

**2019 New York City
Community Health Survey
(NYC CHS)**

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LANDLINE INTRODUCTION

SKIP TO CELL INTRODUCTION IF CELL VERSION

Hello. My name is _____. I'm calling on behalf of the New York City Department of Health from Abt Associates and we need your help to represent your neighborhood. If you qualify for the research, we'll give you \$10 as a thank you. All answers you give are confidential and it takes less than two minutes to determine eligibility.

INTERVIEWER: Read if needed: You don't have to provide any personal information such as your full name or address.

IF ATTEMPT = 3, 7 or 11, DISPLAY THE FOLLOWING TEXT (RED FONT COLOR):

"If answering machine, leave message"

DIAL OUTCOME

- 1: PROCEED TO SCREENING/INTERVIEW [VERIFY DISPO]
- 2: Answering Machine / VOICEMAIL
- 9: NO ANSWER (5 Rings)
- 11: HARD CALLBACK (Specified Date/Time) [REQUIRE APPT] [ADD COMMENT]
- 13: SOFT CALLBACK (Unspecified) [ALLOW APPT] [ADD COMMENT]
- 14: SPANISH Callback [ALLOW APPT] [ADD COMMENT]
- 50: CHINESE Callback [ALLOW APPT] [ADD COMMENT]
- 51: RUSSIAN Callback [ALLOW APPT] [ADD COMMENT]
- 56: HAITIAN CREOLE Callback [ALLOW APPT] [ADD COMMENT]
- 59: BENGALI Callback [ALLOW APPT] [ADD COMMENT]
- 15: OTHER Language [VERIFY DISPO] [FINALIZE RECORD]
- 16: Call Blocking - CALLBACK
- 19: CELL SAMPLE NUMBER REACHED ON LL [VERIFY DISPO] [FINALIZE RECORD]

- 21: HUNG UP [ADD COMMENT]
- 22: SOFT REFUSAL [ALLOW APPT] [ADD COMMENT]
- 24: HARD REFUSAL (Do Not Call Back) [VERIFY DISPO] [ADD COMMENT] [FINALIZE RECORD]
- 26: Call Blocking - REFUSAL [VERIFY DISPO] [FINALIZE RECORD]
- 34: SHORT TERM HEALTH PROBLEM (Cold, Flu, Etc. - Can be called back) [ALLOW APPT] [ADD COMMENT]
- 35: LONG TERM HEALTH PROBLEM (Entire Field Period) [VERIFY DISPO] [ADD COMMENT] [FINALIZE RECORD]
- 36: HEARING PROBLEM (Hard of Hearing, Deaf) [VERIFY DISPO] [FINALIZE RECORD]
- 37: DURATION (Resp Not Available Entire Field Period) [VERIFY DISPO] [ADD COMMENT] [FINALIZE RECORD]
- 38: BUSINESS/Government/Non-Residential (Confirmed via Person) [FINALIZE RECORD]
- 41: BUSY SIGNAL/TONE
- 42: INCOMPLETE CALL /LINE PROBLEMS /TEMPORARY (HEARD: Circuits Busy, Try Again Later) [FINALIZE RECORD IF THIS DISP IS ASSIGNED 3 TIMES]
- 43: CHILD/TEEN PHONE [VERIFY DISPO] [ADD COMMENT] [FINALIZE RECORD]
- 44: FAX/MODEM TONE [FINALIZE RECORD]
- 46: NOT IN SERVICE/DISCONNECTED [FINALIZE RECORD]

STOP MENU/TERMINATE INTERVIEW

- 11: HARD CALLBACK (Specified Date/Time) [REQUIRE APPT] [ADD COMMENT]
- 13: SOFT CALLBACK (Unspecified) [ALLOW APPT] [ADD COMMENT]
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56: HAITIAN CREOLE Callback [ALLOW APPT] [ADD COMMENT]
59: BENGALI Callback [ALLOW APPT] [ADD COMMENT]
15: OTHER Language [VERIFY DISPO][ADD COMMENT] [FINALIZE RECORD]
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37: DURATION (Resp Not Available Entire Field Period) [VERIFY DISPO] [ADD COMMENT] [FINALIZE RECORD]
38: BUSINESS/Government/Non-Residential (Confirmed via Person) [ADD COMMENT] [FINALIZE RECORD]
43: CHILD/TEEN PHONE[ADD COMMENT] [FINALIZE RECORD]
66: CHS COMPLETE AND ELIGIBLE FOR KIDS – CALLBACK - CB4 - KIDS_REC
61: CHS COMPLETE AND NOT ELIGIBLE FOR KIDS

ID DIAL_OUTCOME OR STOPMENU= 14, SET LANGUAGE TO 10
ID DIAL_OUTCOME OR STOPMENU= 51, SET LANGUAGE TO 25
ID DIAL_OUTCOME OR STOPMENU= 50, SET LANGUAGE TO 4
ID DIAL_OUTCOME OR STOPMENU= 56, SET LANGUAGE TO 12
ID DIAL_OUTCOME OR STOPMENU= 59, SET LANGUAGE TO 69

**IF DIAL_OUTCOME = 2 AND ATTEMPT = 3, 7 or 11, GO TO VOICEMAIL SCRIPT BASED ON LANG.
IF NO LANGUAGE SELECTED, SHOW VOICEMAIL SCRIPTS IN ALL LANGUAGES**

ENGLISH:

“Hello, I’m calling on behalf of the New York City Health Department from Abt Associates. We are conducting an important study to learn more about the health of New Yorkers and your phone number was randomly chosen. I am not selling anything; this is a scientific study called the Community Health Survey. If you qualify for this study, we’ll give you \$10 as a thank you.

We will call you back in a few days.”

SPANISH:

“Hola, le llamo de parte del Departamento de Salud e Higiene Mental de la Ciudad de Nueva York, de Abt-Associates. Estamos llevando a cabo un estudio importante para aprender más acerca de la salud de los neoyorquinos. No estoy pidiendo dinero, este es un estudio científico llamado el Estudio de la Salud Comunitaria. Si califica para el estudio, le daremos \$10 como agradecimiento.

Le volveremos a llamar en algunos días.”

RUSSIAN:

“Здравствуйте, я звоню вам из Abt Associates Департамента здравоохранения и психогигиены города Нью-Йорка. Мы проводим важное исследование, чтобы побольше узнать о здоровье жителей Нью-Йорка. Я не прошу денег – это научное исследование, которое называется «Здоровье жителей районов». Если Вы соответствуете критериям для участия в исследовании, в качестве благодарности Вы получите 10 долларов.

Мы вам перезвоним вам через несколько дней.”

CHINESE:

Simplified Chinese:

“您好，我是代表纽约市卫生局从 **Abt Associates** 打电话来。我们正在进行一项重要调查，以便进一步认识纽约市民的健康状况，我们随机选中了您的手机号码。我不是推销任何东西，这是一项称为“社区健康调查”的科学研究。如果您符合参加调查的资格，我们将付给您十美元作为谢礼。

我们会过几天再打电话给您。”

BENGALI:

"নমস্কার/আদাব, আমি **Abt Associates** থেকে নিউ ইয়র্ক সিটি ডিপার্টমেন্ট অব হেলথ এর পক্ষে টেলিফোন করছি। আমরা নিউ ইয়র্ক এর অধিবাসীদের স্বাস্থ্য সম্পর্কে আরও জানতে একটি গুরুত্বপূর্ণ অধ্যয়ন পরিচালনা করছি এবং আপনার সেল ফোনটি এলোপাথাডিভাবে নির্বাচিত হয়েছে। আমি কিছু বিক্রি করছি না; এটি একটি বৈজ্ঞানিক অধ্যয়ন যা কমিউনিটি হেলথ সার্ভে নামে পরিচিত। আপনি যদি এই অধ্যয়নের জন্য যোগ্য হন, তাহলে আপনাকে ধন্যবাদ জানানোর জন্য আমরা \$10 দেব।

আমরা কয়েকদিনের মধ্যেই আপনাকে আবার টেলিফোন করব।"

HAITIAN CREOLE:

“Alo, m ap rele nan non Depatman Sante Vil Nouyòk nan Abt Associates.
N ap fè yon etid enpòtan pou nou aprann plis bagay sou sante moun k ap viv nan Nouyòk yo e nou te chwazi nimewo telefòn selilè w la pa aza. Mwen pa p vann anyen; sa a se yon etid syantifik ki rele Sondaj sou Sante Kominote a. Si ou kalifye pou etid sa a, n ap ba ou \$10 pou nou di w mèsì pou patisipasyon w.

N ap rele w ankò nan kèlke jou.”

LANG. Select a language:

9: English (inglés)

10: Spanish (español)

25: Russian

4: Chinese - Mandarin

69: Bengali

12: Hatian Creole

ID LANG= 14, SET LANGUAGE TO 10

ID LANG = 51, SET LANGUAGE TO 25

ID LANG = 50, SET LANGUAGE TO 4

ID LANG = 56, SET LANGUAGE TO 12

ID LANG = 59, SET LANGUAGE TO 69

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

RECORD 77777 FOR DK

RECORD 99999 FOR Ref.

CATI: IF QUOTA OUT ZIP CODE, GO TO Q9.12_13

CATI: IF Q ZIP DOES NOT FALL IN PREDEFINED CATI ZIP CODE LIST (APPENDIX B)

Q Confirm. Just to confirm, is your zip code_____?

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

CATI: 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 (APPENDIX B), OR IF Q ZIP = 77777 OR Q ZIP = 99999, ASK Q BORO

Q BORO In which of the five New York City boroughs do you live?

INTERVIEWER: 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 QBORO = 6, , SET DISPO TO 192: S/O - QBORO: DO NOT LIVE IN NYCIF QBORO = 7 OR 9, SET DISPO TO 143: Hard Refusal - QBORO: DK / REF

IF RESPONDENT DOES NOT LIVE IN NYC [ANSWER = 6]: Thank you very much, but we are only interviewing people who currently live in New York City. **END SURVEY**

**CATI: IF QUOTA OUT, 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.
IF QUOTA OUT, GO TO Q9.12_13 FOR KIDS ELIGIBILITY**

CREATE THE FOLLOWING VARIABLES:

- UHF - ASSIGNED USING ORIGINAL RULES (BASED ON QZIP OR ZIP OF PLURALITY (QZIP1) FROM SAMPLE IF QZIP=77777/99999).
- UHFFLAG – SET TO 1 IF UHF ASSIGNED BASED ON QZIP, SET TO 2 IF ASSIGNED BASED ON ZIP OF PLURALITY (QZIP1) FROM SAMPLE
- HOODFU – IF QZIP=77777/99999 OR NON-NYC ZIP, SET 'HOODFU'=1 - ELSE GO TO QHH

**NEIGHBORHOOD FOLLOW-UP QUESTIONS [ASK IF HOODFU=1]
IF Q BORO/Q CONF_NYC =1 [BRONX]:**

NH1. What is the name of the neighborhood in **The Bronx** where you live?

[LIST OF NEIGHBORHOODS IN APPENDIX A.]

_____ Neighborhood
99 Refused [GO TO QHH]

IF NH1= 10 (FORDHAM), ASK NH1a

NH1a. Do you live between East Fordham Road and the Cross Bronx Expressway or between East Fordham Road and East Gun Hill Road?

- 1 Between East Fordham Road and the Cross Bronx Expressway (SET CD – 205)
- 2 Between East Fordham Road and East Gun Hill Road (SET CD – 207)
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED
- GO TO QHH

IF Q BORO/Q CONF_NYC =2 [BROOKLYN]:

NH2. What is the name of the neighborhood in **Brooklyn** where you live?

[LIST OF NEIGHBORHOODS IN APPENDIX A.]

_____ Neighborhood
99 Refused

IF NH2 = 13 (CROWN HEIGHTS), ASK NH2a

NH2a. Do you live between Eastern Parkway and Atlantic Avenue, or between Eastern Parkway and Clarkson Avenue?

- 1 Between Eastern Parkway and Atlantic Avenue (SET CD – 308)
- 2 Between Eastern Parkway and Clarkson Avenue (SET CD- 309)
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED
- GO TO QHH

IF Q BORO/Q CONF_NYC =3 [MANHATTAN]:

NH3. What is the name of the neighborhood in Manhattan where you live?

[LIST OF NEIGHBORHOODS IN APPENDIX A.]

_____ Neighborhood
99 Refused

IF NH3=10 (Harlem), ASK NH3a

NH3a. Do you live in West Harlem, Central Harlem, East Harlem, or do you just call it Harlem?

READ IF NEEDED: West Harlem is considered the areas between 110th Street on the south and 155th Street on the north, between the Hudson River and St. Nicholas Avenue on the east.

Central Harlem is considered the area between 110th St. on the south to Harlem River on the north, 5th Ave. on the east and St. Nicholas Ave to the west.

East Harlem is considered the area between 96th Street on the south to Harlem River on the north, from 5th Avenue to the East River. This neighborhood is sometimes referred to as "Spanish Harlem".

- 1 West Harlem (SET CD -109)
- 2 Central Harlem (SET CD - 110)
- 3 East Harlem or Harlem (SET CD - 111)
- 7 Don't Know/Not Sure
- 9 Refused

GO TO QHH.

IF Q BORO/Q CONF_NYC =4 [QUEENS]:

NH4. What is the name of the neighborhood in Queens where you live?

[LIST OF NEIGHBORHOODS IN APPENDIX A.]

_____ Neighborhood

99 Refused

IF NH4 = 7 (CORONA), ASK NH4a

NH4a. Do you live between Roosevelt Avenue and Grand Central Parkway, or between Roosevelt Avenue and the Long Island Expressway?

1 Between Roosevelt Avenue and Grand Central Parkway (SET CD – 403)

2 Between Roosevelt Avenue and the Long Island Expressway (SET CD – 404)

7 Don't Know/Not Sure

9 Refused

GO TO QHH.

IF Q BORO/Q CONF_NYC =5 [STATEN ISLAND]:

NH5. What is the name of the neighborhood in Staten Island where you live?

[LIST OF NEIGHBORHOODS IN APPENDIX A.]

_____ Neighborhood

99 Refused

SET QUALIFIED LEVEL = 1 [LIVE IN NYC]

81: Qualified Callback - Before QHH (Landline) / After QCONF_NYC (Cell)

121: Qualified Soft Refusal - Before QHH (Landline) / After QCONF_NYC (Cell)

161: Qualified Hard Refusal - Before QHH (Landline) / After QCONF_NYC (Cell)

QHH 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?

INTERVIEWER: Read if needed:: Household members are those who spend a majority of their time living in the household.

INTERVIEWER: Record 88 for Not a Private Residence and record 99 for Refused/DK

_____ Number of adults [RANGE 1-20]

IF QHH = 99, THEN SET DISPO TO 146: Hard Refusal - QHH: REFUSED/DK

IF REFUSED/DK (QHH= 99):

Those are all the questions I have for you. Thank you for your time.

TERMINATE INTERVIEW.

IF QHH = 88 THEN GO TO Q9.12_13

IF ONLY 1 ADULT (QHH=1) ASK HHa, IF MORE THAN ONE ADULT (QHH>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. Participation is voluntary: you can stop the interview at any time or decide not to answer any question. The Health Department will share the anonymous survey results of participants with the public so that more can be learned about the health of New Yorkers. 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. We also have a website at the Health Department for you to verify this survey. In appreciation for the time that you spend answering our questions, we will provide you with ten dollars as a thank you.

[GO TO QWHICH]

IF HHa=2 or 9 (NOT THE ADULT)

s6b May I speak with the adult?

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

IF s6B = 9, SET DISPO TO 101:Soft Refusal - S6B-CHS/ QPICK-CHS: REFUSED

IF MORE THAN ONE ADULT (QHH>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 NUMMEN or NUMWOMEN = 99, THEN SET DISPO TO 146: Hard Refusal - QHH: REFUSED/DK
[IF EITHER NUMMEN OR NUMWOMEN = 99 THEN THANK AND TERMINATE]

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

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

IF QPICK = 9, SET DISPO TO 122: Qualified Soft Refusal – Before QWHICH (Interview Language)

IF PICKED PERSON IS NOT AVAILABLE:

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

- 1 Gave response – (ENTER RESPONSE)
- 7 (DON'T KNOW – (THANKS AND TERMINATE)
- 9 REFUSED – (THANK AND TERMINATE)

If S6b1 = 7 or 9, THEN SET DISPO TO 122: Qualified Soft Refusal – Before QWHICH (Interview Language)
IF S6b1 = 1, POPULATE CALLBACK FOR FIELD AT DIAL_OUTCOME BANNER WITH RESPONDENT NAME
IF S6B = 1, SET DISPO TO 81 Qualified Callback - Before QHH (Landline) / After QCONF_NYC (Cell)

SET QUALIFIED LEVEL = 2 [QUALIFIED NYC ADULT]
82: Qualified Callback - Before QWHICH (Interview Language)
122: Qualified Soft Refusal – Before QWHICH (Interview Language)162: Qualified Hard Refusal – Before QWHICH (Interview Language)
Q WHICH INTERVIEWER: SELECT LANGUAGE

1 English
2 Spanish
3 Russian
4 Chinese
5 Bengali
6 Haitian Creole

ASK IF QWHICH= 4
QCHINESE [INTERVIEWER: IS THAT MANDARIN OR CANTONESE?]

1 MANDARIN
2 CANTONESE
ID QWHICH = 14, SET LANGUAGE TO 10
ID QWHICH = 51, SET LANGUAGE TO 25
ID QWHICH = 50, SET LANGUAGE TO 4
ID QWHICH = 56, SET LANGUAGE TO 12
ID QWHICH = 59, SET LANGUAGE TO 69

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

[READ IF NEW PERSON COMES TO PHONE: Hello, My name is _____, and I am calling on behalf of the New York City Department of Health from Abt Associates. We're doing an important study to improve the health of New Yorkers. Your household was randomly chosen to help us learn about your neighborhood. All answers you give are confidential.]

Participation is voluntary: you can stop the interview at any time or decide not to answer any question. The Health Department will share the anonymous survey results of participants with the public so that more can be learned about the health of New Yorkers. 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. We also have a website at the Health Department for you to verify this survey. In appreciation for the time that you spend answering our questions, we will provide you with ten dollars as a thank you.

END LANDLINE INTRODUCTION

INSERT TIMESTAMP: TLL_Sum

CELL PHONE INTRODUCTION

Hello. My name is ____ . I'm calling on behalf of the New York City Department of Health from Abt Associates and we need your help to represent your neighborhood. If you qualify for the research, we'll give you \$10 as a thank you. All answers you give are confidential and it takes less than two minutes to determine eligibility.

IF ATTEMPT = 1, 3 or 9, DISPLAY THE FOLLOWING TEXT (RED FONT COLOR):

"If answering machine, leave message"

DIAL OUTCOME

- 1: PROCEED TO SCREENING/INTERVIEW [VERIFY DISPO]
- 2: Answering Machine / VOICEMAIL
- 4: Answering Machine / Voicemail - Confirmed Residence (HEARD: Household, Home, Residence, Family)
- 9: NO ANSWER (5 Rings)
- 11: HARD CALLBACK (Specified Date/Time) [REQUIRE APPT] [ADD COMMENT]
- 13: SOFT CALLBACK (Unspecified) [ALLOW APPT] [ADD COMMENT]
- 14: SPANISH Callback [ALLOW APPT] [ADD COMMENT]
- 50: CHINESE Callback [ALLOW APPT] [ADD COMMENT]
- 51: RUSSIAN Callback [ALLOW APPT] [ADD COMMENT]
- 56: HAITIAN CREOLE Callback [ALLOW APPT] [ADD COMMENT]
- 59: BENGALI Callback [ALLOW APPT] [ADD COMMENT]
- 15: OTHER Language [VERIFY DISPO] FINALIZE RECORD]
- 16: Call Blocking - CALLBACK
- 18: LL SAMPLE REACHED ON CELL[VERIFY DISPO] [FINALIZE RECORD]
- 21: HUNG UP [ADD COMMENT]
- 22: SOFT REFUSAL [ALLOW APPT] [ADD COMMENT]
- 24: HARD REFUSAL (Do Not Call Back) [VERIFY DISPO] [ADD COMMENT] [FINALIZE RECORD]
- 26: Call Blocking - REFUSAL [VERIFY DISPO] FINALIZE RECORD]
- 28: Updated Phone Number Provided [ALLOW APPT] [ADD COMMENT]
- 34: SHORT TERM HEALTH PROBLEM (Cold, Flu, Etc. - Can be called back) [ALLOW APPT] [ADD COMMENT]
- 35: LONG TERM HEALTH PROBLEM (Entire Field Period) [VERIFY DISPO] [ADD COMMENT] [FINALIZE RECORD]
- 36: HEARING PROBLEM (Hard of Hearing, Deaf) [VERIFY DISPO]] [FINALIZE RECORD] 37: DURATION (Resp Not Available Entire Field Period) [VERIFY DISPO] [ADD COMMENT] [FINALIZE RECORD]
- 38: BUSINESS/Government/Non-Residential (Confirmed via Person) [VERIFY DISPO] [FINALIZE RECORD]
- 41: BUSY SIGNAL/TONE
- 42: INCOMPLETE CALL /LINE PROBLEMS /TEMPORARY (HEARD: Circuits Busy, Try Again Later)] FINALIZE RECORD IF THIS DISP IS ASSIGNED 3 TIMES]
- 43: CHILD/TEEN PHONE [ADD COMMENT] [VERIFY DISPO] FINALIZE RECORD]
- 44: FAX/MODEM TONE [FINALIZE RECORD]
- 45: Customer Not Available (HEARD: Customer Is Not Available)
- 46: NOT IN SERVICE/DISCONNECTED [VERIFY DISPO] [FINALIZE RECORD]
- 196: S/O INTRO (VOL) DO NOT LIVE IN NYC [VERIFY DISPO] [FINALIZE RECORD]

STOP MENU/TERMINATE INTERVIEW

- 11: HARD CALLBACK (Specified Date/Time) [REQUIRE APPT] [ADD COMMENT]
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35: LONG TERM HEALTH PROBLEM (Entire Field Period) [[VERIFY DISPO] [ADD COMMENT]
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36: HEARING PROBLEM (Hard of Hearing, Deaf) [VERIFY DISPO] [ADD COMMENT] [FINALIZE
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38: BUSINESS/Government/Non-Residential (Confirmed via Person) [ADD COMMENT] [FINALIZE
RECORD]
43: CHILD/TEEN PHONE [VERIFY DISPO] [ADD COMMENT] [FINALIZE RECORD]
28: Updated Phone Number Provided [REQUIRE APPT] [ADD COMMENT]

ID DIAL_OUTCOME OR STOPMENU= 14, SET LANGUAGE TO 10
ID DIAL_OUTCOME OR STOPMENU= 51, SET LANGUAGE TO 25
ID DIAL_OUTCOME OR STOPMENU= 50, SET LANGUAGE TO 4
ID DIAL_OUTCOME OR STOPMENU= 56, SET LANGUAGE TO 12
ID DIAL_OUTCOME OR STOPMENU= 59, SET LANGUAGE TO 69

IF DIAL_OUTCOME = 2 OR 4 AND ATTEMPT = 1, 3 or 9, GO TO VOICEMAIL SCRIPT BASED ON LANG.

ENGLISH:

“Hello, I’m calling on behalf of the New York City Health Department from Abt Associates. We are conducting an important study to learn more about the health of New Yorkers and your phone number was randomly chosen. I am not selling anything; this is a scientific study called the Community Health Survey. If you qualify for this study, we’ll give you \$10 as a thank you.

We will call you back in a few days.”

SPANISH:

“Hola, le llamo de parte del Departamento de Salud e Higiene Mental de la Ciudad de Nueva York, de Abt-Associates. Estamos llevando a cabo un estudio importante para aprender más acerca de la salud de los neoyorquinos. No estoy pidiendo dinero, este es un estudio científico llamado el Estudio de la Salud Comunitaria. Si califica para el estudio, le daremos \$10 como agradecimiento.

Le volveremos a llamar en algunos días.”

RUSSIAN:

“Здравствуйте, я звоню вам из Abt Associates Департамента здравоохранения и психогигиены города Нью-Йорка. Мы проводим важное исследование, чтобы побольше узнать о здоровье жителей Нью-Йорка. Я не прошу денег – это научное исследование, которое называется «Здоровье жителей районов». Если Вы соответствуете критериям для участия в исследовании, в качестве благодарности Вы получите 10 долларов.

Мы вам перезвоним вам через несколько дней.”

CHINESE:

Simplified Chinese:

“您好，我是代表纽约市卫生局从 Abt Associates打电话来。我们正在进行一项重要调查，以便进一步认识纽约市民的健康状况，我们随机选中了您的手机号码。我不是推销任何东西，这是一项称为“社区健康调查”的科学研究。如果您符合参加调查的资格，我们将付给您十美元作为谢礼。

我们会过几天再打电话给您 ”

BENGALI:

"নমস্কার/আদাব, আমি Abt Associates থেকে নিউ ইয়র্ক সিটি ডিপার্টমেন্ট অব হেলথ এর পক্ষে টেলিফোন করছি। আমরা নিউ ইয়র্ক এর অধিবাসীদের স্বাস্থ্য সম্পর্কে আরও জানতে একটি গুরুত্বপূর্ণ অধ্যয়ন পরিচালনা করছি এবং আপনার সেল ফোনটি এলোপাথাডিভাবে নির্বাচিত হয়েছে। আমি কিছু বিক্রি করছি না; এটি একটি বৈজ্ঞানিক অধ্যয়ন যা কমিউনিটি হেলথ সার্ভে নামে পরিচিত। আপনি যদি এই অধ্যয়নের জন্য যোগ্য হন, তাহলে আপনাকে ধন্যবাদ জানানোর জন্য আমরা \$10 দেব।

আমরা কয়েকদিনের মধ্যেই আপনাকে আবার টেলিফোন করব।"

HAITIAN CREOLE:

“Alo, m ap rele nan non Depatman Sante Vil Nouyòk nan Abt Associates.
N ap fè yon etid enpòtan pou nou aprann plis bagay sou sante moun k ap viv nan Nouyòk yo e nou te chwazi nimewo telefòn selilè w la pa aza. Mwen pa p vann anyen; sa a se yon etid syantifik ki rele Sondaj sou Sante Kominote a. Si ou kalifye pou etid sa a, n ap ba ou \$10 pou nou di w mèsì pou patisipasyon w.

N ap rele w ankò nan kèlke jou.”

LANG. Select a language:

- 9: English (inglés)
- 10: Spanish (español)
- 25: Russian
- 4: Chinese - Mandarin

- 69: Bengali
- 12: Hatian Creole

ID LANG= 14, SET LANGUAGE TO 10
ID LANG = 51, SET LANGUAGE TO 25
ID LANG = 50, SET LANGUAGE TO 4
ID LANG = 56, SET LANGUAGE TO 12
ID LANG = 59, SET LANGUAGE TO 69

ELIGIBILITY QUESTIONS

Q DRIVING In order to ensure your safety I'd like to ask you, are you driving a car right now?

- 1 YES [GO TO QCALLBACK2]
- 2 NO [GO TO Q CONF_NYC]

7 DON'T KNOW/ NOT SURE
9 REFUSED

IF QDRIVING = 7 OR 9, SET DISPO TO 141: Hard Refusal - Q DRIVING: DK / REF

Q CALLBACK2 When would be a better time to call you back?

_____Day _____Time

IF QDRIVING = 1, SET DISPO TO 61: Callback - Q DRIVING

IF 7 DON'T KNOW OR 9 REFUSED: Thank you very much for your time. **END SURVEY**

Q CONF_NYC In which of the five New York City boroughs do you live?

INTERVIEWER: Read if needed:: The five boroughs of New York City include The Bronx, Brooklyn, Manhattan, Queens and Staten Island.

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

IF QCONF_NYC = 6, THEN SET DISPO TO 191: S/O Q CONF_NYC: DO NOT LIVE IN NYC

IF QCONF_NYC = 7 OR 9, SET DISPO 142: Hard Refusal - Q CONF_NYC: DK / REF

IF RESPONDENT DOES NOT LIVE IN NYC [ANSWER = 6]: Thank you very much, but we are only interviewing people who currently live in New York City. **END SURVEY**

IF DON'T KNOW OR REFUSED: Thank you very much for your time. **END SURVEY**

SET QUALIFIED LEVEL = 1 [LIVES IN NYC]

81: Qualified Callback - Before QHH (Landline) / After QCONF_NYC (Cell)

Q ZIP Could I please have your five-digit zip code?

RECORD 77777 FOR DK
RECORD 99999 FOR Ref.

IF QUOTA OUT ZIP CODE, GO TO Q9.12_13

IF Q ZIP DOES NOT FALL IN PREDEFINED CATI ZIP CODE LIST (APPENDIX B)

Q Confirm. Just to confirm, is your zipcode_____?

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

Q CONF_ADULT Are you 18 years of age or older?

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

- 1 YES [GO TO QCONF_CELL]
- 2 NO [GO TO QCONF_ADULT2]
- 7 DON'T KNOW/NOT SURE [GO TO QCONF_ADULT2]
- 9 REFUSED [GO TO QCONF_ADULT2]

Q CONF_ADULT2 Is this your own cell phone or does it belong to one of your parents or a guardian?

- 1 CELL PHONE BELONGS TO MINOR
- 2 CELL PHONE BELONGS TO PARENT OR GUARDIAN [QCALLBACK1]
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

IF QCONF_ADULT2 = 1, SET DISPO TO 193: vS/O Q CONF_ADULT2: CELL PHONE BELONGS TO MINOR

IF QCONF_ADULT2=2, SET DISPO TO 62: Callback - Q CONF_ADULT2

IF QCONF_ADULT2 = 7 OR 9, SET DISPO TO 144: Hard Refusal - Q CONF2: DK / REF

IF CELL PHONE BELONGS TO MINOR [ANSWER = 1] READ: Thank you very much, but we are only interviewing persons aged 18 or older at this time. **END SURVEY**

IF DON'T KNOW OR REFUSED: Thank you very much for your time. **END SURVEY**

Q CALLBACK1 When would be a better time to call back and speak to a parent or guardian?

_____Day _____Time

IF 7 DON'T KNOW OR 9 REFUSED: Thank you very much for your time. END SURVEY.

Q CONF_CELL In order to make sure our information is correct, I would just like to double check with you. Is this a cellular telephone?

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

- 1 YES [GO TO CONF_PRVRES]

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

IF QCONF_CELL = 7 OR 9, SET DISPO TO 145: Hard Refusal - Q CONF_CELL: DK / REF
IF DON'T KNOW OR REFUSED: Thank you very much for your time. **END SURVEY**

CATI: UPDATE 'PTYPE' VARIABLE. SET TO 1 IF QCONF_CELL=1 (CELL); SET TO 2 (LANDLINE) IF QCONF_CELL=2.

CONF_PRVRES Do you live in a private home or apartment, or do you live in institutional housing, such as a dormitory or other group living situation?

INTERVIEWER: Read if needed:: Institutional housing includes places such as nursing homes, military barracks, college dormitories, and convents and monasteries.

INTERVIEWER: Code 1 for Private Residence and code 2 for Dormitory or Group Housing.

1 YES, PRIVATE HOME /APARTMENT [GO TO INTRO1]
2 NO, INSTITUTIONAL/GROUP HOUSING [GO TO Q9.12_13]
7 DON'T KNOW / NOT SURE [GO TO Q9.12_13]
9 REFUSED [GO TO Q9.12_13]

Q9.12_13 – How many children aged 12 months to 13 years old usually live or stay with you?

INTERVIEWER: Read if needed: Include all children aged 12 months to 13 years old who live or stay at this address.

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

IF Q9.12_13=0 OR 77 OR 99, THANK AND TERMINATE.

IF Q9.12_13=1 TO 25, GO TO NYCKIDS_RECRUITMENT.

If CONF_PRVRES = 2, 7 or 9 OR QHH=88, THEN SET DISPO TO 194: S/O CONF_PRVRES
IF QUOTAOUT BASED ON ZIP, THEN SET DISPO TO 211: S/O QUOTA OUT

IF 77 or 99: Thank you very much, but we are only interviewing people who have children in this age group at this time. **END SURVEY**

<p>CATI: CREATE CHILD_ELIG=0 (CHS Respondents Eligible for KIDS) CATI: 1<=Q9.12_13<=25 AND ((CONF_PRVRES=2, 7, OR 9) OR (QHH=88) THEN CHILD_ELIG=2 (CHS SCREENOUT – NOT A HOUSEHOLD) CATI: 1<=Q9.12_13<=25 AND (REPLICATE INELIGIBLE TERMINATE) THEN CHILD_ELIG=3 (CHS QUOTA OUT)</p>
--

INTRO1 FOR PTYPE=1 (CELL PHONES)

INTRO1 Thank you. I would like to ask some further questions about your health and health practices.

Participation is voluntary: you can stop the interview at any time or decide not to answer any question.

Any information you provide will be confidential. The Health Department will share the anonymous survey results of participants with the public so that more can be learned about the health of New Yorkers. 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. We also have a website at the Health Department for you to verify this survey.

In appreciation for the time that you spend answering our questions, we will provide you with ten dollars as a thank you.

CATI: CREATE THE FOLLOWING VARIABLES:

- UHF - ASSIGNED USING ORIGINAL RULES (BASED ON QZIP OR ZIP OF PLURALITY (QZIP1) FROM SAMPLE IF QZIP=77777/99999).
- UHFFLAG – SET TO 1 IF UHF ASSIGNED BASED ON QZIP, SET TO 2 IF ASSIGNED BASED ON ZIP OF PLURALITY (QZIP1) FROM SAMPLE
- HOODFU – IF QZIP=77777/99999 OR NON-NYC ZIP, SET 'HOODFU'=1 - ELSE GO TO QHH

NEIGHBORHOOD FOLLOW-UP QUESTIONS [ASK IF HOODFU=1]

IF Q BORO/Q CONF_NYC =1 [BRONX]:

NH1. What is the name of the neighborhood in **The Bronx** where you live?

[LIST OF NEIGHBORHOODS IN APPENDIX A.]

_____ Neighborhood

99 Refused [GO TO QWHICH]

IF NH1= 10 (FORDHAM), ASK NH1a

NH1a. Do you live between East Fordham Road and the Cross Bronx Expressway or between East Fordham Road and East Gun Hill Road?

1 Between East Fordham Road and the Cross Bronx Expressway (SET CD – 205)

2 Between East Fordham Road and East Gun Hill Road (SET CD – 207)

7 DON'T KNOW/NOT SURE

9 REFUSED

GO TO QHH

IF Q BORO/Q CONF_NYC =2 [BROOKLYN]:

NH2. What is the name of the neighborhood in **Brooklyn** where you live?

[LIST OF NEIGHBORHOODS IN APPENDIX A.]

_____ Neighborhood

99 Refused

IF NH2 = 13 (CROWN HEIGHTS), ASK NH2a

NH2a. Do you live between Eastern Parkway and Atlantic Avenue, or between Eastern Parkway and Clarkson Avenue?

1 Between Eastern Parkway and Atlantic Avenue (SET CD – 308)

2 Between Eastern Parkway and Clarkson Avenue (SET CD- 309)

7 DON'T KNOW/NOT SURE

9 REFUSED

GO TO QHH

IF Q BORO/Q CONF_NYC =3 [MANHATTAN]:

NH3. What is the name of the neighborhood in Manhattan where you live?

[LIST OF NEIGHBORHOODS IN APPENDIX A.]

_____ Neighborhood

99 Refused

IF NH3=10 (Harlem), ASK NH3a

NH3a. Do you live in West Harlem, Central Harlem, East Harlem, or do you just call it Harlem?

READ IF NEEDED: West Harlem is considered the areas between 110th Street on the south and 155th Street on the north, between the Hudson River and St. Nicholas Avenue on the east.

Central Harlem is considered the area between 110th St. on the south to Harlem River on the north, 5th Ave. on the east and St. Nicholas Ave to the west.

East Harlem is considered the area between 96th Street on the south to Harlem River on the north, from 5th Avenue to the East River. This neighborhood is sometimes referred to as "Spanish Harlem".

- 1 West Harlem (SET CD -109)
 - 2 Central Harlem (SET CD - 110)
 - 3 East Harlem or Harlem (SET CD - 111)
 - 7 Don't Know/Not Sure
 - 9 Refused
- GO TO QHH.**

IF Q BORO/Q CONF_NYC =4 [QUEENS]:

NH4. What is the name of the neighborhood in Queens where you live?

[LIST OF NEIGHBORHOODS IN APPENDIX A.]

____ Neighborhood
99 Refused

IF NH4 = 7 (CORONA), ASK NH4a

NH4a. Do you live between Roosevelt Avenue and Grand Central Parkway, or between Roosevelt Avenue and the Long Island Expressway?

- 1 Between Roosevelt Avenue and Grand Central Parkway(SET CD – 403)
 - 2 Between Roosevelt Avenue and the Long Island Expressway(SET CD – 404)
 - 7 Don't Know/Not Sure
 - 9 Refused
- GO TO QHH.**

IF Q BORO/Q CONF_NYC =5 [STATEN ISLAND]:

NH5. What is the name of the neighborhood in Staten Island where you live?

[LIST OF NEIGHBORHOODS IN APPENDIX A.]

____ Neighborhood
99 Refused

SET QUALIFIED LEVEL = 2 [QUALIFIED NYC ADULT]

82: Qualified Callback - Before QWHICH (Interview Language)

Q WHICH INTERVIEWER: SELECT LANGUAGE

- 1 English
- 2 Spanish
- 3 Russian
- 4 Chinese
- 5 Bengali
- 6 Haitian Creole

ASK IF QWHICH= 4

QCHINESE [INTERVIEWER: IS THAT MANDARIN OR CANTONESE?]

1 MANDARIN
2 CANTONESE

ID QWHICH = 14, SET LANGUAGE TO 10
ID QWHICH = 51, SET LANGUAGE TO 25
ID QWHICH = 50, SET LANGUAGE TO 4
ID QWHICH = 56, SET LANGUAGE TO 12
ID QWHICH = 59, SET LANGUAGE TO 69

CATI: CREATE VARIABLE QXVERS.

**QXVERS = 1 (LONG VERSION)
QXVERS = 2 (SHORT VERSION)**

CATI: USE RANDOMIZATION VARIABLE QXVERSNUM FROM SAMPLE FILE.

ASSIGN RANDOM NUMBER (QXVERSNUM) BETWEEN 1 AND 99,999, WHERE:

**QXVERSNUM <= 50,000 IS ASSIGNED QXVERS = 1 (LONG VERSION) AND
QXVERSNUM > 50,000 IS ASSIGNED QXVERS = 2 (SHORT VERSION).**

**AT START OF DATA COLLECTION, ASSIGN QXVERSNUM WITH 50-50 SPLIT OF RESPONDENTS
RECEIVING QXVERS = 1 (LONG VERSION).**

**CHANGES TO PROPORTION OF RESPONDENTS ASSIGNED LONGER VERSION WILL BE BASED
ON OVERALL SURVEY LENGTH.**

INSERT TIMESTAMP: TCell_Sum

HEALTH STATUS

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

INSERT TIMESTAMP: T1_Sum

ACCESS

ASK ALL

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

INTERVIEWER: Read if needed: Medicare is a health insurance program for people 65 and older or persons with disabilities.

INTERVIEWER: 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 IF Q2.1 = 1 [ASK IF R INSURED]

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

INTERVIEWER: 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 Medicaid including Medicaid Managed Care ("Family Health Plus"),
- 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 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 – Have you seen any doctor, nurse, or other health professional in the last 12 months?

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

ASK ALL

Q2.5 - 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

ASK ALL

Q2.6 - How long has it been since you had your teeth cleaned by a dentist or dental hygienist?

INTERVIEWER: Read only if needed:

- 1 Less than six months ago
- 2 6 months ago but less than 1 year ago
- 3 1 year ago but less than 2 years ago
- 4 2 years ago but less than 5 years ago
- 5 5 or more years ago
- 6 NEVER
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

INSERT TIMESTAMP: T2_Sum

CARDIOVASCULAR HEALTH

READ: Next are some questions about issues related to your health.

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 IF Q3.1 = 1 [ASK IF DIAGNOSED WITH HYPERTENSION]

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 IF Q3.2 = 1 [ASK IF DIAGNOSED WITH HYPERTENSION AND TOLD TO TAKE MEDS]

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 ALL

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

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

INSERT TIMESTAMP: T3_Sum

DIABETES, ASTHMA, and COPD

ASK ALL

Q4.1- 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

Q4.2 - 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 IF Q4.2 = 1 [ASK IF DIAGNOSED WITH ASTHMA]

Q4.3 – Do you still have asthma?

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

ASK IF Q4.2 = 1 [ASK IF DIAGNOSED WITH ASTHMA]

Q4.4 - 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 ALL

Q4.5 – Have you ever been told by a doctor, nurse, or other health professional that you have chronic obstructive pulmonary disease or COPD, emphysema, or chronic bronchitis?

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

INSERT TIMESTAMP: T4_Sum

MENTAL HEALTH

READ: The next few questions are about your mental health.

ASK ALL

Q5.1 – 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?

INTERVIEWER: If asked for help with mental health problem: The number is 1-888-NYC-WELL, text "well" to 65173, or online chat at "nyc.gov/nycwell"

- 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

Q5.2 – 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?

INTERVIEWER: If asked for help with mental health problem: The number is 1-888-NYC-WELL, text "well" to 65173, or online chat at "nyc.gov/nycwell"

- 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

Q5.3 – (During the past 30 days), how often did you feel...

Restless or fidgety?

(All of the time, most of the time, some of the time, a little of the time, or none of the time?)

INTERVIEWER: If asked for help with mental health problem: The number is 1-888-NYC-WELL, text "well" to 65173, or online chat at "nyc.gov/nycwell"

- 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

Q5.4 - (During the past 30 days), how often did you feel

Hopeless?

(All of the time, most of the time, some of the time, a little of the time, or none of the time?)

INTERVIEWER: If asked for help with mental health problem: The number is 1-888-NYC-WELL, text "well" to 65173, or online chat at "nyc.gov/nycwell"

- 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

Q5.5 - (During the past 30 days), how often did you feel

That everything was an effort?

(All of the time, most of the time, some of the time, a little of the time, or none of the time?)

INTERVIEWER: If asked for help with mental health problem: The number is 1-888-NYC-WELL, text "well" to 65173, or online chat at "nyc.gov/nycwell"

- 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

Q5.6 - (During the past 30 days), how often did you feel

Worthless?

(All of the time, most of the time, some of the time, a little of the time, or none of the time?)

INTERVIEWER: If asked for help with mental health problem: The number is 1-888-NYC-WELL, text "well" to 65173, or online chat at "nyc.gov/nycwell"

- 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 5.1 – Q 5.6,

RETAIN ORIGINAL VALUES FOR Q5.1-Q5.6 BUT RECODE NEW VALUES FOR:

CODE 1 “All of the time” = 4

CODE 2 “Most of the time” = 3

CODE 3 “Some of the time” = 2

CODE 4 A little of the of time” = 1

CODE 5 “None of the time” = 0

CODE 7 “DON’T KNOW” = 0

CODE 9 “REFUSED” = 0

K6SCORE = 5.1 + 5.2 + 5.3 + 5.4 + 5.5 + 5.6

IF K6SCORE>12 THEN **SPD_PY=1;**

ELSE IF K6SCORE<=12, THEN **SPD_PY =2;**

ASK IF SPD_PY=1

Q5.7 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

Q5.8- In the past 12 months, have you taken a prescription medication for a mental health problem?

1 YES

2 NO

7 DON'T KNOW/NOT SURE

9 REFUSED

ASK ALL

Q5.9- In the past 12 months, have you received any counseling for a mental health problem?

1 YES

2 NO

7 DON'T KNOW/NOT SURE

9 REFUSED

ASK ALL

Q5.10 - Was there a time in the past 12 months when you needed treatment for a mental health problem, but did not get it?

INTERVIEWER: If asked for help with mental health problem: The number is 1-888-NYC-WELL, text “well” to 65173, or online chat at “nyc.gov/nycwell”

1 YES

2 NO

7 DON'T KNOW/NOT SURE

9 REFUSED

INSERT TIMESTAMP: T5_Sum

HOUSING

Now I will ask a few questions about your home or apartment.

ASK ALL

Q6.1 - Is this home or apartment owned or rented?

- 1 OWNED (READ IF NEEDED: Owned by you or someone in your family)
- 2 RENTED
- 3 (VOL.) OCCUPIED WITHOUT PAYMENT OF RENT
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK IF Q6.1 NE 1

Q6.2 – Are you...

- 1 A public housing resident living in a building owned by the New York City Housing Authority, or are you,
- 2 Part of a household that receives rental assistance such as Section 8 or any other rental assistance program, or are you,
- 3 Part of a household living in a rent-controlled or rent-stabilized home, or
- 4 None of these?
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK ALL

Q6.3 – How long have you lived in your home or apartment?

CATI: ALLOW MULTIPLE RESPONSES

- 1 MONTHS [RANGE 1-12]
- 2 YEARS [RANGE 1-100]
- 7777 DON'T KNOW/NOT SURE
- 9999 REFUSED

IF QXVERS=1

Q6.4 – An eviction is when your landlord, a roommate, a housing court, or a bank forces you to move when you don't want to. Have you ever been evicted?

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

ASK ALL

Q6.5 – During the past 12 months, was there any month when you 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

Q6.7 – In the past 12 months, have you had visible mold or mildew on the walls or ceilings of your home?

INTERVIEWER: If respondent asks about mold or mildew on shower curtains, toilet or tub edges, read: We are only interested in mold or mildew on the walls or ceilings of your home.

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

ASK IF Q4.2 = 1

Q6.6 – During the past 30 days, on how many days have you seen any cockroaches inside your home?

- __ NUMBER OF DAYS [RANGE=0-30]
- 7 7 DON'T KNOW/NOT SURE
- 9 9 REFUSED

INSERT TIMESTAMP: T6_Sum

NEIGHBORHOOD ENVIRONMENT

READ: The next question asks about your neighborhood and the people who live there. By neighborhood we mean the area around where you live and where you might go to religious services, run errands, such as shopping or visiting with neighbors.

Please tell me whether you strongly agree, somewhat agree, neither agree nor disagree, somewhat disagree, or strongly disagree with the following statement?

ASK ALL

Q7.1 – People in your neighborhood are willing to help their neighbors.

INTERVIEWER: Read if needed:

- 1 STRONGLY AGREE
- 2 SOMEWHAT AGREE
- 3 NEITHER AGREE NOR DISAGREE
- 4 SOMEWHAT DISAGREE
- 5 STRONGLY DISAGREE
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

INSERT TIMESTAMP: T7_Sum

SET QUALIFIED LEVEL = 3

83: Qualified Callback - Before Q8.1 (Tobacco)

123: Qualified Soft Refusal - Before Q8.1 (Tobacco)

163: Qualified Hard Refusal - Before Q8.1 (Tobacco)

TOBACCO

The next few questions are about tobacco.

ASK ALL

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

INTERVIEWER: Read if needed: 100 cigarettes=5 packs.

INTERVIEWER: Read if needed: "Do not include: electronic cigarettes, herbal cigarettes, cigars, cigarillos, little cigars, pipes, bidis, kreteks, water pipes or hookahs or marijuana."

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

ASK IF Q8.1 = 1, ELSE SKIP TO Q8.8 [ASK IF SMOKED AT LEAST 100 CIGS]

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 IF Q8.2 = 1 [ASK IF SMOKE EVERY DAY]

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 IF Q8.2 = 2 [ASK IF SMOKE SOME DAYS]

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 IF Q8.2 = 2 AND Q8.3a ≠ 777 OR 999 [ASK IF SMOKE SOME DAYS]

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 if Q8.2 = 1 OR 2 [ASK IF CURRENT SMOKER]

Q8.4 – Thinking about the type of cigarettes you usually smoke, are they menthol or non-menthol?

1 Menthol
2 Non-menthol
3 NO USUAL TYPE OF CIGARETTE
7 DON'T KNOW/NOT SURE
9 REFUSED

ASK IF Q8.2 = 1 OR 2 [ASK IF CURRENT SMOKER]

Q8.5 - Was the last cigarette you smoked from a carton, a pack, a single or loosie, bummed or did you roll your own?

1 CARTON
2 PACK
3 SINGLE/LOOSIE
4 BUMMED
5 ROLLED OWN
7 DON'T KNOW/NOT SURE
9 REFUSED

ASK IF Q8.5 = 1, 2 OR 3 [ASK IF LAST CIG FROM A CARTON, PACK, OR SINGLE]

Q8.6 How much did you pay for that [ANSWER TO Q8.5]?

INTERVIEWER: Do not round – put in exact dollars/cents.

Q8.6A CARTON: ENTER PRICE IN DOLLARS AND CENTS

\$__ . __ [RANGE 1-180 DOLLARS]
8888 DID NOT PAY FOR CIGARETTES
7777 DON'T KNOW/NOT SURE
9999 REFUSED

Q8.6B PACK: ENTER PRICE IN DOLLARS AND CENTS

\$__ . __ [RANGE 1-18 DOLLARS]
8888 DID NOT PAY FOR CIGARETTES
7777 DON'T KNOW/NOT SURE
9999 REFUSED

Q8.6C SINGLE/LOOSIE: ENTER PRICE IN CENTS

\$__ . __ [RANGE 1 CENT to 2 DOLLARS]
8888 DID NOT PAY FOR CIGARETTES
7777 DON'T KNOW/NOT SURE
9999 REFUSED

ASK IF Q8.5 = 1, 2, OR 3 AND Q8.6 NE 8888 [LAST CIG. FROM CARTON, PACK OR SINGLE]

Q8.7 – Where did you buy the last cigarette you smoked? Was it in your neighborhood, in another part of New York City, or outside of New York City?

- 1 In your neighborhood
- 2 In another part of New York City
- 3 Outside of New York City
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK ALL

Q8.8 - In the past 12 months, have you tried an electronic cigarette, also known as an e-cigarette?

INTERVIEWER IF ASKED: INCLUDE "JUUL"

- 1 YES
- 2 NO
- 3 DO NOT KNOW WHAT ELECTRONIC/E-CIGARETTES ARE
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK IF Q8.8 = 1 [ASK IF USED E-CIG PAST 12 MONTHS]

Q8.9 – In the past 30 days, did you use an electronic cigarette 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 ALL

Q8.10 – In the past 12 months, have you smoked a hookah, also called a water pipe?

INTERVIEWER: Read if needed: A hookah is a tobacco pipe with a long tube that draws smoke through water contained in a bowl.

INTERVIEWER NOTE: If asked:, Narghile [nar – ge - IE], Arghila [ar – ge – la], or Kaliaan [kal – E – yan] are other names for a hookah.

- 1 YES
- 2 NO
- 3 DO NOT KNOW WHAT A HOOKAH IS
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

INSERT TIMESTAMP: T8_Sum

DEMOGRAPHICS

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

ASK ALL

Q9.1 - What is your age?

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

ASK IF Q9.1 = 07 OR 09, ELSE SKIP TO Q9.3 [ASK IF AGE REFUSED]

Q9.1a - 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...?

- 1 75 or older,
- 2 65-74,
- 3 45-64,
- 4 30-44,
- 5 25-29, or
- 6 18-24?
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK ALL

Q9.3 – I want to ask you about your gender identity and your sex assigned at birth. Gender identity refers to how you identify yourself, which may or may not be the same as the sex you were assigned at birth. How do you currently identify your gender? Do you identify as ...

INTERVIEWER: Read answer choices. If respondent firmly gives one response, stop reading answer choices and accept that response. Multiple responses allowed. Do not probe.

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

- 1 1) a man,
- 2 2) a woman,
- 3 3) a transgender man (TRANS MAN, TRANS MASCULINE, TRANS FEMALE-TO-MALE, MAN OF TRANSGENDER EXPERIENCE),
- 4 4) a transgender woman (TRANS WOMAN, TRANS FEMININE, TRANS MALE-TO-FEMALE, WOMAN OF TRANSGENDER EXPERIENCE),
- 5 5) a non-binary person (GENDERQUEER PERSON, GENDER NONCONFORMING PERSON, TWO-SPIRIT, NEITHER WOMAN OR MAN), or
- 6 6) or, a gender not mentioned?
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK IF Q9.3 = 6

Q9.3a – How do you identify your gender?(SPECIFY)_____

ASK ALL

Q9.2 – What was your sex assigned at birth? Male or female?

INTERVIEWER: If respondent says “Don’t Know,” probe: When you were born, were you labeled as a boy or a girl?

INTERVIEWER: If the respondent says they were born with intersex traits, probe: What was the sex listed on your original birth certificate? Male or female?

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

ASK IF (Q9.2 = 1 AND Q9.3 = 2) OR IF (Q9.2 = 2 AND Q9.3 = 1) [ASK IF IDENTIFY DIFFERENTLY FROM SEX AT BIRTH BUT DOES NOT CHOOSE TRANSGENDER IN Q9.3] SKIP IF RESPONDENT PROVIDED MULTIPLE RESPONSES TO Q9.3

Q9.3b – To confirm, you identify as [Q9.3 FILL] and your sex assigned at birth was [Q9.2 FILL], correct?

- 1 YES; RESPONDENT HAS A GENDER IDENTITY DIFFERENT THAN THEIR SEX AT BIRTH
- 2 NO
- 7 DON’T KNOW/NOT SURE
- 9 REFUSED

ASK IF Q9.3b = 2

Q9.3b2 – We have your identity as [Q9.3 FILL] and your sex assigned at birth as [Q9.2 FILL]. Should we update your identity or your assigned sex at birth?

- 1 UPDATE IDENTITY [Q9.3 UPDATE TO EQUAL Q9.2]
- 2 UPDATE ASSIGNED SEX AT BIRTH [Q9.2 UPDATE TO EQUAL Q9.3]
- 7 DON’T KNOW/NOT SURE
- 9 REFUSED

ASK IF Q9.3 = 7 AND Q9.2 = 1 OR 2

Q9.3c – Are you exploring your gender identity and are not sure how you identify, do you not understand the question, or do you identify as [Q9.2 FILL]?

- 1 You are exploring your gender identity and not sure how you identify,
- 2 You do not understand the question,
- 3 You identify as [Q9.2 fill]
- 7 DON’T KNOW/NOT SURE
- 9 REFUSED

ASK IF Q9.3 = 3 AND Q9.2 = 1

Q9.3d: Transgender men are often persons who identify as men and were assigned female sex at birth. To confirm, you identify as a transgender man and were assigned male sex at birth?

- 1 YES: RESPONDENT IDENTIFIES AS TRANSGENDER MAN AND WAS ASSIGNED MALE SEX AT BIRTH
- 2 NO
- 7 DON’T KNOW/NOT SURE
- 9 REFUSED

ASK IF Q9.3d = 2

Q9.3d2 – Do you identify as a transgender man and were assigned female sex at birth, do you identify as a woman or transgender woman and were assigned male sex at birth, or do you identify as a man and were assigned male sex at birth?

- 1 Identify as a transgender man and were assigned female sex at birth
- 2 Identify as a woman or transgender woman and were assigned male sex at birth
- 3 Identify as a man and were assigned male sex at birth
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK IF Q9.3 = 4 AND Q9.2 = 2

Q9.3e: Transgender women are often persons who identify as women and were assigned male sex at birth. To confirm, you identify as a transgender woman and were assigned female sex at birth?

- 1 YES: RESPONDENT IDENTIFIES AS A TRANSGENDER WOMAN AND WAS ASSIGNED FEMALE SEX AT BIRTH
- 2 NO
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK IF Q9.3e = 2

Q9.3e2 – Do you identify as a transgender woman and were assigned male sex at birth, do you identify as a man or transgender man and were assigned female sex at birth, or do you identify as a woman and were assigned female sex at birth?

- 1 Identify as a transgender woman and were assigned male sex at birth
- 2 Identify as a man or transgender man and were assigned female sex at birth
- 3 Identify as a woman and were assigned female sex at birth
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

IF Q9.2 = 1 AND Q9.3 = 1 THEN GENDERID=1 [CIS-MALE]
IF Q9.2 = 1 AND Q9.3 = 2 AND Q9.3B2=1 THEN GENDERID=1 [CIS-MALE]
IF Q9.2 = 2 AND Q9.3 = 1 AND Q9.3B2=2 THEN GENDERID=1 [CIS-MALE]
IF Q9.2 = 1 AND Q9.3 = 7 AND Q9.3C=3 THEN GENDERID=1 [CIS-MALE]
IF Q9.2 = 1 AND Q9.3 = 7 AND Q9.3C = 2 THEN GENDERID=1 [CIS-MALE]
IF Q9.2 = 1 AND Q9.3 = 3 AND Q9.3D2 = 3 THEN GENDERID=1 [CIS-MALE]

IF Q9.2 = 2 AND Q9.3 = 2 THEN GENDERID=2 [CIS-FEMALE]
IF Q9.2 = 2 AND Q9.3 = 1 AND Q9.3B2=1 THEN GENDERID=2 [CIS-FEMALE]
IF Q9.2 = 1 AND Q9.3 = 2 AND Q9.3B2=2 THEN GENDERID=2 [CIS-FEMALE]
IF Q9.2 = 2 AND Q9.3 = 7 AND Q9.3C=3 THEN GENDERID=2 [CIS-FEMALE]
IF Q9.2 = 2 AND Q9.3 = 7 AND Q9.3C =2 THEN GENDERID=2 [CIS-FEMALE]
IF Q9.2 = 2 AND Q9.3 = 4 AND Q9.3E2 = 3 THEN GENDERID = 2 [CIS-FEMALE]

IF Q9.3 = 4 THEN GENDERID=3 [TRANS-WOMAN]
IF Q9.2 = 1 AND Q9.3 = 2 AND Q9.3B=1 THEN GENDERID=3 [TRANS-WOMAN]
IF Q9.2 = (7 OR 9) AND Q9.3 = 4 THEN GENDERID=3 [TRANS-WOMAN]
IF Q9.2 = 1 AND Q9.3 = 3 AND Q9.3D2 = 2 THEN GENDERID=3 [TRANS-WOMAN]
IF Q9.2 = 2 AND Q9.3 = 4 AND (Q9.3E = 1 OR Q9.3E2 = 1) THEN GENDERID = 3 [TRANS-WOMAN]

IF Q9.3 = 3 THEN GENDERID=4 [TRANS-MAN]

IF Q9.2 = 2 AND Q9.3 = 1 AND Q9.3B=1 THEN GENDERID=4 [TRANS-MAN]
 IF Q9.2 = 7 OR 9 AND Q9.3 = 3 THEN GENDERID=4 [TRANS-MAN]
 IF Q9.2 = 1 AND Q9.3 = 3 AND (Q9.3D = 1 OR Q9.3D2 = 1) THEN GENDERID=4 [TRANS-MAN]
 IF Q9.2 = 2 AND Q9.3 = 4 AND Q9.3E2 = 2 THEN GENDERID = 4 [TRANS-MAN]

IF Q9.2 = 1 AND Q9.3 =(5 OR 6) THEN GENDERID=5 [NON-BINARY MALE]
 IF Q9.2 = 1 AND Q9.3 = 7 AND Q9.3C=1 THEN GENDERID=5 [NON-BINARY MALE]

IF Q9.2 = 2 AND Q9.3 = (5 OR 6) THEN GENDERID=6 [NON-BINARY FEMALE]
 IF Q9.2 = 2 AND Q9.3 = 7 AND Q9.3C=1 THEN GENDERID=6 [NON-BINARY FEMALE]

IF Q9.2 = (7 OR 9) AND Q9.3 = 1 THEN GENDERID=7 [UNSPECIFIED MALE]
 IF Q9.2 = 1 AND Q9.3 = 9 THEN GENDERID=7 [UNSPECIFIED MALE]

IF Q9.2 = (7 OR 9) AND Q9.3 = 2 THEN GENDERID=8 [UNSPECIFIED FEMALE]
 IF Q9.2 = 2 AND Q9.3 = 9 THEN GENDERID=8 [UNSPECIFIED FEMALE]

IF Q9.2 = (7 OR 9) AND Q9.3 = 5 THEN GENDERID=9 [UNASSIGNED]
 IF Q9.2 = (7 OR 9) AND Q9.3 = 6 THEN GENDERID=9 [UNASSIGNED]
 IF Q9.2 = (7 OR 9) AND Q9.3 = 7 OR 9 THEN GENDERID=9 [UNASSIGNED]
 IF Q9.2 = 1 AND Q9.3 = 2 AND Q9.3B= (7 OR 9) THEN GENDERID=9 [UNASSIGNED]
 IF Q9.2 = 2 AND Q9.3 = 1 AND Q9.3B= (7 OR 9) THEN GENDERID=9 [UNASSIGNED]
 IF Q9.3C = (7 OR 9) THEN GENDERID=9 [UNASSIGNED]
 IF MORE THAN ONE RESPONSE TO Q9.3 THEN GENDERID=9 [UNASSIGNED]

ASK ALL

Q9.4 - Are you Hispanic or (IF GENDERID EQ 1,4,5,7,9 OR Q9.2 EQ 7,9: Latino / IF GENDERID EQ 2,3,6,8: Latina)?

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

ASK IF Q9.4 = 1, ELSE SKIP TO Q9.5 [ASK IF HISPANIC/LATINO]

Q9.4a2 - Please tell me which group best represents your Hispanic or (IF GENDERID EQ 1,4,5,7,9 OR Q9.2 EQ 7,9: Latino / IF GENDERID EQ 2,3,6,8: Latina) origin or ancestry:

INTERVIEWER: Read answer choices, accept first response.

- 01 Puerto Rican,
- 02 Dominican,
- 03 Mexican,
- 04 Ecuadorian,
- 05 Colombian,
- 06 Cuban,
- 07 other Central American,
- 08 other South American, or
- 88 something else (specify)_____?
- 09 SPANISH
- 77 DON'T KNOW
- 99 REFUSED

ASK ALL

Q9.5 (IF Q9.4=1 THEN READ: Some people, aside from being Hispanic or (IF GENDERID EQ 1,4,5,7,9 OR Q9.2 EQ 7,9: Latino / IF GENDERID EQ 2,3,6,8: Latina) also consider themselves to be a member of a racial group.)

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

CODE ALL THAT APPLY

INTERVIEWER: Read answer choices, multiple response. If respondent says "African-American," code as "02 Black."

- 01 White,
- 02 Black or Black American,
- 03 Asian,
- 04 Middle Eastern or North African,
- 05 Native Hawaiian or Other Pacific Islander,
- 06 American Indian, Alaska Native, or
- 07 Something else? (SPECIFY: What is the other race you consider yourself to be?) _____
- 08 HISPANIC/LATINO
- 77 DON'T KNOW/NOT SURE
- 99 REFUSED

ASK IF Q9.5 = 3 [ASK IF ASIAN]

Q9.6 – Please tell me which group best represents your Asian heritage or ancestry?

INTERVIEWER: Read answer choices, accept first response.

- 01 Chinese,
- 02 Asian Indian,
- 03 Filipino,
- 04 Korean,
- 05 Japanese,
- 06 Vietnamese, or
- 07 Something else? (SPECIFY: What other group best represents your Asian heritage or ancestry? _____)
- 77 DON'T KNOW/NOT SURE
- 99 REFUSED

ASK IF Q9.5 = 2 [ASK IF BLACK]

Q9.8 – Some people in addition to being Black, have a certain heritage or ancestry. Do you identify with any of these?

INTERVIEWER: READ ANSWER CHOICES, MULTIPLE RESPONSE:

- 1 African American (READ ONLY IF NEEDED: Descended from people who were enslaved in the US),
- 2 Caribbean or West Indian (READ ONLY IF NEEDED: Descended from people who were enslaved in Caribbean and West Indian countries),
- 3 A recent immigrant or the child of recent immigrants from Africa, or
- 4 Another group? (SPECIFY: What other heritage or ancestry do you identify with?) _____
- 5 DOES NOT IDENTIFY WITH ANY OF THESE
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

Q9.7 – Where were you born? Please tell me the country or US territory .

INTERVIEWER: Code either USA or outside USA based on response. Puerto Rico and other US territories are considered outside USA.

- 1 USA
- 2 OUTSIDE USA (GO TO Q9.7a)
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK IF Q9.7 = 2 [ASK IF BORN OUTSIDE U.S.]
Q9.7a

- 60. AFRICA
- 61. ALBANIA
- 62. ANTIGUA
- 01. ARGENTINA
- 64. AUSTRIA
- 02. AUSTRALIA
- 03. BANGLADESH
- 04. BARBADOS
- 05. BELARUS
- 68. BELIZE
- 06. BOLIVIA
- 07. BRAZIL
- 08. CANADA
- 09. CARIBBEAN
- 228. CENTRAL AFRICA
- 10. CHILE
- 11. CHINA
- 12. COLOMBIA
- 13. COSTA RICA
- 14. CUBA
- 227. CZECH REPUBLIC
- 73. CZECHOSLOVAKIA
- 15. DOMINICAN REPUBLIC
- 127. EASTERN AFRICA
- 16. ECUADOR
- 17. EGYPT
- 18. EL SALVADOR
- 74. ENGLAND
- 75. EUROPE
- 19. FRANCE
- 20. GERMANY
- 21. GHANA
- 22. GREECE
- 78. GRENADA
- 23. GUATEMALA
- 79. GUINEA
- 24. GUYANA
- 25. HAITI
- 26. HONDURAS
- 27. HONG KONG
- 28. HUNGARY
- 29. INDIA
- 81. IRAN
- 30. IRELAND
- 31. ISRAEL
- 32. ITALY
- 33. JAMAICA
- 34. JAPAN
- 35. KOREA
- 135. LIBERIA
- 87. MALAYSIA
- 137. MALI
- 36. MEXICO
- 37. NICARAGUA
- 38. NIGERIA
- 229. NORTHERN AFRICA
- 39. PAKISTAN
- 40. PANAMA
- 41. PERU
- 42. PHILIPPINES
- 43. POLAND
- 44. PUERTO RICO
- 45. ROMANIA
- 46. RUSSIA
- 97. SENEGAL
- 47. SIERRA LEONE
- 166. SLOVAKIA
- 48. SOUTH AMERICAN
- 49. SPAIN
- 230. SOUTHERN AFRICA
- 102. ST. LUCIA
- 103. ST. VINCENT
- 104. SURINAME
- 105. SWEDEN
- 50. TAIWAN
- 107. THAILAND
- 51. TRINIDAD AND TOBAGO
- 52. TURKEY
- 53. UKRAINE
- 54. UNITED KINGDOM (INCLUDES ENGLAND, N. IRELAND, SCOTLAND, WALES)
- 108. URUGUAY
- 109. UZBEKISTAN
- 55. VENEZUELA
- 56. VIETNAM
- 110. VIRGIN ISLANDS
- 111. WESTERN AFRICA
- 57. WEST INDIAN
- 58. YUGOSLAVIA
- 66. OTHER (SPECIFY) _____
- 77. DON'T KNOW/NOT SURE
- 99. REFUSED

ASK ALL

Q9.9 - Are you. . .

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

ASK ALL

Q9.10 - Now I'll read a list of terms people sometimes use to describe themselves:

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

[IF GENDERID = 1,4,5,7- READ] Are you 1) gay, 2) straight - that is not gay, 3) bisexual, or 4) something else.

[IF GENDERID = 2,3,6,8,9 – READ] Are you 1) lesbian or gay, 2) straight - that is not lesbian or gay, 3) bisexual, or 4) something else.

INTERVIEWER: Read responses again, if needed:

- 1 Gay [GENDERID = 2,3,6,8,9 – READ: or lesbian]
- 2 Straight, that is not gay
- 3 Bisexual, or
- 4 Something else
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

IF Q9.10 = 7 [ASK IF DON'T KNOW TO Q9.10]

Q9.10a – Do you not understand the words, are you not sure yet, or do you mean something else?

- 1 Don't understand the words
- 2 Not sure yet, or
- 3 Something else
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

IF Q9.10 = 4 OR Q9.10a = 3 [ASK IF 'SOMETHING ELSE' TO Q9.10 OR Q9.10a]

Q9.10b –What do you mean by something else? (SPECIFY)_____

READ: Now a few more questions about yourself and your household.

ASK ALL

Q9.11 - What is the highest grade or year of school you completed?

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

ASK IF PTYPE=1 [ASK IF CELL PHONE INTERVIEW]

CQHH - How many members of your household, including yourself, are 18 years of age or older?

INTERVIEWER: Read if needed: Household members are those who spend a majority of their time living in the household.

RECORD 99 FOR REFUSED/DK

_____ Number of adults [RANGE 1-20]

ASK ALL

Q9.12 - How many children 17 years old or younger usually live or stay with you?

INTERVIEWER: Read if needed: Include all children who live or stay with you.

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

ASK IF Q9.12 GREATER THAN 1 BUT NOT 77 OR 99 [ASK IF MORE THAN 1 CHILD IN HOUSEHOLD]

Q9.12a - How many of these children are less than **12 months old**?

INTERVIEWER: Read if needed: Include all children aged 0 to 12 months.

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

ASK IF Q9.12 = 1 [ASK IF ONLY 1 CHILD IN HOUSEHOLD]

Q9.12a1 - Is this child less than **12 months old**?

- 1 Yes
- 2 No
- 77 DON'T KNOW
- 99 REFUSED

ASK IF Q9.12 GREATER THAN 1 BUT NOT 77 OR 99 AND Q9.12a NE Q9.12 [ASK IF CHILDREN IN HOUSEHOLD], ELSE SKIP TO Q9.13

Q9.12b - How many of these children are **12 months to 13 years old**?

INTERVIEWER: Read if needed: Include all children aged 12 months to 13 years old who live or stay with you.

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

ASK IF Q9.12a1 = 0 [ASK IF ONLY 1 CHILD IN HOUSEHOLD AND CHILD IS NOT LESS THAN 12 MONTHS]

Q9.12b1 - Is this child **12 months to 13 years old**?

1 Yes
2 No
77 DON'T KNOW
99 REFUSED

**ASK IF Q9.12b GREATER THAN 1 BUT NOT 77 OR 99.
IF Q9.12b = 0, SKIP TO Q9.13 AND AUTOCODE AS 0**

Q9.12c - How many of these [Q9.12b] children are **12 months to 4 years old**? Please do NOT count any children under 12 months of age.

[IF Q9.12b GT 1: INTERVIEWER: Read if needed: Include all children aged 12 months to 4 years old who live or stay with you.]

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

ASK IF Q9.12b = 1 OR Q9.12b1 = 1 [ASK IF ONLY 1 CHILD IN HOUSEHOLD IS BETWEEN 12 MONTHS AND 13 YEARS OLD]

Q9.12c1 - Is this child **12 months to 4 years old**?

1 Yes
2 No
77 DON'T KNOW
99 REFUSED

VARIABLES FOR NYC KIDS

CATI: Create variable AGE0TO12MOS to store total number of children ages 0 to 12 months

AGE0TO12MOS = If Q9.12a is not blank, set AGE0TO12MOS = Q9.12a

Else if Q9.12a1 = 1, set AGE0TO12MOS = 1

Else if Q9.12a1 = 2, set AGE0TO12MOS = 0

Else if Q9.12a1 is not = 1 or 2, set AGE0TO12MOS = Q9.12a1

CATI: Create variable AGE1TO13YRS to store total number of other children 1 to13

AGE1TO13YRS = If Q9.12b is not blank, set AGE1TO13YRS = Q9.12b

Else if Q9.12b1 = 1, set AGE1TO13YRS = 1
Else if Q9.12b1 = 2, set AGE1TO13YRS = 0
Else if Q9.12b1 is not = 1 or 2, set AGE1TO13YRS = Q9.12b1

CATI: Create variable AGE1TO4YRS to store total number of children 1 to 4

AGE1TO4YRS = If Q9.12c is not blank, set AGE1TO4YRS = Q9.12b
Else if Q9.12c1 = 1, set AGE1TO4YRS = 1
Else if Q9.12c1 = 2, set AGE1TO4YRS = 0
Else if Q9.12c1 is not = 1 or 2, set AGE1TO4YRS = Q9.12c1

CATI: Create variable AGE5TO13YRS to store total number of children 5 to 13

AGE5TO13YRS = If either AGE1TO13YRS or AGE1TO4YRS = 77 or 99, set AGE5TO13YRS to 77
Else set AGE5TO13YRS = AGE1TO13YRS - AGE1TO4YRS

CATI: Create variable AGE14TO17 to store total number of children 14 to 17

AGE14TO17YRS = If either AGE0TO12MOS or AGE1TO13YRS = 77 or 99, set AGE14TO17YRS to 77
Else set AGE14TO17YRS = Q9.12 - SUM(AGE0TO12MOS + AGE1TO13YRS)

CATI: IF 1<=Q9.12b<=25 THEN CHILD_ELIG=1 (CHS COMPLETE)

**CATI: IF 1<=Q9.12_13<=25 AND ((CONF_PRVRES=2, 7, OR 9) OR (QHH=88) THEN CHILD_ELIG=2
(CHS SCREENOUT - NOT A HOUSEHOLD)**

**CATI: IF 1<=Q9.12_13<=25 AND (REPLICATE INELIGIBLE TERMINATE) THEN CHILD_ELIG=3 (CHS
QUOTA OUT)**

ASK ALL

Q9.13 - Are you currently. . .

01 Employed for wages or salary,

INTERVIEWER: If respondent does not pick 01, read off 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.

INSERT TIMESTAMP: T9_Sum

IF Q9.13 = 1, 2 [EMPLOYED FOR WAGES, SELF-EMPLOYED]

READ: Now I'm going to ask you about your work.

ASK IF Q9.13 = 1 OR 2 [EMPLOYED FOR WAGES OR SELF-EMPLOYED]

Q9.13b – What kind of work do you do? For example, registered nurse, janitor, cashier, auto mechanic.

INTERVIEWER : If respondent is unclear: ask: "What is your job title?"

INTERVIEWER: If respondent has more than one job, ask: "What is your main job?"

_____ [RECORD ANSWER]
77 – DON'T KNOW/NOT SURE
99 - REFUSED

Q9.13c – What kind of business or industry do you work in? For example, in a hospital, elementary school, clothing manufacturing, or restaurant.

_____ [RECORD ANSWER]
77 – DON'T KNOW/NOT SURE
99 - REFUSED

IF Q9.13 = 8 [UNEMPLOYED FOR LESS THAN ONE YEAR]

READ: Now I'm going to ask you about your most recent work.

Q9.13d – What kind of work did you do? For example, registered nurse, janitor, cashier, auto mechanic.

INTERVIEWER: 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?"

_____ [RECORD ANSWER]

77 – DON'T KNOW/NOT SURE

99 - REFUSED

IF Q9.13 = 8 [UNEMPLOYED FOR LESS THAN ONE YEAR]

Q9.13e – What kind of business or industry did you work in? For example, in a hospital, elementary school, clothing manufacturing, or restaurant.

_____ [RECORD ANSWER]

77 – DON'T KNOW/NOT SURE

99 - REFUSED

INSERT TIMESTAMP: T10_Sum

If Q9.12 or CQHH = 77 or 99, skip to Q9.15

Create new field NHOUSE = QHH/CQHH (Number of adults) + Q9.12(Number of Children)

USE NHOUSE to create a field (PVTYLVL) to populate the fill for Q9.14

IF NHOUSE = 1 THEN PVTYLVL = 12,490

IF NHOUSE = 2 THEN PVTYLVL = 16,910

IF NHOUSE = 3 THEN PVTYLVL = 21,330

IF NHOUSE = 4 THEN PVTYLVL = 25,750

IF NHOUSE = 5 THEN PVTYLVL = 30,170

IF NHOUSE = 6 THEN PVTYLVL = 34,590

IF NHOUSE = 7 THEN PVTYLVL = 39,010

IF NHOUSE = 8 THEN PVTYLVL = 43,430

IF NHOUSE = 9 THEN PVTYLVL = 47,850

IF NHOUSE = 10 THEN PVTYLVL = 52,270

IF NHOUSE = 11 THEN PVTYLVL = 56,690

IF NHOUSE = 12 THEN PVTYLVL = 61,110

IF NHOUSE = 13 THEN PVTYLVL = 65,530

IF NHOUSE = 14 THEN PVTYLVL = 69,950

IF NHOUSE = 15 THEN PVTYLVL = 74,370

IF NHOUSE GT 15 THEN PVTYLVL = 43,430 + (NHOUSE-8 * 4,420)

READ SCREEN: The next question is about your combined household income.

[READ IF NHOUSE>1: By household income we mean the combined income from everyone living in the household including even roommates or those on disability income.]

ASK ALL

Q9.14 - Is your household's annual income from all sources:

- 02 Less than \$ (PVTYLVL*2) IF "NO," ASK 05; IF "YES," ASK 01
- 01 Less than (PVTYLVL) .
IF "NO," CODE 02 (100-199%); IF "YES," CODE 01 (< 100%)
- 05 Less than \$ (PVTYLVL*5) IF "NO," ASK 06 (500-599%); IF "YES," ASK 04 (300-399%)
- 06 Less than \$ (PVTYLVL*6) IF "NO," ASK 07 (>700%); IF "YES," CODE 06 (500-599%)
- 04 Less than \$ (PVTYLVL*4) IF "NO," CODE 05; IF "YES," ASK 03 (200-299%)
- 07 Is it \$ (PVTYLVL*7 or more? (IF "YES", CODE 08 (700%+), IF NO, CODE 07 600-699%)

- 08 \$ (PVTYLVL*8)
- 03 Less than \$ (PVTYLVL*3) IF "NO," CODE 04; IF "YES," CODE 03
- 77 DON'T KNOW/NOT SURE
- 99 REFUSED

ASK IF Q9.14_02 = 77 OR 99, ELSE SKIP TO Q9.15 [ASK IF INCOME REFUSED]

Q9.14a - 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

ASK IF Q9.14 IS 100%-199% FPL [Q9.14=2 OR Q9.14a=2]

Q9.14b – Is your combined household's annual income from all sources less than [PVTYLVL*1.38]?

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

IF Q2.1 = 2, 7,9 AND Q9.14 = 01 OR Q9.14a = 1 OR Q9.14b = 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.

READ: Now I will ask you about your height and weight

ASK ALL

Q9.15 - About how tall are you without shoes?

INTERVIEWER: Read if needed: You can answer in either feet and inches or in centimeters.

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

ASK ALL

Q9.16 - About how much do you weigh without shoes?

INTERVIEWER: Read if needed: You can answer in either pounds or kilograms.

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.

INSERT TIMESTAMP: T11_Sum

BMI FOLLOW-UP QUESTIONS

IF Q9.16 (WEIGHT) = 9999 OR 7777 AND Q9.15 (HEIGHT) ≠ 9999 OR 7777 (IS NOT MISSING), THEN PUT HEIGHT INTO BMI CALCULATOR AND ASK Q9.17a, Q9.17b, Q9.17c, Q9.17d (OR ASK Q9.17e, Q9.17f, Q9.17g, Q9.17h FOR METRIC).

IF Q9.15 (HEIGHT) = 9999 OR 7777 AND Q9.16 (WEIGHT) ≠ 9999 OR 7777 (IS NOT MISSING), THEN PUT WEIGHT INTO BMI CALCULATOR AND ASK Q9.18a, Q9.18b, Q9.18c, Q9.18d (OR ASK Q9.18e, Q9.18f, Q9.18g, Q9.18h FOR METRIC).

$BMI = 703 * LBS / inches^2$

CRITICAL WEIGHT FOR ENGLISH VERY OBESE: =
.049 * (Q9.15 height IN) * (Q9.15 height IN)

CRITICAL WEIGHT FOR ENGLISH OBESE: =
.0427 * (Q9.15 height IN) * (Q9.15 height IN)

CRITICAL WEIGHT FOR ENGLISH OVERWEIGHT: =
.0356*(Q9.15 height IN)*(Q9.15 height IN)

CRITICAL WEIGHT FOR ENGLISH UNDERWEIGHT: =
.0263*(Q9.15 height IN)*(Q9.15 height IN)

ASK IF Q9.16 = 9999 OR 7777 AND Q9.15 ≠ 9999 OR 7777, ELSE SKIP TO Q11.1
[ASK IF EITHER WEIGHT OR HEIGHT IS DON'T KNOW OR REFUSED]

Q9.17a - Do you weigh less than [critical weight for **OBESE**]?

- 1 YES, WEIGH LESS [**SKIP TO Q9.17c**]
- 2 NO, DON'T WEIGH LESS [**SKIP TO Q9.17b**]
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK IF Q9.17a = 2, ELSE SKIP TO Q9.17c

Q9.17b – Do you weigh less than [critical weight for **VERY OBESE**]?

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

ASK IF Q9.17a = 1, ELSE SKIP TO Q11.1

Q9.17c – Do you weigh less than [critical weight for **OVERWEIGHT**]?

- 1 YES, WEIGH LESS [**SKIP TO Q9.17d**]
- 2 NO, DON'T WEIGH LESS
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK IF Q9.17c = 1, ELSE SKIP TO Q11.1

Q9.17d – 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 VERY OBESE =
.0035 * (Q9.15 height CM)*(Q9.15 height CM)

CRITICAL WEIGHT FOR METRIC OBESE
= .003 * (Q9.15 height CM)*(Q9.15 height CM)

CRITICAL WEIGHT FOR METRIC OVERWEIGHT
= .0025* (Q9.15 height CM)*(Q9.15 height CM)

CRITICAL WEIGHT FOR METRIC UNDERWEIGHT
= .00185* (Q9.15 height CM)*(Q9.15 height CM)

ASK IF Q9.16 = 9999 OR 7777 AND Q9.15 ≠ 9999 OR 7777, ELSE SKIP TO Q11.1
Q9.17e - Do you weigh less than [critical weight for **METRIC OBESE**]?

- 1 YES, WEIGH LESS[**SKIP TO Q9.17g**]
- 2 NO, DON'T WEIGH LESS[**SKIP TO Q9.17f**]
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK IF Q9.17e = 2, ELSE SKIP TO Q9.17g
Q9.17f – Do you weigh less than [critical weight for **METRIC VERY OBESE**]?

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

ASK IF Q9.17e = 1, ELSE SKIP TO Q11.1
Q9.17g – Do you weigh less than [critical weight for **METRIC OVERWEIGHT**]?

- 1 YES, WEIGH LESS [**SKIP TO Q9.17h**]
- 2 NO, DON'T WEIGH LESS
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK IF Q9.17g = 1, ELSE SKIP TO Q11.1
Q9.17h – 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 VERY OBESE =
= SQUARE ROOT OF (20.09 * Q9.16 weight LB)

CRITICAL HEIGHT IN INCHES FOR OBESE:
= SQUARE ROOT OF (23.43 * Q9.16 weight LB)

CRITICAL HEIGHT IN INCHES FOR OVERWEIGHT:
= SQUARE ROOT OF (28.12 * Q9.16 weight LB)

CRITICAL HEIGHT IN INCHES FOR UNDERWEIGHT:
= SQUARE ROOT OF (38 * Q9.16 weight LB)

THEN CONVERT TO FEET, INCHES

ASK IF Q9.15 = 9999 OR 7777 AND Q9.16 ≠ 9999 OR 7777, ELSE SKIP TO Q11.1

Q9.18a- Is your height less than [critical height for **OBESE**]?

- 1 YES, LESS [**SKIP TO Q9.18b**]
- 2 NO, NOT LESS [**SKIP TO Q9.18c**]
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK IF Q9.18a = 1, ELSE SKIP TO Q9.18c

Q9.18b- Is your height less than [critical height for **VERY OBESE**]?

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

ASK IF Q9.18a = 2, ELSE SKIP TO Q11.1

Q9.18c - Is your height less than [critical height for **OVERWEIGHT**]?

- 1 YES, LESS
- 2 NO, NOT LESS [**SKIP TO Q9.18d**]
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK IF Q9.18c = 2, ELSE SKIP TO Q11.1

Q9.18d - 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 VERY OBESE =
= SQUARE ROOT OF (286 * Q9.16 weight KILOS)

CALCULATE CRITICAL HEIGHT FOR METRIC OBESE
= SQUARE ROOT OF (333 * Q9.16 weight KILOS)

CALCULATE CRITICAL HEIGHT FOR METRIC OVERWEIGHT
= SQUARE ROOT OF (400 * Q9.16 weight KILOS)

CALCULATE CRITICAL HEIGHT FOR METRIC UNDERWEIGHT
= SQUARE ROOT OF (540.5 * Q9.16 weight KILOS)

ASK IF Q9.15 = 9999 OR 7777 AND Q9.16 ≠ 9999 OR 7777, ELSE SKIP TO Q11.1

Q9.18e - Is your height less than [critical height for **METRICOBESE**]?

- 1 YES, LESS [**SKIP TO Q9.18f**]
- 2 NO, NOT LESS [**SKIP TO Q9.18g**]
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK IF Q9.18e = 1, ELSE SKIP TO Q9.18g

Q9.18f - Is your height less than [critical height for **METRIC VERY OBESE**]?

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

ASK IF Q9.18e = 2, ELSE SKIP TO Q11.1

Q9.18g - Is your height less than [critical height for **METRIC OVERWEIGHT**]?

- 1 YES, LESS
- 2 NO, NOT LESS [**SKIP TO Q9.18h**]
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK IF Q9.18g = 2, ELSE SKIP TO Q11.1

Q9.18h - 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

INSERT TIMESTAMP: T12_Sum

NUTRITION

And now some questions about food and drinks.

ASK ALL

Q11.1 – About how many cups of fruit did you eat yesterday? One cup of fruit would equal one large orange, 8 large strawberries, or 1 medium pear.

INTERVIEWER: If respondent tells you what fruits he/she ate, add up the cups after repeating the question once.

PROBE: You ate (REPEAT ALL THE FRUITS RESPONDENT SAID). That adds up to X cups. Would you say you ate X cups of fruit yesterday?

_____ NUMBER OF CUPS [CATI RANGE 0 – 50]

77 DON'T KNOW/NOT SURE

99 REFUSED

ASK ALL

Q11.2 – About how many cups of vegetables did you eat yesterday? One cup of vegetables would equal 12 baby carrots, 1 large raw tomato, or 1 large ear of corn.

If respondent tells you what vegetables he/she ate, add up the cups after repeating the question once.

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

_____ NUMBER OF CUPS [CATI RANGE 0 – 50]

77 DON'T KNOW/NOT SURE

99 REFUSED

ASK ALL

Q11.3 – How often do you drink sugar sweetened soda? Do not include diet soda or seltzer. You can answer per day, per week, or per month.

INTERVIEWER: Read if needed: How many sodas do you drink per day, per week or per month?

INTERVIEWER: Read if needed: One drink of soda would equal a 12 ounce can, bottle or glass.

INTERVIEWER: Read if needed: Please give your best estimate.

1__ PER DAY (RANGE 1-99)

2__ PER WEEK (RANGE 1-99)

3__ PER MONTH (RANGE 1-99)

888 NONE / NEVER / RARELY

777 DON'T KNOW/NOT SURE

999 REFUSED

ASK ALL

Q11.4 - 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.

INTERVIEWER: Read if needed: How many sweetened drinks do you drink per day, per week or per month?

INTERVIEWER: Read if needed: One drink of sweetened drinks would equal a 12 ounce can, bottle or glass.

INTERVIEWER: Read if needed: Please give your best estimate.

- 1__ PER DAY (RANGE 1-99)
- 2__ PER WEEK (RANGE 1-99)
- 3__ PER MONTH (RANGE 1-99)

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

CATI NOTE: ONLY ALLOW ONE FIELD TO BE ENTERED.

IF QXVERS=1 ASK Q11.5

READ: Now I will ask you about other types of sugar-sweetened drinks.

Q11.5 - How often do you drink coffee or tea drinks from places like Starbucks, Dunkin Donuts, or McDonalds that have been pre-sweetened with sugar or sugared flavorings? These would include drinks such as flavored lattes, chai drinks, mochas, and frappuccinos but not bottled or canned drinks. Do not include drinks only sweetened with low or no calorie sweeteners.

INTERVIEWER: Read if needed: You can answer with the number of times per day, per week, or per month.

INTERVIEWER: Read if needed: Your best estimate is fine.

INTERVIEWER: Read if needed: Do not include sugar you add yourself

- 1__ PER DAY (RANGE 1-99)
- 2__ PER WEEK (RANGE 1-99)
- 3__ PER MONTH (RANGE 1-99)

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

CATI NOTE: ONLY ALLOW ONE FIELD TO BE ENTERED.

INSERT TIMESTAMP: T13_Sum

PHYSICAL ACTIVITY

Now I will ask you some questions about physical activity.

ASK ALL

Q12.1 - 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

ASK ALL

Q12.2 – 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 once a week or more, several times a month, at least once a month, a few times a year, or never?

INTERVIEW: If asked: This does not include a stationary bike.

- 1 ONCE A WEEK OR MORE
- 2 SEVERAL TIMES A MONTH
- 3 AT LEAST ONCE A MONTH
- 4 A FEW TIMES A YEAR
- 5 NEVER
- 6 (VOL) PHYSICALLY UNABLE TO RIDE A BIKE
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

INSERT TIMESTAMP: T14_Sum

DISABILITIES AND COGNITIVE DECLINE

The next questions ask about physical and mental disabilities.

ASK ALL

Q13.1 – Do you have any difficulty performing your daily activities because of any physical, mental, or emotional problems?

INTERVIEWER: If asked: This includes things like bathing, climbing stairs, or doing errands alone.

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

ASK ALL

Q13.2 – Do you use any assistive devices, such as a cane, a wheelchair, an adapted bed, or a hearing assistive telephone because of a health condition?

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

ASK ALL

Q13.3 – Do you regularly use any medical devices at home that are important to health and require electricity to run?

INTERVIEWER: If asked: Examples of these devices include oxygen machines, dialysis machines, infusion pumps, and C-PAP machines for sleep apnea.

INTERVIEWER: If asked: Do not include air humidifiers or purifiers.

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

IF Q9.1 >=45 (OR Q9.1a = 1 OR 2 OR 3), ELSE SKIP TO Q13.4 [ASK IF 45 OR OLDER]

READ: The next questions ask about difficulties thinking or remembering that can make a big difference in everyday activities. They do not refer to occasionally forgetting your keys or the name of someone you just met, which is normal. This refers to confusion or memory loss that is happening more often or getting worse, such as forgetting how to do things you've always done or forgetting things you would normally know.

Q13.5 – During the past 12 months, have you experienced confusion or memory loss that is happening more often or is getting worse?

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

ASK IF Q13.5 = 1

Q13.6 – Have you or anyone else discussed your confusion or memory loss with a health care professional?

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

ASK ALL

Q13.4 – The next question is about care you might provide to someone. At any time in the last 12 months, did you provide unpaid care to an adult relative or friend who has trouble taking care of themselves?

INTERVIEWER: Read if needed: This may include help with personal needs, household chores, giving medication, grocery shopping, help paying bills, driving to doctor's visits, or visiting regularly to see how they are doing. This adult does not need to live with you.

INTERVIEWER: Read if needed: If caregiving recipient has died in the past 12 months say "I'm sorry to hear of your loss."

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

INSERT TIMESTAMP: T15_Sum

IMMUNIZATIONS

The next questions are about vaccinations

ASK ALL

Q14.1 - 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 ALL

Q14.2 – The hepatitis A vaccine is given in two shots, usually spaced at least 6 months apart. It is often given to children starting at 1 year of age, and to adults and people who travel outside the United States or are at high risk of becoming infected. It has only been available since 1995. Have you ever received the hepatitis A vaccine?

INTERVIEWER: Do not probe “Don’t Know” responses

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

ASK IF Q14.2 = 1

Q14.3 – How many hepatitis A shots have you received? Would you say one shot, two shots, more than two shots or are you not sure?

INTERVIEWER: Do not probe “Don’t Know” responses

- 1 One shot
- 2 Two shots
- 3 More than two shots
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

INSERT TIMESTAMP: T16_Sum

CANCER

DISPLAY SCREEN IF (Q9.2=2) OR ((Q9.1>=45) OR (Q9.1a=1,2,3)).

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

IF Q9.2=2 AND Q9.3=1 AND Q9.3B=2, SKIP TO Q15.3

ASK IF Q9.2=2 OR (IF Q9.2=1 AND Q9.3=2 AND Q9.3B=2) [ASK IF FEMALE]

Q15.1 - 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 IF Q15.1 = 1, ELSE SKIP TO Q15.3

Q15.2 - How long has it been since your last mammogram?

- INTERVIEWER: 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

IF Q9.1 >=45 (OR Q9.1a = 1 OR 2 OR 3), ELSE SKIP TO Q16.1 [ASK IF 45 OR OLDER]

Q15.3 - A colonoscopy [kO-luh-nos-kuh-pE] 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?

INTERVIEWER: 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 IF Q15.3 = 1 [ASK IF EVER RECEIVED COLONOSCOPY]

Q15.4 - When was your most recent colonoscopy [kO-luh-nos-kuh-pE] performed?

INTERVIEWER: 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

INSERT TIMESTAMP: T17_Sum

HIV TESTING

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.

ASK ALL

Q16.1 - Have you had an HIV test in the last 12 months?

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

ASK IF Q16.1 NE 1 [ASK IF NO HIV TEST IN PAST 12 MONTHS]

Q16.2 - Have you ever had an HIV test?

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

INSERT TIMESTAMP: T18_Sum

SEXUAL BEHAVIOR

**WOMEN ONLY: IF Q9.2=2 AND Q9.3=1 AND Q9.3B=2, SKIP TO Q17.1m
ASK IF Q9.2=2 OR (IF Q9.2=1 AND Q9.3=2 AND Q9.3B=2), ELSE SKIP TO Q17.1m [ASK ALL
ASSIGNED FEMALE AT BIRTH]**

READ: The next few questions are about your (Q9.1≤45 (OR Q9.1a = 4,5,6 READ: reproductive health and) sexual behavior. As a reminder, your answers are strictly confidential and you don't have to answer any question you don't want to.

**IF Q9.2=2 AND Q9.3=1 AND Q9.3B=2, SKIP TO Q17.1m
ASK IF Q9.2=2 OR (IF Q9.2=1 AND Q9.3=2 AND Q9.3B=2), ELSE SKIP TO Q17.1m [ASSIGNED
FEMALE AT BIRTH]**

Q17.1f - 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 IF Q17.1f > 0 AND NOT 777 OR 999, ELSE SKIP TO Q17.3f [ASK IF HAD AT LEAST ONE MALE
SEXUAL PARTNER IN PAST 12 MONTHS]**

Q17.2f - The last time you had sex, did you use a condom?

INTERVIEWER: If asked: This includes the "female condom"

INTERVIEWER: 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 IF Q9.2=2 OR (IF Q9.2=1 AND Q9.3=2 AND Q9.3B=2)AND Q9.1≤45 (OR Q9.1a = 4,5,6) AND
Q17.1f > 0 AND NOT 777,999**

[ASK IF 45 YEARS AND UNDER WITH AT LEAST ONE MALE SEXUAL PARTNER]

Q17.3f – The last time you had vaginal sex, did you or your partner use any other method of birth control besides condoms to prevent a pregnancy?

1 Yes

2 No

3 NEVER HAD VAGINAL SEX

4DON'T NEED/NOT AT RISK OF PREGNANCY

7 DON'T KNOW/NOT SURE

9 REFUSED

ASK IF Q17.3f = 1, ELSE SKIP TO Q17.5f

[ASK IF 45 YEARS AND UNDER WITH AT LEAST ONE MALE SEXUAL PARTNER]

Q17.4f – What method or methods did you use?

INTERVIEWER: Read list if needed.

CODE ALL THAT APPLY

- 1 Birth control pills
- 2 Injectable birth control (“the shot”, “Depo-Provera”), vaginal ring (“Nuva- Ring”), patch (“Ortho – Evra”)
- 3 Intrauterine device/IUD (“Mirena” or “Copper-T”), or implant (“Implanon”)
- 4 Emergency contraception (“Morning-after pill”)
- 5 Withdrawal or Rhythm Method,
- 6 Diaphragm, cervical cap, sponge, female condom, jelly, cream or spermicide
- 7 Female Sterilization (tubes tied or hysterectomy),
- 8 Male Sterilization (vasectomy), or
- 9 You did not use any of these methods
- 77 DON'T KNOW/NOT SURE
- 99 REFUSED

ASK IF Q17.1f > 0 AND NOT 777 OR 999 [ASK IF SEXUALLY ACTIVE]

Q17.6f - In the past 12 months, have you had anal sex?

INTERVIEWER: 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 IF Q17.6f = 1 [ASK IF HAD ANAL SEX PAST 12 MONTHS]

Q17.7f – The last time you had anal sex did you or your partner use a condom?

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

ASK IF Q17.6f = 1 [ASK IF HAD ANAL SEX PAST 12 MONTHS]

Q17.8f – In the past 12 months, did you have an anal or rectal STD test?

INTERVIEWER: Read if needed: STD stands for sexually transmitted disease.

- 1 YES
- 2 NO
- 3 DID NOT HAVE RECEPTIVE ANAL SEX
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK IF Q9.2=2 OR (IF Q9.2=1 AND Q9.3=2 AND Q9.3B=2) [ASK ALL ASSIGNED FEMALE AT BIRTH]

Q17.9f - During the past 12 months, with how many women have you had sex?

INTERVIEWER: 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 IF Q9.2=2 OR (IF Q9.2=1 AND Q9.3=2 AND Q9.3B=2)AND Q9.1≤45 (OR Q9.1a = 4,5,6) AND Q17.1f > 0 AND NOT 777,999

Q17.10f – Reproductive health care includes services such as access to contraception and abortion services. Was there a time in the past 12 months when you needed contraception or abortion services but did not get it?

1 YES

2 NO

7 DON'T KNOW/NOT SURE

9 REFUSED

SEXUAL BEHAVIOR

MEN ONLY: IF Q9.2=1 AND Q9.3=2 AND Q9.3B=2, SKIP TO Q18.1

ASK IF Q9.2=1 OR (IF Q9.2=2 AND Q9.3=1 AND Q9.3B=2), ELSE SKIP TO Q18.1 [ASK ALL ASSIGNED MALE AT BIRTH]

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

IF Q9.2=1 AND Q9.3=2 AND Q9.3B=2, SKIP TO Q18.1

ASK IF Q9.2=1 OR (IF Q9.2=2 AND Q9.3=1 AND Q9.3B=2), ELSE SKIP TO Q18.1 [ASSIGNED MALE AT BIRTH]

Q17.1m - 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 IF Q9.2=1 OR (IF Q9.2=2 AND Q9.3=1 AND Q9.3B=2) [ASK ALL ASSIGNED MALE AT BIRTH]

Q17.2m - During the past 12 months, with how many men have you had sex?

INTERVIEWER: 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 IF Q17.2m >0 and NOT 777,999 , ELSE SKIP TO Q17.4m [ASK ONLY OF MEN WHO HAD SEX WITH MEN IN PAST 12 MONTHS],

Q17.3m - The last time you had sex with a man, did you or your partner use a condom?

INTERVIEWER: If asked: This includes the "female condom"

1 YES
2 NO
3 DIDN'T HAVE ANAL SEX

7 DON'T KNOW/ NOT SURE
9 REFUSED

ASK IF (Q17.1m >0 AND Q17.1m <500, AND (Q17.2m = 0)) OR ((Q17.1m >0 AND Q17.1m <500) AND (Q17.2m = 777 OR Q17.2m = 999)), ELSE SKIP TO Q17.5m [MEN WHO ONLY HAD SEX WITH WOMEN IN PAST 12 MONTHS]

Q17.4m - The last time you had sex, did you use a condom?

INTERVIEWER: If asked: This includes the "female condom"

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

ASK IF Q17.1m > 0 AND NOT 777 OR 999, AND Q17.2m > 0 AND NOT 777 OR 999). [ASK ONLY OF MEN WHO HAD SEX WITH MEN AND WOMEN IN PAST 12 MONTHS) ELSE SKIP TO Q17.6m
Q17.5m - The last time you had sex with a woman, did you use a condom?

INTERVIEWER: If asked: This includes the "female condom"

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

ASK IF Q9.2=1 OR (IF Q9.2=2 AND Q9.3=1 AND Q9.3B=2) AND Q9.1 ≤65 (OR Q9.1a = 3,4,5,6) AND Q17.1m > 0 AND NOT 777,999

[ASK IF 65 YEARS AND UNDER WITH AT LEAST ONE FEMALE SEXUAL PARTNER]

Q17.6m – The last time you had vaginal sex, did you or your partner use any other method of birth control besides condoms to prevent a pregnancy?

- 1 YES
- 2 NO
- 3 NEVER HAD VAGINAL SEX
- 4 DON'T NEED/NOT AT RISK OF GETTING SOMEONE PREGNANT

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

ASK IF Q17.6m = 1, ELSE SKIP TO Q17.8m

[ASK IF 65 YEARS AND UNDER WITH AT LEAST ONE FEMALE SEXUAL PARTNER AND USED B.C. BESIDES CONDOMS]

Q17.7m – What method or methods did you or your partner use?

INTERVIEWER: Read list if needed

CODE ALL THAT APPLY

- 1 Birth control pills
- 2 Injectable birth control ("the shot", "Depo-Provera"), vaginal ring ("Nuva- Ring"), patch ("Ortho – Evra")
- 3 Intrauterine device/IUD ("Mirena" or "Copper-T"), or implant ("Implanon")
- 4 Emergency contraception ("Morning-after pill")
- 5 Withdrawal or Rhythm Method
- 6 Diaphragm, cervical cap, sponge, female condom, jelly, cream or spermicide
- 7 Female Sterilization (tubes tied or hysterectomy)
- 8 Male Sterilization (vasectomy), or
- 9 You did not use any of these methods
- 77 DON'T KNOW/NOT SURE
- 99 REFUSED

ASK IF Q17.1m OR Q17.2m > 0 AND NOT 777 OR 999 [ASK IF SEXUALLY ACTIVE]

Q17.8m - In the past 12 months, have you had anal sex?

INTERVIEWER: Read if needed: (IF Q17.1m>0 AND Q17.2m=0) By anal sex, we mean putting your penis in your partner's rectum.

(IF Q17.2m>0 AND Q17.1m>=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 IF Q17.8m = 1 [ASK IF HAD ANAL SEX PAST 12 MONTH]

Q17.9m - The last time you had anal sex did you or your partner use a condom?

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

ASK IF Q17.8m = 1 [ASK IF HAD ANAL SEX PAST 12 MONTHS]

Q17.10m - In the past 12 months, did you have an anal or rectal STD test?

INTERVIEWER: Read if needed: STD stands for sexually transmitted disease.

- 1 YES
- 2 NO
- 3 DID NOT HAVE RECEPTIVE ANAL SEX
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

INSERT TIMESTAMP: T19_Sum

ALCOHOL USE

SCREEN: Now a few questions about alcohol.

ASK ALL

Q18.1 - 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 IF Q18.1 > 0 BUT NOT 888, 777 OR 999 [ASK IF AT LEAST ONE DAY OF DRINKING IN PAST 30 DAYS]

Q18.2 - 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 IF Q18.1 > 0 BUT NOT 888, 777 OR 999 [ASK IF AT LEAST ONE DAY OF DRINKING IN PAST 30 DAYS]

Q18.3 - Considering all types of alcoholic beverages, how many times during the past 30 days did you have

[IF Q9.2 = 1 OR (IF Q9.2=2 AND Q9.3=1 AND Q9.3B=2) READ: 5 or more drinks on one occasion?]

[IF Q9.2 = 2 OR IF Q9.2 = 7]9 OR (IF Q9.2=1 AND Q9.3=2 AND Q9.3B=2) READ: 4 or more drinks on one occasion?]

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

INSERT TIMESTAMP: T20_Sum

VISION ZERO – TRAFFIC SAFETY

ASK IF QXVERS=1

READ: Now for some questions about traffic and pedestrian safety in New York City.

ASK ALL

Q19.1 – In the past 30 days, on how many days did you drive a car or motor vehicle in one of the five boroughs of New York City?

INTERVIEWER: Read if needed: Please give your best estimate.

|_|_|_|

ENTER NUMBER OF DAYS [RANGE: 0-30]

77 DON'T KNOW

99 REFUSED

ASK IF Q19.1 GE 1, BUT NOT 77 OR 99

Q19.2 – In the past 30 days, when you drove in one of the five boroughs (READ IF NEEDED: of New York City), how often did you drive 10 miles per hour or more over the posted speed limit? Would you say...

1 Often,

2 Sometimes,

3 Rarely, or

4 Never?

7 DON'T KNOW/NOT SURE

9 REFUSED

ASK IF Q19.1 GE 1, BUT NOT 77 OR 99

Q19.3 – In the past 30 days, when you drove in one of the five boroughs (READ IF NEEDED: of New York City), how often have you read or sent a text message or email while you were driving? Would you say...

1 Often,

2 Sometimes,

3 Rarely, or

4 Never?

7 DON'T KNOW/NOT SURE

9 REFUSED

INSERT TIMESTAMP: T21_Sum

SEXUAL ASSAULT

The next questions are about your personal safety and unwanted sexual experiences. This information will allow the health department to better understand the problem of violence and unwanted sexual contact and may help others in the future. Remember that all your answers will be kept private and if a question upsets you, you don't have to answer it.

ASK ALL

Q20.1 – Has anyone ever touched sexual parts of your body – after you said or showed that you didn't want them to, or without your consent- such as being kissed in a sexual way or having your sexual body parts fondled or grabbed?

INTERVIEWER: If asked: The rape and sexual assault hotline is (212) 267-7273.

INTERVIEWER: If asked for help with mental health problem: The number is 1-888-NYC-WELL, text "well" to 65173, or online chat at "nyc.gov/nycwell"

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

ASK ALL

Q20.2 – Has anyone ever forced you into any type of unwanted oral, vaginal, or anal sex? This 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.

INTERVIEWER: If asked: The rape and sexual assault hotline is (212) 267-7273.

INTERVIEWER: If asked for help with mental health problem: The number is 1-888-NYC-WELL, text "well" to 65173, or online chat at "nyc.gov/nycwell"

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

ASK ALL

Q20.3 – Has a doctor or other health professional ever asked you about conflict in your relationship, such as whether you have been hit or hurt or forced into a sexual act by an intimate partner?

INTERVIEWER: If asked: The rape and sexual assault hotline is (212) 267-7273.

INTERVIEWER: If asked for help with mental health problem: The number is 1-888-NYC-WELL, text “well” to 65173, or online chat at “nyc.gov/nycwell”

INTERVIEWER: If asked: An intimate partner could be a current or past boyfriend or girlfriend, husband or wife, common-law spouse, someone with whom you have a child in common, or a dating partner.

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

INSERT TIMESTAMP: T22_Sum

READ: 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 you can call the rape and sexual assault hotline at 212-267-7273 or NYC WELL at 1-888-692-9355. Would you like me to repeat either of these numbers?

TELEPHONE MODULE

LANDLINE TELEPHONE MODULE QUESTIONS (ASK IF LANDLINE VERSION OR PTYPE=2)

READ: And now, because this is a telephone survey I need to ask you a few more questions about your telephone usage.

ASK ALL

Q21.1 - Do you have more than one landline telephone number in your household? Do NOT include cell phones or numbers that are only used by a computer or fax machine.

INTERVIEWER NOTE: Cordless telephones should be counted as landline telephones. Do not include business telephone numbers.

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

ASK ALL

Q21.2 - 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 IF Q21.2=2 [ASK IF DOES NOT HAVE CELL PHONE]

Q21.3 - Do you share a cell phone for personal use with other adults?

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

END LANDLINE TELEPHONE MODULE QUESTIONS

CELL PHONE TELEPHONE MODULE QUESTIONS (ASK IF CELL VERSION, PTYPE=1 AND QLANDLINE=1)

READ: And now, because this is a cell phone survey I'd like to ask you about your cell phone usage.

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

READ ONLY IF NEEDED: "By landline telephone, we mean a "regular" telephone in your home that is connected to outside telephone lines through a cable or cord and is used for making or receiving calls. This would also include a cordless phone that receives service by being connected to outside telephone lines through a jack in the wall."

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

END CELL PHONE TELEPHONE MODULE QUESTIONS

INSERT TIMESTAMP: T23_Sum

**ADDRESS COLLECTION FOR INCENTIVE -
PLEASE READ:**

[IF CHILD_ELIG=1: We have just a few more questions. When we are done, I will be telling you about another important study the Health Department is conducting.]In appreciation for the time you have spent answering our questions, we would like to provide you with ten dollars as a thank you.

So that we know where to send your check, would you please give me your name and address so that we can send you the ten dollar payment?

The information you provide will only be used to send you the payment. It will not be used for any other purposes.

COLLECT NAME AND ADDRESS

NAME (What is your name?) ENTER NAME

ADDRESS (What is your street address?) ENTER STREET ADDRESS

CITY (What is the city?) ENTER CITY

ZIP (What is your zip code?) ENTER ZIP CODE

INSERT TIMESTAMP: T24_Sum

GEOCODING

GEOCODING QUESTIONS (INSERT BEFORE CLOSING, AFTER ADDRESS FOR CHECK)

CATI: CREATE VARIABLE CDZA (Community District ZIP Assignment).

IF (FXZIP=10002, 10004, 10005, 10006, 10012, 10014, 10021, 10024, 10028, 10029, 10031, 10033, 10034, 10035, 10039, 10040, 10044, 10065, 10075, 10128, 10280, 10282, 10302, 10303, 10307, 10309, 10310, 10454, 10465, 10466, 10470, 10471, 10472, 10473, 10474, 11001, 11004, 11005, 11040, 11102, 11103, 11104, 11105, 11106, 11109, 11209, 11211, 11222, 11224, 11225, 11231, 11239, 11354, 11355, 11356, 11357, 11361, 11362, 11363, 11366, 11369, 11372, 11375, 11412, 11414, 11416, 11417, 11421, 11422, 11426, 11428, 11429, 11430, 11433, 11436, 11691, 11692, 11693, 11694, OR 11697), CDZA=1; ELSE CDZA=2.

IF RESPONDENT DECLINED THE INCENTIVE, READ: To help us better understand the neighborhood you live in and how it may affect your health we'd like to know where study participants live so that we can add information about their neighborhood. The best way to do this is to collect your building number and street name, or the streets of the nearest intersection to your home. **GO TO G1: BUILDING NUMBER AND STREET NAME REQUEST**

IF GAVE ADDRESS FOR THE COMPENSATION CHECK, ASK INCENT1.

INCENT1 – Is this the address for your home where you live?

DISPLAY ADDRESS JUST GIVEN

- 1 YES [GO TO GINCENT]
- 2 NO [GO TO INTRO BEFORE G1]
- 9 (VOL) REFUSED [GO TO INTRO BEFORE G1]

GINCENT – To help us better understand the neighborhood you live in and how it may affect your health we'd like to know where study participants live so that we can add information about their neighborhood. The best way to do this is by address. Can I use the mailing address you just provided for this?

- 1 YES [SEND INCENTIVE ADDRESS TO GEOLOCATOR]
- 2 NO [GO TO G6]
- 9 (VOL) REFUSED [GO TO G6]

READ: To help us better understand the neighborhood you live in and how it may affect your health we'd like to know where study participants live so that we can add information about their neighborhood. The best way to do this is to collect your building number and street name, or the streets of the nearest intersection to your home. . **GO TO G1: BUILDING NUMBER AND STREET NAME REQUEST**

BUILDING NUMBER AND STREET NAME REQUEST

G1 - Can you tell me your building address? (IF NEEDED: That is, your building number and the name of your street. I don't need an apartment number.) What is your building number?

- 1. Gave building number CONTINUE
- 9. (VOL) DON'T KNOW/REFUSED GO TO **G6: CROSS STREET REQUEST**

G2 - What is the name of the street you live on? IF NEEDED: What type of street is that – Street, Avenue, Boulevard?

- 1. Gave street name CONTINUE
- 9. (VOL) DON'T KNOW/REFUSED GO TO CLOSING

SUBMIT NUMBER AND STREET TO GEOLOCATOR. IF VALID, GO TO CLOSING. IF NOT, ASK:

G3 - Unfortunately, our system is not accepting that address. Please let me confirm the address and spelling. The address I have is (READ BACK ADDRESS FROM G1, G2). Is this correct?

- 1 = Yes GO TO G4
- 2 = No, (NUMBER) is incorrect RE-ASK G1 AND SKIP G2, GO TO GELOCATOR
- 3 = No, (STREET) is incorrect RE-ASK G2 ONLY, GO TO GELOCATOR
- 4 = No, both (NUMBER AND STREET) are incorrect RE-ASK G1 & G2, GO TO GELOCATOR
- 9. (VOL) DON'T KNOW/REFUSED GO TO CLOSING

SUBMIT NUMBER AND STREET TO GEOLOCATOR. IF VALID, GO TO CLOSING. ELSE ASK:

G4 - Our system still does not recognize that address. Could you just tell me the name of the nearest street that crosses [INSERT NAME OF STREET FROM G2]? IF NEEDED: What type of street is that – Street, Avenue, Boulevard?

- 1. Gave cross street name. TO GEOLOCATOR
- 9. (VOL) DON'T KNOW/REFUSED GO TO CLOSING

SUBMIT CROSS STREETS TO GEOLOCATOR. IF VALID, GO TO CLOSING. ELSE ASK:

G5 - Unfortunately, our system does not recognize that intersection. Please let me confirm the street names and spellings one more time. The streets I have are (FILL FROM G2 and G4). Is this correct?

- 1 = Yes CONTINUE TO CLOSING
- 2 = No, (FILL G2) is incorrect RE-ASK G2 AND SKIP G4
- 3 = No, (FILL G4) is incorrect RE-ASK G4 ONLY
- 4 = No, both (FILL G2 AND G4) are incorrect RE-ASK G2 & G4
- 9. (VOL) DON'T KNOW/REFUSED GO TO CLOSING

CROSS STREET REQUEST AND CHECK

G6 – [IF GINCENT=2 OR 9: We don't have to use your home address, but it would be helpful if you could provide the cross streets nearest to your home.] Can you tell me the name of the street you live on? IF NEEDED, ASK: And what type of street is that – Street, Avenue, Boulevard?

- 1. Gave street name CONTINUE
- 9. (VOL) DON'T KNOW/REFUSED GO TO CLOSING

G7 - What is the name of the nearest street that crosses [INSERT NAME OF STREET FROM G6]? IF NEEDED, ASK: And what type of street is that – Street, Avenue, Boulevard?

- 1. Gave cross street name GO TO GEOLOCATOR
- 9. (VOL) DON'T KNOW/REFUSED GO TO CLOSING

SUBMIT CROSS STREETS TO GEOLOCATOR. IF VALID, GO TO CLOSING. ELSE ASK:

G8 - Unfortunately, our system does not recognize that intersection. Please let me confirm the street names and spellings one more time. The streets I have are (FILL FROM G6 and G7). Is this correct?

- 1 = Yes CONTINUE TO CLOSING
- 2 = No, (FILL G6) is incorrect RE-ASK G6 AND SKIP G7
- 3 = No, (FILL G7) is incorrect RE-ASK G7 ONLY
- 4 = No, both (FILL G6 AND G7) are incorrect RE-ASK G6 & G7
- 7 = (VOL) Don't know/Not sure CONTINUE TO CLOSING
- 9 = (VOL) Refused CONTINUE TO CLOSING

INSERT TIMESTAMP: T25_Sum

CLOSING:

Thank you for participating in this important survey about the health of New Yorkers. If you have any additional questions about this survey, would like previous survey results, or have further questions about your rights in this study, I can provide you with the appropriate telephone numbers. If you would like more information on where you could go to get help with a health problem, I can also give you the number for the Health Department's helpline.

Would you like any of these phone numbers?

- 1 YES
- 2 NO

IF YES: Which number would you like?

1 MORE INFORMATION ABOUT THE SURVEY OR SURVEY RESULTS-
READ: You can call the principal investigator at 347-396-2821.

2 INFORMATION ABOUT PARTICIPANTS RIGHTS
READ: You can call the Institutional Review Board Chairperson at 347-396-6118.

3 INFORMATION ABOUT A HEALTH PROBLEM NOT RELATED TO THE SURVEY
READ: You can call the Health Department helpline at 311.

Thanks again for completing the survey.

Q WHICH2 INTERVIEWER: RECORD LANGUAGE SURVEY COMPLETED IN

- 1 English
- 2 Spanish
- 3 Russian
- 4 Chinese
- 5 Bengali
- 6 Haitian Creole

QCHINESE2 [INTERVIEWER: WAS THIS MANDARIN OR CANTONESE?]

- 1 MANDARIN
- 2 CANTONESE

INSERT TIMESTAMP: T26_Sum
INSERT TIMESTAMP: TotalCHS_Sum