

Attachment 4: Demographic Questions

June 21, 2010

Based on the approved data collection instrument downloaded from
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Last OMB-approved question: #28

This version includes:

- Minor modifications to existing questions, and
- Proposed new questions

Attachment 4: Demographic Questions

Form Approved
OMB No. 0920-0572
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Demographic Questions

(Questions can be used in intercept interviews, telephone interviews, online research, and focus group screeners.)

1. Gender:
 - Male
 - Female

2. In which of the following categories does your age fall:
 - under 18 years of age
 - 18-24 years of age
 - 25-34 years of age
 - 35-44 years of age
 - 45-54 years of age
 - 55-64 years of age
 - 65-74 years of age
 - 75 years of age or older

3. What is the highest level of education you have completed?
 - Grade school
 - Less than high school graduate/some high school
 - High school graduate or completed GED
 - Some college or technical school
 - Received four-year college degree
 - Some post graduate studies
 - Received advanced degree
 - Other: _____

4. Please tell me your race or ethnic background. Are you?
Ethnicity:
 - Hispanic or Latino
 - Not Hispanic or Latino
Race:
 - White/Caucasian
 - Black or African-American
 - American Indian or Alaska Native
 - Native Hawaiian or Other Pacific Islander
 - Asian
 - Vietnamese
 - Cambodian
 - Filipino
 - Japanese
 - Korean
 - Chinese

Variant: Question Stem Changed

Please indicate your race or ethnic background. Are you?

Ethnicity:

- 1 Hispanic or Latino
- 2 Not Hispanic or Latino

Race:

SELECT ONE OR MORE.

- 1 White/Caucasian
- 2 Black or African-American
- 3 American Indian or Alaska Native
- 4 Native Hawaiian or Other Pacific Islander
- 5 Asian
 - 6 Vietnamese
 - 7 Cambodian
 - 8 Filipino
 - 9 Japanese
 - 10 Korean
 - 11 Chinese

5. Were you born in the United States?

- Yes
- No

6. In what state, city, and zip code do you currently live?

Variant:

In what state, city and zip code do you currently live? ENTER FIVE DIGIT ZIP.

7. What is your current occupational status? Would you say...

- Employed
- Unemployed
- Homemaker
- Student
- Retired, or
- Disabled
- Other: _____

8. What is your current job title? What term would you use to describe the profession you are in?

9. What is your marital status?

- Married
- Living as married

- Divorced
- Widowed
- Separated, or
- Single, never been married

10. Which of the following categories best describe your total, annual household income?

- Under \$20,000/year
- \$20,001 - \$40,000/year
- \$30,001 - \$60,000/year
- \$60,001 - \$80,000/year
- \$80,001 - \$100,000/year
- Over \$100,000/year

11. Number of children (under age 18) living in the household:

- None
- 1-2 children
- 3-4 children
- 5 or more children

12. Do you currently rent or own your home?

- Own
- Rent
- Occupied without paying monetary rent

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Additional Demographic Questions (approved in 2009)

13. What is your current relationship status? Are you...?

- Single
- Married to a man
- Married to a woman
- In a relationship with a man
- In a relationship with a woman
- Divorced or Widowed
- Refused

14. Have you ever had an HIV test?

- Yes
- No

15. What was the result of your last HIV test?

- Positive
- Negative
- Don't know

16. And when was the last time you had an HIV test? [RECORD DATE]

17. Now I am going to ask you to describe your sexual identity. Would you describe yourself as:

- a. Homosexual or "gay" or same gender loving
- b. Bisexual or two spirited
- c. Other, specify _____
- d. Heterosexual or "straight"
- e. Don't know
- f. Decline to answer

18. Within the past 6 months, who have you primarily had sex with?

- A male
- A female
- Haven't had sex in the last 6 months
- Refused

19. Within the past 6 months, have you had unprotected sex? By "unprotected sex" we mean having sex without a condom.

- Yes
- No
- Refused

20. Within the past 6 months, have you had sex with more than 1 partner?

- Yes
- No

Additional Demographic Questions (approved in 2009)

21. Are you the parent or guardian of a [boy/girl], ages [INSERT range] years?

- Yes
- No

22. What is your age? _____ (record age)

23. Are you or have you ever been sexually active?

- Yes
- No

24. Do you feel comfortable reading materials that require a 7th grade reading level?

- Yes
- No

25. What is your job title or role?

- [Public Health Professional: e.g. epidemiologist, health communicator, health educator, etc]
- [Healthcare Provider: e.g. doctor (MD, DO), nurse, nurse practitioner, physician's assistant]
- [General Consumer: neither a Public Health Professional nor a Healthcare Provider]
- [Other: _____]

26. Describe your work environment:

- Hospital
- Emergency room
- Clinic
- Office
- Field
- Academic
- Research
- Home or telecommute
- [Other: _____]

27. What is your primary specialty?

- ___ Family Medicine
- ___ Internal Medicine
- ___ Obstetrics/Gynecology
- ___ Oncology
- ___ Pathology
- ___ Psychiatry

___ Clinical Genetics
___ Other (please specify): _____

28. Do you have a subspecialty?

___ Yes (If Yes, please specify, i.e. pediatric oncology, gynecologic oncology, etc.):

___ No

Additional Demographic Questions (proposed June 2010)

29. Have you smoked at least 100 cigarettes in your entire life? SINGLE RESPONSE.

- 1 Yes
- 2 No

30. Do you now smoke cigarettes every day, some days, or not at all? SINGLE RESPONSE.

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

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

- 1 Yes
- 2 No

32. About how long has it been since you completely quit smoking cigarettes? FILL IN NUMBER FOR UNIT THAT APPLIES

- A _____ Days
- B _____ Weeks
- C _____ Months
- D _____ Years

33. On how many of the past 30 days did you smoke cigarettes?

Enter number: _____

34. On the average, on those (INSERT QUESTION #33 RESPONSE) days, how many cigarettes did you usually smoke each day?

FILL IN NUMBER _____

35. Which of these best describes the area in which you work most of the time?

- 1 Mainly work indoors
- 2 Mainly work outdoors
- 3 Travel to different buildings or sites
- 4 In a motor vehicle, or
- 5 Somewhere else
- 6 Varies