

**Rhode Island**

**2010**

**Behavioral Risk Factor Surveillance System  
Questionnaire**

## Behavioral Risk Factor Surveillance System 2010 Questionnaire

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## Interviewer's Script

//Answering machine message to be left on the 1<sup>st</sup>, 4<sup>th</sup>, and 9<sup>th</sup> attempts that result in an answering machine disposition (intro1=02,03)//

Answering machine message text:

“Hello, my name is **(name)**. I am calling on behalf of the **Rhode Island Department of Health** to conduct an important study on the health of Rhode Island residents. Please call us at 1-401-222-1247 or toll free at 1-877-364-0821 at your convenience. Thanks.”

### intro1

Hello, I am calling for the **Rhode Island Department of Health**. My name is **(name)**. We are gathering information about the health of **Rhode Island** 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. The interview may be monitored and recorded for quality assurance purposes.

Is this **(phone number)**?

- 01 Correct number (proceed to next question)
- 02 Answering machine (residence)
- 03 Answering machine (unknown)
- 05 [Selected respondent] on the phone
- 06 Fax machine
- 07 Termination screen
- 08 Hang up – before intro
- 12 Respondent refused to transfer to selected-1x
- 13 Respondent refused to transfer to selected-2x
- 14 Continue in Spanish

//ask if intro1=01//

**HS1** Is this a private residence in **Rhode Island**?

- 1 Yes
- 2 No

//if HS1=2, read//

**X2** Thank you very much, but we are only interviewing private residences in Rhode Island. **STOP**

//ask if HS1=1//

**HS2** Is this a cellular telephone?  
**Read if necessary: By cellular (or cell) telephone we mean a telephone that is mobile and usable outside of your neighborhood.**

- 1 No – Not a cellular telephone
- 2 Yes

//if HS2=2, read//

**X4** Thank you very much, but we are only interviewing landline telephones and private residences. **STOP**

//ask if HS2=1//

**ADULTS** I need to randomly select one adult who lives in your household to be interviewed. How many members of your household, including yourself, are 18 years of age or older?  
-- Number of adults **[Range 0-18]**

//ask if ADULTS=1//

**ASKGENDER** Is the adult a man or a woman?

- 21 Male
- 22 Female

//ask if ADULTS=1//

**ONEADULT** Are you the adult?

- 21 Yes and the respondent is male

- 22 Yes and the respondent is female
- 03 No

//ask if ONEADULT=03//

- GETADULT** May I speak with him or her?
- 1 Yes, adult coming to the phone
  - 2 No, not here (interview will terminate)

**[GO TO NEWADULT]  
[INTERVIEWER SET APPOINTMENT  
FOR BEST TIME TO REACH ADULT]**

//ask if ADULTS>1//

- MEN** How many of these adults are men?
- 0 None
  - 1 One
  - 2 Two
  - 3 Three
  - 4 Four
  - 5 Five
  - 6 Six
  - 7 Seven
  - 8 Eight
  - 9 Nine

//ask if ADULTS>1//

- WOMEN** How many of these adults are women?
- 0 None
  - 1 One
  - 2 Two
  - 3 Three
  - 4 Four
  - 5 Five
  - 6 Six
  - 7 Seven
  - 8 Eight
  - 9 Nine

**RANDOMLY SELECT ADULT; Assign selected value:**

- 01 Oldest female
- 02 2<sup>nd</sup> oldest female
- 03 3<sup>rd</sup> oldest female
- 04 4<sup>th</sup> oldest female
- 05 5<sup>th</sup> oldest female
- 06 6<sup>th</sup> oldest female
- 07 7<sup>th</sup> oldest female
- 08 8<sup>th</sup> oldest female
- 09 9<sup>th</sup> oldest female
  
- 11 Oldest male
- 12 2<sup>nd</sup> oldest male
- 13 3<sup>rd</sup> oldest male
- 14 4<sup>th</sup> oldest male
- 15 5<sup>th</sup> oldest male
- 16 6<sup>th</sup> oldest male
- 17 7<sup>th</sup> oldest male
- 18 8<sup>th</sup> oldest male
- 19 9<sup>th</sup> oldest male
  
- 20 No respondent selected

- 21 One person HH - male
- 22 One person HH - female

//ask if ADULTS>1//

**ASKFOR** The person in your household that I need to speak with is the [INSERT SELECTED]. Are you the person?  
 1 Yes  
 2 No

//if ASKFOR=1 or ONEADULT=21,22, read//

**YOURETHE1** Then you are the person I need to speak with. I will not ask for your last name, address, or other personal 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 information you give me will be confidential. The interview takes approximately 25 minutes to complete. If you have any questions about the survey, please call 1-401-222-1247.

- 001 Person interested, continue
- 104 Selected requested to set appointment for interview at a later time
- 173 Selected person unable to complete – language barrier
- 174 Selected person unable to complete – impairment
- 175 Selected person refuses – before intro
- 176 Selected person refuses – after intro
- 002 Go back to ADULTS question

**[WARNING: A NEW RESPONDENT WILL BE SELECTED AND YOU NEED A SUPERVISOR'S PASSWORD TO CONTINUE]**

//ask if ASKFOR=02//

**GETNEWAD** May I speak with him or her?  
 1 Yes, adult coming to the phone  
 2 No, not here (interview will terminate)  
 3 Go back to ADULTS question.

**[GO TO NEWADULT]  
 [INTERVIEWER SET APPOINTMENT FOR BEST TIME TO REACH ADULT]  
 [WARNING: A NEW RESPONDENT MAY BE SELECTED; YOU NEED SUPERVISOR'S PERMISSION TO USE THIS OPTION]**

//ask if ASKFOR=02//

**GETADULT** May I speak with him or her?  
 1 Yes, adult coming to the phone  
 2 No, not here (interview will terminate)

**[GO TO NEWADULT]  
 [INTERVIEWER SET APPOINTMENT FOR BEST TIME TO REACH ADULT]**

//if GETADULT=1 or GETNEWAD=1, read//

**NEWADULT** Hello, I am calling for the **Rhode Island Department of Health**. My name is (name). We are gathering information about the health of **Rhode Island** residents. This project is conducted by the health department with assistance from the Centers for Disease Control and Prevention. Your telephone has been chosen randomly, and I would like to ask some questions about health and health practices. This call may be monitored and recorded for quality assurance purposes.

I will not ask for your last name, address, or other personal 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 information you give me will be confidential. The interview takes approximately 25 minutes to complete. If you have any questions about the survey, please call 1-401-222-1247.

- 001 Person interested, continue
- 104 Selected requested to set appointment for interview at a later time
- 173 Selected unable to complete – language barrier



- 174 Selected unable to complete – impairment
- 175 Selected person refuses – before intro
- 176 Selected person refuses – after intro
- 002 Go back to ADULTS question

**[WARNING: A NEW RESPONDENT  
WILL BE SELECTED AND YOU NEED  
A SUPERVISOR'S PASSWORD TO  
CONTINUE]**

## Core Sections

### Section 1: Health Status

//ask of all//

s1q1

Would you say that in general your health is—

**GENHLTH** (73)

**Please read:**

- 1 Excellent
- 2 Very good
- 3 Good
- 4 Fair

**Or**

- 5 Poor

**Do not read:**

- 7 Don't know / not sure
- 9 Refused

### Section 2: Healthy Days – Health-Related Quality of Life

//ask of all//

s2q1

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** (74-75)

- Number of days [Range 1-30]
- 8 8 None
- 7 7 Don't know / not sure
- 9 9 Refused

//ask of all//

s2q2

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** (76-77)

- Number of days [Range 1-30]
- 8 8 None
- 7 7 Don't know / not sure
- 9 9 Refused

//ask if not (s2q1=88 and s2q2=88)//

s2q3

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 recreation?

**POORHLTH** (78-79)

- Number of days [Range 1-30]
- 8 8 None
- 7 7 Don't know / not sure
- 9 9 Refused

### Section 3: Health Care Access

//ask of all//

s3q1

Do you have any kind of health care coverage, including health insurance, prepaid plans such as HMOs, or government plans such as Medicare?

**HLTHPLAN** (80)

- 1 Yes
- 2 No

- 7 Don't know / not sure
- 9 Refused

//ask of all//  
s3q2

Do you have one person you think of as your personal doctor or health care provider?

**PERSDOC2** (81)

**If "No," ask: "Is there more than one, or is there no person who you think of as your personal doctor or health care provider?"**

- 1 Yes, only one
- 2 More than one
- 3 No
- 7 Don't know / not sure
- 9 Refused

//ask of all//  
s3q3

Was there a time in the past 12 months when you needed to see a doctor but could not because of cost?

**MEDCOST** (82)

- 1 Yes
- 2 No
- 7 Don't know / not sure
- 9 Refused

//ask of all//  
s3q4

About how long has it been since you last visited a doctor for a routine checkup? A routine checkup is a general physical exam, not an exam for a specific injury, illness, or condition.

**CHECKUP1** (83)

**Read if necessary:**

- 1 Within past year (anytime less than 12 months ago)
- 2 Within past 2 years (1 year but less than 2 years ago)
- 3 Within past 5 years (2 years but less than 5 years ago)
- 4 5 or more years ago
- 7 Don't know / not sure
- 8 Never
- 9 Refused

## Section 4: Sleep

The next question is about getting enough rest or sleep.

//ask of all//  
s4q1

During the past 30 days, for about how many days have you felt you did not get enough rest or sleep?

**QLREST2** (84-85)

- Number of days [Range 1-30]
- 8 8 None
- 7 7 Don't know / not sure
- 9 9 Refused

## Section 5: Exercise

//ask of all//  
s5q1

During the past month, other than your regular job, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise?

**EXERANY2** (86)

- 1 Yes

- 2 No
- 7 Don't know / not sure
- 9 Refused

## Section 6: Diabetes

//ask of all//

s6q1

Have you ever been told by a doctor that you have diabetes?

**DIABETE2** (87)

**If "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**

- 1 Yes
- 2 Yes, but female told only during pregnancy
- 3 No
- 4 No, pre-diabetes or borderline diabetes
- 7 Don't know / not sure
- 9 Refused

## State-Added 8: Diabetes **\*\*\*April 1, 2010 – Dec 31, 2010**

//ask if s6q1=1 and loadmth=4,5,6,7,8,9,10,11,12//

RI8\_1

How old were you when you were told you have diabetes?

**DIABAGE2** (247-248)

- Code age in years
- 9 8 Don't know / not sure
- 9 9 Refused

[Range 1-97] [97=97 and older]

//ask if s6q1=1 and loadmth=4,5,6,7,8,9,10,11,12//

RI8\_2

Are you now taking insulin?

**INSULIN** (249)

- 1 Yes
- 2 No
- 9 Refused

//ask if s6q1=1 and loadmth=4,5,6,7,8,9,10,11,12//

RI8\_3

About how often do you check your blood for glucose or sugar? Include times when checked by a family member or friend, but do NOT include times when checked by a health professional.

**BLDSUGAR** (250-252)

**[Example: Two times per day=102; Five times per year=405]**

- 1 \_\_ Times per day [Range 101-199]
- 2 \_\_ Times per week [Range 201-299]
- 3 \_\_ Times per month [Range 301-399]
- 4 \_\_ Times per year [Range 401-499]
- 8 8 8 Never
- 7 7 7 Don't know / not sure
- 9 9 9 Refused

//ask if s6q1=1 and loadmth=4,5,6,7,8,9,10,11,12//

RI8\_4

About how often do you check your feet for any sores or irritations? Include times when checked by a family member or friend, but do NOT include times when checked by a health professional.

**FEETCHK2** (253-255)

**[Example: Two times per day=102; Five times per year=405]**

- 1 \_\_ Times per day [Range 101-199]

2 __	Times per week	[Range 201-299]
3 __	Times per month	[Range 301-399]
4 __	Times per year	[Range 401-499]
5 5 5	No feet	
8 8 8	Never	
7 7 7	Don't know / not sure	
9 9 9	Refused	

//ask if s6q1=1 and loadmnth=4,5,6,7,8,9,10,11,12//  
**RI8\_5**

About how many times in the past 12 months have you seen a doctor, nurse, or other health professional for your diabetes?

__	Number of times	[Range 1-76] [76=76 or more]
8 8	None	
7 7	Don't know / not sure	
9 9	Refused	

**DOCTDIAB** (256-257)

//ask if s6q1=1 and loadmnth=4,5,6,7,8,9,10,11,12//  
**RI8\_6**

A test for "A one C" measures the average level of blood sugar over the past three months. About how many times in the past 12 months has a doctor, nurse, or other health professional checked you for "A one C"?

__	Number of times	[Range 1-76] [76=76 or more]
8 8	None	
9 8	Never heard of "A one C" test	
7 7	Don't know / not sure	
9 9	Refused	

**CHKHEMO3** (258-259)

//ask if s6q1=1 and RI8\_4≠555 and loadmnth=4,5,6,7,8,9,10,11,12//  
**RI8\_7**

About how many times in the past 12 months has a health professional checked your feet for any sores or irritations?

__	Number of times	[Range 1-76] [76=76 or more]
8 8	None	
7 7	Don't know / not sure	
9 9	Refused	

**FEETCHK** (260-261)

//ask if s6q1=1 and loadmnth=4,5,6,7,8,9,10,11,12//  
**RI8\_8**

When was the last time you had an eye exam in which the pupils were dilated? This would have made you temporarily sensitive to bright light.

**EYEEEXAM** (262)

**Read only if necessary:**

1	Within the past month (anytime less than 1 month ago)
2	Within the past year (1 month but less than 12 months ago)
3	Within the past 2 years (1 year but less than 2 years ago)
4	2 or more years ago

**Do not read:**

7	Don't know / not sure
8	Never
9	Refused

//ask if s6q1=1 and loadmnth=4,5,6,7,8,9,10,11,12//  
**RI8\_9**

Has a doctor ever told you that diabetes has affected your eyes or that you had retinopathy?

- 1 Yes
- 2 No
- 7 Don't know / not sure
- 9 Refused

//ask if s6q1=1 and loadmnth=4,5,6,7,8,9,10,11,12//  
**RI8\_10**

Have you ever taken a course or class in how to manage your diabetes yourself?

**DIABEDU** (264)

- 1 Yes
- 2 No
- 7 Don't know / not sure
- 9 Refused

## Section 7: Oral Health

//ask of all//  
**s7q1**

How long has it been since you last visited a dentist or a dental clinic for any reason? Include visits to dental specialists, such as orthodontists.

**LASTDEN3** (88)

**Read only 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 5 years (2 years but less than 5 years ago)
- 4 5 or more years ago

**Do not read:**

- 7 Don't know / not sure
- 8 Never
- 9 Refused

//ask of all//  
**s7q2**

How many of your permanent teeth have been removed because of tooth decay or gum disease? Include teeth lost to infection, but do not include teeth lost for other reasons, such as injury or orthodontics.

**RMVTETH3** (89)

**/Interviewer Note: If wisdom teeth are removed because of tooth decay or gum disease, they should be included in the count for lost teeth/**

- 1 1 to 5
- 2 6 or more but not all
- 3 All
- 8 None
- 7 Don't know / not sure
- 9 Refused

//ask if s7q1≠8 and s7q2≠3//  
**s7q3**

How long has it been since you had your teeth cleaned by a dentist or dental hygienist?

**DENCLEAN** (90)

**Read only 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 5 years (2 years but less than 5 years ago)
- 4 5 or more years ago

**Do not read:**

- 7 Don't know / not sure
- 8 Never

9 Refused

## Section 8: Cardiovascular Disease Prevalence

Now I would like to ask you some questions about cardiovascular disease. 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”.

//ask of all//

s8q1

(Ever told) you had a heart attack, also called a myocardial infarction?

**CVDINFR4** (91)

- 1 Yes
- 2 No
- 7 Don't know / not sure
- 9 Refused

//ask of all//

s8q2

(Ever told) you had angina or coronary heart disease?

**CVDCRHD4** (92)

- 1 Yes
- 2 No
- 7 Don't know / not sure
- 9 Refused

//ask of all//

s8q3

(Ever told) you had a stroke?

**CVDSTRK3** (93)

- 1 Yes
- 2 No
- 7 Don't know / not sure
- 9 Refused

## Section 9: Asthma

//ask of all//

s9q1

Have you ever been told by a doctor, nurse or other health professional that you had asthma?

**ASTHMA2** (94)

- 1 Yes
- 2 No [Go to next section]
- 7 Don't know / not sure [Go to next section]
- 9 Refused [Go to next section]

//ask if s9q1=1//

s9q2

Do you still have asthma?

**ASTHNOW** (95)

- 1 Yes
- 2 No
- 7 Don't know / not sure
- 9 Refused

## Section 10: Disability

//ask of all//

The following questions are about health problems or impairments you may have.

s10q1

Are you limited in any way in any activities because of physical, mental, or emotional problems?

- 1 Yes
- 2 No
- 7 Don't know / not sure
- 9 Refused

//ask of all//  
s10q2

Do you now have any health problem that requires you to use special equipment, such as a cane, a wheelchair, a special bed, or a special telephone? Include occasional use or use in certain circumstances.

**USEEQUIP** (97)

- 1 Yes
- 2 No
- 7 Don't know / not sure
- 9 Refused

## Section 11: Tobacco Use

//ask of all//  
s11q1

Have you smoked at least 100 cigarettes in your entire life?

**SMOKE100** (98)

**/Interviewer Note: 5 packs=100 cigarettes/**

- 1 Yes
- 2 No [Go to Q11.5]
- 7 Don't know / not sure [Go to Q11.5]
- 9 Refused [Go to Q11.5]

//ask if s11q1=1//  
s11q2

Do you now smoke cigarettes every day, some days, or not at all?

**SMOKDAY2** (99)

- 1 Every day
- 2 Some days
- 3 Not at all [Go to Q11.4]
- 7 Don't know / not sure [Go to Q11.5]
- 9 Refused [Go to Q11.5]

//ask if s11q2=1,2//  
s11q3

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

**STOPSMK2** (100)

- 1 Yes [Go to Q11.5]
- 2 No [Go to Q11.5]
- 7 Don't know / not sure [Go to Q11.5]
- 9 Refused [Go to Q11.5]

//ask if s11q2=3//  
s11q4

How long has it been since you last smoked cigarettes regularly?

**LASTSMK1** (101-102)

- 0 1 Within the past month (less than 1 month ago)
- 0 2 Within the past 3 months (1 month but less than 3 months ago)
- 0 3 Within the past 6 months (3 months but less than 6 months ago)
- 0 4 Within the past year (6 months but less than 1 year ago)
- 0 5 Within the past 5 years (1 year but less than 5 years ago)
- 0 6 Within the past 10 years (5 years but less than 10 years ago)

- 0 7 10 year or more
- 0 8 Never smoked regularly
- 7 7 Don't know / not sure
- 9 9 Refused

//ask of all//  
s11q5

Do you currently use chewing tobacco, snuff, or snus every day, some days, or not at all?

**/Interviewer Note: Snus (rhymes with 'goose', Swedish for snuff) is a moist smokeless tobacco, usually sold in small pouches that are placed under the lip against the gum/**

**USENOW3** (103)

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

**Do not read:**

- 7 Don't know / not sure
- 9 Refused

## Section 12: Demographics

//ask of all//  
s12q1

What is your age?

- Code age in years
- 0 7 Don't know / not sure
- 0 9 Refused

[Range 18-99]

**AGE** (104-105)

//ask of all//  
s12q2

Are you Hispanic or Latino?

- 1 Yes
- 2 No
- 7 Don't know / not sure
- 9 Refused

**HISPANC2** (106)

//ask of all//  
s12q3

Which one or more of the following would you say is your race?

**(Check all that apply) [MUL=6]**

**Please read:**

- 1 White
- 2 Black or African American
- 3 Asian
- 4 Native Hawaiian or other Pacific Islander
- 5 American Indian or Alaska Native

**Or**

- 6 Other (Specify: \_\_\_\_\_)

**Do not read:**

- 7 Don't know / not sure
- 9 Refused

**MRACE** (107-112)

//ask if s12q3=6//  
s12q3o

ENTER OTHER [open end]: \_\_\_\_\_

//ask if s12q3=MUL response//  
s12q4

Which one of these groups would you say best represents your race?

**ORACE2** (113)

- 1 White
- 2 Black or African American
- 3 Asian
- 4 Native Hawaiian or other Pacific Islander
- 5 American Indian or Alaska Native
- 6 Other

[Fill in from s12q3o]

**Do not read:**

- 7 Don't know / not sure
- 9 Refused

//ask of all//  
s12q5

Have you ever served on active duty in the United States Armed Forces, either in the regular military or in a National Guard or military reserve unit? Active duty does not include training for the Reserves or National Guard, but DOES include activation, for example, for the Persian Gulf War.

**VETERAN2** (114)

**If "Yes," please read:**

- 1 Yes, now on active duty
- 2 Yes, on active duty during the last 12 months, but not now
- 3 Yes, on active duty in the past, but not during the last 12 months

**If "No," please read:**

- 4 No, training for Reserves or National Guard only
- 5 No, never served in the military

**Do not read:**

- 7 Don't know / not sure
- 9 Refused

//ask of all//  
s12q6

Are you...?

**MARITAL** (115)

**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

//ask of all//  
s12q7

How many children less than 18 years of age live in your household?

**CHILDREN** (116-117)

- Number of children
- 8 8 None
- 9 9 Refused

[Range 1-15]

//ask if s12q7=1-15//  
s12q7CHK

Just to be sure, you have [enter # of children from s12q7] children under 18 living in your household. Is that correct?

- 1 Yes
- 2 No
- 9 Refused

//ask of all//  
s12q8

What is the highest grade or year of school you completed?

**EDUCA** (118)

**Read only if necessary:**

- 1 Never attended school or 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

//ask of all//  
s12q9

Are you currently...?

**EMPLOY** (119)

**Please read:**

- 1 Employed for wages
- 2 Self-employed
- 3 Out of work for more than 1 year
- 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

//ask of all//  
s12q10

Is your annual household income from all sources--

**INCOME2** (120-121)

**/Interviewer Note: If respondent refuses at ANY income level, code '99' (Refused)/**

s12q10A [04]

Less than \$25,000

[if "no," ask 05; if "yes," ask 03]

(\$20,000 to less than \$25,000)

- 1 Yes
- 2 No
- 7 Don't know
- 9 Refused

//ask if s12q10A=1//

s12q10B [03]

Less than \$20,000

[if "no," code 04; if "yes," ask 02]

(\$15,000 to less than \$20,000)

- 1 Yes
- 2 No
- 7 Don't know
- 9 Refused

//ask if s12q10B=1//

s12q10C [02] Less than \$15,000  
 (\$10,000 to less than \$15,000)  
 1 Yes  
 2 No  
 7 Don't know  
 9 Refused

[if "no," code 03; if "yes," ask 01]

//ask if s12q10C=1//

s12q10D [01] Less than \$10,000  
 1 Yes  
 2 No  
 7 Don't know  
 9 Refused

[if "no," code 02]

//ask if s12q10A=2//

s12q10E [05] Less than \$35,000  
 (\$25,000 to less than \$35,000)  
 1 Yes  
 2 No  
 7 Don't know  
 9 Refused

[if "no," ask 06]

//ask if s12q10E=2//

s12q10F [06] Less than \$50,000  
 (\$35,000 to less than \$50,000)  
 1 Yes  
 2 No  
 7 Don't know  
 9 Refused

[if "no," ask 07]

//ask if s12q10F=2//

s12q10G [07] Less than \$75,000  
 (\$50,000 to less than \$75,000)  
 1 Yes  
 2 No  
 7 Don't know  
 9 Refused

[if "no," code 08]

[08] \$75,000 or more

//ask if s12q10A-s12q10G≠7,9//

s12q10AA

Your annual household income is [enter range from code in s12q10A-G]. Is this correct?

1 No, re-ask question  
 2 Yes, correct as is

[Go to s12q10A]  
 [Continue]

//ask of all//

ps12q11

About how much do you weigh without shoes?

Enter "P" for weight given in pounds

Enter "K" for weight given in kilograms

P Pounds  
 K Kilograms  
 7 Don't know  
 9 Refused

//ask if ps12q11=P//  
s12q11

About how much do you weigh without shoes?

**WEIGHT2** (122-125)

**/Interviewer Note: If respondent answers in metrics, put "9" in column 122/ Round fractions up.**

--	Weight (pounds)	[Range 50-776]
7 7 7	Don't know / not sure	
9 9 9	Refused	

//ask if s12q11=50-79,351-776//  
s12q11\_A

Just to double-check, you indicated //s12q11// pounds as your weight. Is this correct?

1	Yes	
2	No	[Go back to s12q11]

//ask if ps12q11=K//  
s12q11M

About how much do you weigh without shoes?

(122-125)

**/Interviewer Note: If respondent answers in metrics, put "9" in column 122/ Round fractions up.**

---	Weight (kilograms)	[Range 23-352]
7 7 7	Don't know / not sure	
9 9 9	Refused	

//ask if s12q11M=23-352//  
s12q11AM

Just to double-check, you indicated //s12q11M// kilograms as your weight. Is this correct?

1	Yes	
2	No	[Go back to s12q11M]

//ask of all//  
ps12q12

About how tall are you without shoes?

**Enter "F" for height given in feet**

**Enter "M" for height given in centimeters**

F	Feet
M	Centimeters
7	Don't know
9	Refused

//ask if ps12q12=F//  
s12q12

About how tall are you without shoes?

**HEIGHT3** (126-129)

**/Interviewer Note: If respondent answers in metrics, put "9" in column 126/ Round fractions down.**

Enter height in feet and inches [Example: 5 feet 9 inches would be entered as 509]

---	Height	[Range 300-711]
-----	--------	-----------------

//ask if s12q12=300-407,609-711//  
s12q12A

Just to double-check, you indicated you are //enter feet from s12q12// feet //enter inches from s12q12// inches tall. Is this correct?

1	Yes	
2	No	[Go back to s12q12]

//ask if ps12q12=M//  
s12q12M

About how tall are you without shoes?

**/Interviewer Note: If respondent answers in metrics, put "9" in column 126/** Round fractions down.

Enter height in centimeters [Example: 2 meters 5 centimeters would be entered as 205]

---	Height	[Range 90-254]
7 7 7	Don't know / not sure	
9 9 9	Refused	

//ask if s12q12M=90-254//  
s12q12AM

Just to double-check, you indicated you are //s12q12M// centimeters tall. Is this correct?

1	Yes	
2	No	[Go back to s12q12M]

### State-Added 1: City/Town

//ask of all//

RI1\_1

What city or town do you live in?

**TOWN**

008A7 Abbott Run	013A7 Bowditch	030B7 Clayville (Scituate)	009A3 East Greenwich
018A5 Adamsville	010A7 Boyden Heights	038C3 Clyde	032A9 East Matunuck
017A7 Albion	005A9 Bradford	021C5 Coasters Harbor	010D7 East Providence
023A9 Allenton	025A7 Branch Village	017B7 Cobble Hill	031A7 East Smithfield
029A9 Alton	021A5 Brenton Village	023F9 Cocumcussoc	034C1 East Warren
020A9 Anawan Cliffs	033B5 Bridgeport	021D5 Coddington Point	019B5 Easton Point
023B9 Annaquatucket	003A7 Bridgeton	034B1 Coggeshall	003C7 Echo Lake
001A1 Annawomacutt	018B5 Briggs Point	023G9 Cold Spring	007H7 Eden Park,\N&
006A3 Anthony	014E9 Brightman Hill	035F3 Coles,\N&	Edgewood
035A3 Apponang	002B1 Bristol	Conimicut,\N&	028C7 Elmhurst
019A5 Aquidneck	027A5 Bristol Ferry	Cowesett	028D7 Elmwood
011A9 Arcadia	002C1 Bristol Highlands	027C5 Common Fence Point	011D9 Escoheag (Exeter)
038A3 Arctic	002D1 Bristol Narrows	007D7 Comstock Gardens	037A3 Escoheag (West\N&
006B3 Arkwright	023E9 Brownings Hill	015C5 Conanicut	Greenwich)
007A7 Arlington	035C3 Brush Neck Cove,\N&	027D5 Corey Lane	031B7 Esmond
008B7 Arnold Mills	Buttonwoods	006C3 Coventry	011E9 Exeter
035B3 Arnold Neck	010B7 Bullocks Point	006D3 Coventry Center	017C7 Fairlawn (Lincoln)
014A9 Ashaway	014F9 Burdickville	007E7 Cranston	026D7 Fairlawn (Pawtucket)
008C7 Ashton	034A1 Burr Hill	010C7 Crescent Park	039A7 Fairmont
007B7 Auburn	003B7 Burrillville	038D3 Crompton	028E7 Federal Hill
011B9 Austin	014G9 Canonchet	005D9 Cross Mill	011F9 Fisherville
036A9 Avondale	005B9 Carolina	025B7 Crystal Lake	007J7 Fiskeville (Cranston)
008D7 Ballou District	021B5 Castle Hill	008F7 Cumberland	030C7 Fiskeville (Scituate)
023C9 Barber Heights	002E1 Castle Island	008G7 Cumberland Hill	033D5 Fogland Point
014B9 Barberville	027B5 Cedar Island	026C7 Darlington	007K7 Forest Hills
001B1 Barrington	015B5 Cedar Point	023H9 Davisville	025C7 Forestdale
001C1 Bay Spring	038B3 Centerville	007F7 Dean Estates	021E5 Fort Adams
002A1 Beach Terrace	004A7 Central Falls	027E5 Despair Island	010E7 Fort Hill
015A5 Beavertail	024A7 Centredale	008H7 Diamond Hill	021F5 Forty Steps
007C7 Bellefonte	014H9 Champlin Hill	035I3 Dryden Heights,\N&	012B7 Foster
023D9 Belleville	029C9 Chariho	Duby Grove	012C7 Foster Center
008E7 Berkley	005C9 Charlestown	036C9 Dunn's Corner	016A9 Fountain Spring
014C9 Bethel	013B7 Chepachat	013D7 Durfee Hill	023I9 Fox Island
026A7 Beverage Hill	035U4 Chepiwanoxet	015D5 Dutch Island	028F7 Fox Point
026B7 Birch Hill	035E3 Chenlwanoxet	027F5 Dyer Island	015E5 Freebody Hill
011C9 Black Plain	030A7 Chopmist Hill	028A7 Dyerville	009B3 Frenchtown
022A9 Block Island	013C7 Clarkville	007G7 Eagle Park	024B7 Fruit Hill
020B9 Bonnet Shores	012A7 Clayville (Foster)	033C5 Eagleville	020C9 Galilee

007L7 Garden City	030F7 Jackson	032F9 Mooresfield	035Y3 Pontiac
035K3 Gaspee Point	015G5 Jamestown	012E7 Moosup Valley	(Warwick),\N&
003D7 Gazzaville	038E3 Jericho	016H7 Morgan Mills	Potowomut
024C7 Geneva (North\N&	020E9 Jerusalem	014L9 Moscow	002F1 Popasquash Point
Providence)	016F7 Johnston	016I7 Moswansicut Lake	023P9 Poplar Point
028G7 Geneva (Providence)	010F7 Kent Heights	023L9 Mount View	027Q5 Portsmouth
031C7 Georgiaville	005E9 Kenyon	031F7 Mountaindale	014M9 Potter Hill
003E7 Glendale	034D1 Kickamuit	028I7 Mount Pleasant	006J3 Potterville
030D7 Glenn Rock	032D9 Kingston	033F5 Nannaquaket	025F7 Primrose
039B7 Globe	037C3 Kitt's Corner	036F9 Napatree Point	028K7 Providence
013E7 Gloucester	007P7 Knightsville	020F9 Narragansett	027R5 Prudence Island
021G5 Goat Island	023K9 Lafayette	020G9 Narragansett Pier	027S5 Quaker Hill
035L3 Goddard Park,\n&	037D3 Lake Mishnock	010G7 Narragansett Terrace	023Q9 Quidnessett
Governor Francis	035Q3 Lakewood	003K7 Nasonville	006K3 Quidnick
032B9 Gould Crossing	003H7 Laurel Hill	035U3 Natick,\n&	017J7 Quinville
015F5 Gould Island\n&	027M5 Lawton Valley	Nausauket,\n&	005F9 Quonochontaug
(East Passage)	026E7 Lebanon	Nesansett	023R9 Quonset Point
027G5 Gould Island\N&	011H9 Lewis City	022C9 New Harbor	006L3 Rice City
(Sakonnet River)	011I9 Liberty	022D9 New Shoreham	029G9 Richmond
016B7 Graniteville	017D7 Lime Rock	021H5 Newport	038I3 River Point
008I7 Grant Mills	017E7 Lincoln	037F3 Nooseneck	035Z3 River View
033E5 Grayville	035R3 Lincoln Park	023M9 North Ferry	010J7 Riverside
020D9 Great Island	017F7 Lincoln Woods	012F7 North Foster	037G3 Robin Hollow
032C9 Green Hill	038F3 Lippitt	023N9 North Kingstown	030H7 Rockland
006E3 Greene	018C5 Little Compton	024H7 North Providence	014N9 Rockville
031D7 Greenville	014K9 Locustville	012G7 North Scituate	032I9 Rocky Brook
035N3 Greenwood	035S3 Longmeadow	025E7 North Smithfield	035D3 Rocky Point
016C7 Greystone (Johnston)	017G7 Lonsdale	033G5 North Tiverton	021J5 Rose Island
024D7 Greystone (North\N&	017H7 Louisquisset	035V3 Norwood	003O7 Round Top
Providence)	(Lincoln)	001E1 Nyatt	010K7 Rumford
023J9 Hamilton	024E7 Louisquisset (North	003L7 Oak Valley	001F1 Rumstick Point
039C7 Hamlet	\N&	003M7 Oakland	019D5 Sachuest
001D1 Hampden Meadows	Providence)	035W3 Oakland Beach,\N&	018D5 Sakonnet
013F7 Harmony	024F7 Lymansville	Old Warwick	003P7 Sand Beach
006F3 Harris	028H7 Manton	007S7 Oaklawn	020I9 Sand Hill Cove
003F7 Harrisville	008J7 Manville	021I5 Ochre Point	022F9 Sandy Point (New\N&
036D9 Haversham	(Cumberland)	022E9 Old Harbor	Shoreham)
029D9 Hillsdale	017I7 Manville (Lincoln)	028J7 Olneyville	035G3 Sandy Point
035O3 Hillsgrove	025D7 Manville (North \N&	010H7 Omega	(Warwick)
027H5 Hog Island	Smithfield)	035X3 Palace Garden	036J9 Sandy Point
027I5 Homestead	039D7 Manville	003N7 Pascoag	(Westerly)
006G3 Hope (Coventry)	(Woonsocket)	027O5 Patience	011K9 Saundertown
007M7 Hope (Cranston)	003I7 Mapleville	026F7 Pawtucket	030I7 Saundersville
030E7 Hope (Scituate)	024G7 Marieville	007T7 Pawtuzet	003Q7 Saxonville
027J5 Hope Island	032E9 Matunuck	032G9 Peace Dale	017K7 Saylesville
011G9 Hope Valley	035T3 Meadow View	032H9 Perryville	020K9 Scarborough
037B3 Hopkins Hill	027N5 Melville	007U7 Pettaconsett	030J7 Scituate
006H3 Hopkins Hollow	016G7 Merino	006I3 Phenix	002G1 Seal Island
012D7 Hopkins Mills	007Q7 Meshanticut	010I7 Phillipsdale	005G9 Shannock (part)
014J9 Hopkinton	007R7 Meshanticut Park	012H7 Pine Ridge	029H9 Shannock (part)
007N7 Horn Hill, \N&	019C5 Middletown	036G9 Pleasant Hill	035H3 Shawomet
Howard	011J9 Millville	036H9 Pleasant View	036K9 Shelter Harbor
035P3 Hoxie	037E3 Mishnock	023O9 Plum Beach	028L7 Silver Lake
016D7 Hughesdale	036E9 Misquamicut	027P5 Pocassett Heights	010L7 Silver Spring
027K5 Hummocks	003J7 Mohegan	020H9 Point Judith	016K7 Simmonsville
003G7 Huntsville	022B9 Mohegan Bluffs	012I7 Ponagansett	003R7 Slatersville\N&
027L5 Island Park	008K7 Monastery Heights	007V7 Pontiac (Cranston)	(Burillville)

025G7 Slatersville\N& (North Smithfield)	009C3 Sun Valley	003T7 Wallum Lake	038K3 West Warwick
011L9 Slocum (part)	003S7 Tarklin	024I7 Wanslucuck	036N9 Westerly
028M7 Smith Hill	027U5 The Glen	034G1 Warren	003U7 Whipple
031G7 Smithfield	027V5 The Hummocks	035M3 Warwick,\N& Warwick Downs,\N& Warwick Neck	036O9 White Rock
032J9 Snug Harbor	016L7 Thornton	006Q3 Washington	006R3 Whitman
039E7 Social	007Y7 Thornton	007Z7 Washington \n& Park (Cranston)	037I3 Wickaboxet
007W7 Sockanosset	006O3 Tiogue	028Q7 Washington \n& Park (Providence)	023U9 Wickford
007X7 South Auburn	033H5 Tiverton	036L9 Watch Hill	023V9 Wickford Junction
020L9 South Ferry	033I5 Tiverton Four Corners	010N7 Watchemoket	023W9 Wild Goose Point
012J7 South Foster	028P7 Tockwotton	025I7 Waterford	036P9 Winnapaug
032K9 South Kingstown	021K5 Tonomy Hill	036M9 Weekapaug	005H9 Wood River Jctn.
027T5 South Portsmouth	034F1 Touissert	038J3 Wescott	026G7 Woodlawn
028N7 South Providence	032L9 Tower Hill	020N9 Wesquage	007O7 Woodridge
034E1 South Warren	032M9 Tuckertown	007I7 West Arlington	029L9 Woodville
031H7 Spragueville	018E5 Tunipus	001G1 West Barrington	011O9 Woody Hill
035J3 Spring Green	027W5 Turkey Hill	013J7 West Glocester	039F7 Woonsocket
013I7 Spring Grove	025H7 Union Village	031J7 West Greenville	025J7 Woonsocket Hill
006M3 Spring Lake	029I9 Usquepaug	037H3 West Greenwich	014P9 Wyoming
010M7 Squantum	008L7 Valley Falls	011M9 West Kingston	011P9 Yawgoo Valley
028O7 Starvegoat Island	006P3 Vernon (Coventry)		014Q9 Yawgoog
031I7 Stillwater	012K7 Vernon (Foster)		77777 DK
006N3 Summit	020M9 Wakefield		99999 Refused
	002H1 Walker Island		

- -- Enter town code
- 7 7 7 Don't know / not sure
- 9 9 9 Refused

[CATI Note: auto-code to county]

//ask if RI1\_1<77777//

RI1\_1B

- I just want to confirm, you said you live in the town of [fill in RI1\_1]. Is that correct?
- 1 Yes, correct town
  - 2 No, incorrect town

## Section 12: Demographics, Continued

//ask of all//

s12q14

What is your zip code where you live?

- -- Zip code
- 7 7 7 7 Don't know / not sure
- 9 9 9 9 Refused

[Range 02801-02898] **ZIPCODE** (133-137)

//ask if s12q14=02801-02898//

s12q14CK

- I just want to confirm, you said your zip code is [fill in s12q14]. Is that correct?
- 1 Yes, correct zip code
  - 2 No, incorrect zip code

//ask of all//

s12q15

Do you have more than one telephone number in your household? Do not include cell phones or numbers that are only used by a computer or fax machine.

- 1 Yes
- 2 No

**NUMHHOL2** (138)

[Go to Q12.17]

- 7 Don't know / not sure [Go to Q12.17]
- 9 Refused [Go to Q12.17]

//ask if s12q15=1//  
s12q16

How many of these telephone numbers are residential numbers?

- Residential telephone numbers [Range 1-6] [6=6 or more] **NUMPHON2** (139)
- 7 Don't know / not sure
- 9 Refused

//ask if s12q16>1//  
s12q16A

I am sorry, just to double-check, you indicated you have [enter # of residential telephone numbers from s12q16] residential phones in your household. Is that correct?

- 1 Yes, correct as is
- 2 No, re-ask question [Go back to s12q16]

//ask of all//  
s12q17

During the past 12 months, has your household been without landline telephone service for 1 week or more? Do not include interruptions of landline telephone service because of weather or natural disasters.

- 1 Yes **TELSERV3** (140)
- 2 No
- 7 Don't know / not sure
- 9 Refused

### [CELL PHONE QUESTIONS]

//ask of all//  
s12q18A

Do you have a cell phone for personal use? Please include cell phones used for both business and personal use.

- 1 Yes [Go to Q12.18C] **CPDEMO1** (141)
- 2 No
- 7 Don't know / not sure
- 9 Refused

//ask if s12q18A=2,7,9//  
s12q18B

Do you share a cell phone for personal use (at least one-third of the time) with other adults?

- 1 Yes [Go to Q12.18D] **CPDEMO2** (142)
- 2 No [Go to Q12.19]
- 7 Don't know / not sure [Go to Q12.19]
- 9 Refused [Go to Q12.19]

//ask if s12q18A=1//  
s12q18C

Do you usually share this cell phone (at least one-third of the time) with any other adults?

- 1 Yes **CPDEMO3** (143)
- 2 No
- 7 Don't know / not sure
- 9 Refused

//ask if s12q18A=1 or s12q18B=1//  
s12q18D

Thinking about all the phone calls that you receive on your landline and cell phone, what percent, between 0 and 100, are received on your cell phone?

**CPDEMO4** (144-146)

---	Enter percent	[Range 1-100]
8 8 8	Zero	
7 7 7	Don't know / not sure	
9 9 9	Refused	

//ask of all//  
s12q19

Indicate sex of respondent. Ask only if necessary.

**SEX** (147)

1	Male	[Go to next section]
2	Female	[If age>44, go to next section]

//ask if s12q19=2 and s12q1<45//  
s12q20

To your knowledge, are you now pregnant?

**PREGNANT** (148)

1	Yes
2	No
7	Don't know / not sure
9	Refused

### Section 13: Alcohol Consumption

//ask of all//  
s13q1

During the past 30 days, have you had at least one drink of any alcoholic beverage such as beer, wine, a malt beverage or liquor?

**DRNKANY4** (149)

1	Yes	
2	No	[Go to next section]
7	Don't know / not sure	[Go to next section]
9	Refused	[Go to next section]

//ask if s13q1=1//  
s13q2

During the past 30 days, how many days per week or per month did you have at least one drink of any alcoholic beverage?

[Enter 1+ the number of days per week] [Example: 5 days per week=105]  
[Enter 2+ the number of days in the past 30 days] [Example: 7 days in the past 30 days=207]

**ALCDAY4** (150-152)

---	Record number of days	[Range 101-107,201-230]
8 8 8	No drinks in the past 30 days	[Go to next section]
7 7 7	Don't know / not sure	
9 9 9	Refused	

//ask if s13q2=101-107,201-230,777,999//  
s13q3

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** (153-154)

**/Interviewer Note: A 40-ounce beer would count as 3 drinks, or a cocktail drink with 2 shots would count as 2 drinks/**

--	Number of drinks	[Range 1-76]
----	------------------	--------------

7 7 Don't know / not sure  
 9 9 Refused

//ask if s13q2=101-107,201-230,777,999//  
 s13q4

Considering all types of alcoholic beverages, how many times during the past 30 days did you have X [CATI Note: X=5 for men, X=4 for women] or more drinks on an occasion?

**DRNK3GES** (155-156)

-- Number of times [Range 1-76]  
 8 8 None  
 7 7 Don't know / not sure  
 9 9 Refused

//ask if s13q2=101-107,201-230,777,999//  
 s13q5

During the past 30 days, what is the largest number of drinks you had on any occasion?

**MAXDRNKS** (157-158)

-- Number of drinks [Range 1-76]  
 7 7 Don't know / not sure  
 9 9 Refused

## Section 14: Immunization

//ask of all//  
 s14q1

Now I will ask you questions about seasonal flu. A flu shot is an influenza vaccine injected into your arm. During the past 12 months, have you had a seasonal flu shot?

**FLUSHOT4** (159)

1 Yes  
 2 No [Go to Q14.3]  
 7 Don't know / not sure [Go to Q14.3]  
 9 Refused [Go to Q14.3]

//ask if s14q1=1//  
 s14q2\_M

During what month and year did you receive your most recent seasonal flu shot?

**FLSHTMY1** (160-165)

01	January	04	April	07	July	10	October
02	February	05	May	08	August	11	November
03	March	06	June	09	September	12	December

-- Record 2-digit month  
 7 7 Don't know / not sure  
 9 9 Refused

//ask if s14q1=1//  
 s14q2\_Y

Enter the 4-digit year

-- (4-digit year) [Range 2009-2010]  
 7 7 7 7 Don't know / not sure  
 9 9 9 9 Refused

//ask of all//  
 s14q3

The seasonal flu vaccine sprayed in the nose is also called FluMist™. During the past 12 months, have you had a seasonal flu vaccine that was sprayed in your nose?

**FLUSPRY3** (166)

1 Yes

- 2 No [Go to Q14.5]
- 7 Don't know / not sure [Go to Q14.5]
- 9 Refused [Go to Q14.5]

//ask if s14q3=1//  
s14q4\_M

During what month and year did you receive your most recent seasonal flu vaccine that was sprayed in your nose?

- 01 January 04 April 07 July 10 October **FLSPRMY1** (167-172)
- 02 February 05 May 08 August 11 November
- 03 March 06 June 09 September 12 December
- Record 2-digit month
- 77 Don't know / not sure
- 99 Refused

//ask if s14q3=1//  
s14q4\_Y

- Enter 4-digit year
- (4-digit year) [Range 2009-2010]
- 7777 Don't know / not sure
- 9999 Refused

//ask of all/  
s14q5

A pneumonia shot or pneumococcal vaccine is usually given only once or twice in a person's lifetime and is different from the flu shot. Have you ever had a pneumonia shot?

- 1 Yes **PNEUVAC3** (173)
- 2 No
- 7 Don't know / not sure
- 9 Refused

## Section 15: Falls

//ask if s12q1>44,7,9//  
s15q1

The next questions ask about recent falls. By a fall, we mean when a person unintentionally comes to rest on the ground or another lower level. In the past 3 months, how many times have you fallen?

- Number of times **FALL3MN2** (174-175)
- 88 None [Range 1-76] [76=76 or more]
- 77 Don't know / not sure [Go to next section]
- 99 Refused [Go to next section]

//ask if s15q1=1//  
s15q2A

Did this fall [from Q15.1] cause an injury? By an injury, we mean the fall caused you to limit your regular activities for at least a day or to go see a doctor.

(176-177)

**/Interviewer Note: If a respondent answers "yes," code 1 (fall). If respondent answers "no," code 88 (None)/**

- Record number of falls [Range 1-76] [76=76 or more]
- 88 None
- 77 Don't know / not sure
- 99 Refused

//ask if s15q1=2-76//  
s15q2

How many of these falls caused an injury? By an injury, we mean the fall caused you to limit your regular activities for at least a day or to go see a doctor.

- Record number of falls
- 8 8 None
- 7 7 Don't know / not sure
- 9 9 Refused

**FALLINJ2** (176-177)  
[Range 1-76] [76=76 or more]

## Section 16: Seatbelt Use

//ask of all//  
s16q1

How often do you use seat belts when you drive or ride in a car? Would you say--

**Please read:**

- 1 Always
- 2 Nearly always
- 3 Sometimes
- 4 Seldom
- 5 Never

**Do not read:**

- 7 Don't know / not sure
- 8 Never drive or ride in a car
- 9 Refused

**SEATBELT** (178)

## Section 17: Drinking and Driving

//ask if s16q1=1-5,7,9 and s13q1=1,7,9//  
s17q1

The next question is about drinking and driving. During the past 30 days, how many times have you driven when you've had perhaps too much to drink?

- Number of times
- 8 8 None
- 7 7 Don't know / not sure
- 9 9 Refused

[Range 1-76]

**DRNKDRI2** (179-180)

## Section 18: Women's Health

//ask if s12q19=2//  
s18q1

The next questions are about breast and cervical cancer. A mammogram is an x-ray of each breast to look for breast cancer. Have you ever had a mammogram?

- 1 Yes
- 2 No
- 7 Don't know / not sure
- 9 Refused

[Go to Q18.3]

[Go to Q18.3]

[Go to Q18.3]

**HADMAM** (181)

//ask if s18q1=1//  
s18q2

How long has it been since you had your last mammogram?

**Read only 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)

**HOWLONG** (182)

- 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

//ask if s12q19=2//  
s18q3

A clinical breast exam is when a doctor, nurse, or other health professional feels the breasts for lumps. Have you ever had a clinical breast exam?

**PROFEXAM** (183)

- 1 Yes
- 2 No [Go to Q18.5]
- 7 Don't know / not sure [Go to Q18.5]
- 9 Refused [Go to Q18.5]

//ask if s18q3=1//  
s18q4

How long has it been since your last breast exam?

**LENGEXAM** (184)

**Read only 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

//ask if s12q19=2//  
s18q5

A Pap test is a test for cancer of the cervix. Have you ever had a Pap test?

**HADPAP2** (185)

- 1 Yes
- 2 No [Go to Q18.7]
- 7 Don't know / not sure [Go to Q18.7]
- 9 Refused [Go to Q18.7]

//ask if s18q5=1//  
s18q6

How long has it been since you had your last Pap test?

**LASTPAP2** (186)

**Read only 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

//ask if s12q20=2,7,9,missing and s12q19=2//  
s18q7

Have you had a hysterectomy?

**HADHYST2** (187)

**Read only if necessary:** A hysterectomy is an operation to remove the uterus (womb).

- 1 Yes
- 2 No
- 7 Don't know / not sure
- 9 Refused

## Section 19: Prostate Cancer Screening

//ask if s12q19=1 and s12q1>39,7,9//

s19q1

Now, I will ask you some questions about prostate cancer screening. A Prostate-Specific Antigen test, also called a PSA test, is a blood test used to check men for prostate cancer. Have you ever had a PSA test?

**PSATEST** (188)

- 1 Yes
- 2 No [Go to Q19.3]
- 7 Don't know / not sure [Go to Q19.3]
- 9 Refused [Go to Q19.3]

//ask if s19q1=1//

s19q2

How long has it been since you had your last PSA test?

**PSATIME** (189)

**Read only 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

//ask if s12q19=1 and s12q1>39,7,9//

s19q3

A digital rectal exam is an exam in which a doctor, nurse, or other health professional places a gloved finger into the rectum to feel the size, shape, and hardness of the prostate gland. Have you ever had a digital rectal exam?

**DIGRECEX** (190)

- 1 Yes
- 2 No [Go to Q19.5]
- 7 Don't know / not sure [Go to Q19.5]
- 9 Refused [Go to Q19.5]

//ask if s19q3=1//

s19q4

How long has it been since your last digital rectal exam?

**DRETIME** (191)

**Read only 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

//ask if s12q19=1 and s12q1>39,7,9//

s19q5

Have you ever been told by a doctor, nurse, or other health professional that you had prostate cancer?

**PROSTATE** (192)

- 1 Yes
- 2 No
- 7 Don't know / not sure
- 9 Refused

## Section 20: Colorectal Cancer Screening

//ask if s12q1>49,7,9//

s20q1

The next questions are about colorectal cancer screening. A blood stool test is a test that may use a special kit at home to determine whether the stool contains blood. Have you ever had this test using a home kit?

**BLDSTOOL** (193)

- 1 Yes
- 2 No [Go to Q20.3]
- 7 Don't know / not sure [Go to Q20.3]
- 9 Refused [Go to Q20.3]

//ask if s20q1=1//

s20q2

How long has it been since you had your last blood stool test using a home kit?

**LSTBLDS3** (194)

**Read only 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

//ask if s12q1>49,7,9//

s20q3

Sigmoidoscopy and colonoscopy are exams in which a tube is inserted in the rectum to view the colon for signs of cancer or other health problems. Have you ever had either of these exams?

**HADSIGM3** (195)

- 1 Yes
- 2 No [Go to next section]
- 7 Don't know / not sure [Go to next section]
- 9 Refused [Go to next section]

//ask if s20q3=1//

s20q4

For a SIGMOIDOSCOPY, a flexible tube is inserted into the rectum to look for problems. A COLONOSCOPY is similar, but uses a longer tube, and you are usually given medication through a needle in your arm to make you sleepy and told to have someone else drive you home after the test. Was your MOST RECENT exam a sigmoidoscopy or a colonoscopy?

**HADSGCOI** (196)

- 1 Sigmoidoscopy
- 2 Colonoscopy
- 7 Don't know / not sure
- 9 Refused

//ask if s20q3=1//

s20q5

How long has it been since you had your last sigmoidoscopy or colonoscopy?

**LASTSIG3** (197)

**Read only 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 Within the past 10 years (5 years but less than 10 years ago)
- 6 10 or more years ago

**Do not read:**

- 7 Don't know / not sure
- 9 Refused

## Section 21: HIV/AIDS

The next few questions are about the national health problem of HIV, the virus that causes AIDS. Please remember that your answers are strictly confidential and that you don't have to answer every question if you do not want to. Although we will ask you about testing, we will not ask you about the results of any test you may have had.

//ask if s12q1<65//

s21q1

Have you ever been tested for HIV? Do not count tests you may have had as part of a blood donation. Include testing fluid from your mouth.

**HIVTST5** (198)

- 1 Yes
- 2 No [Go to Q21.5]
- 7 Don't know / not sure [Go to Q21.5]
- 9 Refused [Go to Q21.5]

//ask if s21q1=1//

s12q2M

Not including blood donations, in what month and year was your last HIV test?

**HIVTSTD2** (199-204)

**/Interviewer Note: If response is before January 1985, code "Don't know."/**

**/CATI Note: If the respondent remembers the year but cannot remember the month, code the first two digits 77 and the last four digits for the year/**

- Enter 2-digit month
- 77 Don't know / not sure
- 99 Refused

//ask if s21q1=1//

s21q2Y

Not including blood donations, in what month and year was your last HIV test?

(199-204)

**/Interviewer Note: If response is before January 1985, code "Don't know."/**

**/CATI Note: If the respondent remembers the year but cannot remember the month, code the first two digits 77 and the last four digits for the year/**

- Enter 4-digit year [Range 1985-2010]
- 7777 Don't know / not sure
- 9999 Refused

//ask if s21q1=1//

s21q3

Where did you have your last HIV test – at a private doctor or HMO office, at a counseling and testing site, at a hospital, at a clinic, in a jail or prison, at a drug treatment facility, at home, or somewhere else?

**WHRTST8** (205-206)

- 01 Private doctor or HMO office
- 02 Counseling and testing site
- 03 Hospital

- 04 Clinic
- 05 Jail or prison (or other correctional facility)
- 06 Drug treatment facility
- 07 At home
- 08 Somewhere else
- 77 Don't know / not sure
- 99 Refused

//ask if 0 ≤ lasttest [current date – test date] ≤ 12 or (s21q2Y=2009,2010 and s21q2M=77,99)//  
s21q4

Was it a rapid test where you could get your results within a couple of hours?

**HIVRDTST** (207)

- 1 Yes
- 2 No
- 7 Don't know / not sure
- 9 Refused

//ask if s12q1<65//  
s21q5

I'm going to read you a list. When I'm done, please tell me if any of the situations apply to you. You do not need to tell me which one.

- You have used intravenous drugs in the past year.
- You have been treated for a sexually transmitted or venereal disease in the past year.
- You have given or received money or drugs in exchange for sex in the past year.
- You had anal sex without a condom in the past year.

Do any of these situations apply to you?

**HIVRISK2** (208)

- 1 Yes
- 2 No
- 7 Don't know / not sure
- 9 Refused

## Section 22: Emotional Support and Life Satisfaction

The next two questions are about emotional support and your satisfaction with life.

//ask of all//  
s22q1

How often do you get the social and emotional support you need?

**EMTSUPRT** (209)

**/Interviewer Note: If asked, say “please include support from any source.”/**

**Please read:**

- 1 Always
- 2 Usually
- 3 Sometimes
- 4 Rarely
- 5 Never

**Do not read:**

- 7 Don't know / not sure
- 9 Refused

//ask of all//  
s22q2

In general, how satisfied are you with your life?

**LSATISFY** (210)

**Please read:**

- 1 Very satisfied
- 2 Satisfied

- 3 Dissatisfied
- 4 Very dissatisfied
- Do not read:**
- 7 Don't know / not sure
- 9 Refused

## Section 26: Influenza-Like Illness (ILI) [\*\*\*October 1, 2010 – April 30, 2011]

We would like to ask you some questions about recent respiratory illnesses.

//ask of all//

s26q1

Last month (i.e. September [to change to previous month each month of survey]) were you ill with a fever? **FLSYAQ01** (918)

- 1 Yes
- 2 No [Go to Q8]
- 7 Don't know [Go to Q8]
- 9 Refused [Go to Q8]

//ask if s26q1=1//

s26q2

Did you also have a cough and/or sore throat? **FLSYAQ02** (919)

- 1 Yes
- 2 No [Go to Q8]
- 7 Don't know [Go to Q8]
- 9 Refused [Go to Q8]

//ask if s26q2=1//

s26q3

Did you visit a doctor, nurse, or other health professional for this illness? **FLSYAQ03** (921)

- 1 Yes
- 2 No [Go to Q8]
- 7 Don't know [Go to Q8]
- 9 Refused [Go to Q8]

//ask if s26q3=1//

s26q4

When did you visit the doctor, nurse, or other health professional for this illness? **FLSYAQ04** (920)

**/Interviewer Note: Read off choices; choose the most specific/**

- 1 Within two days of getting ill
- 2 Within three to 7 days of getting ill
- 3 More than 7 days of getting ill
- 7 Don't know
- 9 Refused

//ask if s26q3=1//

s26q5

What did the doctor, nurse, or other health professional tell you? Did they say... **FLSYAQ05** (922)

**/Interviewer Note: If respondent says they had either H1N1 or seasonal influenza, please code as**

**'1=You had influenza or the flu'/**

- 1 You had influenza or the flu
- 2 You had some other illness, but not the flu
- 7 Don't know / not sure
- 9 Refused

//ask if s26q3=1//  
s26q6

Did you have a flu test that was positive for this illness? Usually a swab from your nose or throat is tested.  
Would you say...

**FLSYAQ06** (923)

**/Interviewer Note: If respondent says they had either a positive H1N1 or seasonal influenza result, please code as '1=Had flu test and it was positive'/'**

- 1 Had flu test and it was positive
- 2 Had flu test and it was negative
- 3 Did not have flu test
- 7 Don't know
- 9 Refused

//ask if s26q3=1//  
s26q7

Did you receive Tamiflu® or oseltamivir [*o sel TAM i veer*] or an inhaled medicine called Relenza® or zanamivir [*za NA mi veer*] to treat this illness?

**FLSYAQ07** (924)

- 1 Yes
- 2 No
- 7 Don't know
- 9 Refused

**/CATI Note: Apply prior to Q8; For a one adult household with no children, if the respondent has NOT been ill (Q1=2,7,9 or Q2=2,7,9) skip to next section. For a one adult household with no children, if respondent has been ill (Q1=1 and Q2=1) go to Q10/**

//ask if ADULTS>1 or s12q7=01-15//  
s26q8

Did any other members of your household have a fever with cough or sore throat last month (i.e. September [to change each month of survey])?

**FLSYAQ08** (925)

- 1 Yes
- 2 No
- 7 Don't know
- 9 Refused

**[if (Q1=1 (Yes) and Q2=1 (Yes)), go to Q10, else, go to next section]**

//ask if s26q8=1//  
s26q9

How many household members **[CATI Note: Fill in "including you," if Q1=1 (Yes) and Q2=1 (Yes)]** were ill last month (i.e. September [to change each month of survey])?

**FLSYAQ09** (926-927)

- Number of persons **[Range 1-76]**
- 8 8 None
- 7 7 Don't know / not sure
- 9 9 Refused

//ask if (s26q1=1 and s26q2=1) or s26q8=1//  
s26q10

How many people in your household, including you, were hospitalized for flu last month (i.e. September [to change each month of survey])?

**FLSYAQ10** (232-233)

**/Interviewer Note: If needed, hospitalized means admitted to a hospital to receive medical treatment/**

- Number of persons **[Range 1-76]**
- 8 8 None
- 7 7 Don't know / not sure
- 9 9 Refused

Transition to Modules and/or State-Added Questions

Please Read: Finally, I have just a few questions left about some other health topics.

## Optional Modules

### Module 16: Reactions to Race

Earlier I asked you to self-identify your race. Now I will ask you how other people identify you and treat you.

//ask of all//

Mod16\_1

How do other people usually classify you in this country? Would you say: White, Black or African American, Hispanic or Latino, Asian, Native Hawaiian or other Pacific Islander, American Indian or Alaska Native, or some other group?

**/Interviewer Note: If the respondent requests clarification of this question, say: “We want to know how OTHER people usually classify you in this country, which might be different from how you classify yourself.”/**

**RRCLASS2** (361)

- 1 White
- 2 Black or African American
- 3 Hispanic or Latino
- 4 Asian
- 5 Native Hawaiian or other Pacific Islander
- 6 American Indian or Alaska Native
- 8 Some other group (Specify: \_\_\_\_\_)
- 7 Don't know / not sure
- 9 Refused

//if Mod16\_1=8//

Mod16\_1o

Enter response: \_\_\_\_\_

//ask of all//

Mod16\_2

How often do you think about your race? Would you say never, once a year, once a month, once a week, once a day, once an hour, or constantly?

**/Interviewer Note: The responses can be interpreted as meaning “at least” the indicated time frequency. If a respondent cannot decide between two categories, check the response for the lower frequency. For example, if a respondent says that they think about their race between once a week and once a month, check “once a month” as the response/**

**RRCOGNT2** (362)

- 1 Never
- 2 Once a year
- 3 Once a month
- 4 Once a week
- 5 Once a day
- 6 Once an hour
- 8 Constantly
- 7 Don't know / not sure
- 9 Refused

//ask if s12q9=1,2,4//

Mod16\_3

Within the past 12 months at work, do you feel you were treated worse than, the same as, or better than people of other races?

**RRATWRK2** (363)

- 1 Worse than other races
- 2 The same as other race

- 3 Better than other races
- Do not read:**
- 4 Worse than some races, better than others
- 5 Only encountered people of the same race
- 7 Don't know / not sure
- 9 Refused

//ask of all//  
Mod16\_4

Within the past 12 months, when seeking health care, do you feel your experiences were worse than, the same as, or better than for people of other races?

**/Interviewer Note: If the respondent indicates that they do not know about other people's experiences when seeking health care, say: "This question is asking about your perceptions when seeking health care. It does not require specific knowledge about other people's experiences."/**

**RRHCARE3** (364)

- 1 Worse than other races
- 2 The same as other races
- 3 Better than other races
- Do not read:**
- 4 Worse than some races, better than others
- 5 Only encountered people of the same race
- 6 No health care in past 12 months
- 7 Don't know / not sure
- 9 Refused

//ask of all//  
Mod16\_5

Within the past 30 days, have you experienced any physical symptoms, for example, a headache, an upset stomach, tensing of your muscles, or a pounding heart, as a result of how you were treated based on your race?"

**RRPHYSM2** (365)

- 1 Yes
- 2 No
- 7 Don't know / not sure
- 9 Refused

//ask of all//  
Mod16\_6

Within the past 30 days, have you felt emotionally upset, for example, angry, sad, or frustrated, as a result of how you were treated based on your race?"

**RREMTSM2** (366)

- 1 Yes
- 2 No
- 7 Don't know / not sure
- 9 Refused

## State-Added 2: Health Insurance Coverage

//ask if s3q1=1//  
RI2\_1

**TYPCOVER1**

Earlier you said you have health care coverage. What type of health care coverage do you use to pay for most of your medical care? Is it coverage through:

**Please read:**

- 01 Your employer
- 02 Someone else's employer
- 03 A plan that you or someone else buys on your own
- 04 Medicare
- 05 Medicaid or Rhody Health Partners

- 06 Rite Care
- 07 The military, CHAMPUS or TriCare, or the VA
- 08 The Indian Health Service [or the Alaska Native Health Service]

**Or**

- 09 Some other source

**Do not read:**

- 88 None
- 77 Don't know / not sure
- 99 Refused

//ask if s3q1=2,7//

**RI2\_2**

**TYPCOVR2**

Earlier you said you do not have health care coverage or weren't sure you had health care coverage. There are some types of coverage you may not have considered. Please tell me if you have any of the following. Is it coverage through:

**/Interviewer Note: If more than one, ask "Which type do you use to pay for most of your medical care?"**

**Please Read:**

- 01 Your employer
- 02 Someone else's employer
- 03 A plan that you or someone else buys on your own
- 04 Medicare
- 05 Medicaid or Rhody Health Partners
- 06 Rite Care
- 07 The military, CHAMPUS or TriCare, or the VA
- 08 The Indian Health Service [or the Alaska Native Health Service]

**Or**

- 09 Some other source

**Do not read:**

- 88 None
- 77 Don't know / not sure
- 99 Refused

### State-Added 3: Adult Oral Health

//ask of all//

**RI3\_1**

**DENTLINS**

Do you have any kind of insurance coverage that pays for some or all of your routine dental care, including dental insurance, prepaid plans such as HMOs, or government plans such as Medicaid?

- 1 Yes
- 2 No
- 7 Don't know / not sure
- 9 Refused

//ask if RI3\_1=1//

**RI3\_2**

**DENTLCOV**

Which plan provides this dental coverage?

**Please read:**

- 01 Delta dental
- 02 Blue cross dental
- 03 Other private plan (Specify: \_\_\_\_\_)
- 04 Rite smiles
- 05 Rite care
- 06 Medicare (supplement or managed care plan)
- 07 Military, veterans, or TriCare family dental plan
- 08 Other (Specify: \_\_\_\_\_)

**Do not read:**

- 88 No dental coverage

- 98 Don't know / not sure
- 99 Refused

//if RI3\_2=03//  
RI3\_2o1

Specify private plan: \_\_\_\_\_

//if RI3\_2=08//  
RI3\_2o2

Specify other: \_\_\_\_\_

//ask of all//  
RI3\_3

**ORALCANC**

When was the last time you had a test for oral cancer in which a dentist, doctor, or dental hygienist pulls on your tongue, sometimes with gauze wrapped around it, and feels under the tongue and inside the cheeks?

**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 5 years (2 years but less than 5 years ago)
- 4 5 or more years ago

**Do not read:**

- 5 Never
- 7 Don't know / not sure
- 9 Refused

//ask of all//  
RI3\_4

**DENTLCAV**

Do you have cavities or untreated dental decay?

- 1 Yes
- 2 No
- 7 Don't know / not sure
- 9 Refused

## State-Added 4: Tobacco Control [\*\*\* July 1, 2010 – December 31, 2010]

//ask of all if loadmnth=7,8,9,10,11,12//

RI4\_1

**SMOKNOW2**

Do you now smoke cigars, little cigars or cigarillos?

**Read responses:**

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

**Do not read:**

- 7 Don't know / not sure
- 9 Refused

//ask if s11q1=1 and loadmnth=7,8,9,10,11,12//

/CATI Note: If s11q2=1,2, read: "Previously you said you smoke cigarettes. Do you..."/

/CATI Note: If s11q2=3, read: "Previously you said you used to smoke cigarettes. Did you..."/

RI4\_2

**SMKTYPE**

...smoke primarily menthol or plain cigarettes?

- 1 Menthol
- 2 Plain
- 7 Don't know / not sure
- 9 Refused

//ask if s11q1=1,2 and loadmnth=7,8,9,10,11,12//

RI4\_3

**SMKNM30**

On the average, when you smoked during the past 30 days, about how many cigarettes did you smoke a day?

**/Interviewer Note: 1 pack = 20 cigarettes/**

- |     |                              |                              |
|-----|------------------------------|------------------------------|
| --  | Number of cigarettes         | [Range 1-76] [76=76 or more] |
| 7 7 | Don't know / not sure        |                              |
| 8 8 | Didn't smoke in past 30 days |                              |
| 9 9 | Refused                      |                              |

//ask if s11q2=1,2 and loadmnth=7,8,9,10,11,12//

RI4\_4

**GETCARE2**

In the last 12 months, how many times have you seen a doctor or other health provider to get any kind of care for yourself?

- |     |                       |                              |
|-----|-----------------------|------------------------------|
| --  | Number of times       | [Range 1-76] [76=76 or more] |
| 8 8 | None                  | [Go to RI4_6]                |
| 7 7 | Don't know / not sure | [Go to RI4_6]                |
| 9 9 | Refused               | [Go to RI4_6]                |

//ask if RI4\_4=1-76//

RI4\_5

**QUITSMK2**

In the past 12 months, on how many of those visits were you advised to quit smoking by a doctor or other health provider?

- |     |                       |                              |
|-----|-----------------------|------------------------------|
| --  | Number of times       | [Range 1-76] [76=76 or more] |
| 8 8 | None                  |                              |
| 7 7 | Don't know / not sure |                              |
| 9 9 | Refused               |                              |

//ask of all if loadmnth=7,8,9,10,11,12//

RI4\_6

**SMK7EXP2**

Thinking about the past 7 days (past week), about how many hours were you exposed to other people's tobacco smoke inside your house or apartment?

**/Interviewer Note: If respondent was exposed 1 hour or less, but more than none, enter 01/**

- |     |                       |                              |
|-----|-----------------------|------------------------------|
| --  | Number of hours       | [Range 1-95] [95=95 or more] |
| 9 8 | Not exposed at all    |                              |
| 9 7 | Don't know / not sure |                              |
| 9 9 | Refused               |                              |

//ask if s12q9=1,2 and loadmnth=7,8,9,10,11,12//

RI4\_7

**SMK7WRK2**

Thinking about the past 7 days (past week), about how many hours were you exposed to other people's tobacco smoke when you were at work?

**/Interviewer Note: If respondent was exposed 1 hour or less, but more than none, enter 01/**

- |     |                       |                              |
|-----|-----------------------|------------------------------|
| --  | Number of hours       | [Range 1-95] [95=95 or more] |
| 9 6 | Do not work indoors   |                              |
| 9 8 | Not exposed at all    |                              |
| 9 7 | Don't know / not sure |                              |
| 9 9 | Refused               |                              |

//ask of all if loadmnth=7,8,9,10,11,12//

RI4\_8

**SMK7INSD**

Thinking about the past 7 days (past week), about how many hours were you exposed to other people's tobacco smoke inside places other than home (or work if employed)?

**/Interviewer Note: If respondent was exposed 1 hour or less, but more than none, enter 01/**

- |     |                       |                              |
|-----|-----------------------|------------------------------|
| --  | Number of hours       | [Range 1-95] [95=95 or more] |
| 9 8 | Not exposed at all    |                              |
| 9 7 | Don't know / not sure |                              |
| 9 9 | Refused               |                              |

//ask of all if loadmnth=7,8,9,10,11,12//

**RI4\_9**

In the past 12 months, have you heard, read, or seen anti-smoking information?

- 1 Yes
- 2 No [Go to next section]
- 7 Don't know / not sure [Go to next section]
- 9 Refused [Go to next section]

//ask if RI4\_9=1//

**RI4\_10**

**SMK TV**

In the past 12 months, have you seen anti-smoking information on television?

- 1 Yes
- 2 No
- 7 Don't know / not sure
- 9 Refused

**Module 12: Tetanus Diphtheria (Adults) [\*\*\*July 1, 2010 – December 31, 2010]**

Next, I will ask you about the tetanus diphtheria vaccination.

//ask of all if loadmth=7,8,9,10,11,12//

**Mod12\_1**

Have you received a tetanus shot in the past 10 years?

**TNSARCV** (318)

- 1 Yes
- 2 No [Go to next module]
- 7 Don't know / not sure [Go to next module]
- 9 Refused [Go to next module]

//ask if Mod12\_1=1//

**Mod12\_2**

Was your most recent tetanus shot given in 2005 or later?

**TNSARCNT** (319)

- 1 Yes
- 2 No [Go to next module]
- 7 Don't know / not sure
- 9 Refused

//ask if Mod12\_2=1,7,9//

**Mod12\_3**

There are currently two types of tetanus shots available for adults. One contains the tetanus diphtheria vaccine. The other type contains tetanus diphtheria and pertussis or whooping cough vaccine. Did your doctor say your recent tetanus shot included the pertussis or whooping cough vaccine?

**TNSASHOT** (320)

- 1 Yes (included pertussis)
- 2 No (did not include pertussis)
- 7 Don't know / not sure
- 9 Refused

**Module 13: Adult Human Papilloma Virus (HPV)**

**/Interviewer Note: Human Papilloma Virus (Human Pap·uh·loh·muh Virus); Gardasil (Gar·duh· seel); Cervarix (Sir·var·icks)/**

//ask if s12q1=18-49,7,9//

**Mod13\_1**

A vaccine to prevent the human papilloma virus or HPV infection is available and is called the cervical cancer or genital warts vaccine, HPV shot **[CATI Note: Fill if female “GARDASIL or CERVARIX”; if male “ or GARDASIL”]**. Have you EVER had an HPV vaccination?

**HPVADVC2** (321)

- 1 Yes

- 2 No [Go to next module]
- 3 Doctor refused when asked [Go to next module]
- 7 Don't know / not sure [Go to next module]
- 9 Refused [Go to next module]

//ask if Mod13\_1=1//  
Mod13\_2

How many HPV shots did you receive?

- Number of shots [Range 1-3]
- 03 All shots
- 77 Don't know / not sure
- 99 Refused

**HPVADSH1** (322-323)

### State-Added 5: Depression and Help Seeking

Now, I am going to ask you some questions about your mood. When answering these questions, please think about how many days each of the following has occurred in the past 2 weeks.

//ask of all//  
RI5\_1

Over the last 2 weeks, how many days have you had little interest or pleasure in doing things?

- 01-14 days
- 88 None
- 77 Don't know / not sure
- 99 Refused

**ADPLEASR**

//ask of all//  
RI5\_2

Over the last 2 weeks, how many days have you felt down, depressed or hopeless?

- 01-14 days
- 88 None
- 77 Don't know / not sure
- 99 Refused

**ADDOWN**

#### Score responses to Qs 1 and 2 as follows:

The number of days for each question is converted to points--

- 88 (none) or 1 day = 0 points
- 02 - 06 days = 1
- 07 - 11 days = 2
- 12 - 14 days = 3

Total the number of points for the two questions. If data for either of the two questions are missing or =77 or 99, a score is not calculated. A score of:

- 0-2 points = No depression
- 3-6 points = Current depression

If	RI5_1 =		RI5_2 =	Points	Score	category		Action
	77 or 99	or	77 or 99			missing	then	Skip to next section
	88 or 01	and	88 or 01	0 + 0	0	No depressn		Skip to next section
	02 -06	and	88 or 01	1 + 0	1	No depressn		Skip to next section
	88 or 01	and	02 -06	0 + 1	1	No depressn		Skip to next section
	02-06	and	02-06	1 + 1	2	No depressn		Skip to next section
	07 -11	and	88,01	2 + 0	2	No depressn		Skip to next section
	88,01	and	07 -11	0 + 2	2	No depressn		Skip to next section
	02 -06	and	07 - 11	1 + 2	3	Curr depressn		continue
	07 - 11	and	02 -06	2 + 1	3	Curr depressn		continue

	12 - 14	and	88, => 01	3 + 0 or more	3 - 6	Curr depressn		continue
	88, => 01	and	12 - 14	0 + 3 or more	3 - 6	Curr depressn		Continue
	12 - 14	and	12 - 14	3 + 3	3 - 6	Curr depressn		Continue

**/Interviewer Note: ask the following questions only of respondents with a score of 3-6 points (have current depression). All others, go to next section/**

//ask of...(see score info for Q1 and Q2)//

**RI5\_3**

**HLPSK**

Have you **sought help** for psychological problems or emotional difficulties in the past 12 months?

- 1 Yes
- 2 No [Go to RI5\_5]
- 7 Don't know / not sure [Go to RI5\_5]
- 9 Refused [Go to RI5\_5]

//ask if RI5\_3=1//

**RI5\_4**

**HLPSKWHO**

When you sought help, from whom did you seek the most support or assistance?

**Please read:**

- 02 A family member or friend
- 03 A crisis hotline or support group
- 04 A therapist or counselor
- 05 A medical provider
- 06 A member of my religious or spiritual community (member of the clergy)
- 07 Another professional
- 08 Other (Specify: \_\_\_\_\_)

**Do not read:**

- 01 No one / I did not seek help [Go to Q5]
- 77 Don't know / not sure
- 99 Refused

//ask if RI5\_4=08//

**RI5\_4o**

Enter Response: \_\_\_\_\_

//ask if RI5\_3=2,3 or RI5\_4=01//

**RI5\_5**

**HLPSKNOA**

What were the main reasons you did not seek help for psychological problems or emotional difficulties in the past 12 months?

[Code up to two] [MUL=2]

**Please read:**

- 02 Lack of information about available resources
- 03 Cost / no health insurance
- 04 Concern about what others would think
- 05 Lack of time
- 06 Depression
- 07 Lack of resources in your area

**Or**

- 08 Other (Specify: \_\_\_\_\_)

**Do not read:**

- 01 Didn't think I needed help
- 77 Don't know / not sure
- 99 Refused

//ask if RI5\_5=08//

**RI5\_5o**

Enter Response: \_\_\_\_\_

//Read to all where RI5\_3=Not Blank//

**RI5close** *SUICIDE CLOSING STATEMENT (READ TO RESPONDENT):*

If you or anyone you know is feeling depressed or considering suicide, they can get help on the phone by calling the **National Crisis line at 1-800-273-TALK (1-800-273-8255)**. You can also speak directly to your doctor or health provider.

## Module 23: Random Child Selection

/if s12q7=1, interviewer please read: "Previously, you indicated there was one child age 17 or younger in your household. I would like to ask you some questions about that child."/ **[Go to Mod23\_1]**

/If s12q7>1 and (s12q7≠88 or s12q7≠99), interviewer please read: "Previously, you indicated there were **[number]** children age 17 or younger in your household. Think about those **[number]** children in order of their birth, from oldest to youngest. The oldest child is the first child and the youngest child is the last." Please include children with the same birth date, including twins, in the order of their birth/

**/CATI Note: RANDOMLY SELECT ONE OF THE CHILDREN. This is the "Xth" child. Please substitute "Xth" child's number in all questions below/**

**Interviewer Read:** I have some additional questions about one specific child. The child I will be referring to is the "Xth" **[CATI Note: Please fill in correct number]** child in your household. All following questions about children will be about the "Xth" **[CATI Note: Please fill in correct number]** child."

//ask if s12q7=1-15//

**Mod23\_1M**

What is the birth month of the "Xth" child?

--	Code month	<b>[Range 01-12]</b>	<b>RCSBIRTH</b> (460-465)
77	Don't know / not sure		
99	Refused		

//ask if s12q7=1-15//

**Mod23\_1Y**

What is the birth year of the "Xth" child?

----	Code year	<b>[Range 1991-2010]</b>	(460-465)
7777	Don't know / not sure		
9999	Refused		

//ask if s12q7=1-15 and ([0≤mthsold<216] or (Mod23\_1Y=7777 or Mod23\_1Y=9999))//

**Mod23\_2**

Is the child a boy or a girl?

1	Boy	<b>RCSGENDR</b> (466)
2	Girl	
9	Refused	

//ask if s12q7=1-15 and ([0≤mthsold<216] or (Mod23\_1Y=7777 or Mod23\_1Y=9999))//

**Mod23\_3**

Is the child Hispanic or Latino?

1	Yes	<b>RCHISLAT</b> (467)
2	No	
7	Don't know / not sure	
9	Refused	

//ask if s12q7=1-15 and ([0≤mthsold<216] or (Mod23\_1Y=7777 or Mod23\_1Y=9999))//

**Mod23\_4**

Which one or more of the following would you say is the race of the child?

[Check all that apply] [MUL=6]

**Please read:**

- 1 White
- 2 Black or African American
- 3 Asian
- 4 Native Hawaiian or other Pacific islander
- 5 American Indian, Alaska Native

**Or**

- 6 Other (Specify: \_\_\_\_\_)

**Do not read:**

- 7 Don't know / not sure
- 9 Refused

//ask if Mod23\_4=6//

**Mod23\_4o**

Enter response: \_\_\_\_\_

//ask if Mod23\_4=multiple responses//

**Mod 23\_5**

Which one of these groups would you say best represents the child's race?

**RCSBRACE** (474)

- 1 White
- 2 Black or African American
- 3 Asian
- 4 Native Hawaiian or other Pacific islander
- 5 American Indian, Alaska Native
- 6 Other
- 7 Don't know / not sure
- 9 Refused

//ask if s12q7=1-15 and ([0<=mthsold<216] or (Mod23\_1Y=7777 or Mod23\_1Y=9999))//

**Mod23\_6**

How are you related to the child?

**RCSRLTN2** (475)

**Please read:**

- 1 Parent (include biologic, step, or adoptive parent)
- 2 Grandparent
- 3 Foster parent or guardian
- 4 Sibling (include biologic, step, and adoptive sibling)
- 5 Other relative
- 6 Not related in any way

**Do not read:**

- 7 Don't know / not sure
- 9 Refused

## **Module 34: Child Influenza-Like Illness (ILI) [\*\*\*October 1, 2010-April 30, 2011]**

For states using random child selection / asthma module – AZ, CT, DC, RI, NH does not do child, do not add these. Use selected child from Random Child Selection.

//ask if s12q7=1-15 and ([0<=mthsold<216] or (Mod23\_1Y=7777 or Mod23\_1Y=9999))//

**Mod34\_1**

Last month (i.e. September [to change each month of survey]), did the child have a fever with cough and / or sore throat?

**FLSYCQ01** (930)

- 1 Yes
- 2 No [Go to next module]
- 7 Don't know [Go to next module]

9 Refused

[Go to next module]

//ask if Mod34\_1=1//

Mod34\_2

Did the child visit a doctor, nurse, or other health professional for this illness?

**FLSYCQ02** (931)

- 1 Yes
- 2 No
- 7 Don't know
- 9 Refused

## State-Added 6: Child Oral Health

/CATI Note: Ask if Module 23 is not blank. Same selected child from Mod23/

//ask if s12q7=1-15//

RI6\_1

**CHLDDENT**

Does this child have any kind of insurance coverage that pays for some or all of his / her routine dental care, including dental insurance, prepaid plans such as HMOs, or government plans such as Medicaid?

- 1 Yes
- 2 No
- 7 Don't know / not sure
- 9 Refused

//ask if RI6\_1=1//

RI6\_2

**CHDNTCOV**

Which plan provides this dental coverage?

**Please read:**

- 01 Delta dental
- 02 Blue cross dental
- 03 Other private plan (Specify: \_\_\_\_\_)
- 04 Rite smiles
- 05 Rite care, fee for service, medical assistance dental
- 06 Medicare (supplement or managed care plan)
- 07 Military, veterans, or TriCare family dental plan
- 08 Other (Specify: \_\_\_\_\_)

**Do not read:**

- 88 No dental coverage
- 77 Don't know / not sure
- 99 Refused

//ask if RI6\_2=03//

RI6\_2o1

Specify private plan: \_\_\_\_\_

//ask if RI6\_2=08//

RI6\_2o2

Specify other plan: \_\_\_\_\_

//ask if mthsold>11 or (Mod23\_1Y=7777 or Mod23\_1Y=9999)//

RI6\_3

**CHDNTVST**

About how long has it been since this child last went to a dentist or dental hygienist?

**Read if necessary:**

- 1 During the past 12 months
- 2 One or two years ago (13-24 months)
- 3 Three to five years ago
- 4 More than five years ago
- 5 Never

**Do not read:**

- 7 Don't know / not sure
- 9 Refused

//ask if mthsold>11 or (Mod23\_1Y=7777 or Mod23\_1Y=9999) and RI6\_3=1//  
**RI6\_4**

**CHDNTCHK**

- Were any of the visits this child made during the past 12 months primarily for a checkup or cleaning?
- 1 Yes
  - 2 No
  - 7 Don't know / not sure
  - 9 Refused

//ask if mthsold>11 or (Mod23\_1Y=7777 or Mod23\_1Y=9999)//  
**RI6\_5**

**CHDNTFIL**

- Has this child had one ore more fillings?
- 1 Yes
  - 2 No
  - 3 Baby – no teeth
  - 7 Don't know / not sure
  - 9 Refused

Dental sealants are special plastic coatings painted on the tops of the back teeth to prevent tooth decay. They are different from fillings, caps, crowns, and fluoride treatments.

//ask if mthsold=72-215 or (Mod23\_1Y=7777 or Mod23\_1Y=9999)//  
**RI6\_6**

**DENTSEAL**

- Has this child had sealants painted on his / her teeth?
- 1 Yes
  - 2 No
  - 7 Don't know / not sure
  - 9 Refused

//ask if mthsold=72-215 or (Mod23\_1Y=7777 or Mod23\_1Y=9999)//  
**RI6\_7**

**CHDNTCAV**

- Does this child have cavities or untreated dental decay?
- 1 Yes
  - 2 No
  - 7 Don't know / not sure
  - 9 Refused

## Module 24: Childhood Asthma Prevalence

The next two questions are about the “Xth” [CATI Note: Please fill in correct number] child.

//ask if s12q7=1-15 and ([0<mthsold<216] or (Mod23\_1Y=7777 or Mod23\_1Y=9999))//

**Mod24\_1**

Has a doctor, nurse or other health professional EVER said that the child has asthma?

**CASTHDX2** (476)

- 1 Yes
- 2 No [Go to next module]
- 7 Don't know / not sure [Go to next module]
- 9 Refused [Go to next module]

//ask if Mod24\_1=1//  
**Mod24\_2**

Does the child still have asthma?

**CASTHNO2** (477)

- 1 Yes
- 2 No
- 7 Don't know / not sure
- 9 Refused

## Module 25: Childhood Immunization

/CATI Note: If Core Q12.7=88 or 99 (no children under age 18 in the household, or refused), go to next module/

//ask if 6<=mthsold<216 or (Mod23\_1Y=7777 or Mod23\_1Y=9999)//

Mod25\_1

Now I will ask you questions about seasonal flu. There are two types of seasonal flu vaccinations. One is a shot and the other is a spray in the nose. During the past 12 months, has [fill: he / she] had a seasonal flu vaccination?

**FLUSHCH2** (478)

- |   |                       |                     |
|---|-----------------------|---------------------|
| 1 | Yes                   |                     |
| 2 | No                    | [Go to next module] |
| 7 | Don't know / not sure | [Go to next module] |
| 9 | Refused               | [Go to next module] |

//ask if Mod25\_1=1//

Mod25\_2

The flu vaccination may have been either the flu shot or the flu spray. The flu spray is the flu vaccination that is sprayed in the nose. During what month and year did [fill: he / she] receive [fill: his / her] most recent seasonal flu vaccination?

**RCVFCVCH4** (479-484)

- |           |                       |
|-----------|-----------------------|
| -- / ---- | Month / year          |
| 77 / 7777 | Don't know / not sure |
| 99 / 9999 | Refused               |

## Asthma Permission to Callback

//ask if Mod24\_1=1 or s9q1=1//

ast1

We would like to call you again within the next 2 weeks to talk in more detail about (your / your child's) experiences with asthma. The information will be used to help develop and improve the asthma programs in Rhode Island. The information you gave us today and any you give us in the future will be kept confidential. If you agree to this, we will keep your phone number on file, separate from the answers collected today. Even if you agree now, you may refuse to participate in the future. Would it be okay if we called you back to ask additional asthma-related questions at a later time?

(497)

- |   |     |
|---|-----|
| 1 | Yes |
| 2 | No  |

## State-Added 7: Language Indicator

/answer for all/

/Interviewer Note: Do not read this to respondent/

lang1

In what language was this interview completed?

- |   |         |
|---|---------|
| 1 | English |
| 2 | Spanish |

## Closing Statement

**Please read:** That was my last question. Everyone's answers will be combined to help us provide information about the health practices of people in Rhode Island. Thank you very much for your time and cooperation.