Attachment 12: 2019 BRFSS Field Test Questionnaire



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OMB Header and Introductory Text

Public reporting burden of this collection of information is estimated to average 27 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 CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0920- 1061).HELLO, I am calling for the (health department). My name is (name). We are gathering information about the health of (state) residents. This project is conducted by the health department with assistance from the Centers for Disease Control and Prevention. Your telephone number has been chosen randomly, and I would like to ask some questions about health and health practices.Form Approved OMB No. 0920-1061 Exp. Date 3/31/2021Interviewers information unless it displays a currently valid OMB control number. Send comments regarding this burden to CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0920- 1061).HELLO, I am calling for the (health department). My name is (name). We are gathering information and health practices.Form Approved OMB No. 0920-1061 Exp. Date 3/31/2021Interviewer is not sure, provide the administered to that respondent. If the interviewer is not sure, provide the average time as indicated in the burden statement. If data collectors have questions concernin

Landline Introduction

Question Number	Question text	Variable names	Responses (DO NOT READ UNLESS OTHERWISE NOTED)	SKIP INFO/ CATI Note	Interviewer Note (s)	Column(s)
LL01.	Is this [PHONE NUMBER]?	CTELENM1	1 Yes 2 No	Go to LL02 TERMINATE		63
LLO2.	Is this a private residence?	PVTRESD1	1 Yes	Go to LLO4	Read if necessary: By private residence we mean someplace like a house or apartment. Do not read: Private residence includes any home where the respondent spends at least 30 days including vacation homes, RVs or other locations in which the respondent lives for portions of the year.	64
			2 No	Go to LL03		
			3 No, this is a business		Read: Thank you very much but we are only interviewing persons on residential phones at this time.	
LLO3.	Do you live in college housing?	COLGHOUS	1 Yes	Go to LLO4	Read if necessary: By college housing we mean dormitory, graduate student or visiting faculty housing, or other housing arrangement	65

	1	1				
					provided by a college or university.	
			2 No	TERMINATE	Read: Thank you very much, but we are only interviewing persons who live in private residences or college housing at this time.	
LL04.	Do you currently	STATERE1	1 Yes	Go to LL05		66
	live in(state)?		2 No	TERMINATE	Thank you very much but we are only interviewing persons who live in [STATE] at this time.	
LLO5.	Is this a cell phone?	CELLFON4	1 Yes, it is a cell phone	TERMINATE	Read: Thank you very much but we are only interviewing by landline telephones in private residences or college housing at this time.	
			2 Not a cell phone	Go to LLO6	Read if necessary: By cell phone we mean a telephone that is mobile and usable outside your neighborhood. Do not read: Telephone service over the internet counts as landline service (includes Vonage, Magic Jack and other home- based phone services).	
LL06.	Are you 18 years of age or older?	LADULT	1 Yes, male respondent		Do not read: Sex will be asked	68

	2.1/22		anain in	
	2 Yes,		again in	
	female		demographics	
	respondent		section.	
	3 No	TERMINATE	Read: Thank you	
			very much but we	
			are only	
			interviewing	
			persons aged 18	
			or older at this	
			time.	
Transition	I will not ask		Do not read:	
to Section	for your last		Introductory text	
1.	name,		may be reread	
	address, or		when selected	
	other		respondent is	
	information		reached.	
	that can			
	identify you.			
	You do not			
	have to			
	answer any			
	question you			
	do not want			
	to, and you			
	can end the			
	interview at			
	any time.			
	Any personal information			
	that you			
	provide will			
	not be used			
	to identify			
	you. If you			
	have any			
	questions			
	about the			
	survey,			
	please call			
	(give			
	appropriate			
	state			
	telephone			
	number).			

Cell Phone Introduction

Question Number	Question text	Variable names	Responses (DO NOT READ UNLESS OTHERWISE NOTED)	SKIP INFO/ CATI Note	Interviewer Note (s)	Column(s)
CD04			4.1/22			75
CP01.	Is this a safe time to talk with you?	SAFETIME	1 Yes 2 No	Go to CP02 ([set appointment if possible]) TERMINATE]	Thank you very much. We will call you back at a more convenient time.	75
CP02.	Is this [PHONE	CTELNUM1	1 Yes	Go to CP03		76
	NUMBER]?		2 No	TERMINATE		
CP03.	Is this a cell phone?	CELLFON5	1 Yes	Go to CADULT		77
			2 No	TERMINATE	Read: Thank you very much but we are only interviewing persons aged 18 or older at this time.	
СР04.	Are you 18 years of age or older?	CADULT	1 Yes, male respondent 2 Yes, female respondent		Do not read: Sex will be asked again in demographics section.	78
			3 No	TERMINATE	Read: Thank you very much but we are only interviewing persons aged 18 or older at this time.	
CP05.	Do you live in a private residence?	PVTRESD3	1 Yes	Go to CP07	Read if necessary: By private residence we mean someplace like a house or apartment Do not read: Private residence	79

			2 No	Go to CP06	includes any home where the respondent spends at least 30 days including vacation homes, RVs or other locations in which the respondent lives for portions of the year.	
CP06.	Do you live in college housing?	CCLGHOUS	1 Yes	Go to CP07	Read if necessary: By college housing we mean dormitory, graduate student or visiting faculty housing, or other housing arrangement provided by a college or university.	80
			2 No	TERMINATE	Read: Thank you very much, but we are only interviewing persons who live in private residences or college housing at this time.	
СР07.	Do you currently live in(state)?	CSTATE1	1 Yes 2 No	Go to CP09 Go to CP08		81
CP08.	In what state do you currently live?	RSPSTAT1	1 Alabama 2 Alaska 4 Arizona 5 Arkansas 6 California 8 Colorado 9 Connecticut 10 Delaware			82-83

11 District of
Columbia
12 Florida
13 Georgia
15 Hawaii
16 Idaho
17 Illinois
18 Indiana
19 lowa
20 Kansas
21 Kentucky
22 Louisiana
23 Maine
24 Maryland
25
Massachusetts
26 Michigan
27 Minnesota
28 Mississippi 29 Missouri
30 Montana
31 Nebraska
32 Nevada
33 New
Hampshire
34 New Jersey 35 New
Mexico
36 New York
37 North
Carolina
38 North
Dakota
39 Ohio
40 Oklahoma
41 Oregon
42
Pennsylvania
44 Rhode
Island
45 South
Carolina
46 South
Dakota
47 Tennessee
48 Texas
49 Utah
50 Vermont
51 Virginia
53 Washington

	54 West	
	Virginia	
	55 Wisconsin	
	56 Wyoming	
	66 Guam	
	72 Puerto Rico	
	78 Virgin	
	Islands	
	99 Refused	
Transition	I will not ask	
to section	for your last	
1.	name,	
	address, or	
	other	
	information	
	that can	
	identify you.	
	You do not	
	have to	
	answer any	
	question you	
	do not want	
	to, and you	
	can end the	
	interview at	
	any time. Any	
	personal	
	information	
	that you	
	provide will	
	not be used to	
	identify you. If	
	you have any	
	questions	
	about the	
	survey, please	
	call (give	
	appropriate	
	state	
	telephone	
	number).	

Core Section 1: Health Status

Question Number	Question text	Variable names	Responses (DO NOT READ UNLESS OTHERWISE NOTED)	SKIP INFO/ CATI Note	Interviewer Note (s)	Column(s)
C01.01	Would you say that in general your health is —	GENHLTH	Read: 1 Excellent 2 Very Good 3 Good 4 Fair 5 Poor Do not read: 7 Don't know/Not sure 9 Refused			90

Core Section 2: Healthy Days

Question Number	Question text	Variable names	Responses (DO NOT READ UNLESS OTHERWISE NOTED)	SKIP INFO/ CATI Note	Interviewer Note (s)	Column(s)
C02.01	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?	PHYSHLTH	Number of days (01- 30) 88 None 77 Don't know/not sure 99 Refused			91-92
C02.02	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?	MENTHLTH	Number of days (01- 30) 88 None 77 Don't know/not sure 99 Refused			93-94
C02.03	During the past 30 days, for about how many days did poor physical or mental health keep you from doing your usual activities, such as self-care, work, or	POORHLTH	Number of days (01- 30) 88 None 77 Don't know/not sure 99 Refused	Skip if C02.01, PHYSHLTH, is 88 and C02.02, MENTHLTH, is 88		95-96

		-
recrea	atio	n?
100100	101	••

Core Section 3: Healthcare Access

Question	Question text	Variable	Responses	SKIP INFO/	Interviewer Note (s)	Column(s)
Number		names	(DO NOT READ UNLESS OTHERWISE NOTED)	CATI Note		
HC.01	What is the primary source of your health care coverage? Is it	HLTHCVR1	1 A plan purchased through an employer or union Notes: includes plans purchased through another person's employer 2 A plan that you or another family member buys on your own 3 Medicare 4 Medicaid or other state program 5 TRICARE (formerly CHAMPUS), VA, or Military 6 Alaska Native, Indian Health Service, Tribal Health Services 7 Some other source 8 None (no coverage) 77 Don't know/Not			

	Sure 99		
	Refused		

Core Section 4: Chronic Health Conditions

Question Number	Question text	Variable names	Responses (DO NOT READ UNLESS OTHERWISE NOTED)	SKIP INFO/ CATI Note	Interviewer Note (s)	Column(s)
C06.01	Has a doctor, nurse, or other health professional ever told you that you had any of the following? For each, tell me Yes, No, Or You're Not Sure. Ever told) you that you had a heart attack also called a myocardial infarction?	CVDINFR4	1 Yes 2 No 7 Don't know / Not sure 9 Refused			
C06.02	(Ever told) you had angina or coronary heart disease?	CVDCRHD4	1 Yes 2 No 7 Don't know / Not sure 9 Refused			
C06.03	(Ever told) you had a stroke?	CVDSTRK3	1 Yes 2 No 7 Don't know / Not sure 9 Refused			
C06.04	(Ever told) you had asthma?	ASTHMA3	1 Yes 2 No 7 Don't know / Not sure 9 Refused	Go to C06.06		
C06.05	Do you still have asthma?	ASTHNOW	1 Yes 2 No 7 Don't know / Not sure 9 Refused			

C06.06 [Ever told] you had skin cancer? CHCSCNCR PREfused 1 Yes 2 No 7 Don't know /Not sure 9 Refused I Yes 2 No 7 Don't know /Not sure 9 Refused Read if necessary: Incontinence is not bing able to control urine flow. C06.12 [Cver told] you have kidney stones, biadder infection or incontinence, were you ever told] you have kidney disease? I Yes 1 Yes 1 Yes I Yes and respondent is female, ak: was this only when you were pregnant? if respondent is female							
had any other types of cancer?2 No 7 Don't know / Not sure 9 Refused2 No 9 RefusedC06.08(Ever told) you abave chronic bronchitis?CHCCOPD1 7 Don't know / Not sure 9 Refused1 Yes 2 No 7 Don't know / Not sure 9 RefusedI Ves 2 No 7 Don't know / Not sure 9 RefusedI Ves 2 No 7 Don't know / Not sure 9 RefusedC06.10(Ever told) you depression, dysthymia, or mior depression, dysthymia, or minorADDEPEV2 2 No 7 Don't know / Not sure 9 Refused1 Yes 2 No 7 Don't know / Not sure 9 RefusedI Ves 2 No 7 Don't know / Not sure 9 RefusedRead if necessary: Incontinence is not being able to control urine flow.C06.11Not including kidney disease?CHCKDN11 Not sure 9 Refused1 Yes 2 No 7 Don't know / Not sure 9 RefusedRead if necessary: Incontinence is not being able to control urine flow.C06.12(Ever told) you have diabetes?DIABETE3 1 Yes1 Yes 1 Yes 1 YesIf yes and respondent is female, ast: was trespondent is female, ast: was trespondent says pre-diabetes or borderline diabetes, use frespondent says pre-diabetes or borderline diabetes, use1 Yes		had skin cancer?		2 No 7 Don't know / Not sure 9 Refused			
have chronic obstructive pulmonary disease, C.O.P.D., emphysema or chronic bronchitis?2 No 7 Don't know / Not sure 9 RefusedImage: Construction of the sure obstruction of the sure PrefusedImage: Construction of the sure PrefusedImage: Constructio	C06.07	had any other	CHCOCNCR	2 No 7 Don't know / Not sure			
have a depressive disorder (including depression, major depression, dysthymia, or minor depression)?2 No 7 Don't know / Not sure 9 RefusedRead if necessary: Incontinence is not being able to control urine flow.C06.11Not including kidney stones, bladder infection or incontinence, were you ever told you have kidney disease?CHCKDNY11 Yes 2 No 7 Don't know / Not sure 9 RefusedRead if necessary: Incontinence is not being able to control urine flow.C06.12(Ever told) you have diabetes?DIABETE31 YesIf yes and respondent is female, ask: was this only when you 	C06.08	have chronic obstructive pulmonary disease, C.O.P.D., emphysema or chronic	CHCCOPD1	2 No 7 Don't know / Not sure			
kidney stones, bladder infection or incontinence, were you ever told you have kidney disease?2 No 7 Don't know / Not sure 9 RefusedIncontinence is not being able to control urine flow.C06.12(Ever told) you have diabetes?DIABETE31 YesIf yes and respondent is female, ask: was this only when you were pregnant? If respondent says pre-diabetes or borderline diabetes, use response code 4.	C06.10	have a depressive disorder (including depression, major depression, dysthymia, or minor	ADDEPEV2	2 No 7 Don't know / Not sure			
have diabetes? have diabetes?	C06.11	kidney stones, bladder infection or incontinence, were you ever told you have	CHCKDNY1	2 No 7 Don't know / Not sure		Incontinence is not being able to	
	C06.12		DIABETE3	1 Yes		respondent is female, ask: was this only when you were pregnant? If respondent says pre-diabetes or borderline diabetes, use	
				2 Yes, but	Go to Pre-		

			female told only during pregnancy 3 No 4 No, pre- diabetes or borderline diabetes 7 Don't know / Not sure 9 Refused	Diabetes Optional Module (if used). Otherwise, go to next section.	
C06.13	How old were you when you were told you have diabetes?	DIABAGE2	Code age in years [97 = 97 and older] 98 Don't know / Not sure 99 Refused	Go to Diabetes Module if used, otherwise go to next section.	

Core Section 5: Demographics

Questio n Number	Question text	Variable names	Responses (DO NOT READ UNLESS OTHERWISE NOTED)	SKIP INFO/ CATI Note	Interviewer Note (s)	Column(s)
C08.01	What is your sex? Are you	SEX1	1 Male 2 Female Do not read: 7 Don't know / Not sure 9 Refused	States may adopt one of the two formats of the question. If second format is used, read options.		
C08.02	In what year were your born?	AGE	_ Code age in years 07 Don't know / Not sure 09 Refused			
C08.03	Are you Hispanic, Latino/a, or Spanish origin?	HISPANC3	If yes, read: Are you 1 Mexican, Mexican American, Chicano/a 2 Puerto Rican 3 Cuban 4 Another Hispanic, Latino/a, or Spanish origin Do not read: 5 No 7 Don't know / Not sure 9 Refused		One or more categories may be selected.	
C08.04	Which one or more of the following would you say is your race?	MRACE1	Please read: 10 White 20 Black or African American 30 American Indian or Alaska Native 40 Asian 41 Asian Indian 42 Chinese 43 Filipino 44 Japanese 45 Korean 46 Vietnamese 47 Other Asian 50 Pacific Islander	If more than one response to C08.04; continue. Otherwise , go to C08.06.	If 40 (Asian) or 50 (Pacific Islander) is selected read and code subcategorie s underneath major heading. One or more categories may be selected.	

C08.05	Which one of these	ORACE3	51 Native Hawaiian 52 Guamanian or Chamorro 53 Samoan 54 Other Pacific Islander Do not read: 60 Other 88 No additional choices 77 Don't know / Not sure 99 Refused Please read: 10 White	If 40 (Asian) or 50 (Pacific	
	groups would you say best represents your race?		20 Black or African American 30 American Indian or Alaska Native 40 Asian 41 Asian Indian 42 Chinese 43 Filipino 44 Japanese 45 Korean 46 Vietnamese 47 Other Asian 50 Pacific Islander 51 Native Hawaiian 52 Guamanian or Chamorro 53 Samoan 54 Other Pacific Islander Do not read: 60 Other 77 Don't know / Not sure	Islander) is selected read and code subcategorie s underneath major heading. If respondent has selected multiple races in previous and refuses to select a single race, code refused	
C08.06	Are you	MARITAL	99 Refused Please read: 1 Married		
			2 Divorced 3 Widowed 4 Separated 5 Never married Or 6 A member of an unmarried couple Do not read: 9 Refused		
C08.07	What is the highest	EDUCA	Read if necessary: 1 Never attended school or		

	grade or year of school you completed ?		only attended kindergarten 2 Grades 1 through 8 (Elementary) 3 Grades 9 through 11 (Some high school) 4 Grade 12 or GED (High school graduate) 5 College 1 year to 3 years (Some college or technical school) 6 College 4 years or more (College graduate) Do not read: 9 Refused		
C08.08	Do you own or rent your home?	RENTHOM 1	1 Own 2 Rent 3 Other arrangement 7 Don't know / Not sure 9 Refused	Other arrangement may include group home, staying with friends or family without paying rent. Home is defined as the place where you live most of the place where you live most of the time/the majority of the year. Read if necessary: We ask this question in order to compare health indicators among people with different housing situations.	
C08.14	Have you ever served on active duty in the United States	VETERAN3	1 Yes 2 No 7 Don't know / Not sure 9 Refused	Read if necessary: Active duty does not include training for	

	Armed Forces, either in the regular military or in a National Guard or military reserve unit?			the Reserves or National Guard, but DOES include activation, for example, for the Persian Gulf War.	
C08.15	Are you currently ?	EMPLOY1	Read: 1 Employed for wages 2 Self-employed 3 Out of work for 1 year or more 4 Out of work for less than 1 year 5 A Homemaker 6 A Student 7 Retired Or 8 Unable to work Do not read: 9 Refused	If more than one, say "select the category which best describes you".	
C08.16	How many children less than 18 years of age live in your household?	CHILDREN	Number of children 88 None 99 Refused		
C08.17	Is your annual household income from all sources—	INCOME2	Read if necessary: 04 Less than \$25,000 If no, ask 05; if yes, ask 03 (\$20,000 to less than \$25,000) 03 Less than \$20,000 If no, code 04; if yes, ask 02 (\$15,000 to less than \$20,000) 02 Less than \$15,000 If no, code 03; if yes, ask 01 (\$10,000 to less than \$15,000) 01 Less than \$10,000 If no, code 02 05 Less than \$35,000 If no, ask 06 (\$25,000 to less than	If respondent refuses at ANY income level, code '99' (Refused)	

C08.18	About how	WEIGHT2	\$35,000) 06 Less than \$50,000 If no, ask 07 (\$35,000 to less than \$50,000) 07 Less than \$75,000 If no, code 08 (\$50,000 to less than \$75,000) 08 \$75,000 or more Do not read: 77 Don't know / Not sure 99 Refused Weight		If respondent	
	much do you weigh without shoes?	WEIGHTZ	(pounds/kilograms) 7777 Don't know / Not sure 9999 Refused		answers in metrics, put 9 in first column. Round fractions up	
C08.19	About how tall are you without shoes?	HEIGHT3	/ Height (ft / inches/meters/centimeters) 77/ 77 Don't know / Not sure 99/ 99 Refused		If respondent answers in metrics, put 9 in first column. Round fractions down	
C08.20	To your knowledge, are you now pregnant?	PREGNANT	1 Yes 2 No 7 Don't know / Not sure 9 Refused	Skip if C08.01, SEX, is coded 1; or C08.02, AGE, is greater than 49		

Module Section 6: Colorectal Cancer Screening

Question Number	Question text	Variable names	Responses (DO NOT READ UNLESS OTHERWISE NOTED)	SKIP INFO/ CATI Note	Interviewer Note (s)	Column(s)
				CATI note: If respondent is < 49 years of age, go to next section.		
Prologue	The next questions are about colorectal cancer screening. There are different stool tests to determine whether the stool contains blood.					
CRC.01	One stool test uses a special kit to obtain a small amount of stool at home to determine whether the stool contains blood and returns the kit to the doctor or the lab. Have you ever had this test using a home kit?		1 Yes 2 No 7 Don't know / Not sure 9 Refused	Go to CRC.03	Interviewer note: This is also called a fecal immunochemical test (FIT) or a guaiac-based fecal occult blood test (gFOBT). The FIT test uses antibodies to detect blood in the stool. The gFOBT uses a chemical (guaiac) to detect blood in the stool.	
CRC.02	How long has it been since you last had this test?		Read if necessary: 1 Within the past year (anytime less than 12 months ago) 2 Within the			

		past 2 years (1 year but less than 2 years ago) 3 Within the past 3 years (2 years but less than 3 years ago) 4 Within the past 5 years (3 years but less than 5 years ago) 5 5 or more years ago Do not read: 7 Don't know / Not sure 9 Refused			
CRC.03	Another stool test uses a special kit to obtain an entire bowel movement at home and returns the kit to a lab. Have you ever had this test?	1 Yes 2 No 7 Don't know / Not sure 9 Refused	Go to CRC.05	Interviewer note: This is also called a FIT-DNA test or a stool DNA test. This test combined the FIT with a test that detects altered DNA in the stool.	
CRC.04	How long has it been since you last had this test?	Read if necessary: 1 Within the past year (anytime less than 12 months ago) 2 Within the past 2 years (1 year but less than 2 years ago) 3 Within the past 3 years (2 years but less than 3			

		years ago) 4 Within the past 5 years (3 years but less than 5 years ago) 5 5 or more years ago Do not read: 7 Don't know / Not sure 9 Refused		
CRC.05	A sigmoidoscopy is a flexible tube that is inserted in the rectum to view the colon for signs of	1 Yes		
	cancer or other health problems. Have you ever had a sigmoidoscopy?	2 No 7 Don't know / Not sure 9 Refused	Go to CRC.07	
CRC.06	How long has it been since you last had this test?	Read if necessary: 1 Within the past year (anytime less than 12 months ago) 2 Within the past 2 years (1 year but less than 2 years ago) 3 Within the past 3 years (2 years but less than 3 years ago) 4 Within the past 5 years (3 years but less than 5 years ago) 5 5 or more years ago Do not read:		

		7 Don't know / Not sure 9 Refused		
CRC.07	A colonoscopy is uses a longer tube than a sigmoidoscopy. You are usually given medication through a needle in your arm to	1 Yes		
	make you sleepy and told to have someone else drive you home after the test. Have you ever had a colonoscopy?	2 No 7 Don't know / Not sure 9 Refused	Go to CRC.09	
CRC.08	How long has it been since you last had this test?	Read if necessary: 1 Within the past year (anytime less than 12 months ago) 2 Within the past 2 years (1 year but less than 2 years ago) 3 Within the past 3 years (2 years but less than 3 years ago) 4 Within the past 5 years (3 years but less than 5 years ago) 5 5 or more years ago Do not read: 7 Don't know / Not sure 9 Refused		

	Assistant	1 Yes			
CRC.09	A virtual	1 Yes			
	colonoscopy uses			-	
	a series of X-rays	2 No	Go to next		
	to take pictures	7 Don't	section		
	of inside the	know / Not			
	colon. Have you	sure			
	ever had a virtual	9 Refused			
	colonoscopy?				
CRC.10	How long has it	Read if			
	been since you	necessary:			
	last had this test?	1 Within the			
		past year			
		(anytime less			
		than 12			
		months ago)			
		2 Within the			
		past 2 years			
		(1 year but			
		less than 2			
		years ago)			
		3 Within the			
		past 3 years			
		(2 years but			
		less than 3			
		years ago)			
		4 Within the			
		past 5 years			
		(3 years but			
		less than 5			
		years ago)			
		5 5 or more			
		years ago			
		Do not read:			
		7 Don't			
		know / Not			
		sure			
		9 Refused			
		7 Neruseu			

Core Section 7: Tobacco Use

Question Number	Question text	Variable names	Responses (DO NOT READ UNLESS OTHERWISE NOTED)	SKIP INFO/ CATI Note	Interviewer Note (s)	Column(s)		
C09.01	Have you smoked at least 100 cigarettes in your entire life?	SMOKE100	1 Yes		Do not include: electronic cigarettes (e-cigarettes, njoy, bluetip), herbal cigarettes, cigars, cigarillos, little cigars, pipes, bidis, kreteks, water pipes (hookahs) or marijuana. 5 packs = 100 cigarettes			
			2 No 7 Don't know/Not Sure 9 Refused	Go to C09.05				
C09.02	Do you now smoke cigarettes	smoke	smoke	SMOKDAY2	1 Every day 2 Some days 3 Not at all	Go to		
	every day, some days, or not at all?		7 Don't know / Not sure 9 Refused	C09.04 Go to C09.05				
C09.03	During the past 12 months, have you stopped smoking for one day or longer because you were trying to quit smoking?	STOPSMK2	1 Yes 2 No 7 Don't know / Not sure 9 Refused	Go to C09.05				
C09.04	How long has it been since you last smoked a cigarette, even	LASTSMK2	Read if necessary: 01 Within the past month					

C09.05	one or two puffs?	USENOW3	(less than 1 month ago) 02 Within the past 3 months (1 month but less than 3 months ago) 03 Within the past 6 months (3 months but less than 6 months ago) 04 Within the past year (6 months but less than 1 year ago) 05 Within the past 5 years (1 year but less than 1 years ago) 05 Within the past 5 years (1 year but less than 5 years ago) 06 Within the past 10 years (5 years but less than 10 years ago) 07 10 years or more 08 Never smoked regularly 77 Don't know / Not sure 99 Refused 1 Every day 2 Some days	Read if necessary: Snus (Swedish for	
	currently use chewing tobacco, snuff, or snus every day, some days, or not at all?		2 Some days 3 Not at all 7 Don't know / Not sure 9 Refused	Snus (Swedish for snuff) is a moist smokeless tobacco, usually sold in small pouches that are placed under the lip against the gum.	

Core Section 8: Alcohol Consumption

Question Number	Question text	Variable names	Responses (DO NOT READ UNLESS OTHERWISE NOTED)	SKIP INFO/ CATI Note	Interviewer Note (s)	Column(s)
C10.01	During the past 30 days, how many days per week or per month did you have at least one drink of any alcoholic beverage such as beer, wine, a malt beverage or liquor?	ALCDAY5	1 Days per week 2 Days in past 30 days 888 No drinks in past 30 days 777 Don't know / Not sure 999 Refused	Go to next section		
C10.02	One drink is equivalent to a 12-ounce beer, a 5-ounce glass of wine, or a drink with one shot of liquor. During the past 30 days, on the days when you drank, about how many drinks did you drink on the average?	AVEDRNK2	Number of drinks 88 None 77 Don't know / Not sure 99 Refused		Read if necessary: A 40 ounce beer would count as 3 drinks, or a cocktail drink with 2 shots would count as 2 drinks.	
C10.03	Considering all types of alcoholic beverages, how many times during the past 30 days did you have X [CATI X = 5 for men, X = 4 for women] or more drinks on an occasion?	DRNK3GE5	Number of times 77 Don't know / Not sure 99 Refused	CATI X = 5 for men, X = 4 for women		
C10.04	During the past 30 days, what is	MAXDRNKS	Number of drinks			

the largest number of	77 Don't know / Not		
drinks you had	sure		
on any occasion?	99 Refused		

Section 9: ACE Module

Question Number	Question text	Variable names	Responses (DO NOT READ UNLESS OTHERWISE NOTED)	SKIP INFO/ CATI Note	Interviewer Note (s)	Column(s)
Prologue	I'd like to ask you some questions about events that happened during your childhood. This information will allow us to better understand problems that may occur early in life, and may help others in the future. This is a sensitive topic and some people may feel uncomfortable with these questions. At the end of this section, I will give you a phone number for an organization that can provide information and referral for these issues. Please keep in mind that you can ask me to skip any question you do not want to answer. All questions refer to the time period before you were 18 years of age.				Be aware of the level of stress introduced by questions in this section and be familiar with the crisis plan.	
M22.01	Now, looking back before you were 18 years of age 1) Did you live with anyone who was depressed, mentally ill, or suicidal?	ACEDEPRS	1 Yes 2 No 7 Don't Know/Not Sure 9 Refused			394
M22.02	Did you live with anyone who was a problem drinker or alcoholic?	ACEDRINK	1 Yes 2 No 7 Don't Know/Not Sure 9 Refused			395
M22.03	Did you live with anyone	ACEDRUGS	1 Yes			396

M22.04	 who used illegal street drugs or who abused prescription medications? Did you live with anyone who served time or was sentenced to serve time in a prison, jail, or other correctional facility? 	ACEPRISN	2 No 7 Don't Know/Not Sure 9 Refused 1 Yes 2 No 7 Don't Know/Not Sure 9 Refused		397
ACE.05	Before you were 18 years of age, during your childhood were your parents?	ACEDIVRE2	Read: 1 Living together 2 Living separately 3 Living together for part of your childhood, or 4 Other arrangements 7 Don't Know 9 Refused		398
ACE.06	How often did your parents or adults in your home ever slap, hit, kick, punch or beat each other up? Was it	ACEPUNCH	Read: 1 Never 2 Once 3 More than once Don't Read: 7 Don't know/Not Sure 9 Refused		399
ACE.07	Not including spanking, (before age 18), how often did a parent or adult in your home ever hit, beat, kick, or physically hurt you in any way? Was it—	ACEHURT1	Read: 1 Never 2 Once 3 More than once Don't Read: 7 Don't know/Not Sure 9 Refused		400
ACE.08	How often did a parent or adult in your home ever swear at you, insult you, or put you down? Was it	ACESWEAR	Read: 1 Never 2 Once 3 More than once Don't Read:		401

			7 Don't know/Not Sure 9 Refused		
ACE.09	How often did anyone at least 5 years older than you or an adult, ever touch you sexually? Was it	ACETOUCH	Read: 1 Never 2 Once 3 More than once Don't Read: 7 Don't know/Not Sure 9 Refused		402
ACE.10	How often did anyone at least 5 years older than you or an adult, try to make you touch them sexually? Was it	ACETTHEM	Read: 1 Never 2 Once 3 More than once Don't Read: 7 Don't know/Not Sure 9 Refused		403
ACE.11	How often did anyone at least 5 years older than you or an adult, force you to have sex? Was it	ACEHVSEX	Read: 1 Never 2 Once 3 More than once Don't Read: 7 Don't know/Not Sure 9 Refused		404
ACE.12	For how much of your childhood was there an adult in your household who made you feel safe and protected? Would you say never, a little of the time, some of the time, most of the time, or all of the time?		Do not read 1 Never 2 A little of the time 3 Some of the time 4 Most of the time 5 All of the time 7 Don't Know 9 Refused		
ACE.13	For how much of your childhood was there an adult in your household who tried hard to make		1 Never 2 A little of the time 3 Some of the		

ACE.14	sure your basic needs were met? Would you say never, a little of the time, some of the time, most of the time, or all of the time? In the last 12 months how many times have	time 4 Most of the time 5 All of the time 7 Don't Know 9 Refused 1 0 times/ never		
	you attempted suicide?	2 1 or 2 times 3 3 to 9 times 4 10 to 19 times 5 20 to 39 times 6 40 or more times 7 Do not know 9 Refused		
ACE.15	In the last 12 months how many times have you taken prescription pain reliever differently than how a doctor told you to use it?	1 0 times/ never 2 1 or 2 times 3 3 to 9 times 4 10 to 19 times 5 20 to 39 times 6 40 or more times 7 Do not know 9 Refused		
ACE.16	In the last 12 months, how many times have you used heroin?	1 0 times/ never2 1 or 2 times3 3 to 9 times4 10 to 19times5 20 to 39times6 40 or moretimes7 Do not know9 Refused		
	Would you like for me to provide a toll-free number for an organization that can provide information and referral for the issues in the last few questions.		If yes provide number [STATE TO INSERT NUMBER HERE]	

Core Section 10: Exercise (Physical Activity)

Question Number	Question text	Variable names	Responses (DO NOT READ UNLESS OTHERWISE NOTED)	SKIP INFO/ CATI Note	Interviewer Note (s)	Column(s)
DO NOT P FURTHER PA.01		ON. IF RESPON	1 Yes 2 No 7 Don't know/Not Sure 9 Refused	Go to PA.08	IF, CODE 7(777) WITHC If respondent does not have a regular job or is retired, they may count the physical activity or exercise they spend the most time doing	223
	exercises such as running, calisthenics, golf, gardening, or walking for exercise?			in a regular month.		
PA.02	What type of physical activity or exercise did you spend the most time doing	EXRACT11	Specify from Physical Activity Coding List		See Physical Activity Coding List. If the respondent's activity is not	224-225
	during the past month?		77 Don't know/ Not Sure 99 Refused	Go to PA.08	included in the physical activity coding list, choose the option listed as "other".	
PA.03	How many times per week or per month did you take part in this activity during the past month?	EXEROFT1	1 Times per week 2 Times per month 777 Don't know / Not sure 999 Refused			226-228
PA.04	And when you took part in this	EXERHMM1	_: Hours and minutes			229-231

	activity, for how many minutes or hours did you usually keep at it?		777 Don't know / Not sure 999 Refused			
PA.05	What other type of physical activity gave you the next most exercise during the past month?	EXRACT21	Specify from Physical Activity List		See Physical Activity Coding List. If the respondent's activity is not included in the physical activity coding list, choose the option listed as "other".	232-233
			88 No other activity 77 Don't know/ Not Sure 99 Refused	Go to PA.08		
PA.06	How many times per week or per month did you take part in this activity during the past month?	EXEROFT2	1 Times per week 2 Times per month 777 Don't know / Not sure 999 Refused			234-236
PA.07	And when you took part in this activity, for how many minutes or hours did you usually keep at it?	EXERHMM2	_: Hours and minutes 777 Don't know / Not sure 999 Refused			237-239
PA.08	During the past month, how many times per week or per month did you do physical activities or exercises to strengthen your muscles?	STRENGTH	1 Times per week 2Times per month 888 Never 777 Don't know / Not sure 999 Refused		Do not count aerobic activities like walking, running, or bicycling. Count activities using your own body weight like yoga, sit-ups or push-ups and those using weight machines, free weights, or elastic bands.	240-242

Core Section 11: Fruits and Vegetables

Question Number	Question text	Variable names	Responses (DO NOT READ UNLESS OTHERWISE NOTED)	SKIP INFO/ CATI Note	Interviewer Note (s)	Column(s)
DO NOT P FURTHER		ON. IF RESPON	NOTED)		K, CODE 777(7) WITHO If a respondent indicates that they consume a food item every day then enter the number of times per day. If the respondent indicates that they eat a food less than daily, then enter times per week or time per month. Do not enter time per day unless the respondent reports that he/she consumed that food item each day during the past month. Enter quantity in times per day, week, or month. If respondent gives	243-245
					a number without a time frame, ask "was that per day, week, or month?" Read if respondent asks what to include or says 'i don't	

				know': include fresh, frozen or canned fruit. Do not include dried fruits.	
F&V.02	Not including fruit-flavored drinks or fruit juices with added sugar, how often did you drink 100% fruit juice such as apple or orange juice?	FRUITJU2	1_ Day 2_ Week 3_ Month 300 Less than once a month 555 Never 777 Don't Know 999 Refused	Read if respondent asks about examples of fruit- flavored drinks: "do not include fruit- flavored drinks with added sugar like cranberry cocktail, Hi-C, lemonade, Kool-Aid, Gatorade, Tampico, and sunny delight. Include only 100% pure juices or 100% juice blends."Enter quantity in times per day, week, or month. If respondent gives a number without a time frame, ask "Was that per day, week, or month?"	246-248
F&V.03	How often did you eat a green leafy or lettuce salad, with or without other vegetables?	FVGREEN1	1 Day 2 Week 3 Month 300 Less than once a month 555 Never 777 Don't Know 999 Refused	Enter quantity in times per day, week, or month. If respondent gives a number without a time frame, ask "Was that per day, week, or month?" Read if respondent asks about spinach: "Include spinach salads."	249-251
F&V.04	How often did you eat any kind of fried potatoes, including French	FRENCHF1	1 Day 2 Week 3 Month 300 Less than once a month	Enter quantity in times per day, week, or month. If respondent gives a number without a	252-254

	fries, home fries, or hash browns?		555 Never 777 Don't Know 999 Refused	time frame, ask "Was that per day, week, or month?" Read if respondent asks about potato chips: "Do not include potato chips."	
F&V.05	How often did you eat any other kind of potatoes, or sweet potatoes, such as baked, boiled, mashed potatoes, or potato salad?	POTATOE1	1 Day 2 Week 3 Month 300 Less than once a month 555 Never 777 Don't Know 999 Refused	Enter quantity in times per day, week, or month. If respondent gives a number without a time frame, ask "Was that per day, week, or month?" Read if respondent asks about what types of potatoes to include: "Include all types of potatoes except fried. Include potatoes au gratin, scalloped potatoes."	255-257
F&V.06	Not including lettuce salads and potatoes, how often did you eat other vegetables?	VEGETAB2	1 Day 2 Week 3 Month 300 Less than once a month 555 Never 777 Don't Know 999 Refused	Enter quantity in times per day, week, or month. If respondent gives a number without a time frame, ask "Was that per day, week, or month?" Read if respondent asks about what to include: "Include tomatoes, green beans, carrots, corn, cabbage, bean sprouts, collard greens, and broccoli. Include raw, cooked, canned, or frozen vegetables. Do not	258-260

		include rice."	

Closing Statement

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