Tilburg Frailty Indicator (TFI)*

Part A Determinants of frailty

1. Which sex are you? 0 male 0 female
2. What is your age? .................................. years
3. What is your marital status? 0 married/living with partner 0 unmarried 0 separated/divorced 0 widow/widower
4. In which country were you born? 0 The Netherlands 0 Former Dutch East Indies 0 Suriname 0 Netherlands Antilles 0 Turkey 0 Morocco 0 Other, namely..................
5. What is the highest level of education you have completed? 0 none or primary education 0 secondary education 0 higher professional or university education
6. Which category indicates your net monthly household income? 0 €600 or less 0 €601 - €900 0 €901 - €1200 0 €1201 - €1500 0 €1501 - €1800 0 €1801 - €2100 0 €2101 or more
7. Overall, how healthy would you say your lifestyle is? 0 healthy 0 not healthy, not unhealthy 0 unhealthy
8. Do you have two or more diseases and/or chronic disorders? 0 yes 0 no
9. Have you experienced one or more of the following events during the past year? 0 yes 0 no
   - the death of a loved one
   - a serious illness you yourself
   - a serious illness in a loved one
   - a divorce or ending of an important intimate relationship
   - a traffic accident
   - a crime
10. Are you satisfied with your home living environment? 0 yes 0 no
Part B Components of frailty

B1  Physical components

11. Do you feel physically healthy?  0 yes  0 no
12. Have you lost a lot of weight recently without wishing to do so?
   (‘a lot’ is: 6 kg or more during the last six months, or 3 kg or more during the last month)
   0 yes  0 no

Do you experience problems in your daily life due to:

13. ..........difficulty in walking?  0 yes  0 no
14. ..........difficulty maintaining your balance?  0 yes  0 no
15. ..........poor hearing?  0 yes  0 no
16. ..........poor vision?  0 yes  0 no
17. ..........lack of strength in your hands?  0 yes  0 no
18. ..........physical tiredness?  0 yes  0 no

B2  Psychological components

19. Do you have problems with your memory?  0 yes  0 sometimes  0 no
20. Have you felt down during the last month?  0 yes  0 sometimes  0 no
21. Have you felt nervous or anxious during the last month?  0 yes  0 sometimes  0 no
22. Are you able to cope with problems well?  0 yes  0 no

B3  Social components

23. Do you live alone?  0 yes  0 no
24. Do you sometimes miss having people around you?  0 yes  0 sometimes  0 no
25. Do you receive enough support from other people?  0 yes  0 no

* The TFI was translated into English using the method of back-translation.
Scoring Part B Components of frailty (range: 0 – 15)

Question 11: yes = 0, no = 1
Question 12 – 18: no = 0, yes = 1
Question 19: no and sometimes = 0, yes = 1
Question 20 and 21: no = 0, yes and sometimes = 1
Question 22: yes = 0, no = 1
Question 23: no = 0, yes = 1
Question 24: no = 0, yes and sometimes = 1
Question 25: yes = 0, no = 1

Cutpoint: 5