

2009 Community Health Survey Questionnaire
Last updated (04/16/09)

Hello, My name is _____, and I am calling on behalf of the New York City Department of Health from Abt-SRBI. We're conducting an important study to improve the health of New Yorkers. Your household has been randomly chosen to represent your neighborhood. All answers you give will be confidential.

[IF NEEDED] You don't have to give me any personal identifying information such as your full name or address.

REASONS TO CALL-BACK

- 01 No answer
- 02 Busy
- 03 Call-back
- 04 Answering machine
- 05 Spanish interviewer needed
- 06 Other language needed
- 07 END OF SHIFT/NUMBER NEVER TRIED

REASONS NOT TO CALL-BACK

- 11 Refused
- 12 Non-working/disconnected number
- 13 Non-residential number
- 14 Number-change
- 15 Fax machine
- 16 Beeper/Cell phone
- 17 Other phone problem
- 18 Physically/mentally unable

Q ZIP To make sure that your neighborhood is correctly identified, could I please have your five-digit zip code?

RECORD 77777 FOR DK
RECORD 99999 FOR Ref.

IF Q ZIP DOES NOT FALL IN PREDEFINED CATI ZIP CODE LIST

Q Confirm. Just to confirm, is your zipcode_____?

- 1 YES
- 2 NO
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

IF RESPONDENT CONFIRMS ORIGINAL ZIPCODE, ASK Q BORO. IF RESPONDENT SAYS THE ZIP CODE FIRST GIVEN IS NOT CORRECT OBTAIN CORRECTED ZIP CODE. IF THIS ZIPCODE STILL DOES NOT FALL IN PREDEFINED CATI ZIP CODE LIST, OR IF Q ZIP = 77777 OR Q ZIP = 99999, ASK Q BORO

Q BORO In which of the five New York City boroughs are you residing?

READ IF NEEDED:

- 1 The Bronx
- 2 Brooklyn
- 3 Manhattan
- 4 Queens, or
- 5 Staten Island ?
- 6 DO NOT LIVE IN NYC [TERMINATE]
- 7 DON'T KNOW/NOT SURE [TERMINATE]
- 9 REFUSED [TERMINATE]

IF QUOTA OUT, GO TO CHILD SUBSCRIPT QS.1. WRITE DATA FOR QZIP (QZIP), QCONFIRM (QCONFIRM), AND QBORO (QBORO) FROM MAIN SUB_SCRIPT. WRITE DATA FROM SAMPLE FOR UHF, REPLICATE, QKEY - THE ORIGINAL ONE, MAILED, RESMC, CSS.

QLEVEL =1

Q HH Now I need to randomly select one adult who lives in your household to be interviewed. How many members of your household, INCLUDING YOURSELF, are 18 years of age or older?

READ IF NEEDED: Household members are those who spend a majority of their time living in the household.

RECORD 88 FOR NOT A PRIVATE RESIDENCE
RECORD 99 FOR REFUSED/DK

_____ Number of adults [RANGE 1-20]

IF NO ADULTS (HH=0) OR NOT A PRIVATE RESIDENCE (HH=88) OR REFUSED/DK (HH=99):
Those are all the questions I have for you. Thank you for your time.
TERMINATE INTERVIEW.

IF ONLY 1 ADULT (HH=1) ASK HHa, ELSE IF MORE THAN ONE ADULT (HH>1) ASK HHb.

HHa Are you the adult?

- 1 Yes
- 2 No
- 9 Refused

IF HHa=1, THEN READ S6A, ELSE SKIP TO S6B.

s6a Then you are the person I need to speak with. Let me start by saying your contact information such as your phone number will not be shared with the Health Department or anyone else. Participation is voluntary: you can stop the interview at any time or decide not to answer any question. The interview takes about 25 minutes. If you have any questions I can't answer, I'll give you a telephone number for more information. [GO TO QWHICH]

IF HHa=2 (NOT THE ADULT)

s6b May I speak with the adult?

- 1 Yes - available (SKIP TO WHICH)
- 2 No - not available - [GO TO s6b1]
- 9 Refused

IF MORE THAN ONE ADULT (HH>1) ASK HHb.

HHb. NUMADULT How many of these adults are men and how many are women?

INTERVIEWER: RECORD 99 FOR REFUSED

___ MEN
___ WOMEN

[If either NUMMEN or NUMWOMEN = 99 then Thank and terminate]

[CATI note: See Appendix A for Selection algorithm]

Q PICK Could I please speak with _____? [RANDOMLY PICKED]

- 1 Yes - available (SKIP TO WHICH)
- 2 No - not available - [GO TO S6b1]
- 9 Refused

IF PICKED PERSON IS NOT AVAILABLE:

S6b1. (If s6b = 2) May I please have the adult's name so we can ask for them when we call back?/(If q pick = 2) May I please have the (PICKED PERSON'S) name so that we can speak with [them] when we call back?

- 1 Gave response - (ENTER RESPONSE)
- 7 (VOL) Don't know - (Thanks and terminate)
- 9 (VOL) Refused - (Thanks and terminate)

Q WHICH INTERVIEWER: SELECT LANGUAGE

- 1 English
- 2 Spanish
- 3 Russian Paper
- 4 Chinese Paper

IF HHa = 1 GO TO Q1.1, ELSE GO TO Q HELLO

Q HELLO

Hello, My name is _____, and I am calling on behalf of the New York City Department of Health from Abt-SRBI. We're conducting an important study to improve the health of New Yorkers. Your household has been randomly chosen to represent your neighborhood. All answers you give will be confidential.

Your contact information such as your phone number will not be shared with the Health Department or anyone else. Participation is voluntary: you can stop the interview at any time or decide not to answer any question. The interview takes about 25 minutes. If you have any questions I can't answer, I'll give you a telephone number for more information.

ENTER CHS MAIN SUBSCRIPT HERE. WRITE DATA FROM SAMPLE FOR UHF, REPLICATE, QKEY - THE ORIGINAL ONE, MAILED, RESMC, CSS. WRITE SCREENER VARIABLES TO CHS SUBSCRIPT.

HEALTH STATUS

QLEVEL = 2

ASK ALL

Q1.1 - Would you say that in general your health is excellent, very good, good, fair or poor?

- 1 EXCELLENT
- 2 VERY GOOD
- 3 GOOD
- 4 FAIR
- 5 POOR
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ACCESS

ASK ALL

Q2.1 - Do you have any kind of health insurance coverage, including private health insurance, prepaid plans such as H-M-Os, or government plans such as Medicare or Medicaid?

READ IF NEEDED: Medicare is a health insurance program for people 65 and older or persons with disabilities.

READ IF NEEDED: Medicaid is a health insurance program for persons whose income and resources cannot cover the costs of health care.

- 1 YES
- 2 NO
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK Q2.2 IF Q2.1 = 1, ELSE SKIP TO Q2.2c

Q2.2 - What type of health insurance do you use to pay for your doctor or hospital bills? Is it insurance through:

BEGIN READING ANSWER CHOICES

- 01 Your employer

IF R CLEARLY PICKS 1, STOP READING ANSWER CHOICES AND ENTER 1. OTHERWISE, READ ENTIRE LIST.

- 02 Someone else's employer
- 03 A plan that you or someone else buys on your own
- 04 Medicare
- 05 Family Health Plus or Medicaid
- 06 The military, CHAMPUS, TriCare, or the VA
- 07 COBRA, or
- 08 Some other source ?
- 88 NONE
- 77 DON'T KNOW/NOT SURE
- 99 REFUSED

ASK Q2.2b IF Q2.1 = 1

Q2.2b - Were you without health insurance at any point during the last 12 months?

- 1 YES
- 2 NO
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK Q2.2c IF Q2.1 NE 1

Q2.2c - How long have you been without any kind of health insurance coverage?

INTERVIEWER NOTE: ROUND TO CLOSEST WEEK, MONTH OR YEAR IF NECESSARY (1 Year = 12 Months)

- 1__ WEEKS
- 2__ MONTHS
- 3__ YEARS
- 888 NEVER HAD HEALTH INSURANCE COVERAGE
- 777 DON'T KNOW/NOT SURE
- 999 REFUSED

ASK ALL

Q2.3 - Do you have one person or more than one person you think of as your personal doctor or health care provider?

INTERVIEWER PROBE IF "YES": Do you have only one or more than one?

- 1 YES, ONLY ONE
- 2 YES, MORE THAN ONE
- 3 NO
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK ALL

Q2.4 - Was there a time in the past 12 months when you needed medical care but did NOT get it? Medical care includes doctor's visits, tests, procedures, prescription medication and hospitalizations.

- 1 YES
- 2 NO
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

PREVENTIVE CARE

ASK ALL

Q2.5 In the last 12 months has a doctor, nurse or other health professional asked or talked to you about your weight?

- 1 YES
- 2 NO
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK ALL

Q2.6 In the last 12 months has a doctor, nurse or other health professional asked or talked to you about alcohol use?

- 1 YES
- 2 NO
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

CHRONIC DISEASE

ASK ALL

Q3.1 - Have you ever been told by a doctor, nurse or other health professional that you have hypertension, also called high blood pressure?

- 1 YES
- 2 NO
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK Q3.2 IF Q3.1 = 1

Q3.2 - Have you ever been told by a doctor, nurse or other health professional that you need to take medicine for your high blood pressure?

- 1 YES
- 2 NO
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK Q3.3 if Q3.2 = 1

Q3.3 - Are you currently taking medication for your high blood pressure?

- 1 YES
- 2 NO
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK Q3.4 if Q3.1 = 1

Q3.4 During the past 30 days, have you checked your blood pressure at home?

- 1 YES
- 2 NO
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK ALL

Q3.5 - Have you ever been told by a doctor, nurse or other health professional that you have diabetes?

INTERVIEWER: IF "YES", AND FEMALE ASK: "Was this only when you were pregnant?"

- 1 YES
- 2 YES, FEMALE TOLD ONLY DURING PREGNANCY
- 3 NO
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK ALL

Q3.6 - Have you ever been told by a doctor, nurse or other health professional that you had asthma?

- 1 YES
- 2 NO
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK Q3.7 IF Q3.6 = 1

Q3.7 - In the last 12 months, have you had an episode of asthma or an asthma attack?

- 1 YES
- 2 NO
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK Q3.8 IF Q3.6 = 1

Q3.8 - During the past 12 months, how many times did you visit an emergency room or urgent care center because of asthma?

_____ NUMBER OF VISITS [76 OR MORE = "76"]

- 77 DON'T KNOW/NOT SURE
- 99 REFUSED

MENTAL HEALTH

READ: The next few questions are about your mental health

ASK ALL

Q4.1 - During the past 30 days, how often did you feel

So sad that nothing could cheer you up?

All of the time, most of the time, some of the time,
a little of the time, OR none of the time?

IF ASKED FOR HELP WITH MENTAL HEALTH PROBLEM: THE NUMBER FOR PROJECT LIBERTY IS
(800) LIFE NET OR **800-543-3638**

- 1 ALL OF THE TIME
- 2 MOST OF THE TIME
- 3 SOME OF THE TIME
- 4 A LITTLE OF THE TIME
- 5 NONE OF THE TIME
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK ALL

Q4.2 - During the past 30 days, how often did you feel

Nervous?

All of the time, most of the time, some of the time,
a little of the time, OR none of the time?

IF ASKED FOR HELP WITH MENTAL HEALTH PROBLEM: THE NUMBER FOR PROJECT LIBERTY IS
(800) LIFE NET OR **800-543-3638**

- 1 ALL OF THE TIME
- 2 MOST OF THE TIME
- 3 SOME OF THE TIME
- 4 A LITTLE OF THE TIME
- 5 NONE OF THE TIME
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK ALL

Q4.3 - (READ IF NEEDED: During the past 30 days), how often did you feel

Restless or fidgety?

(READ IF NEEDED: All of the time, most of the time, some of the time,
a little of the time, OR none of the time?)

IF ASKED FOR HELP WITH MENTAL HEALTH PROBLEM: THE NUMBER FOR PROJECT LIBERTY IS
(800) LIFE NET OR **800-543-3638**

- 1 ALL OF THE TIME
- 2 MOST OF THE TIME
- 3 SOME OF THE TIME
- 4 A LITTLE OF THE TIME
- 5 NONE OF THE TIME
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK ALL

Q4.4 - (READ IF NEEDED: During the past 30 days), how often did you feel

Hopeless?

(READ IF NEEDED: All of the time, most of the time, some of the time,
a little of the time, OR none of the time?)

IF ASKED FOR HELP WITH MENTAL HEALTH PROBLEM: THE NUMBER FOR PROJECT LIBERTY IS
(800) LIFE NET OR **800-543-3638**

- 1 ALL OF THE TIME
- 2 MOST OF THE TIME
- 3 SOME OF THE TIME
- 4 A LITTLE OF THE TIME
- 5 NONE OF THE TIME
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK ALL

Q4.5 - (READ IF NEEDED: During the past 30 days), how often did you feel

That everything was an effort?

(READ IF NEEDED: All of the time, most of the time, some of the time,
a little of the time, OR none of the time?)

IF ASKED FOR HELP WITH MENTAL HEALTH PROBLEM: THE NUMBER FOR PROJECT LIBERTY IS
(800) LIFE NET OR **800-543-3638**

- 1 ALL OF THE TIME
- 2 MOST OF THE TIME
- 3 SOME OF THE TIME
- 4 A LITTLE OF THE TIME
- 5 NONE OF THE TIME
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK ALL

Q4.6 - (READ IF NEEDED: During the past 30 days), how often did you feel

Worthless?

(READ IF NEEDED: All of the time, most of the time, some of the time,
a little of the time, OR none of the time?)

IF ASKED FOR HELP WITH MENTAL HEALTH PROBLEM: THE NUMBER FOR PROJECT LIBERTY IS
(800) LIFE NET OR **800-543-3638**

- 1 ALL OF THE TIME
- 2 MOST OF THE TIME
- 3 SOME OF THE TIME
- 4 A LITTLE OF THE TIME
- 5 NONE OF THE TIME
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

GENERATE K6 score*
FOR Q 4.1 - Q 4.6, CODE "7 Don't know" and "9 Refused" as = 5.

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k6 score =30 - (4.1 + 4.2 + 4.3 + 4.4 + 4.5 + 4.6)
if k6 >12 then SMI=1;
else if k6<=12, THEN SMI =2;
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ASK IF SMI=1

Q4.7 We just talked about a number of feelings you had during the PAST 30 DAYS. Altogether, how MUCH did these feelings interfere with your life or activities: a lot, some, a little, or not at all?

- 1 A LOT
- 2 SOME
- 3 A LITTLE
- 4 NOT AT ALL
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK ALL

Q4.8 - DURING THE PAST 30 DAYS, have you received any counseling or taken prescription medication for a mental health problem?

- 1 YES
- 2 NO
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK Q4.9 IF Q4.8 ≠ 1

Q4.9 - IN THE LAST 12 MONTHS, have you received any counseling or taken prescription medication for a mental health problem?

- 1 YES
- 2 NO
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK ALL

Q4.10 - Have you ever been told by a doctor, nurse or other health professional that you have depression?

- 1 YES
- 2 NO
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK Q4.11 IF Q4.10 = 1

Q4.11 - Were you first told by a doctor, nurse or other health professional that you have depression in the last 12 months?

- 1 YES
- 2 NO
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

PHYSICAL ACTIVITY AND NUTRITION

READ SCREEN: And now some questions about food and drinks.

ASK ALL

Q5.1 - Thinking about nutrition...how many total servings of fruit and/or vegetables did you eat yesterday? A serving would equal one medium apple, a handful of broccoli, or a cup of carrots.

INTERVIEWER: IF RESPONDENT TELLS YOU WHAT FRUITS/VEGETABLES HE/SHE ATE, ADD UP THE SERVINGS AFTER REPEATING THE QUESTION ONCE.

PROBE: You ate (REPEAT ALL THE FRUITS AND VEGETABLES RESPONDENT SAID). That adds up to X servings. Would you say you ate X servings of fruits and vegetables yesterday?

_____ NUMBER OF SERVINGS [CATI RANGE 0 - 50]

77 DON'T KNOW/NOT SURE

99 REFUSED

ASK ALL

Q5.2 How often do you drink sugar sweetened soda? Do NOT include diet soda or seltzer.

READ IF NEEDED: How many sodas do you drink per day, per week or per month?

READ IF NEEDED: One drink of soda would equal a 12 ounce can, bottle or glass.

1__ PER DAY

2__ PER WEEK

3__ PER MONTH

888 NONE / NEVER / RARELY

777 DON'T KNOW/NOT SURE

999 REFUSED

CATI: ONLY ONE FIELD CAN BE ENTERED

ASK ALL

Q5.3 How often do you drink other sweetened drinks like sweetened iced tea, sports drinks, fruit punch or other fruit-flavored drinks? Do NOT include diet soda, sugar free drinks, or 100% juice.

READ IF NEEDED: How many sweetened drinks do you drink per day, per week or per month?

READ IF NEEDED: One drink of sweetened drinks would equal a 12 ounce can, bottle or glass.

1__ PER DAY

2__ PER WEEK

3__ PER MONTH

888 NONE / NEVER / RARELY

777 DON'T KNOW/NOT SURE

999 REFUSED

CATI NOTE: ONLY ALLOW ONE FIELD TO BE ENTERED.

ASK ALL

Q5.4 - How many times per week or per month do you eat meals purchased at a deli, street vendor or restaurant? Please include meals eaten at a restaurant, carried out or delivered.

- 1__ PER WEEK
- 2__ PER MONTH

888 NONE / NEVER / RARELY
777 DON'T KNOW/NOT SURE
999 REFUSED

ASK Q5.5 IF Q5.4 NE 777, 888, or 999

Q5.5 - (IF Q5.4 > 0 READ: Of those meals) How often do you eat something from a fast-food restaurant or chain such as: McDonalds, KFC, Taco Bell, Golden Krust or similar places?

READ IF NEEDED:How many times per week or per month?

- 1__ PER WEEK
- 2__ PER MONTH

888 NONE / NEVER / RARELY
777 DON'T KNOW/NOT SURE
999 REFUSED

ASK ALL

Q5.6 - Thinking about the last time you ate in a restaurant or took out food, were you aware of how the restaurant performed on its most recent Health Department inspection?

READ IF NEEDED: The Health Department inspects all food service businesses in New York City, including restaurants and take-out places, and gives them a score.

- 1 YES
- 2 NO
- 3 [VOL] DON'T EAT IN OR TAKE FOOD OUT FROM RESTAURANTS

7 DON'T KNOW/NOT SURE
9 REFUSED

READ SCREEN: The next few questions are about your water consumption.

ASK ALL

Q5.7 In the past 30 days, what types of water did you drink? Unfiltered tap water, filtered tap water, bottled plain water, seltzer water, or do you rarely or never drink water?

INTERVIEWER NOTE: WATER FROM A WATER COOLER (LIKE DEER PARK OR POLAND SPRINGS) COUNTS AS "BOTTLED WATER"

INTERVIEWER NOTE: CARBONATED WATER, SPARKLING WATER, CLUB SODA OR MINERAL WATER COUNT AS "SELTZER"

MULTIPLE RESPONSE

- 1 UNFILTERED TAP WATER
- 2 FILTERED TAP WATER
- 3 BOTTLED PLAIN WATER
- 4 SELTZER WATER

- 8 NONE / NEVER / RARELY DRINK WATER
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK Q5.8 IF Q5.7 ≠ 5, 7 OR 9 AND MORE THAN ONE ANSWER 1-4 IS SELECTED ELSE, SKIP TO Q5.9.

Q5.8 Of those types of water, which did you drink most often?

INTERVIEWER NOTE: WATER FROM A WATER COOLER (LIKE DEER PARK OR POLAND SPRINGS) COUNTS AS "BOTTLED WATER"

CATI NOTE: DISPLAY ONLY THOSE OPTIONS SELECTED IN Q5.7

READ IF NEEDED

- 1 unfiltered tap water
- 2 filtered tap water
- 3 bottled plain water
- 4 seltzer water

- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK ALL

Q5.9 In the past 30 days, how often did you drink water from a water fountain? Would you say at least once a day, at least once a week, at least once a month or never?

INTERVIEWER NOTE: INCLUDES ALL WATER FOUNTAINS INSIDE OR OUTSIDE (LIKE IN A PARK), BUT NOT WATER COOLERS

- 1 AT LEAST ONCE A DAY
- 2 AT LEAST ONCE A WEEK
- 3 AT LEAST ONCE A MONTH

- 8 NONE / NEVER / RARELY
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK ALL

Q5.10 In the past 30 days, how often did you use a water fountain to fill a water bottle you carry with you?

INTERVIEWER NOTE: INCLUDES ALL WATER FOUNTAINS INSIDE OR OUTSIDE (LIKE IN A PARK), BUT NOT WATER COOLERS

READ IF NEEDED:

- 1 At least once a day
- 2 At least once a week, or
- 3 At least once a month ?

- 8 NONE / NEVER / RARELY
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

SCREEN: Now I am going to ask you about bicycle use and physical activity.

QLEVEL = 3

ASK ALL

Q5.11 In the past 12 months, how often have you ridden a bicycle in one of the five boroughs of New York City? Would you say several times a month, at least once a month, a few times a year, or never?

READ IF NEEDED: This does NOT include a stationary bike.

- 1 SEVERAL TIMES A MONTH
- 2 AT LEAST ONCE A MONTH
- 3 A FEW TIMES A YEAR
- 4 NEVER
- 5 [VOL] PHYSICALLY UNABLE TO RIDE A BIKE

- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK ALL

Q5.12 During the past 30 days, have you walked or bicycled more than 10 blocks as part of getting to and from work, school, public transportation or to do errands?

- 1 YES
- 2 NO
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK ALL

Q5.13 - During the past 30 days, other than your regular job, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise?

- 1 YES
- 2 NO
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

IMMUNIZATIONS

ASK ALL

Q6.1 - During the past 12 months, have you had a flu shot in your arm or a flu vaccine that was sprayed in your nose?

- 1 YES
- 2 NO
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK Q6.2 IF Q6.1 = 1

Q6.2 - Did you have a flu shot in your arm or a flu vaccine that was sprayed in your nose between the dates of September 1, 2008, and March 31, 2009?

- 1 YES
- 2 NO
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK ALL

Q6.3 - Do you work in a health care setting where you have direct contact with patients as part of your routine work?

- 1 YES
- 2 NO
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

DEMOGRAPHICS

SCREEN: Now I'd like to ask you some questions about yourself and your household.

ASK ALL

Q7.1 - What is your age?

- ___ AGE IN YEARS [RANGE 18-98]
- 07 DON'T KNOW/NOT SURE
- 09 REFUSED

ASK Q7.1a IF Q7.1 = 07 OR 09, ELSE SKIP TO Q7.2

Q7.1a - We are only asking this information to make sure that we have talked to enough people in each age group. Can you just tell me if you are...?

READ ANSWER CHOICES:

- 1 65 or older
- 2 45-64
- 3 25-44, or
- 4 18-24
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK ALL

Q7.2 - Because it is sometimes difficult to determine over the phone, I am asked to confirm with everyone . . . Are you male or female?

- 1 MALE
- 2 FEMALE
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK ALL

Q7.3 - Are you Hispanic or Latino?

- 1 YES
- 2 NO
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK Q7.3a IF Q7.3 = 1, ELSE SKIP TO Q7.4

Q7.3a - Please tell me which group best represents your Hispanic or Latino origin or ancestry:

READ ANSWER CHOICES, ACCEPT FIRST RESPONSE [CATI: RANDMONIZE: 01-04]

- 01 Puerto Rican
- 02 Cuban/Cuban-American
- 03 Dominican/Dominican-American
- 04 Mexican/Mexican-American
- 05 Central or South American
- 06 Other Latin American, or
- 07 Other Hispanic/Latino
- 09 [VOL] SPANISH
- 77 DON'T KNOW/NOT SURE
- 99 REFUSED

ASK ALL

Q7.4 - (READ IF Q7.3=1: Some people, aside from being Hispanic, also consider themselves to be a member of a racial group.)
Which one or more of the following would you say is your race?

READ ANSWER CHOICES, MULTIPLE RESPONSE:

- 01 White
- 02 Black or African American
- 03 Asian
- 04 Native Hawaiian or Other Pacific Islander
- 05 American Indian, Alaska Native, or
- 08 Something else (SPECIFY) _____
- 77 DON'T KNOW/NOT SURE
- 99 REFUSED

QLEVEL = 4

ASK Q7.4a IF MORE THAN ONE ANSWER TO Q7.4, ELSE SKIP TO Q7.5

Q7.4a - Which one of these groups would you say best represents your race?

READ MENTIONED RACES:

CATI Note: Fill selected races from Q7.4.

- 1 White
- 2 Black or African American
- 3 Asian
- 4 Native Hawaiian or Other Pacific Islander
- 5 American Indian, Alaska Native
- 8 Other named in Q7.4
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK ALL

Q7.5 - Where were you born? Please tell me the state or country.

- 1 USA [List of states (screen 1), last option not in USA] (**SKIP TO Q7.5a**)
- 2 Outside USA [List of countries, includes Puerto Rico and other US territories] (**SKIP TO Q7.5b**)

ASK Q7.5a IF Q7.5 = 1.

Q7.5a

- | | |
|-------------------------|-------------------|
| 01 ALABAMA | 24 MARYLAND |
| 02 ALASKA | 25 MASSACHUSETTS |
| 04 ARIZONA | 26 MICHIGAN |
| 05 ARKANSAS | 27 MINNESOTA |
| 06 CALIFORNIA | 28 MISSISSIPPI |
| 08 COLORADO | 29 MISSOURI |
| 09 CONNECTICUT | 30 MONTANA |
| 10 DELAWARE | 31 NEBRASKA |
| 11 DISTRICT OF COLUMBIA | 32 NEVADA |
| 12 FLORIDA | 33 NEW HAMPSHIRE |
| 13 GEORGIA | 34 NEW JERSEY |
| 15 HAWAII | 35 NEW MEXICO |
| 16 IDAHO | 36 NEW YORK |
| 17 ILLINOIS | 37 NORTH CAROLINA |
| 18 INDIANA | 38 NORTH DAKOTA |
| 19 IOWA | 39 OHIO |
| 20 KANSAS | 40 OKLAHOMA |
| 21 KENTUCKY | 41 OREGON |
| 22 LOUISIANA | 42 PENNSYLVANIA |
| 23 MAINE | 44 RHODE ISLAND |

- 45 SOUTH CAROLINA
- 46 SOUTH DAKOTA
- 47 TENNESSEE
- 48 TEXAS
- 49 UTAH
- 50 VERMONT
- 51 VIRGINIA

- 54 WEST VIRGINIA
- 55 WISCONSIN
- 56 WYOMING
- 77 DON'T KNOW
- 88 OTHER (SPECIFY) _____
- 99 REFUSED

ASK Q7.5b IF Q7.5 = 2.

Q7.5b

- | | |
|------------------------|------------------------------|
| 01. ARGENTINA | 33. JAMAICA |
| 02. AUSTRALIA | 34. JAPAN |
| 03. BANGLADESH | 35. KOREA |
| 04. BARBADOS | 36. MEXICO |
| 05. BELARUS | 37. NICARAGUA |
| 06. BOLIVIA | 38. NIGERIA |
| 07. BRAZIL | 39. PAKISTAN |
| 08. CANADA | 40. PANAMA |
| 09. CARIBBEAN | 41. PERU |
| 10. CHILE | 42. PHILIPPINES |
| 11. CHINA | 43. POLAND |
| 12. COLOMBIA | 44. PUERTO RICO |
| 13. COSTA RICA | 45. ROMANIA |
| 14. CUBA | 46. RUSSIA |
| 15. DOMINICAN REPUBLIC | 47. SIERRA LEONE |
| 15. ECUADOR | 48. SOUTH AMERICAN |
| 17. EGYPT | 49. SPAIN |
| 18. EL SALVADOR | 50. TAIWAN |
| 19. FRANCE | 51. TRINIDAD AND TOBAGO |
| 20. GERMANY | 52. TURKEY |
| 21. GHANA | 53. UKRAINE |
| 22. GREECE | 54. UNITED KINGDOM (INCLUDES |
| 23. GUATEMALA | ENGLAND, N. IRELAND, |
| 24. GUYANA | SCOTLAND, WALES) |
| 25. HAITI | 55. VENEZUELA |
| 26. HONDURAS | 56. VIETNAM |
| 27. HONG KONG | 57. WEST INDIAN |
| 28. HUNGARY | 58. YUGOSLAVIA |
| 29. INDIA | 66. OTHER (SPECIFY) _____ |
| 30. IRELAND | 77. DON'T KNOW/NOT SURE |
| 31. ISRAEL | 99. REFUSE |
| 32. ITALY | |

ASK Q7.6 IF Q7.5 = 2, ELSE SKIP TO Q7.7

Q7.6 - How long have you lived in this country?

READ IF NEEDED:

- 1 Less than 5 years
- 2 5 to 9 years, or
- 3 10 or more years ?
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK ALL

Q7.7 - What language do you speak most often at home?

- 1 ENGLISH
- 2 SPANISH
- 3 RUSSIAN
- 4 CHINESE (INCLUDES MANDARIN & CANTONESE)
- 5 INDIAN (INCLUDES HINDI & TAMIL)
- 6 OTHER
- 7 DON'T KNOW/NOT SURE

9 REFUSED

ASK ALL

Q7.8 - Are you. . .

READ ALL RESPONSES:

- 1 Married
- 2 Divorced
- 3 Widowed
- 4 Separated
- 5 Never married, or
- 6 A member of an unmarried couple living together
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK ALL

Q7.9 - Now I'll read a list of terms people sometimes use to describe themselves -- heterosexual or straight; homosexual, gay or lesbian; and bisexual. As I read the list again, please stop me when I get to the term that best describes how you think of yourself.

READ RESPONSES UNTIL RESPONDENT MAKES A SELECTION:

- 1 Heterosexual or straight
- 2 Homosexual, gay or lesbian
- 3 Bisexual
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

IF RESPONDENT INDICATES HIS/HER ANSWER AFTER READING THE WHOLE LIST THE FIRST TIME, YOU DON'T HAVE TO READ THE LIST AGAIN.

ASK ALL

Q7.10 - What is the highest grade or year of school you completed?

READ IF NEEDED:

- 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), or
- 6 College 4 years or more (COLLEGE GRADUATE) ?
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK ALL

Q7.11 - How many children younger than 18 live in the household?

READ IF NEEDED: Include all children who live in the household the majority of a typical week.

- ___ NUMBER OF CHILDREN [RANGE 0-25]
- 77 DON'T KNOW/NOT SURE
 - 99 REFUSED

ASK Q7.12 IF Q7.11 GREATER THAN 0 BUT NOT 77 OR 99, ELSE SKIP TO Q7.15

Q7.12 - ([IF q7.11 = 1] Is this child / [IF q7.11 GT 1] How many of these children are) under the age of six? Please count any child, no matter how young.

READ IF NEEDED: Include all children who live in the household the majority of a typical week.

___ NUMBER OF CHILDREN [RANGE 0-25]
77 DON'T KNOW
99 REFUSED

ASK Q7.13 IF Q7.12 LESS THAN Q7.11

Q7.13 - ([IF q7.11 = 1] Is this child / [IF q7.11 GT 1 AND (q7.11 - q7.12 = 1)] And is the other child / [IF q7.11 - q7.12 GT 1] How many of these other children are) between the ages of six and twelve between the ages of six and twelve?

READ IF NEEDED: Include all children who live in the household the majority of a typical week.

___ NUMBER OF CHILDREN [RANGE 0-25]
77 DON'T KNOW
99 REFUSED

READ IF NEEDED: Include all children who live in the household the majority of a typical week.

ASK Q7.14 IF [Q7.12 + Q7.13] LESS THAN Q7.11

Q7.14 - ([IF q7.11 = 1] Is this child / [IF q7.11 GT 1 AND (q7.11 - (q7.12 + q7.13) = 1)] And is the other child / [IF q7.11 - (q7.12 + q7.13) GT 1] How many of these other children are) between the ages of thirteen and seventeen years of age?

___ NUMBER OF CHILDREN [RANGE 0-25]
77 DON'T KNOW/NOT SURE
99 REFUSED

CATI CHECK NEEDED. THE SUM OF Q7.12, Q7.13, Q7.14 SHOULD EQUAL Q7.11

ASK ALL

Q7.15 - Are you currently. . .

01 Employed for wages or salary

IF R DOES NOT PICK #1, READ ALL OF THE REMAINING ANSWER CHOICES

02 Self-employed
03 A Homemaker
04 A Student
05 Retired
06 Unable to work
07 Unemployed for 1 year or more, or
08 Unemployed for less than 1 year ?
77 DON'T KNOW/NOT SURE
99 REFUSED

CATI Note: Only one choice can be entered. Entries must be zero filled.

If Q7.11 = 77 or 99, skip to Q7.17

Create new field NHOUSE = QHH (Number of adults) + Q7.11 (Number of Children)
We will use NHOUSE to create a field (PVTYLVL) to populate the fill for Q7.16
 $PVTYLVL = 7090 + (NHOUSE * 3740)$

READ SCREEN: The next question is about your combined household income. By household income we mean the combined income from everyone living in the household including even roommates or those on disability income.

ASK ALL

Q7.16 - Is your household's annual income from all sources:

02 Less than (100-199%) IF "NO," ASK 05; IF "YES," ASK 01
01 Less than (<100%) IF "NO," CODE 02 (100-199%); IF "YES," CODE 01 (< 100%)
05 Less than (400-499%) IF "NO," ASK 06 (500-599%); IF "YES," ASK 04 (300-399%)
06 Less than (500-599%) IF "NO," CODE 07 (>600%); IF "YES," CODE 06 (500-599%)
04 Less than (300-399%) IF "NO," CODE 05; IF "YES," ASK 03 (200-299%)
07 (>600%)
03 Less than (200-299%) IF "NO," CODE 04; IF "YES," CODE 03
77 DON'T KNOW/NOT SURE
99 REFUSED

ASK Q7.16a IF Q7.16 = 77 OR 99, ELSE SKIP TO Q7.17

Q7.16a - Can you just tell me if your annual household income is less than \$ PVTYLVL?

1 YES
2 NO
7 DON'T KNOW/NOT SURE
9 REFUSED

IF Q2.1 = 2 AND Q7.16 = 01 OR Q7.16a = 1 THEN READ:

You indicated earlier that you do not currently have any health coverage. I just want to let you know that you may be eligible for free health insurance. You can call 311 for more information.

ASK ALL

Q7.17 - About how tall are you without shoes?

READ IF NEEDED: You can answer in either feet and inches OR in centimeters.

**NOTE: If respondent answers in metrics put "9" in first column
ROUND FRACTIONS DOWN**

_ _ / _ _ Height
(feet/inches or meters/centimeters)
[RANGES FEET=3-9/INCHES= 0-11 || METERS=0-3/CENTIMETERS=0-275]
7777 Don't Know
9999 Refused

YOU MUST ENTER EITHER BOTH FEET AND INCHES OR CENTIMETERS - NOT BOTH. IF 0
(ZERO) INCHES, PLEASE ENTER ZERO. DO NOT LEAVE BLANK.

**CATI note: Require both feet and inches or centimeters. Do not allow entry of
both. If 0 (zero) inches, must enter zero. Cannot have missing inches and not
missing feet, or missing feet and not missing inches.**

ASK ALL

Q7.18 - About how much do you weigh without shoes?

READ IF NEEDED: You can answer in either pounds OR kilograms.

**NOTE: If respondent answers in metrics put "9" in first column
ROUND FRACTIONS UP**

_ _ _ _ Weight
(pounds or kilograms)
[RANGES POUNDS=50-600 || KILOGRAMS= 20-275]
7777 Don't Know
9999 Refused

YOU MUST ENTER EITHER POUNDS OR KILOGRAMS - NOT BOTH.

BMI FOLLOW-UPS

**IF Q7.18 (WEIGHT) = 9999 OR 7777 AND Q7.17 (HEIGHT) ≠ 9999 OR 7777 (IS NOT
MISSING), THEN PUT HEIGHT INTO BMI CALCULATOR AND ASK Q7.19a, Q7.19b, Q7.19c
(OR ASK Q7.19d, Q7.19e, Q7.19f FOR METRIC).**

**IF Q7.17 (HEIGHT) = 9999 OR 7777 AND Q7.18 (WEIGHT) ≠ 9999 OR 7777 (IS NOT
MISSING), THEN PUT WEIGHT INTO BMI CALCULATOR AND ASK Q7.20a, Q7.20b & Q7.20c
(OR ASK Q7.20d, Q7.20e, Q7.20f FOR METRIC).**

CRITICAL WEIGHT FOR ENGLISH OBESE:
= .0427 * (Q7.17 height IN) * (Q7.17 height IN)

CRITICAL WEIGHT FOR ENGLISH OVERWEIGHT:
= .0356*(Q7.17 height IN)*(Q7.17 height IN)

CRITICAL WEIGHT FOR ENGLISH UNDERWEIGHT:
= .0263*(Q7.17 height IN)*(Q7.17 height IN)

**ASK Q7.19a IF Q7.18 = 9999 OR 7777 AND Q7.17 ≠ 9999 OR 7777, ELSE SKIP TO Q8.1
Q7.19a - Do you weigh less than [critical weight for obese]?**

- 1 YES, WEIGH LESS
- 2 NO, DON'T WEIGH LESS
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK Q7.19b IF Q7.19a = 1, ELSE SKIP TO Q8.1

Q7.19b - Do you weigh less than [critical weight for **overweight**]?

- 1 YES, WEIGH LESS
- 2 NO, DON'T WEIGH LESS
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK Q7.19c IF Q7.19b = 1, ELSE SKIP TO Q8.1

Q7.19c - Do you weigh less than [critical weight for **underweight**]?

- 1 YES, WEIGH LESS
- 2 NO, DON'T WEIGH LESS
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

CRITICAL WEIGHT FOR METRIC OBESE
= .003 * (Q7.17 height CM)*(Q7.17 height CM)

CRITICAL WEIGHT FOR METRIC OVERWEIGHT
= .0025* (Q7.17 height CM)*(Q7.17 height CM)

CRITICAL WEIGHT FOR METRIC UNDERWEIGHT
= .00185* (Q7.17 height CM)*(Q7.17 height CM)

ASK Q7.19d IF Q7.18 = 9999 OR 7777 AND Q7.17 ≠ 9999 OR 7777, ELSE SKIP TO Q8.1

Q7.19d - Do you weigh less than [critical weight for **METRIC obese**]?

- 1 YES, WEIGH LESS
- 2 NO, DON'T WEIGH LESS
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK Q7.19e IF Q7.19d = 1, ELSE SKIP TO Q8.1

Q7.19e - Do you weigh less than [critical weight for **METRIC overweight**]?

- 1 YES, WEIGH LESS
- 2 NO, DON'T WEIGH LESS
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK Q7.19f IF Q7.19e = 1, ELSE SKIP TO Q8.1

Q7.19f - Do you weigh less than [critical weight for **METRIC underweight**]?

- 1 YES, WEIGH LESS
- 2 NO, DON'T WEIGH LESS
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

CRITICAL HEIGHT IN INCHES FOR OBESE:

= SQUARE ROOT OF (23.43 * Q7.18 weight LB)

CRITICAL HEIGHT IN INCHES FOR OVERWEIGHT:
= SQUARE ROOT OF (28.12 * Q7.18 weight LB)

CRITICAL HEIGHT IN INCHES FOR UNDERWEIGHT:
= SQUARE ROOT OF (38 * Q7.18 weight LB)

THEN CONVERT TO FEET, INCHES

ASK Q7.20a IF Q7.17 = 9999 OR 7777 AND Q7.18 ≠ 9999 OR 7777, ELSE SKIP TO Q8.1
Q7.20a - Is your height less than [critical height for **obese**]?

- 1 YES, LESS
- 2 NO, NOT LESS
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK Q7.20b IF Q7.20a = 2, ELSE SKIP TO Q8.1
Q7.20b - Is your height less than [critical height for **overweight**]?

- 1 YES, LESS
- 2 NO, NOT LESS
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK Q7.20c IF Q7.20b = 2, ELSE SKIP TO Q8.1
Q7.20c - Is your height less than [critical height for **underweight**]?

- 1 YES, LESS
- 2 NO, NOT LESS
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

CALCULATE CRITICAL HEIGHT FOR METRIC OBESE
= SQUARE ROOT OF (333 * Q7.18 weight KILOS)

CALCULATE CRITICAL HEIGHT FOR METRIC OVERWEIGHT
= SQUARE ROOT OF (400 * Q7.18 weight KILOS)

CALCULATE CRITICAL HEIGHT FOR METRIC UNDERWEIGHT
= SQUARE ROOT OF (540.5 * Q7.18 weight KILOS)

ASK Q7.20d IF Q7.17 = 9999 OR 7777 AND Q7.18 ≠ 9999 OR 7777, ELSE SKIP TO Q8.1
Q7.20d - Is your height less than [critical height for **METRIC obese**]?

- 1 YES, LESS
- 2 NO, NOT LESS
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK Q7.20e IF Q7.20d = 2, ELSE SKIP TO Q8.1
Q7.20e - Is your height less than [critical height for **METRIC overweight**]?

- 1 YES, LESS
- 2 NO, NOT LESS

7 DON'T KNOW/NOT SURE
9 REFUSED

ASK Q7.20f IF Q7.20e = 2, ELSE SKIP TO Q8.1

Q7.20f - Is your height less than [critical height for **METRIC** **underweight**]?

1 YES, LESS
2 NO, NOT LESS
7 DON'T KNOW/NOT SURE
9 REFUSED

TOBACCO

ASK ALL

Q8.1 - Have you smoked at least 100 cigarettes in your entire life?

READ IF NECESSARY: 100 cigarettes=5 packs.

1 YES
2 NO
7 DON'T KNOW/NOT SURE
9 REFUSED

ASK Q8.2 IF Q8.1 = 1, ELSE SKIP TO Q9.1

Q8.2 - Do you now smoke cigarettes every day, some days, or not at all?

1 EVERY DAY
2 SOME DAYS
3 NOT AT ALL
7 DON'T KNOW/NOT SURE
9 REFUSED

ASK Q8.3 IF Q8.2 = 1

Q8.3 - How many cigarettes on average do you smoke per day?

___ PER DAY [RANGE 1-200]
777 DON'T KNOW/NOT SURE
999 REFUSED

ASK Q8.3a IF Q8.2 = 2

Q8.3a - On the days that you smoke, how many cigarettes on average do you smoke per day?

___ PER DAY [RANGE 1-200]
777 DON'T KNOW/NOT SURE
999 REFUSED

ASK Q8.3b IF Q8.2 = 2 AND Q8.3a ≠ 777 OR 999

Q8.3b - On average, about how many days per month do you smoke?

1_ _ DAYS PER MONTH [RANGE 0-30]
2_ _ DAYS PER WEEK [RANGE 0-7]
777 DON'T KNOW/NOT SURE
999 REFUSED

ASK Q8.4 IF Q8.2 = 1 OR 2

Q8.4 - How soon after waking up do you smoke your first cigarette?

READ IF NEEDED:

- 1 Within 5 minutes
- 2 Within 6-30 minutes
- 3 Within 31-60 minutes, or
- 4 More than 1 hour ?
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK Q8.5 IF Q8.1 = 1

Q8.5 - How old were you when you first started smoking cigarettes regularly?

___ YEARS [RANGE 5-85]

- 888 NEVER SMOKED REGULARLY
- 777 DON'T KNOW/NOT SURE
- 999 REFUSED

ASK Q8.6 IF Q8.1 = 1

Q8.6 - Were you smoking at all around this time 12 months ago?

- 1 YES
- 2 NO
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK Q8.7 IF Q8.6 = 1

Q8.7 - Were you smoking cigarettes every day or some days?

- 1 EVERY DAY
- 2 SOME DAYS
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK Q8.8 IF Q8.2 = 3

Q8.8 About how long has it been since you last smoked cigarettes regularly?

INTERVIEWER NOTE: ROUND TO CLOSEST WEEK, MONTH OR YEAR IF NECESSARY. [1 year = 12 months]

- 1___ WEEKS
- 2___ MONTHS
- 3___ YEARS
- 888 NEVER SMOKED REGULARLY
- 777 DON'T KNOW/NOT SURE
- 999 REFUSED

ASK Q8.9 IF Q8.2 = 1 OR 2

Q8.9 - During the past 12 months, have you stopped smoking for 24 hours or longer because you were trying to quit smoking?

- 1 YES
- 2 NO
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK Q8.10 IF Q8.2 = 1 OR 2

Q8.10 - Was the last cigarette you smoked from a carton, a pack, a single or loosie, bummed or did you roll your own?

- 1 CARTON [GO TO Q8.11A]
- 2 PACK [GO TO Q8.11B]
- 3 SINGLE/LOOSIE [GO TO Q8.11C]
- 4 BUMMED
- 5 ROLLED OWN
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK Q8.11A, Q8.11B, Q8.11C if Q8.10 = 1, 2 OR 3

Q8.11 How much did you pay for that [ANSWER TO Q8.10]?

DO NOT ROUND - PUT IN EXACT DOLLARS/CENTS

Q8.11A CARTON: ENTER PRICE IN DOLLARS AND CENTS

\$_ . _ _ [RANGE 1-120 DOLLARS]
8888 DID NOT PAY FOR CIGARETTES
7777 DON'T KNOW/NOT SURE
9999 REFUSED

Q8.11B PACK: ENTER PRICE IN DOLLARS AND CENTS

\$_ . _ _ [RANGE 1-12 DOLLARS]
8888 DID NOT PAY FOR CIGARETTES
7777 DON'T KNOW/NOT SURE
9999 REFUSED

Q8.11C SINGLE/LOOSIE: ENTER PRICE IN CENTS

\$_ . _ _ [RANGE 1 CENT to 1 DOLLAR]
88 DID NOT PAY FOR CIGARETTES
77 DON'T KNOW/NOT SURE
99 REFUSED

ASK Q8.12 IF Q8.10 = 1, 2 OR 3

Q8.12 - Where did you get that [ANSWER FROM Q8.10]?

01 From a gas station, deli or other store in New York City

IF R DOES NOT PICK #1, READ ALL OF THE REMAINING ANSWER CHOICES

02 From another person or on the street in New York City
03 Outside New York City but in New York State
04 In a different state
05 Through the internet or mail
06 Indian Reservation
07 Outside the US, or
88 Somewhere else ? (SPECIFY) _____
77 DON'T KNOW/NOT SURE
99 REFUSED

ASK Q8.13 IF Q8.2 = 1|2, OR Q8.8 <1 YEAR

Q8.13 - During the past 12 months, did you use any of the following aids to help you quit? The Nicotine patch, nicotine gum, nicotine lozenge, nicotine nasal spray or nicotine inhaler?

- 1 YES
- 2 NO
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK Q8.14 IF Q8.2 = 1|2, OR Q8.8 <1 YEAR

Q8.14 (During the past 12 months,) did you use a prescription pill to block the craving of smoking, like Zyban, Bupropion (bew - pro - pea - on) or Chantix (chan - ticks)?

- 1 YES
- 2 NO
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

SECOND HAND SMOKE

ASK ALL

Q9.1 - Does anyone (READ IF Q8.2 = 1 OR 2: else) who lives in your household smoke regularly?

- 1 YES
- 2 NO
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK ALL

Q9.2 - When you are at home, how often are you around people when they are smoking? All of the time, most of the time, only occasionally, or never?

- 1 ALL OF THE TIME
- 2 MOST OF THE TIME
- 3 ONLY OCCASIONALLY
- 4 NEVER
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK ALL

Q9.3 - Which statement best describes the rules about smoking inside your home?

READ IF NEEDED: Exclude smoking in outside areas such balconies and patios

READ ALL ANSWER CHOICES:

- 1 Smoking is not allowed anywhere inside your home
- 2 Smoking is allowed in some places or at some times
- 3 Smoking is allowed anywhere inside the home, OR
- 4 There are no rules about smoking inside the home.
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

Housing Environment

ASK ALL

Q10.1 - Is this home or apartment owned, rented, or occupied without payment or rent?

- 1 OWNED BY YOU OR SOMEONE IN YOUR FAMILY
- 2 RENTED
- 3 OCCUPIED WITHOUT PAYMENT OF RENT
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK ALL

Q10.2 - How many living units or apartments are in your building?

READ IF NEEDED

- 1 1-2
- 2 3-9
- 3 10-49, or
- 4 50 or more ?
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK ALL

Q10.3 - During the past 12 months, was there any month when (IF qhh = 1 "you"/ IF qhh > 1 "you and your family") delayed paying or were not able to pay your mortgage or rent?

- 1 YES
- 2 NO
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK ALL

Q10.6 - During the past 12 months, did you see or hear a public warning about unhealthy air quality in New York City on a particular day? Please do NOT include times when you may have heard or read about high pollen counts.

READ IF NEEDED: The government gathers information on air quality that is sometimes distributed by local radio, TV, and newspapers to inform people about air pollution levels.

- 1 YES
- 2 NO
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK Q10.6b IF Q10.6 = 1

Q10.6b - (During the past 12 months) About how many days did you change your outdoor activity level because of an air quality warning in New York City?

READ IF NEEDED:

- 1 None
- 2 1 to 3 days
- 3 4 to 6 days. or
- 4 More than 6 days ?
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

CATI: RANDOMIZE QUESTION ORDER OF QUESTIONS Q10.7 AND Q10.8

ASK ALL

Q10.7 -

(IF Q10.7 ASKED FIRST - READ:) A smoke detector sounds an alarm if there is smoke in your home.

(IF Q10.7 ASKED SECOND - READ:) A smoke detector is different from a carbon monoxide detector. It sounds an alarm if there is smoke in your home.

When did you last test or replace the batteries in your smoke detector?

READ ANSWER CHOICES

- 1 Within the past six months
- 2 More than six months ago, but no longer than one year ago
- 3 More than a year ago (or never), or
- 4 You do not have a smoke detector
- 5 SMOKE ALARM DOES NOT USE A BATTERY (VOLUNTEERED)
- 6 CATI :OMIT FOR FIRST QUESTION ASKED: HAS A COMBINED CARBON MONOXIDE AND SMOKE DETECTOR (VOLUNTEERED)**
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK ALL

Q10.8

(IF Q10.8 ASKED FIRST - READ:) A carbon monoxide detector sounds an alarm if there is a dangerous level of carbon monoxide in your home.

(IF Q10.8 ASKED SECOND - READ:) A carbon monoxide detector is different from a smoke detector. It sounds an alarm if there is a dangerous level of carbon monoxide in your home.

When did you last test or replace the batteries in your carbon monoxide alarm?

READ ANSWER CHOICES

- 1 Within the past six months
- 2 More than six months ago, but no longer than one year ago
- 3 More than a year ago (or never), or
- 4 You do not have a carbon monoxide detector
- 5 CARBON MONOXIDE DETECTOR DOES NOT USE A BATTERY (VOLUNTEERED)
- 6 CATI :OMIT FOR FIRST QUESTION ASKED: HAS A COMBINED CARBON MONOXIDE AND SMOKE DETECTOR (VOLUNTEERED)**
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK Q10.8b IF (Q10.7 = 1 & Q10.8 = 1, OR Q10.7 = 2 & Q10.8 = 2, OR Q10.7 = 3 AND 10.8 = 3)

Q10.8b - Do you have a combined carbon monoxide and smoke detector?

- 1 YES
- 2 NO
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK ALL

Q10.9 During the past 12 months, have you had a problem with bed bugs in your home that required an exterminator?

- 1 YES
- 2 NO
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK Q10.10 IF Q10.1 = 2 AND Q10.2 = 2-4

Q10.10 - During the past 12 months, did you get a form from your landlord to fill out about window guards and lead paint?

READ IF NEEDED: The City requires that landlords provide their tenants with an annual notice that describes the laws for window guards and lead paint hazards. The notice also includes a form that should be filled out by an adult in the household and returned to the landlord.

- 1 YES
- 2 NO
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK Q10.11 IF Q10.10 = 1

Q10.11 Did you fill it out and send it back to your landlord or building manager?

- 1 YES
- 2 NO
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK ALL

Q10.4 - During the past 3 months, how often has noise in your building or from outside disrupted your activities at home, such as watching television, listening to the radio, conversation or sleep?

READ IF NEEDED: During the past 3 months, how many times per day, per week, or per month did noise disrupt you at home?

- 1__ PER DAY
- 2__ PER WEEK
- 3__ PER MONTH

- 888 NONE / NEVER / RARELY
- 777 DON'T KNOW/NOT SURE
- 999 REFUSED

ASK Q10.5 if Q10.4 GT 0, BUT NOT EQ 888,777, OR 999

Q10.5 - Which of these sources of noise have been disruptive to you in your home over the past 3 months? How about [INSERT]

- a. Neighbors
- b. Construction
- c. Cars, trucks or other vehicles, not including noise from emergency sirens
- d. Emergency sirens, including fire engines, ambulances and police sirens
- e. Restaurants, bars or clubs
- f. Other activity of people on the street or sidewalk
- g. Dog barking or other animal noise
- h. Subways or trains

- 1 YES
- 2 NO
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

CANCER SCREENING

SCREEN: Now I will ask you some questions about cancer screenings.

ASK Q12.1 IF Q7.2 = 2, ELSE SKIP TO Q12.3

Q12.1 - A mammogram is an x-ray of each breast to look for breast cancer. Have you ever had a mammogram?

- 1 YES
- 2 NO
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK Q12.2 IF Q12.1 = 1, ELSE SKIP TO Q12.3

Q12.2 - How long has it been since your last mammogram?

READ IF NEEDED

- 1 Less than 12 months ago
- 2 1 year ago but less than 2 years ago
- 3 2 years ago but less than 3 years ago
- 4 3 years ago but less than 5 years ago, or
- 5 5 or more years ago ?
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK Q12.3 IF Q7.2 = 2, ELSE SKIP TO Q12.5

Q12.3 - A Pap smear is a test for cancer of the cervix. Have you ever had a Pap smear?

- 1 YES
- 2 NO
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK Q12.4 IF Q12.3 = 1, ELSE SKIP TO Q12.5

Q12.4 - How long has it been since your last pap smear?

READ IF NEEDED

- 1 Less than 12 months ago

- 2 1 year ago but less than 2 years ago
- 3 2 years ago but less than 3 years ago
- 4 3 years ago but less than 5 years ago, or
- 5 5 or more years ago ?
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK Q12.5 IF Q7.1 >=45 (OR Q7.1a = 1 OR 2), ELSE SKIP TO Q13.1

Q12.5 - A colonoscopy [KOH-LUH-NOS-KUH-PEE] is an exam in which a tube is inserted in the rectum to view the bowel for signs of cancer or other health problems. Have you ever had a colonoscopy?

READ IF NEEDED: A colonoscopy involves examination of the entire colon, and usually involves taking medicine to make you have many watery stools the night before the exam and getting medicine through a needle in the arm to make you sleepy during the procedure.

- 1 YES
- 2 NO
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK Q12.6 IF Q12.5 = 1

Q12.6 - When was your most recent colonoscopy [KOH-LUH-NOS-KUH-PEE] performed?

READ IF NEEDED

- 1 Less than 1 year ago
- 2 1 year ago but less than 5 years ago
- 3 5 years ago but less than 10 years ago, or
- 4 10 or more years ago ?
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

HIV

SCREEN: Now I am going to ask you about HIV testing. Do NOT count any test you might have had as a part of a blood donation.

QLEVEL = 5

ASK ALL

Q13.1 - Have you had an HIV test in the last 12 months?

- 1 YES
- 2 NO
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK Q13.2 IF Q13.1 = 2,7,9

Q13.2 - Have you ever had an HIV test?

- 1 YES
- 2 NO
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

SEXUAL BEHAVIOR

SCREEN: The next few questions are about your sexual behavior. Again, your answers are strictly confidential and you don't have to answer any question you don't want to.

WOMEN ONLY:

ASK Q14.1f IF Q7.2 = 2, ELSE SKIP TO Q14.1m (ASK ALL WOMEN)

Q14.1f - During the past 12 months, with how many men have you had sex? By sex we mean oral, vaginal or anal sex, but not masturbation.

___ NUMBER [CATI RANGE 0 - 499]

777 DON'T KNOW/NOT SURE

999 REFUSED

ASK Q14.2f IF Q14.1f > 0 AND NOT 777 OR 999, ELSE SKIP TO Q14.3f

Q14.2f - The last time you had sex, did you use a condom?

IF ASKED: This includes the "female condom"

IF ASKED: This is the last time you had sex with a man.

1 YES

2 NO

7 DON'T KNOW/NOT SURE

9 REFUSED

ASK Q14.3f IF Q7.2 = 2 (ASK ALL WOMEN)

Q14.3f - During the past 12 months, with how many women have you had sex?

READ IF NEEDED: By sex we mean oral, vaginal or anal sex, but not masturbation.

___ NUMBER [CATI RANGE 0 - 499]

777 DON'T KNOW/NOT SURE

999 REFUSED

ASK Q14.4f IF Q14.3f = 0

Q14.4f - Have you ever had sex with a woman?

READ IF NEEDED: By sex we mean oral, vaginal or anal sex, but not masturbation.

1 YES

2 NO

7 DON'T KNOW/NOT SURE

9 REFUSED

ASK Q14.5f IF Q14.1f > 0 AND NOT 777 OR 999

Q14.5f - In the past 12 months, have you had anal sex?

READ IF NEEDED: By anal sex, we mean having your partner put his penis in your rectum.

1 YES

2 NO

7 DON'T KNOW/NOT SURE

9 REFUSED

ASK Q14.6f IF Q14.5f = 1, ELSE SKIP TO Q15.1

Q14.6f - In the past 12 months, when you have had anal sex have you or your partner used a condom? Every time, some of the time, or never?

- 1 EVERY TIME
- 2 SOME OF THE TIME
- 3 NEVER
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

SEXUAL BEHAVIOR

MEN ONLY:

ASK Q14.1m IF Q7.2 = 1, ELSE SKIP TO Q15.1 (ASK ALL MEN)

Q14.1m - During the past 12 months, with how many women have you had sex? By sex we mean oral, vaginal or anal sex, but not masturbation.

___ NUMBER [CATI RANGE 0 - 499]
RECORD 777 FOR DON'T KNOW/NOT SURE
RECORD 999 FOR REFUSED

ASK Q14.2m IF Q7.2 = 1 (ASK ALL MEN)

Q14.2m - During the past 12 months, with how many men have you had sex?

READ IF NEEDED: By sex we mean oral or anal sex, but not masturbation.

___ NUMBER [CATI RANGE 0 - 499]
777 DON'T KNOW/NOT SURE
999 REFUSED

ASK Q14.3m IF Q14.2m = 0, ELSE SKIP TO Q14.4m

Q14.3m - Have you ever had sex with a man?

READ IF NEEDED: By sex we mean oral or anal sex, but not masturbation.

- 1 YES
- 2 NO
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK Q14.4m if Q14.2m >0 and NOT 777,999 (Only Gay or Bisexual Men who were active in past 12 months), ELSE SKIP TO Q14.5m

Q14.4m - The last time you had sex with a man, did you use a condom?

IF ASKED : This includes the "female condom"

- 1 YES
- 2 NO
- 3 [VOLUNTEERED] DIDN'T HAVE ANAL SEX
- 7 DON'T KNOW/ NOT SURE
- 9 REFUSED

ASK Q14.5m IF (Q14.1m >0 AND Q14.1m <500, AND (Q14.2m = 0 AND (Q14.3m = 2,7 OR 9)) OR ((Q14.1m >0 AND Q14.1m <500) AND (Q14.2m = 777 OR Q14.2m = 999)), ELSE SKIP TO Q14.6m (Only heterosexual males with no bisexual history)
Q14.5m - The last time you had sex, did you use a condom?

IF ASKED : This includes the "female condom"

- 1 YES
- 2 NO
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK Q14.6m IF Q14.1m > 0 AND NOT 777 OR 999, AND Q14.2m > 0 AND NOT 777 OR 999, OR Q14.3m = 1 (Only bisexual men active with a woman in past 12 months) ELSE SKIP TO Q14.7

Q14.6m - The last time you had sex with a woman, did you use a condom?

IF ASKED : This includes the "female condom"

- 1 YES
- 2 NO
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK Q14.7m IF Q14.1m OR Q14.2m > 0 AND NOT 777 OR 999

Q14.7m In the past 12 months, have you had anal sex?

READ IF NEEDED:

(IF Q14.1m>0 AND Q14.2m=0) By anal sex, we mean putting your penis in your partner's rectum.

(IF Q14.2m>0 AND Q14.1m>=0) By anal sex, we mean putting your penis in your partner's rectum or having your partner put his penis in your rectum.

- 1 YES
- 2 NO
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK Q14.8m IF Q14.7m = 1

Q14.8m - In the past 12 months, when you have had anal sex have you or your partner used a condom? Every time, some of the time, or never?

- 1 EVERY TIME
- 2 SOME OF THE TIME
- 3 NEVER
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ALCOHOL CONSUMPTION

SCREEN: Now a few questions about alcohol.

ASK ALL

Q15.1 - A drink of alcohol is 1 can or bottle of beer, 1 glass of wine, 1 can or bottle of wine cooler, 1 cocktail, or 1 shot of liquor. During the past 30 days, how many days per week or per month did you have at least 1 drink of any alcoholic beverage?

1 ___ DAYS PER WEEK [RANGE 1-7]
2 ___ DAYS IN PAST 30 [RANGE 1-30]

888 NO DRINKS IN THE PAST 30 DAYS
777 DON'T KNOW/NOT SURE
999 REFUSED

CATI Note: Only allow one field to be entered.

ASK Q15.2 IF Q15.1 > 0 BUT NOT 77 OR 99, ELSE SKIP TO Q16.1

Q15.2 - On the days when you drank, about how many drinks did you drink on average?

INTERVIEWER: ROUND UP. 1/2 A DRINK CODE AS "1 DRINK"

___ NUMBER OF DRINKS [RANGE OF 1-50 WITH A MINIMUM OF 1 DRINK]
77 DON'T KNOW/NOT SURE
99 REFUSED

ASK Q15.3 IF Q15.1 > 0 BUT NOT 77 OR 99, ELSE SKIP TO Q16.1

Q15.3 -Considering all types of alcoholic beverages, how many times during the past 30 days did you have 5 or more drinks on one occasion?

___ NUMBER OF TIMES [CATI RANGE 0 -50]
77 DON'T KNOW/NOT SURE
99 REFUSED

TELEPHONE MODULE

SCREEN: And now, because this is a telephone survey I need to ask you a few more questions about your telephone usage. These questions are only asked for statistical purposes.

ASK ALL

Q16.1 - Do you have more than one telephone number in your household? Do NOT include cell phones or numbers that are only used by a computer or fax machine.

- 1 YES
- 2 NO
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK Q16.2 IF Q16.1 = 1, ELSE SKIP TO Q16.3

Q16.2 - How many of these are residential numbers?

- ___ RESIDENTIAL TELEPHONE NUMBERS [RANGE 0-5]
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK ALL

Q16.3 - During the past 12 months, has your household been without telephone service for 1 week or more? Do NOT include interruptions of telephone service because of weather or natural disasters.

- 1 YES
- 2 NO
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK ALL

Q16.4 - Do you have a cell phone for personal use? Please include cell phones if they are used for any personal use.

- 1 YES
- 2 NO
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK Q16.5 IF Q16.4 = 1, ELSE SKIP TO Q16.6

Q16.5 - Do you usually share this cell phone with any other adults?

- 1 YES
- 2 NO
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK Q16.6 IF Q16.4 = 2, ELSE SKIP TO Q16.7

Q16.6 - Do you share a cell phone for personal use with other adults?

- 1 YES
- 2 NO
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK Q16.7 IF Q16.5 OR Q16.6 = 1, ELSE SKIP TO Q16.8

Q16.7 - How many OTHER adults use this cell phone at least one-third of the time?

INTERVIEWER NOTE: MORE THAN 2 = CODE AS "2"

___ OTHER ADULTS [RANGE 0-2]

7 DON'T KNOW/NOT SURE

9 REFUSED

ASK ALL

Q16.8 - In the next 12 months, how likely are you to disconnect your home landline telephone and only use a cell phone? Would you say very likely, somewhat likely, somewhat unlikely, or very unlikely?

1 VERY LIKELY

2 SOMEWHAT LIKELY

3 SOMEWHAT UNLIKELY

4 VERY UNLIKELY

7 DON'T KNOW/NOT SURE

9 REFUSED

ASK Q16.9 IF Q16.4 = 1 OR Q16.6 = 1, ELSE SKIP TO RECRUITMENT

Q16.9 - Thinking about all the calls that you receive on your landline or cell phone, what percent, between 0 and 100, are received on your cell phone?

_____ PERCENT [RANGE 0 - 100]

777 DON'T KNOW

999 REFUSED

Additional contact information for users of CHS data:

If you have questions or would like more information about CHS questions or survey methodology, please email: survey@health.nyc.gov

If you have questions or would like more information about CHS data, please email: EpiDatarequest@health.nyc.gov