



2011

**CT Behavioral Risk Factor Surveillance System
Questionnaire**

December 13, 2010

Behavioral Risk Factor Surveillance System 2011 Draft Questionnaire

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Interviewer's Script

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

Hello, my name is _____. I am calling on behalf of the **Connecticut Department of Public Health** to conduct an important study on the health of Connecticut residents. Please call us at 1-877-364-0913 at your convenience. Thanks."

Privacy Manager Message [TO BE LEFT ON 1ST, 4TH, AND 9TH ATTEMPT RESULTING IN A PRIVACY MANAGER]: "(NAME) Calling on behalf of the Connecticut Department of Public Health"

//ask of all//

Intro1

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

Is this (phone number) ?

01 Continue
02 Terminate

//ask if intro1=1, 5//

HS1. Is this a private residence in Connecticut ?

1 Yes
2 No

//if HS1 = 2//

X2 Thank you very much, but we are only interviewing private residences in Connecticut . **STOP**
//assign dispo 22 Not a Private Residence//

//as if HS1=1//

HS2 Is this a cellular telephone?

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

1 **No - Not a Cellular Telephone**
2 **Yes**

//if HS2=2//

Thank you very much, but we are only interviewing land line telephones and private residences. **STOP**
//assign dispo 8 cell phone//

//ask if HS2=1//

ADULTS

I need to randomly select one adult who lives in your household to be interviewed. How many members of your household, including yourself, are 18 years of age or older?

___ Number of adults [RANGE 0-18]

//if ADULTS = 0 //

X3 I'm sorry we are only interviewing adult residents who are 18 years of age or older.
Thank you."

 // if adults=0 assign dispo 13//

//ask if ADULTS = 1//

ONEADULT Are you the adult?

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

If "yes,"

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

//if ONEADULT=03//

ASKGENDR Is the adult a man or a woman?

- 21 Male
- 22 Female

//if ONEADULT=03//

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

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

//ASK IF ADULTS>1//

MEN How many of these adults are men
___ Number of men [RANGE 0-18]

//ASK IF ADULTS>1//

WOMEN ... and how many are women?
___ Number of women [RANGE 0-18]

RANDOMLY SELECT ADULT; Assign selected value:

//ASK IF ADULTS > 1//

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

//if ASKFOR = 2//

GETNEWAD May I speak with him or her?

- 1 Yes, Adult coming to the phone.[**GO TO NEWADULT**]
- 2 No, not here (interview will terminate) [INTERVIEWER SET APPOINTMENT FOR BEST TIME TO REACH ADULT]
- 3 Go back to Adults question. Warning: A new respondent may be selected. \n& (You need Supervisor's permission to use this option.)

//if getnewad=1 or getadult = 1//

NEWADULT

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

Core Sections

//ask all//

YOURETHE1

I will not ask for your last name, address, or other personal information that can identify you. You do not have to answer any question you do not want to, and you can end the interview at any time. Any information you give me will be confidential. The interview takes approximately 25 minutes to complete. If you have any questions about the survey, please call 1-877-364-0913.

001 Person Interested, continue.
171 Requested callback
173 Selected person unable to complete - language barrier
015 Selected person unable to complete – impairment[ASSIGN DISPO 15]
175 Selected person refuses – Before Intro
176 Selected person refuses - After Intro
002 Go back to Adults question. WARNING: A NEW RESPONDENT WILL BE SELECTED AND YOU NEED A SUPERVISOR'S PASSWORD TO CONTINUE.

Section 1: Health Status

//ask of all//

s1q1 Would you say that in general your health is—? (73)

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? (74–75)

— — Number of days [RANGE = 1-30]
8 8 None
7 7 Don't know / Not sure
9 9 Refused

//ask of all//

s2q2 Now thinking about your mental health, which includes stress, depression, and problems with emotions, for how many days during the past 30 days was your mental health not good? (76–77)

– – Number of days[RANGE = 1-30]
 8 8 None
 7 7 Don't know / Not sure
 9 9 Refused

//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? (78-79)

– – Number of days[RANGE = 1-30]
 8 8 None
 7 7 Don't know / Not sure
 9 9 Refused

Section 3: Health Care Access

//ask of all//

S3q1 Do you have any kind of health care coverage, including health insurance, prepaid plans such as HMOs, or government plans such as Medicare or Indian Health Services? (80)

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

//ask of all//

s3q2 Do you have one person you think of as your personal doctor or health care provider? (81)

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

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

//ask of all//

s3q3 Was there a time in the past 12 months when you needed to see a doctor but could not because of cost? (82)

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

//ask of all//

s3q4 About how long has it been since you last visited a doctor for a routine checkup? A routine checkup is a general physical exam, not an exam for a specific injury, illness, or condition. (83)

[Read if Necessary]
 1 Within past year (anytime less than 12 months ago)
 2 Within past 2 years (1 year but less than 2 years ago)

- 3 Within past 5 years (2 years but less than 5 years ago)
- 4 5 or more years ago
- 7 Don't know / Not sure
- 8 Never
- 9 Refused

Section 4: Hypertension Awareness

//ask of all//

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

(94)

Read 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]

//ask if s4q1=1//

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

(95)

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

ETT1

State-Added 1: High Blood Pressure

//ask if s4q2=1,7,9//

CT1_1 When is the last time you consulted your doctor or other health professional about your high blood pressure?

Read only if necessary:

- 1 Within the past six months
- 2 Within the past year
- 3 Within the past 2 years
- 4 2 Years or more
- 7 **Don't know/Not sure**
- 9 Refused

//ask if s4q2=1,7,9//

CT1_2 In general, how often do you follow the directions, such as the times per day and dose, on your blood pressure medication prescription(s)? Would you say

READ LIST

- 1. Always (**SKIP TO NEXT MODULE**)
- 2. Most of the time (GO TO CT1_3)
- 3. Some of the time (GO TO CT1_3)
- 4. Not often (GO TO CT1_3)
- 5. Never (GO TO CT1_3)
- 7. DK/Not sure (GO TO CT1_3)
- 9. Refused (GO TO CT1_3)

//ask if ct1_2 = 2,3,4,5,7,9//

CT1_3 What are the reasons that you are not taking your blood pressure medication exactly as prescribed? [MUL=10]

(DO NOT READ. ACCEPT MULTIPLE RESPONSES.)

- 1. You forget to take the medication
 - 2. You do not like the side effects from the medication
 - 3. You cannot afford the medication
 - 4. The medication is not working
 - 5. You are trying to lower your blood pressure without taking medication
 - 6. You feel okay without medication
 - 7. You ran out of medication
 - 8. You think you should be taking a different medication
 - 9. You do not know how to take the medication
 - 10. Other reasons _____
 - 77. Don't know/not sure
 - 99. Refused
- //ask if ct1_3=10//
- Ct1_3o Enter other mention _____

ETT2

Section 5: Cholesterol Awareness

//ask of all//

s5q1 Blood cholesterol is a fatty substance found in the blood. Have you EVER had your blood cholesterol checked? (96)

- 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 s5q1=1//

s5q2 About how long has it been since you last had your blood cholesterol checked? (97)

Read only if necessary:

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

Do not read:

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

//ask if s5q1=1//

s5q3 Have you EVER been told by a doctor, nurse or other health professional that your blood cholesterol is high?

(98)

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

ETT3

State-Added 2: HIGH CHOLESTEROL

//ask if s5q3=1//

CT2_1 Did the doctor prescribe a medication to lower your blood cholesterol?

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

//ask if s5q3=1//

CT2_2 When is the last time you consulted your doctor or other health professional about your high blood cholesterol?

Read only if necessary:

- 1 Within the past six months
- 2 Within the past year
- 3 Within the past 2 years
- 4 2 Years or more
- 7 Don't know/Not sure
- 9 Refused

//ask if ct2_1=1//

CT2_3 In general, how often do you follow the directions, such as the times per day and dose, on your cholesterol medication prescription(s)? Would you say

READ LIST

- 1. Always (Skip TO CT2_5)
- 2. Most of the time (GO TO CT2_4)
- 3. Some of the time (GO TO CT2_4)
- 4. Not often (GO TO CT2_4)
- 5. Never (GO TO CT2_4)
- 7. DK/Not sure (GO TO CT2_4)

9. Refused (GO TO CT2_4)

//ask if ct2_3=2,3,4,5, 7,9//

CT2_4 What are the reasons that you are not taking your cholesterol medication exactly as prescribed? [MUL=10]

(DO NOT READ. ACCEPT MULTIPLE RESPONSES) *

1. You forget to take the medication
2. You do not like the side effects from the medication
3. You cannot afford the medication
4. The medication is not working
5. You are trying to lower your blood cholesterol without taking medication
6. You feel okay without medication
7. You ran out of medication
8. You think you should be taking a different medication
9. You do not know how to take the medication
10. Other reasons
77. Don't know/not sure
99. Refused

//ask if ct2_4=10//

Ct2_4o OTHER REASONS: _____

//ask if s5q3=1//

CT2_5 Did the doctor provide you with a low fat or low cholesterol diet?

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

//ask if s5q3=1//

CT2_6 Did your doctor refer you to a dietician, nutritionist, or nurse to help you reduce the fat or cholesterol in your diet?

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

ETT4

Section 6: Chronic Health Conditions

//ask of all//

Now I would like to ask you some questions about general health conditions.

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

- s6q1.** (ever told) you that you had a heart attack also called a myocardial infarction? (99)
- | | |
|---|-----------------------|
| 1 | Yes |
| 2 | No |
| 7 | Don't know / Not sure |
| 9 | Refused |

//ask of all//

- s6q2.** (Ever told) you had angina or coronary heart disease? (100)
- | | |
|---|-----------------------|
| 1 | Yes |
| 2 | No |
| 7 | Don't know / Not sure |
| 9 | Refused |

//ask of all//

- s6q3.** (Ever told) you had a stroke? (101)
- | | |
|---|-----------------------|
| 1 | Yes |
| 2 | No |
| 7 | Don't know / Not sure |
| 9 | Refused |

//ask of all//

- s6q4.** (Ever told) you had asthma? (102)
- | | | |
|---|-----------------------|---------------------|
| 1 | Yes | |
| 2 | No | [Go to Q6.6] |
| 7 | Don't know / Not sure | [Go to Q6.6] |
| 9 | Refused | [Go to Q6.6] |

//ask of s6q4=1//

- s6q5.** Do you still have asthma? (103)
- | | |
|---|-----------------------|
| 1 | Yes |
| 2 | No |
| 7 | Don't know / Not sure |
| 9 | Refused |

//ask of all//

s6q6.

(Ever told) you had skin cancer?

(104)

- 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?

(105)

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

//ask of all//

s6q8.

(Ever told) you have COPD (chronic obstructive pulmonary disease, emphysema or chronic bronchitis)?

(106)

- 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?

(107)

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

INTERVIEWER NOTE: Arthritis diagnoses include:

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

//ask of all//

s6q10.

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

(108)

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

//ask of all//

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

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

(109)

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

//ask of all//

s6q12. Has a doctor, nurse or other health professional ever said that you have vision impairment in one or both eyes, even when wearing glasses? (110)

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

//ask of all//

s6q13. (Ever told) that you have diabetes? (111)

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

If respondent says pre-diabetes or borderline diabetes, use response code 4.

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

CATI note: If Q6.13 = 1 (Yes), go to Diabetes Optional Module (if used). If any other response to Q6.13, go to Pre-Diabetes Optional Module (if used). Otherwise, go to next section.

ETT5

Module 1: Pre-Diabetes

NOTE: Only asked of those not responding "Yes" (code = 1) to Core Q6.13 (Diabetes awareness question).

//ask if s6q13 = 2,3,4,7,9//

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

(245)

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

CATI NOTE: If Core Q6.13 = 4 (No, pre-diabetes or borderline diabetes); answer Q2 "Yes" (code = 1).

//ask if s6q13 = 2,3,4,7,9//

// if s6q13=4 autocode mod1_2=1//

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

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

(246)

- 1 Yes
- 2 Yes, during pregnancy
- 3 No
- 7 Don't know / Not sure
- 9 Refused

Module 2: Diabetes

To be asked following Core Q6.13; if response is "Yes" (code = 1)

//ask if s6q13=1//

Mod2_1. How old were you when you were told you have diabetes?

(247-248)

- _ _ Code age in years [97 = 97 and older] [RANGE=01-97]
- 9 8 Don't know / Not sure
- 9 9 Refused

//ask if s6q13=1//

Mod2_2. Are you now taking insulin?

(249)

- 1 Yes
- 2 No
- 9 Refused

//ask if s6q13=1//

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

(250-252)

- 1 _ _ Times per day [RANGE = 101-199]
- 2 _ _ Times per week [RANGE = 201-299]
- 3 _ _ Times per month [RANGE = 301-399]
- 4 _ _ Times per year [RANGE = 401-499]
- 8 8 8 Never
- 7 7 7 Don't know / Not sure
- 9 9 9 Refused

//ask if s6q13=1//

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

(253-255)

- 1 _ _ Times per day [RANGE = 101-199]
- 2 _ _ Times per week [RANGE = 201-299]
- 3 _ _ Times per month [RANGE = 301-399]
- 4 _ _ Times per year [RANGE = 401-499]

5 5 5 No feet
8 8 8 Never
7 7 7 Don't know / Not sure
9 9 9 Refused

//ask if s6q13=1//

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

— — Number of times [76 = 76 or more] [RANGE = 01-76]
8 8 None
7 7 Don't know / Not sure
9 9 Refused

//ask if s6q13=1//

Mod2_6. A test for "A one C" measures the average level of blood sugar over the past three months. About how many times in the past 12 months has a doctor, nurse, or other health professional checked you for "A one C"? (258-259)

— — Number of times [76 = 76 or more] [RANGE = 01-76]
8 8 None
9 8 Never heard of "A one C" test
7 7 Don't know / Not sure
9 9 Refused

CATI NOTE: If Q4 = 555 "No feet", go to Q8.

//ask if s6q13=1 and mod2_4 ne 555//

Mod2_7. About how many times in the past 12 months has a health professional checked your feet for any sores or irritations? (260-261)

— — Number of times [76 = 76 or more] [RANGE = 01-76]
8 8 None
7 7 Don't know / Not sure
9 9 Refused

//ask if s6q13=1//

Mod2_8. When was the last time you had an eye exam in which the pupils were dilated? This would have made you temporarily sensitive to bright light. (262)

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 s6q13=1//

Mod2_9. Has a doctor ever told you that diabetes has affected your eyes or that you had retinopathy? (263)

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

//ask if s6q13=1//

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

(264)

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

ETT6

Section 7: Tobacco Use

//ask of all//

s7q1 Have you smoked at least 100 cigarettes in your entire life?

(112)

NOTE: 5 packs = 100 cigarettes

- 1 Yes
- 2 No [Go to Q7.5]
- 7 Don't know / Not sure [Go to Q7.5]
- 9 Refused [Go to Q7.5]

//ask if s7q1=1//

s7q2 Do you now smoke cigarettes every day, some days, or not at all?

(113)

- 1 Every day
- 2 Some days
- 3 Not at all [Go to Q7.4]
- 7 Don't know / Not sure [Go to Q7.5]
- 9 Refused [Go to Q7.5]

//ask if s7q2=1,2//

s7q3 During the past 12 months, have you stopped smoking for one day or longer because you were trying to quit smoking?

(114)

- 1 Yes [Go to Q7.5]
- 2 No [Go to Q7.5]
- 7 Don't know / Not sure [Go to Q7.5]
- 9 Refused [Go to Q7.5]

//ask if s7q2=3//

s7q4 How long has it been since you last smoked a cigarette, even one or two puffs?

(115-116)

[Read only if necessary.]

- 0 1 Within the past month (less than 1 month ago)
- 0 2 Within the past 3 months (1 month but less than 3 months ago)

- 0 3 Within the past 6 months (3 months but less than 6 months ago)
- 0 4 Within the past year (6 months but less than 1 year ago)
- 0 5 Within the past 5 years (1 year but less than 5 years ago)
- 0 6 Within the past 10 years (5 years but less than 10 years ago)
- 0 7 10 years or more
- 7 7 Don't know / Not sure
- 9 9 Refused

//ask of all//
s7q5

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

Snus (rhymes with 'goose')

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

(117)

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

Do not read:

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

ETT7

State-Added 3.Tobacco

//ask of all//

CT3_1. Have you ever tried water pipe smoking such as hookas?

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

Section 8: Demographics

//ask of all//
s8q1

What is your age?

(118-119)

- — Code age in years [RANGE 18-99]
- 0 7 Don't know / Not sure
- 0 9 Refused

//ask of all//
s8q2

Are you Hispanic or Latino?

(120)

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

//ask of all//
s8q3

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

(121-126)

(Check all that apply)

Please read:

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

Or

- 6 Other [specify]_____

Do not read:

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

//ask if s8q3=6//

S8q3o ENTER OTHER [open end]:_____

//ask if s8q3 = mul response//

s8q4

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

(127)

Please read:

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

Or

- 6 [fill in s8q3o]

Do not read:

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

//ask of all//

s8q5

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

(128)

- 1 Yes
- 2 No

Do not read:

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

//ask of all//

s8q6

Are you...?

(129)

Please read:

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

Or

- 6 A member of an unmarried couple

Do not read:

- 9 Refused

//ask of all//

s8q7

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

(130-131)

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

- -- Number of children [RANGE 1-15]
- 8 8 None
- 9 9 Refused

//ask if s8q7 = 1-15//

S8q7chk

Just to be sure, you have [enter # of children from s8q7] children under 18 living in your household. Is that correct?

- 1 Yes
- 2 No [re-ask s8q7]
- 9 Refused

//ask of all//

s8q8

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

Read only if necessary:

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

Do not read:

- 9 Refused

//ask of all//
s8q9

Are you currently...?

(133)

Please read:

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

Or

- 8 Unable to work

Do not read:

- 9 Refused

//ask of all//

s8q10

Is your annual household income from all sources—

(134-135)

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

Read only if necessary:

- S8q10A [04]** Less than \$25,000 [If "no," ask 05; if "yes," ask 03]
(\$20,000 to less than \$25,000)
- 1 Yes
 - 2 No
 - 7 Don't Know
 - 9 Refused

//ask if s8q10A = 1//

- S8q10B [03]** Less than \$20,000 [If "no," code 04; if "yes," ask 02]
(\$15,000 to less than \$20,000)
- 1 Yes
 - 2 No
 - 7 Don't Know
 - 9 Refused

//ask if s8q10B = 1//

- S8q10C [02]** Less than \$15,000 [If "no," code 03; if "yes," ask 01]
(\$10,000 to less than \$15,000)
- 1 Yes
 - 2 No

7 Don't Know
 9 Refused
//ask if s18q10C=1//
S8q10D [01] Less than \$10,000 [If "no," code 02]
 1 Yes
 2 No
 7 Don't Know
 9 Refused
//ask if s8q10A = 2//
S8q10E [05] Less than \$35,000 [If "no," ask 06]
 (\$25,000 to less than \$35,000)
 1 Yes
 2 No
 7 Don't Know
 9 Refused
//ask if s8q10E = 2//

S8q10F [06] Less than \$50,000 [If "no," ask 07]
 (\$35,000 to less than \$50,000)
 1 Yes
 2 No
 7 Don't Know
 9 Refused
//ask if s8q10F = 2//
S8q10G [07] Less than \$75,000 [If "no," code 08]
 (\$50,000 to less than \$75,000)
 1 Yes
 2 No
 7 Don't Know
 9 Refused

ETT9

State-Added 4: Income

//ask if s8q10g=2//
CT4_1 less than \$100,000
 (\$75,000 to less than \$100,000)
 1 Yes
 2 No
 7 Don't Know
 9 Refused
//ask if CT4_1=2//
CT4_2 \$100,000 or more
 1 Yes
 2 No
 7 Don't Know
 9 Refused

//ask if s8q10A-CT4_2 ne 7,9//
S8q10AA Your Annual Household Income is [enter range from code in s8q10A-CT4_2]

 Is This Correct?
 1 No, re-ask question [GO TO S8Q10A]
 2 Yes, correct as is. [CONTINUE]

DP NOTE: //if CT4_1 =1 or CT4_2=1 autocode CDC income to = [08] \$75,000 or more//

ETT10

Section 8: Demographics Continued.

//ask of all//

Ps8q11 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 ps8q11 = P//

s8q11 About how much do you weigh without shoes?

(136-139)

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

Round fractions up

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

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

//ask if s8q11=s8q11=50-79 OR 351-776//

S8q11_A: Just to double-check, you indicated \:s8q11: pounds as your weight.

IS THIS CORRECT?

1. Yes
2. No [go back to s8q11]

//ask if ps8q11 = K//

s8q11M About how much do you weigh without shoes?

(136-139)

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

Round fractions up

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

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

//ask if s8q11m = 23-352 and ps811 = "k"

S8q11am: Just to double-check, you indicated \:s8q11m: kilograms as your weight.

IS THIS CORRECT?

1. Yes
2. No, [go back to s8q11m]

//ask of all//

Ps8q12 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 ps8q12=f//
s8q12 About how tall are you without shoes?

(140-143)

NOTE: If respondent answers in metrics, put "9" in column 178.

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

--- Height[Range 300-311,400-411,500-511,600-611,701-711]

//ask if s8q12 = 300-407, 609-711]

S8q12a: Just to double check, you indicated you are //enter feet from s8q12// FEET //enter inches from s8q12// INCHES TALL.

IS THIS CORRECT?

1. Yes
2. No, go back to s8q12

//ask if ps8q12 = M//
S8q12M About how tall are you without shoes?

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

Round fractions down
[Enter height in centimeters]
[Ex: 2 meters 5 centimeters would be entered as 205]

--- Height[Range 90-254]

//ask if s8q12m = 90-254 and ps8q12=M//

S8q12am: Just to double check, you indicated you are //s12q12m// centimeters tall.

IS THIS CORRECT?

1. Yes
- 2 No [go back to s8q12m]

State-Added 5: Demographics – CT TOWN

{CATI: If county=777 or 999, use assigned county from sample to trigger list of towns, else use county to trigger list}

//ask of all//

CT_town. What town do you live in?

----- Enter Town Code

112B8 Abington	069B8 Dayville	134B7 Hyde Park
067B7 Amston	036A4 Deep River	050C4 Ivoryton
001A7 Andover	037A5 Derby	058B6 Jewett City
002A5 Ansonia	084B5 Devon	007B2 Kensington
003A8 Ashford	038A4 Durham	068A3 Kent
069C8 Attawaugan	100B3 East Canaan	069D8 Killingly
004A2 Avon	039A8 Eastford	070A4 Killingworth
133B6 Baltic	040A2 East Granby	122B3 Lakeville
074B3 Bantam	041A4 East Haddam	071A6 Lebanon
005A3 Barkhamsted	042A4 East Hampton	072A6 Ledyard
006A5 Beacon Falls	043A2 East Hartford	122C3 Lime Rock
007A2 Berlin	044A5 East Haven	073A6 Lisbon
008A5 Bethany	045A6 East Lyme	074A3 Litchfield
009A1 Bethel	046A1 Easton	075A6 Lyme
010A3 Bethlehem	047B2 East Windsor	076A5 Madison
011A2 Bloomfield	048A7 Ellington	077A2 Manchester
012A7 Bolton	155B2 Elmwood	078A7 Mansfield
013A6 Bozrah	049A2 Enfield	079A2 Marlborough
014A5 Branford	050A4 Essex	080A5 Meriden
015A1 Bridgeport	051A1 Fairfield	081A5 Middlebury
016A3 Bridgewater	093B5 Fair Haven	082A4 Middlefield
017A2 Bristol	021B3 Falls Village	042C4 Middle Haddam
047A2 Broad Brook	052A2 Farmington	083A4 Middletown
018A1 Brookfield	013B6 Fitchville	084A5 Milford
019A8 Brooklyn	053A6 Franklin	131C2 Milldale
020A2 Burlington	072B6 Gales Ferry	085A1 Monroe
021A3 Canaan	117B1 Georgetown	086C6 Montville
022A8 Canterbury	013C6 Gilman	041B4 Moodus
023A2 Canton	054A2 Glastonbury	109C8 Moosup
050B4 Centerbrook	135C1 Glenbrook	087A3 Morris
109B8 Central Village	055A3 Goshen	062B5 Mt. Carmel
024A8 Chaplin	056A2 Granby	059B6 Mystic
025A5 Cheshire	158B1 Greens Farms	088A5 Naugatuck
026A4 Chester	057A1 Greenwich	089A2 New Britain
027A4 Clinton	058A6 Griswold	090A1 New Canaan
101B5 Clintonville	141B8 Grosvenor Dale	091A1 New Fairfield
042B4 Cobalt	059A6 Groton	092A3 New Hartford
028A6 Colchester	060A5 Guilford	093A5 New Haven
029A3 Colebrook	061A4 Haddam	094A2 Newington
023B2 Collinsville	075B6 Hadlyme	095A6 New London
030A7 Columbia	062A5 Hamden	096A3 New Milford
031A3 Cornwall	063A8 Hampton	150B3 New Preston
057B1 Cos Cob	064A2 Hartford	097A1 Newtown
032A7 Coventry	065A2 Hartland	045B6 Niantic
033A4 Cromwell	066A3 Harwinton	059C6 Noank
034A1 Danbury	067A7 Hebron	098A3 Norfolk
069A8 Danielson	061B4 Higganum	099B5 North Branford
035A1 Darien	126B1 Huntington	100A3 North Canaan

101A5 North Haven
074C3 Northfield
099A5 Northford
141C8 North Grosvenor Dale
102A6 No. Stonington
103A1 Norwalk
104A6 Norwich
086A6 Oakdale
105A6 Old Lyme
137B6 Old Mystic
106A4 Old Saybrook
136B8 Oneco
107A5 Orange
108A5 Oxford
137C6 Pawcatuck
109A8 Plainfield
110A2 Plainville
131B2 Plantsville
111A3 Plymouth
112A8 Pomfret
113A4 Portland
114A6 Preston
115A5 Prospect
116A8 Putnam
152B6 Quaker Hill
141D8 Quinnebaug
117A1 Redding
118A1 Ridgefield
157B1 Riverside
082B4 Rockfall
146C7 Rockville
119A2 Rocky Hill
069E8 Rogers
103B1 Rowayton
120A3 Roxbury
121A6 Salem
122A3 Salisbury

097B1 Sandy Hook
036B4 Saybrook
049B2 Scitico
123A8 Scotland
124A5 Seymour
125A3 Sharon
126A1 Shelton
127A1 Sherman
128A2 Simsbury
129A7 Somers
130A5 Southbury
131A2 Southington
103C1 South Norwalk
051B1 Southport
132A2 South Windsor
133A6 Sprague
135A1 Springdale
134A7 Stafford
135B1 Stamford
136A8 Sterling
137A6 Stonington
014B5 Stony Creek
078B7 Storrs
138A1 Stratford
139A2 Suffield
122D3 Taconic
104B6 Taftville
146B7 Talcotville
128B2 Tarrifyville
111B3 Terryville
140A3 Thomaston
141A8 Thompson
142A7 Tolland
143A2 Torrington
144A1 Trumbull
086B6 Uncasville
145A7 Union

052B2 Unionville
146A7 Vernon
147A6 Voluntown
148A5 Wallingford
047C2 Warehouse Point
149A3 Warren
150A3 Washington
151A5 Waterbury
152A6 Waterford
153A3 Watertown
109D8 Wauregan
128C2 Weatogue
154A4 Westbrook
056B2 West Granby
155A2 West Hartford
156A5 West Haven
060B5 West Lake
157A1 Weston
158A1 Westport
159A2 Wethersfield
160A7 Willington
163A8 Willimantic
161A1 Wilton
162A3 Winchester
163B8 Windham
164A2 Windsor
165A2 Windsor Locks
162B3 Winsted
166A5 Wolcott
167A5 Woodbridge
168A3 Woodbury
169A8 Woodstock
148B5 Yalesville
77777 Don't know/Not sure
88888 Other
99999 Refused

//if ct_town =88888//

townoth INTERVIEWER: SPECIFY TOWN NAME

//if ct_town=77777 or 99999 go to s8q14/

//ask if ct_town = ANYTHING EXCEPT 77777 or 99999//

Ct_towna

I want to make sure that I got it right.

You said you live in the town of [ct_town or townoth]
Is that correct?

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

//ask of all//
s8q14 What is the ZIP Code where you live? (147-151)

7 7 7 7 ZIP Code[RANGE = 06000-06999]
9 9 9 9 Don't know / Not sure
9 9 9 9 Refused

//if s8q14=0600-069999]

S8q14ck I want to make sure I got it right. You said [insert s8q14] Is that correct?
1. Yes, continue
2. No, go back to s8q14

//ask of all//

s8q15 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. (152)

1 Yes
2 No [Go to Q8.17]
7 Don't know / Not sure [Go to Q8.17]
9 Refused [Go to Q8.17]

//ask if s8q15=1//

s8q16 How many of these telephone numbers are residential numbers? (153)

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

//as if s8q16>2//

S8q16chk You said you have [s8q16] residential telephone numbers in your household. Is that correct?
1. Yes, correct as is
2. No, incorrect. Go back to s8q16.

//ask of all//

s8q17 Do you have a cell phone for personal use? Please include cell phones used for both business and personal use. (154)

1 Yes [Go to Q8.19]
2 No
7 Don't know / Not sure
9 Refused

//ask if s8q17=2,7,9//

s8q18 Do you share a cell phone for personal use (at least one-third of the time) with other adults? (155)

1 Yes [Go to Q8.20]
2 No [Go to Q8.21]
7 Don't know / Not sure [Go to Q8.21]
9 Refused [Go to Q8.21]

//ask if s8q17=1//

s8q19 Do you usually share this cell phone (at least one-third of the time) with any other adults?
(156)

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

//ask if s8q17=1 or s8q18=1//

s8q20 Thinking about all the phone calls that you receive on your landline and cell phone, what percent, between 0 and 100, are received on your cell phone?
(157-159)

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

//ask of all//

s8q21 Do you own or rent your home?
(160)

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

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

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

//ask of all//

s8q22 Indicate sex of respondent. Ask only if necessary.
(161)

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

Language Indicator

//ask of all//

Lang1. INTERVIEWER: DO NOT ASK QUESTION:

IN WHAT LANGUAGE WAS THIS INTERVIEW COMPLETED?

- 01 ENGLISH
- 02 SPANISH

//ask if s8q22=2 AND s8q1<45//

s8q23 To your knowledge, are you now pregnant?

(162)

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

Section 9: Fruits and Vegetables

//ask of all//

S9q1T

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

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

//ask of all//

s9q1

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

(163-165)

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

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

Do not include fruit juice drinks that provide 100% daily vitamin C but include added sugar.

INTERVIEWER NOTE Do not include vegetable juices such as tomato and V8 if respondent provides but include in "other vegetables" question 9.6.

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

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

//ask of all//

s9q2

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

(166-168)

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

INTERVIEWER NOTES:

Do not count fruit jam, jelly, or fruit preserves.

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

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

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

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

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

//ask of all//

s9q3 During the past month, how many times per day, week, or month did you eat cooked or canned beans, such as refried, baked, black, garbanzo beans, beans in soup, soybeans, edamame, tofu or lentils. Do NOT include long green beans.

(169-171)

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

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

Include bean burgers including garden burgers and veggie burgers.

Include falafel and tempeh.

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

//ask of all//

s9q4 During the past month, how many times per day, week, or month did you eat dark green vegetables for example broccoli or dark leafy greens including romaine, chard, collard greens or spinach?

(172-174)

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

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

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

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

//ask of all//

s9q5

During the past month, how many times per day, week, or month did you eat orange-colored vegetables such as sweet potatoes, pumpkin, winter squash, or carrots?

(175-177)

Read only if needed: "Winter squash have hard, thick skins and deep yellow to orange flesh. They include acorn, buttercup, and spaghetti squash."

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

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

Include all forms of sweet potatoes including baked, mashed, casserole, pie, or sweet potatoes fries.

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

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

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

//ask of all//

s9q6

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

(178-180)

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

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

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

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

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

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

Do not include rice or other grains.

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

Section 10: Exercise (Physical Activity)

//ask of all//

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

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

s10q1 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? (181)

1 Yes
2 No [Go to Q10.8]
7 Don't know / Not sure [Go to Q10.8]
9 Refused[Go to Q10.8]

//ask if s10q1=1//

s10q2. What type of physical activity or exercise did you spend the most time doing during the past month? (182-183)

[DO NOT READ]

0 1 Active Gaming Devices (Wii Fit, Dance Dance revolution)	4 1 Rugby
0 2 Aerobics video or class	4 2 Scuba diving
0 3 Backpacking	4 3 Skateboarding
0 4 Badminton	4 4 Skating – ice or roller
0 5 Basketball	4 5 Sledding, tobogganing
0 6 Bicycling machine exercise	4 6 Snorkeling
0 7 Bicycling	4 7 Snow blowing
0 8 Boating (Canoeing, rowing, kayaking, sailing for pleasure or camping)	4 8 Snow shoveling by hand
0 9 Bowling	4 9 Snow skiing
1 0 Boxing	5 0 Snowshoeing
1 1 Calisthenics	5 1 Soccer
1 2 Canoeing/rowing in competition	5 2 Softball/Baseball
1 3 Carpentry	5 3 Squash
1 4 Dancing-ballet, ballroom, Latin, hip hop, etc	5 4 Stair climbing/Stair master
1 5 Elliptical/EFX machine exercise	5 5 Stream fishing in waders
	5 6 Surfing
	5 7 Swimming

- | | |
|----------------------------------------------------|----------------------|
| 1 6 Fishing from river bank or boat | 5 8 Swimming in laps |
| 1 7 Frisbee | 5 9 Table tennis |
| 1 8 Gardening (spading, weeding, digging, filling) | 6 0 Tai Chi |
| 1 9 Golf (with motorized cart) | 6 1 Tennis |
| 2 0 Golf (without motorized cart) | 6 2 Touch football |
| 2 1 Handball | 6 3 Volleyball |
| 2 2 Hiking – cross-country | 6 4 Walking |
| 2 3 Hockey | 6 6 Waterskiing |
| 2 4 Horseback riding | 6 7 Weight lifting |
| 2 5 Hunting large game – deer, elk | 6 8 Wrestling |
| 2 6 Hunting small game – quail | 6 9 Yoga |
| 2 7 Inline Skating | 7 0 Other |
| 2 8 Jogging | |
| 2 9 Lacrosse | |
| 3 0 Mountain climbing | |
| 3 1 Mowing lawn | |
| 3 2 Paddleball | |
| 3 3 Painting/papering house | |
| 3 4 Pilates | |
| 3 5 Racquetball | |
| 3 6 Raking lawn | |
| 3 7 Running | |
| 3 8 Rock Climbing | |
| 3 9 Rope skipping | |
| 4 0 Rowing machine exercise | |

7 7 Don't know / Not Sure[Go to Q10.8]

9 9 Refused [Go to Q10.8]

//if s10q2=1-70//

//s10q2c Interviewer, you've chosen [INSERT s10q2]. Is that Correct?

1 Yes

2 No, go back and change response

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

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

//ask if s10q2=01-70//

s10q3 How many times per week or per month did you take part in this activity during the past month?
(184-186)

1__ Times per week [RANGE = 101-150]

2__ Times per month [RANGE = 201-250]

7 7 7 Don't know / Not sure

9 9 9 Refused

//ask if s10q2=01-70//

s10q4 And when you took part in this activity, for how many minutes or hours did you usually keep at it?
(187-189)

_:__ Hours and minutes [RANGE = 01-59,100-159,200-259,300-359,400-459,500-559,600-659,700-759,800-859,900-959]

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

//ask if s10q2=01-70//

s10q5 What other type of physical activity gave you the next most exercise during the past month?
(190-191)

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

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

//ask if s10q5=01-70//

//s10q5c Interviewer, you've chosen [INSERT s10q5]. Is that Correct?

- 1 Yes
2 No, go back and change response.

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

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

//ask if s10q5=01-70//

s10q6 How many times per week or per month did you take part in this activity during the past month? (192-194)

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

//ask if s10q5=01-70//

s10q7 And when you took part in this activity, for how many minutes or hours did you usually keep at it? (195-197)

_:__	Hours and minutes [RANGE = 01-59,100-159,200-259,300-359,400-459,500-559,600-659,700-759,800-859,900-959]
7 7 7	Don't know / Not sure
9 9 9	Refused

//ask of all//

s10q8 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. (198-200)

1__	Times per week [RANGE=101-150]
2__	Times per month [RANGE=201-250]
8 8 8	Never
7 7 7	Don't know / Not sure
9 9 9	Refused

Section 11: Disability

//ask of all//

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

s11q1 Are you limited in any way in any activities because of physical, mental, or emotional problems? (201)

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

//ask of all//

s11q2 Do you now have any health problem that requires you to use special equipment, such as a cane, a wheelchair, a special bed, or a special telephone? (202)

NOTE: Include occasional use or use in certain circumstances.

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

Section 12: Arthritis Burden

If Q6.9 = 1 (yes) then continue, else go to next section.

//ask of s6q9=1//

Next, I will ask you about your arthritis.

Arthritis can cause symptoms like pain, aching, or stiffness in or around a joint.

s12q1 Are you now limited in any way in any of your usual activities because of arthritis or joint symptoms?

(203)

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

INTERVIEWER INSTRUCTION: If a question arises about medications or treatment, then the interviewer should say: "Please answer the question based on your current experience, regardless of whether you are taking any medication or treatment."

INTERVIEWER NOTE: Q12.2 should be asked of all respondents regardless of employment status.

//ask of s6q9=1//

s12q2 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?

(204)

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

INTERVIEWER INSTRUCTION: If respondent gives an answer to each issue (whether works, type 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."

//ask of s6q9=1//

s12q3 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?

(205)

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

INTERVIEWER INSTRUCTION: If a question arises about medications or treatment, then the interviewer should say: "Please answer the question based on your current experience, regardless of whether you are taking any medication or treatment."

//ask of s6q9=1//

s12q4 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. DURING THE PAST 30 DAYS, how bad was your joint pain ON AVERAGE? Please answer 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.

(206-207)

-- Enter number [00-10]
7 7 Don't know / Not sure
9 9 Refused

Section 13: Seatbelt Use

//ask of all//

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

(208)

Please read:

1 Always
2 Nearly always
3 Sometimes
4 Seldom
5 Never

Do not read:

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

Section 14: Immunization

//ask of all//

s14q1 Now I will ask you questions about seasonal flu vaccine. There are two ways to get the seasonal flu vaccine, one is a shot in the arm and the other is a spray, mist, or drop in the nose called FluMist™. During the past 12 months, have you had either a seasonal flu shot or a seasonal flu vaccine that was sprayed in your nose?

(84)

1 Yes
2 No [Go to Q14.4]
7 Don't know / Not sure [Go to Q14.4]
9 Refused [Go to Q14.4]

//ask if s14q1=1//

s14q2m 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?

(85-90)

-- Enter 2-Digit Month [RANGE=01-12]
7 7 Don't know / Not sure
9 9 Refused

//ask if s14q1=1//

s14q2y 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?

(85-90)

-- -- Enter 4-Digit Year [RANGE=2010-2011]
7 7 7 7 Don't know / Not sure
9 9 9 9 Refused

If vaccine was more than 12 months ago:

S14q2chk "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?"

- 1 **yes [go back to s14q2m]**
- 2 **no [continue]**

//if s14q2chk=2 blank out s14q2m and s14q2y and set s14q2=2//

//ask if s14q1=1//

s14q3 At what kind of place did you get your last seasonal flu vaccine?

(91-92)

[Read if Necessary]

- 0 1 A doctor's office or health maintenance organization (HMO)
- 0 2 A health department
- 0 3 Another type of clinic or health center (Example: a community health center)
- 0 4 A senior, recreation, or community center
- 0 5 A store (Examples: supermarket, drug store)
- 0 6 A hospital (Example: inpatient)
- 0 7 An emergency room
- 0 8 Workplace
- 0 9 Some other kind of place
- 1 0 Received vaccination in Canada/Mexico (Volunteered – Do not read)
- 1 1 A school
- 7 7 Don't know / Not sure (**Probe: "How would you describe the place where you went to get your most recent flu vaccine?"**)

//ask of all//

s14q4 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?

(93)

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

Section 15: Alcohol Consumption

//ask of all//

s15q1 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?

(209-211)

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

//ask if s15q1=101-107; 201-230//

s15q2 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?

(212-213)

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

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

//ask if s15q1=101-107; 201-230//

s15q3 Considering all types of alcoholic beverages, how many times during the past 30 days did you have **X [CATI X = 5 for men, X = 4 for women]** or more drinks on an occasion? (214-215)

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

//ask if s15q1=101-107; 201-230//

s15q4 During the past 30 days, what is the largest number of drinks you had on any occasion? (216-217)

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

Section 16: HIV/AIDS

//ask of all//

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.

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. (218)

1 Yes
2 No [Go to Q16.3]
7 Don't know / Not sure [Go to Q16.3]
9 Refused [Go to Q16.3]

//ask if s16q1=1//

s16q2m Not including blood donations, in what month and year was your last HIV test? (219-224)

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

-- Code 2-Digit 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? (219-224)

NOTE: If response is before January 1985, code "Don't know."

CATI INSTRUCTION: If the respondent remembers the year but cannot remember the month, code the first two digits 77 and the last four digits for the year.

__ __ __ __ Code 4-Digit year [RANGE=1985-2011]

7 7 7 7 Don't know / Not sure

9 9 9 9 Refused / Not sure

//ask of all//

s16q3

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

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

Do any of these situations apply to you?

(225)

1 Yes

2 No

7 Don't know / Not sure

9 Refused

Section 17: Influenza Like Illness (ILI) October 1 2010- April 30 2011 (2010 S26)

//ask if month=01-04//

//ask of all//

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

//ask of all//

S17q1 Last month (i.e September [to change to previous month each month of survey]), were you ill with a fever? (918)

1 = Yes

2 = No – [Go to Q8]

7 = Don't know – [Go to Q8]

9 = Refused – [Go to Q8]

//ask if s17q1=1//

S17q2. Did you also have a cough and/or sore throat? (919)

1 = Yes

2 = No – [Go to Q8]

7 = Don't know – [Go to Q8]

9 = Refused – [Go to Q8]

//ask if s17q2=1//

S17q3. Did you visit a doctor, nurse, or other health professional for this illness? (921)

1 = Yes

2 = No – [Go to Q8]

7 = Don't know – [Go to Q8]

9 = Refused – [Go to Q8]

//ask if s17q3=1//

S17q4. When did you visit the doctor, nurse, or other health professional for this illness? [Interviewer: read off choices; choose the most specific] (920)

- 1 = Within two days of getting ill
- 2 = Within three to 7 days of getting ill
- 3 = More than 7 days of getting ill
- 7 = Don't know
- 9 = Refused

//ask if s17q3=1//

S17q5. What did the doctor, nurse, or other health professional tell you? Did they say... [Interviewer: read off choices] (922)

Interviewer: if respondent says they had either H1N1 or seasonal influenza, please code as '1 = You had influenza or the flu.']

- 1 = You had influenza or the flu,
- 2 = You had some other illness, but not the flu-
- 7 = Don't know/not sure
- 9 = Refused

//ask if s17q5=1//

S17q6. Did you have a flu test that was positive for this illness? Usually a swab from your nose or throat is tested. Would you say... [Interviewer: read off choices] (923)

- 1 Had flu test and it was positive [Interviewer: if respondent says they had either a positive H1N1 or seasonal influenza test result, please code as '1 = Had flu test and it was positive.']
- 2 Had flu test and it was negative
- 3 Did not have flu test
- 7 = Don't know
- 9 = Refused

//ask if s17q3=1//

S17q7. Did you receive Tamiflu® or oseltamivir [*o sel TAM i veer*] or an inhaled medicine called Relenza® or zanamivir [*za NA mi veer*] to treat this illness? (924)

- 1 = Yes
- 2 = No
- 7 = Don't know
- 9 = Refused

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

//ask if adults>1 or s8q7=01-15//

S17q8. Did any other members of your household have a fever with cough or sore throat last month (i.e. September [to change each month of survey])? (925)

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

//ask if s17q8=1 //

S17q9. How many household members, [CATI note: Fill in “including you,” If Q1=1(Yes) and Q2=1(Yes)]

were ill last month (i.e September [to change each month of survey])?
(926-927)

- ___ # persons [range 1-76]
- 8 8 None
- 7 7 Don't know/Not Sure
- 9 9 Refused

CATI note: Apply prior to Q10; If (Q1 = 1(Yes) and Q2 = 1 (Yes)) or Q8 = 1 (Yes) continue to Q10; otherwise, skip to next section.

//ask if (s17q1=1 and s17q2=1) or (s17q8=1)//

S17q10.

How many people in your household, including you, were hospitalized for flu last month (i.e September [to change each month of survey])? [Interviewer, if needed: hospitalized means admitted to a hospital to receive medical treatment.]
(232-233)

- ___ # persons [range 1-76]
- 8 8 None
- 7 7 Don't know/Not Sure
- 9 9 Refused

Optional Modules

Transition to modules and/or state-added questions

ETT11

Please read:

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

Module 9: Cardiovascular Health

//read to all//

I would like to ask you a few more questions about your cardiovascular or heart health.

CATI NOTE: If Core Q6.1 = 1 (Yes), continue. If Core Q6.1 = 2, 7, or 9 (No, Don't know, or Refused), skip Q1.

//ask if s6q1=1//

- Mod9_1.** Following your heart attack, did you go to any kind of outpatient rehabilitation? This is sometimes called "rehab." (312)
- 1 Yes
 - 2 No
 - 7 Don't know / Not sure
 - 9 Refused

CATI NOTE: If Core Q6.3 = 1 (Yes), ask Q2. If Core Q6.3 = 2, 7, or 9 (No, Don't know, or Refused), skip Q2.

//ask if s6q3=1//

- Mod9_2.** Following your stroke, did you go to any kind of outpatient rehabilitation? This is sometimes called "rehab." (313)
- 1 Yes
 - 2 No
 - 7 Don't know / Not sure
 - 9 Refused

//ask of all//

- Mod9_3.** Do you take aspirin daily or every other day? (314)
- 1 Yes **[Go to next module]**
 - 2 No
 - 7 Don't know / Not sure
 - 9 Refused

//ask if mod9_3=2,7,9//

- Mod9_4.** Do you have a health problem or condition that makes taking aspirin unsafe for you? (315)
- If "Yes", ask "Is this a stomach condition?" Code upset stomach as stomach problems.**
- 1 Yes, not stomach related
 - 2 Yes, stomach problems
 - 3 No
 - 7 Don't know / Not sure
 - 9 Refused

Module 10: Actions to Control High Blood Pressure

CATI NOTE: If Core Q4.1 = 1 (Yes); continue. Otherwise, go to next module.

//ask if s4q1=1//

Earlier you stated that you had been diagnosed with high blood pressure.

Are you now doing any of the following to help lower or control your high blood pressure?

Mod10_1. (Are you) changing your eating habits (to help lower or control your high blood pressure)? (316)

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

//ask if s4q1=1//

//ask if s4q1=1//

Mod10_2. (Are you) cutting down on salt (to help lower or control your high blood pressure)? (317)

- 1 Yes
- 2 No
- 3 Do not use salt
- 7 Don't know / Not sure
- 9 Refused

//ask if s4q1=1//

Mod10_3. (Are you) reducing alcohol use (to help lower or control your high blood pressure)? (318)

- 1 Yes
- 2 No
- 3 Do not drink
- 7 Don't know / Not sure
- 9 Refused

//ask if s4q1=1//

Mod10_4. (Are you) exercising (to help lower or control your high blood pressure)? (319)

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

//ask if s4q1=1//

Mod10_5. Has a doctor or other health professional ever advised you to do any of the following to help lower or control your high blood pressure?

(Ever advised you to) change your eating habits (to help lower or control your high blood pressure)?

(320)

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

//ask if s4q1=1//

Mod10_6. (Ever advised you to) cut down on salt (to help lower or control your high blood pressure)? (321)

- 1 Yes
- 2 No
- 3 Do not use salt
- 7 Don't know / Not sure
- 9 Refused

//ask if s4q1=1//

Mod10_7. (Ever advised you to) reduce alcohol use (to help lower or control your high blood pressure)? (322)

- 1 Yes
- 2 No
- 3 Do not drink
- 7 Don't know / Not sure
- 9 Refused

//ask if s4q1=1//

Mod10_8. (Ever advised you to) exercise (to help lower or control your high blood pressure)? (323)

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

//ask if s4q1=1//

Mod10_9. (Ever advised you to) take medication (to help lower or control your high blood pressure)? (324)

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

//ask if s4q1=1//

Mod10_10. Were you told on **two or more different visits** by a doctor or other health professional that you had high blood pressure? (325)

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

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

Module 20: Adult Human Papilloma Virus (HPV)

CATI NOTE: To be asked of respondents between the ages of 18 and 49 years; otherwise, go to next module.

//ask if 18 ≤ s8q1 ≤ 49

NOTE: Human Papilloma Virus (Human Pap·uh·loh·muh Virus); Gardasil (Gar·duh· seel); Cervarix (Serv a rix)

Mod20_1. A vaccine to prevent the human papilloma virus or HPV infection is available and is called the cervical cancer or genital warts vaccine, HPV shot, **[Fill: if female “GARDASIL or CERVARIX”; if male “GARDASIL”]**. Have you EVER had an HPV vaccination? (401)

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

//ask if mod20_1=1//

Mod20_2. How many HPV shots did you receive? (402-403)

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

Module 21: Shingles

CATI NOTE: If respondent is ≤ 49 years of age, go to next module.

//ask if s8q1 > 49//

The next question is about the Shingles vaccine.

Mod21_1. A vaccine for shingles has been available since May 2006; it is called Zostavax[®], the zoster vaccine, or the shingles vaccine. Have you had this vaccine? (404)

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

Module 22: Chronic Obstructive Pulmonary Disease (COPD)

CATI NOTE: If core Q6.8 = 1 (Yes) then continue, else go to next module.

//ask if s6q8=1//

Earlier you said that you had been diagnosed with Chronic Obstructive Pulmonary Disease (COPD).

Mod22_1. Have you ever been given a breathing test to diagnose your COPD, chronic bronchitis, or emphysema? (405)

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

//ask if s6q8=1//

Mod22_2. Would you say that shortness of breath affects the quality of your life? (406)

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

//ask if s6q8=1//

Mod22_3. Other than a routine visit, have you had to see a doctor in the past 12 months for symptoms related to shortness of breath, bronchitis, or other COPD, or emphysema flare? (407)

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

//ask if s6q8=1//

Mod22_4. Did you have to visit an emergency room or be admitted to the hospital in the past 12 months because of your COPD, chronic bronchitis, or emphysema? (408)

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

//ask if s6q8=1//

Mod22_5. How many different medications do you currently take each day to help with your COPD, chronic bronchitis, or emphysema? (409-410)

- Number (01-76)
- 88 None
- 7 7 Don't know / Not sure
- 9 9 Refused

Module 32: Random Child Selection

CATI NOTE: If Core Q8.7 = 88, or 99 (No children under age 18 in the household, or Refused), go to next module.

//ask if s8q7 ne 88, 99//

//if s8q7 = 1 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 Q1]**

//if s8q7 >1 and ne 88 or 99, read// “Previously, you indicated there were [number] children age 17 or younger in your household. Think about those [number] children in order of their birth, from oldest to youngest. The oldest child is the first child and the youngest child is the last.” Please include children with the same birth date, including twins, in the order of their birth.

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

INTERVIEWER PLEASE READ:

//ask if s8q7 ne 88, 99//

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.”

Mod32_1m. What is the birth month and year of the “Xth” child?

(488-493)

-- Code 2-Digit month [Range 01-12]
7 7 Don't know / Not sure
9 9 Refused

//ask if s8q7 ne 88, 99//

Mod32_1y. What is the birth month and year of the “Xth” child?

(488-493)

---- Code 4 Digit year [RANGE 1993-2011]
7 7 7 7 Don't know / Not sure
9 9 9 9 Refused

CATI INSTRUCTION: Calculate the child’s age in months and also in years 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). If respondent gave a year but did not give a month (answered 77,99 to mod32_1m) use January 1st as the birthday of the child.

//ask if 0<=chldage2<18 OR MOD32_1Y = 7777 or 9999//

Mod32_2. Is the child a boy or a girl?

(494)

1 Boy
2 Girl
9 Refused

//ask if 0<=chldage2<18 OR MOD32_1Y = 7777 or 9999 //

Mod32_3. Is the child Hispanic or Latino?

(495)

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

//ask if 0<=chldage2<18 OR MOD32_1Y = 7777 or 9999//

Mod32_4. Which one or more of the following would you say is the race of the child? (496-501)

[Check all that apply]

Please read:

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

Or

- 6 Other [specify] _____

Do not read:

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

//ask if mod32_4=6//

Mod32_4o Enter Response_____

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

//ask if mod32_4 = mul//

Mod32_5. Which one of these groups would you say best represents the child's race? (502)

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

//ask if 0<=chldage2<18 OR MOD32_1Y = 7777 or 9999//

Mod32_6. How are you related to the child? (503)

Please read:

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

Do not read:

7 Don't know / Not sure
9 Refused

Module 35: Child Influenza-Like Illness (ILI) [October 1 2010- April 30 2010]

(2010 mod 34)

selected child from Random Child Selection

//ask module 35 if month=01-04//

//ask if s8q7=1-15 and (0<=chldage1<216 OR mod32_1y=7777 or mod 32_1y = 9999)//

The next questions are about the “Xth” child.

//ask if s8q7=1-15 and (0<=chldage1<216 OR mod32_1y=7777 or mod 32_1y = 9999)//

Mod35_1. Last month (i.e September [to change each month of survey]), did the child have a fever with cough and/or sore throat?

(930)

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

//ask if mod35_1=1//

Mod35_2. Did the child visit a doctor, nurse, or other health professional for this illness?

(931)

1 = Yes
2 = No
7 = Don't know
9 = Refused –

Module 33: Childhood Asthma Prevalence

CATI NOTE: If response to Core Q8.7 = 88 (None) or 99 (Refused), go to next module.

//ask if 0<=chldage2<18 OR MOD32_1Y = 7777 or 9999//

Mod33_1. Has a doctor, nurse or other health professional EVER said that the child has asthma?

(504)

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

//ask of mod33_1=1//

Mod33_2. Does the child still have asthma?

(505)

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

Module 34: Child Immunization (Influenza)

CATI NOTE: If Core Q8.7 = 88, or 99 (No children under age 18 in the household, or Refused), go to next module.

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

//ask if (chldage1 ≥ 6 months and $0 \leq \text{chldage2} < 18$ years) OR MOD32_1Y = 7777 or 9999 //

Mod34_1. During the past 12 months, has [Fill: he/she] had a seasonal flu vaccination? There are two types of flu vaccinations. One is a shot and the other is a spray in the nose? (506)

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

//ask if mod34_1=1//

Mod34_2m. During what month and year did [Fill: he/she] receive his/her most recent seasonal flu vaccination? The seasonal flu vaccination may have been either the flu shot or the flu spray. The flu spray is the flu vaccination that is sprayed the nose?? (507-512)

- Enter Month [Range 01-12]
- 7 7 Don't know / Not sure
- 9 9 Refused

//ask if mod34_1=1//

Mod34_2y. During what month and year did [Fill: he/she] receive his/her most recent seasonal flu vaccination? The seasonal flu vaccination may have been either the flu shot or the flu spray. The flu spray is the flu vaccination that is sprayed the nose?? (507-512)

- Enter Year [2010-2011]
- 7 7 7 7 Don't know / Not sure
- 9 9 9 9 Refused

```
{!if [mod34_2y#2011] and ([mod34_2m] > [datehr+4.2])
!reset mod34_y }
```

If vaccine was more than 12 months ago:

Mod34chk "I'm sorry, but you said [Fill: he/she] had a flu vaccination within the past 12 months, but you have just given me a date for [Fill: his/her] most recent vaccination that is more than 12 months ago. Has [Fill: he/she] had a flu vaccination within the past 12 months?"

- 1 yes [go back to mod34_2m]
- 2 no [continue]

//if mod34chk=2 blank out mod34_2m and mod34_2y and set mod34_1=2//

//ask if mod34_1=1//

Mod34_3. At what kind of place did [he/she] get [his/her] last seasonal flu vaccine? (513-514)

- 0 1 A doctor's office or health maintenance organization (HMO)
- 0 2 A health department

- 0 3 Another type of clinic or health center (Example: a community health center)
- 0 4 A senior, recreation, or community center
- 0 5 A store (Examples: supermarket, drug store)
- 0 6 A hospital (Example: inpatient)
- 0 7 An emergency room
- 0 8 Workplace
- 0 9 Some other kind of place
- 1 0 Received vaccination in Canada/Mexico (Volunteered – Do not read)
- 1 1 A school
- 7 7 Don't know / Not sure (**Probe: "How would you describe the place where you went to get your most recent flu vaccine?"**)
- 9 9 Refused

State Added 6: Child Questions (2010 state 1)

{NOTE: CT6_1-CT6_4 deliberately skipped in 2011 questionnaire}

//ask if s8q7=1-15 and ([0<=chldage1<216] OR (mod32_1y=7777 or mod 32_1y = 9999))

//Xth=selected child from Mod32 selection//

CT6_5 (CHILD5) Was this child breastfed?

- 1 Yes
- 2 No **{Go to CT6_7}**
- 7 Don't know / Not sure **{Go to CT6_7}**
- 9 Refused **{Go to CT6_7}**

()

//Ask if CT6_5=1; Else go to CT6_7//

CT6_6 (CHILD6) For about how many months was this child breastfed?

- Number of Months **[RANGE 01-60]**
- 77 Don't know / Not sure
- 99 Refused

()

//ask if s8q7=1-15 and ([0<=chldage1<216] OR (mod32_1y=7777 or mod 32_1y = 9999))

PCT6_7:

About how much does this child weigh without shoes?

- P Pounds
- K Kilograms
- =
- 7 Don't Know
- 9 Refused

//if pct6_7 = P go to CT6_7 to enter weight.//

CT6_7 (CHILD7) About how much does this child weigh without shoes?

()

NOTE: If respondent answers in metrics, put "9" in column 407.

Round fractions up

— — — Weight Range = 5-776
(pounds)
7 7 7 Don't know / Not sure
9 9 9 Refused

// ask if ct6_7 = 5-776//

Ct6_7_A Just to double-check, you indicated \:ct6_7: pounds as your child's weight.
IS THIS CORRECT?

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

//ifpct6_7=K go to CT6_7M to enter weight//

//if pct6_7=7 (Don't Know) or 9 (Refused), autofill during post-processing CT6_7 with 7777 (Don't Know) or 9999(Refused)//

CT6_7M (CHILD7) About how much does this child weigh without shoes?

()

NOTE: If respondent answers in metrics, put "9" in column 407.

Round fractions up

— — — Weight Range = 2-352
kilograms)
7 7 7 Don't know / Not sure
9 9 9 Refused

//ask if CT6_7M =2-352 //

Ct6_7AM Just to double-check, you indicated \:ct6_7M: kilograms as your child's weight.
IS THIS CORRECT?

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

//ask if s8q7=1-15 and ([0<=chldage1<216] OR (mod32_1y=7777 or mod 32_1y = 9999))

PCT6_8:

About how tall is this child without shoes?

F HEIGHT GIVEN IN FEET
M HEIGHT GIVEN IN CENTIMETERS
=
7 Don't Know
9 Refused

//If PCT6_8=F, go to CT6_8 to enter height.//

//if pct6_8=7 (Don't Know) or 9 (Refused), autofill during post-processing CT6_8 with 7777 (Don't Know) or 9999(Refused)//

//ask if PCT6_8=F//

CT6_8 (CHILD8) About how tall is this child without shoes?

()

NOTE: If respondent answers in metrics, put "9" in column 411.

Round fractions down

__ / __	Height [Range = 015-805]
(f t / inches/)	
9 9 7	Don't know / Not sure
9 9 9	Refused

//ask if ct6_8=015-805//

Ct6_8a Just to double check, you indicated that the child is \:FT1: FEET \:INCHES1: INCHES TALL IS THIS CORRECT?

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

//ifpct6_8=M, go to CT6_8M to enter height.//

CT6_8M (CHILD8) About how tall is this child without shoes?

()

NOTE: If respondent answers in metrics, put "9" in column 411.

Round fractions down

__ / __	Height Range = 38-254
(meters/centimeters)	
7 7 7	Don't know / Not sure
9 9 9	Refused

//ask if ct6_8M =38-254//

Ct6_8AM Just to double check, you indicated that the child is \:M1: METERS\:CENT1: CENTIMETERS TALL IS THIS CORRECT?

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

//ask if s8q7=1-15 and ([0<=chldage1<216] OR (mod32_1y=7777 or mod 32_1y = 9999))

CT6_9 (CHILD9) On an average day, not including time on the computer, about how many hours did this child watch television, videos or DVDs?

()

__	Enter number of hours [1-24]
33	Less than one, but more than none
88	None
77	Don't know
99	Refused

//ask if s8q7=1-15 and ([0<=chldage1<216] OR (mod32_1y=7777 or mod 32_1y = 9999))

CT6_10 (CHILD10) On an average day, about how many hours did this child spend playing video games or on the computer? Please include time spent on the Internet or playing computer games, but not doing schoolwork on the computer.

()

__	Enter number of hours [01-24]
33	Less than one, but more than none
88	None
77	Don't know
99	Refused

//ask if s8q7=1-15 and ([0<=chldage1<216] **OR** (mod32_1y=7777 or mod 32_1y = 9999))

CT6_11 (CHILD11) On an average day, how many glasses, bottles or cans of soda, such as Coke or Sprite, or other sweetened drinks, such as fruit punch or Sunny Delight, did this child drink. Do not include diet or sugar free drinks.

()

[NOTE: That would be a large glass or a 12 oz. can or bottle. The average juice pack is 6 oz or ½ a can]

[DO NOT READ. THIS ALSO INCLUDES DRINKS SUCH AS, HAWAIIAN PUNCH, HI-C, SNAPPLE, GATORADE, OTHER SPORTS DRINKS WITH ADDED SUGAR, AND SUGAR SWEETENED MILK – E.G. COFFEE MILK, CHOCOLATE MILK]

__ __	[range 1-15] glasses, cans or bottles
88	None
77	Don't know
99	Refused

//ask if s8q7=1-15 and ([0<=chldage1<216] **OR** (mod32_1y=7777 or mod 32_1y = 9999))

CT6_12 (CHILD12) In the past week, how many times did the child eat fast food or pizza at school, at home, or at fast-food restaurants, carryout or drive thru.

()

[Read if Necessary: “Such as food you get at McDonald’s, Burger King, Taco Bell, KFC, or Pizza Hut.”]

[IF STRONGLY NEEDED, SAY “Foods from American-style fast food restaurants.”]

1__	PER DAY [101-115]
2__	PER WEEK [201-284]
888	None
777	Don't know
999	Refused

//ask if s8q7=1-15 and ([0<=chldage1<216] **OR** (mod32_1y=7777 or mod 32_1y = 9999))

CT6_13 (CHILD13) In the past 12 months has that child seen a dental provider?

1	Yes
2	No
7	Don't Know
9	Refused

State-Added 7. HOUSEHOLD CLEANING PRODUCTS

//ask of all//

CT7_1. How often do you read the warning label or ingredient list on the household cleaning products you purchase?

- 1 Often
- 2 Sometimes
- 3 Never
- 7 Don't know/Not sure
- 9 Refused

//ask of all//

CT7_2. Do you think some household cleaning products contain harmful chemicals?

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

//ask of all//

CT7_3 Have you ever purchased green cleaning products?

[INTERVIEWER: READ IF NECESSARY]

[A green cleaning product is defined as a product that contains no harmful chemicals and thus has a reduced effect on human health & the environment compared to other products that serve the same purpose. It is considered “environmentally friendly”].

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

State-Added 8. DERMITIS

//ask of all//

CT8_1 DURING THE PAST 12 MONTHS, have you had dermatitis, eczema, or any other red, inflamed skin rash?

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

GLOBAL UNIVERSE: The following questions would be asked of adults who are currently employed or were employed at some time in the past 12 months (if Q8.9 = 1,2, or 4) , and who also reported having dermatitis, eczema, or any other red, inflamed skin rash in the past 12 months (8.1 = YES).

//ask if s8q9=1,2,4 and ct8_1=1//

CT8_2 . Have you ever seen a doctor or other health professional for your skin condition?

- 1 Yes (Go to D.3)
- 2 No (Go to D.4)

- 7 Don't know/Not sure (**Go to D.4**)
- 9 Refused

// ask if ct8_2=1//

CT8_3 . Have you been told by a doctor or other health professional that your skin condition was probably work-related?

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

//ask if s8q9=1,2,4 and ct8_1=1//

CT8_4 Do you think your skin condition was probably work-related?

- 1 Yes (**Go to D.5**)
- 2 No (**Go to D.6**)
- 7 Don't know/Not sure (**Go to D.6**)
- 9 Refused (**Go to D.6**)

//ask if CT8_4=1//

CT8_5 Did you tell a doctor or health professional that your skin condition was work- related?

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

//ask if s8q9=1,2,4 and ct8_1=1//

CT8_6 DURING THE PAST 12 MONTHS, did you stop working, change jobs, or make a major change in your work activities, such as taking on lighter duties, because of your skin condition?

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

State-Added 9: GENOMICS

//ask of all//

Next, I'm going to ask you several questions about family health history. Family health history is a record of your diseases or medical conditions, as well as those of your parents, grandparents, brothers, sisters, children, and other blood relatives.

CT9_1. How important do you think knowledge of your family health history is to your personal health?

READ LIST

- 1 Very important
- 2 Somewhat important
- 3 Not at all important

DO NOT READ

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

//ask of all//

CT9_2 Have you ever collected health information from your relatives for the purpose of developing your family health history?

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

//ask if CT9_2=1//

CT9_3. Have you shared your personal record of your family health history with your doctor or health care provider?

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

//ask if CT9_2=1//

CT9_4. Have you shared your personal record of your family health history with any family members?

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

Asthma Call-Back Permission Script

//ask if s6q4=1 (adult asthma) OR if mod33_1=1 (child asthma)

Ast1. We would like to call you again within the next 2 weeks to talk in more detail about (your/your child's) experiences with asthma. The information will be used to help develop and improve the asthma programs in Connecticut. The information you gave us today and any you give us in the future will be kept confidential. If you agree to this, we will keep your phone number on file, separate from the answers collected today. Even if you agree now, you may refuse to participate in the future. Would it be okay if we called you back to ask additional asthma-related questions at a later time?

(515)

- 1 Yes
- 2 No

// if s6q4=1 (adult asthma) OR if mod33_1=1 (child asthma) randomly select aflag for follow up//

acflag

if s6q4=1 (adult asthma)

1 adult with asthma

2 adult had asthma

if mod33_1=1

3 child with asthma

4 child had asthma

ETT12

Closing statement

//Please read to all:

That was my last question. Everyone's answers will be combined to give us information about the health practices of people in Connecticut. Thank you very much for your time and cooperation.

Language Indicator

//ask of all//

Lang1. INTERVIEWER: DO NOT ASK QUESTION:

IN WHAT LANGUAGE WAS THIS INTERVIEW COMPLETED?

01 ENGLISH

02 SPANISH

coretime

Activity List for Common Leisure Activities (To be used for Section 10: Physical Activity)

Code Description (Physical Activity, Questions 10.2 and 10.5 above)

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