KIDNEY CONDITIONS - KIQ
New Target Group: SPs 20+

KIQ.005 Many people have leakage of urine. The next few questions ask about urine leakage.

How often (do you/does SP) have urinary leakage? Would (you/s/he) say . . .

CAPI INSTRUCTION:
HELP SCREEN: Other terms for urinary leakage are not being able to hold your urine until you can reach a toilet, not being able to control your bladder, loss of urine control.

never, ............................................................ 1 (KIQ.042)
less than once a month, ................................. 2
a few times a month, .................................... 3
a few times a week, or ................................... 4
every day and/or night? ................................. 5
REFUSED ..................................................... 7 (KIQ.042)
DON'T KNOW ............................................... 9 (KIQ.042)

KIQ.010 How much urine (do you/does SP) lose each time? Would (you/s/he) say . . .

drops, ............................................................ 1
small splashes, or ........................................ 2
more? ............................................................ 3
REFUSED ..................................................... 7
DON'T KNOW ............................................... 9

KIQ.042 During the past 12 months, (have you/has SP) leaked or lost control of even a small amount of urine with an activity like coughing, lifting or exercise?

YES ............................................................... 1
NO ................................................................. 2 (KIQ.044)
REFUSED ..................................................... 7 (KIQ.044)
DON'T KNOW ............................................... 9 (KIQ.044)

KIQ.430 How frequently does this occur? Would (you/s/he) say this occurs . . .

less than once a month, ................................. 1
a few times a month, .................................... 2
a few times a week, or ................................... 3
every day and/or night? ................................. 4
REFUSED ..................................................... 7
DON'T KNOW ............................................... 9
KIQ.044  During the **past 12 months**, (have you/has SP) leaked or lost control of even a small amount of urine with an urge or pressure to urinate and (you/s/he) couldn’t get to the toilet fast enough?

- YES ...............................................................  1
- NO .................................................................  2 (KIQ.046)
- REFUSED .....................................................  7 (KIQ.046)
- DON’T KNOW .................................................  9 (KIQ.046)

KIQ.450  How frequently does this occur? Would (you/s/he) say this occurs . . .

- less than once a month, .................................  1
- a few times a month, .................................  2
- a few times a week, or .................................  3
- every day and/or night? .................................  4
- REFUSED .....................................................  7
- DON’T KNOW .................................................  9

KIQ.046  During the **past 12 months**, (have you/has SP) leaked or lost control of even a small amount of urine **without** an activity like coughing, lifting, or exercise, or an urge to urinate?

- YES ...............................................................  1
- NO .................................................................  2 (BOX 1)
- REFUSED .....................................................  7 (BOX 1)
- DON’T KNOW .................................................  9 (BOX 1)

KIQ.470  How frequently does this occur? Would (you/s/he) say this occurs . . .

- less than once a month, .................................  1
- a few times a month, .................................  2
- a few times a week, or .................................  3
- every day and/or night? .................................  4
- REFUSED .....................................................  7
- DON’T KNOW .................................................  9

**BOX 1**

**CHECK ITEM KIQ.048A:**
- IF 'YES' (CODED ‘1’) IN KIQ.042 OR KIQ.044 OR KIQ.046, CONTINUE WITH KIQ.050.
- OTHERWISE, GO TO KIQ.480.
KIQ.050 During the **past 12 months**, how much did {your/her/his} leakage of urine bother {you/her/him}?

Please select one of the following choices:

- not at all, ........................................................ 1
- only a little,..................................................... 2
- somewhat, ..................................................... 3
- very much, or................................................. 4
- greatly?.......................................................... 5
- REFUSED ..................................................... 7
- DON'T KNOW .............................................. 9

KIQ.052 During the **past 12 months**, how much did {your/his/her} leakage of urine affect {your/his/her} day-to-day activities?

(please select one of the following choices:)

- not at all, ........................................................ 1
- only a little,..................................................... 2
- somewhat, ..................................................... 3
- very much, or................................................. 4
- greatly?.......................................................... 5
- REFUSED ..................................................... 7
- DON'T KNOW .............................................. 9

KIQ.480 During the **past 30 days**, how many times per night did {you/s/he} most typically get up to urinate, from the time {you/he/she} went to bed at night until the time {you/he/she} got up in the morning.

Would {you/s/he} say .

- 0, ................................................................... 0
- 1, ................................................................... 1
- 2, ................................................................... 2
- 3, ................................................................... 3
- 4, ................................................................... 4
- 5 or more? ..................................................... 5
- REFUSED ..................................................... 77
- DON'T KNOW .............................................. 99