

## ARKANSAS 2003 BRFSS Questionnaire - Final

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INTROQ  
-----

HELLO, I'm calling for the Arkansas Department of Health and the Centers for Disease Control and Prevention. My name is \_\_\_\_\_. We're gathering information on the health practices of Arkansas residents. Your phone number has been chosen randomly, and I'd like to ask some questions about health and health practices.

Is this \_\_\_\_\_ ?

1. Correct Number (Proceed to next question)
2. Number is not the same - **SKIP TO WrongNum**

-----  
Is this a private residence?  
-----

1. YES, CONTINUE - **SKIP TO ADULTS**
2. NO, NON-RESIDENTIAL

-----  
NonRes - **ONLY GET THIS IF PRIVRES = 2 (NON-RESIDENTIAL)**  
-----

Thank you very much, but we are only interviewing private residences.

\*\*\*\*<F3>\*\*\*\*

-----  
WrongNum - **ONLY GET THIS IF INTROQ = 2 (NUMBER IS NOT THE SAME)**  
-----

Thank you very much, but it I seem to have dialed the wrong number. It's possible that your number may be called at a later time.

\*\*\*\*<F3>\*\*\*\*

-----  
Adults  
-----

I need to randomly select one adult who lives in your household to be interviewed. How many members of your household, including yourself, are 18 years of age or older?

\_\_ \_ ENTER THE NUMBER OF ADULTS

**IF ANS = 1 SKIP TO ONEADULT**

-----  
Men  
-----

How many of these adults are men?

- 0. None
- 1. One
- 2. Two
- 3. Three
- 4. Four
- 5. Five
- 6. Six
- 7. Seven
- 8. Eight
- 9. Nine

**IF ANS = ADULTS SKIP TO SELECTED**

-----  
Women  
-----

How many of these adults are women?

- 0. None
- 1. One
- 2. Two
- 3. Three
- 4. Four
- 5. Five
- 6. Six
- 7. Seven
- 8. Eight
- 9. Nine

**IF ANS + MEN = ADULTS SKIP TO SELECTED**

-----  
WrongTot - **ONLY GET IF MEN + WOMEN <> ADULTS**  
-----

I'm sorry, something is not right.

Number of Men -

Number of Women -  
-----

Number of Adults -

- 1. CORRECT THE NUMBER OF MEN
- 2. CORRECT THE NUMBER OF WOMEN
- 3. CORRECT THE NUMBER OF ADULTS

-----  
Selected - **ONLY GET IF MORE THAN ONE ADULT IN HOUSEHOLD**  
-----

The person in your household I need to speak with is the \_\_\_\_\_ .

Are you the \_\_\_\_\_ ?

1. YES - **SKIP TO YOURTHE1**
2. NO - **SKIP TO GETNEWAD**

-----  
OneAdult - **ONLY GET THIS IF ONE ADULT IN HOUSEHOLD**  
-----

Are you the adult?

1. YES AND THE RESPONDENT IS A MALE - **SKIP TO YOURTHE1**
2. YES AND THE RESPONDENT IS A FEMALE - **SKIP TO YOURTHE1**
3. NO - **SKIP TO ASKGENDR**

-----  
AskGendr - **ONLY GET IF ONEADULT = 3**  
-----

Is the Adult a man or a woman?

1. Male
2. Female

-----  
Get Adult - **ONLY GET IF ONEADULT = 3**  
-----

May I speak with him or her?

1. YES, ADULT COMING TO THE PHONE
2. NO, GO TO NEXT SCREEN, PRESS F3 AND SCHEDULE A CALL-BACK

**\*\*\*DO NOT USE <F3> ON THIS SCREEN\*\*\***

-----  
YOURTHE1 - **ONLY GET IF ONEADULT = 1 (YES) OR IF SELECTED = 1 (YES)**  
-----

Then you are the person I need to speak with.

1. PERSON INTERESTED, CONTINUE - **SKIP TO C01Q01**
2. GO BACK TO ADULTS QUESTION. WARNING:A NEW RESPONDENT MAY BE SELECTED

-----  
GETNEWAD - **ONLY GET IF SELECTED = 2 (NO)**  
-----

May I speak with the \_\_\_\_\_ ?

1. YES, SELECTED RESPONDENT COMING TO THE PHONE
2. NO, GO TO NEXT SCREEN, PRESS F3 AND SCHEDULE A CALL-BACK
3. GO BACK TO ADULTS QUESTION. WARNING:A NEW RESPONDENT MAY BE SELECTED

**\*\*\*DO NOT USE F3 ON THIS SCREEN\*\*\***

-----  
NEWADULT - **ONLY GET IF GETNEWAD = 1 OR 2**  
-----

HELLO, I'm calling for the Arkansas Department of Health and the Centers for Disease Control and Prevention. My name is \_\_\_\_\_. We're gathering information on the health practices of Arkansas residents. Your phone number has been chosen randomly, and I'd like to ask some questions about health and health practices.

1. PERSON INTERESTED, CONTINUE - **SKIP TO C01Q01**
2. GO BACK TO ADULTS QUESTIONS. WARNING:A NEW RESPONDENT MAY BE SELECTED

-----  
IntroScr - **ONLY GET IF NEWADULT = 1 or YOURTHE1 = 1**  
-----

I won't ask for your name, address, or other personal information that can identify you. You don't have to answer any question you don't want to, and you can end the interview at any time. The interview only takes a short time and any information you give to me will be confidential. If you have any questions about this survey, I will provide a telephone number for you to call to get more information.

1. PERSON INTERESTED, CONTINUE
2. GO BACK TO ADULTS QUESTION. WARNING: A NEW RESPONDENT MAY BE SELECTED

-----  
NONQAL - **ONLY GET IF CATI THINKS THE QUOTACELL IS FULL**  
-----

INTERVIEWER:

PLEASE ALERT YOUR SUPERVISOR IMMEDIATELY!!!!  
THE QUOTAS SET FOR THIS STUDY ARE INCORRECT.

AFTER NOTIFYING YOUR SUPERVISOR, RETURN THE RECORD

## Core 1: Health Status

-----  
C01Q01 - **EVERYBODY**  
-----

Would you say that in general your health is excellent, very good, good, fair, or poor?

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

-----  
C01Q02 - **EVERYBODY**  
-----

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 NUMBER OF DAYS
- 7 7 DON'T KNOW/NOT SURE
  - 8 8 NONE
  - 9 9 REFUSED

-----  
C01Q03 - **EVERYBODY**  
-----

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 NUMBER OF DAYS
- 7 7 DON'T KNOW/NOT SURE
  - 8 8 NONE - **SKIP TO C02Q01 IF C0102 ALSO = 88**
  - 9 9 REFUSED

-----  
C01Q04 - **ONLY GET IF C01Q02 <> 88 AND QCO1Q03 <> 88**  
-----

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 NUMBER OF DAYS

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

## Core 2: Health Care Access

-----  
C02Q01 - **EVERYBODY**  
-----

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

- 1. YES
- 2. NO
  
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

-----  
C02Q02 - **EVERYBODY**  
-----

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

INTERVIEWER: If 'no', ask 'Is there more than one or is there no person who you think of?'

- 1. Yes, only one
- 2. More than one
- 3. No
  
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

-----  
C02Q03 - **EVERYBODY**  
-----

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

1. YES
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

### **Core 3: Exercise**

-----  
C03Q01 - **EVERYBODY**  
-----

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

1. YES
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

### **Core 4: Diabetes**

-----  
C04Q01 - **EVERYBODY**  
-----

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

INTERVIEWER: If "YES" and female, ask "Was this only when you were pregnant?"

1. YES
2. YES, but female told only during pregnancy - **SKIP TO C05Q01**
3. NO - **SKIP TO C05Q01**
  
7. DON'T KNOW/NOT SURE - **SKIP TO C05Q01**
9. REFUSED - **SKIP TO C05Q01**

## Module 1: Diabetes

-----  
M01Q01 - ONLY GET IF C04Q01 = 1  
-----

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

\_\_\_ Code age in years (97 = 97 and older)

- 98. DON'T KNOW/NOT SURE
- 99. REFUSED

-----  
M01Q02 - ONLY GET IF C04Q01 = 1  
-----

Are you now taking insulin?

- 1. YES
- 2. NO
  
- 9. REFUSED

-----  
M01Q03 - ONLY GET IF C04Q01 = 1  
-----

Are you now taking diabetes pills?

- 1. YES
- 2. NO
  
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

-----  
M01Q04 - ONLY GET IF C04Q01 = 1  
-----

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

101-109 = time per day                      301-399 = times per month  
201-263 = times per week                  401-499 = times per year

\_\_\_ Enter times per day,  
week, month or year

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

-----  
M01Q05 - ONLY GET IF C04Q01 = 1  
-----

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

101-109 = time per day                      301-399 = times per month  
201-263 = times per week                  401-499 = times per year

\_\_\_ Enter times per day,  
week, month or year

555. NO FEET  
777. DON'T KNOW/NOT SURE  
888. NEVER  
999. REFUSED

-----  
M01Q06 - ONLY GET IF C04Q01 = 1  
-----

Have you ever had any sores or irritations on your feet that took more than four weeks to heal?

1. YES  
2. NO  
  
7. DON'T KNOW/NOT SURE  
9. REFUSED

-----  
M01Q07 - ONLY GET IF C04Q01 = 1  
-----

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

\_\_\_ Number of times (76 = 76 or more)

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

-----  
M01Q08 - ONLY GET IF C04Q01 = 1  
-----

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

\_\_\_ Number of times (76 = 76 or more)

- 77. DON'T KNOW/NOT SURE
- 88. NONE
- 98. NEVER HEARD OF HEMOGLOBIN "A one C" TEST
- 99. REFUSED

-----  
M01Q09 - ONLY GET IF M01Q05 <> 555  
-----

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

\_\_\_ Number of times (76 = 76 or more)

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

-----  
M01Q10 - ONLY GET IF C04Q01 = 1  
-----

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

READ ONLY IF NECESSARY

- 1. Within the past month (ANYTIME LESS THAN 1 MONTH AGO)
- 2. Within the past year (1 MONTH BUT LESS THAN 1 YEAR AGO)
- 3. Within the past 2 years (1 YEAR BUT LESS THAN 2 YEARS AGO)
- 4. 2 or more years ago
  
- 8. NEVER
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

-----  
M01Q11 - ONLY GET IF C04Q01 = 1  
-----

Has a doctor ever told you that diabetes has affected your eyes or that you had retinopathy [ret-in-OP-a-thee]?

- 1. YES
- 2. NO
  
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

-----  
M01Q12 - **ONLY GET IF C04Q01 = 1**  
-----

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

1. YES
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

## **Core 5: Hypertension Awareness**

-----  
C05Q01 - **EVERYBODY**  
-----

Have you ever been told by a doctor, nurse, or other health professional that you have high blood pressure?

If "Yes" and female, ask "Was this only when you were pregnant?"

1. Yes
2. Yes, but female told only during pregnancy - **SKIP TO C06Q01**
3. No - **SKIP TO C06Q01**
  
7. DON'T KNOW/NOT SURE - **SKIP TO C06Q01**
9. REFUSED - **SKIP TO C06Q01**

-----  
C05Q02 - **ONLY GET IF C05Q01 = 1**  
-----

Are you currently taking medicine for your high blood pressure?

1. YES
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

## Core 6: Cholesterol Awareness

---

C06Q01 - **EVERYBODY**

---

Blood cholesterol is a fatty substance found in the blood. Have you ever had your blood cholesterol checked?

1. YES
  2. NO - **SKIP TO C07Q01**
  
  7. DON'T KNOW/NOT SURE - **SKIP TO C07Q01**
  9. REFUSED - **SKIP TO C07Q01**
- 

C06Q02 - **ONLY GET IF C06Q01 = 1**

---

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

READ ONLY IF NECESSARY:

1. Within the past year (anytime less than 12 months ago)
  2. Within the past 2 years (1 year but less than 2 years ago)
  3. Within the past 5 years (2 years but less than 5 years ago)
  4. 5 or more years ago
  
  7. Don't know / Not sure
  9. Refused
- 

C06Q03 - **ONLY GET IF C06Q01 = 1**

---

Have you ever been told by a doctor, nurse, or other health professional that your blood cholesterol is high?

1. YES
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

## Core 7: Fruits and Vegetables

-----  
C07Q01 - **EVERYBODY**  
-----

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

How often do you drink fruit juices such as orange, grapefruit, or tomato?

1. \_\_\_ \_\_\_ Per day
  2. \_\_\_ \_\_\_ Per week
  3. \_\_\_ \_\_\_ Per month
  4. \_\_\_ \_\_\_ Per year
- 
- 5 5 5 NEVER
  - 7 7 7 DON'T KNOW/NOT SURE
  - 9 9 9 REFUSED

-----  
C07Q02 - **EVERYBODY**  
-----

Not counting juice, how often do you eat fruit?

1. \_\_\_ \_\_\_ Per day
  2. \_\_\_ \_\_\_ Per week
  3. \_\_\_ \_\_\_ Per month
  4. \_\_\_ \_\_\_ Per year
- 
- 5 5 5 NEVER
  - 7 7 7 DON'T KNOW/NOT SURE
  - 9 9 9 REFUSED

-----  
C07Q03 - **EVERYBODY**  
-----

How often do you eat green salad?

1. \_\_\_ \_\_\_ Per day
  2. \_\_\_ \_\_\_ Per week
  3. \_\_\_ \_\_\_ Per month
  4. \_\_\_ \_\_\_ Per year
- 
- 5 5 5 NEVER
  - 7 7 7 DON'T KNOW/NOT SURE
  - 9 9 9 REFUSED

-----  
C07Q04 - **EVERYBODY**  
-----

How often do you eat potatoes not including french fries, fried potatoes, or potato chips?

- 1. \_\_\_ \_\_\_ Per day
- 2. \_\_\_ \_\_\_ Per week
- 3. \_\_\_ \_\_\_ Per month
- 4. \_\_\_ \_\_\_ Per year
  
- 5    5    5    NEVER
- 7    7    7    DON'T KNOW/NOT SURE
- 9    9    9    REFUSED

-----  
C07Q05 - **EVERYBODY**  
-----

How often do you eat carrots?

- 1. \_\_\_ \_\_\_ Per day
- 2. \_\_\_ \_\_\_ Per week
- 3. \_\_\_ \_\_\_ Per month
- 4. \_\_\_ \_\_\_ Per year
  
- 5    5    5    NEVER
- 7    7    7    DON'T KNOW/NOT SURE
- 9    9    9    REFUSED

-----  
C07Q06 - **EVERYBODY**  
-----

Not counting carrots, potatoes, or salad, how many servings of vegetables do you usually eat?

Example: A serving of vegetables at both lunch and dinner would be two servings.

- 1. \_\_\_ \_\_\_ Per day
- 2. \_\_\_ \_\_\_ Per week
- 3. \_\_\_ \_\_\_ Per month
- 4. \_\_\_ \_\_\_ Per year
  
- 5    5    5    NEVER
- 7    7    7    DON'T KNOW/NOT SURE
- 9    9    9    REFUSED

## Core 8: Weight Control

-----  
C08Q01 - **EVERYBODY**  
-----

Are you now trying to lose weight?

1. YES - **SKIP TO C08Q03**
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

-----  
C08Q02 - **ONLY GET IF C08Q01 <> 1**  
-----

Are you now trying to maintain your current weight, that is to keep from gaining weight?

1. YES
2. NO - **SKIP TO C08Q06**
  
7. DON'T KNOW/NOT SURE - **SKIP TO C08Q06**
9. REFUSED - **SKIP TO C08Q06**

-----  
C08Q03 - **ONLY GET IF C08Q01 = 1 OR C08Q02 = 1**  
-----

Are you eating either fewer calories or less fat to . . .

lose weight? [if **C08Q01 = 1**]

keep from gaining weight? [if **C08Q02 = 1**]

INTERVIEWER: PROBE FOR WHICH

1. Yes, fewer calories
2. Yes, less fat
3. Yes, fewer calories and less fat
4. No
  
7. DON'T KNOW/NOT SURE
9. REFUSED

-----  
C08Q04 - **ONLY GET IF C08Q01 = 1 OR C08Q02 = 1**  
-----

Are you using physical activity or exercise to . . .

lose weight? [if **C08Q01 = 1**]

keep from gaining weight? [if **C08Q02 = 1**]

1. YES
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

-----  
C08Q05 - **ONLY GET IF C08Q01 = 1 or C08Q02 = 1**  
-----

How much would you like to weigh?

\_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_ Weight in pounds

- 7 7 7 DON'T KNOW/NOT SURE
- 9 9 9 REFUSED

-----  
C08Q06 - **EVERYBODY**  
-----

In the past 12 months, has a doctor, nurse or other health professional given you advice about your weight?

INTERVIEWER: PROBE FOR WHICH

1. Yes, lose weight
2. Yes, gain weight
3. Yes, maintain current weight
4. No
  
7. DON'T KNOW/NOT SURE
9. REFUSED

## Core 9: Asthma

-----  
C09Q01 - **EVERYBODY**  
-----

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

1. YES
2. NO - **SKIP TO C10Q01**
  
7. DON'T KNOW/NOT SURE - **SKIP TO C10Q01**
9. REFUSED - **SKIP TO C10Q01**

-----  
C09Q02 - **ONLY GET IF C09Q01 = 1**  
-----

Do you still have asthma?

1. YES
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

## Core 10: Immunization

-----  
C10Q01 - **EVERYBODY**  
-----

During the past 12 months, have you had a flu shot?

1. YES
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

-----  
C10Q02 - **EVERYBODY**  
-----

Have you ever had a pneumonia shot? This shot is usually given only once or twice in a person's lifetime and is different from the flu shot. It is also called the pneumococcal [new-mo-COCK-uhl] vaccine.

1. YES
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

## Core 11: Tobacco Use

-----  
C11Q01 - **EVERYBODY**  
-----

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

5 packs = 100 cigarettes

1. YES
2. NO - **SKIP TO C12Q01**
  
7. DON'T KNOW/NOT SURE - **SKIP TO C12Q01**
9. REFUSED - **SKIP TO C12Q01**

-----  
C11Q02 - **ONLY GET IF C11Q01 = 1**  
-----

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

1. Every day
2. Some days
3. Not at all - **SKIP TO C12Q01**
  
9. REFUSED - **SKIP TO C12Q01**

-----  
C11Q03 - **ONLY GET IF C11Q02 < 3**  
-----

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

- 1. YES
- 2. NO
  
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

## Core 12: Alcohol Consumption

-----  
C12Q01 - **EVERYBODY**  
-----

A drink of alcohol is 1 can or bottle of beer, 1 glass of wine, 1 can or bottle of wine cooler, 1 cocktail, or 1 shot of liquor. During the past 30 days, how often have you had at least one drink of any alcoholic beverage?

101-107 Days per week                      201-230 Days in past 30

\_\_ \_\_ \_\_ Enter Days per week or per month

- 888. No drinks in past 30 days - **SKIP TO C13Q01**
- 777. DON'T KNOW/NOT SURE - **SKIP TO C13Q01**
- 999. REFUSED - **SKIP TO C13Q01**

-----  
C12Q02 - **ONLY GET IF C12Q01 < 777**  
-----

On the days when you drank, about how many drinks did you drink on the average?

\_\_\_\_\_ Number of drinks

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

-----  
C12Q03 - **ONLY GET IF C12Q01 < 777**  
-----

Considering all types of alcoholic beverages, how many times during the past 30 days did you have 5 or more drinks on an occasion?

\_\_\_\_\_ Number of times

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

### **Core 13: Excess Sun Exposure**

-----  
C13Q01 - **EVERYBODY**  
-----

The next question is about sunburns including anytime that even a small part of your skin was red for more than 12 hours.

Have you had a sunburn within the past 12 months?

- 1. YES
- 2. NO - **SKIP TO C14Q01**
  
- 7. DON'T KNOW/NOT SURE - **SKIP TO C14Q01**
- 9. REFUSED - **SKIP TO C14Q01**

-----  
C13Q02 - **ONLY GET IF C13Q01 = 1**  
-----

Including times when even a small part of your skin was red for more than 12 hours, how many sunburns have you had within the past 12 months?

- 1. One
- 2. Two
- 3. Three
- 4. Four
- 5. Five
- 6. Six or more
  
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

## Core 14: Demographics

-----  
C14Q01 - **EVERYBODY**  
-----

What is your age?

\_\_\_\_\_ Code age in years

- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

-----  
C14Q02 - **EVERYBODY**  
-----

Are you Hispanic or Latino?

- 1. YES
- 2. NO
  
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

-----  
C14Q03 - **EVERYBODY**  
-----

Which one or more of the following would you say is your race? Would you say:  
White, Black or African American, Asian, Native Hawaiian or Other Pacific  
Islander, American Indian or Alaska Native, or Other?

INTERVIEWER: Mark all that apply

- 1. White
- 2. Black or African American
- 3. Asian
- 4. Native Hawaiian or Other Pacific Islander
- 5. American Indian, Alaska Native
- 6. Other [specify]
  
- 7. DON'T KNOW/NOT SURE
- 8. NO ADDITIONAL CHOICES
- 9. REFUSED

-----  
C14Q04 - **ONLY GET IF MORE THAN ONE RESPONSE GIVEN FOR C14Q03**  
-----

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

1. White
2. Black or African American
3. Asian
4. Native Hawaiian or Other Pacific Islander
5. American Indian, Alaska Native
6. Other [specify]
  
7. DON'T KNOW/NOT SURE
9. REFUSED

-----  
C14Q05 - **EVERYBODY**  
-----

Are you: married, divorced, widowed, separated, never married, or a member of an unmarried couple?

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

-----  
C14Q06 - **EVERYBODY**  
-----

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

- \_\_ \_\_ Number of children
77. DON'T KNOW/NOT SURE
  88. NONE
  99. REFUSED

-----  
C14Q07 - **EVERYBODY**  
-----

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

INTERVIEWER: READ ONLY IF NECESSARY

1. Never attended school or only attended kindergarten
2. Grades 1 through 8 (Elementary)
3. Grades 9 through 11 (Some high school)
4. Grade 12 or GED (High school graduate)
5. College 1 year to 3 years (Some college or technical school)
6. College 4 years or more (College graduate)
  
7. DON'T KNOW/NOT SURE
9. REFUSED

-----  
C14Q08 - **EVERYBODY**  
-----

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, or unable to work?

01. Employed for wages
02. Self-employed
03. Out of work for more than 1 year
04. Out of work for less than 1 year
05. A Homemaker
06. A Student
07. Retired
08. Unable to work
  
77. DON'T KNOW/NOT SURE
99. REFUSED

-----  
C14Q09 - **EVERYBODY**  
-----

Is your annual household income from all sources:

1. Less than \$10,000
2. Less than \$15,000 (\$10,000 to less than \$15,000)
3. Less than \$20,000 (\$15,000 to less than \$20,000)
4. Less than \$25,000 (\$20,000 to less than \$25,000)
5. Less than \$35,000 (\$25,000 to less than \$35,000)
6. Less than \$50,000 (\$35,000 to less than \$50,000)
7. Less than \$75,000 (\$50,000 to less than \$75,000)
8. \$75,000 or more

77. DON'T KNOW/NOT SURE  
99. REFUSED

-----  
C14Q10 - **EVERYBODY**  
-----

About how much do you weigh without shoes?

ROUND FRACTIONS UP

\_\_\_ \_\_\_ \_\_\_ Weight pounds

777. DON'T KNOW/NOT SURE  
999. REFUSED

-----  
C14Q11 - **EVERYBODY**  
-----

About how tall are you without shoes?

ROUND FRACTIONS DOWN

\_\_\_ \_\_\_ \_\_\_ Height ft/inches (Ex. 5 feet 9 inches = 509)

777. DON'T KNOW/NOT SURE  
999. REFUSED

-----  
ASKCNTY - **EVERYBODY (Recodes into C14Q12)**  
-----

What county do you live in?

\_\_\_ \_\_\_ \_\_\_ FIPS county code

777. DON'T KNOW/NOT SURE  
999. REFUSED

-----  
C14Q13 - **EVERYBODY**  
-----

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

1. YES
2. NO - **SKIP TO C14Q15**
  
7. DON'T KNOW/NOT SURE - **SKIP TO C14Q15**
9. REFUSED - **SKIP TO C14Q15**

-----  
C14Q14 - **ONLY GET IF C14Q13 = 1**  
-----

How many of these are residential numbers?

\_\_\_\_\_ RESIDENTIAL TELEPHONE NUMBERS (6 = 6 OR MORE)

7. DON'T KNOW/NOT SURE
9. REFUSED

-----  
C14Q15 - **EVERYBODY**  
-----

During the past 12 months, has your household been without telephone service for 1 week or more?

NOTE: Do not include interruptions of phone service due to weather or natural disasters.

1. YES
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

-----  
C14Q16 - **EVERYBODY**  
-----

Indicate sex of respondent. Ask only if necessary.

1. Male - **SKIP TO C15Q01**
2. Female

-----  
C14Q17 - **ONLY GET IF C14Q16 = 2 AND C14Q01 < 45 (FEMALE UNDER 45 YEARS OLD)**  
-----

To your knowledge, are you now pregnant?

1. YES
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

## State Added 2: Demographics

-----  
AR02Q01 - **EVERYBODY**  
-----

What is your zip code?

ARKANSAS ZIP CODES RANGE FROM 71600 - 72999

\_\_\_\_\_ ENTER THE ZIP CODE

99999. DON'T KNOW/ REFUSED

## Core 15: Arthritis

-----  
C15Q01 - **EVERYBODY**  
-----

The next questions refer to your joints. Please do NOT include the back or neck.

DURING THE PAST 30 DAYS, have you had any symptoms of pain, aching, or stiffness in or around a joint?

1. YES
2. NO - **SKIP TO C15Q04**
  
7. DON'T KNOW/NOT SURE - **SKIP TO C15Q04**
9. REFUSED - **SKIP TO C15Q04**

-----  
C15Q02 - **ONLY GET IF C15Q01 = 1**  
-----

Did your joint symptoms **FIRST** begin more than 3 months ago?

1. YES
2. NO - **SKIP TO C15Q04**
  
7. DON'T KNOW/NOT SURE - **SKIP TO C15Q04**
9. REFUSED- **SKIP TO C15Q04**

-----  
C15Q03 - **ONLY GET IF C15Q01 = 1 OR C15Q02 = 1**  
-----

Have you EVER seen a doctor or other health professional for these joint symptoms?

1. YES
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

-----  
C15Q04 - **EVERYBODY**  
-----

Have you EVER been told by a doctor or other health professional that you have some form of arthritis, rheumatoid arthritis, gout, lupus, or fibromyalgia?

1. YES
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

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)

-----  
C15Q05 - **ONLY GET IF C15Q02 = 1 OR C15Q04 = 1**  
-----

Are you now limited in any way in any of your usual activities because of arthritis or joint symptoms?

1. YES
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

NOTE: If a respondent question arises about medication, then the interviewer *should reply*: "Please answer the question based on how you are when you are taking any of the medications or treatments you might use."

-----  
C15Q06 - **ONLY GET IF (C15Q02 = 1 OR C15Q04 = 1) AND (C14Q01 < 65)**  
-----

In this next question we are referring to work for pay. Do arthritis or joint symptoms now affect whether you work, the type of work you do, or the amount of work you do?

INTERVIEWER: If respondent says he/she is retired or out-of-work, ask: 'Did arthritis or joint symptoms cause you to stop working, that is, did it affect whether you work or not?'

1. YES
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

### Core 16: Falls

-----  
C16Q01 - **ONLY GET IF C14Q01 > 44 (45 YEARS OLD OR OLDER) or C14Q01 is 7 or 9 (age unknown)**  
-----

1. YES
2. NO - **SKIP TO C17Q01**
  
7. DON'T KNOW/NOT SURE - **SKIP TO C17Q01**
9. REFUSED - **SKIP TO C17Q01**

-----  
C16Q02 - **ONLY GET IF C16Q01 = 1**  
-----

Were you injured? By injured, we mean the fall caused you to limit your regular activities for at least a day or to go see a doctor.

1. YES
2. No
  
7. DON'T KNOW/NOT SURE
9. REFUSED

## Core 17: Disability

-----  
C17Q01 - **EVERYBODY**  
-----

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?

1. YES
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

-----  
C17Q02 - **EVERYBODY**  
-----

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.

1. YES
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

## State Added 3: Disability

-----  
AR03Q01 - **ONLY GET IF C17Q01 <> 2 OR C17Q02 <> 2**  
-----

What is the farthest distance that you can walk by yourself, without any special equipment or help from others?

1. Not any distance
2. Across a small room
3. About the length of a typical house
4. About one or two city blocks
5. About one mile
6. More than one mile
  
7. DON'T KNOW/NOT SURE
9. REFUSED

-----  
AR03Q02 - ONLY GET IF C17Q01 <> 2 OR C17Q02 <> 2  
-----

Because of any impairment or health problem, do you need the help of other persons with your personal care needs, such as eating, bathing, dressing, or getting around the house?

1. YES
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

-----  
AR03Q03 - ONLY GET IF C17Q01 <> 2 OR C17Q02 <> 2  
-----

Because of any impairment or health problem, do you need the help of other persons in handling your routine needs, such as everyday household chores, doing necessary business, shopping, or getting around for other purposes?

1. YES
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

-----  
AR03Q04 - ONLY GET IF C17Q01 <> 2 OR C17Q02 <> 2  
-----

In general, how satisfied are you with your life?

1. Very satisfied
2. Satisfied
3. Dissatisfied
4. Very dissatisfied
  
7. DON'T KNOW/NOT SURE
9. REFUSED

## Core 18: Physical Activity

-----  
C18Q01 - **ONLY GET IF C14Q08 < 3**  
-----

When you are at work, which of the following best describes what you do?

INTERVIEWER: IF RESPONDENT HAS MULTIPLE JOBS, INCLUDE ALL JOBS

Would you say . . .

1. Mostly sitting or standing
2. Mostly walking
3. Mostly heavy labor or physically demanding work
  
7. DON'T KNOW/NOT SURE
9. REFUSED

-----  
C184Q02 - **EVERYBODY**  
-----

We are interested in two types of physical activity: vigorous and moderate. Vigorous activities cause large increases in breathing or heart rate while moderate activities cause small increases in breathing or heart rate.

Now, thinking about the moderate physical activities you do [**fill in (when you are not working) if C14Q08 < 3**] in a usual week, do you do moderate activities for at least 10 minutes at a time, such as brisk walking, bicycling, vacuuming, gardening, or anything else that causes small increases in breathing or heart rate?

1. YES
2. NO - **SKIP TO C18Q05**
  
7. DON'T KNOW/NOT SURE - **SKIP TO C18Q05**
9. REFUSED - **SKIP TO C18Q05**

-----  
C18Q03 - **ONLY GET IF C18Q02 = 1**  
-----

How many days per week do you do these moderate activities for at least 10 minutes at a time?

\_\_\_\_\_ Days per week

- 7 7 DON'T KNOW/NOT SURE - **SKIP TO C18Q05**
- 8 8 Do not do any moderate physical activity for at least 10 minutes at a time - **SKIP TO C18Q05**
- 9 9 REFUSED - **SKIP TO C18Q05**

32

-----  
C18Q04 - **ONLY GET IF C18Q03 < 77**  
-----

On days when you do moderate activities for at least 10 minutes at a time, how much total time per day do you spend doing these activities?

\_\_\_\_: \_\_ \_\_\_\_ Hours and minutes per day

- 7 7 7 DON'T KNOW/NOT SURE  
9 9 9 REFUSED

-----  
C18Q05 - **EVERYBODY**  
-----

Now thinking about the vigorous physical activities you do [**fill in (when you are not working) if C14Q08 < 3**] in a usual week, do you do vigorous activities for at least 10 minutes at a time, such as running, aerobics, heavy yard work, or anything else that causes large increases in breathing or heart rate?

1. YES  
2. NO - **SKIP TO C19Q01**  
  
7. DON'T KNOW/NOT SURE - **SKIP TO C19Q01**  
9. REFUSED - **SKIP TO C19Q01**

-----  
C18Q06 - **ONLY GET IF C18Q05 = 1**  
-----

How many days per week do you do these vigorous activities for at least 10 minutes at a time?

\_\_\_\_ \_\_\_\_ Days per week

- 7 7 DON'T KNOW/NOT SURE - **SKIP TO C19Q01**  
8 8 Do not do any vigorous physical activity for at least 10 minutes at a time - **SKIP TO C19Q01**  
9 9 REFUSED - **SKIP TO C19Q01**

-----  
C18Q07 - **ONLY GET IF C18Q06 < 77**  
-----

On days when you do vigorous activities for at least 10 minutes at a time, how much total time per day do you spend doing these activities?

\_\_\_\_: \_\_ \_\_\_\_ Hours and minutes per day

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

## Core 19: Veteran's Status

-----  
C19Q01 - **EVERYBODY**  
-----

The next question relates to military service in the United States Armed Forces, either in the regular military or in a National Guard or Reserve unit.

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?

1. YES
2. NO - **SKIP TO C20Q01**
  
7. DON'T KNOW/NOT SURE - **SKIP TO C20Q01**
9. REFUSED - **SKIP TO C20Q01**

-----  
C19Q02 - **ONLY GET IF Q19Q01 = 1**  
-----

Which of the following best describes your service in the United States military?

1. Currently on active duty - **SKIP TO C20Q01**
2. Currently in a National Guard or Reserve unit - **SKIP TO C20Q01**
3. Retired from military service
4. Medically discharged from military service
5. Discharged from military service
  
7. Don't know / Not sure - **SKIP TO C20Q01**
9. Refused - **SKIP TO C20Q01**

-----  
C19Q03 - **ONLY GET IF Q19Q02 = 3 OR 4 OR 5**  
-----

In the last 12 months have you received some or all of your health care from VA facilities?

INTERVIEWER: If "yes" probe for "all" or "some" of the health care.

1. Yes, all of my health care
2. Yes, some of my health care
3. No, no VA health care received
  
7. Don't know / Not sure
9. Refused

## Core 20: HIV/AIDS

ONLY GET SECTION IF C14Q01 < 65 OR Q14Q01 = 7 OR 9 (age less than 65 or unknown)

---

C20Q01 - **EVERYBODY**

---

The next few questions are about the national health problem of HIV, the virus that causes AIDS. Please remember that your answers are strictly confidential and that you don't have to answer every question if you don't want to.

I'm going to read two statements about HIV, the virus that causes AIDS. After I read each one, please tell me whether you think it is true or false, or if you don't know.

A pregnant woman with HIV can get treatment to help reduce the chances that she will pass the virus on to her baby.

1. TRUE
2. FALSE
  
7. DON'T KNOW/NOT SURE
9. REFUSED

---

C20Q02 - **EVERYBODY**

---

There are medical treatments available that are intended to help a person who is infected with HIV to live longer.

1. TRUE
2. FALSE
  
7. DON'T KNOW/NOT SURE
9. REFUSED

---

C20Q03 - **EVERYBODY**

---

How important do you think it is for people to know their HIV status by getting tested?

Would you say very important, somewhat important, or not at all important?

1. Very important
2. Somewhat important
3. Not at all important
  
7. DON'T KNOW/NOT SURE
8. DEPENDS ON RISK
9. REFUSED

-----  
C20Q04 - **EVERYBODY**  
-----

Have you ever been tested for HIV? Do not count tests you may have had as part of a blood donation.

NOTE: Include saliva tests

1. YES
2. NO - **SKIP TO C20Q08**
  
7. DON'T KNOW/NOT SURE - **SKIP TO C20Q08**
9. REFUSED - **SKIP TO C20Q08**

-----  
C20Q05 - **ONLY GET IF C20Q04 = 1**  
-----

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

NOTE: Include saliva tests

INTERVIEWER: If month is unknown enter '77' for the month and then the given year - Ex. 770000

INTERVIEWER: If HIV test occurred before January 1985 please enter "77 7777".

PRESS "1" to enter the appropriate value.

Include saliva tests

\_\_ \_\_/\_\_ \_\_ \_\_ \_\_ Code month and year

- 77 7777. DON'T KNOW/NOT SURE  
99 9999. REFUSED

-----  
C20Q06 - ONLY GET IF C20Q04 = 1  
-----

I am going to read you a list of reasons why some people have been tested for HIV. Not including blood donations, which of these would you say was the MAIN reason for your last HIV test?

INTERVIEWER: PLEASE READ

\_\_\_ Reason code

- 01. It was required
- 02. Someone suggested you should be tested
- 03. You thought you may have gotten HIV through sex or drug use
- 04. You just wanted to find out whether you had HIV
- 05. You were worried that you could give HIV to someone
- 06. IF FEMALE: You were pregnant
- 07. It was done as part of a routine medical check-up
- 08. You were tested for some other reason
  
- 77. DON'T KNOW/NOT SURE
- 99. REFUSED

-----  
C20Q07 - ONLY GET IF C20Q04 = 1  
-----

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

\_\_\_ Facility code

- 01. Private doctor or HMO
- 02. Counseling and testing site
- 03. Hospital
- 04. Clinic
- 05. In a jail or prison (or other correctional facility)
- 06. Home
- 07. Somewhere else
  
- 77. DON'T KNOW/NOT SURE
- 99. REFUSED

-----  
C20Q08 - **EVERYBODY**  
-----

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

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

Do any of these situations apply to you?

- 1. YES
- 2. NO
  
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

-----  
C20Q09 - **EVERYBODY**  
-----

The next question is about sexually transmitted diseases other than HIV, such as syphilis [SIF-a-lis], gonorrhea [gon-a-REE-a], chlamydia [KLA-mid-e-a], or genital herpes.

In the past 12 months has a doctor, nurse or other health professional talked to you about preventing sexually transmitted diseases through condom use?

- 1. YES
- 2. NO
  
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

### Module 3: Women's Health

**ONLY GET THIS SECTION IF C14Q16 = 2 (FEMALES)**

-----  
M03Q01 - **EVERYBODY**  
-----

A mammogram is an x-ray of each breast to look for breast cancer. Have you ever had a mammogram?

- 1. YES
- 2. NO - **SKIP TO M03Q05**
  
- 7. DON'T KNOW/NOT SURE - **SKIP TO M03Q05**
- 9. REFUSED - **SKIP TO M03Q05**

-----  
M03Q02 - ONLY GET IF M03Q01 = 1  
-----

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

INTERVIEWER: READ ONLY IF NECESSARY

1. Within the past year (anytime less than 12 months ago)
2. Within the past 2 years (1 year but less than 2 years ago)
3. Within the past 3 years (2 years but less than 3 years ago)
4. Within the past 5 years (3 years but less than 5 years ago)
5. 5 or more years ago
  
7. DON'T KNOW/NOT SURE - **SKIP TO M03Q04**
9. REFUSED - **SKIP TO M03Q04**

-----  
M03Q03 - ONLY GET IF M03Q02 < 7  
-----

You said your most recent mammogram was <INSERT TIME FRAME M03Q02>. How long before THAT mammogram was the last one?

INTERVIEWER: READ ONLY IF NECESSARY

1. Less than 12 months before
2. 1 year but less than 2 years before
3. 2 years but less than 3 years before
4. 3 years but less than 5 years before
5. 5 or more years before
  
6. HAS HAD ONLY ONE MAMMOGRAM
7. DON'T KNOW / NOT SURE
9. REFUSED

-----  
M03Q04 - ONLY GET IF M03Q02 < 7  
-----

Many mammograms are done as a routine check-up. Sometimes a mammogram is done to check something that might be a problem, such as a lump or discomfort.

Were either of your two most recent mammograms done to check a possible problem?  
[if M03Q03 <> 6]

Was your mammogram done to check a possible problem? [if M03Q03 = 6]

1. YES
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

-----  
M03Q05 - **EVERYBODY**  
-----

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

1. YES
2. NO - **SKIP TO AR01Q01**
  
7. DON'T KNOW/NOT SURE - **SKIP TO AR01Q01**
9. REFUSED - **SKIP TO AR01Q01**

-----  
M03Q06 - **ONLY GET IF M03Q05 = 1**  
-----

How long has it been since you had your last breast exam?

INTERVIEWER: READ ONLY IF NECESSARY

1. Within the past year (ANYTIME LESS THAN 12 MONTHS AGO)
2. Within the past 2 years (1 YEAR BUT LESS THAN 2 YEARS AGO)
3. Within the past 3 years (2 to 3 years ago)
4. Within the past 5 years (3 to 5 years ago)
5. 5 or more years ago
  
7. DON'T KNOW/NOT SURE
9. REFUSED

## **State Added 1: Women's Health**

-----  
AR01Q01 - **ONLY GET IF C14Q16 = 2**  
-----

In the past month, have you noticed any posters, billboards, commercials, or advertisements with a message about having a mammogram test?

1. YES
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

-----  
AR01Q02 - **ONLY GET IF C14Q16 = 2**  
-----

Are you aware that the health department offers free to low cost breast exams and mammograms?

1. YES
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

-----  
AR01Q03 - **ONLY GET IF (C14Q16 = 2 AND C14Q01 > 39)**  
-----

How often do you believe women your age should get a mammogram?

INTERVIEWER: READ ONLY IF NECESSARY

1. Every 6 months
2. Every year
3. Every 2 years
4. Every 3 to 4 years
5. Every 5 years or more
6. Only when doctor recommended mammogram
  
7. DON'T KNOW/NOT SURE
8. NEVER
9. REFUSED

-----  
AR01Q04 - **ONLY GET IF (C14Q16 = 2 AND C14Q01 > 39 AND M03Q01 = 1)**  
-----

Did a doctor suggest that you have your most recent mammogram?

1. YES
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

-----  
AR01Q05 - **ONLY GET IF C14Q16 = 2**  
-----

Have you ever had breast cancer?

1. YES - **SKIP TO AR01Q07**
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

-----  
AR01Q06 - **ONLY GET IF (C14Q16 = 2) AND (M03Q01 > 1) AND (AR01Q05 <> 1)**  
-----

Do you think your risk of getting breast cancer is high, medium, low, or none?

1. High
2. Medium
3. Low
4. None
  
7. DON'T KNOW/NOT SURE
9. REFUSED

-----  
AR01Q07 - **ONLY GET IF C14Q16 = 2**  
-----

If you wanted to have a mammogram, would you have to pay for all, part or none of the cost?

1. All
2. Part (includes co-pay)
3. None - **SKIP TO M03Q07**
  
7. DON'T KNOW/NOT SURE - **SKIP TO M03Q07**
9. REFUSED - **SKIP TO M03Q07**

-----  
AR01Q08 - **ONLY GET IF (C14Q16 = 2) AND (AR01Q07 < 3)**  
-----

How difficult would it be for you to pay for the cost of the mammogram test?

Would you say very difficult, somewhat difficult, a little difficult or not at all difficult?

1. Very difficult
2. Somewhat difficult
3. A little difficult
4. Not at all difficult
  
7. DON'T KNOW/NOT SURE
9. REFUSED

-----  
M03Q07 - **EVERYBODY**  
-----

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

1. YES
2. NO - **SKIP TO M03Q09**
  
7. DON'T KNOW/NOT SURE - **SKIP TO M03Q09**
9. REFUSED - **SKIP TO M03Q09**

-----  
M03Q08 - ONLY GET IF M03Q07 = 1  
-----

How long has it been since you had your last pap smear?

INTERVIEWER: READ ONLY IF NECESSARY

1. Within the past year (ANYTIME LESS THAN 12 MONTHS AGO)
2. Within the past 2 years (1 YEAR BUT LESS THAN 2 YEARS AGO)
3. Within the past 3 years (2 to 3 years ago)
4. Within the past 5 years (3 to 5 years ago)
5. 5 or more years ago
  
7. DON'T KNOW/NOT SURE
9. REFUSED

-----  
M03Q09 - ONLY GET IF C14Q17 > 1  
-----

Have you had a hysterectomy?

INTERVIEWER: A hysterectomy is an operation to remove the uterus (womb)

1. YES
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

## Module 8: Heart Attack and Stroke

-----  
M08Q01A - EVERYBODY  
-----

Now I would like to ask you about your knowledge of the signs and symptoms of heart attack and stroke.

Which of the following do you think is a symptom of a heart attack? For each, tell me yes, no, or you are not sure.

Do you think pain or discomfort in the jaw, neck, or back are symptoms of a heart attack?

1. YES
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

-----  
M08Q01B - **EVERYBODY**  
-----

Do you think feeling weak, lightheaded, or faint are symptoms of a heart attack?

1. YES
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

-----  
M08Q01C - **EVERYBODY**  
-----

Do you think **chest pain or discomfort** are symptoms of a heart attack?

1. YES
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

-----  
M08Q01D - **EVERYBODY**  
-----

Do you think **sudden trouble seeing in one or both eyes** is a symptom of a heart attack?

1. YES
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

-----  
M08Q01E - **EVERYBODY**  
-----

Do you think **pain or discomfort in the arms or shoulder** are symptoms of a heart attack?

1. YES
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

-----  
M08Q01F - **EVERYBODY**  
-----

Do you think **shortness of breath** is a symptom of a heart attack?

1. YES
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

-----  
M08Q02A - **EVERYBODY**  
-----

Which of the following do you think is a symptom of a stroke? For each, tell me yes, no, or you are not sure.

Do you think sudden confusion or trouble speaking are symptoms of a stroke?

1. YES
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

-----  
M08Q02B - **EVERYBODY**  
-----

Do you think sudden numbness or weakness of face, arm, or leg, especially on one side, are symptoms of a stroke?

1. YES
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

-----  
M08Q02C - **EVERYBODY**  
-----

Do you think **sudden trouble seeing in one or both eyes** is a symptom of a stroke?

1. YES
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

-----  
M08Q02D - **EVERYBODY**  
-----

Do you think **sudden chest pain or discomfort** are symptoms of a stroke?

1. YES
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

-----  
M08Q02E - **EVERYBODY**  
-----

Do you think **sudden walking, dizziness, or loss of balance** are symptoms of a stroke?

1. YES
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

-----  
M08Q02F - **EVERYBODY**  
-----

Do you think **severe headache with no know cause** is a symptom of a stroke?

1. YES
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

-----  
M08Q03 - **EVERYBODY**  
-----

If you thought someone was having a heart attack or a stroke, what is the first thing you would do? Would you take them to the hospital, tell them to call their doctor, call 911, call their spouse or a family member, or do something else?

1. Take them to the hospital
2. Tell them to call their doctor
3. Call 911
4. Call their spouse or a family member
5. Do something else
  
7. DON'T KNOW/NOT SURE
9. REFUSED

## Module 9: Cardiovascular Disease

-----  
M09Q01 - **EVERYBODY**  
-----

To lower your risk of developing heart disease or stroke, are you....

- M09Q01a. Eating fewer high fat or high cholesterol foods?  
M09Q01b. Eating more fruits and vegetables?  
M09Q01c. More physically active?

1. YES
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

-----  
M09Q02 - **EVERYBODY**  
-----

Within the past 12 months, has a doctor, nurse, or other health professional told you to...

- M09Q02a. Eat fewer high fat or high cholesterol foods?  
M09Q02b. Eat more fruits and vegetables?  
M09Q02c. Be more physically active?

1. YES
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

-----  
M09Q03 - **EVERYBODY**  
-----

47

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

- M09Q03a. A heart attack, also called a myocardial infarction  
M09Q03b. Angina or coronary heart disease  
M09Q03c. A stroke

1. YES  
2. NO  
  
7. DON'T KNOW/NOT SURE  
9. REFUSED

-----  
**M09Q04 - ONLY GET IF M09Q03A = 1 (HAD A HEART ATTACK)**  
-----

At what age did you have your first heart attack?

- \_\_\_\_ CODE AGE IN YEARS  
| 0 CODE AGES 10 YEARS OR LESS  
  
07. DON'T KNOW/NOT SURE  
09. REFUSED

-----  
**M09Q05 - ONLY GET IF M09Q03C = 1 (HAD A STROKE)**  
-----

At what age did you have your first stroke?

- \_\_\_\_ CODE AGE IN YEARS  
| 0 CODE AGES 10 YEARS OR LESS  
  
07. DON'T KNOW/NOT SURE  
09. REFUSED

-----  
M09Q06 - ONLY GET IF M09Q03A OR M09Q03C = 1 (HAD A HEART ATTACK OR STROKE)  
-----

After you left the hospital following your [fill in (heart attack) if "yes" to M09Q03A or to M09Q03A and M09Q03C; fill in (stroke) if "yes" to M09Q03C and "no" to M09Q03A], did you go to any kind of outpatient rehabilitation? This is sometimes called "rehab."

1. YES
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

-----  
M09Q07 - ONLY GET IF C14Q01 > 34 (35 YEARS OLD OR OLDER)  
-----

Do you take aspirin daily or every other day?

1. YES - **SKIP TO M09Q09**
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

-----  
M09Q08 - ONLY GET IF M09Q07 > 1  
-----

Do you have a health problem or condition that makes taking aspirin unsafe for you?

INTERVIEWER: If 'yes,' ask 'Is this a stomach condition?'. "Code upset stomachs as stomach problems"

1. YES, NOT STOMACH RELATED - **SKIP TO M11Q01**
2. YES, STOMACH PROBLEMS - **SKIP TO M11Q01**
3. NO - **SKIP TO M11Q01**
  
7. DON'T KNOW/NOT SURE - **SKIP TO M11Q01**
9. REFUSED - **SKIP TO M11Q01**

-----  
M09Q09 - ONLY GET IF M09Q07 = 1  
-----

Why do you take aspirin?

M09Q09a. To relieve pain?

M09Q09b. To reduce the chance of a heart attack?

M09Q09c. To reduce the chance of a stroke?

1. YES

2. NO

7. DON'T KNOW/NOT SURE

9. REFUSED

## Module 11: Tobacco Indicators

-----  
M11Q01 - ONLY IF C11Q01 = 1  
-----

Previously you said you have smoked cigarettes.

How old were you the first time you smoked a cigarette, even one or two puffs?

\_\_ \_\_ Code age in years (76 = 76 years old or older)

77. DON'T KNOW/NOT SURE

99. REFUSED

-----  
M11Q02 - ONLY IF C11Q01 = 1  
-----

How old were you when you first started smoking cigarettes regularly?

\_\_ \_\_ Code age in years (76 = 76 years old or older)

88. Never smoked regularly - **SKIP TO M11Q06**

77. DON'T KNOW/NOT SURE

99. REFUSED

-----  
M11Q03 - ONLY GET IF M11Q02 <> 88 AND IF C11Q02 = 3 AND IF C11Q01 = 1  
-----

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

INTERVIEWER: READ ONLY IF NECESSARY

\_\_ \_\_ Enter Code

1. Within the past month (ANYTIME LESS THAN 1 MONTH AGO)
2. Within the past 3 months (1 MONTH BUT LESS THAN 3 MONTHS AGO)
3. Within the past 6 months (3 MONTHS BUT LESS THAN 6 MONTHS AGO)
4. Within the past year (6 MONTHS BUT LESS THAN 1 YEAR AGO)
5. Within the past 5 years (1 YEAR BUT LESS THAN 5 YEARS AGO) - **SKIP TO M11Q06**
6. Within the past 10 years (5 YEARS BUT LESS THAN 10 YEARS AGO) - **SKIP TO M11Q06**
7. 10 or more years ago- **SKIP TO M11Q06**
  
77. DON'T KNOW/NOT SURE- **SKIP TO M11Q06**
99. REFUSED- **SKIP TO M11Q06**

-----  
M11Q04 - ONLY GET IF M11Q03 < 5 OR IF C11Q02 < 3  
-----

In the past 12 months, have you seen a doctor, nurse, or other health professional to get any kind of care for yourself?

1. YES
2. NO - **SKIP TO M11Q06**
  
7. DON'T KNOW/NOT SURE - **SKIP TO M11Q06**
9. REFUSED - **SKIP TO M11Q06**

-----  
M11Q05 - ONLY GET IF M11Q04 = 1 AND IF C11Q01 = 1  
-----

In the past 12 months, has a doctor, nurse, or other health professional advised you to quit smoking?

1. YES
2. NO
  
7. DON'T KNOW/NOT SURE
9. REFUSED

-----  
M11Q06 - **EVERYBODY**  
-----

Which statement best describes the rules about smoking inside your home?

INTERVIEWER: PLEASE READ

1. Smoking is not allowed anywhere inside your home
2. Smoking is allowed in some places or at some times
3. Smoking is allowed anywhere inside the home
4. There are no rules about smoking inside the home
  
7. DON'T KNOW/NOT SURE
9. REFUSED

-----  
M11Q07 - **ONLY GET IF C14Q08 < 3 (EMPLOYED OR SELF-EMPLOYED)**  
-----

While working at your job, are you indoors most of the time?

1. YES
2. NO - **SKIP TO M12Q01**
  
7. DON'T KNOW/NOT SURE - **SKIP TO M12Q01**
9. REFUSED - **SKIP TO M12Q01**

-----  
M11Q08 - **ONLY GET IF M11Q07 = 1**  
-----

Which of the following best describes your place of work's official smoking policy for indoor public or common areas, such as lobbies, rest rooms, and lunch rooms?

Would you say not allowed in any public areas, allowed in some public areas, allowed in all public areas, or no official policy?

NOTE: FOR WORKERS WHO VISIT CLIENTS, "PLACE OF WORK" MEANS THEIR BASE LOCATION.

1. Not allowed in any public areas
2. Allowed in some public areas
3. Allowed in all public areas
4. No official policy
  
7. DON'T KNOW/NOT SURE
9. REFUSED

-----  
M11Q09 - **ONLY GET IF M14Q07 = 1**  
-----

Which of the following best describes your place of work's official smoking policy for work areas?

Would you say not allowed in any work areas, allowed in some work areas, allowed in all work areas, or no official policy?

1. Not allowed in any work areas
2. Allowed in some work areas
3. Allowed in all work areas
4. No official policy
  
7. DON'T KNOW/NOT SURE
9. REFUSED

## Module 12: Other Tobacco Products

-----  
M12Q01 - **EVERYBODY**  
-----

Have you ever used or tried any smokeless tobacco products such as chewing tobacco or snuff?

1. YES
2. No - **SKIP TO M12Q03**
  
7. DON'T KNOW/NOT SURE - **SKIP TO M12Q03**
9. REFUSED - **SKIP TO M12Q03**

-----  
M12Q02 - **ONLY GET IF M12Q01 = 1**  
-----

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

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

-----  
M12Q03 - **EVERYBODY**  
-----

Have you ever smoked a cigar, even one or two puffs?

1. YES
2. No - **SKIP TO M12Q05**
  
7. DON'T KNOW/NOT SURE - **SKIP TO M12Q05**
9. REFUSED - **SKIP TO M12Q05**

-----  
M12Q04 - **ONLY GET IF M12Q03 = 1**  
-----

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

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

-----  
M12Q05 - **EVERYBODY**  
-----

Have you ever smoked tobacco in a pipe, even one or two puffs?

1. YES
2. No - **SKIP TO M12Q07**
  
7. DON'T KNOW/NOT SURE - **SKIP TO M12Q07**
9. REFUSED - **SKIP TO M12Q07**

-----  
M12Q06 - **ONLY GET IF M12Q05 = 1**  
-----

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

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

-----  
M12Q07 - **EVERYBODY**  
-----

A bidi is a flavored cigarette from India. Have you ever smoked a bidi, even one or two puffs?

1. YES
2. No - (SKIP TO M13Q01) OR (SKIP TO CLOSING IF C15Q02 <> 1 OR C15Q04 <> 1)
7. DON'T KNOW/NOT SURE - (SKIP TO M13Q01) OR (SKIP TO CLOSING IF C15Q02 <> 1 OR C15Q04 <> 1)
9. REFUSED - (SKIP TO M13Q01) OR (SKIP TO CLOSING IF C15Q02 <> 1 OR C15Q04 <> 1)

-----  
M12Q08 - **ONLY GET IF M12Q07 = 1**  
-----

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

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

## Module 13: Arthritis

**ONLY GET THIS SECTION IF C15Q02 = 1 OR C15Q04 = 1**  
-----

M13Q01 - **EVERYBODY**  
-----

Earlier you indicated that you had arthritis or joint symptoms.

Thinking about your arthritis or joint symptoms, which of the following best describes you TODAY?

1. I can do everything I would like to do
2. I can do most things I would like to do
3. I can do some things I would like to do
4. I can hardly do anything I would like to do
7. DON'T KNOW / NOT SURE
9. REFUSED

-----  
M13Q02 - **EVERYBODY**  
-----

Has a doctor or other health professional EVER suggested losing weight to help your arthritis or joint symptoms?

1. YES
2. No
  
7. DON'T KNOW/NOT SURE
9. REFUSED

-----  
M13Q03 - **EVERYBODY**  
-----

Has a doctor or other health professional EVER suggested physical activity or exercise to help your arthritis or joint symptoms?

NOTE: IF THE RESPONDENT IS UNCLEAR ABOUT WHETHER THIS MEANS AN INCREASE OR DECREASE IN PHYSICAL ACTIVITY, THIS MEANS INCREASE.

1. YES
2. No
  
7. DON'T KNOW/NOT SURE
9. REFUSED

-----  
M13Q04 - **EVERYBODY**  
-----

Have you EVER taken an educational course or class to teach you how to manage problems related to your arthritis or joint symptoms?

1. YES
2. No
  
7. DON'T KNOW/NOT SURE
9. REFUSED

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