

1991 Behavioral Risk Factor Questionnaire

FIPS STATE CODE	STRATUM CODE	PSU NUMBER	RECORD NUMBER	DATE OF INTERVIEW			ID
				MM	DD	YY	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
(1-2)	(3)	(4-8)	(9)	(10-15)			(16-17)

HELLO, I'm _____ calling for the _____ residents.
 We're doing a study of the health practices of _____ residents.
 Your number has been chosen randomly by the _____ to be included in the study, and we'd like to ask some questions about things people do which may affect their health.

Is this _____

Area code (18-20) Prefix (21-23) Suffix (24-25)

No *Thank you very much, but I seem to have dialed the wrong number. It's possible that your number may be called at a later time. STOP*

Is this a private residence? **No** *Thank you very much, but we are only interviewing private residences. STOP*

	Date	Time	Time	Time	Time	ID	Comments
<input type="radio"/> Line busy	_____	<input type="radio"/>	_____	<input type="radio"/>	_____	<input type="radio"/>	_____
<input type="radio"/>	_____	<input type="radio"/>	_____	<input type="radio"/>	_____	<input type="radio"/>	_____
<input type="radio"/>	_____	<input type="radio"/>	_____	<input type="radio"/>	_____	<input type="radio"/>	_____
<input type="radio"/> No answer	_____	<input type="radio"/>	_____	<input type="radio"/>	_____	<input type="radio"/>	_____
<input type="radio"/>	_____	<input type="radio"/>	_____	<input type="radio"/>	_____	<input type="radio"/>	_____

Appointments:

	Today's date/time	Spoke with	Ask for	Call-back date & time	ID	Comments
1.	_____	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____	_____

Refusals:

	Date/time	Spoke with	ID	Comments
1st	_____	_____	_____	_____
2nd	_____	_____	_____	_____

Call Disposition Codes	
01- Completed interview.	07- No eligible respondent could be reached during time period.
02- Refused interview.	08- Language barrier prevented completion of interview.
03- Nonworking number.	09- Interview terminated within questionnaire.
04- No answer(multiple times).	10- Line busy(multiple tries).
05- Business phone.	11- Selected respondent unable to respond because of physical or mental impairment.
06- No eligible respondent at this number.	

Edited by: _____

Date: ____/____/____

Final disposition of telephone call: (26-27)

Wind down: (28)



Our study requires that we interview only one person who lives in your household.
 How many members of your household, including yourself, are 18 years of age or older?

--	--

(29-30)

If "1" go to page 3



How many are men and how many are women?

Men	Women
<input style="width: 30px; height: 30px;" type="text"/>	<input style="width: 30px; height: 30px;" type="text"/>
(31)	(32)



Who is the oldest man who presently lives in this household?
 Who is the next oldest man who presently lives in this household? Etc.



Who is the oldest woman who presently lives in this household?
 Who is the next oldest woman who presently lives in this household? Etc.

Suffix: _____

Last digit of phone number

		Last digit of phone number												
		0	1	2	3	4	5	6	7	8	9			
Total adults	1.	_____	1	1	1	1	1	1	1	1	1	1	1	Total adults
	2.	_____	2	1	2	1	2	1	2	1	2	1	1	
	3.	_____	3	1	2	3	1	2	3	1	2	X	X	
	4.	_____	1	2	3	4	1	2	3	4	X	X	X	
	5.	_____	2	3	4	5	1	2	3	4	5	1	1	
	6.	_____	5	6	1	2	3	4	X	X	X	X	X	
	7.	_____	2	3	4	5	6	7	1	X	X	X	X	
	8.	_____	8	1	2	3	4	5	6	7	X	X	X	



The person in your household that I need to speak with is _____.

If "you," go to page 3.

To correct respondent

Hello, I'm _____ calling for the _____.
 I'm a member of a special research team. We're doing a study of _____ residents regarding their health practices and day-to-day living habits. You have been randomly chosen to be included in the study from among the adult members of your household.

The interview will only take a short time, and all the information obtained in this study will be **confidential**. First, I'd like to begin by asking you about using seat belts. . . .

Section A: Seat Belts

1. How often do you use seat belts when you drive or ride in a car?

Would you say: *Please Read* (33)

- a. Always 1
- b. Nearly always 2
- c. Sometimes 3
- d. Seldom 4
- or**
- e. Never 5
- Don't know/Not sure 7
- Never drive or ride in a car 8
- Refused 9

Do not read these responses.

Section B: Hypertension

These next questions are about hypertension or high blood pressure:

- 2. About how long has it been since you last had your blood pressure taken by a doctor, nurse, or other health professional?

Was it: *Please Read* (34)

- a. Within the past six months (0 to 6 months ago) 1
- b. Within the past year (7 to 12 months ago)..... 2
- c. Within the past two years (13 to 24 months ago) 3
- d. Within the past five years (25 to 60 months ago) 4
- or**
- e. More than five years ago (61+ months ago) 5

Do not read
these
responses.

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

- 3. Have you ever been told by a doctor, nurse, or other health professional that you have high blood pressure? (35)

- a. No *Go to Section C (p. 6)* 1
- b. Yes, by a doctor 2
- c. Yes, by a nurse 3
- d. Yes, by other health professional 4
- Don't know/Not sure *Go to Section C (p. 6)* 7
- Refused *Go to Section C (p. 6)* 9

Probe for
doctor, nurse,
or other health
professional.

- 4. Have you been told on more than one occasion that your blood pressure was high, or have you been told this only once? (36)
 - a. More than once 1
 - b. Only once 2
 - Don't know/Not sure 7
 - Refused 9

- 5. Is any medicine currently prescribed for your high blood pressure? (37)
 - a. Yes 1
 - b. No 2
 - Don't know/Not sure 7
 - Refused 9

Section C: Exercise

The next few questions are about exercise, recreation, or physical activities other than your regular job duties.

- 6. During the past month, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise? (38)
 - a. Yes 1
 - b. No *Go to Section D (p. 9)* 2
 - Don't know/Not sure *Go to Section D (p. 9)* 7
 - Refused *Go to Section D (p. 9)* 9

- 7. What type of physical activity or exercise did you spend the most time doing during the past month? (39-40)
 - a. Activity (specify): _____ *See coding list A* _____
 - Refused *Go to Q. 11 (p. 7)* 9 9

➡ **Ask question 8 only if answer to question 7 is running, jogging, walking, or swimming. All others, go to question 9.**

- 8. How far did you usually walk/run/jog/swim? (41-43)
 - a. Miles and tenths — — —
 - Don't know/Not sure 7 7 7
 - Refused 9 9 9
- See coding list B if response is not in miles and tenths.**

- 9. How many times per week or per month did you take part in this activity during the past month? (44-46)
 - a. Times per week 1 — —
 - b. Times per month 2 — —
 - Don't know/Not sure 7 7 7
 - Refused 9 9 9

10. And when you took part in this activity, for how many minutes or hours did you usually keep at it? (47-49)


- a. Hours and minutes ____:____
- Don't know/Not sure 7 7 7
- Refused 9 9 9

11. Was there another physical activity or exercise that you participated in during the last month? (50)

- a. Yes 1
- b. No *Go to Section D (p. 9)* 2
- Don't know/Not sure *Go to Section D (p. 9)* 7
- Refused *Go to Section D (p. 9)* 9

12. What other type of physical activity gave you the next most exercise during the past month? (51-52)

- a. Activity (specify): _____
See coding list A
- Refused *Go to Section D (p. 9)* 9 9

 **Ask question 13 only if answer to question 12 is running, jogging, walking, or swimming. All others go to question 14.**

13. How far did you usually walk/run/jog/swim? (53-55)

See coding list B if response is not in miles and tenths.

- a. Miles and tenths _____.____
- Don't know/Not sure 7 7 7
- Refused 9 9 9

14. How many times per week or per month did you take part in this activity? (56-58)

- a. Times per week..... 1 _ _
- b. Times per month..... 2 _ _
- Don't know/Not sure 7 7 7
- Refused..... 9 9 9

15. And when you took part in this activity, for how many minutes or hours did you usually keep at it? (59-61)

- a. Hours and minutes _ : _ _
- Don't know/Not sure 7 7 7
- Refused..... 9 9 9

Section D: Weight Control

The next few questions are about efforts to lose weight.

- 16. Are you now trying to lose weight? (62)
 - a. Yes 1
 - b. No *Go to Section E (p. 10)* 2
 - Refused *Go to Section E (p. 10)* 9

- 17. Are you eating fewer calories to lose weight? (63)
 - a. Yes 1
 - b. No 2
 - Don't know/Not sure 7
 - Refused 9

- 18. Have you increased your physical activity to lose weight? (64)
 - a. Yes 1
 - b. No 2
 - Don't know/Not sure 7
 - Refused 9

Section E: Tobacco Use

Now I'd like to ask you a few questions about cigarette smoking.

19. Have you smoked at least 100 cigarettes in your entire life? (65)

- | | | |
|-------------------------------------|--|---|
| 100 cigarettes
= 5 packs | a. Yes | 1 |
| | b. No <i>Go to Section F (p. 12)</i> | 2 |
| | Don't know/Not sure <i>Go to Section F (p. 12)</i> | 7 |
| | Refused <i>Go to Section F (p. 12)</i> | 9 |

20. About how old were you when you first started smoking cigarettes fairly regularly? (66-67)

- | | |
|---------------------------|-----|
| Code age in years | — — |
| Don't know/Not sure | 7 7 |
| Refused | 9 9 |

21. Do you smoke cigarettes now? (68)

- | | |
|--|---|
| a. Yes | 1 |
| b. No <i>Go to Q. 24 (p. 11)</i> | 2 |
| Refused <i>Go to Section F (p. 12)</i> | 9 |

22. On the average, about how many cigarettes a day do you now smoke? (69-70)

- | | | |
|-----------------------------------|--------------------------------|-----|
| 1 pack =
20 cigarettes | a. Number of cigarettes | — — |
| | b. Don't smoke regularly | 8 8 |
| | Refused | 9 9 |

23. During the past 12 months, have you quit smoking for 1 day or longer? (71)
- a. Yes *Go to Section F (p. 12)* 1
 - b. No *Go to Section F (p. 12)* 2
 - Don't know/Not sure *Go to Section F (p. 12)*..... 7
 - Refused *Go to Section F (p. 12)* 9

24. About how long has it been since you last smoked cigarettes regularly?

Was it: *Please Read* (72)

- a. Less than 1 month..... 1
- b. One month to less than 3 months 2
- c. Three months to less than 6 months 3
- d. Six months to less than 1 year 4
- e. One year to less than 5 years 5
- or**
- f. Five or more years ago 6
- Don't know/Not sure 7
- Refused 9

**Do not read
these
responses.**

Section F: Alcohol Consumption

These next few questions are about the use of beer, wine, wine coolers, cocktails, or liquor, such as vodka, gin, rum, or whiskey, all kinds of alcoholic beverages that people drink at meals, special occasions, or when just relaxing.

25. Have you had any beer, wine, wine coolers, cocktails, or liquor during the past month, that is, since _____? (73)

- a. Yes 1
- b. No *Go to Section G (p. 14)* 2
- Refused *Go to Section G (p. 14)* 9

26. During the past month, how many days per week or per month did you drink any alcoholic beverages, on the average? (74-76)

- a. Days per week 1 _ _
- b. Days per month..... 2 _ _
- Don't know/Not sure *Go to Q. 28 (p. 13)* 7 7 7
- Refused *Go to Q. 28 (p. 13)*..... 9 9 9

27. A drink is 1 can or bottle of beer, 1 glass of wine, 1 can or bottle of wine cooler, 1 cocktail, or 1 shot of liquor. On the days when you drank, about how many drinks did you drink on the average? (77-78)

- a. Number of drinks _ _
- Don't know/Not sure 7 7
- Refused 9 9

28. Considering all types of alcoholic beverages, that is beer, wine, wine coolers, cocktails, and liquor, as drinks, how many times during the past month did you have 5 or more drinks on an occasion? (79-80)

- a. Number of times — —
- b. None 8 8
- Don't know/Not sure 7 7
- Refused 9 9

29. And during the past month, how many times have you driven when you've had perhaps too much to drink? (81-82)

- a. Number of times — —
- b. None 8 8
- Don't know/Not sure 7 7
- Refused 9 9

Section G: Preventive Health Practices

Some people visit a doctor for a routine checkup, even though they are feeling well and have not been sick.

30. About how long has it been since you last visited a doctor for a routine checkup?

Was it:	<i>Please Read</i>	(83)
	a. Within the past year (0 to 12 months ago).....	1
	b. Within the past two years (13 to 24 months ago)	2
	c. Within the past five years (25 to 60 months ago)	3
	or	
	d. More than five years ago (61+ months ago)	4
Do not read these responses.	Don't know/Not sure	7
	Never	8
	Refused	9

These next questions are about blood cholesterol, which is a fatty substance found in the blood.

31. Have you ever had your blood cholesterol checked? (84)

- a. Yes 1
- b. No ***Go to Q. 36 (p. 16)*** 2
- Don't know/Not sure ***Go to Q. 36 (p. 16)***..... 7
- Refused ***Go to Q. 36 (p. 16)*** 9

32. About how long has it been since you last had your blood cholesterol checked?

Was it: *Please Read* (85)

- a. Within the past year (0 to 12 months ago) 1
- b. Within the past two years (13 to 24 months ago) 2
- c. Within the past five years (25 to 60 months ago) 3
- or**
- d. More than five years ago (61+ months ago) 4

- Do not read these responses.**
- Don't know/Not sure 7
 - Never 8
 - Refused 9

33. Have you ever been told your blood cholesterol level, in numbers? (86)

- a. Yes 1
- b. No *Go to Q. 35 (p. 16)* 2
- Don't know/Not sure *Go to Q. 35 (p. 16)* 7
- Refused *Go to Q. 35 (p. 16)* 9

34. What is your blood cholesterol level? (87-89)

- a. Record the number _____
- Don't know/Not sure 7 7 7
- Refused 9 9 9

35. Have you ever been told by a doctor or other health professional that your blood cholesterol is high? (90)

- a. Yes 1
- b. No 2
- Don't know/Not sure 7
- Refused 9

36. Next, I'd like to ask you about diabetes, sometimes called sugar diabetes. Have you ever been told by a doctor that you have diabetes? (91)

- a. Yes 1
- b. No 2
- Don't know/Not sure 7
- Refused 9

Section H: Health Insurance

These next questions are about health care plans which include health insurance, prepaid plans such as HMOs (health maintenance organizations), or government plans such as Medicare.

- 37. Do you have any kind of health care plan? (92)
 - a. Yes 1
 - b. No *Go to Q. 41 (p. 18)*..... 2
 - Don't know/Not sure *Go to Q. 41 (p. 18)* 7
 - Refused *Go to Q. 41 (p. 18)*..... 9

- 38. For hospital bills, does your health care plan cover all, most, some, or none of your expenses? (93)
 - a. All 1
 - b. Most 2
 - c. Some 3
 - d. None 4
 - Don't know/Not sure 7
 - Refused 9

- 39. For visits to a doctor's office when you are sick, does your health care plan cover all, most, some, or none of your expenses? (94)
 - a. All 1
 - b. Most 2
 - c. Some 3
 - d. None 4
 - Don't know/Not sure 7
 - Refused 9

40. When you are not sick, does your health care plan cover all, most, some, or none of your checkups or other preventive services? (95)

- a. All 1
- b. Most 2
- c. Some 3
- d. None 4
- Don't know/Not sure 7
- Refused 9

41. Was there a time during the last 12 months when you needed to see a doctor, but could not due to the cost? (96)

- a. Yes 1
- b. No 2
- Don't know/Not sure 7
- Refused 9

Section I: Demographics

These next few questions ask for a little more information about yourself.

42. How old were you on your last birthday? (97-98)

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

43. What is your race?

Would you say: *Please Read* (99)

- a. White 1
- b. Black 2
- c. Asian, Pacific Islander 3
- d. Aleutian, Eskimo, or American Indian 4
- or**
- e. Other: (specify)_____ 5

Do not read these responses.

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

44. Are you of Hispanic origin such as Mexican American, Latin American, Puerto Rican, or Cuban? (100)

- a. Yes 1
- b. No 2
- Don't know/Not sure 7
- Refused 9

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

Read only if Necessary (101)

- a. Eighth grade or less 1
- b. Some high school 2
- c. High school graduate or GED certificate 3
- d. Some technical school 4
- e. Technical school graduate 5
- f. Some college 6
- g. College graduate 7
- h. Postgraduate or professional degree 8
- Refused 9

46. Are you currently: *Please Read* (102)

- a. Employed for wages 1
- b. Self-employed 2
- c. Out of work for more than 1 year 3
- d. Out of work for less than 1 year 4
- e. Homemaker 5
- f. Student 6
- or**
- g. Retired 7
- Refused 9

47. And are you: *Please Read* (103)

- a. Married 1
- b. Divorced 2
- c. Widowed. 3
- d. Separated 4
- e. Never been married 5
- or**
- f. A member of an unmarried couple 6
- Refused 9

48. Which of the following categories best describes your annual household income from all sources?

Please Read (104)

- a. Less than \$10,000 1
- b. \$10 to less than \$15,000 2
- c. \$15 to less than \$20,000 3
- d. \$20 to less than \$25,000 4
- e. \$25 to less than \$35,000 5
- f. \$35 to \$50,000 6
- or**
- g. Over \$50,000 7
- Don't know/Not sure 8
- Refused 9

Do not read these responses.

49. About how much do you weigh without shoes? (105-107)

a. Weight — — —
pounds

Don't know/Not sure 7 7 7

Refused 9 9 9

50. About how tall are you without shoes? (108-110)

a. Height — / — —
ft / inches

Don't know/Not sure 7 7 7

Refused 9 9 9

⇒ Interviewer: Ask if necessary.

51. Indicate sex of respondent. (111)

a. Male *Go to Section K (p. 28)* 1

b. Female 2

Section J: Women’s Health

These next questions are about mammograms, which are x-ray tests of the breast to look for cancer.

52. Have you ever had a mammogram? (112)
- a. Yes 1
 - b. No *Go to Q. 56 (p. 24)*..... 2
 - Don’t know/Not sure *Go to Q. 56 (p. 24)* 7
 - Refused *Go to Q. 56 (p. 24)*..... 9

53. About how long has it been since you had your last mammogram?

- Was it: *Please Read* (113)
- a. Within the past year (0 to 12 months ago)..... 1
 - b. Within the past two years (13 to 24 months ago) 2
 - c. Within the past five years (25 to 60 months ago) 3
 - or**
 - d. More than five years ago (61+ months ago) 4
 - Don’t know/Not sure 7
 - Never 8
 - Refused 9
- Do not read these responses.**

54. Was your last mammogram done as part of a routine checkup, because of a breast problem, or because you’ve already had breast cancer? (114)

- a. Routine checkup 1
- b. Breast problem 2
- c. Had breast cancer 3
- Don’t know/Not sure 7
- Refused 9

55. Whose idea was it for you to have this last mammogram—was it your idea, your doctor’s idea, or someone else’s idea? (115)

- | | | |
|--|----------------------------------|---|
| Probe
for the most
influential.
Record only
one response. | a. Respondent’s idea | 1 |
| | b. Doctor’s idea | 2 |
| | c. Someone else’s idea | 3 |
| | Don’t know/Not sure | 7 |
| | Refused | 9 |

The next questions are about breast physical examination, which is when the breast is felt for lumps by a doctor or medical assistant.

56. Have you ever had a breast physical exam by a doctor or a medical assistant? (116)

- | | |
|--|---|
| a. Yes | 1 |
| b. No <i>Go to Q. 59 (p. 25)</i> | 2 |
| Don’t know/Not sure <i>Go to Q. 59 (p. 25)</i> | 7 |
| Refused <i>Go to Q. 59 (p. 25)</i> | 9 |

57. About how long has it been since your last breast physical exam?

Was it: *Please Read* (117)

- | | |
|---|---|
| a. Within the past years (0 to 12 months ago) | 1 |
| b. Within the past two years (13 to 24 months ago) | 2 |
| c. Within the past five years (25 to 60 months ago) | 3 |
| or | |
| d. More than five years ago (61+ months ago) | 4 |
| Don’t know/Not sure | 7 |
| Never | 8 |
| Refused | 9 |

**Do not read
these
responses.**

58. Was your last breast physical exam done as part of a routine checkup, because of a breast problem, or because you've already had breast cancer? (118)
- a. Routine checkup 1
 - b. Breast problem 2
 - c. Had breast cancer 3
 - Don't know/Not sure 7
 - Refused 9

These next questions are about Pap smears, which test for cancer of the cervix or uterus.

59. Have you ever heard of a Pap smear test? (119)
- a. Yes 1
 - b. No *Go to Q. 62 (p. 26)* 2
 - Don't know/Not sure *Go to Q. 62 (p. 26)* 7
 - Refused *Go to Q. 62 (p. 26)* 9
60. Have you ever had a Pap smear? (120)
- a. Yes 1
 - b. No *Go to Q. 62 (p. 26)* 2
 - Don't know/Not sure *Go to Q. 62 (p. 26)* 7
 - Refused *Go to Q. 62 (p. 26)* 9

61. When did you have your last Pap smear?

Was it: *Please Read* (121)

- a. Within the past year (0 to 12 months ago)..... 1
- b. Within the past two years (13 to 24 months ago) 2
- c. Within the past five years (25 to 60 months ago) 3
- or**
- d. More than five years ago (61+ months ago) 4

Do not read these responses.

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

62. Have you had a hysterectomy? (122)

Please Note: A hysterectomy is "an operation to remove the uterus."

- a. Yes *Go to Section K (p. 28)* 1
- b. No 2
- Don't know/Not sure 7
- Refused 9

👉 Interviewer: Ask these two questions only of females between 18 and 45 years of age. *Otherwise, go to Section K (p. 28).*

63. To your knowledge, are you now pregnant? (123)

- a. Yes 1
- b. No *Go to Section K (p. 28)* 2
- Don't know/Not sure *Go to Section K (p. 28)*..... 7
- Refused *Go to Section K (p. 28)*..... 9

64. During what month is your baby due? (124-125)

Code Months	Code Month	— —
Jan 01		
Feb 02	Don't know/Not sure	7 7
Mar 03		
Apr 04		
May 05	Refused	9 9
Jun 06		
Jul 07		
Aug 08		
Sep 09		
Oct 10		
Nov 11		
Dec 12		

Section K: AIDS

These next few questions are to determine your beliefs and opinions about the national health problem of AIDS.

- 65. Have you ever heard the AIDS virus called by the name HIV? (126)
 - a. Yes 1
 - b. No 2
 - Don't know/Not sure 7
 - Refused 9

- 66. To your knowledge, are there drugs available that can lengthen the life of a person infected with the AIDS virus? (127)
 - a. Yes 1
 - b. No 2
 - Don't know/Not sure 7
 - Refused 9

- 67. Do you think a person who is infected with the AIDS virus can look and feel well and healthy? (128)
 - a. Yes 1
 - b. No 2
 - Don't know/Not sure 7
 - Refused 9

68. Do you think a person can get infected with AIDS or the AIDS virus from:

	Yes	No	DK/NS	Ref	
a. Donating blood?	1	2	7	9	(129)
b. Being cared for by a nurse, doctor, dentist, or other health care worker who has the AIDS virus?	1	2	7	9	(130)

69. Do you think a pregnant woman who has the AIDS virus can give it to her baby? (131)

a. Yes	1
b. No	2
Don't know/Not sure	7
Refused	9

70. Do you have a child or children in kindergarten through eighth grade? (132)

a. Yes	1
b. No Go to Q. 73 (p. 30)	2
Don't know/Not sure Go to Q. 73 (p. 30)	7
Refused Go to Q. 73 (p. 30)	9

71. Would you allow your child to be in the same classroom with a child who is infected with the AIDS virus? (133)

a. Yes	1
b. No	2
Don't know/Not sure	7
Refused	9

72. At what grade do you think your child should begin AIDS education in school? (134-135)

Code Grades	a. Code grade	— —
K=55		
1st=01	b. Never	8 8
2nd=02		
3rd=03	Don't know/Not sure	7 7
4th=04		
5th=05	Refused	9 9
6th=06		
7th=07		
8th=08		
9th=09		
10th=10		
11th=11		
12th=12		

73. Would you eat in a restaurant where the cook is infected with the AIDS virus? (136)

a. Yes	1
b. No	2
Don't know/Not sure	7
Refused	9

74. Would you be willing to work with a person who is infected with the AIDS virus? (137)

a. Yes	1
b. No	2
Don't know/Not sure	7
Refused	9

75a. Where could you go to be tested for the AIDS virus infection? (138-139)

Probe for other places if only one response is given.

Facility code — —

➡ If respondent answered "No place," "Don't know," or "Refused," go to question 76.

75b. Where else could you go? (140-141)

Facility code — —

➡ Please do not read list.

- a. Private doctor, HMO 01
- b. Blood bank, plasma center, Red Cross 02
- c. Health department 03
- d. AIDS clinic, AIDS testing site 04
- e. Hospital, emergency room 05
- f. Family planning clinic 06
- g. STD clinic 07
- h. Community health clinic, primary care clinic 08
- i. Company or industry clinic 09
- j. Military induction or examination 10
- k. Other 87
- l. No place 88
- Don't know/Not sure 77
- Refused 99

76. Some people use condoms to keep from getting the AIDS virus through sexual activity. How effective do you think using a condom is in preventing getting the AIDS virus through sexual activity?

Would you say: *Please Read* (142)

- a. Very effective 1
- b. Somewhat effective 2
- or**
- c. Not at all effective 3
- Don't know how effective 4
- Don't know method 5
- Refused 9

Do not read these responses.

77. How many telephone numbers will reach this household, including the number I used today? (143)

➡ Differentiate between telephone numbers and telephone set if necessary. Include all telephone numbers that can reach household.

- a. Total telephone numbers _____

Closing Statement

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

Module 1: County of Residence

- 1. What county do you live in? (144-146)
 - a. County code — — —
 - Don't know/Not sure 7 7 7
 - Refused 9 9 9

Module 2: Smokeless Tobacco Use

These next questions are about certain kinds of smokeless tobacco products.

1. Have you ever used or tried any smokeless tobacco products such as chewing tobacco or snuff? (147)

Probe for chewing tobacco, snuff, or both.	a. Yes, chewing tobacco	1
	b. Yes, snuff	2
	c. Yes, both	3
	d. No, neither <i>Go to Next Module</i>	4
	Don't know/Not sure <i>Go to Next Module</i>	7
	Refused <i>Go to Next Module</i>	9

2. Do you currently use any smokeless tobacco products such as chewing tobacco or snuff? (148)

"Yes" includes occasional use.	a. Yes, chewing tobacco	1
	b. Yes, snuff	2
	c. Yes, both	3
	d. No, neither <i>Go to Next Module</i>	4
	Don't know/Not sure <i>Go to Next Module</i>	7
	Refused <i>Go to Next Module</i>	9

Module 3: Colorectal Cancer Screening

These next questions are about digital rectal exams, that is, when a doctor inserts his finger in the rectum to check for problems.

- 1. Have you ever heard of a digital rectal exam? (149)
 - a. Yes 1
 - b. No **Go to Q4** 2
 - Don't know/Not sure **Go to Q4** 7
 - Refused **Go to Q4** 9

- 2. Have you ever had a digital rectal exam? (150)
 - a. Yes 1
 - b. No **Go to Q4** 2
 - Don't know/Not sure **Go to Q4** 7
 - Refused **Go to Q4** 9

- 3. When did you have your last digital rectal exam?
 - Was it: **Please Read** (151)
 - a. Within the past year (0 to 12 months ago) 1
 - b. Within the past two years (13 to 24 months ago) 2
 - c. Within the past five year (25 to 60 months ago) 3
 - or**
 - d. More than five years ago (61+ months ago) 4
 - Don't know/Not sure 7
 - Refused 9

Do not read these responses.

4. A blood stool test is when the stool is examined to determine whether it contains blood. Have you ever heard of a blood stool test? (152)

- a. Yes 1
- b. No *Go to Q7* 2
- Don't know/Not sure *Go to Q7* 7
- Refused *Go to Q7* 9

5. Have you ever had a blood stool test? (153)

- a. Yes 1
- b. No *Go to Q7* 2
- Don't know/Not sure *Go to Q7* 7
- Refused *Go to Q7* 9

6. When did you have your last blood stool test?

Was it: *Please Read* (154)

- a. Within the past year (0 to 12 months ago)..... 1
- b. Within the past two years (13 to 24 months ago) 2
- c. Within the past five years (25 to 60 months ago) 3
- or**
- d. More than five years ago (61+ months ago) 4

Do not read these responses.

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

- 7. A proctoscopic exam is when a tube is inserted in the rectum to check for problems. Have you ever heard of a proctoscopic exam? (155)
 - a. Yes 1
 - b. No **Go to Next Module** 2
 - Don't know/Not sure **Go to Next Module** 7
 - Refused **Go to Next Module** 9

- 8. Have you ever had a proctoscopic exam? (156)
 - a. Yes 1
 - b. No **Go to Next Module** 2
 - Don't know/Not sure **Go to Next Module** 7
 - Refused **Go to Next Module** 9

- 9. When did you have your last proctoscopic exam?
 - Was it: **Please Read** (157)
 - a. Within the past year (0 to 12 months ago)..... 1
 - b. Within the past two years (13 to 24 months ago) 2
 - c. Within the past five years (25 to 60 months ago) 3
 - or**
 - d. More than five years ago (61+ months ago) 4
 - Don't know/Not sure 7
 - Refused 9

Do not read these responses.

Module 4: Injury Control and Child Safety

- 1. Is there a working smoke detector in your household? (158)
 - a. Yes 1
 - b. No 2
 - Don't know/Not sure 7
 - Refused 9

- 2. In the past 12 months have you (or has anyone in your household) used a thermometer to test the temperature of the hot water? (159)
 - a. Yes 1
 - b. No 2
 - Don't know/Not sure 7
 - Refused 9

- 3. What is the age of the youngest child in your household? (160-161)
 - a. Age in years *If over 10, Go to next module* __ __
 - b. Age is less than one year 8 9
 - c. No children in household *Go to Next Module* 8 8
 - Don't know/Not sure *Go to Next Module* 7 7
 - Refused *Go to Next Module* 9 9

- 4. Do you have the telephone number for a poison control center in your area? (162)
 - a. Yes 1
 - b. No 2
 - Don't know/Not sure 7
 - Refused 9

5. There is a medication called Ipecac (ip' i kak) Syrup, which is sometimes taken to cause vomiting after something poisonous is swallowed. Do you now have any Ipecac Syrup in your household? (163)

- a. Yes 1
- b. No 2
- Don't know/Not sure 7
- Refused 9

6. When riding in a car, how often is the youngest child buckled in a car safety seat or seat belt?

Would you say: *Please Read* (164)

- a. All of the time 1
- b. Most of the time 2
- c. Sometimes 3
- d. Rarely 4
- or**
- e. Never 5
- Don't know/Not sure 7
- Refused 9

Do not read these responses.

Module 5: Radon Testing

- 1. Have you heard of radon, which is a radioactive gas that occurs in nature? (165)
 - a. Yes 1
 - b. No **Go to Next Module** 2
 - Don't know/Not sure 7
 - Refused 9

- 2. Has your household air been tested for the presence of radon gas? (166)
 - a. Yes 1
 - b. No 2
 - Don't know/Not sure 7
 - Refused 9

- 3. Do you know how to test your home for the presence of radon? (167)
 - a. Yes 1
 - b. No 2
 - Don't know/Not sure 7
 - Refused 9

- 4. Do you, or does anyone in your home plan to have your household air tested for radon within the next year? (168)
 - a. Yes 1
 - b. No 2
 - Don't know/Not sure 7
 - Refused 9

5. Please indicate your agreement or disagreement with the following statement: **Prolonged exposure to radon gas can be harmful to your health.** Do you agree or disagree? (169)

- a. Agree 1
- b. Disagree 2
- Don't know/Not sure 7
- Refused 9

6. Which, if any, of the following conditions do you think can be caused by prolonged radon exposure?

	<i>Please Read</i>	Yes	No	DK/NS	Ref	
a. Headache	1	2	7	9		(170)
b. Asthma	1	2	7	9		(171)
c. Arthritis.....	1	2	7	9		(172)
d. Lung cancer	1	2	7	9		(173)
e. Other cancers besides lung	1	2	7	9		(174)

7. Which of the following best describes your residence?

Please Read (175)

- a. Single family home, duplex, or townhouse 1
- b. Apt. or condo at basement level,
or on 1st or 2nd floor 2
- c. Apt. or condo above 2nd floor 3
- d. Trailer or mobile home 4
- or**
- e. Other 5
- Don't know/Not sure 7
- Refused 9

Do not read
these
responses.

Module 6: Dietary Fat

These next questions are about the foods you usually eat or drink. Please tell me how often you eat or drink each one; for example, twice a week, three times a month, and so forth. Remember, I am only interested in the foods you eat. Include all foods you eat, both at home and away from home.

1. How often do you eat hot dogs or lunch meats such as ham or other cold cuts? (176-178)

- a. Per day 1 _ _
- b. Per week 2 _ _
- c. Per month 3 _ _
- d. Per year 4 _ _
- e. Never 5 5 5
- Don't know/Not sure 7 7 7
- Refused 9 9 9

2. How often do you eat bacon or sausage? (179-181)

- a. Per day 1 _ _
- b. Per week 2 _ _
- c. Per month 3 _ _
- d. Per year 4 _ _
- e. Never 5 5 5
- Don't know/Not sure 7 7 7
- Refused 9 9 9

3. How often do you eat pork other than ham, bacon, or sausage? (182-184)
- a. Per day 1 _ _
 - b. Per week 2 _ _
 - c. Per month 3 _ _
 - d. Per year 4 _ _
 - e. Never 5 5 5
 - Don't know/Not sure 7 7 7
 - Refused 9 9 9
4. How often do you eat hamburgers, cheeseburgers or meat loaf? (185-187)
- a. Per day 1 _ _
 - b. Per week 2 _ _
 - c. Per month 3 _ _
 - d. Per year 4 _ _
 - e. Never 5 5 5
 - Don't know/Not sure 7 7 7
 - Refused 9 9 9
5. How often do you eat beef other than hamburger, cheeseburger, or meat loaf? (188-190)
- a. Per day 1 _ _
 - b. Per week 2 _ _
 - c. Per month 3 _ _
 - d. Per year 4 _ _
 - e. Never 5 5 5
 - Don't know/Not sure 7 7 7
 - Refused 9 9 9

6. How often do you eat fried chicken? (191-193)
- a. Per day 1 _ _
 - b. Per week 2 _ _
 - c. Per month 3 _ _
 - d. Per year 4 _ _
 - e. Never 5 5 5
 - Don't know/Not sure 7 7 7
 - Refused 9 9 9

7. How often do you eat french fries or fried potatoes? (194-196)
- a. Per day 1 _ _
 - b. Per week 2 _ _
 - c. Per month 3 _ _
 - d. Per year 4 _ _
 - e. Never 5 5 5
 - Don't know/Not sure 7 7 7
 - Refused 9 9 9

8. How often do you eat cheese or cheese spreads, not including cottage cheese? (197-199)

- Interviewers:**
Include
cheese used
as an
ingredient,
e.g., on
pizza.
- a. Per day 1 _ _
 - b. Per week 2 _ _
 - c. Per month 3 _ _
 - d. Per year 4 _ _
 - e. Never 5 5 5
 - Don't know/Not sure 7 7 7
 - Refused 9 9 9

9. How often do you eat doughnuts, cookies, cake, pastry, or pies? (200-202)
- a. Per day 1 __ __
 - b. Per week 2 __ __
 - c. Per month 3 __ __
 - d. Per year 4 __ __
 - e. Never 5 5 5
 - Don't know/Not sure 7 7 7
 - Refused 9 9 9

10. How often do you usually eat snacks, such as chips or popcorn? (203-205)
- a. Per day 1 __ __
 - b. Per week 2 __ __
 - c. Per month 3 __ __
 - d. Per year 4 __ __
 - e. Never 5 5 5
 - Don't know/Not sure 7 7 7
 - Refused 9 9 9

11. How often do you usually add butter or margarine to bread, rolls, or vegetables? (206-208)
- a. Per day 1 __ __
 - b. Per week 2 __ __
 - c. Per month 3 __ __
 - d. Per year 4 __ __
 - e. Never 5 5 5
 - Don't know/Not sure 7 7 7
 - Refused 9 9 9

12. How many eggs do you usually eat? (209-211)

- a. Per day 1 _ _
- b. Per week 2 _ _
- c. Per month 3 _ _
- d. Per year 4 _ _
- e. None 5 5 5
- Don't know/Not sure 7 7 7
- Refused 9 9 9

13. How many glasses (8 oz.) of whole milk do you usually drink?
Remember to include drinks made with whole milk or milk on cereal.
Do not include low-fat milk, such as skim milk or 2% milk. (212-214)

- a. Per day 1 _ _
- b. Per week 2 _ _
- c. Per month 3 _ _
- d. Per year 4 _ _
- e. None 5 5 5
- Don't know/Not sure 7 7 7
- Refused 9 9 9

Module 7: Fruits and Vegetables

These next questions are about the foods you usually eat or drink. Please tell me how often you eat or drink each one, for example, twice a week, three times a month, and so forth. Remember, I am only interested in the foods you eat. Include all foods you eat, both at home and away from home.

1. How often do you drink fruit juices such as orange, grapefruit, or tomato? (215-217)

- a. Per day 1 _ _
- b. Per week 2 _ _
- c. Per month 3 _ _
- d. Per year 4 _ _
- e. Never 5 5 5
- Don't know/Not sure 7 7 7
- Refused 9 9 9

2. Not counting juice, how often do you eat fruit? (218-220)

- a. Per day 1 _ _
- b. Per week 2 _ _
- c. Per month 3 _ _
- d. Per year 4 _ _
- e. Never 5 5 5
- Don't know/Not sure 7 7 7
- Refused 9 9 9

3. How often do you eat green salad? (221-223)
- a. Per day 1 _ _
 - b. Per week 2 _ _
 - c. Per month 3 _ _
 - d. Per year 4 _ _
 - e. Never 5 5 5
 - Don't know/Not sure 7 7 7
 - Refused 9 9 9
4. How often do you eat potatoes (not including french fries, fried potatoes, or potato chips)? (224-226)
- a. Per day 1 _ _
 - b. Per week 2 _ _
 - c. Per month 3 _ _
 - d. Per year 4 _ _
 - e. Never 5 5 5
 - Don't know/Not sure 7 7 7
 - Refused 9 9 9
5. How often do you eat carrots? (227-229)
- a. Per day 1 _ _
 - b. Per week 2 _ _
 - c. Per month 3 _ _
 - d. Per year 4 _ _
 - e. Never 5 5 5
 - Don't know/Not sure 7 7 7
 - Refused 9 9 9

6. Not counting carrots, potatoes, or salad, how many **servings** of vegetables do you usually eat? (For example, a serving of vegetables at both lunch and dinner would be two servings.) (230-232)

- a. Per day 1 _ _
- b. Per week 2 _ _
- c. Per month 3 _ _
- d. Per year 4 _ _
- e. Never 5 5 5
- Don't know/Not sure 7 7 7
- Refused 9 9 9

Activity Codes and Intensity Factors for Common Leisure Activities

Coding List A

Code description

01. Aerobics class
02. Backpacking
03. Badminton
04. Basketball
05. Bicycling for pleasure
06. Boating (canoeing, rowing, sailing for pleasure or camping)
07. Bowling
08. Boxing
09. Calisthenics
10. Canoeing/rowing—in competition
11. Carpentry
12. Dancing-aerobics/ballet
13. Fishing from river bank or boat
14. Gardening (spading, weeding, digging, filling)
15. Golf
16. Handball
17. Health club exercise
18. Hiking—cross country
19. Home exercise
20. Horseback riding
21. Hunting large game—deer, elk
22. Jogging
23. Judo/karate
24. Mountain climbing
25. Mowing lawn
26. Paddleball
27. Painting/papering house

Code description

28. Racketball
29. Raking lawn
30. Running
31. Rope skipping
32. Scuba diving
33. Skating—ice or roller
34. Sledding, tobogganing
35. Snorkeling
36. Snowshoeing
37. Snow shoveling by hand
38. Snow blowing
39. Snow skiing
40. Soccer
41. Softball
42. Squash
43. Stair climbing
44. Stream fishing in waders
45. Surfing
46. Swimming laps
47. Table tennis
48. Tennis
49. Touch football
50. Volleyball
51. Walking
52. Waterskiing
53. Weight lifting
54. Other_____
55. Bicycling machine exercise
56. Rowing machine exercise

Coding List B

Lap Swimming

<i>Size pool</i>	<i>Laps</i>
50 ft. pool	10 laps = .1 mile
100 ft. pool	5 laps = .1 mile
50 meter pool	3 laps = .1 mile

Running/Jogging/Walking

1/2 mile = .5 mile
1/4 mile = .3 mile
1/8 mile = .1 mile
1 block = .1 mile