WHQ.010
G/F/I/M/C

These next questions ask about (your/SP's) height and weight at different times in (your/his/her) life.

How tall (are you/is SP) without shoes?

ENTER HEIGHT IN FEET AND INCHES OR METERS AND CENTIMETERS

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ENTER NUMBER OF FEET

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ENTER NUMBER OF INCHES

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ENTER NUMBER OF METERS

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</table>
ENTER NUMBER OF CENTIMETERS

OR

REFUSED .................................................. 7777
DON'T KNOW ............................................ 9999
How much {do you/does SP} weigh without clothes or shoes? [If {you are/she is} currently pregnant, how much did {you/she} weigh before your pregnancy?]

RECORD CURRENT WEIGHT
ENTER WEIGHT IN POUNDS OR KILOGRAMS

CAPI INSTRUCTION:
DISPLAY OPTIONAL SENTENCE [If {you are/she is} currently pregnant . . .] ONLY IF SP IS FEMALE AND AGE IS 16 THROUGH 59.

|___|___|___|
ENTER NUMBER OF POUNDS

CAPI INSTRUCTION:
SOFT EDIT 75-500, HARD EDIT 50-750

OR

|___|___|___|
ENTER NUMBER OF KILOGRAMS

CAPI INSTRUCTION:
SOFT EDIT 34-225, HARD EDIT 23-338

OR

REFUSED ..................................................... 777
DON’T KNOW ............................................... 999

{Do you/Does SP} consider {your/his/her}self now to be . . . [If {you are/she is} currently pregnant, what did {you/she} consider {your/her}self to be before {you were/she was} pregnant?]

overweight, ............................................... 1
underweight, or .......................................... 2
about the right weight? ................................. 3
REFUSED ..................................................... 7
DON’T KNOW ............................................... 9

CAPI INSTRUCTION:
DISPLAY OPTIONAL SENTENCE [If {you are/she is} currently pregnant . . .] ONLY IF SP IS FEMALE AND AGE IS 16 THROUGH 59.

Would {you/SP} like to weigh . . .

more, .......................................................... 1
less, or .......................................................... 2
stay about the same? ...................................... 3
REFUSED ..................................................... 7
DON’T KNOW ............................................... 9
WHQ.045/ How much {would you/would SP} like to weigh?

ENTER WEIGHT IN POUNDS OR KILOGRAMS

|___|___|___|
ENTER NUMBER OF POUNDS

CAPI INSTRUCTION:
SOFT EDIT 75-500, HARD EDIT 50-750

OR

|___|___|___|
ENTER NUMBER OF KILOGRAMS

CAPI INSTRUCTION:
SOFT EDIT 34-225, HARD EDIT 23-338

REFUSED ............................................... 77777
DON'T KNOW ........................................... 99999

WHQ.053/ How much did {you/SP} weigh a year ago? [If {you were/she was} pregnant a year ago, how much did {you/she} weigh before your pregnancy?]

ENTER WEIGHT IN POUNDS OR KILOGRAMS

CAPI INSTRUCTION:
DISPLAY OPTIONAL SENTENCE [If {you were/she was} pregnant . . .] ONLY IF SP IS FEMALE AND SP AGE IS 17 THROUGH 60.

|___|___|___|
ENTER NUMBER OF POUNDS

CAPI INSTRUCTION:
SOFT EDIT 75-500, HARD EDIT 50-750

OR

|___|___|___|
ENTER NUMBER OF KILOGRAMS

CAPI INSTRUCTION:
SOFT EDIT 34-225, HARD EDIT 23-338

OR

REFUSED ..................................................... 777
DON'T KNOW ............................................... 999
BOX 1

CHECK ITEM WHQ.055:
IF WEIGHT IN WHQ.053/L/K IS 10 POUNDS, 4.55 KILOGRAMS, OR MORE THAN WEIGHT IN WHQ.025/L/K (E.G., WHQ.053/L/K = 150 LBS AND WHQ.025/L/K = 135 LBS), CONTINUE.
OTHERWISE, GO TO WHQ.070.

WHQ.061 Was the change between {your/SP’s} current weight and {your/his/her} weight a year ago because {you/s/he} tried to lose weight?

YES ............................................................... 1 (WHQ.089/OS)
NO ................................................................. 2
REFUSED ..................................................... 7
DON’T KNOW ............................................... 9

WHQ.070 During the past 12 months, {have you/has SP} tried to lose weight?

YES ............................................................... 1
NO ................................................................. 2 (WHQ.090)
REFUSED ..................................................... 7 (WHQ.090)
DON’T KNOW ............................................... 9 (WHQ.090)
How did {you/SP} try to lose weight?

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
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</thead>
<tbody>
<tr>
<td>100</td>
<td>ATE LESS FOOD (AMOUNT)</td>
</tr>
<tr>
<td>110</td>
<td>SWITCHED TO FOODS WITH LOWER CALORIES</td>
</tr>
<tr>
<td>120</td>
<td>ATE LESS FAT</td>
</tr>
<tr>
<td>125</td>
<td>ATE FEWER CARBOHYDRATES</td>
</tr>
<tr>
<td>130</td>
<td>EXERCISED</td>
</tr>
<tr>
<td>140</td>
<td>SKIPPED MEALS</td>
</tr>
<tr>
<td>150</td>
<td>ATE &quot;DIET&quot; FOODS OR PRODUCTS</td>
</tr>
<tr>
<td>160</td>
<td>USED A LIQUID DIET FORMULA SUCH AS SLIMFAST OR OPTIFAST</td>
</tr>
<tr>
<td>170</td>
<td>JOINED A WEIGHT LOSS PROGRAM SUCH AS WEIGHT WATCHERS, JENNY CRAIG, TOPS, OR OVEREATERS ANONYMOUS</td>
</tr>
<tr>
<td>300</td>
<td>FOLLOWED A SPECIAL DIET SUCH AS DR. ATKINS, SOUTH BEACH, OTHER HIGH PROTEIN OR LOW CARBOHYDRATE DIET, CABBAGE SOUP DIET, ORNISH, NUTRISYSTEM, BODY-FOR-LIFE</td>
</tr>
<tr>
<td>310</td>
<td>TOOK DIET PILLS PRESCRIBED BY A DOCTOR</td>
</tr>
<tr>
<td>320</td>
<td>TOOK OTHER PILLS, MEDICINES, HERBS, OR SUPPLEMENTS NOT NEEDING A PRESCRIPTION</td>
</tr>
<tr>
<td>325</td>
<td>STARTED TO SMOKE OR BEGAN TO SMOKE AGAIN</td>
</tr>
<tr>
<td>330</td>
<td>TOOK LAXATIVES OR VOMITED</td>
</tr>
<tr>
<td>340</td>
<td>DRANK A LOT OF WATER</td>
</tr>
<tr>
<td>350</td>
<td>ATE MORE FRUITS, VEGETABLES, SALADS</td>
</tr>
<tr>
<td>360</td>
<td>ATE LESS SUGAR, CANDY, SWEETS</td>
</tr>
<tr>
<td>370</td>
<td>CHANGED EATING HABITS (DIDN'T EAT LATE AT NIGHT, ATE SEVERAL SMALL MEALS A DAY)</td>
</tr>
<tr>
<td>380</td>
<td>ATE LESS JUNK FOOD OR FAST FOOD</td>
</tr>
<tr>
<td>400</td>
<td>OTHER (SPECIFY)</td>
</tr>
<tr>
<td>777</td>
<td>REFUSED</td>
</tr>
<tr>
<td>999</td>
<td>DON'T KNOW</td>
</tr>
</tbody>
</table>

In the past 12 months, {did you/did SP} seek help from a personal trainer, dietitian, nutritionist, doctor or other health professional to lose weight?

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
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<tbody>
<tr>
<td>1</td>
<td>YES</td>
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<tr>
<td>2</td>
<td>NO</td>
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<tr>
<td>7</td>
<td>REFUSED</td>
</tr>
<tr>
<td>9</td>
<td>DON'T KNOW</td>
</tr>
</tbody>
</table>
Was that a personal trainer, dietitian, nutritionist, doctor, or other health professional? 
- personal trainer: 1
- dietitian: 2
- nutritionist: 3
- doctor: 4
- other health professional: 5
- REFUSED: 7
- DON'T KNOW: 9

**BOX 2A**
CHECK ITEM WHQ.185: IF WHQ.061 = CODE 1 OR WHQ.070 = CODE 1, GO TO WHQ.220/L/K.

**WHQ.090** 
During the past 12 months, (have you/has SP) done anything to keep from gaining weight?
- YES: 1
- NO: 2 (WHQ.210)
- REFUSED: 7 (WHQ.210)
- DON'T KNOW: 9 (WHQ.210)
What did {you/SP} do to keep from gaining weight?

CODE ALL THAT APPLY.

HAND CARD WHQ1

ATE LESS FOOD (AMOUNT) ....................... 100
SWITCHED TO FOODS WITH LOWER
  CALORIES ........................................ 110
ATE LESS FAT ..................................... 120
ATE FEWER CARBOHYDRATES ............ 125
EXERCISED .................................. 130
SKIPPED MEALS .................................. 140
ATE "DIET" FOODS OR PRODUCTS....... 150
USED A LIQUID DIET FORMULA SUCH
  AS SLIMFAST OR OPTIFAST ............. 160
JOINED A WEIGHT LOSS PROGRAM
  SUCH AS WEIGHT WATCHERS, JENNY
  CRAIG, TOPS, OR OVEREATERS
  ANONYMOUS .................................. 170
FOLLOWED A SPECIAL DIET SUCH AS
  DR. ATKINS, SOUTH BEACH, OTHER
HIGH PROTEIN OR LOW
  CARBOHYDRATE DIET, CABBAGE
SOUP DIET, ORNISH, NUTRISYSTEM,
  BODY-FOR-LIFE .................................. 300
TOOK DIET PILLS PRESCRIBED BY A
  DOCTOR ........................................ 310
TOOK OTHER PILLS, MEDICINES, HERBS,
  OR SUPPLEMENTS NOT NEEDING A
  PRESCRIPTION .................................. 320
STARTED TO SMOKE OR BEGAN TO
  SMOKE AGAIN .................................. 325
TOOK LAXATIVES OR VOMITED ............ 330
DRANK A LOT OF WATER ...................... 340
ATE MORE FRUITS, VEGETABLES,
  SALADS .......................................... 350
ATE LESS SUGAR, CANDY, SWEETS ....... 360
CHANGED EATING HABITS (DIDN’T EAT
  LATE AT NIGHT, ATE SEVERAL SMALL
  MEALS A DAY) .................................. 370
ATE LESS JUNK FOOD OR FAST FOOD.... 380
OTHER (SPECIFY) ................................. 400
REFUSED .......................................... 777
DON’T KNOW ......................................... 999

{Have you/Has SP} ever tried to lose weight?

YES ...................................................... 1
NO ...................................................... 2 (BOX 2)
REFUSED ............................................. 7 (BOX 2)
DON’T KNOW ......................................... 9 (BOX 2)
How much weight (did you/did SP) lose in (your/his/her) most successful attempt ever to lose weight?

ENTER WEIGHT IN POUNDS OR KILOGRAMS

HELP SCREEN: This question refers only to deliberate attempts to lose weight; it does not refer to weight loss because of illness, side effects of medication, stress, or other unintended causes.

|___|___|___|
ENTER NUMBER OF POUNDS

CAPI INSTRUCTION:
SOFT EDIT OVER 100 POUNDS

OR

|___|___|___|
ENTER NUMBER OF KILOGRAMS

CAPI INSTRUCTION:
SOFT EDIT OVER 45 KILOGRAMS

OR

REFUSED ..................................................... 777
DON'T KNOW ............................................... 999

HELP SCREEN:
This question refers only to deliberate attempts to lose weight; it does not refer to weight loss because of illness, side effects of medication, stress, or other unintended causes.

BOX 2

CHECK ITEM WHQ.105:
IF SP AGE >= 36, CONTINUE.
OTHERWISE, GO TO BOX 3.
How much did \{you/SP\} weigh 10 years ago? [If you don't know \{your/his/her\} exact weight, please make your best guess.] [If \{you were/she was\} pregnant, how much did \{you/she\} weigh before \{your/her\} pregnancy?]

ENTER WEIGHT IN POUNDS OR KILOGRAMS

CAPI INSTRUCTION:
DISPLAY OPTIONAL SENTENCE [If \{you were/she was\} . . .] ONLY IF SP IS FEMALE AND AGE IS LESS THAN OR EQUAL TO 69.

|___|___|___|
ENTER NUMBER OF POUNDS

CAPI INSTRUCTION:
SOFT EDIT 75-500, HARD EDIT 50-750

OR

|___|___|___|
ENTER NUMBER OF KILOGRAMS

CAPI INSTRUCTION:
SOFT EDIT 34-225, HARD EDIT 23-338

OR

REFUSED ............................................... 77777
DON'T KNOW ......................................... 99999

CHECK ITEM WHQ.115A:
IF SP AGE >= 27, CONTINUE.
OTHERWISE, GO TO WHQ.147/L/K.

How much did \{you/SP\} weigh at age 25? [If you don't know \{your/his/her\} exact weight, please make your best guess.] [If \{you were/she was\} pregnant, how much did \{you/she\} weigh before your pregnancy?]

ENTER WEIGHT IN POUNDS OR KILOGRAMS

CAPI INSTRUCTION:
DISPLAY OPTIONAL SENTENCE [If \{you were/she was\} . . .] ONLY IF SP IS FEMALE.

|___|___|___|
ENTER NUMBER OF POUNDS

OR

|___|___|___|
ENTER NUMBER OF KILOGRAMS

OR

REFUSED ............................................... 77777
DON'T KNOW ......................................... 99999
CHECK ITEM WHQ.125:
IF SP AGE >= 50, CONTINUE.
OTHERWISE, GO TO WHQ.147/L/K.

WHQ.130/ F/I/M/C
How tall [were you/was SP] at age 25? [If you don't know [your/his/her] exact height, please make your best guess.]

ENTER HEIGHT IN FEET AND INCHES OR METERS AND CENTIMETERS

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ENTER NUMBER OF FEET

CAPI INSTRUCTION: HARD EDIT 2-8
AND

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ENTER NUMBER OF INCHES

CAPI INSTRUCTION: HARD EDIT 0-11
OR

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ENTER NUMBER OF METERS

CAPI INSTRUCTION: HARD EDIT 0-3
AND

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</table>
ENTER NUMBER OF CENTIMETERS

CAPI INSTRUCTION: HARD EDIT 0-99
OR

REFUSED ............................................... 7777
DON'T KNOW ......................................... 9999

BOX 4
OMITTED
What is the most {you have/SP has} ever weighed? [Do not include any times when {you were/she was} pregnant.]

ENTER WEIGHT IN POUNDS OR KILOGRAMS

CAPI INSTRUCTION:
DISPLAY OPTIONAL SENTENCE {Do not include . . .} ONLY IF SP IS FEMALE.

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</table>
ENTER NUMBER OF POUNDS

CAPI INSTRUCTION:
SOFT EDIT 75-500, HARD EDIT 50-750

OR

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ENTER NUMBER OF KILOGRAMS

CAPI INSTRUCTION:
SOFT EDIT 34-225, HARD EDIT 23-338

OR

REFUSED ..................................................... 777 (END OF SECTION)
DON'T KNOW ................................................... 999 (END OF SECTION)

How old {were you/was SP} then? [If you don't know {your/his/her} exact age, please make your best guess.]

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ENTER AGE IN YEARS

REFUSED ..................................................... 77777
DON'T KNOW ................................................... 99999

BOX 5

OMITTED