KENYA - UPHD - Survey on Social, Health and Overall wellbeing of older people (50+ years)

Report generated on: November 24, 2014

Visit our data catalog at: http://aphrc.org/catalog/microdata/index.php
Overview

Identification

**ID NUMBER**
APHRC-UPHD-AGING-2008-1.1

Version

**VERSION DESCRIPTION**
v1.0: Edited, anonymous dataset for Data Documentation Working Group

**PRODUCTION DATE**
2011-06-09

**NOTES**
Version 1.1, November 2014. Anonymized with DOI and Recommended Citation added.

Overview

**ABSTRACT**
The Aging Survey is part of the 5 themes of the Urbanization, Poverty and Health Dynamics I (UPHD I) Project in Sub-Saharan Africa. The UPHD I project was designed and implemented by APHRC.

The study on the migration, poverty and the wellbeing of older people is a longitudinal research project following up older people living in two slums of Nairobi, Kenya. The project is a partnership between University of Southampton, UK and the African Population and Health Research Centre (APHRC) located in Nairobi, Kenya. The overall aim of the study is to investigate the living arrangements and well-being of older people living in informal settlements and how these differ by migration status and socioeconomic circumstances.

Although the overall aim of the study (UPHD I) was to investigate the living arrangements and well-being of older people living in informal settlements and how these differ by migration status and socioeconomic circumstances.

The specific objectives were to study:

1.1 The poverty status, economic activity, demographic profile, living arrangements, and social support networks of older people;

1.2 Understand the determinants of health and health-seeking behaviour among the older people;

1.3 Examine the migration histories, migration intentions and linkages with place of origin of older urban slum dwellers;

1.4 and to understand patterns of care and support in later life and how this is affected by increased mortality of economically active adults.

**KIND OF DATA**
Sample survey data [ssd]

**UNITS OF ANALYSIS**
The unit of analysis is the individual

Scope

**NOTES**
The scope of the Aging Survey includes:
KENYA - UPHD - Survey on Social, Health and Overall wellbeing of older people (50+ years)

- Identification Information and Consent; Marital Status; Care and support; Links with place of origin; Work History and Benefits; Health care utilization; Health state descriptions - WHODAS 12 AND WHOQoL; Caring for Persons with prolonged illness; Social-cultural environment; Anthropometrics and biomarkers

Coverage

GEOGRAPHIC COVERAGE
Two informal settlements, Korogocho and Viwandani, in Nairobi City (the capital city) of Kenya.

UNIVERSE
The survey covered all de jure household members (usual residents), aged 50 years and above in the household

Producers and Sponsors

PRIMARY INVESTIGATOR(S)

<table>
<thead>
<tr>
<th>Name</th>
<th>Affiliation</th>
</tr>
</thead>
<tbody>
<tr>
<td>African Population &amp; Health Research Center</td>
<td>APHRC</td>
</tr>
</tbody>
</table>

OTHER PRODUCER(S)

<table>
<thead>
<tr>
<th>Name</th>
<th>Affiliation</th>
<th>Role</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eliya Zulu, PhD</td>
<td>APHRC</td>
<td>Principal Investigator</td>
</tr>
<tr>
<td>Nyovani Madise, PhD</td>
<td>APHRC</td>
<td>Co-Investigator</td>
</tr>
<tr>
<td>Alex Ezeh, PhD</td>
<td>APHRC</td>
<td>Co-Investigator</td>
</tr>
<tr>
<td>John Cleland, PhD</td>
<td></td>
<td>Co-Investigator</td>
</tr>
<tr>
<td>Jane Falkingham, PhD</td>
<td></td>
<td>Co-Investigator</td>
</tr>
<tr>
<td>Jean-Christophe Fotso, PhD</td>
<td>APHRC</td>
<td>Co-Investigator</td>
</tr>
<tr>
<td>Zewdu Woubalem, PhD</td>
<td>APHRC</td>
<td>Co-Investigator</td>
</tr>
</tbody>
</table>

FUNDING

<table>
<thead>
<tr>
<th>Name</th>
<th>Abbreviation</th>
<th>Role</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wellcome Trust</td>
<td></td>
<td>Funder</td>
</tr>
</tbody>
</table>

OTHER ACKNOWLEDGEMENTS

<table>
<thead>
<tr>
<th>Name</th>
<th>Affiliation</th>
<th>Role</th>
</tr>
</thead>
<tbody>
<tr>
<td>Residents of Korogocho and Viwandani Slums</td>
<td></td>
<td>Study Subjects</td>
</tr>
</tbody>
</table>

Metadata Production

METADATA PRODUCED BY

<table>
<thead>
<tr>
<th>Name</th>
<th>Abbreviation</th>
<th>Affiliation</th>
<th>Role</th>
</tr>
</thead>
<tbody>
<tr>
<td>African Population &amp; Health Research Center</td>
<td></td>
<td>APHRC</td>
<td>Metadata Producer</td>
</tr>
</tbody>
</table>

DATE OF METADATA PRODUCTION
2011-05-09

DDI DOCUMENT VERSION
Version 1.1

DDI DOCUMENT ID
**Sampling**

**Sampling Procedure**

Two cohorts of older people were recruited. The first cohort was recruited between October 2006 - February 2007 and the second cohort recruited in October -December 2007. Older people 50 years and older who were resident members of the HDSS at the time of the recruitment formed the sampling frame for the study. At the first recruitment (Cohort 1), 2,612 older people were resident in the demographic surveillance area. The second recruitment targeted older people who in-migrated (123) into the surveillance area between the January - September 2007, those who turned 50 years (242) as well as older people who were present in the first recruitment (392) but who contact could not be established. The sampling frame for the baseline was therefore a total of 2,972 older people.

**Deviations from Sample Design**

All DSS Residents aged 50 years and above living in the study area qualify to respond to this questionnaire. No samples were drawn.

**Response Rate**

The overall survey response was 100 percent. With varying percentages on Individual questions. Omissions occurred on individual questions due to refusal to answer, and use of proxy respondents.

**Weighting**

Sample weights were not used.
Questionnaires

No content available
Data Collection

Data Collection Dates

<table>
<thead>
<tr>
<th>Start</th>
<th>End</th>
<th>Cycle</th>
</tr>
</thead>
<tbody>
<tr>
<td>2006-01-11</td>
<td>2010-12-14</td>
<td>N/A</td>
</tr>
</tbody>
</table>

Data Collection Mode

Face-to-face [f2f]

Data Collectors

<table>
<thead>
<tr>
<th>Name</th>
<th>Abbreviation</th>
<th>Affiliation</th>
</tr>
</thead>
<tbody>
<tr>
<td>African Population &amp; Health Research Center</td>
<td>APHRC</td>
<td></td>
</tr>
</tbody>
</table>

Supervision

Interviewing teams in the two sites of study comprised of:
- Korogocho: 1 field supervisor, 2 editing team leaders, 1 data quality control team leader, 2 data quality control officers, 12 interviewers
- Viwandani: 1 field supervisor, 2 editing team leaders, 1 data quality control team leader, 3 data quality control officers, 17 interviewers

The roles of the various members of the interviewing teams were:
- Interviewer: Conducting face-to-face paper-based interviews in assigned zone within the study site
- Data Quality Control Officer: Performing random spot-checks on 10% of the questionnaires and reporting inconsistencies to the Data Quality Control Team Leader for harmonization
- Data Quality Control Team Leader: Harmonizing inconsistencies within questionnaires and performing a random spot-check on 10% of the 10% questionnaires that have already undergone spot-checking
- Editing Team Leader: Editing 100% of questionnaires from randomly selected field workers and documenting issues emerging during data collection
- Field supervisor: Responsible for overseeing general operations, resolving issues that cannot be harmonized by data quality control and ensuring that field work progressed on schedule. They also conducted sit-in interviews along with Data Quality Control Team Leader

The Field Co-ordinator, Research Officer and/or Project Managers visited the field and field teams regularly to monitor and review progress and support field operations.
Data Processing

Data Editing

Data editing took place at a number of stages throughout the processing, including:

a) Office editing and coding
b) During data entry
c) Structure checking and completeness
d) Secondary editing
e) Structural checking of SPSS data files

Detailed documentation of the editing of data can be found in the "Standard Procedures Manual" document provided as an external resource.

Some corrections are made automatically by the program (80%) and the rest by visual control of the questionnaire (20%).

Where changes are made by the program, a cold deck imputation is preferred; where incorrect values are imputed using existing data from another dataset. If cold deck is found to be insufficient, hot deck imputation is used. In this case, a missing value is imputed from a randomly selected similar record in the same dataset.

Other Processing

Data entry was performed manually at APHRC's headquarters on desktop computers and was done using an in-house built system with a Visual Basic.Net front-end and a Microsoft SQL Server back-end. Double data entry was carried out on 10% of the questionnaires.

Data were processed in clusters, with each cluster being processed as a complete unit through each stage of data processing. Each cluster goes through the following steps:

1) Questionnaire reception
2) Office editing and coding
3) Data entry
4) Structure and completeness checking
5) Verification entry
6) Comparison of verification data
7) Back up of raw data
8) Secondary editing
9) Edited data back up

After all clusters are processed, all data is concatenated together and then the following steps are completed for all data files:

10) Export to STATA 10 in 2 files (migration & employment history, migration & employment calendar)
11) Recoding of variables needed for analysis
13) Structural checking of STATA 10 files
14) Data quality tabulations
15) Production of analysis tabulations

Details of each of these steps can be found in the Standard Procedures Manual.
Data Appraisal

Estimates of Sampling Error

No estimation of sampling error was done.