



2017

Behavioral Risk Factor Surveillance System

North Dakota  
Cell Phone Study

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U.S. DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Disease Control and Prevention

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Division of Adult and Community Health





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## Intro

**CPINTROQ**

SAFETIME

HELLO, I'm calling for the **North Dakota Department of Health**. My name is \_\_\_\_\_. We are gathering information about the health of **North Dakota** 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.

Is this a safe time to talk with you?

NOTE: IF A PERSON REPORTS THEY DO NOT LIVE IN THE STATE MENTIONED, TELL THEM THAT THEY MAY STILL BE TO PARTICIPATE.

Interviewer: Press '1' to continue

- 1 YES
- 2 NO

CPCONTEL

**CPNOTSAF**

IF - CPINTROQ = 2

Thank you very much. We will call you back at a more convenient time.

Interviewer: Press '1' to set callback

1

DISPOS 5560

**CPConTel**

CTELNUM1

Is this XXX-XXX-XXXX?

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

- 1 YES
- 2 NO

CPIsCell

**CPWRONGN**

IF - CPCONTEL = 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.

Interviewer: Press '1' to continue

1

CPINTROQ

**CPisCell** IF - CPConTel = 1 **CELLFON5**

Is this a cell(ular) telephone?

READ ONLY IF NECESSARY:

"By cell(ular) telephone we mean a telephone that is mobile and usable outside of your neighborhood".

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

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

**CPCELLNO** IF - CPisCell > 1

{IF CPisCell = 2, Thank you very much, but we are only interviewing cell telephones at this time.}

{IF CPisCell > 2, Thank you for your time.}

**CPADULT** IF - CPisCell = 1 **CADULT**

Are you 18 years of age or older?

NOTE: VERIFY GENDER OF RESPONDENT.

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

- 1 Yes and the respondent is male CPPVTRES
- 2 Yes and the respondent is female **SKP** → **CPPVTRES**
- 3 NO
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**CPNOADLT** IF - CPADLT > 2

{IF CPADULT = 3, Thank you very much, but we are only interviewing persons aged 18 or older at this time.}

{IF CPADULT > 3, Thank you for your time.}

**CPPVTRES** IF - CPADULT = 1 OR CPADULT = 2 PVTRES3

Do you live in a private residence?

READ ONLY IF NECESSARY:

"By private residence, we mean someplace like a house or apartment."

NOTE: 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.

INTERVIEWER NOTE: PRIVATE RESIDENCE INCLUDES ANY HOME WHERE THE RESPONDENT SPENDS AT LEAST 30 DAYS INCLUDING VACATION HOMES, RVS OR OTHER LOCATIONS IN WHICH THE RESPONDENT LIVES FOR PORTIONS OF THE YEAR.

1 YES CPSTATE  
2 NO

**CPCOLLEG** IF - CPPVTRES = 2 CCLGHOUS

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 CPSTATE  
2 NO

**CPNONRES** IF - CPCOLLEG > 1

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

**CPSTATE** IF - CPPVTRES = 1 OR CPCOLLEG = 1 CSTATE1

Do you currently live in **North Dakota**?

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

1 YES CPLANDLI  
2 NO SKP → CPSTATER  
7 DON'T KNOW/NOT SURE  
9 REFUSED

**CPSTATEU** IF - CPSTATE = 7 OR CPSTATE = 9

Thank you for your time.

**CPSTATER** IF - CPSTATE = 2 **RSPSTAT1**

In what state do you live?

\_\_\_ Enter State **CPLANDLI**  
99 OTHER/REFUSED

**CPSTATEN** IF - CPSTATER = 99

Thank you very much, but we are not interviewing in your state at this time.

**CPLANDLI** **LANDLINE**

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

READ ONLY IF NECESSARY:

"By landline telephone, we mean a 'regular' telephone in your home that is used for making or receiving calls. Please include landline phones used for both business and personal use."

NOTE: TELEPHONE SERVICE OVER THE INTERNET COUNTS AS LANDLINE SERVICE. INCLUDES VONAGE, MAGIC JACK AND OTHER HOME-BASED PHONE SERVICES.

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

- 1 YES
- 2 NO

**CPNMADLT** IF - CPPVTRES = 1 **HHADULT**

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

\_\_\_ ENTER NUMBER OF ADULTS **CPINTROS**

## Core Sections

### INTROSCR

I will not ask for your last name, address, or other personal information that can identify you. You do not have to answer any question you do not want to, and you can end the interview at any time. Any information you give me will be confidential. If you have any questions about the survey, please call **701-328-2367**.

1 PERSON INTERESTED, CONTINUE

C01INTRO



## Section 01: Health Status

**C01INTRO**

**C01Q01**

GENHLTH

Would you say that in general your health is-

PLEASE READ

- 1 Excellent
- 2 Very good
- 3 Good
- 4 Fair, or
- 5 Poor
  
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**C01END**

## Section 02: Healthy Days - Health Related Quality of Life

**C02INTRO**

**C02Q01**

PHYSHLTH

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

- 88 NONE
- 77 DON'T KNOW/NOT SURE
- 99 REFUSED
- 30 MAX

**C02Q02**

MENTHLTH

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

- 88 NONE
- 77 DON'T KNOW/NOT SURE
- 99 REFUSED
- 30 MAX

*Cati note: If C02Q01 and C02Q02 = 88 (none), go to next section.*

**C02Q03**

IF - NOT(C02Q01 = 88 AND C02Q02 = 88)

POORHLTH

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

- 88 NONE
- 77 DON'T KNOW/NOT SURE
- 99 REFUSED
- 30 MAX

**C02END**

### Section 03: Health Care Access

C03INTRO

C03Q01

HLTHPLN1

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

### State Added Section 03: Health Insurance

*Cati Note: to be inserted after C03Q01.*

**ND03INTRO**

**ND03Q01** IF - C03Q01 > 0 AND C03Q01 <> 2

What is the name of the health plan you use to pay for **MOST** of your medical care?

INTERVIEWERS NOTE:

IF ONE SAYS BLUE CROSS BLUE SHIELD OR NAME OF ANOTHER INSURANCE COMPANY, CODE PRIVATE INSURANCE.

THOSE THAT SAY OBAMACARE, PROBE IF THEY OR MEMBERS OF THEIR FAMILY ARE THE ONES PAYING THE PREMIUMS (PRIVATE INSURANCE) OR THE GOVERNMENT/A DIFFERENT AGENCY IS PAYING FOR THE PREMIUMS ON THEIR BEHALF (MEDICAL ASSISTANCE).

READ IF NECESSARY

- 01 Medicare
- 02 Medicaid or Medical Assistance
- 03 Military, Tricare or CHAMPUS
- 04 Indian Health Services
- 05 Private Insurance
- 06 Other
- 07 None
  
- 77 DON'T KNOW/NOT SURE
- 99 REFUSED

**ND03END**

**C03Q02**

PERSDOC2

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

INTERVIEWER NOTE: 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

**C03Q03**

MEDCOST

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

**C03Q04**

CHECKUP1

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

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
  
- 7 DON'T KNOW/NOT SURE
- 8 NEVER
- 9 REFUSED

**C03END**

## Section 04: Hypertension Awareness

**C04INTRO**

**C04Q01**

**BPHIGH4**

Have you **EVER** been told by a doctor, nurse, or other health professional that you have high blood pressure?

READ ONLY IF NECESSARY:

"By 'other health professional' we mean a nurse practitioner, a physician's assistant, or some other licensed health professional."

IF "YES" AND RESPONDENT IS FEMALE, ASK:

"Was this only when you were pregnant?"

- |   |  |            |   |               |
|---|--|------------|---|---------------|
| 1 | YES  |            |   |               |
| 2 | YES, BUT FEMALE TOLD ONLY DURING PREGNANCY |            |   |               |
| 3 | NO   | <b>SKP</b> | → | <b>C04END</b> |
| 4 | TOLD BORDERLINE HIGH OR PRE-HYPERTENSIVE   | <b>SKP</b> | → | <b>C04END</b> |
| 7 | DON'T KNOW/NOT SURE                        | <b>SKP</b> | → | <b>C04END</b> |
| 9 | REFUSED                                    | <b>SKP</b> | → | <b>C04END</b> |

**C04Q01V**

IF - RESPGEN = 1 AND C04Q01 = 2

INTERVIEWER: YOU RECORDED THAT THE RESPONDENT WAS TOLD BY A DOCTOR DURING PREGNANCY THAT SHE HAD HIGH BLOOD PRESSURE. ARE YOU SURE?

THE RESPONDENT SELECTED WAS THE

**{SRESP}**

IS THE PREVIOUS ANSWER CORRECT?

- |   |     |            |   |               |
|---|-----|------------|---|---------------|
| 1 | YES |            |   |               |
| 2 | NO  | <b>SKP</b> | → | <b>C04Q01</b> |

**C04Q02**

IF - C04Q01 = 1

**BPMEDS**

Are you currently taking medicine for your high blood pressure?

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

**C04END**

## Section 05: Cholesterol Awareness

**C05INTRO**

**C05Q01**

CHOLCHK1

Blood cholesterol is a fatty substance found in the blood. About how long has it been since you last had your blood cholesterol checked?

READ ONLY IF NECESSARY:

- 1 Never C05END
- 2 Within the past year (anytime less than 12 months ago)
- 3 Within the past 2 years (1 year but less than 2 years ago)
- 4 Within the past 5 years (2 years but less than 5 years ago)
- 5 5 or more years ago
  
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED SKP → C05END

**C05Q02**

IF - C05Q01 > 1 AND C05Q01 < 9

TOLDHI2

Have you **EVER** been told by a doctor, nurse or other health professional that your blood cholesterol is high?

- 1 YES
- 2 NO SKP → C05END
  
- 7 DON'T KNOW/NOT SURE SKP → C05END
- 9 REFUSED SKP → C05END

**C05Q03**

IF - C05Q02 = 1

CHOLMED1

Are you currently taking medicine prescribed by a doctor or other health professional for your blood cholesterol?

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

**C05END**



## Section 06: Chronic Health Conditions

**C06INTRO**

**C06Q01**

CVDINFR4

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

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

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

**C06Q02**

CVDCRHD4

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

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

**C06Q03**

CVDSTRK3

(Ever told) you had a stroke?

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

**C06Q04**

ASTHMA3

(Ever told) you had asthma?

- 1 YES
- 2 NO SKP → C06Q06
  
- 7 DON'T KNOW/NOT SURE SKP → C06Q06
- 9 REFUSED SKP → C06Q06

**C06Q05**

IF - C06Q04 = 1

ASTHNOW

Do you still have asthma?

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

**C06Q06**

CHCSCNCR

(Ever told) you had skin cancer?

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

**C06Q07**

CHCOCNCR

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

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

**C06Q08**

CHCCOPD1

(Ever told) you have Chronic Obstructive Pulmonary Disease or COPD, emphysema or chronic bronchitis?

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

**C06Q09**

HAVARTH3

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

INTERVIEWER NOTE:

Arthritis diagnoses include:

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

1 YES

2 NO

7 DON'T KNOW/NOT SURE

9 REFUSED

**C06Q10**

ADDEPEV2

(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

**C06Q11**

CHCKIDNY

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

INTERVIEWER NOTE, IF NEEDED SAY:

"Incontinence is not being able to control urine flow."

1 YES

2 NO

7 DON'T KNOW/NOT SURE

9 REFUSED

**C06Q12**

DIABETE3

(Ever told) you have diabetes?

INTERVIEWER NOTE: IF "YES" AND RESPONDENT IS FEMALE, ASK:

"Was this only when you were pregnant?"

INTERVIEWER NOTE: 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 Q6.12 = 1 (Yes), Go to next question. If any other response to Q6.12, go to pre-diabetes optional module (if used), otherwise, to next section.*

**C06Q12V**

IF - RESPGEND = 1 AND C06Q12 = 2

INTERVIEWER: YOU RECORDED THAT THE RESPONDENT WAS TOLD BY A DOCTOR DURING PREGNANCY THAT SHE HAD DIABETES. ARE YOU SURE?

THE RESPONDENT SELECTED WAS THE

{SRESP}

IS THE PREVIOUS ANSWER CORRECT?

- 1 YES
- 2 NO

SKP → C06Q12

**C06Q13**

IF - C06Q12 = 1

DIABAGE2

How old were you when you were told you have diabetes?

\_\_\_ CODE AGE IN YEARS [97 = 97 AND OLDER]

- 98 DON'T KNOW/NOT SURE
- 99 REFUSED
- 1 MIN
- 97 MAX

*Cati Note: Go to Diabetes Optional Module (if used), otherwise, go to next section.*

**C06END**

## Module 01: Pre-Diabetes

*Cati note: only asked of those not responding "yes" (code = 1) to core Q6.12 (diabetes awareness question).*

**M01INTRO** IF - C06Q12 > 1

**M01Q01** IF - C06Q12 > 1 PDIABTST

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

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

*Cati note: If core Q6.12 = 4 (no, pre-diabetes or borderline diabetes); answer Q2 "yes" (code = 1).*

**M01Q02** IF - (C06Q12 > 1 AND C06Q12 < 4) OR C06Q12 > 4  
PREDIAB1

Have you ever been told by a doctor or other health professional that you have pre-diabetes or borderline diabetes?

INTERVIEWER INSTRUCTIONS: 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

**M01Q02V** IF - RESPGEND = 1 AND M01Q02 = 2

INTERVIEWER: YOU RECORDED THAT THE RESPONDENT WAS TOLD BY A DOCTOR DURING PREGNANCY THAT SHE HAD PRE-DIABETES OR BORDERLINE DIABETES. ARE YOU SURE?

THE RESPONDENT SELECTED WAS THE

{SRESP}

IS THE PREVIOUS ANSWER CORRECT?

- 1 YES
  - 2 NO
- SKP → M01Q02

**M01END**

**Module 02: Diabetes**

*Cati note: To be asked following core Q6.13; if response to Q6.12 is "yes" (code = 1).*

**M02INTRO** IF - C06Q12 = 1

**M02Q01** IF - C06Q12 = 1 **INSULIN**

Are you now taking insulin?

- 1 YES
- 2 NO
  
- 9 REFUSED

**M02Q02** IF - C06Q12 = 1 **BLDSUGAR**

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.

INTERVIEWER NOTE: IF THE RESPONDENT USES A CONTINUOUS GLUCOSE MONITORING SYSTEM (A SENSOR INSERTED UNDER THE SKIN TO CHECK GLUCOSE LEVELS CONTINUOUSLY), FILL IN '98 TIMES PER DAY.'

ENTER QUANTITY PER DAY, WEEK, OR MONTH

101-199 = PER DAY                      301-399 = PER MONTH

201-299 = PER WEEK                    401-499 = PER YEAR

\_\_\_ TIMES

- 888 NEVER
- 777 DON'T KNOW/NOT SURE
- 999 REFUSED
- 101 MIN
- 499 MAX

**M02Q02V** IF - (M02Q02 > 105 AND M02Q02 < 200) OR (M02Q02 > 235 AND M02Q02 < 300)

INTERVIEWER YOU RECORDED THE RESPONDENT CHECKS BLOOD {SHOWTIME M02Q02}.

IS THIS CORRECT?

- 1 YES, CORRECT AS IS, CONTINUE
- 2 NO, REASK QUESTION **SKP** → **M02Q02**

**M02Q03**

IF - C06Q12 = 1

FEETCHK2

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.

ENTER QUANTITY PER DAY, WEEK, OR MONTH

101-199 = PER DAY                      301-399 = PER MONTH

201-299 = PER WEEK                    401-499 = PER YEAR

\_\_\_ TIMES

555 NO FEET

888 NEVER

777 DON'T KNOW/NOT SURE

999 REFUSED

101 MIN

499 MAX

**M02Q03V**

IF - (M02Q03 > 105 AND M02Q03 < 200) OR (M02Q03 > 235 AND M02Q03 < 300)

INTERVIEWER YOU RECORDED THE RESPONDENT CHECKS THEIR FEET {SHOWTIME M02Q03}.

IS THIS CORRECT?

1 YES, CORRECT AS IS, CONTINUE

2 NO, REASK QUESTION

SKP → M02Q03

**M02Q04**

IF - C06Q12 = 1

DOCTDIAB

About how many times in the past 12 months have you seen a doctor, nurse, or other health professional for your diabetes?

\_\_\_ NUMBER OF TIMES [76 = 76 OR MORE]

88 NONE

77 DON'T KNOW/NOT SURE

99 REFUSED

01 MIN

76 MAX



**M02Q04V**

IF - M02Q04 > 52 AND M02Q04 < 77

INTERVIEWER YOU RECORDED THE RESPONDENT HAS SEEN A HEALTH PROFESSIONAL {M02Q04} TIMES IN THE PAST 12 MONTHS.

IS THIS CORRECT?

1 YES, CORRECT AS IS, CONTINUE

2 NO, REASK QUESTION

SKP → M02Q04

**M02Q05**

IF - C06Q12 = 1

CHKHEMO3

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"?

\_\_ NUMBER OF TIMES [76 = 76 OR MORE]

88 NONE

98 NEVER HEARD OF "A ONE C" TEST

77 DON'T KNOW/NOT SURE

99 REFUSED

01 MIN

76 MAX

**M02Q05V**

IF - M02Q05 > 52 AND M02Q05 < 77

INTERVIEWER YOU RECORDED THE RESPONDENT HAS BEEN CHECKED FOR "A ONE C" BY A HEALTH PROFESSIONAL {M02Q05} TIMES IN THE PAST 12 MONTHS.

IS THIS CORRECT?

1 YES, CORRECT AS IS, CONTINUE

2 NO, REASK QUESTION

SKP → M02Q05

*CATI Note: If M02Q03 = 555 (No feet), go to M02Q07.*

**M02Q06**

IF - C06Q12 = 1 AND M02Q03 <> 555

FEETCHK

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

\_\_ NUMBER OF TIMES [76 = 76 OR MORE]

88 NONE

77 DON'T KNOW/NOT SURE

99 REFUSED

01 MIN

76 MAX

**M02Q06V**

IF - M02Q06 > 52 AND M02Q06 < 77

INTERVIEWER YOU RECORDED THE RESPONDENT HAS HAD THEIR FEET CHECKED BY A HEALTH PROFESSIONAL {M02Q06} TIMES IN THE PAST 12 MONTHS.

IS THIS CORRECT?

- 1 YES, CORRECT AS IS, CONTINUE
- 2 NO, REASK QUESTION **SKP** → **M02Q06**

**M02Q07**

IF - C06Q12 = 1

EYEEEXAM

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
  
- 7 DON'T KNOW/NOT SURE
- 8 NEVER
- 9 REFUSED

**M02Q08**

IF - C06Q12 = 1

DIABEYE

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

**M02Q09**

IF - C06Q12 = 1

DIABEDU

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

**M02END**

## Section 07: Arthritis Burden

**C07INTRO**

IF - C06Q09 = 1

*Cati Note: If C06Q09 = 1 (Yes) then continue, else to next section.*

**C07Q01**

IF - C06Q09 = 1

LMTJOIN3

Next, I will ask you about your arthritis. Arthritis can cause symptoms like pain, aching, or stiffness in or around a joint.

Are you now limited in any way in any of your usual activities because of arthritis or joint symptoms?

INTERVIEWER INSTRUCTION: IF A QUESTION ARISES ABOUT MEDICATIONS OR TREATMENT, THEN THE INTERVIEWER SHOULD SAY:

"Please answer the question based on your current experience, regardless of whether you are taking any medication or treatment."

- 1 YES
- 2 NO

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

*C07Q02 should be asked of all respondents regardless of employment status.*

**C07Q02**

IF - C06Q09 = 1

ARTHDIS2

In this next question, we are referring to work for pay. Do arthritis or joint symptoms now affect whether you work, the type of work you do, or the amount of work you do?

INTERVIEWER INSTRUCTION: IF RESPONDENT GIVES AN ANSWER TO EACH ISSUE (WHETHER RESPONDENT WORKS, TYPE OF WORK, OR AMOUNT OF WORK), THEN IF ANY ISSUE IS "YES" MARK THE OVERALL RESPONSE AS "YES."

IF A QUESTION ARISES ABOUT MEDICATIONS OR TREATMENT, THEN THE INTERVIEWER SHOULD SAY:

"Please answer the question based on your current experience, regardless of whether you are taking any medication or treatment."

- 1 YES
- 2 NO

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

**C07Q03**

IF - C06Q09 = 1

ARTHSOCL

During the past 30 days, to what extent has your arthritis or joint symptoms interfered with your normal social activities, such as going shopping, to the movies, or to religious or social gatherings?

INTERVIEWER INSTRUCTION: IF A QUESTION ARISES ABOUT MEDICATIONS OR TREATMENT, THEN THE INTERVIEWER SHOULD SAY:

"Please answer the question based on your current experience, regardless of whether you are taking any medication or treatment."

PLEASE READ [1-3]:

- 1 A lot
- 2 A little
- 3 Not at all

7 DON'T KNOW/NOT SURE

9 REFUSED

*CATI NOTE: C07Q04 should export to variable C07Q04XX where if C07Q04 = 88, variable C07Q04XX = 00.*

**C07Q04**

IF - C06Q09 = 1

JOINPAI1

Please think about the past 30 days, keeping in mind all of your joint pain or aching and whether or not you have taken medication. On a scale of 0 to 10 where 0 is no pain or aching and 10 is pain or aching as bad as it can be, **DURING THE PAST 30 DAYS**, how bad was your joint pain **ON AVERAGE**?

\_\_\_ ENTER NUMBER [01-10]

88 ZERO

77 DON'T KNOW/NOT SURE

99 REFUSED

01 MIN

10 MAX

**C07END**

## Section 08: Demographics

**C08INTRO**

**C08Q01**

SEX

Are you ...

INTERVIEWER NOTE: THIS QUESTION MUST BE ASKED EVEN IF INTERVIEWER HAD PREVIOUSLY ENTERED SEX IN THE SCREENING QUESTIONS.

- 1 Male
- 2 Female

9 REFUSED

*Cati Note: This question may be populated by landline household enumeration. It may not be populated by interviewer assignment of sex during the screening for cell phone persons living in college housing.*

**C08Q02**

AGE

What is your age?

\_\_\_ CODE AGE IN YEARS [99 = 99 YEARS OR OLDER]

- 07 DON'T KNOW/NOT SURE
- 09 REFUSED
- 18 MIN
- 99 MAX

**C08Q02V**

IF - C06Q13 > C08Q02 AND C06Q13 < 98 AND C08Q02 > 17

INTERVIEWER: THE RESPONDENT INDICATED THEIR AGE TO BE {C08Q02} YEARS OLD! YOU INDICATED EARLIER THEY WERE TOLD THEY HAD DIABETES AT AGE {C06Q13}! PLEASE VERIFY THAT THIS IS THE CORRECT ANSWER AND CHANGE THE AGE OF THE RESPONDENT OR MAKE A NOTE TO CORRECT THE AGE THE RESPONDENT WAS DIAGNOSED AS A DIABETIC.

- 1 YES, CORRECT AS IS, CONTINUE
- 2 NO, REASK QUESTION

**SKP** → **C08Q02**

**C08Q03A**

HISPANC3

Are you Hispanic, Latino/a, or Spanish origin?

- |   |                     |            |   |               |
|---|---------------------|------------|---|---------------|
| 1 | YES                 |            |   |               |
| 2 | NO                  | <b>SKP</b> | → | <b>C08Q04</b> |
| 7 | DON'T KNOW/NOT SURE | <b>SKP</b> | → | <b>C08Q04</b> |
| 9 | REFUSED             | <b>SKP</b> | → | <b>C08Q04</b> |

CATI Note: IF C08Q03A = 2, code C08Q03B = 5

**C08Q03B**

IF - C08Q03A = 1

(Are you Hispanic, Latino/a, or Spanish origin?)

Are you...

Mexican, Mexican American, Chicano/a

Puerto Rican

Cuban or

Another Hispanic, Latino/a, or Spanish Origin

INTERVIEWER NOTE: ONE OR MORE CATEGORIES MAY BE SELECTED.

- |   |   |
|---|---|
| 1 | Mexican, Mexican American, Chicano/a          |
| 2 | Puerto Rican                                  |
| 3 | Cuban   |
| 4 | Another Hispanic, Latino/a, or Spanish origin |
| 5 | NO  |
| 7 | DON'T KNOW/NOT SURE                           |
| 9 | REFUSED                                       |

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

INTERVIEWER NOTE: IF 40 (ASIAN) OR 50 (PACIFIC ISLANDER) IS  
SELECTED READ AND CODE SUBCATEGORIES UNDERNEATH MAJOR HEADING.

INTERVIEWER NOTE: SELECT ALL THAT APPLY

PLEASE READ:

- 10 White
- 20 Black or African American
- 30 American Indian or Alaska Native
- 40 Asian
- 41 Asian Indian
- 42 Chinese
- 43 Filipino
- 44 Japanese
- 45 Korean
- 46 Vietnamese
- 47 Other Asian
- 50 Pacific Islander
- 51 Native Hawaiian
- 52 Guamanian or Chamorro
- 53 Samoan
- 54 Other Pacific Islander

- 60 OTHER [SPECIFY]
- 77 DON'T KNOW/NOT SURE
- 99 REFUSED
- 88 NO ADDITIONAL CHOICES

*CATI Note: If more than one response to C08Q04; continue.  
Otherwise, go to C08Q06.*



**C08Q05**

IF - C08Q04 < 77 AND C08Q04.2 > 0 AND C08Q04.2  
<> 88

ORACE3

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

INTERVIEWER NOTE: IF 40 (ASIAN) OR 50 (PACIFIC ISLANDER) IS SELECTED READ AND CODE SUBCATEGORIES UNDERNEATH MAJOR HEADING. IF RESPONDENT HAS SELECTED MULTIPLE RACES IN PREVIOUS AND REFUSES TO SELECT A SINGLE RACE, CODE "REFUSED."

- 10 White
- 20 Black or African American
- 30 American Indian or Alaska Native
- 40 Asian
- 41 Asian Indian
- 42 Chinese
- 43 Filipino
- 44 Japanese
- 45 Korean
- 46 Vietnamese
- 47 Other Asian
- 50 Pacific Islander
- 51 Native Hawaiian
- 52 Guamanian or Chamorro
- 53 Samoan
- 54 Other Pacific Islander
  
- 60 OTHER [SPECIFY]
- 77 DON'T KNOW/NOT SURE
- 99 REFUSED

**C08Q06**

MARITAL

Are you...?

PLEASE READ:

- 1 Married
- 2 Divorced
- 3 Widowed
- 4 Separated
- 5 Never married, or
- 6 A member of an unmarried couple
  
- 9 REFUSED

**C08Q07**

EDUCA

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)
  
- 9 REFUSED

**C08Q08**

RENTHOM1

Do you own or rent your home?

INTERVIEWER NOTE, IF NEEDED SAY:

"'Other arrangement' may include group home, staying with friends or family without paying rent."

INTERVIEWER NOTE, IF NEEDED SAY:

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

INTERVIEWER NOTE, IF RESPONDENT ASKS ABOUT WHY WE ARE ASKING THIS QUESTION, SAY:

"We ask this question in order to compare health indicators among people with different housing situations."

READ ONLY IF NECESSARY:

- 1 Own
- 2 Rent
- 3 Other arrangement
  
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**ASKCNTY**

CTYCODE2

In what county do you currently live?

{IF STATEFIPS = 48, INTERVIEWER NOTE: PLEASE REPEAT AND VERIFY SPELLING OF COUNTY BEFORE CONTINUING.}

ENTER FIRST LETTER OF COUNTY NAME

\_\_\_\_\_ ANSI COUNTY CODE (FORMERLY FIPS COUNTY CODE)

- 888 OTHER
- 777 DON'T KNOW/NOT SURE
- 999 REFUSED
- 001 MIN
- 775 MAX

Cati Note: set min and max based on state zip range.

**C08Q10**

ZIPCODE1

What is the ZIP Code where you currently live?

INTERVIEWER NOTE: PLEASE READ ZIP CODE BACK TO VERIFY ACCURACY.

\_\_\_\_\_ ZIP CODE

- 77777 DON'T KNOW/NOT SURE
- 99999 REFUSED
- ZIPMIN
- ZIPMAX

**C08Q14**

VETERAN3

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

INTERVIEWER NOTE, IF NEEDED SAY:

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

Are you currently...?

INTERVIEWER NOTE: IF MORE THAN ONE SELECTED SAY:

"Select the category which best describes you."

INTERVIEWER NOTE: DO NOT CODE 7 FOR "DON'T KNOW" ON THIS QUESTION

PLEASE READ:

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

## Module 26: Industry and Occupation

<b>M26INTRO</b>	IF - USEM26 = TRUE AND (C08Q15 = 1 OR C08Q15 = 2 OR C08Q15 = 4)
-----------------	--

<b>M26Q01</b>	IF - USEM26 = TRUE AND (C08Q15 = 1 OR C08Q15 = 2 OR C08Q15 = 4)	TYPEWORK
---------------	--	----------

Now I am going to ask you about your work.

What kind of work **{If C08Q15 = 4, did, do}** you do? For example, registered nurse, janitor, cashier, auto mechanic.

INTERVIEWER NOTE: IF RESPONDENT IS UNCLEAR, ASK,

"What {IF C08Q15 = 4, was, is} your job title?"

INTERVIEWER NOTE: IF RESPONDENT HAS MORE THAN ONE JOB THEN ASK,

"What {IF C08Q15 = 4, was, is} your main job?"

1	SPECIFY	OTHER
9	REFUSED	

<b>M26Q02</b>	IF - USEM26 = TRUE AND (C08Q15 = 1 OR C08Q15 = 2 OR C08Q15 = 4)	TYPEINDS
---------------	--	----------

What kind of business or industry **{If C08Q15 = 4, did, do}** you work in? For example, hospital, elementary school, clothing manufacturing, restaurant.

1	SPECIFY	OTHER
9	REFUSED	

<b>M26END</b>
---------------

## State Added Section 02: Occupation

**ND02INTRO**

**ND02Q01**

IF - C08Q15 = 1 OR C08Q15 = 2

OCCNTY

In what county do you work?

INTERVIEWER NOTE: IF SOMEONE WORKS FROM HOME, WE ARE INTERESTED IN THEIR HOME COUNTY RATHER THAN THE COMPANY'S COUNTY.

ENTER FIRST LETTER OF COUNTY NAME

\_\_\_ ANSI COUNTY CODE (FORMERLY FIPS  
COUNTY CODE)

888 OTHER  
777 DON'T KNOW/NOT SURE  
999 REFUSED  
001 MIN  
775 MAX

**ND02Q02**

IF - C08Q15 = 1 OR C08Q15 = 2

OCCOIL

Do you work for an oil and gas company or an oil and gas supporting business? This would include for example providing water for fracking or truckers who primarily haul products or waste for the oil and gas industry.

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

**ND02Q03**

IF - C08Q15 = 1 OR C08Q15 = 2

OCCHOURS

About how many hours do you work per week at all of your jobs and businesses combined?

NUMBER OF HOURS (01 - 96 OR MORE)

97 DON'T KNOW/NOT SURE  
98 DON'T WORK  
99 REFUSED  
96 MAX

**ND02Q04** IF - C08Q15 = 1 OR C08Q15 = 2 OCCINJ

During the past 12 months, were you injured seriously enough at your job that you received medical treatment from a doctor, nurse or other health care professional?

- 1 YES
- 2 NO SKP → ND02END
- 7 DON'T KNOW/NOT SURE SKP → ND02END
- 9 REFUSED SKP → ND02END

**ND02Q05** IF - ND02Q04 = 1 OCCINJPAY

For your most recent work-related injury, who paid for the majority or most of your medical expenses?

- 01 Workers' compensation
- 02 You or your family's own health insurance plan, or other health insurance coverage plan (includes Medicare and Medicaid)
- 03 You or your family's out of pocket
- 04 Your employer WITHOUT a workers' compensation claim
- 05 Other source - not Medicare or Medicaid (specify)
- 06 Who will pay is still in process or not resolved
- 88 No one paid, no treatment
- 77 DON'T KNOW/NOT SURE
- 99 REFUSED

**ND02END**

**C08Q16** CHILDREN

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

- NUMBER OF CHILDREN
- 88 NONE
- 99 REFUSED
- 01 MIN
- 87 MAX

*Cati Note: if C08Q16 is answered, this will be considered a partial complete.*

**C08Q16V**

IF - C08Q16 &gt; 9 AND C08Q16 &lt; 88

INTERVIEWER YOU RECORDED {C08Q16} CHILDREN LIVE IN THE HOUSEHOLD.

IS THIS CORRECT?

1 YES, CONTINUE

2 NO, CORRECT C08Q16

SKP

→

C08Q16

*Cati Note: If respondent refused at ANY income level code income variable to 99 (refused).*

**C08Q17d**

Is your annual household income from all sources—

Less than \$25,000?

1 YES

2 NO

SKP

→

C08Q17e

7 DON'T KNOW/NOT SURE

SKP

→

C08Q17i

9 REFUSED

SKP

→

C08Q17i

**C08Q17c** IF - C08Q17d = 1

(Is your annual household income from all sources—)

Less than \$20,000?

1 YES

2 NO

SKP

→

C08Q17i

7 DON'T KNOW/NOT SURE

SKP

→

C08Q17i

9 REFUSED

SKP

→

C08Q17i

**C08Q17b** IF - C08Q17c = 1

(Is your annual household income from all sources—)

Less than \$15,000?

1 YES

2 NO

SKP

→

C08Q17i

7 DON'T KNOW/NOT SURE

SKP

→

C08Q17i

9 REFUSED

SKP

→

C08Q17i



**C08Q17a** IF - C08Q17b = 1

(Is your annual household income from all sources—)

Less than \$10,000?

1	YES			C08Q17i
2	NO	SKP	→	C08Q17i
7	DON'T KNOW/NOT SURE	SKP	→	C08Q17i
9	REFUSED	SKP	→	C08Q17i

**C08Q17e** IF - C08Q17d = 2

(Is your annual household income from all sources—)

Less than \$35,000?

1	YES			C08Q17i
2	NO			
7	DON'T KNOW/NOT SURE	SKP	→	C08Q17i
9	REFUSED	SKP	→	C08Q17i

**C08Q17f** IF - C08Q17e = 2

(Is your annual household income from all sources—)

Less than \$50,000?

1	YES			C08Q17i
2	NO			
7	DON'T KNOW/NOT SURE	SKP	→	C08Q17i
9	REFUSED	SKP	→	C08Q17i

**C08Q17g** IF - C08Q17f = 2

(Is your annual household income from all sources—)

Less than \$75,000?

1	YES			C08Q17i
2	NO	SKP	→	C08Q17i
7	DON'T KNOW/NOT SURE	SKP	→	C08Q17i
9	REFUSED	SKP	→	C08Q17i

**C08Q17i**

INCOME2

(Annual Household income from all sources is:)

{If C08Q17g = 2, More than \$75,000?}

{If C08Q17g = 1, \$50,000 to less than \$75,000}

{If C08Q17f = 1, \$35,000 to less than \$50,000}

{If C08Q17e = 1, \$25,000 to less than \$35,000}

{If C08Q17c = 2, \$20,000 to less than \$25,000}

{If C08Q17b = 2, \$15,000 to less than \$20,000}

{If C08Q17a = 2, \$10,000 to less than \$15,000}

{If C08Q17a = 1, Less than \$10,000}

{Default, REFUSED/DON'T KNOW/NOT SURE}

(Is this correct?)

1 YES

2 NO

SKP

→

C08Q17d

7 DON'T KNOW/NOT SURE

9 REFUSED

**C08Q18**

INTERNET

Have you used the internet in the past 30 days?

1 YES

2 NO

7 DON'T KNOW/NOT SURE

9 REFUSED

**C08Q19**

WEIGHT2

About how much do you weigh without shoes?

NOTE: IF RESPONDENT ANSWERS IN METRICS, PUT "9" IN FRONT (EX. 65 KILOGRAMS IS "9065" OR 105 KILOGRAMS IS "9105").

ROUND FRACTIONS UP

\_\_\_\_\_ WEIGHT (POUNDS/KILOGRAMS)

7777 DON'T KNOW/NOT SURE

9999 REFUSED

**C08Q19V**

IF - C08Q19 <> 7777 AND C08Q19 <> 9999 AND  
((C08Q19 < 9000 AND (C08Q19 < 80 OR C08Q19 >  
350)) OR (C08Q19 > 9000 AND (C08Q19 < 9035 OR  
C08Q19 > 9159)))

INTERVIEWER YOU INDICATED THE RESPONDENT WEIGHS {C08Q19}

IS THIS CORRECT?

- 1 YES, CORRECT AS IS, CONTINUE
- 2 NO, REASK QUESTION

**SKP** → **C08Q19**

**C08Q20**

**HEIGHT3**

About how tall are you without shoes?

NOTE: IF RESPONDENT ANSWERS IN METRICS, PUT "9" IN FRONT (EX. 165 CENTIMETERS IS "9165").

NOTE: ENTER HEIGHT IN FEET AND INCHES (EX. 5 FEET 9 INCHES = 509) OR METERS AND CENTIMETERS (EX. 1 METER 75 CENTIMETERS = 9175)

ROUND FRACTIONS DOWN

\_\_\_\_\_ HEIGHT (FT/INCHES/METERS/CENTIMETERS)

- 7777 DON'T KNOW/NOT SURE  
9999 REFUSED

**C08Q20V**

IF - (C08Q20 < 9000 AND (C08Q20 > 608 OR C08Q20 <  
407)) OR (C08Q20 > 9000 AND (C08Q20 > 9206 OR C08Q20  
< 9139)) AND C08Q20 <> 7777 AND C08Q20 <> 9999

INTERVIEWER YOU INDICATED THE RESPONDENT IS {SHOWFTIN C08Q20}

IS THIS CORRECT?

- 1 YES, CORRECT AS IS, CONTINUE
- 2 NO, REASK QUESTION

**SKP** → **C08Q20**

*Cati Note: If male, go to Q8.22, if female respondent is 50 years old or older, go to Q8.22.*

**C08Q21**

IF - C08Q01 = 2 AND C08Q02 < 50

**PREGNANT**

To your knowledge, are you now pregnant?

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

**C08Q22**

**DEAF**

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

Some people who are deaf or have serious difficulty hearing may or may not use equipment to communicate by phone.

Are you deaf or do you have serious difficulty hearing?

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

**C08Q23**

**BLIND**

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

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

**C08Q24**

**DECIDE**

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

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

**C08Q25**

**DIFFWALK**

Do you have serious difficulty walking or climbing stairs?

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

**C08Q26**

DIFFDRES

Do you have difficulty dressing or bathing?

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

**C08Q27**

DIFFALON

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

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

**C08END**

## Section 09: Tobacco Use

**C09INTRO**

**C09Q01**

SMOKE100

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

INTERVIEWER NOTE: IF NECESSARY, SAY:

"For cigarettes, do not include: electronic cigarettes (e-cigarettes, NJOY, Bluetip), herbal cigarettes, cigars, cigarillos, little cigars, pipes, bidis, kreteks, water pipes (hookahs), or marijuana."

INTERVIEWER NOTE: 5 PACKS = 100 CIGARETTES

- |   |                     |     |   |        |
|---|---------------------|-----|---|--------|
| 1 | YES                 |     |   |        |
| 2 | NO                  | SKP | → | C09Q05 |
| 7 | DON'T KNOW/NOT SURE | SKP | → | C09Q05 |
| 9 | REFUSED             | SKP | → | C09Q05 |

**C09Q02**

IF - C09Q01 = 1

SMOKDAY2

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

DO NOT READ

- |   |                     |     |   |        |
|---|---------------------|-----|---|--------|
| 1 | EVERY DAY           |     |   |        |
| 2 | SOME DAYS           |     |   |        |
| 3 | NOT AT ALL          | SKP | → | C09Q04 |
| 7 | DON'T KNOW/NOT SURE | SKP | → | C09Q05 |
| 9 | REFUSED             | SKP | → | C09Q05 |

**C09Q03**

IF - C09Q01 = 1 AND (C09Q02 = 1 OR C09Q02 = 2) STOPSMK2

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

- |   |                     |     |   |        |
|---|---------------------|-----|---|--------|
| 1 | YES                 |     |   | C09Q05 |
| 2 | NO                  | SKP | → | C09Q05 |
| 7 | DON'T KNOW/NOT SURE | SKP | → | C09Q05 |
| 9 | REFUSED             | SKP | → | C09Q05 |

**C09Q04**

IF - C09Q02 = 3

LASTSMK2

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

READ ONLY IF NECESSARY

- 01 Within the past month (less than 1 month ago)
- 02 Within the past 3 months (1 month but less than 3 months ago)
- 03 Within the past 6 months (3 months but less than 6 months ago)
- 04 Within the past year (6 months but less than 1 year ago)
- 05 Within the past 5 years (1 year but less than 5 years ago)
- 06 Within the past 10 years (5 years but less than 10 years ago)
- 07 10 years or more
- 08 Never smoked regularly
  
- 77 DON'T KNOW/NOT SURE
- 99 REFUSED

**C09Q05**

USENOW3

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

INTERVIEWER NOTE: SNUS (RHYMES WITH 'GOOSE')

INTERVIEWER NOTE: IF NEEDED SAY:

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

DO NOT READ

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

**C09END**

## Section 10: E-Cigarettes

**C10INTRO**

**C10Q01**

ECIGARET

The next questions are about electronic cigarettes and other electronic "vaping" products. These products typically contain nicotine, flavors, and other ingredients. Do not include products used only for marijuana.

Have you ever used an e-cigarette or other electronic "vaping" product, even just one time, in your entire life?

INTERVIEWER NOTE: THESE QUESTIONS CONCERN ELECTRONIC VAPING PRODUCTS FOR NICOTINE USE. THE USE OF ELECTRONIC VAPING PRODUCTS FOR MARIJUANA USE IS NOT INCLUDED IN THESE QUESTIONS.

INTERVIEWER NOTE: READ IF NECESSARY:

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

- |   |                     |     |   |        |
|---|---------------------|-----|---|--------|
| 1 | YES                 |     |   |        |
| 2 | NO                  | SKP | → | C10END |
| 7 | DON'T KNOW/NOT SURE | SKP | → | C10END |
| 9 | REFUSED             | SKP | → | C10END |

**C10Q02** IF - C10Q01 = 1

ECIGNOW

Do you now use e-cigarettes or other electronic "vaping" products every day, some days, or not at all?

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

**C10END**



## Section 11: Alcohol Consumption

**C11INTRO**

**C11Q01**

ALCDAY5

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?

101-107 = DAYS PER WEEK                      201-230 = DAYS IN PAST 30 DAYS

\_\_\_ DAYS

888	NO DRINKS IN PAST 30	<b>SKP</b>	→	<b>C11END</b>
777	DON'T KNOW/NOT SURE	<b>SKP</b>	→	<b>C11END</b>
999	REFUSED	<b>SKP</b>	→	<b>C11END</b>
101	MIN			
230	MAX			

**C11Q02**

IF - C11Q01 < 777

AVEDRNK2

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

INTERVIEWER NOTE, IF NEEDED SAY:

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

\_\_\_ NUMBER OF DRINKS

77	DON'T KNOW/NOT SURE
99	REFUSED
01	MIN
76	MAX

**C11Q02V**

IF - C11Q02 > 15 AND C11Q02 < 77

INTERVIEWER YOU INDICATED {C11Q02} DRINKS PER DAY

IS THIS CORRECT?

1	YES, CORRECT AS IS, CONTINUE			
2	NO, REASK QUESTION	<b>SKP</b>	→	<b>C11Q02</b>

**C11Q03**

IF - C11Q01 < 777

DRNK3GE5

Considering all types of alcoholic beverages, how many times during the past 30 days did you have {IF C08Q01 = 1, 5, 4} or more drinks on an occasion?

\_\_\_ NUMBER OF TIMES

- 88 NONE
- 77 DON'T KNOW/NOT SURE
- 99 REFUSED
- 76 MAX

**C11Q03V**

IF - C11Q03 > 15 AND C11Q03 < 77

INTERVIEWER YOU INDICATED {C11Q03} OCCASIONS WHEN THE RESPONDENT HAD 4/5 OR MORE DRINKS.

IS THIS CORRECT?

- 1 YES, CORRECT AS IS, CONTINUE
- 2 NO, REASK QUESTION **SKP** → **C11Q03**

**C11Q04**

IF - C11Q01 < 777

MAXDRNKS

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

\_\_\_ NUMBER OF DRINKS

- 77 DON'T KNOW/NOT SURE
- 99 REFUSED
- 01 MIN
- 76 MAX

**C11Q04V**

IF - (C11Q04 <> 99 AND C11Q04 <> 77) AND C11Q04 < 77 AND ((C08Q01 = 1 AND (C11Q04 < 5 AND (C11Q03 < 88 AND C11Q03 <>77)) OR (C11Q03 = 88 AND (C11Q04 > 4 AND C11Q04 < 77))) OR (C08Q01 = 2 AND (C11Q04 < 4 AND (C11Q03 < 88 AND C11Q03 <>77)) OR (C11Q03 = 88 AND (C11Q04 > 3 AND C11Q04 < 77)))

INTERVIEWER YOU INDICATED {C11Q04} DRINKS IS THE LARGEST NUMBER OF DRINKS THE RESPONDENT HAD ON ANY OCCASION BUT THE NUMBER OF TIMES THE RESPONDENT HAD {IF C08Q01 = 1, 5, 4} IS {C11Q03}.

IS THIS CORRECT?

- 1 YES, CORRECT AS IS, CONTINUE
- 2 NO, REASK QUESTION **SKP** → **C11Q04**

**C11END**

## Section 12: Fruits and Vegetables

**C12INTRO**

**C12Q01**

FRUIT2

Now think about the foods you ate or drank during the past month, that is, the past 30 days, including meals and snacks.

Not including juices, how often did you eat fruit? You can tell me times per day, times per week or times per month.

READ IF RESPONDENT ASKS WHAT TO INCLUDE OR SAYS 'I DON'T KNOW':

"Include fresh, frozen or canned fruit. Do not include dried fruits."

INTERVIEWER INSTRUCTIONS: IF A RESPONDENT INDICATES THAT THEY CONSUME A FOOD ITEM EVERY DAY THEN ENTER THE NUMBER OF **TIMES** PER DAY. IF THE RESPONDENT INDICATES THAT THEY EAT A FOOD LESS THAN DAILY, THEN ENTER TIMES PER WEEK OR TIMES PER MONTH. DO NOT ENTER TIMES PER DAY UNLESS THE RESPONDENT REPORTS THAT HE/SHE CONSUMED THAT FOOD ITEM EACH DAY DURING THE PAST MONTH.

INTERVIEWER NOTE: IF RESPONDENT GIVES A NUMBER WITHOUT A TIME FRAME, ASK:

"Was that per day, week, or month?"

INTERVIEWER NOTE: ENTER QUANTITY IN TIMES PER DAY, WEEK, OR MONTH

101-199 = PER DAY      201-299 = PER WEEK      300-399 = PER MONTH

\_\_\_ TIMES

300 LESS THAN ONCE A MONTH

555 NEVER

777 DON'T KNOW

999 REFUSED

101 MIN

399 MAX

**C12Q01V** IF - (C12Q01 > 105 AND C12Q01 < 201) OR (C12Q01 > 235 AND C12Q01 < 300)

INTERVIEWER: YOU RECORDED THAT THE RESPONDENT EATS FRUIT {C12Q01 **SHOWTIME**}

IS THIS CORRECT?

1 YES, CORRECT AS IS, CONTINUE

2 NO, REASK QUESTION

**SKP** → **C12Q01**

**C12Q02**

**FRUITJU2**

Not including fruit-flavored drinks or fruit juices with added sugar, how often did you drink 100% fruit juice such as apple or orange juice?

READ IF RESPONDENT ASKS ABOUT EXAMPLES OF FRUIT-FLAVORED DRINKS:

"Do not include fruit-flavored drinks with added sugar like cranberry cocktail, HI-C, lemonade, Kool-aid, Gatorade, Tampico, and Sunny delight. Include only 100% pure juices or 100% juice blends."

INTERVIEWER NOTE: IF RESPONDENT GIVES A NUMBER WITHOUT A TIME FRAME, ASK:

"Was that per day, week, or month?"

INTERVIEWER NOTE: ENTER QUANTITY IN TIMES PER DAY, WEEK, OR MONTH

101-199 = PER DAY      201-299 = PER WEEK      300-399 = PER MONTH

\_\_\_ TIMES

300 LESS THAN ONCE A MONTH

555 NEVER

777 DON'T KNOW/NOT SURE

999 REFUSED

101 MIN

399 MAX

**C12Q02V** IF - (C12Q02 > 105 AND C12Q02 < 201) OR (C12Q02 > 235 AND C12Q02 < 300)

INTERVIEWER: YOU RECORDED THAT THE RESPONDENT DRINKS 100% PURE FRUIT JUICES {C12Q02 **SHOWTIME**}

IS THIS CORRECT?

1 YES, CORRECT AS IS, CONTINUE

2 NO, REASK QUESTION

**SKP** → **C12Q02**

**C12Q03**

FVGREEN1

How often did you eat a green leafy or lettuce salad, with or without other vegetables?

READ IF RESPONDENT ASKS ABOUT SPINACH:

"Include spinach salads"

INTERVIEWER NOTE: IF RESPONDENT GIVES A NUMBER WITHOUT A TIME FRAME, ASK:

"Was that per day, week, or month?"

INTERVIEWER NOTE: ENTER QUANTITY IN TIMES PER DAY, WEEK, OR MONTH

101-199 = PER DAY      201-299 = PER WEEK      300-399 = PER MONTH

\_\_\_ TIMES

300 LESS THAN ONCE A MONTH

555 NEVER

777 DON'T KNOW/NOT SURE

999 REFUSED

101 MIN

399 MAX

**C12Q03V**

IF - (C12Q03 > 105 AND C12Q03 < 201) OR (C12Q03 > 235 AND C12Q03 < 300)

INTERVIEWER: YOU RECORDED THAT THE RESPONDENT EATS GREEN LEAFY OR LETTUCE SALAD {C12Q03 **SHOWTIME**}

IS THIS CORRECT?

1 YES, CORRECT AS IS, CONTINUE

2 NO, REASK QUESTION

**SKP** → **C12Q03**

**C12Q04**

FRENCHF1

How often did you eat any kind of fried potatoes, including french fries, home fries, or hash browns?

READ IF RESPONDENT ASKS ABOUT POTATO CHIPS:

"Do not include potato chips."

INTERVIEWER NOTE: IF RESPONDENT GIVES A NUMBER WITHOUT A TIME FRAME, ASK:

"Was that per day, week, or month?"

INTERVIEWER NOTE: ENTER QUANTITY IN TIMES PER DAY, WEEK, OR MONTH

101-199 = PER DAY      201-299 = PER WEEK      300-399 = PER MONTH

\_\_\_ TIMES

300 LESS THAN ONCE A MONTH

555 NEVER

777 DON'T KNOW/NOT SURE

999 REFUSED

101 MIN

399 MAX

**C12Q04V** IF - (C12Q04 > 105 AND C12Q04 < 201) OR (C12Q04 > 235 AND C12Q04 < 300)

INTERVIEWER: YOU RECORDED THAT THE RESPONDENT EATS ANY KIND OF FRIED POTATOES {C12Q04 **SHOWTIME**}

IS THIS CORRECT?

1 YES, CORRECT AS IS, CONTINUE

2 NO, REASK QUESTION

**SKP** → **C12Q04**

**C12Q05**

POTATOE1

How often did you eat any other kind of potatoes, or sweet potatoes, such as baked, boiled, mashed potatoes, or potato salad?

READ IF RESPONDENT ASKS ABOUT WHAT TYPES OF POTATOES TO INCLUDE:

"Include all types of potatoes except fried. Include potatoes au gratin, scalloped potatoes."

INTERVIEWER NOTE: IF RESPONDENT GIVES A NUMBER WITHOUT A TIME FRAME, ASK:

"Was that per day, week, or month?"

INTERVIEWER NOTE: ENTER QUANTITY IN TIMES PER DAY, WEEK, OR MONTH

101-199 = PER DAY      201-299 = PER WEEK      300-399 = PER MONTH

\_\_\_ TIMES

300 LESS THAN ONCE A MONTH

555 NEVER

777 DON'T KNOW/NOT SURE

999 REFUSED

101 MIN

399 MAX

**C12Q05V** IF - (C12Q05 > 105 AND C12Q05 < 201) OR (C12Q05 > 235 AND C12Q05 < 300)

INTERVIEWER: YOU RECORDED THAT THE RESPONDENT EATS ANY OTHER KIND OR POTATO {C12Q05 **SHOWTIME**}

IS THIS CORRECT?

1 YES, CORRECT AS IS, CONTINUE

2 NO, REASK QUESTION

**SKP** → **C12Q05**



**C12Q06**

VEGETAB2

Not including lettuce salads and potatoes, how often did you eat other vegetables?

READ IF RESPONDENT ASKS ABOUT WHAT TO INCLUDE:

"Include tomatoes, green beans, carrots, corn, cabbage, bean sprouts, collard greens, and broccoli. Include raw, cooked, canned, or frozen vegetables. Do not include rice."

INTERVIEWER NOTE: IF RESPONDENT GIVES A NUMBER WITHOUT A TIME FRAME, ASK:

"Was that per day, week, or month?"

INTERVIEWER NOTE: ENTER QUANTITY IN TIMES PER DAY, WEEK, OR MONTH

101-199 = PER DAY      201-299 = PER WEEK      300-399 = PER MONTH

\_\_\_ TIMES

300 LESS THAN ONCE A MONTH

555 NEVER

777 DON'T KNOW/NOT SURE

999 REFUSED

101 MIN

399 MAX

**C12Q06V** IF - (C12Q06 > 105 AND C12Q06 < 201) OR (C12Q06 > 235 AND C12Q06 < 300)

INTERVIEWER: YOU RECORDED THAT THE RESPONDENT EATS OTHER VEGETABLES {C12Q06 **SHOWTIME**}

IS THIS CORRECT?

1 YES, CORRECT AS IS, CONTINUE

2 NO, REASK QUESTION

**SKP** → **C12Q06**

**C12END**

## Section 13: Exercise (Physical Activity)

### C13INTRO

#### C13Q01

EXERANY2

The next few questions are about exercise, recreation, or physical activities other than your regular job duties.

INTERVIEWER INSTRUCTION: IF RESPONDENT DOES NOT HAVE A "REGULAR JOB DUTY" OR IS RETIRED, SAY:

"You may count the physical activity or exercise you spend the most time doing in a regular month."

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                  | SKP | → | C13Q08 |
| 7 | DON'T KNOW/NOT SURE | SKP | → | C13Q08 |
| 9 | REFUSED             | SKP | → | C13Q08 |

#### C13Q02

IF - C13Q01 = 1

EXTRACT11

What type of physical activity or exercise did you spend the most time doing during the past month?

INTERVIEWER INSTRUCTION: IF THE RESPONDENT'S ACTIVITY IS NOT INCLUDED IN THE PHYSICAL ACTIVITY CODING LIST, CHOOSE THE OPTION LISTED AS "OTHER".

\_\_\_ (SPECIFY) [SEE CODING LIST A]

- |    |                     |     |   |        |
|----|---------------------|-----|---|--------|
| 77 | DON'T KNOW/NOT SURE | SKP | → | C13Q08 |
| 99 | REFUSED             | SKP | → | C13Q08 |

**C13Q03** IF - C13Q02 > 0 AND C13Q02 <> 77 AND C13Q02 <>  
99 EXEROF11

How many times per week or per month did you take part in this activity during the past month?

101-199 = PER WEEK 201-299 = PER MONTH

\_\_\_ TIMES

777 DON'T KNOW/NOT SURE

999 REFUSED

101 MIN

299 MAX

**C13Q03V** IF - (C13Q03 > 107 AND C13Q03 < 201) OR (C13Q03 >  
231 AND C13Q03 < 300)

INTERVIEWER: YOU RECORDED THAT THE RESPONDENT TAKES PART IN THE ACTIVITY RECORDED IN C13Q02 {**C13Q03 SHOWTIME**}

IS THIS CORRECT?

1 YES, CORRECT AS IS, CONTINUE

2 NO, REASK QUESTION

**SKP** → **C13Q03**

**C13Q04** IF - C13Q02 > 0 AND C13Q02 <> 77 AND C13Q02 <>  
99 EXERHMM1

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

EXAMPLE 1 HOUR 30 MINUTES ENTER AS "130"

\_\_\_ HOURS AND MINUTES

777 DON'T KNOW/NOT SURE

999 REFUSED

001 MIN

659 MAX

**C13Q04V** IF - C13Q04 > 430 AND C13Q04 < 777

INTERVIEWER: YOU RECORDED THAT THE RESPONDENT KEEPS AT THIS ACTIVITY FOR {**C13Q04 HOURMIN**}

IS THIS CORRECT?

1 YES, CORRECT AS IS, CONTINUE

2 NO, REASK QUESTION

**SKP** → **C13Q04**

**C13Q05** IF - C13Q02 > 0 AND C13Q02 <> 77 AND C13Q02 <> 99 EXTRACT21

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

INTERVIEWER INSTRUCTION: IF THE RESPONDENT'S ACTIVITY IS NOT INCLUDED IN THE CODING PHYSICAL ACTIVITY LIST, CHOOSE THE OPTION LISTED AS "OTHER".

\_\_\_ (SPECIFY) [SEE CODING LIST A]

88	NO OTHER ACTIVITY	SKP	→	C13Q08
77	DON'T KNOW/NOT SURE	SKP	→	C13Q08
99	REFUSED	SKP	→	C13Q08

**C13Q05V** IF - C13Q02 = C13Q05

INTERVIEWER: YOU RECORDED THAT THE RESPONDENT TAKES PART IN THE SAME ACTIVITY RECORDED IN C13Q02.

FIRST ACTIVITY (C13Q02)= {C13Q02}

SECOND ACTIVITY (C13Q05)= {C13Q05}

IS THIS CORRECT?

1	NO, CHANGE ACTIVITY IN QUESTION C13Q05			C13Q05
2	NO, CHANGE ACTIVITY IN QUESTION C13Q02	SKP	→	C13Q02
3	YES, CORRECT AS IS, CONTINUE			

**C13Q06** IF - C13Q05 > 0 AND C13Q05 <> 77 AND C13Q05 <> 99 AND C13Q05 <> 88 EXEROFT2

How many times per week or per month did you take part in this activity during the past month?

101-199 = PER WEEK                      201-299 = PER MONTH

\_\_\_ TIMES

777 DON'T KNOW/NOT SURE  
999 REFUSED  
101 MIN  
299 MAX

**C13Q06V** IF - (C13Q06 > 107 AND C13Q06 < 201) OR (C13Q06 > 231 AND C13Q06 < 300)

INTERVIEWER: YOU RECORDED THAT THE RESPONDENT TAKES PART IN THE ACTIVITY RECORDED IN C13Q05 {C13Q06 SHOWTIME}

IS THIS CORRECT?

- 1 YES, CORRECT AS IS, CONTINUE  
2 NO, REASK QUESTION SKP → C13Q06

**C13Q07** IF - C13Q05 > 0 AND C13Q05 <> 77 AND C13Q05 <> 99 AND C13Q05 <> 88 EXERHMM2

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

EXAMPLE 1 HOUR 30 MINUTES ENTER AS "130"

\_\_\_ HOURS AND MINUTES

- 777 DON'T KNOW/NOT SURE  
999 REFUSED  
001 MIN  
659 MAX

**C13Q07V** IF - C13Q07 > 430 AND C13Q07 < 777

INTERVIEWER: YOU RECORDED THAT THE RESPONDENT KEEPS AT THIS ACTIVITY FOR {C13Q07 HOURMIN}

IS THIS CORRECT?

- 1 YES, CORRECT AS IS, CONTINUE  
2 NO, REASK QUESTION SKP → C13Q07

**C13Q08** STRENGTH

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.

101-199 = PER WEEK 201-299 = PER MONTH

\_\_\_ TIMES

- 888 NEVER  
777 DON'T KNOW/NOT SURE  
999 REFUSED  
101 MIN  
299 MAX

**C13Q08V** IF - (C13Q08 > 107 AND C13Q08 < 201) OR (C13Q08 >  
231 AND C13Q08 < 300)

INTERVIEWER: YOU RECORDED THAT THE RESPONDENT TAKES PART IN THE  
ACTIVITY RECORDED IN C13Q05 {**C13Q06 SHOWTIME**}

IS THIS CORRECT?

- 1 YES, CORRECT AS IS, CONTINUE
- 2 NO, REASK QUESTION **SKP** → **C13Q08**

**C13END**

## Section 14: Seatbelt Use

C14INTRO

C14Q01

SEATBELT

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
  
- 7 DON'T KNOW/NOT SURE
- 8 NEVER DRIVE OR RIDE IN A CAR
- 9 REFUSED

C14END

## Section 15: Immunization

**C15INTRO**

**C15Q01**

FLUSHOT6

Now I will ask you questions about the flu vaccine. There are two ways to get the 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 flu shot or a flu vaccine that was sprayed in your nose?

READ ONLY IF NECESSARY:

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

1	YES			
2	NO	SKP	→	C15Q03
7	DON'T KNOW/NOT SURE	SKP	→	C15Q03
9	REFUSED	SKP	→	C15Q03

**C15Q02**

IF - C15Q01 = 1

FLSHTMY2

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?

\_\_\_\_\_ MONTH / YEAR

777777 DON'T KNOW/NOT SURE  
999999 REFUSED  
012016 MIN  
122017 MAX

*CATI NOTE: Do not allow 77 for first two month digits. Please set MIN to no more than 12 months from the current month. Ex: Call made in 06/2017, response can be no older than 06/2016*



**C15Q03**

PNEUVAC3

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?

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

*CATI NOTE: IF RESPONDENT IS <= 49 YEARS OF AGE, GO TO NEXT SECTION*

**C15Q04**

IF - C08Q02 = 7 OR C08Q02 = 9 OR C08Q02 > 49

SHINGLE2

Have you ever had the shingles or zoster vaccine?

INTERVIEWER NOTE (READ IF NECESSARY):

"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."

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

**C15END**

## Section 16: HIV/AIDS

**C16INTRO**

**C16Q01**

HIVTST6

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.

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                  | SKP | → | C16Q03 |
| 7 | DON'T KNOW/NOT SURE | SKP | → | C16Q03 |
| 9 | REFUSED             | SKP | → | C16Q03 |

**C16Q02**

IF - C16Q01 = 1

HIVTSTD3

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

INTERVIEWER INSTRUCTIONS: IF RESPONSE IS BEFORE JANUARY 1985, CODE "DON'T KNOW." 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.

\_\_\_\_\_ CODE MONTH AND YEAR

- |        |                     |
|--------|---------------------|
| 777777 | DON'T KNOW/NOT SURE |
| 999999 | REFUSED             |
| 011985 | MIN                 |
| 772017 | MAX                 |

**C16Q03**

HIVRISK5

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

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

Do any of these situations apply to you?

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

**C16END**

## Module 09: Sleep Disorder

**M09INTRO**

**M09Q01**

SLEPTIM1

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

INTERVIEWER NOTE: ENTER HOURS OF SLEEP IN WHOLE NUMBERS, ROUNDING 30 MINUTES (1/2 HOUR) OR MORE UP TO THE NEXT WHOLE HOUR AND DROPPING 29 OR FEWER MINUTES.

\_\_ NUMBER OF HOURS [01-24]

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

**M09Q02**

ADSLEEP

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

\_\_ 01-14 days

- 88 NONE
- 77 DON'T KNOW/NOT SURE
- 99 REFUSED
- 14 MAX

**M09Q03**

SLEPDAY1

Over the last 2 weeks, how many days did you unintentionally fall asleep during the day?

\_\_ 01-14 days

- 88 NONE
- 77 DON'T KNOW/NOT SURE
- 99 REFUSED
- 14 MAX

**M09Q04**

SLEPSNO2

Have you ever been told that you snore loudly?

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

**M09Q05**

SLEPBRTH

Has anyone ever observed that you stop breathing during your sleep?

INTERVIEWER NOTE: ALSO ENTER "YES" IF RESPONDENT MENTIONS HAVING A MACHINE OR CPAP THAT RECORDS THAT BREATHING SOMETIMES STOPS DURING THE NIGHT.

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

**M09END**

## Module 16: Marijuana (Mar- Dec Only)

### M16INTRO

### M16Q01

MARIJANA

During the past 30 days, on how many days did you use marijuana or hashish?

\_\_\_ (01-30) NUMBER OF DAYS

88	NONE (0 DAYS)	SKP	→	M16END
77	DON'T KNOW/NOT SURE	SKP	→	M16END
99	REFUSED	SKP	→	M16END
30	MAX			

*CATI NOTE: Asked only of current marijuana users.*

### M16Q02

IF - M16Q01 > 0 AND M16Q01 < 77

USEMRJN1

During the past 30 days, what was the primary mode you used marijuana? Please select one. Did you...

INTERVIEWER NOTE: USE CLARIFICATION IN PARENTHESES ONLY IF NEEDED. PLEASE SLOWLY READ ALL MODES IN SUCCESSION

PLEASE READ

- 1 Smoke it? (for example: in a joint, bong, pipe, or blunt)
- 2 Eat it? (for example, in brownies, cakes, cookies, or candy)
- 3 Drink it? (for example, in tea, cola, alcohol)
- 4 Vaporize it? (for example in an e-cigarette-like vaporizer or another vaporizing device)
- 5 Dab it? (for example using waxes or concentrates), or
- 6 Use it some other way
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

*CATI NOTE: Asked only of current marijuana users.*

**M16Q03**

IF - M16Q01 > 0 AND M16Q01 < 77

RSNMRJNA

When you used marijuana or hashish during the past 30 days, was it for medical reasons to treat or decrease symptoms of a health condition, or was it for non-medical reasons to get pleasure or satisfaction (such as: excitement, to "fit in" with a group, increased awareness, to forget worries, for fun at a social gathering).

READ IF NECESSARY:

- 1 Only for medical reasons to treat or decrease symptoms of a health condition
- 2 Only for non-medical purposes to get pleasure or satisfaction
- 3 Both medical and non-medical reasons
  
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**M16END**

## State Added Section 01: Residence

**ND01INTRO**

**ND01Q01** IF - QSTPATH = 10 OR (QSTPATH = 20 & CPState =  
1) RESLONG

How long have you lived in North Dakota?

INTERVIEWER NOTE: THIS QUESTION REFERS TO CONSECUTIVE TIME. IF RESPONDENT WAS A RESIDENT, LEFT AND HAS NOW COME BACK, WE ARE INTERESTED IN HOW LONG THEY HAVE BEEN BACK.

101-199 NUMBER OF DAYS                      201-299 NUMBER OF WEEKS

301-399 NUMBER OF MONTHS                401-499 NUMBER OF YEARS

\_\_\_ ENTER AMOUNT OF TIME

555 ALL MY LIFE

888 DO NOT LIVE IN NORTH DAKOTA FULL  
TIME

777 DON'T KNOW/NOT SURE

999 REFUSED

101 MIN

499 MAX

**ND01END**



## State Added Section 04: Indian Health

**ND04INTRO**

**ND04Q01**

IF - C08Q04 = 30

RESERVE

Do you live on a reservation or Indian Service Area?

- 1 Yes, Reservation
- 2 Yes, Indian Service Area
- 3 No, Neither
  
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**ND04Q02**

IF - C08Q04 = 30

MEMTRIBE

Are you currently an enrolled tribal member?

- 1 YES
- 2 NO SKP → ND04END
  
- 7 DON'T KNOW/NOT SURE SKP → ND04END
- 9 SKP → ND04END

**ND04Q03**

IF - ND04Q02 = 1

TRIBE

Which tribe?

INTERVIEWER NOTE: THREE AFFILIATED TRIBES = MANDAN + ARIKARA + HIDATSA. CODE INDIVIDUAL TRIBE IF PROVIDED.

READ IF NECESSARY

- 01 Mandan
- 02 Arikara
- 03 Hidatsa
- 04 Three Affiliated Tribes
- 05 Spirit Lake Sioux
- 06 Standing Rock Sioux
- 07 Other Sioux
- 08 Chippewa
- 09 Other
  
- 77 DON'T KNOW/NOT SURE
- 99 REFUSED

**ND04Q04**

IF - ND04Q02 = 1

IHS

How much of your health care do you obtain from an Indian Health Service, IHS clinic?

- 1 All
- 2 Most
- 3 Some
- 4 Little
- 5 None
  
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**ND04END**

## State Added Section 05: Social Context

**ND05INTRO**

**ND05Q01**

PHYABUS

In the past 12 months, have you been intentionally harmed or hurt by another person? This might include minor physical injuries such as bruises, welts or small cuts.

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

**ND05Q02**

STRESSCOPE

What is the main mechanism you use to cope with stress?

- 01 Support from family and friends
- 02 Clergy or Spiritual leaders
- 03 Professional Counseling
- 04 Physical Exercise
- 05 Alcohol
- 06 Prescription Drugs
- 07 Non-prescription Drugs
- 08 Other
- 09 Does not apply
- 10 None
  
- 77 DON'T KNOW/NOT SURE
- 99 REFUSED

**ND05END**

## State Added Section 06: Sexual Violence

**ND06INTRO**

**ND06Q01**

RAPE2

Now I'd like to ask you how you feel about certain sexual behaviors. This is a sensitive topic, and some people may feel uncomfortable with these questions. Please keep in mind that you can ask me to skip any question you do not want to answer.

Please tell me whether you agree or disagree with the following statements:

If a woman is raped when she is drunk, she is at least somewhat responsible for letting things get out of control.

PLEASE READ

- 1 Agree
- 2 Disagree
  
- 7 DON'T KNOW/ NOT SURE
- 9 REFUSED

**ND06Q01a**

WMNDRES

Women who dress and act in a sexy way provoke rape by their appearance and behavior.

PLEASE READ

- 1 Agree
- 2 Disagree
  
- 7 DON'T KNOW/ NOT SURE
- 9 REFUSED

**ND06Q01b**

SEXVIOL1

Sexual violence occurs in your community.

READ IF NECESSARY

- 1 Agree
- 2 Disagree
  
- 7 DON'T KNOW/ NOT SURE
- 9 REFUSED

**ND06Q01c**

SEXVIOL2

It is possible to prevent sexual violence.

READ IF NECESSARY

1 Agree

2 Disagree

7 DON'T KNOW/ NOT SURE

9 REFUSED

**ND06END**

## State Added Section 07: Out of State Residence

**ND07INTRO**

**ND07Q01** IF - CPState = 2 AND QSTPATH = 20

During the past twelve months, how many days, weeks or months have you spent in the state of North Dakota?

101-199 NUMBER OF DAYS                      201-299 NUMBER OF WEEKS

301-399 NUMBER OF MONTHS                401-499 NUMBER OF YEARS

\_\_\_ ENTER AMOUNT OF TIME

888 DO NOT LIVE IN NORTH DAKOTA

777 DON'T KNOW/NOT SURE

999 REFUSED

101 MIN

499 MAX

**ND07END**

## **Closing Statement**

### **CLOSING**

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.