

Supplementary File S1

English Version of Self-developed General Information Questionnaire Basic Information of
Participants

1Living status of the elderly

- ☐ Living with roommates
- ☐ Living with spouse
- ☐ Living alone
- ☐ Others

2Transfer mobility mode

- ☐ No assistance required
- ☐ Walking with support from others
- ☐ Walking stick
- ☐ Wheelchair
- ☐ Bedridden
- ☐ Others

3Gender

- ☐ Male ☐ Female

Age: _____ years old

4Marital status

- ☐ Unmarried
- ☐ Married
- ☐ Divorced

☐ Widowed

☐ Remarried

☐ Others

5Educational level

☐ Primary school and below

☐ Junior high school

☐ Technical secondary school / Senior high school

☐ Junior college and bachelor's degree

☐ Master's degree and above

Physical Sensory Status

6Vision status

☐ Normal

☐ Impaired but does not interfere with daily life

☐ Mild impairment affecting daily life

☐ Moderate impairment affecting daily life

☐ Severe impairment affecting daily life

☐ Complete loss of vision

7Hearing status

☐ Normal

☐ Impaired but does not interfere with daily life

☐ Mild impairment affecting daily life

☐ Moderate impairment affecting daily life

☐ Severe impairment affecting daily life

☐ Complete loss of hearing

8Disease-Related Information

Number of comorbid chronic diseases: _____ items

List of chronic diseases: Hypertension, diabetes, stroke, dementia, Parkinson's disease, coronary heart disease, heart failure, atrial fibrillation, chronic obstructive pulmonary disease, pulmonary heart disease, malignant tumor, osteoarthritis, osteoporosis, others.