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Series A – Survey Instruments (Erhebungsinstrumente)

SOEP - The German Socio-Economic Panel at DIW Berlin

SOEP-Core – 2018: Deceased Individual (with Reference to Variables)

2020

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SOEP Group



Running since 1984, the German Socio-Economic Panel (SOEP) is a wide-ranging representative longitudinal study of private households, located at the German Institute for Economic Research, DIW Berlin.

The aim of the SOEP Survey Papers Series is to thoroughly document the survey's data collection and data processing.

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Series A – Survey Instruments (Erhebungsinstrumente)

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- Series C Data Documentation (Datendokumentationen)
- Series D Variable Descriptions and Coding
- Series E SOEPmonitors
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The German Socio Economic Panel at DIW Berlin

SOEP-Core – 2018: Deceased Individual (with Reference to Variables)

SOEP Group

2020

The variable names mentioned in this document belong to a collection of datasets, which is released with doi:10.5684/soep-core.v35.

Reading Aid

This representation of the questionnaire contains the same informations as the portal paneldata.org.



Here, in addition to the *question number*, *question text*, *interviewer instructions*, and *answer options*, you find printed in green the *file name* and the *variable name* with the *variable label*, which contains information from the question. If you see rows of green lines below the answer option, the question-naire defines serveral variables or informations are stored in more than one data set.

The *routing by filters* is depicted in blue.

Each variable is preceded by an identifier, which usually contains the question number and which is used when the variable is used in filters in subsequent questions. Such filters are usually placed as input filters (gatekeepers) at the beginning of a question. An identifier that is referred to in the input filter of a subsequent question is marked yellow as an example.

This reading aid does not cover a few exceptional cases: If the filter (as gatekeeper) only affects one of serveral variables for a question, the filter is printed in blue behind the variable. There you will also find a "go to" command in the form 2 @ Q73. Here, the questionnaire skips to question 73 if answer 2 was given.

Phrases that are not alreday translated in English are displayed in German and preceded by [de].

Intro First of all we, the team of "Living in Germany", want to express our deepest regret for the loss of your family member.

For many people it is very hard to talk to stranges about dying and death. Nevertheless because of the inadequate knowledge in the scientific community about this topic we would like to aks a couple of questions.

We would like to know more about the last phase of your relatives live. Therefor we ask you kindly

- to answer our representative the following questions

- or carfully fill out this questionnaire by yourself.

0 Please enter according to address protocol.

Household number 0:hnr vpl hid Current Wave HH Number (=HHNRAKT) First name *Please print*

O:name vpl pnr Seq. person number Person number

1 Please state the first name, sex, and date of birth of the deceased person:

First name of the deceased person

Please print

1:vname vpl vpnr Year and month of birth, sex of the interviewed person:

Day			
Month			
Year			
1:vgebmo 1:vgebj (Sex)	vpl vpl		Month Of Birth
Male	1		
Female	2		
1:vsex vp	(dl001 Ger	nder

2 What was your family relationship with the person passed away? He / She was ...

my mother / my father	1	
my spouse / life partner	2	
my daughter / my son	3	
other person	4	
2:vfam vpl dl004		
Other person:		

3 How old was your relative when he/she passed away?

Years 3:valt vpl dl005 age of person died

4 Did the deceased person live in this household?

No	2		
Yes	1		
4:vinhh	1	vpl	dl006

1@9

5 Do you know whether he/she ever participated the study "Living in Germany"?

Yes, p	artici	pated		1	
No, di	d not	partici	pate	2	
Do no	ot kno	w		3	
5:vlid	vpl	dl007	persor	ı die	ed was SOEP attendant

6 What was the main home environment the person who died lived in the last years?

Allone in own household	1
Together with spouse / partner in private household	2
Together with other family members in private househohld	3
Accommodation geared to the needs of senior citizens (e.g. assisted living)	4
Retirement home / Nursing home	5
Clinic, hospital	6
Other environment	7
6:vleb01 vpl dl008	
Other:	

7 Where did he/she live?

Here in house	1		
In the neighborhood	2		
In a close distance (to reach on food within I hour)			
In a further distance in Germany	4		
In a foreign country	5		
7:vleb03 vpl dl009 focus of deceased person's life			

8 Within the last 12 month of his/her life: How often did you have personal contact to the deceased person? (personally, by telephone, by writing)

Every day	1			
At least once a week				
At least once a month	3			
Rarer	4			
Never	5			
8:vkont vpl dl010				

9 Where did he/she decease?

At home	1
In another private household	2
In a hospital	3
In a retirement home / nursing home	4
In a hospice	5
Another place	
Do not now	7
9:vwo vpl dl011	
Another place:	

10 Can you tell me what the cause of death was?

Multiple r	espon	ses possi	ble!	
Heart atta	ıck			1
Cardiovas	scular	disease		1
Cancer				1
Stroke				1
Severe in:	fectio	us disea	ase (such as pneumonia, flu)	1
Gastroint	estina	al diseas	Se	1
Respirato	ry illr	ness		1
Accident				1
Other				1
Do not kr	low			1
10:vurs01	vpl	dl012	cause of death: heart attack	
10:vurs02	vpl	dl013	cause of death: cardiovascular dise	ase
10:vurs03	vpl	dl014	cause of death: cancer	
10:vurs04	vpl	dl015	cause of death: epileptic stroke	
10:vurs05	vpl	dl016	cause of death: sever infectious dis	ease
10:vurs06	vpl	dI017	cause of death: gastrointestinal tra	ct disease
10:vurs07	vpl	dl018	cause of death: respiratory disease	
10:vurs08	vpl	dl019	cause of death: accident	
10:vurs09	vpl	dl020	cause of death: other	
10:vurs11	vpl	dl021	cause of death unknown	
Other rea	son:			

11 Had the person who passed away deposited one or some of the following documents?

	_			Yes	No	Don't know
A testame	ent			1	2	3
A living will (with instruction on medical care)?				1	2	3
A power of attorney (in case of loss of capacity for consent)			1	2	3	
A living w	vill wi	th instru	actions on use of death-delaying	1	2	3
proced	ures					
11:vdok01	vpl	dl022	left last will			
11:vdok02	vpl	dl023	left living will			
11:vdok03	vpl	dl024	left provisional power or attorney			
11:vdok04	vpl	dl025	left living will with instructions on use of death-d	elaying	proced	ures

12 Did the person who died had a reduced mental capacity?

	1	
	2	
low	3	
vpl	dl0	26
		now 3

13 How was the state of health of the person who passed away three month before death?

Very good	1	
Good	2	
Satisfactory	3	
Poor	4	
Bad	5	
13:vges01 vpl	d	1027

14 Was the deceased in need of assistance or care three months before he/she died?

Yes	1		
No	2		
14:vpfl	eg	vpl	dl028

1@16

1 1

1

1

15 For which of the following activities did the deceased Person needed assistence in? The person needed help with:

Errands outside the home

Running the household, preparing meals and drinks Minor care, such as help with getting dressed, washing up, combing hair, shaving Major care, such as getting in and out of bed, bowel movements

15:vhil1	vpl	dl029	
15:vhil2	vpl	dl030	Help On Housework, 1. Person
15:vhil3	vpl	dl031	help with simple personal care: dressing, bathing
15:vhil4	vpl	dl032	help in getting in and out of bed, using toilet

16

Think about the period of time before your relative passed away. How satisfied do you think he/she was with his/her life overall?

Please answer on a scale from 0 to 10, where 0 means completely dissatisfied and 10 means completely satisfied.

	Com- pletely dissat- isfied										Com- pletely satis- fied
	0	Ι	2	3	4	5	6	7	8	9	10
One year before his/her	0	1	2	3	4	5	6	7	8	9	10
death											
About three months before	0	1	2	3	4	5	6	7	8	9	10
his/her death		_									
16:vzule1 vpl dl034											
16:vzule2 vpl dl035											

17 Finally a personal question to you: To which extend did the death of your relative changed your life?

I have t	1				
Some the	2				
My life	3				
17:vver	vpl	dl036	change in personal life si	nce	death

A What is the date today and at what time did you finish filling out the questionnaire?

Day						
Month						
Houre						
Minute						
A:vdatt A:vdatm A:vdatst A:vdatmi Interview	vpl vpl vpl vpl vpl	intday intmonth inthour intmin		day of interview month of interview End of Interview (Hour) End of Interview (Minutes)		
List No.						
Consecutive no.						
Accountin	ng no	э.				