Attachment 3b 2019-2020 SCREENER AND THE NON-RESPONSE BIAS MODULE Form Approved

OMB No. 0920-0950 Exp. Date XX/XX/20XX

CDC estimates the average public reporting burden for this collection of information as 5 minutes per response, including the time for reviewing instructions, searching existing data/information sources, gathering and maintaining the data/information needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Information Collection Review Office, 1600 Clifton Road NE, SD-74, Atlanta, Georgia 30333; ATTN: PRA (0920-0950).

Assurance of Confidentiality – We take your privacy very seriously. All information that relates to or describes identifiable characteristics of individuals, a practice or an establishment will be used only for statistical purposes. NCHS staff, contractors and agents will not disclose or release responses in identifiable form without the consent of the individual or establishment in accordance with section 308(d) of the Public Health Service Act (42 USC 242m(d)) and the Confidential Information Protection and Statistical Efficiency Act of 2002 (CIPSEA, Title 5 of Public Law 107-347). In accordance with CIPSEA every NCHS employee, contractor and agent has taken an oath and is subject to a jail term of up to five years, a fine of up to \$250,000, or both if he or she willfully discloses ANY identifiable information about you.

SCREENER MODULE #1 (SCQ) AND THE NON-RESPONSE BIAS MODULE

SCQ_INTR Hello, I'm {INTERVIEWER'S NAME} and we are conducting a survey for the National Center for Health Statistics, part of the Centers for Disease Control and Prevention (CDC).

SHOW ID CARD.

A letter was sent to you recently explaining a survey which is called the National Health and Nutrition Examination Survey and is about your family's health.

IF RESIDENT DOES NOT REMEMBER LETTER, HAND NEW COPY.

All the information that you give us is voluntary and will be kept confidential. Your name will not be attached to any of your answers without your specific permission.

HELP SCREEN:

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Public reporting burden for this collection of information is estimated to average 6.7 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number.

Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Information Collection Review Office, 1600 Clifton Road NE, SD-74, Atlanta, GA 30333, ATTN: PRA (0920-0950).

SCQ.010 Before we begin, I would like to verify a few things. ASK FOR ALL PERSONS WHO APPEAR UNDER 30 YEARS OF AGE:

Are you 18 years or older?

NO	1	(SCQ_END6)
NO, EMANCIPATED MINOR	2	
YES	3	

SCQ.015 Do you live here?

NO	1	(SCQ_END6)
YES	3	

SCQ.027 INTERVIEWER: IS THIS A DORMITORY ROOM?

YES	1
NO	2
DK	9
RF	7

SCQ.070a Please give me your complete address.

{#} {DIRECTION} {STREET NAME} {STREET/ROAD/AVENUE} {DIRECTION} {#} {PO BOX} {RURAL ROUTE #} {RURAL ROUTE BOX} {CITY} {STATE} { ZIP}

NO (WRONG ADDRESS)	1	(SCQ_END5)
YES (CORRECTIONS)	2	(SCQ.070b)
YES	3	(SCQ.090)

SCQ.070b Please give me your complete address.

{ADDITIONAL ADDRESS LINE} {#} {DIRECTION} {STREET NAME} {STREET/ROAD/AVENUE} {DIRECTION} {UNIT/APT/BLDG} {UNIT #} {PO BOX} {RURAL ROUTE #} {RURAL ROUTE BOX} {CITY} {STATE} { ZIP}-{ZIP-4}

CAPI INSTRUCTIONS: DISPLAY THE ADDRESS COLUMNS LISTED ABOVE AND ALLOW THE INTERVIEWER TO MAKE CORRECTIONS AS NEEDED. ONCE THE INTERVIEWER IS DONE, SHE WILL PRESS THE NEXT KEY TO CONTINUE.

THE FIELD FOR STATE MAY NOT BE UPDATED.

IF SCQ.070A = 2 AND NONE OF THE ADDRESS FIELDS ARE MODIFIED, AUTO-BACKCODE THE RESPONSE TO SCQ.070A = 3 (YES) AND GO TO SCQ.090.

SCQ.New1 First, I have some general questions about your health

Would you say your health in general is . . .

excellent,	1
very good,	2
good,	3
fair, or	4
poor?	5
REFUSED	7
DON'T KNOW	9

SCQ.New2 Are you now taking any medication prescribed by a health professional such as a doctor or dentist?

YES	1	
NO	2	(SCQ.New4)
REFUSED	7	(SCQ.New4)
DON'T KNOW	9	(SCQ.New4)

SCQ.New3 How many prescription medications do you currently use or take? Would you say...

1 to 2,	1
3 to 5, or	2
6 or more?	3
REFUSED	7
DON'T KNOW	9

SCQ.New4 Has a doctor or other health professional ever told you that you had diabetes?

INTERVIEWER INSTRUCTION: IF DIABETES **ONLY** DURING PREGNANCY, CODE NO.

YES	1
NO	2
BORDERLINE OR PREDIABETES	3
REFUSED	7
DON'T KNOW	9

SCQ.New5 Has a doctor or other health professional ever told you that you had hypertension (hy-per-**ten**-shun), also called high blood pressure? IF HIGH BLOOD PRESSURE **ONLY** DURING PREGNANCY, CODE NO.

INTERVIEWER INSTRUCTION: IF RESPONDENT SAYS "HIGH NORMAL BLOOD PRESSURE", "BORDERLINE HYPERTENSION" OR "PREHYPERTENSION" CODE NO.

YES	1
NO	2
REFUSED	7
DON'T KNOW	9

HELP SCREEN:

Hypertension (High Blood Pressure): A repeatedly increased blood pressure with the first number 140 or higher and the second number 90 or higher.

SCQ.090 To continue I need to know more about this household, how many people live in this household? Please do not include anyone who usually lives somewhere else.

NUMBER

DK	99
RF	77

SCQ.130 What are the names of all of the persons living here? Start with the name of the person, or one of the persons, who owns or rents this home. (Please remember not to include anyone who usually lives somewhere else.)

PROBE: Any others?

FIRST	MIDDLE	LAST	SUFFIX	GENDER
	DK		. 9	
	RF		. 7	

CAPI INSTRUCTIONS: WHEN THE FOCUS IS ON THE "GENDER" FIELD, DISPLAY:

ASK IF NOT OBVIOUS: Is {NAME} male or female?

MALE	1
FEMALE	2
DK	9
RF	7

CAPI INSTRUCTIONS:

HARD EDIT: IF FOCUS IS SHIFTED FROM THE "GENDER" FIELD AND NO ENTRY HAS BEEN MADE FOR GENDER, DISPLAY THE FOLLOWING HARD EDIT:

"REQUIRED VALUE MISSING FOR GENDER IN ROW {ROW IN WHICH GENDER IS MISSING}. PLEASE ENTER A VALUE."

SOFT EDIT: THE FIRST TIME DK OR RF IS ENTERED FOR GENDER, DISPLAY THE FOLLOWING: "A MISSING VALUE HERE MAY RESULT IN INCONCLUSIVE SAMPLING. PLEASE RE-ENTER THE VALUE TO CONFIRM."

ACCEPT THE SECOND ENTRY.

ENSURE THAT EACH NAME (COMBINATION OF FIRST, MIDDLE, LAST, SUFFIX) IS UNIQUE WITHIN THE HOUSEHOLD. IF A DUPLICATE NAME IS ENTERED, DISPLAY THE FOLLOWING HARD EDIT, "NAMES MUST BE UNIQUE. PERSONS # AND # HAVE IDENTICAL NAMES RECORDED. CORRECT THE ERROR TO CONTINUE."

SCQ.145 I have {TOTAL # OF PERSONS ENUMERATED} {person/people} living here --

READ NAMES LISTED BELOW.

FIRST	MIDDLE	LAST	SUFFIX	GENDER

SCQ.150

Have I missed . . .SCQ.150. . . any babies or small children?SCQ.160. . . any lodgers, boarders, or persons in your employ who live here?SCQ.170. . . anyone who usually lives here but is now away from home?SCQ.180. . . anyone else living or staying here?

YES	1	(SCQ.150N, 160N, 170N, 180N)
NO	2	(SCQ.190)
DK	9	(SCQ.190)
RF	7	(SCQ.190)

CAPI INSTRUCTIONS: THE SWEEP QUESTIONS (SCQ.150, 160, 170 AND 180) SHOULD BE DISPLAYED ON A SINGLE SCREEN. A "YES" RESPONSE TO A SWEEP QUESTION BRINGS UP THE HOUSEHOLD COMPOSITION MATRIX. BY CLICKING ON THE "INSERT ROW" BUTTON ON THIS SCREEN, A NEW ROW APPEARS FOR ENTRY OF NAME AND GENDER.

UPON EXITING THE NAME/GENDER SCREEN, THE CURSOR SHOULD RETURN TO THE SCREEN OF SWEEP QUESTIONS WITH THE CURSOR RESIDING ON THE NEXT LINE (QUESTION) THAT REQUIRES AN ANSWER.

IF ALL THE QUESTIONS HAVE BEEN ANSWERED, GO TO SCQ.190.

SCQ.150N [Have I missed any babies or small children?] (What are their names?) PROBE: Is (he/she) a "Junior", "Senior", "the 3rd" or something like that? (What is that?) PROBE: Any others?

FIRST	MIDDLE	LAST	SUFFIX	GENDER
	DK		9	
	RF		7	

CAPI INSTRUCTIONS: IF THE FOCUS IS ON THE GENDER FIELD, DISPLAY:

ASK IF NOT OBVIOUS:	
Is {NAME} male or female?	
MALE	1
FEMALE	2
DK	9
RF	7

SCQ.160N [Have I missed any lodgers, boarders, or persons in your employ who live here?] (What are their names?) PROBE: Any others?

FIRST	MIDDLE	LAST	SUFFIX	GENDER
	DK		9	
	RF		7	
CAPI INSTRUCTI	ONS: IF THE FOCUS IS ON	I THE GENDER FIELD, DIS	PLAY:	

ASK IF NOT OBVIOUS:

Is {NAME} male or female?	
MALE	1
FEMALE	2
DK	9
RF	7

SCQ.170N [Have I missed anyone who usually lives here but is now away from home?] (What are their names?) PROBE: Any others?

MIDDLE	LAST	SUFFIX	GENDER
DK		9	
RF		7	
	DK	DK	DK 9

CAPI INSTRUCTIONS: IF THE FOCUS IS ON THE GENDER FIELD, DISPLAY:

ASK IF NOT OBVIOUS:

Is {NAME} male or female?	
MALE	1
FEMALE	2
DK	9
RF	7

SCQ.180N [Have I missed anyone else living or staying here?] (What are their names?) PROBE: Any others?

FIRST	MIDDLE	LAST	SUFFIX	GENDER
	DK			
	RF		7	
CAPI INSTRUCTIO	ONS: IF THE FOCUS IS ON	THE GENDER FIELD, I	DISPLAY:	
ASK I	F NOT OBVIOUS:			
Is {NA	ME} male or female?			
-	MALE		1	
	FEMALE		2	
	DK			

SCQ.190 [VERIFY HOUSEHOLD MEMBERS BY READING NAMES LISTED BELOW.]

FIRST	MIDDLE	LAST	SUFFIX	GENDER

CAPI INSTRUCTIONS: THE APPLICATION SHOULD ALLOW THE INTERVIEWER TO ADD OR DELETE NAMES OR ROWS FROM THE HH COMPOSITION MATRIX, AS NECESSARY, BASED ON RESPONDENT'S CONFIRMATION OF THE PERSONS WHO HAVE BEEN ENUMERATED.

BOX 1

CHECK ITEM SCQ.191: APPLY THE SAMPLING ALGORITHM. IF NO PERSON IN THE HOUSEHOLD IS "POTENTIALLY ELIGIBLE" FOR THE STUDY BASED ON SAMPLING MESSAGES FOR GENDER GO TO SCQ.500; ELSE

GO TO BOX 2.

BOX 2

CHECK ITEM SCQ.193:

IF SCQ.027 = YES (1), CODE SCQ.195 AS "YES" (1) AND GO TO SCQ.220; ELSE

CONTINUE.

SCQ.195 Do {you/any of the persons in this household} have a home anywhere else?

STUDENTS LIVING AWAY AT SCHOOL ARE CONSIDERED TO HAVE A HOME SOMEWHERE ELSE.

YES	1	(SCQ.200)
NO	2	(SCQ.220)

SCQ.200 (Who is that?)

SELECT MEMBERS WITH HOME ELSEWHERE.

Name Other Home

CAPI INSTRUCTIONS: DISPLAY FIRST AND LAST NAMES OF ALL PERSONS LISTED ON THE HOUSEHOLD COMPOSITION MATRIX.

PROBE: Anyone else?

CAPI INSTRUCTIONS: THE DEFAULT FILL FOR THE "OTHER HOME" COLUMN IS "NO". HOWEVER, THE DEFAULT CAN BE TOGGLED TO "YES" BY MOVING THE CURSOR TO THE "OTHER HOME" CELL ASSOCIATED WITH THE PERSON WHO HAS A SECOND RESIDENCE, AND SELECTING "YES".

IF NONE OF THE "OTHER HOME" CELLS HAVE BEEN SET TO "YES", DISPLAY THE FOLLOWING BOX:

". You did NOT select any HH member living in another place.

Button 1: Go back and select a person Button 2: No one living elsewhere

IF BUTTON #1 IS SELECTED, RETURN TO SCQ.200. IF BUTTON #2 IS SELECTED, AUTO-BACKCODE THE RESPONSE TO SCQ.195 TO "NO" AND PROCEED TO SCQ.220.

SCQ.210 Where {do you/does {NAME}} usually live and sleep; here or somewhere else?

Name Live Here

CAPI INSTRUCTIONS: DISPLAY "NAME" AND "LIVE HERE" COLUMNS. THE ANSWER CATEGORIES FOR THE LIVE HERE COLUMN ARE "HERE" (1), "SOMEWHERE ELSE" (2), "DK" (9), AND "RF" (7)

HERE	1
SOMEWHERE ELSE	2
DK	9
RF	7

CAPI INSTRUCTIONS: IF "1", "9", OR "7" IS SELECTED, LEAVE THE PERSON ON THE HH COMPOSITION MATRIX; ELSE

IF "2" IS SELECTED AND THIS IS A SINGLE PERSON HOUSEHOLD, OR IF "2" HAS BEEN SELECTED FOR ALL HOUSEHOLD MEMBERS, THE HOUSEHOLD IS "INELIGIBLE" AND THE SCREENER IS TERMINATED AFTER THE COLLECTION OF BRANDING QUESTIONS (SCQ.500-SCQ.540) AND THE TELEPHONE NUMBER (SCQ.430); ELSE

IF "2" IS SELECTED FOR AT LEAST ONE PERSON AND THE HOUSEHOLD IS MORE THAN A SINGLE PERSON HOUSEHOLD AND "2" HAS **NOT** BEEN SELECTED FOR **ALL** MEMBERS OF THE HH, SET A FLAG TO INDICATE THIS PERSON'S PERMANENT RESIDENCE WAS SOMEWHERE ELSE. THE FLAG IS AN INDICATION THAT ON ALL FUTURE DISPLAYS OF THE HH COMPOSITION MATRIX, THIS PERSON (AND ALL PERSON-LEVEL DATA) WILL NOT BE DISPLAYED. IF THE REFERENCE PERSON IS NOT ELIGIBLE TO BE THE REFERENCE PERSON BASED ON WHERE S/HE USUALLY LIVES, IDENTIFICATION OF A NEW REFERENCE PERSON IS REQUIRED. RE-APPLY THE REFERENCE PERSON EDIT LOGIC TO IDENTIFY THE REFERENCE PERSON AS THE FIRST PERSON ON THE ENUMEARATION TABLE WHO IS ≥ 18 YEARS OLD; ELSE

IF NO ONE ON THE ENUMBERATION TABLE IS AGE 18 OR OLDER, IDENTIFY THE REFERENCE PERSON AS THE OLDEST PERSON IN THE HOUSEHOLD FOR WHOM THIS IS THE PRIMARY RESIDENCE.

SCQ.220 Are {you/any of the persons in this household} now on full-time active duty with the Armed Forces of the United States?

YES	1	(SCQ.500)
NO	2	(SCQ.250)
DK	9	(SCQ.250)
RF	7	(SCQ.250)

CAPI INSTRUCTIONS: IF CODED "1" AND THIS IS A SINGLE PERSON HOUSEHOLD, OR IF ALL HOUSEHOLD MEMBERS ARE "1", THE HOUSEHOLD IS "INELIGIBLE" AND THE SCREENER IS TERMINATED AFTER THE COLLECTION OF BRANDING QUESTIONS (SCQ.500-SCQ.540) AND THE TELEPHONE NUMBER (SCQ.430); ELSE

IF THE HOUSEHOLD IS MORE THAN A SINGLE PERSON HOUSEHOLD, THE SKIPS SHOULD BE FOLLOWED AS SPECIFIED ABOVE.

SCQ.230 Who is that?

Name Military

SELECT ACTIVE MILITARY MEMBERS.

CAPI INSTRUCTIONS: DISPLAY FIRST, MIDDLE AND LAST NAMES OF ALL PERSONS LISTED ON THE HOUSEHOLD COMPOSITION MATRIX.

PROBE: Anyone else?

CAPI INSTRUCTIONS: THE CURSOR SHOULD RESIDE IN THE COLUMN "Military". THE DEFAULT FILL FOR THIS COLUMN SHOULD BE "NO". HOWEVER, WHEN ON THIS QUESTION, THE DEFAULT CAN BE TOGGLED TO "YES" BY MOVING THE CURSOR TO THE "Military" CELL ASSOCIATED WITH THE PERSON IDENTIFIED AND SELECTING "YES". WHEN LEAVING THIS SCREEN, IF NONE OF THE "Military" CELLS HAVE BEEN SET TO "YES", DISPLAY THE FOLLOWING BOX:

You did NOT select any HH member on active duty.

Button 1: Go back and select a person Button 2: No one on active duty

IF BUTTON #1 IS SELECTED, RETURN TO SCQ.230. IF BUTTON #2 IS SELECTED, AUTO-BACKCODE THE RESPONSE TO SCQ.220 TO "NO" AND PROCEED TO SCQ.250. CONTINUE.

SCQ.240 Where {do you/does {NAME}} usually live and sleep; here or some where else?

HERE	1
SOMEWHERE ELSE	2
DK	9
RF	7

CAPI INSTRUCTIONS: IF "1", "9", OR "7" IS ENTERED, LEAVE PERSON ON HH COMPOSITION MATRIX; DO **NOT** FLAG FOR SAMPLING.

IF "2" IS ENTERED, SET A FLAG TO INDICATE PERSON'S PERMANENT RESIDENCE WAS SOMEWHERE ELSE. THE FLAG IS AN INDICATION THAT ON ALL FUTURE DISPLAYS OF THE HH COMPOSITION MATRIX, THIS PERSON (AND ALL PERSON-LEVEL DATA) WILL NOT BE DISPLAYED.

IN THE EVENT THAT THE PERSON BEING FLAGGED AS LIVING "SOMEWHERE ELSE" IS THE REFERENCE PERSON, IDENTIFICATION OF A NEW REFERENCE PERSON IS REQUIRED. RE-APPLY THE REFERENCE PERSON EDIT LOGIC TO IDENTIFY THE REFERENCE PERSON AS THE FIRST PERSON ON THE ENUMEARATION TABLE WHO IS \geq 18 YEARS OLD; ELSE

IF NO ONE ON THE ENUMERATION TABLE IS AGE 18 OR OLDER, IDENTIFY THE REFERENCE PERSON AS THE OLDEST PERSON IN THE HOUSEHOLD FOR WHOM THIS IS THE PRIMARY RESIDENCE.

SCQ.250 THESE ARE THE MEMBERS OF THE DU WHO HAVE BEEN LISTED AS HH MEMBERS.

{NAME GENDER}

BOX 3

CHECK ITEM SCQ.255:

APPLY THE SAMPLING ALGORITHM. IF NO PERSON IN THE HOUSEHOLD IS "POTENTIALLY ELIGIBLE" FOR THE STUDY BASED ON SAMPLING MESSAGES FOR PLACE OF RESIDENCE, GO TO SCQ.500; ELSE

CONTINUE.

BOX 3A

CHECK ITEM SCQ.256: ASK SCQ.260 FOR EACH PERSON ON HH ROSTER. SCQ.260 [Do you/Does NAME] consider [yourself/himself/herself] to be Hispanic, Latino, or of Spanish origin?

READ IF NECESSARY: Where do {your/his/her} ancestors come from?

Puerto Rican Cuban/Cuban American Dominican (Republic) Mexican/Mexican American Central/South American Other Latin American Other Hispanic or Latino

YES	1
NO	2
DK	9
RF	7

HELP SCREEN:

SPANISH, HISPANIC OR LATINO PEOPLE MAY BE OF ANY RACE. LISTED BELOW ARE HISPANIC OR LATINO CATEGORIES/COUNTRIES.

MEXICAN

PUERTO RICAN CUBAN DOMINICAN REPUBLIC **CENTRAL AMERICAN:** COSTA RICAN **GUATEMALAN** HONDURAN NICARAGUAN PANAMANIAN SALVADORAN OTHER CENTRAL AMERICAN SOUTH AMERICAN: ARGENTINEAN BOLIVIAN CHILEAN COLOMBIAN **ECUADORIAN** PARAGUAYAN PERUVIAN URUGUAYAN VENEZUELAN OTHER SOUTH AMERICAN **OTHER HISPANIC OR LATINO: SPANIARD** SPANISH

SPANISH SPANISH AMERICAN

CAPI INSTRUCTIONS: DISPLAY THE FOLLOWING SOFT EDIT THE FIRST TIME A DK OR RF IS ENTERED:

"A missing value here may result in inconclusive sampling. Please re-enter the value to confirm."

ACCEPT THE SECOND ENTRY.

SCQ.262 WARNING: REVIEW HISPANIC STATUS FOR EACH PERSON! SAMPLING ALGORITHM WILL BE APPLIED.

{NAME ETHNICITY}

CAPI INSTRUCTIONS: DISPLAY NAME AND ETHNICITY FOR EACH ENUMERATED PERSON AS DETERMINED AT SCQ.260. INTERVIEWER MAY BACK-UP TO CORRECT.

BOX 3B

CHECK ITEM SCQ.265: CYCLE THROUGH SCQ.270 FOR EACH PERSON LISTED ON HH ROSTER.

SCQ.270 HAND CARD #1

What race do you consider {yourself/NAME} to be? Please select one or more.

CHECK ALL THAT APPLY.

AMERICAN INDIAN OR ALASKAN NATIVE.	1
ASIAN	2
BLACK OR AFRICAN AMERICAN	
NATIVE HAWAIIAN OR PACIFIC ISLANDER	4
WHITE	5
OTHER	6
DK	9
RF	7

CAPI INSTRUCTIONS: DISPLAY THE FOLLOWING SOFT EDIT THE FIRST TIME A DK OR RF IS ENTERED.

"A missing value here may result in inconclusive sampling. Please re-enter the value to confirm."

ACCEPT THE SECOND ENTRY.

BOX 3C

CHECK ITEM SCQ.270A:

ASK FOR NEXT PERSON. IF NO NEXT PERSON, CONTINUE WITH BOX 3D.

BOX 3D

CHECK ITEM SCQ.270B:

CYCLE THROUGH BOX 3E THROUGH SCQ.280 FOR EACH PERSON ON HH ROSTER.

BOX 3E

CHECK ITEM SCQ.270C: CHECK SCQ.260 FOR EACH PERSON. IF PERSON LISTED AS **NOT** HISPANIC (CODE 2), CONTINUE. OTHERWISE, SKIP TO BOX 3H.

BOX 3F

CHECK ITEM SCQ.270D: CHECK SCQ.270 – IF ANY PERSON'S RACE = CODE 6 (OTHER) AND DOES NOT = CODE 2 OR CODE 3 (ASIAN OR BLACK), CONTINUE. OTHERWISE, SKIP TO BOX 3H.

BOX 3G

CHECK ITEM SCQ.270E:

ASK QUESTION SCQ.280 FOR EACH PERSON ON HH ROSTER WHO MEET THE CRITERIA SPECIFIED IN BOXES 3E AND 3F (CODE 2 IN SCQ.260 AND CODE 6 ALONE OR WITH CODE 1, 4 OR 5 IN SCQ.270.

SCQ.280

Do any of the groups on this card represent {your/NAME's} national origin or ancestry?

HAND CARD #2

YES	1	(CONTINUE WITH CAPI
		INSTRUCTION SCQ.282)
NO	2	(BOX 3H)

SCQ.282

CAPI INSTRUCTION: ADD CODE #2 (ASIAN) AS RACE IN SCQ.270.

BOX 3H

CHECK ITEM SCQ.282A: CYCLE THROUGH BOX 3D – SCQ.280 FOR NEXT PERSON. IF NO NEXT PERSON, CONTINUE.

SCQ.271 WARNING! REVIEW RACE FOR EACH PERSON! SAMPLING ALGORITHM WILL BE APPLIED.

{NAME RACE}

CAPI INSTRUCTIONS: DISPLAY NAME AND RACE(S) FOR EACH ENUMERATED PERSON AS DETERMINED AT SCQ.270, SCQ.280, or SCQ.282. INTERVIEWER MAY BACK-UP TO CORRECT.

BOX 3I

CHECK ITEM SCQ.282B:

IF SCQ.260 = CODE 1 (YES-HISPANIC), APPLY HISPANIC SAMPLING ALGORITHM AND SKIP TO BOX 4. OTHERWISE, CONTINUE WITH BOX 3J.

BOX 3J

CHECK ITEM SCQ.282C:

IF AT LEAST ONE CODE IN SCQ.270 = CODE 3 (BLACK), APPLY BLACK/AFRICAN AMERICAN SAMPLING ALGORITHM AND SKIP TO BOX 4. OTHERWISE, CONTINUE WITH BOX 3K.

BOX 3K

CHECK ITEM SCQ.282D: IF SCQ.270 = 2 (ASIAN) OR IF SCQ.280 = 1, APPLY ASIAN SAMPLING ALGORITHM AND SKIP TO BOX 4. OTHERWISE, GO TO BOX 3L.

BOX 3L

CHECK ITEM SCQ.282E: APPLY WHITE/OTHER SAMPLING ALGORITHM.

BOX 4

CHECK ITEM SCQ.285:

IF NO PERSON IN THE HOUSEHOLD IS "POTENTIALLY ELIGIBLE" FOR THE STUDY BASED ON SAMPLING MESSAGES FOR ETHNICITY OR RACE, GO TO SCQ.500; OTHERWISE, CONTINUE.

SCQ.290 What is {your/{NAME}'s} birthdate?

MM	DD	YYYY		(SCQ.291)
DK			9	(SCQ.292)
RF			7	(SCQ.292)

CAPI INSTRUCTIONS: IF DATE OF BIRTH IS SPECIFIED, CALCULATE AGE AND POST IN THE "AGE" CELL FOR THE APPROPRIATE PERSON WITH THE CURSOR RESIDING IN THAT CELL AND SCQ.291 DISPLAYED ABOVE THE HH COMPOSITION MATRIX; ELSE

GO TO SCQ.292.

SCQ.291 So {you are/{NAME} is} {AGE AS CALCULATED FROM DOB}?

IF NECESSARY, RE-ENTER CORRECT AGE.

CAPI INSTRUCTIONS: IF AGE IS RE-ENTERED BY THE INTERVIEWER, THE APPLICATION SHOULD ADJUST DOB YEAR IF VALID VALUES FOR DOB MONTH AND DAY EXIST. IF DOB MONTH, DAY AND YEAR ARE RF OR DK, DO **NOT** BACK-FILL THE DOB YEAR BASED ON THE ENTERED AGE.

SCQ.292 How old {are you/is {NAME}}?

IF AGE IS LESS THAN 12 MONTHS, ENTER 0.

AGE		(SCQ.301)
DK	999	(SCQ.300)
RF	777	(SCQ.300)

SCQ.300 About how old {are you/is {NAME}}?

{AGE RANGES FOR SAMPLED RACE/ETHNICITY = BLACK OR HISPANIC}/{AGE RANGES FOR SAMPLED RACE/ETHNICITY = ASIAN}/{AGE RANGES FOR SAMPLED RACE/ETHNICITY = WHITES/OTHERS}; {AGE RANGES FOR DK/RF RACE/ETHNICITY}

DK	9999
RF	7777

		AGE RANGE	CATEGORIES		
Black non-Hispanic	M&F	0-11 mos.	White/Other	M&F	0-11 mos.
		1-2 yrs.	Low Income		1-2 yrs.
		3-5 yrs.			3-5 yrs.
	М	6-11 yrs.		М	6-11 yrs.
		12-19 yrs.			12-19 yrs.
		20-39 yrs.			20-29 yrs.
		40-49 yrs.			30-39 yrs.
		50-59 yrs.			40-49 yrs.
		60+ yrs.			50-59 yrs.
	F	6-11 yrs.			60-69 yrs.
		12-19 yrs.			70-79 yrs.
		20-39 yrs.			80+ yrs.
		40-49 yrs.		F	6-11 yrs.
		50-59 yrs.			12-19 yrs.
		60+ yrs.			20-29 yrs.
Hispanic	M&F	0-11 mos.			30-39 yrs.
		1-2 yrs.			40-49 yrs.
		3-5 yrs.			50-59 yrs.
	М	6-11 yrs.			60-69 yrs.
		12-19 yrs.			70-79 yrs.
		20-39 yrs.			80+ yrs.
		40-49 yrs.	White/Other	M&F	0-11 mos.
		50-59 yrs.	Not Low Income		1-2 yrs.
		60+ yrs.			3-5 yrs.
	F	6-11 yrs.		М	6-11 yrs.
		12-19 yrs.			12-19 yrs.
		20-39 yrs.			20-29 yrs.
		40-49 yrs.			30-39 yrs.
		50-59 yrs.			40-49 yrs.
		60+ yrs.			50-59 yrs.
Asian non-Black/	M&F	0-11 mos.			60-69 yrs.
non-Hispanic	mai	1-2 yrs.			70-79 yrs.
		3-5 yrs.			80+ yrs.
	М	6-11 yrs.		F	6-11 yrs.
		12-19 yrs.		·	12-19 yrs.
		20-39 yrs.			20-29 yrs.
		40-49 yrs.			30-39 yrs.
		50-59 yrs.			40-49 yrs.
		60+ yrs.			50-59 yrs.
	F	6-11 yrs.			60-69 yrs.
	I	12-19 yrs.			70-79 yrs.
		20-39 yrs.			70-79 yrs. 80+ yrs.
		=			00+ yis.
		40-49 yrs.			
		50-59 yrs.			
		60+ yrs.			

CAPI INSTRUCTIONS: DISPLAY QUESTION TEXT ABOVE THE HH COMPOSITION MATRIX WITH THE CURSOR RESIDING IN THE "AGE RANGE" CELL ON THE MATRIX.

DISPLAY THE FOLLOWING SOFT EDIT THE FIRST TIME A DK OR RF IS ENTERED. ACCEPT THE SECOND ENTRY.

"A missing value here may result in inconclusive sampling. Please re-enter the value to confirm."

ACCEPT THE SECOND ENTRY.

SCQ.301 WARNING: REVIEW AGE FOR EACH PERSON! SAMPLING ALGORITHM WILL BE APPLIED.

{NAME AGE RANGE}

CAPI INSTRUCTIONS: DISPLAY NAME AND AGE AS DETERMINED AT SCQ291, SCQ292, OR SCQ300 FOR EACH ENUMERATED PERSON. INTERVIEWER MAY BACK-UP TO CORRECT.

BOX 5

CHECK ITEM SCQ.303:

APPLY THE SAMPLING ALGORITHM. IF NO PERSON IN THE HOUSEHOLD IS "POTENTIALLY ELIGIBLE" FOR THE STUDY BASED ON SAMPLING MESSAGES FO AGE, GO TO SCQ.500; ELSE

CONTINUE.

BOX 6

CHECK ITEM SCQ.315: IF SAMPLING MESSAGE FOR LOW INCOME IS SET, CONTINUE; ELSE

GO TO BOX 12.

BOX 7

CHECK ITEM SCQ.320: IF SCQ.027 = YES (1), GO TO BOX 12; ELSE

CONTINUE.

BOX 8

CHECK ITEM SCQ.325:

IF **ALL** HOUSEHOLD MEMBER'S SAMPLED RACE/ETHNICITY = HISPANIC (1) OR BLACK (2), GO TO BOX 12; ELSE

IF **ANY** HOUSEHOLD MEMBER'S SAMPLED RACE/ETHNICITY = WHITE/OTHER (3) AND ONE OR MORE PERSON'S IN THE HOUSEHOLD COULD MEET THE LOW INCOME SAMPLING CRITERIA AND THOSE PERSONS ARE NOT **ALL** ACTIVE MILITARY, CONTINUE; ELSE

GO TO BOX 12.

BOX 9

CHECK ITEM SCQ.330: IF **ALL** HOUSEHOLD MEMBER'S WHO WOULD MEET THE LOW INCOME SAMPLING CRITERIA ARE ALREADY SAMPLED BASED ON GENDER, ETHNICITY, RACE, AGE OR ARE ACTIVE MILITARY, GO TO BOX 12; ELSE

CONTINUE.

SCQ.340 Please think for a moment about the various sources from which the members of this household received income during the last 12 months, that is from {CURRENT MONTH} {LAST YEAR IN 4-DIGITS} to {LAST MONTH} {CURRENT YEAR IN 4-DIGITS}. Thinking about all the sources of income, please tell me whether the total income received by the members of this household during the last 12 months was more or less than {DISPLAY EXACT THRESHOLD DOLLAR AMOUNT FOR # OF PEOPLE LIVING IN HOUSEHOLD}.

CAPI INSTRUCTIONS: DISPLAY 1.85 TIMES THE AMOUNT IN TABLE BELOW (185%).

INCOME THRESHOLDS:

Persons in family	Poverty guideline			
1	\$12,140			
2	16,460			
3	20,780			
4	25,100			
5	29,420			
6	33,740			
7	38,060			
8	42,380			
For families/households with meach additional person.	ore than 8 persons, add \$4,320 for			

2018 Poverty Guidelines for the 48 Contiguous States and the District of Columbia

SOURCE: Federal Register No. 83FR2642, January 18, 2018, pp. 2642-2644

INTERVIEWER INSTRUCTIONS: IF INCOME EQUAL TO {DISPLAY EXACT THRESHOLD DOLLAR AMOUNT FOR # OF PEOPLE LIVING IN HOUSEHOLD}, CODE 'LESS'.

MORE	1	(BOX 12)
LESS	2	(BOX 12)
DK	9	
RF	7	

BOX 10

CHECK ITEM SCQ.345:

IF ANY CHILDREN IN HOUSEHOLD <6 YEARS OLD, CONTINUE; ELSE

GO TO BOX 12.

BOX 11

CHECK ITEM SCQ.347: IF ANY MALES IN HOUSEHOLD ≥18, GO TO BOX 12; ELSE

TREAT HOUSEHOLD AS LOW INCOME FOR PURPOSES OF SAMPLING.

BOX 12

CHECK ITEM SCQ.355:

IF **ANY** INDIVIDUAL MEETS THE SPECIFIED SAMPLING CRITERIA BASED ON GENDER, ETHNICITY, RACE, AGE; OR INCOME LEVEL **AND** IS **NOT** ON ACTIVE MILITARY STATUS, GO TO SCQ.370; ELSE

IF SAMPLING FOR ALL INDIVIDUALS IS INCONCLUSIVE DUE TO CONFIRMED MISSING DATA (DK/RF) IN THE CRITICAL SAMPLING VARIABLES, GO TO SCQ.500, THEN TERMINATE THE SCREENER WITH AN ASSIGNED STATUS OF "INCOMPLETE"; ELSE

GO TO SCQ.500.

SCQ.370 THIS HOUSEHOLD HAS ELIGIBLE SURVEY PARTICIPANTS.

THE ELIGIBLE PERSON(S) SAMPLED IN THIS HOUSEHOLD ARE:

{UNIQUE NAMES, GENDERS, ETHNICITIES RACES, AGES OF SAMPLED PERSONS}

CAPI INSTRUCTIONS: SINCE THE SAMPLING ALGORITHM HAS BEEN RUN FOR THE LAST TIME, BACK-UP IS NOT ALLOWED AFTER THIS SCREEN.

SCQ.420 Is {REFERENCE PERSON}'s mailing address the same as {his/her} street address?

SFQ.220

YES	1	(SCQ.500)
NO	2	(SCQ.425)
DK	9	(SCQ.500)
RF	7	(SCQ.500)

SCQ.425 Please give me {REFERENCE PERSON}'s complete mailing address.

{#} {DIRECTION} {STREET NAME} {STREET/ROAD/AVENUE} {DIRECTION} {#}
{PO BOX} {RURAL ROUTE #} {RURAL ROUTE BOX} {CITY} {STATE} { ZIP}

CAPI INSTRUCTIONS: DISPLAY THE COMPLETE ADDRESS OF THE HOUSEHOLD AS COLLECTED IN SCQ070 OR SCQ080 AND ALLOW UPDATES IN ALL FIELDS. IF UPDATES ARE MADE, STORE THIS ADDRESS AS THE MAILING ADDRESS. IF NO UPDATES ARE MADE, RESET SCQ.420 TO "NO" AND CONTINUE TO SCQ.500.

SCQ.500 Other than me (or my colleague) talking to you about the survey, have you ever heard about the National Health and Nutrition Examination Survey?

INTERVIEWER: READ 'OR MY COLLEAGUE' IF ANOTHER INTERVIEWER HAS VISITED THE HOUSE.

Yes	1	(SCQ.510)
No	2	(SCQ.520)
DK	9	(SCQ.520)
RF	7	(SCQ.520)

SCQ.510 From where did you hear about the survey?

CODE ALL THAT APPLY HAND CARD #3

SFQ.225

TV	1
RADIO	2
NEWSPAPER (PRINT OR ONLINE)	3
SOCIAL MEDIA	4
OTHER WEBSITE	5
WORD OF MOUTH	6
OTHER	7
DK	99
RF	77

HELP SCREEN:

Social media refers to interactive electronic platforms that allow users to share ideas and information with a network of contacts (popular sites include Facebook, Twitter, Reddit, Snapchat, LinkedIn etc.).

Word of Mouth refers to oral communication from person-to-person which could be as simple as someone in your family or a neighbor telling you about the survey.

SCQ.520 Do you have at least one social media account?

Yes	1
No	2
DK	9
RF	7

HELP SCREEN:

The term social media account is used to describe a person having an account on one of the social media platforms such as Facebook, Twitter, Reddit, Snapchat, LinkedIn etc.

SCQ.530 Did you or someone in your household see an ad for the National Health and Nutrition Examination Survey on Facebook or Instagram?

HARD CARD #4

Yes	1
No	2
DK	9
RF	7

SCQ.540 {Would seeing these ads on Facebook or Instagram/Did these ads} motivate you to learn more about the National Health and Nutrition Examination Survey?

Yes	1
No	2
DK	9
RF	7

CAPI INSTRUCTION:

IF SCQ.530=1, FILL "Would seeing these ads on Facebook or Instagram" IF SCQ.530=2, 9, OR 7, FILL "Did these ads"

SCQ.430 Please give me your home telephone number in case my office wants to check my work. SFQ.230

() HOME TELEPHONE NUMBER	-	(SCQ.440a)
	9	(SCQ.460) (SCQ.460) (SCQ.460)

CAPI INSTRUCTIONS: THE FIELD FOR "EXTENSION" IS ALLOWED TO BE BLANK.

SCQ.440a In whose name is the telephone listed?

SFQ.240a

INTERVIEWER INSTRUCTION: SELECT NAME FOR TELEPHONE LISTING FROM HOUSEHOLD ROSTER.

FIRST	LAST		(BOX 13)
UNLISTED.		1	(BOX 13)
	ST		. ,
DK		9	(BOX 13)
RF		7	(BOX 13)

CAPI INSTRUCTIONS: THE DEFAULT FILL FOR THE "NAME" FIELD SHOULD BE THE FIRST, LAST, AND SUFFIX NAME OF THE REFERENCE PERSON. HOWEVER, MOVING THE FOCUS OF THE CURSOR OVER THE "NAME" FILL PRODUCES A LIST DISPLAYING THE FIRST AND LAST NAMES OF ALL HH MEMBERS ON THE HH COMPOSITION MATRIX AND THE OPTIONS OF "UNLISTED", AND "NOT ON LIST". SCQ.440b [In whose name is the telephone listed?]

SFQ.240b

INTERVIEWER INSTRUCTION: ENTER NAME.

Name

{FIRST} {LAST}

SCQ.460 Is there another number where you can be reached?

() OTHER TELEPHONE NUMBER	-	(SCQ461)
	9	(BOX 13)
RF	7	(BOX 13)

(BOX 13)

CAPI INSTRUCTIONS: THE FIELD FOR "EXTENSION" IS ALLOWED TO BE BLANK.

SCQ461 Where is that telephone located?

WORK	1
RELATIVE'S HOME	2
NEIGHBOR'S HOME	3
CELL PHONE	4
OTHER	5
DK	9
RF	7

BOX 13

CHECK ITEM SCQ.465:

IF THIS IS AN INELIGIBLE HOUSEHOLD, GO TO BOX 13A; ELSE

IF THIS IS AN ELIGIBLE HOUSEHOLD, GO TO SCQ_END2; ELSE

IF THIS IS A BREAK-OF, GO TO SCQ_END3 AND REQUIRE ENTRY OF DISPOSITION; ELSE

IF MISSING CRITICAL SAMPLING DATA, GO TO SCQ_END4; ELSE IF SCQ.070 (ADDRESS VERIFICATION) IS "NO (WRONG ADDRESS)"; GO TO SCQ_END 5.

BOX 13A

CHECK ITEM SCQ.545:

IF CASE IS SELECTED FOR MDU PROCEDURE, CONTINUE TO SCQ.560; ELSE GO TO SCQ_END1.

SCQ.560 We want to be sure that every household in this area has been given a chance to participate in this important survey. Are there any other living quarters here that we may have missed?

YES	1	
NO	2	(SCQ_END1)
DK	9	(SCQ_END1)
RF	7	(SCQ_END1)

CAPI INSTRUCTION: DISPLAY IF CASE SELECTED FOR MDU PROCEDURE.

SCQ.570 COMPLETE THE HIDDEN DU FORM.

FORM COMPLETE	1
DK	9
RF	7

SCQ_END1 Thank you for your responses today {and if you had already answered these questions online}. No members of this household were selected for further participation in the survey.

INTERVIEWER INSTRUCTIONS:

IF A RESIDENT INQUIRES ABOUT THE ONLINE QUESTIONS: We are exploring if a part of the survey can be completed online and sent some households invitations to answer the questions online. These questions were the same ones you just answered. We have re-asked the same questions to ensure the online questions were clear and easy to understand.

CAPI INSTRUCTIONS:

IF THE CASE IS FLAGGED FOR WEBSCREENING (WEB_SCREENER FROM SAM_DU TABLE = YES), DISPLAY "and if you had already answered these questions online".

BOX 14

CHECK ITEM SCQ.New6: GO TO RIQ.010

SCQ_END2 Thank you for your responses today {and if you had already answered these questions online}. This household has eligible survey participants.

[READ NAMES LISTED BELOW.]

{UNIQUE NAMES, GENDERS, AGES OF SAMPLE PERSONS}

[IF APPROPRIATE, EXPLAIN PARTICIPATION IN STUDY TO RESPONDENT.]

INTERVIEWER INSTRUCTIONS:

IF A RESIDENT INQUIRES ABOUT THE ONLINE QUESTIONS: We are exploring if a part of the survey can be completed online and sent some households invitations to answer the questions online. These questions were the same ones you just answered. We have re-asked the same questions to ensure the online questions were clear and easy to understand.

CAPI INSTRUCTIONS:

IF THE CASE IS FLAGGED FOR WEBSCREENING (WEB_SCREENER FROM SAM_DU TABLE = YES), DISPLAY "and if you had already answered these questions online".

SCQCONT PERFORM THE RELATIONSHIP INTERVIEW AT THIS TIME?

CAPI INSTRUCTIONS: IF CODED "YES" (1), UPON LEAVING THIS SCREEN, LAUNCH MODULE 2 OF THE SCREENER, COLLECTING RELATIONSHIP INFORMATION.

RIQ.010 SELECT RESPONDENT FOR THE SCREENER MODULE 1 – HOUSEHOLD COMPOSITION.

Respondent

{FIRST NAME} {LAST NAME}

CAPI INSTRUCTIONS: WHEN THE FOCUS OF THE CURSOR IS ON THE "RESPONDENT" FIELD, THE ANSWER CHOICES SHOULD BE A LIST THAT DISPLAYS FIRST AND LAST NAMES OF ALL HH MEMBERS ON THE HH COMPOSITION MATRIX.

BOX 15

CHECK ITEM SCQ.New6: GO TO INTERPRETER MODULE – INT_END1.

SCQ_END3 Thank you.

SCQEND3 PROGRAMMER SPEC: AFTER EXITING FROM THIS SCREEN, PRESENT THE LIST OF DISPOSITIONS AND DO NOT ALLOW EXIT FROM THE APPLICATION WITHOUT ENTRY OF A DISPOSITION.

SCQ_END4 Thank you.

[EXPLAIN TO RESPONDENT THAT YOU WILL NEED TO RETURN TO THE HOUSEHOLD TO COLLECT CRITICAL INFORMATION THAT WAS NOT PROVIDED THIS TIME.]

SCQ_END5 Thank you.

LOCATE CORRECT ADDRESS AND RESTART SCREENER.

SCQ_END6 Thank you.

IDENTIFY HOUSEHOLD RESIDENT WHO IS 18 YEARS OR OLDER.

CAPI INSTRUCTION: KEEP SCREENER DISPOSITION AS 'NOT WORKED'.

SCREENER MODULE #2 (SFQ)

TO BE ADMINISTERED TO ALL ELIGIBLE HOUSEHOLDS

BOX 1

CHECK ITEM SFQ.001:

IF ONLY 1 PERSON HOUSEHOLD, CODE PERSON AS "REFERENCE PERSON", CODE RELATIONSHIP AS "SELF", ASSIGN FAMILY #1 TO PERSON AND GO TO END OF SECTION. OTHERWISE, CONTINUE.

BOX 2

CHECK ITEM SFQ.004:

CODE FIRST PERSON LISTED ON H.H. MATRIX WHOSE AGE IS ≥ 18 AND IS **NOT** FLAGGED AS LIVING "SOMEWHERE ELSE" AS "REFERENCE PERSON", HEAD OF FAMILY #1 AND RELATIONSHIP AS "SELF".

BOX 3

LOOP 1:

ASK NEW BOX 3A – SFQ.040 AS APPROPRIATE FOR EACH PERSON {P} LISTED BELOW REFERENCE PERSON ON THE HOUSEHOLD MATRIX.

NEW BOX 3A

CHECK ITEM SFQ.005:

CHECK GENDER OF {PERSON} FROM SCREENER. IF {PERSON} IS MALE, DISPLAY SFQ.006. IF FEMALE, DISPLAY SFQ.007.

SFQ.000 {The next questions are about family relationships.}

NEW BOX 3B

IF EXIT BEFORE SFQEND, GO TO SFQEND2.

SFQ.006 What is {PERSON'S} relationship to {REFERENCE PERSON}?

HAND CARD SFQ1

CAPI DESIGN = RADIO BUTTONS

RELATED	NOT RELATED	
HUSBANDO01	HOUSEMATE/ROOMMATE O	12
PARTNERO02	ROOMER/BOARDERO13	
SON (BIOLOGICAL, SON-IN-LAW,	OTHER/NON RELATEDO 14	
ADOPTIVE, FOSTER, STEP) O 03		
SON OF PARTNER. 004	LEGAL GUARDIAN. O15	
GRANDSON005	WARD016	
FATHERO06		
BROTHERO07	REFUSED077	
GRANDFATHERO08	DON'T KNOW099	
UNCLE009		
NEPHEW010		
OTHER RELATIVE011		

CAPI INSTRUCTIONS: IF CODE 1 AND {PERSON} IS <16 YEARS OLD, DISPLAY THE FOLLOWING BOX:

{PERSON} is listed as being under 16 years old. Are you sure {PERSON} should be coded as {HUSBAND/WIFE}?

Button 1: No, change relationship Button 2: Yes, continue

IF BUTTON #1 IS SELECTED, RETURN TO SFQ.006/007. IF BUTTON #2 IS SELECTED, CONTINUE WITH BOX 5.

SFQ.007 {The next questions are about family relationships.}

What is {PERSON'S} relationship to {REFERENCE PERSON}?

HAND CARD SFQ2

CAPI DESIGN = RADIO BUTTONS

RELATED			NOT RELATED			
WIFE001			HOUSEMATE/ROOM	<i>I</i> ATE	0	12
PARTNERO02			ROOMER/BOARDER(D13		
DAUGHTER (BIOLOGICAL,			OTHER/NON RELATE	DO 14		
DAUGHTER-IN-LAW, ADOPTIVE,						
FOSTER, STEP)O03			LEGAL GUARDIAN. O	15		
DAUGHTER OF PARTNER O)	04	WARDO	16		
GRANDDAUGHTER 005						
MOTHER006			REFUSEDO	77		
SISTER007			DON'T KNOWO	99		
GRANDMOTHERO08						
AUNT009						
NIECE010						
OTHER RELATIVE011						

CAPI INSTRUCTIONS: IF CODE 1 AND {PERSON} IS <16 YEARS OLD, DISPLAY THE FOLLOWING BOX:

{PERSON} is listed as being under 16 years old. Are you sure {PERSON} should be coded as {HUSBAND/WIFE}?

Button 1: No, change relationship Button 2: Yes, continue

IF BUTTON #1 IS SELECTED, RETURN TO SFQ.006/007. IF BUTTON #2 IS SELECTED, CONTINUE WITH BOX 5.

BOX 5

CHECK ITEM SFQ.017:

IF **{P}** RELATIONSHIP IN SFQ.006 or SFQ.007 = SON OR DAUGHTER (CODE 3), CONTINUE. OTHERWISE, SKIP TO BOX 6.

SFQ.020 Is {PERSON}, {REFERENCE PERSON'S} biological (natural), adoptive, step, foster {son/daughter} or (son/daughter)-inlaw?

BIOLOGICAL (NATURAL) {SON/

DAUGHTER}	1
ADOPTIVE {SON/DAUGHTER}	2
STEP {SON/DAUGHTER}	3
FOSTER {SON/DAUGHTER}	4
{SON/DAUGHTER}-IN-LAW	5
REFUSED	7
DON'T KNOW	9

BOX 6

CHECK ITEM SFQ.025:

IF {P} RELATIONSHIP IN SFQ.006 or SFQ.007 = FATHER OR MOTHER (CODE 6), CONTINUE. OTHERWISE, GO TO BOX 7.

SFQ.030 Is {PERSON}, {REFERENCE PERSON'S} biological (natural), adoptive, step, or foster parent or {mother/father}-in-law?

BIOLOGICAL (NATURAL) PARENT	1
ADOPTIVE PARENT	2
STEP PARENT	3
FOSTER PARENT	4
{MOTHER/FATHER}-IN-LAW	5
REFUSED	7
DON'T KNOW	9

BOX 7

CHECK ITEM SFQ.035:

IF {P} RELATIONSHIP IN SFQ. 006 or SFQ.007 = BROTHER OR SISTER (CODE 7), CONTINUE. OTHERWISE, GO TO BOX 8.

SFQ.100 Is {PERSON}, {REFERENCE PERSON'S} full, half, adoptive, step, or foster {brother/sister} or {brother/sister}-in-law?

1
2
3
4

FOSTER {BROTHER/SISTER}	5
{BROTHER/SISTER}-IN-LAW	6
REFUSED	7
DON'T KNOW	9

BOX 8

END LOOP 1:

ASK NEW BOX 3A – SFQ.040 AS APPROPRIATE FOR NEXT PERSON {P} LISTED BELOW REFERENCE PERSON OR NEXT PERSON RELATED TO HEAD OF FAMILY ON THE HOUSEHOLD MATRIX. IF NO NEXT PERSON, GO TO BOX 9.

BOX 9

CHECK ITEM SFQ.043:

IF ALL PERSONS IN HOUSEHOLD ARE RELATED (HAVE RELATIONSHIP CODES ASSOCIATED WITH CODES 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 15, 16, 77 OR 99 IN SFQ.006 OR SFQ.007), GO TO BOX 20. OTHERWISE, CONTINUE WITH BOX 10.

BOX 10

CHECK ITEM SFQ.045:

CODE FIRST PERSON REMAINING UNRELATED TO REFERENCE PERSON AND HEADS OF ADDITIONAL FAMILIES AND WHOSE AGE IS \geq 18 AS HEAD OF NEXT FAMILY {H OF F} AS APPROPRIATE (#2, 3, 4, ETC.), AND GO TO BOX 11. IF NO PERSONS AGE \geq 18, CODE OLDEST PERSON FROM THIS GROUP AS HEAD OF FAMILY.

BOX 11

CHECK ITEM SFQ.047:

IF MORE THAN ONE PERSON CODED AS UNRELATED, CONTINUE WITH SFQ.050. OTHERWISE, GO TO BOX 20.

SFQ.050 Now I would like to talk about those persons in the household who are **not** related to {REFERENCE PERSON/REFERENCE PERSON OR HEADS OF FAMILY}. That is {LIST ALL PERSONS IN HOUSEHOLD NOT RELATED TO {REFERENCE PERSON/REFERENCE PERSON OR HEADS OF FAMILY}.

DISPLAY NAME OF REFERENCE PERSON IF THIS IS THE FIRST TIME THIS QUESTION IS ASKED. DISPLAY NAMES OF REFERENCE PERSON AND ALL HEADS OF ADDITIONAL FAMILIES IF THIS IS NOT THE FIRST TIME QUESTION IS ASKED.

Is {HEAD OF FAMILY #2, 3, 4, ETC} related to anyone in the household?

YES	1
NO	2 (BOX 19)
REFUSED	7
DON'T KNOW	9

SFQ.060 Who is {HEAD OF FAMILY #2, 3, 4, ETC. FROM BOX 10} related to? {DISPLAY LIST OF NAMES OF ALL PERSONS WHO ARE NOT REFERENCE PERSON, OR HEAD OF FAMILY AND WHO ARE <u>NOT</u> RELATED TO ANYONE ELSE IN HOUSEHOLD (DO <u>NOT</u> HAVE RELATIONSHIP CODE = CODE 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 15 OR 16)}.

SELECT NAMES OF PERSONS RELATED TO {REFERENCE PERSON OR HEAD(S) OF FAMILY}.

BOX 13

EMBEDDED LOOP 2A:

ASK NEW BOX 3A THROUGH SFQ.040 FOR EACH PERSON SELECTED IN SFQ.060.

BOX 18

END EMBEDDED LOOP 2A:

ASK NEW BOX 3A THROUGH SFQ.040 AS APPROPRIATE FOR NEXT PERSON SELECTED AS RELATED TO HEAD OF FAMILY IN SFQ.060. IF NO NEXT PERSON, GO TO BOX 19.

BOX 19

END LOOP 2:

IF MORE THAN 1 PERSON REMAINS UNRELATED TO THE REFERENCE PERSON OR THE HEAD OF ADDITION FAMILY:

- DESIGNATE NEXT HEAD OF FAMILY AS INSTRUCTED IN BOX 10.
- ASK NEW BOX 3A THROUGH SFQ.040 FOR NEXT HEAD OF FAMILY AND PERSONS WHO REMAIN AS UNRELATED.

IF NO NEXT PERSONS GO TO BOX 20.

BOX 20

CHECK ITEM SFQ.105:

 IF REFERENCE PERSON OR HEAD OF FAMILY IS MARRIED (CODED AS 01 IN SFQ.006 OR SFQ.007) OR
 LIVING WITH A PARTNER (CODED AS UNMARRIED PARTNER IN SFQ.006 OR SFQ.007).

AND

REFERENCE PERSON OR HEAD OF FAMILY HAS A CHILD OR THE PARTNER HAS A CHILD (CODED AS 03 OR 04 IN SFQ.006 OR SFQ.007), CONTINUE.

OTHERWISE GO TO BOX 23.

BOX 21

LOOP 3: ASK SFQ.110 FOR EACH PERSON (CHILD OF REFERENCE PERSON AND CHILD OF PARTNER – RELATIONSHIP CODE 3 OR 4). SFQ.110 I recorded that {NAME OF MOTHER/FATHER OF CHILD – THIS IS SPOUSE OR PARTNER OF REFERENCE PERSON} is the {father/mother} of {NAME OF CHILD – THIS IS CHILD OF REFERENCE PERSON AND SPOUSE OR REFERENCE PERSON AND PARTNER OR CHILD OF PARTNER}. IS {NAME OF CHILD} {his/her} biological, adoptive, step, foster child, (son or daughter)-in-law or a non relative of {NAME OF MOTHER/FATHER}?

BIOLOGICAL CHILD	1
ADOPTIVE CHILD	2
STEP CHILD	3
FOSTER CHILD	4
(SON/DAUGHTER)-IN-LAW	5
NON RELATIVE	6
REFUSED	7
DON'T KNOW	9

BOX 22

END LOOP 3:

ASK SFQ.110 FOR NEXT PERSON (CHILD OR CHILD OF PARTNER). IF NO NEXT PERSON, CONTINUE WITH BOX 23.

BOX 23

CHECK ITEM 115:

CHECK RELATIONSHIPS. IF ALL HOUSEHOLD MEMBERS HAVE MOTHER, FATHER, AND SPOUSE OR PARTNER IDENTIFIED, GO TO BOX 31.

OTHERWISE, IF ANY OF THESE RELATIONSHIPS FOR EACH PERSON IS NOT ALREADY IDENTIFIED, CONTINUE.

BOX 24

LOOP 4:

ASK SFQ.120 – SFQ.200 **AS APPROPRIATE** FOR EACH PERSON WHO DOES **NOT** HAVE A MOTHER AND FATHER AND SPOUSE OR PARTNER IDENTIFIED IN HOUSEHOLD.

BOX 25

CHECK ITEM SFQ.117:

IF PERSON'S MOTHER HAS NOT BEEN IDENTIFIED, AND THERE ARE FEMALES IN THE HOUSEHOLD WHO ARE > 13 YEARS OLDER THAN PERSON, CONTINUE OTHERWISE, GO TO BOX 27.

SFQ.120 Is {PERSON'S} mother a household member? [Include mother-in-law].

IF OBVIOUS, VERIFY ONLY.

CHOOSE MOTHER OVER MOTHER-IN-LAW IF BOTH PRESENT.

YES – MOTHER IN HOUSEHOLD	1	
NO – MOTHER NOT IN HOUSEHOLD	2	(BOX 27)
LEGAL GUARDIAN IN HOUSEHOLD	3	
REFUSED	7	(BOX 27)
DON'T KNOW	9	(BOX 27)

SFQ.130 Who is that? [SELECT PERSON FROM HOUSEHOLD MATRIX.

BOX 26

CHECK ITEM SFQ.135: IF LEGAL GUARDIAN CODED IN SFQ.120, GO TO BOX 27. OTHERWISE, CONTINUE.

SFQ.140 Is {NAME OF MOTHER IN SFQ.130}, {PERSON'S} biological [natural], adoptive, step, or foster mother or mother-in-law?

BIOLOGICAL MOTHER.1ADOPTIVE MOTHER.2STEP MOTHER.3FOSTER MOTHER.4MOTHER-IN-LAW.5REFUSED.7DON'T KNOW.9

BOX 27

CHECK ITEM SFQ.145:

IF PERSON'S FATHER HAS NOT BEEN IDENTIFIED, AND THERE ARE MALES IN THE HOUSEHOLD WHO ARE > 13 YEARS OLDER THAN PERSON. OTHERWISE, GO TO BOX 29A.

SFQ.150 Is {PERSON'S} father a household member? [Include father-in-law].

IF OBVIOUS, VERIFY ONLY.

CHOOSE FATHER OVER FATHER-IN-LAW IF BOTH PRESENT.

YES – FATHER IN HOUSEHOLD	1	
NO – FATHER NOT IN HOUSEHOLD	2	(BOX 29)
LEGAL GUARDIAN IN HOUSEHOLD	3	
REFUSED	7	(BOX 29)
DON'T KNOW	9	(BOX 29)

SFQ.160 Who is that? [SELECT PERSON FROM HOUSEHOLD MATRIX.

BOX 28

CHECK ITEM SFQ.165: IF LEGAL GUARDIAN CODED IN SFQ.150, GO TO BOX 29A. OTHERWISE, CONTINUE.

BIOLOGICAL FATHER	1
ADOPTIVE FATHER	2
STEP FATHER	3
FOSTER FATHER	4
FATHER-IN-LAW	5
REFUSED	7
DON'T KNOW	9

BOX 29A

CHECK ITEM SFQ.175: IF PERSON'S AGE >= 14 AND SPOUSE OR UNMARRIED PARTNER HAS NOT BEEN IDENTIFIED, CONTINUE. OTHERWISE, GO TO BOX 30.

SFQ.180 Is {PERSON'S NAME} now married, widowed, divorced, separated, never married or living with a partner?

MARRIED	1	
WIDOWED	2	(BOX 30)
DIVORCED	3	(BOX 30)
SEPARATED	4	(BOX 30)
NEVER MARRIED	5	(BOX 30)
LIVING WITH PARTNER	6	
REFUSED	7	(BOX 30)
DON'T KNOW	9	(BOX 30)

BOX 29B

CHECK ITEM SFQ.185:

IF THERE ARE PERSONS IN THE HOUSEHOLD WHO ARE > = 14 YEARS OLD, CONTINUE. OTHERWISE, GO TO BOX 30.

SFQ.190 Is {PERSON'S} {spouse/partner} living in the household?

YES	1	
NO	2	(BOX 30)
REFUSED	7	(BOX 30)
DON'T KNOW	9	(BOX 30)

SFQ.200 Who is that?

DISPLAY LIST OF ALL NONDELETED HOUSEHOLD MEMBERS WHO ARE 14 YEARS OLD OR OLDER.

BOX 30 END LOOP 4: ASK SFQ.120 – SFQ.200 FOR NEXT PERSON. IF NO NEXT PERSON, GO TO BOX 31.

CHECK ITEM SFQ.205:

APPLY NHANES AND CPS FAMILY DEFINITIONS. IF A MINOR WARD IS NOT RELATED TO A HOUSEHOLD MEMBER AGE 18+, PLACE WARD IN THE SAME NHANES FAMILY AS HIS/HER GUARDIAN, BUT IN A SEPARATE CPS FAMILY.

BOX 31

- IF MORE THAN 1 NHANES FAMILY, CONTINUE.
- IF ONLY 1 NHANES FAMILY, GO TO BOX 33. DO NOT REASK SCQ.430 SCQ.461.

OTHERWISE, GO TO SFQ.210.

BOX 32

LOOP 5:

ASK MODULE 1 – SCQ.420 – SCQ.440b FOR EACH <u>ADDITIONAL</u> NHANES FAMILY. NOTE: THE SUBJECT OF QUESTIONS SHOULD BE EACH ADDITIONAL HEAD OF NHANES FAMILY AND NUMBERED SFQ.220, SFQ.225, SFQ.230 AND SFQ.240a. DO **NOT** REASK SCQ.430 – SCQ.461 OF THE FIRST NHANES FAMILY.

BOX 33

CHECK ITEM SFQ.215:

IF CASE IS SELECTED FOR MDU PROCEDURE, GO TO SFQ.260; ELSE GO TO SFQEND.

SFQ.260 We want to be sure that every household in this area has been given a chance to participate in this important survey. Are there any other living guarters here that we may have missed?

YES	1	
NO	2	(SFQEND)
DK	9	(SFQEND)
RF	7	(SFQEND)

CAPI INSTRUCTION: DISPLAY IF CASE SELECTED FOR MDU PROCEDURE.

SFQ.270	COMPLETE THE HIDDEN DU FORM.	
	FORM COMPLETE	1
	DK	9
	RF	7

SFQEND Thank you. That completes the questions about family relationships.

RIQ.010 SELECT RESPONDENT FOR THE SCREENER MODULE II – HOUSEHOLD RELATIONSHIPS.

Respondent ____

{FIRST NAME} {LAST NAME}

CAPI INSTRUCTIONS: WHEN THE FOCUS OF THE CURSOR IS ON THE "RESPONDENT" FIELD, THE ANSWER CHOICES SHOULD BE A LIST THAT DISPLAYS FIRST AND LAST NAMES OF ALL HH MEMBERS ON THE HH COMPOSITION MATRIX.

INT.001 WAS AN INTERPRETER USED FOR INTERVIEW?

YES	1
NO	2 (GO TO THE END
	OF THE SECTION)

BOX #1

CHECK ITEM INT.001A: IF THIS IS SCREENER, SKIP TO INT.003. OTHERWISE, IF THIS IS RELATIONSHIP MODULE, CONTINUE WITH BOX 2.

BOX	#2
-----	----

CHECK ITEM INT.001B: IF SCREENER AND RELATIONSHIP COMPLETED DURING SAME SESSION (SCQ_END 2a = YES), SKIP TO INT.003. OTHERWISE, CONTINUE.

INT.002 IS THIS THE SAME INTERPRETER THAT WAS USED FOR THE SCREENER?

YES	1	{CODE INTERPRETER
		SCREENER INFORMATION
		AND SKIP TO END OF
		SECTION)}
NO	2	(CONTINUE)

INT.003 LANGUAGE USED FOR INTERVIEW

AMERICAN SIGN LANGUAGE	1	(SKIP TO INT.005)
CHINESE (CANTONESE)	2	(SKIP TO INT.005)
CHINESE (MANDARIN)	3	(SKIP TO INT.005)
FRENCH	4	(SKIP TO INT.005)
GERMAN	5	(SKIP TO INT.005)
ITALIAN	6	(SKIP TO INT.005)
JAPANESE	7	(SKIP TO INT.005)
KOREAN	8	(SKIP TO INT.005)
RUSSIAN	9	(SKIP TO INT.005)
SPANISH (READER)	10	(SKIP TO INT.005)
VIETNAMESE	11	(SKIP TO INT.005)
OTHER SPECIFY	99	

INT.004 ENTER LANGUAGE USED FOR INTERVIEW

INT.005 HOW WAS INTERPRETER OBTAINED

INT.006 SELECT INTERPRETER FROM DROP DOWN LIST OR SELECT "OTHER" AND ENTER INTERPRETER NAME

{DROP DOWN LIST SHOULD HAVE ALL NAMES FROM EVM AND AN "OTHER SPECIFY" TO ALLOW FOR THOSE NAMES THAT HAVE NOT BEEN TRANSFERRED TO INTERVIEWER PENTOP}

BOX #3

CHECK ITEM INT.006A: IF OTHER (SELECTED IN INT.006) GO TO INT.009. OTHERWISE, GO TO BOX 5.

INT.007 SELECT INTERPRETER SOURCE

1	
2	
3	(SKIP TO INT.009)
	2

INT.008 SELECT NAME OF INTERPRETER FROM HOUSEHOLD ROSTER.

{DISPLAY CAPI PULL DOWN LIST FROM HH ROSTER}

BOX #4

CHECK ITEM INT.008A: GO TO END OF SECTION.

INT.009 ENTER NAME OF INTERPRETER

INT.010 ENTER PHONE # OF INTERPRETER

INT.011 ENTER AGE RANGE OF INTERPRETER

{AGE RANGE CAN BE A PULL DOWN LIST}

RANGES = 18-29 30-59 60+ BOX 5

GO TO END OF SECTION.

SFQ.210 Thank you.

BOX 6

GO TO END OF SECTION.

SFQEND2 Thank you.

FINMOD2 TAP "NO" AND THE NEXT BUTTON. FINISH THE RELATIONSHIP QUESTIONAIRE AT ANOTHER TIME.

WARNING: YOU MUST GET SUPERVISOR PERMISSION TO CODE "YES." IF YOU CHOOSE "YES," CAPI WILL FINALIZE THE RELATIONSHIP QUESTIONNAIRE AS A REFUSAL. SP, FAMILY, AND APPOINTMENT MODULES WILL BE CREATED WITH FAMILY NUMBER OF ZERO.