



2018

**Maryland Behavioral Risk Factor Surveillance System  
Questionnaire**

**Skip Patterns/CATI Instructions = Red text**

**Spanish translations = Blue text**

**Question Variables = Bold with colon**

**Interviewer Notes = The words "INTERVIEWER NOTE" to always be in bold text  
on the screen.**

**Samptype = 1 = land**

**Samptype = 2 = cell**

**Variables to Insert:**

STATE	HEALTHDEPT	DEPTPHONE	LENGTH
Maryland	Maryland Department of Health	844-403-3933	27

**Asgncty –from sample by state**

**HGENDER:**

**1 MALE**

**2 FEMALE**

CDC NOTE: Items in parentheses at any  
place in the questions or response DO NOT  
need to be read.

**Core draft as of: July 12, 2017**



# Behavioral Risk Factor Surveillance System

## 2018 Questionnaire

### Table of Contents

<b>Table of Contents</b> .....	<b>2</b>
Interviewer’s Script Landline.....	3
Interviewer’s Script Cell Phone.....	10
<b>Core Sections</b> .....	<b>17</b>
Section 1: Health Status.....	17
Section 2: Healthy Days — Health-Related Quality of Life.....	17
Section 3: Health Care Access.....	18
Section 4: Exercise.....	19
Section 5: Inadequate Sleep.....	19
Section 6: Chronic Health Conditions.....	20
<b>Module 1: Pre-Diabetes (Split 1, 2 and 3)</b> .....	<b>23</b>
Section 7: Oral Health.....	24
<b>State Added Section 1: Oral Cancer Screening (Split 1)</b> .....	<b>25</b>
Section 8: Demographics.....	26
<b>Module 21: Sexual Orientation and Gender Identity (Split 1, 2 and 3)</b> .....	<b>27</b>
<b>Module 20: Industry and Occupation (Split 1, 2 and 3)</b> .....	<b>36</b>
Section 9: Tobacco Use.....	43
<b>State Added Section 2: Smoking Initiation (Split 1, 2 and 3)</b> .....	<b>45</b>
<b>State Added Section 3: Tobacco Products (Split 1, 2 and 3)</b> .....	<b>45</b>
<b>Module 6: E-Cigarettes (Split 1, 2 and 3)</b> .....	<b>46</b>
<b>Module 7: Marijuana Use (Split 1, 2 and 3)</b> .....	<b>47</b>
Section 10: Alcohol Consumption.....	48
Section 11: Immunization.....	50
Section 12: Falls.....	53
Section 13: Seat Belt Use and Drinking and Driving.....	53
Section 14: Breast and Cervical Cancer Screening.....	54
Section 15: Prostate Cancer Screening.....	56
Section 16: Colorectal Cancer Screening.....	58
Section 17: HIV/AIDS.....	59
<b>Module 12: Excess Sun Exposure (Split 1)</b> .....	<b>61</b>
<b>Module 13: Lung Cancer Screening (Split 1, 2 and 3)</b> .....	<b>62</b>
<b>State Added Section 4: Smoking Cessation (Split 1, 2 and 3)</b> .....	<b>64</b>
<b>State Added Section 5: Secondhand Smoke (Split 1, 2 and 3)</b> .....	<b>68</b>
<b>Module 22: Random Child Selection (Split 1)</b> .....	<b>70</b>
<b>Module 23: Childhood Asthma Prevalence (Split 1)</b> .....	<b>75</b>
<b>State-Added Section 6: Childhood Human HPV (Split 1)</b> .....	<b>76</b>
<b>State Added Section 7: Preconception Health and Family Planning (Split 1, 2 and 3)</b> .....	<b>77</b>
<b>State Added Section 8: Substance Use (Split 1, 2 and 3)</b> .....	<b>80</b>
<b>State Added Section 9: Adverse Childhood Experiences (Split 2 and 3)</b> .....	<b>82</b>
<b>State Added Section 10: Intimate Partner Violence (Split 2 and 3)</b> .....	<b>88</b>
Asthma Module: Call-Back Permission Script.....	92
Zika Module: Call-Back Permission Script (Split 1, 2, and 3).....	93
Closing statement.....	95

## Interviewer's Script Landline

Form Approved  
OMB No. 0920-1061  
Exp. Date 3/31/2018

Public reporting burden of this collection of information is estimated to average 27 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0920-1061).

NOTE: Interviewers do not need to read any part of the burden estimate nor provide the OMB number unless asked by the respondent for specific information. If a respondent asks for the length of time of the interview provide the most accurate information based on the version of the questionnaire that will be administered to that respondent. If the interviewer is not sure, provide the average time as indicated in the burden statement. If data collectors have questions concerning the BRFSS OMB process, please contact Carol Pierannunzi at [ivk7@cdc.gov](mailto:ivk7@cdc.gov).

### **Answering Machine message text [TO BE LEFT ON 1ST, 4TH, AND 9TH ATTEMPT RESULTING IN AN ANSWERING MACHINE]:**

Hello, the Maryland Department of Health is conducting a study about the health of Maryland residents. We will call again in the next few days to conduct the interview. If you have any questions, please call us, toll free, at 1-844-403-3933. For most people, the study will be very brief and we would be glad to answer any questions you have. The toll free number again is 1-844-403-3933. Thank you.

### **Privacy Manager: [PROMPT AT 1ST, 4TH, AND 9TH ATTEMPT RESULTING IN PRIVACY MANAGER]**

\_\_\_\_ calling on behalf of the Maryland Department of Health.

IF MESSAGE ASKS TO ENTER A PHONE NUMBER:

1-844-403-3933

**//ask if samptype=1//**



**Intro1:** Hello, I am calling for the Maryland Department of Health. My name is \_\_\_\_\_. We are gathering information about the health of Maryland residents. This project is conducted by the health department with assistance from the Centers for Disease Control and Prevention. Your telephone number has been chosen randomly, and I would like to ask some questions about health and health practices. This call may be monitored or recorded for quality control.

Is this **[INSERT \$N]**?

**INTERVIEWER NOTE:** IF NO: Thank you very much, but I seem to have dialed the wrong number. It's possible that your number may be called at a later time.

01 Yes- Continue

10 Callback

20 Refusal

D3 Answering Machine

B2 Busy

DA Dead Air

HU Hang Up

NA No Answer

NW Non-Working Number

**For Resumed Interviews and samptype =1:**

**//if samptype =1//**

**INTROa1:** Hello, I'm \_\_\_\_\_ calling from ICF for the Maryland State Department of Health and the Centers for Disease Control and Prevention. We are gathering information about the health of Maryland residents. This call may be monitored or recorded for quality control. When we called previously the computer randomly selected the **[INSERT HGENDER]** 18 years of age or older in the household with the next birthday to be interviewed.

May I please speak to him/her?

01 Selected on the line **[go to resume location]**

**//ask if intro1=1 and samptype = 1//**

**HS1:** Is this a private residence?

**READ ONLY IF NECESSARY:** By private residence, we mean someplace like a house or apartment.

**INTERVIEWER NOTE:** Private residence includes any home where the respondent spends at least 30 days including vacation homes, RVs or other locations in which the respondent lives for portions of the year.

1. Yes **[GO TO STRES]**
2. No **[GO TO COLLEGE]**
3. No , Business phone only

**//if HS1=3/**

**BUS:** Thank you very much but we are only interviewing persons on residential phone lines at this time.

1. Continue **[Assign dispo M8]**

**//if HS1=2//**

**COLLEGE:** Do you live in college housing?

**READ ONLY IF NECESSARY:** By college housing we mean dormitory, graduate student or visiting faculty housing, or other housing arrangement provided by a college or university.

**INTERVIEWER NOTE:** If no, probe to find out if business or group home.

- 1 Yes **[Go to STRES]**
- 2 No - Business
- 3 No - Group home
- 7 Don't know / Not sure
- 9 Refused

**//if college = 2, 3, 7,9//**

**X2:** Thank you very much, but we are only interviewing persons who live in a private residence or college housing at this time.

1. Continue **[assign dispo M8 ]**

**//ask if samptype = 1//**

**STRES:** Do you currently live in **[INSERT STATE]**?

- 1 Yes **[Go to HS2]**
- 2 No
- 7 Don't know / Not sure
- 9 Refused

**//if stres = 2, 7, 9//**

**X3:** Thank you very much, but we are only interviewing persons who live in [insert STATE] at this time.

1 Continue **[ASSIGN DISPO M7]**

**//ask if HS1=1 or college = 1//**

**HS2:** Is this a cell phone?

**INTERVIEWER NOTE:** Telephone service over the internet counts as landline service (includes vonage, magic jack and other home-based phone services).

**READ ONLY IF NECESSARY:** By cell phone we mean a telephone that is mobile and usable outside your neighborhood.

- 1 Yes, it is a cell phone
- 2 No, not a cell phone

**//if HS2=2//**

**HS2X:** Thank you very much, but we are only interviewing by land line telephones in private residences or college housing at this time.

1 Continue **[Assign dispo M3]**

**//ask if college=1 and hs2=2//**

**ADULT:** Are you 18 years of age or older?

**DO NOT READ:** Sex will be asked again in demographics section.

- 1 Yes, respondent is male
- 2 Yes, respondent is female
- 3 No

**//IF ADULT = 1, SET HGENDER = 1 MALE //**

**//if ADULT = 2, SET HGENDER = 2 FEMALE//**

**//IF ADULT = 1 or 2, Go to YOURTHE1//**

**//ask if HS1=1 and hs2=2//**

**ADULTS:** I need to randomly select one adult who lives in your household to be interviewed. Excluding adults living away from home, such as students away at college, how many members of your household, including yourself, are 18 years of age or older?

\_\_\_ Number of adults **[RANGE 0-18]**

**//ask if ADULTS = 0 or ADULT = 3 //**

**XX3:** Thank you very much, but we are only interviewing persons aged 18 or older at this time.

1 Continue [**Assign dispo M6**]

**//ask if ADULTS = 1//**

**ONEADULT:** Are you the adult?

**INTERVIEWER NOTE:** Gender will be asked again in demographics section.

- 21 Yes and the respondent is Male
- 22 Yes and the respondent is Female
- 03 No

**//IF ONEADULT = 21, SET HGENDER = 1 MALE //**  
**//if ONEADULT = 22, SET HGENDER = 2 FEMALE//**

**//ASK IF ONEADULT=21 OR 22//**

**YOU:** Then you are the person I need to speak with.

01 Continue [**go to YOURTHE1**]

**//if ONEADULT=03//**

**ASKGENDR:** Is the adult a man or a woman?

- 21 Male
- 22 Female

**//IF ASKGENDR = 21, SET HGENDER = 1 MALE //**  
**//if ASKGENDR = 22, SET HGENDER = 2 FEMALE//**

**//if ONEADULT=03//**

**GETADULT:** May I speak with [if askgendr = 21, insert him; if askgendr = 22, insert her]?

- 1 Yes, Adult coming to the phone. [**GO TO NEWADULT**]
- 2 No, not here [**GO TO TERMINATION SCREEN**]

**//ASK IF ADULTS>1//**

**MEN:** How many of these adults are men?

\_\_\_ Number of men [**RANGE 0-ADULTS**]

**//SET NWOMEN=ADULTS-MEN//**

**NWOMEN: (numeric)**

**//ask if NWOMEN>0//**

**WOMEN:** So the number of women in the household is [insert **NWOMEN**].  
Is that correct?

- 1 Yes
- 2 No **[go back to ADULTS]**

**//if Adults >1 and samptype= 1//**

**NBIRTH:** Among the [INSERT **ADULTS**] adults in your household, may I please speak with the adult with the next birthday?

- 1 Yes, on the line **[go to GENDER]**
- 2 Yes, adult coming to the phone **[go to GENDER]**
- 3 No, adult not available at this time **[go to GENDER]**

**//ask if nbirth = 1, 2 or 3//**

**GENDER:**

**READ ONLY IF NECESSARY:**

Is the adult a man or a woman?

- 21 Male
- 22 Female

**//IF GENDER = 21, SET HGENDER = 1 MALE //**

**//if GENDER = 22, SET HGENDER = 2 FEMALE//**

**//if nbirth=3 and gender = 21 or 22 //: Suspend and schedule a call back.**

**//if getadult = 1 or nbirth = 2//**

**NEWADULT:** Hello, I am calling for the Maryland Department of Health. My name is \_\_\_\_\_ . We are gathering information about the health of Maryland residents. This project is conducted by the health department with assistance from the Centers for Disease Control and Prevention. Your telephone number has been chosen randomly, and I would like to ask some questions about health and health practices. This call may be monitored or recorded for quality control.

01 Continue



**//ask if samptype=1//**

**YOURTHE1:** I will not ask for your last name, address, or other personal information that can identify you. You do not have to answer any question you do not want to, and you can end the interview at any time. Any information you give me will be confidential. If you have any questions about the survey, please call 1-844-403-3933. If you have any questions regarding your rights as a participant, please call Ms. Gay Hutchen, IRB Administrator, at 410-767-8448.

**INTERVIEWER NOTE:** The interview takes on average **27** minutes depending on your answers.

001 Person Interested, continue.

002 Go back to Adults question. **WARNING: A NEW RESPONDENT WILL BE SELECTED AND YOU NEED A SUPERVISOR'S PASSWORD TO CONTINUE [Go to ADULTS]**



## Interviewer's Script Cell Phone

Form Approved

OMB No. 0920-1061

Exp. Date 3/31/2018

Public reporting burden of this collection of information is estimated to average xx minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0920-1061).

NOTE: Interviewers do not need to read any part of the burden estimate nor provide the OMB number unless asked by the respondent for specific information. If a respondent asks for the length of time of the interview provide the most accurate information based on the version of the questionnaire that will be administered to that respondent. If the interviewer is not sure, provide the average time as indicated in the burden statement. If data collectors have questions concerning the BRFSS OMB process, please contact Carol Pierannunzi at [ivk7@cdc.gov](mailto:ivk7@cdc.gov).

### **Answering Machine message text [TO BE LEFT ON 1ST, 4TH, AND 9TH ATTEMPT RESULTING IN AN ANSWERING MACHINE]:**

Hello, the Maryland Department of Health is conducting a study about the health of Maryland residents. We will call again in the next few days to conduct the interview. If you have any questions, please call us, toll free, at 1-844-403-3933. For most people, the study will be very brief and we would be glad to answer any questions you have. The toll free number again is 1-844-403-3933. Thank you.

**//ask if samptype=2//**

**Intro1:** Hello, I am calling for the Maryland Department of Health. My name is \_\_\_\_\_. We are gathering information about the health of Maryland residents. This project is conducted by the health department with assistance from the Centers for Disease Control and Prevention. Your telephone number has been chosen randomly, and I would like to ask some questions about health and health practices. This call may be monitored or recorded for quality control.

Is this a safe time to talk with you?

**INTERVIEWER NOTE:** If no, say: “Thank you very much. We will call you back at a more convenient time.” **[go to call back screen]**

01 Yes – Continue  
02 No – Not a safe time

10 Callback  
20 Refusal  
D3 Answering Machine  
B2 Busy  
DA Dead Air  
HU Hand up  
NA No Answer  
NW Non-Working Number

**//if intro1=01//**

**PHONE:** Is this **[INSERT \$N]**?

**INTERVIEWER NOTE:** Please confirm negative responses to ensure that respondent has heard and understood correctly.

- 1 Yes **[Go to CELLFON2]**
- 2 No
- 3 Not a safe time/driving **[go to call back screen]**
- 7 Don't know / Not sure **[Go to CELLFON2]**
- 9 Refused **[Go to CELLFON2]**

**//ask if PHONE=2//**

**XPHONE:** Thank you very much, but I seem to have dialed the wrong number. It's possible that your number may be called at a later time.

01 Continue **[go to termination screen]**

**//ask if PHONE=1, 7, 9//**

**CELLFON2:** Is this a cell phone?

**READ ONLY IF NECESSARY:** By cell telephone, we mean a telephone that is mobile and usable outside of your neighborhood.

**INTERVIEWER NOTE:** Please confirm negative responses to ensure that respondent has heard and understood correctly.

- 1 Yes **[Go to CADULT]**
- 2 No
- 3 Not a safe time/driving **[go to call back screen]**
- 7 Don't know / Not sure
- 9 Refused

**//ASK IF CELLFON2=2//**

**NOTCELL1:** Thank you very much, but we are only interviewing cell telephones at this time.

1 Continue **[Assign dispo M2]**

**//ASK IF CELLFON2=7,9//**

**NOTCELL2:** Thank you for your time.

1 Continue **[Assign dispo M2]**

**//ask if CELLFON2=1 //**

**CADULT:** Are you 18 years of age or older?

**DO NOT READ:** Sex will be asked again in demographics section.

1. Yes, respondent is male
2. Yes, respondent is female
- 3 No **[GO TO CADULT2]**
- 4 Not a safe time/driving **[go to call back screen]**
- 7 Don't know / Not sure
- 9 Refused

**//IF CADULT = 1, SET HGENDER = 1 MALE //**

**//if CADULT = 2, SET HGENDER = 2 FEMALE//**

**//if CADULT = 1 or 2, go to PVTRES2//**

**//if CADULT=7, 9//**

**AGEREF:** Thank you very much for your time.

1 Continue **[Assign dispo M3]**

**//if CADULT=3//**

**CADULT2:** Is there an adult that also uses this cell phone?

- 1 Yes **[GO TO CADULT3]**
- 2 No

**//if CADULT2=2//**

**NOTOLD:** Thank you very much, but we are only interviewing persons aged 18 or older at this time.

1 Continue **[assign dispo M6]**

**//if CADULT2=1//**

**CADULT3:** May I speak with him or her?

- 1 SWITCHING TO RESPONDENT **[Go to INTRO1]**
- 2 RESPONDENT NOT AVAILABLE/CALLBACK **[Assign dispo C4]**

**// ASK IF CADULT=1, 2 //**

**PVTRES2:** Do you live in a private residence?

**READ ONLY IF NECESSARY:** By private residence, we mean someplace like a house or apartment.

**INTERVIEWER NOTE:** Private residence includes any home where the respondent spends at least 30 days including vacation homes, RVs or other locations in which the respondent lives for portions of the year.

- 1 Yes **[Go to CSTATE]**
- 2 No **[Go to COLLEGE]**
- 3 Not a safe time / driving **[go to call back screen]**
- 7 Don't know / Not sure
- 9 Refused

**//if pvtresd2=2//**

**COLLEGE:** Do you live in college housing?

**READ ONLY IF NECESSARY:** By college housing we mean dormitory, graduate student or visiting faculty housing, or other housing arrangement provided by a college or university.

**INTERVIEWER NOTE:** If no, probe to find out if business or group home.

- 1 Yes **[Go to CSTATE]**
- 2 No – Business
- 3 No – Group home
- 4 Not a safe time/driving **[go to call back screen]**
- 7 Don't know / Not sure
- 9 Refused

**//if college = 2,3 //**

**NOTARES:** Thank you very much, but we are only interviewing persons who live in a private residence or college housing at this time.

1 Continue **[assign dispo M8]**

**//if PVTRES2=7,9 or college = 7, 9//**

**X4:** Thank you very much for your time.

1 Continue **[ASSIGN DISPO M8]**

**// ASK IF PVTRES2=1 or COLLEGE = 1//**

**CSTATE:** Do you currently live in **[INSERT STATE]**?

- |   |                           |                                 |
|---|---------------------------|---------------------------------|
| 1 | Yes                       | <b>[Go to LANDLINE]</b>         |
| 2 | No                        | <b>[Go to RSPSTATE]</b>         |
| 3 | Not a safe time / driving | <b>[go to call back screen]</b> |
| 7 | Don't know / Not sure     |                                 |
| 9 | Refused                   |                                 |

**//if CSTATE=7,9//**

**X5:** Thank you very much for your time.

1 Continue **[ASSIGN DISPO M7]**

**// ASK IF CSTATE=2 //**

**RSPSTATE:** In what state do you currently live?

\_\_\_\_\_ ENTER FIPS STATE

AL Alabama  
AK Alaska  
AZ Arizona  
AR Arkansas  
CA California  
CO Colorado  
CT Connecticut  
DE Delaware  
DC District of Columbia  
FL Florida  
GA Georgia  
HI Hawaii  
ID Idaho  
IL Illinois  
IN Indiana  
IO Iowa

KS Kansas  
KY Kentucky  
LA Louisiana  
ME Maine  
MD Maryland  
MA Massachusetts  
MI Michigan  
MN Minnesota  
MS Mississippi  
MO Missouri  
MT Montana  
NE Nebraska  
NV Nevada  
NH New Hampshire  
NJ New Jersey  
NM New Mexico  
NY New York  
NC North Carolina  
ND North Dakota  
OH Ohio  
OK Oklahoma  
OR Oregon  
PA Pennsylvania  
RI Rhode Island  
SC South Carolina  
SD South Dakota  
TN Tennessee  
TX Texas  
UT Utah  
VT Vermont  
VA Virginia  
WA Washington  
WV West Virginia  
WI Wisconsin  
WY Wyoming  
99 Refused

**//ask if RSPSTATE = 99//**

**REFSTATE:** I'm sorry, but our data is compiled by state. In order to qualify for the interview we need to know which state you live in. Thank you for your time.

1 Continue **[ASSIGN DISPO M7]**

**//ask if samptype=2//**

**LANDLINE:** Do you also have a landline telephone in your home that is used to make and receive calls?

**READ ONLY IF NECESSARY:** By landline telephone, we mean a regular telephone in your home that is used for making or receiving calls. Please include landline phones used for both business and personal use.

**INTERVIEWER NOTE:** Telephone service over the internet counts as landline service (includes vonage, magic jack and other home-based phone services).

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

**CATI NOTE: IF COLLEGE = 1 (YES), DO NOT ASK NUMADULT, GO TO svintro2.**

**//ask if pvtresd2 = 1//**

**NUMADULT:** How many members of your household, including yourself, are 18 years of age or older?

- \_\_\_ Number of adults **[Range = 1-18]**
- 99 Refused

**CATI NOTE: IF COLLEGE = 1 (YES) THEN NUMADULT IS AUTOMATICALLY SET TO 1.**

**//ask if samptype=2//**

**svintro2:** I will not ask for your last name, address, or other personal information that can identify you. You do not have to answer any question you do not want to, and you can end the interview at any time. Any information you give me will not be connected to any personal information. If you have any questions about the survey, please call 1-844-403-3933. If you have any questions regarding your rights as a participant, please call Ms. Gay Hutchen, IRB Administrator, at 410-767-8448.

**INTERVIEWER NOTE:** The interview takes on average [insert **LENGTH**] minutes depending on your answers.

- 1. Continue
- 2. Driving / Not a Safe Time **[go to call back screen]**
- 3. Refused **[go to termination screen]**



## Core Sections

### Section 1: Health Status

---

**//ask of all//**

**s1q1:** Would you say that in general your health is—

**PLEASE READ:**

- 1 Excellent
- 2 Very good
- 3 Good
- 4 Fair, or
- 5 Poor

**DO NOT READ:**

- 7 Don't know / Not sure
- 9 Refused

### Section 2: Healthy Days — Health-Related Quality of Life

---

**//ask of all//**

**s2q1:** Now thinking about your physical health, which includes physical illness and injury, for how many days during the past 30 days was your physical health not good?

- \_\_ \_ Number of days **[RANGE: 1-30]**
- 88 None
- 77 Don't know / Not sure
- 99 Refused

**//ask of all//**

**s2q2:** Now thinking about your mental health, which includes stress, depression, and problems with emotions, for how many days during the past 30 days was your mental health not good?

- \_\_ \_ Number of days **[RANGE: 1-30]**
- 88 None
- 77 Don't know / Not sure
- 99 Refused

**//ask if not (s2q1 = 88 AND s2q2 = 88)//**

**s2q3:** During the past 30 days, for about how many days did poor physical or mental health keep you from doing your usual activities, such as self-care, work, or recreation?

- |    |                                     |
|----|-------------------------------------|
| —  | Number of days <b>[RANGE: 1-30]</b> |
| 88 | None                                |
| 77 | Don't know / Not sure               |
| 99 | Refused                             |

### Section 3: Health Care Access

---

**//ask of all//**

**s3q1:** Do you have any kind of health care coverage, including health insurance, prepaid plans such as HMOs, government plans such as Medicare, or Indian Health Service?

- |   |                       |
|---|-----------------------|
| 1 | Yes                   |
| 2 | No                    |
| 7 | Don't know / Not sure |
| 9 | Refused               |

**//ask of all//**

**s3q2:** Do you have one person you think of as your personal doctor or health care provider?

**If No, ask:** "Is there more than one, or is there no person who you think of as your personal doctor or health care provider?"

- |   |                       |
|---|-----------------------|
| 1 | Yes, only one         |
| 2 | More than one         |
| 3 | No                    |
| 7 | Don't know / Not sure |
| 9 | Refused               |

**//ask of all//**

**s3q3:** Was there a time in the past 12 months when you needed to see a doctor but could not because of cost?

- |   |                       |
|---|-----------------------|
| 1 | Yes                   |
| 2 | No                    |
| 7 | Don't know / Not sure |
| 9 | Refused               |

**//ask of all//**

**s3q4:** About how long has it been since you last visited a doctor for a routine checkup?

**INTERVIEWER NOTE:** A routine checkup is a general physical exam, not an exam for a specific injury, illness, or condition.

**READ ONLY IF NECESSARY:**

- 1 Within the past year (anytime less than 12 months ago)
- 2 Within the past 2 years (1 year but less than 2 years ago)
- 3 Within the past 5 years (2 years but less than 5 years ago)
- 4 5 or more years ago

**DO NOT READ:**

- 7 Don't know / Not sure
- 8 Never
- 9 Refused

#### Section 4: Exercise

---

**//ask of all//**

**s4q1:** During the past month, other than your regular job, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise?

**INTERVIEWER NOTE:** If respondent does not have a regular job or is retired, they may count any physical activity or exercise they do.

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

#### Section 5: Inadequate Sleep

---

**//ask of all//**

**s5q1:** On average, how many hours of sleep do you get in a 24-hour period?

**INTERVIEWER NOTE:** Enter hours of sleep in whole numbers, rounding 30 minutes (1/2 hour) or more up to the next whole hour and dropping 29 or fewer minutes.

- \_\_\_ Number of hours [Range: 01-24]
- 77 Don't know / Not sure
- 99 Refused

## Section 6: Chronic Health Conditions

---

### **//ask of all//**

**s6q1:** Has a doctor, nurse, or other health professional ever told you that you had any of the following? For each, tell me Yes, No, or you're Not Sure.

(Ever told) you that you had a heart attack also called a myocardial infarction?

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

### **//ask of all//**

**s6q2:** (Ever told) you had angina or coronary heart disease?

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

### **//ask of all//**

**s6q3:** (Ever told) you had a stroke?

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

### **//ask of all//**

**s6q4:** (Ever told) you had asthma?

- 1 Yes
- 2 No **[Go to S6Q6]**
- 7 Don't know / Not sure **[Go to S6Q6]**
- 9 Refused **[Go to S6Q6]**

**//ask if s6q4=1//**

**s6q5:** Do you still have asthma?

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

**//ask of all//**

**s6q6:** (Ever told) you had skin cancer?

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

**//ask of all//**

**s6q7:** (Ever told) you had any other types of cancer?

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

**//ask of all//**

**s6q8:** (Ever told) you have chronic obstructive pulmonary disease, C.O.P.D., emphysema or chronic bronchitis?

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

**//ask of all//**

**s6q9:** (Ever told) you have some form of arthritis, rheumatoid arthritis, gout, lupus, or fibromyalgia?

**INTERVIEWER NOTE:** Arthritis diagnoses include:

- rheumatism, polymyalgia rheumatica
- osteoarthritis (not osteoporosis)
- tendonitis, bursitis, bunion, tennis elbow
- carpal tunnel syndrome, tarsal tunnel syndrome
- joint infection, Reiter's syndrome
- ankylosing spondylitis; spondylosis

- rotator cuff syndrome
- connective tissue disease, scleroderma, polymyositis, Raynaud's syndrome
- vasculitis (giant cell arteritis, Henoch-Schonlein purpura, Wegener's granulomatosis, polyarteritis nodosa)

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

**//ask of all//**

**s6q10:** (Ever told) you have a depressive disorder (including depression, major depression, dysthymia, or minor depression)?

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

**//ask of all//**

**s6q11:** Not including kidney stones, bladder infection or incontinence, were you ever told you have kidney disease?

**READ ONLY IF NECESSARY:** Incontinence is not being able to control urine flow.

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

**//ask of all//**

**s6q12:** (Ever told) you have diabetes?

**INTERVIEWER NOTE:** If yes and respondent is female, ask: "was this only when you were pregnant?" If respondent says pre-diabetes or borderline diabetes, use response code 4 – No, pre-diabetes or borderline diabetes.

- 1 Yes
- 2 Yes, but female told only during pregnancy
- 3 No
- 4 No, pre-diabetes or borderline diabetes
- 7 Don't know / Not sure
- 9 Refused

**//if HGENDER = 1 and s6q12 = 2//**

**S6q12a:** INTERVIEWER: You recorded that the respondent was told by a doctor during pregnancy that she had diabetes. Are you sure? The respondent selected was male.

You have to go back and correct this INCONSISTENCY ERROR

1. Go back **[go back to s6q12]**

### Module 1: Pre-Diabetes (Split 1, 2 and 3)

---

**CATI NOTE: Only asked of those not responding Yes (code = 1) to Core Q6.12**

**//ask if s6q12 ne 1 and cstate ne 2//**

**Mod1\_1:** Have you had a test for high blood sugar or diabetes within the past three years?

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

**CATI note: If Core S6Q12 = 4 (No, pre-diabetes or borderline diabetes); answer MOD1\_2 = 1 (YES).**

**//ask if s6q12 ne 1, 4 and cstate ne 2//**

**Mod1\_2:** Have you ever been told by a doctor or other health professional that you have pre-diabetes or borderline diabetes?

If Yes and respondent is female, ask: **Was this only when you were pregnant?**

- 1 Yes
- 2 Yes, during pregnancy
- 3 No
- 7 Don't know / Not sure
- 9 Refused

**//if HGENDER = 1 and mod1\_2 = 2//**

**Mod1\_2a:** INTERVIEWER: You recorded that the respondent was told by a doctor during pregnancy that she had pre-diabetes or borderline diabetes. Are you sure? The respondent selected was male.

You have to go back and correct this INCONSISTENCY ERROR.

1. Go back **[Go to MOD1\_2]**

**//ask if s6q12=1//**

**s6q13:** How old were you when you were told you have diabetes?

- |     |   |
|-----|---|
| ___ | Code age in years <b>[RANGE: 01-97] [97 = 97 and older]</b> |
| 98  | Don't know / Not sure                                       |
| 99  | Refused   |

## Section 7: Oral Health

---

**//ask of all//**

**s7q1:** Including all types of dentists, such as orthodontists, oral surgeons, and all other dental specialists as well as dental hygienists, how long has it been since you last visited a dentist or a dental clinic for any reason?

**READ ONLY IF NECESSARY:**

- 1 Within the past year (anytime less than 12 months ago)
- 2 Within the past 2 years (1 year but less than 2 years ago)
- 3 Within the past 5 years (2 years but less than 5 years ago)
- 4 5 or more years ago

**DO NOT READ:**

- 7 Don't know / Not sure
- 8 Never
- 9 Refused

**//ask of all//**

**s7q2:** Not including teeth lost for injury or orthodontics, how many of your permanent teeth have been removed because of tooth decay or gum disease?

**INTERVIEWER NOTE:** If wisdom teeth are removed because of tooth decay or gum disease, they should be included in the count for lost teeth.

**READ ONLY IF NECESSARY:**

- 1 1 to 5



- 2 6 or more but not all
- 3 All
- 8 None

**DO NOT READ:**

- 7 Don't know / Not sure
- 9 Refused

## State Added Section 1: Oral Cancer Screening (Split 1)

---

**//ask if cstate ne 2 //**

**MD1\_1:** Have you ever had a test or exam for oral or mouth cancer in which the doctor or dentist pulls on your tongue, sometimes with gauze wrapped around it, and feels under the tongue and inside the cheeks?

- 1 I think so
- 2 Yes
- 3 No
- 7 Don't know / Not sure
- 9 Refused

**MD1\_1.** ¿Ha tenido alguna vez una prueba o examen del cáncer oral o de la boca en el que el médico saca su lengua, algunas veces con gasa a su alrededor y toca abajo de la lengua y el interior de las mejillas?

- 1 Creo que sí
- 2 Sí
- 3 No
- 7 No sabe/No está seguro
- 9 Rehusó

**//ask if MD1\_1 = 1 or 2 and cstate ne 2 //**

**MD1\_2:** When did you have your most recent oral or mouth cancer exam?

- 1 Within the past year (anytime less than 12 months ago)
- 2 Within the past 2 years (1 year but less than 2 years ago)
- 3 Within the past 3 years (2 years but less than 3 years ago)
- 4 Within the past 5 years (3 years but less than 5 years ago)
- 5 5 or more years ago
- 6 Never
- 7 Don't know / Not sure
- 9 Refused

**MD1\_2** ¿Cuándo fue la última vez que se hizo un examen del cáncer oral o de la boca?

**//ask if MD1\_1 = 1 or 2 and cstate ne 2 //**

**MD1\_3:** What type of medical care person examined you when you had your last check-up for oral cancer?

**PLEASE READ:**

- 1 Doctor/physician
- 2 Nurse/Nurse Practitioner
- 3 Dentist
- 4 Dental Hygienist
- 5 Other, (SPECIFY \_\_\_\_\_)

**DO NOT READ:**

- 7 Don't know / Not sure
- 9 Refused

**MD1\_3** ¿Qué tipo de personal médico lo examinó cuando se hizo el último reconocimiento del cáncer oral?

- 1 Médico
- 2 Enfermera/Enfermera practicante
- 3 Dentista
- 4 Higienista dental
- 5 Otro (especificar \_\_\_\_\_)
- 7 No sabe / No está seguro
- 9 Rehusó

**//end timer ett1//**

Section 8: Demographics

---

**//ask of all//**

**S8q1:** What is your sex?

**CATI NOTE: STATES MAY ADOPT ONE OF THE TWO FORMATS OF THE QUESTION. IF FIRST FORMAT IS USED, READ OPTIONS.**

- 1 Male
- 2 Female

**DO NOT READ:**

- 7 Don't know / Not sure
- 9 Refused

**//ask if HGENDER ne s8q1//**

**S8q1A:** Are you sure the respondent is [INSERT S8Q1]? The respondent selected was the [insert HGENDER].

You need to go back and correct the mistake.

1. Go back **[go to s8q1]**

## Language Indicator (land and cell)

**//ask of all//**

**Lang1: INTERVIEWER: DO NOT ASK QUESTION:**

IN WHAT LANGUAGE WAS THIS INTERVIEW COMPLETED?

- 01 ENGLISH
- 02 SPANISH

**//ask of all//**

## Module 21: Sexual Orientation and Gender Identity (Split 1, 2 and 3)

---

**//ASK IF HGENDER = 1 AND CSTATE NE 2//**

**MOD21\_1a:** The next two questions are about sexual orientation and gender identity. Which of the following best represents how you think of yourself?

**INTERVIEWER NOTE:** We ask this question in order to better understand the health and health care needs of people with different sexual orientations.

**INTERVIEWER NOTE:** Please say the number before the text response. Respondent can answer with either the number or the text/word.

### PLEASE READ:

- 1 Gay
- 2 Straight, that is, not gay
- 3 Bisexual
- 4 Something else
- 7 I don't know the answer
- 9 Refused

**//ASK IF HGENDER = 2 AND CSTATE NE 2//**

**MOD21\_1b:** The next two questions are about sexual orientation and gender identity. Which of the following best represents how you think of yourself?

**INTERVIEWER NOTE:** We ask this question in order to better understand the health and health care needs of people with different sexual orientations.

**INTERVIEWER NOTE:** Please say the number before the text response. Respondent can answer with either the number or the text/word.

**PLEASE READ:**

- 1 Lesbian or Gay
- 2 Straight, that is, not gay
- 3 Bisexual
- 4 Something else
- 7 I don't know the answer
- 9 Refused

**//ASK IF CSTATE NE 2//**

**MOD21\_2:** Do you consider yourself to be transgender?

If yes, ask: “Do you consider yourself to be **1.** male-to-female, **2.** female-to-male, or **3.** gender non-conforming?”

**INTERVIEWER NOTE:** Please say the number before the text response. Respondent can answer with either the number or the text/word.

**INTERVIEWER NOTE: If asked about definition of transgender:** Some people describe themselves as transgender when they experience a different gender identity from their sex at birth. For example, a person born into a male body, but who feels female or lives as a woman would be transgender. Some transgender people change their physical appearance so that it matches their internal gender identity. Some transgender people take hormones and some have surgery. A transgender person may be of any sexual orientation – straight, gay, lesbian, or bisexual.

**INTERVIEWER NOTE: If asked about definition of gender non-conforming:** Some people think of themselves as gender **non-conforming** when they do not identify only as a man or only as a woman.

- 1 Yes, Transgender, male-to-female
- 2 Yes, Transgender, female to male
- 3 Yes, Transgender, gender nonconforming
- 4 No
- 7 Don't know/not sure
- 9 Refused

**S8q2:** What is your age?

\_\_\_ Code age in years [Range: 18-99]  
07 Don't know / Not sure  
09 Refused

**//ask if s6q13 > s8q2 and s8q2 <> 07, 09 and s6q13 ne 98 or 99//**

**S8q2chk:** You said you were [insert **s8q2**] years of age and told you have diabetes at age [insert **s6q13**]. I must correct this inconsistency.

Usted dijo que tenia \:**s8q2**: anos de edad y que le dijeron que tenia diabetes a la edad de \:**s6q13**:.  
Debo corregir este error.

1. Go back **[go to s8q2]**

**//ask of all//**

**S8q3:** Are you Hispanic, Latino/a, or Spanish origin?

1 No, not of Hispanic, Latino/a, or Spanish origin  
2 Yes  
7 Don't Know  
9 Refused

**//if s8q3=2//**

**S8q3b: Are you...**

**INTERVIEWER NOTE:** One or more categories may be selected.

1 Mexican, Mexican American, Chicano/a  
2 Puerto Rican  
3 Cuban  
4 Another Hispanic, Latino/a, or Spanish origin

**DO NOT READ:**

5 No  
7 Don't know / Not sure  
9 Refused

**[DATA PROCESSING NOTE: CDC lists this as one question, s8q3 response 5= not Hispanic, 1-4 hispanic options. Deliver based on CDC layout]**

**//ask of all//**

**S8q4:** Which one or more of the following would you say is your race?

**INTERVIEWER NOTE:** Select all that apply.

**[MUL = 6]**

**PLEASE READ:**

- 10 White
- 20 Black or African American
- 30 American Indian or Alaska Native
- 40 Asian
- 50 Pacific Islander

**DO NOT READ:**

- 60 Other
- 77 Don't know / Not sure
- 99 Refused

**//ask if s8q4=40//**

**S8q4a:** Is that ...

**INTERVIEWER NOTE:** Select all that apply.

**[mul=7]**

**PLEASE READ:**

- 41 Asian Indian
- 42 Chinese
- 43 Filipino
- 44 Japanese
- 45 Korean
- 46 Vietnamese
- 47 Other Asian
  
- 77 Don't know / Not sure
- 99 Refused

**//if s8q4 = 50//**

**S8q4pi:** Is that...

**INTERVIEWER NOTE:** Select all that apply.

**[mul=4]**

**PLEASE READ:**

- 51 Native Hawaiian

- 52 Guamanian or Chamorro
- 53 Samoan
- 54 Other Pacific Islander
  
- 77 Don't know / Not sure
- 99 Refused

**Ask if s8q4=mul. Only show responses from s8q4, plus responses 77 & 99**

**S8q5:** Which one of these groups would you say best represents your race?

**INTERVIEWER NOTE:** If respondent has selected multiple races in previous and refuses to select a single race, code "refused."

- 10 White
- 20 Black or African American
- 30 American Indian or Alaska Native
- 40 Asian
- 50 Pacific Islander

**DO NOT READ:**

- 60 Other
- 77 Don't know / Not sure
- 99 Refused

**Ask if s8q4a=mul and s8q5=40. If there is only one response to s8q4a and s8q5=40, s8q5a should be auto-punched with s8q4a response Only show responses from s8q4a, plus responses 77 & 99**

**S8q5a:** Is that...

**PLEASE READ:**

- 41 Asian Indian
- 42 Chinese
- 43 Filipino
- 44 Japanese
- 45 Korean
- 46 Vietnamese
- 47 Other Asian
  
- 77 Don't know / Not sure
- 99 Refused

Ask if s8q4pi=mul and s8q5=50. If there is only one response to s8q5pi and s8q5=50, s8q5pi should be auto-punched with s8q4pi response. Only show responses from s8q5pi, plus responses 77 & 99

**S8q5pi:** Is that...

**PLEASE READ:**

- 51 Native Hawaiian
- 52 Guamanian or Chamorro
- 53 Samoan
- 54 Other Pacific Islander
  
- 77 Don't know / Not sure
- 99 Refused

**//ask of all//**

**S8q6:** Are you...?

**PLEASE READ:**

- 1 Married
- 2 Divorced
- 3 Widowed
- 4 Separated
- 5 Never married

**Or**

- 6 A member of an unmarried couple

**DO NOT READ:**

- 9 Refused

**//ask of all//**

**S8q7:** What is the highest grade or year of school you completed?

**READ ONLY IF NECESSARY:**

- 1 Never attended school or only attended kindergarten
- 2 Grades 1 through 8 (Elementary)
- 3 Grades 9 through 11 (Some high school)
- 4 Grade 12 or GED (High school graduate)
- 5 College 1 year to 3 years (Some college or technical school)
- 6 College 4 years or more (College graduate)



**DO NOT READ:**

9 Refused

**//ask of all//**

**S8q8:** Do you own or rent your home?

**INTERVIEWER NOTE:** Other arrangement may include group home, staying with friends or family without paying rent.

**INTERVIEWER NOTE:** Home is defined as the place where you live most of the time/the majority of the year.

**INTERVIEWER NOTE:** We ask this question in order to compare health indicators among people with different housing situations.

**INTERVIEWER NOTE:** Code a response of “rent to own” as - other arrangement

- 1 Own
- 2 Rent
- 3 Other arrangement
- 7 Don't know / Not sure
- 9 Refused

**//ask if cstate ne 2//**

**S8q9:** In what county do you currently live?

- \_\_\_\_\_ ANSI County Code (formerly FIPS county code)
- 777 Don't know / Not sure
- 999 Refused

**//ask if s8q9 ne 777,999 and cstate ne 2//**

**s8q9c:** I just want to confirm, you said you live in the county of **[INSERT s8q9]**. Is that correct?

- 1 Yes, correct town
- 2 No, incorrect town **[GO TO S8Q9]**

**s8q9c:** Solo quiero asegurame que le escuche correctamente.

Usted dijo que usted vive en el condado de

Es correcto?

**//ask if cstate =2//**

**CNTY:** In what county do you currently live?

- 1 Gave Response
- 7 Don't know/ Not sure
- 9 Refused

**//ask if CNTY=1 and cstate =2//**

**CNTYo:** \_\_\_\_\_

**//ask of all//**

**S8q10:** What is the ZIP Code where you currently live?

- \_\_\_\_\_ ZIP Code
- 77777 Don't know / Not sure
- 99999 Refused

**//ask if s8q10 ne 77777, 99999//**

**S8q10c:** I just want to confirm, you said your zip code is **[INSERT S8Q10]**. Is that correct?

Solo para verificar, usted dijo que su codigo postal es \:s8q10:.  
Es esto correcto?

- 1 Yes, correct zip code
- 2 No, incorrect zip code **[GO TO S8Q10]**

**CATI NOTE: If cellular telephone interview skip to S8Q14**

**//ask if samptype=1//**

**S8q11:** Not including cell phones or numbers used for computers, fax machines or security systems, do you have more than one telephone number in your household?

- 1 Yes
- 2 No **[Go to S8Q13]**
- 7 Don't know / Not sure **[Go to S8Q13]**
- 9 Refused **[Go to S8Q13]**

**//ask if s8q11=1//**

**S8q12:** How many of these telephone numbers are residential numbers?

- Residential telephone numbers **[RANGE: 1-6] [6 = 6 or more]**
- 7 Don't know / Not sure
- 9 Refused

**//ask if samptype=1//**

**S8q13:** How many cell phones do you have for personal use?

**INTERVIEWER NOTE:** Include cell phones used for both business and personal use.

- Enter number **[Range: 1-5]**
- 6 Six or more
- 7 Don't know / Not sure
- 8 None
- 9 Refused

**//ask of all//**

**S8q14:** Have you ever served on active duty in the United States Armed Forces, either in the regular military or in a National Guard or military reserve unit?

**INTERVIEWER NOTE:** Active duty does not include training for the Reserves or National Guard, but DOES include activation, for example, for the Persian Gulf War.

- 1 Yes
- 2 No

**DO NOT READ:**

- 7 Don't know / Not sure
- 9 Refused

**//ask of all//**

**S8q15:** Are you currently...?

**INTERVIEWER NOTE:** If more than one, say "Select the category which best describes you".

**PLEASE READ:**

- 1 Employed for wages
- 2 Self-employed
- 3 Out of work for 1 year or more
- 4 Out of work for less than 1 year
- 5 A Homemaker
- 6 A Student
- 7 Retired

**Or**

- 8 Unable to work

**DO NOT READ:**

- 9 Refused

**Module 20: Industry and Occupation (Split 1, 2 and 3)**

---

**//ask if s8q15=1, 2, 4 AND CSTATE NE 2//**

**Mod20\_1:** Now I am going to ask you about your work. What kind of work do **[if s8q15=4 replace “do” with “did”]** you do? For example, registered nurse, janitor, cashier, auto mechanic.

**INTERVIEWER NOTE:** If respondent is unclear, ask: What is your job title?

**INTERVIEWER NOTE:** If respondent has more than one job ask: What is your main job?

- 01 Gave Answer
- 77 Don't Know
- 99 Refused

**//if mod20\_1 = 01//**

**Mod20\_1o:** Enter Response: \_\_\_\_\_

**//ask if s8q15=1, 2, 4 AND CSTATE NE 2//**

**Mod20\_2:** What kind of business or industry do **[if s8q15=4 replace “do” with “did”]** you work in? For example, hospital, elementary school, clothing manufacturing, restaurant.

**INTERVIEWER NOTE:** IF RESPONSE IS "health care", ASK: "What sector of health care is that? For example a hospital, health clinic, or nursing home?"

**INTERVIEWER NOTE:** IF RESPONSE IS "manufacturing", ASK "What does the business manufacture?"

- 01 Gave Answer
- 77 Don't Know
- 99 Refused

**//if mod20\_2 = 01//**

**Mod20\_2o:** Enter Response: \_\_\_\_\_

**//ask of all//**

**S8q16:** How many children less than 18 years of age live in your household?

- \_\_\_ Number of children **[Range = 1-15]**
- 88 None
- 99 Refused

**//ASK IF S8q16 = 1-15//**

**S8Q16CHK:** Just to be sure - you have **[INSERT S8Q16]** **[insert 'child' if s8q16 = 1; insert 'children' if s8q16 = 2-15]** under 18 living in your household. Is that correct?

Solo para verificar, usted tiene **[INSERT S8Q16]** menores de 18 anos viviendo en su hogar.

- 1 Yes
- 2 No **[go back to s8q16]**
- 9 Refused

**//ask of all//**

**S8q17A:** Is your annual household income from all sources—

Less than \$25,000 (\$20,000 to less than \$25,000)?

**INTERVIEWER NOTE:** If respondent refuses at any income level, code '9' (refused)

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

**//ask if s8q17A = 1//**

**S8q17B:** Less than \$20,000 (\$15,000 to less than \$20,000)?

**READ ONLY IF NECESSARY:** Is your annual household income from all sources—

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

**//ask if s8q17B = 1//**

**S8q17C:** Less than \$15,000 (\$10,000 to less than \$15,000)?

**READ ONLY IF NECESSARY:** Is your annual household income from all sources—

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

**//ask if s8q17C=1//**

**S8q17D:** Less than \$10,000?

**READ ONLY IF NECESSARY:** Is your annual household income from all sources—

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

**//ask if s8q17A = 2//**

**S8q17E:** Less than \$35,000 (\$25,000 to less than \$35,000)?

**READ ONLY IF NECESSARY:** Is your annual household income from all sources—

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

**//ask if s8q17E = 2//**

**S8q17F:** Less than \$50,000 (\$35,000 to less than \$50,000)?

**READ ONLY IF NECESSARY:** Is your annual household income from all sources—

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

**//ask if s8q17F = 2//**

**S8q17G:** Less than \$75,000 (\$50,000 to less than \$75,000)?

**READ ONLY IF NECESSARY:** Is your annual household income from all sources—

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

**//IF S8Q17B = 2, SET S8Q17 = 04//**

**//IFS8Q17C = 2, SET S8Q17 = 03//**

**//IF S8Q17D = 2, SET S8Q17 = 02//**

**//IF S8Q17D = 1, SET S8Q17 = 01//**

**//IF S8Q17E = 1, SET S8Q17 = 05//**

**//IF S8Q17F = 1, SET S8Q17 = 06//**

**//IF S8Q17G = 1, SET S8Q17 = 07//**

**//IF S8Q17G = 2, SET S8Q17 = 08//**

**//IF if s8q17A-s8q17G =7, SET 77//**

**//IF if s8q17A-s8q17G =9, SET 99//**

**S8Q17**

- 04 Less than \$25,000 (\$20,000 to less than \$25,000)
- 03 Less than \$20,000 (\$15,000 to less than \$20,000)
- 02 Less than \$15,000 (\$10,000 to less than \$15,000)
- 01 Less than \$10,000
- 05 Less than \$35,000 (\$25,000 to less than \$35,000)
- 06 Less than \$50,000 (\$35,000 to less than \$50,000)
- 07 Less than \$75,000 (\$50,000 to less than \$75,000)

08 \$75,000 or more

**//ask if s8q17A-s8q17G ne 7,9//**

**S8q17AA:** Your Annual Household Income is [INSERT s8q17]. Is This Correct?

- 1 Yes, correct as is.
- 2 No, re-ask question **[GO TO S8Q17A]**

**//ask of all//**

**Ps8q18:** About how much do you weigh without shoes?

ENTER "P" FOR WEIGHT GIVEN IN POUNDS  
ENTER "K" FOR WEIGHT GIVEN IN KILOGRAMS

- P Pounds
- K Kilograms
- 7 Don't know / Not sure
- 9 Refused

**//ask if ps8q18 = P//**

**S8q18:** About how much do you weigh without shoes?

**DATA PROCESSING NOTE: If respondent answers in metrics, put "9" in column XXX.**

**Round fractions up**

\_\_\_\_\_ Weight  
(pounds) **[Range 50-776]**

**//ask if s8q18 =50-79 OR 351-776//**

**S8q18\_A:** Just to double-check, you indicated [INSERT S8Q18] pounds as your weight. IS THIS CORRECT?

- 1. Yes
- 2. No **[go back to s8q18]**

**//ask if ps8q18 = K//**

**S8q18M:** About how much do you weigh without shoes?

**DATA PROCESSING NOTE: If respondent answers in metrics, put "9" in column XXX.**



**Round fractions up**

\_\_\_ Weight(kilograms) [Range 23-352]

**//ask if s8q18m = 23-352 and ps8q18 = “k”**

**S8q18am:** Just to double-check, you indicated [INSERT s8q18m] kilograms as your weight. IS THIS CORRECT?

1. Yes
2. No **[go back to s8q19m]**

**//ask of all//**

**Ps8q19:** About how tall are you without shoes?

ENTER “F” FOR HEIGHT GIVEN IN FEET  
ENTER “M” FOR HEIGHT GIVEN IN CENTIMETERS

F	feet
M	centimeters
77	Don't know / Not sure
97	Refused

**//ask if ps8q19=F//**

**S8q19:** About how tall are you without shoes?

**DATA PROCESSING NOTE: If respondent answers in metrics, put “9” in column XXX.**

**Round fractions up**

**Enter height in Feet and Inches**

**Ex: 5 feet 9 inches would be entered as 509**

\_\_\_ / \_\_\_ Height  
(f t / inches) [Range 300-311, 400-411, 500-511, 600-611, 700-711]

**//ask if s8q19= 300-407, 609-711]**

**S8q19a:** Just to double check, you indicated you are [INSERT s8q19] FEET / INCHES TALL. IS THIS CORRECT?

1. Yes
2. No **[go back to s8q19]**

**//ask if ps8q19 = M//**

**S8q19M:** About how tall are you without shoes?

**DATA PROCESSING NOTE:** If respondent answers in metrics, put “9” in column XXX.

Round fractions up

Enter height in centimeters

Ex: 2 meters 5 centimeters would be entered as 205

--- Height [Range 90-254]

**//ask if s8q19m = 90-254 and ps8q19=M//**

**S8q19am:** Just to double check, you indicated you are [INSERT s8q19m] centimeters tall. IS THIS CORRECT?

1. Yes
- 2 No [go back to s8q19m]

**//Ask if HGENDER=2 and s8q2=18-49//**

**S8q20:** To your knowledge, are you now pregnant?

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

**//ask of all//**

**S8q21:** Some people who are deaf or have serious difficulty hearing use assistive devices to communicate by phone.

Are you deaf or do you have serious difficulty hearing?

- 1 Yes
- 2 No
- 7 Don't know / Not Sure
- 9 Refused

**//ask of all//**

**S8q22:** Are you blind or do you have serious difficulty seeing, even when wearing glasses?

- 1 Yes

- 2 No
- 7 Don't know / Not Sure
- 9 Refused

**//ask of all//**

**S8q23:** Because of a physical, mental, or emotional condition, do you have serious difficulty concentrating, remembering, or making decisions?

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

**//ask of all//**

**S8q24:** Do you have serious difficulty walking or climbing stairs?

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

**//ask of all//**

**S8q25:** Do you have difficulty dressing or bathing?

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

**//ask of all//**

**S8q26:** Because of a physical, mental, or emotional condition, do you have difficulty doing errands alone such as visiting a doctor's office or shopping?

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

Section 9: Tobacco Use

---

**//ask of all//**

**S9q1:** Have you smoked at least 100 cigarettes in your entire life?

**INTERVIEWER NOTE:** For cigarettes, do not include: electronic cigarettes (e-cigarettes, njoy, bluetip), herbal cigarettes, cigars, cigarillos, little cigars, pipes, bidis, kreteks, water pipes (hookahs) or marijuana.

**INTERVIEWER NOTE:** 5 packs = 100 cigarettes

- |   |                       |              |
|---|-----------------------|--------------|
| 1 | Yes                   |              |
| 2 | No                    | [Go to S9Q5] |
| 7 | Don't know / Not sure | [Go to S9Q5] |
| 9 | Refused               | [Go to S9Q5] |

**//ask if s9q1=1//**

**S9q2:** Do you now smoke cigarettes every day, some days, or not at all?

**DO NOT READ:**

- |   |                       |              |
|---|-----------------------|--------------|
| 1 | Every day             |              |
| 2 | Some days             |              |
| 3 | Not at all            | [Go to S9Q4] |
| 7 | Don't know / Not sure | [Go to S9Q5] |
| 9 | Refused               | [Go to S9Q5] |

**//ask if s9q2=1 OR 2//**

**S9q3:** During the past 12 months, have you stopped smoking for one day or longer because you were trying to quit smoking?

- |   |                       |              |
|---|-----------------------|--------------|
| 1 | Yes                   | [Go to S9Q5] |
| 2 | No                    | [Go to S9Q5] |
| 7 | Don't know / Not sure | [Go to S9Q5] |
| 9 | Refused               | [Go to S9Q5] |

**//ask if s9q2=3//**

**S9q4:** How long has it been since you last smoked a cigarette, even one or two puffs?

**READ ONLY IF NECESSARY:**

- |    |  |
|----|--|
| 01 | Within the past month (less than 1 month ago)                  |
| 02 | Within the past 3 months (1 month but less than 3 months ago)  |
| 03 | Within the past 6 months (3 months but less than 6 months ago) |
| 04 | Within the past year (6 months but less than 1 year ago)       |
| 05 | Within the past 5 years (1 year but less than 5 years ago)     |
| 06 | Within the past 10 years (5 years but less than 10 years ago)  |
| 07 | 10 years or more   |
| 08 | Never smoked regularly   |
| 77 | Don't know / Not sure  |
| 99 | Refused  |

**//ask of all//**

**S9q5:** Do you currently use chewing tobacco, snuff, or snus every day, some days, or not at all?

**INTERVIEWER NOTE:** Snus rhymes with 'goose'

**INTERVIEWER NOTE:** Snus (Swedish for snuff) is a moist smokeless tobacco, usually sold in small pouches that are placed under the lip against the gum.

**DO NOT READ:**

- 1 Every day
- 2 Some days
- 3 Not at all
- 7 Don't know / Not sure
- 9 Refused

**State Added Section 2: Smoking Initiation (Split 1, 2 and 3)**

---

**//ask if cstate ne 2 //**

**MD2\_1:** How old were you the first time you smoked a cigarette, even one or two puffs?

\_\_\_ Age in Years **[RANGE: 001-100]**

888 I never smoked a cigarette, not even one or two puffs

777 Don't know/Not sure

999 Refused

**MD2\_1.** ¿Qué edad tenía cuando fumó un cigarrillo por primera vez, incluso una o dos pitadas?

**//ask if MD2\_1 ne 777, 888, or 999 and cstate ne 2 //**

**MD2\_2:** How old were you when you smoked a whole cigarette for the first time?

\_\_\_ Age in years **[RANGE: 001-100]**

888 Never smoked a whole cigarette

777 Don't know/Not sure

999 Refused

**MD2\_2.** ¿Qué edad tenía cuando fumó un cigarrillo entero por primera vez?

**State Added Section 3: Tobacco Products (Split 1, 2 and 3)**

---

**//ask if cstate ne 2 //**

**MD3\_1:** Cigar products come in a wide variety of sizes, ranging from large traditional cigars, to blunts, to cigarillos, and even smaller cigars that are about the same size and shape as cigarettes. Some common brand names include Black and Mild's, Phillies, Swisher Sweets, and Winchester.

In the past 30 days, did you smoke any cigars?

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

**MD3\_1.** Los cigarros vienen en una amplia variedad de tamaños, que van desde cigarros tradicionales grandes a cigarros de marihuana, a cigarrillos e incluso cigarros más pequeños que tienen el mismo tamaño y forma que los cigarrillos. Algunas marcas comunes incluyen Black and Mild, Phillies, Swisher Sweets y Winchester.

En los últimos 30 días, ¿fumó algún cigarro?

**//ask if cstate ne 2 //**

**MD3\_2:** Do you currently use any tobacco products other than cigarettes, cigars, or chewing tobacco, such as pipes, hookah, bidis, kreteks, or dissolvable tobacco products?

**INTERVIEWER NOTE:** Bidis are small, brown, hand-rolled cigarettes from India and other southeast Asian countries. Kreteks are clove cigarettes made in Indonesia that contain clove extract and tobacco.

**MD3\_2.** ¿Usa actualmente productos con tabaco que no sean cigarrillos, cigarros o tabaco para masticar, como pipas, narguiles, "bidis", "kreteks" o productos de tabaco que se disuelven?

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

## Module 6: E-Cigarettes (Split 1, 2 and 3)

---

**//ask if cstate ne 2//**

**Mod6\_1:** Have you ever used an e-cigarette or other electronic vaping product, even just one time, in your entire life?

**READ ONLY IF NECESSARY:** Electronic cigarettes (e-cigarettes) and other electronic vaping products include electronic hookahs (e-hookahs), vape pens, e-cigars, and others. These products are battery-powered and usually contain nicotine and flavors such as fruit, mint, or candy.

**INTERVIEWER NOTE:** These questions concern electronic vaping products for nicotine use. The use of electronic vaping products for marijuana use is not included in these questions.

- 1 Yes
- 2 No [GO TO NEXT SECTION]
- 7 Don't know/Not sure [GO TO NEXT SECTION]
- 9 Refused [GO TO NEXT SECTION]

**//ask if Mod6\_1=1//**

**Mod6\_2:** Do you now use e-cigarettes or other electronic vaping products every day, some days, or not at all?

**DO NOT READ:**

- 1 Every day
- 2 Some days
- 3 Not at all
- 7 Don't know/Not sure
- 9 Refused

## Module 7: Marijuana Use (Split 1, 2 and 3)

---

**//ask if cstate ne 2//**

**Mod7\_1:** During the past 30 days, on how many days did you use marijuana or cannabis?

- |    |                      |                            |
|----|----------------------|----------------------------|
| __ | 01-30 Number of Days |                            |
| 88 | None                 | <b>[Go to next module]</b> |
| 77 | Don't know/not sure  | <b>[Go to next module]</b> |
| 99 | Refused              | <b>[Go to next module]</b> |

**//ask if Mod7\_1 ne 77, 88 or 99//**

**Mod7\_2:** During the past 30 days, which one of the following ways did you use marijuana the most often? Did you usually...

**PLEASE READ:**

- 1 **Smoke it** (for example, in a joint, bong, pipe, or blunt).
- 2 **Eat it** (for example, in brownies, cakes, cookies, or candy)
- 3 **Drink it** (for example, in tea, cola, or alcohol)
- 4 **Vaporize it** (for example, in an e-cigarette-like vaporizer or another vaporizing device)
- 5 **Dab it** (for example, using waxes or concentrates), or
- 6 **Use it some other way.**

**DO NOT READ:**

- 7 Don't know/not sure
- 9 Refused

**//ask if Mod7\_1 ne 77, 88 or 99//**

**Mod7\_3:** When you used marijuana or cannabis during the past 30 days, was it usually:

**PLEASE READ:**

- 1 For medical reasons (like to treat or decrease symptoms of a health condition);
- 2 For non-medical reasons (like to have fun or fit in), or
- 3 For both medical and non-medical reasons;

**DO NOT READ:**

- 7 Don't know/Not sure
- 9 Refused

Section 10: Alcohol Consumption

---

**//ask of all//**

**S10q1:** During the past 30 days, how many days per week or per month did you have at least one drink of any alcoholic beverage such as beer, wine, a malt beverage or liquor?

- 1 \_\_ Days per week
- 2 \_\_ Days in past 30 days
- 888 No drinks in past 30 days
- 777 Don't know / Not sure
- 999 Refused

**//ask if s10q1 ne 888,777,999//**

**S10q2:** One drink is equivalent to a 12-ounce beer, a 5-ounce glass of wine, or a drink with one shot of liquor. During the past 30 days, on the days when you drank, about how many drinks did you drink on the average?

**INTERVIEWER NOTE:** A 40 ounce beer would count as 3 drinks, or a cocktail drink with 2 shots would count as 2 drinks.

- \_\_ Number of drinks **[Range: 01-76]**
- 77 Don't know / Not sure
- 99 Refused

**//ASK IF S10Q2 = 12-76//**



**S10Q2A:** I am sorry, you just said that you consume **[INSERT S10Q2]** drinks per day. Is that correct?

Perdoneme pero usted dijo que consume **[INSERT S10Q2]** tragos por dia. Es esto correcto?

- 1 Correct as is
- 2 No, Re-ask question **[GO TO S10Q2]**

**//ask if s10q1 ne 888,777,999//**

**S10q3:** Considering all types of alcoholic beverages, how many times during the past 30 days did you have **[IF HGENDER =1, INSERT "5", IF HGENDER = 2, INSERT "4"]** or more drinks on an occasion?

- Number of times **[Range: 01-76]**
- |    |                       |
|----|-----------------------|
| 88 | None                  |
| 77 | Don't know / Not sure |
| 99 | Refused               |

**//ASK IF S10Q3 = 16-76//**

**S10Q3A:** I am sorry, you said that in the past month there were **[INSERT S10Q3]** occasions when you had **[IF HGENDER =1, INSERT "5", IF HGENDER = 2, INSERT "4"]** or more drinks. Is this correct?

Perdoneme pero usted dijo que en el pasado mes hubo **[INSERT S10Q3]** ocasiones en las que usted bebio **[IF HGENDER =1, INSERT "5", IF HGENDER = 2, INSERT "4"]** o mas tragos. Es esto correcto?

- 1 Correct as is
- 2 No, Re-ask question **[GO TO S10Q3]**

**//ask if s10q1 ne 888,777,999//**

**S10q4:** During the past 30 days, what is the largest number of drinks you had on any occasion?

- Number of drinks **[Range: 01-76]**
- |    |                       |
|----|-----------------------|
| 77 | Don't know / Not sure |
| 99 | Refused               |

**//ASK IF S10Q4 = 16-76//**

**S10Q4A:** I am sorry, you said that in the past 30 days you had **[INSERT S10Q4]** drinks on one occasion. Is this correct?

Perdoneme pero usted dijo que en los pasados 30 dias bebio  
[INSERT S10Q4] tragos en una misma ocasion. Es esto correcto?

- 1 Correct as is
- 2 No, Re-ask question [GO TO S10Q4]

**//ASK IF [S10Q3 =88 AND HGENDER = 2 AND S10Q4 = 04-76] OR [S10Q3 = 88  
AND HGENDER=1 AND S10Q4 = 05-76]**

**S10Q4B:** I'm sorry, but previously you said that you did not have [IF HGENDER =1,  
INSERT "5", IF HGENDER = 2, INSERT "4"] or more drinks on an  
occasion. Is this correct?

Perdoneme pero usted anteriormente dijo que no bebio [IF HGENDER =1, INSERT  
"5", IF HGENDER = 2, INSERT "4"] o mas  
tragos en una misma ocasion. Es esto correcto?

- 1 Correct as is
- 2 No, Re-ask question [go back to s10q3]

**//ask if [S10Q3 = 01-076 AND HGENDER = 2 AND S10Q4 = 01-03] OR [S10Q3 = 01-  
76 AND  
HGENDER = 1 AND S10Q4 = 01-04]**

**S10Q4C:** I'm sorry, but previously you said that you had [IF HGENDER =1, INSERT  
"5", IF HGENDER = 2, INSERT "4"] or more drinks on an occasion. And  
you've said that in the past 30 days you had a maximum of [insert s10q4]  
drinks on one occasion. Is this correct?

Perdoneme pero usted dijo que bebio [IF HGENDER =1, INSERT "5", IF HGENDER =  
2, INSERT "4"] o mas tragos en  
una misma ocasion. E indico que en los pasados 30 dias habia bebido una  
maxima cantidad de tragos de [insert s10q4]  
Es esto correcto?

- 1 Correct as is
- 2 No, Re-ask question [go back to s10q3]

## Section 11: Immunization

---

**//ask of all//**

**s11q1:** During the past 12 months, have you had either a flu shot or a flu vaccine that  
was sprayed in your nose?

**READ ONLY IF NECESSARY:** A new flu shot came out in 2011 that injects vaccine into the skin with a very small needle. It is called Fluzone Intradermal vaccine. This is also considered a flu shot.

- |   |                       |                      |
|---|-----------------------|----------------------|
| 1 | Yes                   |                      |
| 2 | No                    | <b>[Go to s11q4]</b> |
| 7 | Don't know / Not sure | <b>[Go to s11q4]</b> |
| 9 | Refused               | <b>[Go to s11q4]</b> |

**//ask if s11q1=1//**

**s11q2m:** During what month and year did you receive your most recent flu shot injected into your arm or flu vaccine that was sprayed in your nose?

- 01 January
- 02 February
- 03 March
- 04 April
- 05 May
- 06 June
- 07 July
- 08 August
- 09 September
- 10 October
- 11 November
- 12 December

- |     |                             |
|-----|-----------------------------|
| ___ | Month <b>[Range: 01-12]</b> |
| 77  | Don't know / Not sure       |
| 99  | Refused                     |

**//ask if s11q1=1//**

**s11q2y:** During what month and year did you receive your most recent flu shot injected into your arm or flu vaccine that was sprayed in your nose?

- |       |                               |
|-------|-------------------------------|
| _____ | Year <b>[RANGE 2017-2018]</b> |
| 7777  | Don't know / Not sure         |
| 9999  | Refused                       |

**//ask if s11q2y > 1 year ago//**

**S11q2chk:** I'm sorry, but you said you had a flu vaccination within the past 12 months, but you have just given me a date for your most recent vaccination that is more than 12 months ago. Have you had a flu vaccination within the past 12 months?

Lo siento: dijo que se vacuno contra la gripe en los ultimos 12 meses, pero la fecha que me acaba de dar de su vacuna mas reciente es anterior a 12 meses. Se ha vacunado contra la gripe en los ultimos 12 meses?

- 1 Yes **[go back to s11q2m]**
- 2 No

**//ask if s11q1=1//**

**s11q3:** At what kind of place did you get your last flu shot or vaccine?

**READ ONLY IF NECESSARY:**

- 01 A doctor's office or health maintenance organization (HMO)
- 02 A health department
- 03 Another type of clinic or health center (a community health center)
- 04 A senior, recreation, or community center
- 05 A store (supermarket, drug store)
- 06 A hospital (inpatient)
- 07 An emergency room
- 08 Workplace
- 09 Some other kind of place
- 11 A school

**DO NOT READ:**

- 10 Received vaccination in Canada/Mexico
- 77 Don't know / Not sure **Probe: "How would you describe the place where you went to get your most recent flu vaccine?"**
- 99 Refused

**//ask of all//**

**s11q4:** Have you ever had a pneumonia shot also known as a pneumococcal vaccine?

**INTERVIEWER NOTE:** If respondent is confused read: "There are two types of pneumonia shots: polysaccharide, also known as pneumovax, and conjugate, also known as prevnar."

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

## Section 12: Falls

---

**If respondent is 45 years or older continue, otherwise go to s13q1**

**//ask if s8q2>44, 07, 09//**

**s12q1:** In the past 12 months, how many times have you fallen?

**INTERVIEWER NOTE:** “By a fall, we mean when a person unintentionally comes to rest on the ground or another lower level.”

- |    |  |
|----|--|
| —  | Number of times [Range: 01-76] [76 = 76 or more] |
| 88 | None [Go to S13Q1]                               |
| 77 | Don't know / Not sure [Go to S13Q1]              |
| 99 | Refused [Go to S13Q1]                            |

**//ASK IF S12Q1 = 1//**

**S12Q2A:** Did this fall cause an injury that limited your regular activities for at least a day or caused you to go to see a doctor?

- |    |     |
|----|-----|
| 01 | Yes |
| 88 | No  |

**//ASK IF S12Q1 = 02-76//**

**S12Q2B:** How many of these falls caused an injury that limited your regular activities for at least a day or caused you to go to see a doctor?

**INTERVIEWER NOTE:** “By an injury, we mean the fall caused you to limit your regular activities for at least a day or to go see a doctor.”

- |    |                                   |
|----|-----------------------------------|
| —  | Number of falls [Range: 01-s12q1] |
| 88 | None                              |
| 77 | Don't know / Not sure             |
| 99 | Refused                           |

## Section 13: Seat Belt Use and Drinking and Driving

---

**//ask of all//**

**s13q1:** How often do you use seat belts when you drive or ride in a car? Would you say—

**PLEASE READ:**

- 1 Always
- 2 Nearly always
- 3 Sometimes
- 4 Seldom
- 5 Never

**DO NOT READ:**

- 7 Don't know / Not sure
- 8 Never drive or ride in a car
- 9 Refused

**//ASK IF S13Q1 NE 8 AND S10Q1 NE 888//**

**S13Q2:** During the past 30 days, how many times have you driven when you've had perhaps too much to drink?

- \_\_\_ Number of times **[Range: 01-76]**
- 88 None
- 77 Don't know / Not sure
- 99 Refused

Section 14: Breast and Cervical Cancer Screening

---

**//ASK IF HGENDER=2//**

**S14Q1:** The next questions are about breast and cervical cancer.

Have you ever had a mammogram?

**INTERVIEWER NOTE:** A mammogram is an x-ray of each breast to look for breast cancer.

- 1 Yes
- 2 No **[Go to S14Q3]**
- 7 Don't know / Not sure **[Go to S14Q3]**
- 9 Refused **[Go to S14Q3]**

**//ask if s14q1=1//**

**s14q2:** How long has it been since you had your last mammogram?

**READ ONLY IF NECESSARY:**

- 1 Within the past year (anytime less than 12 months ago)
- 2 Within the past 2 years (1 year but less than 2 years ago)
- 3 Within the past 3 years (2 years but less than 3 years ago)

- 4 Within the past 5 years (3 years but less than 5 years ago)
- 5 5 or more years ago
- 7 Don't know / Not sure
- 9 Refused

**//ask if HGENDER=2//**

**s14q3:** Have you ever had a Pap test?

**INTERVIEWER NOTE:** A Pap test is a test for cancer of the cervix.

- 1 Yes
- 2 No **[Go to S14Q5]**
- 7 Don't know / Not sure **[Go to S14Q5]**
- 9 Refused **[Go to S14Q5]**

**//ask if s14q3=1//**

**s14q4:** How long has it been since you had your last Pap test?

**READ ONLY IF NECESSARY:**

- 1 Within the past year (anytime less than 12 months ago)
- 2 Within the past 2 years (1 year but less than 2 years ago)
- 3 Within the past 3 years (2 years but less than 3 years ago)
- 4 Within the past 5 years (3 years but less than 5 years ago)
- 5 5 or more years ago
- 7 Don't know / Not sure
- 9 Refused

**//ask if HGENDER=2//**

**s14q5:** An H.P.V. test is sometimes given with the Pap test for cervical cancer screening. Have you ever had an H.P.V. test?

**INTERVIEWER NOTE:** HUMAN PAPILLOMAVIRUS (PAP-UH-LOH-MUH VIRUS)

- 1 Yes
- 2 No **[Go to S14Q7]**
- 7 Don't know/Not sure **[Go to S14Q7]**
- 9 Refused **[Go to S14Q7]**

**//ask if s14q5=1//**

**s14q6:** How long has it been since you had your last H.P.V. test?

**READ ONLY IF NECESSARY:**

- 1 Within the past year (anytime less than 12 months ago)

- 2 Within the past 2 years (1 year but less than 2 years ago)
- 3 Within the past 3 years (2 years but less than 3 years ago)
- 4 Within the past 5 years (3 years but less than 5 years ago)
- 5 5 or more years ago
- 7 Don't know / Not sure
- 9 Refused

**CATI NOTE: If response to S8Q20 = 1 (is pregnant); then go to s16q1 or s17q1 based on conditions at those questions.**

**//ASK IF HGENDER = 2 AND S8Q20 NE 1//**

**S14Q7:** Have you had a hysterectomy?

**INTERVIEWER NOTE:** A hysterectomy is an operation to remove the uterus (womb).

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

## Section 15: Prostate Cancer Screening

---

**//ask if (s8q2>39 or s8q2 = 07, 09) and HGENDER = 1//**

**S15Q1:** Has a doctor, nurse, or other health professional ever talked with you about the advantages of the Prostate-Specific Antigen or P.S.A. test?

**INTERVIEWER NOTE:** A prostate-specific antigen test, also called a P.S.A. test, is a blood test used to check men for prostate cancer.

- 1 Yes
- 2 No
- 7 Don't Know / Not sure
- 9 Refused

**//ask if (s8q2>39 or s8q2 = 07, 09) and HGENDER = 1//**

**S15Q2:** Has a doctor, nurse, or other health professional ever talked with you about the disadvantages of the P.S.A. test?

- 1 Yes
- 2 No
- 7 Don't Know / Not sure
- 9 Refused

**//ask if (s8q2>39 or s8q2 = 07, 09) and HGENDER = 1//**



**S15Q3:** Has a doctor, nurse, or other health professional ever recommended that you have a P.S.A. test?

- 1 Yes
- 2 No
- 7 Don't Know / Not sure
- 9 Refused

**//ask if (s8q2>39 or s8q2 = 07, 09) and HGENDER = 1//**

**S15Q4:** Have you ever had a P.S.A. test?

- 1 Yes
- 2 No
- 7 Don't Know / Not sure
- 9 Refused

**//ask if s15q4=1//**

**S15Q5:** How long has it been since you had your last P.S.A. test?

**READ ONLY IF NECESSARY:**

- 1 Within the past year (anytime less than 12 months ago)
- 2 Within the past 2 years (1 year but less than 2 years)
- 3 Within the past 3 years (2 years but less than 3 years)
- 4 Within the past 5 years (3 years but less than 5 years)
- 5 5 or more years ago

**DO NOT READ:**

- 7 Don't know / Not sure
- 9 Refused

**//ask if s15q4=1//**

**S15Q6:** What was the main reason you had this P.S.A. test – was it ...?

**PLEASE READ:**

- 1 Part of a routine exam
- 2 Because of a prostate problem
- 3 Because of a family history of prostate cancer
- 4 Because you were told you had prostate cancer
- 5 Some other reason

**DO NOT READ:**

- 7 Don't know / Not sure
- 9 Refused

Section 16: Colorectal Cancer Screening

---

**CATI note: If s8q2 < 50, go to s17q1.**

**//ask if s8q2 > 49 or s8q2 = 07, 09//**

**S16q1:** A blood stool test is a test that may use a special kit at home to determine whether the stool contains blood. Have you ever had this test using a home kit?

- 1 Yes
- 2 No **[Go to s16q3]**
- 7 Don't know / Not sure **[Go to s16q3]**
- 9 Refused **[Go to s16q3]**

**//ask if s16q1=1//**

**S16q2:** How long has it been since you had your last blood stool test using a home kit?

**READ ONLY IF NECESSARY:**

- 1 Within the past year (anytime less than 12 months ago)
- 2 Within the past 2 years (1 year but less than 2 years ago)
- 3 Within the past 3 years (2 years but less than 3 years ago)
- 4 Within the past 5 years (3 years but less than 5 years ago)
- 5 5 or more years ago

**DO NOT READ:**

- 7 Don't know / Not sure
- 9 Refused

**//ask if s8q2 > 49 or s8q2 = 07, 09//**

**S16q3:** Sigmoidoscopy and colonoscopy are exams in which a tube is inserted in the rectum to view the colon for signs of cancer or other health problems. Have you ever had either of these exams?

- 1 Yes
- 2 No **[Go to s17q1]**
- 7 Don't know / Not sure **[Go to s17q1]**
- 9 Refused **[Go to s17q1]**

**//ask if s16q3=1//**

**S16q4:** For a sigmoidoscopy, a flexible tube is inserted into the rectum to look for problems. A colonoscopy is similar, but uses a longer tube, and you are usually given medication through a needle in your arm to make you sleepy and told to have someone else drive you home after the test. Was your most recent exam a sigmoidoscopy or a colonoscopy?

- 1 Sigmoidoscopy

- 2 Colonoscopy
- 7 Don't know / Not sure
- 9 Refused

**//ask if s16q3=1//**

**S16q5:** How long has it been since you had your last sigmoidoscopy or colonoscopy?

**READ ONLY IF NECESSARY:**

- 1 Within the past year (anytime less than 12 months ago)
- 2 Within the past 2 years (1 year but less than 2 years ago)
- 3 Within the past 3 years (2 years but less than 3 years ago)
- 4 Within the past 5 years (3 years but less than 5 years ago)
- 5 Within the past 10 years (5 years but less than 10 years ago)
- 6 10 or more years ago

**DO NOT READ:**

- 7 Don't know / Not sure
- 9 Refused

Section 17: HIV/AIDS

---

**//ASK OF ALL//**

**S17Q1:** The next few questions are about the national health problem of H.I.V., the virus that causes AIDS. Please remember that your answers are strictly confidential and that you don't have to answer every question if you do not want to. Although we will ask you about testing, we will not ask you about the results of any test you may have had.

Not counting tests you may have had as part of blood donation, have you ever been tested for H.I.V.?

- 1 Yes
- 2 No **[Go to S17Q3]**
- 7 Don't know / Not sure **[Go to S17Q3]**
- 9 Refused **[Go to S17Q3]**

**//ask if s17q1=1//**

**s17q2m:** Not including blood donations, in what month and year was your last H.I.V. test?

**INTERVIEWER NOTE:** If response is before January 1985, code "Don't know."

**INTERVIEWER NOTE:** If the respondent remembers the year but cannot remember the month, code the first two digits 77 and the last four digits for the year.

- 01 January
- 02 February
- 03 March
- 04 April
- 05 May
- 06 June
- 07 July
- 08 August
- 09 September
- 10 October
- 11 November
- 12 December

\_\_\_ Code MONTH [Range: 01-12]  
77 Don't know / Not sure  
99 Refused

**//ask if s17q1=1//**

**s17q2y:** Not including blood donations, in what month and year was your last H.I.V. test?

\_\_\_ Code YEAR [RANGE 1985-2018]  
7777 Don't know / Not sure  
9999 Refused / Not sure

**//ASK OF ALL//**

**S17Q3:** I am going to read you a list. When I am done, please tell me if any of the situations apply to you. You do not need to tell me which one.

- You have injected any drug other than those prescribed for you in the past year.
- You have been treated for a sexually transmitted disease or STD in the past year.
- You have given or received money or drugs in exchange for sex in the past year.
- You had anal sex without a condom in the past year.
- You had four or more sex partners in the past year.

Do any of these situations apply to you?

1 Yes  
2 No  
7 Don't know / Not sure  
9 Refused

## Module 12: Excess Sun Exposure (Split 1)

---

**//ask if cstate ne 2//**

**Mod12\_1:** During the past 12 months, how many times have you had a sunburn?

\_\_\_\_\_ Enter number [**RANGE: 0-365**]

777 Don't know/ Not sure

999 Refused

**//ask if cstate ne 2//**

**Mod12\_2:** When you go outside on a warm sunny day for more than one hour, how often do you protect yourself from the sun? Is that....

**INTERVIEWER NOTE:** Protection from the sun may include using sunscreen, wearing a wide-brimmed hat, or wearing a long-sleeved shirt.

**PLEASE READ:**

- 1 Always
- 2 Most of the time
- 3 Sometimes
- 4 Rarely
- 5 Never

**DO NOT READ:**

- 6 Don't stay outside for more than one hour on warm sunny days
- 8 Don't go outside at all on warm sunny days
- 7 Don't know/ Not sure
- 9 Refused

**//ask if cstate ne 2//**

**Mod12\_3:** On weekdays, in the summer, how long are you outside per day between 10am and 4pm?

**INTERVIEWER NOTE:** Friday is a weekday

**INTERVIEWER NOTE:** If respondent says never code 01

**DO NOT READ:**

- 01 Less than half an hour
- 02 (More than half an hour) up to 1 hour
- 03 (More than 1 hour) up to 2 hours
- 04 (More than 2 hours) up to 3 hours
- 05 (More than 3 hours) up to 4 hours

06 (More than 4 hours) up to 5 hours  
07 (More than 5) up to 6 hours

77 Don't know/ Not sure  
99 Refused

**//ask if cstate ne 2//**

**Mod12\_4:** On weekends in the summer, how long are you outside each day between 10am and 4pm?

**INTERVIEWER NOTE:** Friday is a weekday  
**INTERVIEWER NOTE:** If respondent says never code 01

**DO NOT READ:**

01 Less than half an hour  
02 (More than half an hour) up to 1 hour  
03 (More than 1 hour) up to 2 hours  
04 (More than 2 hours) up to 3 hours  
05 (More than 3 hours) up to 4 hours  
06 (More than 4 hours) up to 5 hours  
07 (More than 5) up to 6 hours

77 Don't know/ Not sure  
99 Refused

**Module 13: Lung Cancer Screening (Split 1, 2 and 3)**

---

**CATI NOTE: IF CORE Q9.1=1 (YES) AND Q9.2 = 1, 2, OR 3 (EVERY DAY, SOME DAYS, OR NOT AT ALL) CONTINUE, ELSE GO TO QUESTION 4.**

**//ask if s9q1 = 1 and s9q2 = 1, 2 or 3 and cstate ne 2//**

**Mod13\_1:** You've told us that you have smoked in the past or are currently smoking. The next questions are about screening for lung cancer.

How old were you when you first started to smoke cigarettes regularly?

**INTERVIEWER NOTE:** Regularly is at least one cigarette or more on days that a respondent smokes (either every day or some days) or smoked (not at all).

\_\_ \_\_ Age in Years [RANGE: 001 – 100]  
888 Never smoked cigarettes regularly [GO TO Mod13\_4]

777 Don't know/Not sure  
999 Refused

**//ask if s8q2 > Mod13\_1 and S8Q2 ne 07,09 AND MOD13\_1 ne 777,888,999 and cstate ne 2//**

**Mod13\_1c:** Previously you indicated you were [insert s8q2] years old, but stated you were [insert mod13\_1] years old when you first started to smoke cigarettes regularly.

I need to correct this inconsistency.

1 Continue **[Go back to Mod13\_1]**

**//ask if s9q2 = 3 and cstate ne 2//**

**Mod13\_2:** How old were you when you last smoked cigarettes regularly?

**INTERVIEWER NOTE:** Regularly is at least one cigarette or more on days that a respondent smokes (either every day or some days) or smoked (not at all).

\_\_ \_ Age in Years **[RANGE: 001 – 100]**  
777 Don't know/Not sure  
999 Refused

**//ask if Mod13\_2=1-100 and ((Mod13\_1=1-100 and (Mod13\_2 < Mod13\_1)) or (s8q2=18-99 and (s8q2 < Mod13\_2))) and cstate ne 2//**

**Mod13\_2c:** Previously you indicated you were [insert s8q2] years old, but stated you were [insert mod13\_2] years old when you last smoked cigarettes regularly.

I need to correct this inconsistency.

1 Continue **[Go back to Mod13\_2]**

**//ask if s9q1 = 1 and s9q2 = 1, 2 or 3 and Mod13\_1 ne 888 and cstate ne 2//**

**Mod13\_3:** On average, when you [if s9q2=1 or 2 insert smoke/ if s9q2 = 3 insert smoked] regularly, about how many cigarettes [if s9q2=1 or 2 insert do/ if s9q2 = 3 insert did] you usually smoke each day?

**INTERVIEWER NOTE:** Regularly is at least one cigarette or more on days that a respondent smokes (either every day or some days) or smoked (not at all).

**INTERVIEWER NOTE:** Respondents may answer in packs instead of number of cigarettes. Below is a conversion table:

0.5 PACK = 10 CIGARETTES

1.75 PACK = 35 CIGARETTES

0.75 PACK = 15 CIGARETTES  
1 PACK = 20 CIGARETTES  
1.25 PACK = 25 CIGARETTES  
1.5 PACK = 30 CIGARETTES

2 PACKS = 40 CIGARETTES  
2.5 PACKS= 50 CIGARETTES  
3 PACKS= 60 CIGARETTES

\_\_\_ Number of cigarettes [RANGE = 001-776]  
777 Don't know/Not sure  
999 Refused

**//ask if cstate ne 2//**

**Mod13\_4:** The next question is about CT or CAT scans. During this test, you lie flat on your back on a table. While you hold your breath, the table moves through a donut shaped x-ray machine while the scan is done. In the last 12 months, did you have a CT or CAT scan?

**READ ONLY IF NECESSARY:**

- 1 Yes, to check for lung cancer
- 2 No (did not have a CT scan)
- 3 Had a CT scan, but for some other reason

**DO NOT READ:**

- 7 Don't know/Not sure
- 9 Refused

**State Added Section 4: Smoking Cessation (Split 1, 2 and 3)**

---

**//ask if cstate ne 2 //**

**MD4\_1:** Now, I would like to ask you some questions about programs available to help people quit smoking.

A telephone quit line is a free telephone-based service that connects people who smoke cigarettes with someone who can help them quit. Are you aware of any telephone quit line services that are available to help [If Core s9q2 = 1 or 2, insert "you", else insert "people"] quit smoking?

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused



**MD4\_1:** Ahora me gustaría hacerle algunas preguntas sobre los programas disponibles para ayudar a las personas a dejar de fumar.

Una línea telefónica para dejar de fumar es un servicio telefónico que conecta a las personas que fuman cigarrillos con alguien que puede ayudarlas a dejar de fumar. ¿Usted sabe de algunos de los servicios de líneas telefónicas disponibles para a dejar de fumar?

**//ask if s9q4=01,02,03,04 and cstate ne 2//**

**MD4\_2:** You last smoked [if s9q4 = 01; insert “less than 1 month ago”] [if s9q4 = 02; insert “less than 3 months ago”] [if s9q4 = 03; insert “more than 3 months ago”] [if s9q4 = 04; insert “more than 6 months ago”]. Is that because you are trying to quit smoking for good?

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

**MD4\_2:** Usted fumó por última vez [if Core s9q4 = 01; insert "menos de un mes"] [if Core s9q4 = 02, 03, or 04 insert "más de 3 meses"] atrás. ¿Es porque trata de dejar de fumar para siempre?

**//ask if (s9q3=1 and cstate ne 2) or (s9q4=01, 02, 03, 04 and MD4\_2=1 and cstate ne 2)//**

**MD4\_3:** Previously, you mentioned you [if s9q3 = 1; insert, “tried to quit smoking in the past year”] [if s9q4 = 01, 02, 03, or 04 and MD4\_2=1; insert “quit smoking in the past year.”] The next few questions ask about your most recent attempt to quit smoking.

[if s9q4 = 01, 02, 03, or 04 and MD4\_2=1; insert “When you quit smoking”  
[if s9q2= 1 or 2 and s9q3 = 1; insert “The last time you tried to quit smoking”] did you call a telephone quitline to help you quit?

**MD4\_3.** Previamente, usted mencionó que usted [if s9q3 = 1; insert, “trató de dejar de fumar el último año”] [if s9q4 = 01, 02, 03, or 04 and MD4\_2=1; insert “dejó de fumar el último año.”] Las siguientes preguntas son sobre su intento más reciente de dejar de fumar.

[if Core s9q4= 01-04 and MD4\_2=1]: Cuando dejó de fumar...

[if Core s9q2= 1 or 2 and s9q3 = 1]: La última vez que trató de dejar de fumar...

¿llamó a una línea telefónica para ayudarle a dejar?

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

**//ask if (s9q3=1 and cstate ne 2) or (s9q4=01, 02, 03 or 04 and MD4\_2=1 and cstate ne 2)//**

**MD4\_4: [If s9q4 = 01, 02, 03, or 04 and MD4\_2=1; insert “When you quit smoking” [If s9q2= 1 or 2 and s9q3 = 1; insert “The last time you tried to quit smoking”] did you use a program to help you quit?**

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

MD4\_4: [if Core s9q4= 01-04 and MD4\_2=1]: Cuando dejó de fumar...

[if Core s9q2= 1 or 2 and s9q3 = 1]: La última vez que trató de dejar de fumar...

¿usó un programa para ayudarle a dejar?

**//ask if (s9q3=1 and cstate ne 2) or (s9q4=01, 02, 03 or 04 and MD4\_2=1 and cstate ne 2)//**

**MD4\_5: [If s9q4 = 01, 02, 03, or 04 and MD4\_2=1; insert “When you quit smoking” [If s9q2= 1 or 2 and s9q3 = 1; insert “The last time you tried to quit smoking”] did you receive one-on-one counseling from a health professional to help you quit?**

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

MD4\_5 [if Core s9q4= 01-04 and MD4\_2=1]: Cuando dejó de fumar...

[if Core s9q2= 1 or 2 and s9q3 = 1]: La última vez que trató de dejar de fumar...

¿recibió apoyo personal de un profesional médico para ayudarle a dejar?

**//ask if (s9q3=1 and cstate ne 2) or (s9q4=01, 02, 03 or 04 and MD4\_2=1 and cstate ne 2)//**

**MD4\_6: [If s9q4 = 01, 02, 03, or 04 and MD4\_2=1; insert “When you quit smoking” [If s9q2= 1 or 2 and s9q3 = 1; insert “The last time you tried to quit smoking”] did you use any of the following medications: a nicotine patch, nicotine gum, nicotine lozenges, nicotine nasal spray, a nicotine inhaler, or pills such as Wellbutrin®, Zyban®, bupropion, Chantix®, or varenicline to help you quit?**

**INTERVIEWER NOTE:** Pronounce “Wellbutrin” as Well-BYOU-TRIN, “Zyban” as Z-EYE-BAN, “bupropion” as BYO-PRO-PRI-ON, “Chantix” as CHAN-Tics, and “varenicline” as VAR-EN-IH-CLEAN]. Please read list slowly

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

**MD4\_6** [if Core s9q4= 01-04 and MD4\_2=1]: Cuando dejó de fumar...

[if Core s9q2= 1 or 2 and s9q3 = 1]: La última vez que trató de dejar de fumar...

¿Usó alguno de los siguientes medicamentos: Un parche de nicotina, goma de nicotina, pastillas de nicotina, aerosol de nicotina por vía nasal, un inhalador de nicotina o píldoras como Wellbutrin®, Zyban®, bupropion, Chantix®, o varenicline para ayudarle a dejar?

**//ask if (s9q2=1, 2 and cstate ne 2) or (MD4\_2=2 and cstate ne 2)//**

**Md4\_7:** The next few questions are about plans to quit smoking in the future.

Do you have a time frame in mind for quitting?

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

**MD4\_7.** Las siguientes preguntas son sobre planes para dejar de fumar en el futuro.

¿Tiene un período de tiempo en mente para dejar?

**//ask if (s9q2=1, 2 and cstate ne 2 and MD4\_7=1) or (MD4\_2=2 and MD4\_7=1 and cstate ne 2)//**

**MD4\_8:** Do you plan to quit smoking cigarettes for good...

**PLEASE READ:**

- 1 In the next 7 days
- 2 In the next 30 days
- 3 In the next 6 months
- 4 In the next year
- 5 More than 1 year from now

**DO NOT READ:**

- 7 Don't know / Not sure
- 9 Refused

**MD4\_8** Planea dejar de fumar cigarrillos para siempre...

**Please read:**

- 1 En los próximos 7 días
- 2 En los próximos 30 días
- 3 En los próximos 6 meses

4 En el próximo año  
5 Más de un 1 año en adelante  
**Do not read:**  
7 No sabe/No está seguro  
9 Rehusó

**//ask if cstate ne 2//**

**MD4\_9:** In the past 30 days, have you seen, read, or heard any ads about quitting cigarettes?

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

**MD4\_9:** En los últimos 30 días, ¿ha visto, leído o escuchado avisos sobre dejar de fumar cigarrillos?

**//ask if (s9q2=1, 2 or s9q4 = 01, 02, 03, 04 or s9q5 = 1, 2 or MD3\_1=1 or MD3\_2=1) and cstate ne 2//**

**MD4\_10:** In the past 12 months, that is, since **[INSERT DATE]**, did any doctor, dentist, nurse, or other health professional advise you to quit smoking cigarettes or using any other tobacco products?

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

**MD4\_10:** En los últimos 12 meses, o sea, desde **[PONER LA FECHA]**, ¿le sugirió algún médico, dentista, enfermera u otro profesional médico que deje de fumar cigarrillos o de usar cualquier otro producto con tabaco?

## **State Added Section 5: Secondhand Smoke (Split 1, 2 and 3)**

---

**//ask if cstate ne 2 //**

**MD5\_1t:** The next questions are about exposure to secondhand smoke.  
1 Continue

**//ask if s8q15 = 1 or 2 and cstate ne 2 //**

**MD5\_1:** Now I am going to ask you about smoke you might have breathed at work because someone else was smoking indoors. During the past 7 days, that is, since **[insert date]**, on how many days did you breathe the smoke at your workplace from someone other than you who was smoking tobacco?

\_\_ Number of days **[RANGE: 01-07]**

88 None

77 Don't know/Not sure

99 Refused

**MD5\_1T** Las siguientes preguntas son sobre la exposición al humo del cigarrillo de segunda mano.

**Md5\_1:** Ahora le voy a preguntar sobre el humo que podría haber respirado en su trabajo debido a que otra persona fumaba adentro. Durante los últimos 7 días, o sea, desde el último [DÍA DE LA SEMANA DE HOY], ¿en cuántos días respiró el humo en su lugar de trabajo de otra persona que fumaba tabaco?

**//ask if cstate ne 2 //**

**MD5\_2:** Not counting decks, porches, or garages, inside your home is smoking....

**PLEASE READ:**

1 Always allowed

2 Allowed only at some times or in some places

3 Never allowed

**DO NOT READ:**

6 Family does not have a smoking policy

7 Don't know/Not sure

9 Refused

**MD5\_2** Sin contar terrazas, galerías o garajes, en el interior de su casa, fumar está...

**Please read:**

1 Siempre permitido

2 Permitido solamente algunas veces o en algunos lugares

3 Nunca permitido

**Do not read:**

6 La familia no tiene una política sobre el fumar

7 No sabe/No está seguro

9 Rehusó

**//ask if cstate ne 2 //**

**MD5\_3:** Not counting motorcycles, in the vehicles that you or family members who live with you own or lease, is smoking...

**PLEASE READ:**

1 Always allowed in all vehicles

2 Sometimes allowed in at least one vehicle

3 Never allowed in any vehicle

**DO NOT READ:**

6 Family does not have a vehicle smoking policy

- 8 Respondent's family does not own or lease a vehicle
- 7 Don't know/Not sure
- 9 Refused

**MD5\_3** Sin contar las motocicletas, en los vehículos que usted o los miembros de su familia que viven con usted poseen o alquilan, fumar está...

**Please read:**

- 1 Siempre permitido en todos los vehículos
- 2 Algunas veces permitido en por lo menos un vehículo
- 3 Nunca permitido en ningún vehículo

**Do not read:**

- 6 La familia no tiene una política sobre el fumar en los vehículos
- 8 La familia del entrevistado no posee ni alquila un vehículo
- 7 No sabe/No está seguro
- 9 Rehusó

**//ask if cstate ne 2 //**

**MD5\_4:** Does any other adult age 18 or older living in the household smoke cigarettes now?

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

**MD5\_4:** ¿Fuma cigarrillos ahora cualquier otro adulto de 18 años o más que vive en la casa?

## Module 22: Random Child Selection (Split 1)

---

**CATI NOTE: If Core S8Q16 = 88, or 99 (No children under age 18 in the household, or Refused), go to next module.**

**//ask if s8q16=1 AND CSTATE NE 2 //**

**Mod22t1:** Previously, you indicated there was one child age 17 or younger in your household. I would like to ask you some questions about that child.

- 1. Continue [**Go to Mod22\_1M**]

**//ask if s8q16= 2-15 AND CSTATE NE 2 //**

**CATI NOTE: RANDOMLY SELECT ONE OF THE CHILDREN.**

**SET RNDS8Q16=S8Q16 RANDOMLY SELECTED CHILD**

**Mod22t2:** Previously, you indicated there were **[INSERT S8Q16]** children age 17 or younger in your household. Think about those **[INSERT S8Q16]** children in order of their birth, from oldest to youngest. The oldest child is the first child and the youngest child is the last. Please include children with the same birth date, including twins, in the order of their birth.

I have some additional questions about one specific child. The child I will be referring to is the **[Insert RNDS8Q16]** child in your household. All following questions about children will be about the **[Insert RNDS8Q16]** child.

1. Continue **[Go to Mod22\_1M]**

**//ask if s8q16 ne 88, 99 AND CSTATE NE 2 //**

**Mod22\_1m:** What is the birth month and year of the **[Insert RNDs8Q16]** child?

- 01 January
- 02 February
- 03 March
- 04 April
- 05 May
- 06 June
- 07 July
- 08 August
- 09 September
- 10 October
- 11 November
- 12 December

__	Code 2-Digit Month <b>[Range 01-12]</b>
77	Don't know / Not sure
99	Refused

**//ask if s8q16 ne 88, 99 AND CSTATE NE 2 //**

**Mod22\_1y:** What is the birth month and year of the **[Insert RNDS8Q12]** child?

----	Code 4-Digit year <b>[Range 2000-2018]</b>
7777	Don't know / Not sure
9999	Refused

**CATI INSTRUCTION: Calculate the child's age in months (CHLDAGE1=0 to 216) and also in years (CHLDAGE2=0 to 17) based on the interview date and the birth month**

and year using a value of 15 for the birth day. If the selected child is < 12 months old enter the calculated months in CHLDAGE1 and 0 in CHLDAGE2. If the child is ≥ 12 months enter the calculated months in CHLDAGE1 and set CHLDAGE2=Truncate (CHLDAGE1/12).

**//ask if 0 <= chldage2 < 18 or mod22\_1y in (7777,9999)**

**Mod22\_2:** Is the child a boy or a girl?

- 1 Boy
- 2 Girl
- 9 Refused

**//ask if 0 <= chldage2 < 18 or mod22\_1y in (7777,9999)**

**Mod22\_3:** Is the child Hispanic, Latino/a, or Spanish origin?

- 5 No, not of Hispanic, Latino/a, or Spanish origin
- 1 Yes
- 7 Don't Know
- 9 Refused

**//if mod22\_3 = 1//**

**Mod22\_3b:** Are they...

**INTERVIEWER NOTE:** One or more categories may be selected

**[MUL=4]**

**PLEASE READ:**

- 1 Mexican, Mexican American, Chicano/a
- 2 Puerto Rican
- 3 Cuban
- 4 Another Hispanic, Latino/a, or Spanish origin

**DO NOT READ:**

- 5 No
- 7 Don't know / Not sure
- 9 Refused

**//ask if 0 <= chldage2 < 18 or mod22\_1y in (7777,9999)**



**Mod22\_4:** Which one or more of the following would you say is the race of the child?

**INTERVIEWER NOTE:** SELECT ALL THAT APPLY

**[MUL = 5]**

**PLEASE READ:**

- 10 White
- 20 Black or African American
- 30 American Indian or Alaska Native
- 40 Asian
- 50 Pacific Islander

**DO NOT READ:**

- 60 Other
- 77 Don't know / Not sure
- 99 Refused

**//ask if Mod22\_4=40//**

**Mod22\_4a:** Is that...

**INTERVIEWER NOTE:** Select all that apply.

**[mul=7]**

**PLEASE READ:**

- 41 Asian Indian
- 42 Chinese
- 43 Filipino
- 44 Japanese
- 45 Korean
- 46 Vietnamese
- 47 Other Asian

**DO NOT READ:**

- 60 Other
- 77 Don't know / Not sure
- 99 Refused

**//if Mod22\_4 = 50**

**Mod22\_4p:** Is that...

**INTERVIEWER NOTE:** Select all that apply.

**[mul=4]**

**PLEASE READ:**

- 51 Native Hawaiian
- 52 Guamanian or Chamorro

- 53 Samoan
- 54 Other Pacific Islander

**DO NOT READ:**

- 60 Other
- 77 Don't know / Not sure
- 99 Refused

**CATI NOTE: IF MORE THAN ONE RESPONSE TO MOD22\_4; CONTINUE. OTHERWISE, GO TO MOD22\_6.**

**Ask if Mod22\_4=mul. Only show responses from Mod22\_4, plus responses 77 & 99**

**Mod22\_5:** Which one of these groups would you say best represents the child's race?

- 10 White
- 20 Black or African American
- 30 American Indian or Alaska Native
- 40 Asian
- 50 Pacific Islander

**DO NOT READ:**

- 60 Other
- 77 Don't know / Not sure
- 99 Refused

**//Ask if Mod22\_4=mul and Mod22\_5=40. If there is only one response to mod22\_4a and mod22\_5=40, mod22\_5a should be auto-punched with mod22\_4a response Only show responses from mod22\_4a, plus responses 77 & 99//**

**Mod22\_5a:** Is that...

- 41 Asian Indian
- 42 Chinese
- 43 Filipino
- 44 Japanese
- 45 Korean
- 46 Vietnamese
- 47 Other Asian

**DO NOT READ:**

- 60 Other
- 77 Don't know / Not sure
- 99 Refused

**//Ask if mod22\_4p=mul and mod22\_5=50. If there is only one response to mod22\_5p and mod22\_5=50, mod22\_5p should be auto-punched with mod22\_4p response. Only show responses from mod22\_5p, plus responses 77 & 99.//**

**Mod22\_5p:** Is that...

- 51 Native Hawaiian
- 52 Guamanian or Chamorro
- 53 Samoan
- 54 Other Pacific Islander

**DO NOT READ:**

- 60 Other
- 77 Don't know / Not sure
- 99 Refused

**[DATA PROCESSING NOTE: mod22\_5 is presented as one question, combine Mod22\_5a and Mod22\_5pi into Mod22\_5 for delivery]**

**//ask if 0 <= chldage2 < 18 or mod22\_1y in (7777,9999)//**

**Mod22\_6:** How are you related to the child?

**PLEASE READ:**

- 1 Parent (include biologic, step, or adoptive parent)
- 2 Grandparent
- 3 Foster parent or guardian
- 4 Sibling (include biologic, step, and adoptive sibling)
- 5 Other relative
- 6 Not related in any way

**DO NOT READ:**

- 7 Don't know / Not sure
- 9 Refused

## **Module 23: Childhood Asthma Prevalence (Split 1)**

---

**CATI NOTE: If response to S8Q16 = 88 (None) or 99 (Refused), go to next module.**

**//ask if (0 <= chldage2 < 18 or mod22\_1y in (7777, 9999)) //**

**Mod23\_1 :** The next two questions are about the **[INSERT RNDS8Q16]** child. Has a doctor, nurse or other health professional EVER said that the child has asthma?

- 1 Yes
- 2 No [Go to next module]
- 7 Don't know / Not sure [Go to next module]
- 9 Refused [Go to next module]

**//ask if mod23\_1=1//**

**Mod23\_2:** Does the child still have asthma?

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

## State-Added Section 6: Childhood Human HPV (Split 1)

---

//start timer ett6//

**//ask if chldage2=9-17 and split = 1 and cstate ne 2//**

**MD6\_1:** I have two additional questions about a vaccination the **[INSERT RNDS8Q16]** child may have had.

A vaccine to prevent the human papilloma virus or HPV infection is available and is called the cervical cancer or genital warts vaccine, HPV shot, [Fill: if MOD22\_2=2“GARDASIL or CERVARIX”; if MOD22\_2=1 “ or GARDASIL”].

Has this child EVER had an HPV vaccination?

**INTERVIEWER NOTE:** Human Papillomavirus (Human Pap·uh·loh·muh·virus); Gardasil (Gar·duh· seel); Cervarix (Sir·var· icks)

- 1 Yes
- 2 No
- 3 Doctor refused when asked
- 7 Don't know / Not sure
- 9 Refused

**MD6\_1:** "Tengo dos preguntas adicionales sobre una vacunación que su [insertar el número de orden] niño pudiera haber recibido. Una vacuna para prevenir el virus del papiloma humano o infección con HPV está disponible y se llama la vacuna contra el cáncer cervical o de verrugas genitales, inyección del

HPV, [Llenar: Si es mujer “GARDASIL o CERVARIX”; si es hombre “o GARDASIL”].  
¿Ha este niño recibido ALGUNA VEZ una vacuna contra el HPV?

NOTA: Human Papillomavirus (Human Pap•uh•loh•muh-virus); Gardasil (Gar•duh•seel); Cervarix (Sir•var•icks)

**//ask if MD6\_1=1//**

**MD6\_2:** How many HPV shots did [if mod22\_2=1, insert “he” / if mod22\_2=2 insert “she”] receive?

- \_\_\_ Number of shots [RANGE01-02]
- 03 All shots
- 77 DK/NS
- 99 Refused

**MD6\_2:** ¿Cuántas inyecciones contra el HPV recibió?

- \_\_\_ Number of shots [RANGE01-03]
- 03 All shots
- 77 DK/NS
- 99 Refused

### State Added Section 7: Preconception Health and Family Planning (Split 1, 2 and 3)

---

**//ask if hgender = 2 and 18-49 and s14q7 ne 1 and s8q20 ne 1 and cstate ne 2 //**

**MD7\_1:** The next set of questions asks you about your thoughts and experiences with family planning. Please remember that all of your answers will be kept confidential.

Did you or your partner do anything the last time you had sex to keep you from getting pregnant?

- 1 Yes
- 2 No
- 3 No partner/not sexually active [GO TO NEXT SECTION]
- 4 Same sex partner
- 7 Don't know/Not sure
- 9 Refused

**//ask if MD7\_1 = 1 and cstate ne 2 //**

**MD7\_2:** What did you or your partner do the last time you had sex to keep you from getting pregnant?

**INTERVIEWER NOTE:** If respondent reports using more than one method, please code the method that occurs first on the list.

**INTERVIEWER NOTE:** If respondent reports using “condoms,” probe to determine if “female condoms” or male condoms.”

**INTERVIEWER NOTE:** If respondent reports using an “IUD” probe to determine if “levonorgestrel IUD” or “copper-bearing IUD.”

**INTERVIEWER NOTE:** If respondent reports “other method,” ask respondent to “please be specific” and ensure that their response does not fit into another category. If response does fit into another category, please mark appropriately.

**READ ONLY IF NECESSARY:**

- 01 Female sterilization (ex. Tubal ligation, Essure, Adiana)
- 02 Male sterilization (vasectomy)
- 03 Contraceptive implant (ex. Implanon)
- 04 Levonorgestrel (LNG) or hormonal IUD (ex. Mirena)
- 05 Copper-bearing IUD (ex. ParaGard)
- 06 IUD, type unknown
- 07 Shots (ex. Depo-Provera)
- 08 Birth control pills, any kind
- 09 Contraceptive patch (ex. Ortho Evra)
- 10 Contraceptive ring (ex. NuvaRing)
- 11 Male condoms
- 12 Diaphragm, cervical cap, sponge
- 13 Female condoms
- 14 Not having sex at certain times (rhythm or natural family planning)
- 15 Withdrawal (or pulling out)
- 16 Foam, jelly, film, or cream
- 17 Emergency contraception (morning after pill)
- 18 Other method

**DO NOT READ:**

- 77 Don't know/Not sure
- 99 Refused

**//ask if MD7\_1 = 2, 7 OR 9 and cstate ne 2 //**

**MD7\_3:** Some reasons for not doing anything to keep you from getting pregnant the last time you had sex might include wanting a pregnancy, not being able to pay for birth control, or not thinking that you can get pregnant.

What was your main reason for not doing anything the last time you had sex to keep you from getting pregnant?

**INTERVIEWER NOTE:** If respondent reports “other reason,” ask respondent to “please specify” and ensure that their response does not fit into another category. If response does fit into another category, please mark appropriately.

**READ ONLY IF NECESSARY:**

- 01 You didn't think you were going to have sex/no regular partner
- 02 You just didn't think about it
- 03 Don't care if you get pregnant
- 04 You want a pregnancy
- 05 You or your partner don't want to use birth control
- 06 You or your partner don't like birth control/side effects
- 07 You couldn't pay for birth control
- 08 You had a problem getting birth control when you needed
- 09 Religious reasons
- 10 Lapse in use of a method
- 11 Don't think you or your partner can get pregnant (infertile or too old)
- 12 You had tubes tied (sterilization)
- 13 You had a hysterectomy
- 14 Your partner had a vasectomy (sterilization)
- 15 You are currently breast-feeding
- 16 You just had a baby/postpartum
- 17 You are pregnant now
- 18 Same sex partner
- 19 Other reasons

**DO NOT READ:**

- 77 Don't know/Not sure
- 99 Refused

**//ask if hgender = 2 and 18-49 and s14q7 ne 1 and s8q20 ne 1 and cstate ne 2 //**

**MD7\_4:** How do you feel about having a child now or sometime in the future?

Would you say...

**PLEASE READ:**

- 01 You don't want to have one
- 02 You do want to have one, less than 12 months from now
- 03 You do want to have one, between 12 months and less than 2 years from now
- 04 You do want to have one, between 2 years to less than 5 years from now
- 05 You do want to have one, five or more years from now
- 06 You do want to have one, but you are not sure when
- 07 Unable to have children/hysterectomy

**DO NOT READ:**

- 77 Don't Know/Not Sure
- 99 Refused

¿Qué piensa acerca de la idea de tener un hijo ahora o en algún momento en el futuro?

**PLEASE READ:**

- 01 No quiere tener hijos.
- 02 Quiere tener uno en menos de 12 meses a partir de ahora.
- 03 Quiere tener uno entre 12 meses y menos de 2 años a partir de ahora.
- 04 Quiere tener uno en 2 años y menos de 5 años a partir de ahora.
- 05 Quiere tener uno en cinco o más años a partir de ahora.
- 06 Quiere tener uno, pero no está seguro de cuándo.
- 07 No puede tener hijos/histerectomía.

**DO NOT READ:**

- 77 Don't Know/Not Sure
- 99 Refused

**State Added Section 8: Substance Use (Split 1, 2 and 3)**

---

**//ask if cstate ne 2 //**

**MD8\_1:** Now I'm going to ask you about non-medical use of drugs. 'Non-medical use' means using drugs not prescribed by a doctor, or are used to get high, or for curiosity. Please do NOT include alcohol or tobacco.

Remember, all answers are kept confidential and no identifying information is recorded. You may skip any question you do not wish to answer.

In the past 12 months, did you use or take drugs, such as benzodiazepines, cocaine, heroin, amphetamines, or anything NOT prescribed by your doctor?

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

**MD8\_1:** Ahora le voy a hacer preguntas sobre el uso de drogas sin propósitos médicos. "Sin propósitos médicos" quiere decir usar drogas que no fueron recetadas por un médico, o que usa para sentirse eufórico, o por curiosidad. Por favor NO incluya el tabaco o el alcohol. Recuerde, todas las respuestas son confidenciales y no se registra ninguna información identificadora. Puede saltarse cualquier pregunta que no desee contestar.



En los últimos 12 meses, ¿usó o tomó drogas, como benzodiazepinas, cocaína, heroína, anfetaminas o cualquier cosa que NO fue recetado por su médico?

**//ask if MD8\_1 = 1//**

**MD8\_2:** In the past 12 months, did you use heroin or any type of opioid that you did not have a prescription for or that you took more frequently than prescribed, on one or more occasions?

**INTERVIEWER NOTE:** Opioids include certain painkillers, such as morphine, hydrocodone, and oxycodone; and prescription drugs such as OxyContin, Percocet, and Vicodin.

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

**MD8\_2:** En los últimos 12 meses, ¿usó heroína o cualquier tipo de opiato que no fue recetado o que usted tomó con mayor frecuencia que la recetada, en una o más ocasiones?

**//ask if MD8\_1 = 1//**

**MD8\_3:** In the past 12 months, did you shoot up or inject any drugs other than those prescribed for you? By shooting up, I mean anytime you might have used drugs with a needle, either by mainlining, skin popping, or muscling.

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

**MD8\_3:** En los últimos 12 meses, ¿usó o se inyectó drogas que no fueron recetadas para usted? Con inyectarse, quiero decir cualquier momento en que usó drogas con una aguja, sea "mainlining", "skin popping" o "muscling".

**//ask if MD8\_1 = 1//**

**MD8CLOSE:** Thank you for answering these questions. If you would like assistance with any of these issues, please call the Maryland Crisis Hotline at 1-800-422-0009 to find out about mental health and substance related disorder services available in your area.

1 Continue

**MD8CLOSE:** Gracias por responder estas preguntas. Si desea asistencia con cualquiera de estas cuestiones, por favor llame a la Línea telefónica de crisis de Maryland al 1-800-422-0009 para

obtener información sobre servicios de salud mental y de trastornos relacionados con sustancias disponibles en su zona.

### State Added Section 9: Adverse Childhood Experiences (Split 2 and 3)

---

**//ask if cstate ne 2 //**

**MD9\_1:** I'd like to ask you some questions about events that happened during your childhood. This information will allow us to better understand problems that may occur early in life, and may help others in the future. This is a sensitive topic and some people may feel uncomfortable with these questions. At the end of this section, I will give you a phone number for an organization that can provide information and referral for these issues. Please keep in mind that you can ask me to skip any question you do not want to answer. All questions refer to the time period before you were 18 years of age.

Now, looking back before you were 18 years of age--- Did you live with anyone who was depressed, mentally ill, or suicidal?

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

**MD9\_1:** Me gustaría hacerle algunas preguntas sobre eventos que ocurrieron durante su infancia. Esta información nos permitirá entender mejor los problemas que ocurren al principio de la vida y podría ayudar a otros en el futuro. Este es un tema sensible y algunas personas podrían sentirse incómodas al responder estas preguntas. Al final de esta sección, le entregaré un número de teléfono de una organización que puede proveerle información y derivaciones sobre estos problemas. Por favor, tenga en cuenta que me puede pedir que saltee alguna pregunta que no quiere responder.

Todas las preguntas se refieren al período de tiempo antes de que tuviera 18 años de edad. Ahora, mirando hacia atrás antes de que tuviera 18 años de edad, ¿Vivió con alguna persona que estaba deprimida, mentalmente enferma o suicida?

**//ask if cstate ne 2 //**

**MD9\_2:** (Before you were 18 years of age), did you live with anyone who was a problem drinker or alcoholic?

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

**MD9\_2** (Antes de tener 18 años de edad), ¿vivía con alguna persona que era un alcohólico o bebedor?

- 1 Sí
- 2 No

7 No sabe/No está seguro  
9 Rehusó

**//ask if cstate ne 2 //**

**MD9\_3:** (Before you were 18 years of age), did you live with anyone who used illegal street drugs or who abused prescription medications?

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

MD9\_3 (Antes de tener 18 años de edad)¿Vivió con alguna persona que usó drogas ilegales de la calle o que se abusaba de medicamentos recetados?

1 Sí  
2 No  
7 No sabe/No está seguro  
9 Rehusó

**//ask if cstate ne 2 //**

**MD9\_4:** (Before you were 18 years of age), did you live with anyone who served time or was sentenced to serve time in a prison, jail, or other correctional facility?

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

MD9\_4 (Antes de tener 18 años de edad)¿Vivió con alguien que pasó tiempo en la cárcel o fue sentenciado a cumplir una condena en una prisión, cárcel u otra institución penitenciaria?

1 Sí  
2 No  
7 No sabe/No está seguro  
9 Rehusó

**//ask if cstate ne 2 //**

**MD9\_5:** Were your parents separated or divorced?

- 1 Yes
- 2 No
- 8 Parents not married
- 7 Don't know / Not sure
- 9 Refused

MD9\_5 ¿Estaban separados o divorciados sus padres?

- 1 Sí
- 2 No
- 8 Los padres no estaban casados
- 7 No sabe / No está seguro
- 9 Rehusó

**//ask if cstate ne 2 //**

**MD9\_6:** How often did your parents or adults in your home ever slap, hit, kick, punch or beat each other up?

**PLEASE READ:**

- 1 Never
- 2 Once
- 3 More than once

**DO NOT READ:**

- 7 Don't know / Not sure
- 9 Refused

MD9\_6 ¿Cada cuánto los padres o adultos en su casa se pegaban cachetadas, puñetazos, pateaduras, golpes o se pelearon físicamente?

- 1 Nunca
- 2 Una vez
- 3 Más de una vez

No lea:

- 7 No sabe / No está seguro
- 9 Rehusó

**//ask if cstate ne 2 //**

**MD9\_7:** Before age 18, how often did a parent or adult in your home ever hit, beat, kick, or physically hurt you in any way? Do not include spanking. Would you say--

**PLEASE READ:**

- 1 Never
- 2 Once
- 3 More than once

**DO NOT READ:**

- 7 Don't know / Not sure
- 9 Refused

MD9\_7 Antes de los 18 años de edad, ¿cada cuánto uno de los padres o adultos en su casa le pegó puñetazos, pateaduras, golpes o lo lastimaron físicamente de alguna manera? No incluya las palizas. Diría usted...

- 1 Nunca
- 2 Una vez
- 3 Más de una vez

No lea:

- 7 No sabe / No está seguro
- 9 Rehusó

**//ask if cstate ne 2 //**

**MD9\_8:** Before age 18, how often did a parent or adult in your home ever swear at you, insult you, or put you down?

**PLEASE READ:**

- 1 Never
- 2 Once
- 3 More than once

**DO NOT READ:**

- 7 Don't know / Not sure
- 9 Refused

MD9\_8 Antes de los 18 años de edad, ¿cada cuánto uno de los padres o un adulto en su casa uso profanidades, lo insultó o hizo sentir mal?

- 1 Nunca
- 2 Una vez
- 3 Más de una vez

No lea:

- 7 No sabe / No está seguro
- 9 Rehusó

**//ask if cstate ne 2 //**

**MD9\_9:** Before age 18, how often did anyone at least 5 years older than you or an adult, ever touch you sexually?

**PLEASE READ:**

- 1 Never
- 2 Once
- 3 More than once

**DO NOT READ:**

- 7 Don't know / Not sure
- 9 Refused

MD9\_9 Antes de los 18 años de edad ¿Cada cuánto alguien que tenía por lo menos cinco años más que usted o un adulto lo tocó sexualmente?

- 1 Nunca
- 2 Una vez
- 3 Más de una vez

No lea:

- 7 No sabe / No está seguro
- 9 Rehusó

**//ask if cstate ne 2 //**

**MD9\_10:** Before age 18, how often did anyone at least 5 years older than you or an adult, try to make you touch them sexually?

**PLEASE READ:**

- 1 Never
- 2 Once
- 3 More than once

**DO NOT READ:**

- 7 Don't know / Not sure
- 9 Refused

MD9\_10 Antes de los 18 años de edad ¿Cada cuánto alguien que tenía por lo menos cinco años más que usted o un adulto trató de lograr que usted lo tocaran sexualmente?

- 1 Nunca
- 2 Una vez
- 3 Más de una vez

No lea:

- 7 No sabe / No está seguro
- 9 Rehusó

**//ask if cstate ne 2 //**

**MD9\_11:** Before age 18, how often did anyone at least 5 years older than you or an adult, force you to have sex?

**PLEASE READ:**

- 1 Never
- 2 Once
- 3 More than once

**DO NOT READ:**

- 7 Don't know / Not sure

9 Refused

MD9\_11 Antes de los 18 años de edad ¿Cada cuánto alguien que tenía por lo menos cinco años más que usted o un adulto lo obligó a tener relaciones sexuales?

- 1 Nunca
- 2 Una vez
- 3 Más de una vez

No lea:

- 7 No sabe / No está seguro
- 9 Rehusó

**//ask if cstate ne 2 //**

**MD9\_close:** As I mentioned when we started this section, I would give you a phone number for an organization that can provide information and referral for these issues. Would you like me to give you that number?

Como mencioné al comienzo de esta sección, le entregaré un número de teléfono de una organización que puede proveerle información y derivaciones sobre estos problemas. ¿Desea que le entregue dicho número?

- 1 Yes
- 2 No

**//ask if MD9\_close = 1 and cstate ne 2 //**

**MD9\_hot:** There are several numbers available that may be helpful. You can dial 1-800-4-A-CHILD (1-800-422-4453) to reach the National Hotline for Child Abuse. You can also dial 1-800-656-HOPE (1-800-656-4673) to reach the Rape, Abuse, and Incest National Network hotline. In addition, Maryland's Parenting Helpline is available through Maryland's Chapter of Prevent Child Abuse Maryland at 1-800-243-7337. Or you may simply dial 211 to find out about mental health and human services available in your jurisdiction.

Hay varios números disponibles que podrían ser útiles. Puede llamar al 1-800-4-A-CHILD (1-800-422-4453) para comunicarse con la Línea Nacional del Abuso Infantil (National Hotline for Child Abuse). También puede llamar al 1-800-656-HOPE (1-800-656-4673) para comunicarse con la línea de la Red Nacional contra la Violación, el Abuso y el Incesto (Rape, Abuse, and Incest National Network). Además, la línea de ayuda a padres de Maryland está disponible a través del Capítulo de Maryland de Prevención del Abuso Infantil en Maryland (Prevent Child Abuse Maryland). O simplemente puede llamar al 211 para obtener información sobre los servicios humanos o de salud mental disponible en su jurisdicción.

1 Continue

## State Added Section 10: Intimate Partner Violence (Split 2 and 3)

---

**//ask if cstate ne 2 //**

**MD10\_1:** The next questions are about different types of violence in relationships with an intimate partner. By an intimate partner I mean any current or former spouse, boyfriend, or girlfriend. Someone you were dating, or romantically or sexually intimate with would also be considered an intimate partner. This information will help us to better understand the problem of violence in relationships. This is a sensitive topic. Some people may feel uncomfortable with these questions. At the end of this section, I will give you phone numbers of organizations that can provide information and referral for these issues. Please keep in mind that if you are not in a safe place you can ask me to skip any question you do not want to answer.

Are you in a safe place to answer these questions?

1 Yes

2 No **[go to MD10CLOSE]**

A continuación, le haré preguntas relacionadas con los diferentes tipos de violencia en las relaciones de parejas íntimas. Cuando se habla de pareja íntima se hace referencia a cualquier cónyuge, novio o novia actual o anterior. También se considera una pareja íntima a una persona con la que salía o mantenía una relación sentimental o romántica. Esta información nos ayudará a comprender mejor el problema de la violencia en las relaciones. Este es un tema delicado; algunas personas pueden sentirse incómodas al responder estas preguntas. Al final de esta sección, le brindaré números de teléfono de organizaciones que le pueden proporcionar información y referencias sobre estos temas. Tenga en cuenta que si no se siente cómodo, puede solicitarme que omita cualquier pregunta que no desee responder.

¿Se siente cómodo para responder estas preguntas?

1 Yes

2 No **[go to MD10CLOSE]**

**//ask if MD10\_1 = 1 and cstate ne 2 //**

**MD10\_2:** Has an intimate partner EVER THREATENED you with physical violence? This includes threatening to hit, slap, push, kick, or hurt you in any way.

¿Alguna vez alguna de sus parejas lo AMENAZÓ con violencia física? Es decir, lo amenazó con golpearlo, abofetearlo, empujarlo, patearlo o lastimarlo de alguna manera.



- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

**//ask if MD10\_1 = 1 and cstate ne 2 //**

**MD10\_3:** Has an intimate partner EVER ATTEMPTED physical violence against you? This includes times when they tried to hit, slap, push, kick, or otherwise hurt you, BUT THEY WERE NOT ABLE TO.

¿Alguna vez su pareja INTENTÓ ejercer violencia física contra usted? Esto incluye las veces en que intentaron golpearlo, abofetearlo, empujarlo, patearlo o lastimarlo de alguna manera, PERO NO PUDIERON.

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

**//ask if MD10\_1 = 1 and cstate ne 2 //**

**MD10\_4:** Has an intimate partner EVER hit, slapped, pushed, kicked, or hurt you in any way?

¿ALGUNA VEZ golpeó, abofeteó, empujó, pateó o lastimó a una pareja de alguna manera?

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

**//ask if MD10\_1 = 1 and cstate ne 2 //**

**MD10\_5:** Now, I am going to ask you about unwanted sex. Unwanted sex includes things like putting anything into your [insert 'vagina,' if hgender = 2] anus, or mouth or making you do these things to them after you said or showed that you didn't want to. It includes times when you were unable to consent, for example, you were drunk or asleep, or you thought you would be hurt or punished if you refused.

Have you EVER experienced any unwanted sex by a current or former intimate partner?

A continuación le preguntaré sobre las relaciones sexuales no deseadas. Las relaciones sexuales no deseadas incluyen situaciones en las que una persona introduce cosas en su **[insert 'vagina' if hgender = 2]**, ano o boca o situaciones en las que se lo obligó a hacer este tipo de cosas a pesar de que se negó o demostró que no quería hacerlo. Incluye momentos en los que era incapaz de dar su consentimiento, por ejemplo, estaba borracho o dormido, o que pensó que si se negaba lo lastimarían o castigarían.

¿Alguna vez experimentó alguna relación sexual no deseada con una pareja íntima actual o anterior?

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

**//ask if (MD10\_4 = 1 or MD10\_5 = 1) and cstate ne 2 //**

**MD10\_6:** In the past 12 months, have you experienced any physical violence or had unwanted sex with an intimate partner?

En los últimos 12 meses, ¿experimentó violencia física o tuvo relaciones sexuales no deseadas con alguna pareja?

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

**//ask if MD10\_6 = 1 and cstate ne 2 //**

**MD10\_7:** In the past 12 months, have you had any physical injuries, such as bruises, cuts, scrapes, black eyes, vaginal or anal tears, or broken bones, as a result of this physical violence or unwanted sex?

En los últimos 12 meses, ¿tuvo alguna lesión física, tales como moretones, cortes, raspaduras, ojos morados, desgarros vaginales o anales o fracturas, como resultado de esta violencia física o relaciones sexuales no deseadas?

- 1 Yes
- 2 No

- 7 Don't know / Not sure
- 9 Refused

**//ask if (MD10\_4 = 1 or or MD10\_5 = 1) and cstate ne 2 //**

**MD10\_8:** At the time of the most recent incident involving an intimate partner who was physically violent –or- had unwanted sex with you, what was that person's relationship to you?

Durante el último incidente que vivió con una pareja íntima que era violenta físicamente, o con la que mantuvo relaciones sexuales no deseadas, ¿qué relación mantenía con esa persona?

**DO NOT READ:**

- 01 Current boyfriend
- 02 Current girlfriend
- 03 Former boyfriend
- 04 Former girlfriend
- 05 Fiancé (male)
- 06 Fiancée (female)
- 07 Male you were dating
- 08 Female you were dating
- 09 Female first date
- 10 Male first date
- 11 Husband or male live-in partner
- 12 Wife or female live-in partner
- 13 Former husband or former male live-in partner
- 14 Former wife or former female live-in partner
- 15 Other
- 77 Don't know / Not sure
- 99 Refused

**//ask if cstate ne 2 //**

**MD10CLOSE:** We realize that this topic may bring up past experiences that some people may wish to talk about. If you or someone you know would like to talk to a trained counselor, there is a toll-free and confidential intimate partner violence telephone hotline you can call. The number is 1-800-799-SAFE (7233). Would you like me to repeat the number?

Comprendemos que este tema puede traer a colación experiencias pasadas sobre las que algunas personas quisieran hablar. Si usted o alguien que conoce quisieran hablar con un asesor capacitado, existe una línea telefónica gratuita y confidencial de violencia de género a la que puede comunicarse. El número es 1-800-799-SAFE (7233). ¿Quisiera que repita este número?

1 Continue

## Asthma Module: Call-Back Permission Script

If ADULT only (S6Q4=1), proceed with ADULT; If CHILD only (MOD23\_1=1), proceed with CHILD; If ADULT AND CHILD, proceed to Asthma Selection

**ASTHMA CALLBACK SELECTION: CHOOSE ADULT OR CHILD. (50% ADULT / 50% CHILD)}**

**//Ask if s6q4=1 or Mod23\_1=1 and cstate ne 2//**

**AST1:** We would like to call you again within the next 2 weeks to talk in more detail about **[INSERT “your” OR “your child’s”]** experiences with asthma. The information will be used to help develop and improve the asthma programs in **[insert STATE]**. The information you gave us today and any you give us in the future will be kept confidential. If you agree to this, we will keep your first name or initials and phone number on file, separate from the answers collected today. Even if you agree now, you or others may refuse to participate in the future. Would it be okay if we called you back to ask additional asthma-related questions at a later time?

**Ast1.** Quisiéramos llamarle de nuevo dentro de 2 semanas para hablar más en detalle de las experiencias **[if respondent’s asthma suyas con el asma,] [if child’s asthma que tiene su niño con el asma.]**

La información se utilizará para ayudar a crear y mejorar programas contra el asma en Arizona. La información que nos dio el día de hoy y la que nos dará en el futuro se mantendrá confidencial. Si usted está de acuerdo con esto, mantendremos su nombre o sus iniciales y número de teléfono en un expediente separado de las respuestas que obtuvimos hoy. Aun cuando acepte hoy, usted puede decidir no participar en el futuro. ¿Le parece bien que le llamemos de nuevo en una fecha posterior para hacerle preguntas adicionales sobre el asma?

- |   |     |
|---|-----|
| 1 | Yes |
| 2 | No  |

**//ask if ast1=1//**

**AST2a:** Can I please have either your first name or initials, so we will know who to ask for when we call back?

¿Me puede proporcionar su nombre o iniciales de usted, para que sepamos por quién preguntar cuando volvamos a llamar?

- |    |               |
|----|---------------|
| 01 | Gave Response |
| 77 | Don’t Know    |

**//ask if ast2a=1//**

\_\_\_\_\_ Enter first name or initials.

**Asthma Call-Back Selection (Split 1, 2, and 3)****CATI/DP NOTE****//ask if ast1=1//****Acflag** Which person in the household was selected as the focus of the asthma call-back?

- 1 adult with asthma
- 2 adult had asthma
- 3 child with asthma
- 4 child had asthma

**//ask if ast2a=1 and acflag=3, 4//****AST2b:** Can I please have either your child's first name or initials, so we will know who to ask about when we call back?

¿Me puede proporcionar su nombre o iniciales (de usted/de su niño), para que sepamos por quién preguntar cuando volvamos a llamar?

- 01 Gave Response
- 77 Don't Know
- 99 Refused

**//ask if ast2b=1//****AST2c:** \_\_\_\_\_ Enter first name or initials**Zika Module: Call-Back Permission Script (Split 1, 2, and 3)****//ask if HGENDER=2 and s8q2=18-49 and cstate ne 2//****Z1:** We would like to call you again to talk in more detail about reproductive issues related to the Zika Virus. The information will be used to help develop and improve the response to the Zika virus in **[insert STATE]**. The information you gave us today and any you give

us in the future will be kept confidential. If you agree to this, we will keep your first name or initials and phone number on file, separate from the answers collected today. Even if you agree now, you may refuse to participate in the future. Would it be okay if we called you back to ask additional questions at a later time?

- 1 Yes
- 2 No //go to close//

Nos gustaría llamarle nuevamente para hablar con usted con más detalle sobre temas relacionados a la salud reproductiva y el virus del Zika, y cuán preparada está usted para otras emergencias de salud pública, como un huracán u otro brote de una enfermedad infecciosa. La información se usará para ayudar a desarrollar y mejorar la preparación ante emergencias en <State>. La información que nos dio hoy y la que nos provea en el futuro se mantendrá confidencial. Si usted acepta, mantendremos su nombre o iniciales y número de teléfono en un archivo, separado de las respuestas recopiladas hoy. Aunque usted esté de acuerdo ahora, puede negarse a participar en el futuro. ¿Estaría bien si te volviéramos a llamar en otro momento para hacer preguntas adicionales?

**//ask if Z1=1//**

**Z1a:** Can I please have either your first name or initials, so we will know who to ask for when we call back?

¿Me puede proporcionar su nombre o iniciales de usted, para que sepamos por quién preguntar cuando volvamos a llamar?

- 01 Gave Response
- 77 Don't Know
- 99 Refused

**//ask if Z1a=1//**

\_\_\_\_\_ Enter first name or initials.

## Closing statement

**INTERVIEWER NOTE: IF THERE ARE NO MODULES/STATE ADDED QUESTIONS OR THIS IS AN OUT-OF-STATE CELL PHONE INTERVIEW**

**CLOSE:** That was my last question. Everyone's answers will be combined to help us provide information about the health practices of people in [IF CSTATE NE 2 INSERT [state] // IF CSTATE = 2 INSERT "your state". Thank you very much for your time and cooperation.

Or

Continue to module(s) and/or state-added questions