2010

Arizona Behavioral Risk Factor Surveillance System Questionnaire

November 23, 2009
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Interviewer’s Script

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 New Hampshire residents. Please call us at 1-877-364-0914 at your convenience. Thanks.*

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 Correct Number (proceed to next question)
02 Answering Machine (RESIDENCE)
03 Answering Machine (UNKNOWN)
06 Fax Machine
07 Termination Screen
08 Hang Up – Before Intro
14 CONTINUE IN SPANISH

//ask if intro1=01//
HS1. Is this a private residence in Arizona?_

1 Yes
2 No

//If HS1=2 read//
X2 Thank you very much, but we are only interviewing private residences in Arizona. STOP

//ask if HS1=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.”]

1 No - Not a Cellular Telephone
2 Yes

//if HS2=2 read//
X4 Thank you very much, but we are only interviewing land line telephones and private residences. STOP

//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]

//ASK IF ADULTS = 1//

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

//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

//ASK IF ONEADULT = 03//

GETADULT  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]

//ASK IF ADULTS >1//

MEN  How many of these adults are men?
0  None
1  One
2  Two
3  Three
4  four
5  Five
6  Six
7  Seven
8  Eight
9  Nine

//ASK IF ADULTS >1//

WOMEN  How many of these adults are women?
0  None
1  One
2  Two
3  Three
4  four
5  Five
6  Six
7  Seven
8  Eight
9  Nine

RANDOMLY SELECT ADULT

//ASK IF ADULTS >1//

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

//IF ASKFOR = 1//

YOU'RE THE 1
Then you are the person I need to speak with.

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.
104 Selected requested to set appointment for interview at a later time.
173 Selected person unable to complete - language barrier
174 Selected person unable to complete – impairment
175 Selected person refuses – Before Intro
176 Selected person refuses - After Intro
002 Go back to Adults question. WARNING: A NEW RESPONDENT WILL BE SELECTED AND YOU NEED A SUPERVISOR’S PASSWORD TO CONTINUE.

//ASK IF ASKFOR = 02//

GETADULT 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 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.

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.
104 Selected requested to set appointment for interview at a later time.
173 Selected person unable to complete - language barrier
174 Selected person unable to complete – impairment
175 Selected person refuses – Before Intro
176 Selected person refuses - After Intro
Core Sections

Section 1: Health Status

//ask of all//

s1q1 Would you say that in general your health is—

Please read:

1 Excellent
2 Very good
3 Good
4 Fair

Or

5 Poor

Do not read:

7 Don’t know / Not sure
9 Refused

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

//ask of all//

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

Number of days[RANGE: 1-30]

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

//If s2q1 = 88 AND s2q2 = 88 go to next section; Else continue to s2q3//

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
9 9 Refused

Section 3: Health Care Access

//ask of all//

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

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?

8
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. [Read if Necessary]

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

//ask of all//

The next question is about getting enough rest or sleep.

s4q1  During the past 30 days, for about how many days have you felt you did not get enough rest or sleep?

_ _ Number of days[RANGE: 1-30]
8  8 None
7  7 Don’t know / Not sure
9  9 Refused

Section 5: Exercise

//ask of all//

s5q1  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 6: Diabetes

//ask of all//

s6q1 Have you ever been told by a doctor that 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

Module 1: Pre-Diabetes

//ask if s6q1 = 2,3,4,7,9//

NOTE: Only asked of those not responding “Yes” (code = 1) to Core Q6.1 (Diabetes awareness question).

Mod1_1. Have you had a test for high blood sugar or diabetes within the past three years?

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

//CATI note: If s6q1 = 4 (No, pre-diabetes or borderline diabetes); answer Mod1_2 “Yes” (code = 1).

Mod1_2. Have you ever been told by a doctor or other health professional that you have pre-

diabetes or borderline diabetes?

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

   1 Yes
   2 Yes, during pregnancy
   3 No
   7 Don’t know / Not sure
   9 Refused
Module 2: Diabetes

//ask if s6q1 = 1/
To be asked following Core Q6.1; if response is "Yes" (code = 1)

Mod2_1. How old were you when you were told you have diabetes? (247-248)

__ __ Code age in years [Range 1-97] [97 = 97 and older]
9 8 Don't know / Not sure
9 9 Refused
Mod2_2. Are you now taking insulin? (249)

1 Yes
2 No
9 Refused

Mod2_3. About how often do you check your blood for glucose or sugar? Include times when checked by a family member or friend, but do NOT include times when checked by a health professional.

[Example: Two times per day = 102; Five times per year = 405] (250-252)

1 – – Times per day
2 – – Times per week
3 – – Times per month
4 – – Times per year
8 8 8 Never
7 7 7 Don’t know / Not sure
9 9 9 Refused

Mod2_4. About how often do you check your feet for any sores or irritations? Include times when checked by a family member or friend, but do NOT include times when checked by a health professional.

[Example: Two times per day = 102; Five times per year = 405] (253–255)

1 – – Times per day
2 – – Times per week
3 – – Times per month
4 – – Times per year
5 5 5 No feet
8 8 8 Never
7 7 7 Don’t know / Not sure
9 9 9 Refused

Mod2_5. About how many times in the past 12 months have you seen a doctor, nurse, or other health professional for your diabetes? (256-257)

_ _ Number of times [Range = 1-76] [76 = 76 or more]
8 8 None
7 7 Don’t know / Not sure
9 9 Refused

Mod2_6. A test for "A one C" measures the average level of blood sugar over the past three months. About how many times in the past 12 months has a doctor, nurse, or other health professional checked you for "A one C"? (258-259)
Number of times [Range = 1-76] [76 = 76 or more]
8 8 None
9 8 Never heard of "A one C" test
7 7 Don't know / Not sure
9 9 Refused

CATI note: If Q4 = 555 (No feet), go to Q8.

//ask if s6q1 = 1 and Mod2_4 ≠555//

Mod2_7. About how many times in the past 12 months has a health professional checked your feet for any sores or irritations?

Number of times [Range = 1-76] [76 = 76 or more]
8 8 None
7 7 Don't know / Not sure
9 9 Refused

//ask if s6q1 = 1

Mod2_8. When was the last time you had an eye exam in which the pupils were dilated? This would have made you temporarily sensitive to bright light.

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

Do not read:
7 Don't know / Not sure
8 Never
9 Refused

//ask if s6q1 = 1

Mod2_9. Has a doctor ever told you that diabetes has affected your eyes or that you had retinopathy?

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

//ask if s6q1 = 1

Mod2_10. Have you ever taken a course or class in how to manage your diabetes yourself?

1 Yes
2 No
7 Don't know / Not sure
9 Refused
Section 7: Oral Health

//ask of all//

s7q1  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//

s7q2  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.

Read only if necessary:

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

CATI note: If Q7.1 = 8 (Never) or Q 7.2 = 3 (All), go to next section.

//ask if s7q1 ne 8 and s7q2 ne 3//

s7q3  How long has it been since you had your teeth cleaned by a dentist or dental hygienist?

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:
Section 8: Cardiovascular Disease Prevalence

//ask of all//

Now I would like to ask you some questions about cardiovascular disease.

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.”

s8q1  (Ever told) you had a heart attack, also called a myocardial infarction? (91)

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

//ask of all//

s8q2  (Ever told) you had angina or coronary heart disease? (92)

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

//ask of all//

s8q3  (Ever told) you had a stroke? (93)

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

Section 9: Asthma

//ask of all//

s9q1  Have you ever been told by a doctor, nurse, or other health professional that you had asthma? (94)

1  Yes
Section 10: Disability

//ask of all//

The following questions are about health problems or impairments you may have.

s10q1  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//

s10q2  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 11: Tobacco Use

//ask of all//
s11q1  Have you smoked at least 100 cigarettes in your entire life? (98)

NOTE:  5 packs = 100 cigarettes

1  Yes
2  No  [Go to Q11.5]
7  Don't know / Not sure  [Go to Q11.5]
9  Refused  [Go to Q11.5]

//ask if s11q1=1//
s11q2  Do you now smoke cigarettes every day, some days, or not at all? (99)

1  Every day
2  Some days  [Go to Q11.4]
3  Not at all  [Go to Q11.4]
7  Don't know / Not sure  [Go to Q11.5]
9  Refused  [Go to Q11.5]

//ask if s11q2=1,2//
s11q3  During the past 12 months, have you stopped smoking for one day or longer because you were trying to quit smoking? (100)

1  Yes  [Go to Q11.5]
2  No  [Go to Q11.5]
7  Don't know / Not sure  [Go to Q11.5]
9  Refused  [Go to Q11.5]

//ask if s11q2=3//
s11q4  How long has it been since you last smoked cigarettes regularly? (101-102)

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
0 8  Never smoked regularly
7 7  Don't know / Not sure
9 9  Refused

//ask of all//
s11q5  Do you currently use chewing tobacco, snuff, or snus every day, some days, or not at all? (103)
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 12: Demographics

//ask of all//

s12q1 What is your age? (104-105)

Code age in years
0 7 Don’t know / Not sure
0 9 Refused

//ask of all//

s12q2 Are you Hispanic or Latino? (106)

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

//ask of all//

s12q3 Which one or more of the following would you say is your race? (107-112)

(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 s12q3=6//

s12q3o ENTER OTHER [open end]: ____________________

//ask if s12q3 = mul response//

s12q4 Which one of these groups would you say best represents your race?

1 White
2 Black or African American
3 Asian
4 Native Hawaiian or Other Pacific Islander
5 American Indian or Alaska Native
6 Other [specify] ____________________

Do not read:

7 Don’t know / Not sure
9 Refused

//ask if s12q4=6//

s12q4o ENTER OTHER [open end]: ____________________

//ask of all//

s12q5 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.

If “Yes”, please read:

1 Yes, now on active duty
2 Yes, on active duty during the last 12 months, but not now
3 Yes, on active duty in the past, but not during the last 12 months

If “No”, please read:

4 No, training for Reserves or National Guard only
5 No, never served in the military

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

//ask of all//

s12q6 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//

s12q7 How many children less than 18 years of age live in your household?

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

_ _ Number of children

//ask if s12q7 = 1-15//

s12q7chk Just to be sure, you have [enter # of children from s12q7] children under 18 living in your household. Is that correct?
1 Yes
2 No
9 Refused

//ask of all//

s12q8 What is the highest grade or year of school you completed?

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

Do not read:
9 Refused

//ask of all/

s12q9 Are you currently...?

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/

s12q10 Is your annual household income from all sources—

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

s12q10A [04]  Less than $25,000  [If “no,” ask 05; if “yes,” ask 03]
             ($20,000 to less than $25,000)
   1 Yes
   2 No
   7 Don't Know
   9 Refused

//ask if s12q10A = 1/

s12q10B [03]  Less than $20,000  [If “no,” code 04; if “yes,” ask 02]
             ($15,000 to less than $20,000)
   1 Yes
   2 No
   7 Don't Know
   9 Refused

//ask if s12q10B = 1/

s12q10C [02]  Less than $15,000  [If “no,” code 03; if “yes,” ask 01]
             ($10,000 to less than $15,000)
   1 Yes
   2 No
   7 Don't Know
   9 Refused
//ask if s12q10C=1//
s12q10D [01] Less than $10,000 [If “no,” code 02]
  1 Yes
  2 No
  7 Don’t Know
  9 Refused

//ask if s12q10A = 2//
s12q10E [05] Less than $35,000 [If “no,” ask 06]
  ($25,000 to less than $35,000)
  1 Yes
  2 No
  7 Don’t Know
  9 Refused

//ask if s12q10E = 2//
s12q10F [06] Less than $50,000 [If “no,” ask 07]
  ($35,000 to less than $50,000)
  1 Yes
  2 No
  7 Don’t Know
  9 Refused

//ask if s12q10F = 2//
s12q10G [07] Less than $75,000 [If “no,” code 08]
  ($50,000 to less than $75,000)
  1 Yes
  2 No
  7 Don’t Know
  9 Refused

[08] $75,000 or more

//ask if s12q10A-s12q10G ne 9//
s12q10AA Your Annual Household Income is [enter range from code in s12q10A-G]

Is This Correct?
  1 No, re-ask question [GO TO S12Q10A]
  2 Yes, correct as is. [CONTINUE]

ps12q11 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 ps12q11 = P//
s12q11 About how much do you weigh without shoes?

(122-125)
Note: If respondent answers in metrics, put “9” in column 122.

Round fractions up

_ _ _  Weight (pounds)

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

//ask if ps12q11 = K/

s12q11M  About how much do you weigh without shoes?

Note: If respondent answers in metrics, put “9” in column 122.

Round fractions up

_ _ _  Weight (kilograms)

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

ps12q12  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 ps12q12 = F/

s12q12  About how tall are you without shoes?

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

Round fractions down

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

---  Height

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

//ask if ps12q12 = M/

s12q12M  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
7 7 7 Don’t know / Not sure
9 9 9 Refused

//ask of all//
s12q13 What county do you live in? (130-132)

_ _ _ FIPS county code [ENTER LIST FOR STATE]
7 7 7 Don’t know / Not sure
9 9 9 Refused

//ask of all//
s12q14 What is your ZIP Code where you live? (133-137)

_ _ _ _ _ ZIP Code
7 7 7 7 Don’t know / Not sure
9 9 9 9 Refused

//ask of all//
s12q15 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. (138)

1 Yes
2 No [Go to Q12.17]
7 Don’t know / Not sure [Go to Q12.17]
9 Refused [Go to Q12.17]

//ask if s12q15 = 1//
s12q16 How many of these telephone numbers are residential numbers?
[6 = 6 or more] (139)

_ Residential telephone numbers [Range = 1-6]
7 Don’t know / Not sure
9 Refused

//ask of all//
s12q17 During the past 12 months, has your household been without landline telephone service
for 1 week or more? Do not include interruptions of landline telephone service because of
weather or natural disasters. (140)

1 Yes
2 No
7 Don’t know / Not sure
[CELL PHONE QUESTIONS]

//ask of all//

s12q18a Do you have a cell phone for personal use? Please include cell phones used for both business and personal use.

1 Yes [Go to Q12.18c]
2 No
7 Don't know / Not sure
9 Refused

//ask if s12q18a = 2, 7, 9//

s12q18b Do you share a cell phone for personal use (at least one-third of the time) with other adults?

1 Yes [Go to Q12.18d]
2 No [Go to Q12.19]
7 Don't know / Not sure [Go to Q12.19]
9 Refused [Go to Q12.19]

//ask if s12q18a = 1//

s12q18c Do you usually share this cell phone (at least one-third of the time) with any other adults?

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

//ask if s12q18a=1 OR s12q18b = 1//

s12q18d 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//

s12q19 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 s12q19=2 AND s12q1>44/>

**s12q20** To your knowledge, are you now pregnant?

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

---

### Section 13: Alcohol Consumption

//ask of all//

**s13q1** During the past 30 days, have you had at least one drink of any alcoholic beverage such as beer, wine, a malt beverage or liquor?

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

//ask if s13q1=1//

**s13q2** During the past 30 days, how many days per week or per month did you have at least one drink of any alcoholic beverage?

[Enter 1 + the number of days per week]
[Enter 2 + the number of days in the past 30 days]
[ex: 5 days per week = 105]
[ex: 7 days in the past 30 days = 207]

_ _ _ Record Number of Days [Range = 101-107; 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]

//ask if s13q2 = 107-107, 201-230, 777, or 999//

**s13q3** 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?

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

_ _ Number of drinks [Range 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? (155-156)

- _ _ 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? (157-158)

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

Module 28: Novel H1N1 Adult Immunization -- Jan-June 2010

Mod28_1. There are currently vaccines available for two kinds of flu -- the seasonal flu, and the 2009 H1N1 flu. I will first ask you questions about vaccination for H1N1 flu, which is sometimes called swine flu or pandemic flu, and then ask you questions about vaccination for seasonal flu.

There are two ways to get the H1N1 flu vaccination. One is a shot in the arm and the other is a spray, mist or drop in the nose.

Since September, 2009, have you been vaccinated either way for the H1N1 flu? (933)

1 Yes
2 No [Go to Q14.1]
7 Don’t Know / Not Sure [Go to Q14.1]
9 Refused [Go to Q14.1]

Mod28_2 During what month did you receive your H1N1 flu vaccine? (934-935)

- _ _ Month [Range 1-12]
- 77 Don’t Know / Not Sure
- 99 Refused
CATI note: [If M28.2_Month in (7, 8, 9, 10, 11, 12) then M28.2_Year=2009; else if M28.2_Month in (1, 2, 3, 4, 5, 6) then M28.2_Year=2010]

Interviewer verify response - That was [FILL IN MONTH] of [FILL IN YEAR], correct?

//ask if mod28_1=1//
Mod28_3 Was this a shot or was it a vaccine sprayed in the nose?

1. Flu shot
2. Flu Nasal Spray (spray, mist or drop in the nose)
7. Don’t Know / Not Sure
9. Refused

Section 14: Immunization

//ask of all//
s14q1 Now I will ask you questions about seasonal flu. A flu shot is an influenza vaccine injected into your arm. During the past 12 months, have you had a seasonal flu shot?

1 Yes
2 No [Go to Q14.3]
7 Don’t know / Not sure [Go to Q14.3]
9 Refused [Go to Q14.3]

//ask if s14q1=1//
s14q2_M During what month and year did you receive your most recent seasonal flu shot?

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

Record 2-digit Month
7 7 Don’t know / Not sure
9 9 Refused

s14q2_Y Enter the 4 –digit Year
7 7 7 7 (4 – digit year)
7777 Don’t know/Not sure
9999 Refused

//ask of all//
s14q3 The seasonal flu vaccine sprayed in the nose is also called FluMist™. During the past 12 months, have you had a seasonal flu vaccine that was sprayed in your nose?

1 Yes
2 No [Go to Q14.5]
7 Don’t know / Not sure [Go to Q14.5]
s14q4_M During what month and year did you receive your most recent seasonal flu vaccine that was sprayed in your nose?

\[
\begin{array}{cccccc}
01 & 02 & 03 & 04 & 07 & 10 \\
January & February & March & April & July & October \\
05 & 06 & 08 & 09 & 11 & 12 \\
May & June & August & September & November & December \\
\end{array}
\]

(167-172)

s14q4_Y Enter the 4-digit Year

\[
\begin{array}{cccc}
7777 & 9999 \\
Don't know / Not sure & Refused \\
\end{array}
\]

s14q5 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?

\[
\begin{array}{ccc}
1 & 2 & 7 \\
Yes & No & Don't know / Not sure \\
9 & 9 & Refused \\
\end{array}
\]

Section 15: Falls

\[\text{If respondent is 45 years or older continue, otherwise go to next section.}\]

The next questions ask about recent falls. By a fall, we mean when a person unintentionally comes to rest on the ground or another lower level.

s15q1 In the past 3 months, how many times have you fallen?

\[
\begin{array}{cccc}
8 & 8 & 7 & 9 \\
None & Don't know / Not sure & Refused & [Go to next section] \\
\end{array}
\]

(174–175)

s15q2 \[\text{[Fill in “Did this fall (from Q15.1) cause an injury?”]. If only one fall from Q15.1 and response is “Yes” (caused an injury); code 01. If response is “No,” code 88.}\]

\[\text{//if s15q1=1 fill in “Did this fall cause an injury?”//}\]
//if s15q1=2-76// 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.

(176–177)

<table>
<thead>
<tr>
<th>Number of falls</th>
<th>[76 = 76 or more]</th>
</tr>
</thead>
<tbody>
<tr>
<td>8 8</td>
<td>None</td>
</tr>
<tr>
<td>7 7</td>
<td>Don’t know / Not sure</td>
</tr>
<tr>
<td>9 9</td>
<td>Refused</td>
</tr>
</tbody>
</table>
Section 16: Seatbelt Use

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 Q16.1 = 8 (Never drive or ride in a car), go to Section 18; otherwise continue.

Section 17: Drinking and Driving

CATI note: If Q13.1 = 2 (No); go to next section.

The next question is about drinking and driving.

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 18: Women’s Health

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

//ask if s12q19=2//
The next questions are about breast and cervical cancer.

s18q1  A mammogram is an x-ray of each breast to look for breast cancer. Have you ever had a mammogram?

1  Yes  [Go to Q18.3]
2  No  [Go to Q18.3]
7  Don’t know / Not sure  [Go to Q18.3]
9  Refused  [Go to Q18.3]

//ask if s18q1=1//
s18q2  How long has it been since you had your last mammogram?

Read only if necessary:

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

Do not read:

7  Don’t know / Not sure
9  Refused

//ask if s12q19=2//
s18q3  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?

1  Yes  [Go to Q18.5]
2  No  [Go to Q18.5]
7  Don’t know / Not sure  [Go to Q18.5]
9  Refused  [Go to Q18.5]

//ask if s18q3=1//
s18q4  How long has it been since your last breast exam?

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
s18q5  A Pap test is a test for cancer of the cervix. Have you ever had a Pap test?

1  Yes
2  No  [Go to Q18.7]
7  Don’t know / Not sure  [Go to Q18.7]
9  Refused  [Go to Q18.7]

s18q6  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 Q12.20 = 1 (is pregnant); then go to next section.

s18q7  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 19: Prostate Cancer Screening

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

//ask if s12q19=1 and s12q1>39//

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

**s19q1** A Prostate-Specific Antigen test, also called a PSA test, is a blood test used to check men for prostate cancer. Have you ever had a PSA test?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
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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 s19q1=1//

**s19q2** How long has it been since you had your last PSA test?

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

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

//ask if s19q19=1 and s12q1>39//

**s19q3** A digital rectal exam is an exam in which a doctor, nurse, or other health professional places a gloved finger into the rectum to feel the size, shape, and hardness of the prostate gland. Have you ever had a digital rectal exam?

<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>

//ask if s19q3=1//

**s19q4** How long has it been since your last digital rectal exam?

- Read only if necessary:
  - 1 Within the past year (anytime less than 12 months ago)
  - 2 Within the past 2 years (1 year but less than 2 years)
  - 3 Within the past 3 years (2 years but less than 3 years)
s19q5  Have you ever been told by a doctor, nurse, or other health professional that you had prostate cancer?  
1  Yes  
2  No  
7  Don’t know / Not sure  
9  Refused

Section 20: Colorectal Cancer Screening

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

//ask if s12q1>49//

The next questions are about colorectal cancer screening.

s20q1  A blood stool test is a test that may use a special kit at home to determine whether the stool contains blood. Have you ever had this test using a home kit?  
1  Yes  
2  No  
7  Don’t know / Not sure  
9  Refused

//ask if s20q1=1//

s20q2  How long has it been since you had your last blood stool test using a home kit?  
1  Within the past year (anytime less than 12 months ago)  
2  Within the past 2 years (1 year but less than 2 years ago)  
3  Within the past 3 years (2 years but less than 3 years ago)  
4  Within the past 5 years (3 years but less than 5 years ago)  
5  5 or more years ago  
7  Don’t know / Not sure
Sigmoidoscopy and colonoscopy are exams in which a tube is inserted in the rectum to view the colon for signs of cancer or other health problems. Have you ever had either of these exams?

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

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?

Read only if necessary:

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

Do not read:

7. Don’t know / Not sure
9. Refused
Section 21: HIV/AIDS

CATI note: If respondent is 65 years old or older, go to next section.

//ask if s12q1<65//

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 don’t have to answer every question if you do not want to. Although we will ask you about testing, we will not ask you about the results of any test you may have had.

s21q1 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  [Go to Q21.5]
7  Don’t know / Not sure  [Go to Q21.5]
9  Refused  [Go to Q21.5]

//ask if s21q1=1//

s21q2 Not including blood donations, in what month and year was your last HIV test?

77 77 77 77  Code month and year
99 99 99 99  Don’t know / Not sure
99 99 99 99  Refused

//ask if s21q1=1//

s21q3 Where did you have your last HIV test — at a private doctor or HMO office, at a counseling and testing site, at a hospital, at a clinic, in a jail or prison, at a drug treatment facility, at home, or somewhere else?

0 1  Private doctor or HMO office
0 2  Counseling and testing site
0 3  Hospital
0 4  Clinic
0 5  Jail or prison (or other correctional facility)
0 6  Drug treatment facility
0 7  At home
0 8  Somewhere else
7 7  Don’t know / Not sure
9 9  Refused

CATI note: Ask Q21.4; if Q21.2 = within last 12 months. Otherwise, go to Q21.5.
//ask if s21q2 = within the last 12 months//

s21q4 Was it a rapid test where you could get your results within a couple of hours? (207)

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

//ask if s12q1<65//

s21q5 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? (208)

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

Section 22: Emotional Support and Life Satisfaction

//ask of all//

The next two questions are about emotional support and your satisfaction with life.

s22q1 How often do you get the social and emotional support you need?

INTERVIEWER NOTE: If asked, say “please include support from any source.” (209)

Please read:

1 Always
2 Usually
3 Sometimes
4 Rarely
5 Never

Do not read:

7 Don’t know / Not sure
//ask of all//

s22q2 In general, how satisfied are you with your life? (210)

Please read:

1 Very satisfied
2 Satisfied
3 Dissatisfied
4 Very dissatisfied

Do not read:

7 Don't know / Not sure
9 Refused

Section 23: H1N1 Adult ILL Questions – Jan-March 2010

Insert the following adult questions after core Section 22: Emotional Support and Life Satisfaction in the Landline questionnaire.

//ask of all//

We would like to ask you some questions about recent respiratory illnesses.

s23q1 During the past month, were you ill with a fever? (919)

1 = Yes
2 = No – [Go to Q8]
7 = Don’t know – [Go to Q8]
9 = Refused – [Go to Q8]

//ask if s23q1=1//

s23q2 Did you also have a cough and/or sore throat? (920)

1 = Yes
2 = No – [Go to Q8]
7 = Don’t know – [Go to Q8]
9 = Refused – [Go to Q8]

//ask if s23q2=1//

s23q3 When did you first become ill with fever, cough or sore throat? [Interviewer: read off choices; choose the most specific] (921)

1 = Within the past week [Interviewer, if asked: past 1-7 days]
2 = 2 weeks ago [Interviewer, if asked: past 8-14 days]
3 = 3-4 weeks ago [Interviewer, if asked: 15-30 days before today]
7 = Don’t know
9 = Refused

//ask if s23q2=1//

s23q4 Did you visit a doctor, nurse, or other health professional for this illness? (922)

1 = Yes
2 = No – [Go to Q8]
s23q5. What did the doctor, nurse, or other health professional tell you? Did they say…[Interviewer: read off choices]

1 = You had regular influenza or the flu,
2 = You had swine flu, also known as H1N1 or novel H1N1
3 = You had some other illness, but not the flu–
7 = Don’t know/not sure
9 = Refused

s23q6. Did you have a flu test that was positive for this illness? Usually a swab from your nose or throat is tested. Would you say…[Interviewer: read off choices]

1 = Yes, had flu test and it was positive
2 = No, had flu test but it was negative
3 = No, flu test was not done
7 = Don’t know
9 = Refused
s23q7. Did you receive Tamiflu® or oseltamivir [osel TAM i veer] or an inhaled medicine called Relenza® or zanamivir [za NA nu veer] to treat this illness? (925)

1 = Yes
2 = No
7 = Don’t know
9 = Refused

*C ATI Note: Apply prior to Q8; [(For a one adult household with no children, If the respondent has NOT been ill (Q1=2,7,9 or Q2=2,7,9) skip to next section); (For a one adult household with no children, If respondent has been ill (Q1=1 and Q2=1) go to Q10)]

// IF NUMADULT = 1 AND s12q7=88 AND (s23q1=2,7,9 OR s23q2=2,7,9) GO TO NEXT SECTION//

// IF NUMADULT = 1 AND s12q7=88 AND S23Q1=1 AND S23Q2=1 GO TO S23Q10//

//ask if (numadult>1) or (numadult=1 and s12q7 ≠ 88, 77, 99)

s23q8. Did any other members of your household have a fever with cough or sore throat during the past month? (926)

1 = Yes
2 = No – [If (Q1 = 1(Yes) and Q2 = 1 (Yes)) Go to Q10, Else go to next section]
7 = Don’t know
9 = Refused

//ask if s23q8=1,7,9//

s23q9. How many household members, \*CATI note: Fill in “including you,” \ If Q1=1(Yes) and Q2=1 (Yes)\* were ill during the past month? (927-928)

__ __   # persons [Range 1-76]
8 8 None
7 7 Don’t know/Not Sure
9 9 Refused

s23q9A
ASK IF [s23q9#12-76]

I am sorry, just to double check, you indicated there were \:\s23q9: household members' that were ill during the past month.

IS THIS CORRECT?

1 Yes
2 NO

*C ATI note: Apply prior to Q10; If (Q1 = 1(Yes) and Q2 = 1 (Yes)) or Q8 = 1 (Yes) continue to Q10; otherwise, skip to next section.
s23q10. How many people in your household, including you, were hospitalized for flu during the past month?  
[Interviewer, if needed: hospitalized means admitted to a hospital to receive medical treatment.]

<table>
<thead>
<tr>
<th></th>
<th># persons [Range 1-76]</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>

s23q10A
ASK IF s23q10 eq 12-76

I am sorry, just to double check, you indicated there were \s23q10: household members’ hospitalized during the past month.

IS THIS CORRECT?

1 Yes
2 NO

Transition to Modules and/or State-Added Questions

Please read:

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

Module 11: Shingles (Zostavax or ZOS)

CATI note: If respondent is < 49 years of age, go to next module.

//ask if s12q1>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®, the zoster vaccine, or the shingles vaccine. Have you had this vaccine?
Module 17: Anxiety and Depression

//ask of all//
Now, I am going to ask you some questions about your mood. When answering these questions, please think about how many days each of the following has occurred in the past 2 weeks.

**Mod17_1.** Over the last 2 weeks, how many days have you had little interest or pleasure in doing things?

<table>
<thead>
<tr>
<th></th>
<th></th>
<th>01–14 days [Range 1-14]</th>
</tr>
</thead>
<tbody>
<tr>
<td>8</td>
<td>8</td>
<td>None</td>
</tr>
<tr>
<td>7</td>
<td>7</td>
<td>Don’t know / Not sure</td>
</tr>
<tr>
<td>9</td>
<td>9</td>
<td>Refused</td>
</tr>
</tbody>
</table>

//ask of all//

**Mod17_2.** Over the last 2 weeks, how many days have you felt down, depressed or hopeless?

<table>
<thead>
<tr>
<th></th>
<th></th>
<th>01–14 days [Range 1-14]</th>
</tr>
</thead>
<tbody>
<tr>
<td>8</td>
<td>8</td>
<td>None</td>
</tr>
<tr>
<td>7</td>
<td>7</td>
<td>Don’t know / Not sure</td>
</tr>
<tr>
<td>9</td>
<td>9</td>
<td>Refused</td>
</tr>
</tbody>
</table>
//ask of all//

Mod17_3. Over the last 2 weeks, how many days have you had trouble falling asleep or staying asleep or sleeping too much?

(371-372)

__ __ 01–14 days [Range 1-14]
8 8 None
7 7 Don’t know / Not sure
9 9 Refused

//ask of all//

Mod17_4. Over the last 2 weeks, how many days have you felt tired or had little energy?

(373-374)

__ __ 01–14 days [Range 1-14]
8 8 None
7 7 Don’t know / Not sure
9 9 Refused

//ask of all//

Mod17_5. Over the last 2 weeks, how many days have you had a poor appetite or eaten too much?

(375-376)

__ __ 01–14 days [Range 1-14]
8 8 None
7 7 Don’t know / Not sure
9 9 Refused

//ask of all//

Mod17_6. Over the last 2 weeks, how many days have you felt bad about yourself or that you were a failure or had let yourself or your family down?

(377-378)

__ __ 01–14 days [Range 1-14]
8 8 None
7 7 Don’t know / Not sure
9 9 Refused

//ask of all//

Mod17_7. Over the last 2 weeks, how many days have you had trouble concentrating on things, such as reading the newspaper or watching the TV?

(379-380)

__ __ 01–14 days [Range 1-14]
8 8 None
7 7 Don’t know / Not sure
9 9 Refused
//ask of all//

Mod17_8. Over the last 2 weeks, how many days have you moved or spoken so slowly that other people could have noticed? Or the opposite – being so fidgety or restless that you were moving around a lot more than usual? (381-382)

01–14 days [Range 1-14]
8 8 None
7 7 Don’t know / Not sure
9 9 Refused

//ask of all//

Mod17_9. Has a doctor or other healthcare provider EVER told you that you have an anxiety disorder (including acute stress disorder, anxiety, generalized anxiety disorder, obsessive-compulsive disorder, panic disorder, phobia, posttraumatic stress disorder, or social anxiety disorder)? (383)

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

//ask of all//

Mod17_10. Has a doctor or other healthcare provider EVER told you that you have a depressive disorder (including depression, major depression, dysthymia, or minor depression)? (384)

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

Module 23: Random Child Selection

CATI note: If Core Q12.7 = 88, or 99 (No children under age 18 in the household, or Refused), go to next module.

If Core s12q7 = 1, Interviewer please read: “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]

If Core s12q7 is >1 and Core s12q7 does not equal 88 or 99, Interviewer please read: “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.

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

//ask if s12q7=1-15//

Mod23_1. What is the birth month and year of the “Xth” child? (460-465)

_ _ / ___ Code month and year
7 7/ 7 7 7 7 Don’t know / Not sure
9 9/ 9 9 9 9 Refused

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

//ask if s12q7=1-15//

Mod23_2. Is the child a boy or a girl? (466)

1 Boy
2 Girl
9 Refused

//ask if s12q7=1-15//

Mod23_3. Is the child Hispanic or Latino? (467)

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

//ask if s12q7=1-15//

Mod23_4. Which one or more of the following would you say is the race of the child? (468-473)

[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, Alaska Native

2009 BRFSS Questionnaire/Final/10.21.2009
Or

6 Other [specify] __________________________

Do not read:

8 No additional choices
7 Don’t know / Not sure
9 Refused

//if mod23_4=6//
Mod23_4o ENTER RESPONSE: __________________________

CATI note: If more than one response to Q4, continue. Otherwise, go to Q6.

//ask if mod23_4 = multiple responses//

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

//ask if s12q7=1-15//

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

For states using Module 23: Random Child Selection, add these questions following Module 23. This will be referenced as Module 27 in Edfix10 and the data submission layout.

Module 27 Child ILI [Jan-March 2010]
The next questions are about the “Xth” child.

Mod27_1. Has the child had a fever with cough and/or sore throat during the past month?

1 = Yes
2 = No – [Go to next module]
7 = Don’t know – [Go to next module]
9 = Refused – [Go to next module]

//ask if mod27_1 = 1//

Mod27_2. Did the child visit a doctor, nurse, or other health professional for this illness?

1 = Yes
2 = No – [Go to next module]
7 = Don’t know – [Go to next module]
9 = Refused – [Go to next module]

Module 30: Novel H1N1 Childhood Immunization - to be asked immediately before Module 25: Childhood Immunization. Jan-June 2010

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

The next questions are about this child’s immunizations.

Mod30_1. I will first ask you questions about vaccination for H1N1 flu, which is sometimes called swine flu or pandemic flu, and then ask you questions about vaccination for seasonal flu. There are two ways to get the H1N1 flu vaccination. One is a shot in the arm and the other is a spray, mist or drop in the nose. Since September, 2009, has [Fill: he/she] been vaccinated either way for the H1N1 flu?

1 Yes
2 No [Go to M25.1]
7 Don’t Know / Not Sure [Go to M25.1]
9 Refused [Go to M25.1]

CATI note: If Child age is 10 years or older, Go to M30.3.

//ask if mod30_1 = 1 and [10 years > child age ≥ 6 months]//

Mod30_2. Since September 2009, how many of these H1N1 vaccinations has [Fill: he/she] received?

1 One vaccination or dose
2 Two or more vaccination doses
7 Don’t Know / Not Sure [Go to M25.1]
9 Refused [Go to M25.1]

//ask if mod30_1 =1] and[mod30_2 <> 7,9]

**Mod30_3.** During what month did [Fill: he/she] receive [Fill: his/her]

(CATI note: if child age < 10, “first H1N1 flu vaccine?”; otherwise, “H1N1 flu vaccine?”)

_ _ Month [Range 1-12]

77 Don’t Know / Not Sure

99 Refused

(CATI note: [If M30.3_Month in (7, 8, 9, 10, 11, 12) then M30.3_Year=2009; else if

M30.3_Month in (1, 2, 3, 4, 5, 6) then M30.3_Year=2010]

**Interviewer verify response** - That was [FILL IN MONTH] of [FILL IN YEAR], correct?
//ask if mod30_1 = 1 and mod30_2 <>7,9//

**Mod30_4**  
Was this a shot or was it a vaccine sprayed in the nose?  

1. Flu shot  
2. Flu Nasal Spray (spray, mist or drop in the nose)  
7. Don't Know / Not Sure  
9. Refused  
(941)

**CATI note:**  
If Child age ≥ 10 Go to next module. If M30.2 = 2, THEN ASK M30.5, otherwise Go to next module.

//ask if mod30_2 = 2//

**Mod30_5.**  
During what month did [Fill: he/she] receive [Fill: his/her] second H1N1 flu vaccine?  

__Month__[Range 1-12]  
77 Don't Know / Not Sure  
99 Refused  
(942-943)

**CATI note:**  
[If M30.5_Month in (7, 8, 9, 10, 11, 12) then M30.5_Year=2009; else if M30.5_Month in (1, 2, 3, 4, 5, 6) then M30.5_Year=2010]  
[If Date (M30.5_Month, M30.5_Year) < Date(M30.3_Month, M30.3_year), interviewer verify responses]  

*Interviewer verify response*  
That was [FILL IN MONTH] of [FILL IN YEAR], correct?  

//ask if mod30_2 = 2//

**Mod30_6**  
Was this a shot or was it a vaccine sprayed in the nose?  

1. Flu shot  
2. Flu Nasal Spray (spray, mist or drop in the nose)  
7. Don't Know / Not Sure  
9. Refused  
(944)
Module 24: Childhood Asthma Prevalence

CATI note: If response to Core Q12.7 = 88 (None) or 99 (Refused), go to next module.

//ask if s12q7=1-15//

The next two questions are about the "Xth" [CATI: please fill in correct number] child.

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

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

//ask if Mod24_1 = 1//

Mod24_2. Does the child still have asthma?

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

State-Added 1: Tobacco (2009 state-3)

1a.) Second-hand Smoke

//ask of all//

AZ1_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//
AZ1_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 s12q9 =1 or 2 (employed respondents only)\\

AZ1_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 s12q9=1 or 2//

AZ1_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 s12q9=1 or 2//

AZ1_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
3b.) Amount of Smoking – Current Smokers Only

// if s11q2=3, 7, 9 go to AZ1_11 //
// if s11q2=1 or 2 //

AZ1_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 AZ1_8] None
77 Don't know/Not sure
99 Refused

// if AZ1_6=88 go to AZ1_8 //
// if s11q2=1 or 2 and AZ1_6=1-30, 77, 99 //

AZ1_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]

[ Enter '180' for 180 or more cigarettes per day]

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

3c.) Purchase Pattern – Current Smokers Only

// ask if s11q2=1 or 2 //

AZ1_8

In the past 6 months, have you bought cigarettes...

// ask if s11q2=1 or 2 //

AZ1_8a)

In Neighboring States

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

// ask if s11q2=1 or 2 //
AZ1_8b.) On Indian Reservations

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

//ask if s11q2=1 or 2//

AZ1_8c.) In Mexico

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

//ask if s11q2=1 or 2//

AZ1_8d.) On a military base

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

//ask if s11q2=1 or 2//

AZ1_8e.) Over the Internet

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

3d.) Tax Increase – Current Smokers Only

//if s11q2=3,7,9 go to AZ1_11/

//ask if s11q2=1 or 2//

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,

AZ1_9 Because of the tax increase in Dec. 2006, have you done any of the following:

//ask if s11q2=1 or 2//

AZ1_9a.) Bought a cheaper brand of cigarettes?
3e.) Readiness to Quit – Current Smokers Only

//ask if s11q2=1 or 2//
AZ1_10 Are you seriously considering stopping smoking within the next six months?

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

3f.) Interaction with Health Care Providers

//ask of all//
AZ1_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-AZ1_14] NO
7 [GO TO pre-AZ1_14] DON’T KNOW / NOT SURE
9 [GO TO pre-AZ1_14] REFUSED

//if AZ1_11=2,7,9 go to next section/
//ask if AZ1_11=1//
AZ1_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-AZ1_14] NO
7 [GO TO pre-AZ1_14] DON'T KNOW / NOT SURE
9 [GO TO pre-AZ1_14] REFUSED

/if AZ1_12=2,7,9 go to pre-AZ1_14/

//ask if AZ1_12=1//

AZ1_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

3g.) Quit Assistance – Current/Former Smokers Only

/if s11q3=1 continue; if s11q3=2.7.9 go to pre-AZ1_15/

//ask if s11q3=1//

AZ1_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
2 _ _ _ Weeks
3 _ _ _ Months
7777 DON'T KNOW/NOT SURE
8888 I HAVE NOT TRIED
9999 REFUSED

//Ask AZ1_15 if s11q3=1 or s11q4=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 s11q4=1-5 (former smokers):/ When you quit smoking for good...
//IF s11q3=1 (current smokers):/ The last time you tried to quit smoking...

AZ1_15. Did you use the nicotine patch, nicotine gum, or any other medication to help you quit?
1 [GO TO AZ1_16] YES
2 [GO TO PRE-AZ1_17] NO
7 [GO TO PRE-AZ1_17] DON'T KNOW / NOT SURE
9 [GO TO PRE-AZ1_17] REFUSED

//If AZ1_15=2,7,9 go to next question/

//ask if AZ1_15=1//

AZ1_16 Did you use…

//ask if AZ1_15=1//

AZ1_16a.) A nicotine gum?

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

//ask if AZ1_15=1//

AZ1_16b.) A patch?

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

//ask if AZ1_15=1//

AZ1_16c.) A nasal spray?

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

//ask if AZ1_15=1//

AZ1_16d.) An inhaler?

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

//ask if AZ1_15=1//

AZ1_16e.) Zyban or Buproprion?

1 YES
2 NO
7 DON'T KNOW / NOT SURE
9 REFUSED
//ask if AZ1_15=1//

AZ1_16f.) Wellbutrin?
1 YES
2 NO
7 DON'T KNOW / NOT SURE
9 REFUSED

//ask if AZ1_15=1//

AZ1_16g.) Chantix?
1 YES
2 NO
7 DON'T KNOW / NOT SURE
9 REFUSED

//Ask AZ1_17 if s11q3=1 or s11q4=1-5//

AZ1_17 /if s11q3=1 (current smoker):/ The last time you tried to quit smoking did you use any of these forms of assistance?

/if s11q4=1-5 (former smoker):/ When you quit smoking for good did you use any of these forms of assistance? [FORMER SMOKERS]

//Ask AZ1_17 if s11q3=1 or s11q4=1-5//

AZ1_17 a) A stop smoking clinic or class
1 YES
2 NO
7 DON’T KNOW / NOT SURE
9 REFUSED

//Ask AZ1_17 if s11q3=1 or s11q4=1-5//

AZ1_17 b) A telephone helpline
1 YES
2 NO
7 DON’T KNOW / NOT SURE
9 REFUSED

//Ask AZ1_17 if s11q3=1 or s11q4=1-5//

AZ1_17 c) One-on-one counseling from a doctor, nurse, or other professional
1 YES
2 NO
7 DON’T KNOW / NOT SURE
9 REFUSED

//Ask AZ1_17 if s11q3=1 or s11q4=1-5//
3h.) Sexual Orientation

//ask of all//

**AZ1_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
State-Added 2: Food Assistance Program Participation (2009 state-2)

//ask of all//

AZ2_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//

AZ2_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 s12q7=1-15//

AZ2_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


These next questions are about the foods you usually eat or drink. Please tell me how often you eat or drink each one, for example, twice a week, three times a month, and so forth. Remember, I am only interested in the foods you eat. Include all foods you eat, both at home and away from home.

//ask of all//

AZ3_1 How often do you drink fruit juices such as orange, grapefruit, or tomato?

1 _ _ Per day
Not counting juice, how often do you eat fruit?

1 _ _ Per day
2 _ _ Per week
3 _ _ Per month
4 _ _ Per year
5 5 5 Never
7 7 7 Don’t know / Not sure
9 9 9 Refused

How often do you eat green salad?

1 _ _ Per day
2 _ _ Per week
3 _ _ Per month
4 _ _ Per year
5 5 5 Never
7 7 7 Don’t know / Not sure
9 9 9 Refused

How often do you eat potatoes not including French fries, fried potatoes, or potato chips?

1 _ _ Per day
2 _ _ Per week
3 _ _ Per month
4 _ _ Per year
5 5 5 Never
7 7 7 Don’t know / Not sure
9 9 9 Refused

How often do you eat carrots?

1 _ _ Per day
Not counting carrots, potatoes, or salad, how many servings of vegetables do you usually eat? (Example: A serving of vegetables at both lunch and dinner would be two servings.)


/CATI note: If Core Q12.9 = 1 (Employed for wages) or 2 (Self-employed); continue. Otherwise, go to Q19.2./

AZ4_1 When you are at work, which of the following best describes what you do? Would you say—

Please read:
1 Mostly sitting or standing
2 Mostly walking
3 Mostly heavy labor or physically demanding work

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

We are interested in two types of physical activity - vigorous and moderate. Vigorous activities cause large increases in breathing or heart rate while moderate activities cause small increases in breathing or heart rate.
AZ4_2
Now, thinking about the moderate activities you do [fill in “when you are not working” if “employed” or “self-employed”] in a usual week, do you do moderate activities for at least 10 minutes at a time, such as brisk walking, bicycling, vacuuming, gardening, or anything else that causes some increase in breathing or heart rate?

1 YES
2 [GO TO AZ4_5] NO
7 [GO TO AZ4_5] DON'T KNOW / NOT SURE
9 [GO TO AZ4_5] REFUSED

//ask of all//

AZ4_3
How many days per week do you do these moderate activities for at least 10 minutes at a time?

_ _ Days per week [RANGE 01-07]
8 8 [Go to s19q5] Do not do any moderate physical activity for at least 10 minutes at a time?
7 7 [Go to s19q5] Don't know / Not sure
9 9 [Go to s19q5] Refused

//ask if AZ4_2=1//

AZ4_4
On days when you do moderate activities for at least 10 minutes at a time, how much total time per day do you spend doing these activities?

_:_ _ Hours and minutes per day
7 7 7 Don't know / Not sure
9 9 9 Refused

//ask of all//

AZ4_5
Now, thinking about the vigorous activities you do [fill in “when you are not working” if “employed” or “self-employed”] in a usual week, do you do vigorous activities for at least 10 minutes at a time, such as running, aerobics, heavy yard work, or anything else that causes large increases in breathing or heart rate?

1 YES
2 [GO TO NEXT SECTION] NO
7 [GO TO NEXT SECTION] DON'T KNOW / NOT SURE
9 [GO TO NEXT SECTION] REFUSED

//ask if AZ4_5=2,7,9 go to next section//
AZ4_6  How many days per week do you do these vigorous activities for at least 10 minutes at a time?
(208-209)

  _ _  Days per week [RANGE 01-07]
  8  8  [Go to next section]  Do not do any vigorous physical activity for at least 10 minutes at a time
  7  7  [Go to next section]  Don't know / Not sure
  9  9  [Go to next section]  Refused

AZ4_7  On days when you do vigorous activities for at least 10 minutes at a time, how much total time per day do you spend doing these activities?
(210-212)

  _ _  Hours and minutes per day
  7 7 7  Don't know / Not sure
  9 9 9  Refused

State-Added 5: Intimate Partner Violence (2007 state-9)
The next questions deal with different types of physical and/or sexual violence. I realize this can be a sensitive topic and some people may feel uncomfortable with these questions. Remember that your answers are strictly confidential and that you don't have to answer a question if you don't want to. Please keep in mind that if you are not in a safe place you can ask me to skip any question you do not want to answer.

AZ5_consent. Are you in a safe place to answer these questions?
(343)

  1  Yes
  2  No  [Go to next section]

AZ5_1  Has anyone EVER had sex with you after you said or showed that you didn't want them to or without your consent?

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

AZ5_5  Has an intimate partner EVER hit, slapped, pushed, kicked, or hurt you in any way?
Violence Closing: We realize that this topic may bring up past experiences that some people may wish to talk about. If you or someone you know would like to talk to a trained counselor, there is a toll-free and confidential intimate partner violence telephone hotline you can call. The number is 1-800-799-SAFE (7233). Would you like me to repeat the number?

State-Added 6: Folic Acid (2007 state 6)

//ask if s12q19=2//
AZ6_1 Do you currently take any multivitamins or supplements that contain folic acid?
1 Yes
2 No [Go to AZ6_3]
7 Don't know/Not sure [Go to AZ6_3]
9 Refused [Go to AZ6_3]

//ask if AZ6_1=1//
AZ6_2 How often do you take this multivitamin or supplement?
1___ ___ Times per day
2___ ___ Times per week
3___ ___ Times per month
7 7 7 Don't know / Not sure
9 9 9 Refused

//ask if s12q19=2//
AZ6_3 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 7: COPD (2006 state-6)

//ask all//
AZ7_1. Have you EVER been told by a doctor or other health professional that you had emphysema?

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

//ask all//
AZ7_2. Have you EVER been told by a doctor or other health professional that you had chronic bronchitis?

1  Yes  
2  No  
7  Don’t know/Not sure  
9  Refused
State-Added 8: Family Planning

If respondent is female and 45 years of age or older, has had a hysterectomy, is pregnant, or male 60 years of age or older, go to next module.

//ask if [s12q19=2 and s12q1<45 and s12q20=2,7,9 or missing AND s18q7= 2,7,9] OR [s12q19=1 and s12q1<60]

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.

Some things people do to keep from getting pregnant include not having sex at certain times, withdrawal, using birth control methods such as the pill, implants, shots, condoms, diaphragm, foam, IUD, having their tubes tied, or having a vasectomy.

AZ 8_1 (Mod7_1) Are you or your [If female, insert husband/partner,” if male, insert “wife/partner”] doing anything now to keep [If female, insert “you,” if male, insert “her”] from getting pregnant?

NOTE: If more than one partner, consider usual partner.

1  Yes [Go to Q3]
2  No [Go to next module]
3  No partner/not sexually active [Go to next module]
4  Same sex partner [Go to next module]
7  Don’t know / Not sure [Go to next module]
9  Refused [Go to next module]

//ask if mod7_1=1//

AZ 8_2 (Mod7_2). What are you or your [If female, insert husband/partner,” if male, insert “wife/partner”] doing now to keep [If female, insert “you,” if male, insert “her”] from getting pregnant?

NOTE: If more than one partner, consider usual partner.

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

Read only if necessary:

0 1  Tubes tied (or female sterilization) [Go to next module]
0 2  Vasectomy (or male sterilization) [Go to next module]
0 3  Birth control pills, any kind [Go to Q4]
0 4  Male condoms [Go to Q4]
0 5  Female condoms [Go to Q4]

Do not read
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.

//ask if mod7_2=3-15,77,99 OR mod7_3 = 1-8,12-16,77,99//

State-Added 9: Excess Sun Exposure

//ask of all//
AZ9_1. How often do you protect your skin with clothing or sunscreen to avoid skin cancer?

(Read List)
1. Every time I go outdoors
2. Often
3. Only during the summer
4. Never

(Do Not Read)
7. Don’t know / Not sure
9. Refused

Asthma Call-Back Permission Script

//ask if mod24_1=1 or s9q1=1//
ast1. 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 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

Closing statement

Please read:

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