

INCOME – INQ
Target Group: SP, Family, Household

Definitions for Testers:

- NHANES FAMILY: Everyone related to each other by blood, marriage or a marriage-like relationship including partners and foster children.
- FAMILY: Individuals and groups of individuals who are related by birth, marriage or adoption. step children, parents or siblings are included. It also includes unmarried partners if they have a biological or adoptive child in common. It does not include unmarried partners who do not have a child in common, foster parents or foster children. Note: Individuals living alone or with other unrelated individuals are referred to as “unrelated individuals”.

INQ.020 The next questions are about {your/your combined family} income. When answering these questions, please remember that by {"income/combined family income"}, I mean {your income/your income **plus** the income of {NAMES OF OTHER **NHANES** FAMILY MEMBERS} for {LAST CALENDAR YEAR}. Did {you/you and OTHER NHANES FAMILY MEMBERS 16+} receive income in {LAST CALENDAR YEAR} from **wages and salaries**?

[Did {you/you or OTHER FAMILY MEMBERS 16+} get paid for work in {LAST CALENDAR YEAR}.]

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

INQ.012 Did {you/you or **any** family members 16 and older} receive income in {LAST CALENDAR YEAR} from **self-employment** including business and farm income?

[Self-employment means you worked for yourself.]

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

BOX 1B
OMITTED

BOX 1C
OMITTED

INQ.030 When answering the next questions about different kinds of income members of your family might have received in {LAST CALENDAR YEAR}, please consider that we also want to know about family members less than 16 years old. Did {you/you or **any** family members living here, that is: you or NAME(S) OF OTHER NHANES FAMILY MEMBERS} receive income in {LAST CALENDAR YEAR} from **Social Security** or **Railroad Retirement**?

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

BOX 1D
OMITTED

BOX 1E
OMITTED

INQ.060 Did {you/you or **any** family members living here} receive **any disability** pension [other than Social Security or Railroad Retirement] in {LAST CALENDAR YEAR}?

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

BOX 2A
OMITTED

INQ.080 Did {you/you or **any** family members living here} receive **retirement or survivor pension** [other than Social Security or Railroad Retirement or disability pension] in {LAST CALENDAR YEAR}?

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

BOX 2B
OMITTED

INQ.090 Did {you/you or **any** family members living here} receive **Supplemental Security Income** [SSI] in {LAST CALENDAR YEAR}?

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

BOX 2C
OMITTED

BOX 3A
OMITTED

INQ.132 Did {you/you or **any** family members living here} receive any **cash** assistance from a state or county welfare program such as {DISPLAY SPECIFIC STATE PROGRAMS} in {LAST CALENDAR YEAR}?

CAPI INSTRUCTION:
DISPLAY FULL NAMES OF ALL STATE PROGRAMS FOR STATE IN WHICH INTERVIEW IS BEING CONDUCTED. NAMES FOR EACH STATE WILL BE SENT TO PROGRAMMING IN A SEPARATE FILE.

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

BOX 3AA
OMITTED

BOX 3B
OMITTED

INQ.140 Did {you/you or **any** family members living here} receive **interest** from savings or other bank accounts or income from dividends received from stocks or mutual funds or net rental income from property, royalties, estates, or trusts in {LAST CALENDAR YEAR}?

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

BOX 3C
OMITTED

INQ.150

Did {you/you or **any** family members living here} receive income in {LAST CALENDAR YEAR} from child support, alimony, contributions from family or others, VA payments, worker's compensation, or unemployment compensation?

INTERVIEWER INSTRUCTION: CONTRIBUTIONS INCLUDE GIFTS.

INTERVIEWER INSTRUCTION: IF RESPONDENT IS A COLLEGE STUDENT LIVING AWAY FROM THEIR FAMILY PLEASE ADD "INCLUDING MONEY RECEIVED FROM FAMILY FOR COLLEGE TUITION, BOOKS AND LIVING EXPENSES"

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

BOX 3D
OMITTED

BOX 4A
OMITTED

BOX 4C
OMITTED

BOX 4B
OMITTED

BOX 5
OMITTED

INQ.220 You may not be able to give us an exact figure for {your/NAME(S) OF OTHER FAMILY/you and NAMES OF FAMILY MEMBERS} income, but can you tell me if this income in {LAST CALENDAR YEAR} was . . .

PROBE: Income is important in using the health information we collect. For example, it helps us to learn whether persons in one income group use certain types of medical services or have certain health conditions more or less often than those in another income group.

CAPI INSTRUCTIONS:

- DISPLAY "YOUR" IF ONLY 1 PERSON IN THE FAMILY.
- DISPLAY "NAMES OF FIRST/NEXT FAMILY MEMBERS" IF THERE IS MORE THAN 1 PERSON IN THE FAMILY.

\$20,000 or more, or 1
 less than \$20,000? 2
 REFUSED 7 (BOX 8)
 DON'T KNOW..... 9 (BOX 8)

INQ.230 Of these income groups, can you tell me which letter **best** represents {your/NAME(S) OF OTHER FAMILY/you and NAMES OF FAMILY MEMBERS} income in {LAST CALENDAR YEAR}?
 a/b

HAND CARD {INQ1 AND INQ2}

ENTER LETTER(S) CORRESPONDING TO TOTAL COMBINED FAMILY INCOME.

CAPI INSTRUCTIONS:

- DISPLAY "YOUR" IF ONLY 1 PERSON IN THE FAMILY.
- DISPLAY "NAMES OF FIRST/NEXT FAMILY MEMBERS" IF THERE IS MORE THAN 1 PERSON IN THE FAMILY.
- IF \$20,000 OR MORE, DISPLAY HAND CARD INQ1.
- IF LESS THAN \$20,000, DISPLAY HAND CARD INQ2.

□□□

A	I	Q	Y	GG	OO
B	J	R	Z	HH	PP
C	K	S	AA	II	QQ
D	L	T	BB	JJ	RR
E	M	U	CC	KK	SS
F	N	V	DD	LL	TT
G	O	W	EE	MM	UU
H	P	X	FF	NN	VV
					WW

REFUSED 77
 DON'T KNOW..... 99

BOX 6
OMITTED

INQ.235 What is the total income received last month, {LAST CALENDAR MONTH & CURRENT CALENDAR YEAR} by {you/NAMES OF OTHER FAMILY/you and NAMES OF FAMILY MEMBERS}} before taxes?

[Please include income from all sources we have just talked about such as wages, salaries, Social Security or retirement benefits, help from relatives and so forth.]

[INTERVIEWER INSTRUCTION: IF SP DOES NOT KNOW INCOME OF OTHER FAMILY MEMBERS, ENTER DON'T KNOW.]

CAPI INSTRUCTION:

- REQUIRE DOUBLE ENTRY OF INCOME.
- SCREEN SHOULD READ:
"LAST MONTH'S INCOME FOR {NAMES OF FAMILY MEMBERS} HAS BEEN RECORDED AS {INCOME ENTERED IN INQ.200} DOUBLE ENTRY OF INCOME REQUIRED."
- IF ENTRIES DO NOT MATCH, DISPLAY BOTH ENTRIES. INTERVIEW SHOULD SELECT ENTRY TO CORRECT.
- FOR THE CALENDAR FILL: IF CURRENT MONTH IS JANUARY THE PAST CALENDAR YEAR WILL BE SHOWN

\$ | | | | | | | | | | (BOX NEW 7A)

REFUSED 7
DON'T KNOW..... 9

INQ.238 You may not be able to give us an exact figure, but can you tell me if the income for {you/NAMES OF OTHER FAMILY/your family} in {LAST CALENDAR YEAR} was . . .

{185% or less of monthly poverty level}, or 1
more than {185% monthly poverty level}?..... 2 (BOX NEW 7A)
REFUSED 7
DON'T KNOW..... 9

PROBE: (That would be {12 times 185% monthly poverty level}} per year.)

CAPI INSTRUCTION:

- Fill 185% of the monthly poverty level based on family size:
For family size of 1, fill (\$1511 round to nearest 100s = **\$1,500**)
For each additional family member, fill {[\$1511+(524* # of additional person)] round to nearest 100s}
- Fill 185% of the **annual** poverty level based on family size in the PROBE:
For family size of 1, fill [(\$1511*12) round to nearest 100s] = **\$18,100**
For each additional member, fill {[\$1511+(524* # of additional person)]*12 round to nearest 100s}

Persons in Family	185% monthly poverty level		185% annual poverty level	
	Raw Number ¹	Rounded to nearest 100s ²	Raw Number ³	Rounded to nearest 100s ⁴
1	1511	1500	18132	18100
2	2035	2000	24420	24400
3	2559	2600	30708	30700
4	3083	3100	36996	37000
5	3607	3600	43284	43300
6	4131	4100	49572	49600
7	4655	4700	55860	55900
8	5179	5200	62148	62100

¹: \$1,511 for family size of 1, thereafter, adding \$524 for each additional person.

²: These are the numbers to be used in the response category fills.

³: Multiply by 12 to the raw number of the 185% monthly poverty level.

⁴: These are the numbers to be used in the probe fills

INQ.241 Was it more or less than {130% monthly poverty level}?

130% or less than monthly poverty level..... 1
 More than 130% of monthly poverty level 2
 REFUSED 7
 DON'T KNOW..... 9

PROBE: {That would be 12 times 130% annual poverty level per year.}

CAPI INSTRUCTION:

- Fill 130% of the monthly poverty level based on family size:
 For family size of 1, fill (\$1062 round to nearest 100s = **\$1,100**)
 For each additional family member, fill {[\$1062+(368* # of additional person)] round to nearest 100s}
- Fill 130% of the **annual** poverty level based on family size in the PROBE:
 For family size of 1, fill [(\$1062*12) round to nearest 100s] = **\$12,700**
 For each additional member, fill {[\$1062+(368* # of additional person)]*12 round to nearest 100s}

Persons in Family	130% monthly poverty level		130% annual poverty level	
	Raw Number ¹	Rounded to nearest 100s ²	Raw Number ³	Rounded to nearest 100s ⁴
1	1062	1100	12744	12700
2	1430	1400	17160	17200
3	1798	1800	21576	21600
4	2166	2200	25992	26000
5	2534	2500	30408	30400
6	2902	2900	34824	34800
7	3270	3300	39240	39200
8	3638	3600	43656	43700

¹: \$1,062 for family size of 1, thereafter, adding \$368 for each additional person.

- ²: These are the numbers to be used in the text of question and response category fills.
- ³: Multiply 12 to the raw number of the 130% monthly poverty level.
- ⁴: These are the numbers to be used in the probe fills

BOX NEW 7A

CHECK ITEM INQ.242:
 IF FAMILY ANNUAL INCOME (INQ200) EQUAL OR LESS THAN {200% POVERTY LEVEL}, CONTINUE;
 OTHERWISE, GO TO BOX 8.

CALCULATE 200% OF THE ANNUAL POVERTY LEVEL BASED ON FAMILY SIZE: \$19,600 FOR FAMILY SIZE OF 1, THEREAFTER, ADDING \$6,800 FOR EACH ADDITIONAL PERSON

INQ.244 Do {you/NAMES OF OTHER FAMILY/you and NAMES OF FAMILY MEMBERS} have more than \$5,000 in savings at this time? Please include money in your checking accounts.

INTERVIEWER INSTRUCTION: INCLUDE CASH, SAVINGS OR CHECKING ACCOUNTS, STOCKS, BONDS, MUTUAL FUNDS, RETIREMENT FUNDS (SUCH AS PENSIONS, IRAS, 401KS, ETC), AND CERTIFICATES OF DEPOSIT.

CAPI INSTRUCTION:
 DISPLAY "you" for single-person family; DISPLAY "the members of your family" for multi-persons family.

- YES 1 (BOX 9)
- NO 2
- REFUSED 7 (BOX 9)
- DON'T KNOW..... 9 (BOX 9)

INQ.247 Which letter on this card best represents the total savings or cash assets at this time for {you/NAMES OF OTHER FAMILY/your family}?

HAND CARD INQ3

ENTER LETTER

- REFUSED 7
- DON'T KNOW..... 9

- A: Less than \$500
- B: \$501- \$1000
- C: \$1001-\$2000
- D: \$2001-\$3000
- E: \$3001-\$4000
- F: \$4001-\$5000

BOX 8

END LOOP 2:

ASK INQ.200 – INQ.247 FOR NEXT FAMILY.
IF NO NEXT FAMILY, CONTINUE.

BOX 9

CHECK ITEM INQ.240:

IF THERE IS MORE THAN ONE NHANES FAMILY IN THE HOUSEHOLD,
CONTINUE.
OTHERWISE, GO TO END OF SECTION.

INQ.250

Now I am going to ask you about the total **household** income for the persons we have talked about plus {NAMES OF ALL OTHER PERSONS IN ADDITIONAL NHANES FAMILIES} in {LAST CALENDAR YEAR}, including income from all sources we have just talked about such as wages, salaries, Social Security or retirement benefits, help from relatives and so forth. Can you tell me that amount before taxes?

\$ | | | | | | | | | | | | | | | | | | | | | | (GO TO END OF SECTION)

REFUSED 7777777777 (INQ.260)

DON'T KNOW..... 9999999999 (INQ.260)

CAPI INSTRUCTION:

- REQUIRE DOUBLE ENTRY OF INCOME.
- SCREEN SHOULD READ:
“INCOME FOR YOUR HOUSEHOLD HAS BEEN RECORDED AS {INCOME ENTERED IN INQ.250} DOUBLE ENTRY OF INCOME REQUIRED.”
- IF ENTRIES DO NOT MATCH, DISPLAY BOTH ENTRIES. INTERVIEW SHOULD SELECT ENTRY TO CORRECT.

INQ.260

You may not be able to give us an exact figure for your total household income, but can you tell me if this income in {LAST CALENDAR YEAR} was . . .

PROBE: Income is important in analyzing the health information we collect. For example, this information helps us to learn whether persons in one income group use certain types of medical services or have certain conditions more or less often than those in another group.

\$20,000 or more, or 1
 less than \$20,000? 2
 REFUSED 7 (END OF SECTION)
 DON'T KNOW..... 9 (END OF SECTION)

INQ.270 Of these income groups, can you tell me which letter **best** represents your total household income in {LAST CALENDAR YEAR}?

HAND CARD {INQ1 AND INQ2}

ENTER LETTER(S) CORRESPONDING TO TOTAL COMBINED HOUSEHOLD INCOME.

|_|_|

A	I	Q	Y	GG	OO
B	J	R	Z	HH	PP
C	K	S	AA	II	QQ
D	L	T	BB	JJ	RR
E	M	U	CC	KK	SS
F	N	V	DD	LL	TT
G	O	W	EE	MM	UU
H	P	X	FF	NN	VV
					WW

REFUSED 77
DON'T KNOW..... 99

CAPI INSTRUCTION:
IF \$20,000 OR MORE, DISPLAY HAND CARD INQ1.
IF LESS THAN \$20,000, DISPLAY HAND CARD INQ2.

END OF SECTION

INQ1

U.	\$20,000 - \$20,999	JJ.	\$35,000 - \$39,999
V.	\$21,000 - \$21,999	KK.	\$40,000 - \$44,999
W.	\$22,000 - \$22,999	LL.	\$45,000 - \$49,999
X.	\$23,000 - \$23,999	MM.	\$50,000 - \$54,999
Y.	\$24,000 - \$24,999	NN.	\$55,000 - \$59,999
Z.	\$25,000 - \$25,999	OO.	\$60,000 - \$64,999
AA.	\$26,000 - \$26,999	PP.	\$65,000 - \$69,999
BB.	\$27,000 - \$27,999	QQ.	\$70,000 - \$74,999
CC.	\$28,000 - \$28,999	RR.	\$75,000 - \$79,999
DD.	\$29,000 - \$29,999	SS.	\$80,000 - \$84,999
EE.	\$30,000 - \$30,999	TT.	\$85,000 - \$89,999
FF.	\$31,000 - \$31,999	UU.	\$90,000 - \$94,999
GG.	\$32,000 - \$32,999	VV.	\$95,000 - \$99,999
HH.	\$33,000 - \$33,999	WW.	\$100,000 and over
II.	\$34,000 - \$34,999		

INQ2

A.	Less than \$1,000	K.	\$10,000 - \$10,999
B.	\$1,000 - \$1,999	L.	\$11,000 - \$11,999
C.	\$2,000 - \$2,999	M.	\$12,000 - \$12,999
D.	\$3,000 - \$3,999	N.	\$13,000 - \$13,999
E.	\$4,000 - \$4,999	O.	\$14,000 - \$14,999
F.	\$5,000 - \$5,999	P.	\$15,000 - \$15,999
G.	\$6,000 - \$6,999	Q.	\$16,000 - \$16,999
H.	\$7,000 - \$7,999	R.	\$17,000 - \$17,999
I.	\$8,000 - \$8,999	S.	\$18,000 - \$18,999
J.	\$9,000 - \$9,999	T.	\$19,000 - \$19,999

INQ3

- A. Less than \$500
- B. \$501 - \$1000
- C. \$1001 - \$2000
- D. \$2001 - \$3000
- E. \$3001 - \$4000
- F. \$4001 - \$5000