2012

Arizona Behavioral Risk Factor Surveillance System Questionnaire

December 30th 2011

Samptype = 1 = land
Samptype=2=cell
Behavioral Risk Factor Surveillance System
2012 Questionnaire

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Interviewer’s Script - Landline

**Answering Machine message text** [TO BE LEFT ON 1ST, 4TH, AND 9TH ATTEMPT RESULTING IN AN ANSWERING MACHINE]:
Hello, my name is _______. I am calling on behalf of the Arizona Department of Health Services to conduct an important study on the health of Arizona residents. Please call us at 1-877-364-0914 at your convenience. Thanks."

**Privacy Manager:** [PROMPT AT 1ST, 4TH, AND 9TH ATTEMPT RESULTING IN PRIVACY MANAGER]
“(NAME) Calling on behalf of the Arizona Department of Health Services.”

//ask if samptype=1//
Intro1
HELLO, I am calling for the Arizona Department of Health Services. My name is (name). We are gathering information about the health of Arizona residents. This project is conducted by the health department with assistance from the Centers for Disease Control and Prevention. Your telephone number has been chosen randomly, and I would like to ask some questions about health and health practices. This call may be monitored and recorded for quality assurance purposes.

Is this (phone number)?

01 Continue
02 Terminate

//ask if intro1=1, and samptype=1 //
HS1. Is this a private residence in Arizona?
  1. Yes
  2. No
  3. Respondent indicates outside of state

//if HS1 = 2//

COLLEGE Do you live in college housing? ([Read only if necessary]: “By college housing we mean dormitory, graduate student or visiting faculty housing, or other housing arrangement provided by a college or university.”)

  1. YES [Go to HS2]
  2. NO - Business
  3. No – group home
  7. DON’T KNOW / NOT SURE
  9. REFUSED

//if college = 2,7,9 or hs1=3//
X2 Thank you very much, but we are only interviewing private residences or college housing in Arizona. STOP
//if college = 2,7,9//
//assign dispo 26 Not a Private Residence//
//if hs1=3 assign dispo 40//

//ask if HS1=1 or college = 1//
HS2 Is this a cellular telephone?

[Read only if necessary: “By cellular (or cell) telephone we mean a telephone that is mobile and usable outside of your neighborhood.”]

Interviewer Note: Telephone service over the internet counts as landline service (includes Vonage, Magic Jack and other home-based phone services.).

1 No - Not a Cellular Telephone
2 Yes

//if HS2=2//

Thank you very much, but we are only interviewing land line telephones and private residences. STOP

//assign dispo 28 cell phone//

//ask if HS2=1//

ADULTS
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?

___ Number of adults [RANGE 0-18]

//if ADULTS = 0 //
X3 I'm sorry we are only interviewing adult residents who are 18 years of age or older. Thank you.”

// if adults=0 assign dispo 27//

//ask if ADULTS = 1//

ONEADULT Are you the adult?

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

If "yes,"
Then you are the person I need to speak with. Enter 1 man or 1 woman below (Ask gender if necessary). Go to page 5.

//if ONEADULT=03//

ASKGENDR Is the adult a man or a woman?
21 Male
22 Female

//if ONEADULT=03//

GETADULT May I speak with [fill in (him/her) from previous question]?

1 Yes, Adult coming to the phone.[GO TO NEWADULT]
2 No, not here (interview will terminate) [INTERVIEWER SET APPOINTMENT FOR BEST TIME TO REACH ADULT]
MEN  How many of these adults are men
__   Number of men [RANGE 0-18]

WOMEN … and how many are women?
__   Number of women [RANGE 0-18]

RANDOMLY SELECT ADULT; Assign selected value:
01 Oldest Female
02 2nd Oldest Female
03 3rd Oldest Female
04 4th Oldest Female
05 5th Oldest Female
06 6th Oldest Female
07 7th Oldest Female
08 8th Oldest Female
09 9th Oldest Female
11 Oldest Male
12 2nd Oldest Male
13 3rd Oldest Male
14 4th Oldest Male
15 5th Oldest Male
16 6th Oldest Male
17 7th Oldest Male
18 8th Oldest Male
19 9th Oldest Male
20 No respondent selected
21 One person HH - Male
22 One person HH – Female

ASFKOR  The person in your household that I need to speak with is the [INSERT SELECTED].
  Are you the person?
  1 Yes
  2 No

GETNEWAD  May I speak with him or her?
  1 Yes, Adult coming to the phone.[GO TO NEWADULT]
  2 No, not here (interview will terminate) [INTERVIEWER SET APPOINTMENT FOR BEST TIME TO REACH ADULT]
//if getnewad=1 or getadult = 1//

NEWADULT
HELLO, I am calling for the _Arizona Department of Health Services_. My name is ____ (name) ___. We are gathering information about the health of _Arizona_ residents. This project is conducted by the health department with assistance from the Centers for Disease Control and Prevention. Your telephone number has been chosen randomly, and I would like to ask some questions about health and health practices. This call may be monitored and recorded for quality assurance purposes.

1. Continue
I will not ask for your last name, address, or other personal information that can identify you. You do not have to answer any question you do not want to, and you can end the interview at any time. Any information you give me will be confidential. The interview takes approximately 26 minutes to complete. If you have any questions about the survey, please call 1-877-364-0914.

001 Person Interested, continue.
002 Go back to Adults question. WARNING: A NEW RESPONDENT WILL BE SELECTED AND YOU NEED A SUPERVISOR’S PASSWORD TO CONTINUE.

Interviewer’s Script – Cell Phone Intro and Screener

Answering Machine message text [TO BE LEFT ON 1ST, 4TH, AND 9TH ATTEMPT RESULTING IN AN ANSWERING MACHINE]:
“Hello, the Arizona Department of Health Services and the Centers for Disease Control and Prevention are conducting a study about the health of Arizona residents.

Please call us, toll-free, at 1-877-364-0914. For most people, the study will be very brief and we would be glad to answer any questions you have. The toll free number again is 1-877-364-0914. Thank you.

Hello, I am calling for the Arizona Department of Health Services. My name is (name). We are gathering information about the health of Arizona residents. This project is conducted by the health department with assistance from the Centers for Disease Control and Prevention.

The interview may be monitored and recorded for quality control purposes. I have just a few questions to find out if you are eligible for the study.

01 Continue
02 No Answer
03 Busy
04 Answering Machine
06 Respondent says they do not live in the state
08 Termination screen
09 Not a safe time/driving
14 CONTINUE IN SPANISH

You may still be eligible to participate.
01 Continue to next question
07 Termination screen
09 Not a safe time/driving
CTELNUM1
Is this (phone number) ?
INTERVIEWER: PLEASE CONFIRM NEGATIVE RESPONSES TO ENSURE THAT RESPONDENT HAS HEARD AND UNDERSTOOD CORRECTLY.

1  [Go to CELLFON2] YES
2  NO
4  [GO TO CB] NOT A SAFE TIME/DRIVING
7  [Go to CELLFON2] DON'T KNOW / NOT SURE
9  [Go to CELLFON2] REFUSED

If "no," //if CTELNUM1=2//
Thank you very much, but I seem to have dialed the wrong number. It’s possible that your number may be called at a later time. STOP TERMDISP = 23

//If CTELNUM1=1,7,9 ask CELLFON2//

CELLFON2
Is this a cellular telephone?

[Read only if necessary: “By cellular telephone we mean a telephone that is mobile and usable outside of your neighborhood”.
Interviewer Note: Telephone service over the internet counts as landline service (includes Vonage, Magic Jack and other home-based phone services.).

INTERVIEWER: PLEASE CONFIRM NEGATIVE RESPONSES TO ENSURE THAT RESPONDENT HAS HEARD AND UNDERSTOOD CORRECTLY.

1  YES  [Go to CADULT]
2  NO
3  NOT A SAFE TIME/DRIVING
7  DON'T KNOW / NOT SURE
9  REFUSED

IF "No", //if CELLFON2=2// TERMDISP =25
Thank you very much, but we are only interviewing cell telephones at this time. STOP
If “Don’t Know”, “Refused”, //if CELLFON2=7,9// TERMDISP =26
Thank you for your time. STOP

//if CELLFON2=1 go to CADULT//

//If CELLFON2=1 ask CADULT//

CADULT
Are you 18 years of age or older?
INTERVIEWER: PLEASE CONFIRM NEGATIVE RESPONSES TO ENSURE THAT RESPONDENT HAS HEARD AND UNDERSTOOD CORRECTLY. ASK GENDER IF NECESSARY.

1. YES, Male Respondent  [Go to PVTRESD2]
2. YES, Female Respondent  [Go to PVTRESD2]
3. NO  [GO TO CADULT2]
4. NOT A SAFE TIME/DRIVING  [Go to CB]
5. DON'T KNOW / NOT SURE  [GO TO CADULT2]
6. REFUSED

IF “Don’t Know”, “Refused”, //If CADULT=7,9// TERMDISP =28
Thank you very much for your time. STOP

IF “No”, //If CADULT=3//

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

1. YES  [GO TO CADULT3]
2. NO

//If CADULT2=2// (no adult uses cell phone)
Thank you very much, but we are only interviewing persons aged 18 or older at this time.
STOP TERMDISP =27

//if CADULT2=1//

CADULT3
May I speak with him or her?

1. SWITCHING TO RESPONDENT
2. RESPONDENT NOT AVAILABLE/CALLBACK

//if CADULT3=1 go to INTRO1/
//if CADULT3=2 autocode 105, callback/

//IF CADULT=1,2 ask PVTRESD2//

PVTRESD2
Do you live in a private residence?

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

INTERVIEWER: PLEASE CONFIRM NEGATIVE RESPONSES TO ENSURE THAT RESPONDENT HAS HEARD AND UNDERSTOOD CORRECTLY. THE PERSON DOES NOT NEED TO BE PHYSICALLY LOCATED IN THEIR PRIVATE RESIDENCE.
COLEGE Do you live in college housing? ([Read only if necessary]: “By college housing we mean dormitory, graduate student or visiting faculty housing, or other housing arrangement provided by a college or university.”)

1 YES [Go to CSTATE]
2 NO
3 NOT A SAFE TIME/DRIVING
7 DON'T KNOW / NOT SURE
9 REFUSED

//if pvtresd2=2//

"Thank you very much for your time, but we are only interviewing persons who live in a private residence or college housing at this time." STOP – TERMDISP=35

IF “Don't Know”, “Refused”, //If PVTRESID=7,9 or college = 7, 9//
Thank you very much for your time. STOP TERM DISP = 29

//If PVTRESID=1 or college = 1 ask CSTATE//

CSTATE
Are you a resident of Arizona?

INTERVIEWER: PLEASE CONFIRM NEGATIVE RESPONSES TO ENSURE THAT RESPONDENT HAS HEARD AND UNDERSTOOD CORRECTLY.

1 YES [Go to LANDLINE]
2 NO [Go to RSPSTATE]
3 NOT A SAFE TIME/DRIVING
7 DON'T KNOW / NOT SURE
9 REFUSED

IF “Don't Know”, “Refused”, //If CSTATE=7,9// TERMDISP =30
Thank you very much for your time. STOP

//If CSTATE=2 ask RSPSTATE//

RSPSTATE In what state do you live?

ENTER STATE
AL Alabama
AK Alaska
AZ Arizona
AR Arkansas
CA California
CO Colorado
CT Connecticut
DE Delaware
DC District of Columbia
FL Florida
GA Georgia
HI Hawaii
ID Idaho
IL Illinois
IN Indiana
IO Iowa
KS Kansas
KY Kentucky
LA Louisiana
ME Maine
MD Maryland
MA Massachusetts
MI Michigan
MN Minnesota
MS Mississippi
MO Missouri
MT Montana
NE Nebraska
NV Nevada
NH New Hampshire
NJ New Jersey
NM New Mexico
NY New York
NC North Carolina
ND North Dakota
OH Ohio
OK Oklahoma
OR Oregon
PA Pennsylvania
RI Rhode Island
SC South Carolina
SD South Dakota
TN Tennessee
TX Texas
UT Utah
VT Vermont
VA Virginia
WA Washington
WV West Virginia
WI Wisconsin
WY Wyoming

99 REFUSED
If Refused:
I’m sorry, but our data is compiled by state. In order to qualify for the interview we need to
know which state you live in. Thank you for your time. STOP TERMDISP = 31

//ask if samptype=2/

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

READ ONLY IF NECESSARY: “By landline telephone, we mean a “regular” telephone in
your home that is connected to outside telephone lines through a cable or cord and is
used for making or receiving calls. Please include landline phones used for both
business and personal use.”

NOTE: Telephone service over the internet counts as landline service.
PLEASE CONFIRM NEGATIVE RESPONSES TO ENSURE THAT RESPONDENT HAS
HEARD AND UNDERSTOOD CORRECTLY.

1 YES
2 NO //Go to INTRO2//
7 DON'T KNOW / NOT SURE//Go to TERMINATION//
9 REFUSED //Go to TERMINATION//

IF "No", GO TO SURVEY INTRO
IF "Don't Know" or “Refused”, GO TO TERMINATION TERM DISP = 32

//If LANDLINE=1 ask PCTCELL//
//If LANDLINE=2 go to svintro//
//If LANDLINE = 7, 9 go to termination//

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

_ _ _ Enter Percent (1 to 100)
8 8 8 Zero
7 7 7 Don’t know/Not sure
9 9 9 Refused

//If PCTCELL <90% go to termination//

TERMINATION
Thank you very much. Those are all the questions that I have for you today.
If PCTCELL = 1-89, 888, 777, 999 term disp = 33
If landline = 7, 9 term disp = 33

//ask if samptype=2//

svintro
Your telephone number has been chosen randomly, and I would like to ask some questions about health
and health practices. You do not have to answer any question you do not want to, and you can end the
interview at any time. Any information you give me will be confidential. If you have any questions, I will provide a telephone number for you to call to get more information.

Is this a safe time to talk with you now or are you driving?

INTERVIEWER NOTE: If respondent indicates it is not safe to talk now, ask “When is a better time to try to call back?” and schedule an appointment.

1 SAFE TIME/NOT DRIVING
2 DRIVING/NOT A SAFE TIME
9 REFUSED

//if svintro = 9// Assign refusal disposition based on refusal count.
//if svintro=1 read: //
svintro2
I will not ask for your last name, address, or other personal information that can identify you. The survey will take approximately 26 minutes and the call may be monitored or recorded for quality assurance purposes. If you have any questions about the survey, please call 1-877-364-0914.

//If CTELNUM1=4 (NOT A SAFE TIME/DRIVING)// OR //If CELLFON2=3//
//If CADULT=4// OR //If PVTRESID2=3// OR //If CSTATE=3// OR //If svintro=2//
OR IF INTRO1=9 or INTRO2=9
CB
What would be the best time to try to call back?

And what is the first name or other identifier, such as a nickname or initials that we should ask for?"

[NAME PREVIOUSLY RECORDED (MAY BE BLANK):]

01 ENTER NEW NAME
02 RETAIN CURRENT NAME
77 DON'T KNOW
99 REFUSED

//IF CB=02, 77, 99 go to “enter callback time”/

//IF CB=01//

CBname
(What's the first name we should ask for?) ENTER RESPONSE:

_____________________________

//IF CB=01, 02, 77, 99: GO TO “ENTER CALLBACK TIME”/

Core Sections

Section 1: Health Status

//ask of all//
Would you say that in general your health is—

Please read:

1 Excellent
2 Very good
3 Good
4 Fair

Or

5 Poor

Do not read:

7 Don’t know / Not sure
9 Refused

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

//ask of all//

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

Number of days [RANGE = 1-30]

8 8 None
7 7 Don’t know / Not sure
9 9 Refused

//ask of all//

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

Number of days [RANGE = 1-30]

[If Q2.1 and Q2.2 = 88 (None), go to next section]

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

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

Number of days [RANGE = 1-30]

8 8 None
7 7 Don’t know / Not sure
Section 3: Health Care Access

//ask of all//
S3q1 Do you have any kind of health care coverage, including health insurance, prepaid plans such as HMOs, government plans such as Medicare, or Indian Health Service?

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

//ask of all//
s3q2 Do you have one person you think of as your personal doctor or health care provider?

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

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

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

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

//ask of all//
s3q4 About how long has it been since you last visited a doctor for a routine checkup? A routine checkup is a general physical exam, not an exam for a specific injury, illness, or condition.

   1 Within the past year (anytime less than 12 months ago)
   2 Within the past 2 years (1 year but less than 2 years ago)
   3 Within the past 5 years (2 years but less than 5 years ago)
   4 5 or more years ago
   7 Don’t know / Not sure
   8 Never
   9 Refused
Section 4: Exercise

//ask of all//
s4q1 During the past month, other than your regular job, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise?
1 Yes
2 No
7 Don’t know / Not sure
9 Refused

Section 5: Chronic Health Conditions

//ask of all//
S5q1t Now I would like to ask you some questions about general health conditions.

Has a doctor, nurse, or other health professional EVER told you that you had any of the following? For each, tell me “Yes,” “No,” or you’re “Not sure.”

1. continue

//ask of all//
s5q1 (Ever told) you that you had a heart attack also called a myocardial infarction?
1 Yes
2 No
7 Don’t know / Not sure
9 Refused

//ask of all//
s5q2 (Ever told) you had angina or coronary heart disease?
1 Yes
2 No
7 Don’t know / Not sure
9 Refused

//ask of all//
s5q3 (Ever told) you had a stroke?
1 Yes
2 No
7 Don’t know / Not sure
9 Refused

//ask of all//
s5q4 (Ever told) you had asthma?
1  Yes
2  No  [Go to Q5.6]
7  Don’t know / Not sure  [Go to Q5.6]
9  Refused  [Go to Q5.6]

//ask if s5q4=1//
s5q5  Do you still have asthma?  (89)

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

//ask of all//
s5q6  (Ever told) you had skin cancer?  (90)

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

//ask of all//
S5q7  (Ever told) you had any other types of cancer?  (91)

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

//ask of all//
s5q8  (Ever told) you have Chronic Obstructive Pulmonary Disease or COPD, emphysema or chronic bronchitis?  (92)

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

//ask of all//
s5q9  (Ever told) you have some form of arthritis, rheumatoid arthritis, gout, lupus, or fibromyalgia?  (93)

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

INTERVIEWER NOTE: Arthritis diagnoses include:

- rheumatism, polymyalgia rheumatica
- osteoarthritis (not osteoporosis)
- tendonitis, bursitis, bunion, tennis elbow
- carpal tunnel syndrome, tarsal tunnel syndrome
- joint infection, Reiter’s syndrome
- ankylosing spondylitis; spondyloisis
- rotator cuff syndrome
- connective tissue disease, scleroderma, polymyositis, Raynaud’s syndrome
- vasculitis (giant cell arteritis, Henoch-Schonlein purpura, Wegener’s granulomatosis,
- polyarteritis nodosa)

//ask of all//

s5q10  (Ever told) you have a depressive disorder, including depression, major depression,
dysthymia, or minor depression?

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

//ask of all//

s5q11  (Ever told) you have kidney disease? Do NOT include kidney stones, bladder infection or incontinence.

INTERVIEWER NOTE: Incontinence is not being able to control urine flow.

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

//ask of all//

s5q12  Do you have any trouble seeing, even when wearing glasses or contact lenses?

1   Yes
2   No
3   Not applicable (blind)
7   Don’t know / Not sure
9   Refused

//ask of all//

s5q13  (Ever told) you have diabetes?

If “Yes” and respondent is female, ask: “Was this only when you were pregnant?”
If respondent says pre-diabetes or borderline diabetes, use response code 4.

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

CATI note: If Q5.13 = 1 (Yes), go to Diabetes Optional Module (if used). If any other response to Q5.13, go to Pre-Diabetes Optional Module (if used). Otherwise, go to next section.

Section 6: Oral Health

//ask of all//

s6q1 How long has it been since you last visited a dentist or a dental clinic for any reason? Include visits to dental specialists, such as orthodontists.

Read only if necessary:

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

Do not read:

7. Don’t know / Not sure
8. Never
9. Refused

//ask of all//

s6q2 How many of your permanent teeth have been removed because of tooth decay or gum disease? Include teeth lost to infection, but do not include teeth lost for other reasons, such as injury or orthodontics.

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

1. 1 to 5
2. 6 or more but not all
3. All
8. None
7. Don’t know / Not sure
9. Refused
Section 7: Demographics

//ask of all//

s7q1  What is your age?  

   Code age in years [RANGE 18-99]
   0    Don't know / Not sure
   9    Refused

//ask of all//

s7q2  Are you Hispanic or Latino?  

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

//ask of all//

s7q3  Which one or more of the following would you say is your race?  

   (Check all that apply)

   [MUL = 6]

   Please read:

   1    White
   2    Black or African American
   3    Asian
   4    Native Hawaiian or Other Pacific Islander
   5    American Indian or Alaska Native

   Or

   6    Other [specify]________________

   Do not read:

   7    Don't know / Not sure
   9    Refused

//ask if s7q3=6//

S7q3o  ENTER OTHER [open end]:_________________________

CATI note: If more than one response to Q7.3; continue. Otherwise, go to Q7.5

//ask if s7q3 = mul response//

s7q4  Which one of these groups would you say best represents your race?
Please read:

1. White
2. Black or African American
3. Asian
4. Native Hawaiian or Other Pacific Islander
5. American Indian or Alaska Native

Or

6. [fill in other from s7q3o]

Do not read:

7. Don’t know / Not sure
9. Refused

//ask of all//

s7q5

Have you ever served on active duty in the United States Armed Forces, either in the regular military or in a National Guard or military reserve unit? Active duty does not include training for the Reserves or National Guard, but DOES include activation, for example, for the Persian Gulf War.

1. Yes
2. No

Do not read:

7. Don’t know / Not sure
9. Refused

//ask of all//

s7q6

Are you…?

Please read:

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

Or

6. A member of an unmarried couple

Do not read:

9. Refused

//ask of all//
s7q7  How many children less than 18 years of age live in your household? (111-112)

[Interviewer:  15 = 15 or more
             88 = None
             99 = Refused]

Number of children [RANGE 1-15]

__ __
8 8  None
9 9  Refused

//ask of all//

s7q8  What is the highest grade or year of school you completed? (113)

Read only if necessary:

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

Do not read:

9   Refused

//ask of all//

s7q9  Are you currently…? (114)

Please read:

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

Or

8  Unable to work

Do not read:

9   Refused

//ask of all//
**s7q10** Is your annual household income from all sources—

If respondent refuses at ANY income level, code ‘99’ (Refused)

Read only if necessary:

<table>
<thead>
<tr>
<th>S7q10A [04]</th>
<th>Less than $25,000 ($20,000 to less than $25,000)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Don’t Know</td>
</tr>
<tr>
<td>9</td>
<td>Refused</td>
</tr>
</tbody>
</table>

[If “no,” ask 05; if “yes,” ask 03]

//ask if s7q10A = 1//

<table>
<thead>
<tr>
<th>S7q10B [03]</th>
<th>Less than $20,000 ($15,000 to less than $20,000)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Don’t Know</td>
</tr>
<tr>
<td>9</td>
<td>Refused</td>
</tr>
</tbody>
</table>

[If “no,” code 04; if “yes,” ask 02]

//ask if s7q10B = 1//

<table>
<thead>
<tr>
<th>S7q10C [02]</th>
<th>Less than $15,000 ($10,000 to less than $15,000)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Don’t Know</td>
</tr>
<tr>
<td>9</td>
<td>Refused</td>
</tr>
</tbody>
</table>

[If “no,” code 03; if “yes,” ask 01]

//ask if s7q10C=1//

<table>
<thead>
<tr>
<th>S7q10D [01]</th>
<th>Less than $10,000</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Don’t Know</td>
</tr>
<tr>
<td>9</td>
<td>Refused</td>
</tr>
</tbody>
</table>

[If “no,” code 02]

//ask if s7q10A = 2//

<table>
<thead>
<tr>
<th>S7q10E [05]</th>
<th>Less than $35,000 ($25,000 to less than $35,000)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Don’t Know</td>
</tr>
<tr>
<td>9</td>
<td>Refused</td>
</tr>
</tbody>
</table>

[If “no,” ask 06]

//ask if s7q10E = 2//

<table>
<thead>
<tr>
<th>S7q10F [06]</th>
<th>Less than $50,000 ($35,000 to less than $50,000)</th>
</tr>
</thead>
</table>
1  Yes
2  No
7  Don’t Know
9  Refused

[If “no,” ask 07]

//ask if s7q10F = 2//
S7q10G [07]  Less than $75,000 ($50,000 to less than $75,000)

1  Yes
2  No
7  Don’t know
9  Refused

[If “no,” code 08]

[08]  $75,000 or more

//ask if s7q10A-s7q10G ne 7,9//
S7q10AA  Your Annual Household Income is [enter range from code in s7q10A-G]

Is This Correct?
1  No, re-ask question [GO TO S7Q10A]
2  Yes, correct as is. [CONTINUE]

//ask of all//

Ps7q11  About how much do you weigh without shoes?
ENTER “P” FOR WEIGHT GIVEN IN POUNDS
ENTER “K” FOR WEIGHT GIVEN IN KILOGRAMS

P  pounds
K  kilograms
7  Don’t Know
9  Refused

//ask if ps7q11 = P//
S7q11  About how much do you weigh without shoes?

NOTE: If respondent answers in metrics, put “9” in column 117.

Round fractions up

___   ___   ___  Weight
(pounds)  [Range 50-776,]

//ask if s7q11 =50-79 OR 351-776//
S7q11_A:  Just to double-check, you indicated \:s7q11: pounds as your weight.
IS THIS CORRECT?
1. Yes
2. No [go back to s7q11]

//ask if ps7q11 = K//
S7q11M About how much do you weigh without shoes?  
(121-124)

NOTE: If respondent answers in metrics, put “9” in column 174.

Round fractions up

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

//ask if s7q11m = 23-352 and ps711 = “k”
S7q11am: Just to double-check, you indicated \s8q11m: kilograms as your weight.

IS THIS CORRECT?
1. Yes
2. No, [go back to s8q11m]

//ask of all//

Ps7q12 About how tall are you without shoes?

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

F feet
M centimeters
7 Don’t Know
9 Refused

//ask if ps7q12=f//
S7q12 About how tall are you without shoes?  
(140-143)

NOTE: If respondent answers in metrics, put “9” in column 121.

Round fractions down

[Enter height in Feet and Inches]
[Ex: 5 feet 9 inches would be entered as 509]

---
_ _ / _ _ Height[Range 300-311, 400-411, 500-511, 600-611, 700-711]
S7q12a: Just to double check, you indicated you are //enter feet from s7q12// FEET //enter inches from s8q12// INCHES TALL.

IS THIS CORRECT?
1. Yes
2. No, go back to s7q12

S7q12M About how tall are you without shoes?

NOTE: If respondent answers in metrics, put “9” in column 126.

Round fractions down
[Enter height in centimeters]
[Ex: 2 meters 5 centimeters would be entered as 205
--- Height[Range 90-254]

S7q12am: Just to double check, you indicated you are //s7q12m// centimeters tall.

IS THIS CORRECT?
1. Yes
2. No [go back to s7q12m]

//if samptype=2 and CSTATE = 2 AND RSPSTATE NE AZ, CT, NH, RI, DC, VT, WA, WY//

cnty What county or town do you live in?

888 GAVE RESPONSE
777 DON'T KNOW/NOT SURE
999 REFUSED
//if cnty =888//
cnty:
   INTERVIEWER: ENTER THE COUNTY BELOW

//if cnty=888//
cnty:
I want to make sure that I got it right.

You said you live in the county of [INSERT COUNTY FROM VTCNTYO. Is that correct?
1 Yes, correct as is
2 No, re-ask question

//ask if samptype=1 OR if ( samptype=2 and (CSTATE = 1 AND [LSTATE = AZ) OR RSPSTATE = AZ)

Aztown

What county do you live in?

(125-127)

_ _ _
ANSI County Code (formerly FIPS county code) [RANGE = 001-027]
001 Apache (South/North)
003 Cochise
005 Coconino
007 Gila
009 Graham
011 Greenlee
012 La Paz
013 Maricopa
015 Mohave
017 Navajo
019 Pima
021 Pinal
023 Santa Cruz
025 Yavapai
027 Yuma
7 7 7 Don’t know / Not sure
9 9 9 Refused

//ask if aztown (001-27) //

aztomega

I want to make sure that I got it right.

You said you live in the county of [\U\B\:aztomega:].
Is that correct?

1 Yes, correct as is
2 No, re-ask question

//ask of all//

S7q14az

What is the ZIP Code where you live?

(128-132)

_ _ _ _ _
ZIP Code[ LAND RANGE = 85000-87399 , CELL RANGE = 00000-99999]
7 7 7 7 7 Don’t know / Not sure
9 9 9 9 9 Refused

//ask if s7q14az ne 77777, 99999//

S7q14caz

I just want to confirm, you said your zip code is [insert s7q14az]. Is that correct?

1 Yes, correct zip code.
2 No, incorrect zip code.

//ask if samptype=1//
S7q15  Do you have more than one telephone number in your household? Do not include cell phones or numbers that are only used by a computer or fax machine.

1  Yes  [Go to s7q17]
2  No  [Go to s7q17]
7  Don’t know / Not sure  [Go to s7q17]
9  Refused  [Go to s7q17]

//ask if s7q15=1//

S7q16  How many of these telephone numbers are residential numbers?

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

//ask if samptype = 1//

S7q17  Do you have a cell phone for personal use? Please include cell phones used for both business and personal use.

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

//ask if s7q17=1

S7q18  Thinking about all the phone calls that you receive on your landline and cell phone, what percent, between 0 and 100, are received on your cell phone?

Enter percent (1 to 100)
8 8 8  Zero
7 7 7  Don’t know / Not sure
9 9 9  Refused

//ask of all//

S7q19  Do you own or rent your home?

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

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

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

//ask of all//

S7q20  Indicate sex of respondent. Ask only if necessary.

1  Male  [Go to next section]
2  Female  [If respondent is 45 years old or older, go to next section]

//ask if s7q20=2 AND s7q1<45//

S7q21  To your knowledge, are you now pregnant?

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

Language Indicator

//ask of all//

Lang1. INTERVIEWER: DO NOT ASK QUESTION:

IN WHAT LANGUAGE WAS THIS INTERVIEW COMPLETED?

01  ENGLISH
02  SPANISH

Section 8: Disability

//ask of all//
The following questions are about health problems or impairments you may have.

S8q1  Are you limited in any way in any activities because of physical, mental, or emotional problems?

1  Yes
2  No
7  Don’t know / Not sure
9  Refused
//ask of all//

S8q2  Do you now have any health problem that requires you to use special equipment, such as a cane, a wheelchair, a special bed, or a special telephone?

Include occasional use or use in certain circumstances.

1  Yes
2  No
7  Don’t know / Not sure
9  Refused
Section 9: Tobacco Use

//ask of all//
s9q1 Have you smoked at least 100 cigarettes in your entire life?

(146)

NOTE: 5 packs = 100 cigarettes

1 Yes
2 No [Go to s9q5]
7 Don’t know / Not sure [Go to s9q5]
9 Refused [Go to s9q5]

//ask if s9q1=1//
s9q2 Do you now smoke cigarettes every day, some days, or not at all?

(147)

1 Every day
2 Some days [Go to s9q4]
3 Not at all [Go to s9q4]
7 Don’t know / Not sure [Go to s9q5]
9 Refused [Go to s9q5]

//ask if s9q2=1,2//
s9q3 During the past 12 months, have you stopped smoking for one day or longer because you were trying to quit smoking?

(148)

1 Yes [Go to s9q5]
2 No [Go to s9q5]
7 Don’t know / Not sure [Go to s9q5]
9 Refused [Go to s9q5]

//ask if s9q2=3//
s9q4 How long has it been since you last smoked a cigarette, even one or two puffs?

(149)

0 1 Within the past month (less than 1 month ago)
0 2 Within the past 3 months (1 month but less than 3 months ago)
0 3 Within the past 6 months (3 months but less than 6 months ago)
0 4 Within the past year (6 months but less than 1 year ago)
0 5 Within the past 5 years (1 year but less than 5 years ago)
0 6 Within the past 10 years (5 years but less than 10 years ago)
0 7 10 years or more
7 7 Don’t know / Not sure
9 9 Refused
Do you currently use chewing tobacco, snuff, or snus every day, some days, or not at all?

**Snus (rhymes with ‘goose’)**

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

1. Every day
2. Some days
3. Not at all

Do not read:

7. Don’t know / Not sure
9. Refused

---

**Section 10: Alcohol Consumption**

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

1 [ ] Days per week [RANGE = 101-107]
2 [ ] Days in past 30 days [RANGE = 201-230]
8 8 8 [ ] No drinks in past 30 days [Go to next section]
7 7 7 [ ] Don’t know / Not sure [Go to next section]
9 9 9 [ ] Refused [Go to next section]

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

[ ] Number of drinks [Range 1-76]
7 7 [ ] Don’t know / Not sure
9 9 [ ] Refused

Considering all types of alcoholic beverages, how many times during the past 30 days did you have X [CATI X = 5 for men, X = 4 for women] or more drinks on an occasion?

[ ] Number of times [Range 1-76]
8 8 [ ] None
7 7 [ ] Don’t know / Not sure
9 9 [ ] Refused
During the past 30 days, what is the largest number of drinks you had on any occasion? (158-159)

Number of drinks [Range = 1-76]

7 7 7 Don’t know / Not sure
9 9 Refused

Section 11: Immunization

Now I will ask you questions about seasonal flu vaccine. There are two ways to get the seasonal flu vaccine, one is a shot in the arm and the other is a spray, mist, or drop in the nose called FluMist™. During the past 12 months, have you had either a seasonal flu shot or a seasonal flu vaccine that was sprayed in your nose?

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

1 Yes
2 No [Go to s11q4]
7 7 Don’t know / Not sure [Go to s11q4]
9 9 Refused [Go to s11q4]

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

INTERVIEWER: ENTER MONTH

Month [RANGE 01-12]
7 7 7 Don’t know / Not sure
9 9 Refused

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

INTERVIEWER: ENTER YEAR

Year [RANGE 2011-2012]
7 7 7 7 Don’t know / Not sure
9 9 9 9 Refused

At what kind of place did you get your last flu shot/vaccine?

0 1 A doctor’s office or health maintenance organization (HMO)
0 2 A health department
0 3 Another type of clinic or health center (Example: a community health center)
0 4 A senior, recreation, or community center
0 5 A store (Examples: supermarket, drug store)
0 6  A hospital (Example: inpatient)
0 7  An emergency room
0 8  Workplace
0 9  Some other kind of place
1 0  Received vaccination in Canada/Mexico (Volunteered – Do not read)
1 1  A school

Do not read:

7 7  Don’t know / Not sure (Probe: “How would you describe the place where you went to get your most recent flu vaccine?”)
9 9  Refused

//ask of all//

s11q4  A pneumonia shot or pneumococcal vaccine is usually given only once or twice in a person's lifetime and is different from the flu shot. Have you ever had a pneumonia shot?

(169)

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

Section 12: Falls

If respondent is 45 years or older continue, otherwise go to next section.
//ask if s7q1>44//

S12q1t  Next, I will ask about recent falls. By a fall, we mean when a person unintentionally comes to rest on the ground or another lower level.
1. continue

//ask if s7q1>44//

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

(170-171)

<table>
<thead>
<tr>
<th>Number of times</th>
<th>RANGE = 1-76</th>
<th>76 = 76 or more</th>
</tr>
</thead>
<tbody>
<tr>
<td>8 8</td>
<td>None</td>
<td>[Go to next section]</td>
</tr>
<tr>
<td>7 7</td>
<td>Don’t know / Not sure</td>
<td>[Go to next section]</td>
</tr>
<tr>
<td>9 9</td>
<td>Refused</td>
<td>[Go to next section]</td>
</tr>
</tbody>
</table>

//ask if s12q1=1//

s12q2a  “Did this fall cause an injury?”.

1  Yes
2  No
7  Don’t Know
9  Refused

//if s12q1=2-76//

S12q2  How many of these falls caused an injury? By an injury, we mean the fall caused you to limit your regular activities for at least a day or to go see a doctor.
INTERVIEWER: If there was only one fall from Q12.1 and response is “Yes” (caused an injury); code 01. If response is “No,” code 88.

<table>
<thead>
<tr>
<th></th>
<th>Number of falls [range = 1-76]</th>
<th>[76 ≥ 76 or more]</th>
</tr>
</thead>
<tbody>
<tr>
<td>8</td>
<td>None</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Don’t know / Not sure</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Refused</td>
<td></td>
</tr>
</tbody>
</table>

(172-173)
Section 13: Seatbelt Use

//ask of all//
s13q1 How often do you use seat belts when you drive or ride in a car? Would you say—

Please read:

1  Always
2  Nearly always
3  Sometimes
4  Seldom
5  Never

Do not read:

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

CATI note: If s13q1 = 8 (Never drive or ride in a car), go to Section 15; otherwise continue.

Section 14: Drinking and Driving

CATI note: If s10q1 = 888 (No drinks in the past 30 days); go to next section.

//ask if s10q1ne 888 and s13q1 ne 8//
The next question is about drinking and driving.

S14q1 During the past 30 days, how many times have you driven when you’ve had perhaps too much to drink?

 Number of times [RANGE 1-76]
8 8 None
7 7 Don’t know / Not sure
9 9 Refused

Section 15: Breast and Cervical Cancer Screening

CATI note: If respondent is male, go to the next section.

//ask if s7q20=2//
The next questions are about breast and cervical cancer.
**S15q1**  A mammogram is an x-ray of each breast to look for breast cancer. Have you ever had a mammogram?  

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
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<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Don’t know / Not sure</td>
</tr>
<tr>
<td>9</td>
<td>Refused</td>
</tr>
</tbody>
</table>

//ask if s15q1=1//

**s15q2**  How long has it been since you had your last mammogram?  

**Read only if necessary:**

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Within the past year (anytime less than 12 months ago)</td>
</tr>
<tr>
<td>2</td>
<td>Within the past 2 years (1 year but less than 2 years ago)</td>
</tr>
<tr>
<td>3</td>
<td>Within the past 3 years (2 years but less than 3 years ago)</td>
</tr>
<tr>
<td>4</td>
<td>Within the past 5 years (3 years but less than 5 years ago)</td>
</tr>
<tr>
<td>5</td>
<td>5 or more years ago</td>
</tr>
</tbody>
</table>

**Do not read:**

<p>| | |</p>
<table>
<thead>
<tr>
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</thead>
<tbody>
<tr>
<td>7</td>
<td>Don’t know / Not sure</td>
</tr>
<tr>
<td>9</td>
<td>Refused</td>
</tr>
</tbody>
</table>

//ask if s7q20=2//

**s15q3**  A clinical breast exam is when a doctor, nurse, or other health professional feels the breasts for lumps. Have you ever had a clinical breast exam?  

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
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<tbody>
<tr>
<td>1</td>
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</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Don’t know / Not sure</td>
</tr>
<tr>
<td>9</td>
<td>Refused</td>
</tr>
</tbody>
</table>

//ask if s15q3=1//

**s15q4**  How long has it been since your last breast exam?  

**Read only if necessary:**

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Within the past year (anytime less than 12 months ago)</td>
</tr>
<tr>
<td>2</td>
<td>Within the past 2 years (1 year but less than 2 years ago)</td>
</tr>
<tr>
<td>3</td>
<td>Within the past 3 years (2 years but less than 3 years ago)</td>
</tr>
<tr>
<td>4</td>
<td>Within the past 5 years (3 years but less than 5 years ago)</td>
</tr>
<tr>
<td>5</td>
<td>5 or more years ago</td>
</tr>
</tbody>
</table>

**Do not read:**

<p>| | |</p>
<table>
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</thead>
<tbody>
<tr>
<td>7</td>
<td>Don’t know / Not sure</td>
</tr>
<tr>
<td>9</td>
<td>Refused</td>
</tr>
</tbody>
</table>

//ask if s7q20=2//
**s15q5**  A Pap test is a test for cancer of the cervix. Have you ever had a Pap test?

1  Yes
2  No  [Go to s15q7]
7  Don’t know / Not sure  [Go to s15q7]
9  Refused  [Go to s15q7]

//ask if s15q5=1//

**s15q6**  How long has it been since you had your last Pap test?

Read only if necessary:

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

Do not read:

7  Don’t know / Not sure
9  Refused

CATI note: If response to Core s7q21 = 1 (is pregnant); then go to next section.

//ask if s7q21=2//

**s15q7**  Have you had a hysterectomy?

Read only if necessary:  A hysterectomy is an operation to remove the uterus (womb).

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

---

**Section 16: Prostate Cancer Screening**

CATI note: If respondent is <39 years of age, or is female, go to next section.

//ask if s7q1>39 and s7q20=1//

Now, I will ask you some questions about prostate cancer screening.

**s16q1**  A Prostate-Specific Antigen test, also called a PSA test, is a blood test used to check men for prostate cancer. Has a doctor, nurse, or other health professional EVER talked with you about the advantages of the PSA test?

1  Yes
2  No
s16q2 Has a doctor, nurse, or other health professional EVER talked with you about the disadvantages of the PSA test?  
1 Yes  
2 No  
7 Don’t Know / Not sure  
9 Refused

s16q3 Has a doctor, nurse, or other health professional EVER recommended that you have a PSA test?  
1 Yes  
2 No  
7 Don’t Know / Not sure  
9 Refused

S16q4 Have you EVER HAD a PSA test?  
1 Yes  
2 No  
7 Don’t Know / Not sure  
9 Refused

s16q5 How long has it been since you had your last PSA test?  
1 Within the past year (anytime less than 12 months ago)  
2 Within the past 2 years (1 year but less than 2 years)  
3 Within the past 3 years (2 years but less than 3 years)  
4 Within the past 5 years (3 years but less than 5 years)  
5 5 or more years ago  
7 Don’t know / Not sure  
9 Refused

s16q6 What was the MAIN reason you had this PSA test – was it …?  
1 Part of a routine exam
2 Because of a prostate problem
3 Because of a family history of prostate cancer
4 Because you were told you had prostate cancer
5 Some other reason

Do Not Read:
7 Don’t know / Not sure
9 Refused

Section 17: Colorectal Cancer Screening

CATI note: If respondent is ≤ 49 years of age, go to next section.

//ask if s7q1>49//
The next questions are about colorectal cancer screening.

S17q1 A blood stool test is a test that may use a special kit at home to determine whether the stool contains blood. Have you ever had this test using a home kit? (190)

1 Yes
2 No [Go to s17q3]
7 Don’t know / Not sure [Go to s17q3]
9 Refused [Go to s17q3]

//ask if s17q1=1//
S17q2 How long has it been since you had your last blood stool test using a home kit? (191)

Read only if necessary:
1 Within the past year (anytime less than 12 months ago)
2 Within the past 2 years (1 year but less than 2 years ago)
3 Within the past 3 years (2 years but less than 3 years ago)
4 Within the past 5 years (3 years but less than 5 years ago)
5 5 or more years ago

Do not read:
7 Don’t know / Not sure
9 Refused

//ask if s7q1>49//
S17q3 Sigmoidoscopy and colonoscopy are exams in which a tube is inserted in the rectum to view the colon for signs of cancer or other health problems. Have you ever had either of these exams? (192)
For a SIGMOIDOSCOPY, a flexible tube is inserted into the rectum to look for problems. A COLONOSCOPY is similar, but uses a longer tube, and you are usually given medication through a needle in your arm to make you sleepy and told to have someone else drive you home after the test. Was your MOST RECENT exam a sigmoidoscopy or a colonoscopy?

1. Sigmoidoscopy
2. Colonoscopy
7. Don’t know / Not sure
9. Refused

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

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

Do not read:
7. Don’t know / Not sure
9. Refused

Section 18: HIV/AIDS

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

1. Continue

Have you ever been tested for HIV? Do not count tests you may have had as part of a blood donation. Include testing fluid from your mouth.

1. Yes
2. No
7. Don’t know / Not sure

9 Refused [Go to s18q3]
Not including blood donations, in what month and year was your last HIV test?

NOTE: If response is before January 1985, code “Don’t know.”
CATI INSTRUCTION: If the respondent remembers the year but cannot remember the month, code the first two digits 77 and the last four digits for the year.

INTERVIEWER: ENTER MONTH

_ _  Code month [RANGE 01-12]
7 7  Don’t know / Not sure
9 9  Refused / Not sure

Not including blood donations, in what month and year was your last HIV test?

NOTE: If response is before January 1985, code “Don’t know.”
CATI INSTRUCTION: If the respondent remembers the year but cannot remember the month, code the first two digits 77 and the last four digits for the year.

INTERVIEWER: ENTER YEAR

_ _ _ _  Code year [RANGE 1985-2012]
7 7 7 7  Don’t know / Not sure
9 9 9 9  Refused / Not sure

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

- You have used intravenous drugs in the past year.
- You have been treated for a sexually transmitted or venereal disease in the past year.
- You have given or received money or drugs in exchange for sex in the past year.
- You had anal sex without a condom in the past year.

Do any of these situations apply to you?

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

Transition to modules and/or state-added questions

//read to all//
MODT

Finally, I have just a few questions left about some other health topics.

1. continue
Optional Modules

Module 8: Fruits and Vegetables (land and cell)

//ask of all//
Mod8_1T
These next questions are about the fruits and vegetables you ate or drank during the past 30 days. Please think about all forms of fruits and vegetables including cooked or raw, fresh, frozen or canned. Please think about all meals, snacks, and food consumed at home and away from home.

I will be asking how often you ate or drank each one: for example, once a day, twice a week, three times a month, and so forth.
1. continue

//ask of all//
Mod8_1T2
During the past month, how many times per day, week or month did you drink 100% PURE fruit juices? Do not include fruit-flavored drinks with added sugar or fruit juice you made at home and added sugar to. Only include 100% juice.

INTERVIEWER NOTE: Do not include fruit drinks with added sugar or other added sweeteners like Kool-aid, Hi-C, lemonade, cranberry cocktail, Tampico, Sunny Delight, Snapple, Fruitopia, Gatorade, Power-Ade, or yogurt drinks.
Do not include fruit juice drinks that provide 100% daily vitamin C but include added sugar.

Do not include vegetable juices such as tomato and V8 if respondent provides but include in "other vegetables" question mod8_6.

DO include 100% pure juices including orange, mango, papaya, pineapple, apple, grape (white or red), or grapefruit. Only count cranberry juice if the respondent’s perception is that it is 100% juice with no sugar or artificial sweetener added. 100% juice blends such as orange-pineapple, orange-tangerine, cranberry-grape are also acceptable as are fruit-vegetable 100% blends. 100% pure juice from concentrate (i.e., reconstituted) is counted.
1. Continue
//ask of all//

Mod8_1
During the past month, how many times per day, week or month did you drink 100% PURE fruit juices? Do not include fruit-flavored drinks with added sugar or fruit juice you made at home and added sugar to. Only include 100% juice.

INTERVIEWER NOTE: If respondent responds less than once per month, put “0” times per month. If respondent gives a number without a time frame, ask: “Was that per day, week, or month?”

1 _ _ Per day [RANGE = 101-199]
2 _ _ Per week [RANGE = 201-299]
3 _ _ Per month [RANGE = 301-399]
5 5 5 Never
7 7 7 Don’t know / Not sure
9 9 9 Refused
//ask of all//

**Mod8_2t** During the past month, not counting juice, how many times per day, week, or month did you eat fruit? Count fresh, frozen, or canned fruit

Read only if necessary: “Your best guess is fine. Include apples, bananas, applesauce, oranges, grape fruit, fruit salad, watermelon, cantaloupe or musk melon, papaya, lychees, star fruit, pomegranates, mangos, grapes, and berries such as blueberries and strawberries.”

INTERVIEWER NOTE: Do not count fruit jam, jelly, or fruit preserves.

Do not include dried fruit in ready-to-eat cereals.

Do include dried raisins, cran-raisins if respondent tells you – *but due to their small serving size they are not included in the prompt.*

Do include cut up fresh, frozen, or canned fruit added to yogurt, cereal, jello, and other meal items.

Include culturally and geographically appropriate fruits that are not mentioned (e.g. genip, soursop, sugar apple, figs, tamarind, bread fruit, sea grapes, carambola, longans, lychees, akee, rambutan, etc.).

1. Continue

//ask of all//

**Mod8_2**

- **1** _ _ Per day [RANGE = 101-199]
- **2** _ _ Per week [RANGE = 201-299]
- **3** _ _ Per month [RANGE = 301-399]
- **5 5 5** Never
- **7 7 7** Don’t know / Not sure
- **9 9 9** Refused

//ask of all//

**Mod8_3t** During the past month, how many times per day, week, or month did you eat cooked or canned beans, such as refried, baked, black, garbanzo beans, beans in soup, soybeans, edamame, tofu or lentils. Do NOT include long green beans.

(271-273)

Read only if necessary: “Include round or oval beans or peas such as navy, pinto, split peas, cow peas, hummus, lentils, soy beans and tofu. Do NOT include long green beans such as string beans, broad or winged beans, or pole beans.”

INTERVIEWER NOTE: Include soybeans also called edamame, TOFU (BEAN CURD MADE FROM SOYBEANS), kidney, pinto, hummus, lentils, black, black-eyed peas, cow peas, lima beans and white beans.

Include bean burgers including garden burgers and veggie burgers.

Include falafel and tempeh.

1. Continue
INTERVIEWER NOTE: Each time a vegetable is eaten it counts as one time.

INTERVIEWER NOTE: Include all raw leafy green salads including spinach, mesclun, romaine lettuce, bok choy, dark green leafy lettuce, dandelions, komatsuna, watercress, and arugula.

Do not include iceberg (head) lettuce if specifically told type of lettuce. Include all cooked greens including kale, collard greens, choys, turnip greens, mustard greens.

1. Continue

INTERVIEWER NOTE: Include all forms of carrots including long or baby-cut.

Include carrot-slaw (e.g. shredded carrots with or without other vegetables or fruit).

Include all forms of sweet potatoes including baked, mashed, casserole, pie, or sweet potatoes fries.
Include all hard-winter squash varieties including acorn, autumn cup, banana, butternut, buttercup, delicate, hubbard, kabocha (Also known as an Ebisu, Delica, Hoka, Hokkaido, or Japanese Pumpkin; blue kuri), and spaghetti squash. Include all forms including soup.

Include pumpkin, including pumpkin soup and pie. Do not include pumpkin bars, cake, bread or other grain-based dessert-type food containing pumpkin (i.e. similar to banana bars, zucchini bars we do not include).

1. Continue

//ask of all//
Mod8_5

1 _ _ Per day [RANGE = 101-199]
2 _ _ Per week [RANGE = 201-299]
3 _ _ Per month [RANGE = 301-399]
5 5 5 Never
7 7 7 Don’t know / Not sure
9 9 9 Refused

//ask of all//
Mod8_6t Not counting what you just told me about, during the past month, about how many times per day, week, or month did you eat OTHER vegetables? Examples of other vegetables include tomatoes, tomato juice or V-8 juice, corn, eggplant, peas, lettuce, cabbage, and white potatoes that are not fried such as baked or mashed potatoes.

(279-281)

Read only if needed: “Do not count vegetables you have already counted and do not include fried potatoes.”

INTERVIEWER NOTE: Include corn, peas, tomatoes, okra, beets, cauliflower, bean sprouts, avocado, cucumber, onions, peppers (red, green, yellow, orange); all cabbage including American-style cole-slaw; mushrooms, snow peas, snap peas, broad beans, string, wax-, or pole-beans.

Include any form of the vegetable (raw, cooked, canned, or frozen).

Do not include products consumed usually as condiments including ketchup, catsup, salsa, chutney, relish.

Do include tomato juice if respondent did not count in fruit juice.

Include culturally and geographically appropriate vegetables that are not mentioned (e.g. daikon, jicama, oriental cucumber, etc.).

Do not include rice or other grains.

1. Continue

//ask of all//
Mod8_6

1 _ _ Per day [RANGE = 101-199]
2 _ _ Per week [RANGE = 201-299]
3 _ _ Per month [RANGE = 301-399]
5 5 5 Never
Module 11: Shingles (Zostavax or ZOS) (land and cell)

CATI note: If respondent is \( \leq 49 \) years of age, go to next module.
//ask if s7q1 > 49//

The next question is about the Shingles vaccine.

**Mod11_1.** Shingles is caused by the chicken pox virus. It is an outbreak of rash or blisters on the skin that may be associated with severe pain. A vaccine for shingles has been available since May 2006; it is called Zostavax\textregistered, the zoster vaccine, or the shingles vaccine. Have you had this vaccine?  

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

Module 12: Tetanus Diphtheria (Adults) (land and cell)

//ask of all//

Next, I will ask you about the tetanus diphtheria vaccination.

**Mod12_1.** Have you received a tetanus shot in the past 10 years?  

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

//ask of mod12_1=1//

**Mod12_2.** Was your most recent tetanus shot given in 2005 or later?  

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

//ask if mod12_2=1,7,9//

**Mod12_3.** There are currently two types of tetanus shots available for adults. One contains the tetanus diphtheria vaccine. The other type contains tetanus diphtheria and pertussis or whooping cough vaccine. Did your doctor say your recent tetanus shot included the pertussis or whooping cough vaccine?
1   Yes (included pertussis)
2   No (did not include pertussis)
7   Don’t know / Not sure
9   Refused
Module 13: Adult Human Papilloma Virus (HPV) (land and cell)

CATI note: To be asked of respondents between the ages of 18 and 49 years; otherwise, go to next module.
//ask if 18 ≤ s7q1s 49

NOTE: Human Papilloma Virus (Human Pap-uh-loh-muh Virus); Gardasil (Gar·duh·seel); Cervarix (Sir·var·icks)

Mod13_1. A vaccine to prevent the human papilloma virus or HPV infection is available and is called the cervical cancer or genital warts vaccine, HPV shot, [Fill: if female “GARDASIL or CERVARIX”; if male “ or GARDASIL”]. Have you EVER had an HPV vaccination?

1  Yes
2  No  [Go to next module]
3  Doctor refused when asked [Go to next module]
7  Don’t know / Not sure [Go to next module]
9  Refused [Go to next module]

//ask if mod13_1=1//

Mod13_2. How many HPV shots did you receive?

_ _ Number of shots [RANGE 01-03]
0  3  All shots
7  7  Don’t know / Not sure
9  9  Refused

Module 16: Reactions to Race (land and cell)

//ask of all//

Earlier I asked you to self-identify your race. Now I will ask you how other people identify you and treat you.

Mod16_1. How do other people usually classify you in this country? Would you say: White, Black or African American, Hispanic or Latino, Asian, Native Hawaiian or Other Pacific Islander, American Indian or Alaska Native, or some other group?

1  White
2  Black or African American
3  Hispanic or Latino
4  Asian
5  Native Hawaiian or Other Pacific Islander
6  American Indian or Alaska Native
8  Some other group (please specify) _________________________
7  Don’t know / Not sure
9  Refused
INTERVIEWER NOTE: If the respondent requests clarification of this question, say: “We want to know how OTHER people usually classify you in this country, which might be different from how you classify yourself.”

//ask if mod16_1=8//
Mod16o Enter Response:_____________________

//ask of all//

Mod16_2. How often do you think about your race? Would you say never, once a year, once a month, once a week, once a day, once an hour, or constantly? (331)

1 Never
2 Once a year
3 Once a month
4 Once a week
5 Once a day
6 Once an hour
7 Constantly
8 Don’t know / Not sure
9 Refused

INTERVIEWER INSTRUCTION: The responses can be interpreted as meaning “at least” the indicated time frequency. If a respondent cannot decide between two categories, check the response for the lower frequency. For example, if a respondent says that they think about their race between once a week and once a month, check “once a week” as the response.

[CATI skip pattern: This question should only be asked if s7q9 = 1 (of those who are “employed for wages), s7q9=2 ("self-employed,” or s7q9=3 (“out of work for less than one year.”)]

//ask if s7q9=1,2,3//
Mod16_3 Within the past 12 months at work, do you feel you were treated worse than, the same as, or better than people of other races? (332)

1 Worse than other races
2 The same as other races
3 Better than other races

Do not read:

4 Worse than some races, better than others
5 Only encountered people of the same race
7 Don’t know / Not sure
9 Refused

//ask of all//

Mod16_4. Within the past 12 months, when seeking health care, do you feel your experiences were worse than, the same as, or better than for people of other races? (333)
1. Worse than other races
2. The same as other races
3. Better than other races

Do not read:
4. Worse than some races, better than others
5. Only encountered people of the same race
6. No health care in past 12 months
7. Don’t know / Not sure
9. Refused

INTERVIEWER NOTE: If the respondent indicates that they do not know about other people’s experiences when seeking health care, say: “This question is asking about your perceptions when seeking health care. It does not require specific knowledge about other people’s experiences.”

//ask of all//

Mod16_5. Within the past 30 days, have you experienced any physical symptoms, for example, a headache, an upset stomach, tensing of your muscles, or a pounding heart, as a result of how you were treated based on your race? (334)

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

//ask of all//

Mod16_6. Within the past 30 days, have you felt emotionally upset, for example angry, sad, or frustrated, as a result of how you were treated based on your race? (335)

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

Module 21: Chronic Obstructive Pulmonary Disease (COPD) (land and cell)

CATI NOTE: If core Q5.8 = 1 (Yes) then continue, else go to next module.

//ask if s5q8=1//

Mod21_1 Earlier you said that you had been diagnosed with Chronic Obstructive Pulmonary Disease or COPD.

Have you ever been given a breathing test to diagnose your COPD, chronic bronchitis, or emphysema? (373)

1. Yes
2. No
7 Don't know / Not sure
9 Refused
//ask if s5q8=1//'  

**Mod21_2** Would you say that shortness of breath affects the quality of your life?  
(374)  
1 Yes
2 No
7 Don't know / Not sure
9 Refused
//ask if s5q8=1//'  

**Mod21_3** Other than a routine visit, have you had to see a doctor in the past 12 months for symptoms related to shortness of breath, bronchitis, or other COPD, or emphysema flare?  
(375)  
1 Yes
2 No
7 Don't know / Not sure
9 Refused
//ask if s5q8=1//'  

**Mod21_4** Did you have to visit an emergency room or be admitted to the hospital in the past 12 months because of your COPD, chronic bronchitis, or emphysema?  
(376)  
1 Yes
2 No
7 Don't know / Not sure
9 Refused
//ask if s5q8=1//'  

**Mod21_5** How many different medications do you currently take each day to help with your COPD, chronic bronchitis, or emphysema?  
(377-378)  
_ _ Number (01-76)
7 7 Don't know / Not sure
8 8 None
9 9 Refused

Module 23: Random Child Selection (land and cell)

CATI note: If Core Q7.7 = 88, or 99 (No children under age 18 in the household, or Refused), go to next module.

//ask if s7q7 ne 88, 99//
"Previously, you indicated there was one child age 17 or younger in your household. I would like to ask you some questions about that child." [Go to mod23_1]

1. Continue

//ask if s7q7 =2-15//

"Previously, you indicated there were [number] children age 17 or younger in your household. Think about those [number] children in order of their birth, from oldest to youngest. The oldest child is the first child and the youngest child is the last. Please include children with the same birth date, including twins, in the order of their birth."

I have some additional questions about one specific child. The child I will be referring to is the “Xth” [CATI: please fill in correct number] child in your household. All following questions about children will be about the “Xth” [CATI: please fill in] child.

CATI INSTRUCTION: RANDOMLY SELECT ONE OF THE CHILDREN. This is the “Xth” child. Please substitute “Xth” child’s number in all questions below.

1. Continue

//ask if s7q7 ne 88, 99//

Mod23_1m. What is the birth month and year of the “Xth” child?

(390-395)

 Code 2-Digit month [Range 01-12]

Code 4-Digit year [Range 1994-2012]

Don’t know / Not sure

Refused

//ask if s7q7 ne 88, 99//

Mod23_1y. What is the birth month and year of the “Xth” child?

CATI INSTRUCTION: Calculate the child’s age in months (CHLDAGE1=0 to 216) and also in years (CHLDAGE2=0 to 17) based on the interview date and the birth month and year using a value of 15 for the birth day. If the selected child is < 12 months old enter the calculated months in CHLDAGE1 and 0 in CHLDAGE2. If the child is > 12 months enter the calculated months in CHLDAGE1 and set CHLDAGE2=Truncate (CHLDAGE1/12).

//ask if 0 <= chldage2 < 18 or mod23_1y in (7777, 9999)//

Mod23_2. Is the child a boy or a girl?

(396)

1 Boy
2 Girl
9 Refused
//ask if 0 <= chldage2 < 18 or mod23_1y in (7777, 9999)//
Mod23_3. Is the child Hispanic or Latino? (397)

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

//ask if 0 <= chldage2 < 18 or mod23_1y in (7777, 9999)//
Mod23_4. Which one or more of the following would you say is the race of the child? (398-403)

[Check all that apply]

Please read:

1 White
2 Black or African American
3 Asian
4 Native Hawaiian or Other Pacific Islander
5 American Indian, Alaska Native

Or

6 Other [specify] __________________________

Do not read:

7 Don’t know / Not sure
9 Refused

//ask if mod23_4=6//
Mod23_4o Enter Response __________________________

CATI note: If more than one response to Q4, continue. Otherwise, go to Q6.
Mod23_5. Which one of these groups would you say best represents the child’s race?

1. White
2. Black or African American
3. Asian
4. Native Hawaiian or Other Pacific Islander
5. American Indian, Alaska Native
6. Other
7. Don’t know / Not sure
9. Refused

Mod23_6. How are you related to the child?

Please read:
1. Parent (include biologic, step, or adoptive parent)
2. Grandparent
3. Foster parent or guardian
4. Sibling (include biologic, step, and adoptive sibling)
5. Other relative
6. Not related in any way

Do not read:
7. Don’t know / Not sure
9. Refused

Module 24: Childhood Asthma Prevalence (land and cell)

CATI note: If response to Core Q7.7 = 88 (None) or 99 (Refused), go to next module.

Mod24_1. Has a doctor, nurse or other health professional EVER said that the child has asthma?

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

Mod24_2. Does the child still have asthma?
Module 25: Childhood Immunization (land and cell)

CATI note: If Core Q7.7 = 88, or 99 (No children under age 18 in the household, or Refused), go to next module.

CATI note: If selected child’s age is ≥ 6 months, continue. Otherwise, go to next module.

// ask if (childage1 ≥ 6 months and 0<=childage2<18) or mod23_1y in (7777,9999)//

Mod25_1  Now I will ask you questions about seasonal flu. There are two types of seasonal flu vaccinations. One is a shot and the other is a spray in the nose. During the past 12 months, has [Fill: he/she] had a seasonal flu vaccination?

(408)

1  Yes
2  No  [Go to next module]
7  Don’t know / Not sure  [Go to next module]
9  Refused  [Go to next module]

//ask if mod25_1=1//

Mod25_2m  The flu vaccination may have been either the flu shot or the flu spray. The flu spray is the flu vaccination that is sprayed in the nose. During what month and year did [Fill: he/she] receive [Fill: his/her] most recent seasonal flu vaccination?

(409-4146)

_________ Month [RANGE01-12]
7 7  Don’t know / Not sure
9 9  Refused

//ask if mod25_1=1//

Mod25_2y  The flu vaccination may have been either the flu shot or the flu spray. The flu spray is the flu vaccination that is sprayed in the nose. During what month and year did [Fill: he/she] receive [Fill: his/her] most recent seasonal flu vaccination?

(409-4146)

_________ Year [RANGE 2011-2012]
7 7 7 7  Don’t know / Not sure
9 9 9 9  Refused

State-Added 1: Cognitive Impairment – land and cell (2011 mod 27)

//ask of all//
The next few questions ask about difficulties in thinking or remembering that can make a big difference in everyday activities. This does not refer to occasionally forgetting your keys or the name of someone you recently met. This refers to things like confusion or memory loss that are happening more often or getting worse. We want to know how these difficulties impact you or someone in your household.

1. Continue
   //ask of all//

   **AZ1._1.** During the past 12 months, have you experienced confusion or memory loss that is happening more often or is getting worse?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Don’t know / Not sure</td>
</tr>
<tr>
<td>9</td>
<td>Refused</td>
</tr>
</tbody>
</table>

   **CATI NOTE:** If 1 adult in household and Q1 = 1 (Yes), go to Q4; otherwise, go to next module.

   **CATI NOTE:** If number of adults > 1, go to Q2.

   //ask if adults>1//

   **AZ1._2.** [If AZ1._1 = 1]; Not including yourself, how many adults 18 or older in your household experienced confusion or memory loss that is happening more often or is getting worse during the past 12 months?

<table>
<thead>
<tr>
<th></th>
<th>Number of people [6 = 6 or more][RANGE=1-6]</th>
</tr>
</thead>
<tbody>
<tr>
<td>8</td>
<td>NONE</td>
</tr>
<tr>
<td>7</td>
<td>Don’t know / Not sure</td>
</tr>
<tr>
<td>9</td>
<td>Refused</td>
</tr>
</tbody>
</table>

   **CATI NOTE:** If number of adults > 1 and Q2 < 7; continue. Otherwise, go to next module.

   **CATI NOTE:** If Q2 < 7; go to Q3. Otherwise, go to next module.

   //ask if adults>1 and AZ1._2 <7//

   **AZ1._3.** Of these people, please select the person who had the most recent birthday. How old is this person?

   **Read only if necessary:**

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>0 1</td>
<td>Age 18-29</td>
</tr>
<tr>
<td>0 2</td>
<td>Age 30-39</td>
</tr>
<tr>
<td>0 3</td>
<td>Age 40-49</td>
</tr>
<tr>
<td>0 4</td>
<td>Age 50-59</td>
</tr>
<tr>
<td>0 5</td>
<td>Age 60-69</td>
</tr>
<tr>
<td>0 6</td>
<td>Age 70-79</td>
</tr>
<tr>
<td>0 7</td>
<td>Age 80-89</td>
</tr>
<tr>
<td>0 8</td>
<td>Age 90 +</td>
</tr>
</tbody>
</table>

   **Do not read:**

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>7 7</td>
<td>Don’t know / Not sure</td>
</tr>
<tr>
<td>9 9</td>
<td>Refused</td>
</tr>
</tbody>
</table>
AZ1_4. During the past 12 months, how often [If Q1 = 1 (Yes): insert “have you;” otherwise, insert “has this person”] given up household activities or chores [If Q1 = 1 (Yes): insert “you;” otherwise, insert “they”] used to do, because of confusion or memory loss that is happening more often or is getting worse?

INTERVIEWER NOTE: Repeat definition only as needed: “For these questions, please think about confusion or memory loss that is happening more often or getting worse.”

Please read:
1. Always
2. Usually
3. Sometimes
4. Rarely
5. Never

Do not read:
7. Don’t know / Not sure
9. Refused

AZ1_5. As a result of [If AZ1_1 = 1 (Yes): insert “your;” otherwise, insert “this person’s”] confusion or memory loss, in which of the following four areas [If AZ1_1 = 1 (Yes): insert “do you;” otherwise, insert “does this person”] need the MOST assistance?

(457)

1. Safety [read only if necessary: such as forgetting to turn off the stove or falling]
2. Transportation [read only if necessary: such as getting to doctor’s appointments]
3. Household activities [read only if necessary: such as managing money or housekeeping]
4. Personal care [read only if necessary: such as eating or bathing]

Do not read:
5. Needs assistance, but not in those areas
6. Doesn’t need assistance in any area
7. Don’t know / Not sure
9. Refused
AZ1_6. During the past 12 months, how often has confusion or memory loss interfered with [If AZ1_1 = 1 (Yes): insert “your;” otherwise, insert “this person’s”] ability to work, volunteer, or engage in social activities?

Please read:

1 Always
2 Usually
3 Sometimes
4 Rarely
5 Never

Do not read:

7 Don’t know / Not sure
9 Refused

//ask if (adults>1 and AZ1_2 <7) or (adults=1 and AZ1_1=1)//

AZ1_7. During the past 30 days, how often [If AZ1_1 = 1 (Yes): insert “has;” otherwise, insert “have you, ”] a family member or friend provided any care or assistance for [If AZ1_1 = 1 (Yes): “you;” otherwise, insert “this person”] because of confusion or memory loss?

Please read:

1 Always
2 Usually
3 Sometimes
4 Rarely
5 Never

Do not read:

7 Don’t know / Not sure
9 Refused

//ask if (adults>1 and AZ1_2 <7) or (adults=1 and AZ1_1=1)//

AZ1_8. Has anyone discussed with a health care professional, increases in [If AZ1_1 = 1 (Yes): insert “your;” otherwise, insert “this person’s”] confusion or memory loss?

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

//ask if AZ1_8=1//

AZ1_9. Have [If AZ1_1 = 1 (Yes): insert “you;” otherwise, insert “this person”] received treatment such as therapy or medications for confusion or memory loss?

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

//ask if AZ1_8=1/

AZ1_10. Has a health care professional ever said that [If AZ1_1 = 1 (Yes): insert “you have;” otherwise, insert “this person has”] Alzheimer’s disease or some other form of dementia?

1 Yes, Alzheimer’s Disease
2 Yes, some other form of dementia but not Alzheimer’s Disease
3 No diagnosis has been given
7 Don’t know / Not sure
9 Refused

State-Added 2: Physical Activity – land and cell (2011 core 10)

//ask if s4q1=1/
Az2_1t The next few questions are about exercise, recreation, or physical activities other than your regular job duties.
1. Continue

//ask if s4q1=1/
AZ2_1. What type of physical activity or exercise did you spend the most time doing during the past month?

0 1 Active Gaming Devices (Wii Fit, Dance Dance revolution)
0 2 Aerobics video or class
0 3 Backpacking
0 4 Badminton
0 5 Basketball
0 6 Bicycling machine exercise
0 7 Bicycling
0 8 Boating (Canoeing, rowing, kayaking, sailing for pleasure or camping)
0 9 Bowling
1 0 Boxing
1 1 Calisthenics
1 2 Canoeing/rowing in competition
1 3 Carpentry
1 4 Dancing-ballet, ballroom, Latin, hip hop, etc
1 5 Elliptical/EFX machine exercise
1 6 Fishing from river bank or boat
1 7 Frisbee
1 8 Gardening (spading, weeding, digging, filling)
1 9 Golf (with motorized cart)
2 0 Golf (without motorized cart)
4 1 Rugby
4 2 Scuba diving
4 3 Skateboarding
4 4 Skating – ice or roller
4 5 Sledding, tobogganing
4 6 Snorkeling
4 7 Snow blowing
4 8 Snow shoveling by hand
4 9 Snow skiing
5 0 Snowshoeing
5 1 Soccer
5 2 Softball/Baseball
5 3 Squash
5 4 Stair climbing/Stair master
5 5 Stream fishing in waders
5 6 Surfing
5 7 Swimming
5 8 Swimming in laps
5 9 Table tennis
6 0 Tai Chi
6 1 Tennis
6 2 Touch football
2 1 Handball
2 2 Hockey
2 3 Hunting small game – quail
2 4 Hunting large game – deer, elk
2 5 Hunting large game – cross-country
2 6 Hiking
2 7 Inline Skating
2 8 Jogging
2 9 Lacrosse
3 0 Mountain climbing
3 1 Mowing lawn
3 2 Paddleball
3 3 Painting/papering house
3 4 Pilates
3 5 Racquetball
3 6 Raking lawn
3 7 Running
3 8 Rock Climbing
3 9 Rope skipping
4 0 Rowing machine exercise

6 3 Volleyball
6 4 Walking
6 6 Waterskiing
6 7 Weight lifting
6 8 Wrestling
6 9 Yoga
7 0 Other

7 7 Don’t know / Not Sure [Go to Q10.8]
9 9 Refused [Go to Q10.8]

//if AZ2_1=70//
AZ2_1o ENTER OTHER ACTIVITY _____________________________

INTERVIEWER INSTRUCTION: If the respondent’s activity is not included in the Coding List A, choose the option listed as “Other”.

INTERVIEWER NOTE: Housework may be included as a physical activity or exercise spent and can be coded as “Other”.

//if AZ2_1=1-70//
//AZ2_1c Interviewer, you’ve chosen [INSERT AZ2_2]. Is that Correct?
1 Yes
2 No, go back and change response

//ask if AZ2_1=01-70//
AZ2_2 How many times per week or per month did you take part in this activity during the past month?

(184-186)

1 _ _ Times per week [RANGE = 101-150]
2 _ _ Times per month [RANGE = 201-250]
7 7 7 Don’t know / Not sure
9 9 9 Refused
AZ2_3

And when you took part in this activity, for how many minutes or hours did you usually keep at it?

(187-189)

_:_ _

Hours and minutes [RANGE = 10-59, 100-159, 200-259, 300-359, 400-459, 500-559, 600-659, 700-759, 800-859, 900-959]

7 7 7 Don’t know / Not sure
9 9 9 Refused

AZ2_4

What other type of physical activity gave you the next most exercise during the past month?

(190-191)

0 1 Active Gaming Devices (Wii Fit, Dance Dance revolution)
0 2 Aerobics video or class
0 3 Backpacking
0 4 Badminton
0 5 Basketball
0 6 Bicycling machine exercise
0 7 Bicycling
0 8 Boating (Canoeing, rowing, kayaking, sailing for pleasure or camping)
0 9 Bowling
1 0 Boxing
1 1 Calisthenics
1 2 Canoeing/rowing in competition
1 3 Carpentry
1 4 Dancing-ballet, ballroom, Latin, hip hop, etc
1 5 Elliptical/EFX machine exercise
1 6 Fishing from river bank or boat
1 7 Frisbee
1 8 Gardening (spading, weeding, digging, filling)
1 9 Golf (with motorized cart)
2 0 Golf (without motorized cart)
2 1 Handball
2 2 Hiking – cross-country
2 3 Hockey
2 4 Horseback riding
2 5 Hunting large game – deer, elk
2 6 Hunting small game – quail
2 7 Inline Skating
2 8 Jogging
2 9 Lacrosse
3 0 Mountain climbing
3 1 Mowing lawn
3 2 Paddleball
3 3 Painting/papering house
3 4 Pilates
3 5 Racquetball
4 1 Rugby
4 2 Scuba diving
4 3 Skateboarding
4 4 Skating – ice or roller
4 5 Sledding, tobogganing
4 6 Snorkeling
4 7 Snow blowing
4 8 Snow shoveling by hand
4 9 Snow skiing
5 0 Snowshoeing
5 1 Soccer
5 2 Softball/Baseball
5 3 Squash
5 4 Stair climbing/Stair master
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5 7 Swimming
5 8 Swimming in laps
5 9 Table tennis
6 0 Tai Chi
6 1 Tennis
6 2 Touch football
6 3 Volleyball
6 4 Walking
6 5 Waterskiing
6 7 Weight lifting
6 8 Wrestling
6 9 Yoga
7 0 Other
3 6 Raking lawn
3 7 Running
3 8 Rock Climbing
3 9 Rope skipping
4 0 Rowing machine exercise

8 8 No other activity [Go to Q10.8]
7 7 Don’t know / Not sure [Go to Q10.8]
9 9 Refused [Go to Q10.8]

INTERVIEWER INSTRUCTION: If the respondent's activity is not included in the Coding List A, choose the option listed as “Other”.

INTERVIEWER NOTE: Housework may be included as a physical activity or exercise spent and can be coded as “Other”.

//if AZ2_4=70//
AZ2_4o ENTER OTHER ACTIVITY

//ask if AZ2_4=01-70//
//AZ2_4c Interviewer, you’ve chosen [INSERT AZ2_5]. Is that Correct?
1 Yes
2 No, go back and change response.

//ask if AZ2_4=01-70//
AZ2_5 How many times per week or per month did you take part in this activity during the past month?

1 _ _ Times per week [RANGE= 101-150]
2 _ _ Times per month [RANGE= 201-250]
7 7 7 Don’t know / Not sure
9 9 9 Refused

//ask if AZ2_4=01-70//
AZ2_6 And when you took part in this activity, for how many minutes or hours did you usually keep at it?

_ : _ _ Hours and minutes [RANGE = 10-59,100-159,200-259,300-359,400-459,500-559,600-659,700-759,800-859,900-959]
7 7 7 Don’t know / Not sure
9 9 9 Refused

//ask if s4q1=1//
AZ2_7 During the past month, how many times per week or per month did you do physical activities or exercises to STRENGTHEN your muscles? Do NOT count aerobic activities like walking, running, or bicycling. Count activities using your own body weight like yoga, sit-ups or push-ups and those using weight machines, free weights, or elastic bands.

1 _ _ Times per week [RANGE=101-150]
2 _ _ Times per month [RANGE=201-250]
8 8 8 Never

//ask of all//

AZ3_1. In the past 12 months, did you or anyone in your household get food stamps or a food stamp benefit card?

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

//ask of all//

AZ3_2. In the past 12 months, did any women or children in this household get food through the WIC program?

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

//ask if s7q7=1-15//

AZ3_3. In the past 12 months, did any children in your household between 5 and 18 years old receive free or reduced-cost lunches at school?

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

State-Added 4: Tobacco - land and cell (2011 state 4)

//ask of all//

AZ4_1. Which statement best describes the rules about smoking inside your home?

Please read

1 Smoking is not allowed anywhere inside your home
2 Smoking is allowed in some places or at some times
3 Smoking is allowed anywhere inside your home
4 There are no rules about smoking inside your home

Do not read
7  DON'T KNOW/NOT SURE
9  REFUSED

//ask of all//

AZ4_2  Do you allow smoking in your car or motor vehicle?

1  YES
2  NO
3  I DON'T HAVE A CAR OR MOTOR VEHICLE
7  DON'T KNOW/NOT SURE
9  REFUSED

//Ask if s7q9 =1 or 2 (employed respondents only)//

AZ4_3  While working at your job, are you indoors most of the time? [AZ BRFS 2007]

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

//ask if s7q9=1 or 2//

AZ4_4  Which of the following best describes your place of work’s official smoking policy for indoor public or common areas, such as lobbies, rest rooms, and lunch rooms?

[INTERVIEWER NOTE: For workers who visit clients or work at home, “place of work” means their base location. For self-employed persons who work at home, the official smoking policy means the home smoking policy.]

Please read

1  Not allowed in any public areas
2  Allowed in some public areas
3  Allowed in all public areas
4  No official policy

Do not read

7  DON'T KNOW/NOT SURE
9  REFUSED

//ask if s7q9=1 or 2//

AZ4_5  Which of the following best describes your place of work’s official smoking policy for work areas?

Please read

1  Not allowed in any work areas
2  Allowed in some work areas
3 Allowed in all work areas
4 No official policy

**Do not read**
7 Don’t know/Not sure
9 Refused

//If s9q2=3,7,9 go to AZ4_11//

//ask if s9q2=1 or 2//

**AZ4_6** Now I’d like you to think about the past 30 days, that is since [CATI: DATE FILL]. On how many of the past 30 days did you smoke cigarettes?

---

**ENTER Number of Days [RANGE=1-30]**

- **88** [go to AZ4_8] None
- 77 Don’t know/Not sure
- 99 Refused

//if AZ4_6=88 go to AZ4_8//

//ask if s9q2=1 or 2 and AZ4_6=1-30, 77, 99//

**AZ4_7** On the average, on days when you smoked during the past 30 days, about how many cigarettes did you smoke a day?

[Note to interviewer: 1 pack=20 cigarettes]

---

**Enter Number of cigarettes [RANGE 001-180]**

- 666 Less than one cigarette a day
- 888 None
- 777 Don’t know/Not sure
- 999 Refused

//ask if s9q2=1 or 2//

**AZ4_8** In the past 6 months, have you bought cigarettes…

//ask if s9q2=1 or 2//

**AZ4_8a.)** In Neighboring States

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

//ask if s9q2=1 or 2//

**AZ4_8b.)** On Indian Reservations
1  YES
2  NO
7  DON'T KNOW / NOT SURE
9  REFUSED

//ask if S9q2=1 or 2/

**AZ4_8c.** In Mexico
1  YES
2  NO
7  DON'T KNOW / NOT SURE
9  REFUSED

//ask if S9q2=1 or 2/

**AZ4_8d.** On a military base
1  YES
2  NO
7  DON'T KNOW / NOT SURE
9  REFUSED

//ask if s9q2=1 or 2/

**AZ4_8e.** Over the Internet
1  YES
2  NO
7  DON'T KNOW / NOT SURE
9  REFUSED

/If s9q2=3,7,9 go to AZ4_11/

//ask if s9q2=1 or 2/

Az4_9t In December 2006, cigarettes became more expensive in Arizona because of a tax increase. Keeping this in mind for the following questions, please tell me,
1. continue
   //ask if s9q2=1 or 2/

**AZ4_9** Because of the tax increase in Dec. 2006, have you done any of the following:

//ask if s9q2=1 or 2/

**AZ4_9a.)** Bought a cheaper brand of cigarettes?
1  YES
2  NO
7  DON'T KNOW / NOT SURE
9  REFUSED
//ask if s9q2=1 or 2//

AZ4_9b.) Smoked roll-your-own cigarettes?
1 YES
2 NO
7 DON'T KNOW / NOT SURE
9 REFUSED

//ask if s9q2=1 or 2//

AZ4_9c.) Smoked less
1 YES
2 NO
7 DON'T KNOW / NOT SURE
9 REFUSED

//ask if s9q2=1 or 2//

AZ4_10 Are you seriously considering stopping smoking within the next six months?
1 YES
2 NO
7 DON'T KNOW / NOT SURE
9 REFUSED

//ask of all//

AZ4_11 In the past 12 months, have you seen a doctor or other healthcare professional, including dentist and dental health professionals, to get health care for yourself?
1 YES
2 [GO TO pre-AZ4_14] NO
7 [GO TO pre-AZ4_14] DON'T KNOW / NOT SURE
9 [GO TO pre-AZ4_14] REFUSED

//ask if AZ4_11=1//

AZ4_12 In the past 12 months, did any doctor, nurse or other healthcare professional ask you if you smoke?
1 YES
2 [GO TO pre-AZ4_14] NO
7 [GO TO pre-AZ4_14] DON'T KNOW / NOT SURE
9 [GO TO pre-AZ4_14] REFUSED

/if AZ4_12=2,7,9 go to pre-AZ1_14/

//ask if AZ4_12=1//
AZ4_13  In the past 12 months, did any doctor, nurse, or other healthcare professional advise you not to smoke?

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

/If s9q3=1 continue; if s9q3=2.7.9 go to pre-AZ4_15/

//ask if s9q3=1//

AZ4_14  Previously you said you have stopped smoking for one day or longer in the past 12 months. How long did you actually stay off cigarettes after your last quit attempt?

1 ___ Days [RANGE 101-199]
2 ___ Weeks [RANGE 201-299]
3 ___ Months [RANGE 301-399]
777 DON'T KNOW/NOT SURE
888 I HAVE NOT TRIED
999 REFUSED

//Ask AZ4_15 if s9q3=1 or s9q4=1-5//

[CURRENT SMOKERS WHO MADE A QUIT ATTEMPT IN THE PAST YEAR (Q11.3 = 1 “YES”)]
[FORMER SMOKERS WHO QUIT IN LAST 5 YEARS (Q11.4= 1 – 5)]

/IF s9q4=1-5 (former smokers):/ When you quit smoking for good…
/IF s9q3=1 (current smokers):/ The last time you tried to quit smoking…

AZ4_15. Did you use the nicotine patch, nicotine gum, or any other medication to help you quit?

1  [GO TO AZ4_16] YES
2  [GO TO PRE-AZ4_17] NO
7  [GO TO PRE-AZ4_17] DON'T KNOW/NOT SURE
9  [GO TO PRE-AZ4_17] REFUSED

/If AZ4_15=2,7,9 go to next question/

//ask if AZ4_15=1//

AZ4_16  Did you use…

//ask if AZ4_15=1//

AZ4_16a.) A nicotine gum?
1  YES
2  NO
7  DON'T KNOW / NOT SURE
9  REFUSED

//ask if AZ4_15=1//

AZ4_16b.)  A patch?
1  YES
2  NO
7  DON'T KNOW / NOT SURE
9  REFUSED

//ask if AZ4_15=1//

AZ4_16c.)  A nasal spray?
1  YES
2  NO
7  DON'T KNOW / NOT SURE
9  REFUSED

//ask if AZ4_15=1//

AZ4_16d.)  An inhaler?
1  YES
2  NO
7  DON'T KNOW / NOT SURE
9  REFUSED

//ask if AZ4_15=1//

AZ4_16e.)  Zyban or Buproprion?
1  YES
2  NO
7  DON'T KNOW / NOT SURE
9  REFUSED

//ask if AZ4_15=1//

AZ4_16f.)  Wellbutrin?
1  YES
2  NO
7  DON'T KNOW / NOT SURE
9  REFUSED

//ask if AZ4_15=1//

AZ4_16g.)  Chantix?
1  YES
AZ4_17a) A stop smoking clinic or class

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

AZ4_17b) A telephone helpline

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

AZ4_17c) One-on-one counseling from a doctor, nurse, or other professional

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

AZ4_17d) Self-help material, books, or videos

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

AZ4_17e) Acupuncture

1  YES
2  NO
7  DON'T KNOW / NOT SURE
9  REFUSED
//Ask AZ4_17 if s9q3=1 or s9q4=1-5//

AZ4_17f) Hypnosis

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

//Ask AZ4_17 if s9q3=1 or s9q4=1-5//

AZ4_17g) Internet counseling

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

//ask of all//

AZ4_18 Now I’m going to ask you a question about sexual orientation. Do you consider yourself to be:

[INTERVIEWER NOTE: IF NEEDED, READ: Remember, your answers are confidential.]

[INTERVIEWER NOTE, IF NEEDED, READ: Research has shown that some sexual minority community members have important health risk factors, such as smoking. We are collecting information about sexual orientation to learn whether this is true in Arizona. You don’t have to answer any question if you don’t want.]

Please Read
1 Heterosexual, that is, straight;
2 Homosexual, that is gay or lesbian;
3 Bisexual, or
4 Other
5

Do not read
7 DON'T KNOW / NOT SURE
9 REFUSED

State-Added 5: Folic Acid – land and cell (2011 state 2)

//ask if s7q20=2//
AZ5_1 Do you currently take any multivitamins or supplements that contain folic acid?

1 Yes
2 No [Go to AZ5_3]
7 Don’t know/Not sure [Go to AZ5_3]
9 Refused [Go to AZ5_3]

//ask if AZ5_1=1//
AZ5_2 How often do you take this multivitamin or supplement?
Some health experts recommend that women take 400 micrograms of the B-vitamin folic acid every day. They recommend this for which one of the following reasons?

**Please read:**
1. To make strong bones
2. To prevent birth defects
3. To prevent high blood pressure
   
   **Or**
4. Some other reason

**Do not read:**
7. Don’t know / Not sure
9. Refused

State-Added 6: Preconception Health/Family Planning - land and cell (2011 mod 5)

If respondent is female and 45 years of age or older, or male, go to next module.

The next question is about discussions that occurred as part of a routine health care visit. **DO NOT** include visits while pregnant, also called prenatal care visits.

1. Continue

Has a doctor, nurse, or other health care worker ever talked with you about ways to prepare for a healthy pregnancy and baby?

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

The next set of questions asks you about your thoughts and experiences with family planning. Please remember that all of your answers will be kept confidential.

1. Continue

Have you ever been pregnant?
INTERVIEWER NOTE: If respondent is currently pregnant, code Yes.

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

//ask if s7q1 <45 and s7q20=2/

Az6_3

Did you or your husband/partner do anything the last time you had sex to keep you from getting pregnant? (283)

1 Yes
2 No [Go to Q5]
3 No partner/not sexually active [Go to Q6]
4 Same sex partner [Go to Q6]
7 Don’t know / Not sure [Go to Q6]
9 Refused [Go to Q6]

//ask if Az6_3=1/

Az6_4T

What did you or your husband/partner do the last time you had sex to keep you from getting pregnant? (284-285)

INTERVIEWER NOTE: If respondent reports using MORE THAN ONE method, please code the method that occurs first on the list.

INTERVIEWER NOTE: If respondent reports using “condoms,” probe to determine if “female condoms” or “male condoms.”

INTERVIEWER NOTE: If respondent reports using an “IUD” probe to determine if “levonorgestrel IUD” or “copper-bearing IUD.”

INTERVIEWER NOTE: If respondent reports “other method,” ask respondent to “please specify” and ensure that their response does not fit into another category. If response does fit into another category, please mark appropriately.

1. continue

//ask if Az6_3=1/

Az6_4

What did you or your husband/partner do the last time you had sex to keep you from getting pregnant?

Read only if necessary:

01. Female sterilization (ex. Tubal ligation, Essure, Adiana) [Go to Q7]
02. Male sterilization (vasectomy) [Go to Q7]
03. Contraceptive implant (ex. Implanon) [Go to Q6]
04. Levonorgestrel(LNG) or hormonal IUD(ex. Mirena) [Go to Q6]
05. Copper-bearing IUD (ex. ParaGard) [Go to Q6]
06. IUD, type unknown [Go to Q6]
07. Shots (ex. Depo-Provera) [Go to Q6]
08. Birth control pills, any kind [Go to Q6]

Some reasons for not doing anything to keep you from getting pregnant the last time you had sex might include wanting a pregnancy, not being able to pay for birth control, or not thinking that you can get pregnant.

1. continue

INTERVIEWER NOTE: If respondent reports “other reason,” ask respondent to “please specify” and ensure that their response does not fit into another category. If response does fit into another category, please mark appropriately.

Read only if necessary:

01 You didn’t think you were going to have sex/no regular partner
02 You just didn’t think about it/don’t care if you get pregnant
03 You want a pregnancy
04 You or your partner don’t want to use birth control
05 You or your partner don’t like birth control/side effects
06 You couldn’t pay for birth control
07 You had a problem getting birth control when you needed it
08 Religious reasons
09 Lapse in use of a method
10 Don’t think you or your partner can get pregnant (infertile or too old)
11 You had tubes tied (sterilization) [Go to next module]
12 You had a hysterectomy [Go to next module]
13 Your partner had a vasectomy (sterilization) [Go to next module]
14 You are currently breast-feeding
15 You just had a baby/postpartum
16 You are pregnant now [Go to Q7]
17 Same sex partner
18 Other reason

Do not read:
77 Don’t know / Not sure
99 Refused
Az6_6 How do you feel about having a child now or sometime in the future? Would you say:

Please read:
1. You don’t want to have one
2. You do want to have one, less than 12 months from now
3. You do want to have one, between 12 months to less than 2 years from now
4. You do want to have one, between 2 years to less than 5 years from now
5. You do want to have one, 5 or more years from now

Do not read:
7. Don’t know / Not sure
9. Refused

Az6_7 How many times a week do you currently take a multivitamin, a prenatal vitamin, or a folic acid vitamin?

1. 0 times a week
2. 1 to 3 times a week
3. 4 to 6 times a week
4. Every day of the week
7. Don’t know / Not sure
9. Refused

State-Added 7: Asthma Call-Back Permission Script – landline sample

We would like to call you again within the next 2 weeks to talk in more detail about (your/your child’s) experiences with asthma. The information will be used to help develop and improve the asthma programs in Arizona. The information you gave us today and any you give us in the future will be kept confidential. If you agree to this, we will keep your first name or initials and phone number on file, separate from the answers collected today. Even if you agree now, you may refuse to participate in the future. Would it be okay if we called you back to ask additional asthma-related questions at a later time?

1. Yes
2. No

Can I please have either your first name or initials, so we will know who to ask for when we call back?

1. Gave Response
7. Don’t Know
9. Refused
Enter first name or initials

//ask if ast2a=1 and acflag=3,4)

AST2b  Can I please have either your child's first name or initials, so we will know who to ask about when we call back?
   1  Gave Response
   7  Don't Know
   9  Refused

//ask if ast2b=1//
AST2c  Can I please have either your child's first name or initials, so we will know who to ask about when we call back?

Enter first name or initials

Asthma Call-Back Selection

//ask if ast1=1//
ACFLAG  Which person in the household was selected as the focus of the asthma call-back?
(422)

   1 adult with asthma
   2 adult had asthma
   3 child with asthma
   4 child had asthma

//ask of all//
Qcresp  Please rate the sound quality of this telephone call on a scale from 1 to 10, with 1 being the lowest and 10 being the highest?

[INTERVIEWER: PROMPT AS NEEDED: "A rating of 1 indicates the sound quality is 'very poor' and a rating of 10 indicates the sound quality is 'excellent'."]

\[ \underline{\text{RECORD NUMBER}} \ [ 1 - 10 ] \]

[ \[b99\] REFUSED ]

Por favor indique la calidad de sonido de la llamada de teléfono en una escala de 1 a 10.
[INTERVIEWER: EXPLIQUE SI ES NECESARIO: "1 indica que la calidad de sonido es muy mala y 10 indica que es excelente"]

\___ RECORD NUMBER [ 1 - 10 ]

99 REFUSED

Closing statement
//ask of all//
Please read:

CLOSING
That was my last question. Everyone’s answers will be combined to help us provide information about the health practices of people in Arizona. Thank you very much for your time and cooperation.

1. continue

//ask of all//
Qcintv

*** INTERVIEWER:

Please rate the sound quality of this telephone call on a scale from 1 to 10?

Por favor indique la calidad de sonido de la llamada de telefono en una escala de 1 a 10.

\___ RECORD NUMBER [ 1 - 10 ]