2017
Maryland Behavioral Risk Factor Surveillance System Questionnaire

Skip Patterns/CATI Instructions = Red text
Spanish translations = Blue text
Question Variables = Bold with colon
Interviewer Notes = The words “Interviewer Note” to always be in bold text on the screen. Any notes to be read to the respondent will be in bold text as well.

Core draft as of: December 30, 2016

Samptype = 1 = land
Samptype = 2 = cell
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</table>
Interviewer’s Script Landline Sample

Form Approved
OMB No. 0920-1061
Exp. Date 3/31/2018

Public reporting burden of this collection of information is estimated to average XX minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0920-1061).

NOTE: Interviewers do not need to read any part of the burden estimate nor provide the OMB number unless asked by the respondent for specific information. If a respondent asks for the length of time of the interview provide the most accurate information based on the version of the questionnaire that will be administered to that respondent. If the interviewer is not sure, provide the average time as indicated in the burden statement. If data collectors have questions concerning the BRFSS OMB process, please contact Carol Pierannunzi at ivk7@cdc.gov.

Answering Machine message text [TO BE LEFT ON 1ST, 4TH, AND 9TH ATTEMPT RESULTING IN AN ANSWERING MACHINE]:

Hello, the Maryland Department of Health and Mental Hygiene is conducting a study about the health of Maryland residents. We will call again in the next few days to conduct the interview. If you have any questions, please call us, toll free, at 1-844-403-3933. For most people, the study will be very brief and we would be glad to answer any questions you have. The toll free number again is 1-844-403-3933. Thank you.

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

IF MESSAGE ASKS TO ENTER A PHONE NUMBER:

1-844-403-3933
//ask of all samptype=1//

Intro1: Hello, I am calling for the Maryland Department of Health and Mental Hygiene. My name is (name). We are gathering information about the health of Maryland 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 or recorded for quality control.

Is this (phone number) ?

01 Continue
14 Continue in Spanish

[CATI NOTE: IF "NO": 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. CATI NOTE: STOP]

For Resumed Interviews and samptype =1:

//if samptype =1//

INTROa1: Hello, I’m calling from ICF for the Maryland Department of Health and Mental Hygiene and the Centers for Disease Control and Prevention. We are gathering information about the health of Maryland residents. This call may be monitored or recorded for quality control. When we called previously the computer randomly selected the <male/female> 18 years of age or older in the household with the next birthday to be interviewed.

May I please speak to him/her?

01. Transfer to respondent [go to newadult]
05 Selected on the line
14 CONTINUE IN SPANISH

//ask if intro1=1 and samptype = 1//

HS1: Is this a private residence?

Read only if necessary: “By private residence, we mean someplace like a house or apartment.”

INTERVIEWER NOTE: Private residence includes any home where the respondent spends at least 30 consecutive days concurrent with the interview including vacation homes, RVs or other locations in which the respondent lives for portions of the year.
1 Yes [Go to state of residence]
2 No [Go to college housing]
3 No, business phone only

//if HS1=3/

BUS: Thank you very much but we are only interviewing persons on residential phones lines at this time. (DISPO 26)

[CLICK NEXT TO CONTINUE]

//if HS1=2/

COLLEGE: Do you live in college housing?

Read only if necessary: “By college housing we mean dormitory, graduate student or visiting faculty housing, or other housing arrangement provided by a college or university.”

INTERVIEWER NOTE: IF NO, PROBE TO FIND OUT IF BUSINESS OR GROUP HOME

1 YES [Go to STRES]
2 NO - Business
3 NO - Group home
7 DON’T KNOW / NOT SURE
9 REFERUSED

//if college = 2,3,7,9//

X2: Thank you very much, but we are only interviewing persons who live in a private residence or college housing at this time. STOP [if college = 2,3,7,9 assign dispo 26 Not a Private Residence/]

//ask of all if samptype = 1//

STRES: Do you currently live in  Maryland  ?

1 Yes [Go to HS2]
2 No
7 Don’t Know
9 Refused
//if stres = 2,7,9//

X3: Thank you very much, but we are only interviewing persons who live in Maryland at this time. STOP //dispo 40//

//ask if HS1=1 or college = 1//

HS2: Is this a cell telephone?

INTERVIEWER NOTE: Telephone service over the internet counts as landline service (includes vonage, magic jack and other home-based phone services).

Read only if necessary: “By cell (or cellular) 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//

HS2X: Thank you very much, but we are only interviewing by land line telephones and for private residences or college housing. Stop assign dispo 028]

[CATI NOTE: IF (COLLEGE HOUSING = YES) CONTINUE; OTHERWISE GO TO ADULT RANDOM SELECTION]

//ask of college=1 and hs2=1//

ADULT: Are you 18 years of age or older?

1 Yes, respondent is male [GO TO NEXT SECTION]
2 Yes, respondent is female [GO TO NEXT SECTION]
3 No

//if adult=3//

XX3: Thank you very much, but we are only interviewing persons aged 18 or older at this time. STOP //if adult=3 assign dispo 27//

[click next to Continue]

//ask if HS1=1 and hs2=1//
**ADULTS:** I need to randomly select one adult who lives in your household to be interviewed. Excluding adults living away from home, such as students away at college. How many members of your household, including yourself, are 18 years of age or older?

___ Number of adults [RANGE 0-18]

//if ADULTS = 0 //

**XX3:** Thank you very much, but we are only interviewing persons aged 18 or older at this time. STOP //if adult=3 assign dispo 27//

[click next to Continue]

//ask if ADULTS = 1//

**ONEADULT:** Are you the adult?

**INTERVIEWER NOTE:** GENDER WILL BE ASKED AGAIN IN DEMOGRAPHICS SECTION.

(Ask gender if necessary)

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

If ONEADULT=21 OR 22 "yes,"

Then you are the person I need to speak with.

//if ONEADULT=03//

**ASKGENDR:** Is the adult a man or a woman?

21 Male
22 Female

//if ONEADULT=03//

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

1 Yes, Adult coming to the phone.[GO TO NEWADULT]
2 No, not here (interview will terminate) [INTERVIEWER SET APPOINTMENT FOR BEST TIME TO REACH ADULT]

//ASK IF ADULTS>1//

MEN: How many of these adults are men?

__ Number of men [RANGE 0-ADULTS]

CATI NOTE: CATI program to subtract number of men from number of adults provided

WOMEN: So the number of women in the household is ___

__ Number of women [RANGE 0-ADULTS-MEN]

Is that correct?

1 YES

2 NO [go back to ADULTS question)

//if Adults >1 and samptype= 1//

NBIRTH Among the adults in your household, may I please speak with the adult with the next birthday?

1 Yes, On the line [go to GENDER then to yourthe1]

2 Yes, Adult coming to the phone [ go to GENDER then to NEWADULT]

3 No, adult not available at this time [go to GENDER]

//ask if nbirth = 1,2 or 3//

GENDER:

[READ IF NECESSARY]

Is the adult a man or a woman?

21 Male

22 Female

//if nbirth=3 and gender = 21 or 22 //: Suspend and schedule a call back.
To the correct respondent:

NEWADULT: Hello, I am calling for the **Maryland Department of Health and Mental Hygiene**. My name is ____ (name) ___. We are gathering information about the health of **Maryland** 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 or recorded for quality control.

[PRESS NEXT TO CONTINUE]

**PROGRAMMER NOTES**

- if CADULT(1) OR ADULT(1) OR ONEADULT(21) OR GENDER(21) OR (ASKGENDR(21) AND GETADULT(1)), then auto-code HGENDER=1

- if CADULT(2) OR ADULT(2) OR ONEADULT(22) OR GENDER(22) OR (ASKGENDR(22) AND GETADULT(1)), then auto-code HGENDER=2

- ADULT should no longer say to go to the next section before this hidden variable gets set, so that will need to be updated as well.

- All sections, modules and state-added questions that use s8q1 should be updated to look at the value of the hidden HGENDER variable instead.

//ask if samptype=1//

YOURTHE1: 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 1-844-403-3933. If you have any questions regarding your rights as a participant, please call Ms. Gay Hutchens, IRB Administrator, at 410-767-8448.

[INTERVIEWER: IF NEEDED: The interview takes on average 24 minutes depending on your answers.]

001 Person Interested, continue.

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

Si tiene preguntas sobre sus derechos como participante, por favor contacte Señora Gay Hutchins, Administradora del IRB, al 410-767-8448.
Interviewer’s Script Cell Phone

NOTE: Interviewers do not need to read any part of the burden estimate nor provide the OMB number unless asked by the respondent for specific information. If a respondent asks for the length of time of the interview provide the most accurate information based on the version of the questionnaire that will be administered to that respondent. If the interviewer is not sure, provide the average time as indicated in the burden statement. If data collectors have questions concerning the BRFSS OMB process, please contact Carol Pierannunzi at ivk7@cdc.gov.

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//ask if samptype=2//

Intro1: Hello, I am calling for the __Maryland Department of Health and Mental Hygiene__. My name is (name). We are gathering information about the health of __Maryland__ 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 or recorded for quality control.

Is this a safe time to talk with you?

01 Yes - Continue
02 No - Not a safe time [dispo 171 go to CB]
[CATI NOTE: IF INTRO1 = 2 “THANK YOU VERY MUCH. WE WILL CALL YOU BACK AT A MORE CONVENIENT TIME.” STOP [dispo 171 go to CB]

//if intro1=1 or intro2=1//

PHONE: Is this ___(phone number)___?

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

1 [Go to CELLFON2] YES
2 NO
3 [GO TO CB] NOT A SAFE TIME/DRIVING [dispo 171 go to CB]
7 [Go to CELLFON2] DON'T KNOW / NOT SURE
9 [Go to CELLFON2] REFUSED

If "no," //if PHONE=2/

XPHONE: 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.

[CLICK NEXT TO CONTINUE]

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

CELLFON2: Is this a cell telephone?

Read only if necessary: “By cell telephone, we mean a telephone that is mobile and usable outside of your neighborhood.”

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

1 YES [Go to CADULT]
2 NO
3 NOT A SAFE TIME/DRIVING [dispo 171 go to CB]
7 DON'T KNOW / NOT SURE
9 REFUSED

IF "No", //If CELLFON2=2/

“THANK YOU VERY MUCH, BUT WE ARE ONLY INTERVIEWING CELL TELEPHONES AT THIS TIME.” assign dispo 025

//If CELLFON2=7,9//

Thank you for your time. //assign dispo 26//
//If CELLFON2=1 ask CADULT//

CADULT: Are you 18 years of age or older?

INTERVIEWER NOTE: GENDER WILL BE ASKED AGAIN IN DEMOGRAPHICS SECTION.

1 Yes, respondent is male [GO TO PRIVATE RESIDENCE]
2 Yes, respondent is female [GO TO PRIVATE RESIDENCE]
3 NO [GO TO CADULT2]
4 NOT A SAFE TIME/DRIVING [dispo 171 go to CB]
7 DON'T KNOW / NOT SURE
9 REFUSED

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

IF “No”, //If CADULT=3//

CADULT2: Is there an adult that also uses this cell phone?
1 YES [GO TO CADULT3]
2 NO

//if CADULT2=2// (no adult uses cell phone)

THANK YOU VERY MUCH, BUT WE ARE ONLY INTERVIEWING PERSONS AGED 18 OR OLDER AT THIS TIME.] TERMINATE, assign dispo 027

//if CADULT2=1//

CADULT3: May I speak with him or her?
1 SWITCHING TO RESPONDENT
2 RESPONDENT NOT AVAILABLE/CALLBACK

//if CADULT3=1 go to INTRO1/

//if CADULT3=2 autocode 105, callback/
//IF CADULT=1,2 ask PVTRESD2//

PVTRESD2: Do you live in a private residence?

Read only if necessary: “By private residence, we mean someplace like a house or apartment.”

INTERVIEWER NOTE: Private residence includes any home where the respondent spends at least 30 consecutive days concurrent with the interview, including vacation homes, RVs or other locations in which the respondent lives for portions of the year.

1 YES [Go to CSTATE]
2 NO
3 NOT A SAFE TIME/DRIVING [dispo 171 go to CB]
7 DON’T KNOW / NOT SURE
9 REFUSED

//if pvtresd2=2//

COLLEGE: Do you live in college housing?

Read only if necessary: “By college housing we mean dormitory, graduate student or visiting faculty housing, or other housing arrangement provided by a college or university.”

INTERVIEWER NOTE: IF NO, PROBE TO FIND OUT IF BUSINESS OR GROUP HOME

1 YES [Go to CSTATE]
2 NO – business
3 NO – group home
4 NOT A SAFE TIME/DRIVING [dispo 171 go to CB]
7 DON’T KNOW / NOT SURE
9 REFUSED

//if college = 2,3 //
“THANK YOU VERY MUCH, BUT WE ARE ONLY INTERVIEWING PERSONS WHO LIVE IN A PRIVATE RESIDENCE OR COLLEGE HOUSING AT THIS TIME.” TERMINATE]

IF “Don’t Know”, “Refused”, //If PVTRESD2=7, 9 or college = 7, 9//

Thank you very much for your time. STOP TERM DISP = 29

//If PVTRESD2=1 or college = 1 ask CSTATE//

CSTATE: Do you currently live in ______Maryland____?

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

1 YES [Go to LANDLINE]
2 NO [Go to STATE]
3 NOT A SAFE TIME/DRIVING [dispo 171 go to CB]
7 DON’T KNOW / NOT SURE
9 REFUSED

IF “Don’t Know”, “Refused”, //If CSTATE=7, 9//

Thank you very much for your time. STOP TERM DISP = 30

//If CSTATE=2 ask RSPSTATE//

RSPSTATE: In what state do you currently live?

________ ENTER FIPS STATE
________ ENTER STATE

AL Alabama
AK Alaska
AZ Arizona
<table>
<thead>
<tr>
<th>State</th>
<th>State</th>
<th>State</th>
<th>State</th>
<th>State</th>
</tr>
</thead>
<tbody>
<tr>
<td>AR Arkansas</td>
<td>CA California</td>
<td>CO Colorado</td>
<td>DE Delaware</td>
<td>DC District of Columbia</td>
</tr>
<tr>
<td>FL Florida</td>
<td>GA Georgia</td>
<td>HI Hawaii</td>
<td>ID Idaho</td>
<td>IL Illinois</td>
</tr>
<tr>
<td>IN Indiana</td>
<td>IO Iowa</td>
<td>KS Kansas</td>
<td>KY Kentucky</td>
<td>LA Louisiana</td>
</tr>
<tr>
<td>ME Maine</td>
<td>MD Maryland</td>
<td>MA Massachusetts</td>
<td>MI Michigan</td>
<td></td>
</tr>
<tr>
<td>MN Minnesota</td>
<td>MS Mississippi</td>
<td>MO Missouri</td>
<td>MT Montana</td>
<td>NE Nebraska</td>
</tr>
<tr>
<td>NV Nevada</td>
<td>NH New Hampshire</td>
<td>NJ New Jersey</td>
<td>NM New Mexico</td>
<td></td>
</tr>
</tbody>
</table>

2017 BRFSS Questionnaire
NY New York
NC North Carolina
ND North Dakota
OH Ohio
OK Oklahoma
OR Oregon
PA Pennsylvania
RI Rhode Island
SC South Carolina
SD South Dakota
TN Tennessee
TX Texas
UT Utah
VT Vermont
VA Virginia
WA Washington
WV West Virginia
WI Wisconsin
WY Wyoming

99 REFUSED

If Refused:
I’m sorry, but our data is compiled by state. In order to qualify for the interview we need to know which state you live in. Thank you for your time. STOP TERM DISP = 42

//ask if samptype=2//

LANDLINE: Do you also have a landline telephone in your home that is used to make and receive calls?
Read only if necessary: “By landline telephone, we mean a “regular” telephone in your home that is used for making or receiving calls.” Please include landline phones used for both business and personal use.”

**INTERVIEWER NOTE:** Telephone service over the internet counts as landline service (includes vonage, magic jack and other home-based phone services.).

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

[CATI NOTE: IF COLLEGE HOUSING = “YES”, DO NOT ASK NUMBER OF ADULTS QUESTIONS, GO TO svintr2.]

//ask if pvtresd2 = 1//

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

__ Number of adults

[CATI NOTE: IF COLLEGE HOUSING = “YES” THEN NUMBER OF ADULTS IS SET TO 1.]

//ask if samptype=2//

svintro2: 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 1-844-403-3933. If you have any questions regarding your rights as a participant, please call Ms. Gay Hutchen, IRB Administrator, at 410-767-8448.

[INTERVIEWER: IF NEEDED: The interview takes on average 24 minutes depending on your answers.]

1. Continue
2. Driving / Not a Safe Time [dispo 171 go to CB]
3. Refused
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?

<table>
<thead>
<tr>
<th></th>
<th>Number of days</th>
</tr>
</thead>
<tbody>
<tr>
<td>88</td>
<td>None</td>
</tr>
<tr>
<td>77</td>
<td>Don’t know / Not sure</td>
</tr>
<tr>
<td>99</td>
<td>Refused</td>
</tr>
</tbody>
</table>
//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?  

<table>
<thead>
<tr>
<th>Number of days</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>88</td>
<td>None</td>
</tr>
<tr>
<td>77</td>
<td>Don’t know / Not sure</td>
</tr>
<tr>
<td>99</td>
<td>Refused</td>
</tr>
</tbody>
</table>

[If s2q1 and s2q2 = 88 (None), go to next section]

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

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

<table>
<thead>
<tr>
<th>Number of days</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>88</td>
<td>None</td>
</tr>
<tr>
<td>77</td>
<td>Don’t know / Not sure</td>
</tr>
<tr>
<td>99</td>
<td>Refused</td>
</tr>
</tbody>
</table>

Section 3: Health Care Access

//ask of all//

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

<table>
<thead>
<tr>
<th>Number</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes [CATI NOTE: IF USING HEALTH CARE ACCESS MODULE GO TO MOD10_1, ELSE CONTINUE]</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 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?”
s3q3: Was there a time in the past 12 months when you needed to see a doctor but could not because of cost? (99)

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

CATI NOTE: IF S3Q1=1 AND USING HEALTH CARE ACCESS MODULE GO TO MOD10_3

s3q4: 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? (100)

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

IF S3Q1=1 AND USING HEALTH CARE ACCESS MODULE GO TO MOD10_4a; IF S3Q1=2,7,9 AND USING HEALTH CARE ACCESS MODULE GO TO MOD10_4a

Section 4: Hypertension Awareness
s4q1: Have you EVER been told by a doctor, nurse, or other health professional that you have high blood pressure?

(101)

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 [GO TO NEXT SECTION]
3 No [GO TO NEXT SECTION]
4 Told borderline high or pre-hypertensive [GO TO NEXT SECTION]
7 Don’t know / Not sure [GO TO NEXT SECTION]
9 Refused [GO TO NEXT SECTION]

//if selected = male and s4q1 = 2//

S4q1a: 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 male.

You have to go back and correct this INCONSISTENCY ERROR

//ask if s4q1=1//

s4q2: Are you currently taking medicine for your high blood pressure?

(102)

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

Section 5: Cholesterol Awareness

//ask of all//

s5q1: Blood cholesterol is a fatty substance found in the blood. About how long has it been since you last had your blood cholesterol checked?

(103)
Read only if necessary:

1. Never [GO TO NEXT SECTION]
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

Do not read:

7. Don’t know / Not sure
9. Refused [GO TO NEXT SECTION]

//ask if s5q1 ne 1 OR 9//

s5q2: Have you EVER been told by a doctor, nurse or other health professional that your blood cholesterol is high?

1. Yes
2. No [GO TO NEXT SECTION]
7. Don’t know / Not sure [GO TO NEXT SECTION]
9. Refused [GO TO NEXT SECTION]

//ask if s5q2=1//

s5q3: 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

Section 6: Chronic Health Conditions
//ask of all//

S6q1: 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.”

[CLICK NEXT TO CONTINUE]

//ask of all//

s6q1: (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

(106)

//ask of all//

s6q2: (Ever told) you had angina or coronary heart disease?

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

(107)

//ask of all//

s6q3: (Ever told) you had a stroke?

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

(108)

//ask of all//

s6q4: (Ever told) you had asthma?

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

(109)

//ask if s6q4=1//
s6q5: Do you still have asthma? (110)

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

//ask of all//

s6q6: (Ever told) you had skin cancer? (111)

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

//ask of all//

s6q7: (Ever told) you had any other types of cancer? (112)

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

//ask of all//

s6q8: (Ever told) you have Chronic Obstructive Pulmonary Disease or COPD, emphysema or chronic bronchitis? (113)

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

//ask of all//

s6q9: (Ever told) you have some form of arthritis, rheumatoid arthritis, gout, lupus, or fibromyalgia? (114)

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

//ask of all//

s6q10: (Ever told) you have a depressive disorder, (including depression, major depression, dysthymia), or minor depression?

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

//ask of all//

s6q11: (Ever told) you have kidney disease? Do NOT include kidney stones, bladder infection or incontinence.

INTERVIEWER NOTE: Incontinence is not being able to control urine flow.
1. Yes
2. No
7. Don’t know / Not sure
9. Refused

//ask of all//

s6q12: (Ever told) you have diabetes?

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

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

//if selected = male and s6q12 = 2//

S6q12a: INTERVIEWER: You recorded that the respondent was told by a doctor
during pregnancy that she had diabetes. Are you sure?
The respondent selected was male.

You have to go back and correct this INCONSISTENCY ERROR

[CATI NOTE: IF S6Q12 = 1 (YES), GO TO NEXT QUESTION. IF ANY OTHER RESPONSE TO S6Q12, GO TO PRE-DIABETES OPTIONAL MODULE (IF USED). OTHERWISE, GO TO NEXT SECTION.]

Module 1: Pre-Diabetes (Split 1, 2 and 3)

[CATI NOTE: ONLY ASKED OF THOSE NOT RESPONDING “YES” (CODE = 1) TO CORE S6Q12 (DIABETES AWARENESS QUESTION).]

//ask if s6q12 ne 1 and cstate ne 2//

Mod1_1: Have you had a test for high blood sugar or diabetes within the past three years?
(290)

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

[CATI NOTE: IF CORE S6Q12 = 4 (NO, PRE-DIABETES OR BORDERLINE DIABETES); ANSWER Q2 “YES” (CODE = 1).]

//ask if s6q12 ne 1, 4 and cstate ne 2//
**Mod1_2:** 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

//if selected = male and mod1_2 = 2//

**Mod1_2a:** 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 male.

You have to go back and correct this INCONSISTENCY ERROR.

//ask if s6q12=1//

**s6q13:** How old were you when you were told you have diabetes?

(118-119)

___ Code age in years [97 = 97 and older]
98 Don’t know / Not sure
99 Refused

[CATI NOTE: GO TO DIABETES OPTIONAL MODULE (IF USED). OTHERWISE, GO TO NEXT SECTION. ]

**Module 2: Diabetes (Split 1, 2 and 3)**

[CATI NOTE: TO BE ASKED FOLLOWING CORE S6Q13; IF RESPONSE TO S6Q12 IS "YES" (CODE = 1).]

//ask if s6q12=1 and cstate ne 2//

**Mod2_1:** Are you now taking insulin?

(292)

2017 BRFSS Questionnaire
1 Yes
2 No
9 Refused

//ask if s6q12=1 and cstate ne 2//

Mod2_2: 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. (293-295)

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.’

INTERVIEWER NOTE: Enter quantity per day, week, or month

1 ___ Times per day
2 ___ Times per week
3 ___ Times per month
4 ___ Times per year
888 Never
777 Don’t know / Not sure
999 Refused

// if mod2_2 is more than 5 times per day/per week/or per month//

MOD2_2A: I am sorry, but you said that you check your blood \:tm7: times per \:dwshow7:.

Is this information correct?

Perdoneme, pero usted dijo que chequea su sangre \:tm7: veces por \:dwshow7:.

Es esto correcto?

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

// ask if s6q12=1 and cstate ne 2//
Mod2_3: 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.

INTERVIEWER NOTE: Enter quantity per day, week, or month

1   _______ Times per day
2   _______ Times per week
3   _______ Times per month
4   _______ Times per year
555  No feet
888   Never
777   Don’t know / Not sure
999   Refused

//if mod2_3 is more than 5 times per day/per week/or per month//

MOD2_3A: I am sorry, but you said that you check your feet for sores or irritations _______ times per _______. Is this information correct?

Perdoneme, pero usted dijo que chequea sus pies por heridas o irritaciones _______ veces por _______. Es esto correcto?

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

//ask if s6q12=1 and cstate ne 2//

Mod2_4: 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

//if mod2_4 >52//
MOD2_4A: I am sorry, but you said that you have seen a health professional
\:mod2_4: times in the past 12 months. Is this correct?

Perdoneme, pero usted dijo que ha visto a un profesional de la salud \:mod2_4: veces
en los ultimos 12 meses. Es esto correcto?

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

//ask if s6q12=1 and cstate ne 2//

Mod2_5: 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"?

INTERVIEWER NOTE: Code 98 if the respondent indicates “Never heard of “A one C” test.

(301-302)

_ _  Number of times [76 = 76 or more]
88   None
77   Don’t know / Not sure
99   Refused

[CATI NOTE: IF MOD2_3 = 555 (NO FEET), GO TO MOD2_7.]

//ask if mod2_3 ne 555//

Mod2_6: About how many times in the past 12 months has a health professional checked
your feet for any sores or irritations?

(303-304)

_ _  Number of times [76 = 76 or more]
88   None
77   Don’t know / Not sure
99   Refused

//ask if s6q12=1 and cstate ne 2//

Mod2_7: 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.

(305)
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 s6q12=1 and cstate ne 2//

Mod2_8: Has a doctor ever told you that diabetes has affected your eyes or that you had retinopathy?  (306)

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

//ask if s6q12=1 and cstate ne 2//

Mod2_9: Have you ever taken a course or class in how to manage your diabetes yourself?  (307)

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

Section 7: Arthritis Burden

[CATI NOTE: IF Q6.9 = 1 (YES) THEN CONTINUE, ELSE GO TO NEXT SECTION.]

//ask if s6q9=1//

s7q1: 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 NOTE: 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

INTERVIEWER NOTE: S7q2 SHOULD BE ASKED OF ALL RESPONDENTS REGARDLESS OF EMPLOYMENT STATUS.

//ask if s6q9=1//

S7q2: 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 NOTE: 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

//ask if s6q9=1//

S7q3: 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 NOTE: 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

Do not read:

7 Don’t know / Not sure
9 Refused

//ask if s6q9=1//

S7q4: 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 [00-10] (123-124)
77 Don’t know / Not sure
99 Refused

Section 8: Demographics

S8q1: Are you …

1 Male
2 Female
9 Refused

INTERVIEWER NOTE: THIS QUESTION MUST BE ASKED EVEN IF INTERVIEWER HAD PREVIOUSLY ENTERED SEX IN THE SCREENING QUESTIONS. IT WILL NOT BE ASKED OF PERSONS WHO HAVE SELF-IDENTIFIED SEX IN LL HOUSEHOLD ENUMERATION.

[CATI NOTE: THIS QUESTION MAY BE POPULATED BY LANDLINE HOUSEHOLD ENUMERATION ONLY. IT MAY NOT BE POPULATED BY INTERVIEWER ASSIGNMENT]
OF SEX DURING THE SCREENING FOR CELL PHONE OR PERSONS LIVING IN COLLEGE HOUSING]

//if selected gender ne s8q1//

S8q1A-D: INTERVIEWER: Are you sure the respondent is FEMALE/MALE?

The respondent selected was the \:list:

You need to go back and correct the mistake.

PRESS NEXT TO CONTINUE]

Language Indicator (land and cell)

//ask of all//

Lang1: INTERVIEWER: DO NOT ASK QUESTION:

IN WHAT LANGUAGE WAS THIS INTERVIEW COMPLETED?

01 ENGLISH
02 SPANISH

//ask of all//

S8q2: What is your age? (126-127)

Code age in years
07 Don’t know / Not sure
09 Refused

//ask if s6q13 > s8q2//

S8q2chk: You said you were [insert s8q2] years of age and told you have diabetes
at age [insert s6q13]. I must correct this inconsistency.

Usted dijo que tenia \:s8q2: anos de edad y que le dijeron que

tenia diabetes a la edad de \:s6q13:. 

Debo corregir este error.

2017 BRFSS Questionnaire
S8q3: Are you Hispanic, Latino/a, or Spanish origin?

  1. No, not of Hispanic, Latino/a, or Spanish origin
  2. Yes
  7. Don't Know
  9. Refused

//if s8q3=2//

S8q3b: Are you…

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

Do not read:

  5. No
  7. Don't know / Not sure
  9. Refused

[DP note: CDC lists this as one question, s8q3 response 5= not Hispanic, 1-4 hispanic options. Deliver based on cdc layout]

//ask of all//

S8q4: Which one or more of the following would you say is your race?

INTERVIEWER NOTE: SELECT ALL THAT APPLY.
INTERVIEWER NOTE: Enter Caucasian response as 10-White. Enter
Native American Response as 30 - American Indian or Alaska Native.

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

Please read:  [MUL = 6]

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td>10</td>
<td>White</td>
</tr>
<tr>
<td>20</td>
<td>Black or African American</td>
</tr>
<tr>
<td>30</td>
<td>American Indian or Alaska Native</td>
</tr>
<tr>
<td>40</td>
<td>Asian</td>
</tr>
<tr>
<td>50</td>
<td>Pacific Islander</td>
</tr>
</tbody>
</table>

Do not read:

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<th></th>
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</thead>
<tbody>
<tr>
<td>60</td>
<td>Other</td>
</tr>
<tr>
<td>77</td>
<td>Don’t know / Not sure</td>
</tr>
<tr>
<td>99</td>
<td>Refused</td>
</tr>
</tbody>
</table>

//ask if s8q4=40//

S8q4a: Is that…

Interviewer Note: Select all that apply. [mul=7]

<p>| | |</p>
<table>
<thead>
<tr>
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<tbody>
<tr>
<td>41</td>
<td>Asian Indian</td>
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<tr>
<td>42</td>
<td>Chinese</td>
</tr>
<tr>
<td>43</td>
<td>Filipino</td>
</tr>
<tr>
<td>44</td>
<td>Japanese</td>
</tr>
<tr>
<td>45</td>
<td>Korean</td>
</tr>
<tr>
<td>46</td>
<td>Vietnamese</td>
</tr>
<tr>
<td>47</td>
<td>Other Asian</td>
</tr>
<tr>
<td>77</td>
<td>Don’t Know</td>
</tr>
<tr>
<td>99</td>
<td>Refused</td>
</tr>
</tbody>
</table>

//if s8q4 = 50

S8q4pi: Is that…

Interviewer Note: Select all that apply. [mul=4]
51 Native Hawaiian
52 Guamanian or Chamorro
53 Samoan
54 Other Pacific Islander

77 Don’t Know
99 Refused

[CATI NOTE: IF MORE THAN ONE RESPONSE TO s8q5; CONTINUE. OTHERWISE, GO TO s8q6.]

Ask if s8q4=mul. Only show responses from s8q4, plus responses 77 & 99

S8q5: Which one of these groups would you say best represents your race?

INTERVIEWER NOTE: Enter Caucasian response as 10-White. Enter Native American Response as 30 - American Indian or Alaska Native.

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

IF RESPONDENT HAS SELECTED MULTIPLE RACES IN PREVIOUS AND REFUSES TO SELECT A SINGLE RACE, CODE “REFUSED.”

(160-161)

10 White
20 Black or African American
30 American Indian or Alaska Native
40 Asian
50 Pacific Islander

Do not read:

60 Other
77 Don’t know / Not sure
99 Refused

Ask if s8q4a=mul and s8q5=40. If there is only one response to s8q4a and s8q5=40, s8q5a should be auto-punched with s8q4a response Only show responses from s8q4a, plus responses 77 & 99
S8q5a: Is that…

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<tbody>
<tr>
<td>41</td>
<td>Asian Indian</td>
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<tr>
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<td>Vietnamese</td>
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<tr>
<td>47</td>
<td>Other Asian</td>
</tr>
<tr>
<td>77</td>
<td>Don’t Know</td>
</tr>
<tr>
<td>99</td>
<td>Refused</td>
</tr>
</tbody>
</table>

Ask if s8q4pi=mul and s8q5=50. If there is only one response to s8q5pi and s8q5=50, s8q5pi should be auto-punched with s8q4pi response. Only show responses from s8q5pi, plus responses 77 & 99

S8q5pi: Is that…

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<thead>
<tr>
<th></th>
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<tbody>
<tr>
<td>51</td>
<td>Native Hawaiian</td>
</tr>
<tr>
<td>52</td>
<td>Guamanian or Chamorro</td>
</tr>
<tr>
<td>53</td>
<td>Samoan</td>
</tr>
<tr>
<td>54</td>
<td>Other Pacific Islander</td>
</tr>
<tr>
<td>77</td>
<td>Don’t Know</td>
</tr>
<tr>
<td>99</td>
<td>Refused</td>
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</tbody>
</table>

//ask of all//

S8q6: Are you…? (162)

Please read:

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
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<tbody>
<tr>
<td>1</td>
<td>Married</td>
</tr>
<tr>
<td>2</td>
<td>Divorced</td>
</tr>
<tr>
<td>3</td>
<td>Widowed</td>
</tr>
<tr>
<td>4</td>
<td>Separated</td>
</tr>
<tr>
<td>5</td>
<td>Never married, or</td>
</tr>
<tr>
<td>6</td>
<td>A member of an unmarried couple</td>
</tr>
</tbody>
</table>

Do not read:

<p>| | |</p>
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<th></th>
<th></th>
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<tbody>
<tr>
<td>9</td>
<td>Refused</td>
</tr>
</tbody>
</table>

//ask of all//
S8q7: What is the highest grade or year of school you completed? (163)

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//

S8q8: Do you own or rent your home? (164)

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

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

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

INTERVIEWER NOTE: Code a response of “rent to own” as - other arrangement

Read only if necessary:

1 Own
2 Rent
3 Other arrangement

Do not read:

7 Don’t know / Not sure
9 Refused
//ask if cstate ne 2//

**S8q9: In what county do you currently live?**

001 Allegany
003 Anne Arundel
005 Baltimore
510 Baltimore City
009 Calvert
011 Caroline
013 Carroll
015 Cecil
017 Charles
019 Dorchester
021 Frederick
023 Garrett
025 Harford
027 Howard
029 Kent
031 Montgomery
033 Prince George’s
035 Queen Anne’s
037 St. Mary’s
039 Somerset
041 Talbot
043 Washington
045 Wicomico
047 Worcester

_ _ _

ANSI County Code (formerly FIPS county code)
777 Don’t know / Not sure
888 Other [Specify s8q9o: __________]  
999 Refused

//ask if cstate =2//

**CNTY: In what county do you currently live?**

01 Gave Response
7 Don’t Know/ Not Sure
9 Refused
//ask if CNTY=01 and cstate =2//

CNTYo: ___________________

//ask of all//

S8q10: What is the ZIP Code where you currently live? (168-172)

_ _ _ _ _ ZIP Code [LAND RANGE = 21000-21999] [cell range = 00001-99999]

77777 Don’t know / Not sure
99999 Refused

//ask if s8q10 ne 77777, 99999//

S8q10c
I just want to confirm, you said your zip code is \s8q10:. Is that correct?

Solo para verificar, usted dijo que su código postal es \s8q10:. Es esto correcto?

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

[CATI NOTE: IF CELL TELEPHONE INTERVIEW SKIP TO 8.14 (QSTVER GE 20)]

//ask if samptype=1//

S8q11: 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. (173)

1 Yes
2 No [GO TO s8q13]
7 Don’t know / Not sure [GO TO s8q13]
9 Refused [GO TO s8q13]

//ask if s8q11=1//

S8q12: How many of these telephone numbers are residential numbers? (174)

2017 BRFSS Questionnaire
Residential telephone numbers [6 = 6 or more]

7  Don’t know / Not sure
9  Refused

IF [s8q12] > 3 and [s8q12 < 7) OR ([s8q12] > [ADULTS])

S8q12A: I am sorry, just to double check, you indicated you have \:s8q12: residential phones in your household.

Is this correct?

Perdoneme pero usted indica que tiene \:s8q12: telefonos residenciales en su hogar. Es esto correcto?

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

//ask if samptype=1//

S8q13: Including phones for business and personal use, do you have a cell phone for personal use?

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

//ask of all//

S8q14: 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: Active duty does not include training for the Reserves or National Guard, but DOES include activation, for example, for the Persian Gulf War.

1  Yes
2  No

Do not read:

7  Don’t know / Not sure
9  Refused

//ask of all//

S8q15: Are you currently…?
INTERVIEWER NOTE: IF MORE THAN ONE: SAY “SELECT THE CATEGORY WHICH BEST DESCRIBES YOU”.

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

Do not read:
9 Refused

//ask of all//

S8q16: How many children less than 18 years of age live in your household? (178-179)

_ _ Number of children [Range = 1-15]
88 None
99 Refused

IF: ***([S8q16#1-15])***

S8Q16CHK: Just to be sure - you have \:s8q16: menores de 18 anos viviendo en su hogar.

1 YES
2 NO [go back to s8q16]
9 REFUSED

//ask of all//

S8q17: Is your annual household income from all sources—

INTERVIEWER NOTE: If respondent refuses at any income level, code ‘99’ (refused) (180-181)
Read only if necessary:

S8q17A [04]: Less than $25,000 ($20,000 to less than $25,000)
   1   Yes
   2   No
   7   Don’t Know
   9   Refused

[If “no,” ask 05; if “yes,” ask 03]
//ask if s8q17A = 1//

S8q17B [03]: Less than $20,000 ($15,000 to less than $20,000)
   1   Yes
   2   No
   7   Don’t Know
   9   Refused

[If “no,” code 04; if “yes,” ask 02]
//ask if s8q17B = 1//

S8q17C [02]: Less than $15,000 ($10,000 to less than $15,000)
   1   Yes
   2   No
   7   Don’t Know
   9   Refused

[If “no,” code 03; if “yes,” ask 01]
//ask if s8q17C=1//

S8q17D [01]: Less than $10,000
   1   Yes
   2   No
   7   Don’t Know
9 Refused

[If “no,” code 02]

//ask if s8q17A = 2//

S8q17E [05]: Less than $35,000 ($25,000 to less than $35,000)
   1 Yes
   2 No
   7 Don’t Know
   9 Refused

[If “no,” ask 06]

//ask if s8q17E = 2//

S8q17F [06]: Less than $50,000 ($35,000 to less than $50,000)
   1 Yes
   2 No
   7 Don’t Know
   9 Refused

[If “no,” ask 07]

//ask if s8q17F = 2//

S8q17G [07]: Less than $75,000 ($50,000 to less than $75,000)
   1 Yes
   2 No
   7 Don’t know
   9 Refused

[If “no,” code 08]

[08] $75,000 or more

//ask if s8q17A-s8q17G ne 7,9//

S8q17AA: Your Annual Household Income is [enter range from code in s8q17A-G]

Is This Correct?
   1 No, re-ask question [GO TO S8Q17A]
2 Yes, correct as is. [CONTINUE]

//ask of all//

S8q18: Have you used the internet in the past 30 days? (182)

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

//ask of all//

Ps8q19: 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 ps8q19 = P//

S8q19: About how much do you weigh without shoes?

DP NOTE: If respondent answers in metrics, put “9” in column 161.

Round fractions up

_ _ _ _ Weight (pounds) [Range 50-776]
7 7 7 7 Don’t know / Not sure
9 9 9 9 Refused
INTERVIEWER NOTE: IF RESPONDENT ANSWERS IN METRICS, PUT “9” IN COLUMN 183. ROUND FRACTIONS UP

//ask if s8q19 =50-79 OR 351-776//

S8q19_A: Just to double-check, you indicated \s8q19: pounds as your weight.

   IS THIS CORRECT?
   1. Yes
   2. No [go back to s8q19]

//ask if ps8q19 = K//

S8q19M: About how much do you weigh without shoes?

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

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

//ask if s8q19m = 23-352 and ps8q19 = “k”

S8q19am: Just to double-check, you indicated \s8q19m: kilograms as your weight.

   IS THIS CORRECT?
   1. Yes
   2. No, [go back to s8q19m]

//ask of all//

Ps8q20: 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 ps8q20=f//

S8q20: About how tall are you without shoes?

(182-185)

NOTE: If respondent answers in metrics, put “9” in column 165.

Round fractions down

[Enter height in Feet and Inches]

[Ex: 5 feet 9 inches would be entered as 509]

_ _ / _ _ Height

(ft / inches) [Range 300-311, 400-411, 500-511, 600-611, 700-711]

7 7 Don’t know / Not sure

9 9 Refused

//ask if s8q20= 300-407, 609-711]

S8q20a: Just to double check, you indicated you are //enter feet from s8q20// FEET //enter inches from s8q20// INCHES TALL.

IS THIS CORRECT?

1. Yes

2. No, go back to s8q20

//ask if ps8q20 = M//

S8q20M: About how tall are you without shoes?

NOTE: If respondent answers in metrics, put “9” in column 158.

Round fractions down
[Enter height in centimeters]

[Ex: 2 meters 5 centimeters would be entered as 205]

---

Height[Range 90-254]

//ask if s8q20m = 90-254 and ps8q20=M//

S8q20am: Just to double check, you indicated you are //s8q20m// centimeters tall.

IS THIS CORRECT?
1. Yes
2. No [go back to s8q20m]

//CATI NOTE: IF MALE, GO TO s8q22, IF FEMALE RESPONDENT IS 50 YEARS OLD OR OLDER, GO TO s8q22//

// Ask if s8q21=2 and s8q2=18-49//

S8q21: To your knowledge, are you now pregnant? (191)

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

//ask of all//

S8q22: 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? (192)

1. Yes
2. No
7. Don’t know / Not Sure
S8q23: 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

S8q24: 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

S8q25: Do you have serious difficulty walking or climbing stairs?

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

S8q26: Do you have difficulty dressing or bathing?

1. Yes
2. No
7. Don’t know / Not sure
9. Refused
S8q27: 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

Section 9: Tobacco Use

//ask of all//

S9q1: Have you smoked at least 100 cigarettes in your entire life?  

(198)  
INTERVIEWER NOTE: “For cigarettes, do not include: electronic cigarettes (e-cigarettes, NJOY,Bluetsip), herbal cigarettes, cigars, cigarillos, little cigars, pipes, bidis, kreteks, water pipes (hookahs), or marijuana.”

INTERVIEWER NOTE: 5 PACKS = 100 CIGARETTES

1. Yes  
2. No [GO TO s9q5]  
7. Don’t know / Not sure [GO TO s9q5]  
9. Refused [GO TO s9q5]

//ask if s9q1=1//

S9q2: Do you now smoke cigarettes every day, some days, or not at all?  

(199)  
Do not read:

1. Every day  
2. Some days  
3. Not at all [GO TO Q9.4]  
7. Don’t know / Not sure [GO TO s9q5]  
9. Refused [GO TO s9q5]

//ask if s9q2=1,2//

S9q3: During the past 12 months, have you stopped smoking for one day or longer because you were trying to quit smoking?  

(200)
S9q4: 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

Do not read:

77 Don’t know / Not sure
99 Refused

S9q5: Do you currently use chewing tobacco, snuff, or snus every day, some days, or not at all?

NOTE: Snus (rhymes with ‘goose’)/ 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

Do not read:
State-Added Section 1: Tobacco Questions (Split 1, 2 and 3)

//start timer ett1//

//ask if cstate ne 2//

**MD1_1:** Cigar products come in a wide variety of sizes, ranging from large traditional cigars, to blunts, to cigarillos, and even smaller cigars that are about the same size and shape as cigarettes. Some common brand names include Black and Mild’s, Phillies, Swisher Sweets, and Winchester.

In the past 30 days, did you smoke any cigars?

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

**MD1_1:** Los cigarros vienen en una amplia variedad de tamaños, que van desde cigarros tradicionales grandes a cigarros de marihuana, a cigarritos e incluso cigarros más pequeños que tienen el mismo tamaño y forma que los cigarillos. Algunas marcas comunes incluyen Black and Mild, Phillies, Swisher Sweets y Winchester.

En los últimos 30 días, ¿fumó algún cigarro?

//ask if s9q2=1 or 2 or s9q4=01 and cstate ne 2//

**MD1_2:** How old were you when you smoked a whole cigarette for the first time?

_ _ Age in years [RANGE 1-130]

888 Never smoked a whole cigarette

777 Don’t Know / Not Sure

999 Refused

**MD1_2:** ¿Qué edad tenía cuando fumó un cigarrillo entero por primera vez?

//ask if s9q2=1 or 2 or s9q4=01 and cstate ne 2//
**MD1_3**: On the days that you smoke, how soon after you wake up do you usually have your first cigarette…?

1. Within 5 minutes
2. From 6 to 30 minutes
3. From more than 30 minutes to 1 hour
4. After more than 1 hour
5. Don’t Know / Not Sure
6. Refused

**MD1_3**: En los días que fuma, ¿con qué rapidez luego de despertarse fuma su primer cigarrillo?

1. Dentro de 5 minutos
2. De 6 a 30 minutos
3. De más de 30 minutos a 1 hora
4. Después de más de 1 hora
5. No sabe / No está seguro
6. Rehusó

//ask if s9q2=1, 2 or s9q4=1 and cstate ne 2//

**MD1_4**: During the past 30 days, that is, since [DATE FILL], were the cigarettes that you USUALLY smoked menthol?

1. Yes
2. No
3. Don’t Know / Not Sure
4. Refused

**MD1_4**: Durante los últimos 30 días, o sea desde [PONER LA FECHA], ¿fueron los cigarillos que usted USUALMENTE fumó de mentol?

//ask if s9q2=1 or 2 and cstate ne 2//

**MD1_5**: Are you seriously planning to quit smoking cigarettes…

1. Within the next 30 days,
2. Within the next 3 months,
3. Within the next 6 months,
4. Within the next year,
5. Within the next 5 years,
6. Sometime after 5 years, OR
7. You are not planning on quitting
MD1_5: Planea seriamente dejar de fumar cigarrillos...

1 En los próximos 30 días,
2 En los próximos 3 meses,
3 En los próximos 6 meses,
4 En el próximo año,
5 En los próximos 5 años,
6 En algún momento después de 5 años, O
8 No planea dejar de fumar
7 No sabe / No está seguro
9 Rehusó

//ask if cstate ne 2//

MD1_6: In the past 30 days, have you seen, read, or heard any ads about quitting cigarettes?

1 Yes
2 No
7 Don’t Know / Not Sure
9 Refused

MD1_6: En los últimos 30 días, ¿ha visto, leído o escuchado avisos sobre dejar de fumar cigarrillos?

//ask if cstate ne 2//

MD1_7: Not counting decks, porches, or garages, inside your home, is smoking…

Please read:
1 Always allowed
2 Allowed only at some times or in some places
3 Never allowed

Do not read:
6 Family does not have a smoking policy
7 Don’t know / Not sure
9 Refused

MD1_7: Sin contar terrazas, galerías o garajes, en el interior de su casa, fumar está...

Please read:
1 Siempre permitido
2 Permitido solamente algunas veces o en algunos lugares
3 Nunca permitido
Do not read:
6 La familia no tiene una política sobre el fumar
7 No sabe/No está seguro
9 Rehusó

Section 10: E-Cigarettes

//ask of all//

S10Q1T: 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.

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.

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.

[PRESS NEXT TO CONTINUE]

//ask of all//

S10q1: Have you ever used an e-cigarette or other electronic “vaping” product, even just one time, in your entire life? (204)

<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>
S10q2: Do you now use e-cigarettes or other electronic “vaping” products every day, some days, or not at all? (205)

1  Every day
2  Some days
3  Not at all
7  Don’t know / Not
9  Refused

State-Added Section 2: Additional E-Cigarette Question (Split 1, 2 and 3)

//start timer ett2//

//ask if s10q2=1, 2 and cstate ne 2//

MD2_1: What is the main reason you use electronic vapor products?

(DO NOT READ)

1 I am trying to quit smoking
2 I use when not allowed to smoke
3 They are safer than using tobacco
4 The novelty of using them
5 Other (please specify)
7 Don’t Know / Not Sure
9 Refused

MD2_1: ¿Cuál es la razón principal por la que usa productos electrónicos de vapor?

1 Estoy tratando de dejar de fumar
2 Uso cuando no está permitido fumar
3 Son más seguros que usar tabaco
4 La novedad de usarlos
5 Otro (por favor, especificar)
7 No sabe / No está seguro
9 Rehusó

//ask if MD2_1=5//
Section 11: Alcohol Consumption

//ask of all//

S11q1: 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?  

(206-208)

1 __ Days per week
2 __ Days in past 30 days
888 No drinks in past 30 days [GO TO NEXT SECTION]
777 Don’t know / Not sure [GO TO NEXT SECTION]
999 Refused [GO TO NEXT SECTION]

//ask if s11q1 ne 888,777,999//

S11q2: 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.  

(209-210)

_ _ Number of drinks
77 Don’t know / Not sure
99 Refused

IF: ***(S11Q2#12-76))***

S11Q2A: I am sorry, you just said that you consume \:s11q2: drinks per day. Is that correct?  

Perdoneme pero usted dijo que consume \:s11q2: tragos por dia.  

Es esto correcto?  

1 Correct as is
2 No, Re-ask question

//ask if s11q1 ne 888,777,999//

S11q3: Considering all types of alcoholic beverages, how many times during the past 30 days did you have X [CATI NOTE: X = 5 FOR MEN, X = 4 FOR WOMEN] or more drinks on an occasion?
(211-212)

<table>
<thead>
<tr>
<th>Number of times</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>88</td>
<td>None</td>
</tr>
<tr>
<td>77</td>
<td>Don’t know / Not sure</td>
</tr>
<tr>
<td>99</td>
<td>Refused</td>
</tr>
</tbody>
</table>

IF: ***(S11Q3#16-76)***

S11Q3A: I am sorry, you said that in the past month there were 
\ s11q3: occasions when you had X [CATI NOTE: X = 5 FOR MEN, X = 4 FOR WOMEN] or more drinks.

Is this correct?
Perdoneme pero usted dijo que en el pasado mes hubo \ s11q3: occasions en las que usted bebio \ s11q3: o mas tragos.

Es esto correcto?
1 Correct as is
2 No, Re-ask question

//ask if s11q1 ne 888,777,999//

S11q4: During the past 30 days, what is the largest number of drinks you had on any occasion?
(213-214)

<table>
<thead>
<tr>
<th>Number of drinks</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>77</td>
<td>Don’t know / Not sure</td>
</tr>
<tr>
<td>99</td>
<td>Refused</td>
</tr>
</tbody>
</table>

IF: ***(S11Q4 #16-76)***
S11Q4A: I am sorry, you said that in the past 30 days you had \:s11q4: drinks on one occasion. Is this correct?

Perdóname pero usted dijo que en los pasados 30 días bebió \:s11q4: tragos en una misma ocasión. Es esto correcto?

1   Correct as is
2   No, Re-ask question [go back to s11q4]

IF: ([S11Q3#88] AND S8Q1 is Female AND [S11Q4#4-76]) OR ([S11Q3#88] AND S8Q1 is Male AND [S11Q4#5-76])

S11Q4B: I'm sorry, but previously you said that you did not have X [CATI NOTE: X = 5 FOR MEN, X = 4 FOR WOMEN]: or

more drinks on an occasion. Is this correct?

Perdóname pero usted anteriormente dijo que no bebió \:s11q3: o más tragos en una misma ocasión. Es esto correcto?

1   Correct as is
2   No, Re-ask question

IF: ([S11Q3#1-76] AND S8q2 is Female AND [S11Q4#1-3]) OR ([S11Q3#1-76] AND S8q2 is Male AND [S11Q4#1-4])

S11Q4C: I'm sorry, but previously you said that you had \:s11q3: or

more drinks on an occasion. And you've said that in the past 30 days you had a maximum of \:s11q4: drinks on one occasion.

Is this correct?

Perdóname pero usted dijo que bebió X [CATI NOTE: X = 5 FOR MEN, X = 4 FOR WOMEN]: o más tragos en

una misma ocasión. E indicó que en los pasados 30 días había bebido una
maxima cantidad de tragos de \:s11q4:.
Es esto correcto?

1  Correct as is
2  No, Re-ask question

Section 12: Fruits and Vegetables

//ask of all//

S12q1: 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.

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.

READ IF RESPONDENT ASKS WHAT TO INCLUDE OR SAYS ‘I DON’T KNOW’: “INCLUDE FRESH, FROZEN OR CANNED FRUIT. DO NOT INCLUDE DRIED FRUITS.” (215-217)

INTERVIEWER NOTE: ENTER QUANTITY IN TIMES PER DAY, WEEK, OR MONTH. IF RESPONDENT GIVES A NUMBER WITHOUT A TIME FRAME, ASK “WAS THAT PER DAY, WEEK, OR MONTH?”

1_ _  Days
2_ _  Weeks
3_ _  Months
300 = Less than once a month
555  Never
777  Don’t Know
999  Refused
S12q2: 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?

(218-220)

IF RESPONDENT GIVES A NUMBER WITHOUT A TIME FRAME, ASK “WAS THAT PER DAY, WEEK, OR MONTH?”

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, KOO-L-AID, GATORADE, TAMPICO, AND SUNNY DELIGHT. INCLUDE ONLY 100% PURE JUICES OR 100% JUICE BLENDS.”

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

1__ Days
2__ Weeks
3__ Months
300 = Less than once a month
555 Never
777 Don’t Know
999 Refused

S12q3: How often did you eat a green leafy or lettuce salad, with or without other vegetables?

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

IF RESPONDENT GIVES A NUMBER WITHOUT A TIME FRAME, ASK ”WAS THAT PER DAY, WEEK, OR MONTH?”

READ IF RESPONDENT ASKS ABOUT SPINACH: “INCLUDE SPINACH SALADS.”

(221-223)
S12q4: How often did you eat any kind of fried potatoes, including french fries, home fries, or hash browns?

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

IF RESPONDENT GIVES A NUMBER WITHOUT A TIME FRAME, ASK “WAS THAT PER DAY, WEEK, OR MONTH?”

READ IF RESPONDENT ASKS ABOUT POTATO CHIPS: “DO NOT INCLUDE POTATO CHIPS.”

S12q5: How often did you eat any other kind of potatoes, or sweet potatoes, such as baked, boiled, mashed potatoes, or potato salad?

INTERVIEWER NOTE: ENTER QUANTITY IN TIMES PER DAY, WEEK, OR MONTH.
IF RESPONDENT GIVES A NUMBER WITHOUT A TIME FRAME, ASK “WAS THAT PER DAY, WEEK, OR MONTH?”

READ IF RESPONDENT ASKS ABOUT WHAT TYPES OF POTATOES TO INCLUDE: “INCLUDE ALL TYPES OF POTATOES EXCEPT FRIED. INCLUDE POTATOES AU GRATIN, SCALLOPED POTATOES.”

1__ Days
2__ Weeks
3__ Months
300 = Less than once a month
555 Never
777 Don’t Know
999 Refused

//ask of all//

S12q6: Not including lettuce salads and potatoes, how often did you eat other vegetables?

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

IF RESPONDENT GIVES A NUMBER WITHOUT A TIME FRAME, ASK “WAS THAT PER DAY, WEEK, OR MONTH?”

1__ Days
2__ Weeks
3__ Months
300 = Less than once a month
555 Never
777 Don’t Know
999 Refused

Section 13: Exercise (Physical Activity)

//ask of all//
S13q1: The next few questions are about exercise, recreation, or physical activities other than your regular job duties.

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?

INTERVIEWER INSTRUCTION: If respondent does not have a “regular job duty” or is retired, they may count the physical activity or exercise they spend the most time doing in a regular month.

1 Yes
2 No [GO TO s13q8]
7 Don’t know / Not sure [GO TO s13q8]
9 Refused [GO TO s13q8]

//ask if s13q1=1//

S13q2: 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”.

INTERVIEWER: Probe responses of “Go to the gym” – Ask “What do you do while at the gym?” Code response of “Cardio” as “Aerobics”; Code “Strength Training” as Weight Lifting.

(Specify) [See Physical Activity Coding List]
77 Don’t know / Not Sure [GO TO s13q8]
99 Refused [GO TO s13q8]

01 Active Gaming Devices (Wii Fit, Dance, Dance revolution)
02 Aerobics video or class
03 Backpacking
04 Badminton
05 Basketball
06 Bicycling machine exercise
07 Bicycling
08 Boating (Canoeing, rowing, kayaking, sailing for pleasure or camping)
09 Bowling
10 Boxing
11 Calisthenics
12 Canoeing/rowing in competition
13 Carpentry
14 Dancing-ballet, ballroom, Latin, hip hop, Zumba, etc.
15 Elliptical/EFX machine exercise
16 Fishing from river bank or boat
17 Frisbee
18 Gardening (spading, weeding, digging, filling)
19 Golf (with motorized cart)
20 Golf (without motorized cart)
21 Handball
22 Hiking – cross-country
23 Hockey
24 Horseback riding
25 Hunting large game – deer, elk
26 Hunting small game – quail
27 Inline Skating
28 Jogging
29 Lacrosse
30 Mountain climbing
31 Mowing lawn
32 Paddleball
33 Painting/papering house
34 Pilates
35 Racquetball
36 Raking lawn/trimming hedges
37 Running
38 Rock climbing
39 Rope skipping
40 Rowing machine exercises
41 Rugby
42 Scuba diving
43 Skateboarding
44 Skating – ice or roller
45 Sledding, tobogganing
46 Snorkeling
47 Snow blowing
48 Snow shoveling by hand
49 Snow skiing
50 Snowshoeing
51 Soccer
52 Softball/Baseball
53 Squash
54 Stair climbing/Stair master
55 Stream fishing in waders
56 Surfing
57 Swimming
58 Swimming in laps
59 Table tennis
60 Tai Chi
61 Tennis
62 Touch football
63 Volleyball
64 Walking
66 Waterskiing
67 Weight lifting
68 Wrestling
69 Yoga
71 Childcare
72 Farm/Ranch Work (caring for livestock, stacking hay, etc.)
73 Household Activities (vacuuming, dusting, home repair, etc.)
74 Karate/Martial Arts
75 Upper Body Cycle (wheelchair sports, ergometer
76 Yard work (cutting/gathering wood, trimming, etc.)
77 Other
79 Refused

//ask if s13q2 ne 77,99//

s13q2c: INTERVIEWER DO NOT READ: YOU'VE CHOSEN ____________

IS THAT CORRECT?

1 YES

2 NO - GO BACK AND CHANGE RESPONSE

//if s13q2 = 98//

S13q2o: Enter Other Activity:___________

//ask if s13q2 ne 77,99 //

S13Q3: How many times per week or per month did you take part in this activity during the past month?

(236-238)

1- - Times per week [range 101-150]
2- - Times per month [range 201-250]
777 Don’t know / Not sure
999 Refused

//ask if s13q2 ne 77,99 //

s13q4: And when you took part in this activity, for how many minutes or hours did you usually keep at it?

(239-241)
[EXAMPLE: 30 minutes is coded as 30 ]
[ 60 minutes is coded as 100 ]
[ 1 hour is coded as 100 ]
[ 2 hours and 30 minutes is coded as 230 ]"

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

[CATI NOTE: IF S13Q4=7 AUTO CODE 777. IF S13Q4=9 AUTO CODE 999]

//ask if s13q2 ne 77,99 //

s13q5: 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”.

INTERVIEWER: Probe responses of “Go to the gym” – Ask “What do you do while at the gym?”
Code response of “Cardio” as “Aerobics”; Code “Strength Training” as Weight Lifting.

(242-243)

__   (Specify)  [See Physical Activity Coding List]

88 No other activity   [GO TO s13q8]
77 Don’t know / Not Sure   [GO TO s13q8]
99 Refused   [GO TO s13q8]

01 Active Gaming Devices (Wii Fit, Dance, Dance revolution)
02 Aerobics video or class
03 Backpacking
04 Badminton
05 Basketball
06 Bicycling machine exercise
07 Bicycling
08 Boating (Canoeing, rowing, kayaking, sailing for pleasure or camping)
09 Bowling
10 Boxing
11 Calisthenics
12 Canoeing/rowing in competition
13 Carpentry
14 Dancing-ball, ballroom, Latin, hip hop, Zumba, etc.
15 Elliptical/EFX machine exercise
16 Fishing from river bank or boat
<table>
<thead>
<tr>
<th>No.</th>
<th>Activity Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>17</td>
<td>Frisbee</td>
</tr>
<tr>
<td>18</td>
<td>Gardening (spading, weeding, digging, filling)</td>
</tr>
<tr>
<td>19</td>
<td>Golf (with motorized cart)</td>
</tr>
<tr>
<td>20</td>
<td>Golf (without motorized cart)</td>
</tr>
<tr>
<td>21</td>
<td>Handball</td>
</tr>
<tr>
<td>22</td>
<td>Hiking – cross-country</td>
</tr>
<tr>
<td>23</td>
<td>Hockey</td>
</tr>
<tr>
<td>24</td>
<td>Horseback riding</td>
</tr>
<tr>
<td>25</td>
<td>Hunting large game – deer, elk</td>
</tr>
<tr>
<td>26</td>
<td>Hunting small game – quail</td>
</tr>
<tr>
<td>27</td>
<td>Inline Skating</td>
</tr>
<tr>
<td>28</td>
<td>Jogging</td>
</tr>
<tr>
<td>29</td>
<td>Lacrosse</td>
</tr>
<tr>
<td>30</td>
<td>Mountain climbing</td>
</tr>
<tr>
<td>31</td>
<td>Mowing lawn</td>
</tr>
<tr>
<td>32</td>
<td>Paddleball</td>
</tr>
<tr>
<td>33</td>
<td>Painting/papering house</td>
</tr>
<tr>
<td>34</td>
<td>Pilates</td>
</tr>
<tr>
<td>35</td>
<td>Racquetball</td>
</tr>
<tr>
<td>36</td>
<td>Raking lawn/trimming hedges</td>
</tr>
<tr>
<td>37</td>
<td>Running</td>
</tr>
<tr>
<td>38</td>
<td>Rock climbing</td>
</tr>
<tr>
<td>39</td>
<td>Rope skipping</td>
</tr>
<tr>
<td>40</td>
<td>Rowing machine exercises</td>
</tr>
<tr>
<td>41</td>
<td>Rugby</td>
</tr>
<tr>
<td>42</td>
<td>Scuba diving</td>
</tr>
<tr>
<td>43</td>
<td>Skateboarding</td>
</tr>
<tr>
<td>44</td>
<td>Skating – ice or roller</td>
</tr>
<tr>
<td>45</td>
<td>Sledding, tobogganing</td>
</tr>
<tr>
<td>46</td>
<td>Snorkeling</td>
</tr>
<tr>
<td>47</td>
<td>Snow blowing</td>
</tr>
<tr>
<td>48</td>
<td>Snow shoveling by hand</td>
</tr>
<tr>
<td>49</td>
<td>Snow skiing</td>
</tr>
<tr>
<td>50</td>
<td>Snowshoeing</td>
</tr>
<tr>
<td>51</td>
<td>Soccer</td>
</tr>
<tr>
<td>52</td>
<td>Softball/Baseball</td>
</tr>
<tr>
<td>53</td>
<td>Squash</td>
</tr>
<tr>
<td>54</td>
<td>Stair climbing/Stair master</td>
</tr>
<tr>
<td>55</td>
<td>Stream fishing in waders</td>
</tr>
<tr>
<td>56</td>
<td>Surfing</td>
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<tr>
<td>57</td>
<td>Swimming</td>
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<tr>
<td>58</td>
<td>Swimming in laps</td>
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<tr>
<td>59</td>
<td>Table tennis</td>
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<td>60</td>
<td>Tai Chi</td>
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<tr>
<td>61</td>
<td>Tennis</td>
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<tr>
<td>62</td>
<td>Touch football</td>
</tr>
<tr>
<td>63</td>
<td>Volleyball</td>
</tr>
<tr>
<td>64</td>
<td>Walking</td>
</tr>
<tr>
<td>65</td>
<td>Waterskiing</td>
</tr>
</tbody>
</table>
67 Weight lifting
68 Wrestling
69 Yoga
71 Childcare
72 Farm/Ranch Work (caring for livestock, stacking hay, etc.)
73 Household Activities (vacuuming, dusting, home repair, etc.)
74 Karate/Martial Arts
75 Upper Body Cycle (wheelchair sports, ergometer
76 Yard work (cutting/gathering wood, trimming, etc.)
98 Other_____
99 Refused

//ask if s13q5 ne 77, 88, 98//

s13q5c: INTERVIEWER DO NOT READ: YOU’VE CHOSEN
IS THAT CORRECT?

1 YES
2 NO - GO BACK AND CHANGE RESPONSE

//if s13q5 = 98/

S13q5o: Enter Other Activity:___________

//ask if s13q5 ne 77, 88, 99 //

s13q6: How many times per week or per month did you take part in this activity during the past month? (244-246)

1__   Times per week [range 101-150]
2__   Times per month [range 201-250]
777   Don’t know / Not sure
999   Refused

//ask if s13q5 ne 77, 88,99 //

s13q7: And when you took part in this activity, for how many minutes or hours did you usually keep at it? (247-249)

[EXAMPLE: 30 minutes is coded as 30 ]
[ 60 minutes is coded as 100 ]
[ 1 hour is coded as 100 ]
[ 2 hours and 30 minutes is coded as 230 ]"
S13Q8: 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.

(250-252)

1_ _ Times per week [range 101-199]
2_ _ Times per month [range 201-299]
888 Never
777 Don’t know / Not sure
999 Refused

Section 14: Seatbelt Use

//ASK OF ALL//

S14Q1: How often do you use seat belts when you drive or ride in a car? Would you say — (253)

Please read:

1 Always
2 Nearly always
3 Sometimes
4 Seldom
5 Never

Do not read:
7 Don’t know / Not sure
Section 15: Immunization

//ASK OF ALL//

S15Q1: 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? (254)

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 [GO TO s15q3]
7 Don’t know / Not sure [GO TO s15q3]
9 Refused [GO TO s15q3]

//ask if s15q1=1//

s15q2m: 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? (255-260)

INTERVIEWER: ENTER MONTH

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

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

//ask if s15q1=1//

s15q2: During what month and year did you receive your most recent flu shot injected into your arm or flu vaccine that was sprayed in your nose?

INTERVIEWER: ENTER YEAR

_ _ _ _ Year [RANGE 2016-2017]
7 7 7 7 Don't know / Not sure
9 9 9 9 Refused

IF: ***(TSTPYR) < [PASTYR]***

S15q2chk: I'm sorry, but you said you had a flu vaccination within the past 12 months, but you have just given me a date for your most recent vaccination that is more than 12 months ago. Have you had a flu vaccination within the past 12 months?

Lo siento: dijo que se vacuno contra la gripe en los ultimos 12 meses, pero la fecha que me acaba de dar de su vacuna mas reciente es anterior a 12 meses. Se ha vacunado contra la gripe en los ultimos 12 meses?

1     Yes
2     No

//ask of all//

s15q3: 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?

(261)

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

[CATI NOTE: IF RESPONDENT IS Less than 50 YEARS OF AGE, GO TO NEXT SECTION.]

//ask if s8q2 = 50-99//

S15q4: Have you ever had the shingles or zoster vaccine?

(262)
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

Section 16: HIV/AIDS

//ask of all

S16q1t: 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.

[CLICK NEXT TO CONTINUE]

//ASK OF ALL

S16Q1: Have you ever been tested for HIV? Do not count tests you may have had as part of a blood donation. Include testing fluid from your mouth.

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

//ask if s16q1=1

s16q2m: 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.
INTERVIEWER: ENTER MONTH

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

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

//ask if s16q1=1//

s16q2y: 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 “don’t know” and the last four digits for the year.

INTERVIEWER: ENTER YEAR

_ _ Code month [RANGE 1985-2017]
777 7 Don’t know / Not sure
999 9 Refused / Not sure

//ASK OF ALL//

S16Q3: 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

Closing Statement

INTERVIEWER NOTE: IF THERE ARE NO MODULES/STATE ADDED QUESTIONS OR THIS IS AN OUT-OF-STATE CELL PHONE INTERVIEW, PLEASE READ:

CLOSING1: 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.

Or

Continue to module(s) and/or state-added questions
Optional Modules

Module 12: Cancer Survivorship  (Split 1)

[CATI NOTE: IF CORE S6Q6 OR S6Q7 = 1 (YES) CONTINUE, ELSE GO TO NEXT MODULE.]

//ASK IF S6Q6=1 OR S6Q7=1 and cstate ne 2//

MOD12_1: You’ve told us that you have had cancer. I would like to ask you a few more questions about your cancer. How many different types of cancer have you had?  
(415)

Do not read:
1 Only one
2 Two
3 Three or more
7 Don’t know / Not sure  [GO TO NEXT MODULE]
9 Refused [GO TO NEXT MODULE]

//ASK IF MOD12_1=1//

MOD12_2: At what age were you told that you had cancer?  
IF MOD12_1= 2 (TWO) OR 3 (THREE OR MORE), ASK: “AT WHAT AGE WERE YOU FIRST DIAGNOSED WITH CANCER?”  
(416-417)

INTERVIEWER NOTE: This question refers to the first time they were told about their first cancer.

_ _ Code age in years  (INTERVIEWER NOTE: 97 = 97 and older)
98 Don’t know / Not sure
99 Refused

//ask if mod12_2 > s8q2 and cstate ne 2//

Mod12_2c. You said you were [insert s8q2] years of age and told that you had cancer at age [insert mod12_2]. I must correct this inconsistency.
[CATI NOTE: IF CORE S6Q6 = 1 (YES) AND MOD12_1 = 1 (ONLY ONE): ASK “WAS IT “MELANOMA” OR “OTHER SKIN CANCER”? THEN CODE 21 IF “MELANOMA” OR 22 IF “OTHER SKIN CANCER”]

//if s6q6=1 and mod12_1=1 and cstate ne 2//

**mod12_3a:** Was it “Melanoma” or “other skin cancer”?  
21 Melanoma  
22 Other Skin Cancer  
77 Don’t Know  
99 Refused

if mod12_3=2,3 OR (mod12_3=1 AND s6q6<>1 )  
**Mod12_3:**

//if mod12_1=1 and s6q6 ne 1//  
What type of cancer was it?

//if mod12_1=2,3  //  
“With your most recent diagnoses of cancer, what type of cancer was it?”

**INTERVIEWER NOTE:** Please read list only if respondent needs prompting for cancer type (i.e., name of cancer) [1-30]:

**Breast**

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>Breast cancer</td>
</tr>
</tbody>
</table>

**Female reproductive (Gynecologic)**

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>02</td>
<td>Cervical cancer (cancer of the cervix)</td>
</tr>
<tr>
<td>03</td>
<td>Endometrial cancer (cancer of the uterus)</td>
</tr>
<tr>
<td>04</td>
<td>Ovarian cancer (cancer of the ovary)</td>
</tr>
</tbody>
</table>

**Head/Neck**

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>05</td>
<td>Head and neck cancer</td>
</tr>
<tr>
<td>06</td>
<td>Oral cancer</td>
</tr>
<tr>
<td>07</td>
<td>Pharyngeal (throat) cancer</td>
</tr>
<tr>
<td>08</td>
<td>Thyroid</td>
</tr>
</tbody>
</table>
09  Larynx

**Gastrointestinal**
10  Colon (intestine) cancer
11  Esophageal (esophagus)
12  Liver cancer
13  Pancreatic (pancreas) cancer
14  Rectal (rectum) cancer
15  Stomach

**Leukemia/Lymphoma**  (lymph nodes and bone marrow)
16  Hodgkin's Lymphoma (Hodgkin’s disease)
17  Leukemia (blood) cancer
18  Non-Hodgkin’s Lymphoma

**Male reproductive**
19  Prostate cancer
20  Testicular cancer

**Skin**
21  Melanoma
22  Other skin cancer

**Thoracic**
23  Heart
24  Lung

**Urinary cancer:**
25  Bladder cancer
26  Renal (kidney) cancer

**Others**
27  Bone
28  Brain
29  Neuroblastoma
30  Other

Do not read:

77  Don’t know / Not sure
99  Refused

//ASK IF S6Q6=1 OR S6Q7=1 and cstate ne 2//
MOD12_4: Are you currently receiving treatment for cancer? By treatment, we mean surgery, radiation therapy, chemotherapy, or chemotherapy pills. (420)

Read if necessary:

1  Yes [GO TO NEXT MODULE]
2  No, I’ve completed treatment [GO TO NEXT MODULE]
3  No, I’ve refused treatment [GO TO NEXT MODULE]
4  No, I haven’t started treatment [GO TO NEXT MODULE]
5  Treatment was not needed [GO TO NEXT MODULE]
7  Don’t know / Not sure [GO TO NEXT MODULE]
9  Refused [GO TO NEXT MODULE]

//ASK IF MOD12_4=2//

MOD12_5: What type of doctor provides the majority of your health care? (421-422)

INTERVIEWER NOTE: If the respondent requests clarification of this question, say: “We want to know which type of doctor you see most often for illness or regular health care (examples: annual exams and/or physicals, treatment of colds, etc.).”

Please read [1-10]:

01 Cancer Surgeon
02 Family Practitioner
03 General Surgeon
04 Gynecologic Oncologist
05 General Practitioner, Internist
06 Plastic Surgeon, Reconstructive Surgeon
07 Medical Oncologist
08 Radiation Oncologist
09 Urologist
10 Other

Do not read:

77  Don’t know / Not sure
99  Refused

//ASK IF MOD12_4=2//
MOD12_6: Did any doctor, nurse, or other health professional EVER give you a written summary of all the cancer treatments that you received?  

Read only if necessary: “By ‘other healthcare professional’, we mean a nurse practitioner, a physician’s assistant, social worker, or some other licensed professional.”

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

//ASK IF MOD12_4=2//

MOD12_7: Have you EVER received instructions from a doctor, nurse, or other health professional about where you should return or who you should see for routine cancer check-ups after completing your treatment for cancer?

1 Yes  
2 No [GO TO MOD12_9]  
7 Don’t know / Not sure [GO TO MOD12_9]  
9 Refused [GO TO MOD12_9]

//ASK IF MOD12_7=1//

MOD12_8: Were these instructions written down or printed on paper for you?  

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

//ASK IF MOD12_4=2//

MOD12_9: With your most recent diagnosis of cancer, did you have health insurance that paid for all or part of your cancer treatment?

INTERVIEWER NOTE: “Health insurance” also includes Medicare, Medicaid, or other types of state health programs.

1 Yes
MOD12_10: Were you EVER denied health insurance or life insurance coverage because of your cancer?

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

MOD12_11: Did you participate in a clinical trial as part of your cancer treatment?

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

MOD12_12: Do you currently have physical pain caused by your cancer or cancer treatment?

1  Yes
2  No [GO TO NEXT MODULE]
7  Don’t know / Not sure [GO TO NEXT MODULE]
9  Refused [GO TO NEXT MODULE]

MOD12_13: Is your pain currently under control?

Please read:

1  Yes, with medication (or treatment)
Module 16: Preconception Health/Family Planning (Split 2 and 3)

[CATI NOTE: IF RESPONDENT IS FEMALE AND GREATER THAN 49 YEARS OF AGE, HAS HAD A HYSTERECTOMY, IS PREGNANT, OR IF RESPONDENT IS MALE GO TO THE NEXT MODULE.]

//ASK IF S8Q1=2 AND S8Q2= 18-49 AND S8Q21=2 and cstate ne 2//

MOD16_1: 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.

Did you or your partner do anything the last time you had sex to keep you from getting pregnant? (443)

1 Yes
2 No [GO TO MOD16_3]
3 No partner/not sexually active [GO TO NEXT MODULE]
4 Same sex partner [GO TO NEXT MODULE]
5 Has had a Hysterectomy [GO TO NEXT MODULE]

7 Don’t know/Not sure [GO TO MOD16_3]
9 Refused [GO TO MOD16_3].

//ASK IF MOD16_1=1//

MOD16_2: What did you or your partner do the last time you had sex to keep you from getting pregnant?

INTERVIEWER NOTE: If respondent reports using more than one method, please code the method that occurs first on the list.

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

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

Read only if necessary:

(444-445)

01 Female sterilization (ex. Tubal ligation, Essure, Adiana) [GO TO NEXT MODULE]
02 Male sterilization (vasectomy) [GO TO NEXT MODULE]
03 Contraceptive implant (ex. Implanon) [GO TO NEXT MODULE]
04 Levonorgestrel (LNG) or hormonal IUD (ex. Mirena) [GO TO NEXT MODULE]
05 Copper-bearing IUD (ex. ParaGard) [GO TO NEXT MODULE]
06 IUD, type unknown [GO TO NEXT MODULE]
07 Shots (ex. Depo-Provera) [GO TO NEXT MODULE]
08 Birth control pills, any kind [GO TO NEXT MODULE]
09 Contraceptive patch (ex. Ortho Evra) [GO TO NEXT MODULE]
10 Contraceptive ring (ex. NuvaRing) [GO TO NEXT MODULE]
11 Male condoms [GO TO NEXT MODULE]
12 Diaphragm, cervical cap, sponge [GO TO NEXT MODULE]
13 Female condoms [GO TO NEXT MODULE]
14 Not having sex at certain times (rhythm or natural family planning) [GO TO NEXT MODULE]
15 Withdrawal (or pulling out) [GO TO NEXT MODULE]
16 Foam, jelly, film, or cream [GO TO NEXT MODULE]
17 Emergency contraception (morning after pill) [GO TO NEXT MODULE]
18 Other method [GO TO NEXT MODULE]

Do not read:

77 Don’t know/Not sure
99 Refused

//ask if MD16_1=2,7 or 9//

MD16_3t: Some reasons for not doing anything to keep you from getting pregnant the last time you had sex might include wanting a pregnancy, not being able to pay for birth control, or not thinking that you can get pregnant.

[CLICK NEXT TO CONTINUE]

//ask if MD16_1=2,7 or 9//
MOD16_3: What was your main reason for not doing anything the last time you had sex to keep you from getting pregnant?  
(446-447)

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

Read only if necessary:

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

77 Don’t know/Not sure
99 Refused

State-Added Section 8: Zika Call-Back Permission Script (Split 2 and 3)

//ASK IF S8Q1=2 AND S8Q2=18-49 AND MOD16_1 ne 5 AND MOD16_3 ne 13 AND cstate ne 2//

ZIKA1: We would like to call to you again within the next 2 weeks to talk in more detail about reproductive issues related to the Zika virus.

The information will be used to help develop and improve the response to the Zika virus in Maryland. The information you gave us today and any you give us in the future will be kept confidential.
If you agree to this, we will keep your first name or initials and phone number on file, separate from the answers collected today.

Even if you agree now, you may refuse to participate in the future. Would it be okay if we called you back to ask additional questions at a later time?"

1 Yes
2 No

//ask if ZIKA1=1//

ZIKA2: Can I please have either your first name or initials, so we will know who to ask for when we call back?

1 Gave Response
7 Don’t Know
9 Refused

//ask if ZIKA2=1//

ZIKA3: Can I please have either your first name or initials, so we will know who to ask for when we call back?

____________________ Enter first name or initials

Module 20: Lung Cancer Screening (Split 1, 2 and 3)

CATI NOTE: IF CORE S9Q1=1 (YES) AND S9Q2 = 1, 2, OR 3 (EVERY DAY, SOME DAYS, OR NOT AT ALL) CONTINUE, ELSE GO TO QUESTION MOD20_4.

//ASK IF S9Q1=1 AND S9Q2= 1,2 OR 3 and cstate ne 2//

MOD20_1: You’ve told us that you have smoked in the past or are currently smoking. The next questions are about screening for lung cancer.

How old were you when you first started to smoke cigarettes regularly?  (454-456)

INTERVIEWER NOTE: Regularly is at least one cigarette or more each day.

_ _ _ Age in Years [RANGE: 001-099]
7 7 7 Don't know/Not sure
9 9 9  Refused

//ask if s8q2 < Mod20_1 and cstate ne 2//

Mod20_1c: Previously you indicated you were [insert s8q2] years old, but stated you were [insert mod20_1] years old when you first started to smoke cigarettes regularly.

I need to correct this inconsistency.

[press next to continue] [CATI NOTE: go back to Mod20_1]

[CATI INSTRUCTION/ INTERVIEWER NOTE: (IF RESPONDENT INDICATES AGE INCONSISTENT WITH PREVIOUSLY ENTERED AGE) THE RESPONDENT INDICATED THEIR AGE TO BE ___ YEARS OLD. YOU INDICATED THEY STARTED SMOKING REGULARLY AT THE AGE OF ___ YEARS. PLEASE VERIFY THAT THIS IS THE CORRECT ANSWER AND CHANGE THE AGE OF THE RESPONDENT REGULARLY SMOKING OR MAKE A NOTE TO CORRECT THE AGE OF THE RESPONDENT.]

//ASK IF S9Q2=3 and cstate ne 2//

MOD20_2: How old were you when you last smoked cigarettes regularly? (457-459)

INTERVIEWER NOTE: Regularly is at least one cigarette or more each day.

Age in Years [RANGE: 001-099]

7 7 7  Don't know/Not sure

9 9 9  Refused

//ask if s8q2 < Mod20_2 or if Mod20_2 < Mod20_1 and cstate ne 2//

Mod20_2c: Previously you indicated you were [insert s8q2] years old, but stated you were [insert mod20_2] years old when you last smoked cigarettes regularly.

I need to correct this inconsistency.

[press next to continue] [CATI NOTE: go back to Mod20_2]

//ASK IF S9Q1=1 AND S9Q2=1,2 OR 3 and cstate ne 2//

MOD20_3: On average, when you {smoke/smoked} regularly, about how many cigarettes {do/did} you usually smoke each day? (460-462)

INTERVIEWER NOTE: Regularly is at least one cigarette or more each day.
INTERVIEWER NOTE: Respondents may answer in packs instead of number of cigarettes. Below is a conversion table:

<table>
<thead>
<tr>
<th>Pack Size</th>
<th>Number of Cigarettes</th>
</tr>
</thead>
<tbody>
<tr>
<td>0.5 PACK</td>
<td>10 CIGARETTES</td>
</tr>
<tr>
<td>0.75 PACK</td>
<td>15 CIGARETTES</td>
</tr>
<tr>
<td>1 PACK</td>
<td>20 CIGARETTES</td>
</tr>
<tr>
<td>1.25 PACK</td>
<td>25 CIGARETTES</td>
</tr>
<tr>
<td>1.5 PACK</td>
<td>30 CIGARETTES</td>
</tr>
<tr>
<td>1.75 PACK</td>
<td>35 CIGARETTES</td>
</tr>
<tr>
<td>2 PACKS</td>
<td>40 CIGARETTES</td>
</tr>
<tr>
<td>2.5 PACKS</td>
<td>50 CIGARETTES</td>
</tr>
<tr>
<td>3 PACKS</td>
<td>60 CIGARETTES</td>
</tr>
</tbody>
</table>

Number of cigarettes [RANGE = 1-776]

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

//ASK IF cstate ne 2/

MOD20_4: The next question is about CT or CAT scans. During this test, you lie flat on your back on a table. While you hold your breath, the table moves through a donut shaped x-ray machine while the scan is done. In the last 12 months, did you have a CT or CAT scan?

(463)

Read only if necessary:

1. Yes, to check for lung cancer
2. No (did not have a CT scan)
3. Had a CT scan, but for some other reason

Do not read:

7. Don't know/not sure
9. Refused

Module 21: Caregiving (Split 3)

//ask if cstate ne 2/

MOD21_1: People may provide regular care or assistance to a friend or family member who has a health problem or disability.

During the past 30 days, did you provide regular care or assistance to a friend or family member who has a health problem or disability?  

(464)
INTERVIEWER INSTRUCTIONS: If caregiving recipient has died in the past 30 days, say “I’m so sorry to hear of your loss.” and Caregiving recipient died in past 30 days.

1. Yes
2. No [GO TO QUESTION MOD21_9]
7 Don’t know/Not sure [GO TO QUESTION MOD21_9]
8 Caregiving recipient died in past 30 days [GO TO NEXT MODULE]
9 Refused [GO TO QUESTION MOD21_9]

//ask if mod21_1 = 1//

Mod21_2: What is his or her relationship to you? For example is he or she your (mother or daughter or father or son)? (465-466)

INTERVIEWER NOTE: IF MORE THAN ONE PERSON, SAY: “PLEASE REFER TO THE PERSON TO WHOM YOU ARE GIVING THE MOST CARE.”

INTERVIEWER INSTRUCTION: Do not read; code response using these categories.

01 Mother
02 Father
03 Mother-in-law
04 Father-in-law
05 Child
06 Husband
07 Wife
08 Same-sex partner
09 Brother or brother-in-law
10 Sister or sister-in-law
11 Grandmother
12 Grandfather
13 Grandchild
14 Other relative
15 Non-relative/Family friend
16 Unmarried partner
77 Don’t know/Not sure
99 Refused
Mod21_3: For how long have you provided care for that person? Would you say…

Please read:

1. Less than 30 days
2. 1 month to less than 6 months
3. 6 months to less than 2 years
4. 2 years to less than 5 years
5. More than 5 years

Do not read:
7. Don’t Know/ Not Sure
9. Refused

Mod21_4: In an average week, how many hours do you provide care or assistance? Would you say…

Please read:

1. Up to 8 hours per week
2. 9 to 19 hours per week
3. 20 to 39 hours per week
4. 40 hours or more

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

Mod21_5: What is the main health problem, long-term illness, or disability that the person you care for has?
Read if necessary: Please tell me which one of these conditions would you say is the major problem?

[DO NOT READ: RECORD ONE RESPONSE]

1  Arthritis/Rheumatism
2  Asthma
3  Cancer
4  Chronic respiratory conditions such as Emphysema or COPD
5  Dementia and other Cognitive Impairment Disorders such as Alzheimer’s disease
6  Developmental Disabilities such as Autism, Down’s Syndrome, and Spina Bifida
7  Diabetes
8  Heart Disease, Hypertension
9  Human Immunodeficiency Virus Infection (HIV)
10  Mental Illnesses, such as Anxiety, Depression, or Schizophrenia
11  Other organ failure or diseases such as kidney or liver problems
12  Substance Abuse or Addiction Disorders
13  Injuries, including broken bones
14  Old age/infirmity/frailty
15  Other

Do not read:

77  Don’t know/Not sure
99  Refused

//ask if mod21_1 = 1//

Mod21_6: In the past 30 days, did you provide care for this person by…

Managing personal care such as giving medications, feeding, dressing, or bathing? (471)

1  Yes
2  No
7  Don’t Know /Not Sure
9  Refused

//ask if mod21_1 = 1//
Mod21_7: In the past 30 days, did you provide care for this person by…

Managing household tasks such as cleaning, managing money, or preparing meals?  
(472)

1  Yes  
2  No  
7  Don’t Know /Not Sure  
9  Refused

//ask if mod21_1 = 1//

Mod21_8: Of the following support services, which one do you most need, that you are not currently getting?  
(473)

[INTERVIEWER NOTE: IF RESPONDENT ASKS WHAT RESPITE CARE IS]:  
Respite care means short-term breaks for people who provide care.

Please read options 1 – 6:

1. Classes about giving care, such as giving medications  
2. Help in getting access to services  
3. Support groups  
4. Individual counseling to help cope with giving care  
5. Respite care  
6. You don’t need any of these support services

Do not read:

7  Don’t Know /Not Sure  
9  Refused

[If MOD21_1 = 1 or 8, GO TO NEXT MODULE]

//ask if mod21_1 = 2,7,9//

Mod21_9: In the next 2 years, do you expect to provide care or assistance to a friend or family member who has a health problem or disability?  
(474)
Module 22: Cognitive Decline (Split 3)

[CATI NOTE: IF RESPONDENT IS 45 YEARS OF AGE OR OLDER CONTINUE, ELSE GO TO NEXT MODULE]

//ask if s8q2≥45 or s8q2=7,9 and cstate ne 2//

Mod22T: The next few questions ask about difficulties in thinking or remembering that can make a big difference in everyday activities. This does not refer to occasionally forgetting your keys or the name of someone you recently met, which is normal. This refers to confusion or memory loss that is happening more often or getting worse, such as forgetting how to do things you’ve always done or forgetting things that you would normally know. We want to know how these difficulties impact you.

//ask if s8q2≥45 or s8q2=7,9 and cstate ne 2//

Mod22_1: During the past 12 months, have you experienced confusion or memory loss that is happening more often or is getting worse? (475)

1 Yes
2 No [GO TO NEXT MODULE]
7 Don’t know [GO TO MOD22_2]
9 Refused [GO TO NEXT MODULE]

//ask if mod22_1 = 1,7//

Mod22_2: During the past 12 months, as a result of confusion or memory loss, how often have you given up day-to-day household activities or chores you used to do, such as cooking, cleaning, taking medications, driving, or paying bills? (476)

Please read:

1 Always
2 Usually
3 Sometimes
Mod22_3: As a result of confusion or memory loss, how often do you need assistance with these day-to-day activities?

Please read:

1 Always
2 Usually
3 Sometimes
4 Rarely [GO TO MOD22_5]
5 Never [GO TO MOD22_5]

Do not read:
7 Don't know [GO TO MOD22_5]
9 Refused [GO TO MOD22_5]

[CATI NOTE: IF MOD22_3 = 1, 2, OR 3, CONTINUE. IF MOD22_3 = 4, 5, 7, OR 9 GO TO MOD22_5.]

Mod22_4: When you need help with these day-to-day activities, how often are you able to get the help that you need?

Please read:

1 Always
2 Usually
3 Sometimes
4 Rarely
5 Never

Do not read:
7 Don't know
9 Refused
//ask if mod22_1 = 1,7//

**Mod22_5**: During the past 12 months, how often has confusion or memory loss interfered with your ability to work, volunteer, or engage in social activities outside the home?  

Please read:

1. Always
2. Usually
3. Sometimes
4. Rarely
5. Never

Do not read:
7. Don't know
9. Refused

//ask if mod22_1 = 1,7//

**Mod22_6**: Have you or anyone else discussed your confusion or memory loss with a health care professional?

1. Yes
2. No
7. Don't know
9. Refused

---

**Module 24: Social Determinants of Health (Split 1 and 2)**

//ask if cstate ne 2//

**MOD24_1**: During the last 12 months, was there a time when you were not able to pay your mortgage, rent or utility bills?

1. Yes
2. No
7. Don't know/not sure
9. Refused
MOD24_2: In the last 12 months, how many times have you moved from one home to another?

(484-485)

__ __   Number of moves in past 12 months [01-52]
88 None (Did not move in past 12 months)
77 Don’t know/Not sure
99 Refused

MOD24_3: How safe from crime do you consider your neighborhood to be? Would you say…

(486)

Please read:

1 Extremely safe
2 Safe
3 Unsafe
4 Extremely unsafe

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

MOD24_4: For the next two statements, please tell me whether the statement was often true, sometimes true, or never true for you in the last 12 months (that is, since last [CATI NOTE: NAME OF CURRENT MONTH]).

The first statement is, “The food that I bought just didn’t last, and I didn’t have money to get more.”

Was that often, sometimes, or never true for you in the last 12 months? (487)

1 Often true,
2 Sometimes true, or
3 Never true

Do not read:
MOD24_5: I couldn’t afford to eat balanced meals.” Was that often, sometimes, or never true for you in the last 12 months? (488)

1    Often true,  
2    Sometimes true, or  
3    Never true 

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

MOD24_6: In general, how do your finances usually work out at the end of the month? Do you find that you usually: (489)

Please read:

1    End up with some money left over,  
2    Have just enough money to make ends meet, or  
3    Do not have enough money to make ends meet 

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

MOD24_7: Stress means a situation in which a person feels tense, restless, nervous, or anxious, or is unable to sleep at night because his/her mind is troubled all the time. Within the last 30 days, how often have you felt this kind of stress? (490)

Please read:

1    None of the time,
2   A little of the time, 
3   Some of the time, 
4   Most of the time, or 
5   All of the time 

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

Module 28: Random Child Selection (Split 2)

[CATI NOTE: IF CORE S8Q16 = 88, OR 99 (NO CHILDREN UNDER AGE 18 IN THE 
HOUSEHOLD, OR REFUSED), GO TO NEXT MODULE.] 

CATI NOTE: IF CORE S8Q16 = 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 
MOD28_1]

[CATI NOTE: IF CORE S8Q16 IS >1 AND CORE S8Q16 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 NOTE: RANDOMLY SELECT ONE OF THE CHILDREN. THIS IS THE “XTH” 
CHILD. PLEASE SUBSTITUTE “XTH” CHILD’S NUMBER IN ALL QUESTIONS BELOW.]

If Core s8q16 = 1, Interviewer please read:

//ask if s8q16=1 AND CSTATE NE 2 //

Mod28t1: 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 Mod28_1]

[CLICK NEXT TO CONTINUE] 

//ask if s8q16= 2-15 AND CSTATE NE 2 //

Mod28t2: 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.”

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 s8q16 ne 88, 99 AND CSTATE NE 2 //

Mod28_1m: What is the birth month and year of the “Xth” child?

(652-657)

_ _ / _ _ _ _  Code 2-Digit Month [Range 01-12]
7 7          Don’t know / Not sure
9 9          Refused

//ask if s8q16 ne 88, 99 AND CSTATE NE 2 //

Mod28_1y: What is the birth month and year of the “Xth” child?

_ _ / _ _ _  Code 4-Digit year [Range 1997-2015]
7 7 7 7      Don’t know / Not sure
9 9 9 9      Refused

CATI NOTE: CALCULATE THE CHILD’S AGE IN MONTHS (CHLDAGE1=0 TO 216) AND ALSO IN YEARS (CHLDAGE2=0 TO 17) BASED ON THE INTERVIEW DATE AND THE BIRTH MONTH AND YEAR USING A VALUE OF 15 FOR THE BIRTH DAY. IF THE SELECTED CHILD IS < 12 MONTHS OLD ENTER THE CALCULATED MONTHS IN CHLDAGE1 AND 0 IN CHLDAGE2. IF THE CHILD IS ≥ 12 MONTHS ENTER THE CALCULATED MONTHS IN CHLDAGE1 AND SET CHLDAGE2=TRUNCATE (CHLDAGE1/12).

//ask if 0 <= chldage2 < 18 or mod28_1y in (7777,9999)
Mod28_2: Is the child a boy or a girl? (702)

1  Boy
2  Girl
9  Refused

//ask if 0 <= chldage2 < 18 or mod28_1y in (7777,9999)

Mod28_3: Is the child Hispanic, Latino/a, or Spanish origin? (703-706)

//if mod28_3 = 1//

Mod28_3b: ARE THEY…

INTERVIEWER NOTE: SELECT ALL THAT APPLY

Please read [MUL=4]:

1  Mexican, Mexican American, Chicano/a
2  Puerto Rican
3  Cuban
4  Another Hispanic, Latino/a, or Spanish origin

Do not read:

5  No
7  Don’t know / Not sure
9  Refused

//ask if 0 <= chldage2 < 18 or mod28_1y in (7777,9999)

Mod28_4: Which one or more of the following would you say is the race of the child? (707-734)

INTERVIEWER NOTE: SELECT ALL THAT APPLY

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

Please read: [MUL = 5]
10 White
20 Black or African American
30 American Indian or Alaska Native
40 Asian
50 Pacific Islander

Do not read:
60 Other
77 Don’t know / Not sure
99 Refused

//ask if Mod28_4=40//
Mod28_4a: Is that…

Interviewer Note: Select all that apply. [mul=7]

41 Asian Indian
42 Chinese
43 Filipino
44 Japanese
45 Korean
46 Vietnamese
47 Other Asian

Do not read:
60 Other
77 Don’t know / Not sure
99 Refused

//if Mod28_4 = 50
Mod28_4p: Is that…

Interviewer Note: Select all that apply. [mul=4]
51 Native Hawaiian
52 Guamanian or Chamorro
53 Samoan
54 Other Pacific Islander

Do not read:

60 Other
77 Don’t know / Not sure
99 Refused

[DP note: mod28_4 is presented as one question, combine Mod28_4a and Mod28_4p into Mod28_4 for delivery]

//ask if mod28_4 = mul //

Mod28_5: Which one of these groups would you say best represents the child’s race? (735-736)

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

10 White
20 Black or African American
30 American Indian or Alaska Native
40 Asian
50 Pacific Islander

Do not read:

60 Other
77 Don’t know / Not sure
99 Refused

//(ask if mod28_4a = mul) OR (mod28_4=mul and mod28_5=40)//

Mod28_5a: Is that…
41 Asian Indian
42 Chinese
43 Filipino
44 Japanese
45 Korean
46 Vietnamese
47 Other Asian

Do not read:
60 Other
77 Don't know / Not sure
99 Refused

//(ask if mod28_4p = mul) OR (mod28_4=mul and mod28_5=50)\n
Mod28_5p: Is that...
51 Native Hawaiian
52 Guamanian or Chamorro
53 Samoan
54 Other Pacific Islander

Do not read:
60 Other
77 Don't know / Not sure
99 Refused

[DP note: mod28_5 is presented as one question, combine Mod28_5a and Mod28_5pi into Mod28_5 for delivery]

//ask if 0 <= chldage2 < 18 or mod28_1y in (7777,9999)\n
Mod28_6: How are you related to the child? (737)

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
MD3_1: I have two additional questions about a vaccination the [Insert Xth child] child may have had.

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

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

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

MD3_1: Tengo dos preguntas adicionales sobre una vacunación que su [insertar el número de orden] niño pudiera haber recibido. Una vacuna para prevenir el virus del papiloma humano o infección con HPV está disponible y se llama la vacuna contra el cáncer cervical o de verrugas genitales, inyección del HPV, [Llenar: Si es mujer “GARDASIL o CERVARIX”; si es hombre “o GARDASIL”]. ¿Ha este niño recibido ALGUNA VEZ una vacuna contra el HPV?

NOTA: Human Papillomavirus (Human Pap•uh•loh•muh•virus); Gardasil (Gar•duh• seel); Cervarix (Sir•var• icks)

1 Yes
2 No
7 Don’t know / Not sure
9 Refused
//ask if MD3_1=1//

**MD3_2**: How many HPV shots did [mod28_1=1] insert he [mod28_1=2 insert she] receive?

Interviewer Note: 3 shots = All shots

<table>
<thead>
<tr>
<th>Number of shots [RANGE01-02]</th>
<th>0 3</th>
<th>7 7</th>
<th>9 9</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>All shots</td>
<td>DK/NS</td>
<td>Refused</td>
</tr>
</tbody>
</table>

**MD3_2**: ¿Cuántas inyecciones contra el HPV recibió?

<table>
<thead>
<tr>
<th>Number of shots [RANGE01-02]</th>
<th>0 3</th>
<th>7 7</th>
<th>9 9</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>All shots</td>
<td>DK/NS</td>
<td>Refused</td>
</tr>
</tbody>
</table>

//end timer ett3//

State Added Section 4: Medical Tourism (Split 1)

//start timer ett4//

//ask if cstate ne 2//

**MD4_1**: During the past 12 months, did you travel outside of the United States to receive pre-planned medical, dental, or surgical procedures or treatments?

**INTERVIEWER NOTE**: This is referring to pre-planned care and not care that may have occurred during the trip due to an illness or injury.

<table>
<thead>
<tr>
<th>1</th>
<th>Yes</th>
<th>[SKIP TO NEXT SECTION]</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>No</td>
<td>[SKIP TO NEXT SECTION]</td>
</tr>
<tr>
<td>7</td>
<td>Don't Know/Not Sure</td>
<td>[SKIP TO NEXT SECTION]</td>
</tr>
<tr>
<td>9</td>
<td>Refused</td>
<td>[SKIP TO NEXT SECTION]</td>
</tr>
</tbody>
</table>
**MD4_1:** Durante los últimos 12 meses, ¿viajó fuera de los Estados Unidos para recibir tratamientos o procedimientos médicos, dentales o quirúrgicos planeados con anticipación?

//ask if MD4_1=1//

**MD4_2:** What specific countries outside of the United States did you travel to during the past 12 months for your pre-planned medical, dental, or surgical procedures or treatments? Please list up to 3.

**INTERVIEWER NOTE:** Respondent may list up to 3.

_ _ _ ISO Country Code

777 Don’t know / Not sure
999 Refused

**MD4_2:** ¿A qué países específicos viajó fuera de los Estados Unidos durante los últimos 12 meses para recibir tratamientos o procedimientos médicos, dentales o quirúrgicos planeados con anticipación? Por favor, liste hasta 3.

//ask if MD4_1=1//

**MD4_3:** What types of procedures or treatments did you receive on your trips outside of the United States for your pre-planned medical, dental or surgical procedures or treatments?

**INTERVIEWER NOTE:** DO NOT read response options.

**INTERVIEWER NOTE:** Respondent may choose more than one option.

- **Organ transplant**
  - 11 Kidney
  - 12 Liver
  - 13 Heart
  - 14 Lung
  - 15 Corneal (eye)

- **Cosmetic surgery**
  - 21 Facial
  - 22 Liposuction
  - 23 Breast (implant, lift, or reduction)
  - 24 Abdominoplasty (tummy tuck)
  - 25 Hair transplant

- **Dental surgery**
  - 30 Dental Surgery

- **Cardiac/Heart Surgery**
  - 40 Cardiac/Heart Surgery

- **Orthopedic surgery**
51 Hip replacement
52 Knee replacement
53 Other (specify)

**Medical treatment for illness**
61 Cancer treatment
62 Drug and alcohol rehabilitation
63 Fertility/infertility
64 Other (specify)

**Other Procedures**
81 CT and MRI Scans
82 Stem cell transplant
83 Bariatric/Obesity Surgery
84 Other (specify)

777 Don’t Know/Not sure
999 Refused

**MD4_3:** ¿Qué tipos de procedimientos o tratamientos recibió en sus viajes fuera de los Estados Unidos para sus tratamientos o procedimientos médicos, dentales o quirúrgicos planeados con anticipación?

//ask if MD4_3=53/

**MD4_3o1:** Specify: _________________________________

//ask if MD4_3=64/

**MD4_3o2:** Specify: _________________________________

//ask if MD4_3=84/

**MD4_3o3:** Specify: _________________________________

//ask if MD4_1=1/

**MD4_4:** Why did you travel outside of the United States for your pre-planned medical, dental, or surgical procedures or treatments? Please select all that apply.

**INTERVIEWER NOTE:** Read only if necessary

**INTERVIEWER NOTE:** Respondent may choose more than one answer

1 The treatment or procedure was not available in the United States
2 The treatment or procedure was not covered by your health insurance
3 The treatment or procedure was too expensive in the United States
4 Felt the quality of care or success of procedure or treatment would be better in another country
5 Felt more familiar or comfortable receiving the procedure or treatment in another country/Went back to home country
6 Other (specify)
7 Don’t Know/Not sure
9 Refused

**MD4_4:** ¿Por qué viajó fuera de los Estados Unidos para recibir tratamientos o procedimientos médicos, dentales o quirúrgicos planeados con anticipación?

1 El tratamiento o procedimiento no estaba disponible en los Estados Unidos
2 El tratamiento o procedimiento no estaba cubierto por su seguro médico
3 El tratamiento o procedimiento era demasiado caro en los Estados Unidos
4 Sintió que la calidad de la atención o el éxito del tratamiento o procedimiento sería mejor en otro país
5 Se sintió más cómodo o familiarizado al recibir el procedimiento o tratamiento en otro país/Volvió a su país natal
6 Otro (especificar)

//ask if MD4_4 = 6/

**MD4_4o:** SPECIFY: __________________

//ask if MD4_1=1/

**MD4_5:** Did you have any unexpected problems, complications, or undesirable health outcomes as a result of the procedures or treatments you received outside of the United States?

1 Yes
2 No [SKIP TO NEXT SECTION]
7 Don’t Know/Not sure [SKIP TO NEXT SECTION]
9 Refused [SKIP TO NEXT SECTION]

**MD4_5:** ¿Tuvo problemas, complicaciones o resultados médicos negativos inesperados como resultado de los tratamientos o procedimientos que recibió fuera de los Estados Unidos?

//ask if MD4_5=1/

**MD4_6:** Did you see a doctor, nurse or other health care professional for these unexpected problems, complications, or undesirable health outcomes after returning to the United States?

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

**MD4_6:** ¿Visitó a un médico, enfermera u otro profesional médico por estos problemas, complicaciones o resultados médicos negativos inesperados después de volver a los Estados Unidos?
State-Added Section 5: Gambling – Split 1

In the past 12 months have you bet money or possessions on any of the following activities:

Casino gambling including slot machines or table games?
1 Yes
2 No
7 Don’t know / Not sure
9 Refused

Other forms of gambling including non-casino or online card games, bingo, lottery tickets, horse races, or sports betting?
1 Yes
2 No
7 Don’t know / Not sure
9 Refused
**MD5_2:** En los últimos 12 meses, ¿ha apostado dinero o posesiones en alguna de las siguientes actividades:

otros tipos de juegos que incluyen juegos de cartas en línea o fuera del casino, bingo, números de lotería, carreras de caballos o apuestas deportivas?

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

//end timer ett5/

**State-Added Section 6: Community Supports (Split 2 and 3)**

//start timer ett6//

//ask if cstate ne 2//

**MD6_1:** Think about your neighborhood when answering the following questions. For this interview, neighborhood is defined as the area within one-half mile or a ten-minute walk from your home.

Does your neighborhood have any sidewalks?

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

**MD6_1:** Piense sobre su barrio cuando responde las siguientes preguntas. Para esta entrevista, el barrio se define como el lugar dentro de media milla o una caminata de diez minutos desde su casa. ¿Hay veredas en su barrio?

//ask if cstate ne 2//

**MD6_2:** For walking at night, would you describe the street lighting in your neighborhood as:

1 Very Good
2 Good
3 Poor
4 Very Poor
7 Don’t Know/ Not Sure
9 Refused
MD6_2: Para caminar a la noche, ¿describiría la iluminación de la calle en su barrio como:

1 Muy buena  
2 Buena  
3 Mala  
4 Muy mala  
7 Don’t Know/ Not Sure  
9 Refused

//ask if cstate ne 2//

MD6_3: How many of the roads and streets in your neighborhood have shoulders or lanes that are marked for bicycling? Would you say…

1 None are marked  
2 Some are marked  
3 Most are marked  
4 All are marked  
7 Don’t Know / Not Sure  
9 Refused

//ask if cstate ne 2//

MD6_3: ¿Cuántos de los caminos y calles de su barrio tienen banquina o carriles que están marcados para andar en bicicleta? Diría usted que…

1 Ninguno está marcado  
2 Algunos están marcados  
3 La mayoría están marcados  
4 Todos están marcados  
7 Don’t Know / Not Sure  
9 Refused

//ask if cstate ne 2//

MD6_4: How often do you feel safe in your neighborhood?

1 All of the time  
2 Most of the time  
3 Some of the time  
4 None of the time  
7 Don’t Know / Not Sure  
9 Refused

MD6_4: ¿Cada cuánto se siente seguro en su barrio?
1 Todo el tiempo
2 La mayoría de las veces
3 Algunas veces
4 Nunca
7 Don’t Know / Not Sure
9 Refused

//ask if cstate ne 2//

MD6_5: During the past 30 days, for about how many days did you walk in your neighborhood for leisure or as a way to get to your destination?

_ _ Number of days [range = 01-30]
8 8 None
7 7 Don’t know / Not sure
9 9 Refused

//ask if MD6_5=1-19 or 88 and cstate ne 2//

MD6_6: What is the number one reason that you did not walk more frequently in your neighborhood?

[PLEASE READ]

01 Lack of time
02 No sidewalks
03 Too much traffic/traffic noise
04 Medical condition
05 Lack of energy/motivation
06 Exercise elsewhere
07 Concerns for safety/crime
08 Weather conditions (too hot or too cold)
09 No interest/don’t want to
10 Already get enough physical activity

77 Don’t know/Not sure
99 Refused

MD6_6: ¿Cuál es la razón número uno por la que usted no caminó con más frecuencia en su barrio?

01 Falta de tiempo
02 Falta de veredas peatonales
03 Hay mucho tráfico/mucha contaminación acústica
State-Added Section 7: Substance Use – Splits 1, 2 and 3

//start timer ett7//

//ask if cstate ne 2//

**MD7_1:** Now I’m going to ask you about non-medical use of drugs. ‘Non-medical use’ means using drugs not prescribed by a doctor, or are used to get high, or for curiosity. Please do **NOT** include alcohol or tobacco.

Remember, all answers are kept confidential and no identifying information is recorded. You may skip any question you do not wish to answer.

In the past 12 months, did you use or take drugs, such as benzodiazepines, cocaine, heroin, amphetamines, or anything NOT prescribed by your doctor?

1 Yes
2 No [GO TO NEXT SECTION]
7 Don’t know / Not sure [GO TO NEXT SECTION]
9 Refused [GO TO NEXT SECTION]

**MD7_1:** Ahora le voy a hacer preguntas sobre el uso de drogas sin propósitos médicos. “Sin propósitos médicos” quiere decir usar drogas que no fueron recetadas por un médico, o que usa para sentirse eufórico, o por curiosidad. Por favor NO incluya el tabaco o el alcohol. Recuerde, todas las respuestas son confidenciales y no se registra ninguna información identificadora. Puede saltarse cualquier pregunta que no desee contestar. En los últimos 12 meses, ¿usó o tomó drogas, como benzodiazepones, cocaína, heroína, anfetaminas o cualquier cosa que NO fue recetado por su médico?

//ask if MD7_1 = 1 and cstate ne 2//

**MD7_2:** In the past 12 months, did you use heroin or any type of opioid that you did not have a prescription for or that you took more frequently than prescribed, on one or more occasions?
INTERVIEWER IF NEEDED: Opioids include certain painkillers, such as morphine, hydrocodone, and oxycodone; and prescription drugs such as OxyContin, Percocet, and Vicodin.

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

MD7_2: En los últimos 12 meses, ¿usó heroína o cualquier tipo de opióaco que no fue recetado o que usted tomó con mayor frecuencia que la recetada, en una o más ocasiones?

ENTREVISTADOR SI ES NECESARIO: Los opiáceos incluyen ciertos analgésicos, tales como morfina, hidrocodona y oxicodona; y medicamentos recetados como OxyContín, Percocet y Vicodín.

//ask if MD7_1 = 1 and cstate ne 2//

MD7_3: In the past 12 months, did you shoot up or inject any drugs other than those prescribed for you? By shooting up, I mean anytime you might have used drugs with a needle, either by mainlining, skin popping, or muscling.

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

MD7_3: En los últimos 12 meses, ¿usó o se inyectó drogas que no fueron recetadas para usted? Con inyectarse, quiero decir cualquier momento en que usó drogas con una aguja, sea “mainlining”, “skin popping” o “muscling”.

//ask if MD7_1 = 1 and cstate ne 2//

MD_CL: Thank you for answering these questions. If you would like assistance with any of these issues, please call the Maryland Crisis Hotline at 1-800-422-0009 to find out about mental health and substance related disorder services available in your area.

MD_CL: Gracias por responder estas preguntas. Si desea asistencia con cualquiera de estas cuestiones, por favor llame a la Línea telefónica de crisis de Maryland al 1-800-422-0009 para obtener información sobre servicios de salud mental y de trastornos relacionados con sustancias disponibles en su zona.

[click next to continue]
CLOSING STATEMENT

That was my last question. Everyone’s answers will be combined to help us provide information about the health practices of people in Maryland. Thank you very much for your time and cooperation.
## Activity List for Common Leisure Activities (To be used for Section 13: Physical Activity)

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>Active Gaming Devices (Wii Fit, Dance, Dance revolution)</td>
</tr>
<tr>
<td>02</td>
<td>Aerobics video or class</td>
</tr>
<tr>
<td>03</td>
<td>Backpacking</td>
</tr>
<tr>
<td>04</td>
<td>Badminton</td>
</tr>
<tr>
<td>05</td>
<td>Basketball</td>
</tr>
<tr>
<td>06</td>
<td>Bicycling machine exercise</td>
</tr>
<tr>
<td>07</td>
<td>Bicycling</td>
</tr>
<tr>
<td>08</td>
<td>Boating (Canoeing, rowing, kayaking, sailing for pleasure or camping)</td>
</tr>
<tr>
<td>09</td>
<td>Bowling</td>
</tr>
<tr>
<td>10</td>
<td>Boxing</td>
</tr>
<tr>
<td>11</td>
<td>Calisthenics</td>
</tr>
<tr>
<td>12</td>
<td>Canoeing/rowing in competition</td>
</tr>
<tr>
<td>13</td>
<td>Carpentry</td>
</tr>
<tr>
<td>14</td>
<td>Dancing-ballet, ballroom, Latin, hip hop, Zumba, etc.</td>
</tr>
<tr>
<td>15</td>
<td>Elliptical/EFX machine exercise</td>
</tr>
<tr>
<td>16</td>
<td>Fishing from river bank or boat</td>
</tr>
<tr>
<td>17</td>
<td>Frisbee</td>
</tr>
<tr>
<td>18</td>
<td>Gardening (spading, weeding, digging, filling)</td>
</tr>
<tr>
<td>19</td>
<td>Golf (with motorized cart)</td>
</tr>
<tr>
<td>20</td>
<td>Golf (without motorized cart)</td>
</tr>
<tr>
<td>21</td>
<td>Handball</td>
</tr>
<tr>
<td>22</td>
<td>Hiking – cross-country</td>
</tr>
<tr>
<td>23</td>
<td>Hockey</td>
</tr>
<tr>
<td>24</td>
<td>Horseback riding</td>
</tr>
<tr>
<td>25</td>
<td>Hunting large game – deer, elk</td>
</tr>
<tr>
<td>26</td>
<td>Hunting small game – quail</td>
</tr>
<tr>
<td>27</td>
<td>Inline Skating</td>
</tr>
<tr>
<td>28</td>
<td>Jogging</td>
</tr>
<tr>
<td>29</td>
<td>Lacrosse</td>
</tr>
<tr>
<td>30</td>
<td>Mountain climbing</td>
</tr>
<tr>
<td>31</td>
<td>Mowing lawn</td>
</tr>
<tr>
<td>32</td>
<td>Paddleball</td>
</tr>
<tr>
<td>33</td>
<td>Painting/papering house</td>
</tr>
<tr>
<td>34</td>
<td>Pilates</td>
</tr>
<tr>
<td>35</td>
<td>Racquetball</td>
</tr>
<tr>
<td>36</td>
<td>Raking lawn/trimming hedges</td>
</tr>
<tr>
<td>37</td>
<td>Running</td>
</tr>
<tr>
<td>38</td>
<td>Rock climbing</td>
</tr>
<tr>
<td>39</td>
<td>Rope skipping</td>
</tr>
<tr>
<td>40</td>
<td>Rowing machine exercises</td>
</tr>
<tr>
<td>41</td>
<td>Rugby</td>
</tr>
<tr>
<td>42</td>
<td>Scuba diving</td>
</tr>
<tr>
<td>43</td>
<td>Skateboarding</td>
</tr>
<tr>
<td>44</td>
<td>Skating - ice or roller</td>
</tr>
<tr>
<td>45</td>
<td>Sledding, tobogganing</td>
</tr>
<tr>
<td>46</td>
<td>Snorkeling</td>
</tr>
<tr>
<td>47</td>
<td>Snow blowing</td>
</tr>
<tr>
<td>48</td>
<td>Snow shoveling by hand</td>
</tr>
<tr>
<td>49</td>
<td>Snow skiing</td>
</tr>
<tr>
<td>50</td>
<td>Snowshoeing</td>
</tr>
<tr>
<td>51</td>
<td>Soccer</td>
</tr>
<tr>
<td>52</td>
<td>Softball/Baseball</td>
</tr>
<tr>
<td>53</td>
<td>Squash</td>
</tr>
<tr>
<td>54</td>
<td>Stair climbing/Stair master</td>
</tr>
<tr>
<td>55</td>
<td>Stream fishing in waders</td>
</tr>
<tr>
<td>56</td>
<td>Surfing</td>
</tr>
<tr>
<td>57</td>
<td>Swimming</td>
</tr>
<tr>
<td>58</td>
<td>Swimming in laps</td>
</tr>
<tr>
<td>59</td>
<td>Table tennis</td>
</tr>
<tr>
<td>60</td>
<td>Tai Chi</td>
</tr>
<tr>
<td>61</td>
<td>Tennis</td>
</tr>
<tr>
<td>62</td>
<td>Touch football</td>
</tr>
<tr>
<td>63</td>
<td>Volleyball</td>
</tr>
<tr>
<td>64</td>
<td>Walking</td>
</tr>
<tr>
<td>66</td>
<td>Waterskiing</td>
</tr>
<tr>
<td>67</td>
<td>Weight lifting</td>
</tr>
<tr>
<td>68</td>
<td>Wrestling</td>
</tr>
<tr>
<td>69</td>
<td>Yoga</td>
</tr>
<tr>
<td>71</td>
<td>Childcare</td>
</tr>
<tr>
<td>72</td>
<td>Farm/Ranch Work (caring for livestock, stacking hay, etc.)</td>
</tr>
<tr>
<td>73</td>
<td>Household Activities (vacuuming, dusting, home repair, etc.)</td>
</tr>
<tr>
<td>74</td>
<td>Karate/Martial Arts</td>
</tr>
<tr>
<td>75</td>
<td>Upper Body Cycle (wheelchair sports, ergometer)</td>
</tr>
<tr>
<td>76</td>
<td>Yard work (cutting/gathering wood, trimming, etc.)</td>
</tr>
<tr>
<td>98</td>
<td>Other_____</td>
</tr>
<tr>
<td>99</td>
<td>Refused</td>
</tr>
</tbody>
</table>