

NEXT BIRTHDAY METHOD

**START HERE:**

1. Is there more than one person age 18 or older living in this household?

Yes

No → **GO TO A1 on the next page**



2. Including yourself, how many people age 18 or older live in this household?

3. **The adult with the next birthday should complete this questionnaire.** This way, across all households, HINTS will include responses from adults of all ages.

4. Please write the first name, nickname or initials of the adult with the next birthday. This is the person who should complete the questionnaire.

**Si prefiere recibir la encuesta en español, por favor llame 1-888-738-6812**

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STATEMENT OF PRIVACY: Collection of this information is authorized by The Public Health Service Act, Sections 411 (42 USC 285 a) and 412 (42 USC 285a-1.a and 285a1.3). Rights of study participants are protected by The Privacy Act of 1974. Participation is voluntary, and there are no penalties for not participating or withdrawing from the study at any time. Refusal to participate will not affect your benefits in any way. The information collected in this study will be kept private under the Privacy Act and will only be seen by people authorized to work on this project. The report summarizing the findings will not contain any names or identifying information. Identifying information will be destroyed when the project ends.

NOTIFICATION TO RESPONDENT OF ESTIMATED BURDEN: Public reporting burden for this collection of information is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. **An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.** Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: NIH, Project Clearance Branch, 6705 Rockledge Drive, MSC 7974, Bethesda, MD 20892-7974, ATTN: PRA (0925-0538). Do not return the completed form to this address.

**START HERE:**

1. Is there more than one person age 18 or older living in this household?

Yes  
 No → **GO TO A1 on the next page**

2. Including yourself, how many people age 18 or older live in this household?

▶ **Each person who is age 18 or older living in your household should fill out one questionnaire.** Please be sure that each adult has an opportunity to fill out a questionnaire. This is very important to the success of the study.

▶ **Each person can return their completed questionnaire in a separate, postage paid envelope.** The completed questionnaires do not have to be mailed back together in the same envelope. We have provided a separate postage paid envelope for each questionnaire.

▶ **If you need more questionnaires, please call 1-888-738-6805.**

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