

**2016 Buffalo County
Behavioral Risk Factor Surveillance
System (BRFSS) Report**
Prepared: April 2017

Prepared for:



The contents of this report conform to our highest standards for data collection and reporting. If you should have any questions or concerns regarding the information reported within, please contact us.

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Contents

Methodology.....	3
Sampling Design.....	3
Survey Instrument.....	3
Data Collection Process.....	3
Response Rate.....	4
Data Cleaning and Weighting.....	4
Questions.....	5
Findings.....	6
Demographics.....	6
Health Status.....	8
Health-Related Quality of Life.....	9
Mental Illness and Stigma.....	15
Health Care Access.....	18
Prescription Pain Medication.....	22
Overweight and Obesity.....	24
Pre-Diabetes.....	26
Sugar Sweetened Beverages and Menu Labeling.....	28
Fruits and Vegetables.....	31
Seat Belt Use.....	37
Distracted Driving.....	38
Alcohol Use.....	40
Drinking and Driving.....	44
Tobacco Use.....	45
Social Context.....	47
Tables of 2016 Buffalo County BRFSS Results.....	49
Appendices.....	70
Appendix A: Survey Instrument.....	70
Landline.....	70
Cell Phone.....	110
Appendix B: BCCHP BRFSS Interviewer Study Guide.....	149
Appendix C: BRFSS Disposition Code and Call Back Rules.....	160
Appendix D: AAPOR Transparency Initiative Immediate Disclosure Items.....	171

Methodology

The Buffalo County Behavioral Risk Factor Surveillance System (BRFSS) Survey was conducted by the Bureau of Sociological Research (BOSR) at the University of Nebraska-Lincoln and sponsored and funded by Buffalo County Community Health Partners (BCCHP).

Sampling Design

The sampling frame for this study consisted of a randomly selected sample of both landline and cell phone numbers for Buffalo County. For the landline sample, respondents were randomly selected among the adults in the household, while the cell phone sample had no such selection process. The sample was generated by Survey Sampling International, LLC (SSI) and provided to BOSR. Sample was continually added throughout the year to maximize the number of completed interviews seeking a quota of 1,000 interviews. By the end of the study, BOSR used 6,441 landline numbers and 7,151 cell phone numbers. The sample frame utilized does not cover those in Buffalo County who do not have either a landline or cell phone nor those residing in Buffalo County who have a cell phone with a number that is from a region outside of the county.

Survey Instrument

The survey instrument was developed by BCCHP in coordination with BOSR. Questions included the Center for Disease Control and Prevention's (CDC) BRFSS core questions and eleven optional modules. The questionnaire contains nine additional sections at the end, which was developed by BCCHP. Both the landline and cell phone samples received the same set of questions. The questionnaire was solely in English. BOSR programmed and administered the questionnaire using Voxco's CATI software. About a month after initial data collection began in an effort to fix a high refusal rate, the decision was made to shorten the survey. Three CDC modules were dropped as well as one whole and portions of two others of the BCCPH sections. A copy of the final questionnaire can be found in Appendix A.

Data Collection Process

Data collection for both the landline and cell phone samples began on February 8, 2016, and ended on January 31, 2017.

Call attempts made to the cases assigned to the telephone mode followed the BRFSS attempt protocols (see Appendix C). For the landline sample when a new record was assigned to a telephone interviewer to call, interviewers asked for the number of adult males and females who live in the household. The computer would then randomly select one of those adults as the designated respondent. If the designated respondent was not present in the household at that moment, a good time to find him/her at home was determined and a return call was made. For the cell phone sample, the owner of the phone is considered the designated respondent.

In order to increase the response rate, multiple calls were made to numbers for which there was no answer. Additional calls were made at different times of the day and different days of the week, including the weekend, to increase the potential that a call would reach the respondent during an available time.

All of the interviewing was completed by professional interviewers. The interviewers were trained to use the Computer Assisted Telephone Interviewing (CATI) techniques and spent several hours of practice time becoming accustomed to using CATI before being allowed to work on research projects.

Many of the interviewers had previous experience in telephone interviewing; several were highly skilled with many years of interviewing experience. Permanent staff of BOSR supervised interviewers. All interviewing was done in the BOSR interviewing lab. BOSR supervisory staff was available during calling hours to supervise the interviewing and to answer questions.

Training for the interviewers involved two steps. First, all interviewers were given a detailed instruction manual, which they were required to read through carefully and to have with them each time they interviewed. Second, all interviewers were required to complete practice interviews. These practice interviews were carefully examined by the BOSR staff for errors, inadequate responses on open-ended questions, and the like. Appendix B presents the supplementary interviewer guide created for the BCCHP BRFSS Survey.

The proximity of interviewer workstations, as well as the use of telephone monitoring equipment, provided opportunities for careful supervision as the data were collected. The study director and others on the BOSR staff were always accessible so that questions from the interviewers could be handled immediately and, if necessary, the respondent could be called back. Further, supervisors regularly monitored interviews while they were being conducted. This helped to identify interviewing problems and difficulties. Interviews were very carefully reviewed by the BOSR staff. This was done on a daily basis so that errors could immediately be brought to the attention of the interviewers and corrected.

The interviewing staff was paid by the hour, not by the number of interviews completed. This method of payment was used to ensure the high quality of the data collected by our staff. The progress and productivity level of each interviewer, however, was monitored to detect problems in the method of interviewing. Various rates were calculated to reflect the completion rate per hour, the total number of attempts per hour, a refusal rate, etc., to monitor the progress of each interviewer compared to the entire group of interviewers. Individual attention was given if an interviewer's rates strayed from the overall mean.

Response Rate

Of the 6,441 landline cases sampled, 359 (5.6%) interviews were completed, 18.3% (n=1,176) were refusals, 15.3% (n=985) were deemed ineligible due to the fact that they were households with no eligible respondent or non-residences, and 23.2% (n=1,497) were fax lines or non-working/disconnected numbers. Using AAPOR's standard definition for Response Rate 2, the response rate for the landline sample is 9.1%.

Of the 7,151 cell phone cases sampled, 424 (5.9%) interviews were completed; 22.7% (n=1,620) were refusals; 8.0% (n=571) were deemed ineligible due to the fact that they were households with no eligible respondent, non-residences, or belonging to an individual who no longer lives in Buffalo County; and 23.2% (n=1,659) were fax lines or non-working/disconnected numbers. Using AAPOR's standard definition for Response Rate 2, the response rate for the landline sample is 8.6%.

Data Cleaning and Weighting

The data are recorded and stored on a secure server located within the Sociology Department at UNL. The Statistical Package for the Social Sciences (SPSS) software package was used to process and document the dataset. The data collected from each of the two samples were cleaned separately and then combined into one dataset. This process involved re-checking the data for possible data-entry errors. Interviewers were instructed to include open-ended text when respondents provided them with

information pertinent to the study that could not be captured within the response options associated with the question at hand. Those interviewer notes were added into the dataset.

The 2016 Buffalo County BRFSS was weighted to best reflect the local demographics. Data were post-stratified by age, gender, and education level.

Questions

Any questions regarding this report or the data collected can be directed to the Bureau of Sociological Research at the University of Nebraska-Lincoln by calling (402) 472-3672 or by sending an e-mail to bosr@unl.edu.

Findings

Demographics

In 2010, a total of 1,040 individuals were surveyed via telephone. In 2012, a more robust sample of 1,706 individual was obtained. In 2016, a total of 783 individuals were surveyed via phone. Results in the main body of this report are presented by the demographic variables contained in Table 1, with the exception of race/ethnicity, for which the minority sample was too small to obtain reliable data. (Table 1, below)

Total sample size (2010): 1,040

Total sample size (2012): 1,706

Total sample size (2016): 783

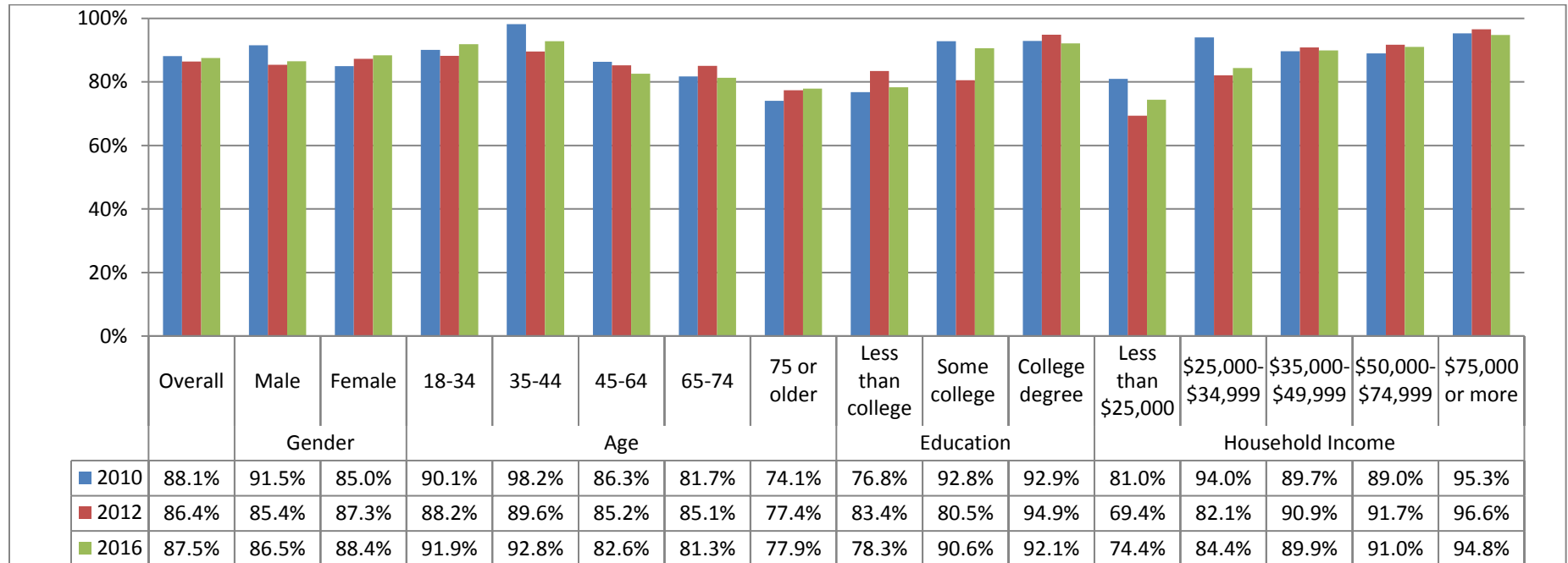
Table 1 Demographics: 2010, 2012, and 2016 Behavioral Risk Factors Survey – Buffalo County									
	2010			2012			2016		
	# Sampled	% of Sample	Weighted % of Sample	# Sampled	% of Sample	Weighted % of Sample	# Sampled	% of Sample	Weighted % of Sample
Gender									
Male	428	41.2%	48.7%	665	39.0%	48.7%	318	40.6%	49.2%
Female	612	58.8%	51.3%	1,041	61.0%	51.3%	465	59.4%	50.8%
Age									
18-34	79	7.6%	38.9%	183	10.7%	39.1%	112	14.6%	32.2%
35-44	131	12.6%	14.4%	197	11.5%	14.4%	80	10.4%	21.8%
45-64	408	39.2%	30.8%	666	39.0%	30.6%	300	39.0%	24.0%
65-74	205	19.7%	7.9%	324	19.0%	7.9%	151	19.6%	11.8%
75 or older	217	20.9%	8.1%	336	19.7%	8.1%	126	16.4%	10.2%
Education									
Less than college	441	42.4%	29.4%	657	38.5%	39.3%	208	26.6%	30.0%
Some college*	262	25.2%	31.7%	489	28.7%	28.2%	240	30.7%	32.7%
College degree	337	32.4%	38.9%	560	32.8%	32.5%	334	42.7%	37.3%
Household Income									
Less than \$25,000	243	25.8%	21.8%	407	27.0%	28.3%	115	17.5%	18.0%
\$25,000-\$34,999	130	13.8%	17.6%	199	13.2%	10.4%	84	12.8%	11.8%
\$35,000-\$49,999	165	17.5%	13.3%	271	18.0%	20.0%	96	14.6%	15.2%
\$50,000-\$74,999	192	20.4%	16.7%	275	18.3%	16.4%	121	18.4%	17.0%
\$75,000 or more	211	22.4%	30.6%	353	23.5%	24.9%	242	36.8%	38.0%
Race/Ethnicity									
White	979	94.4%	91.8%	1,532	95.4%	93.7%	745	96.1%	94.0%
Other	58	5.6%	8.2%	74	3.3%	6.3%	30	3.9%	6.0%

*Includes Associates Degree

Health Status

The vast majority (87.5%) of 2016 Buffalo County respondents reported their health as being good, very good, or excellent. In 2010, 2012 and 2016, the 35-44 year old age group reported the best health on average. Those with a college degree reported better health than those without a college degree. Those who reported a household income of less than \$25,000 annually reported their health as notably worse than all other income groups (Figure 1, Table 2).

Figure 1. General Health Reported as Good to Excellent*



*Based on the scale: excellent, very good, good, fair, poor.

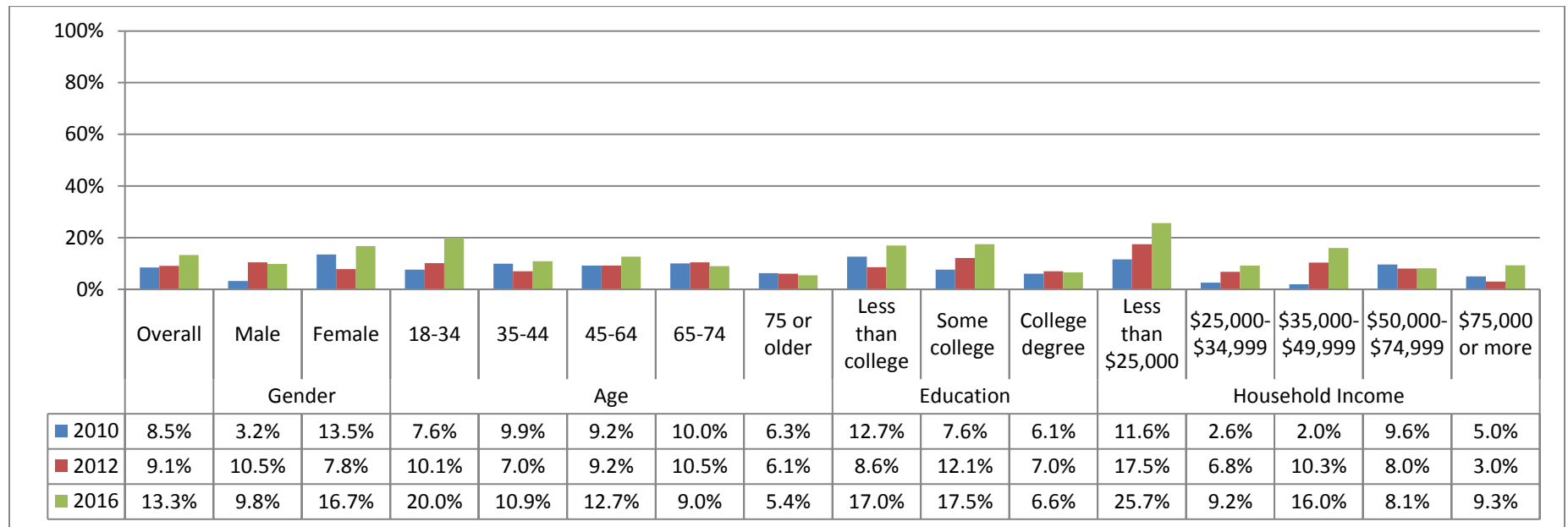
Table 2	General Health Reported as Good to Excellent*		
	Buffalo County (2010)	Buffalo County (2012)	Buffalo County (2016)
	88.1%	86.4%	87.5%

*Based on the scale: excellent, very good, good, fair, poor.

Health-Related Quality of Life

More than one-in-eight (13.3%) of 2016 Buffalo County survey respondents reported having 10 or more days of poor mental health (stress, depression, and problems with emotions) in the past 30 days. In 2016, a substantially higher percentage of females reported 10 or more days of poor mental health compared to males. The percentage reporting 10 or more days of poor mental health has increased drastically the young (18-34 year olds) and low household income (less than \$25,000) from 2010 to 2016 (Figure 2, Table 3).

Figure 2. Mental Health* Was Not Good for 10 or More Days in the Past 30 Days



*"Includes stress, depression, and problems with emotions."

Table 3	Number of Days in the past 30 Days in Which Mental Health* Was Not Good		
	0 Days	1-9 Days	10 or More Days
2010	62.3%	29.2%	8.5%
2012	69.6%	21.3%	9.1%
2016	62.9%	23.8%	13.3%

*"Includes stress, depression, and problems with emotions."

Overall, 11.1% of 2016 Buffalo County respondents reported that poor mental or physical health kept them from doing their usual activities for 10 or more days in the past 30 days. During 2016 survey administration compared to younger respondents, 45-64 year olds and 65-74 year olds reported an increase in their mental or physical health kept them from doing their usual activities as compared to 2010 and 2012 survey administration (Figure 3, Table 4).

Figure 3. Poor Mental or Physical Health Kept From Doing Usual Activities for 10 or More Days in the Past 30 Days

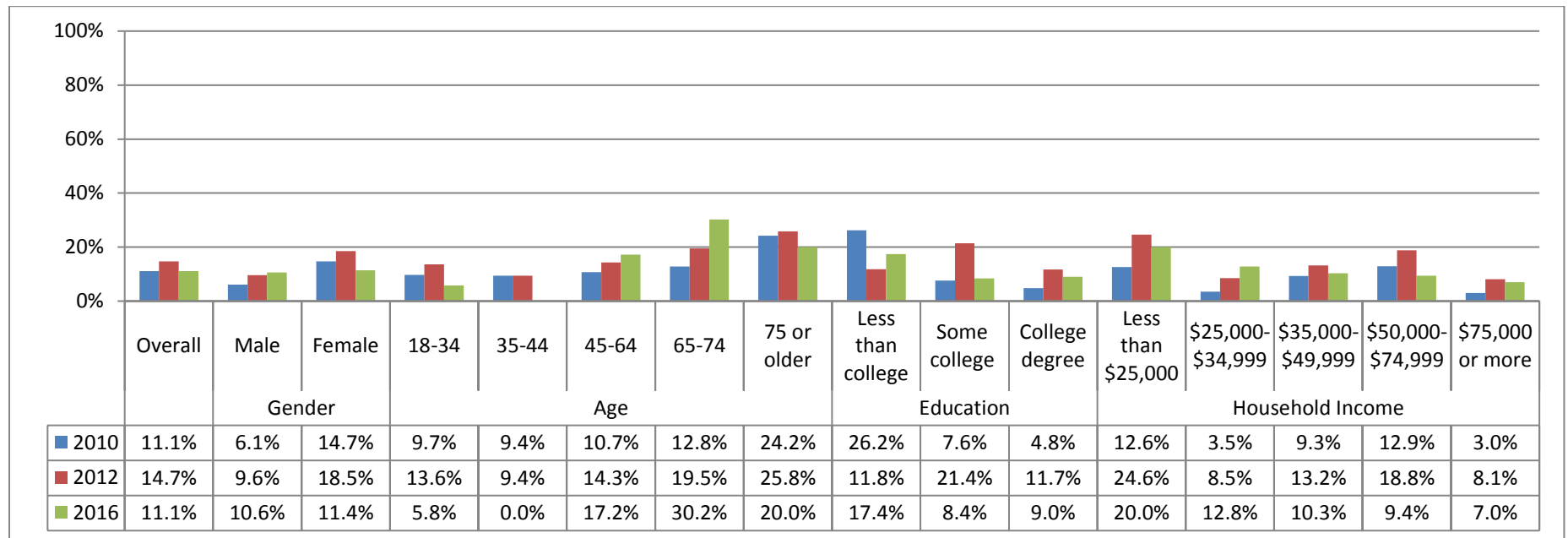


Table 4	Number of Days in Past 30 Days in Which Poor Mental or Physical Health Kept from Doing Usual Activities		
	0 Days	1-9 Days	10 or More Days
2010	58.1%	30.9%	11.1%
2012	63.9%	21.4%	14.7%
2016	65.4%	23.5%	11.1%

In 2016, 9.3% respondents reported that pain made it hard for them to do their usual activities for 10 or more days in the past 30 days. Nearly one-in-five (20.7%) of those with a household income of less than \$25,000 reported that pain made it hard for them to do their usual activities in 2016. Those with a college degree and/or with a household income of \$75,000 or more reported with the lowest frequency that pain kept them from their usual activities compared to all other demographic groups (Figure 4, Table 5).

Figure 4. Pain Made it Hard to Do Usual Activities for 10 or More Days in the Past 30 Days

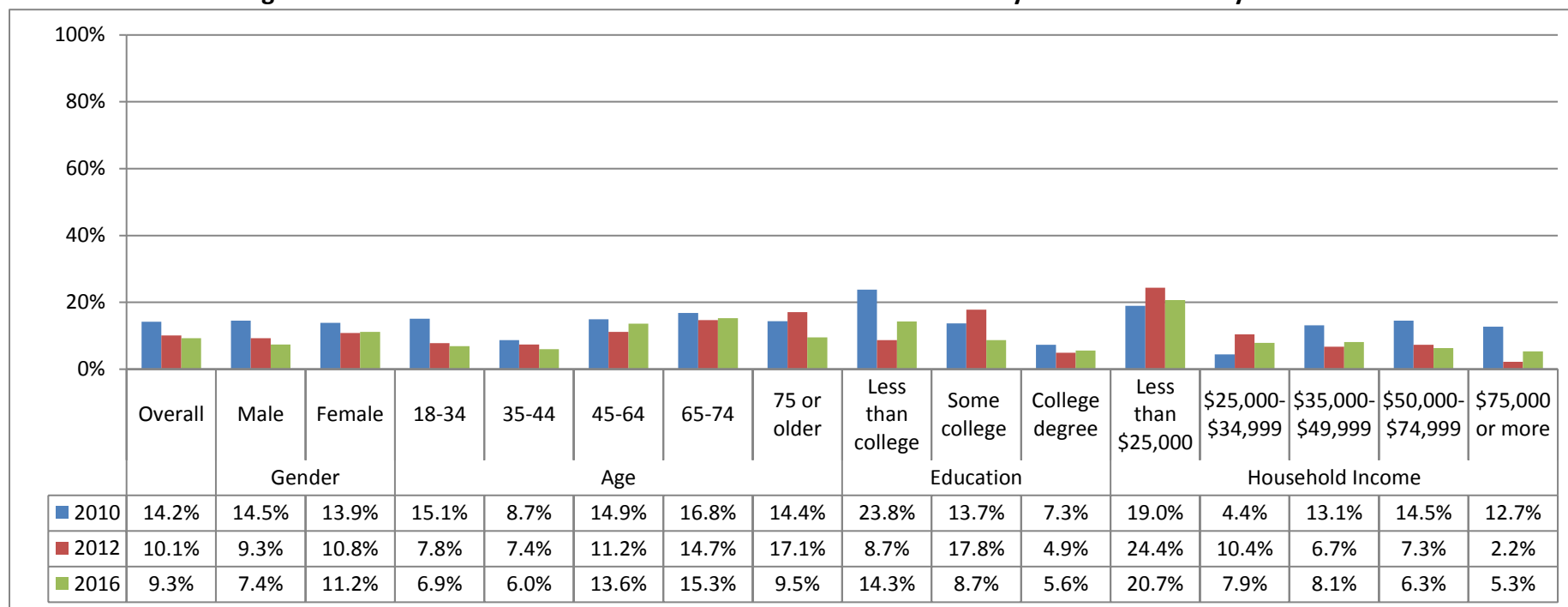


Table 5	Number of Days in Past 30 Days in Which Pain Made it Hard to Do Usual Activities		
	0 Days	1-9 Days	10 or More Days
2010	69.7%	16.1%	14.2%
2012	76.1%	13.8%	10.1%
2016	78.7%	12.1%	9.3%

In 2016, 13.0% respondents from Buffalo County reported feeling sad, blue, or depressed for 10 or more days in the past 30 days. Those with a household income of less than \$25,000 reported the highest rates, with 21.2% reporting 10 or more days of feeling sad, blue, or depressed in the past 30 days. Again, those with a college degree and/or with a household income of \$75,000 or more reported the lowest rates (Figure 5, Table 6).

Figure 5. Felt Sad, Blue or Depressed for 10 or More Days in the Past 30 Days

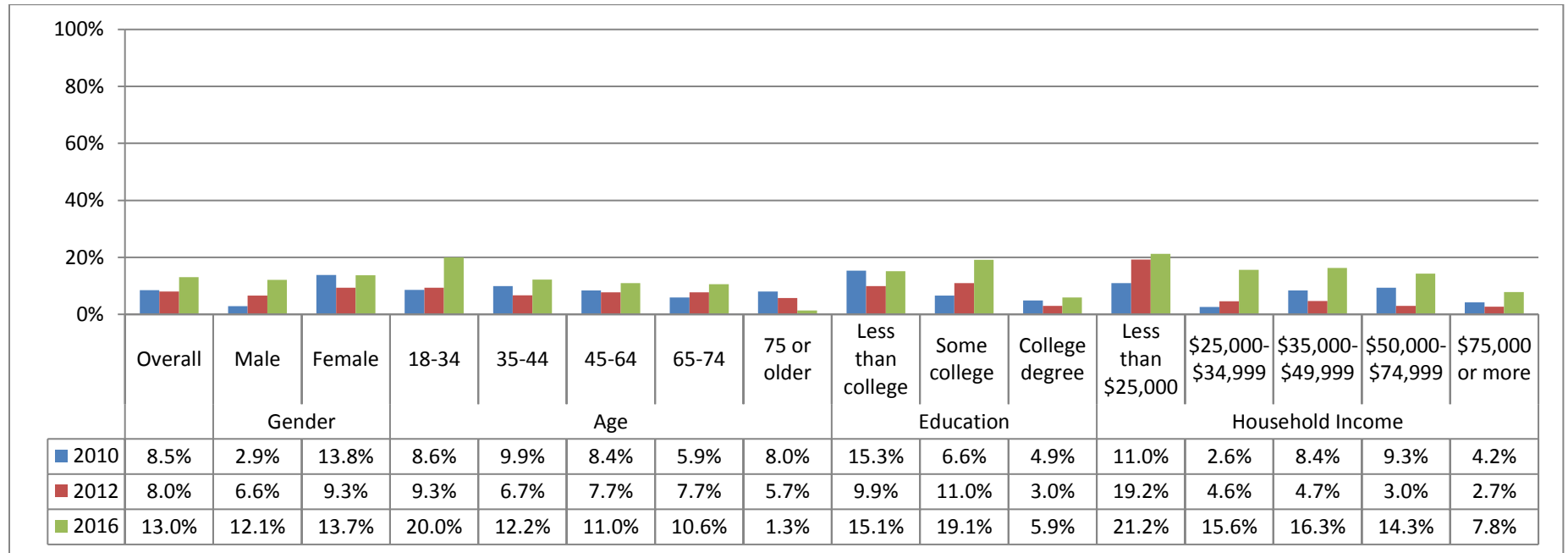


Table 6	Number of Days in Past 30 Days in Which Felt Sad, Blue, or Depressed		
	0 Days	1-9 Days	10 or More Days
2010	57.7%	33.8%	8.5%
2012	71.1%	20.3%	8.0%
2016	63.0%	24.1%	13.0%

Feelings of worry, tension, and anxiety were reported by 20.8% of the 2016 sample, higher than in 2012 but similar to 2010. During 2016, 46.1% of all respondents reported no days in the past 30 days in which they felt worried, tense, or anxious. Feelings of worry, tension, and anxiety were reported by younger respondents at higher rates, as compared to older respondents (Figure 6, Table 7).

Figure 6. Felt Worried, Tense, or Anxious for 10 or More Days in the Past 30 Days

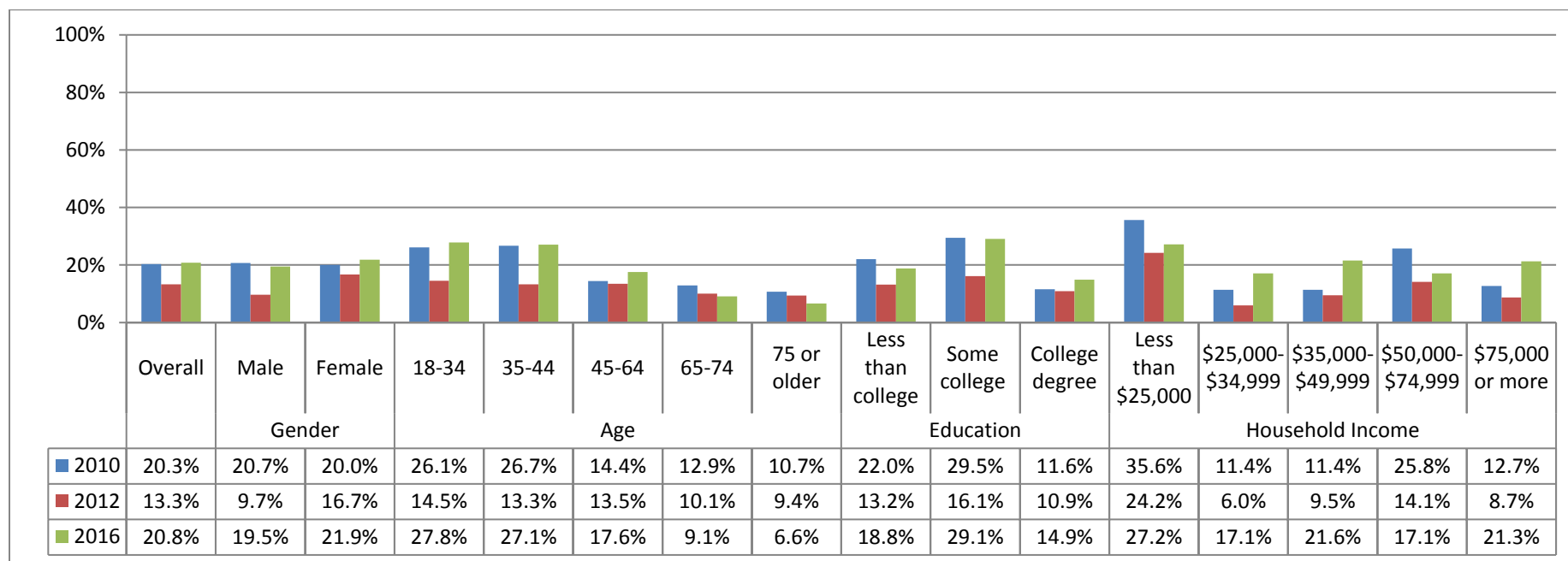


Table 7	Number of Days in Past 30 Days in Which Felt Worried, Tense, or Anxious		
	0 Days	1-9 Days	10 or More Days
2010	34.1%	45.6%	20.3%
2012	53.9%	32.8%	13.3%
2016	46.1%	33.1%	20.8%

Approximately two-thirds (64.4%) of respondents reported feeling very healthy and full of energy for 20 or more days in the past 30 days in 2016. In 2016 older people reported lower rates of feeling healthy and full of energy compared to data from 2010 and 2012. Those with a household income of \$75,000 or more in 2016 reported higher rates of feeling very healthy and full of energy compared to those with lower household incomes (Figure 7, Table 8).

Figure 7. Felt Very Healthy and Full of Energy for 20 or More Days in the Past 30 Days

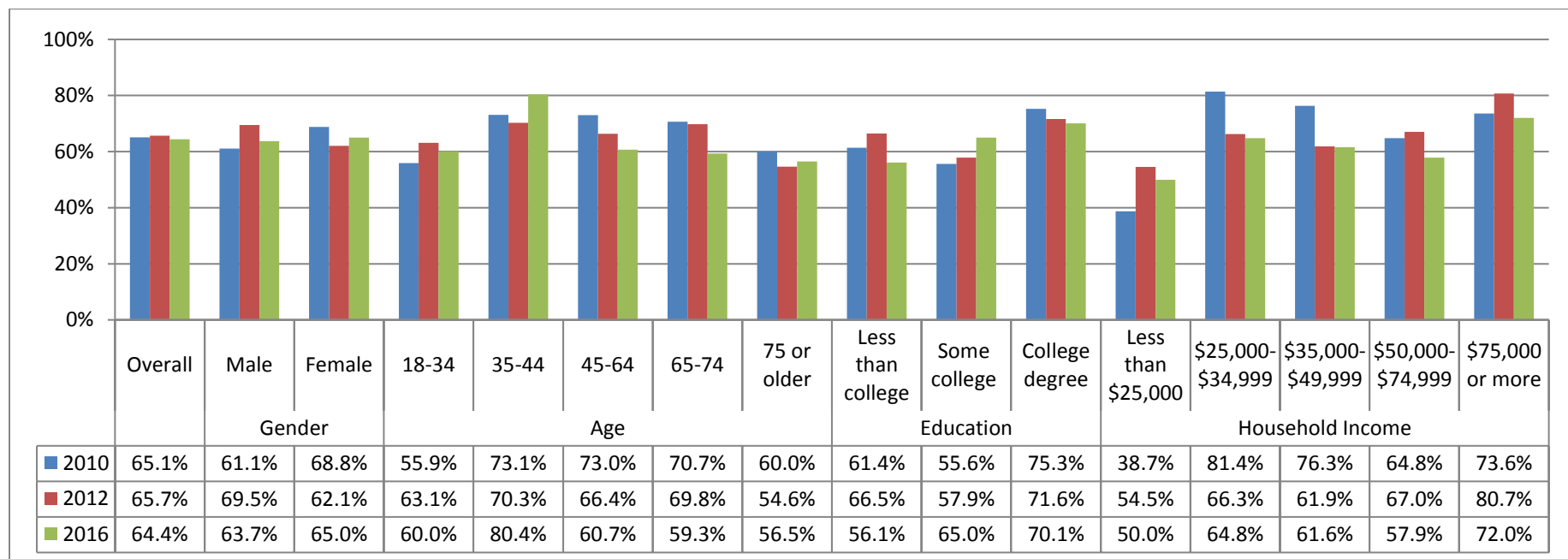
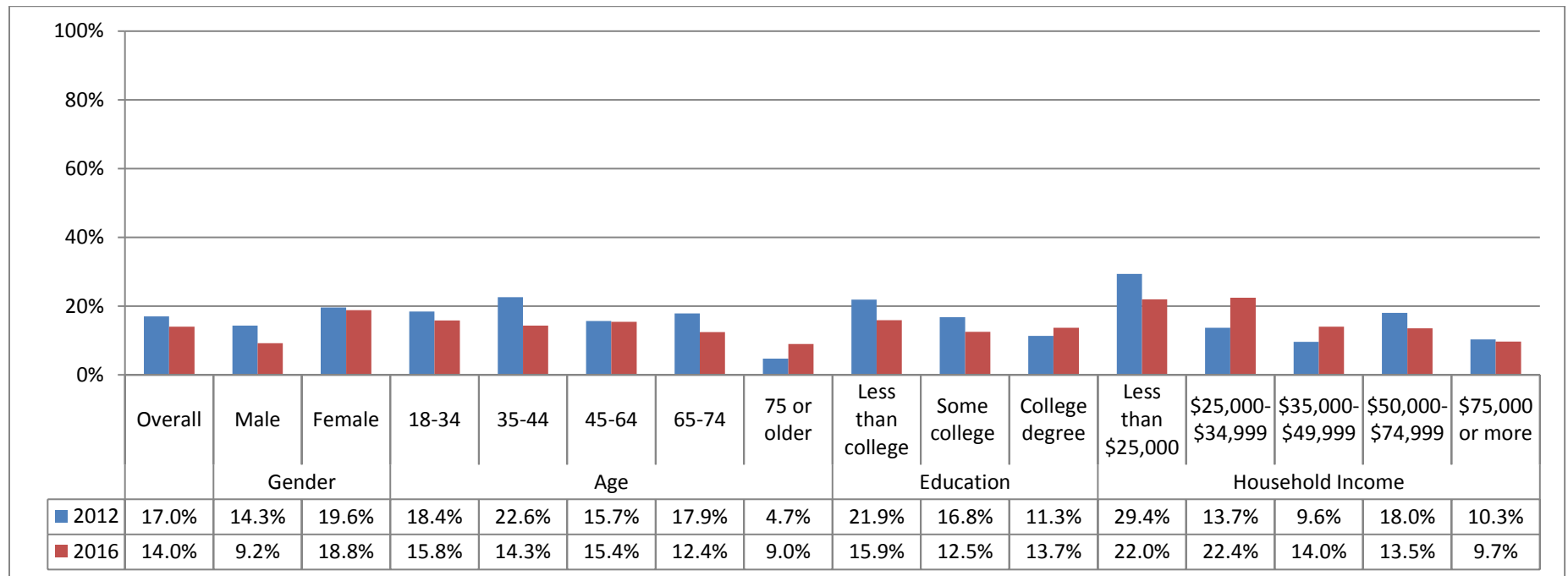


Table 8	Number of Days in Past 30 Days in Which Felt Very Healthy and Full of Energy		
	Less than 10 Days	10-19 Days	20 or More Days
2010	18.9%	16.0%	65.1%
2012	19.8%	14.6%	65.6%
2016	20.2%	15.5%	64.4%

Mental Illness and Stigma

In 2016 Buffalo County survey administration 14.0% respondents reported ever being told that they have a depressive disorder (depression, major depression, dysthymia, or minor depression). Those reporting the lowest rates of a depressive disorder were the 75 and older age group 9.0% (Figure 8).

Figure 8. Prevalence of Depressive Disorders*



*Were ever told they have depression, major depression, dysthymia, or minor depression.

Overall, 1.9% of 2016 respondents reported that a mental health condition or emotional problem kept them from doing their work or other usual activities for 10 or more days in the past 30 days, 4.9% reported 1-9 days, and the vast majority (93.2%) reported that a mental health condition or emotional problem did not keep them from work or usual activities for any days. Those with a household income of less than \$25,000 reported very lower frequency compared to 2012 data, of being kept from their work or usual activities by a mental health condition or emotional problem (Figure 9, Table 9).

Figure 9. Mental Health Condition or Emotional Problem Kept from Doing Work or Other Usual Activities for 10 or More Days in the Past 30 Days

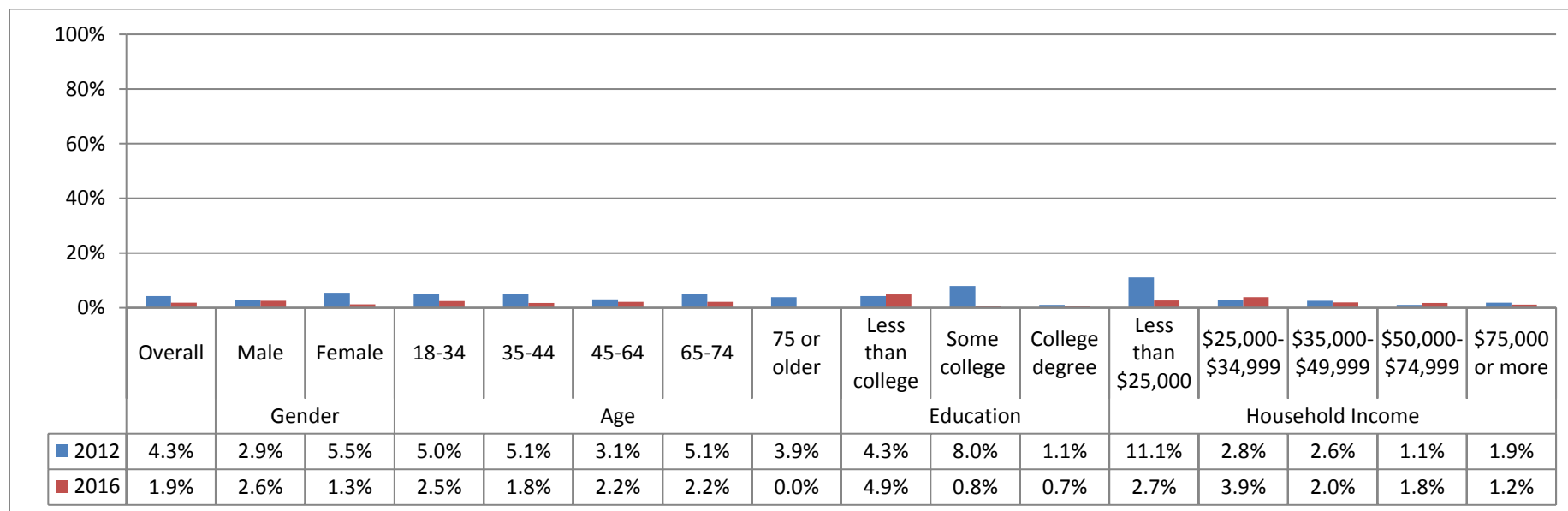
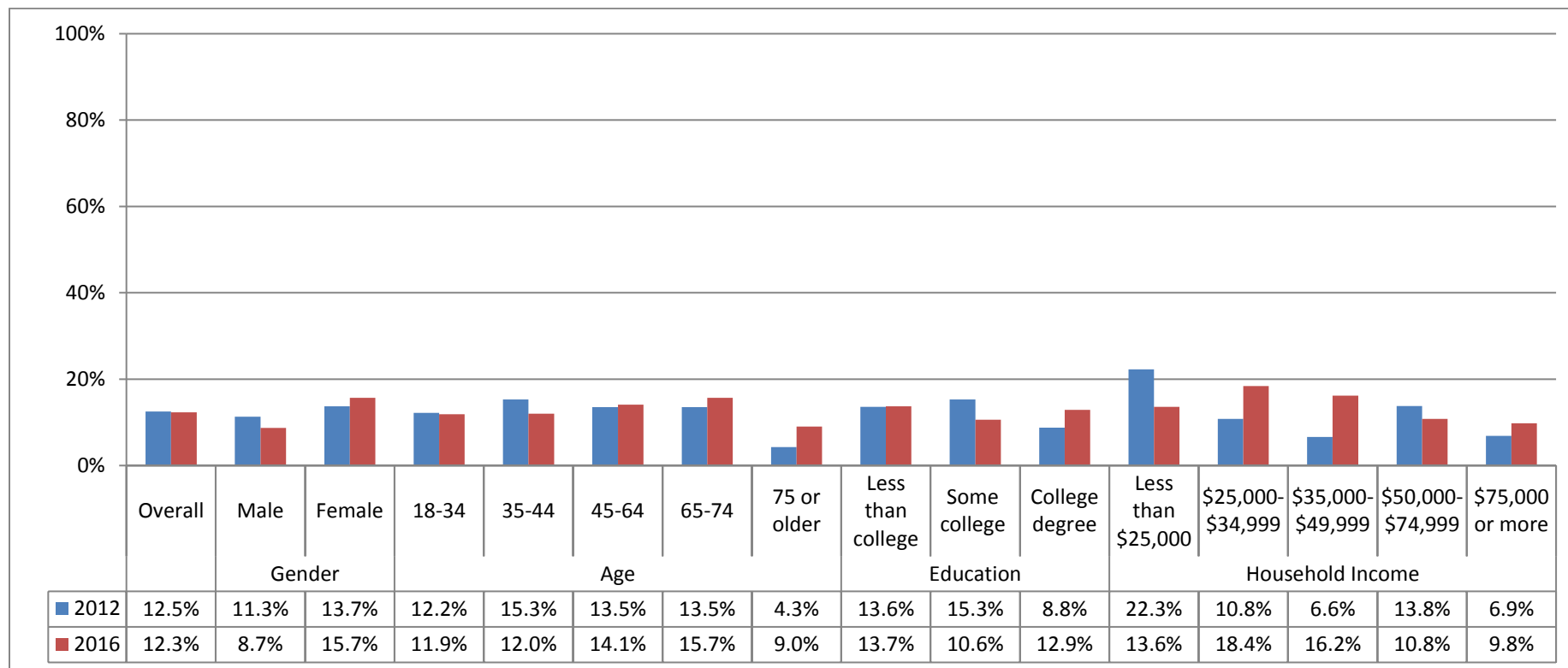


Table 9	Number of Days in Past 30 Days in which Mental Health Condition or Emotional Problem Kept from Doing Work or Other Usual Activities		
	0 Days	1-9 Days	10 or More Days
2012	91.2%	4.5%	4.3%
2016	93.2%	4.9%	1.9%

One-in-eight (12.3%) of 2016 respondents reported that they are currently taking medicine or receiving treatment from a doctor or mental health professional for any type of mental health condition or emotional problem. This rate of treatment was lowest among those 75 or older, with some college, and/or with a household income of \$75,000 or more a year. In 2016, those with a household income of less than \$25,000 (13.6%) recorded lower frequency compared to 2012 data (Figure 10).

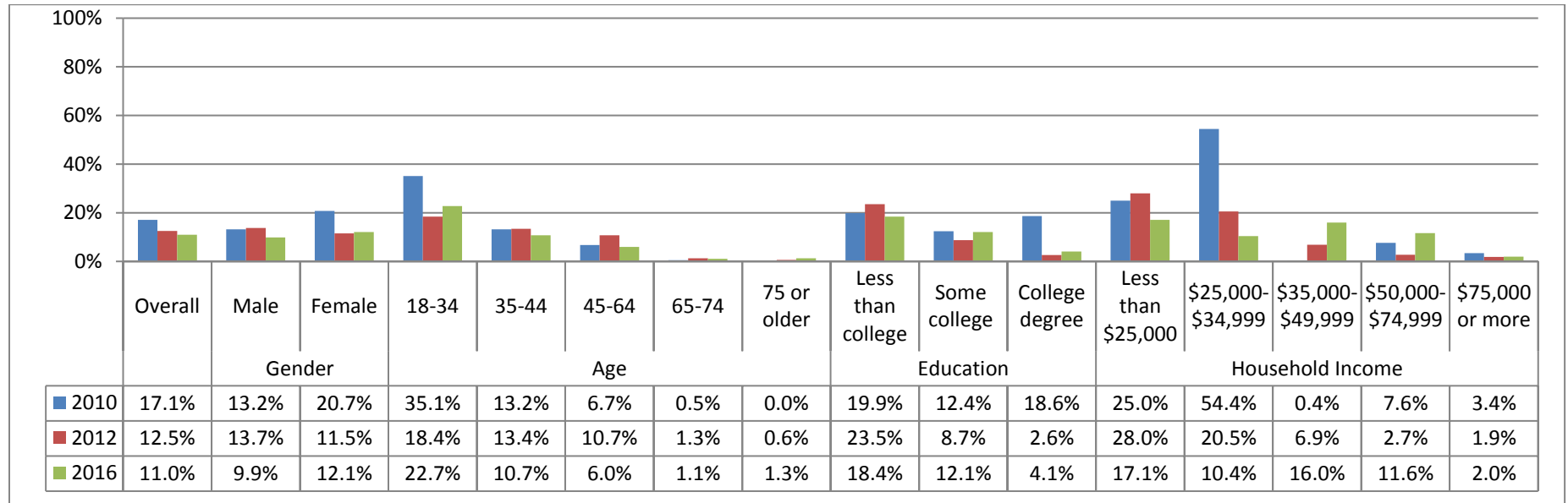
Figure 10. Currently Taking Medicine or Receiving Treatment from a Doctor or Mental Health Professional for Any Type of Mental Health Condition or Emotional Problem



Health Care Access

In 2016, 11.0% Buffalo County respondents reported being without any type of health care coverage. This was a lower percentage compared to 2010 and 2012 data. Respondents in the age group of 18-34, with lower education level, and/or with a household income of less than \$25,000 still reported comparatively high levels of no insurance coverage in 2016. (Figure 11, Table 10).

Figure 11. Percent without Any Health Care Coverage*



*Includes health insurance, prepaid plans such as HMOs, government plans such as Medicare, or Indian Health Services.

Table 10	Percent without Any Health Care Coverage*		
	2010	2012	2016
	17.1%	12.5%	11.0%

*Includes health insurance, prepaid plans such as HMOs, government plans such as Medicare, or Indian Health Services.

In 2016, 22.5% respondents reported not having a personal doctor. Age appears to be a leading determiner on whether or not an individual has a doctor or personal care provider, with younger respondents being more likely not to have a doctor or personal care provider compared to older respondents. There were considerable differences among the demographic groups between 2012 and 2016 of survey administration (especially among those ages 35-44 and/or those with a household income of \$25,000-\$34,999). (Figure 12, Table 11).

Figure 12. Percent without A Personal Doctor or Health Care Provider

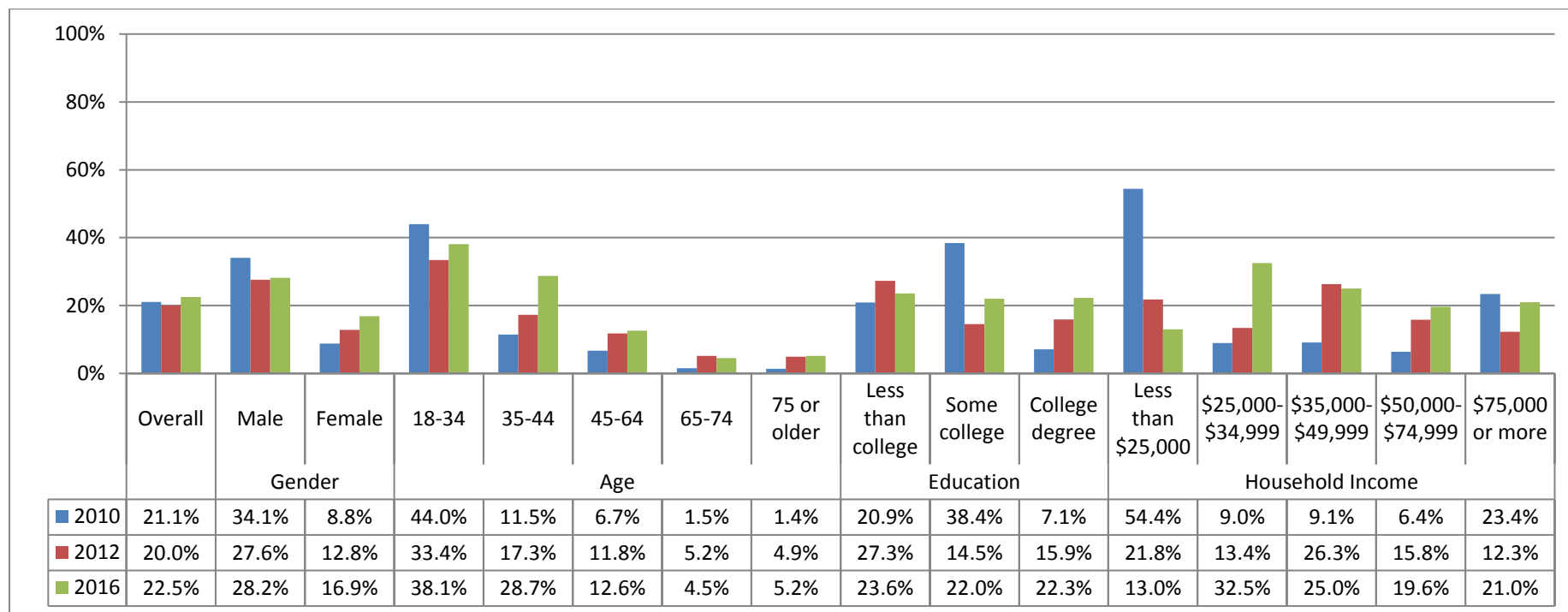


Table 11	Percent without a Personal Doctor or Health Care Provider		
	2010	2012	2016
	21.1%	20.0%	22.5%

There was an increase in the percent of individuals reporting that they were unable to see a doctor due to cost in the past 12 months from 2012 to 2016. Those respondents reported being unable to see a doctor due to cost was highest for those with incomes under \$25,000, less than college education, and/or the youngest age category (18-34) (Figure 13, Table 12).

Figure 13. Unable to See a Doctor Due to Cost in the Past 12 Months

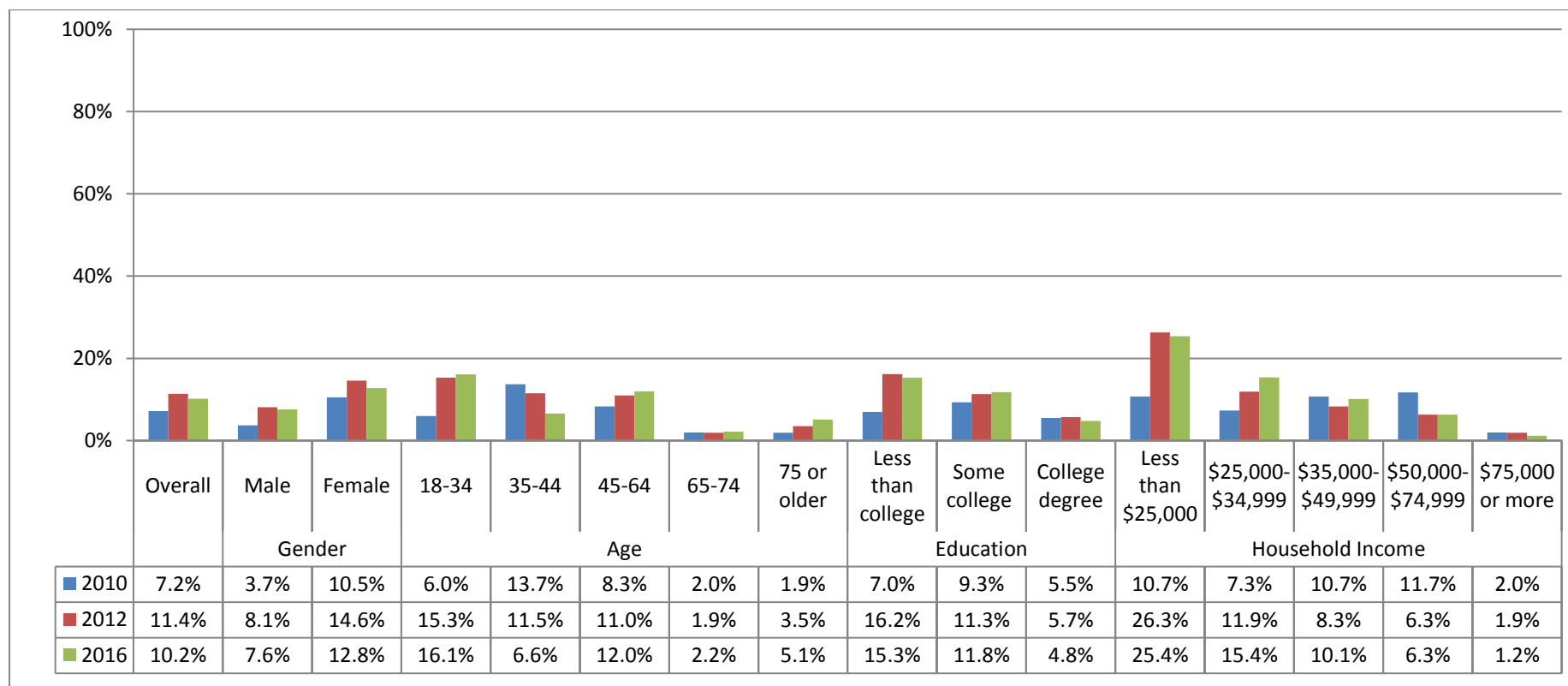


Table 12	Unable to See a Doctor Due to Cost in the Past 12 Months		
	2010	2012	2016
	7.2%	11.4%	10.2%

Almost three-in-four (74.1%) of 2016 Buffalo County respondents reported visiting a doctor in the past year for a routine checkup or general physical exam. Those ages 75 or older were most likely to visit a doctor for a routine checkup compared to younger age groups. Also, females were much more likely to have a routine checkup in the past year compared to males (Figure 14, Table 13).

Figure 14. Percent Who Visited a Doctor in the Past Year for a Routine Checkup or General Physical Exam

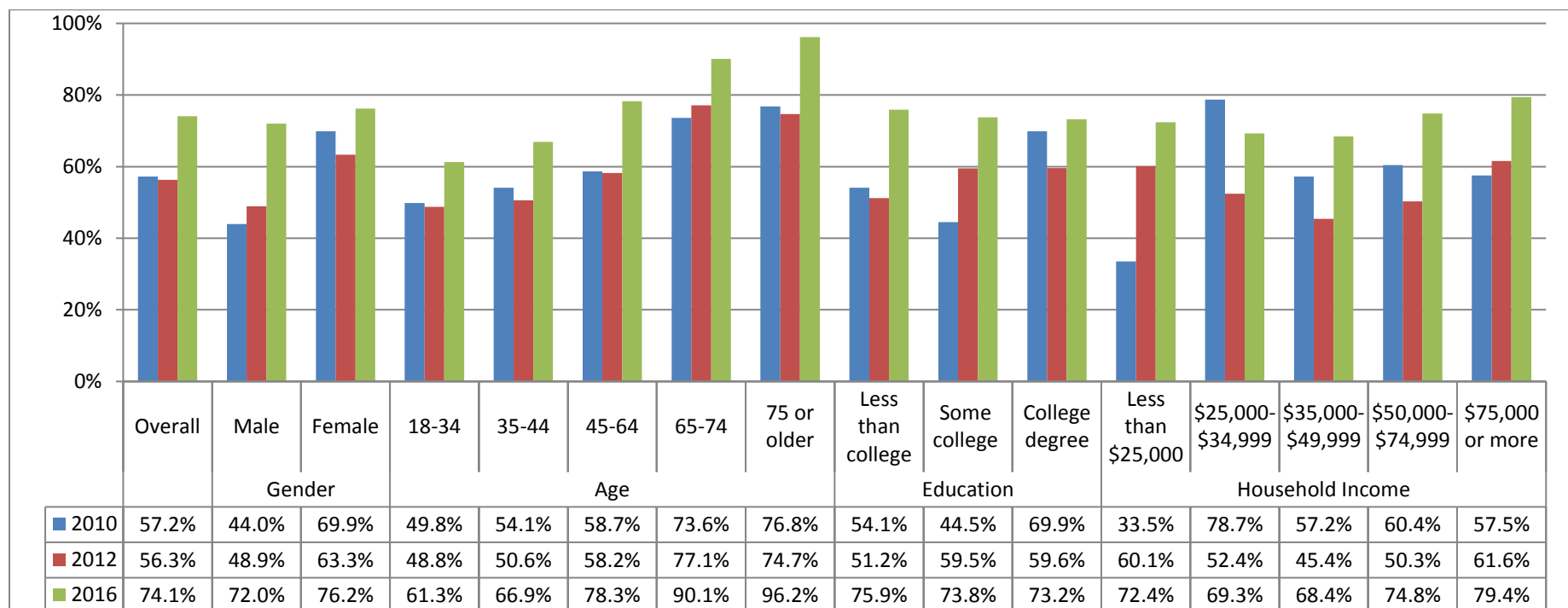
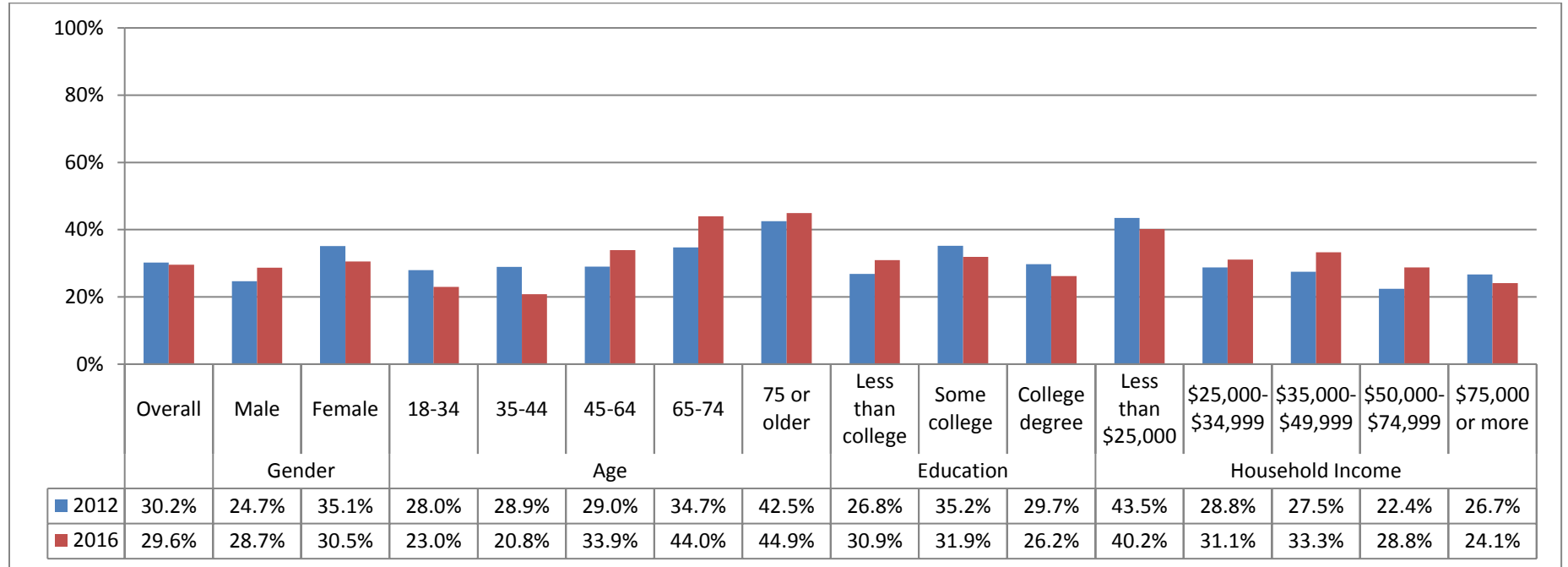


Table 13	Length of Time Since Last Routine Checkup or Physical Exam				
	Within past year	Within past 2 years	Within past 5 years	5 or more years ago	Never
2010	57.2%	14.1%	15.8%	11.6%	1.4%
2012	56.3%	12.6%	14.2%	14.2%	2.7%
2016	74.1%	8.4%	10.6%	6.4%	0.4%

Prescription Pain Medication

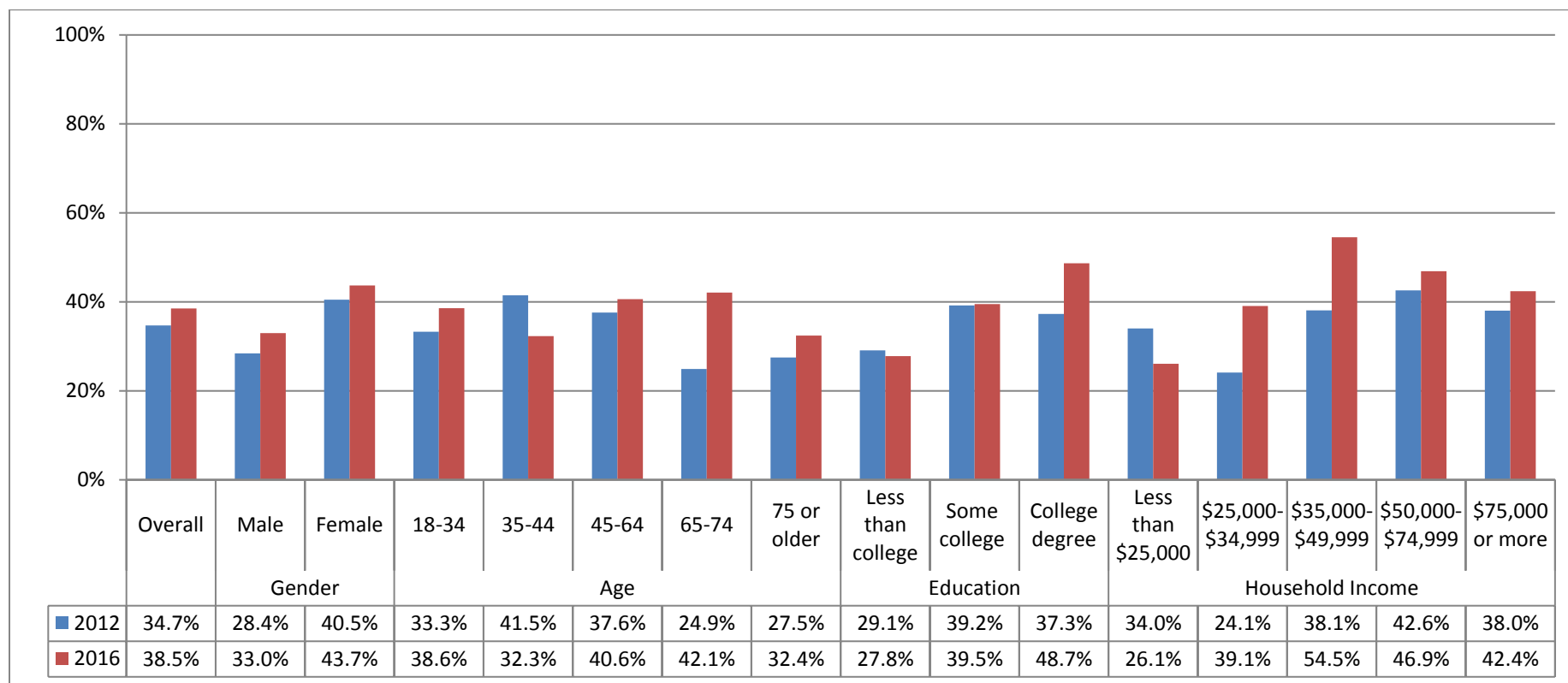
In 2016, 29.6% respondents reported that they used pain medication prescribed by a doctor in the past year. Those 75 or older and/or those with a household income of less than \$25,000 reported the highest rates of pain medication use (Figure 15).

Figure 15. Used Pain Medication Prescribed by a Doctor in the Past Year



In 2016, 38.5% of respondents reported that they had pain medication leftover the last time they filled a prescription, as compared to the 2012 data there was an increase in the use of leftover pain medication. There was a drastic change in the use of leftover pain medications among the household income of \$35,000-\$49,999 from 2012 data (Figure 16).

Figure 16. Percent Who Had Leftover Pain Medication the Last Time They Filled a Prescription



Overweight and Obesity

Body Mass Index (BMI) is a calculation obtained solely from a person's height and weight. Despite certain limitations, it can be used to determine the prevalence of overweight and obesity in the population. In 2016, 33.9% of the survey sample registered as overweight (BMI 25.0 to 29.9), a slight decrease from 36.3% in 2012 (Figure 17, Table 14).

Figure 17. Prevalence of Overweight (BMI 25.0 to 29.9)

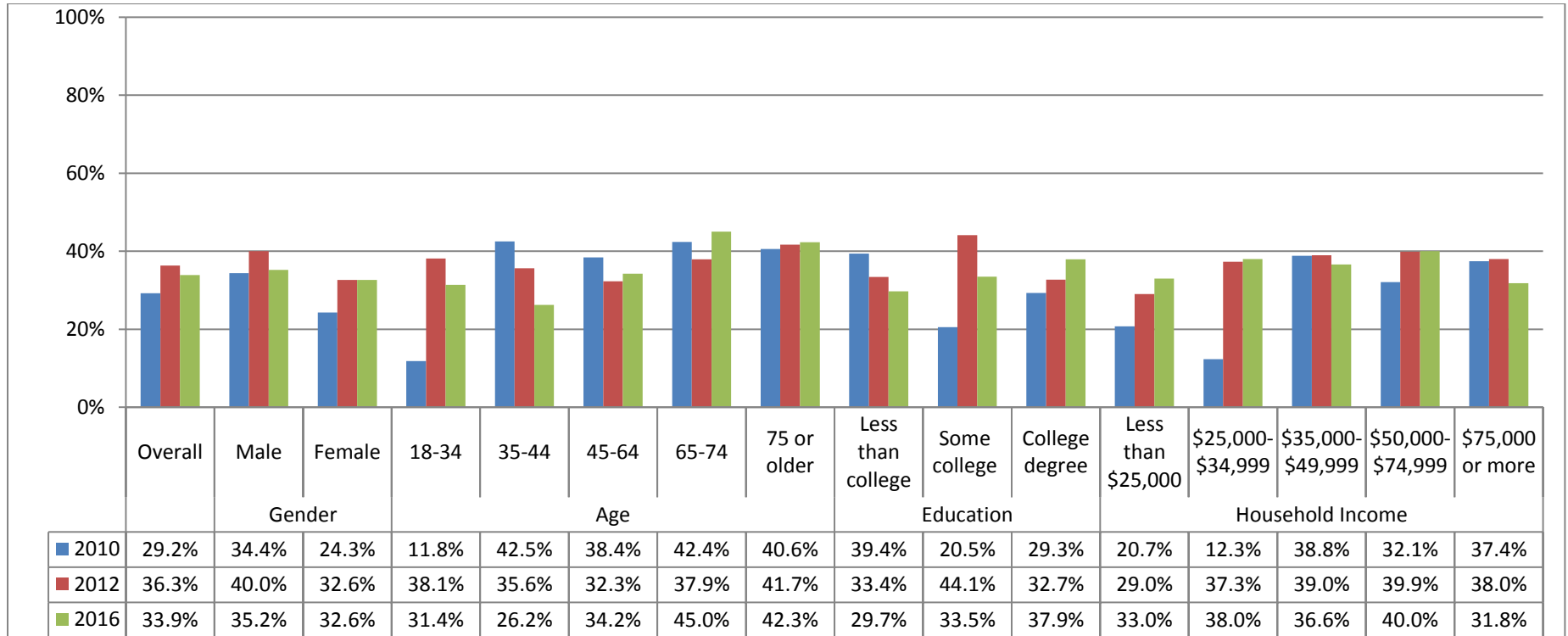


Table 14	Prevalence of Overweight (BMI 25.0 to 29.9)		
	2010	2012	2016
	29.2%	36.3%	33.9%

Obesity remained largely stable across the three survey administrations, with 31.1% in 2010, 30.8% in 2012, and 30.1% 2016 registering as obese (BMI 30.0 or higher). Those respondents in the age group of 45-64 and/or with a household income of \$35,000-\$49,999 had comparatively elevated rates of obesity in 2016 (Figure 18, Table 15).

Figure 18. Prevalence of Obesity (BMI 30.0 or Higher)

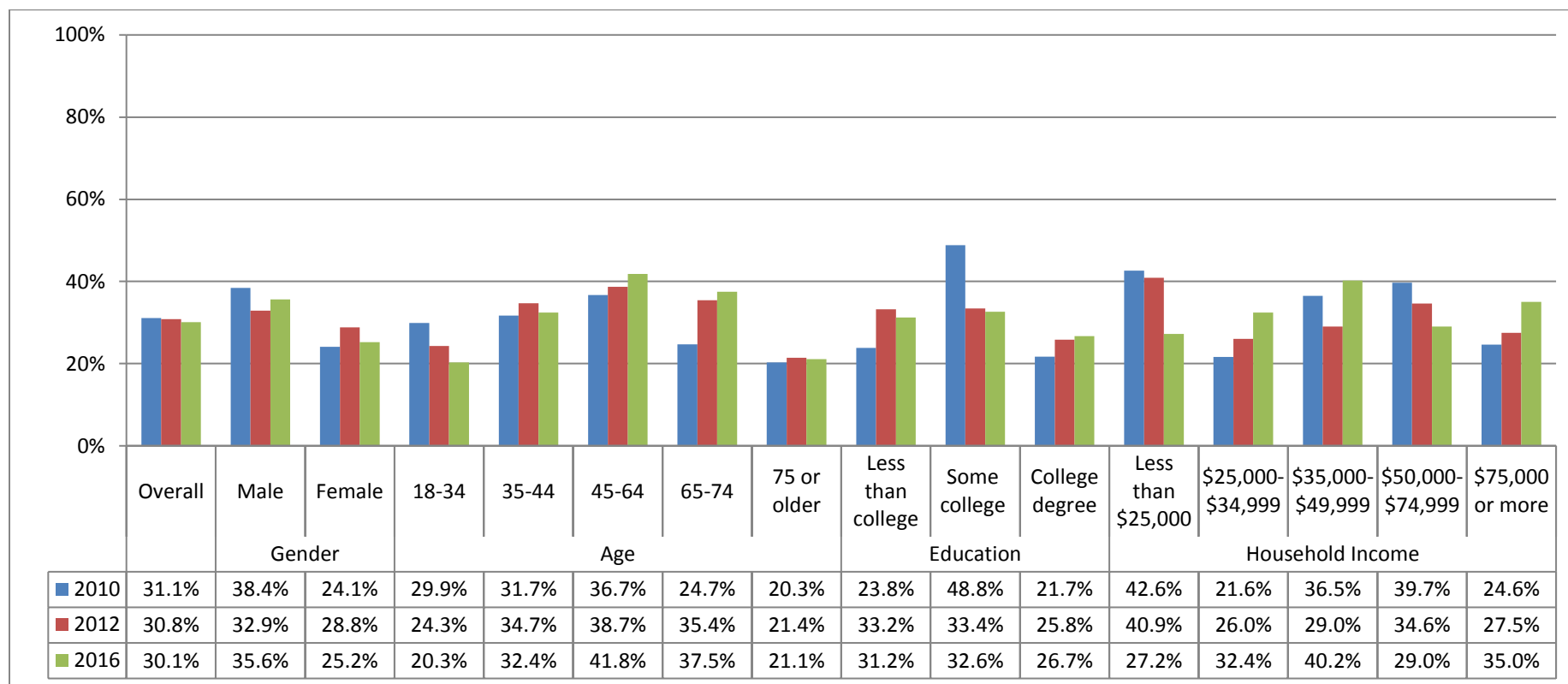
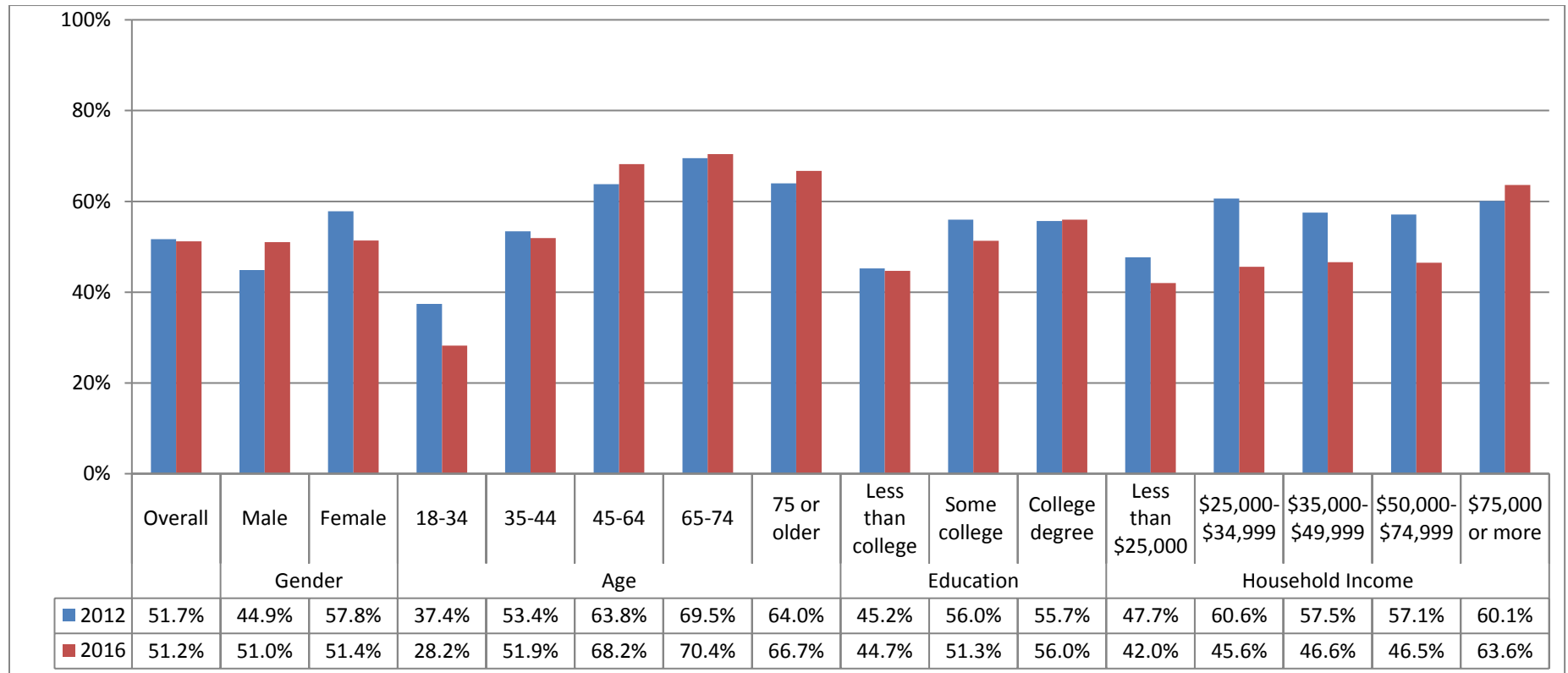


Table 15	Prevalence of Obesity (BMI 30.0 or Higher)		
	2010	2012	2016
	31.1%	30.8%	30.1%

Pre-Diabetes

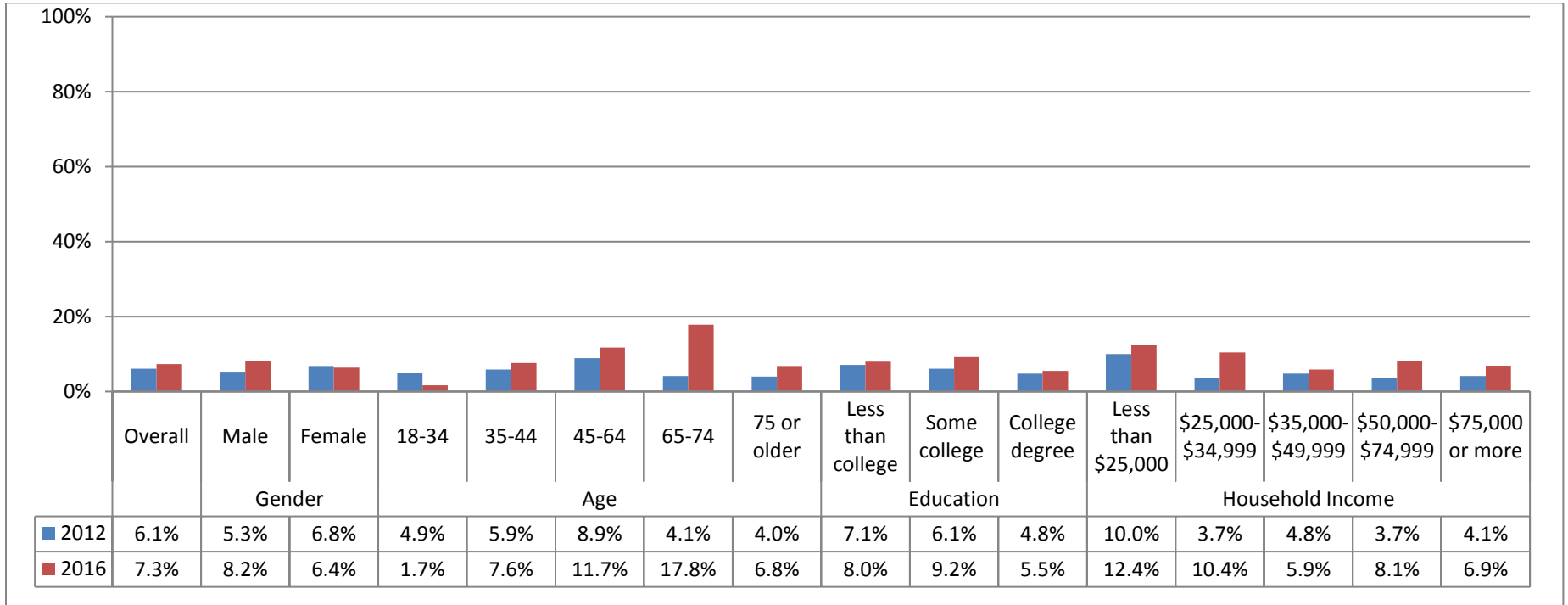
Just over half (51.2%) of respondents reported being tested for high blood sugar or diabetes within the past three years. Those aged 18-34 were less likely to have been tested for high blood sugar or diabetes. In addition, females were less likely and males were more likely to be tested for high blood sugar or diabetes compared to 2012 data (Figure 19).

Figure 19. Tested for High Blood Sugar or Diabetes within the Past Three Years



Overall, 7.3% of 2016 Buffalo County survey respondents reported being told that they have pre-diabetes or are borderline diabetic (Figure 19). Among females, 1.7% respondents have been told they were pre-diabetic or borderline diabetic during pregnancy (included in the 6.4% of all females who have been told that they are pre or borderline diabetic) (Figure 20).

Figure 20. Percent Who Have Ever Been Told That They Have Pre-Diabetes or Are Borderline Diabetic



Sugar Sweetened Beverages and Menu Labeling

One in four (24.5%) respondents reported drinking soda or pop that contains sugar every day in the past 30 days in the year 2016. Younger respondents were much more likely than older respondents to report high levels of sugary soda consumption, as were those with lower income compared to higher income (Figure 21, Table 16).

Figure 21. Drank Soda or Pop That Contains Sugar on 20 Days or More in the Past 30 Days

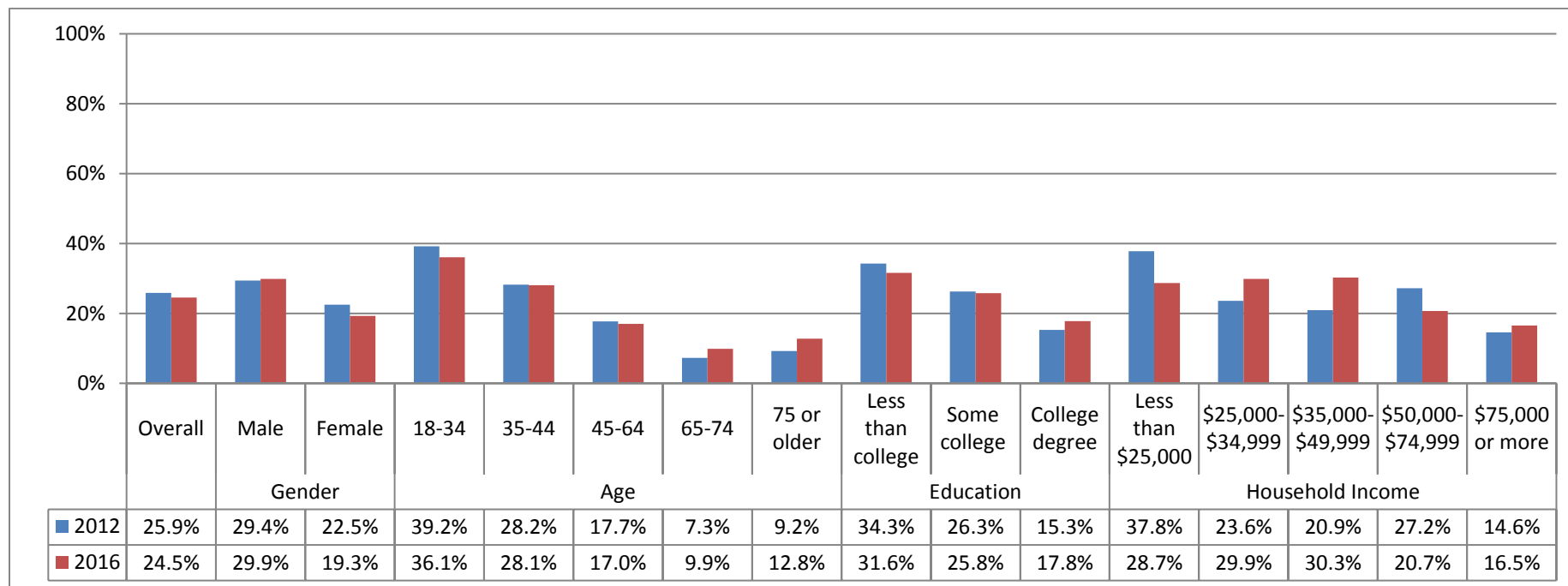
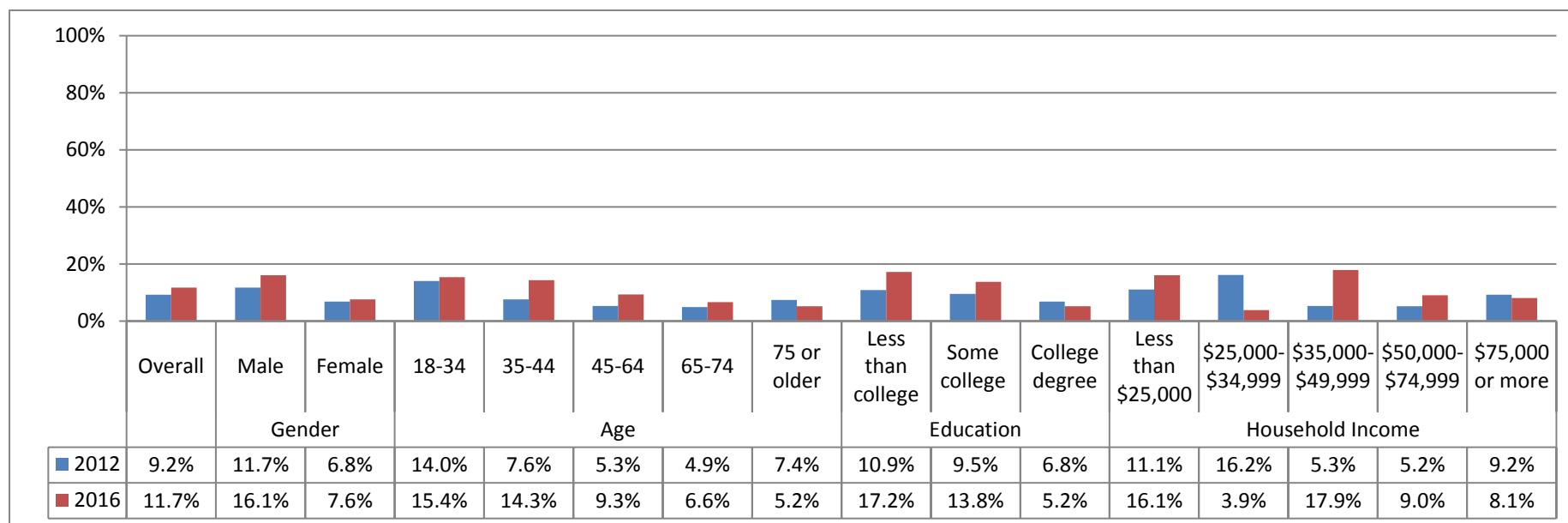


Table 16	Number of Days in Past 30 Days in Which Drank Soda or Pop That Contains Sugar				
	0 Days	1-9 Days	10-19 Days	20-29 Days	Every day
2012	38.2%	24.3%	11.6%	3.3%	22.6%
2016	35.5%	30.5%	9.5%	4.5%	20.0%

One in ten (11.7%) of respondents reported consuming sweetened fruit drinks on 20 days or more in the past month. Males were twice as likely as females to consume sweetened fruit drinks. The younger respondents also reported much more consumption of sweetened fruit drinks than the older respondents did(Figure 22, Table 17).

Figure 22. Drank Sweetened Fruit Drinks* on 20 Days or More out of the Past 30 Days



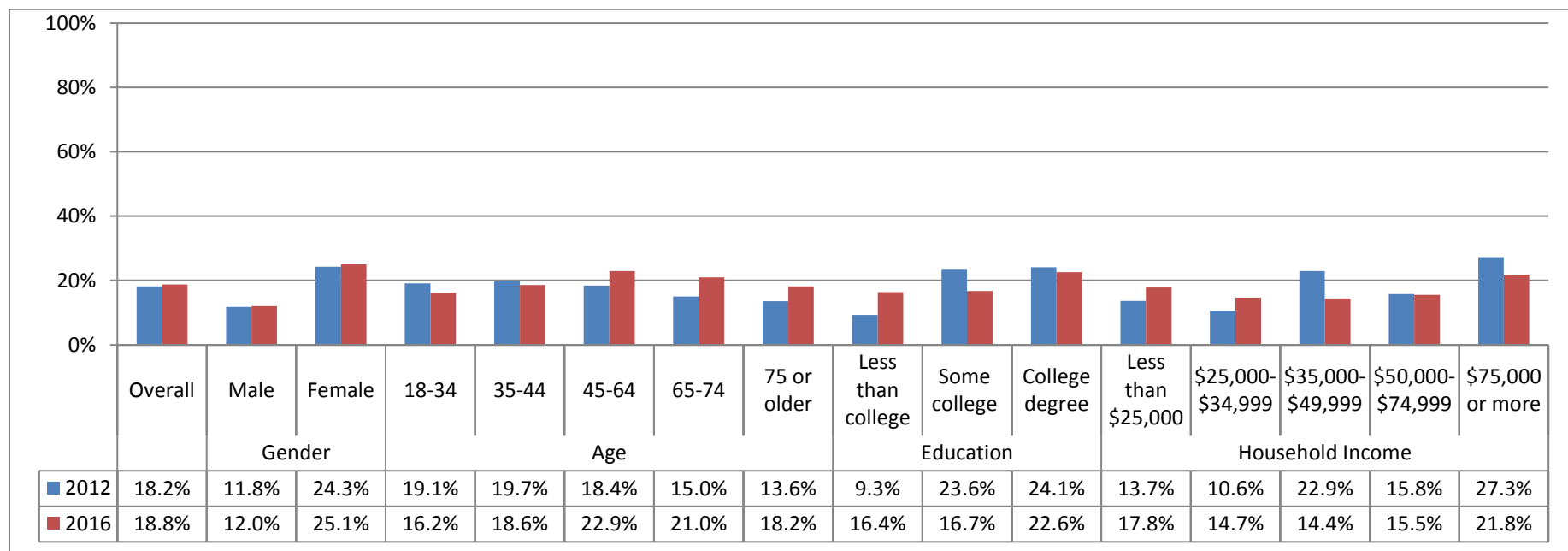
*"Sweetened beverages that often contain some fruit juice or flavoring. Does not include 100% fruit juice, sweet tea, coffee drinks, sports drinks, or energy drinks."

Table 17	Number of Days in Past 30 Days in Which Drank Sweetened Fruit Drinks				
	0 Days	1-9 Days	10-19 Days	20-29 Days	Every day
2012	38.2%	24.3%	11.6%	3.3%	22.6%
2016	52.4%	27.4%	8.5%	2.9%	8.8%

*"Sweetened beverages that often contain some fruit juice or flavoring. Does not include 100% fruit juice, sweet tea, coffee drinks, sports drinks, or energy drinks."

Less than one-in-five (18.8%) 2016 Buffalo County respondents reported that they always or most of the time use calorie information when available to help decide what to order when eating out at fast food and chain restaurants. Almost half (50.7%) respondents reported that they never consult calorie information (Figure 23, Table 18).

Figure 23. Always or Most of the Time Use Calorie Information (When Available) to Help Decide What to Order When Eating out at Fast Food and Chain Restaurants*



*Based on the scale: always, most of the time, about half the time, sometimes, never

Table 18	Use Calorie Information (When Available) to Help Decide What to Order When Eating out at Fast Food and Chain Restaurants				
	Always	Most of the time	About half the time	Sometimes	Never
2012	7.4%	10.8%	9.3%	24.5%	47.9%
2016	5.7%	13.1%	12.3%	18.2%	50.7%

Fruits and Vegetables

Over a quarter (25.9%) of respondents reported they drank 100% pure fruit juice every day in the past month. Respondents with less than a college education were more likely to report that they drank 100% pure fruit juice every day in the past month compared to the other two education groups. (Figure 24, Table 19).

Figure 24. Drank 100% Pure Fruit Juice Every day in the Past Month

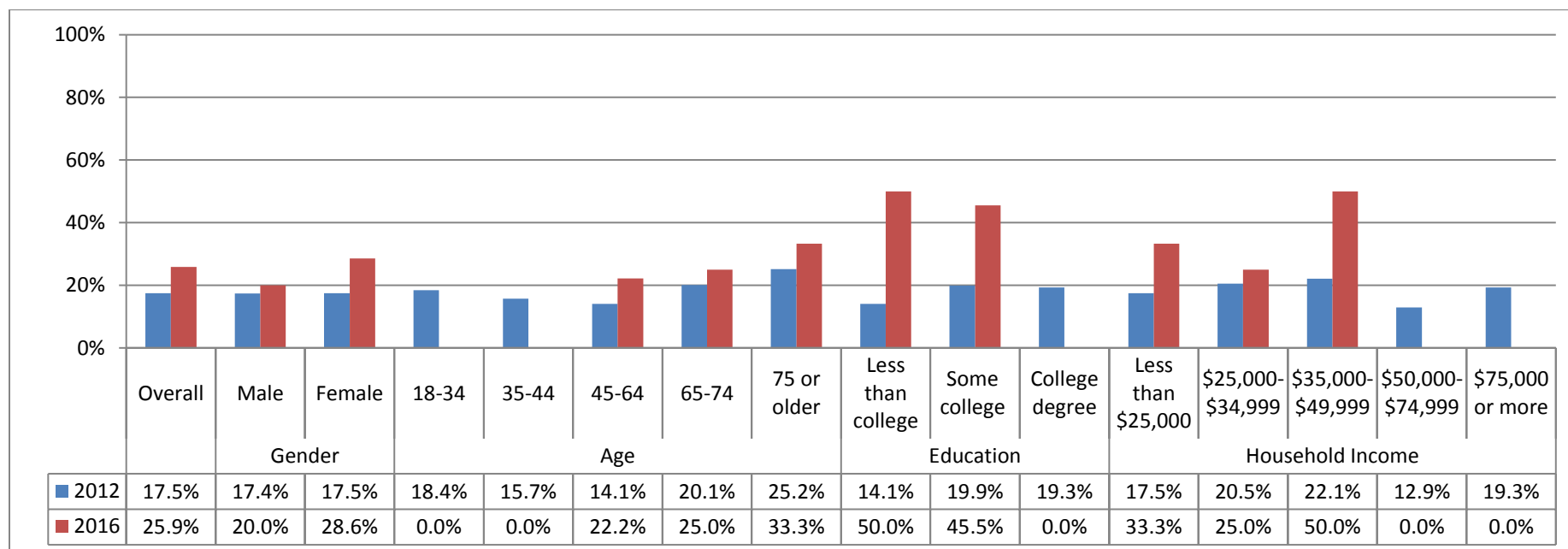
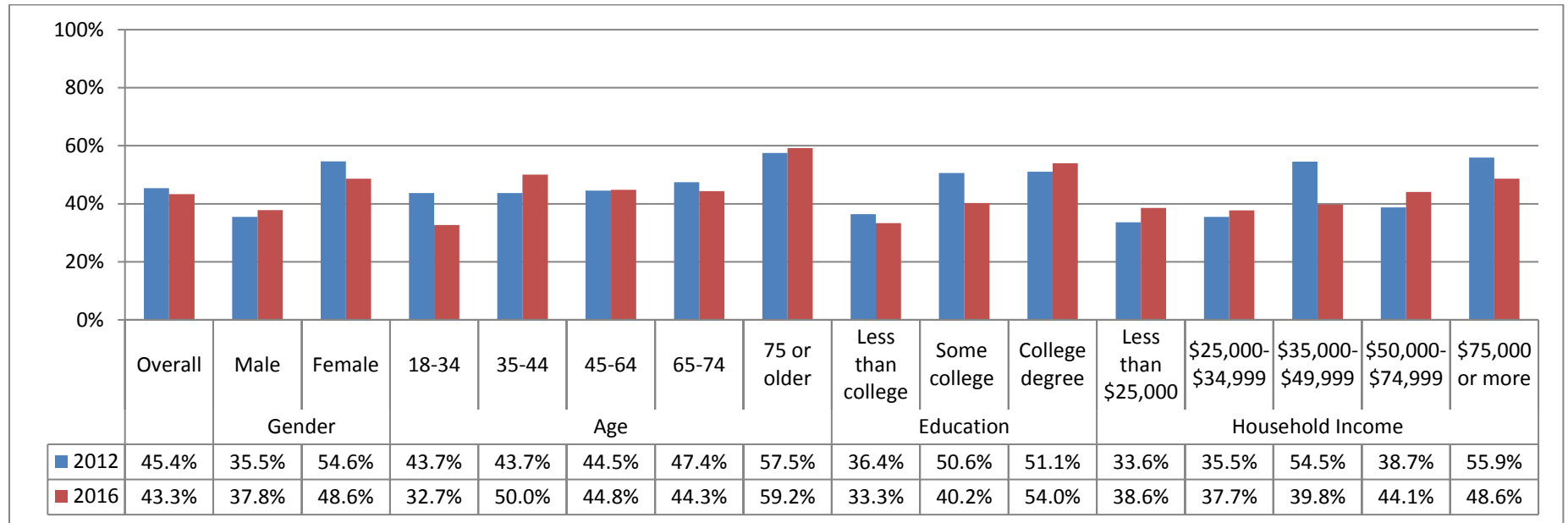


Table 19	Number of Days in Past 30 Days in Which Drank 100% Pure Fruit Juice				
	0 Days	1-9 Days	10-19 Days	20-29 Days	Every day
2012	44.5%	26.7%	7.9%	3.4%	17.5%
2016	53.1%	12.8%	8.2%	0.0%	25.9%

Almost half (43.3%) of respondents reported eating fruit every day in the past month. Females were more likely to eat fruit every day as compared to males, as were those 75 or older compared to all other age groups (Figure 25, Table 20).

Figure 25. Ate Fruit* Every day in the Past Month



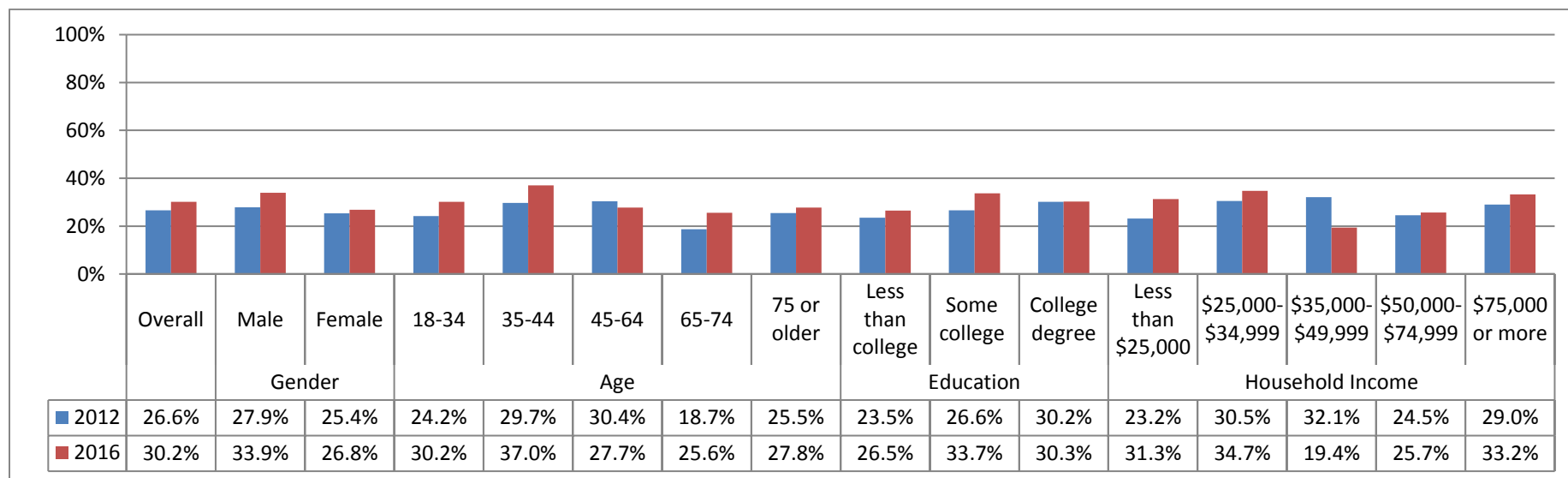
*Include fresh, frozen, or canned fruit. Does not include juice.

Table 20	Number of Days in Past 30 Days in Which Ate Fruit*				
	0 Days	1-9 Days	10-19 Days	20-29 Days	Every day
2012	5.0%	19.0%	20.2%	10.4%	45.4%
2016	4.9%	17.9%	21.9%	12.0%	43.3%

*Include fresh, frozen, or canned fruit. Does not include juice.

Roughly, one in three (30.2%) respondents reported eating cooked or canned beans 10 or more days in the past month. Respondents with some college education reported a higher rate of consumption compared to all other education groups (Figure 26, Table 21).

Figure 26. Ate Cooked or Canned Beans* 10 or More Days in the Past Month



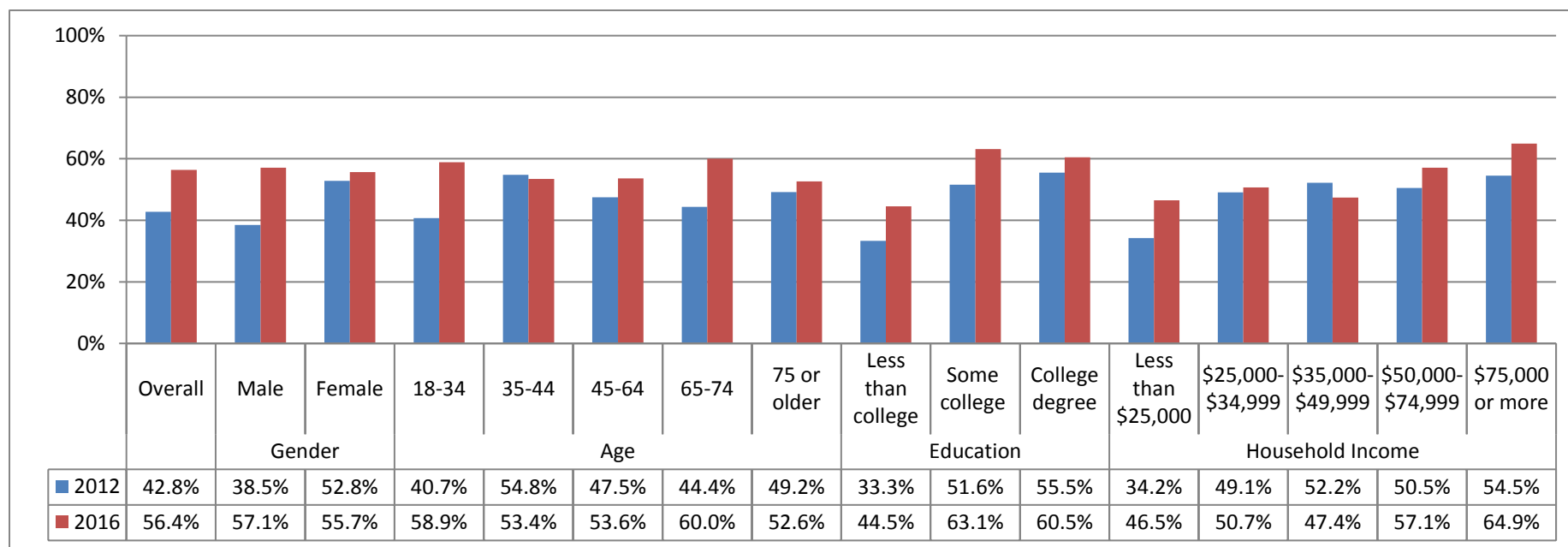
*Includes refried, baked, black, garbanzo beans, beans in soup, edamame, tofu, or lentils. Does not include green beans.

Table 21	Number of Days in Past 30 Days in Which Ate Cooked or Canned Beans*				
	0 Days	1-9 Days	10-19 Days	20-29 Days	Every day
2012	19.0%	48.6%	16.7%	2.9%	4.9%
2016	18.1%	51.7%	21.8%	4.0%	4.3%

*Includes refried, baked, black, garbanzo beans, beans in soup, edamame, tofu, or lentils. Does not include green beans.

More than a half (56.4%) of respondents reported eating dark green vegetables on 10 days or more in the past month. Males were more likely to eat dark green vegetables as compared to females. Consumption of dark green vegetables increased with income on average (Figure 27, Table 22).

Figure 27. Ate Dark Green Vegetables* 10 or More Days in the Past Month



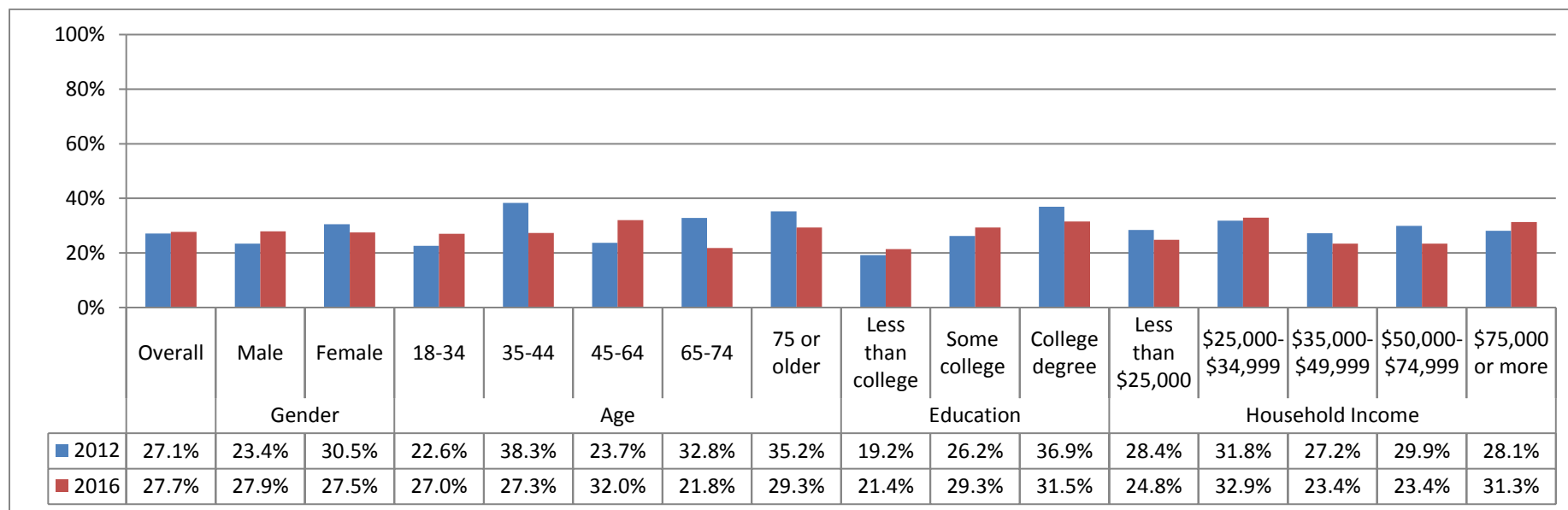
*"For example, broccoli or dark leafy greens including romaine, chard, collard greens, or spinach."

Table 22	Number of Days in Past 30 Days in Which Ate Dark Green Vegetables*				
	0 Days	1-9 Days	10-19 days	20-29 Days	Every day
2012	16.9%	37.1%	22.7%	9.3%	13.9%
2016	9.4%	34.2%	27.8%	12.8%	15.8%

*"For example, broccoli or dark leafy greens including romaine, chard, collard greens, or spinach."

One in four (27.7%) respondents reported they ate orange vegetables 10 days or more in the past month. Consumption increased with education (Figure 28, Table 23).

Figure 28. Ate Orange Vegetables* 10 or More Days in the Past Month



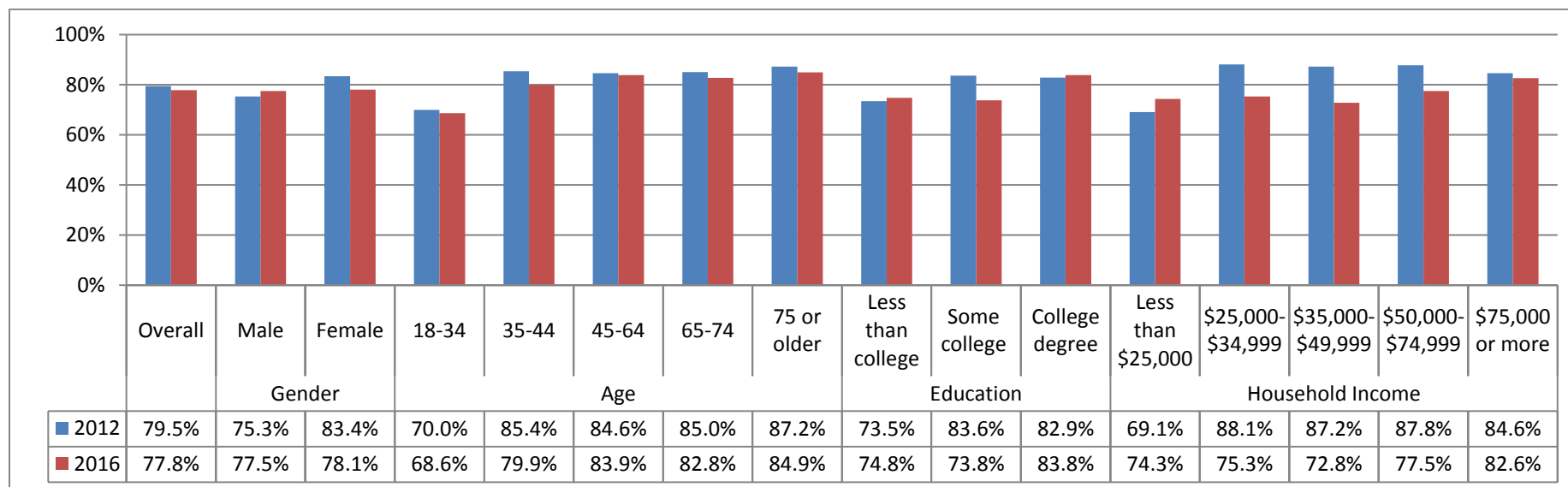
*"Such as sweet potato, pumpkin, winter squash, or carrots."

Table 23	Number of Days in Past 30 Days in Which Ate Orange Vegetables*				
	0 Days	1-9 Days	10-19 Days	20-29 Days	every day
2012	17.2%	55.7%	17.6%	3.7%	5.8%
2016	16.4%	56.0%	16.9%	4.4%	6.4%

*"Such as sweet potato, pumpkin, winter squash, or carrots."

Three out of four (77.8%) of respondents reported they ate other vegetables 10 or more days in the past month. The oldest age group reported the highest percentage (Figure 29, Table 24).

Figure 29. Ate Other Vegetables* 10 or More Days in the Past Month



*"Examples of other vegetables include tomatoes, tomato juice or V-8 juice, corn, eggplant, peas, lettuce, cabbage, and white potatoes that are not fried such as baked or mashed potatoes."

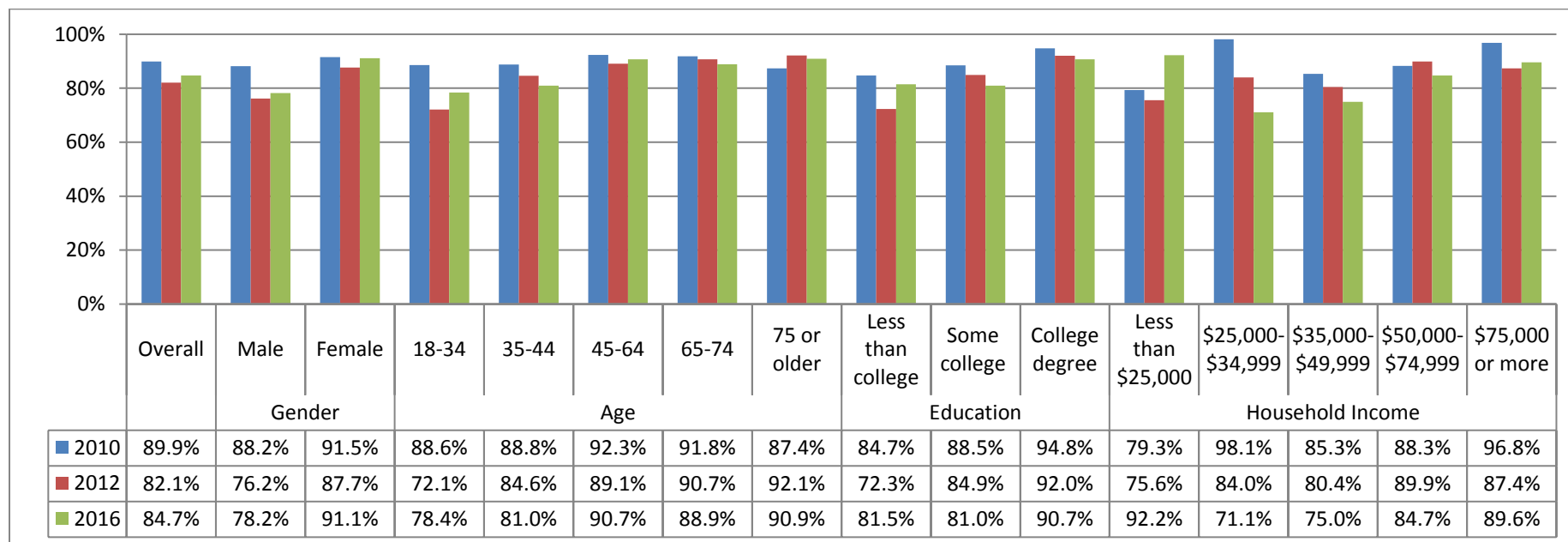
Table 24	Number of Days in Past 30 Days in Which Ate Other Vegetables*				
	0 Days	1-9 Days	10-19 Days	20-29 Days	Every day
2012	1.2%	19.3%	24.2%	17.1%	38.2%
2016	2.5%	19.8%	22.0%	16.4%	39.4%

*"Examples of other vegetables include tomatoes, tomato juice or V-8 juice, corn, eggplant, peas, lettuce, cabbage, and white potatoes that are not fried such as baked or mashed potatoes."

Seat Belt Use

In 2016, 84.7% respondents reported that they always or nearly always wear a seat belt while driving. The 18-34 year old group, males, and those with incomes of \$25,000 to \$49,999 stand out for having low seat belt usage in 2016. Seat belt usage does not correlate to income, however, as those making less than \$25,000 have the highest seat belt usage (Figure 30, Table 25).

Figure 30. Always or Nearly Always Wear a Seat Belt When Riding or Driving a Car*



*Response options: always, nearly always, sometimes, seldom, never

Table 25	Seat Belt Use				
	Always	Nearly Always	Sometimes	Seldom	Never
2010	71.2%	18.7%	5.8%	1.6%	2.8%
2012	65.4%	16.7%	10.9%	4.4%	2.5%
2016	70.1%	14.6%	5.9%	5.4%	4.0%

Distracted Driving

Over one-third (36.6%) of respondents reported texting or e-mailing while driving a car in the past 30 days. The rate of texting while driving is higher for the 18-34 year old group, which also reported low seat belt usage in 2016 (above, Figure 30). Age appears to be a significant determiner in texting while driving behaviors, with a substantial decrease in texting as age increases (Figure 31, Table 26).

Figure 31. Texted or E-mailed While Driving a Car in the Past 30 Days

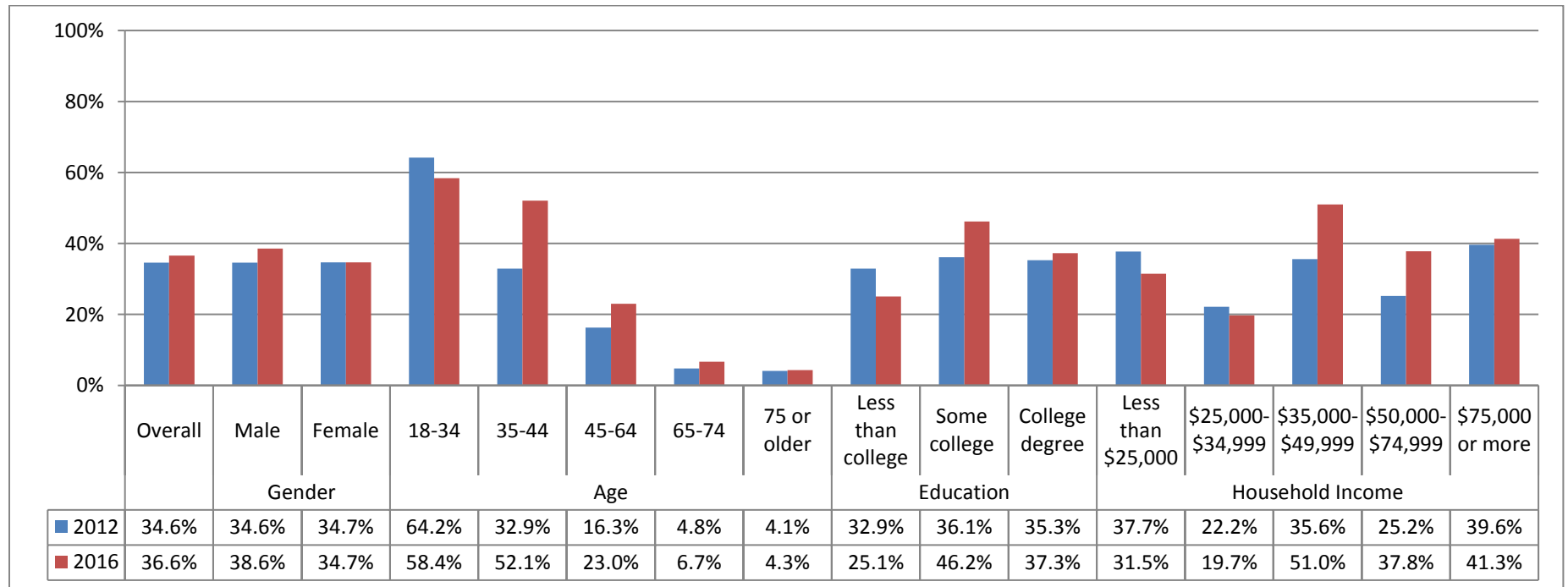


Table 26	Number of Days Texted or E-mailed While Driving in the Past 30 Days		
	0 Days	1-9 Days	10 or More Days
2012	65.3%	19.0%	15.7%
2016	63.4%	19.9%	16.7%

Over two-thirds (69.4%) of respondents reported talking on a cell phone while driving a car in the past 30 days. As with texting, the rates of talking on a cell phone while driving a car decrease with age (Figure 32, Table 27).

Figure 32. Talked on a Cell Phone While Driving a Car in the Past 30 Days

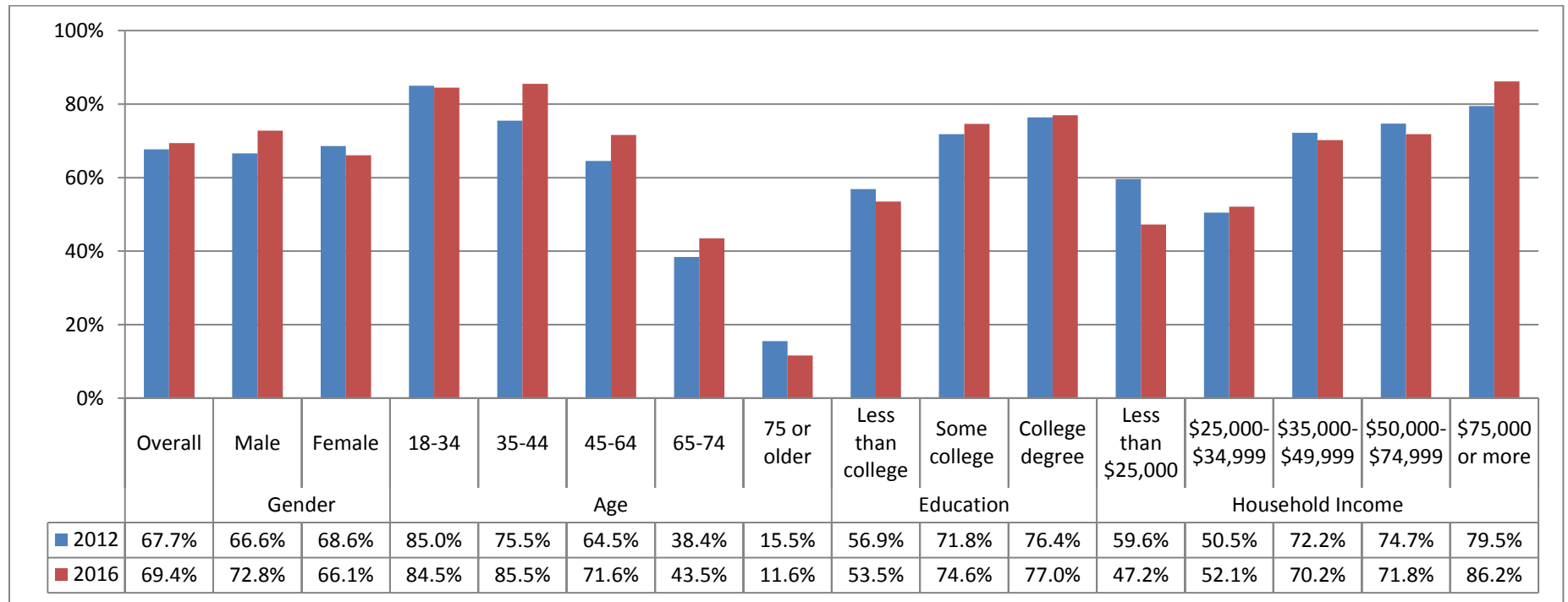


Table 27	Number of Days Talked on a Cell Phone While Driving in the Past 30 Days		
	0 Days	1-9 Days	10 or More Days
2012	32.3%	31.2%	36.5%
2016	30.6%	35.1%	34.3%

Alcohol Use

62.2% of all 2016 respondents reported using any alcohol in the past 30 days. Alcohol use increases with education and income. The 35-44 year old group reported the highest frequency of past 30-day alcohol use (Figure 33, Table 28).

Figure 33. Use of Any Alcohol in the Past 30 Days

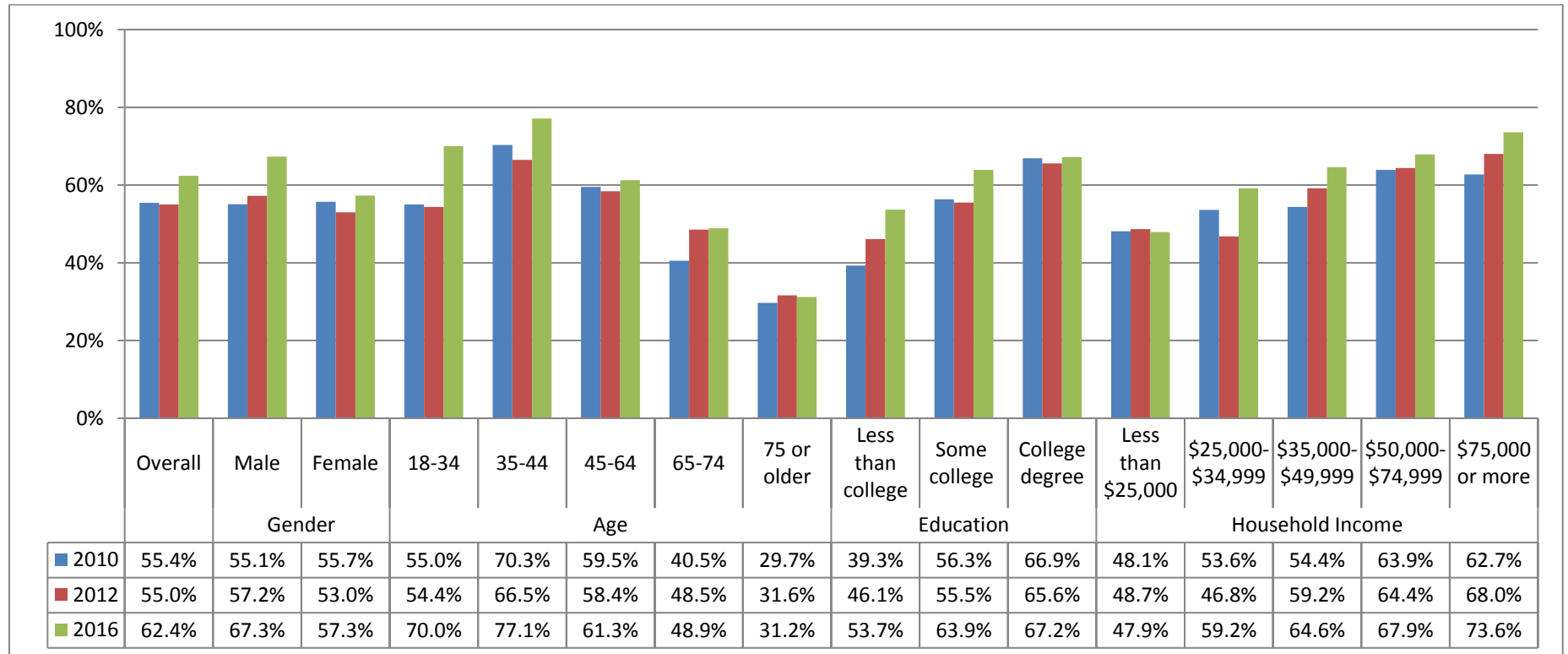
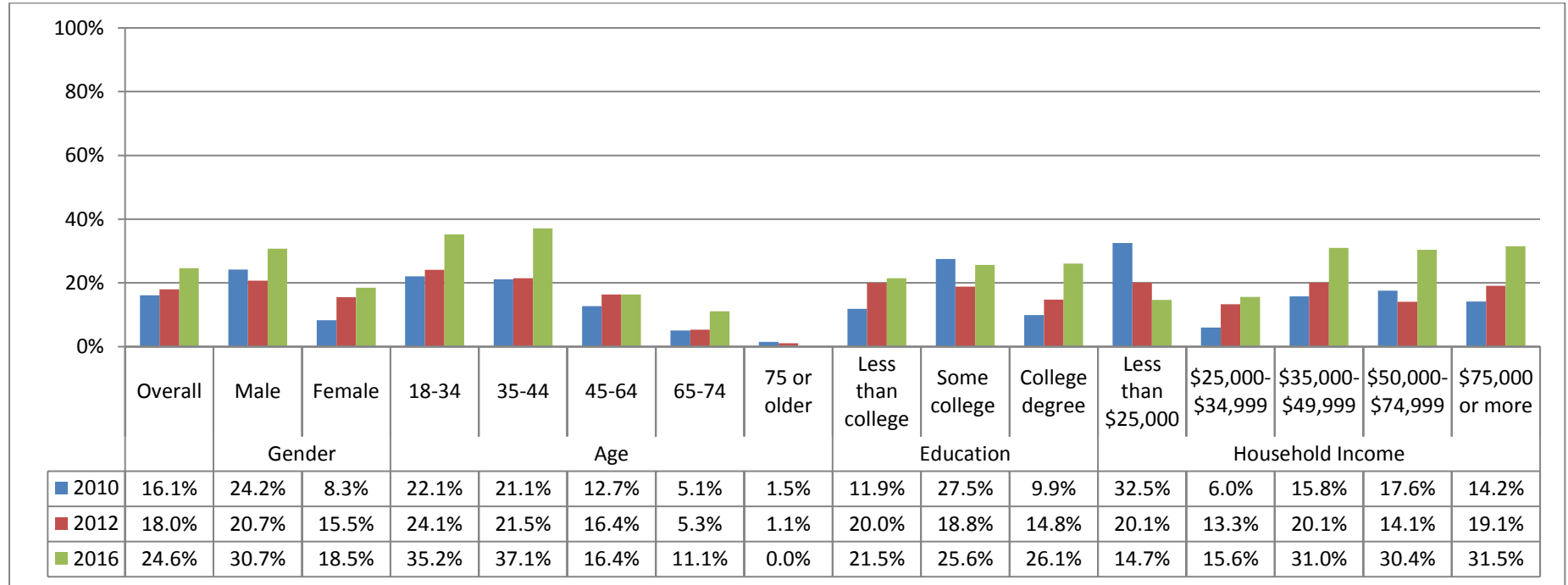


Table 28	Use of Any Alcohol in the past 30 Days		
	2010	2012	2016
	55.4%	55.0%	62.4%

In 2016, 24.6% Buffalo County respondents reported binge drinking (5 or more drinks for males, 4 for females in one sitting) in the past 30 days. Binge drinking was highest among the 35-44 year old group and/or higher household income group. Binge drinking was reported higher in males compared to females (Figure 34, Table 29).

Figure 34. Prevalence of Binge Drinking* in the Past 30 Days



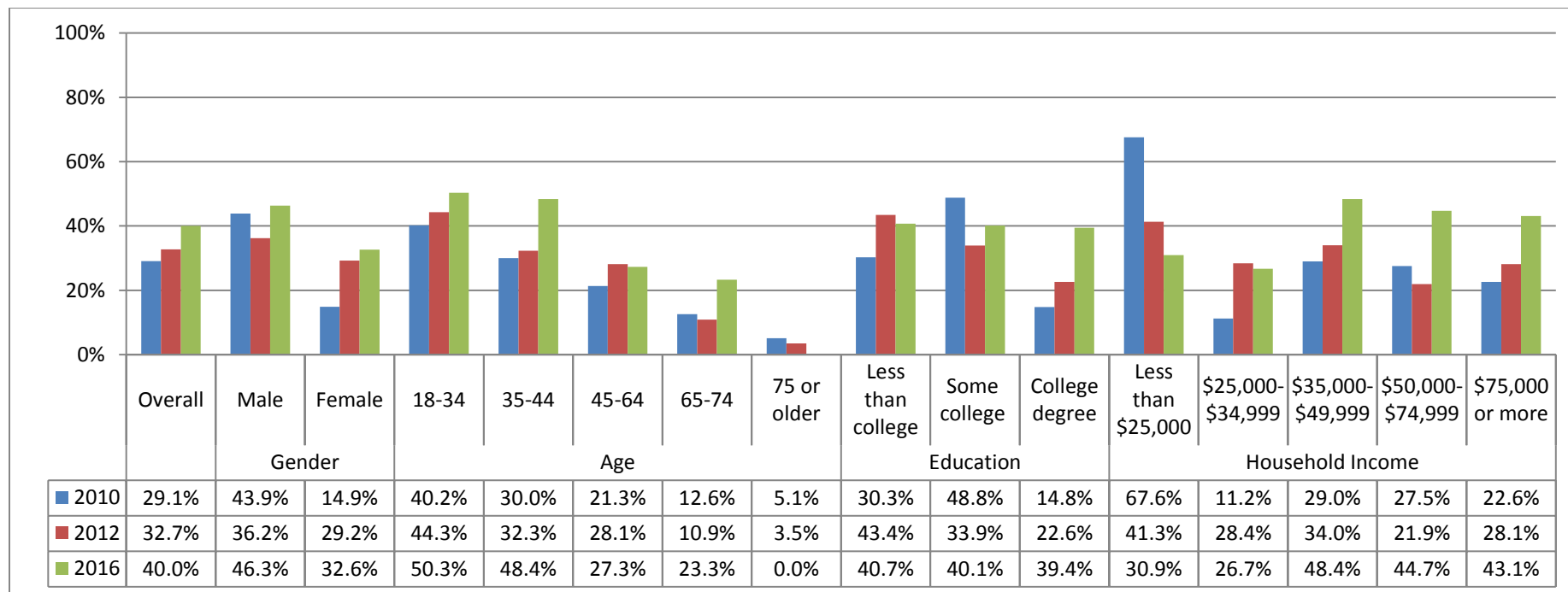
*Defined as five drinks for males, four drinks for females in one sitting

Table 29	Prevalence of Binge Drinking* in the Past 30 Days		
	2010	2012	2016
	16.1%	18.0%	24.6%

*Defined as five drinks for males, four drinks for females in one sitting

Among respondents who used alcohol in the past 30 days, 40.0% reported binge drinking in the past 30 days in 2016. Male alcohol users were more likely than female alcohol users to engage in binge drinking. There is a strong correlation between age and binge drinking among alcohol users, with older alcohol users appearing to have more responsible drinking behaviors. Alcohol users with higher household incomes were more likely to engage in binge drinking (Figure 35, Table 30).

Figure 35. Prevalence of Binge Drinking* among Alcohol Users in the Past 30 Days



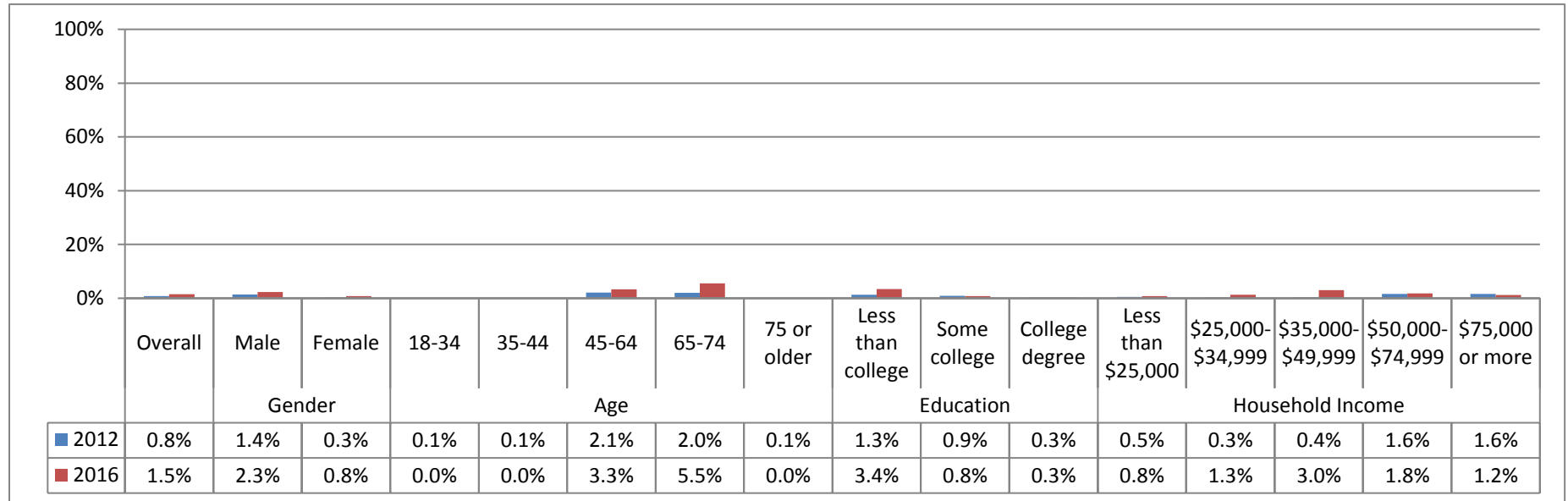
*Defined as five drinks for males, four drinks for females in one sitting

Table 30	Prevalence of Binge Drinking* among the Alcohol Users in the Past 30 Days		
	2010	2012	2016
	29.1%	32.7%	40.0%

*Defined as five drinks for males, four drinks for females in one sitting

Heavy drinking (defined as more than two drinks for males and more than one for females per day on average) was reported more in males (2.3%) as compared to females (0.8%). Respondents in the age group of 65-74 reported the highest percentage of prevalence of heavy drinking (5.5%) (Figure 36, Table 31).

Figure 36. Prevalence of Heavy Drinking* in the Past 30 Days



*Defined as more than two drinks for males, more than one for females, per day on average

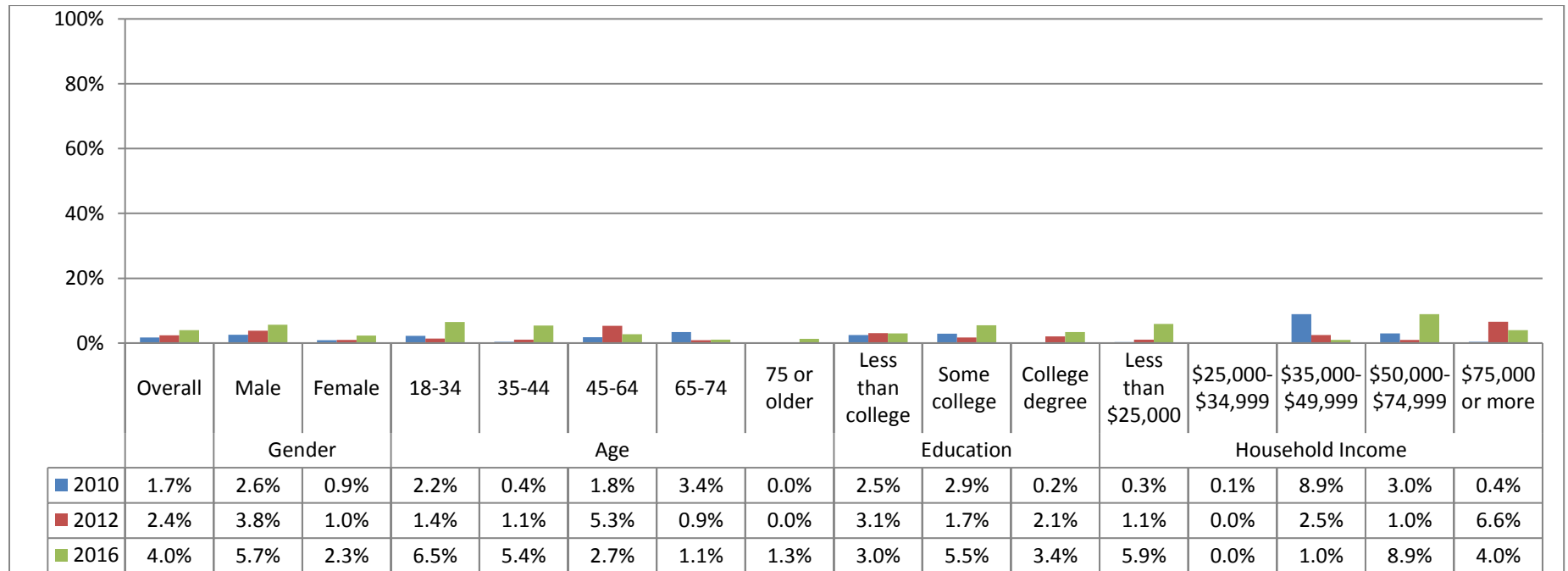
Table 31	State Comparison – Prevalence of Heavy Drinking* in the Past 30 Days		
	Buffalo County (2012)	Buffalo County (2016)	Nebraska (2015)
	.08%	1.5%	5.7%

*Defined as more than two drinks for males, more than one for females, per day on average

Drinking and Driving

Drinking and driving was reported by 4.0% of 2016 respondents. Among 2016 respondents, drinking and driving was highest among the 18-34 year old age group and/or those who made \$50,000 to \$74,999. (Figure 37, Table 32).

Figure 37. Prevalence of Drinking and Driving* in the Past 30 Days



*Percentage who reported driving after “having perhaps too much to drink.”

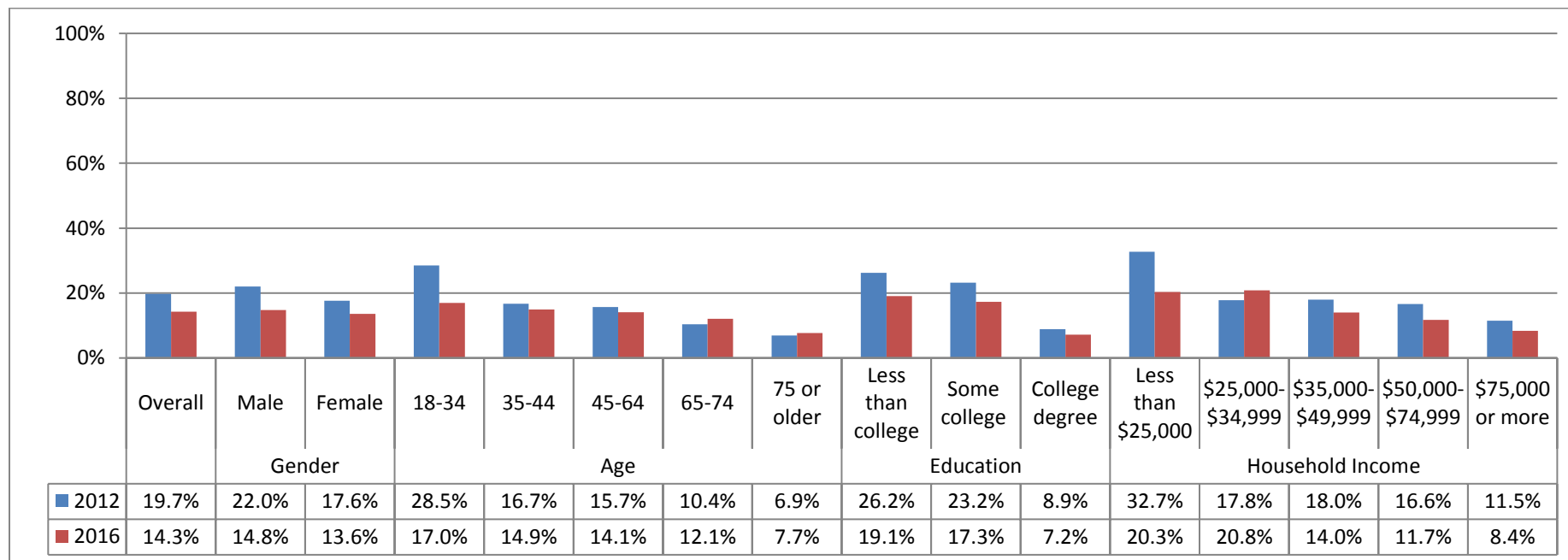
Table 32	Prevalence of Drinking and Driving* in the Past 30 Days		
	2010	2012	2016
	1.7%	2.4%	4.0%

*Percentage who reported driving after “having perhaps too much to drink.”

Tobacco Use

In 2016, 14.3% respondents reported that they smoke cigarettes every day or some days. Smoking decreases with age, education, and household income (Figure 38, Table 33).

Figure 38. Prevalence of Cigarette Smoking*



*Includes those who report smoking “every day” and “some days.”

Table 33	Cigarette Smoking Prevalence		
	Smoke every day	Smoke some days	All smokers*
2012	14.0%	5.7%	19.7%
2016	9.9%	4.4%	14.3%

*Includes those who report smoking “every day” and “some days.”

Among current smokers, over 70% in 2010, over 60% in 2012 and above 56% reported that they made an effort to quit smoking (Table 34).

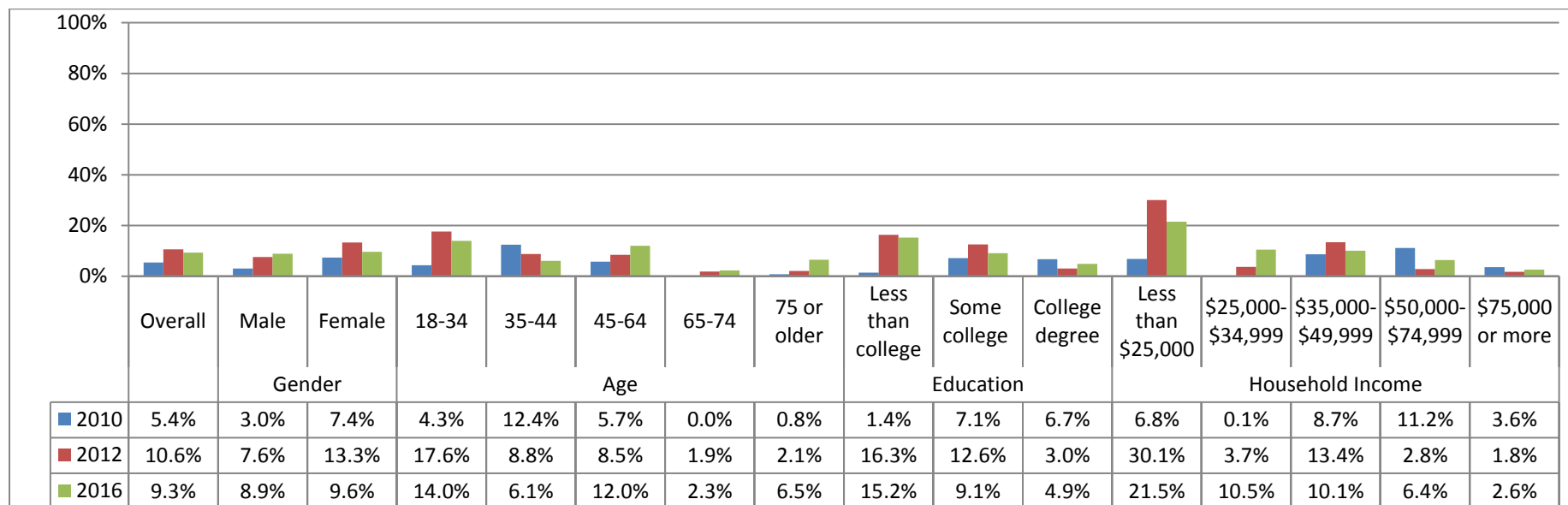
Table 34	Attempted to Stop Smoking for One Day or longer in an Attempt to Quit Smoking in the Past Year among Current Smokers	
	2010	72.5%
	2012	62.0%
	2016	56.9%

Note: Sample size too small to present demographic breakdowns.

Social Context

In 2016, 9.3% respondents reported being always or usually stressed about paying their rent or mortgage in the past 12 months, which was a decrease from the 10.6% of 2012. In 2016, younger respondents and those with a household income of less than \$25,000 reported the highest rates of stress about paying their rent or mortgage in the past 12 months (Figure 39, Table 35).

Figure 39. Always or Usually Stressed about Paying Their Rent or Mortgage in the Past 12 Months*

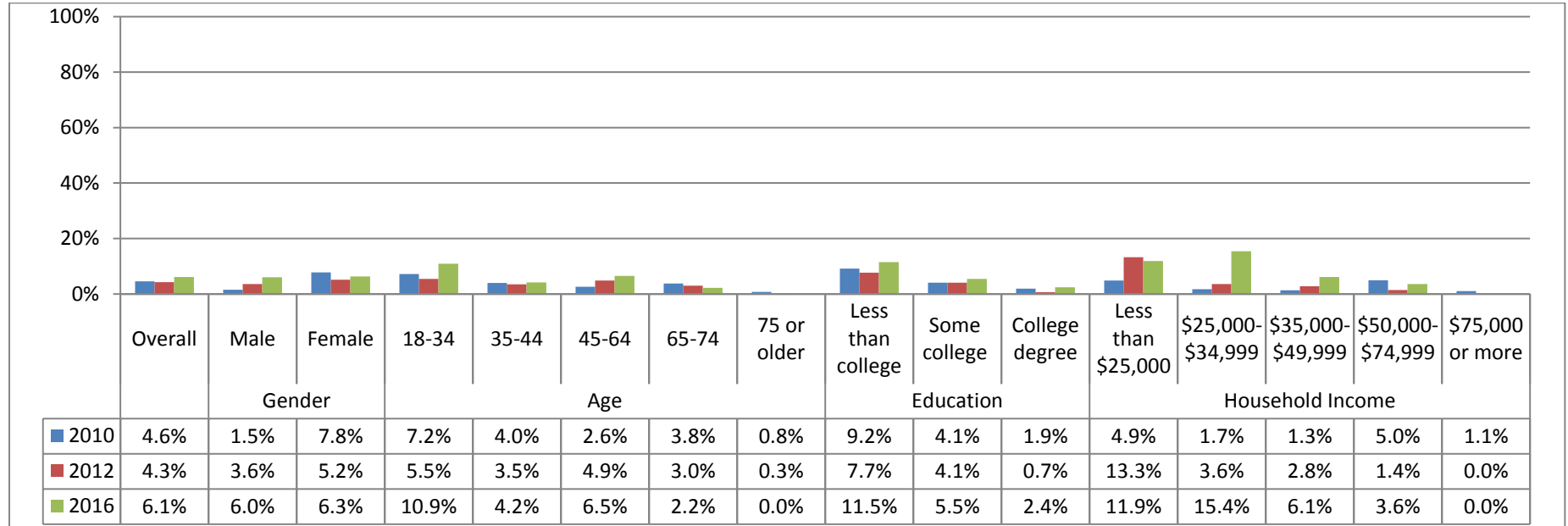


*Response options: always, usually, sometimes, rarely, never

Table 35		Stressed about Paying Rent or Mortgage in the Past 12 Months				
		Always	Usually	Sometimes	Rarely	Never
2010		2.4%	3.0%	8.7%	14.3%	71.7%
2012		5.1%	5.5%	18.6%	19.2%	51.6%
2016		4.3%	5.0%	11.9%	18.2%	60.6%

Above 6.1% of respondents reported being always or usually stressed about having enough money to buy nutritious food in the past 12 months in 2016 as compared to last two survey administrations (2010 and 2012). Among 2016 respondents, those with household income of \$25,000-\$34,999 reported the highest rates of being stressed about having enough money to buy nutritious food (Figure 40, Table 36).

Figure 40. Always or Usually Stressed about Having Enough Money to Buy Nutritious Food in the Past 12 Months*



*Response options: always, usually, sometimes, rarely, never

Table 36	Stressed about Having Enough Money to Buy Nutritious Food in the Past 12 Months				
	Always	Usually	Sometimes	Rarely	Never
2010	2.8%	1.8%	9.1%	9.8%	76.4%
2012	2.0%	2.3%	13.8%	13.9%	67.9%
2016	2.4%	3.7%	8.8%	13.6%	71.5%

Tables of 2016 Buffalo County BRFSS Results

Section 1: Health Status

Table 37	Would you say that in general your health is...?				
Excellent	Very Good	Good	Fair	Poor	
16.8%	40.0%	30.5%	9.4%	3.1%	

Section 2: Healthy Days – Health Related Quality of Life

Table 38	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?		
0 Days	1-9 Days	10 or More Days	
64.9%	23.7%	11.4%	

Table 39	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?		
0 Days	1-9 Days	10 or More Days	
63.0%	23.8%	13.3%	

Table 40	During the past 30 days, for how many days did poor physical or mental health keep you from doing your usual activities, such as self-care, work, or recreation?		
0 Days	1-9 Days	10 or More Days	
65.4%	23.5%	11.1%	

Section 3: Health Care Access

Table 41	Do you have any kind of health care coverage, including health insurance, prepaid plans such as HMOs, government plans such as Medicare, or Indian Health Service?	
Yes	No	
89.0%	11.0%	

Table 42	Do you have one person you think of as your personal doctor or health care provider?	
Yes	No	
77.5%	22.5%	

Table 43	Was there a time in the past 12 months when you needed to see a doctor but could not because of cost?	
	Yes	No
	10.2%	89.8%

Table 44	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.				
Within past year	Within past 2 years	Within past 5 years	5 or more years ago	Never	
74.1%	8.4%	10.6%	6.4%	0.4%	

Section 4: Exercise

Table 45	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?	
	Yes	No
	75.3%	24.8%

Table 46	On an average day, how many hours do you play video or computer games or use a computer for something that is not school or work?(Count time spent on things such as Xbox, PlayStation, an iPod, an iPad or other tablet, a smartphone, YouTube, Facebook or other social networking tools, and the Internet.)						
I do not play video or computer games or use a computer for something that is not school or work	Less than 1 hour per day	1 hour per day	2 hours per day	3 hours per day	4 hours per day	5 or more hours per day	
27.1%	19.1%	20.3%	19.0%	5.8%	2.7%	6.0%	

Section 5: Chronic Health Conditions

Has a doctor, nurse, or other health professional ever told you that you had any of the following?

Table 47	(Ever told) you that you had a heart attack also called a myocardial infarction?	
	Yes	No
	4.6%	95.5%

Table 48	(Ever told) you had angina or coronary heart disease?	
	Yes	No
	6.1%	93.9%

Table 49	(Ever told) you had a stroke?	
	Yes	No
	1.9%	98.1%

Table 50	(Ever told) you had asthma?	
	Yes	No
	14.2%	85.8%

Table 51	Do you still have asthma?	
	Yes	No
	74.1%	25.9%

Table 52	(Ever told) you had skin cancer?	
	Yes	No
	6.9%	93.1%

Table 53	(Ever told) you had any other types of cancer?	
	Yes	No
	6.4%	93.6%

Table 54	(Ever told) you have chronic obstructive pulmonary disease (COPD), emphysema, or chronic bronchitis?	
	Yes	No
	4.3%	95.7%

Table 55	(Ever told) you have some form of arthritis, rheumatoid arthritis, gout, lupus, or fibromyalgia?	
	Yes	No
	21.2%	78.8%

Table 56	(Ever told) you have a depressive disorder (including depression, major depression, dysthymia, or minor depression)?	
	Yes	No
	14.0%	86.0%

Table 57	(Ever told) you have kidney disease? Do NOT include kidney stones, bladder infection or incontinence.	
	Yes	No
	2.3%	97.7%

Table 58	Are you blind or do you have serious difficulty seeing, even when wearing glasses?	
	Yes	No
	4.6%	95.4%

Table 59	(Ever told) you have diabetes?			
	Yes	Yes, but female told only during pregnancy	No	No, pre-diabetes or borderline diabetes
	8.4%	0.7%	89.8%	1.1%

Table 60	How old were you when you were told you have diabetes?					
	Less than 18 years	18-34	35-44	45-64	65-74	75 or older
	6.5%	7.4%	16.1%	44.3%	15.5%	10.2%

Section 7: Demographics

Table 61	What is your age?				
	18-34	35-44	45-64	65-74	75 or older
	32.2%	21.8%	24.0%	11.8%	10.2%

Table 62	Are you Hispanic or Latino?	
	Yes	No
	6.4%	93.6%

Table 63	Which one of these groups would you say best represents your race?					
White	Black or African American	Asian	Native Hawaiian or Other Pacific Islander	American Indian or Alaskan Native	Other	
94.0%	1.2%	.08%	0.0%	0.0%	3.9%	

Table 64	Are you married, divorced, widowed, separated, never married, or a member of an unmarried couple?					
Married	Divorced	Widowed	Separated	Never married	A member of an unmarried couple	
54.7%	8.9%	7.1%	2.6%	20.6%	6.0%	

Table 65	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?	
	Yes	No
	10.6%	89.4%

Table 66	What is the highest grade or year of school you completed?		
	Less than college	Some college	College degree
	30.0%	32.7%	37.3%

Table 67	Are you currently...?							
Employed for wages	Self-employed	Out of work for more than 1 year	Out of work for less than 1 year	A homemaker	A student	Retired	Unable to work	
57.9%	7.7%	1.1%	2.2%	3.5%	4.9%	19.3%	3.4%	

Table 68	Household Income			
Less than \$25,000	\$25,000-\$34,999	\$35,000-\$49,000	\$50,000-\$74,999	\$75,000 or more
18.0%	11.8%	15.2%	17.0%	38.0%

Table 69	Have you used the internet in the past 30 days?	
	Yes	No
	87.7%	12.3%

Table 70	How many children less than 18 years of age live in your household?			
	None	1-2	3-4	More than 4
	62.4%	27.2%	9.7%	0.6%

Table 71	Body Mass Index (calculated from height and weight given by respondent)			
	Underweight (less than 18.5)	Normal Weight (18.5 to 24.9)	Overweight (25 to 29.9)	Obese (30.0 or more)
	1.8%	34.3%	33.9%	30.1%

Table 72	Do you own or rent a home?		
	Own	Rent	Other Arrangement
	67.7%	27.7%	4.6%

Table 73	Gender	
	Male	Female
	49.2%	50.8%

Table 74	To your knowledge, are you now pregnant?	
	Yes	No
	2.3%	97.6%

Table 75	Are you limited in any way in any activities because of physical, mental, or emotional problems?	
	Yes	No
	18.4%	81.6%

Table 76	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?	
	Yes	No
	7.4%	92.6%

Table 77	Because of a physical, mental, or emotional condition, do you have serious difficulty concentrating, remembering, or making decisions?	
	Yes	No
	10.1%	89.9%

Table 78	Do you have serious difficulty walking or climbing stairs?	
	Yes	No
	13.9%	86.1%

Table 79	Do you have difficulty dressing or bathing?	
	Yes	No
	1.9%	98.1%

Table 80	Because of a physical, mental, or emotional condition, do you have difficulty doing errands alone such as visiting a doctor's office or shopping?	
	Yes	No
	3.4%	96.6%

Section 9: Tobacco Use

Table 81	Have you smoked at least 100 cigarettes in your entire life	
	Yes	No
	38.0%	62.0%

Table 82	Do you now smoke cigarettes every day, some days, or not at all?		
	Every day	Some Days	Not at all
	9.9%	4.4%	85.7%

Table 83	During the past 12 months, have you stopped smoking for one day or longer because you were trying to quit smoking?	
	Yes	No
	56.9%	43.1%

Table 84	How long has it been since you last smoked a cigarette?						
	Within the past month	Within the past 3 months	Within the past 6 months	Within the past year	Within the past 5 years	Within the past 10 years	10 years or more
	0.6%	2.2%	4.5%	3.5%	24.6%	9.9%	54.7%

Table 85	Do you currently use chewing tobacco, snuff, or snus every day, some days, or not at all?		
	Every day	Some Days	Not at all
	4.6%	1.4%	93.7%

Table 86	Have you ever used an e-cigarette or other electronic “vaping” product, even just one time, in your entire life?	
	Yes	No
	21.5%	78.5%

Table 87	Do you now use e-cigarettes or other electronic “vaping” products every day, some days, or not at all?		
	Every day	Some days	Not at all
	7.6%	11.6%	80.7%

Section 10: Alcohol Use

Table 88	During the past 30 days, how many days per week or per month did you have at least one drink of an alcoholic beverage such as beer, wine, a malt beverage, or liquor?		
	Every day	Some Days	Not at all
	3.0%	59.4%	37.6%

Table 89	During the past 30 days, what is the largest number of drinks you had on any occasion?		
	1-2 drinks	3-4 drinks	More Than 4 drinks
	44.7%	20.8%	34.5%

Table 90	During the past 30 days, on the days when you drank, about how many drinks did you drink on average?		
	1-2 drinks	3-4 drinks	More than 4 drinks
	66.8%	20.1%	13.1%

Table 91	How many times during the past 30 days did you have (5 drinks for men, 4 for women) or more on an occasion?	
	Yes	No
	24.6%	75.4%

Section 13: Seatbelt Use

Table 92	How often do you use seat belts when you drive or ride in a car?					
	Always	Nearly Always	Sometimes	Seldom	Never	Never drive or ride in a car
	69.8%	14.5%	5.9%	5.4%	4.0%	0.4%

Section 14: Drinking and Driving

Table 93	During the past 30 days, how many times have you driven when you've had perhaps too much to drink?	
	None	Once or More
	93.2%	6.4%

Section 15: Healthy Days

Table 94	During the past 30 days, for about how many days did pain make it hard for you to do your usual activities, such as self-care, work, or recreation?		
	0 Days	1-9 Days	10 or More Days
	78.7%	12.1%	9.3%

Table 95	During the past 30 days, for about how many days have you felt sad, blue, or depressed?		
	0 Days	1-9 Days	10 or More Days
	63.0%	24.1%	13.0%

Table 96	During the past 30 days, for about how many days have you felt worried, tense, or anxious?		
	0 Days	1-9 Days	10 or More Days
	46.1%	33.1%	20.8%

Table 97	During the past 30 days, for about how many days have you felt very healthy and full of energy??		
	0 Days	1-9 Days	10 or More Days
	10.4%	9.8%	79.8%

Section 16: HIV/AIDS

Table 98	Have you used intravenous drugs in the past year, been treated for a sexually transmitted or venereal disease in the past year, given or received money or drugs in exchange for sex in the past year, or had anal sex without a condom in the past year?	
	Yes	No
	6.1%	93.8%

Section 17: Pre-Diabetes

Table 99	Have you had a test for high blood sugar or diabetes within the past three years?	
	Yes	No
	51.2%	48.8%

Table 100	Have you ever been told by a doctor or other health professional that you have pre-diabetes or borderline diabetes?		
	Yes	Yes, during pregnancy	No
	6.5%	0.8%	92.7%

Section 18: Sugar Sweetened Beverages and Menu Labeling

Table 101	During the past 30 days, how often did you drink regular soda or pop that contains sugar? Do not include diet soda or diet pop.				
	0 Days	1-9 Days	10-19 Days	20-29 Days	Every day
	35.5%	30.5%	9.5%	4.5%	20.0%

Table 102	During the past 30 days, how often did you drink sugar sweetened fruit drinks (such as, Kool-aid and lemonade), sweet tea, and sports or energy drinks?				
	0 Days	1-9 Days	10-19 Days	20-29 Days	Every day
	52.4%	27.4%	8.5%	2.9%	8.8%

Table 103	When calorie information is available in the restaurant, how often does this information help you decide what to order?				
Always	Most of the time	About half the time	Sometimes	Never	
5.7%	13.1%	12.3%	18.2%	50.7%	

Section 19: Fruits and Vegetables

Table 104	During the past month, how many times per day, week, or month* did you drink 100% PURE fruit juices? Do not include fruit-flavored drinks with added sugar or fruit juice you made at home and added sugar to. Only include 100% juice.				
0 Days	1-9 Days	10-19 Days	20-29 Days	Every day	
53.1%	12.8%	8.2%	0.0%	25.9%	

Table 105	During the past month, how many times per day, week, or month* did you eat fruit? Count fresh, frozen, or canned fruit.				
0 Days	1-9 Days	10-19 Days	20-29 Days	Every day	
4.9%	17.9%	21.9%	12.0%	43.3%	

Table 106	During the past month, how many times per day, week, or month* did you eat cooked or canned beans, such as refried, baked, black, garbanzo beans, beans in soup, soybeans, edamame, tofu, or lentils? Do not include long green beans.				
0 Days	1-9 Days	10-19 Days	20-29 Days	Every day	
18.1%	51.7%	21.8%	4.0%	4.3%	

Table 107	During the past month, how many times per day, week, or month* did you eat dark green vegetables, for example broccoli or dark leafy greens including romaine, chard, collard greens, or spinach?				
0 Days	1-9 Days	10-19 Days	20-29 Days	Every day	
9.4%	34.2%	27.8%	12.8%	15.8%	

Table 108	During the past month, how many times per day, week, or month did you eat orange-colored vegetables such as sweet potatoes, pumpkin, winter squash, or carrots?				
	0 Days	1-9 Days	10-19 Days	20-29 Days	Every day
	16.4%	56.0%	16.9%	4.4%	6.4%

Table 109	During the past month, how many times per day, week, or month did you eat other vegetables? Examples of other vegetables include tomatoes, tomato juice or V-8 juice, corn, eggplant, peas, lettuce, cabbage, and white potatoes that are not fried such as baked or mashed potatoes?				
	0 Days	1-9 Days	10-19 Days	20-29 Days	Every day
	2.5%	19.8%	22.0%	16.4%	39.4%

Section 20: Mental Illness

Table 110	During the past 30 days, about how often did you feel so depressed that nothing could cheer you up?				
	All of the time	Most of the	Some of the	A little of the	None of the time
	0.9%	1.5%	4.4%	7.8%	85.3%

Table 111	During the past 30 days, for about how many days did a mental health condition or emotional problem keep you from doing your work or other usual activities?		
	0 Days	1-9 Days	10 or More Days
	93.2%	4.9%	1.9%

Table 112	Are you now taking medicine or receiving treatment from a doctor or other health professional for any type of mental health condition or emotional problem?	
	Yes	No
	12.3%	87.7%

Section 21: Social Context

Table 113	How often in the past 12 months would you say you were worried or stressed about having enough money to pay your rent/mortgage?				
	Always	Usually	Sometimes	Rarely	Never
	4.3%	5.0%	11.9%	18.2%	60.6%

Table 114	How often in the past 12 months would you say you were worried or stressed about having enough money to buy nutritious meals?				
	Always	Usually	Sometimes	Rarely	Never
	2.4%	3.7%	8.8%	13.6%	71.4%

Table 115	How many jobs and/or businesses have you held at one time within the past year?				
	One	Two	Three	Four	Five or More
	66.0%	23.6%	8.4%	0.9%	1.1%

Table 116	At your main job or business, how are you generally paid for the work you do?*			
	Paid by salary	Paid by the hour	Paid by the job/task	Paid some other way
	39.1%	46.0%	6.3%	8.8%

*Among those who are currently employed

Table 117	About how many hours do you work per week at all of your jobs and businesses combined?*				
	1-19 Hours	20-29 Hours	30-39 Hours	40-49 Hours	50 Hours or More
	6.8%	7.4%	7.6%	52.3%	26.3%

*Among those who are currently employed

Section 22: Distracted Driving

Table 118	During the past 30 days, on how many days did you text or e-mail while driving a car or vehicle?		
	0 Days	1-9 Days	10 or More Days
	63.4%	19.9%	16.7%

Table 119	During the past 30 days, on how many days did you talk on a cell phone while driving a car or vehicle?		
	0 Days	1-9 Days	10 or More Days
	30.6%	35.1%	34.3%

Section 23: Prescription Drug Use

Table 120	In the past year, did you use any pain medications that were prescribed to you by a doctor?	
	Yes	No
	29.6%	70.5%

Table 121	The last time you filled a prescription for pain medication was there any medication leftover?	
	Yes	No
	38.5%	61.5%

Table 122	In the past year, did you use any prescription medications that were NOT prescribed to you by a doctor?	
	Yes	No
	4.2%	95.7%

Section 24: Smoking Rules

Table 123	Which statement best describes the rules about smoking inside your home?		
	Smoking is not allowed anywhere inside your home	Smoking is allowed in some places or at some times	Smoking is allowed anywhere inside the home
	92.9%	4.8%	2.3%

Table 124	Which statement best describes the rules about smoking inside your family vehicle?			
	Smoking is not allowed at any time in family vehicle	Smoking is allowed only when children 17 and younger not present	Smoking is allowed at all times in family vehicle	Do not have a car
	85.2%	9.0%	4.6%	1.2%

Section 25: Outdoor Exercise

Table 125	In an average week, on how many days do you go to local parks or recreation centers for exercise?			
	0 Days	1-2 Days	3-4 Days	5 or More Days
	52.0%	25.9%	14.1%	8.0%

Table 126	In good weather, how frequently do you use a local paved or dirt trail for walking, hiking, or biking?				
	Daily	At least weekly	At least monthly	Less than monthly	Never
	10.8%	34.6%	12.3%	7.1%	35.3%

Section 26: Healthy Literacy

Table 127	How difficult is it for you to get advice or information about health or medical topics if you need it?				
	Not at all	A little	Somewhat	Very difficult	Never tried to get advice of information
	81.5%	7.4%	6.6%	1.5%	2.9%

Table 128	How difficult is it for you to understand information that doctors, nurses and other health professionals tell you?			
	Not at all	A little	Somewhat	Very difficult
	80.8%	11.1%	7.4%	0.8%

Table 129	You can find written information about health on the Internet, in newspapers and magazines, and in brochures in the doctor's office and clinic. In general, how difficult is it for you to understand the written health information?				
	Not at all	A little	Somewhat	Very difficult	Never tried to get advice of information
	80.6%	8.7%	7.7%	0.8%	2.2%

Section 27: Caregiver

Table 130	During the past 30 days, did you provide regular care or assistance to a friend or family member who has a health problem or disability?		
	Yes	No	Caregiving recipient died in the past 30 days
	15.8%	82.8%	1.4%

Table 131	What is his or her relationship to you?	
Mother		21.3%
Father		7.8%
Mother-in-law		3.0%
Child		12.2%
Husband		8.2%
Wife		10.7%
Live in partner		1.9%
Brother or brother-in-law		1.6%
Sister or sister-in-law		5.5%
Grandmother		2.8%
Grandfather		2.0%
Other relative		5.3%
Non-relative/Family friend		17.8%

Table 132	For how long have you provided care for that person? Would you say...				
Less than 30 days	1 Month to less than 6 months	6 months to less than 2 years	2 years to less than 5 years	More than 5 years	
28.2%	10.1%	19.7%	16.1%	26.0%	

Table 133	In an average week, how many hours do you provide care or assistance?			
Up to 8 hours per week	9 to 19 hours per week	20 to 39 hours per week	40 hours or more	
59.4%	11.2%	9.9%	19.5%	

Table 134	In the past 30 days, did you provide care for this person by... Managing personal care such as giving medications, feeding, dressing, or bathing?	
	Yes	No
	46.6%	53.4%

Table 135	In the past 30 days, did you provide care for this person by... Managing household tasks such as cleaning, managing money, or preparing meals?	
	Yes	No
	67.8%	32.2%

Table 136	Of the following support services, which one do YOU most need, that you are not currently getting?					
Classes about giving care, such as giving medications	Help in getting access to services	Support groups	Individual counseling to help cope with giving care	Respite care	You don't need any of these support services	
1.8%	2.5%	3.5%	2.2%	2.3%	87.8%	

Table 137	In the next 2 years, do you expect to provide care or assistance to a friend or family member who has a health problem or disability?	
	Yes	No
	14.7%	85.3%

Table 138	During the past 12 months, have you cared for anyone who experienced confusion or memory loss that is happening more often or is getting worse?	
	Yes	No
	9.6%	90.4%

Table 139	Have you or anyone else discussed the confusion or memory loss of the person you care for with a health care professional?	
	Yes	No
	63.9%	36.1%

Table 140	What is the main health problem, long-term illness, or disability that the person you care for has?	
	Arthritis/Rheumatism	7.2%
	Cancer	7.6%
	Chronic respiratory conditions such as Emphysema or COPD	3.4%
	Dementia or other Cognitive Impairment Disorders	7.0%
	Developmental Disabilities such as Autism, Down's Syndrome, and Spina Bifida	1.2%
	Diabetes	4.3%
	Heart Disease, Hypertension, Stroke	3.7%
	Mental Illness, such as Anxiety, Depression, or Schizophrenia	11.5%
	Other organ failure or diseases such as kidney or liver problems	3.9%
	Injuries, including broken bones	8.2%
	Old age/infirmity/frailty	19.8%
	Other	22.2%

Section 28: Marijuana Use

Table 141	During the past 30 days, on how many days did you use marijuana or hashish?			
	None	Less than 10 days	10-19 days	20 or more days
	93.4%	3.3%	1.1%	2.2%

During the past 30 days, how did you use marijuana?

Table 142	Did you... Smoke it?	
	Yes	No
	88.1%	11.9%

Table 143	Did you... Eat it?	
	Yes	No
	29.3%	70.7%

Table 144	Did you... Drink it?	
	Yes	No
	0.0%	100.0%

Table 145	Did you... Vaporize it?	
	Yes	No
	18.2%	81.8%

Table 146	Did you... Dab it?	
	Yes	No
	20.3%	79.7%

Table 147	Was it used in some other way?	
	Yes	No
	4.9%	95.1%

Section 29: Sexual Orientation and Gender Identity

Table 148	Do you consider yourself to be:			
	Straight	Lesbian or gay	Bisexual	Other
	96.3%	2.0%	1.5%	0.2%

Table 149	Do you consider yourself to be transgender?	
	Yes	No
	0.0%	99.9%

Section 30: End of Life

Table 150	Do you have a written plan or have you shared your end-of-life preferences with your doctor?	
	Yes	No
	19.8%	80.2%

Table 151	Do you have a written plan or have you shared your end-of-life preferences with a family member/s?	
	Yes	No
	48.4%	51.6%

Appendices

Appendix A: Survey Instrument

Landline

5: INT01

ID: <PIN> PHONE:\$N

Hello, this is \$I calling from the UNL Research Center. We are gathering information, on behalf of the Buffalo County Community Partners and the Center for Disease Control and Prevention, about the state of health of Buffalo County residents. Data we collect will be used to better assess the health needs of Buffalo County. This is important because, while we already collect data statewide, we would like to understand how Buffalo County differs from other parts of the state like Lincoln and Omaha. Your telephone number has been chosen randomly, and I would like to ask some questions about health and health practices.

CONTINUE 01

br

DEFINITE CALLBACK CD

INDEFINITE CALLBACK CI

REFUSAL-HANG UP RU

REFUSAL-HOUSEHOLD LEVEL RH

6: INT02

ID: <PIN> PHONE:\$N

Is this \$N?

YES 01

NO 05

br

DEFINITE CALLBACK CD

INDEFINITE CALLBACK CI

REFUSAL-HANG UP RU

REFUSAL-HOUSEHOLD LEVEL RH

7: INT03

ID: <PIN> PHONE:\$N

Is this a private residence?

READ ONLY IF NECESSARY: "By private residence, we mean someplace like a house or apartment."

YES 01

NO 02

NO, BUSINESS PHONE ONLY 03

br

DEFINITE CALLBACK CD

INDEFINITE CALLBACK CI

REFUSAL-HANG UP RU

REFUSAL-HOUSEHOLD LEVEL RH

8: INT04

ID: <PIN> PHONE:\$N

Do you live in college housing?

READ ONLY IF NECESSARY: ``By college housing we mean dormitory, graduate student or visiting faculty housing, or other housing arrangement provided by a college or university.``

YES 01

NO 05

br

DEFINITE CALLBACK CD

INDEFINITE CALLBACK CI

REFUSAL-HANG UP RU

REFUSAL-HOUSEHOLD LEVEL RH

9: INT05

ID: <PIN> PHONE:\$N

Do you reside in Buffalo County?

YES 01

NO 05

br

DEFINITE CALLBACK CD

INDEFINITE CALLBACK CI

REFUSAL-HANG UP RU

REFUSAL-HOUSEHOLD LEVEL RH

10: INT06

ID: <PIN> PHONE:\$N

Is this a cellular telephone?

INTERVIEWER NOTE: Telephone service over the internet counts as landline service (includes Vonage, Magic Jack and other home-based phone services).Read only if necessary: ``By cellular (or cell) telephone we mean a telephone that is mobile and usable outside of your neighborhood.``

YES 01

NO 05

br

DEFINITE CALLBACK CD

INDEFINITE CALLBACK CI

REFUSAL-HANG UP RU

REFUSAL-HOUSEHOLD LEVEL RH

11: INT07

ID: <PIN> PHONE:\$N

Are you 18 years of age or older?

YES, RESPONDENT IS MALE 01

YES, RESPONDENT IS FEMALE 02

NO 03

br

DEFINITE CALLBACK CD
INDEFINITE CALLBACK CI
REFUSAL-HANG UP RU
REFUSAL-HOUSEHOLD LEVEL RH

12: NUMADULT

ID: <PIN> PHONE:\$N

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?

INTERVEIWER: ENTER "6" IF THE NUMBER IS MORE THAN 6.

13: RSEL01

ID: <PIN> PHONE:\$N

Are you the adult?

YES 1

NO 5

14: RSEL02

ID: <PIN> PHONE:\$N

_\$RECALL(RECALL="Then you are the person I need to speak with.", CONDITION="RSEL01=1")

_\$RECALL(RECALL="Is the adult a man or a woman?", CONDITION="RSEL01=5")

_\$RECALL(RECALL="ASK GENDER IF NECESSARY.", CONDITION="RSEL01=1")

RESPONDENT IS MALE 1

RESPONDENT IS FEMALE 2

15: INT10

ID: <PIN> PHONE:\$N

May I speak with _\$Recall (RECALL="him", CONDITION="rsel02=1") _\$Recall (RECALL="her",
CONDITION="rsel02=2") ?

YES 01

br

DEFINITE CALLBACK CD

INDEFINITE CALLBACK CI

REFUSAL-HANG UP RU

REFUSAL-HOUSEHOLD LEVEL RH

REFUSAL-SELECTED RESPONDENT RR

16: RAND2

17: RAND3

18: RAND4

19: RAND5

20: RAND6

21: RANDNUM

ID: <PIN> PHONE:\$N

INTERVIEWER: ENTER THIS NUMBER IN THE FIELD BELOW_\$Recall (RECALL=<RAND2>, CONDITION="NUMADULT==2")_\$Recall (RECALL=<RAND3>, CONDITION="NUMADULT==3")_\$Recall (RECALL=<RAND4>, CONDITION="NUMADULT==4")_\$Recall (RECALL=<RAND5>, CONDITION="NUMADULT==5")_\$Recall (RECALL=<RAND6>, CONDITION="NUMADULT>5")

22: NUMMEN

ID: <PIN> PHONE:\$N

How many of these adults are men and how many are women?

ENTER NUMBER OF MEN BELOW ENTER "6" IF NUMBER IS MORE THAN 6.

23: NUMWO

24: RSEL03

ID: <PIN> PHONE:\$N

The person in your household that I need to speak with is the
[RANDOMLY SELECTED ADULT HOUSEHOLD MEMBER]

SELECTED R IS CURRENTLY ON THE PHONE 1

SELECTED R IS NOT CURRENTLY ON THE PHONE 5

25: INT08

ID: <PIN> PHONE:\$N

HELLO, I am calling for the Buffalo County Community Partners. My name is \$I. We are gathering information about the state of health of Buffalo County 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.

CONTINUE 01

br

DEFINITE CALLBACK CD

INDEFINITE CALLBACK CI

REFUSAL-HANG UP RU

REFUSAL-HOUSEHOLD LEVEL RH

REFUSAL-SELECTED RESPONDENT RR

26: INT09

ID: <PIN> PHONE:\$N

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. If you have any questions about the survey, please call 308-865-2284.

CONTINUE 01

br

DEFINITE CALLBACK CD

INDEFINITE CALLBACK CI

REFUSAL-HANG UP RU

REFUSAL-HOUSEHOLD LEVEL RH

REFUSAL-SELECTED RESPONDENT RR

27: S1Q1

Would you say that in general your health is...

Excellent 1

Very good 2

Good 3

Fair 4

or Poor 5

br

DON'T KNOW/NOT SURE 8

REFUSED 9

28: 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?

ENTER 1-30, CODE "77" IF R ANSWER 0.

NONE 77

DON'T KNOW/NOT SURE 88

REFUSED 99

29: 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?

ENTER 1-30, CODE "77" IF R ANSWER 0.

NONE 77

DON'T KNOW/NOT SURE 88

REFUSED 99

30: 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?

ENTER 1-30, CODE "77" IF R ANSWER 0.

NONE 77
DON'T KNOW/NOT SURE 88
REFUSED 99

31: S3Q1

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

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

32: M4Q1

Do you have Medicare?

Note: Medicare is a coverage plan for people age 65 or over and for certain disabled people.

YES 1
NO 5
DON'T KNOW 8
REFUSED 9

33: M4Q2

What is the primary source of your health care coverage? Is it...

INTERVIEWER NOTE: If the respondent indicates that they purchased health insurance through the Health Insurance Marketplace (name of state Marketplace), ask if it was a private health insurance plan purchased on their own or by a family member (private) or if they received Medicaid (state plan)? If purchased on their own (or by a family member), select 02, if Medicaid select 04.

A plan purchased through an employer or union (includes plans purchased through another person's employer) 01

A plan that you or another family member buys on your own 02

Medicare 03

Medicaid or other state program 04

TRICARE (formerly CHAMPUS), VA, or Military 05

Alaska Native, Indian Health Service, Tribal Health Services 06

or Some other source 07

None (no coverage) 08

br

DON'T KNOW/NOT SURE 88
REFUSED 99

34: S3Q2

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

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

YES, ONLY ONE 1

MORE THAN ONE 2
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

35: S3Q3

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

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

36: M4Q3

Other than cost, there are many other reasons people delay getting needed medical care. Have you delayed getting needed medical care for any of the following reasons in the past 12 months? Select the most important reason.

You couldn't get through on the telephone. 1
You couldn't get an appointment soon enough. 2
Once you got there, you had to wait too long to see the doctor. 3
The (clinic/doctor's) office wasn't open when you got there. 4
You didn't have transportation. 5
br
OTHER (SPECIFY) 6
NO, I DID NOT DELAY GETTING MEDICAL CARE/DID NOT NEED MEDICAL CARE 7

DON'T KNOW/NOT SURE 8
REFUSED 9

37: 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. Would you say...

Within the past year (anytime less than 12 months ago) 1
Within the past 2 years (1 year but less than 2 years ago) 2
Within the past 5 years (2 years but less than 5 years ago) 3
or 5 or more years ago 4

br
NEVER 7
DON'T KNOW/NOT SURE 8
REFUSED 9

38: M4Q4A

In the PAST 12 MONTHS was there any time when you did NOT have ANY health insurance or coverage?

YES 1

NO 5
DON'T KNOW 8
REFUSED 9

39: M4Q4B

About how long has it been since you last had health care coverage?

6 months or less 1
More than 6 months, but not more than 1 year ago 2
More than 1 year, but not more than 3 years ago 3
More than 3 years 4
Never 5
br
DON'T KNOW/NOT SURE 8
REFUSED 9

40: M4Q5

How many times have you been to a doctor, nurse, or other health professional in the past 12 months?
INTERVIEWER: CODE "77" IF R ANSWER NONE

NONE 777
DON'T KNOW/NOT SURE 888
REFUSED 999

41: M4Q6

Not including over the counter (OTC) medications, was there a time in the past 12 months when you did not take your medication as prescribed because of cost?

YES 1
NO 5
br
NO MEDICATION WAS PERSCRIBED 7
DON'T KNOW/NOT SURE 8
REFUSED 9

42: M4Q7

In general, how satisfied are you with the health care you received? Would you say...

Very satisfied 1
Somewhat satisfied 2
Not at all satisfied 3
br
NOT APPLICABLE 7
DON'T KNOW/NOT SURE 8
REFUSED 9

43: M4Q8

Do you currently have any health care bills that are being paid off over time?

INTERVIEWER NOTE: This could include medical bills being paid off with a credit card, through personal loans, or bill paying arrangements with hospitals or other providers. The bills can be from earlier years as well as this year. INTERVIEWER NOTE: Health care bills can include medical, dental, physical therapy and/or chiropractic cost.

YES 1
NO 5
DON'T KNOW 8
REFUSED 9

44: S4Q1

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?

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

45: S4Q2

On an average day, how many hours do you play video or computer games or use a computer for something that is not school or work? (Count time spent on things such as Xbox, PlayStation, an iPod, an iPad or other tablet, a smartphone, YouTube, Facebook or other social networking tools, and the Internet.)

I do not play video or computer games or use a computer for something that is not school or work
01

Less than 1 hour per day 02
1 hour per day 03
2 hours per day 04
3 hours per day 05
4 hours per day 06
5 or more hours per day 07
br
DON'T KNOW/NOT SURE 88
REFUSED 99

46: S6Q1

Now I would like to ask you some questions about general health conditions. Has a doctor, nurse, or other health professional EVER told you that you had any of the following? For each, tell me "Yes," "No," or you're "Not sure." (Ever told) you that you had a heart attack also called a myocardial infarction?

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

47: S6Q2

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

YES	1	
NO	5	
DON'T KNOW/NOT SURE		8
REFUSED	9	

48: S6Q3

(Ever told) you had a stroke?

YES	1	
NO	5	
DON'T KNOW/NOT SURE		8
REFUSED	9	

49: S6Q4

(Ever told) you had asthma?

YES	1	
NO	5	
DON'T KNOW/NOT SURE		8
REFUSED	9	

50: S6Q5

Do you still have asthma?

YES	1	
NO	5	
DON'T KNOW/NOT SURE		8
REFUSED	9	

51: S6Q6

(Ever told) you had skin cancer?

YES	1	
NO	5	
DON'T KNOW/NOT SURE		8
REFUSED	9	

52: S6Q7

(Ever told) you had any other types of cancer?

YES	1	
NO	5	
DON'T KNOW/NOT SURE		8
REFUSED	9	

53: S6Q8

(Ever told) you have Chronic Obstructive Pulmonary Disease (COPD), emphysema or chronic bronchitis?

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

54: S6Q9

(Ever told) you have some form of arthritis, rheumatoid arthritis, gout, lupus, or fibromyalgia?

INTERVIEWER NOTE: Arthritis diagnoses include: • rheumatism, polymyalgia rheumatica • osteoarthritis (not osteoporosis) • tendonitis, bursitis, bunion, tennis elbow • carpal tunnel syndrome, tarsal tunnel syndrome • joint infection, Reiter's syndrome • ankylosing spondylitis; spondylosis • rotator cuff syndrome • connective tissue disease, scleroderma, polymyositis, Raynaud's syndrome • vasculitis (giant cell arteritis, Henoch-Schonlein purpura, Wegener's granulomatosis, polyarteritis nodosa)

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

55: S6Q10

(Ever told) you have a depressive disorder (including depression, major depression, dysthymia, or minor depression)?

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

56: S6Q11

(Ever told) you have kidney disease? Do NOT include kidney stones, bladder infection or incontinence.

INTERVIEWER NOTE: INCONTINENCE IS NOT BEING ABLE TO CONTROL URINE FLOW.

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

57: S6Q12

(Ever told) you have diabetes?

INTERVIEWER: IF "YES" AND R IS FEMALE, ASK: "Was this only when you were pregnant?". CODE 4 IF R ANSWERS PRE-DIABETES OR BORDERLINE DIABETES.

YES 1
YES, BUT FEMALE TOLD ONLY DURING PREGNANCY 2
NO 3
NO, PRE-DIABETES OR BORDERLINE DIABETES 4
DON'T KNOW/NOT SURE 8
REFUSED 9

58: S6Q13

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

INTERVIEWER: ENTER 1-96, CODE 97 IF R ANSWERS 97 OR OLDER.

97 AND OLDER 97

DON'T KNOW/NOT SURE 98

REFUSED 99

59: M1Q1

Have you had a test for high blood sugar or diabetes within the past three years?

YES 1

NO 5

DON'T KNOW/NOT SURE 8

REFUSED 9

60: M1Q2

Have you ever been told by a doctor or other health professional that you have pre-diabetes or borderline diabetes?

INTERVIEWER: IF "YES" AND R IS FEMALE, ASK: "Was this only when you were pregnant?".

YES 1

YES, BUT FEMALE TOLD ONLY DURING PREGNANCY 2

NO 3

DON'T KNOW/NOT SURE 8

REFUSED 9

61: S8Q1

INDICATE SEX OF RESPONDENT.

ASK ONLY IF NECESSARY

MALE 1

FEMALE 5

62: S8Q2

What is your age?

INTERVIEWER: CODE AGE IN YEARS

DON'T KNOW/NOT SURE 888

REFUSED 999

63: S8Q3

Are you Hispanic, Latino/a, or Spanish origin?

INTERVIEWER: IF YES, ASK: Are you...INTERVIEWER NOTE: ONE OR MORE CATEGORIES MAY BE SELECTED.

Mexican, Mexican American, Chicano/a 1

Puerto Rican 2

Cuban 3
Another Hispanic, Latino/a, or Spanish Origin 4
br
NO 5
br
DON'T KNOW/NOT SURE 8
REFUSED 9

64: S8Q4

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

INTERVIEWER NOTE: SELECT ALL THAT APPLY

White 10
Black or African American 20
American Indian or Alaska Native 30
Asian 40
Pacific Islander 50
or Other 60
br
DON'T KNOW/NOT SURE 88
REFUSED 99

65: S8Q4A

INTERVIEWER: DID R ANSWER "ASIAN" IN THE PREVIOUS QUESTION?

YES 1
NO 5

66: S8Q4B

INTERVIEWER: DID R ANSWER "PACIFIC ISLANDER" IN THE PREVIOUS QUESTION?

YES 1
NO 5

67: S8Q4C

Are you...

INTERVIEWER NOTE: ONE OR MORE CATEGORIES MAY BE SELECTED.

Asian Indian 41
Chinese 42
Filipino 43
Japanese 44
Korean 45
Vietnamese 46
or Other Asian 47
br
DON'T KNOW/NOT SURE 88
REFUSED 99

68: S8Q4D

Are you...

INTERVIEWER NOTE: ONE OR MORE CATEGORIES MAY BE SELECTED.

Native Hawaiian	51
Guamanian or Chamorro	52
Samoan	53
or Other Pacific Islander	54
br	
DON'T KNOW/NOT SURE	88
REFUSED	99

69: S8Q5

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

White	10
Black or African American	20
American Indian or Alaska Native	30
Asian	40
Pacific Islander	50
or Other	60
br	
DON'T KNOW/NOT SURE	88
REFUSED	99

70: S8Q5A

INTERVIEWER: DID R ANSWER "ASIAN" IN THE PREVIOUS QUESTION?

YES	1
NO	5

71: S8Q5B

INTERVIEWER: DID R ANSWER "PACIFIC ISLANDER" IN THE PREVIOUS QUESTION?

YES	1
NO	5

72: S8Q5C

Are you...

INTERVIEWER NOTE: ONE OR MORE CATEGORIES MAY BE SELECTED.

Asian Indian	41
Chinese	42
Filipino	43
Japanese	44
Korean	45
Vietnamese	46
or Other Asian	47

br
DON'T KNOW/NOT SURE 88
REFUSED 99

73: S8Q5D

Are you...

INTERVIEWER NOTE: ONE OR MORE CATEGORIES MAY BE SELECTED.

Native Hawaiian 51
Guamanian or Chamorro 52
Samoan 53
or Other Pacific Islander 54

br
DON'T KNOW/NOT SURE 88
REFUSED 99

74: S8Q6

Are you...?

Married 1
Divorced 2
Widowed 3
Separated 4
Never married 5
or A member of an unmarried couple 6

br
REFUSED 9

75: S8Q7

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

INTERVIEWER: READ ONLY IF NECESSARY:

Never attended school or only attended kindergarten 1
Grades 1 through 8 (Elementary) 2
Grades 9 through 11 (Some high school) 3
Grade 12 or GED (High school graduate) 4
College 1 year to 3 years (Some college or technical school) 5
College 4 years or more (College graduate) 6

br
REFUSED 9

76: S8Q8

Do you own or rent your home?

INTERVIEWER NOTE: ``Other arrangement`` may include group home, staying with friends or family without paying rent. NOTE: Home is defined as the place where you live most of the time/the majority of the year. INTERVIEWER NOTE: We ask this question in order to compare health indicators among people with different housing situations. INTERVIEWER NOTE: "OTHER ARRANGEMENT" MAY

INCLUDE GROUP HOME, STAYING WITH FRIENDS OR FAMILY WITHOUT PAYING RENT. INTERVIEWER NOTE: WE ASK THIS QUESTION IN ORDER TO COMPARE HEALTH INDICATORS AMONG PEOPLE WITH DIFFERENT HOUSING SITUATIONS.

OWN 1
RENT 2
OTHER ARRANGEMENT 3
DON'T KNOW/NOT SURE 8
REFUSED 9

77: S8Q9
What county do you live in?
ANSI County Code (formerly FIPS county code)

78: S8Q10
What is the zip code where you live?

DON'T KNOW/NOT SURE 88888
REFUSED 99999

79: S8Q11
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.
YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

80: S8Q12
How many of these telephone numbers are residential numbers?
INTERVIEWER: ENTER 1-5, CODE 6 IF R ANSWER 6 OR MORE.

6 OR MORE 6
DON'T KNOW/NOT SURE 8
REFUSED 9

81: S8Q13
Do you have a cell phone for personal use? Please include cell phones used for both business and personal use.
YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

82: S8Q14

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?

INTERVIEWER NOTE: Active duty does not include training for the Reserves or National Guard, but DOES include activation, for example, for the Persian Gulf War.

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

83: S8Q15

Are you currently...?

Employed for wages 1
Self-employed 2
Out of work for 1 year or more 3
Out of work for less than 1 year 4
A Homemaker 5
A Student 6
Retired 7
or Unable to work 8
br
REFUSED 99

84: S8Q16

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

CODE "77" IF R ANSWER 0

NONE 77
REFUSED 99

85: S8Q1704

Is your annual household income from all sources less than \$25,000?

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

86: S8Q1703

Is your annual household income from all sources less than \$20,000?

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

87: S8Q1702

Is your annual household income from all sources less than \$15,000?

YES 1

NO 5

DON'T KNOW/NOT SURE 8

REFUSED 9

88: S8Q1701

Is your annual household income from all sources less than \$10,000?

YES 1

NO 5

DON'T KNOW/NOT SURE 8

REFUSED 9

89: S8Q1705

Is your annual household income from all sources less than \$35,000?

YES 1

NO 5

DON'T KNOW/NOT SURE 8

REFUSED 9

90: S8Q1706

Is your annual household income from all sources less than \$50,000?

YES 1

NO 5

DON'T KNOW/NOT SURE 8

REFUSED 9

91: S8Q1707

Is your annual household income from all sources less than \$75,000?

YES 1

NO 5

DON'T KNOW/NOT SURE 8

REFUSED 9

92: S8Q18

Have you used the internet in the past 30 days?

YES 1

NO 5

DON'T KNOW/NOT SURE 8

REFUSED 9

93: S8Q19

About how much do you weigh without shoes?

ROUND FRACTIONS UP

DON'T KNOW/NOT SURE 8888
REFUSED 9999

94: S8Q19A

INDICATE WHETHER R ANSWERED IN POUNDS OR KILOGRAMS

POUNDS 1

KILOGRAMS 2

br

DON'T KNOW/NOT SURE 4

REFUSED 5

95: S8Q20

About how tall are you without shoes?

FEET

DON'T KNOW/NOT SURE 88

REFUSED 99

96: S8Q20A

INCHES

DON'T KNOW/NOT SURE 88

REFUSED 99

97: S8Q20B

INDICATE WHETHER R ANSWERED IN FEET/INCHES OR METERS CENTIMETERS

FEET/INCHES 1

METERS/CENTIMETERS 2

br

DON'T KNOW/NOT SURE 4

REFUSED 5

98: S8Q21

To your knowledge, are you now pregnant or would you say you are not sure?

YES 1

NO 5

DON'T KNOW/NOT SURE 8

REFUSED 9

99: S8Q22

The following questions are about health problems or impairments you may have. Are you limited in any way in any activities because of physical, mental, or emotional problems?

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

100: S8Q23

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?

NOTE: Include occasional use or use in certain circumstances.

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

101: S8Q24

Are you blind or do you have serious difficulty seeing, even when wearing glasses?

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

102: S8Q25

Because of a physical, mental, or emotional condition, do you have serious difficulty concentrating, remembering, or making decisions?

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

103: S8Q26

Do you have serious difficulty walking or climbing stairs?

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

104: S8Q27

Do you have difficulty dressing or bathing?

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

105: S8Q28

Because of a physical, mental, or emotional condition, do you have difficulty doing errands alone such as visiting a doctor's office or shopping?

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

106: S9Q1

Have you smoked at least 100 cigarettes (that is 5 packs) in your entire life?

INTERVIEWER NOTE: ``For cigarettes, do not include: electronic cigarettes (e-cigarettes, NJOY, Bluetip), herbal cigarettes, cigars, cigarillos, little cigars, pipes, bidis, kreteks, water pipes (hookahs), or marijuana.``

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

107: S9Q2

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

Every day 1
Some days 2
Not at all 3
br
DON'T KNOW/NOT SURE 8
REFUSED 9

108: S9Q3

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

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

109: S9Q4

How long has it been since you last smoked a cigarette, even one or two puffs? Would you say..

Within the past month (less than 1 month ago) 1
Within the past 3 months (1 month but less than 3 months ago) 2
Within the past 6 months (3 months but less than 6 months ago) 3
Within the past year (6 months but less than 1 year ago) 4
Within the past 5 years (1 year but less than 5 years ago) 5
Within the past 10 years (5 years but less than 10 years ago) 6
or 10 years or more 7
Never smoked regularly 8

br

DON'T KNOW/NOT SURE 88
REFUSED 99

110: S9Q5

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

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

Every day 1
Some days 2
Not at all 3

br

DON'T KNOW/NOT SURE 8
REFUSED 9

111: S10Q1

The next 2 questions are about electronic cigarettes (e-cigarettes) and other electronic ``vaping`` products, including electronic hookahs (e-hookahs), vape pens, e-cigars, and others. These products are battery-powered and usually contain nicotine and flavors such as fruit, mint, or candy. Have you ever used an e-cigarette or other electronic ``vaping`` product, even just one time, in your entire life?

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

112: S10Q2

Do you now use e-cigarettes or other electronic ``vaping`` products every day, some days, or not at all?

Every day 1
Some days 2
Not at all 3

br

DON'T KNOW/NOT SURE 8
REFUSED 9

113: S11Q1

During the past 30 days, how many days per week or per month did you have at least one drink of any alcoholic beverage such as beer, wine, a malt beverage, or liquor?

ENTER 1 TO 30, CODE "77" IF R ANSWER NONE

NO DRINKS IN PAST 30 DAYS 77
DON'T KNOW/NOT SURE 88
REFUSED 99

114: S11Q1A

INTERVIEWER: DID R ANSWER IN:

Days per week 1
Days in past 30 days 2
NO DRINKS IN PAST 30 DAYS 7
DON'T KNOW/NOT SURE 8
REFUSED 9

115: S11Q2

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?

NOTE: A 40 OUNCE BEER WOULD COUNT AS 3 DRINKS, OR A COCKTAIL DRINK WITH 2 SHOTS WOULD COUNT AS 2 DRINKS.

DON'T KNOW/NOT SURE 88
REFUSED 99

116: S11Q3

Considering all types of alcoholic beverages, how many times during the past 30 days did you have `_$RECALL(RECALL="5", CONDITION="S8Q1=1")` `_$RECALL(RECALL="4", CONDITION="S8Q1=5")` or more drinks on an occasion?

CODE 77 IF R ANSWER 0

NONE 77
DON'T KNOW/NOT SURE 88
REFUSED 99

117: S11Q4

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

DON'T KNOW/NOT SURE 88
REFUSED 99

118: S14Q1

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

Always 1
Nearly always 2
Sometimes 3
Seldom 4
Never 5
or Never drive or ride in a car 7
br
DON'T KNOW/NOT SURE 8
REFUSED 9

119: S15Q1

During the past 30 days, how many times have you driven when you've had perhaps too much to drink?

CODE 77 IF R ANSWER 0

NONE 77

DON'T KNOW/NOT SURE 88

REFUSED 99

120: S19Q1

The next question is about potentially risky behaviors that can lead to HIV/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. I am going to read you a list. When I am 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. You had four or more sex partners in the past year. Do any of these situations apply to you?

YES 1

NO 5

DON'T KNOW/NOT SURE 8

REFUSED 9

121: MODTRAN

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

PRESS "ENTER" TO CONTINUE.

1

122: M3Q1

The next few questions are about health-related problems or symptoms. During the past 30 days, for about how many days did pain make it hard for you to do your usual activities, such as self-care, work, or recreation?

INTERVIEWER: ENTER 1- 30, CODE "77" IF R ANSWER 0.

NONE 77

DON'T KNOW/NOT SURE 88

REFUSED 99

123: M3Q2

During the past 30 days, for about how many days have you felt sad, blue, or depressed?

INTERVIEWER: ENTER 1- 30, CODE "77" IF R ANSWER 0.

NONE 77

DON'T KNOW/NOT SURE 88

REFUSED 99

124: M3Q3

During the past 30 days, for about how many days have you felt worried, tense, or anxious?

INTERVIEWER: ENTER 1- 30, CODE "77" IF R ANSWER 0.

NONE 77

DON'T KNOW/NOT SURE 88

REFUSED 99

125: M3Q4

During the past 30 days, for about how many days have you felt very healthy and full of energy?

INTERVIEWER: ENTER 1- 30, CODE "77" IF R ANSWER 0.

NONE 77

DON'T KNOW/NOT SURE 88

REFUSED 99

126: M5Q1

How difficult is it for you to get advice or information about health or medical topics if you need it?

Would you say...

Not at all 1

A little 2

Somewhat 3

or Very difficult 4

or Never tried to get advice of information 5

br

DON'T KNOW/NOT SURE 8

REFUSED 9

127: M5Q2

How difficult is it for you to understand information that doctors, nurses and other health professionals tell you? Would you say...

Not at all 1

A little 2

Somewhat 3

or Very difficult 4

or Never tried to get advice of information 5

br

DON'T KNOW/NOT SURE 8

REFUSED 9

128: M5Q3

You can find written information about health on the Internet, in newspapers and magazines, and in brochures in the doctor's office and clinic. In general, how difficult is it for you to understand written health information? Would you say...

- Not at all 1
- A little 2
- Somewhat 3
- or Very difficult 4
- or Never tried to get advice of information 5
- br
- DON'T KNOW/NOT SURE 8
- REFUSED 9

129: M6Q1

People may provide regular care or assistance to a friend or family member who has a health problem or disability. During the past 30 days, did you provide regular care or assistance to a friend or family member who has a health problem or disability?

INTERVIEWER INSTRUCTIONS: If caregiving recipient has died in the past 30 days, say "I'm so sorry to hear of your loss." and code 7.

- YES 1
- NO 5
- br
- CAREGIVING RECIPIENT DIED IN THE PAST 30 DAYS 7
- DON'T KNOW/NOT SURE 8
- REFUSED 9

130: M6Q2

What is his or her relationship to you?

INTERVIEWER NOTE: If more than one person, say: "Please refer to the person to whom you are giving the most care."

- Mother 01
- Father 02
- Mother-in-law 03
- Father-in-law 04
- Child 05
- Husband 06
- Wife 07
- Live in partner 08
- Brother or brother-in-law 09
- Sister or sister-in-law 10
- Grandmother 11
- Grandfather 12
- Grandchild 13
- Other relative 14
- Non-relative/Family friend 15

br
DON'T KNOW/NOT SURE 88
REFUSED 99

131: M6Q3

For how long have you provided care for that person? Would you say...

Less than 30 days 1
1 month to less than 6 months 2
6 months to less than 2 years 3
2 years to less than 5 years 4
More than 5 years 5

br
DON'T KNOW/NOT SURE 8
REFUSED 9

132: M6Q4

In an average week, how many hours do you provide care or assistance? Would you say...

Up to 8 hours per week 1
9 to 19 hours per week 2
20 to 39 hours per week 3
40 hours or more 4

br
DON'T KNOW/NOT SURE 8
REFUSED 9

133: M6Q5

What is the main health problem, long-term illness, or disability that the person you care for has?

IF NECESSARY: Please tell me which one of these conditions would you say is the major problem? DO

NOT READ: RECORD ONE RESPONSE

Arthritis/Rheumatism 01
Asthma 02
Cancer 03
Chronic respiratory conditions such as Enphysema or COPD 04
Dementia or other Cognitive Impairment Disorders 05
Developmental Disabilities such as Autism, Down's Syndrome, and Spina Bifida 06

Diabetes 07
Heart Disease, Hypertension, Stroke 08
Human Immunodeficiency Virus Infection (HIV) 09
Mental Illness, such as Anxiety, Depression, or Schizophrenia 10
Other organ failure or diseases such as kidney or liver problems 11
Substance Abuse or Addiction Disorders 12
Injuries, including broken bones 13
Old age/infirmity/frailty 14

Other 15
br
DON'T KNOW/NOT SURE 88
REFUSED 99

134: M6Q6

In the past 30 days, did you provide care for this person by...Managing personal care such as giving medications, feeding, dressing, or bathing?

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

135: M6Q7

In the past 30 days, did you provide care for this person by...Managing household tasks such as cleaning, managing money, or preparing meals?

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

136: M6Q8

Of the following support services, which one do YOU most need, that you are not currently getting?
[INTERVIEWER NOTE: IF RESPONDENT ASKS WHAT RESPITE CARE IS]: Respite care means short-term or long-term breaks for people who provide care.

Classes about giving care, such as giving medications 1
Help in getting access to services 2
Support groups 3
Individual counseling to help cope with giving care 4
Respite care 5
You don't need any of these support services 6

br
DON'T KNOW/NOT SURE 8
REFUSED 9

137: M6Q9

In the next 2 years, do you expect to provide care or assistance to a friend or family member who has a health problem or disability?

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

138: M6Q10

During the past 12 months, have you cared for anyone who experienced confusion or memory loss that is happening more often or is getting worse?

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

139: M6Q11

Have you or anyone else discussed the confusion or memory loss of the person you care for with a health care professional?

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

140: M8Q1

Now I would like to ask you some questions about sugary beverages. During the past 30 days, how often did you drink regular soda or pop that contains sugar? Do not include diet soda or diet pop. You can answer times per day, week, or month: for example, twice a day, once a week, and so forth.

INTERVIEWER NOTE: PLEASE REMIND RESPONDENTS TO INCLUDE REGULAR SODA THAT THEY MIXED WITH ALCOHOL. INTERVIEWER: CODE "777" IF R ANSWER 0.

NONE 777
DON'T KNOW/NOT SURE 888
REFUSED 999

141: M8Q1A

INTERVIEWER: DID R ANSWER IN:

Times per day 1
Times per week 2
Times per month 3
NONE 7
DON'T KNOW/NOT SURE 8
REFUSED 9

142: M8Q2

During the past 30 days, how often did you drink sugar-sweetened fruit drinks (such as Kool-aid and lemonade), sweet tea, and sports or energy drinks (such as Gatorade and Red Bull)? Do not include 100% fruit juice, diet drinks, or artificially sweetened drinks.

INTERVIEWER NOTE: FRUIT DRINKS ARE SWEETENED BEVERAGES THAT OFTEN CONTAIN SOME FRUIT JUICE OR FLAVORING. DO NOT INCLUDE 100% FRUIT JUICE, SWEET TEA, COFFEE DRINKS, SPORTS DRINKS, OR ENERGY DRINKS. INTERVIEWER: CODE ``777`` IF R ANSWER 0

NONE 777

DON'T KNOW/NOT SURE 888
REFUSED 999

143: M8Q2A

INTERVIEWER: DID R ANSWER IN:

Times per day 1
Times per week 2
Times per month 3
NONE 7
DON'T KNOW/NOT SURE 8
REFUSED 9

144: M9Q1

The next question is about eating out at fast food and chain restaurants. When calorie information is available in the restaurant, how often does this information help you decide what to order? Would you say...

Always 01
Most of the time 02
About half the time 03
Sometimes 04
Never 05
br
NEVER NOTICED OR NEVER LOOKED FOR CALORIE INFORMATION 06
USUALLY CANNOT FIND CALORIE INFORMATION 08
DO NOT EAT AT FAST FOOD OR CHAIN RESTAURANTS 55
DON'T KNOW/NOT SURE 88
REFUSED 99

145: M10Q1

During the past 30 days, on how many days did you use marijuana or hashish?
INTERVIEWER: ENTER 1-30, CODE "77" IF R ANSWER 0.

NONE 77
DON'T KNOW/NOT SURE 88
REFUSED 99

146: M10Q2A

During the past 30 days, how did you use marijuana? Please tell me all that apply. Did you....Smoke it ?(for example: in a joint, bong, pipe, or blunt)

INTERVIEWER NOTE: Use clarification in parentheses only if needed.

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

147: M10Q2B

Eat it? (for example, in brownies, cakes, cookies, or candy)

INTERVIEWER NOTE: Use clarification in parentheses only if needed.

YES 1

NO 5

DON'T KNOW/NOT SURE 8

REFUSED 9

148: M10Q2C

Drink it? (for example, in tea, cola, alcohol)

INTERVIEWER NOTE: Use clarification in parentheses only if needed.

YES 1

NO 5

DON'T KNOW/NOT SURE 8

REFUSED 9

149: M10Q2D

Vaporize it (for example in an e-cigarette-like vaporizer)

INTERVIEWER NOTE: Use clarification in parentheses only if needed.

YES 1

NO 5

DON'T KNOW/NOT SURE 8

REFUSED 9

150: M10Q2E

Dab it? (for example using butane hash oil, wax or concentrates)

INTERVIEWER NOTE: Use clarification in parentheses only if needed.

YES 1

NO 5

DON'T KNOW/NOT SURE 8

REFUSED 9

151: M10Q2F

Was it used in some other way?

YES 1

NO 5

DON'T KNOW/NOT SURE 8

REFUSED 9

154: M21Q1

The next two questions are about sexual orientation and gender identity. Do you consider yourself to be:

INTERVIEWER NOTE: We ask this question in order to better understand the health and health care needs of people with different sexual orientations. INTERVIEWER NOTE: Please say the number before the text response. Respondent can answer with either the number or the text/word.

- 1) Straight 1
- 2) Lesbian or gay 2
- 3) Bisexual 3
- br
- OTHER 4
- DONT' KNOW/NOT SURE 8
- REFUSED 9

155: M21Q2

Do you consider yourself to be transgender?

INTERVIEWER NOTE: If asked about definition of transgender: Some people describe themselves as transgender when they experience a different gender identity from their sex at birth. For example, a person born into a male body, but who feels female or lives as a woman would be transgender. Some transgender people change their physical appearance so that it matches their internal gender identity. Some transgender people take hormones and some have surgery. A transgender person may be of any sexual orientation - straight, gay, lesbian, or bisexual.

- YES 1
- NO 5
- br
- DON'T KNOW/NOT SURE 8
- REFUSED 9

156: M21Q2A

Do you consider yourself to be

INTERVIEWER NOTE: Please say the number before the "yes" text response. Respondent can answer with either the number or the text/word. INTERVIEWER NOTE: If asked about definition of gender non-conforming: Some people think of themselves as gender non-conforming when they do not identify only as a man or only as a woman.

- 1) male-to-female 1
- 2) female-to-male 2
- or 3) gender nonconforming 3
- br
- DON'T KNOW/NOT SURE 8
- REFUSED 9

182: BC1Q1

During the past 30 days, on how many days did you text or e-mail while driving a car or other vehicle?
ENTER 1-30, CODE "77" IF R ANSWER "0".

- DO NOT DRIVE 55
- NONE 77

DON'T KNOW/NOT SURE 88
REFUSED 99

183: BC1Q2

During the past 30 days, on how many days did you talk on a cell phone while driving a car or other vehicle?

ENTER 1-30, CODE "77" IF R ANSWER "0".

DO NOT DRIVE 55
NONE 77
DON'T KNOW/NOT SURE 88
REFUSED 99

184: BC2Q1

In the past year, did you use any pain medications that were prescribed to you by a doctor?

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

185: BC2Q2

The last time you filled a prescription for pain medication, was there any medication leftover?

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

186: BC2Q3

In the past year, did you use any prescription medications that were NOT prescribed to you by a doctor?

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

187: BC3Q1

Which statement best describes the rules about smoking inside your home? Do not include decks, garages or porches. Would you say...

Smoking is not allowed anywhere inside your home 1
Smoking is allowed in some places or at some times 2
or Smoking is allowed anywhere inside the home 3
br
DON'T KNOW/NOT SURE 8
REFUSED 9

188: BC3Q2

Which statement best describes the rules about smoking inside your family vehicle? Would you say...

- Smoking is not allowed at any time in family vehicle 1
- Smoking is allowed only when children 17 and younger not present 2
- Smoking is allowed at all times in family vehicle 3
- or Do not have a car 4
- br
- DON'T KNOW/NOT SURE 8
- REFUSED 9

189: BC4Q1

In an average week, on how many days do you go to local parks or recreation centers for exercise?
ENTER 1-7, CODE "77" IF R ANSWER "0".

- NONE 77
- DON'T KNOW/NOT SURE 88
- REFUSED 99

190: BC4Q2

In good weather, how frequently do you use a local paved or dirt trail for walking, hiking, or biking?
Would you say...

- Daily 1
- At Least Weekly 2
- At Least Monthly 3
- Less Than Monthly 4
- or Never 5
- br
- DON'T KNOW/NOT SURE 8
- REFUSED 9

193: BC5Q2

During the past month, not counting juice, how many times per day, week, or month did you eat fruit?
Count fresh, frozen, or canned fruit.

- NEVER 777
- DON'T KNOW/NOT SURE 888
- REFUSED 999

194: BC5Q2B

INTERVIEWER: DID R ANSWER IN:

- Times per day 1
- Times per week 2
- Times per month 3
- NEVER 7

br

DON'T KNOW/NOT SURE 8
REFUSED 9

195: BC5Q3

During the past month, how many times per day, week, or month did you eat cooked or canned beans, such as refried, baked, black, garbanzo beans, beans in soup, soybeans, edamame, tofu or lentils. Do NOT include long green beans.

NEVER 777
DON'T KNOW/NOT SURE 888
REFUSED 999

196: BC5Q3B

INTERVIEWER: DID R ANSWER IN:

Times per day 1
Times per week 2
Times per month 3
NEVER 7

br

DON'T KNOW/NOT SURE 8
REFUSED 9

197: BC5Q4

During the past month, how many times per day, week, or month did you eat dark green vegetables for example broccoli or dark leafy greens including romaine, chard, collard greens or spinach?

NEVER 777
DON'T KNOW/NOT SURE 888
REFUSED 999

198: BC5Q4B

INTERVIEWER: DID R ANSWER IN:

Times per day 1
Times per week 2
Times per month 3
NEVER 7

br

DON'T KNOW/NOT SURE 8
REFUSED 9

199: BC5Q5

During the past month, how many times per day, week, or month did you eat orange-colored vegetables such as sweet potatoes, pumpkin, winter squash, or carrots?

NEVER 777
DON'T KNOW/NOT SURE 888
REFUSED 999

200: BC5Q5B

INTERVIEWER: DID R ANSWER IN:

Times per day 1
Times per week 2
Times per month 3
NEVER 7

br

DON'T KNOW/NOT SURE 8
REFUSED 9

201: BC5Q6

Not counting what you just told me about, during the past month, about how many times per day, week, or month did you eat OTHER vegetables? Examples of other vegetables include tomatoes, tomato juice or V-8 juice, corn, eggplant, peas, lettuce, cabbage, and white potatoes that are not fried such as baked or mashed potatoes.

NEVER 777
DON'T KNOW/NOT SURE 888
REFUSED 999

202: BC5Q6B

INTERVIEWER: DID R ANSWER IN:

Times per day 1
Times per week 2
Times per month 3
NEVER 7

br

DON'T KNOW/NOT SURE 8
REFUSED 9

206: BC6Q4

During the past 30 days, about how often did you feel so depressed that nothing could cheer you up?

INTERVIEWER: IF NECESSARY: all, most, some, a little, or none of the time.

All 1
Most 2
Some 3
A little 4
None 5
br

DON'T KNOW/NOT SURE 8
REFUSED 9

209: BC6Q7

During the past 30 days, for about how many days did a mental health condition or emotional problem keep you from doing your work or other usual activities?
ENTER 1-30, CODE "77" IF R ANSWER "0".

NONE 77
DON'T KNOW/NOT SURE 88
REFUSED 99

210: BC6Q8

Are you now taking medicine or receiving treatment from a doctor or other health professional for any type of mental health condition or emotional problem?

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

213: BC7Q1

Do you have a written plan or have you shared your end-of-life preferences with your doctor?

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

214: BC7Q2

Do you have a written plan or have you shared your end-of-life preferences with a family member/s?

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

215: BC8Q1

How often in the past 12 months would you say you were worried or stressed about having enough money to pay your rent/mortgage? Would you say...

INTERVIEWER NOTE: We ask this question in order to compare health indicators among people in different housing situations

Always 1
Usually 2
Sometimes 3
Rarely 4
or Never 5

br
NOT APPLICABLE 7

br
DON'T KNOW/NOT SURE 8
REFUSED 9

216: BC8Q2

How often in the past 12 months would you say you were worried or stressed about having enough money to buy nutritious meals? Would you say...

Always 1
Usually 2
Sometimes 3
Rarely 4
or Never 5

br
NOT APPLICABLE 7
DON'T KNOW/NOT SURE 8
REFUSED 9

217: BC8Q3

How many jobs and/or businesses have you held at one time within the past year?

CODE "7" IF R ANSWER "0" OR "NONE".

ONE 1
TWO 2
THREE 3
FOUR 4
FIVE OR MORE 5
DID NOT HAVE A JOB WITHIN THE PAST YEAR 7

br
DON'T KNOW/NOT SURE 8
REFUSED 9

218: BC8Q4

At your main job or business, how are you generally paid for the work you do. Are you...

INTERVIEWER NOTE: CODE "4" IF R ANSWER PAID IN MULTIPLE WAYS AT THEIR MAIN JOB. INTERVIEWER

NOTE: We ask this question in order to compare health indicators among people who are paid in different ways.

Paid by salary 1
Paid by the hour 2
Paid by the job/task (e.g. commission, piecework) 3
Paid some other way 4

br
DON'T KNOW/NOT SURE 8
REFUSED 9

219: BC8Q5

About how many hours do you work per week at all of your jobs and businesses combined?
ENTER 1-95, CODE "96" IF R ANSWER 96 OR MORE. CODE "777" IF R ANSWER "0".

96 OR MORE 96
NONE 777
DON'T KNOW/NOT SURE 888
REFUSED 999

220: BC8Q6

Thinking about the last time you worked, at your main job or business, how were you generally paid for the work you did? Were you...

INTERVIEWER NOTE: We ask this question in order to compare health indicators among people who are paid in different ways.

Paid by salary 1
Paid by the hour 2
Paid by the job/task (e.g. commission, piecework) 3
Paid some other way 4
br
DON'T KNOW/NOT SURE 8
REFUSED 9

221: BC8Q7

Thinking about the last time you worked, about how many hours did you work per week at all of your jobs and businesses combined?

ENTER 1-95, CODE "96" IF R ANSWER 96 OR MORE. CODE "777" IF R ANSWER "0".

96 OR MORE 96
NONE 777
DON'T KNOW/NOT SURE 888
REFUSED 999

222: BC8Q8

Did you vote in the last presidential election?

INTERVIEWER NOTE: The November 2012 election between Barack Obama and Mitt Romney.

INTERVIEWER NOTE: CODE "7" IF R ANSWER "I DID NOT REGISTER", "I AM NOT A U.S. CITIZEN", OR "I AM NOT ELIGIBLE TO VOTE"

YES 1
NO 5
NOT APPLICABLE 7
DON'T KNOW/NOT SURE 8
REFUSED 9

240: INT50

ID: <PIN> PHONE:\$N

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.

INELIGIBLE-PHONE NUMBER NOT NUMBER DIALED IP

241: INT51

ID: <PIN> PHONE:\$N

Thank you very much but we are only interviewing persons on residential phones lines at this time.

INELIGIBLE-BUSINESS IB

242: INT52

ID: <PIN> PHONE:\$N

Thank you very much, but we are only interviewing persons who live in a private residence or college housing at this time.

INELIGIBLE-NOT PRIVATE RESIDENCE OR COLLEGE HOUSING IE

243: INT53

ID: <PIN> PHONE:\$N

Thank you very much, but we are only interviewing persons who live in Buffalo County at this time.

INELIGIBLE-NOT IN BUFFALO COUNTY IS

244: INT54

ID: <PIN> PHONE:\$N

Thank you very much, but we are only interviewing by land line telephones and for private residences or college housing.

INELIGIBLE-CELLULAR PHONE IC

245: INT55

ID: <PIN> PHONE:\$N

Thank you very much, but we are only interviewing persons aged 18 or older at this time.

INELIGIBLE-NOT 18 YEARS OF AGE OR OLDER IA

246: INT99

That was my last question. Thank you very much for your time and cooperation.

COMPLETE CO

Cell Phone

5: INT01

ID: <PIN> PHONE:\$N

Hello, this is \$I calling from the UNL Research Center. We are gathering information, on behalf of the Buffalo County Community Partners and the Center for Disease Control and Prevention, about the state of health of Buffalo County residents. Data we collect will be used to better assess the health needs of Buffalo County. This is important because, while we already collect data statewide, we would like to understand how Buffalo County differs from other parts of the state like Lincoln and Omaha. Your telephone number has been chosen randomly, and I would like to ask some questions about health and health practices.

CONTINUE 01

br

DEFINITE CALLBACK CD

INDEFINITE CALLBACK CI

REFUSAL-HANG UP RU

REFUSAL-HOUSEHOLD LEVEL RH

6: INT11

ID: <PIN> PHONE:\$N

Is this a safe time to talk with you?

YES 01

NO 05

br

DEFINITE CALLBACK CD

INDEFINITE CALLBACK CI

REFUSAL-HANG UP RU

REFUSAL-HOUSEHOLD LEVEL RH

7: INT02

ID: <PIN> PHONE:\$N

Is this \$N?

YES 01

NO 05

br

DEFINITE CALLBACK CD

INDEFINITE CALLBACK CI

REFUSAL-HANG UP RU

REFUSAL-HOUSEHOLD LEVEL RH

8: INT06

ID: <PIN> PHONE:\$N

Is this a cellular telephone?

INTERVIEWER NOTE: Telephone service over the internet counts as landline service (includes Vonage, Magic Jack and other home-based phone services). Read only if necessary: ``By cellular (or cell) telephone we mean a telephone that is mobile and usable outside of your neighborhood.``

YES 01

NO 05

br

DEFINITE CALLBACK CD

INDEFINITE CALLBACK CI

REFUSAL-HANG UP RU

REFUSAL-HOUSEHOLD LEVEL RH

9: INT07

ID: <PIN> PHONE:\$N

Are you 18 years of age or older?

YES, RESPONDENT IS MALE 01

YES, RESPONDENT IS FEMALE 02

NO 03

br

DEFINITE CALLBACK CD

INDEFINITE CALLBACK CI

REFUSAL-HANG UP RU

REFUSAL-HOUSEHOLD LEVEL RH

10: INT03

ID: <PIN> PHONE:\$N

Do you live in a private residence?

READ ONLY IF NECESSARY: "By private residence, we mean someplace like a house or apartment."

YES 01

NO 05

br

DEFINITE CALLBACK CD

INDEFINITE CALLBACK CI

REFUSAL-HANG UP RU

REFUSAL-HOUSEHOLD LEVEL RH

11: INT04

ID: <PIN> PHONE:\$N

Do you live in college housing?

READ ONLY IF NECESSARY: ``By college housing we mean dormitory, graduate student or visiting faculty housing, or other housing arrangement provided by a college or university.``

YES 01

NO 05

br

DEFINITE CALLBACK CD

INDEFINITE CALLBACK CI
REFUSAL-HANG UP RU
REFUSAL-HOUSEHOLD LEVEL RH

12: INT05

ID: <PIN> PHONE:\$N

Do you reside in Buffalo County?

YES 01

NO 05

br

DEFINITE CALLBACK CD

INDEFINITE CALLBACK CI

REFUSAL-HANG UP RU

REFUSAL-HOUSEHOLD LEVEL RH

14: LANDLINE

ID: <PIN> PHONE:\$N

Do you also have a landline telephone in your home that is used to make and receive calls?

READ ONLY IF NECESSARY: "By landline telephone, we mean a "regular" telephone in your home that is used for making or receiving calls." Please include landline phones used for both business and personal use. "Interviewer Note: Telephone service over the internet counts as landline service (includes Vonage, Magic Jack and other home-based phone services.).

YES 1

NO 5

br

DON'T KNOW 8

REFUSED 9

15: NUMADULT

ID: <PIN> PHONE:\$N

How many members of your household, including yourself, are 18 years of age or older?

INTERVEIWER: ENTER "6" IF THE NUMBER IS MORE THAN 6.

16: INT09

ID: <PIN> PHONE:\$N

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. If you have any questions about the survey, please call 308-865-2284.

CONTINUE 01

br

DEFINITE CALLBACK CD

INDEFINITE CALLBACK CI

REFUSAL-HANG UP RU

REFUSAL-HOUSEHOLD LEVEL RH
REFUSAL-SELECTED RESPONDENT RR

17: S1Q1

Would you say that in general your health is...

Excellent 1
Very good 2
Good 3
Fair 4
or Poor 5
br
DON'T KNOW/NOT SURE 8
REFUSED 9

18: 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?

ENTER 1-30, CODE "77" IF R ANSWER 0.

NONE 77
DON'T KNOW/NOT SURE 88
REFUSED 99

19: 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?

ENTER 1-30, CODE "77" IF R ANSWER 0.

NONE 77
DON'T KNOW/NOT SURE 88
REFUSED 99

20: 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?

ENTER 1-30, CODE "77" IF R ANSWER 0.

NONE 77
DON'T KNOW/NOT SURE 88
REFUSED 99

21: S3Q1

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

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

22: M4Q1

Do you have Medicare?

Note: Medicare is a coverage plan for people age 65 or over and for certain disabled people.

YES 1
NO 5
DON'T KNOW 8
REFUSED 9

23: M4Q2

What is the primary source of your health care coverage? Is it...

INTERVIEWER NOTE: If the respondent indicates that they purchased health insurance through the Health Insurance Marketplace (name of state Marketplace), ask if it was a private health insurance plan purchased on their own or by a family member (private) or if they received Medicaid (state plan)? If purchased on their own (or by a family member), select 02, if Medicaid select 04.

A plan purchased through an employer or union (includes plans purchased through another person's employer) 01

A plan that you or another family member buys on your own 02

Medicare 03

Medicaid or other state program 04

TRICARE (formerly CHAMPUS), VA, or Military 05

Alaska Native, Indian Health Service, Tribal Health Services 06

or Some other source 07

None (no coverage) 08

br

DON'T KNOW/NOT SURE 88

REFUSED 99

24: S3Q2

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

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

YES, ONLY ONE 1

MORE THAN ONE 2

NO 5

DON'T KNOW/NOT SURE 8

REFUSED 9

25: S3Q3

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

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

26: M4Q3

Other than cost, there are many other reasons people delay getting needed medical care. Have you delayed getting needed medical care for any of the following reasons in the past 12 months? Select the most important reason.

You couldn't get through on the telephone. 1
You couldn't get an appointment soon enough. 2
Once you got there, you had to wait too long to see the doctor. 3
The (clinic/doctor's) office wasn't open when you got there. 4
You didn't have transportation. 5
br
OTHER (SPECIFY) 6
NO, I DID NOT DELAY GETTING MEDICAL CARE/DID NOT NEED MEDICAL CARE 7

DON'T KNOW/NOT SURE 8
REFUSED 9

27: 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. Would you say...

Within the past year (anytime less than 12 months ago) 1
Within the past 2 years (1 year but less than 2 years ago) 2
Within the past 5 years (2 years but less than 5 years ago) 3
or 5 or more years ago 4

br
NEVER 7
DON'T KNOW/NOT SURE 8
REFUSED 9

28: M4Q4A

In the PAST 12 MONTHS was there any time when you did NOT have ANY health insurance or coverage?

YES 1
NO 5
DON'T KNOW 8
REFUSED 9

29: M4Q4B

About how long has it been since you last had health care coverage?

6 months or less 1
More than 6 months, but not more than 1 year ago 2
More than 1 year, but not more than 3 years ago 3
More than 3 years 4
Never 5
br
DON'T KNOW/NOT SURE 8
REFUSED 9

30: M4Q5

How many times have you been to a doctor, nurse, or other health professional in the past 12 months?

INTERVIEWER: CODE "77" IF R ANSWER NONE

NONE 777
DON'T KNOW/NOT SURE 888
REFUSED 999

31: M4Q6

Not including over the counter (OTC) medications, was there a time in the past 12 months when you did not take your medication as prescribed because of cost?

YES 1
NO 5
br
NO MEDICATION WAS PERSCRIBED 7
DON'T KNOW/NOT SURE 8
REFUSED 9

32: M4Q7

In general, how satisfied are you with the health care you received? Would you say...

Very satisfied 1
Somewhat satisfied 2
Not at all satisfied 3
br
NOT APPLICABLE 7
DON'T KNOW/NOT SURE 8
REFUSED 9

33: M4Q8

Do you currently have any health care bills that are being paid off over time?

INTERVIEWER NOTE: This could include medical bills being paid off with a credit card, through personal loans, or bill paying arrangements with hospitals or other providers. The bills can be from earlier years as well as this year. INTERVIEWER NOTE: Health care bills can include medical, dental, physical therapy and/or chiropractic cost.

YES 1

NO 5
DON'T KNOW 8
REFUSED 9

34: S4Q1

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?

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

35: S4Q2

On an average day, how many hours do you play video or computer games or use a computer for something that is not school or work? (Count time spent on things such as Xbox, PlayStation, an iPod, an iPad or other tablet, a smartphone, YouTube, Facebook or other social networking tools, and the Internet.)

I do not play video or computer games or use a computer for something that is not school or work

01
Less than 1 hour per day 02
1 hour per day 03
2 hours per day 04
3 hours per day 05
4 hours per day 06
5 or more hours per day 07
br
DON'T KNOW/NOT SURE 88
REFUSED 99

36: S6Q1

Now I would like to ask you some questions about general health conditions. Has a doctor, nurse, or other health professional EVER told you that you had any of the following? For each, tell me "Yes," "No," or you're "Not sure." (Ever told) you that you had a heart attack also called a myocardial infarction?

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

37: S6Q2

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

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

38: S6Q3
(Ever told) you had a stroke?
YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

39: S6Q4
(Ever told) you had asthma?
YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

40: S6Q5
Do you still have asthma?
YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

41: S6Q6
(Ever told) you had skin cancer?
YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

42: S6Q7
(Ever told) you had any other types of cancer?
YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

43: S6Q8
(Ever told) you have Chronic Obstructive Pulmonary Disease (COPD), emphysema or chronic bronchitis?
YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

44: S6Q9

(Ever told) you have some form of arthritis, rheumatoid arthritis, gout, lupus, or fibromyalgia?

INTERVIEWER NOTE: Arthritis diagnoses include: • rheumatism, polymyalgia rheumatica • osteoarthritis (not osteoporosis) • tendonitis, bursitis, bunion, tennis elbow • carpal tunnel syndrome, tarsal tunnel syndrome • joint infection, Reiter's syndrome • ankylosing spondylitis; spondylosis • rotator cuff syndrome • connective tissue disease, scleroderma, polymyositis, Raynaud's syndrome • vasculitis (giant cell arteritis, Henoch-Schonlein purpura, Wegener's granulomatosis, polyarteritis nodosa)

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

45: S6Q10

(Ever told) you have a depressive disorder (including depression, major depression, dysthymia, or minor depression)?

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

46: S6Q11

(Ever told) you have kidney disease? Do NOT include kidney stones, bladder infection or incontinence.

INTERVIEWER NOTE: INCONTINENCE IS NOT BEING ABLE TO CONTROL URINE FLOW.

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

47: S6Q12

(Ever told) you have diabetes?

INTERVIEWER: IF "YES" AND R IS FEMALE, ASK: "Was this only when you were pregnant?". CODE 4 IF R ANSWERS PRE-DIABETES OR BORDERLINE DIABETES.

YES 1
YES, BUT FEMALE TOLD ONLY DURING PREGNANCY 2
NO 3
NO, PRE-DIABETES OR BORDERLINE DIABETES 4
DON'T KNOW/NOT SURE 8
REFUSED 9

48: S6Q13

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

INTERVIEWER: ENTER 1-96, CODE 97 IF R ANSWERS 97 OR OLDER.

97 AND OLDER 97
DON'T KNOW/NOT SURE 98

REFUSED 99

49: M1Q1

Have you had a test for high blood sugar or diabetes within the past three years?

YES 1

NO 5

DON'T KNOW/NOT SURE 8

REFUSED 9

50: M1Q2

Have you ever been told by a doctor or other health professional that you have pre-diabetes or borderline diabetes?

INTERVIEWER: IF "YES" AND R IS FEMALE, ASK: "Was this only when you were pregnant?".

YES 1

YES, BUT FEMALE TOLD ONLY DURING PREGNANCY 2

NO 3

DON'T KNOW/NOT SURE 8

REFUSED 9

51: S8Q1

INDICATE SEX OF RESPONDENT.

ASK ONLY IF NECESSARY

MALE 1

FEMALE 5

52: S8Q2

What is your age?

INTERVIEWER: CODE AGE IN YEARS

DON'T KNOW/NOT SURE 888

REFUSED 999

53: S8Q3

Are you Hispanic, Latino/a, or Spanish origin?

INTERVIEWER: IF YES, ASK: Are you...INTERVIEWER NOTE: ONE OR MORE CATEGORIES MAY BE SELECTED.

Mexican, Mexican American, Chicano/a 1

Puerto Rican 2

Cuban 3

Another Hispanic, Latino/a, or Spanish Origin 4

br

NO 5

br

DON'T KNOW/NOT SURE 8

REFUSED 9

54: S8Q4

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

INTERVIEWER NOTE: SELECT ALL THAT APPLY

White 10

Black or African American 20

American Indian or Alaska Native 30

Asian 40

Pacific Islander 50

or Other 60

br

DON'T KNOW/NOT SURE 88

REFUSED 99

55: S8Q4A

INTERVIEWER: DID R ANSWER "ASIAN" IN THE PREVIOUS QUESTION?

YES 1

NO 5

56: S8Q4B

INTERVIEWER: DID R ANSWER "PACIFIC ISLANDER" IN THE PREVIOUS QUESTION?

YES 1

NO 5

57: S8Q4C

Are you...

INTERVIEWER NOTE: ONE OR MORE CATEGORIES MAY BE SELECTED.

Asian Indian 41

Chinese 42

Filipino 43

Japanese 44

Korean 45

Vietnamese 46

or Other Asian 47

br

DON'T KNOW/NOT SURE 88

REFUSED 99

58: S8Q4D

Are you...

INTERVIEWER NOTE: ONE OR MORE CATEGORIES MAY BE SELECTED.

Native Hawaiian 51

Guamanian or Chamorro 52

Samoan53
or Other Pacific Islander54
br
DON'T KNOW/NOT SURE 88
REFUSED 99

59: S8Q5
Which one of these groups would you say best represents your race?
White 10
Black or African American 20
American Indian or Alaska Native 30
Asian 40
Pacific Islander 50
or Other 60
br
DON'T KNOW/NOT SURE 88
REFUSED 99

60: S8Q5A
INTERVIEWER: DID R ANSWER "ASIAN" IN THE PREVIOUS QUESTION?
YES 1
NO 5

61: S8Q5B
INTERVIEWER: DID R ANSWER "PACIFIC ISLANDER" IN THE PREVIOUS QUESTION?
YES 1
NO 5

62: S8Q5C
Are you...
INTERVIEWER NOTE: ONE OR MORE CATEGORIES MAY BE SELECTED.
Asian Indian 41
Chinese42
Filipino 43
Japanese 44
Korean 45
Vietnamese 46
or Other Asian 47
br
DON'T KNOW/NOT SURE 88
REFUSED 99

63: S8Q5D
Are you...

INTERVIEWER NOTE: ONE OR MORE CATEGORIES MAY BE SELECTED.

Native Hawaiian 51
Guamanian or Chamorro 52
Samoan53
or Other Pacific Islander54
br
DON'T KNOW/NOT SURE 88
REFUSED 99

64: S8Q6

Are you...?

Married 1
Divorced 2
Widowed 3
Separated 4
Never married 5
or A member of an unmarried couple 6
br
REFUSED 9

65: S8Q7

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

INTERVIEWER: READ ONLY IF NECESSARY:

Never attended school or only attended kindergarten 1
Grades 1 through 8 (Elementary) 2
Grades 9 through 11 (Some high school)3
Grade 12 or GED (High school graduate) 4
College 1 year to 3 years (Some college or technical school) 5
College 4 years or more (College graduate) 6
br
REFUSED 9

66: S8Q8

Do you own or rent your home?

INTERVIEWER NOTE: ``Other arrangement`` may include group home, staying with friends or family without paying rent. NOTE: Home is defined as the place where you live most of the time/the majority of the year. INTERVIEWER NOTE: We ask this question in order to compare health indicators

among people with different housing situations. INTERVIEWER NOTE: "OTHER ARRANGEMENT" MAY INCLUDE GROUP HOME, STAYING WITH FRIENDS OR FAMILY WITHOUT PAYING RENT. INTERVIEWER NOTE: WE ASK THIS QUESTION IN ORDER TO COMPARE HEALTH INDICATORS AMONG PEOPLE WITH DIFFERENT HOUSING SITUATIONS.

OWN 1
RENT 2
OTHER ARRANGEMENT 3

DON'T KNOW/NOT SURE 8
REFUSED 9

67: S8Q9

What county do you live in?

ANSI County Code (formerly FIPS county code)

68: S8Q10

What is the zip code where you live?

DON'T KNOW/NOT SURE 88888
REFUSED 99999

69: S8Q11

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.

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

70: S8Q12

How many of these telephone numbers are residential numbers?

INTERVIEWER: ENTER 1-5, CODE 6 IF R ANSWER 6 OR MORE.

6 OR MORE 6
DON'T KNOW/NOT SURE 8
REFUSED 9

71: S8Q13

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

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

72: S8Q14

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?

INTERVIEWER NOTE: Active duty does not include training for the Reserves or National Guard, but DOES include activation, for example, for the Persian Gulf War.

YES 1

NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

73: S8Q15

Are you currently...?

Employed for wages 1
Self-employed 2
Out of work for 1 year or more 3
Out of work for less than 1 year 4
A Homemaker 5
A Student 6
Retired 7
or Unable to work 8
br
REFUSED 99

74: S8Q16

How many children less than 18 years of age live in your household?
CODE "77" IF R ANSWER 0

NONE 77
REFUSED 99

75: S8Q1704

Is your annual household income from all sources less than \$25,000?

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

76: S8Q1703

Is your annual household income from all sources less than \$20,000?

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

77: S8Q1702

Is your annual household income from all sources less than \$15,000?

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

78: S8Q1701

Is your annual household income from all sources less than \$10,000?

YES 1

NO 5

DON'T KNOW/NOT SURE 8

REFUSED 9

79: S8Q1705

Is your annual household income from all sources less than \$35,000?

YES 1

NO 5

DON'T KNOW/NOT SURE 8

REFUSED 9

80: S8Q1706

Is your annual household income from all sources less than \$50,000?

YES 1

NO 5

DON'T KNOW/NOT SURE 8

REFUSED 9

81: S8Q1707

Is your annual household income from all sources less than \$75,000?

YES 1

NO 5

DON'T KNOW/NOT SURE 8

REFUSED 9

82: S8Q18

Have you used the internet in the past 30 days?

YES 1

NO 5

DON'T KNOW/NOT SURE 8

REFUSED 9

83: S8Q19

About how much do you weigh without shoes?

ROUND FRACTIONS UP

DON'T KNOW/NOT SURE 8888

REFUSED 9999

84: S8Q19A

INDICATE WHETHER R ANSWERED IN POUNDS OR KILOGRAMS

POUNDS 1

KILOGRAMS 2

br

DON'T KNOW/NOT SURE 4

REFUSED 5

85: S8Q20

About how tall are you without shoes?

FEET

DON'T KNOW/NOT SURE 88

REFUSED 99

86: S8Q20A

INCHES

DON'T KNOW/NOT SURE 88

REFUSED 99

87: S8Q20B

INDICATE WHETHER R ANSWERED IN FEET/INCHES OR METERS CENTIMETERS

FEET/INCHES 1

METERS/CENTIMETERS 2

br

DON'T KNOW/NOT SURE 4

REFUSED 5

88: S8Q21

To your knowledge, are you now pregnant or would you say you are not sure?

YES 1

NO 5

DON'T KNOW/NOT SURE 8

REFUSED 9

89: S8Q22

The following questions are about health problems or impairments you may have. Are you limited in any way in any activities because of physical, mental, or emotional problems?

YES 1

NO 5

DON'T KNOW/NOT SURE 8

REFUSED 9

90: S8Q23

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?

NOTE: Include occasional use or use in certain circumstances.

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

91: S8Q24

Are you blind or do you have serious difficulty seeing, even when wearing glasses?

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

92: S8Q25

Because of a physical, mental, or emotional condition, do you have serious difficulty concentrating, remembering, or making decisions?

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

93: S8Q26

Do you have serious difficulty walking or climbing stairs?

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

94: S8Q27

Do you have difficulty dressing or bathing?

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

95: S8Q28

Because of a physical, mental, or emotional condition, do you have difficulty doing errands alone such as visiting a doctor's office or shopping?

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

96: S9Q1

Have you smoked at least 100 cigarettes (that is 5 packs) in your entire life?

INTERVIEWER NOTE: ``For cigarettes, do not include: electronic cigarettes (e-cigarettes, NJOY, Bluetip), herbal cigarettes, cigars, cigarillos, little cigars, pipes, bidis, kreteks, water pipes (hookahs), or marijuana.``

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

97: S9Q2

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

Every day 1
Some days 2
Not at all 3
br
DON'T KNOW/NOT SURE 8
REFUSED 9

98: S9Q3

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

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

99: S9Q4

How long has it been since you last smoked a cigarette, even one or two puffs? Would you say..

Within the past month (less than 1 month ago) 1
Within the past 3 months (1 month but less than 3 months ago) 2
Within the past 6 months (3 months but less than 6 months ago) 3
Within the past year (6 months but less than 1 year ago) 4
Within the past 5 years (1 year but less than 5 years ago) 5
Within the past 10 years (5 years but less than 10 years ago) 6
or 10 years or more 7
Never smoked regularly 8
br
DON'T KNOW/NOT SURE 88
REFUSED 99

100: S9Q5

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

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

Every day 1
Some days 2
Not at all 3
br
DON'T KNOW/NOT SURE 8
REFUSED 9

101: S10Q1

The next 2 questions are about electronic cigarettes (e-cigarettes) and other electronic ``vaping`` products, including electronic hookahs (e-hookahs), vape pens, e-cigars, and others. These products are battery-powered and usually contain nicotine and flavors such as fruit, mint, or candy. Have you ever used an e-cigarette or other electronic ``vaping`` product, even just one time, in your entire life?

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

102: S10Q2

Do you now use e-cigarettes or other electronic ``vaping`` products every day, some days, or not at all?

Every day 1
Some days 2
Not at all 3
br
DON'T KNOW/NOT SURE 8
REFUSED 9

103: S11Q1

During the past 30 days, how many days per week or per month did you have at least one drink of any alcoholic beverage such as beer, wine, a malt beverage, or liquor?

ENTER 1 TO 30, CODE "77" IF R ANSWER NONE

NO DRINKS IN PAST 30 DAYS 77
DON'T KNOW/NOT SURE 88
REFUSED 99

104: S11Q1A

INTERVIEWER: DID R ANSWER IN:

Days per week 1
Days in past 30 days 2
NO DRINKS IN PAST 30 DAYS 7
DON'T KNOW/NOT SURE 8
REFUSED 9

105: S11Q2

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?

NOTE: A 40 OUNCE BEER WOULD COUNT AS 3 DRINKS, OR A COCKTAIL DRINK WITH 2 SHOTS WOULD COUNT AS 2 DRINKS.

DON'T KNOW/NOT SURE 88

REFUSED 99

106: S11Q3

Considering all types of alcoholic beverages, how many times during the past 30 days did you have `_$RECALL(RECALL="5", CONDITION= "S8Q1=1")` `_$RECALL(RECALL="4", CONDITION= "S8Q1=5")` or more drinks on an occasion?

CODE 77 IF R ANSWER 0

NONE 77

DON'T KNOW/NOT SURE 88

REFUSED 99

107: S11Q4

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

DON'T KNOW/NOT SURE 88

REFUSED 99

108: S14Q1

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

Always 1

Nearly always 2

Sometimes 3

Seldom 4

Never 5

or Never drive or ride in a car 7

br

DON'T KNOW/NOT SURE 8

REFUSED 9

109: S15Q1

During the past 30 days, how many times have you driven when you've had perhaps too much to drink?

CODE 77 IF R ANSWER 0

NONE 77

DON'T KNOW/NOT SURE 88
REFUSED 99

110: S19Q1

The next question is about potentially risky behaviors that can lead to HIV/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. I am going to read you a list. When I am 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. You had four or more sex partners in the past year. Do any of these situations apply to you?

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

111: MODTRAN

Finally, I have just a few questions left about some other health topics.
PRESS "ENTER" TO CONTINUE.

1

112: M3Q1

The next few questions are about health-related problems or symptoms. During the past 30 days, for about how many days did pain make it hard for you to do your usual activities, such as self-care, work, or recreation?

INTERVIEWER: ENTER 1- 30, CODE "77" IF R ANSWER 0.

NONE 77
DON'T KNOW/NOT SURE 88
REFUSED 99

113: M3Q2

During the past 30 days, for about how many days have you felt sad, blue, or depressed?

INTERVIEWER: ENTER 1- 30, CODE "77" IF R ANSWER 0.

NONE 77
DON'T KNOW/NOT SURE 88
REFUSED 99

114: M3Q3

During the past 30 days, for about how many days have you felt worried, tense, or anxious?

INTERVIEWER: ENTER 1- 30, CODE "77" IF R ANSWER 0.

NONE 77

DON'T KNOW/NOT SURE 88
REFUSED 99

115: M3Q4

During the past 30 days, for about how many days have you felt very healthy and full of energy?

INTERVIEWER: ENTER 1- 30, CODE "77" IF R ANSWER 0.

NONE 77
DON'T KNOW/NOT SURE 88
REFUSED 99

116: M5Q1

How difficult is it for you to get advice or information about health or medical topics if you need it?

Would you say...

Not at all 1
A little 2
Somewhat 3
or Very difficult 4
or Never tried to get advice of information 5
br

DON'T KNOW/NOT SURE 8
REFUSED 9

117: M5Q2

How difficult is it for you to understand information that doctors, nurses and other health professionals tell you? Would you say...

Not at all 1
A little 2
Somewhat 3
or Very difficult 4
or Never tried to get advice of information 5
br

DON'T KNOW/NOT SURE 8
REFUSED 9

118: M5Q3

You can find written information about health on the Internet, in newspapers and magazines, and in brochures in the doctor's office and clinic. In general, how difficult is it for you to understand written health information? Would you say...

Not at all 1
A little 2
Somewhat 3
or Very difficult 4
or Never tried to get advice of information 5

br

DON'T KNOW/NOT SURE 8

REFUSED 9

119: M6Q1

People may provide regular care or assistance to a friend or family member who has a health problem or disability. During the past 30 days, did you provide regular care or assistance to a friend or family member who has a health problem or disability?

INTERVIEWER INSTRUCTIONS: If caregiving recipient has died in the past 30 days, say "I'm so sorry to hear of your loss." and code 7.

YES 1

NO 5

br

CAREGIVING RECIPIENT DIED IN THE PAST 30 DAYS 7

DON'T KNOW/NOT SURE 8

REFUSED 9

120: M6Q2

What is his or her relationship to you?

INTERVIEWER NOTE: If more than one person, say: "Please refer to the person to whom you are giving the most care."

Mother 01

Father 02

Mother-in-law 03

Father-in-law 04

Child 05

Husband 06

Wife 07

Live in partner 08

Brother or brother-in-law 09

Sister or sister-in-law 10

Grandmother 11

Grandfather 12

Grandchild 13

Other relative 14

Non-relative/Family friend 15

br

DON'T KNOW/NOT SURE 88

REFUSED 99

121: M6Q3

For how long have you provided care for that person? Would you say...

Less than 30 days 1

1 month to less than 6 months 2

6 months to less than 2 years 3
 2 years to less than 5 years 4
 More than 5 years 5
 br
 DON'T KNOW/NOT SURE 8
 REFUSED 9

122: M6Q4

In an average week, how many hours do you provide care or assistance? Would you say...

Up to 8 hours per week 1
 9 to 19 hours per week 2
 20 to 39 hours per week 3
 40 hours or more 4
 br
 DON'T KNOW/NOT SURE 8
 REFUSED 9

123: M6Q5

What is the main health problem, long-term illness, or disability that the person you care for has?

IF NECESSARY: Please tell me which one of these conditions would you say is the major problem? DO

NOT READ: RECORD ONE RESPONSE

Arthritis/Rheumatism 01
 Asthma 02
 Cancer 03
 Chronic respiratory conditions such as Enphysema or COPD 04
 Dementia or other Cognitive Impairment Disorders 05
 Developmental Disabilities such as Autism, Down's Syndrome, and Spina Bifida 06

 Diabetes 07
 Heart Disease, Hypertension, Stroke 08
 Human Immunodeficiency Virus Infection (HIV) 09
 Mental Illness, such as Anxiety, Depression, or Schizophrenia 10
 Other organ failure or diseases such as kidney or liver problems 11
 Substance Abuse or Addiction Disorders 12
 Injuries, including broken bones 13
 Old age/infirmity/frailty 14
 Other 15
 br
 DON'T KNOW/NOT SURE 88
 REFUSED 99

124: M6Q6

In the past 30 days, did you provide care for this person by...Managing personal care such as giving medications, feeding, dressing, or bathing?

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

125: M6Q7

In the past 30 days, did you provide care for this person by...Managing household tasks such as cleaning, managing money, or preparing meals?

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

126: M6Q8

Of the following support services, which one do YOU most need, that you are not currently getting?
[INTERVIEWER NOTE: IF RESPONDENT ASKS WHAT RESPITE CARE IS]: Respite care means short-term or long-term breaks for people who provide care.

Classes about giving care, such as giving medications 1
Help in getting access to services 2
Support groups 3
Individual counseling to help cope with giving care 4
Respite care 5
You don't need any of these support services 6
br
DON'T KNOW/NOT SURE 8
REFUSED 9

127: M6Q9

In the next 2 years, do you expect to provide care or assistance to a friend or family member who has a health problem or disability?

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

128: M6Q10

During the past 12 months, have you cared for anyone who experienced confusion or memory loss that is happening more often or is getting worse?

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

129: M6Q11

Have you or anyone else discussed the confusion or memory loss of the person you care for with a health care professional?

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

130: M8Q1

Now I would like to ask you some questions about sugary beverages. During the past 30 days, how often did you drink regular soda or pop that contains sugar? Do not include diet soda or diet pop. You can answer times per day, week, or month: for example, twice a day, once a week, and so forth.

INTERVIEWER NOTE: PLEASE REMIND RESPONDENTS TO INCLUDE REGULAR SODA THAT THEY MIXED WITH ALCOHOL. INTERVIEWER: CODE "777" IF R ANSWER 0.

NONE 777
DON'T KNOW/NOT SURE 888
REFUSED 999

131: M8Q1A

INTERVIEWER: DID R ANSWER IN:

Times per day 1
Times per week 2
Times per month 3
NONE 7
DON'T KNOW/NOT SURE 8
REFUSED 9

132: M8Q2

During the past 30 days, how often did you drink sugar-sweetened fruit drinks (such as Kool-aid and lemonade), sweet tea, and sports or energy drinks (such as Gatorade and Red Bull)? Do not include 100% fruit juice, diet drinks, or artificially sweetened drinks.

INTERVIEWER NOTE: FRUIT DRINKS ARE SWEETENED BEVERAGES THAT OFTEN CONTAIN SOME FRUIT JUICE OR FLAVORING. DO NOT INCLUDE 100% FRUIT JUICE, SWEET TEA, COFFEE DRINKS, SPORTS DRINKS, OR ENERGY DRINKS. INTERVIEWER: CODE ``777`` IF R ANSWER 0

NONE 777
DON'T KNOW/NOT SURE 888
REFUSED 999

133: M8Q2A

INTERVIEWER: DID R ANSWER IN:

Times per day 1
Times per week 2
Times per month 3

NONE 7
DON'T KNOW/NOT SURE 8
REFUSED 9

134: M9Q1

The next question is about eating out at fast food and chain restaurants. When calorie information is available in the restaurant, how often does this information help you decide what to order? Would you say...

Always 01
Most of the time 02
About half the time 03
Sometimes 04
Never 05
br
NEVER NOTICED OR NEVER LOOKED FOR CALORIE INFORMATION 06
USUALLY CANNOT FIND CALORIE INFORMATION 08
DO NOT EAT AT FAST FOOD OR CHAIN RESTAURANTS 55
DON'T KNOW/NOT SURE 88
REFUSED 99

135: M10Q1

During the past 30 days, on how many days did you use marijuana or hashish?
INTERVIEWER: ENTER 1-30, CODE "77" IF R ANSWER 0.

NONE 77
DON'T KNOW/NOT SURE 88
REFUSED 99

136: M10Q2A

During the past 30 days, how did you use marijuana? Please tell me all that apply. Did you....Smoke it ?(for example: in a joint, bong, pipe, or blunt)

INTERVIEWER NOTE: Use clarification in parentheses only if needed.

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

137: M10Q2B

Eat it? (for example, in brownies, cakes, cookies, or candy)

INTERVIEWER NOTE: Use clarification in parentheses only if needed.

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

138: M10Q2C

Drink it? (for example, in tea, cola, alcohol)

INTERVIEWER NOTE: Use clarification in parentheses only if needed.

YES 1

NO 5

DON'T KNOW/NOT SURE 8

REFUSED 9

139: M10Q2D

Vaporize it (for example in an e-cigarette-like vaporizer)

INTERVIEWER NOTE: Use clarification in parentheses only if needed.

YES 1

NO 5

DON'T KNOW/NOT SURE 8

REFUSED 9

140: M10Q2E

Dab it? (for example using butane hash oil, wax or concentrates)

INTERVIEWER NOTE: Use clarification in parentheses only if needed.

YES 1

NO 5

DON'T KNOW/NOT SURE 8

REFUSED 9

141: M10Q2F

Was it used in some other way?

YES 1

NO 5

DON'T KNOW/NOT SURE 8

REFUSED 9

144: M21Q1

The next two questions are about sexual orientation and gender identity. Do you consider yourself to be:

INTERVIEWER NOTE: We ask this question in order to better understand the health and health care needs of people with different sexual orientations. INTERVIEWER NOTE: Please say the number before the text response. Respondent can answer with either the number or the text/word.

1) Straight 1

2) Lesbian or gay 2

3) Bisexual 3

br

OTHER 4

DONT' KNOW/NOT SURE 8

REFUSED 9

145: M21Q2

Do you consider yourself to be transgender?

INTERVIEWER NOTE: If asked about definition of transgender: Some people describe themselves as transgender when they experience a different gender identity from their sex at birth. For example, a person born into a male body, but who feels female or lives as a woman would be transgender. Some transgender people change their physical appearance so that it matches their internal gender identity. Some transgender people take hormones and some have surgery. A transgender person may be of any sexual orientation - straight, gay, lesbian, or bisexual.

YES 1

NO 5

br

DON'T KNOW/NOT SURE 8

REFUSED 9

146: M21Q2A

Do you consider yourself to be

INTERVIEWER NOTE: Please say the number before the "yes" text response. Respondent can answer with either the number or the text/word. INTERVIEWER NOTE: If asked about definition of gender non-conforming: Some people think of themselves as gender non-conforming when they do not identify only as a man or only as a woman.

1) male-to-female 1

2) female-to-male 2

or 3) gender nonconforming 3

br

DON'T KNOW/NOT SURE 8

REFUSED 9

172: BC1Q1

During the past 30 days, on how many days did you text or e-mail while driving a car or other vehicle?
ENTER 1-30, CODE "77" IF R ANSWER "0".

DO NOT DRIVE 55

NONE 77

DON'T KNOW/NOT SURE 88

REFUSED 99

173: BC1Q2

During the past 30 days, on how many days did you talk on a cell phone while driving a car or other vehicle?

ENTER 1-30, CODE "77" IF R ANSWER "0".

DO NOT DRIVE 55

NONE 77
DON'T KNOW/NOT SURE 88
REFUSED 99

174: BC2Q1

In the past year, did you use any pain medications that were prescribed to you by a doctor?

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

175: BC2Q2

The last time you filled a prescription for pain medication, was there any medication leftover?

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

176: BC2Q3

In the past year, did you use any prescription medications that were NOT prescribed to you by a doctor?

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

177: BC3Q1

Which statement best describes the rules about smoking inside your home? Do not include decks, garages or porches. Would you say...

Smoking is not allowed anywhere inside your home 1
Smoking is allowed in some places or at some times 2
or Smoking is allowed anywhere inside the home 3

br

DON'T KNOW/NOT SURE 8
REFUSED 9

178: BC3Q2

Which statement best describes the rules about smoking inside your family vehicle? Would you say...

Smoking is not allowed at any time in family vehicle 1
Smoking is allowed only when children 17 and younger not present 2
Smoking is allowed at all times in family vehicle 3
or Do not have a car 4

br

DON'T KNOW/NOT SURE 8
REFUSED 9

179: BC4Q1

In an average week, on how many days do you go to local parks or recreation centers for exercise?
ENTER 1-7, CODE "77" IF R ANSWER "0".

NONE 77
DON'T KNOW/NOT SURE 88
REFUSED 99

180: BC4Q2

In good weather, how frequently do you use a local paved or dirt trail for walking, hiking, or biking?
Would you say...

Daily 1
At Least Weekly 2
At Least Monthly 3
Less Than Monthly 4
or Never 5
br
DON'T KNOW/NOT SURE 8
REFUSED 9

183: BC5Q2

During the past month, not counting juice, how many times per day, week, or month did you eat fruit?
Count fresh, frozen, or canned fruit.

NEVER 777
DON'T KNOW/NOT SURE 888
REFUSED 999

184: BC5Q2B

INTERVIEWER: DID R ANSWER IN:

Times per day 1
Times per week 2
Times per month 3
NEVER 7
br
DON'T KNOW/NOT SURE 8
REFUSED 9

185: BC5Q3

During the past month, how many times per day, week, or month did you eat cooked or canned beans, such as refried, baked, black, garbanzo beans, beans in soup, soybeans, edamame, tofu or lentils. Do NOT include long green beans.

NEVER 777
DON'T KNOW/NOT SURE 888
REFUSED 999

186: BC5Q3B
INTERVIEWER: DID R ANSWER IN:
Times per day 1
Times per week 2
Times per month 3
NEVER 7
br
DON'T KNOW/NOT SURE 8
REFUSED 9

187: BC5Q4
During the past month, how many times per day, week, or month did you eat dark green vegetables for example broccoli or dark leafy greens including romaine, chard, collard greens or spinach?

NEVER 777
DON'T KNOW/NOT SURE 888
REFUSED 999

188: BC5Q4B
INTERVIEWER: DID R ANSWER IN:
Times per day 1
Times per week 2
Times per month 3
NEVER 7
br
DON'T KNOW/NOT SURE 8
REFUSED 9

189: BC5Q5
During the past month, how many times per day, week, or month did you eat orange-colored vegetables such as sweet potatoes, pumpkin, winter squash, or carrots?

NEVER 777
DON'T KNOW/NOT SURE 888
REFUSED 999

190: BC5Q5B
INTERVIEWER: DID R ANSWER IN:
Times per day 1
Times per week 2

Times per month 3

NEVER 7

br

DON'T KNOW/NOT SURE 8

REFUSED 9

191: BC5Q6

Not counting what you just told me about, during the past month, about how many times per day, week, or month did you eat OTHER vegetables? Examples of other vegetables include tomatoes, tomato juice or V-8 juice, corn, eggplant, peas, lettuce, cabbage, and white potatoes that are not fried such as baked or mashed potatoes.

NEVER 777

DON'T KNOW/NOT SURE 888

REFUSED 999

192: BC5Q6B

INTERVIEWER: DID R ANSWER IN:

Times per day 1

Times per week 2

Times per month 3

NEVER 7

br

DON'T KNOW/NOT SURE 8

REFUSED 9

196: BC6Q4

During the past 30 days, about how often did you feel so depressed that nothing could cheer you up?

INTERVIEWER: IF NECESSARY: all, most, some, a little, or none of the time.

All 1

Most 2

Some 3

A little 4

None 5

br

DON'T KNOW/NOT SURE 8

REFUSED 9

199: BC6Q7

During the past 30 days, for about how many days did a mental health condition or emotional problem keep you from doing your work or other usual activities?

ENTER 1-30, CODE "77" IF R ANSWER "0".

NONE 77

DON'T KNOW/NOT SURE 88
REFUSED 99

200: BC6Q8

Are you now taking medicine or receiving treatment from a doctor or other health professional for any type of mental health condition or emotional problem?

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

203: BC7Q1

Do you have a written plan or have you shared your end-of-life preferences with your doctor?

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

204: BC7Q2

Do you have a written plan or have you shared your end-of-life preferences with a family member/s?

YES 1
NO 5
DON'T KNOW/NOT SURE 8
REFUSED 9

205: BC8Q1

How often in the past 12 months would you say you were worried or stressed about having enough money to pay your rent/mortgage? Would you say...

INTERVIEWER NOTE: We ask this question in order to compare health indicators among people in different housing situations

Always 1
Usually 2
Sometimes 3
Rarely 4
or Never 5
br
NOT APPLICABLE 7
br
DON'T KNOW/NOT SURE 8
REFUSED 9

206: BC8Q2

How often in the past 12 months would you say you were worried or stressed about having enough money to buy nutritious meals? Would you say...

Always 1
Usually 2
Sometimes 3
Rarely 4
or Never 5
br
NOT APPLICABLE 7
DON'T KNOW/NOT SURE 8
REFUSED 9

207: BC8Q3

How many jobs and/or businesses have you held at one time within the past year?

CODE "7" IF R ANSWER "0" OR "NONE".

ONE 1
TWO 2
THREE 3
FOUR 4
FIVE OR MORE 5
DID NOT HAVE A JOB WITHIN THE PAST YEAR 7
br
DON'T KNOW/NOT SURE 8
REFUSED 9

208: BC8Q4

At your main job or business, how are you generally paid for the work you do. Are you...

INTERVIEWER NOTE: CODE "4" IF R ANSWER PAID IN MULTIPLE WAYS AT THEIR MAIN JOB. INTERVIEWER

NOTE: We ask this question in order to compare health indicators among people who are paid in different ways.

Paid by salary 1
Paid by the hour 2
Paid by the job/task (e.g. commission, piecework) 3
Paid some other way 4
br
DON'T KNOW/NOT SURE 8
REFUSED 9

209: BC8Q5

About how many hours do you work per week at all of your jobs and businesses combined?

ENTER 1-95, CODE "96" IF R ANSWER 96 OR MORE. CODE "777" IF R ANSWER "0".

96 OR MORE 96
NONE 777
DON'T KNOW/NOT SURE 888
REFUSED 999

210: BC8Q6

Thinking about the last time you worked, at your main job or business, how were you generally paid for the work you did? Were you...

INTERVIEWER NOTE: We ask this question in order to compare health indicators among people who are paid in different ways.

Paid by salary 1

Paid by the hour 2

Paid by the job/task (e.g. commission, piecework) 3

Paid some other way 4

br

DON'T KNOW/NOT SURE 8

REFUSED 9

211: BC8Q7

Thinking about the last time you worked, about how many hours did you work per week at all of your jobs and businesses combined?

ENTER 1-95, CODE "96" IF R ANSWER 96 OR MORE. CODE "777" IF R ANSWER "0".

96 OR MORE 96

NONE 777

DON'T KNOW/NOT SURE 888

REFUSED 999

212: BC8Q8

Did you vote in the last presidential election?

INTERVIEWER NOTE: The November 2012 election between Barack Obama and Mitt Romney.

INTERVIEWER NOTE: CODE "7" IF R ANSWER "I DID NOT REGISTER", "I AM NOT A U.S. CITIZEN", OR "I AM NOT ELIGIBLE TO VOTE"

YES 1

NO 5

NOT APPLICABLE 7

DON'T KNOW/NOT SURE 8

REFUSED 9

230: INT49

ID: <PIN> PHONE:\$N

Thank you very much. We will call you back at a more convenient time.

NOT SAFE TIME TO TALK NOW ST

231: INT50

ID: <PIN> PHONE:\$N

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.

INELIGIBLE-PHONE NUMBER NOT NUMBER DIALED IP

232: INT51

ID: <PIN> PHONE:\$N

Thank you very much but we are only interviewing persons on residential phones lines at this time.

INELIGIBLE-BUSINESS IB

233: INT52

ID: <PIN> PHONE:\$N

Thank you very much, but we are only interviewing persons who live in a private residence or college housing at this time.

INELIGIBLE-NOT PRIVATE RESIDENCE OR COLLEGE HOUSING IE

234: INT53

ID: <PIN> PHONE:\$N

Thank you very much, but we are only interviewing persons who live in Buffalo County at this time.

INELIGIBLE-NOT IN BUFFALO COUNTY IS

235: INT54

ID: <PIN> PHONE:\$N

Thank you very much, but we are only interviewing by cell telephones at this time.

INELIGIBLE-LANDLINE PHONE IC

236: INT55

ID: <PIN> PHONE:\$N

Thank you very much, but we are only interviewing persons aged 18 or older at this time.

INELIGIBLE-NOT 18 YEARS OF AGE OR OLDER IA

237: INT99

That was my last question. Thank you very much for your time and cooperation.

COMPLETE CO

Appendix B: BCCHP BRFSS Interviewer Study Guide



Buffalo County Behavioral Risk Factor Surveillance System Interviewer Guide

In Voxco:

Landline Practice – BC BRFSS LANDLINE-PRACTICE
Landline Actual Study – BC BRFSS LANDLINE

Cell Phone Practice – BC BRFSS CELL-PRACTICE
Cell Phone Actual Study – BC BRFSS CELL

On your timesheet:
BCCHP BRFSS

A continuing quarterly survey health-related risk behaviors, chronic health conditions, and use of preventative services in Buffalo County, Nebraska.

Survey period:
Quarterly beginning in 2016, indefinitely

IMPORTANT PHONE NUMBERS & WEB SITES

Bureau of Sociological Research: 472-3672
800-480-4549
bosr.unl.edu

Buffalo County Community Partners: 308-865-2284
www.bcchp.org

01.28.16

The Buffalo County Community Partners Behavioral Risk Factor Surveillance System Survey (BCCHP BRFSS)

AT-A-GLANCE

The Buffalo County Community Partners Behavioral Risk Factor Surveillance System Survey (BCCHP BRFSS), known around BOSR as Buffalo County BRFSS (pronounced “BUR-fus”), is a survey of health-related risk behaviors, chronic health conditions, and use of preventative services. We will be conducting this survey every quarter (Jan.-Mar., Apr.-Jun., Jul.-Sep., and Oct.-Dec.) with a goal of 250 completes per quarter. The survey will be conducted through both landlines and cell phones.

The principal investigator of this study is Buffalo County Community Partners. The survey includes questions about health status and behaviors, tobacco/alcohol/drug use, diseases, exercise and diet, among other topics. It mirrors the statewide BRFSS survey conducted by BOSR at Whitehall.

Interview Length

The interview will take approximately 30 to 40 minutes to complete. The length of the interview will depend on respondents’ answers (some questions or sections will be skipped depending on previous answers). As with all surveys, interview length will depend on the pace of individual respondents as well.

Household Eligibility

At the beginning of the introduction, there are a few screener questions to make sure that the household is eligible for the survey. To be eligible, they must be 18 years of age or older, live in a private residence or college housing (i.e. not be a business or group quarters of some kind), and reside in Buffalo County. We also confirm that the number dialed is the number we called. For the landline sample, we confirm that we haven’t called a cell phone and vice versa. If a record doesn’t meet all these criteria, they will screen out as ineligible. The intro screens are set up to guide you through this process.

Who is your respondent?

Unlike surveys we have been conducting recently, we are not working from a list of individuals to call for this project. We will be calling households or cellphones with no advanced notice that we will be calling. This also means we won’t know the name of the person we are trying to reach. We will only be talking to individuals who are 18 years of age or older. For the cell phone sample, we will talk to whomever the phone belongs to (as cell phones typically belong to one individual rather than a group). For the landline sample, we are calling a household and therefore need to randomly select a respondent from the adults in the household.

Random Selection – Voxco is programmed to randomly select a respondent from the household at the appropriate time in the introduction. We will first ask for the number of adults living in the household, then we will ask how many of those adults are men and women. Based on that information, the computer will randomly select someone and instruct you to ask for that person (e.g. “...the oldest female” or “...the second youngest male”). If the person is already on the phone, we continue as normal. If not, you will ask for that person, reintroduce yourself, and continue into the survey. If the designated respondent is unavailable, then we need to try to set a callback to reach them. If we need to callback,

try to get the person's name and leave it in the attempt messages so we can ask directly for that person when we call back.

It is crucial that you only interview the designated respondent! Once the computer randomly selects the respondent we can only interview that person. Even if the designated respondent is unwilling to do the survey but someone else in the household is. It is still a refusal.

The Interview

As previously mentioned, the BRFSS questionnaire contains questions on health conditions and behaviors. Here is a full list of question topics:

Health Status	Drinking and Driving	Children's Health
Health-Related Quality of Life	HIV/AIDS	Emotional Support and Life Satisfaction
Health Care Access	Pre-Diabetes	Distracted Driving
Exercise	Health Literacy	Prescription Drug Use
Chronic Health Conditions	Caregiver Status	Built Environment
Demographics	Sugar Sweetened Beverages	Fruits and Vegetables
Tobacco Use	Menu Labeling	Mental Illness and Stigma
E-Cigarettes	Marijuana Use	End-of-Life
Alcohol Consumption	Industry and Occupation	Social Stress
Seatbelt Use	Sexual Orientation and Gender Identity	Marketing Awareness

Of course, some of these topics might be sensitive information to provide for certain people. The introduction informs the respondent that all information is confidential and will not be identifiable and that they have the right to refuse to answer any questions they don't want to answer. If a respondent is concerned about sensitive questions during the interview, you can reemphasize these points.

Although it's not part of the official Voxco script for this survey, there is a script for the "burden estimate" statement that accompanies this questionnaire. It can be found on page 4 of this study guide. It is not required to read to all respondents, but can be read if the respondent asks for more specific information.

Furthermore, some of the topics are technical and might be unfamiliar to you or the respondent. Information on complex terms (pronunciations, definitions, etc.) is included in Voxco as an interviewer note when applicable. You can also find a guide on page 8 of this study guide.

Lastly, this study guide contains a Frequently Asked Questions section on page 6 that you may use to address any questions or concerns that may arise from respondents.

Attempt Messages

It is imperative that you read all of the attempt messages carefully before dialing. In many cases, the only way to know who you need to interview will be by reading the attempt messages left by other interviewers. This also means that you will need to be very thorough and make sure you are including detailed attempt messages anytime you talk to a person at a phone number.

Monitoring

As with all phone projects, your calls will be monitored and supervisors will provide feedback regularly. The reasons for this are two-fold. First, monitoring serves as a second verification system to ensure that we are collecting the highest quality data. Second, we hope to identify areas where your strengths are as well as areas where you might need some improvement. We understand that some of the topics discussed in this survey might be uncomfortable or challenging and want you to know that you are always welcome to discuss any issues you have with project staff.

Feedback

We need your help! To help us make sure we are creating a positive experience for our respondents and collecting good data for our client, please make notes about situations and issues that are particularly challenging for your respondents and/or for you as an interviewer. We'd also like to hear input from you on how can improve on the survey, any problems associated with determining who to speak with, and any issues the client needs to be made aware of.

In a nutshell...

This should be a unique, interesting, and challenging survey for us to complete. Some respondents may need extra time to answer questions. Others may need you to speak more clearly or to have questions repeated. We expect that you will maintain uniformity and neutrality and be professional at all times.

Keep in mind that the BOSR interviewer position is structured so that you are paid by the hour, not by the completed interview. For this study especially, it is extremely important that you take the time to read all attempt messages and for you to provide a survey environment where your respondents are comfortable. It is your job to make sure that the respondents have the opportunity to select their own answer choices and voice their opinions about their high school experiences.

Burden Estimate Statement

Below you will find the burden statement and some information about it. The statement itself is contained in the box.

NOTE: Interviewers do not need to read any part of the burden estimate nor provide the OMB number unless asked by the respondent for specific information. If a respondent asks for the length of time of the interview provide the most accurate information based on the version of the questionnaire that will be administered to that respondent. If the interviewer is not sure, provide the average time as indicated in the burden statement. If data collectors have questions concerning the BRFSS OMB process, please contact Carol Pierannunzi at ivk7@cdc.gov.

Public reporting burden of this collection of information is estimated to average 27 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0920-1061).

Frequently Asked Questions (FAQs)

WHO IS CONDUCTING THIS STUDY?

This study is being conducted on behalf of the Buffalo County Community Partners. Buffalo County Community Partners is a nonprofit organization whose mission is to assess, promote, and strengthen the health of Buffalo County.

WHAT IS THE PURPOSE OF THIS STUDY?

The purpose of this study is to gain a better understanding of the general health behaviors of the residents of Buffalo County and see how they compare to Nebraska as a whole.

WHAT WILL YOU ASK? / WHAT IS THIS SURVEY ABOUT?

We ask about general health, exercise, and other factors that can affect a person's health.

WHAT IS BEING DONE WITH THE RESULTS?

All the information will be combined and will help the Buffalo County Community Partners find health care resources for Buffalo County. All the reports will be in summary form only and no individually identifiable information will be released.

HOW DID YOU GET MY NUMBER?

Your number was chosen at random from a list of all phone numbers in Buffalo County.

WHY DON'T YOU GET SOMEONE ELSE?

This study is a scientific one that prevents us from replacing one person with another. The information we get from each person is important in understanding the health condition and practices of the people in Buffalo County.

I'M HEALTHY, INTERVIEW SOMEONE ELSE.

It is vitally important that we survey both people of good health and those with health concerns to give us an accurate overall picture of the health of Buffalo County residents.

I WANT TO TALK TO SOMEONE.

You may speak to an interviewer supervisor if you have an issue about the interview. Otherwise you may contact Buffalo County Community Partners executive director Denise Zwiener at 308-865-2280.

HOW WILL MY RESPONSES HELP MY COUNTY?

Your responses will help Buffalo County Community Partners by letting them know where they need to implement new programs and help existing programs by making changes where needed.

WHY ARE YOU ASKING ABOUT MY (age, weight, income, etc.)?

You can use this response for pretty much any inquiry about why we're asking a certain question.

- We ask about ___ to see if it's correlated with different disabilities and ailments.
- We ask about ___ to see if it's correlated with different health conditions. Your answers are held in strict confidence.

For demographics:

- People's chances of illness may vary according to their _____(age / race / weight / etc). Your answers may help us learn how we can lower someone's chances of becoming ill and provide better medical care.

Response for income refusal:

- We don't need your actual income amount, just a range. Does it fall under \$25,000?
- We only want a range, no specific information. Income can affect accessibility to healthcare, preventative care, nutritious meals, and so on. These can all be factors in overall lifetime health, health related issues, and developing long term illnesses. Would you say it's more or less than \$25,000?

I'M IN A HURRY, HOW LONG WILL THIS TAKE?

It will only take less than a minute to find out if you are selected, so let's go ahead with that and then you can tell me what works for you if you are selected.

It only takes 30-40 minutes. If you need to go, you can just let me know and we'll finish it up another time.

It will only take a moment to see if you qualify for the study.

THE RESPONDENT HAD STARTED THE SURVEY WITH US BEFORE.

We'd hate to have to discard the information we've already collected.

We can only use completed surveys. I would hate to lose the information you've already spent time answering.

HOW DOES THIS HELP?

This survey gives doctors, hospitals and healthcare providers the latest information about changes and trends in health practices.

This information is used to help Buffalo County Community Partners find health care resources for Buffalo County residents

This study is designed to see how health habits of Buffalo County residents affect their chances of getting long term illnesses, like cancer, heart disease or diabetes.

This study is designed to assist healthcare officials identify trends and changes for illnesses like cancer, heart disease, asthma or diabetes.

This survey is an instrumental tool in allocating federal, state, and private healthcare funding to the most significant problems. Your input is very valuable.

Your input is important so Buffalo County Community Partners can make better decisions in planning health programs. We don't want your views and experiences overlooked.

The data we collect is used by numerous agencies to implement the most effective use of healthcare funding for Buffalo County residents.

This study can help us identify emerging health trends in Buffalo County residents.

Definition and Pronunciation Guide

Below is a list of potentially unfamiliar terms. You should familiarize yourself with the pronunciations and definitions where present. They are listed by question number (e.g. S4Q1).

S4Q1

Calisthenics – gymnastic exercises to achieve bodily fitness and grace of movement

Kal-uh-sthen-iks

S6Q1

Myocardial infarction – heart attack

Mahy-uh-kahr-dee-uhl in-fahrk-shuhn

S6Q2

Angina – any attack of painful spasms characterized by sensations of choking or suffocating

An-jahy-nuh

Coronary – of or relating to the heart

S6Q8

Chronic Obstructive Pulmonary Disease (COPD) – any of various lung diseases

Emphysema – a chronic, irreversible disease of the lungs characterized by abnormal enlargement of air spaces in the lungs accompanied by destruction of the tissue lining the walls of the air spaces

Em-fuh-see-muh

Chronic bronchitis – inflammation of the bronchial mucous membrane characterized by cough, hypersecretion of mucus, and expectoration of sputum (mixture of saliva, mucus, and pus) over a long period of time

Brong-kahy-tis

S6Q9

Arthritis – acute or chronic inflammation of a joint

Rheumatoid arthritis – a chronic autoimmune disease characterized by inflammation of the joints, frequently accompanied by marked deformities

Roo-muh-toid

Gout – an acute, recurrent disease characterized by painful inflammation of the joints, mainly in the feet and hands

Lupus – any of various diseases or conditions marked by inflammation of the skin

Fibromyalgia – a rheumatoid disorder characterized by muscle pain and headaches

Fahy-broh-mahy-AL-juh

S6Q10

Dysthymia – persistent mild depression

Dis-thahy-mee-uh

S6Q11

Incontinent – unable to restrain natural discharges or evacuations of urine or feces

S9Q1

Bidi – **bee-dee**

Kretek – **kree-tehk**

S9Q5
Snus – **snoos**

S8Q4C, S8Q5C, M22Q4C, & M22Q5C
Guamanian – **gwah-mey-nee-uhn**
Chamorro – **chuh-mawr-oh**

Notes on Questions and Data Entry

There are a few areas of this questionnaire that may be different from what you are used to with previous surveys or less straightforward/more complex.

- This survey requires that we collect some information before we talk to a respondent in order to determine household eligibility and select the designated respondent. The intro screens are designed to help you navigate through this process. When an household is ineligible, you will be taken to the appropriate scripted response. The intro screens split out between substantive response options and disposition options (answering machine, callback, refusal, etc.). You should be familiar with these at each screen.
- There are many interviewer notes (in bright red right below the main question) throughout the questionnaire. These offer extra points of clarification, probes, and follow-up questions. These are important. Make sure you consider these as you go through the interview.
- Remember to read all the response options that are not in all caps!
- There are a number of questions on this survey that are open-ended where we ask respondents to give us a number ("...how many days...", "...how many times...", etc.; see the example below). If the respondent says "zero" or "none," instead of entering "0" in the box, you will enter "77" or "777," whichever is the response option for "none" listed above.

<p>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?</p> <p><i>ENTER 1-30, CODE "77" IF R ANSWER 0.</i></p>	<p>77 <input type="checkbox"/> NONE 88 <input type="checkbox"/> DONT KNOW/NOT SURE 99 <input type="checkbox"/> REFUSED</p>
<p>Next <input type="text"/></p> <p>Progress <input type="checkbox"/> 10%</p>	

- There are a few questions that require you to probe if the respondent answers a certain way. You will be instructed appropriately in the interviewer notes where applicable. See the example below.

<p>Do you have one person you think of as your personal doctor or health care provider?</p> <p><i>IF R ANSWER "No," ASK: "Is there more than one, or is there no person who you think of as your personal doctor or health care provider?"</i></p>	<p>1 <input type="checkbox"/> YES, ONLY ONE 2 <input type="checkbox"/> MORE THAN ONE 5 <input type="checkbox"/> NO 8 <input type="checkbox"/> DONT KNOW/NOT SURE 9 <input type="checkbox"/> REFUSED</p>
--	---

- There are a couple of instances where we ask for weight and height. We expect that most of the time, respondents will answer in feet/inches and pounds/ounces, but they will have the option to give their answers in metrics. You will have to specify what units respondents used to answer these questions. All necessary fields will be on the same screen rather than separate screens.

When we ask for height, feet and inches are a combined measure not being asked separately. In other words, if someone reports being 6 feet tall, you would put "6" in the feet field and "0" in the inches field *NOT* "6" in the feet field and "72" in the inches field. If someone responds in only inches, you can put "0" in the feet field and all the total inches in the inches field. If someone says "don't know" or refuses this question, you must select "don't know" or "refused" for all the questions on the page. See the example below.

About how tall are you without shoes?

FEET

DONT KNOW/NOT SURE
 REFUSED

INCHES

DONT KNOW/NOT SURE
 REFUSED

INDICATE WHETHER R ANSWERED IN FEET/INCHES OR METERS CENTIMETERS

FEET/INCHES
 METERS/CENTIMETERS

DONT KNOW/NOT SURE
 REFUSED

- Similar to the point above, there are other spots where we have to specify the frequency the respondent answered the question in. Again, if they say "none," "don't know," or "refused," you will have to select that on all the questions on a page. See below.

Now I would like to ask you some questions about sugary beverages.

During the past 30 days, how often did you drink regular soda or pop that contains sugar? Do not include diet soda or diet pop.

You can answer times per day, week, or month: for example, twice a day, once a week, and so forth.

INTERVIEWER NOTE: PLEASE REMIND RESPONDENTS TO INCLUDE REGULAR SODA THAT THEY MIXED WITH ALCONOL.

INTERVIEWER: CODE "777" IF R ANSWER 0.

NONE
 DONT KNOW/NOT SURE
 REFUSED

INTERVIEWER: DID R ANSWER IN:

Times per day
 Times per week
 Times per month
 NONE
 DONT KNOW/NOT SURE
 REFUSED

Appendix C: BRFSS Disposition Code and Call Back Rules

Disposition Code	Description	Definition	Range of number of attempts	Call back rules
1100	Complete	Assign if respondent completes questionnaire.	1-15 attempts	
1200	Partial complete	Assign if respondent completes gender and three other demographic questions with responses other than “don’t know/not sure” or “refused”	1-15 attempts	Respondent may be called back to fully complete the interview. Give final disposition on 15 th or subsequent call attempt even if there is only one occurrence of a refusal or termination.
2111	Household level refusal (landline only)	Assign for landline only if refusal after respondent selection but before Core BRFSS Q1 in landline. <u>Refusal can be from any member of the household.</u> Automated messages should not count as refusals.	1-15 attempts	May be assigned after one attempt if hard refusal or special circumstance. Assign after maximum number of attempts and at least one interim disposition of 5111 (household level refusal).
2112	Known respondent refusal	Assign if <u>refusal by selected respondent</u> before Core BRFSS Q1 in landline. Automated messages should not count as refusals. Assign if cell phone respondent refuses after number determined to be personal phone and respondent confirms living in private residence or college housing.	1-15 attempts	May be assigned after one attempt if hard refusal or special circumstance. Assign after maximum number of attempts and at least one interim disposition of 5112 (respondent refusal).
2120	Break off/ termination within questionnaire	Assign if respondent has completed Core BRFSS Q1 with response other than “Don’t know” or “refused” and terminates/breaks off prior to demographics section. (NOTE: If respondents complete gender and three other demographics questions prior to break off code 1200.)	1-15 attempts	May be assigned after one attempt if hard refusal or special circumstance. Assign after maximum number of attempts with at least one interim disposition of 5120 (break off/termination).
2210	Respondent never available	Assign if respondent selected /known eligible, but never available. Respondent may not have been contacted or contacted and asked to be called	1-15 attempts	Give final disposition when notified or after at least 5 calling occasions of no more than 3 attempts with at least 3

		later. Includes repeated unsafe location for interview, respondent away during period of interview, respondent not available for appointment. Includes selected respondents who die during interview period.		weekday, 3 weeknight and 3 weekend calls for landline. Cell phone respondents may be called up to 8 times, with at least 2 weekday, 2 weeknight and 2 weekend attempts. Assign after maximum number of calling attempts with at least one interim disposition of 5100 (appointment), or 5560 (unsafe location).
2220	Household answering device (landline only)	Assign if repeated contact with answering device which confirms residential/non business number (landline only). The answering device gives a message confirming private residence by using the words "home," "family," "residence," or "house" or by using family name in the message (landline only). Due to potential for cell phone answering devices to be out-of-sample and/or not be connected to eligible respondents, <u>do not assign this code to cell phone sample numbers.</u> For cell phone answering devices use code 3140 (Answering device, unknown if eligible residence/respondent).	6-15 attempts	Give final disposition after at least 5 calling occasions of no more than 3 attempts with at least 3 weekday, 3 weeknight and 3 weekend calls for landline. Assign after maximum number of calling attempts with at least one interim disposition of 5220 (answering device, confirms residence).
2320	Respondent physically or mentally unable to complete interview	Assign if respondent selected but unable to complete interview due to physical or mental impairment. This includes temporary conditions such as bereavement, which will last beyond the interview period.	1-6 attempts	Assign the first time a <u>selected respondent</u> is contacted or is described by someone else as physically or mentally incapable of completing survey or the second time a respondent who is physically or mentally impaired is contacted.
2330	Language barrier, selected respondent	Selected respondent does not speak English or other language for which interviewers are available. (NOTE: If language barriers prevent completion of respondent selection, assign code	1-6 attempts	Assign the first time a <u>selected respondent</u> is contacted or is described by someone else as not speaking English or other language for which interviewers are available.

		3330 (language barrier, physical or mental impairment).		
3100	Unknown if housing unit	Assign if hang up or call back request without confirming private residence/college housing (landline and cell phone). Assign for landline sample if contact without completion of private household/college housing screener questions.	1-15 attempts	Give final disposition after second hang-up/ call back request/ termination or when a first time hang up will not be called back because of hard refusal or special circumstances and when household eligibility is NOT established . If the first occurrence is on 15 th attempt, give final disposition. Assign after maximum number of attempts with at least one interim disposition of 5050 (hang up, unknown if housing unit).
3130	No answer	Assign if phone rings normally but no one answers.	6-15 attempts	Give final disposition after at least 5 calling occasions of no more than 3 attempts with at least 3 weekday, 3 weeknight and 3 weekend calls for landline. Cell phone respondents may be called up to 8 times, with at least 2 weekday, 2 weeknight and 2 weekend attempts. Assign after maximum number of attempts with plurality of interim dispositions of 5130 (no answer).
3140	Answering device, unknown whether eligible	Assign if answering device without confirmation of household (landline). Assign if cell phone reaches answering device.	10-15 attempts for landline; up to 8 attempts for cell phone	Give final disposition after at least 5 calling occasions of no more than 3 attempts with at least 3 weekday, 3 weeknight and 3 weekend calls for landline. Cell phone respondents may be called up to 8 times, with at least 2 weekday, 2 weeknight and 2 weekend attempts. Assign after maximum number of attempts with plurality of

				interim dispositions of 5140 (answering device, unknown if eligible residence or respondent).
3150	Telecommunication barrier	Assign if call blocking, message asking caller for identification or other ID requirements which cannot be met or other barrier established by potential respondent or household. Message does not provide information on whether number has reached a household or household resident.	1-6 attempts	Give final disposition after up to 3 calling occasions of no more than 2 attempts with at least 2 weekday, 2 weeknight and 2 weekend calls for landline. Cell phone respondents may be called up to 6 times, with at least 2 weekday, 2 weeknight and 2 weekend attempts. Assign after maximum number of attempts with at least one interim disposition of 5150 (telecommunication barrier) and all others noncontact.
3200	Household, not known if respondent eligible	Assign for landline sample if private residence confirmed without selecting respondent. (NOTE: If contact is made and <u>household eligibility is unknown</u> , use code 3100). Assign for cell phone if contact is made with household resident without determining whether cell phone number and respondent are eligible. Contact with group home may apply. Contact with vacation home may apply. Contact with household where residents are away for interview period may apply.	1-15 attempts	Give final disposition after second hang-up/ call back request/ termination or when a first time hang up will not be called back because of hard refusal or special circumstances and when respondent eligibility is NOT established . If the first occurrence is on 15 th attempt, give final disposition. Assign after maximum number of attempts with at least one interim disposition of 5050 (hang up, unknown if respondent eligible).
3322	Physical or mental impairment (household level)	Assign if physical or mental impairment prevents determination of private residence or prevents determination of eligibility of household or resident. This is a household level assignment. If selected respondent is physically or mentally impaired assign 2320 after first attempt.	1-6 attempts	Assign after maximum number of attempts with at least one interim disposition of 5320 (physical or mental impairment).

3330	Language barrier, (household level)	Assign if language barrier prevents determination of private residence or prevents determination of eligibility of household or resident. This is a household level assignment. If selected respondent has language barrier assign 2330 when informed.	1-6 attempts	Assign after maximum number of attempts with at least one interim disposition of 5330 (language barrier).
3700	On never call list	Assign only if supervisor can determine that respondent is on never call list. Interviewer should not assign based on respondent information. (NOTE: If respondent insists that he/she is on never call list code assign household level refusal (2111) or respondent refusal (2112).	No attempt	Assign with confirmation by supervisor.
4100	Out of sample	Assign if out of state for landline or out of country for cell phone. Assign if indication that number reaches vacation home or household members are not living in home during interview period. (NOTE: If contact is made with respondent who indicates that they have been reached at their vacation home where they live for at least 30 days per year, interview can continue).	1-15 attempts	Assigned as soon as sample ineligibility determined. This should take priority over other final dispositions.
4200	Fax/data/modem	Assign if call reaches fax or data line without human contact.	1-6 attempts	<u>May be assigned after one attempt.</u> If states choose to use six attempts, give final disposition after recommendation for 3 calling occasions with 2 weekday, 2 weeknight and 2 weekend calls for landline. If states choose to use six attempts, cell phone respondents may be called up to 6 times, with recommendations for 2 weekday, 2 weeknight and 2 weekend attempts. If six attempts are used, assign after maximum number of attempts with at least one interim disposition of 5200

				(fax/data/modem) and all others noncontact.
4300	Nonworking number/ disconnected	Assign if tritone. Assign if operator message of nonworking number. Assign if operator message of nonworking number. States may choose to assign for temporary nonworking number message on first attempt or after repeated temporary nonworking number messages. Assign if "number changed" message. Assign if correctly dialed number rings to incorrect number. Assign if respondent reports that connection has been made to wrong number. A number that does not accept incoming calls (such as a hospital line only used for outgoing calls)	1-6 attempts. Do not call more than 6 attempts.	May be assigned after one attempt. If states use six attempts, give final disposition after recommendation for 3 calling occasions with 2 weekday, 2 weeknight and 2 weekend calls for landline. Cell phone respondents may be called up to 6 times, with recommendations for 2 weekday, 2 weeknight and 2 weekend attempts. Assign after maximum number of attempts with at least one interim disposition of 5400 (technological barrier), 5300 (possible nonworking) or 5550 (busy) and all others noncontact.
4400	Technological Barrier	Assign if repeated busy, fast busy or circuit busy messages. Assign if repeated ambiguous operator messages. Assign if repeated poor audio quality. Assign if number repeatedly does not connect. Assign if cell phone respondent is outside calling area. Assign if respondent is unable to receive calls. DO NOT assign if answering device (which permits leaving messages) is reached.	1-6 attempts. Do not call more than 6 attempts.	May be assigned after one attempt or pre assigned using precall status. Assign as soon as interviewer reaches number resulting in tritone. If states use six attempts, give final disposition after recommendation for 3 calling occasions with 2 weekday, 2 weeknight and 2 weekend calls for landline. Cell phone respondents may be called up to 6 times, with recommendations for 2 weekday, 2 weeknight and 2 weekend attempts. Assign after maximum number of attempts with interim dispositions of 5200 (fax/data/modem), 5400 (technological barrier), 5300 (possible nonworking) and/or 5550 (busy) and all others noncontact.

4430	Call forwarding/ pager	Assign if message indicates number has been forwarded. Assign if number reaches a pager. Assign if connection produces series of beeps. Assign if informed that number forwarded to other number. (NOTE: Do not select respondents from household or location which is different from the original number. Do not enumerate the number of adults at location which is different from original number.)	1-6 attempts. Do not call more than 6 attempts.	May be assigned after one attempt. May give final disposition after respondent or automated message informs that the number has been forwarded after multiple attempts. May give final disposition after series of beeps indicates a pager has been reached. If states use six attempts, give final disposition after recommendation for 3 calling occasions with 2 weekday, 2 weeknight and 2 weekend calls for landline. Cell phone respondents may be called up to 6 times, with recommendations for 2 weekday, 2 weeknight and 2 weekend attempts.
4450	Cell phone (landline only)	Assign if landline sample number connects to cell phone.	1-15 attempts.	Given final disposition when informed. This disposition should take priority over other possible final dispositions for the landline sample. This disposition code should be pre-assigned to precall status code which indicates cell phone in the landline sample.
4460	Landline (cell phone only)	Assign if cell phone sample number connects to landline.	1-15 attempts.	Given final disposition when informed. This disposition should take priority over other possible final dispositions for the cell phone sample.
4470	Cell phone respondent with landline	Assign if cell phone respondent also has landline and reports receiving less than 90% of all calls on cell phone.	1-15 attempts.	Given final disposition when informed. This disposition should take priority over other possible final dispositions for the cell phone sample.
4500	Non- residence	Assign if business, government or other organization.	1-15 attempts	Given final disposition when informed. This disposition should take priority over other possible final dispositions.

				This disposition should be assigned to numbers with a precall status of 5.
4510	Group home	Assign if respondent identifies number as reaching a group home, prison, halfway house, nursing home or hospital. College dormitories, graduate student housing, sorority/fraternity housing, or other college provided housing is not defined as group home. Persons living in college housing are eligible for interview.	1-15 attempts	Given final disposition when informed. This disposition should take priority over other possible final dispositions.
4700	Household, no eligible respondent	Assign if child phone (landline or cell phone). Assign if landline household without eligible respondent.	1-15 attempts	Given final disposition when informed. This disposition should take priority over other possible final dispositions.
4900	Miscellaneous, non- eligible	Assign for null numbers, special data circumstances only. May be assigned if data are believed by state coordinator or data collection supervisor to be falsified or in error. Notify CDC when this code is used.	1-15 attempts	May be assigned after one attempt. Assign only with supervisor approval.
5050	Unknown whether eligible	Respondent hangs up, requests call back or refuses before establishing eligibility.		Give interim disposition when this occurs. Call back after an interval of at least one day until maximum call attempts are reached.
5100	Appointment	Respondent asks for an appointment or asked to be called at some other time. Assign if child answers the phone and does not get an adult to come to the phone. Appointments may be formal or informal requests to call back from household or respondent.		Schedule a call back for appropriate time.
5111	Household level refusal (landline only)	Assign for landline only if refusal after respondent selection but before Core BRFSS Q1 in landline. Refusal can be from any member of the household. Automated messages should not count as refusals.		Give interim disposition when this situation occurs. Call back after an interval of at least one day. May assign final disposition of 2111 if hard refusal.

5112	Respondent refusal: hang up or termination	Assign after respondent selection but before Core BRFSS Q1 in landline. Assign for cell phone respondent refusal after residence eligibility established.		Give interim disposition. Schedule callback for as long as practical for up to two weeks after initial refusal.
5120	Break off/ termination in questionnaire	Assign after respondent completes through Core BRFSS Q1 with an answer other than "don't know/not sure" or "refused" but breaks off prior to end of demographic section.		Give interim disposition when this situation occurs. Call back after an interval of at least one day.
5121	Call dropped	Assign for cell phone respondent if call is dropped.		Give interim disposition when this situation occurs. Call back may occur immediately or rescheduled after an interval of one hour.
5130	No answer	Assign if number rings normally without answer.		Give interim disposition when this occurs. Call back after an interval of at least one hour until maximum call attempts are reached.
5140	Answering device, unknown whether eligible	ONLY assign if it is possible to leave a message or if a mailbox is full or not yet established. Assign if answering device leaves open the possibility that the telephone number is not a residence or that the respondent is not eligible due to age. Assign for cell phone answering devices which may not be eligible.		Give interim disposition when this occurs. Call back after an interval of at least one hour until maximum call attempts are reached.
5150	Telecommunication barrier	Assign if call blocking, call ID requirements or other respondent initiated block device leaves open the possibility of the number reaching an eligible household and/or respondent. Assign if call forwarded to other number and there is some potential for reaching household or actual respondent at later time.		Give interim disposition when this occurs. Call back after an interval of at least one hour until maximum call attempts are reached.
5200	Fax/data/modem	Assign if number connects to data or fax line without human contact.		States may assign final disposition of 4200 at any attempt including the first attempt. If states choose to call up to six attempts, give interim disposition

				and schedule callback after an interval of at least one day.
5220	Answering device, confirms residence (landline only)	Assign if answering device confirms residence (landline only). Answering device message uses the words "home," "residence," "family," "household" or uses family name. Due to potential for cell phone answering devices to be out-of-sample and/or not be connected to eligible respondents, do not assign this code to cell phone sample numbers.		Give interim disposition when this occurs. Call back after an interval of at least one hour until maximum call attempts are reached.
5300	Possible nonworking	Assign if technological barrier indicates number might be nonworking. Assign if recorded message indicates number is temporarily out of service. Assign if message indicates phone number cannot be reached at this time. Assign if recording indicates that the number is for outgoing calls only (such as a hospital line for outgoing calls only).		States may assign final disposition of 4300 at any attempt including the first attempt. If states choose to call up to six attempts, give interim disposition and schedule callback after an interval of at least one hour.
5320	Physical or mental impairment	A household respondent or selected respondent is temporarily unable to be interviewed due to physical or mental impairment. NOTE: If <u>selected respondent</u> has permanent physical or mental impairment which renders him/her unable to complete the interview assign final disposition of 2320 (physical or mental impairment) as soon as informed.		Give interim disposition when this occurs. Call back after an interval of at least one day until maximum call attempts are reached.
5330	Language barrier	Assign if a respondent who is not the selected respondent does not speak English or other language for which an interviewer is available. (NOTE: If <u>selected respondent</u> does not speak English or language for which there is an interviewer available, give final disposition of 2330 as soon as informed.)		Give interim disposition when this occurs. Call back after an interval of at least one day until maximum call attempts are reached.

5400	Technological barrier	Assign if fast busy, circuits busy, ambiguous operator messages, repeated beeping, no connection. Assign if cell phone respondent is unable to receive calls due to lack of coverage or out of area.		States may assign final disposition of 4400 at any attempt. If states choose to call up to six attempts, give interim disposition and schedule callback after an interval of at least one day.
5550	Busy	Assign if number produces normal busy (not fast busy) signal.		States may assign final disposition of 4400 at any attempt. If states choose to call up to six attempts, give interim disposition and schedule callback after an interval of at least one hour.
5560	Unsafe location for interview	Assign if respondent indicates he/she unable to continue due to safety concerns. May be assigned to numbers in cell or landline sample.		Give interim disposition when this occurs. Schedule a callback time or call back after an interval of at least one hour until maximum call attempts are reached.
5700	Supervisor attention	Assign if special circumstances require supervisor attention		Assign only for special circumstances.
5900	Null attempt	Assign only with supervisor approval for special data circumstances.		Assign only with supervisor approval for special data circumstances.

Appendix D: AAPOR Transparency Initiative Immediate Disclosure Items

1. Who sponsored the research study.

Methodology

2. Who conducted the research study.

Methodology

3. If who conducted the study is different from the sponsor, the original sources of funding will also be disclosed.

Methodology

4. The exact wording and presentation of questions and response options whose results are reported. This includes preceding interviewer or respondent instructions and any preceding questions that might reasonably be expected to influence responses to the reported results.

Appendix A

5. A definition of the population under study and its geographic location.

Sampling Design

6. Dates of data collection.

Data Collection Process

7. A description of the sampling frame(s) and its coverage of the target population, including mention of any segment of the target population that is not covered by the design. This may include, for example, exclusion of Alaska and Hawaii in U.S. surveys; exclusion of specific provinces or rural areas in international surveys; and exclusion of non-panel members in panel surveys. If possible the estimated size of non-covered segments will be provided. If a size estimate cannot be provided, this will be explained. If no frame or list was utilized, this will be indicated.

Sampling Design

8. The name of the sample supplier, if the sampling frame and/or the sample itself was provided by a third party.

Sampling Design

9. The methods used to recruit the panel or participants, if the sample was drawn from a pre-recruited panel or pool of respondents.

N/A

10. A description of the sample design, giving a clear indication of the method by which the respondents were selected, recruited, intercepted or otherwise contacted or encountered, along with any eligibility requirements and/or oversampling. If quotas were used, the variables defining the quotas will be reported. If a within-household selection procedure was used, this will be described. The description of the sampling frame and sample design will include sufficient detail to determine whether the respondents were selected using probability or non-probability methods.

Sampling Design & Data Cleaning and Weighting

11. Method(s) and mode(s) used to administer the survey (e.g., CATI, CAPI, ACASI, IVR, mail survey, web survey) and the language(s) offered.

Data Collection Process

12. Sample sizes (by sampling frame if more than one was used) and a discussion of the precision of the findings. For probability samples, the estimates of sampling error will be reported, and the discussion will state whether or not the reported margins of sampling error or statistical analyses have been adjusted for the design effect due to weighting, clustering, or other factors. Disclosure requirements for non-probability samples are different because the precision of estimates from such samples is a model-based measure (rather than the average deviation from the population value over all possible samples). Reports of non-probability samples will only provide measures of precision if they are accompanied by a detailed description of how the underlying model was specified, its assumptions validated and the measure(s) calculated. To avoid confusion, it is best to avoid using the term “margin of error” or “margin of sampling error” in conjunction with non-probability samples.

N/A

13. A description of how the weights were calculated, including the variables used and the sources of weighting parameters, if weighted estimates are reported.

Data Cleaning and Weighting

14. If the results reported are based on multiple samples or multiple modes, the preceding items will be disclosed for each.

Same for both samples

15. Contact for obtaining more information about the study.

Questions