Life & health
2017
Short version
Life & health 2017

1. How would you describe your health in general?
   - Very good
   - Good
   - Fair
   - Poor
   - Very poor

2. Do you have any of the following discomforts or symptoms: Anxiety or worry?
   - No
   - Yes, minor discomfort
   - Yes, severe discomfort

3. How is your dental health?
   - Very good
   - Quite good
   - Neither good nor poor
   - Quite poor
   - Very poor

4. How tall are you?
   Answer in whole centimetres.
   
   cm

5. How much do you weigh?
   Answer in whole kilos. If you are pregnant, report how much you normally weigh.
   
   kg

6. How much time do you spend in a normal week on physical training that leaves you out of breath – for example running, fitness training, or ball sports?
   - 0 minutes/no time
   - Less than 30 minutes
   - 30–59 minutes (0.5–1 hour)
   - 60–89 minutes (1–1.5 hours)
   - 0–119 minutes (1.5–2 hours)
   - 2 hours or more

7. How much time do you spend in a normal week on daily activities – for example walking, cycling, or gardening?
   Count all time together (at least 10 minutes at a time).
   - 0 minutes/ingen tid
   - Mindre än 30 minuter
   - 30-59 minuter (0,5-1 timme)
   - 60-89 minuter (1-1,5 timmar)
   - 90-149 minuter (1,5-2,5 timmar)
   - 150-299 minuter (2,5-5 timmar)
   - 5 timmar eller mer

8. Do you smoke?
   - No
   - Yes, sometimes
   - Yes, daily

If your activities vary during the year, try to take some kind of average. Question 6 deals with regular exercise and training activities that leave you out of breath and sweaty, while 7 deals with moderately strenuous physical activity that leaves you breathing somewhat more heavily than normal.
9. How often did you drink alcohol in the past 12 months?

☐ 4 times a week or more
☐ 2-3 times a week
☐ 2-4 times a month
☐ Once a month or less
☐ Never  ➔ go to question 12

10. How many “glasses” (see example) do you drink on a typical day when you drink alcohol?

☐ 1-2
☐ 3-4
☐ 5-6
☐ 7-9
☐ 10 or more
☐ Don’t know

11. How often do you drink six “glasses” or more at a time?

☐ Daily or almost every day
☐ Every week
☐ Every month
☐ Less than once a month
☐ Never

12. During the last 12 months, have you ever had difficulty in managing the regular expenses for food, rent, bills etc.?

☐ No
☐ Yes, once
☐ Yes, more than once

13. Do you think that people generally can rely on other people?

☐ Yes
☐ No

14. Have you during the past 3 months felt that someone has treated you in a condescending manner?

☐ No
☐ Yes, once or twice
☐ Yes, several times

15. How satisfied are you on the whole with the life you lead?

☐ Very satisfied
☐ Fairly satisfied
☐ Not particularly satisfied
☐ Not at all satisfied
Thank you for taking the time to answer the questionnaire!

Space for your comments

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