you give) [Name] RM by (Month/Year)
B105c_1	If you occasionally gave financial support, in which situation would you give support to the child?
B105d	Did you <u>give</u> non-monetary support to [Name]?
B105e	What kind of non-monetary support did you give to [Name]?

B2: FAMILY SUPPORT - PARENTS

Variable Name	Question text
B200b	Are your parents/ parents-in-law still alive?
B201	Which of your parents, including your father-in-law and mother-in-law, are still alive?
B205	Please state whether your father, your mother, your father-in-law and your mother-in-law require care or assistance in daily activities such as going to the washroom, eating, cooking etc.?
B202a	What is your [Parent] first name?
B202b	How old is [Name]?
B202c	What is [Name] marital status?
B202d	Does [Name] live with you, live close by within 5km, live elsewhere or abroad or live at nursing home or caring facility?
B202e_1	For the last 12 months, with whom does [Name] live with the most?

B202f	How close is [Name]'s residence to you? (If travel by car).
B2023g	In the last 12 months, how often did you meet [Name] in person?
B202h	In the last 12 months, how often have you had contact with [Name], either by phone or email?
B203	Now I want to ask you about the support you have received from your parents. Excluding any shared living cost such as rent, utility and/or food (in case of living together), did you <u>receive</u> any kind of support, either financial or nonmonetary support, from [Name] in the last 12 months?
B203b	In the last 12 months period, did you receive any financial support from [Name]?
B203b_1	How much did you receive?
B203b_2	(How much did you receive?) by (Month/Year)
B203c	If you occasionally receive financial support, in which situation would you receive support from [Name]?
B203d	In the last 12 months, did you <u>receive</u> non-monetary support from [Name]?
B203e_1	What kind of non-monetary support did you receive from [Name]?
B204	Now I want to ask you about the support you have <u>given</u> to your parents. Excluding any shared living cost such as rent, utility and/or food (in case of living together), did you <u>give</u> any kind of support, either financial or nonmonetary support to [Name] in the last 12 months?
B204a	In the last 12 months, did you <u>give</u> any financial support to [Name]?
B204_1	How much did you give?
B204_2	(How much did you give?)
B204c_1	If you occasionally give financial support, in which situation would you give support
B204d	In the last 12 months, did you <u>give</u> non-monetary support
B204e_1	What kind of non-monetary support did you give
B205b_1	If [Name] requires care or assistance in daily activities, who will usually will help the most?
B205c	Does [Name] require nursing care?
B205d	How many hours of your time per week were spent on taking care of [Name] every week?

B3: FAMILY SUPPORT - SIBLINGS

Variable Name	Question text
B301	How many siblings did you receive/ give support in the last 12 months? This includes monetary and non-monetary support.
B302a	Can you tell me their first names? (Only those who receive/ give support.) If R refuses to give name. Can use alias names
B302c	How old is [Name]?
B302c	Is ^B302a male or female?
B302d	What is [Name] marital status?
B302e_1	Does [Name] have any children including step children and adopted children?
B302e_2	How many living children?
B302f	In the last 12 months, did this sibling work for pay/ salary?
B302g	How would you compare [Name] economic status to yours?
B303a	Where does [Name] live?
B303b	If [Name] lives together with you, did [Name] move live with you, you moved to live with [Name], you and [Name] moved live together or [Name] has always lived with you?
B303c	Why did you and [Name] live together?
B303d	If [Name] live together with your parents, did [Name] move to live with your parents, parents moved to live with [Name], your parents and [Name] moved to live together or [Name] has always lived with your parents?
B303e_1	Why did your parents and [Name] move to live together?
B303f	In the last 12 months, how often did you meet [Name] in person?
B303g	In the last 12 months, how often have you had contact with [Name], either by phone or email?
B304	Now I want to ask about the support you have <u>received</u> from your sibling. Excluding any shared living cost such as rent, utility and/or food (in case of living together), did you <u>receive</u> any kind of support from [Name] in the last 12 months?
B304a	In the same period, did you receive any financial support from [Name]?
B304b_1	If yes, how much did you receive?
B304b_2	(If yes, how much did you receive?)

	RM by (Month/Year)
B304c_1(1)	If you occasionally receive financial support, in which situation would you receive support from [Name]?
B304d	In the last 12 months, did you <u>receive</u> non-monetary support from [Name]?
B304e_1	What kind of non-monetary support did you receive from [Name]?
B305	Now I want to ask about the support you have <u>given</u> to your sibling. Excluding any shared living cost such as rent, utility and/or food (in case of living together), did you <u>give</u> any kind of support either financial or nonmonetary support to [Name] in the last 12 months?
B305a	In the last 12 months, did you <u>give</u> any financial support to [Name]?
B305b_1	If yes, how much did you give?
B305b_2	(How much did you give?) RM by (Month/Year)
B305c_1(1)	If you occasionally gave financial support, in which situation would you give support to [Name]?
B305d	In the last 12 months, did you <u>give</u> non-monetary support to [Name]?
B305e_1	What kind of non-monetary support did you give to [Name]?

C1: HEALTH STATUS

Variable Name	Question text
C101	Which of the following best describes your current health status?
C102	Compare your current health to your health for the last 12 months, would you say your health now is much better, better, about the same, worse or much worse?
C103a_1	Did you experience any pain or ache in the following body parts in the last 30 days that limit your daily activities?
C103b	How bad is your Body Part pain? Was it mid, moderate or severe?
C103c	Does the pain on your Body Part limit your daily activities?
C104a_1	What illnesses have you been diagnosed by your doctors?
C104b	In what year was your Illness/Other Illness first diagnosed?
C104c	Are you on any treatment or taking medication for your Illness/Other Illness?

C104d	Does your Illness/Other Illness limit your daily activities?
C105a_1	In the last 24 months, were you involved in any accident that affects your physical health?
C105a_2	How many times did you fall down?
C105b	Did the ^Accident have lasting effects on your health?
C105c	Does the ^Accident limit your daily activities?
C106	Do you worry about falling down?
C107	How much of the time during the past 4 weeks did you feel tired?
C108	During the last 12 months, have you lost any amount of urine beyond your control?
C109	If yes, have you ever used any absorbent products such as pads, special garments, sanitary napkins, or toilet paper for your urine loss condition? And how often is that?
C110	Next questions are about your eyesight. Do you usually wear eyeglasses or corrective lens?
C111	How would you rate your current vision/eyesight <u>when wearing</u> eyeglasses or corrective lens?
C112	How would you rate your eyesight <u>without wearing</u> eyeglasses or corrective lens?
C113_1	Have you ever had eye surgery?
C114	Now I want to ask some questions about your hearing. Do you usually wear a hearing aid?
C115	How would you rate your current hearing ability <u>when wearing</u> a hearing aid?
C116	How would you rate your hearing ability <u>without wearing</u> a hearing aid?
C117_1	Have you ever had any ear surgery?
C117_2	If yes, what type of ear surgery did you have?
C118	The next questions are about your dental and oral health. Do you wear dentures?
C119	How would you rate your ability to chew solid or crispy food such as meat, biscuits or apple <u>with dentures</u> ?
C120	How would you rate your ability to chew solid or crispy food such as meat, biscuits or apple <u>without dentures</u> ?
C121	The next questions are about your sleeping habit, How often do you have trouble falling asleep?
C122	How often do you have trouble with waking up too early and not being able to fall asleep again?
C123	How often do you feel rested when you wake up in the morning?

C124_1	Now, I would like to measure your hand grip strength. This test will measure the strength of both hands. Before I explain the procedure, may I know which is your dominant hand?
C124_2	Using your ^C124_1 hand, when I say start, squeeze this handle as hard as you can for just a couple of seconds, and then let go.
C124_3	Now please hold the device with your ^C124_1 and squeeze as hard as you can when I say start.
C124_4	Now please hold the device with your other hand and squeeze as hard as you can when I say start.
C125_1	Next, I would like to measure your blood pressure using a digital monitor.
C125_2	First, I will place the cuff on your left arm approximately one half inch above the elbow. I will ask you to: I will then press the Start button. The cuff will inflate and deflate. I will give you the result after completing the measurement. Do you understand my explanation and feel safe to continue with this test?
C125_3	Now let's start the measure.
C125_4	Systolic (SBP) reading
C125_5	Diastolic (DBP) reading
C125_6	Pulse reading
C126	Next I would like to measure your height, weight, waist and hip circumference. Can I proceed with taking your measurements?
C126a	
C126b	Now I would like to measure your weight.
C126c	Next, I am going to ask you to perform a simple measurement of your waist and hip circumference.
C126d	Next, repeat the same procedures for measuring your hip circumference at the widest part of your hip.
C127	Have you gained or lost more than 5kg in the last 2 years?
C128	Are you still having menstrual periods?
C129	How old were you when you had your last menstrual period?
C130	Did you suffer from menopausal problem in the months leading to menopause?
C131_1	What are the symptom(s) did you suffer from?

C2: RISK FACTORS

Variable Name	Question text
C201: Smoking history	Have you ever smoked shisha, cigarettes, cigars, pipes, etc.?
C202a	How old were you when you started smoking?
C202b	Do you currently smoke?
C202c	In total, how many years have you been smoking?
C202d	How old were you when you stopped smoking?
C202e	Do you smoke cigarettes, e-cigarettes, vapes, cigars, pipe/tobacco or shisha?
C202f	When you were smoking the most, usually how many sticks/times do you smoke Smoking Method in a day?
C203	Now, I would like to ask you about drinking habit. Have you ever consumed any alcoholic beverages such as beer, wine or toddy?
C204a	How old were you when you first start consuming alcoholic beverages?
C204b	Do you currently drink alcoholic beverages?
C204c	How many years have you been drinking?
C204d	How many years altogether have you been drinking before you stopped drinking?
C204f	How many glasses/cans of alcoholic beverages do/did you have on a typical day when you are/were drinking?
C204g	How often do/did you have six or more glasses/cans on one occasion?

C3: PSYCHOSOCIAL

Variable Name	Question text
C301a	How often did you experience boredom and lose interest in most things?
C301b	How often did you experience trouble in concentrating?
C301c	How often did you experience sadness/ feeling blue/ depressed?
C301d	How often did you feel happy/ cheerful?
C301e	How often did you feel anxious/ stressed?
C301g	Generally, how often did you feel that you are satisfied with your life?
C301h	How often did you experience loneliness?
C301i	In general, how often did you experience disappointment in your life?
C301j	How often did you feel down on yourself, no good or worthless?
C301k	How often did you think about death – either your own, someone else's, or death in general?
C301l	How often did you experience isolated or side lined from others?
C301n	How often did you experience lack of companionship?
C301o	How often did you feel that you are "in tune/ get along well" with the people around you?
C301p	How often did you feel that there are people you can talk to/ share your feelings?
C301q	How often did you feel that there are people you can turn to for help?
C301r	How often did you feel that there are people who really understand you?
C301s	How often did you feel that there are people you are close to?
C301t	How often did you feel that you are part of a group of friends/ community?
C302	Now I would like to ask you some questions about your spouse.
C302a	How much does your spouse really understand the way you feel about things?
C302b	How often can you open up to your spouse if you need to talk about your worries?
C302c	How often does your spouse make too many demands on you?
C302d	How often does your spouse let you down when you are counting on them?
C302e	How often does your spouse get on your nerves?

C303	How close is your relationship with your spouse?
C304	Who has the final say in decisions about major family issues?
C305	Please state how much you agree or disagree with each of the following statements.
C305a	I often feel helpless in dealing with the problems of life.
C305b	Other people determine most of what I can and cannot do
C305c	What happens in my life is often beyond my control.
C305e	There is really no way I can solve the problems I have
C305f	I can do just about anything I really set my mind to.
C305g	When I really want to do something, I usually find a way to succeed at it.
C305h	Whether or not I am able to get what I want is in my own hands.
C305i	What happens to me in the future mostly depends on me.
C305j	I can do the things that I want to do
C305k	I am leading a meaningful purpose in life.
C305l	I have a loving family.
C305m	I continue to have friends who care for me.
C305n	I am financially independent.
C305o	I can still contribute to society.
C305p	I believe I will not need long term care at age 65 and beyond.
C305q	I will continue working as long as my mental and physical capability permit.
C305r	If possible I would like to live beyond age 80 years.
C305s	I am prepared to be living alone.
C305t	I am prepared to take care of my own health.
C305u	I am prepared to live in an assisted living facility (e.g. care centre for the elderly).
C305v	Taking care of grandchildren is part of my responsibility.
C305w	The government should make it mandatory for children to support their parents
C305x	I should be the one to determine when I want to retire.
C306	Now I would like to ask about some activities that you might be involved in.

C306a	How often do you take care of a sick or disabled adult?
C306b	How often do you do activities with your grandchildren/ nieces/ nephews, etc.? (e.g. go to playground, go to shopping mall, watch TV etc.)
C306d	How often do you do volunteer/ charity work?
C306	How often do you attend an educational/ training course/ forum/ workshop?
C306f	How often do you go to a sports, social or other clubs?
C306g	How often do you attend meetings of non-religious organisations (e.g. political party/ residence association/ Parents & Teachers Association (PTA)?)
C306h	How often do you read books, magazines or newspapers?
C306i	How often do you watch television?
C306j	How often do you do writing (e.g. letters, stories, or diary)?
C306l	How often do you use computer/ smartphone for e-mail, Internet, watch videos or other purposes?
C306m	How often do you go for a walk/ jog/ gym?
C306n	How often do you do gardening/ pet rearing/ other hobbies?
C306o	How often do you exercise/ involve in group exercise (e.g. Tai Chi, aerobic, yoga, silat, etc.)?
C306p	How often do you participate in sport activities?
C306q	How often do you go out for social outing (e.g. eating out, meeting friend, go to cinemas, etc.)?
C306r	How often do you do home maintenance (e.g. house chores, repair, etc.)?
C306t_1	Do you participate in any other activities?
C306t_3	How often do you participate in this activity?
C307	Now I would like to ask about religious activities.
C307a	How often do you give alms or donations to community/ religious organisations?
C307b	How often do you read religious books (e.g. Al-Quran/ Bible/ Bhagavad Gita)?
C307c	How often do you perform daily prayers?
C307d	How often do you practice primary basic doctrines on holy days or religious days like fasting or going to church on Sundays?
C307e	How often do you attend religious sermons/ religious classes/ talks?

C4: ADL / IADL

Variable Name	Question text
C401	How often do you take part in sports/ activities that are <u>vigorous</u> (e.g. running, swimming, cycling, aerobics, tennis, or digging with a hoe or shovel, etc.)?
C402	How often do you take part in sports/ activities that are <u>moderately vigorous</u> (e.g. gardening, cleaning the car, walking at a moderate pace or dancing, etc.)?
C403	How often do you take part in <u>light exercise/ activities</u> (e.g. Tai Chi, vacuuming or home cleaning, etc.)?
C404	Next, I would like to ask whether you need assistance in performing the following activities for the past one week.
C404a_1	Do you need any help in taking a bath?
C404a_2(1)	If you need help in taking a bath, who usually will help you?
C404b_1	Do you need any help in dressing?
C404b_2(1)	If you need help in dressing, who usually will help you?
C404c_1	DO you need any help in grooming?
C404c_2(1)	If you need help in grooming, who usually will help you?
C404d_1	Do you need any help in mouth care?
C404d_2	If you need help in mouth care, who usually will help you?
C404e_1	Do you need any help in toileting?
C404e_2	If you need help in toileting, who usually will help you?
C404f_1	Do you need any help in moving from bed to chair/ Chair to bed?
C404f_2	If you need help in moving from bed to chair/ chair to bed, who usually will help you?
C404g_1	Do you need any help in walking around the house?
C404g_2	If you need help in walking around the house, who usually will help you?
C404h_1	Do you need any help in climbing stairs?
C404h_2	If you need help in climbing stairs, who usually will help you?
C404i_1	Do you need any help in eating?
C404i_2	If you need help in eating, who usually will help you?
C405	Now I would like to ask you whether you have any difficulty in performing the following activities.

C405a	Do you have any difficulty with walking 100 meters?
C405b	Do you have any difficulty with sitting in a chair for two hours continuously?
C405c	Do you have any difficulty with getting up from a chair after sitting continuously for a long time?
C405d	Do you have any difficulty with walking several steps up the stairs <u>without</u> using the handrail?
C405e	Do you have any difficulty with taking one step up the stairs <u>without</u> using the handrail?
C405f	Do you have any difficulty with squatting or kneeling?
C405g	Do you have any difficulty with raising your arms above your shoulders?
C405h	Do you have any difficulty with pushing or pulling a large object such as a chair or table?
C405i	Do you have any difficulty with lifting or carrying an object weighing 5kg or more, such as a bag of rice?
C405j	Do you have any difficulty with picking up a small object such as a 10 cent coin from a desk with your fingers?
C406	Next, I would like to ask whether you have any difficulty in performing the following activities in the last week?
C406a_1	Do you need any help in shopping?
C406a_2	If you need help in shopping, who usually will help you?
C406b_1	Do you need any help in cooking?
C406b_2	If you need help in cooking, who usually will help you?
C406c_1	Do you need any help in managing your medications?
C406c_2	If you need help in managing your medications), who usually will help you?
C406d_1	Do you need any help in using the phone and looking up numbers?
C406d_2	If you need help in using the phone and looking up numbers, who usually will help you?
C406e_1	Do you need any help in doing housework?
C406e_2	If you need help in doing housework, who usually will help you?
C406f_1	Do you need any help in doing laundry?
C406f_2	If you need help in doing laundry, who usually will help you?
C406g_1	Do you need any help in driving/ riding motor vehicle?
C406g_2	If you need help in driving/riding motor vehicle, who usually will help you?
C406h_1	Do you need any help in using public transportation?

C406h_2	If you need help in using public transportation, who usually will help you?
C406i_1	Do you need any help in visiting friends or relatives?
C406i_2	If you need help in visiting friends or relatives, who usually will help you?

C5: COGNITION

Variable Name	Question text
C501	How would you rate your memory at the present time? Would you say it is very good, good, fair, poor or very poor?
C502	Would you say your memory is better now, about the same or worse now compared to two years ago?
C503	I will read a set of 10 words and ask you to recall as many as you can. Please listen carefully as I read the set of words because I cannot repeat them. When I finish, I will ask you to recall aloud as many of the words as you can, in any order. Do you understand my explanation?
C503_1	Now I will read out the words. PERMIT as much time as R wishes -- up to about 2 minutes
C504	Next, please try to count backwards, <u>as quickly as you can</u> , from the number I will give you. I will tell you when to stop. ALLOW R to start over if he/she wishes to do so ASK R to stop after a few seconds Please start with: 20
C505	Now let's try some subtraction of numbers
C505a_1	One hundred minus 7 equals what
C505b_1	And 7 from that?
C505c_1	And 7 from that?
C506a	A little while ago, I read you a list of words and you repeated the ones you could remember. Please tell me any of the words that you remember now.
C507	What year are we in currently? Current year: Current Year
C508	What is the date today? Current date: Current Date

C509	What month are we in currently?
C510	What day of the week?
C511	Now I'm going to ask you for the names of some people and things. What do people usually use to cut paper? CORRECT answer is scissors/ knives
C512	What do you call the kind of thorny fruit that has a strong smell? CORRECT answer is Durian
C513	Who is the current Prime Minister of Malaysia?
C514	Who is the first Prime Minister of Malaysia?
C515	In 60 seconds, please name as many animals as fast as you can.

C6: HEALTHCARE UTILIZATION

Variable Name	Question text
C601	Do you have any private health insurance, including employer-sponsored insurance?
C602	How much does your private/ personal health insurance policy cover?
C603	How much do you pay for this health insurance premium each year?
C604_1	Who pays for your insurance?
C605[1]	In the last 12 months, did you go for any of the following medical check-up?
C606_1	If no, why didn't you go for medical check-up?
C607_1	Where do you normally get your outpatient treatment
C608_1	Who would normally accompany you to go for treatment?
C609	Have you ever been hospitalised during the last 12 months
C610	How many times have you been hospitalised in the last 12 months?
C611_1	Who accompanied you the most during your hospitalization?
C612_1[1]	What is/are the reason(s) for your hospitalization(s)? Please choose five most serious ones, if there are more than five.

D1: EMPLOYMENT

Variable Name	Question text
D101	What is your current employment status?
D101a	Do you expect to go back to this job?
D101a_1	In what month did you last work on this job?
D101a_2	In what year did you last work on this job?)
D101b_1	In what month did you become unemployed?
D101b_2	In what year did you become unemployed?)
D101c_1	In what month did you become disabled?
D101c_2	In what year did you become disabled?)
D101d_1	In what month did you retire/ stop working?
D101d_2	In what year did you retire/ stop working?
D102	Are you doing any work for pay at the present time?
D103	Have you worked for pay in the last 12 months?
D104	For your primary work, are you self-employed or working for someone else?
D105a	If self-employed, is your business registered?
D105b	Do you have business partner(s)?
D105c	What is the percentage of your ownership?
D106a_1	If you work for someone else, who do you work for?
D107	Now I would like to ask about your employer.
D107a	What is the name of the company or organization you work for?
D107b	In which department/ unit/ ministries are you working?
D107c	What is your job position?
D108	Now I would like to ask about your business.
D108a	What is the name of your business?
D109	What is your occupation?

D110	What industry do you work in?
D111	At what age were you employed for your current work?
D112	At what age have you started this business?
D113	How long do you expect to work for your current employer/ business?
D114	Before you work at this job, how many other jobs have you previously worked? If you have worked more than 3 jobs, please include the following information in the last 3 jobs.
D116	For your current job/ business, how many hours are you working in a week?
D117	In the last 12 months, how many days of work did you miss due to health problems?
D118	Except for national holidays, how many days of paid leave per year are you entitled at your current workplace?
D119	Do you have a secondary job?
D120	How many hours do you work in a week for your secondary job?
D121	For your main job, what is the usual retirement age for people who work with you or have the same kind of job?
D122	Now I would like to ask you some questions about your retirement planning.
D123	How often have you thought about retirement?
D124_1	When you retire, do you plan to stop work altogether or reduced work hours, have you not given it much thought, or what?
D125	At what age do you plan to stop work altogether?
D126	At what age do you plan to start working fewer hours?
D127	At what age do you plan to change the kind of work you do?
D128	At what age do you plan to start working for yourself?
D130	Now, I would like to ask you about certain aspects of your current job.
D130a	How often does your job require lots of physical effort?
D130b	How often does your job require lifting heavy loads?
D130c	How often does your job require stooping, kneeling or crouching?
D130d	How often does your job require good eyesight?
D130e	How often does your job require intense concentration/ attention?
D130f	How often does your job require skills in dealing with other people?
D130g	How often does your job require you to work with computers?

D130h	How often do you feel your job is more challenging than your previous job?
D131	Now, I would like to ask whether you agree with the following statements concerning your current job.
D131a	In promotion, seniority is important at your company.
D131b	Your co-workers make older workers feel that they ought to retire before the retirement age.
D131c	Your employer would let older workers move to less demanding job with less pay if they wanted to.
D131d	Your salary is adequate.
D131e	Your job security is good.
D131f	You are satisfied with the work environment of your job.
D131g	You are satisfied with the work you are assigned to do.
D131h	Your job involves a lot of stress.
D131i	You really enjoy going to work.
D131j	Overall, you are satisfied with your current job.
D132_1a	What was the main reason for your retirement decision?
D133	Thinking back to the time you completely retired, was that something you wanted to do or something you felt you were forced into?
D134	Overall, are you satisfied with your retirement?
D135	Comparing before and after retirement, what would you say about your life after retirement?
D136	I am going to read statements which are positive about retirement. Please tell me whether, for you, these were not at all important, not important, fairly important, important and very important.
D136a	Being your own boss.
D136b	Being able to take it easy/ relax.
D136c	Having the chance to travel.
D137	I am going to read out to you statements which are negative about retirement. Please tell me if, during your retirement, they have not bothered you at all, not bothered you, slightly bothered you, bothered you or bothered you a lot.
D137a	Not doing anything productive or useful.
D137b	Illness or disability.
D137c	Not having enough income to get by.

E1: INCOME AND EXPENDITURE

Variable Name	Question text
E101	For the last 12 months, did you receive any income or payment, excluding income received by the household members?
E102_1	What type of income or payment did you receive?
E105_1	Who manages your household finances?
E106	What is your total monthly income after tax? (including income from salary, profit from business, remittances, rental, etc.)
E107	Now, I would like to ask the average monthly expenditure for your typical household needs, excluding housing costs, and the purchase of durable goods.
E107a	What is the average monthly expenditure for your transportation (Petrol, Touch n' Go, public transport, parking, school van, etc.)?
E107b	What is the average monthly expenditure for your electricity?
E107c	What is the average monthly expenditure for your water?
E107d	What is the average monthly expenditure for your telephone/ mobile phone/ prepaid?
E107e	What is the average monthly expenditure for your Indah water?
E107f	What is the average monthly expenditure for your internet?
E107g	What is the average monthly expenditure for your ASTRO/ Netflix/ TV Box?
E107h	What is the average monthly expenditure for your payment for domestic services (e.g. domestic help, cleaner, gardener, etc.)?
E107i	What is the average monthly expenditure for your) newspapers, magazines, other reading materials, etc.?
E107j	What is the average monthly expenditure for your toiletries/ personal care?
E107k	What is the average monthly expenditure for your food (including eating out)/ groceries/ household needs (e.g. detergent, floor cleaner, garbage bags, etc.)?
E107l	What is the average monthly expenditure for your membership fees (e.g. club, gym, resident association etc.)?

E107m	What is the average monthly expenditure for your house repairs (e.g. plumbing, etc.)?
E107n_1	Do you have any other monthly expenditures (e.g. Education, condominium/ community maintenance, donation, etc.)?
E107n_2	What is the household expenditure on?
E107n_3	What is the average monthly expenditure?
E108	To what extent can you manage your monthly expenditure? On a scale of 1 to 10, with 1 being very difficult and 10 can manage very well.
E109	Do you have any monthly instalment?
E110_1	What kind of monthly instalment do you have to pay?

F1: SAVINGS AND ASSETS

Variable Name	Question text
F101	Is the house that you are currently staying rented?
F102	How much is your monthly rental?
F103	For the last 12 months, who mostly pays for the rental?
F104	Do you have any savings?
F104a_1	What type of savings do you have?
F105	Do you own any assets?
F105a_1	What type of assets do you have?