Attachment 1

CHIS 2011 Cancer Control Module (CCM) and Demographic Core Questionnaire Items

CALIFORNIA HEALTH INTERVIEW SURVEY 2011

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MODULE A – CANCER SCREENING

> **PROGRAMMING NOTE QA11_A1:**
> **IF (AGE < 40 OR AGE IS UNKNOWN), GO TO PROGRAMMING NOTE QA11_A19;**
> **ELSE CONTINUE WITH QA11_A1**

QA11_A1   A stool or fecal blood test is done at home to check for colon cancer. You send your stool sample to the doctor's office or lab for testing. Have you ever done a stool or fecal blood test?

[IF NEEDED, SAY: "Do not include over-the-counter test kits from a drugstore or pharmacy."]

[IF NEEDED, SAY: "Do not include tests done at the doctor's office."]

    YES...1
    NO..2 **[GO TO QA11_A4]**
    REFUSED...-7 **[GO TO QA11_A4]**
    DON'T KNOW...-8 **[GO TO QA11_A4]**

QA11_A2   When did you do your most recent blood test using a home kit to check for colon cancer?

    A YEAR AGO OR LESS...1
    MORE THAN 1 YEAR AGO UP TO
    2 YEARS AGO...2
    MORE THAN 2 YEARS AGO UP TO
    5 YEARS AGO...3
    MORE THAN 5 YEARS AGO...............................4
    REFUSED..-7
    DON'T KNOW...-8

QA11_A3   What was the main reason you had your most recent stool blood test using a home kit? Was it…

    Part of a routine physical exam,...............................1
    Because of a problem, or..2
    Some other reason?..3
    REFUSED..-7
    DON'T KNOW...-8

QA11_A4   How much did you pay for your most recent stool blood test using a home kit—was it none, some or all of the cost?

                    NONE OF THE COST..1   **[GO TO QA11_A5]**
                    SOME OF THE COST...2   **[GO TO QA11_A5]**
                    ALL OF THE COST..3
                    REFUSED..-7
                    DON'T KNOW..-8

QA11_A5   Was the test provided through a special low-cost program?

                    YES...1
                    NO...2
                    REFUSED..-7
                    DON'T KNOW..-8

QA11_A6   A sigmoidoscopy and a colonoscopy are both tests that examine the bowel by inserting a tube in the rectum. The difference is that during a sigmoidoscopy, you are awake and can drive yourself home after the test; however, during a colonoscopy, you may feel sleepy and you need someone to drive you home. Have you ever had a colonoscopy?

                    YES...1
                    NO...2 **[GO TO QA11_A11]**
                    REFUSED..-7 **[GO TO QA11_A11]**
                    DON'T KNOW..-8 **[GO TO QA11_A11]**

QA11_A7   When did you have your most recent colonoscopy to check for colon cancer?

                    A YEAR AGO OR LESS...1
                    MORE THAN 1 UP TO 5 YEARS AGO.................2
                    MORE THAN 5 UP TO 10 YEARS AGO..............3
                    MORE THAN 10 YEARS AGO.............................4
                    REFUSED..-7
                    DON'T KNOW..-8

QA11_A8   What was the main reason you had your most recent colonoscopy? Was it…

                    Part of a routine physical exam,...............................1
                    Because of a problem, or..2
                    Some other reason?..3
                    REFUSED..-7
                    DON'T KNOW..-8

PROGRAMMING NOTE QA11_A10:
IF QA11_A7= 1 (MOST RECENT COLONOSCOPY A YEAR AGO OR LESS), THEN CONTINUE
WITH QA11_A9;
ELSE CONTINUE WITH QA11_A11

QA11_A9   How much did you pay for your most recent colonoscopy—was it none, some or all of the cost?

        NONE OF THE COST...1   **[GO TO QA11_A10]**
        SOME OF THE COST...2   **[GO TO QA11_A10]**
        ALL OF THE COST..3
        REFUSED..-7
        DON'T KNOW...-8

QA11_A10   Was the colonoscopy provided through a special low-cost program?

        YES...1
        NO..2
        REFUSED..-7
        DON'T KNOW...-8

QA11_A11   Have you ever had a sigmoidoscopy?

        YES...1
        NO..2 **[GO TO QA11_A16]**
        REFUSED..-7 **[GO TO QA11_A16]**
        DON'T KNOW...-8 **[GO TO QA11_A16]**

QA11_A12   When did you have your most recent sigmoidoscopy to check for colon cancer?

        A YEAR AGO OR LESS...1
        MORE THAN 1 UP TO 5 YEARS AGO................2
        MORE THAN 5 UP TO 10 YEARS AGO..............3
        MORE THAN 10 YEARS AGO.............................4
        REFUSED..-7
        DON'T KNOW...-8

QA11_A13   What was the main reason you had your most recent sigmoidoscopy? Was it…

        Part of a routine physical exam,...............................1
        Because of a problem, or..2
        Some other reason?...3
        REFUSED..-7
        DON'T KNOW...-8

QA11_A14   How much did you pay for your most recent sigmoidoscopy—was it none, some or all of the cost?

NONE OF THE COST...1   **[GO TO QA11_A15]**
SOME OF THE COST...2   **[GO TO QA11_A15]**
ALL OF THE COST...3
REFUSED..-7
DON'T KNOW...-8

QA11_A15   Was the sigmoidoscopy provided through a special low-cost program?

YES...1
NO...2
REFUSED..-7
DON'T KNOW...-8

QA11_A16   In the past 5 years, has a doctor recommended that you have a sigmoidoscopy, colonoscopy, or stool blood test?

YES...1
NO...2
DID NOT GO TO A DOCTOR
IN PAST 5 YEARS...92
REFUSED..-7
DON'T KNOW...-8

PROGRAMMING NOTE QA11_A17:
IF QA11_A1 = 2 (NEVER HAD FOBT) AND QA11_A6 = 2 (NEVER HAD COLONOSCOPY) AND
QA11_A11 = 2 (NEVER HAD SIGMOIDOSCOPY) CONTINUE WITH QA11_A17 AND DISPLAY
"never had";
ELSE IF QA11_A1 ≠ 1 (MOST RECENT FOBT OVER 1 YEAR AGO) AND QA11_A7 ≠ 1, 2, OR 3
(MOST RECENT COLONOSCOPY OVER 10 YEARS AGO) AND QA11_A812 ≠ 1 OR 2 (MOST
RECENT SIGMOIDOSCOPY OVER 5 YEARS AGO) CONTINUE WITH QA11_A17 AND DISPLAY
"not had" AND "recently";
ELSE GO TO PROGRAMMING NOTE QA11_A18

QA11_A17   What is the ONE most important reason why you have {never had/not had} one of these
exams {recently}?

> NO REASON/NEVER THOUGHT ABOUT IT.....1
> DIDN'T KNOW I NEEDED
> THIS TYPE OF TEST..2
> DOCTOR DIDN'T TELL ME I NEEDED IT..........3
> HAVEN'T HAD ANY PROBLEMS........................4
> PUT IT OFF/LAZINESS......................................5
> TOO EXPENSIVE/NO INSURANCE/COST.........6
> TOO PAINFUL, UNPLEASANT, OR
> EMBARRASSING..7
> HAD ANOTHER TYPE OF
> COLORECTAL EXAM...8
> DON'T HAVE A DOCTOR....................................9
> OTHER..91
> REFUSED...-7
> DON'T KNOW..-8

PROGRAMMING NOTE QA11_A18:
IF FEMALE GO TO QA11_A20;
ELSE CONTINUE WITH QA11_A18

QA11_A18   Have you ever <u>heard of</u> a PSA or "prostate-specific antigen" test to detect prostate cancer? A
PSA test is a blood test to detect prostate cancer.

> YES..1
> NO...2 **[GO TO PN QA11_A44]**
> REFUSED...-7 **[GO TO PN QA11_A44]**
> DON'T KNOW..-8 **[GO TO PN QA11_A44]**

QA11_A19   Have you ever had a PSA test?

[IF NEEDED, SAY: "A PSA test is a blood test to detect prostate cancer. It is also called a prostate-specific antigen test."]

YES...1
NO...2 **[GO TO QA11_A24]**
REFUSED..-7 **[GO TO QA11_A24]**
DON'T KNOW..-8 **[GO TO QA11_A24]**

QA11_A20   When did you have your most recent PSA test?

A YEAR AGO OR LESS...1
MORE THAN 1 UP TO 2 YEARS AGO...............2
MORE THAN 2 UP TO 3 YEARS AGO...............3
MORE THAN 3 UP TO 5 YEARS AGO...............4
MORE THAN 5 YEARS AGO...............................5
REFUSED..-7
DON'T KNOW..-8

QA11_A21   What was the main reason you had this PSA test – was it part of a routine physical exam, because of a problem, or some other reason?

Part of a routine physical exam,...............................1
Because of a problem, OR.......................................2
Some other reason?...3
REFUSED..-7
DON'T KNOW..-8

PROGRAMMING NOTE QA11_A22:
IF QA11_A20 = 1 (MOST RECENT PSA TEST A YEAR AGO OR LESS), THEN CONTINUE WITH QA11_A22;
ELSE CONTINUE WITH QA11_A24

QA11_A22   How much did you pay for your most recent PSA test—was it none, some or all of the cost?

NONE OF THE COST...1   **[GO TO QA11_A23]**
SOME OF THE COST...2   **[GO TO QA11_A23]**
ALL OF THE COST..3
REFUSED..-7
DON'T KNOW..-8

QA11_A23   Was the PSA test provided through a special low-cost program?

YES...1
NO...2
REFUSED..-7
DON'T KNOW..-8

PROGRAMMING NOTE QA11_A24:
IF QA11_A19 = 1 DISPLAY "before you had the PSA test, did" AND "it";
ELSE DISPLAY "Did" AND "the PSA test"

QA11_A24 {Before you had the PSA test, did/Did} a doctor ever talk with you about the advantages and disadvantages of having {it/the PSA test}?

YES...1
NO..2
REFUSED..-7
DON'T KNOW...-8

PROGRAMMING NOTE QA11_A25:
IF QA11_A19 = 1 DISPLAY "before you had the PSA test" AND "it";
ELSE DISPLAY "Did" AND "the PSA test"

QA11_A25 {Before you had the PSA test, did/Did} a doctor ever tell you that some doctors recommend having {it/the PSA test} and others do not?

YES...1
NO..2
REFUSED..-7
DON'T KNOW...-8

QA11_A26 Did a doctor or other health professional ever recommend that you have a PSA test?

YES...1
NO..2
REFUSED..-7
DON'T KNOW...-8

PROGRAMMING NOTE QA11_A27:
IF MALE OR AGE < 30, GO TO PROGRAMMING NOTE QA11_A44;
ELSE CONTINUE WITH QA11_A27 (INCLUDING WOMEN WITH AGE UNKNOWN)

QA11_A27 In the past 12 months, has a doctor examined your breasts for lumps?

[IF NEEDED, SAY: "This is when a doctor touches your breasts to check for bumps, cysts, or abnormal growth."]

YES...1
NO..2
REFUSED..-7
DON'T KNOW...-8

QA11_A28   Have you ever had a mammogram?

[IF NEEDED, SAY: "A mammogram is an x-ray taken of each breast separately by a machine that flattens or squeezes each breast."]

YES...1
NO..2 **[READ DEFINITION, IF STILL NO, GO TO QA11_A42]**
REFUSED...-7 **[GO TO PN QA11_A44]**
DON'T KNOW...-8 **[GO TO PN QA11_A44]**

QA11_A29   How many mammograms have you had in the last 6 years? Your best estimate is fine.

_____ MAMMOGRAMS

NONE...0 **[GO TO QA11_A42]**
REFUSED...-7
DON'T KNOW...-8

QA11_A30   How long ago did you have your most recent mammogram?

A YEAR AGO OR LESS..1
MORE THAN 1 UP TO 2 YEARS AGO...............2
MORE THAN 2 UP TO 3 YEARS AGO...............3
MORE THAN 3 UP TO 5 YEARS AGO...............4
MORE THAN 5 YEARS AGO..............................5
REFUSED...-7 **[GO TO PN QA11_A44]**
DON'T KNOW...-8 **[GO TO PN QA11_A44]**

QA11_A31   Was your most recent mammogram recommended by a doctor?

YES...1
NO...2
REFUSED...-7
DON'T KNOW...-8

PROGRAMMING NOTE QA11_A32:
IF QA11_A30 = 3, 4, OR 5 (MAMMOGRAM MORE THAN 2 YEARS AGO), THEN GO TO QA11_A35;
ELSE CONTINUE WITH QA11_A32

QA11_A32   Tell me the main reason you had a mammogram. Was it…

[IF NEEDED, SAY: "The main reason is the most important reason."]

Part of a routine exam,	1
Because of a specific breast problem,	2
A follow-up to a previously identified breast problem, or	3
Due to family history?	4
REFUSED	-7
DON'T KNOW	-8

PROGRAMMING NOTE QA11_A33:
IF QA11_A30 = 1 (MOST RECENT MAMMOGRAM A YEAR AGO OR LESS), THEN CONTINUE WITH QA11_A33;
ELSE CONTINUE WITH QA11_A35

QA11_A33   How much did you pay for your most recent mammogram—was it none, some or all of the cost?

NONE OF THE COST	1	**[GO TO QA11_A34]**
SOME OF THE COST	2	**[GO TO QA11_A34]**
ALL OF THE COST	3	
REFUSED	-7	
DON'T KNOW	-8	

QA11_A34   Was the mammogram provided through a special low-cost program?

YES	1
NO	2
REFUSED	-7
DON'T KNOW	-8

QA11_A35   Have you ever had a mammogram where the results were not normal?

YES	1	
NO	2	**[GO TO QA11_A42]**
REFUSED	-7	**[GO TO QA11_A42]**
DON'T KNOW	-8	**[GO TO QA11_A42]**

QA11_A36   Have you ever had an operation to remove a lump from your breast?

YES	1	
NO	2	**[GO TO QA11_A40]**
DON'T KNOW	-7	**[GO TO QA11_A40]**
REFUSED	-8	**[GO TO QA11_A40]**

QA11_A37   Did the lump turn out to be cancer?

        YES...1 **[GO TO QA11_A39]**
        NO..2
        REFUSED..-7
        DON'T KNOW...-8

QA11_A38   How many operations have you had to remove a lump that wasn't cancer?

        _____ NUMBER OF OPERATIONS   **[GO TO QA11_A40]**

        REFUSED..-7 **[GO TO QA11_A40]**
        DON'T KNOW...-8 **[GO TO QA11_A40]**

QA11_A39   Tell me how you first found out about your breast cancer. Was it by…

        Finding it yourself by accident,................................1
        Finding it yourself during a
        self breast examination,..2
        Your husband or partner finding it,..........................3
        Your doctor finding it during a routine
        breast exam,..4
        Finding it by a mammogram, or.............................5
        Some other way? (SPECIFY:_____).......6
        DON'T KNOW...-7
        REFUSED..-8

QA11_A40   Did you have any other tests and/or surgery when your mammogram was not normal?

        YES...1
        NO..2 **[GO TO QA11_A42]**
        DON'T KNOW...-7 **[GO TO QA11_A42]**
        REFUSED..-8 **[GO TO QA11_A42]**

QA11_A41   What additional tests and/or surgery did you have?

    [CODE ALL THAT APPLY]
    [IF NEEDED, SAY: "Any others?"]

        NO TESTS/NO SURGERY.....................................1
        MASTECTOMY (SURGERY TO
        REMOVE BREAST)...2
        LUMPECTOMY (SURGERY TO
        REMOVE LUMP)..3
        NEEDLE BIOPSY...4
        ULTRASOUND TEST...5
        ANOTHER MAMMOGRAM................................6
        CLINICAL BREAST EXAM................................7
        REFUSED..-7
        DON'T KNOW...-8

PROGRAMMING NOTE QA11_A42:
IF QA11_A28 = 2 OR QA11_A29 = 0 OR QA11_A30 = 3, 4, OR 5, CONTINUE WITH QA11_A42;
ELSE GO TO PROGRAMMING NOTE QA11_A43;

QA11_A42   In the past 2 years, has a doctor recommended that you have a mammogram?

           YES...1
           NO...2
           REFUSED...-7
           DON'T KNOW...-8

PROGRAMMING NOTE QA11_A43:
IF QA11_A42 = 1 (YES, DOCTOR RECOMMENDED A MAMMOGRAM) AND (QA11_A28 = 2 OR
QA11_A29 = 0 OR QA11_A30 = 3, 4, OR 5), CONTINUE WITH QA11_A43;
IF QA11_A30 = 3, 4, 5, OR -8 (MOST RECENT MAMMOGRAM > 2 YEARS AGO or DK),
DISPLAY "NOT had a mammogram in the past 2 years";
IF QA11_A28 = 2 (NEVER HAD MAMMOGRAM), DISPLAY "NEVER had a mammogram";
ELSE GO TO PROGRAMMING NOTE QA11_A44;

QA11_A43   What is the ONE most important reason why you have {NEVER had a mammogram/NOT
           had a mammogram in the past 2 years}?

           NO REASON/NEVER THOUGHT ABOUT IT........1
           DIDN'T KNOW I NEEDED THIS TYPE OF TEST. 2
           DOCTOR DIDN'T TELL ME I NEEDED IT...........3
           HAVEN'T HAD ANY PROBLEMS.........................4
           PUT IT OFF/LAZINESS..5
           TOO EXPENSIVE/NO INSURANCE/COST...........6
           TOO PAINFUL, UNPLEASANT,
           EMBARRASSING..7
           TOO YOUNG...8
           DON'T HAVE A DOCTOR.....................................9
           OTHER..91
           REFUSED..-7
           DON'T KNOW...-8

QA11_A44   In the last 12 months, did you have a CAT scan or CT scan? During this test, you are lying down and moved through a donut shaped x-ray machine while holding your breath.

YES...1
NO..2   [GO TO NEXT SECTION]
REFUSED...-7   [GO TO NEXT SECTION]
DON'T KNOW...-8   [GO TO NEXT SECTION]

QA11_A45   Were any of the CAT scans you had in the last 12 months done of your chest area?

YES...1
NO..2   [GO TO NEXT SECTION]
SEVERAL AREAS OF UPPER BODY REGION....3
REFUSED...-7   [GO TO NEXT SECTION]
DON'T KNOW...-8   [GO TO NEXT SECTION]

QA11_A46   Were any of the CAT scans of your chest area done to check for lung cancer, rather than for some other reason?

YES, TO CHECK FOR LUNG CANCER...............1
NO, FOR SOME OTHER REASON.......................2
REFUSED...-7
DON'T KNOW...-8

MODULE B – WOMEN'S HEALTH

PROGRAMMING NOTE QA11_B1:
IF MALE OR AGE < 18, GO NEXT SECTION;
IF AGE > 39 THEN CONTINUE WITH QA11_B1;
ELSE GO TO PROGRAMMING NOTE QA11_B5

QA11_B1 Have you ever taken hormone replacement therapy or HRT for menopausal symptoms?

YES..1
NO..2 **[GO TO PN QA11_B5]**
REFUSED..-7 **[GO TO PN QA11_B5]**
DON'T KNOW...-8 **[GO TO PN QA11_B5]**

QA11_B2 Are you currently taking hormone replacement therapy?

[IF NEEDED, SAY: "This is a pill, patch or treatment that gives women more of the female hormone, estrogen."]

YES..1 **[GO TO QA11_B4]**
NO..2
REFUSED..-7 **[GO TO QA11_B4]**
DON'T KNOW...-8 **[GO TO QA11_B4]**

QA11_B3 About how long ago did you stop using Hormone Replacement Therapy – was it…

2 years ago or less,..1
More than 2 years up to 5 years ago, or....................2
More than 5 years ago?..3
REFUSED...-7
DON'T KNOW..-8

QA11_B4 Some women go on and off hormone replacement therapy. Altogether, how long have you taken HRT?

A YEAR OR LESS..1
MORE THAN 1 UP TO 2 YEARS.........................2
MORE THAN 2 UP TO 4 YEARS.........................3
MORE THAN 4 UP TO 8 YEARS 4
MORE THAN 8 YEARS AGO...............................5
REFUSED...-7
DON'T KNOW..-8

PROGRAMMING NOTE QA11_B5:
IF AGE > 44 CONTINUE WITH QA11_B5;
ELSE GO TO NEXT SECTION

QA11_B5 INTRO   Are you taking any of the following medications?

QA11_B5   Tamoxifen or Nolvadex?

                        YES...1
                        NO..2
                        REFUSED...-7
                        DON'T KNOW...-8

QA11_B6   Raloxifene or Evista?

                        YES...1
                        NO..2
                        REFUSED...-7
                        DON'T KNOW...-8

MODULE C – HUMAN PAPILOMAVIRUS

PROGRAMMING NOTE QA11_C1:
IF AGE < 18 GO TO NEXT SECTION;
ELSE IF AGE < 65, THEN CONTINUE WITH QA11_C1;
ELSE GO TO QA11_C5

QA11_C1   Have you ever heard of HPV? HPV stands for human papillomavirus (pap-uh-LOW-muh-vi-rus).

YES...1
NO...2   **[GO TO QA11_C4]**
REFUSED..-7   **[GO TO QA11_C4]**
DON'T KNOW...-8   **[GO TO QA11_C4]**

QA11_C2   These next questions are about HPV. Your best guess is fine.
Do you think HPV can cause cervical cancer?

YES...1
NO...2
REFUSED..-7
DON'T KNOW...-8

QA11_C3   Do you think HPV can go away on its own without treatment?

YES...1
NO...2
REFUSED..-7
DON'T KNOW...-8

QA11_C4   A vaccine to prevent HPV infection is available and is called the HPV shot, cervical cancer
vaccine, GARDASIL®, or Cervarix®. Before this survey, have you ever heard of the HPV shot
or cervical cancer vaccine?

YES...1
NO...2
REFUSED..-7
DON'T KNOW...-8

PROGRAMMING NOTE QA11_C5:
IF FEMALE AND AGE < 36 THEN CONTINUE WITH QA11_C5;
ELSE GO TO NEXT SECTION

QA11_C5   Have you ever received the HPV shot or cervical cancer vaccine?

YES...1
NO...2   **[GO TO QA11_C7]**
REFUSED..-7   **[GO TO QA11_C7]**
DON'T KNOW...-8   **[GO TO QA11_C7]**

QA11_C6   How many HPV shots did you receive?

       1-2 SHOTS..1
       3-50 SHOTS..2   **[GO TO NEXT SECTION]**
       "ALL SHOTS"...3   **[GO TO NEXT SECTION]**
       REFUSED..-7   **[GO TO NEXT SECTION]**
       DON'T KNOW..-8   **[GO TO NEXT SECTION]**

QA11_C7   Do you plan to receive HPV shots in the next 12 months?

       YES..1   **[GO TO NEXT SECTION]**
       NO...2
       REFUSED..-7
       DON'T KNOW..-8

PROGRAMMING NOTE QA11_C8:
IF QA11_C6 = 1 (RECEIVED 1-2 DOSES OF HPV VACCINE) AND QA11_C7 = 2, -7, OR -8 (DO NOT PLAN TO RECEIVE ANY MORE SHOTS, REF, OR DK), THEN CONTINUE WITH QA11_C8; ELSE GO QA11_C9

QA11_C8   What is the main reason you do not plan to receive more HPV shots in the next 12 months?

       DON'T NEED ANOTHER DOSE/
       HAVE COMPLETED THE SERIES.......................1   **[GO TO QA11_C10]**
       DOCTOR DIDN'T RECOMMEND IT...................2   **[GO TO NEXT SECTION]**
       TOO EXPENSIVE/
       INSURANCE DOESN'T COVER...........................3   **[GO TO QA11_C11]**
       TOO TIME-CONSUMING TO GO TO
       AN APPOINTMENT TO GET ANOTHER DOSE4   **[GO TO QA11_C10]**
       HAD SIDE EFFECTS FROM AN EARLIER DOSE/
       WORRIED ABOUT SAFETY...............................5   **[GO TO QA11_C10]**
       OTHER..6   **[GO TO QA11_C10]**

QA11_C9   What is the main reason you will not receive HPV shots in the next 12 months?

DOES NOT NEED VACCINE................................1
NOT SEXUALLY ACTIVE..................................2
TOO EXPENSIVE...3   **[GO TO QA11_C11]**
TOO OLD FOR VACCINE....................................4
DOCTOR DIDN'T RECOMMEND IT...................5   **[GO TO NEXT SECTION]**
WORRIED ABOUT SAFETY OF VACCINE........6
DON'T KNOW WHERE TO GET VACCINE.......7
MY SPOUSE/FAMILY MEMBER IS
AGAINST IT...8
DON'T KNOW ENOUGH ABOUT VACCINE.....9
HAVE HPV/CERVICAL DYSPLASIA/
CERVICAL CANCER 10
VACCINE WAS NOT AVAILABLE AT
MY DOCTOR/CLINIC...11
OTHER...91
REFUSED...-7
DON'T KNOW..-8

QA11_C10   Is cost a reason that you do not plan to receive HPV shots in the next 12 months?

YES..1
NO...2
REFUSED...-7
DON'T KNOW..-8

QA11_C11   Has a doctor or other health care professional ever recommended that you receive HPV shots?

YES..1
NO...2
REFUSED...-7
DON'T KNOW..-8

MODULE E – FAMILY HISTORY OF CANCER

> **PROGRAMMING NOTE QA11_E1:**
> **IF AGE < 18, THEN GO TO NEXT SECTION;**
> **ELSE CONTINUE WITH QA11_E1**

QA11_E1   Now I'm going to ask about your family's history of cancer. By family we mean only your blood relatives. Did your biological father or mother, full brothers or sisters, or biological sons or daughters ever have cancer of any kind?

[IF NEEDED, SAY: "Do not include family members related through marriage such as a stepfather or stepsister, or family members who were adopted."]

YES..1		
NO..2	**[GO TO NEXT SECTION]**	
REFUSED..-7	**[GO TO NEXT SECTION]**	
DON'T KNOW..-8	**[GO TO NEXT SECTION]**	

QA11_E2   What kind of cancer or cancers were these?

[CODE ALL THAT APPLY]
[PROBE: "Any others?"]

BLADDER...1
BLOOD...2
BONE..3
BRAIN...4
BREAST..5
CERVIX...6
COLON..7
ESOPHAGUS...8
GALLBLADDER..9
KIDNEY...10
LARYNX-WINDPIPE...11
LEUKEMIA..12
LIVER..13
LUNG...14
LYMPHOMA..15
MOUTH/TONGUE/LIP...16
OVARY..17
PANCREAS..18
PROSTATE...19
RECTUM..20
SKIN...21
SOFT TISSUE (MUSCLE OR FAT)............................24
STOMACH...25
TESTIS...26
THROAT-PHARYNX...27
THYROID...28
UTERUS...29
OTHER...91
REFUSED...-7
DON'T KNOW..-8

QA11_E3   Was the skin cancer you mentioned non-melanoma, melanoma, or an unknown type?

[CODE ALL THAT APPLY]

[PROBE: "Any others?"]

NON-MELANOMA...1
MELANOMA...2
UNKNOWN TYPE..3
REFUSED...-7
DON'T KNOW...-8

QA11_E4   Was your mother ever diagnosed with breast cancer?

YES...1
NO...2
REFUSED...-7
DON'T KNOW...-8

QA11_E5   Do you have any sisters who have ever been diagnosed with breast cancer?

YES...1
NO...2   **[GO TO PN QA11_E7]**
REFUSED...-7   **[GO TO PN QA11_E7]**
DON'T KNOW...-8   **[GO TO PN QA11_E7]**

QA11_E6   How many sisters have been diagnosed with breast cancer?

_____ NUMBER OF SISTERS WITH BREAST CANCER

REFUSED...-7
DON'T KNOW...-8

PROGRAMMING NOTE QA11_E7:
IF QA11_E2 = 7 (COLON CANCER) OR 20 (RECTAL CANCER), THEN CONTINUE WITH QA11_E7;
ELSE SKIP TO NEXT SECTION

QA11_E7   Who was diagnosed with colon or rectal cancer?

[IF NEEDED, SAY: "Do NOT include STEP or HALF brothers and sisters."]

[CODE ALL THAT APPLY]

[PROBE: "Any others?"]

MOTHER..1
FATHER...2
FULL BROTHER..3
FULL SISTER..4
BIOLOGICAL SON...5
BIOLOGICAL DAUGHTER....................................6
REFUSED..-7
DON'T KNOW...-8

PROGRAMMING NOTE QA11_E8:
IF QA11_E7 = (3, 4, 5, OR 6) THEN CONTINUE WITH QA11_E8
    IF QA11_E7 = 3, THEN DISPLAY "brothers";
    IF QA11_E7 = 4, THEN DISPLAY "sisters";
    IF QA11_E7 = 5, THEN DISPLAY "sons";
    IF QA11_E7= 6, THEN DISPLAY "daughters";
ELSE SKIP TO NEXT SECTION

QA11_E8   How many {brothers/sisters/sons/daughters} were diagnosed with colon or rectal cancer?

_____ NUMBER OF FAMILY MEMBERS WITH COLON OR RECTAL CANCER

REFUSED..-7
DON'T KNOW...-8

MODULE G – DEMOGRAPHICS, PART I

QA11_G1   What is your date of birth?

MONTH _____

1. JANUARY	7. JULY
2. FEBRUARY	8. AUGUST
3. MARCH	9. SEPTEMBER
4. APRIL	10. OCTOBER
5. MAY	11. NOVEMBER
6. JUNE	12. DECEMBER

DAY _____   YEAR _____

REFUSED...-7
DON'T KNOW...-8

PROGRAMMING NOTE FOR QA11_G2:
IF QA11_G1 = -7 OR -8, CONTINUE WITH QA11_G2;
ELSE GO TO QA11_G5

QA11_G2   What month and year were you born?

MONTH _____

1. JANUARY	7. JULY
2. FEBRUARY	8. AUGUST
3. MARCH	9. SEPTEMBER
4. APRIL	10. OCTOBER
5. MAY	11. NOVEMBER
6. JUNE	12. DECEMBER

YEAR _____

REFUSED...-7
DON'T KNOW...-8

PROGRAMMING NOTE FOR QA11_G3:
IF QA11_G2 = -7 OR -8 THEN CONTINUE WITH QA11_G3;
ELSE GO TO QA11_G5

QA11_G3   What is your age, please?

_____YEARS OF AGE   **[GO TO QA11_G5]**

REFUSED...-7
DON'T KNOW...-8

QA11_G4   Are you between 18 and 29, between 30 and 39, between 40 and 44, between 45 and 49, between 50 and 64, or 65 or older?

        BETWEEN 18 AND 29..1
        BETWEEN 30 AND 39..2
        BETWEEN 40 AND 44..3
        BETWEEN 45 AND 49..4
        BETWEEN 50 AND 64..5
        65 OR OLDER...6
        REFUSED...-7
        DON'T KNOW...-8

QA11_G5   Are you male or female?

        MALE..1
        FEMALE..2
        REFUSED...-7
        DON'T KNOW...-8

QA11_G6   Are you Latino or Hispanic?

        YES...1
        NO..2   **[GO TO QA11_G8]**
        REFUSED...-7   **[GO TO QA11_G8]**
        DON'T KNOW...-8   **[GO TO QA11_G8]**

QA11_G7   And what is your Latino or Hispanic ancestry or origin? Such as Mexican, Salvadoran, Cuban, Honduran -- and if you have more than one, tell me all of them.

[IF NECESSARY, GIVE MORE EXAMPLES]
[CODE ALL THAT APPLY]

        MEXICAN/MEXICAN AMERICAN/CHICANO. .1
        SALVADORAN...4
        GUATEMALAN...5
        COSTA RICAN...6
        HONDURAN...7
        NICARAGUAN...8
        PANAMANIAN...9
        PUERTO RICAN...10
        CUBAN...11
        SPANISH-AMERICAN (FROM SPAIN).............12
        OTHER LATINO (SPECIFY: _____)….91
        REFUSED...-7
        DON'T KNOW...-8

PROGRAMMING NOTE QA11_G8:
IF QA11_G6 = 1 (YES, LATINO/HISPANIC) DISPLAY "You said you are Latino or Hispanic. Also,";
IF MORE THAN ONE RACE GIVEN AFTER ENTERING RESPONSES FOR QA11_G8 CONTINUE
WITH PROGRAMMING NOTE QA11_G9;
ELSE FOLLOW SKIPS AS INDICATED FOR SINGLE RESPONSES

QA11_G8   {You said you are Latino or Hispanic. Also,} please tell me which one <u>or more</u> of the following you would use to describe yourself. Would you describe yourself as Native Hawaiian, Other Pacific Islander, American Indian, Alaska Native, Asian, Black, African American, or White?

[IF R SAYS "NATIVE AMERICAN" CODE AS "4"]

[IF R GIVES ANOTHER RESPONSE YOU MUST SPECIFY WHAT IT IS]

[CODE ALL THAT APPLY]

WHITE...1	**[GO TO PN QA11_G16]**
BLACK OR AFRICAN AMERICAN.....................2	**[GO TO PN QA11_G16]**
ASIAN...3	**[GO TO PN QA11_G12]**
AMERICAN INDIAN OR ALASKA NATIVE......4	**[GO TO PN QA11_G9]**
OTHER PACIFIC ISLANDER...............................5	**[GO TO PN QA11_G13]**
NATIVE HAWAIIAN...6	**[GO TO PN QA11_G16]**
OTHER (SPECIFY: _____)...........91	
REFUSED...-7	
DON'T KNOW..-8	

PROGRAMMING NOTE FOR QA11_G9:
IF QA11_G8 = 4 (AMERICAN INDIAN OR ALASKA NATIVE), CONTINUE WITH QA11_G9;
ELSE GO TO PROGRAMMING NOTE QA11_G12;

QA11_G9   You said American Indian or Alaska Native - and what is your tribal heritage? If you have more than one tribe, tell me all of them.

[CODE ALL THAT APPLY]

APACHE...1
BLACKFOOT/BLACKFEET.................................2
CHEROKEE...3
CHOCTAW..4
MEXICAN AMERICAN INDIAN.........................5
NAVAJO..6
POMO..7
PUEBLO..8
SIOUX...9
YAQUI..10
OTHER TRIBE (SPECIFY):_____..........91
REFUSED...-7
DON'T KNOW..-8

QA11_G10   Are you an enrolled member in a federally or state recognized tribe?

        YES...1
        NO...2   **[GO TO QA11_G12]**
        REFUSED...-7   **[GO TO QA11_G12]**
        DON'T KNOW..-8   **[GO TO QA11_G12]**

QA11_G11   Which tribe are you enrolled in?

APACHE
        MESCALERO APACHE, NM.................................1
        APACHE (NOT SPECIFIED)................................2
        OTHER APACHE [Ask for spelling] (SPECIFY):…3
BLACKFEET
        BLACKFOOT/BLACKFEET.................................4
CHEROKEE
        WESTERN CHEROKEE...5
        CHEROKEE (NOT SPECIFIED)...........................6
        OTHER CHEROKEE [Ask for spelling] (SPECIFY)7
CHOCTAW
        CHOCTAW OKLAHOMA.....................................8
        CHOCTAW (NOT SPECIFIED)............................9
        OTHER CHOCTAW [Ask for spelling] (SPECIFY):10
NAVAJO
        NAVAJO (NOT SPECIFIED)................................11
POMO
        HOPLAND BAND, HOPLAND RANCHERIA......12
        SHERWOOD VALLEY RANCHERIA..................13
        POMO (NOT SPECIFIED)....................................14
        OTHER POMO [Ask for spelling] (SPECIFY):......15
PUEBLO
        HOPI...16
        YSLETA DEL SUR PUEBLO OF TEXAS.............17
        PUEBLO (NOT SPECIFIED)................................18
        OTHER PUEBLO [Ask for spelling] (SPECIFY):. .19
SIOUX
        OGLALA/PINE RIDGE SIOUX............................20
        SIOUX (NOT SPECIFIED)...................................21
        OTHER SIOUX [Ask for spelling] (SPECIFY):......22
YAQUI
        PASCUA YAQUI TRIBE OF ARIZONA...............23
        YAQUI (NOT SPECIFIED)...................................24
        OTHER YAQUI [Ask for spelling] (SPECIFY):.....25

OTHER
        OTHER [Ask for spelling] (SPECIFY: _____)....91
        REFUSED...-7
        DON'T KNOW..-8

PROGRAMMING NOTE QA11_G12:
IF QA11_G8 = 3 (ASIAN) CONTINUE WITH QA11_G12;
ELSE GO TO PROGRAMMING NOTE QA11_G13;

QA11_G12   You said Asian, and what specific ethnic group are you, such as Chinese, Filipino, Vietnamese? If you are more than one, tell me all of them.

[CODE ALL THAT APPLY]

BANGLADESHI..1
BURMESE..2
CAMBODIAN...3
CHINESE..4
FILIPINO..5
HMONG..6
INDIAN (INDIA)...7
INDONESIAN...8
JAPANESE...9
KOREAN..10
LAOTIAN...11
MALAYSIAN..12
PAKISTANI..13
SRI LANKAN...14
TAIWANESE..15
THAI..16
VIETNAMESE..17
OTHER ASIAN (SPECIFY): _____ 91
REFUSED..-7
DON'T KNOW..-8

PROGRAMMING NOTE QA11_G13:
IF QA11_G8 = 5 (OTHER PACIFIC ISLANDER), CONTINUE WITH QA11_G13;
ELSE GO TO PROGRAMMING NOTE QA11_G14;

QA11_G13   You said you are Pacific Islander. What specific ethnic group are you, such as Samoan, Tongan, or Guamanian? If you are more than one, tell me all of them.

[CODE ALL THAT APPLY]

SAMOAN/AMERICAN SAMOAN..........................1
GUAMANIAN...2
TONGAN..3
FIJIAN...4
OTHER PACIFIC ISLANDER (SPECIFY): _____ 91
REFUSED..-7
DON'T KNOW..-8

PROGRAMMING NOTE FOR QA11_G14:
IF QA11_G6 = 1 (LATINO) AND [QA11_G8 = 6 (NATIVE HAWAIIAN) OR QA11_G8 = 5 (OTHER PACIFIC ISLANDER) OR QA11_G8 = 4 (AMERICAN INDIAN OR ALASKA NATIVE) OR QA11_G8 = 3 (ASIAN) OR QA11_G8 = 2 (BLACK/AFRICAN AMERICAN) OR QA11_G8 = 1 (WHITE) OR QA11_G8 = 91 (OTHER)], CONTINUE WITH QA11_G14;
ELSE IF THERE WERE MULTIPLE RESPONSES TO QA11_G8, QA11_G12, OR QA11_G13 (NOT COUNTING -7 OR -8), CONTINUE WITH QA11_G14;
ELSE SKIP TO QA11_G16;

QA11_G14   You said that you are: {INSERT MULTIPLE RESPONSES QA11_G7, QA11_G8, QA11_G12 AND QA11_G13}.

Do you identify with any one race in particular?

YES..1
NO...2   **[GO TO QA11_G16]**
REFUSED...-7   **[GO TO QA11_G16]**
DON'T KNOW..- 8   **[GO TO QA11_G16]**

PROGRAMMING NOTE FOR QA11_G15:
IF QA11_G6 = 1 (YES, LATINO) AND QA11_G7 ≠ -7 or -8, DO NOT DISPLAY QA11_G15 = 14 (LATINO);
IF QA11_G8 = 1 (YES, OTHER PACIFIC ISLANDER) AND QA11_G13 = 1 to 4 OR 91, DO NOT DISPLAY QA11_G15 = 17 (OTHER PACIFIC ISLANDER);
IF QA11_G8 = 3 AND QA11_G12 = 1 TO 17 OR 91, DO NOT DISPLAY QA11_G15 = 19 (ASIAN);

QA11_G15   Which do you <u>most</u> identify with?

[IF R UNABLE TO CHOOSE ONE, OFFER "BOTH/ALL/MULTIRACIAL"]

MEXICAN/MEXICANO...1
MEXICAN AMERICAN...2
CHICANO...3
SALVADORAN...4
GUATEMALAN..5
COSTA RICAN..6
HONDURAN..7
NICARAGUAN..8
PANAMANIAN..9
PUERTO RICAN...10
CUBAN..11
SPANISH-AMERICAN (FROM SPAIN)...............................12
LATINO, OTHER SPECIFY...13
LATINO...14
NATIVE HAWAIIAN..16
OTHER PACIFIC ISLANDER..17
AMERICAN INDIAN OR ALASKA NATIVE.........................18
ASIAN...19
BLACK OR AFRICAN AMERICAN.......................................20
WHITE..21
RACE, OTHER SPECIFY...22
BANGLADESHI...30
BURMESE...31
CAMBODIAN...32
CHINESE..33
FILIPINO..34
HMONG..35
INDIAN (INDIA)..36
INDONESIAN..37
JAPANESE..38
KOREAN...39
LAOTIAN..40
MALAYSIAN...41
PAKISTANI...42
SRI LANKAN..43
TAIWANESE...44
THAI...45
VIETNAMESE...46
ASIAN, OTHER SPECIFY...49
SAMOAN/AMERICAN SAMOAN...50
GUAMANIAN..51
TONGAN..52
FIJIAN..53
PACIFIC ISLANDER, OTHER SPECIFY..............................55
BOTH/ALL/MULTIRACIAL..90
NONE OF THESE..95
REFUSED..-7
DON'T KNOW..-8

PROGRAMMING NOTE FOR QA11_G16:
IF AGE < 18, THEN GO TO NEXT SECTION;
ELSE CONTINUE WITH QA11_G16;

QA11_G16   Are you now married, living with a partner in a marriage-like relationship, widowed, divorced, separated, or never married?

[IF R MENTIONS MORE THAN ONE, CODE THE LOWEST NUMBER THAT APPLIES]

MARRIED...1
LIVING WITH PARTNER......................................2
WIDOWED..3
DIVORCED...4
SEPARATED..5
NEVER MARRIED..6
REFUSED...-7
DON'T KNOW..-8

MODULE H – DEMOGRAPHICS, PART II

> **PROGRAMMING NOTE FOR QA11_H1:**
> **IF AGE < 18, GO TO QA11_H4;**
> **ELSE CONTINUE WITH QA11_H1**

QA11_H1   Now a few more questions about you.

In what country were you born?

[SELECT FROM MOST LIKELY COUNTRIES]

```
UNITED STATES…................................................1
AMERICAN SAMOA.............................................2
CANADA..............................................................3
CHINA..................................................................4
EL SALVADOR.....................................................5
ENGLAND............................................................6
FRANCE...............................................................7
GERMANY...........................................................8
GUAM..................................................................9
GUATEMALA.....................................................10
HUNGARY..........................................................11
INDIA.................................................................12
IRAN...................................................................13
IRELAND............................................................14
ITALY.................................................................15
JAPAN................................................................16
KOREA...............................................................17
MEXICO.............................................................18
PHILIPPINES......................................................19
POLAND.............................................................20
PORTUGAL.........................................................21
PUERTO RICO....................................................22
RUSSIA..............................................................23
TAIWAN.............................................................24
VIETNAM...........................................................25
VIRGIN ISLANDS...............................................26
OTHER (SPECIFY):_____..............91
REFUSED...........................................................-7
DON'T KNOW.....................................................-8
```

QA11_H2   In what country was your mother born?

[SELECT FROM MOST LIKELY COUNTRIES]
[FOR RESPONDENTS WHO WERE ADOPTED, QUESTION REFERS
TO ADOPTIVE PARENTS]

UNITED STATES…..	1
AMERICAN SAMOA...	2
CANADA..	3
CHINA...	4
EL SALVADOR...	5
ENGLAND..	6
FRANCE...	7
GERMANY...	8
GUAM...	9
GUATEMALA...	10
HUNGARY...	11
INDIA..	12
IRAN..	13
IRELAND...	14
ITALY..	15
JAPAN...	16
KOREA..	17
MEXICO..	18
PHILIPPINES...	19
POLAND..	20
PORTUGAL...	21
PUERTO RICO...	22
RUSSIA...	23
TAIWAN..	24
VIETNAM..	25
VIRGIN ISLANDS..	26
OTHER (SPECIFY):_____..............	91
REFUSED..	-7
DON'T KNOW..	-8

QA11_H3   In what country was your father born?

[SELECT FROM MOST LIKELY COUNTRIES]
[FOR RESPONDENTS WHO WERE ADOPTED, QUESTION REFERS
TO ADOPTIVE PARENTS]

UNITED STATES…..1
AMERICAN SAMOA..2
CANADA...3
CHINA...4
EL SALVADOR...5
ENGLAND...6
FRANCE..7
GERMANY..8
GUAM..9
GUATEMALA..10
HUNGARY...11
INDIA...12
IRAN...13
IRELAND..14
ITALY...15
JAPAN..16
KOREA...17
MEXICO...18
PHILIPPINES...19
POLAND...20
PORTUGAL..21
PUERTO RICO...22
RUSSIA..23
TAIWAN..24
VIETNAM..25
VIRGIN ISLANDS...26
OTHER (SPECIFY):_____...............91
REFUSED...-7
DON'T KNOW..-8

QA11_H4   What languages do you speak at home?

[CODE ALL THAT APPLY. ALSO PROBE, "Any others?"]

        ENGLISH..1
        SPANISH...2
        CANTONESE..3
        VIETNAMESE...4
        TAGALOG..5
        MANDARIN..6
        KOREAN..7
        ASIAN INDIAN LANGUAGES............................8
        RUSSIAN..9
        OTHER 1 (SPECIFY: _____)................91
        OTHER 2 (SPECIFY:_____)..................92
        REFUSED..-7
        DON'T KNOW..-8

PROGRAMMING NOTE QA11_H5 AND QA11_H6:
IF AGE < 18, GO TO QA11_H32;
ELSE IF INTERVIEW NOT CONDUCTED IN ENGLISH, CONTINUE WITH QA11_H5;
ELSE IF INTERVIEW CONDUCTED IN ENGLISH AND QA11_H4 > 1 (SPEAKS LANGUAGE OTHER
THAN ENGLISH AT HOME), CONTINUE WITH QA11_H5 AND DISPLAY: "Since you speak a
language other than English at home, we are interested in the languages you use in other situations";
ELSE IF QA11_H4 = 1 ONLY (ENGLISH IS ONLY LANGUAGE SPOKEN AT HOME), GO TO
QA11_H8

QA11_H5   {Since you speak a language other than English at home, we are interested in the languages you
        use in other situations.} What language do you speak with your friends?

        ONLY ENGLISH...1
        BOTH ENGLISH AND OTHER LANGUAGE(S). 2
        ONLY OTHER LANGUAGE(S)............................3
        REFUSED..-7
        DON'T KNOW..-8

QA11_H6   In what languages are the TV shows, radio stations, or newspapers that you usually watch, listen
        or read?

        ONLY ENGLISH...1
        BOTH ENGLISH AND OTHER LANGUAGE(S). 2
        ONLY OTHER LANGUAGE(S)............................3
        REFUSED..-7
        DON'T KNOW..-8

PROGRAMMING NOTE QA11_H7:
IF INTERVIEW CONDUCTED IN ENGLISH AND QA11_H4 > 1 (SPEAKS LANGUAGE OTHER
THAN ENGLISH AT HOME), CONTINUE WITH QA11_H7 AND DISPLAY: "Since you speak a
language other than English at home, we are interested in your own opinion of how well you speak
English" AND DROP RESPONSE CATEGORY "Not at all?";
ELSE IF INTERVIEW NOT CONDUCTED IN ENGLISH, CONTINUE WITH QA11_H7;
ELSE GO TO PROGRAMMING NOTE QA11_H8

QA11_H7 {Since you speak a language other than English at home, we are interested in your own opinion of how well you speak English.} Would you say you speak English…

Very well,..1
Well,..2
Not well, or..3
Not at all?..4
REFUSED..-7
DON'T KNOW..-8

PROGRAMMING NOTE QA11_H8:
IF QA11_H1 = 1 (USA) OR 2 (AMERICAN SAMOA) OR 9 (GUAM) OR 22 (PUERTO RICO) OR 26
(VIRGIN ISLANDS), GO TO QA11_H11;
ELSE CONTINUE WITH QA11_H8;

QA11_H8 The next questions are about citizenship and immigration.

Are you a citizen of the United States?

YES..1   **[GO TO QA11_H10]**
NO..2
APPLICATION PENDING....................................3
REFUSED..-7
DON'T KNOW..-8

QA11_H9 Are you a permanent resident with a green card? Your answers are confidential and will not be reported to Immigration Services.

[IF NEEDED SAY, "People usually call this a "Green Card" but the color can also be pink, blue, or white."]

YES..1
NO..2
APPLICATION PENDING....................................3
REFUSED..-7
DON'T KNOW..-8

QA11_H10 About how many years have you lived in the United States?

[FOR LESS THAN A YEAR, ENTER 1 YEAR]

_____ NUMBER OF YEARS

_____ YEAR (FIRST CAME TO LIVE IN U.S.)

REFUSED...-7
DON'T KNOW...-8

PROGRAMMING NOTE QA11_H11:
IF QA11_G16 =1 (MARRIED) CONTINUE WITH QA11_H11;
IF QA11_G16 = 2 (LIVING WITH PARTNER), GO TO QA11_H12;
ELSE GO TO PROGRAMMING NOTE QA11_H13;

QA11_H11 Is your spouse also living in your household?

YES...1
NO...2
REFUSED...-7
DON'T KNOW...-8

QA11_H12 May I have your {spouse/partner}'s first name and age?

[ENTER SPOUSE'S/PARTNER'S NAME, AGE, AND SEX]

SPOUSE/PARTNER NAME _____
SPOUSE/PARTNER AGE _____
SPOUSE/PARTNER SEX _____

PROGRAMMING NOTE QA11_H13:
IF AGE < 30 OR QA11_G4 = 1 (AGE 18-29) AND QA11_G16 = 1 (MARRIED) AND QA11_H11 =1
(SPOUSE LIVING IN HH) AND 3 OR MORE ADULTS LIVE IN HH, CONTINUE WITH QA11_H13;
IF AGE < 30 OR QA11_G4 =1 (AGE 18-29) AND QA11_G16 = 2 (LIVING WITH PARTNER) AND 3 OR
MORE ADULTS LIVING IN HH, CONTINUE WITH QA11_H13;
IF AGE < 30 OR QA11_G4 =1 (AGE 18-29) AND QA11_G16 = 3, 4, 5, 6, –7, OR -8 (WIDOWED,
DIVORCED, SEPARATED, NEVER MARRIED, REF, OR DK) AND 2 OR MORE ADULTS LIVING IN
HH, CONTINUE WITH QA11_H13;
ELSE GO TO QA11_H14;

QA11_H13 Are you now living with either of your parents?

YES...1
NO...2
REFUSED...-7
DON'T KNOW...-8

QA11_H14   Are there any children under the age of 18 living in the household, including babies?

> YES...1
> NO...2   **[GO TO QA11_H22]**
> REFUSED...-7   **[GO TO QA11_H22]**
> DON'T KNOW...-8   **[GO TO QA11_H22]**

QA11_H15   Please tell me only the first names and ages of all the children under 18, including babies, who normally live in your household.

[INTERVIEWER NOTE: PROBE,"Is there anyone else?" ALSO, ENTER AGE OF 0 (ZERO), IF LESS THAN 1 YEAR OLD]

CHILD	FIRST NAME	AGE	M/F
1			
2			
3			
4			
5			

QA11_H16   Is (CHILD) …

> 0 To 11 years old 1   **[CODE AS CHILD]**
> 12 To 17 years old...2   **[CODE AS TEEN]**
> REFUSED...-7   **[CODE AS TEEN]**
> DON'T KNOW...-8   **[CODE AS TEEN]**

QA11_H17   I have recorded {number} {child/children} under 18 in the household. Have I missed any children under 18 who usually live here but are temporarily away?

> NO ONE MISSED -- ROSTER IS CORRECT........1
> RETURN TO ROSTER..2   **[BACK TO QA11_H15]**

QA11_H18   Are you the parent or legal guardian of {PERSON NAME/AGE/SEX}?

> YES...1
> NO...2
> REFUSED...-7
> DON'T KNOW...-8

PROGRAMMING NOTE QA11_H19:
IF ANY PEOPLE IN HH UNDER AGE 18 AND [QA11_H11 = 1 OR QA11_G16 = 2], ASK QA11_H19
ABOUT THE SPOUSE/PARTNER AND EACH PERSON UNDER 18;
ELSE SKIP TO QA11_H20;

QA11_H19   Is (NAME/AGE/SEX) the parent or legal guardian of (PERSON NAME/AGE/SEX}?

> YES...1
> NO...2
> REFUSED..-7
> DON'T KNOW...-8

PROGRAMMING NOTE QA11_H20:
IF QA11_H14 = 1 (YES, CHILDREN UNDER 18 IN HH) AND ANY CHILDREN IN QA11_H15 ARE
AGE 13 OR LESS, CONTINUE WITH QA11_H20;
ELSE GO TO QA11_H22;
IF ANY CHILD IN ROSTER QA11_H15 < 14 AND ≥ 14 DISPLAY "for any children under age 14";
IF QA11_G16 = 1 (MARRIED) AND QA11_G11 =1 (SPOUSE LIVING IN HH), DISPLAY "you or your
spouse";
IF QA11_G16 = 2 (LIVING WITH PARTNER), DISPLAY "you or your partner";
ELSE DISPLAY "you"

QA11_H20   In the past month, did you use any paid childcare {for any children under age 14} while {you or
your spouse/partner/you} worked, were in school, or looked for work?

**[IF NEEDED, SAY: "This includes Head Start, day care centers, before- or after-school care
programs, and any baby-sitting arrangements."]**

> YES...1
> NO...2   **[GO TO QA11_H22]**
> REFUSED..-7   **[GO TO QA11_H22]**
> DON'T KNOW...-8   **[GO TO QA11_H22]**

QA11_H21   In the past month, how much did you pay for all child care arrangements and programs?

**[IF NEEDED, SAY: "If it is easier for you, you can tell me what you paid in a typical week
last month. You or any other adult in your household."]**

> $_____ AMOUNT LAST MONTH   [HR: 0-8,000]
> $_____ AMOUNT IN TYPICAL WEEK   [HR: 0-3,000]
>
> NO PAYMENT IN LAST MONTH OR WEEK.....3
> REFUSED..-7
> DON'T KNOW...-8

QA11_H22   What is the highest grade of education you have completed and received credit for?

NO FORMAL EDUCATION..30
GRADE SCHOOL
1ST GRADE..1
2ND GRADE...2
3RD GRADE...3
4TH GRADE...4
5TH GRADE...5
6TH GRADE...6
7TH GRADE...7
8TH GRADE...8
HIGH SCHOOL OR EQUIVALENT
9TH GRADE...9
10TH GRADE..10
11TH GRADE..11
12TH GRAD..12
4-YEAR COLLEGE OR UNIVERSITY
1ST YEAR (FRESHMAN)..13
2ND YEAR (SOPHOMORE)...14
3RD YEAR (JUNIOR)...15
4TH YEAR (SENIOR) (BA/BS)....................................16
5TH YEAR..17
GRADUATE OR PROFESSIONAL SCHOOL
1ST YEAR GRAD OR PROF SCHOOL.......................18
2ND YEAR GRAD OR PROF SCHOOL (MA/MS)......19
3RD YEAR GRAD OR PROF SCHOOL.......................20
MORE THAN 3 YEARS GRAD OR
PROF SCHOOL (PhD)..21
2-YEAR JUNIOR OR COMMUNITY COLLEGE
1ST YEAR..22
2ND YEAR (AA/AS)...23
VOCATIONAL, BUSINESS, OR TRADE SCHOOL
1ST YEAR..24
2ND YEAR..25
MORE THAN 2 YEARS...26
REFUSED...-7
DON'T KNOW (OUT OF RANGE)...............................-8

QA11_H23   Which of the following were <u>you</u> doing last week?

        Working at a job or business.....................................1   **[GO TO QA11_H27]**
        With a job or business but not at work 2
        Looking for work...3
        Not working at a job or business.............................4
        REFUSED...-7   **[GO TO QA11_H27]**
        DON'T KNOW...-8   **[GO TO QA11_H27]**

QA11_H24   What is the <u>main reason</u> you did not work last week?

        [IF NEEDED SAY, "Main reason is the most important reason."]

        TAKING CARE OF HOUSE OR FAMILY............1
        ON PLANNED VACATION.................................2
        COULDN'T FIND A JOB.....................................3
        GOING TO SCHOOL/STUDENT.........................4
        RETIRED..5   **[GO TO PN QA11_H26]**
        DISABLED...6   **[GO TO PN QA11_H26]**
        UNABLE TO WORK TEMPORARILY.................7
        ON LAYOFF OR STRIKE....................................8
        ON FAMILY OR MATERNITY LEAVE...............9
        OFF SEASON...10
        OTHER...91
        REFUSED...-7
        DON'T KNOW..-8

QA11_H25   Do you usually work?

        YES..1
        NO..2
        LOOKING FOR WORK.......................................3
        REFUSED...-7
        DON'T KNOW..-8

PROGRAMMING NOTE QA11_H26;
IF AGE = -7 OR -8 OR AGE < 65 AND QA11_H25 = 2 (NO) CONTINUE WITH QA11_H26;
IF AGE = -7 OR -8 OR AGE < 65 AND QA11_H24 = 5 (RETIRED) or 6 (DISABLED) CONTINUE
WITH QA11_H26;
ELSE GO TO PROGRAMMING NOTE QA11_H27;

QA11_H26   Are you receiving Social Security Disability Insurance or SSDI?

        YES...1   **[GO TO PN QA11_H28]**
        NO...2   **[GO TO PN QA11_H28]**
        REFUSED..-7   **[GO TO PN QA11_H28]**
        DON'T KNOW...-8   **[GO TO PN QA11_H28]**

QA11_H27   On your <u>main</u> job, are you employed by a private company, the government, <u>or</u> are you self-employed, <u>or</u> are you working without pay in a family business or farm?

[IF NEEDED SAY, "Where did you work <u>most</u> hours?"]

> PRIVATE COMPANY,
> NON-PROFIT ORGANIZATION, FOUNDATION..............1
> GOVERNMENT...2
> SELF-EMPLOYED..3
> FAMILY BUSINESS OR FARM...4
> REFUSED...-7
> DON'T KNOW...-8

QA11_H28   Which of the following was your spouse doing last week?

> Working at a job or business....................................1   **[GO TO QA11_H30]**
> With a job or business but not at work....................2   **[GO TO QA11_H30]**
> Looking for work...3
> Not working at a job/business.................................4
> REFUSED...-7
> DON'T KNOW...-8

QA11_H29   Does your spouse usually work?

> YES...1
> NO..2   **[GO TO NEXT SECTION]**
> LOOKING FOR WORK.........................3   **[GO TO NEXT SECTION]**
> REFUSED...-7   **[GO TO NEXT SECTION]**
> DON'T KNOW.......................................-8   **[GO TO NEXT SECTION]**

QA11_H30   On your spouse's <u>main</u> job, is he/she employed by a private company, the government, <u>or</u> is he/she self-employed, <u>or</u> is he/she working without pay in a family business or farm?

[IF NEEDED SAY, "Where did he/she work <u>most</u> hours?"]

> PRIVATE COMPANY,
> NON-PROFIT ORGANIZATION, FOUNDATION..............1
> GOVERNMENT...2
> SELF-EMPLOYED..3
> FAMILY BUSINESS OR FARM...4
> REFUSED...-7
> DON'T KNOW...-8

QA11_H31   Do you own or rent your home?

        OWN..1
        RENT...2
        OTHER ARRANGEMENT......................................3
        REFUSED..-7
        DON'T KNOW...-8

QT11_H32   Did you attend school last week?

        YES...1   **[GO TO QT11_H34]**
        NO..2
        ON VACATION...3
        HOME SCHOOLED...4   **[GO TO NEXT SECTION]**
        REFUSED..-7
        DON'T KNOW...-8

QT11_H33   Did you attend school during the last school year?

        YES...1
        NO..2   **[GO TO NEXT SECTION]**
        HOME SCHOOLED LAST YEAR.........................3   **[GO TO NEXT SECTION]**
        REFUSED..-7   **[GO TO NEXT SECTION]**
        DON'T KNOW...-8   **[GO TO NEXT SECTION]**

QT11_H34   What is the name of the school you go to or last attended?

[IF NEEDED, ASK: "Is that an elementary, middle, junior high, or high school?"]

[RECORD VERBATIM]

        NAME OF SCHOOL _____

        REFUSED..-7
        DON'T KNOW...-8

        _____TYPE OF SCHOOL

        TEEN NOT IN SCHOOL.......................................0
        ELEMENTARY..1
        INTERMEDIATE..2
        JUNIOR HIGH...3
        MIDDLE SCHOOL..4
        HIGH SCHOOL..5
        SENIOR HIGH SCHOOL......................................6
        CONTINUATION...7
        CHARTER SCHOOL...8
        OTHER (SPECIFY:_____).....................91
        REFUSED..-7
        DON'T KNOW...-8

MODULE I – EMPLOYMENT, INCOME AND POVERTY

> **PROGRAMMING NOTE QA11_I1:**
> **IF AGE < 18, GO TO NEXT SECTION;**
> **ELSE IF QA11_H23 = 1 (WORKING AT JOB OR BUSINESS) OR 2 (WITH A JOB OR BUISNESS BUT NOT AT WORK) OR QA11_H25 = 1 (R USUALLY WORKS) CONTINUE WITH QA11_I1;**
> **ELSE GO TO PROGRAMMING NOTE QA11_I5**

QA11_I1   The next questions are about your employment.

How many hours per week do you <u>usually</u> work at <u>all</u> jobs or businesses?

[IF WORKS > 95 HOURS, ENTER 95. IF DOES NOT WORK, ENTER 0 (ZERO).]

_____ HOURS   [HR: 0-95]

REFUSED...-7
DON'T KNOW...-8

> **PROGRAMMING NOTE QA11_I2**
> **IF QA11_I1 = 0 (NO HOURS WORKED), GO TO PROGRAMMING NOTE QA11_I5;**
> **ELSE CONTINUE WITH QA11_I2 AND**
> **IF QA11_H27 = 1 (PRIVATE COMPANY), DISPLAY "employed by a private company";**
> **IF QA11_H27 = 2 (GOVERNMENT), CODE QA11_I2 AS "GOVERNMENT" AND GO TO QA11_I3;**
> **IF QA1_H27 = 3 (SELF-EMPLOYED), DISPLAY "self-employed";**
> **IF QA11_H27 = 4 (FAMILY BUSINESS OR FARM), DISPLAY "working without pay in a family business or farm"**

QA11_I2   Earlier, you told me that on your <u>main</u> job, you are {employed by a private company/self-employed/ working without pay in a family business or farm}. What kind of business or industry is this?

[IF NEEDED, SAY: "What do they make or do at this business?"]
[ENTER DESCRIPTION]

_____ (BUSINESS OR INDUSTRY)

REFUSED...-7
DON'T KNOW...-8

QA11_I3   How long have you worked at your <u>main</u> job?

[IF NEEDED, SAY: "That is, for your <u>current</u> employer."]

_____ MONTHS   [HR: 0-12]
_____ YEARS   [HR: 0-50]

REFUSED...-7
DON'T KNOW...-8

PROGRAMMING NOTE QA11_I4:
IF QA11_H27 = 2 (GOVERNMENT EMPLOYEE), CODE QA11_I4 = 5 AND GO TO QA11_I5;
IF QA11_H27 = 3 (SELF-EMPLOYED), CONTINUE WITH QA11_I4 AND DISPLAY "Including
yourself, about" AND "you";
ELSE CONTINUE WITH QA11_I4 AND DISPLAY "About" AND "your employer";

QA11_I4   {Including yourself, about/About} how many people are employed by {your employer/you} at all locations?

[IF NEEDED SAY, "Your best guess is fine."]

                1-2...1
                3-9...2
                10-24...3
                25-50...4
                51-100...5
                101-200...6
                201-999...7
                1,000 OR MORE...8
                REFUSED..-7
                DON'T KNOW..-8

PROGRAMMING NOTE QA11_I5:
QA11_H23 = 1 (WORKING AT JOB OR BUSINESS) OR 2 (WITH JOB OR BUSINESS BUT NOT AT
WORK)] OR QA11_H25 = 1 (USUALLY WORKS), CONTINUE WITH QA11_I5;
ELSE SKIP TO PROGRAMMING NOTE QA11_I6

QA11_I5   What is your best estimate of all your earnings <u>last month</u> before taxes and other deductions from all jobs and businesses, including hourly wages, salaries, tips and commissions?

[IF AMOUNT GREATER THAN $999,995, ENTER "999,995"]

                $_____ AMOUNT

                REFUSED..-7
                DON'T KNOW..-8

PROGRAMMING NOTE QA11_I6;
IF QA11_H28 = [1 (SPOUSE WORKING AT JOB OR BUSINESS) OR 2 (SPOUSE WITH JOB OR BUSINESS BUT NOT AT WORK)] OR QA11_H29 = 1 (SPOUSE USUALLY WORKS), CONTINUE WITH QA11_I6 AND:
    IF QA11_H23 ≠ 1 OR 2 (R NOT AT A JOB OR BUSINESS LAST WEEK, DID NOT WORK, AND DOES NOT HAVE A JOB) AND QA11_H25 ≠ 1 (R DOES NOT USUALLY WORK), DISPLAY "The next question is about your spouse's employment."
    IF AR GENDER AND SPOUSE GENDER ARE BOTH KNOWN AND AR GENDER ≠ SP GENDER THEN:
        IF QA11_G5 = 1 (MALE) DISPLAY "wife";
        ELSE IF QA11_G5 = 2 (FEMALE) DISPLAY "husband";
        ELSE DISPLAY "spouse";
ELSE SKIP TO QA11_I8

QA11_I6 {The next question is about your spouse's employment.}

How many hours per week does your {husband/wife/spouse} usually work at all jobs or businesses?

[IF WORKS > 95 HOURS, ENTER 95. IF DOES NOT WORK, ENTER 0 (ZERO).]

_____ HOURS   [HR: 0-95]

REFUSED...-7
DON'T KNOW...-8

PROGRAMMING NOTE QA11_I7;
IF QA11_I6 > 0 CONTINUE WITH QA11_I7;
ELSE GO TO QA11_I8;

QA11_I7 What is your best estimate of all your spouse's earnings last month before taxes and other deductions from all jobs and businesses, including hourly wages, salaries, tips and commissions?

[IF AMOUNT GREATER THAN $999,995, ENTER "999,995"]

$_____ AMOUNT

REFUSED...-7
DON'T KNOW...-8

QA11_I8   What is your best estimate of your <u>household's total annual</u> income from all sources <u>before taxes</u> in 2010?

[IF NEEDED SAY, "Include money from jobs, social security, retirement income, unemployment payments, public assistance and so forth. Also include income from interest, dividends, net income from business, farm, or rent and any other money income."]

[IF AMOUNT GREATER THAN $999,995, ENTER "999,995"]

$_____ AMOUNT

REFUSED...-7   **[GO TO QA11_I10]**
DON'T KNOW...-8   **[GO TO QA11_I10]**

QA11_I9   I have entered that your annual household income is (AMOUNT). Is that correct?

YES..1   **[GO TO QA11_I16]**
NO...2   **[GO BACK TO QA11_I8]**

PROGAMMING NOTE QA11_I10:
IF QA11_I8 = -7 OR -8, CONTINUE WITH QA11_I10;
ELSE GO TO PROGRAMMING NOTE QA11_I16

QA11_I10   We don't need to know exactly, but could you tell me if your <u>household's annual</u> income from all sources <u>before taxes</u> is more than $20,000 per year or is it less?

MORE...1   **[GO TO QA11_I12]**
EQUAL TO $20K OR LESS....................................2
REFUSED...-7   **[GO TO QA11_I16]**
DON'T KNOW...-8   **[GO TO QA11_I16]**

QA11_I11   Is it …

$5,000 or less, or..1   **[GO TO QA11_I16]**
$5,001 to $10,000, or...2   **[GO TO QA11_I16]**
$10,001 to $15,000, or...3   **[GO TO QA11_I16]**
$15,001 to 20,000?...4   **[GO TO QA11_I16]**
REFUSED...-7   **[GO TO QA11_I16]**
DON'T KNOW...-8   **[GO TO QA11_I16]**

QA11_I12   Is it more or less than $70,000 per year?

MORE...1   **[GO TO QA11_I14]**
EQUAL TO $70K OR LESS....................................2
REFUSED...-7   **[GO TO QA11_I16]**
DON'T KNOW...-8   **[GO TO QA11_I16]**

QA11_I13   Is it …

           $20,001 to $30,000,..1   **[GO TO QA11_I16]**
           $30,001 to $40,000,..2   **[GO TO QA11_I16]**
           $40,001 to $50,000,..3   **[GO TO QA11_I16]**
           $50,001 to $60,000, or..4   **[GO TO QA11_I16]**
           $60,001 to $70,000?...5   **[GO TO QA11_I16]**
           REFUSED..-7   **[GO TO QA11_I16]**
           DON'T KNOW..-8   **[GO TO QA11_I16]**

QA11_I14   Is it more or less than $135,000 per year?

           MORE...1   **[GO TO QA11_I16]**
           EQUAL TO $135K OR LESS................................2
           REFUSED..-7   **[GO TO QA11_I16]**
           DON'T KNOW..-8   **[GO TO QA11_I16]**

QA11_I15   Is it …

           $70,001 to $80,000,..1
           $80,001 to $90,000,..2
           $90,001 to $100,000, or..3
           $100,001 to $135,000?..4
           REFUSED..-7
           DON'T KNOW..-8

PROGRAMMING NOTE QA11_I16:
IF R IS ONLY MEMBER OF HH, GO TO PROGRAMMING NOTE QA11_I18;
ELSE CONTINUE WITH QA11_I16;

QA11_I16   Including yourself, how many people living in your household are supported by your total household income?

           _____ NUMBER OF PEOPLE

           REFUSED..-7
           DON'T KNOW..-8

PROGRAMMING NOTE QA11_I17:
QA11_I17 <u>MUST BE LESS</u> THAN QA11_I16
IF NO CHILDREN UNDER 18 IN HH (AS DETERMINED FROM CHILD ENUMERATION
QUESTIONS) OR TOTAL NUMBER OF PEOPLE LIVING IN HH (AS DETERMINED BY ADULT
PLUS CHILD ENUMERATION) = QA11_I16, GO TO PROGRAMMING NOTE QA11_I18;
ELSE CONTINUE WITH QA11_I17

QA11_I17   How many of these {INSERT NUMBER FROM QA11_I16} people are children under the age
of 18?

_____ NUMBER OF CHILDREN (UNDER AGE 18)

REFUSED...-7
DON'T KNOW...-8

PROGRAMMING NOTE QA11_I18:

OBTAIN THE FEDERAL POVERTY 100%, 130% 200%, AND 300% LEVEL CUTOFF POINTS FROM THE 2008 FEDERAL POVERTY GUIDELINE USING THE TOTAL HOUSEHOLD SIZE AND NUMBER OF CHILDREN FROM QA11_I16 AND QA11_I17 RESPECTIVELY.

(THE 200% AND 300% VALUES WERE DERIVED BY MULTIPLYING THE CENSUS POVERTY 2008 THRESHOLD "SIZE OF FAMILY UNIT" BY "RELATED CHILDREN UNDER 18 YEARS" TABLE AMOUNTS BY 2 AND 3, RESPECTIVELY, THEN ROUNDING TO THE NEAREST 100 DOLLARS. REFER TO SPECIFICATIONS ADDENDUM "Poverty Level 2008" DOCUMENT FOR THE TABLE OF VALUES. THE 100% POVERTY CUTOFF VALUE WILL BE STORED IN CATI VARIABLE POVRT100, THE 200% POVERTY CUTOFF VALUE WILL BE STORED IN CATI VARIABLE POVRT200 AND THE 300% VALUE IN CATI VARIABLE POVRT300).

IF EITHER QA11_I16 OR QA11_I17 IS MISSING, USE THE TOTAL NUMBER OF ADULTS ENUMERATED IN THE SCREENER (GIVEN BY CATI VARIABLE RADLTCNT) AND THE TOTAL NUMBER OF CHILDREN ENUMERATED AT QA11_H15 OF THE ADULT INTERVIEW (GIVEN BY CATI VARIABLE KIDCNT) INSTEAD.

ASCERTAIN IF THE HOUSEHOLD INCOME IS...
1) **AT OR BELOW 100% FPL**
2) **ABOVE 100% FPL BUT AT OR BELOW 200% FPL**
3) **ABOVE 200% FPL BUT AT OR BELOW 300% FPL**
4) **ABOVE 300% FPL**
5) **UNKNOWN BECAUSE HOUSEHOLD INCOME WAS NOT GIVEN**

IF QA11_I8= -7 OR -8 (REF/DK) AND IF THE HOUSEHOLD'S 100% CUTOFF VALUE FALLS WITHIN A RESPONSE FROM QA11_I11, QA11_I13, OR QA11_I15 OR QA11_I10 = -7 OR QA11_I12 = -7 OR QA11_I14 = -7, ASK QA11_I18 USING POVRT100 (THE 100% FPL CUTOFF DISPLAY AMOUNT);
ELSE GO TO PROGRAMMING NOTE QA11_I19

QA11_I18   I need to ask just one or two more questions about income.

Was your total annual household income before taxes less than or more than ${POVRT100}?

EQUAL TO OR LESS...1   **[GO TO QA11_I22]**
MORE...2
REFUSED...-7   **[GO TO QA11_I22]**
DON'T KNOW..-8   **[GO TO QA11_I22]**

QA11_I19   {I need to ask just one or two more questions about income} Was your total annual household income before taxes less than or more than ${POVRT200}?

> EQUAL TO OR LESS...1
> MORE...2   **[GO TO QA11_I21]**
> REFUSED...-7   **[GO TO QA11_I22]**
> DON'T KNOW..-8   **[GO TO QA11_I22]**

QA11_I20   {I need to ask just one or two more questions about income} Was your total annual household income before taxes less than or more than ${POVRT130}?

> EQUAL TO OR LESS...1   **[GO TO QA11_I22]**
> MORE...2   **[GO TO QA11_I22]**
> REFUSED...-7   **[GO TO QA11_I22]**
> DON'T KNOW..-8   **[GO TO QA11_I22]**

QA11_I21   {I need to ask just one or two more questions about income} Was your total annual household income before taxes less than or more than ${POVRT300}?

> EQUAL TO OR LESS...1
> MORE...2
> REFUSED...-7
> DON'T KNOW..-8

QA11_I22   These next questions are about the food eaten in your household in the last 12 months and
whether you were able to afford food.

I'm going to read two statements that people have made about their food situation. For each,
please tell me whether the statement describes something that was often true, sometimes
true, or never true for you and your household in the last 12 months. The first statement is:

"The food that (I/we) bought just didn't last, and (I/we) didn't have money to get more."
Was that often true, sometimes true, or never true for you and your household in the last 12
months?

OFTEN TRUE..1
SOMETIMES TRUE..2
NEVER TRUE..3
REFUSED..-7
DON'T KNOW..-8

QA11_I23   The second statement is:
"(I/We) couldn't afford to eat balanced meals."
Was that often true, sometimes true, or never true for you and your household in the last 12
months?

OFTEN TRUE..1
SOMETIMES TRUE..2
NEVER TRUE..3
REFUSED..-7
DON'T KNOW..-8

QA11_I24   Please tell me yes or no. In the last 12 months, did you or other adults in your household ever
cut the size of your meals or skip meals because there wasn't enough money for food?

YES..1
NO..2   **[GO TO QA11_I26]**
REFUSED..-7   **[GO TO QA11_I26]**
DON'T KNOW..-8   **[GO TO QA11_I26]**

QA11_I25   How often did this happen -- almost every month, some months but not every month, or only in
1 or 2 months?

ALMOST EVERY MONTH....................................1
SOME MONTHS BUT NOT EVERY MONTH.....2
ONLY IN 1 OR 2 MONTHS.................................3
REFUSED..-7
DON'T KNOW..-8

QA11_I26 In the last 12 months, did you ever eat less than you felt you should because there wasn't enough money to buy food?

       YES..1
       NO...2
       REFUSED..-7
       DON'T KNOW...-8

QA11_I27 In the last 12 months, were you ever hungry but didn't eat because you couldn't afford enough food?

       YES..1
       NO...2
       REFUSED..-7
       DON'T KNOW...-8

MODULE J – DEMOGRAPHICS, PART III AND CLOSING

PROGRAMMING NOTE QA11_J1;
IF AGE < 18, GO TO NEXT SECTION;
ELSE CONTINUE WITH QA11_J1

QA11 _J1   Just a few final questions and then we are done.

To be sure we are covering the entire state, what county do you live in?

ALAMEDA..1
ALPINE...2
AMADOR...3
BUTTE...4
CALAVERAS..5
COLUSA...6
CONTRA COSTA..7
DEL NORTE...8
EL DORADO...9
FRESNO..10
GLENN..11
HUMBOLDT..12
IMPERIAL...13
INYO...14
KERN...15
KINGS...16
LAKE...17
LASSEN...18
LOS ANGELES..19
MADERA...20
MARIN..21
MARIPOSA..22
MENDOCINO..23
MERCED...24
MODOC...25
MONO...26
MONTEREY..27
NAPA..28
NEVADA...29
ORANGE...30
PLACER..31
PLUMAS...32
RIVERSIDE...33
SACRAMENTO...34
SAN BENITO...35
SAN BERNARDINO..36
SAN DIEGO...37
SAN FRANCISCO..38
SAN JOAQUIN..39
SAN LUIS OBISPO..40
SAN MATEO..41
SANTA BARBARA..42
SANTA CLARA...43
SANTA CRUZ..44

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SHASTA.....................................................................45
SIERRA.....................................................................46
SISKIYOU.................................................................47
SOLANO...................................................................48
SONOMA...................................................................49
STANISLAUS.............................................................50
SUTTER.....................................................................51
TEHAMA...................................................................52
TRINITY....................................................................53
TULARE.....................................................................54
TUOLUMNE...............................................................55
VENTURA..................................................................56
YOLO.........................................................................57
YUBA.........................................................................58
REFUSED.................................................................-7
DON'T KNOW...........................................................-8
```

PROGRAMMING NOTE QA11_J2:
IF ADVANCE LETTER SENT, CONTINUE WITH QA11_J2;
IF R'S ADDRESS IS A P.O. BOX, GO TO QA11_J3
ELSE GO TO QA11_J3;

QA11_J2   Your phone number was randomly selected for this study by a computer. We were able to match
an address to your phone number to send a letter to your home explaining the purpose of this
study. To help us better understand the environment you live in and how it may affect your
health, we would like to confirm your address. This information will be kept confidential and
will be destroyed after the entire survey has been completed.

Do you now live at {R's address and street}?

```
              YES.........................................................................1    [GO TO QA11_J6]
              NO...........................................................................2
              REFUSED..............................................................-7
              DON'T KNOW........................................................-8
```

QA11_J3   What is your zip code?

_____ (ZIP CODE)

```
              REFUSED..............................................................-7
              DON'T KNOW........................................................-8
```

QA11_J4   To help us better understand the environment you live in and how it may affect your health,
please tell me the address where you live. This information will be kept confidential and will be
destroyed after the entire survey has been completed.

```
              _____ HOUSE ADDRESS NUMBER
              _____ NAME OF STREET (VERIFY SPELLING)  [GO TO QA11_J6]
              _____ STREET TYPE
              _____ APT. NO

              REFUSED..............................................................-7
```

DON'T KNOW...-8

QA11_J5   Can you tell me just the name of the street you live on?

_____ NAME OF STREET

REFUSED...-7   **[GO TO CLOSE1]**
DON'T KNOW...-8   **[GO TO CLOSE1]**

QA11_J6   And what is the name of the street down the corner from you that crosses your street?

_____ NAME OF CROSS-STREET

REFUSED...-7
DON'T KNOW...-8

QA11_J7   Do you have a working cell phone?

[IF NEEDED, SAY: "I'm not going to ask you for the number."]

YES..1
NO...2
SHARES CELL PHONE...3
REFUSED...-7
DON'T KNOW...-8

PROGRAMMING NOTE QA11_J8:
IF QA11_J7 = 1 (YES) OR 3 (SHARES CELL PHONE), CONTINUE WITH QA11_J8;
ELSE SKIP TO QA11_J9;

QA11_J8   Of all the telephone calls that you receive, are...

All or almost all calls received on a cell phone........1
Some on cell phones & some on regular phones......2
Very few or none on cell phones............................3
REFUSED...-7
DON'T KNOW...-8

QA11_J9   Finally, do you think you would be willing to do a follow-up to this survey some time in the future?

YES..1
MAYBE/PROBABLY YES....................................2
DEFINITELY NOT...3
REFUSED...-7
DON'T KNOW...-8

> **PROGRAMMING NOTE CLOSE1 and CLOSE2:**
> **IF ALL INTERVIEWS FOR HOUSEHOLD COMPLETE, SKIP TO CLOSE2;**
> **ELSE CONTINUE WITH CLOSE1;**

CLOSE1   Let me check to see if there is anyone else.

[GO TO HHSELECT]

CLOSE2   Thank you, I really appreciate your time and cooperation. You have helped with a very important health survey. If you have any questions about the study, please contact Dr. E. Richard Brown, the Principal Investigator. Dr. Brown can be reached toll-free at 1-866-275-2447. Thank you, and good-bye.

MODULE K – GENERAL HEALTH, HEALTH-RELATED QUALITY OF LIFE, AND SEXUAL HEALTH

QA11_K1   These next questions are about your health.

Would you say that in general your health is excellent, very good, good, fair, or poor?

```
          EXCELLENT.........................................................1
          VERY GOOD.......................................................2
          GOOD.................................................................3
          FAIR...................................................................4
          POOR..................................................................5
          REFUSED...........................................................-7
          DON'T KNOW....................................................-8
```

PROGRAMMING NOTE QA11_K2:
IF AGE < 18, CONTINUE WITH QA11_K2;
ELSE GO TO QA11_K4;

QA11_K2   Now, thinking about your physical health, which includes physical illness and injury, for how many days during the past 30 days was your physical health not good?

```
          _____  NUMBER OF DAYS

          REFUSED...........................................................-7
          DON'T KNOW....................................................-8
```

QA11_K3   Now thinking about your mental health, which includes stress, depression, and problems with emotions, for how many days during the past 30 days was your mental health not good?

```
          _____  NUMBER OF DAYS

          REFUSED...........................................................-7
          DON'T KNOW....................................................-8
```

QA11_K4   These next questions are about your height and weight.

How tall are you without shoes?

[IF NEEDED SAY, "About how tall?"]

```
          _____ FEET  _____ INCHES

          _____ METERS  _____ CENTIMETERS

          FEET/INCHES.....................................................1
          METERS/CENTIMETERS....................................2
          REFUSED...........................................................-7
          DON'T KNOW....................................................-8
```

PROGRAMMING NOTE QA11_K5:
IF AGE < 18, GO TO QA11_K11;
ELSE IF QA11_G5 = 2 (FEMALE) and AGE < 50, DISPLAY "When not pregnant, how";
ELSE DISPLAY "How";

QA11_K5   {When not pregnant, how/How} much do you weigh without shoes?

[IF NEEDED SAY, "About how much?"]

_____ POUNDS

_____ KILOGRAMS

REFUSED...-7
DON'T KNOW..-8

PROGRAMMING NOTE QA11_K6:
IF AGE > 70 OR QA11_G4 = 6 (65 OR OLDER) OR ENUM.AGE > 70 OR IF AGE IS UNKNOWN, GO TO QA11_K11;
ELSE CONTINUE WITH QA11_K6;

QA11_K6   We are asking a few questions about people's sexual experiences. All answers will be kept private.

In the <u>past 12 months</u>, how many sexual partners have you had?

_____ NUMBER OF SEXUAL PARTNERS   **[GO TO QA11_K8]**

REFUSED...-7   **[GO TO QA11_K8]**
DON'T KNOW..-8

QA11_K7   Can you give me your best guess?

[IF R PROVIDES EXACT NUMBER, ENTER AS GIVEN. OTHERWISE CODE INTO CATEGORIES PROVIDED]

___ NUMBER OF PARTNERS

1 PARTNER..1
2-3 PARTNERS...2
4-5 PARTNERS...3
6-10 PARTNERS...4
MORE THAN 10 PARTNERS..............................5
REFUSED...-7
DON'T KNOW..-8

PROGRAMMING NOTE QA11_K8:
IF QA11_K6 = 0 (NO SEXUAL PARTNERS IN LAST 12 MONTHS) OR QA11_K7=0, GO TO
PROGRAMMING NOTE QA11_K9;
ELSE CONTINUE WITH QA11_K8;
IF QA11_K6 OR QA11_K7 = 1 (ONE PARTNER IN LAST 12 MONTHS), DISPLAY "Is that partner
male or female"'
ELSE DISPLAY "In the past 12 months, have your sexual partners been male, female, or both male and
female"

QA11_K8   {Is that partner male or female/In the past 12 months, have your sexual partners been male, female, or both male and female}?

> MALE..1
> FEMALE..2
> BOTH MALE AND FEMALE...............................3
> REFUSED...-7
> DON'T KNOW..-8

PROGRAMMING NOTE QA11_K9:
IF QA11_G5 = 1 (MALE), DISPLAY "Gay" in question and "Gay" IN HELP SCREEN;
ELSE IF QA11_G5 =2 (FEMALE), DISPLAY "Gay, Lesbian" in question and "Gay and Lesbian" IN
HELP SCREEN

QA11_K9   Do you think of yourself as straight or heterosexual, as gay {lesbian} or homosexual, or bisexual?

[IF NEEDED SAY, "Straight or Heterosexual people have sex with, or are primarily attracted to people of the opposite sex, Gay {and Lesbian} people have sex with or are primarily attracted to people of the same sex, and Bisexuals have sex with or are attracted to people of both sexes."]

> STRAIGHT OR HETEROSEXUAL.......................1
> GAY, LESBIAN, OR HOMOSEXUAL..................2
> BISEXUAL..3
> NOT SEXUAL/ CELIBATE/ NONE......................4
> OTHER (SPECIFY)_____....................5
> REFUSED...-7
> DON'T KNOW..-8

PROGRAMMING NOTE QA11_K10:
IF [QA11_H5 = 1 (MALE) AND QA11_K8 = 1 (MALE)] OR [QA11_G5 = 2 (FEMALE) AND QA11_K8 = 2 (FEMALE)] OR [QA11_K8 = 3, -7, OR -8] OR [IF QA11_K9 ≠ 1] CONTINUE WITH QA11_K10; ELSE GO TO QA11_K11

QA11_K10   Are you legally registered as a domestic partner or legally married in California with someone of the same sex?

[ONLY INCLUDE SAME SEX MARRAIGES PERFORMED IN CALIFORNIA.]

[IF NEEDED, SAY: "Which one of these applies to you?"]

> YES (DOMESTIC PARTNER)...............................4
> YES (MARRIED IN CALIFORNIA)....................5
> NO..6
> REFUSED...-7
> DON'T KNOW...-8

QA11_K11   Is there a place that you usually go to when you are sick or need advice about your health?

[CIRCLE "3" OR "4" ONLY IF VOLUNTEERED. DO NOT PROBE.]

> YES...1
> NO..2   **[GO TO QA11_K13]**
> DOCTOR/MY DOCTOR.......................................3
> KAISER...4
> MORE THAN ONE PLACE.................................5
> REFUSED...-7   **[GO TO QA11_K13]**
> DON'T KNOW...-8   **[GO TO QA11_K13]**

PROGRAMMING NOTE QA11_K12:
IF QA11_K11 = 1 (YES) OR 5 (MORE THAN ONE PLACE) DISPLAY "What kind of place do you go to most often--a medical";
ELSE IF QA11_K11 = 3 (DOCTOR/MY DOCTOR), DISPLAY "Is your doctor in a private";
ELSE IF QA11_K11 = 4 (KAISER) CIRCLE "1" FOR QA11_K12 AND GO TO QA11_K13

QA11_K12   {What kind of place do you go to most often—a medical/Is your doctor in a private} doctor's office, a clinic or hospital clinic, an emergency room, or some other place?

> DOCTOR'S OFFICE/KAISER/OTHER HMO........1
> CLINIC/HEALTH CENTER/HOSPITAL CLINIC.2
> EMERGENCY ROOM...3
> SOME OTHER PLACE (SPECIFY:_____)...91
> NO ONE PLACE..92
> REFUSED..-7
> DON'T KNOW..-8

PROGRAMMING NOTE QA11_K13:
IF CHILD OR TEEN SELECTED OR SPOUSE IN HH, DISPLAY "Now, I'd like to ask about the health care YOU receive";
ELSE BEGIN QUESTION WITH "During the past 12 months, how many times have you seen a medical doctor"

QA11_K13   {Now, I'd like to ask about the health care you receive.} During the past 12 months, how many times have you seen a medical doctor}?

    _____ TIMES   [HR: 0-365]

      REFUSED..-7
      DON'T KNOW...-8

MODULE L – EPILEPSY

PROGRAMMING NOTE QA11_L1:
IF AGE < 18, CONTINUE WITH QA11_L1;
ELSE GO TO NEXT SECTION;

QA11_L1   Has a doctor <u>ever</u> told you that you have seizure disorder or epilepsy?

[INTERVIEWER NOTE: IF R REPORTS THEIR MOTHER/FATHER/GUARDIAN TOLD THEM THEY HAVE SEIZURES OR EPILEPSY, CODE AS 1]

                YES... 1
                NO... 2
                REFUSED... -7
                DON'T KNOW... -8

QA11_L2   Are you now taking any medicine to control your seizure disorder or epilepsy?

                YES... 1
                NO... 2
                REFUSED... -7
                DON'T KNOW... -8

QA11_L3   How many seizures <u>of any type</u> have you had in the <u>last three months</u>?

[INTERVIEWER NOTE: IF R REPORTS ONLY HAVING "AURAS" AND <u>NO</u> SEIZURES, INSTRUCT R TO DISREGARD AURAS. IF R NORMALLY COUNTS "AURAS" AS SEIZURES, ACCEPT THE RESPONSE]

                NO SEIZURE.. 1
                ONE SEISURE... 2
                MORE THAN ONE SEISURE............................ 3
                REFUSED... -7
                DON'T KNOW... -8

MODULE M – MEDICAL HOME

PROGRAMMING NOTE QA11_M1:
IF R HAS ASTHMA THEN CONTINUE WITH QA11_M1;
ELSE GO TO PROGRAMMING NOTE QA11_M3

QA11_M1   Have your doctors or other medical providers worked with you to develop a plan so that you know how to take care of your asthma?

YES...1
NO...2   **[GO TO PN QA11_M3]**
REFUSED..-7   **[GO TO PN QA11_M3]**
DON'T KNOW...-8   **[GO TO PN QA11_M3]**

QA11_M2   Do you have a written or printed copy of this plan?

[IF NEEDED, SAY: "This can be an electronic or hard copy."]

YES...1
NO...2
REFUSED..-7
DON'T KNOW...-8

PROGRAMMING NOTE QA11_M3:
IF AGE < 18 GO TO QA11_M7;
ELSE IF R HAS DIABETES THEN CONTINUE WITH QA11_M3;
ELSE GO TO PROGRAMMING NOTE QA11_M5

QA11_M3   Have your doctors or other medical providers worked with you to develop a plan so that you know how to take care of your diabetes?

YES...1
NO...2   **[GO TO PN QA11_M5]**
REFUSED..-7   **[GO TO PN QA11_M5]**
DON'T KNOW...-8   **[GO TO PN QA11_M5]**

QA11_M4   Do you have a written or printed copy of this plan?

[IF NEEDED, SAY: "This can be an electronic or hard copy."]

YES...1
NO...2
REFUSED..-7
DON'T KNOW...-8

QA11_M5   Have your doctors or other medical providers worked with you to develop a plan so that you know how to take care of your heart disease?

YES...1
NO..2   **[GO TO QA11_M7]**
REFUSED...-7   **[GO TO QA11_M7]**
DON'T KNOW..-8   **[GO TO QA11_M7]**

QA11_M6   Do you have a written or printed copy of this plan?

[IF NEEDED, SAY: "This can be an electronic or hard copy."]

YES...1
NO..2
REFUSED...-7
DON'T KNOW..-8

QA11_M7   The next topics are about health insurance and health care.

Is there a place that you <u>usually</u> go to when you are sick or need advice about your health?

[CODE "3" OR "4" ONLY IF VOLUNTEERED. DO NOT PROBE.]

YES...1
NO..2   **[GO TO NEXT SECTION]**
DOCTOR/MY DOCTOR..3
KAISER...4
MORE THAN ONE PLACE...................................5
REFUSED...-7   **[GO TO NEXT SECTION]**
DON'T KNOW..-8   **[GO TO NEXT SECTION]**

PROGRAMMING NOTE QA11_M8:
IF QA11_M7 = 1 OR 5 (HAS A USUAL SOURCE OF CARE) THEN DISPLAY "What kind of place do
you go to most often--a medical";
ELSE IF QA11_M7 = 3 (DOCTOR/MY DOCTOR), THEN DISPLAY "Is your doctor in a private";
ELSE IF QA11_M7 = 4 (KAISER), THEN CODE "1" FOR QA11_M8 AND GO TO QA11_M9

QA11_M8   {What kind of place do you go to most often—a medical/Is your doctor in a private} doctor's
                office, a clinic or hospital clinic, an emergency room, or some other place?

                        DOCTOR'S OFFICE/KAISER/OTHER HMO........1
                        CLINIC/HEALTH CENTER/HOSPITAL CLINIC.2
                        EMERGENCY ROOM...3
                        SOME OTHER PLACE (SPECIFY:_____)...91
                        NO ONE PLACE..92
                        REFUSED..-7
                        DON'T KNOW...-8

PROGRAMMING NOTE QA11_M9:
IF QA11_M7 = 1, 3, 4, OR 5 (HAVE A USUAL SOURCE OF CARE) AND ASTHMA, DIABETES, OR
HEART DISEASE, THEN CONTINUE WITH QA11_M9;
ELSE GO TO QA11_M10

QA11_M9   Do you have a personal doctor or medical provider who is your main provider?

                [IF NEEDED, SAY: "This can be a general doctor, a specialist doctor, a physician assistant,
                a nurse, or other health provider."]

                        YES...1
                        NO...2
                        REFUSED..-7
                        DON'T KNOW...-8

PROGRAMMING NOTE QA11_M10:
IF R HAS ASTHMA, DIABETES, OR HEART DISEASE AND SAW A DOCTOR IN THE PAST 12
MONTHS, THEN CONTINUE WITH QA11_M10;
ELSE GO TO PROGRAMMING NOTE QA11_M12

QA11_M10   During the past 12 months, did you phone or e-mail the doctor's office with a medical question?

                        YES...1
                        NO...2   **[GO TO PN QA11_M12]**
                        REFUSED..-7   **[GO TO PN QA11_M12]**
                        DON'T KNOW...-8   **[GO TO PN QA11_M12]**

QA11_M11   How often did you get an answer as soon as you needed it? Would you say…

Never,...1
Sometimes,..2
Usually, or...3
Always?...4
REFUSED...-7
DON'T KNOW..-8

PROGRAMMING NOTE QA11_M12:
IF QA11_M7 = 1, 3, 4, OR 5 (HAS A USUAL SOURCE OF CARE) AND QA11_M9 = 1 (HAS A PERSONAL DOCTOR/MEDICAL PROVIDER) AND HAS ASTHMA, DIABETES OR HAS HEART DISEASE, THEN CONTINUE WITH QA11_M12;
ELSE GO TO NEXT SECTION

QA11_M12   Is there anyone at your doctor's office or clinic who helps coordinate your care with other doctors or services such as tests or treatments?

YES..1
NO..2
REFUSED...-7
DON'T KNOW..-8

QA11_M13   How often does your medical provider listen carefully to you? Would you say…

Never,...1
Sometimes,..2
Usually, or...3
Always?...4
REFUSED...-7
DON'T KNOW..-8

QA11_M14   How often does your medical provider make sure you understand how to take care of your health? Would you say…

Never,...1
Sometimes,..2
Usually, or...3
Always?...4
REFUSED...-7
DON'T KNOW..-8

QA11_M15   When you need care right away, how often can you to get an appointment to see your medical provider within two days? Would you say…

        Never,...1
        Sometimes,...2
        Usually, or..3
        Always?..4
        DIDN'T NEED CARE RIGHT AWAY..................5
        REFUSED..-7
        DON'T KNOW...-8