

WLS MEMO 145

REVISED PLAN FOR IMPLEMENTING WHS HEALTH VIGNETTES

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In our current design, each respondent will receive two questions about each of two vignettes (out of four total) for the mobility and affect domains, as well as the appropriate matching self-assessment items. Because we are doubling the items per domain, this still adds up to 12 items on the mail questionnaire, which is what we had planned before when we had three domains. Adding a third domain would add six more questions, which given the tight space of the mail survey is itself no small issue, but there also was not a third domain whose vignettes and self-assessment items we feel fully comfortable with using.

We will not intersperse vignettes with self-assessment items, but otherwise we think there is a reason to believe that proximity between the two would be advantageous since the introduction to the vignettes asks respondents to evaluate the vignettes in the same way as the self-assessment items.

We plan on replicating the wording of the second, third, and fourth vignettes in the WHS implementation. As per a discussion using the vignette listserv, we are not using the first and fifth vignettes because we do not expect that they would yield meaningful variation in our sample. We are, however, adding another vignette in each domain. We plan to use four vignettes in each domain, with two vignettes from each domain included in each form.

We are presently planning on using four forms. Because these forms will be administered by 1/10th random replicate to save money, we cannot have a 25% administration of each form. Instead, Forms B and D will each be administered to 3 replicates (30% of the sample each) and Forms A and C will each be administered to 2 replicates (20%). Given our rotational scheme, however, each of the four vignettes for both domains will appear on 50% of the surveys in all. The rotational and replicate scheme is presented below.

Because we are already planning on having separate forms for men and women, we plan on using same-sex names in all vignettes. The names will be rotated and will use the four most common names among WLS respondents (as an aside, this will allow us to see if there are any “superstition” effects when the person in the vignette has the same first name as the respondent). The planned rotation of domains, vignettes, and names for five forms of the instrument is included below.

For the mobility domain, the added vignette is Vignette D below. For the affect domain, the added vignette is a modified version of the “Eva” vignette on Gary King’s website (Vignette B below). We modified that vignette to say that [name] worries “often” about his health instead of “all the time” because we were not confident that Vignette B (below) would read as less anxious and worried than Vignette C otherwise. (Just from reading them, we are also uneasy about whether Vignette B and C for *mobility* will have a clear difference in ordering among respondents, but we assume that the WHS pretesting has shown these to be consistently ordered or else they would not have been selected for that survey.)

Rotation and layout plans

Mobility and affect self-assessment questions

Overall in the last 30 days, how much of a problem did [name of person] have with moving around?

1. None
2. Mild
3. Moderate
4. Severe
5. Extreme

In the last 30 days, how much difficulty did [name of person] have in vigorous activities, such as running 3 km (or equivalent) or cycling?

1. None
2. Mild
3. Moderate
4. Severe
5. Extreme

Overall in the last 30 days, how much of a problem did [name of person] have with feeling sad, low, or depressed?

1. None
2. Mild
3. Moderate
4. Severe
5. Extreme

In the last 30 days, how much of a problem did [name of person] have with worry or anxiety?

1. None
2. Mild
3. Moderate
4. Severe
5. Extreme

General vignette instructions

Below are some descriptions of persons with varying levels of difficulties in different areas of health. We would like to know how you view each of these descriptions and rate how much of a problem or difficulty the person described has in that area of health in the same way that you described your health to me. While giving the rating, think of the person as someone who is of your age and background.

Rotations across forms

	1	2	3	4	Replicates
Form A	MO-C-1	AF-D-2	MO-A-3	AF-B-4	1, 5
Form B	AF-A-2	MO-B-1	AF-D-4	MO-C-3	3, 6, 9
Form C	MO-D-3	AF-C-4	MO-B-1	AF-A-2	2, 7
Form D	AF-B-4	MO-A-3	AF-C-2	MO-D-1	0, 4, 8

Key: Domain – Vignette – First name in vignette

AF = Affect domain

MO = Mobility domain

Names for men:

Name 1 = Robert

Name 2 = James

Name 3 = Richard

Name 4 = John

Names for women:

Name 1 = Mary

Name 2 = Judith

Name 3 = Carol

Name 4 = Barbara

Mobility vignettes

Vignette A: [Name] is able to walk distances of up to 1/8 mile without any problems but feels tired after walking 1/2 mile or climbing up more than one flight of stairs. He [She] has no problems with day-to-day physical activities, such as carrying food from the market.

Vignette B: [Name] does not exercise. He [She] cannot climb stairs or do other physical activities because he [she] is obese. He [She] is able to carry the groceries and do some light household work.

Vignette C: [Name] has a lot of swelling in his [her] legs due to his health condition. He [She] has to make an effort to walk around his home as his [her] legs feel heavy.

Vignette D: [Name] is able to move his [her] arms and legs, but requires assistance in standing up from a chair or walking around the house. Any bending is painful and lifting is impossible.

Mobility questions (to follow each vignette)

Overall, how much of a problem did [name] have with moving around?

How much difficulty did [name of person] have in vigorous activities, such as running 2 miles or cycling?

Mobility response categories (to follow each question)

1. None
2. Mild
3. Moderate
4. Severe
5. Extreme

Affect vignettes

Vignette A: [Name] enjoys his [her] work and social activities and is generally satisfied with his [her] life. He [she] gets depressed every 3 weeks for a day or two and loses interest in what he [she] usually enjoys but is able to carry on with his [her] day to day activities.

Vignette B: [Name] worries often about his [her] health. He [She] gets depressed once a week for a day or two, thinking about what could go wrong and all the illnesses he [she] could get, but is able to come out of this mood if he [she] concentrates on something else.

Vignette C: [Name] feels nervous and anxious. He [She] worries and thinks negatively about the future, but feels better in the company of people or when doing something that really interests him [her]. When he [she] is alone he [she] tends to feel useless and empty.

Vignette D: [Name] feels depressed most of the time. He [she] weeps frequently and feels hopeless about the future. He [She] feels that he [she] has become a burden on others and that he [she] would be better dead.

Affect questions (to follow each vignette)

How much of a problem did [name] have with feeling sad, low, or depressed?

How much of a problem did [name] have with worry or anxiety?

Affect response categories (to follow each question)

1. None
2. Mild
3. Moderate
4. Severe
5. Extreme