These next few questions are about your overall social and emotional well-being.

SE1. During an average week, how many days are you in touch by phone, Internet, or in person with a friend, neighbor, or relative who does not live with you?

   None ................................................................. 1  
   One day .............................................................. 2  
   Two days ............................................................ 3  
   Three days .......................................................... 4  
   Four days ........................................................... 5  
   Five days ............................................................ 6  
   Six days .............................................................. 7  
   Every day ............................................................ 8  
   Refused .............................................................. -7  
   Don’t Know ....................................................... -8

SE2. Thinking about how often you are in touch with friends, neighbors, and relatives is this ...

   Not enough (Would like to do more) ......................... 1  
   About enough ...................................................... 2  
   Too much ............................................................. 3  
   Refused .............................................................. -7  
   Don’t Know ....................................................... -8

SE3. During an average week, how many days do you leave home to go to a movie, sports event, club meeting, class, or place of worship?

   None ................................................................. 1  
   One day .............................................................. 2  
   Two days ............................................................ 3  
   Three days .......................................................... 4  
   Four days ........................................................... 5  
   Five days ............................................................ 6  
   Six days .............................................................. 7  
   Every day ............................................................ 8  
   Refused .............................................................. -7  
   Don’t Know ....................................................... -8

SE4. Regarding your present social activities, do you feel that you are doing ...

   Not enough (Would like to do more) ......................... 1  
   About enough ...................................................... 2  
   Too much ............................................................. 3  
   Refused .............................................................. -7  
   Don’t Know ....................................................... -8
SE5. In general, how would you describe your emotional well-being?

Excellent ................................................................. 1
Very Good .............................................................. 2
Good ................................................................. 3
Fair ........................................................................... 4
Poor ........................................................................... 5
Refused ..................................................................... -7
Don’t Know .............................................................. -8

SE6. During the past 30 days, how often have you had difficult or painful feelings such as stress, grief, worry, anger or loneliness?

Always ........................................................................ 1
Usually ........................................................................... 2
Sometimes ..................................................................... 3
Rarely .......................................................................... 4
Never .......................................................................... 5
Refused ...................................................................... -7
Don’t Know .................................................................. -8

SE7. During the past 30 days, to what extent have feelings such as stress, grief, worry, anger or loneliness interfered with your normal social activities with family, friends, neighbors, or groups?

Always ........................................................................ 1
Usually ........................................................................... 2
Sometimes ..................................................................... 3
Rarely .......................................................................... 4
Never .......................................................................... 5
Refused ...................................................................... -7
Don’t Know .................................................................. -8

GO TO NEXT MODULE OR CLOSE.