



NATIONAL CENTER FOR HEALTH STATISTICS

Questionnaire Programming Specifications

RSS-2 (English version)



Last revised April 19, 2024



National Center for Health Statistics: Rapid Survey Systems

RSS-2 Questionnaire Programming Specifications

Acknowledgments

This document was prepared for the National Center for Health Statistics under Contract No. GS00F354CA with RTI International. Amy Brown served as the government Project Officer and as the Contracting Officer's Representative.

Public Domain Notice

All material appearing in this report is in the public domain and may be reproduced or copied without permission from NCHS. Citation of the source is appreciated. However, this publication may *not* be reproduced or distributed for a fee without the specific, written authorization of the Office of Communications, NCHS.

Recommended Citation

National Center for Health Statistics: Rapid Surveys Systems. *RSS-2 Questionnaire Programming Specifications*. Hyattsville, Maryland. 2023

Originating Office

Centers for Disease Control and Prevention, National Center for Health Statistics, 3311 Toledo Road, Hyattsville, MD 20782. For questions about this document, please email NCHSRapids@cdc.gov.

Nondiscrimination Notice

NCHS complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

Centers for Disease Control and Prevention
National Center for Health Statistics
Division of Health Interview Statistics
Rapid Survey Systems

RSS-2 Questionnaire Content

Section Abbreviation	Section Name	Page
INT	Introduction	5
HIS	Self-Reported Health Status	7
CHR	Chronic Conditions	7
ADHD	Attention-Deficit/Hyperactivity Disorder	9
SOC	Social/Work Limitations	14
PAY	Social Determinants – Paying Medical Bills	16
THC	Social Determinants – Transportation Barriers and Housing Costs	16
INT	Internet Access and Health Information Technology	17
ONL	Online Connectedness	19
ACC	Healthcare Access/Utilization	23
MED	Healthcare Utilization – Prescription Medication	25
CON	Contraception Access Among Women of Reproductive Age	27
PAI	Health Status – Pain	32
CPN	Chronic Pain	33
HRD	Illegal Drug Use and Naloxone Awareness	35
IMM	Healthcare Utilization – Immunization	43
MTL	Healthcare Utilization – Mental Health Visits	43
HCA	Healthcare Access	44
MTH	Mental Health	45
CIG	Health Behaviors – Cigarette Smoking	47
SWM	Swimming	48
SUI	Suicide	52
TSV	Technology-Facilitated Sexual Violence	54
EMP	Employment	57
HPF	Hearing Protector Fit Testing	58
MAR	Marital Status	60
CIV	Civic Engagement	62
LAN	Language Items	63
TEL	Telephone Use	65

How to Use This Questionnaire

The primary purpose of this document is to provide Web/CATI programming specifications that outline the question and response option wording, variable names, variable types (e.g., single response, multi-check), response values, universe/skip logic, allowable numeric ranges, text character limits, error messages, and other necessary instructions for formatting (e.g., items per page). Programming instructions are presented in all caps in brackets and use green text. Respondent facing text is shown in black. Programming specifications for RSS-2 are as follows:

QUESTION INFORMATION FORMATTING:

- [UNIVERSE/SKIP LOGIC]
- [QUESTION TYPE]
 - S = SINGLE RESPONSE
 - M = MULTI-CHECK
 - NUMBOX = NUMERIC INPUT
 - TEXTBOX = TEXT INPUT
 - GRID
- VARIABLE NAME
- QUESTION STEM
 - IF CAWI/CATI QUESTION TEXT IS DIFFERENT, “[CAWI]” AND “[CATI]” PRECEDES MODE SPECIFIC TEXT
- RESPONSE OPTION TEXT AND VALUES
 - CAWI RESPONSE OPTIONS AND VALUES
 - CATI RESPONSE OPTIONS AND VALUES, IF DIFFERENT FROM CAWI; ELSE ONLY ONE COMMON SET OF RESPONSE OPTIONS ARE SPECIFIED. CATI INSTRUCTIONS AND RESPONSE OPTIONS THAT SHOULD **NOT** BE READ WILL BE IN ALL CAPS AND INCLUDE “DO NOT READ” INSTRUCTIONS; ELSE CATI TEXT/RESPONSE OPTIONS SHOULD BE READ BY INTERVIEWER.

REFUSALS/DON'T KNOW INSTRUCTIONS:

- CAWI REFUSALS/DON'T KNOW = DO NOT INCLUDE DON'T KNOW/REFUSED OPTIONS ON SCREEN FOR CAWI UNLESS SPECIFIED IN ITEM RESPONSE OPTIONS. CODE REFUSALS/SKIPS AS FOLLOWS:
 - IMPLICIT REFUSAL/WEB SKIP = -6
 - DON'T KNOW (WHEN SPECIFIED) = -9
- CATI REFUSALS/DON'T KNOW = INCLUDE THE FOLLOWING DON'T KNOW/REFUSED OPTIONS FOR INTERVIEWERS ON SCREEN FOR ALL QUESTIONS IN CATI. INTERVIEWERS SHOULD NOT READ REF/DK OPTIONS UNLESS OTHERWISE SPECIFIED IN RESPONSE OPTIONS. CODE AS FOLLOWS:
 - REFUSAL = -7
 - DON'T KNOW = -9

- LEGITIMATE SKIPS = CODE ALL LEGITIMATE SKIPS FOR CATI AND CAWI AS FOLLOWS:
 - LEGITIMATE SKIP = -8

ANSWER REQUIREMENT/PROMPTS AND VALIDATION:

RESPONDENTS SHOULD BE ABLE TO SKIP ALL ITEMS, AND NO ITEMS SHOULD BE REQUIRED. DO NOT USE SOFT PROMPTS FOR ITEMS THAT ARE SKIPPED. ERROR/VALIDATION MESSAGES (E.G., OUT OF BOUNDS RESPONSES) SHOULD BE PROGRAMMED AS SPECIFIED IN THE QUESTION.

PAGE FORMATTING:

ON WEB DISPLAY ONE ITEM PER PAGE UNLESS OTHERWISE SPECIFIED. SCREEN BREAKS ARE DENOTED BY LINES BETWEEN ITEMS.

SURVEY PRELOADS AND COMPUTED VARIABLES:

PRELOAD/COMPUTE THE FOLLOWING VARIABLES TO USE IN SURVEY LOGIC:

- HHSIZE = NUMERIC HOUSEHOLD SIZE, CAPPED AT 6+
- AGE = NUMERIC AGE IN YEARS
- SEX
 - MALE = 1
 - FEMALE = 2
- QUEX_LANG (BASED ON LANGUAGE SELECTED BY RESPONDENT IN INSTRUMENT):
 - ENGLISH = 1
 - SPANISH = 2

INT – INTRODUCTION

[CAWI]

The National Center for Health Statistics, part of the Centers for Disease Control and Prevention, is conducting a study and we need your help. We are interested in your health and wellness and will be asking you a series of questions about your health history, behaviors, and opinions. This should take about 20 minutes or less to complete. Participation in this survey is completely voluntary, and you may skip any question(s) you do not want to answer and may quit the survey at any time. The information being collected will assist NCHS and CDC in their ongoing efforts to track the health of the American public. Your data will be kept confidential, will be used for statistical purposes only, and will not be disclosed or released to other persons without your consent in accordance with Section 308(d) of the Public Health Service Act [42 U.S.C. 242m(d)] and Confidential Information Protection and Statistical Efficiency Act (44 U.S.C. 3561-3583).

If you have any questions about your rights as a participant in this research study, call NCHS's Ethics Review Board toll-free at 1-800-223-8118.

[PROGRAMMER: REDUCE TEXT SIZE SLIGHTLY; TEXT BELOW BORDERED BY THIN BLACK BOX/OUTLINE]

CDC estimates the average public reporting burden for this collection of information as 20 minutes per response, including the time for reviewing instructions, searching existing data/information sources, gathering and maintaining the data/information 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 Information Collection Review Office, 1600 Clifton Road, MS H21-8, Atlanta, GA 30333; ATTN: PRA (0920-1408).

We take your privacy very seriously. All information that relates to or describes identifiable characteristics of individuals, a practice, or an establishment will be used only for statistical purposes. NCHS staff, contractors, and agents will not disclose or release responses in identifiable form without the consent of the individual or establishment in accordance with section 308(d) of the Public Health Service Act (42 U.S.C. 242m(d)), and the Confidential Information Protection and Statistical Efficiency Act (44 U.S.C. 3561-3583). In accordance with CIPSEA, every NCHS employee, contractor, and agent has taken an oath and is subject to a jail term of up to five years, a fine of up to \$250,000, or both if he or she willfully discloses ANY identifiable information about you. In addition to the above cited laws, NCHS complies with the Federal Cybersecurity Enhancement Act of 2015 (6 U.S.C. § 151 and 151 note) which protects Federal information systems from cybersecurity risks by screening their networks.

[CATI]

- We are asking for your help on behalf of the National Center for Health Statistics, part of the Centers for Disease Control and Prevention.
- This survey will take on average 20 minutes to complete.
- Participation in this survey is completely voluntary, and you may skip any question(s) you do not want to answer and may quit the survey at any time.

- The information being collected will assist NCHS and CDC in their ongoing efforts to track the health of the American public.
- Your data will be kept confidential and will be used for statistical purposes only by NCHS staff and agents and will not be disclosed or released to other persons without your consent.
- If you have any questions about your rights as a participant in this research study, call NCHS’s Ethics Review Board toll-free at 1-800-223-8118.

[PROGRAMMER: REDUCE TEXT SIZE SLIGHTLY; TEXT BELOW BORDERED BY THIN BLACK BOX/OUTLINE]

[CATI] READ THE FOLLOWING IF THE RESPONDENT HAS ADDITIONAL QUESTIONS ABOUT BURDEN, PRIVACY, OR CONFIDENTIALITY

CDC estimates the average public reporting burden for this collection of information as 20 minutes per response, including the time for reviewing instructions, searching existing data/information sources, gathering and maintaining the data/information 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 Information Collection Review Office, 1600 Clifton Road, MS H21-8, Atlanta, GA 30333; ATTN: PRA (0920-1408).

We take your privacy very seriously. All information that relates to or describes identifiable characteristics of individuals, a practice, or an establishment will be used only for statistical purposes. NCHS staff, contractors, and agents will not disclose or release responses in identifiable form without the consent of the individual or establishment in accordance with section 308(d) of the Public Health Service Act (42 U.S.C. 242m(d)), and Confidential Information Protection and Statistical Efficiency Act (44 U.S.C. 3561-3583). In accordance with CIPSEA, every NCHS employee, contractor, and agent has taken an oath and is subject to a jail term of up to five years, a fine of up to \$250,000, or both if he or she willfully discloses ANY identifiable information about you. In addition to the above cited laws, NCHS complies with the Federal Cybersecurity Enhancement Act of 2015 (6 U.S.C. § 151 and 151 note) which protects Federal information systems from cybersecurity risks by screening their networks.

[PROGRAMMER: SECTION HEADERS ARE FOR INTERNAL USE ONLY. DO NOT PROGRAM TO APPEAR ON SCREEN.]

[CREATE “START_TIME” AND “START_DATE”; RECORD START_TIME IN HH:MM:SS; RECORD START_DATE IN MM:DD:YYYY]

HIS - SELF-REPORTED HEALTH STATUS

[CREATE "START_HIS" AND RECORD TIME IN HH:MM:SS]

[SHOW ALL]

[S]

HIS_GENERAL

[CAWI] Would you say your health in general is...

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

[CAWI RESPONSE OPTIONS:]

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

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 EXCELLENT
- 2 VERY GOOD
- 3 GOOD
- 4 FAIR
- 5 POOR

[CREATE "END_HIS" AND RECORD TIME IN HH:MM:SS]

CHR - CHRONIC CONDITIONS

[CREATE "START_CHR" AND RECORD TIME IN HH:MM:SS]

[SHOW ALL]

[S]

CHR_HYPEV

Have you ever been told by a doctor or other health professional that you had hypertension, also called high blood pressure?

[CAWI] *If you take medication to control your high blood pressure, please answer yes.*

[CATI] ENTER '1' (YES) IF RESPONDENT IS TAKING MEDICATION TO CONTROL HIS/HER HIGH BLOOD PRESSURE.

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
- 0 NO

[SHOW ALL]

[S]

CHR_CHLEV

Have you ever been told by a doctor or other health professional that you had high cholesterol?

[CAWI] *If you take medication to control your high cholesterol, please answer yes.*

[CATI] ENTER '1' IF RESPONDENT IS TAKING MEDICATION TO CONTROL HIS/HER HIGH CHOLESTEROL.

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
- 0 NO

[SHOW ALL]

[S]

CHR_ASEV

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

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
- 0 NO

[SHOW ALL]

[S]

CHR_CANEV

Have you ever been told by a doctor or other health professional that you had cancer or a malignancy of any kind?

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
- 0 NO

[CREATE "END_CHR" AND RECORD TIME IN HH:MM:SS]

ADHD - ATTENTION-DEFICIT/ HYPERACTIVITY DISORDER

[CREATE "START_ADHD" AND RECORD TIME IN HH:MM:SS]

[SHOW ALL]

[S]

ADHD_EVER

Have you ever been diagnosed with attention-deficit/hyperactivity disorder, or ADHD, by a doctor or other health professional?

Health professionals can include psychologists and nurses.

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
- 0 NO

[SHOW IF ADHD_EVER=1]

[S]

ADHD_AGE

How old were you when a doctor or other health professional first diagnosed you with ADHD?

[PROGRAMMER: VALIDATE RESPONSE AGAINST "AGE." IF AGE < AGE RANGE SELECTED IN ADHD_AGE, SHOW ERROR MESSAGE: Please select a response that is less than or equal to your current age.]

[CAWI RESPONSE OPTIONS:]

- 1 11 years old or younger
- 2 12-17 years old
- 3 18-24 years old
- 4 25-44 years old
- 5 45 years old or older

[CATI RESPONSE OPTIONS – READ IF NECESSARY:]

- 1 11 years old or younger
- 2 12-17 years old
- 3 18-24 years old
- 4 25-44 years old
- 5 45 years old or older

[SHOW IF ADHD_EVER=1]

[S]

ADHD_NOW

Do you currently have ADHD?

[CAWI RESPONSE OPTIONS:]

1 Yes

0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

1 YES

0 NO

[SHOW IF ADHD_NOW=1]

[S]

ADHD_TREAT

During the past 12 months, did you receive counseling or therapy from a mental health professional to help you with your ADHD?

Mental health professionals can include psychiatrists, psychologists, psychiatric nurses, or clinical social workers.

[CAWI RESPONSE OPTIONS:]

1 Yes

0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

1 YES

0 NO

[SHOW IF ADHD_NOW=1]

[S]

ADHD_MEDS

During the past 12 months, were you prescribed medication to help you with your ADHD?

[CAWI RESPONSE OPTIONS:]

1 Yes

0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

1 YES

0 NO

[SHOW IF ADHD_MEDS=1]

[S]

ADHD_MEDDIFF

During the past 12 months, did you have any difficulty getting your ADHD prescription filled because your ADHD medication was not available?

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
 - 0 NO
-

[SHOW IF ADHD_MEDS=1]

[TEXTBOX]

ADHD_WHCHMED

During the past 12 months, what prescription medications did you take to help you with ADHD?

Please do not list any medications you were prescribed but did not take. Please separate each medication with a comma.

[TEXTBOX]

0 None [EXCLUSIVE]

[SHOW IF ADHD_NOW=1]

[S]

ADHD_INS

During the past 12 months, did health insurance pay for any of the health care costs for diagnosing or treating your ADHD?

Include any costs for counseling or therapy, prescription medications, or diagnostic evaluations.

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
 - 0 NO
-

[SHOW IF ADHD_NOW=1]

[S]

ADHD_TELE

Have you ever received any telehealth services for ADHD? That is, have you ever talked about your ADHD with a doctor, nurse, or other health professional by video or by phone?

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
 - 0 NO
-

[SHOW IF ADHD_TELE=1]

[S]

ADHD_DIAG

Were you diagnosed with ADHD during telehealth visits, in-person visits, or a combination of both?

[CAWI RESPONSE OPTIONS:]

- 1 Telehealth visits
- 2 In-person visits
- 3 Both telehealth and in-person visits

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 TELEHEALTH VISITS
 - 2 IN-PERSON VISITS
 - 3 BOTH TELEHEALTH AND IN-PERSON VISITS
-

[SHOW IF ADHD_TELE=1]

ADHD_DSPL

At any time since March 2020, that is, since the start of the COVID-19 pandemic, did you use any telehealth visits for the following:

[SHOW IF ADHD_TELE=1]

[S]

ADHD_FIRST

To have a first-time visit with a doctor, nurse, or other health professional for your ADHD?

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
- 0 NO

[SHOW IF ADHD_TELE=1]

[S]

ADHD_TELERX

To have a visit with a doctor, nurse, or other health professional to get a prescription for ADHD medications?

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
- 0 NO

[SHOW IF ADHD_TELE=1]

[S]

ADHD_COUNSEL

To receive counseling or therapy to help you with your ADHD?

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
- 0 NO

[PROGRAMMER: DISPLAY ADHD_DSPL- ADHD_COUNSEL ON SAME PAGE]

[SHOW IF ADHD_FIRST=1 OR ADHD_TELERX=1 OR ADHD_COUNSEL=1]

[S]

ADHD_INSPAY

At any time since March 2020, did health insurance pay for any of the costs for telehealth visits for ADHD?

Do not include costs for any medications prescribed during a telehealth visit.

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
 - 0 NO
-

[SHOW IF ADHD_TELERX = 1]

[S]

ADHD_RX3M

Within the next three months, do you plan to have another telehealth visit, to get a prescription for your ADHD medications? [CATI: If you are not sure or don't know, you may say that, too.]

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No
- 9 Not Sure

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
 - 0 NO
 - 9 NOT SURE
-

[SHOW IF ADHD_COUNSEL=1]

[S]

ADHD_CNSEL3M

Within the next three months, do you plan to have another telehealth visit, to receive counseling or therapy for your ADHD? [CATI: If you are not sure or don't know, you may say that, too.]

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No
- 9 Not Sure

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
- 0 NO
- 9 NOT SURE

[CREATE "END_ADHD" AND RECORD TIME IN HH:MM:SS]

SOC - SOCIAL/WORK LIMITATIONS

[CREATE "START_SOC" AND RECORD TIME IN HH:MM:SS]

[SHOW ALL]

[S]

SOC_ERRANDS

Because of a physical, mental, or emotional condition, do you have difficulty doing errands alone, such as visiting a doctor's office or shopping? [CATI] Would you say no difficulty, some difficulty, a lot of difficulty, or you cannot do this at all?

[CAWI RESPONSE OPTIONS:]

- 1 No difficulty
- 2 Some difficulty
- 3 A lot of difficulty
- 4 Cannot do this at all

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 NO DIFFICULTY
 - 2 SOME DIFFICULTY
 - 3 A LOT OF DIFFICULTY
 - 4 CANNOT DO THIS AT ALL
-

[SHOW ALL]

[S]

SOC_PARACTIV

Because of a physical, mental, or emotional condition, do you have difficulty participating in social activities, such as visiting friends, attending clubs and meetings, or going to parties? [CATI] Would you say no difficulty, some difficulty, a lot of difficulty, or you cannot do this at all?

[CAWI RESPONSE OPTIONS:]

- 1 No difficulty
- 2 Some difficulty
- 3 A lot of difficulty
- 4 Cannot do this at all

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 NO DIFFICULTY
 - 2 SOME DIFFICULTY
 - 3 A LOT OF DIFFICULTY
 - 4 CANNOT DO THIS AT ALL
-

[SHOW ALL]

[S]

SOC_SCWRKLIM

Are you limited in the kind or amount of work you can do because of a physical, mental, or emotional problem?

Work includes paid work, volunteer work, school work, and homework.

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
- 0 NO

[CREATE "END_SOC" AND RECORD TIME IN HH:MM:SS]

PAY - SOCIAL DETERMINANTS: PAYING MEDICAL BILLS

[CREATE "START_PAY" AND RECORD TIME IN HH:MM:SS]

[SHOW ALL]

[S]

PAY_BILL12M

In the past 12 months, did you or anyone in your family have problems paying or were unable to pay medical bills?

Include bills from doctors, dentists, hospitals, therapists, medication, equipment, nursing home or home care.

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
 - 0 NO
-

[SHOW ALL]

[S]

PAY_PAYWORRY

If you get sick or have an accident, how worried are you that you will be able to pay your medical bills?

[CATI] Are you very worried, somewhat worried, or not at all worried?

- 1 Very worried
- 2 Somewhat worried
- 3 Not at all worried

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 VERY WORRIED
- 2 SOMEWHAT WORRIED
- 3 NOT AT ALL WORRIED

[CREATE "END_PAY" AND RECORD TIME IN HH:MM:SS]

THC – SOCIAL DETERMINANTS: TRANSPORTATION BARRIERS, AND HOUSING COSTS

[CREATE "START_THC" AND RECORD TIME IN HH:MM:SS]

[SHOW ALL]

[S]

THC_TRANSPOR

In the past 12 months, has a lack of reliable transportation kept you from medical appointments, meetings, work, or from getting things you needed for daily living?

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
 - 0 NO
-

[SHOW ALL]

[S]

THC_HOUCOST

During the past 12 months, was there a time when you were not able to pay your mortgage, rent, or utility bills?

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
- 0 NO

[CREATE "END_THC" AND RECORD TIME IN HH:MM:SS]

INT - INTERNET/HIT

[CREATE "START_INT" AND RECORD TIME IN HH:MM:SS]

[SHOW ALL]

[S]

INT_DISP

These next questions are about your use of the Internet.

[SHOW IF MODE = CATI; HIDE IF MODE = CAWI AND AUTO PUNCH 1 (YES)]

[S]

INT_ACCESS

Do you have access to the Internet?

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
 - 0 NO
-

[SHOW IF INT_ACCESS=1]

[S]

INT_HOMEACC

Do you have access to the Internet from your home?

Include Internet and data use through a computer, tablet, smartphone, or other electronic device.

[CAWI RESPONSE OPTIONS:]

1 Yes

0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

1 YES

0 NO

[SHOW IF INT_ACCESS=1]

INT_DSPL

During the past 12 months, have you used the Internet for any of the following reasons?

Include Internet and data use through a computer, tablet, smartphone, or other electronic device.

[SHOW IF INT_ACCESS=1]

[S]

INT_USEMED

To look for health or medical information.

[CAWI RESPONSE OPTIONS:]

1 Yes

0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

1 YES

0 NO

[SHOW IF INT_ACCESS=1]

[S]

INT_USEDOC

To communicate with a doctor or doctor's office.

[CAWI RESPONSE OPTIONS:]

1 Yes

0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

1 YES

0 NO

[SHOW IF INT_ACCESS=1]

[S]

INT_USETEST

To look up medical test results.

[CAWI RESPONSE OPTIONS:]

1 Yes

0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

1 YES

0 NO

[PROGRAMMER: DISPLAY INT_USEMED - INT_USETEST ON SAME PAGE]

[CREATE "END_INT" AND RECORD TIME IN HH:MM:SS]

ONL – ONLINE CONNECTEDNESS

[CREATE "START_ONL" AND RECORD TIME IN HH:MM:SS]

[SHOW ALL]

[S]

ONL_SOCMED

How often do you use social media? [CATI] Would you say daily, weekly, monthly, or never?

[CAWI RESPONSE OPTIONS:]

1 Daily

2 Weekly

3 Monthly

0 Never

[CATI RESPONSE OPTIONS – DO NOT READ:]

1 DAILY

2 WEEKLY

3 MONTHLY

0 NEVER

[SHOW ALL]

[S]

ONL_GAMES

How often do you play online games? [CATI] Would you say daily, weekly, monthly, or never?

[CAWI RESPONSE OPTIONS:]

1 Daily

2 Weekly

3 Monthly

0 Never

[CATI RESPONSE OPTIONS – DO NOT READ:]

- 1 DAILY
 - 2 WEEKLY
 - 3 MONTHLY
 - 0 NEVER
-

[SHOW ALL]

[S]

ONL_MSGBOARD

How often do you visit forums and message boards? [CATI] Would you say daily, weekly, monthly, or never?

[CAWI RESPONSE OPTIONS:]

- 1 Daily
- 2 Weekly
- 3 Monthly
- 0 Never

[CATI RESPONSE OPTIONS – DO NOT READ:]

- 1 DAILY
 - 2 WEEKLY
 - 3 MONTHLY
 - 0 NEVER
-

[SHOW IF ONL_SOCMED=1, 2, OR 3]

[S]

ONL_SOCISO

How much do you agree or disagree with the following statement?

When [CATI, FILL: you; CAWI FILL: I] use social media, [CATI, FILL: you; CAWI FILL: I] feel socially isolated from others. [CATI] Would you say you strongly agree, somewhat agree, somewhat disagree, or strongly disagree?

[CAWI RESPONSE OPTIONS:]

- 1 Strongly agree
- 2 Somewhat agree
- 3 Somewhat disagree
- 4 Strongly disagree

[CATI RESPONSE OPTIONS – DO NOT READ:]

- 1 STRONGLY AGREE
 - 2 SOMEWHAT AGREE
 - 3 SOMEWHAT DISAGREE
 - 4 STRONGLY DISAGREE
-

[SHOW IF ONL_SOCMED=1, 2, OR 3]

[S]

ONL_SOCCOM

How much do you agree or disagree with the following statement?

When [CATI, FILL: you; CAWI FILL: I] use social media, [CATI, FILL: you; CAWI FILL: I] feel like [CATI, FILL: you're; CAWI FILL: I'm] a member of a community. [CATI] Would you say you strongly agree, somewhat agree, somewhat disagree, or strongly disagree?

[CAWI RESPONSE OPTIONS:]

- 1 Strongly agree
- 2 Somewhat agree
- 3 Somewhat disagree
- 4 Strongly disagree

[CATI RESPONSE OPTIONS – DO NOT READ:]

- 1 STRONGLY AGREE
 - 2 SOMEWHAT AGREE
 - 3 SOMEWHAT DISAGREE
 - 4 STRONGLY DISAGREE
-

[SHOW IF ONL_GAMES=1, 2, OR 3]

[S]

ONL_GAMESISO

How much do you agree or disagree with the following statement?

When [CATI, FILL: you; CAWI FILL: I] play online games, [CATI, FILL: you; CAWI FILL: I] feel socially isolated from others. [CATI] Would you say you strongly agree, somewhat agree, somewhat disagree, or strongly disagree?

[CAWI RESPONSE OPTIONS:]

- 1 Strongly agree
- 2 Somewhat agree
- 3 Somewhat disagree
- 4 Strongly disagree

[CATI RESPONSE OPTIONS – DO NOT READ:]

- 1 STRONGLY AGREE
 - 2 SOMEWHAT AGREE
 - 3 SOMEWHAT DISAGREE
 - 4 STRONGLY DISAGREE
-

[SHOW IF ONL_GAMES=1, 2, OR 3]

[S]

ONL_GAMESCOM

How much do you agree or disagree with the following statement?

When [CATI, FILL: you; CAWI FILL: I] play online games, [CATI, FILL: you; CAWI FILL: I] feel like [CATI, FILL: you're; CAWI FILL: I'm] a member of a community. [CATI] Would you say you strongly agree, somewhat agree, somewhat disagree, or strongly disagree?

[CAWI RESPONSE OPTIONS:]

- 1 Strongly agree
- 2 Somewhat agree
- 3 Somewhat disagree
- 4 Strongly disagree

[CATI RESPONSE OPTIONS – DO NOT READ:]

- 1 STRONGLY AGREE
 - 2 SOMEWHAT AGREE
 - 3 SOMEWHAT DISAGREE
 - 4 STRONGLY DISAGREE
-

[SHOW IF ONL_MSGBOARD=1, 2, OR 3]

[S]

ONL_MSGISO

How much do you agree or disagree with the following statement?

When [CATI, FILL: you; CAWI FILL: I] visit forums and message boards, [CATI, FILL: you; CAWI FILL: I] feel socially isolated from others. [CATI] Would you say you strongly agree, somewhat agree, somewhat disagree, or strongly disagree?

[CAWI RESPONSE OPTIONS:]

- 1 Strongly agree
- 2 Somewhat agree
- 3 Somewhat disagree
- 4 Strongly disagree

[CATI RESPONSE OPTIONS – DO NOT READ:]

- 1 STRONGLY AGREE
 - 2 SOMEWHAT AGREE
 - 3 SOMEWHAT DISAGREE
 - 4 STRONGLY DISAGREE
-

[SHOW IF ONL_MSGBOARD=1,2, OR 3]

[S]

ONL_MSGCOM

How much do you agree or disagree with the following statement?

When [CATI, FILL: you; CAWI FILL: I] visit forums and message boards, [CATI, FILL: you; CAWI FILL: I] feel like [CATI, FILL: you're; CAWI FILL: I'm] a member of a community. [CATI] Would you say you strongly agree, somewhat agree, somewhat disagree, or strongly disagree?

[CAWI RESPONSE OPTIONS:]

- 1 Strongly agree
- 2 Somewhat agree
- 3 Somewhat disagree
- 4 Strongly disagree

[CATI RESPONSE OPTIONS – DO NOT READ:]

- 1 STRONGLY AGREE
- 2 SOMEWHAT AGREE
- 3 SOMEWHAT DISAGREE
- 4 STRONGLY DISAGREE

[CREATE "END_ONL" AND RECORD TIME IN HH:MM:SS]

ACC – HEALTHCARE ACCESS/UTILIZATION

[CREATE "START_ACC" AND RECORD TIME IN HH:MM:SS]

[SHOW ALL]

[S]

ACC_HTHINTRO

These next questions are about your health care.

[SHOW ALL]

[S]

ACC_HTHLAST

About how long has it been since you last saw a doctor or other health professional about your health?

Include doctors seen while a patient in a hospital. Do not include dental care.

[CAWI RESPONSE OPTIONS:]

- 1 Less than 12 months ago
- 2 More than 1 year but less than 2 years ago
- 3 More than 2 years but less than 3 years ago
- 4 More than 3 years but less than 5 years ago
- 5 More than 5 years but less than 10 years ago
- 6 10 years ago or more
- 0 Never

[CATI RESPONSE OPTIONS – READ IF NECESSARY:]

- 1 Within the past year (ANY TIME LESS THAN 12 MONTHS AGO)
 - 2 Within the last 2 years (MORE THAN 1 YEAR BUT LESS THAN 2 YEARS AGO)
 - 3 Within the last 3 years (MORE THAN 2 YEARS BUT LESS THAN 3 YEARS AGO)
 - 4 Within the last 5 years (MORE THAN 3 YEARS BUT LESS THAN 5 YEARS AGO)
 - 5 Within the last 10 (MORE THAN 5 YEARS BUT LESS THAN 10 YEARS AGO)
 - 6 10 years ago or more
 - 0 Never
-

[SHOW ALL]

[S]

ACC_HTHUSUAL

Is there a place that you usually go to if you are sick and need health care?

[CAWI RESPONSE OPTIONS:]

- 1 Yes, there is a single place
- 3 Yes, there is more than one place
- 2 No, there is no place

[CATI RESPONSE OPTIONS – DO NOT READ:]

- 1 YES
 - 2 THERE IS NO PLACE
 - 3 THERE IS MORE THAN ONE PLACE
-

[SHOW IF ACC_HTHUSUAL = 1, 3]

[S]

ACC_HTHTYPE

What kind of place [IF ACC_HTHUSUAL=1, FILL: is it; ELSE, FILL: do you go to most often]? [CATI] Is it a doctor's office or health center; an urgent care center, a clinic in a drug store or grocery store; a hospital emergency room; a VA medical center or VA outpatient clinic; or some other place?

A doctor's office or health center is a place where you see the same doctor or the same group of doctors every visit, where you usually need to make an appointment ahead of time, and where your medical records are on file.

Urgent care centers and clinics in a drug store or grocery store are places where you do not need to make an appointment ahead of time, and usually do not see the same health care provider at each visit.

[CAWI RESPONSE OPTIONS:]

- 1 A doctor's office or health center
- 2 Urgent care center or clinic in a drug store or grocery store
- 3 Hospital emergency room
- 4 A VA medical center or VA outpatient clinic
- 5 Some other place
- 0 I do not go to one place most often

[CATI RESPONSE OPTIONS – DO NOT READ:]

- 1 A DOCTOR'S OFFICE OR HEALTH CENTER
 - 2 URGENT CARE CENTER OR CLINIC IN A DRUG STORE OR GROCERY STORE
 - 3 HOSPITAL EMERGENCY ROOM
 - 4 A VA MEDICAL CENTER OR VA OUTPATIENT CLINIC
 - 5 SOME OTHER PLACE
 - 0 YOU DO NOT GO TO ONE PLACE MOST OFTEN
-

[SHOW ALL]

[S]

ACC_HOSP12M

During the past 12 months, have you been hospitalized overnight?

Do not include an overnight stay in the emergency room.

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
- 0 NO

[CREATE "END_ACC" AND RECORD TIME IN HH:MM:SS]

MED – HEALTH CARE UTILIZATION – PRESCRIPTION MEDICATION

[CREATE "START_MED" AND RECORD TIME IN HH:MM:SS]

[SHOW ALL]

[S]

MED_RX12MA

At any time in the past 12 months, did you take prescription medication?

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
- 0 NO

[SHOW IF MED_RX12MA = 1]

MED_DSPL

During the past 12 months, were any of the following true for you?

[SHOW IF MED_RX12MA = 1]

[S]

MED_RXSK12MA

You skipped medication doses to save money.

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
- 0 NO

[SHOW IF MED_RX12MA = 1]

[S]

MED_RXLS12MA

You took less medication to save money.

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
- 0 NO

[SHOW IF MED_RX12MA = 1]

[S]

MED_RXDL12MA

You delayed filling a prescription to save money.

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
- 0 NO

[PROGRAMMER: DISPLAY MED_DSPL – MED_RXDL12MA ON SAME PAGE]

[SHOW ALL]

[S]

MED_RXDG12MA

During the past 12 months, was there any time when you needed prescription medication, but did not get it because of cost?

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
- 0 NO

[CREATE "END_MED" AND RECORD TIME IN HH:MM:SS]

CON – CONTRACEPTION ACCESS AMONG WOMEN OF REPRODUCTIVE AGE

[CREATE "START_CON" AND RECORD TIME IN HH:MM:SS]

[SHOW IF SEX=2 AND AGE = 18-49]

CON_DISP

The next questions are about birth control.

[SHOW IF SEX=2 AND AGE = 18-49]

[S]

CON_SEX12M

At any time in the past 12 months, have you had sexual intercourse with a male partner?

[CAWI RESPONSE OPTIONS:]

1 Yes

0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

1 YES

0 NO

[SHOW IF CON_SEX12M=1]

[M]

CON_BC12M

In the past 12 months, did you or your male partner use any of the following methods to prevent pregnancy?

[PROGRAMMER: USE MULTI-SELECT FORMAT WHERE SELECTED = 1, UNSELECTED = 0. ALL OPTIONS SHOULD DISPLAY AS SEPARATE VARIABLES IN DATASET.]

CON_BCIUD An IUD or implant, such as Mirena, Liletta, ParaGard, or Nexplanon

CON_BCSHOT Birth control shots, such as Depo-Provera

CON_BCPILL Birth control pills, vaginal ring such as NuvaRing, or patch such as Xulane [CATI: pronounced: Zoo-lane]

CON_BCEC Emergency contraception or the morning after pill, such as Plan B or Ella

CON_BCSTERIL A sterilization method such as tubal ligation or Essure, or a vasectomy for a male partner

CON_BCOTHER [CATI FILL: Your; CAWI FILL: My] partner and [CATI FILL: you; CAWI FILL: I] used other methods to prevent pregnancy

CON_BCNONE [CATI FILL: Your; CAWI FILL: My] partner and [CATI FILL: you; CAWI FILL: I] did not do anything to prevent pregnancy [EXCLUSIVE]

[PROGRAMMER: CON_BCNONE SHOULD BE EXCLUSIVE. IF RESPONDENT SELECTS THEY CANNOT SELECT ANY OTHER ITEMS IN THIS QUESTION. IF RESPONDENT UNSELECTS OTHER ITEMS SHOULD BECOME ACTIVE AGAIN]

[SHOW IF CON_BCIUD OR CON_BCSHOT OR CON_BCPILL OR CON_BCEC OR CON_BCOTHER = 1]

[S]

CON_BCCHANGE

Over the past 12 months, have you changed or stopped a method you used to prevent pregnancy?

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
 - 0 NO
-

[SHOW IF CON_BCCHANGE=1]

[S]

CON_CHNGEWHY

Why did you change or stop a method you used to prevent pregnancy?

CON_CHNGEWHYA

[CATI FILL: You; CAWI FILL: I] wanted to use a more effective birth control method

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
- 0 NO

CON_CHNGEWHYB

[CATI FILL: You; CAWI FILL: I] wanted to use a less expensive birth control method

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
- 0 NO

CON_CHNGEWHYC

[CATI FILL: You; CAWI FILL: I] did not like a birth control method [CATI FILL: you were; CAWI FILL: I was] using

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
- 0 NO

CON_CHNGEWHYD

There were changes in [CATI FILL: your; CAWI FILL: my] ability to access the method [CATI FILL: you were; CAWI FILL: I was] using

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
- 0 NO

CON_CHNGEWHYE

[CATI FILL: You; CAWI FILL: I] had concerns about possible changes in [CATI FILL: your; CAWI FILL: my] ability to access the method [CATI FILL: you were; CAWI FILL: I was] using

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
- 0 NO

CON_CHNGEWHYF

[CATI FILL: You; CAWI FILL: I] had concerns about privacy or confidentiality

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
- 0 NO

CON_CHNGEWHYG

[CATI, FILL: You; CAWI FILL: I] wanted to become pregnant

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
- 0 NO

CON_CHNGEWHYH

For another reason

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
- 0 NO

[PROGRAMMER: SPLIT CON_CHNGEWHYA – CON_CHNGEWHYH ACROSS TWO SCREENS AND RANDOMIZE ORDER ACROSS BOTH SCREENS. ANCHOR CON_CHNGEWHYH AS LAST QUESTION. REPEAT QUESTION STEM (CON_CHNGEWHY) ON BOTH SCREENS]

[SHOW IF CON_BCIUD =1]

[S]

CON_IUD12M

[CAWI] In the past 12 months, has obtaining an IUD or implant become more difficult, less difficult, or stayed the same?

[CATI] In the past 12 months, has obtaining an IUD or implant become more difficult, less difficult, stayed the same, or did you not try to obtain this method in the past 12 months?

[CAWI RESPONSE OPTIONS:]

- 1 More difficult
- 2 Less difficult
- 3 Stayed the same
- 0 Did not try to obtain an IUD or implant in the last 12 months

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 MORE DIFFICULT
- 2 LESS DIFFICULT
- 3 STAYED THE SAME
- 0 DID NOT TRY TO OBTAIN AN IUD OR IMPLANT IN THE LAST 12 MONTHS

[SHOW IF CON_BCSHOT =1]

[S]

CON_SHOTS12M

[CAWI] In the past 12 months, has obtaining birth control shots become more difficult, less difficult, or stayed the same?

[CATI] In the past 12 months, has obtaining birth control shots become more difficult, less difficult, stayed the same, or did you not try to obtain this method in the past 12 months?

[CAWI RESPONSE OPTIONS:]

- 1 More difficult
- 2 Less difficult
- 3 Stayed the same
- 0 Did not try to obtain birth control shots in the last 12 months

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 MORE DIFFICULT
 - 2 LESS DIFFICULT
 - 3 STAYED THE SAME
 - 0 DID NOT TRY TO OBTAIN BIRTH CONTROL SHOTS IN THE LAST 12 MONTHS
-

[SHOW IF CON_BCPILL =1]

[S]

CON_BCPILLS12M

[CAWI] In the past 12 months, has obtaining birth control pills, vaginal rings, or patches become more difficult, less difficult, or stayed the same?

[CATI] In the past 12 months, has obtaining birth control pills, vaginal rings, or patches become more difficult, less difficult, stayed the same, or did you not try to obtain this method in the past 12 months?

[CAWI RESPONSE OPTIONS:]

- 1 More difficult
- 2 Less difficult
- 3 Stayed the same
- 0 Did not try to obtain birth control pills, vaginal rings, or patches in the last 12 months

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 MORE DIFFICULT
 - 2 LESS DIFFICULT
 - 3 STAYED THE SAME
 - 0 DID NOT TRY TO OBTAIN BIRTH CONTROL PILLS, VAGINAL RINGS, OR PATCHES IN THE LAST 12 MONTHS
-

[SHOW IF CON_BCEC =1]

[S]

CON_EMERG12M

[CAWI] In the past 12 months, has obtaining emergency contraception become more difficult, less difficult, or stayed the same?

[CATI] In the past 12 months, has obtaining emergency contraception become more difficult, less difficult, stayed that same, or did you not try to obtain this method in the past 12 months?

[CAWI RESPONSE OPTIONS:]

- 1 More difficult
- 2 Less difficult
- 3 Stayed the same
- 0 Did not try to obtain emergency contraception in the last 12 months

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 MORE DIFFICULT
- 2 LESS DIFFICULT
- 3 STAYED THE SAME
- 0 DID NOT TRY TO OBTAIN EMERGENCY CONTRACEPTION IN THE LAST 12 MONTHS

[CREATE "END_CON" AND RECORD TIME IN HH:MM:SS]

PAI – HEALTH STATUS – PAIN

[CREATE "START_PAI" AND RECORD TIME IN HH:MM:SS]

[SHOW ALL]

[PAI_DSPL]

The next questions are about pain you may have had in the past three months.

[SHOW ALL]

[S]

PAI_FREQ3M

In the past three months, how often did you have pain? [CATI] Would you say never, some days, most days, or every day?

Please answer based on your usual use of medication.

[CAWI RESPONSE OPTIONS:]

- 0 Never
- 1 Some days
- 2 Most days
- 3 Every day

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 0 NEVER
- 1 SOME DAYS

2 MOST DAYS
3 EVERY DAY

[SHOW IF PAI_FREQ3M= 1, 2, OR 3]

[S]

PAI_AMNT

Thinking about the last time you had pain, how much pain did you have? [CATI] Would you say a little, a lot, or somewhere in between?

[CAWI RESPONSE OPTIONS:]

- 1 A little
- 2 A lot
- 3 Somewhere in between a little and a lot

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 A LITTLE
 - 2 A LOT
 - 3 SOMEWHERE IN BETWEEN A LITTLE AND A LOT
-

[SHOW IF PAI_FREQ3M = 1, 2, OR 3]

[S]

PAI_WKLM3M

Over the past three months, how often did your pain limit your life or work activities? [CATI] Would you say never, some days, most days, or every day?

[CAWI RESPONSE OPTIONS:]

- 0 Never
- 1 Some days
- 2 Most days
- 3 Every day

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 0 Never
- 1 SOME DAYS
- 2 MOST DAYS
- 3 EVERY DAY

[CREATE "END_PAI" AND RECORD TIME IN HH:MM:SS]

CPN – CHRONIC PAIN

[CREATE "START_CPEN" AND RECORD TIME IN HH:MM:SS]

[SHOW IF PAI_FREQ3M=2 OR 3]

[S]

CPN_MEDCARE

Are you currently receiving medical care from a health care provider for your chronic pain?

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
 - 0 NO
-

[SHOW IF CPN_MEDCARE = 1]

[S]

CPN_TRTDEC

During the past 12 months, did you or your health care provider have to make any decisions regarding treatment for your pain, such as getting prescriptions, referrals for care, and procedures?

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
 - 0 NO
-

[SHOW IF CPN_TRETDEC = 1]

[S]

CPN_RESPECT

During the past 12 months, how often did your health care provider treat you with respect when seeking medical care for your pain? [CATI] Would you say always, usually, sometimes, or never?

[CAWI RESPONSE OPTIONS:]

- 3 Always
- 2 Usually
- 1 Sometimes
- 0 Never

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 3 ALWAYS
 - 2 USUALLY
 - 1 SOMETIMES
 - 0 NEVER
-

[SHOW IF CPN_TRETDEC = 1]

[S]

CPN_LISTEN

During the past 12 months, how often did your health care provider listen carefully to you when you were seeking care for pain? [CATI] Would you say always, usually, sometimes, or never?

[CAWI RESPONSE OPTIONS:]

- 3 Always
- 2 Usually
- 1 Sometimes
- 0 Never

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 3 ALWAYS
 - 2 USUALLY
 - 1 SOMETIMES
 - 0 NEVER
-

[SHOW IF CPN_TRETDEC= 1]

[S]

CPN_OPINION

During the past 12 months, how often did your health care provider ask for your opinions or beliefs about your medical care or treatment for your pain? [CATI] Would you say always, usually, sometimes, or never?

[CAWI RESPONSE OPTIONS:]

- 3 Always
- 2 Usually
- 1 Sometimes
- 0 Never

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 3 ALWAYS
- 2 USUALLY
- 1 SOMETIMES
- 0 NEVER

[CREATE "END_CPN" AND RECORD TIME IN HH:MM:SS]

HRD – ILLEGAL DRUG USE AND NALOXONE AWARENESS

[CREATE "START_HRD" AND RECORD TIME IN HH:MM:SS]

[SHOW ALL]

HRD_DSPL

The next questions are about the safety of getting prescription pills or prescription medications that are ordered online without a prescription.

Include all types of online sites such as forums and message boards, online marketplaces, social media, and the dark web. This does not include retail pharmacy chains or Amazon.

[SHOW ALL]

[S]

HRD_ONLPILLS

Have you ever ordered prescription pills or prescription medications online without a prescription?

[CAWI RESPONSE OPTIONS:]

1 Yes

0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

1 YES

0 NO

[SHOW IF HRD_ONLPILLS=1]

[S]

HRD_CONCERNA

How concerned were you about the ingredients in prescription pills or prescription medications that you ordered online that you did not have a prescription for? [CATI] Would you say you were not at all concerned, a little concerned, somewhat concerned, or very concerned?

[CAWI RESPONSE OPTIONS:]

1 Not at all concerned

2 A little concerned

3 Somewhat concerned

4 Very concerned

[CATI RESPONSE OPTIONS - DO NOT READ:]

1 NOT AT ALL CONCERNED

2 A LITTLE CONCERNED

3 SOMEWHAT CONCERNED

4 VERY CONCERNED

[SHOW IF HRD_ONLPILLS=0]

[S]

HRD_CONCERNB

If you were to order prescription pills or prescription medications online that you did not have a prescription for, how concerned would you be about the ingredients? [CATI] Would you be not at all concerned, a little concerned, somewhat concerned, or very concerned?

[CAWI RESPONSE OPTIONS:]

1 Not at all concerned

2 A little concerned

3 Somewhat concerned

4 Very concerned

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 NOT AT ALL CONCERNED
 - 2 A LITTLE CONCERNED
 - 3 SOMEWHAT CONCERNED
 - 4 VERY CONCERNED
-

[SHOW ALL]

[S]

HRD_NALOXONE

Have you ever heard of the medication naloxone, also known as Narcan, which can be used to reverse an opioid overdose?

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
 - 0 NO
-

[SHOW IF HRD_NALOXONE=1]

[S]

HRD_NALOTC

Do you know that naloxone, or Narcan, is now available over the counter without a prescription?

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
 - 0 NO
-

[SHOW IF HRD_NALOXONE=1]

[S]

HRD_GETNAL

Do you know that you can get naloxone or Narcan at a:

HRD_GETNACOM

Community harm reduction organization?

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
- 0 NO

HRD_GETNADR

Doctor's office?

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
- 0 NO

HRD_GETNAHD

Health department?

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
- 0 NO

HRD_GETNARX

Pharmacy?

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
- 0 NO

[PROGRAMMER: DISPLAY HRD_GETNAL- HRD_GETNARX ON THE SAME PAGE]

[SHOW IF HRD_NALOXONE=1]

[S]

HRD_CARRYNAL

Do you currently carry naloxone or Narcan?

[CAWI RESPONSE OPTIONS:]

1 Yes

0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

1 YES

0 NO

[SHOW IF HRD_CARRYNAL=0]

[S]

HRD_NOCARRY

Why do you think people don't carry naloxone or Narcan?

HRD_DKWRK

They do not think it works.

[CAWI RESPONSE OPTIONS:]

1 Yes

0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

1 YES

0 NO

HRD_DKUSE

They do not know how to use it.

[CAWI RESPONSE OPTIONS:]

1 Yes

0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

1 YES

0 NO

HRD_DKWHERE

They do not know where to get it.

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
- 0 NO

[PROGRAMMER: DISPLAY HRD_NOCARRY- HRD_DKWHERE ON THE SAME PAGE]

[SHOW IF HRD_NALOXONE=1]

[S]

HRD_NALAVAIL

Do you think naloxone or Narcan should be available at the following places:

HRD_NABUS

Businesses?

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
- 0 NO

HRD_NACOL

College or university campuses?

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
- 0 NO

HRD_NAELMMD

Elementary and Middle Schools?

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
- 0 NO

HRD_NAHS
High Schools?

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
- 0 NO

HRD_NAWRSHIP
Places of worship?

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
- 0 NO

HRD_NALIB
Public libraries?

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
- 0 NO

[PROGRAMMER: DISPLAY HRD_NALAVAIL- HRD_NALIB ON THE SAME PAGE]

[SHOW ALL]

[S]

HRD_RELDUG

How much do you agree or disagree with the following statement?

[CATI, FILL: You; CAWI, FILL: I] would be comfortable being in a committed relationship with someone who misuses prescription opioids or uses illegal drugs, such as cocaine or heroin. [CATI] Would you say you strongly agree, somewhat agree, somewhat disagree, or strongly disagree?

[CAWI RESPONSE OPTIONS:]

- 1 Strongly agree
- 2 Somewhat agree
- 3 Somewhat disagree
- 4 Strongly disagree

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 STRONGLY AGREE
 - 2 SOMEWHAT AGREE
 - 3 SOMEWHAT DISAGREE
 - 4 STRONGLY DISAGREE
-

[SHOW ALL]

[S]

HRD_BLAME

How much do you agree or disagree with the following statement?

[CATI, FILL: You; CAWI, FILL: I] think that a person who misuses prescription opioids or uses illegal drugs, such as cocaine or heroin, is to blame for his or her drug use. [CATI] Would you say you strongly agree, somewhat agree, somewhat disagree, or strongly disagree?

[CAWI RESPONSE OPTIONS:]

- 1 Strongly agree
- 2 Somewhat agree
- 3 Somewhat disagree
- 4 Strongly disagree

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 STRONGLY AGREE
 - 2 SOMEWHAT AGREE
 - 3 SOMEWHAT DISAGREE
 - 4 STRONGLY DISAGREE
-

[SHOW ALL]

[S]

HRD_JOBDRUG

How much do you agree or disagree with the following statement?

[CATI, FILL: You; CAWI, FILL: I] would work closely on a job with someone who misuses prescription opioids or uses illegal drugs, such as cocaine or heroin. [CATI] Would you say you strongly agree, somewhat agree, somewhat disagree, or strongly disagree?

[CAWI RESPONSE OPTIONS:]

- 1 Strongly agree
- 2 Somewhat agree
- 3 Somewhat disagree
- 4 Strongly disagree

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 STRONGLY AGREE
- 2 SOMEWHAT AGREE
- 3 SOMEWHAT DISAGREE
- 4 STRONGLY DISAGREE

[CREATE "END_HRD" AND RECORD TIME IN HH:MM:SS]

IMM – HEALTH CARE UTILIZATION – IMMUNIZATION

[CREATE "START_IMM" AND RECORD TIME IN HH:MM:SS]

[SHOW ALL]

[S]

IMM_SHTPNUEV

A pneumonia shot is also known as a pneumococcal [CATI: pronounced: noo-mow-kaa-kl] vaccine. Have you ever had a pneumonia shot?

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
- 0 NO

[SHOW ALL]

[S]

IMM_SHTFLU12

There are two types of flu vaccinations. One is a shot, and the other is a spray, mist, or drop in the nose. During the past 12 months, have you had a flu vaccination?

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
- 0 NO

[CREATE "END_IMM" AND RECORD TIME IN HH:MM:SS]

MTL – HEALTH CARE UTILIZATION – MENTAL HEALTH VISITS

[CREATE "START_MTL" AND RECORD TIME IN HH:MM:SS]

[SHOW ALL]

[S]

MTL_MHRXA

During the past 12 months, did you take any prescription medication to help with your emotions, concentration, behavior, or mental health?

[CAWI RESPONSE OPTIONS:]

1 Yes

0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

1 YES

0 NO

[SHOW ALL]

[S]

MTL_MHTRPY

During the past 12 months, did you receive counseling or therapy from a mental health professional, such as a psychiatrist, psychologist, psychiatric nurse, or clinical social worker?

[CAWI RESPONSE OPTIONS:]

1 Yes

0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

1 YES

0 NO

[SHOW IF MTL_MHTRPY =1]

[S]

MTL_MHTPYNOW

Are you currently receiving counseling or therapy from a mental health professional?

[CAWI RESPONSE OPTIONS:]

1 Yes

0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

1 YES

0 NO

[CREATE "END_MTL" AND RECORD TIME IN HH:MM:SS]

HCA – HEALTH CARE ACCESS

[CREATE "START_HCA" AND RECORD TIME IN HH:MM:SS]

[SHOW ALL]

[S]

HCA_MHTHDLY

During the past 12 months, have you delayed getting counseling or therapy from a mental health professional because of the cost?

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
- 0 NO

[SHOW ALL]

[S]

HCA_MHTND

During the past 12 months, was there any time when you needed counseling or therapy from a mental health professional but did not get it because of the cost?

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
- 0 NO

[CREATE "END_HCA" AND RECORD TIME IN HH:MM:SS]

MTH – MENTAL HEALTH

[CREATE "START_MTH" AND RECORD TIME IN HH:MM:SS]

[SHOW ALL]

MTH_PHQINTRO

Now [CATI, FILL: I'm; CAWI, FILL: we're] going to ask you about several problems. Please tell [CATI, FILL: me; CAWI, FILL: us] how often you have been bothered, over the last 2 weeks, by any of the following problems. [CATI] For each problem there are 4 possible answers: not at all, several days, more than half of the days, or nearly every day.

[SHOW ALL]

[S]

MTH_PHQ41

Over the last two weeks, how often have you been bothered by...

little interest or pleasure in doing things? [CATI] Would you say not at all, several days, more than half of the days, or nearly every day?

[CAWI RESPONSE OPTIONS:]

0 Not at all

1 Several days

2 More than half the days

3 Nearly every day

[CATI RESPONSE OPTIONS - DO NOT READ:]

0 NOT AT ALL

1 SEVERAL DAYS

2 MORE THAN HALF THE DAYS

3 NEARLY EVERY DAY

[SHOW ALL]

[S]

MTH_PHQ42

feeling down, depressed, or hopeless? [CATI] Would you say not at all, several days, more than half of the days, or nearly every day?

[CAWI RESPONSE OPTIONS:]

0 Not at all

1 Several days

2 More than half the days

3 Nearly every day

[CATI RESPONSE OPTIONS - DO NOT READ:]

0 NOT AT ALL

1 SEVERAL DAYS

2 MORE THAN HALF THE DAYS

3 NEARLY EVERY DAY

[SHOW ALL]

[S]

MTH_PHQ43

feeling nervous, anxious, or on edge? [CATI] Would you say not at all, several days, more than half of the days, or nearly every day?

[CAWI RESPONSE OPTIONS:]

0 Not at all

1 Several days

- 2 More than half the days
- 3 Nearly every day

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 0 NOT AT ALL
- 1 SEVERAL DAYS
- 2 MORE THAN HALF THE DAYS
- 3 NEARLY EVERY DAY

[SHOW ALL]

[S]

MTH_PHQ44

not being able to stop or control worrying? [CATI] Would you say not at all, several days, more than half of the days, or nearly every day?

[CAWI RESPONSE OPTIONS:]

- 0 Not at all
- 1 Several days
- 2 More than half the days
- 3 Nearly every day

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 0 NOT AT ALL
- 1 SEVERAL DAYS
- 2 MORE THAN HALF THE DAYS
- 3 NEARLY EVERY DAY

[PROGRAMMER: DISPLAY MTH_PHQ41-MTH_PHQ44 ON THE SAME PAGE]

[CREATE "END_MTH" AND RECORD TIME IN HH:MM:SS]

CIG - HEALTH BEHAVIORS (CIGARETTE SMOKING)

[CREATE "START_CIG" AND RECORD TIME IN HH:MM:SS]

[SHOW ALL]

[S]

CIG_SMKEV

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

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
- 0 NO

[SHOW IF CIG_SMKEV=1]

[S]

CIG_SMKNOW

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

[CAWI RESPONSE OPTIONS:]

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

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 EVERY DAY
- 2 SOME DAYS
- 3 NOT AT ALL

[CREATE "END_CIG" AND RECORD TIME IN HH:MM:SS]

SWM – SWIMMING

[CREATE "START_SWM" AND RECORD TIME IN HH:MM:SS]

[SHOW ALL]

[S]

SWM_SKILLVL

How would you rate your swimming skill level?

- 1 [CAWI, FILL: I; CATI, FILL: You] do not know how to swim
- 2 [CAWI, FILL: I am; CATI, FILL: You are] comfortable in water where [CAWI, FILL: I; CATI, FILL: you] can stand up
- 3 [CAWI, FILL: I; CATI, FILL: You] can swim in water over [CAWI, FILL: my; CATI, FILL: your] head
- 4 [CAWI, FILL: I; CATI, FILL: You] can swim multiple strokes efficiently

[SHOW ALL]

[S]

SWM_PRVLESS

Have you taken private swim lessons from a professional or certified instructor?

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
- 0 NO

[SHOW ALL]

[S]

SWM_GRPLESS

Have you taken group swim lessons from a professional or certified instructor?

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
- 0 NO

[PROGRAMMER: DISPLAY SWM_PRVLESS – SWM_GRPLESS ON SAME PAGE]

[SHOW IF SWM_SKILLVL = 2, 3, 4, -6, -7, -9]

[S]

SWM_FRREL

Did you learn to swim from a friend or relative?

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
- 0 NO

[SHOW IF SWM_SKILLVL = 2, 3, 4, -6, -7, -9]

[S]

SWM_TCHSELF

Did you teach yourself to swim?

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
- 0 NO

[SHOW IF SWM_GRPLESS = 0, -6, -7, -9 AND SWM_PRVLESS = 0, -6, -7, -9]

[S]

SWM_EVERLESS

Have you ever taken a swim lesson?

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
- 0 NO

[PROGRAMMER: DISPLAY SWM_FRREL-SWM_EVERLESS ON SAME PAGE]

[SHOW ALL]

[S]

SWM_DAYSPOOL

In the past 6 months, on how many days in total did you spend time in or around a swimming pool?

[CATI] Would you say never, 1-6 days, 7-12 days, or 13 or more days?

[CAWI RESPONSE OPTIONS:]

- 0 Never
- 1 1-6 days
- 2 7-12 days
- 3 13 or more days

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 0 NEVER
 - 1 1-6 DAYS
 - 2 7-12 DAYS
 - 3 13 OR MORE DAYS
-

[SHOW IF SWM_DAYSPOOL = 1, 2, OR 3]

[S]

SWM_ALCPPOOL

Of those times that you spent time in or around a swimming pool, about how often did you drink alcoholic beverages? [CATI] Would you say every time, more than half the time, less than half the time, or never?

[CAWI RESPONSE OPTIONS:]

- 1 Every time
- 2 More than half the time
- 3 Less than half the time
- 0 Never

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 EVERY TIME
- 2 MORE THAN HALF THE TIME

- 3 LESS THAN HALF THE TIME
 - 0 NEVER
-

[SHOW ALL]

[S]

SWM_DAYSBOAT

In the last 6 months, on how many days in total did you go swimming, boating, fishing, or participate in water sports in another body of water such as an ocean, lake, river, or stream? [CATI] Would you say never, 1-6 days, 7-12 days, or 13 or more days?

[CAWI RESPONSE OPTIONS:]

- 0 Never
- 1 1-6 days
- 2 7-12 days
- 3 13 or more days

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 0 NEVER
 - 1 1-6 DAYS
 - 2 7-12 DAYS
 - 3 13 OR MORE DAYS
-

[SHOW IF SWM_DAYSBOAT= 1, 2, OR 3]

[S]

SWM_ALCBOAT

Of those times that you spent swimming, boating, fishing, or participating in water sports, about how often did you drink alcoholic beverages? [CATI] Would you say every time, more than half the time, less than half the time, or never?

[CAWI RESPONSE OPTIONS:]

- 1 Every time
- 2 More than half the time
- 3 Less than half the time
- 0 Never

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 EVERY TIME
 - 2 MORE THAN HALF THE TIME
 - 3 LESS THAN HALF THE TIME
 - 0 NEVER
-

[SHOW ALL]

[S]

SWM_CPR

Are you trained in CPR?

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
 - 0 NO
-

[SHOW IF SWM_CPR = 1]

[S]

SWM_CPR2Y

Have you taken CPR training in the past two years?

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No
- 9 I don't know

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
 - 0 NO
-

[SHOW ALL]

[S]

SWM_HELPDRWN

Have you ever been trained on how to help a drowning person without putting yourself in danger?

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No
- 9 I don't know

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
 - 0 NO
-

[CREATE "END_SWM" AND RECORD TIME IN HH:MM:SS]

SUI – SUICIDE

[CREATE "START_SUI" AND RECORD TIME IN HH:MM:SS]

[SHOW ALL]

SUI_INTRO

[CATI, FILL: I am; CAWI, FILL: We are] now going to ask you some questions about thoughts of suicide, knowledge of people who have killed themselves, sexual pictures that may have been shared without your consent, and other sensitive topics.

[CAWI] We suggest that you be in a private setting for the remainder of the survey. Remember, you don't have to answer any question that you don't want to. If, at any time, you do not feel physically or emotionally safe, you can quit the survey by closing the browser. You can come back to the survey whenever you want. If at any point the questions are making you upset and you would like to speak with a trained professional, please refer to the resources given [here](#).

[CATI] I suggest that you be in a private setting for the remainder of the survey. Remember, you don't have to answer any question that you don't want to. If, at any time, you do not feel physically or emotionally safe, you can let me know you'd like to stop the survey. You can call back to complete the survey whenever you want or set up a time for us to call you back. If at any point the questions are making you upset and you would like to speak with a trained professional, please let me know and I can share some [resources](#) with you.

[PROGRAMMER: DISPLAY IN FOOTER/BOTTOM OF EACH SCREEN IN SUI SUICIDE AND TSV TECHNOLOGY-FACILITATED SEXUAL VIOLENCE SECTIONS:]

Need help? Click [here](#) for resources.

[IF CATI: INTERVIEWER - USE THIS LINK TO ACCESS RESOURCES IF RESPONDENT NEEDS HELP/SUPPORT DURING INTERVIEW]

[PROGRAMMER: HYPERLINKS ABOVE SHOULD OPEN IN NEW WINDOW AND DISPLAY THE FOLLOWING:]

Thank you for participating in this study. We realize that some of the topics covered are quite personal and can be difficult to think and talk about. We appreciate your willingness to be a part of this study and want you to know that we recognize the important contribution you have made. Sometimes when people have participated in a study like this, they realize that they are interested in following up on some of the issues that they have been asked about in the study with someone who is professionally trained to deal with these kinds of issues.

Below are some toll-free numbers of resources that you can use now or in the future if you want to speak further with someone.

- You can reach the National Suicide Prevention Lifeline at 1-800-273-TALK (8255).
- You can reach the National Sexual Assault Hotline at 1-800-656-HOPE (4673).
- You can reach the National Domestic Violence Hotline at 1-800-799-SAFE (7233).
- You can reach the National Child Abuse Hotline at 1-800-4-A-Child (422-4453).

[SHOW ALL]

[S]

SUI_THKSUI12

At any time in the past 12 months, did you seriously think about trying to kill yourself?

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
 - 0 NO
-

[SHOW ALL]

[S]

SUI_KNOWSUI

Do you personally know anyone who has died by suicide?

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
- 0 NO

[CREATE "END_SUI" AND RECORD TIME IN HH:MM:SS]

TSV – TECHNOLOGY-FACILITATED SEXUAL VIOLENCE

[CREATE "START_TSV" AND RECORD TIME IN HH:MM:SS]

[SHOW ALL]

[S]

TSV_PHOTOEV

To your knowledge, has anyone ever emailed, texted, or electronically posted a revealing or sexual photo or video of you without your consent?

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
 - 0 NO
-

[SHOW ALL]

[S]

TSV_THREATEV

Has anyone ever threatened to share a revealing or sexual picture or video of you, through the internet, social media, email, or text message to get you to do something – like take or send other sexual pictures of yourself, have a sexual relationship with them, pay them money, or something else?

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
 - 0 NO
-

[SHOW IF TSV_THREATEV = 1]

[S]

TSV_THRTWHY

What did the person ask you to do when they threatened to share a revealing or sexual picture or video of you?

[SHOW IF TSV_THREATEV =1]

[S]

TSV_THRTPIC

Take or send additional revealing or sexual pictures or videos?

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
- 0 NO

[SHOW IF TSV_THREATEV =1]

[S]

TSV_THRTSEX

Have a sexual relationship with them?

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
- 0 NO

[SHOW IF TSV_THREATEV =1]

[S]

TSV_THRTPAY

Pay them money?

[CAWI RESPONSE OPTIONS:]

1 Yes

0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

1 YES

0 NO

[SHOW IF TSV_THREATEV =1]

[S]

TSV_THRTREL

Stay in or maintain a relationship with them?

[CAWI RESPONSE OPTIONS:]

1 Yes

0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

1 YES

0 NO

[SHOW IF TSV_THREATEV =1]

[S]

TSV_THRTOTH

Something else?

[CAWI RESPONSE OPTIONS:]

1 Yes

0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

1 YES

0 NO

[PROGRAMMER: DISPLAY TSV_THRTWHY– TSV_THRTOTH ON SAME PAGE]

[SHOW ALL]

[S]

TSV_FAKEPORN

To your knowledge, has anyone ever used technology to create and share fake pornographic photos or videos of you online without your consent?

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
- 0 NO

[CREATE "END_TSV" AND RECORD TIME IN HH:MM:SS]

EMP – EMPLOYMENT

[CREATE "START_EMP" AND RECORD TIME IN HH:MM:SS]

[SHOW ALL]

[S]

EMP_EMPLOY

Last week, did you work for pay at a job or business?

[CAWI] *If you work at a family business, but not for pay, select yes.*

[CATI] INTERVIEWER - IF THE RESPONDENT SAYS THEY WORK, BUT NOT FOR PAY, AT A FAMILY-OWNED JOB OR BUSINESS, ENTER '1' FOR YES.

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
 - 0 NO
-

[SHOW IF EMP_EMPLOY=0]

[S]

EMP_ABSENTWK

Did you have a job or business last week, but were temporarily absent due to illness, vacation, family or maternity leave, or some other reason?

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
- 0 NO

[SHOW IF EMP_EMPLOY=0 AND EMP_ABSENTWK=0]

[S]

EMP_WHYNOWRK

What is the main reason you were not working for pay at a job or business last week?

[CAWI RESPONSE OPTIONS:]

- 0 Unemployed, laid off, looking for work
- 1 Seasonal/contract work
- 2 Retired
- 3 Unable to work for health reasons/disabled
- 4 Taking care of house or family
- 5 Going to school
- 6 Working at a family-owned job or business, but not for pay
- 7 Other

[CATI RESPONSE OPTIONS – READ IF NECESSARY:]

- 0 Unemployed, laid off, looking for work
- 1 Seasonal/contract work
- 2 Retired
- 3 Unable to work for health reasons/disabled
- 4 Taking care of house or family
- 5 Going to school
- 6 Working at a family-owned job or business, but not for pay
- 7 Other

[SHOW IF EMP_EMPLOY=1 OR EMP_ABSENTWK=1]

[NUMBOX]

EMP_DAYMISS

During the past 12 months, about how many days of work did you miss because you had an illness, injury, or disability?

[PROGRAMMER: DISPLAY ERROR MESSAGE IF NUMBER OF DAYS IS >365: Please enter a number of days between 0 and 365.]

[NUMBOX] days [RANGE=0-365]

[SHOW IF EMP_EMPLOY = 0 AND EMP_ABSENTWK = 0]

[S]

EMP_WHENWRK

When was the last time you worked for pay at a job or business, even if only for a few days?

[PROGRAMMER: IF EMP_EMPLOY = 1 OR EMP_ABSENTWK =1 , AUTO PUNCH EMP_WHENWRK = 1 AND HIDE IN CAWI.]

- 1 Within the past 12 months
- 2 1-5 years ago
- 3 Over 5 years ago
- 4 Never worked

[CREATE "END_EMP" AND RECORD TIME IN HH:MM:SS]

HPF – HEARING PROTECTOR FIT TESTING

[CREATE "START_HPF" AND RECORD TIME IN HH:MM:SS]

[SHOW ALL]

[S]

HPF_EVERUSE

The next few questions are about the use of hearing protectors, such as earplugs or earmuffs, to protect from loud noise at work. Loud means so loud that you must speak in a raised voice to be heard.

Have you ever used hearing protectors when exposed to loud noises at work?

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No
- 2 I have never worked around loud noises

[CATI RESPONSE OPTIONS:]

- 1 Yes
- 0 No
- 2 You have never worked around loud noises

[SHOW ALL]

[S]

HPF_KNOWFIT

Hearing protector fit testing is a way to measure the amount of noise reduction a person gets from a specific hearing protector, such as earplugs or earmuffs, to reduce exposure to loud noises.

Prior to taking this survey, did you know that hearing protectors can be fit-tested to ensure you are getting the right amount of noise reduction?

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
- 0 NO

[SHOW IF HPF_EVERUSE=1 AND HPF_KNOWFIT =1]

[S]

HPF_EVERFIT

Have you ever had your hearing protection devices fit-tested to see how much noise they block?

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
 - 0 NO
-

[SHOW IF HPF_KNOWFIT =1]

[S]

HPF_IMPORT

How important do you think it is to have hearing protectors fit-tested to protect your hearing? [CATI]
Would you say not at all important, somewhat important, or very important?

[CAWI RESPONSE OPTIONS:]

- 1 Not at all important
- 2 Somewhat important
- 3 Very important

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 NOT AT ALL IMPORTANT
 - 2 SOMEWHAT IMPORTANT
 - 3 VERY IMPORTANT
-

[SHOW IF HPF_KNOWFIT =0, -6, -7, -9]

[S]

HPF_IMPORTDK

How important do you think it is to have hearing protectors fit-tested to protect someone's hearing?
[CATI] Would you say not at all important, somewhat important, or very important?

[CAWI RESPONSE OPTIONS:]

- 1 Not at all important
- 2 Somewhat important
- 3 Very important

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 NOT AT ALL IMPORTANT
- 2 SOMEWHAT IMPORTANT
- 3 VERY IMPORTANT

[CREATE "END_HPF" AND RECORD TIME IN HH:MM:SS]

MAR – MARITAL STATUS

[CREATE "START_MAR" AND RECORD TIME IN HH:MM:SS]

[SHOW ALL]

MAR_DISP

The next questions are about marriage and cohabitation.

[SHOW ALL]

[S]

MAR_MARITAL

[CAWI] Are you now: [CATI] Are you now married, living with a partner together as an unmarried couple, or neither?

[CATI] INTERVIEWER - IF RESPONDENT ANSWERS BOTH MARRIED AND LIVING WITH A DIFFERENT PARTNER TOGETHER AS AN UNMARRIED COUPLE, ENTER LIVING WITH A PARTNER

[CAWI RESPONSE OPTIONS:]

- 1 Married
- 2 Living with a partner together as an unmarried couple
- 3 Neither

[CATI RESPONSE OPTIONS – DO NOT READ:]

- 1 MARRIED
 - 2 LIVING WITH A PARTNER TOGETHER AS AN UNMARRIED COUPLE
 - 3 NEITHER
-

[SHOW IF MAR_MARITAL = 2, 3, -6,-7,-9]

[S]

MAR_EVMARRY

Have you ever been married?

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
 - 0 NO
-

[SHOW IF MAR_MARITAL = 2 AND MAR_EVMARRY=1]

[S]

MAR_LEGAL

What is your current legal marital status? [CATI: Are you married, widowed, divorced, or separated?]

[CAWI RESPONSE OPTIONS:]

- 1 Married
- 2 Widowed
- 3 Divorced
- 4 Separated

[CATI RESPONSE OPTIONS – DO NOT READ:]

- 1 MARRIED
 - 2 WIDOWED
 - 3 DIVORCED
 - 4 SEPARATED
-

[SHOW IF MAR_MARITAL = 3 AND MAR_EVMARRY=1]

[S]

MAR_WIDIVSEP

[CAWI] Are you... [CATI] Are you widowed, divorced, or separated?

[CAWI RESPONSE OPTIONS:]

- 1 Widowed
- 2 Divorced
- 3 Separated

[CATI RESPONSE OPTIONS – DO NOT READ:]

- 1 WIDOWED
- 2 DIVORCED
- 3 SEPARATED

[CREATE "END_MAR" AND RECORD TIME IN HH:MM:SS]

CIV - CIVIC ENGAGEMENT

[CREATE "START_CIV" AND RECORD TIME IN HH:MM:SS]

[SHOW ALL]

[S]

CIV_VOL12M

During the past 12 months, did you spend any time volunteering for any organization or association?

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
- 0 NO

[SHOW IF CIV_VOL12M=0]

[S]

CIV_VOLOTH

Some people don't think of activities they do infrequently or for children's schools or youth organizations as volunteer activities. During the past 12 months, have you done any of these types of activities?

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
 - 0 NO
-

[SHOW ALL]

[S]

CIV_MEET

During the past 12 months, did you attend a public meeting, such as a zoning or school board meeting, that discussed a local issue?

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
 - 0 NO
-

[SHOW ALL]

[S]

CIV_VOTELOCL

Did you vote in the last local elections, such as for mayor, councilmembers, or school board?

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
- 0 NO

[CREATE "END_CIV" AND RECORD TIME IN HH:MM:SS]

LAN - LANGUAGE ITEMS

[CREATE "START_LAN" AND RECORD TIME IN HH:MM:SS]

[SHOW IF QUEX_LANGUAGE=1 (ENGLISH); HIDE IF QUEX_LANGUAGE=2 (SPANISH) AND AUTO PUNCH 1 (YES)]

[S]

LAN_OTHERLAN

Do you speak a language other than English at home?

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 Yes
- 0 No

[SHOW IF LAN_OTHERLAN=1]

[S]

LAN_MEDIA

When you watch television, read news online or in print, or listen to the radio, which language do you use most often?

[CAWI RESPONSE OPTIONS:]

- 1 English
- 2 Spanish
- 3 Another language

[CATI RESPONSE OPTIONS – DO NOT READ:]

- 1 ENGLISH
- 2 SPANISH
- 3 ANOTHER LANGUAGE

[SHOW IF LAN_OTHERLAN=1]

[S]

LAN_DOCTOR

When you see a doctor or other health care professional, which language do you use most often?

[CAWI RESPONSE OPTIONS:]

- 1 English
- 2 Spanish
- 3 Another language

[CATI RESPONSE OPTIONS – DO NOT READ:]

- 1 ENGLISH
 - 2 SPANISH
 - 3 ANOTHER LANGUAGE
-

[SHOW IF LAN_OTHERLAN=1]

[S]

LAN_SOCIAL

When you participate in social activities, such as visiting friends, attending clubs and meetings, or going to parties, which language do you use most often?

[CAWI RESPONSE OPTIONS:]

- 1 English
- 2 Spanish
- 3 Another language

[CATI RESPONSE OPTIONS – DO NOT READ:]

- 1 ENGLISH
- 2 SPANISH
- 3 ANOTHER LANGUAGE

[CREATE “END_LAN” AND RECORD TIME IN HH:MM:SS]

TEL - TELEPHONE USE

[CREATE “START_TEL” AND RECORD TIME IN HH:MM:SS]

[SHOW ALL]

[S]

TEL_NONCELL

Is there at least one telephone inside your home that is currently working and is not a cell phone?

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
 - 0 NO
-

[SHOW ALL]

[S]

TEL_CELL

Do you have a working cell phone?

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
 - 0 NO
-

[SHOW IF TEL_CELL=0 AND HHSIZE>=2]

[S]

TEL_HHCELL

Do you live with anyone at your home who has a working cell phone?

[CAWI RESPONSE OPTIONS:]

- 1 Yes
- 0 No

[CATI RESPONSE OPTIONS - DO NOT READ:]

- 1 YES
- 0 NO

[CREATE "END_TEL" AND RECORD TIME IN HH:MM:SS]

[CREATE "END_TIME" AND RECORD TIME IN HH:MM:SS; CREATE END_DATE" AND RECORD DATE IN MM:DD:YYY]