SCREENER MODULE #1 (SCQ)

SCQ_INTR   Hello, I'm {INTERVIEWER'S NAME} and we are conducting a survey for the National Center for Health Statistics, part of the Centers for Disease Control and Prevention (CDC).

SHOW ID CARD.

A letter was sent to you recently explaining a survey which is called the National Health and Nutrition Examination Survey and is about your family's health.

IF RESIDENT DOES NOT REMEMBER LETTER, HAND NEW COPY.

All the information that you give us is voluntary and will be kept confidential. Your name will not be attached to any of your answers without your specific permission. [At the completion of the interview, you will be given a ${INCENTIVE} debit card as a thank you for answering these questions.]

HELP SCREEN:
Assurance of confidentiality – 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 of 2002 (CIPSEA, Title 5 of Public Law 107-347). 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.

Public reporting burden for this collection of information is estimated to average 6.7 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number.

Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road, MS D-74, Atlanta, GA 30333, ATTN: PRA (0920-0950).

CAPI INSTRUCTION:
DISPLAY TEXT ONLY IF INCENTIVE PILOT ACTIVE IN STAND AND IF HOUSEHOLD HAS BEEN SELECTED FOR A SCREENER INCENTIVE.

SCQ.010   Before we begin, I would like to verify a few things.
ASK FOR ALL PERSONS WHO APPEAR UNDER 30 YEARS OF AGE:

Are you 18 years or older?

NO	1	(SCQ_END6)
NO, EMANCIPATED MINOR	2	
YES	3	

SCQ.015   Do you live here?

NO	1	(SCQ_END6)
YES	3	

SCQ.027   INTERVIEWER: IS THIS A DORMITORY ROOM?

YES	1
NO	2
DK...	9
RF	7

SCQ.070a   Please give me your complete physical street address.

{#} {DIRECTION} {STREET NAME} {STREET/ROAD/AVENUE} {DIRECTION} {#}
{PO BOX} {RURAL ROUTE #} {RURAL ROUTE BOX} {CITY} {STATE} { ZIP}

NO (WRONG ADDRESS)	1	(SCQ_END5)
YES (CORRECTIONS)................................	2	(SCQ.070b)
YES	3	(SCQ.600)

SCQ.070b   Please give me your complete physical street address.

{ADDITIONAL ADDRESS LINE}
{#} {DIRECTION} {STREET NAME} {STREET/ROAD/AVENUE} {DIRECTION}
{UNIT/APT/BLDG} {UNIT #} {PO BOX} {RURAL ROUTE #} {RURAL ROUTE BOX}
{CITY} {STATE} { ZIP}-{ZIP-4}

CAPI INSTRUCTIONS: DISPLAY THE ADDRESS COLUMNS LISTED ABOVE AND ALLOW THE INTERVIEWER TO MAKE CORRECTIONS AS NEEDED. ONCE THE INTERVIEWER IS DONE, SHE WILL PRESS THE NEXT KEY TO CONTINUE.

THE FIELD FOR STATE MAY NOT BE UPDATED.

IF SCQ.070A = 2 AND NONE OF THE ADDRESS FIELDS ARE MODIFIED, AUTO-BACKCODE THE RESPONSE TO SCQ.070A = 3 (YES) AND GO TO SCQ.090.

HARD EDIT: IF UNIT/APT/BLDG = PO BOX OR IF "PO BOX" OR "P.O. BOX" IS ENTERED IN THE ADDITIONAL ADDRESS LINE, STREET #, OR STREET NAME FIELDS, DISPLAY MESSAGE, "PLEASE ENTER THE PHYSICAL STREET ADDRESS. DO NOT ENTER P.O. BOX ON THIS SCREEN."

SCQ.600 First, I have some general questions about your health.

Would you say your health in general is . . .

excellent, ...	1
very good,...	2
good,...	3
fair, or	4
poor?	5
REFUSED	7
DON'T KNOW..	9

SCQ.610 Are you now taking any medications prescribed by a health professional such as a doctor or dentist?

YES	1	
NO	2	(SCQ.630)
REFUSED	7	(SCQ.630)
DON'T KNOW..	9	(SCQ.630)

SCQ.620 How many prescription medications do you currently use or take? Would you say…

1 to 2, ...	1
3 to 5, or..................................	2
6 or more?	3
REFUSED...............................	7
DON'T KNOW..........................	9

SCQ.630 Has a doctor or other health professional ever told you that you had diabetes?

INTERVIEWER INSTRUCTION:
IF DIABETES ONLY DURING PREGNANCY, CODE NO.

YES	1
NO	2
BORDERLINE OR PREDIABETES...............	3
REFUSED	7
DON'T KNOW..	9

SCQ.640   Has a doctor or other health professional ever told you that you had hypertension (hy-per-ten-shun), also called high blood pressure?

INTERVIEWER INSTRUCTION:
IF HIGH BLOOD PRESSURE ONLY DURING PREGNANCY, CODE NO.
IF RESPONDENT SAYS "HIGH NORMAL BLOOD PRESSURE", "BORDERLINE HYPERTENSION" OR "PREHYPERTENSION" CODE NO.

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

SCQ.090   To continue, I need to know more about this household. How many people live here? Please do not include anyone who usually lives somewhere else.

_____
NUMBER

DK... 99
RF... 77

SCQ.130   What are the names of all of the persons living here? Start with the name of the person, or one of the persons, who owns or rents this home. (Please remember not to include anyone who usually lives somewhere else.)

PROBE: Any others?

_____   _____   _____   _____   _____
FIRST   MIDDLE   LAST   SUFFIX
GENDER

DK... 9
RF... 7

CAPI INSTRUCTIONS: WHEN THE FOCUS IS ON THE "GENDER" FIELD, DISPLAY:

IF OBVIOUS, VERIFY ONLY:
Is {NAME} male or female?

MALE.. 1
FEMALE 2
DK... 9
RF... 7

CAPI INSTRUCTIONS:
HARD EDIT: IF FOCUS IS SHIFTED FROM THE "GENDER" FIELD AND NO ENTRY HAS BEEN MADE FOR GENDER, DISPLAY THE FOLLOWING HARD EDIT:

"REQUIRED VALUE MISSING FOR GENDER IN ROW {ROW IN WHICH GENDER IS MISSING}. PLEASE ENTER A VALUE."

SOFT EDIT: THE FIRST TIME DK OR RF IS ENTERED FOR GENDER, DISPLAY THE FOLLOWING: "A MISSING VALUE HERE MAY RESULT IN INCONCLUSIVE SAMPLING. PLEASE RE-ENTER THE VALUE TO CONFIRM."

ACCEPT THE SECOND ENTRY.

ENSURE THAT EACH NAME (COMBINATION OF FIRST, MIDDLE, LAST, SUFFIX) IS UNIQUE WITHIN THE HOUSEHOLD. IF A DUPLICATE NAME IS ENTERED, DISPLAY THE FOLLOWING HARD EDIT, "NAMES MUST BE UNIQUE. PERSONS # AND # HAVE IDENTICAL NAMES RECORDED. CORRECT THE ERROR TO CONTINUE."

SCQ.145   I have {TOTAL # OF PERSONS ENUMERATED} {person/people} living here --

READ NAMES LISTED BELOW.

FIRST	MIDDLE	LAST	SUFFIX	GENDER

SCQ.150

Have I missed . . .
SCQ.150   . . . any babies or small children?
SCQ.160   . . . any lodgers, boarders, or persons in your employ who live here?
SCQ.170   . . . anyone who usually lives here but is now away from home?
SCQ.180   . . . anyone else living or staying here?

YES 1 (SCQ.150N, 160N, 170N, 180N)
NO 2 (SCQ.190)
DK.. 9 (SCQ.190)
RF.. 7 (SCQ.190)

CAPI INSTRUCTIONS: THE SWEEP QUESTIONS (SCQ.150, 160, 170 AND 180) SHOULD BE DISPLAYED ON A SINGLE SCREEN. A "YES" RESPONSE TO A SWEEP QUESTION BRINGS UP THE HOUSEHOLD COMPOSITION MATRIX. BY CLICKING ON THE "INSERT ROW" BUTTON ON THIS SCREEN, A NEW ROW APPEARS FOR ENTRY OF NAME AND GENDER.

UPON EXITING THE NAME/GENDER SCREEN, THE CURSOR SHOULD RETURN TO THE SCREEN OF SWEEP QUESTIONS WITH THE CURSOR RESIDING ON THE NEXT LINE (QUESTION) THAT REQUIRES AN ANSWER.

IF ALL THE QUESTIONS HAVE BEEN ANSWERED, GO TO SCQ.190.

SCQ.150N   [Have I missed any babies or small children?]   (What are their names?)
                 PROBE: Is (he/she) a "Junior", "Senior", "the 3rd" or something like that? (What is that?)
                 PROBE: Any others?

FIRST	MIDDLE	LAST	SUFFIX	
GENDER				

DK.. 9
RF.. 7

CAPI INSTRUCTIONS: IF THE FOCUS IS ON THE GENDER FIELD, DISPLAY:

         IF OBVIOUS, VERIFY ONLY:
         Is {NAME} male or female?
                 MALE.. 1
                 FEMALE 2
                 DK.. 9
                 RF.. 7

SCQ.160N   [Have I missed any lodgers, boarders, or persons in your employ who live here?] (What are their names?)
                 PROBE: Any others?

FIRST	MIDDLE	LAST	SUFFIX	
GENDER				

DK.. 9
RF.. 7

CAPI INSTRUCTIONS: IF THE FOCUS IS ON THE GENDER FIELD, DISPLAY:

         IF OBVIOUS, VERIFY ONLY:
         Is {NAME} male or female?
                 MALE.. 1
                 FEMALE 2
                 DK.. 9
                 RF.. 7

SCQ.170N [Have I missed anyone who usually lives here but is now away from home?] (What are their names?)
PROBE: Any others?

FIRST	MIDDLE	LAST	SUFFIX	

GENDER

DK... 9
RF... 7

CAPI INSTRUCTIONS: IF THE FOCUS IS ON THE GENDER FIELD, DISPLAY:

IF OBVIOUS, VERIFY ONLY:
Is {NAME} male or female?

MALE.. 1
FEMALE 2
DK... 9
RF... 7

SCQ.180N [Have I missed anyone else living or staying here?] (What are their names?)
PROBE: Any others?

FIRST	MIDDLE	LAST	SUFFIX	

GENDER

DK... 9
RF... 7

CAPI INSTRUCTIONS: IF THE FOCUS IS ON THE GENDER FIELD, DISPLAY:

IF OBVIOUS, VERIFY ONLY:
Is {NAME} male or female?

MALE.. 1
FEMALE 2
DK... 9
RF... 7

SCQ.190   [VERIFY HOUSEHOLD MEMBERS BY READING NAMES LISTED BELOW.]

_____   _____   _____   _____   _____
FIRST   MIDDLE   LAST   SUFFIX
GENDER

CAPI INSTRUCTIONS: THE APPLICATION SHOULD ALLOW THE INTERVIEWER TO ADD OR
DELETE NAMES OR ROWS FROM THE HH COMPOSITION MATRIX, AS NECESSARY, BASED ON
RESPONDENT'S CONFIRMATION OF THE PERSONS WHO HAVE BEEN ENUMERATED.

BOX 1

CHECK ITEM SCQ.191:
APPLY THE SAMPLING ALGORITHM. IF NO PERSON IN THE HOUSEHOLD
IS "POTENTIALLY ELIGIBLE" FOR THE STUDY BASED ON SAMPLING
MESSAGES FOR GENDER GO TO SCQ.500; ELSE

GO TO BOX 2.

BOX 2

CHECK ITEM SCQ.193:
IF SCQ.027 = YES (1), CODE SCQ.195 AS "YES" (1) AND GO TO SCQ.220;
ELSE

CONTINUE.

SCQ.195   Do {you/any of the persons in this household} have a home anywhere else?

STUDENTS LIVING AWAY AT SCHOOL ARE CONSIDERED TO HAVE A HOME SOMEWHERE
ELSE.

                              YES 1 (SCQ.200)
                              NO 2 (SCQ.220)

SCQ.200   (Who is that?)

SELECT MEMBERS WITH HOME ELSEWHERE.

Name   Other Home

CAPI INSTRUCTIONS: DISPLAY FIRST AND LAST NAMES OF ALL PERSONS LISTED ON THE HOUSEHOLD COMPOSITION MATRIX.

PROBE: Anyone else?

CAPI INSTRUCTIONS: THE DEFAULT FILL FOR THE "OTHER HOME" COLUMN IS "NO". HOWEVER, THE DEFAULT CAN BE TOGGLED TO "YES" BY MOVING THE CURSOR TO THE "OTHER HOME" CELL ASSOCIATED WITH THE PERSON WHO HAS A SECOND RESIDENCE, AND SELECTING "YES".

IF NONE OF THE "OTHER HOME" CELLS HAVE BEEN SET TO "YES", DISPLAY THE FOLLOWING BOX:
    ". You did NOT select any HH member living in another place.

    Button 1: Go back and select a person
    Button 2: No one living elsewhere
    "

IF BUTTON #1 IS SELECTED, RETURN TO SCQ.200. IF BUTTON #2 IS SELECTED, AUTO-BACKCODE THE RESPONSE TO SCQ.195 TO "NO" AND PROCEED TO SCQ.220.

SCQ.210   Where {do you/does {NAME}} usually live and sleep; here or somewhere else?

Name   Live Here

CAPI INSTRUCTIONS: DISPLAY "NAME" AND "LIVE HERE" COLUMNS. THE ANSWER CATEGORIES FOR THE LIVE HERE COLUMN ARE "HERE" (1), "SOMEWHERE ELSE" (2), "DK" (9), AND "RF" (7)

HERE...	1
SOMEWHERE ELSE....................................	2
DK..	9
RF...	7

CAPI INSTRUCTIONS: IF "1", "9", OR "7" IS SELECTED, LEAVE THE PERSON ON THE HH COMPOSITION MATRIX; ELSE

IF "2" IS SELECTED AND THIS IS A SINGLE PERSON HOUSEHOLD, OR IF "2" HAS BEEN SELECTED FOR ALL HOUSEHOLD MEMBERS, THE HOUSEHOLD IS "INELIGIBLE" AND THE SCREENER IS TERMINATED AFTER THE COLLECTION OF BRANDING QUESTIONS (SCQ.500-SCQ.540) AND THE TELEPHONE NUMBER (SCQ.430); ELSE

IF "2" IS SELECTED FOR AT LEAST ONE PERSON AND THE HOUSEHOLD IS MORE THAN A SINGLE PERSON HOUSEHOLD AND "2" HAS **NOT** BEEN SELECTED FOR **ALL** MEMBERS OF THE HH, SET A FLAG TO INDICATE THIS PERSON'S PERMANENT RESIDENCE WAS SOMEWHERE ELSE.

THE FLAG IS AN INDICATION THAT ON ALL FUTURE DISPLAYS OF THE HH COMPOSITION MATRIX, THIS PERSON (AND ALL PERSON-LEVEL DATA) WILL NOT BE DISPLAYED.

IF THE REFERENCE PERSON IS NOT ELIGIBLE TO BE THE REFERENCE PERSON BASED ON WHERE S/HE USUALLY LIVES, IDENTIFICATION OF A NEW REFERENCE PERSON IS REQUIRED. RE-APPLY THE REFERENCE PERSON EDIT LOGIC TO IDENTIFY THE REFERENCE PERSON AS THE FIRST PERSON ON THE ENUMEARATION TABLE WHO IS $\geq$ 18 YEARS OLD; ELSE

IF NO ONE ON THE ENUMBERATION TABLE IS AGE 18 OR OLDER, IDENTIFY THE REFERENCE PERSON AS THE OLDEST PERSON IN THE HOUSEHOLD FOR WHOM THIS IS THE PRIMARY RESIDENCE.

SCQ.220   Are {you/any of the persons in this household} now on full-time active duty with the Armed Forces of the United States?

> YES 1 (SCQ.230)
> NO 2 (SCQ.250)
> DK.. 9 (SCQ.250)
> RF.. 7 (SCQ.250)

CAPI INSTRUCTIONS: IF CODED "1" AND THIS IS A SINGLE PERSON HOUSEHOLD, OR IF ALL HOUSEHOLD MEMBERS ARE "1", THE HOUSEHOLD IS "INELIGIBLE" AND THE SCREENER IS TERMINATED AFTER THE COLLECTION OF BRANDING QUESTIONS (SCQ.500-SCQ.540) AND THE TELEPHONE NUMBER (SCQ.430); ELSE

IF THE HOUSEHOLD IS MORE THAN A SINGLE PERSON HOUSEHOLD, THE SKIPS SHOULD BE FOLLOWED AS SPECIFIED ABOVE.

SCQ.230   Who is that?

Name   Military

SELECT ACTIVE MILITARY MEMBERS.

CAPI INSTRUCTIONS: DISPLAY FIRST, MIDDLE AND LAST NAMES OF ALL PERSONS LISTED ON THE HOUSEHOLD COMPOSITION MATRIX.

PROBE: Anyone else?

CAPI INSTRUCTIONS: THE CURSOR SHOULD RESIDE IN THE COLUMN "Military". THE DEFAULT FILL FOR THIS COLUMN SHOULD BE "NO". HOWEVER, WHEN ON THIS QUESTION, THE DEFAULT CAN BE TOGGLED TO "YES" BY MOVING THE CURSOR TO THE "Military" CELL ASSOCIATED WITH THE PERSON IDENTIFIED AND SELECTING "YES". WHEN LEAVING THIS SCREEN, IF NONE OF THE "Military" CELLS HAVE BEEN SET TO "YES", DISPLAY THE FOLLOWING BOX:

You did NOT select any HH member on active duty.

Button 1: Go back and select a person
Button 2: No one on active duty
"

IF BUTTON #1 IS SELECTED, RETURN TO SCQ.230. IF BUTTON #2 IS SELECTED, AUTO-BACKCODE THE RESPONSE TO SCQ.220 TO "NO" AND PROCEED TO SCQ.250.
CONTINUE.

SCQ.240   Where {do you/does {NAME}} usually live and sleep; here or some where else?

HERE...	1
SOMEWHERE ELSE.....................................	2
DK...	9
RF..	7

CAPI INSTRUCTIONS: IF "1", "9", OR "7" IS ENTERED, LEAVE PERSON ON HH COMPOSITION MATRIX; DO **NOT** FLAG FOR SAMPLING.

IF "2" IS ENTERED, SET A FLAG TO INDICATE PERSON'S PERMANENT RESIDENCE WAS SOMEWHERE ELSE. THE FLAG IS AN INDICATION THAT ON ALL FUTURE DISPLAYS OF THE HH COMPOSITION MATRIX, THIS PERSON (AND ALL PERSON-LEVEL DATA) WILL NOT BE DISPLAYED.

IN THE EVENT THAT THE PERSON BEING FLAGGED AS LIVING "SOMEWHERE ELSE" IS THE REFERENCE PERSON, IDENTIFICATION OF A NEW REFERENCE PERSON IS REQUIRED. RE-APPLY THE REFERENCE PERSON EDIT LOGIC TO IDENTIFY THE REFERENCE PERSON AS THE FIRST PERSON ON THE ENUMEARATION TABLE WHO IS $\geq$ 18 YEARS OLD; ELSE

IF NO ONE ON THE ENUMERATION TABLE IS AGE 18 OR OLDER, IDENTIFY THE REFERENCE PERSON AS THE OLDEST PERSON IN THE HOUSEHOLD FOR WHOM THIS IS THE PRIMARY RESIDENCE.

SCQ.250   THESE ARE THE MEMBERS OF THE DU WHO HAVE BEEN LISTED AS HH MEMBERS.

{NAME   GENDER}

BOX 3

CHECK ITEM SCQ.255:
APPLY THE SAMPLING ALGORITHM. IF NO PERSON IN THE HOUSEHOLD
IS "POTENTIALLY ELIGIBLE" FOR THE STUDY BASED ON SAMPLING
MESSAGES FOR PLACE OF RESIDENCE, GO TO SCQ.500; ELSE

CONTINUE.

BOX 3A

CHECK ITEM SCQ.256:
ASK SCQ.260 FOR EACH PERSON ON HH ROSTER.

SCQ.260   [Do you/Does NAME] consider [yourself/himself/herself] to be Hispanic, Latino, or of Spanish origin?

           READ IF NECESSARY: Where do {your/his/her} ancestors come from?
                Puerto Rican
                Cuban/Cuban American
                Dominican (Republic)
                Mexican/Mexican American
                Central/South American
                Other Latin American
                Other Hispanic or Latino

```
YES ............................................................  1
NO ..............................................................  2
DK..............................................................  9
RF...............................................................  7
```

HELP SCREEN:
SPANISH, HISPANIC OR LATINO PEOPLE MAY BE OF ANY RACE. LISTED BELOW ARE HISPANIC OR LATINO CATEGORIES/COUNTRIES.

MEXICAN
PUERTO RICAN
CUBAN
DOMINICAN REPUBLIC
CENTRAL AMERICAN:
    COSTA RICAN
    GUATEMALAN
    HONDURAN
    NICARAGUAN
    PANAMANIAN
    SALVADORAN
    OTHER CENTRAL AMERICAN
SOUTH AMERICAN:
    ARGENTINEAN
    BOLIVIAN
    CHILEAN
    COLOMBIAN
    ECUADORIAN
    PARAGUAYAN
    PERUVIAN
    URUGUAYAN
    VENEZUELAN
    OTHER SOUTH AMERICAN
OTHER HISPANIC OR LATINO:
    SPANIARD
    SPANISH
    SPANISH AMERICAN

CAPI INSTRUCTIONS: DISPLAY THE FOLLOWING SOFT EDIT THE FIRST TIME A DK OR RF IS ENTERED:

"A missing value here may result in inconclusive sampling. Please re-enter the value to confirm."

ACCEPT THE SECOND ENTRY.

SCQ.262   WARNING: REVIEW HISPANIC STATUS FOR EACH PERSON! SAMPLING ALGORITHM WILL BE APPLIED.

{NAME   ETHNICITY}

CAPI INSTRUCTIONS: DISPLAY NAME AND ETHNICITY FOR EACH ENUMERATED PERSON AS DETERMINED AT SCQ.260. INTERVIEWER MAY BACK-UP TO CORRECT.

BOX 3B

CHECK ITEM SCQ.265:
CYCLE THROUGH SCQ.270 FOR EACH PERSON LISTED ON HH ROSTER.

SCQ.270   HAND CARD #1

What race do you consider {yourself/NAME} to be? Please select one or more.

CHECK ALL THAT APPLY.

AMERICAN INDIAN OR ALASKAN NATIVE .	1
ASIAN...	2
BLACK OR AFRICAN AMERICAN................	3
NATIVE HAWAIIAN OR PACIFIC ISLANDER .	4
WHITE	5
OTHER	6
DK..	9
RF..	7

CAPI INSTRUCTIONS: DISPLAY THE FOLLOWING SOFT EDIT THE FIRST TIME A DK OR RF IS ENTERED.

"A missing value here may result in inconclusive sampling. Please re-enter the value to confirm."

ACCEPT THE SECOND ENTRY.

BOX 3C

CHECK ITEM SCQ.270A:
ASK FOR NEXT PERSON. IF NO NEXT PERSON, CONTINUE WITH BOX 3D.

BOX 3D

CHECK ITEM SCQ.270B:
CYCLE THROUGH BOX 3E THROUGH SCQ.280 FOR EACH PERSON ON HH ROSTER.

BOX 3E

CHECK ITEM SCQ.270C:
CHECK SCQ.260 FOR EACH PERSON. IF PERSON LISTED AS **NOT** HISPANIC (CODE 2), CONTINUE.
OTHERWISE, SKIP TO BOX 3H.

BOX 3F

CHECK ITEM SCQ.270D:
CHECK SCQ.270 – IF ANY PERSON'S RACE = CODE 6 (OTHER) AND DOES **NOT** = CODE 2 OR CODE 3 (ASIAN OR BLACK), CONTINUE.
OTHERWISE, SKIP TO BOX 3H.

BOX 3G

CHECK ITEM SCQ.270E:
ASK QUESTION SCQ.280 FOR EACH PERSON ON HH ROSTER WHO MEET THE CRITERIA SPECIFIED IN BOXES 3E AND 3F (CODE 2 IN SCQ.260 AND CODE 6 ALONE OR WITH CODE 1, 4 OR 5 IN SCQ.270.

SCQ.280

Do any of the groups on this card represent {your/NAME's} national origin or ancestry?

HAND CARD #2

YES .... 1 (CONTINUE WITH CAPI INSTRUCTION SCQ.282)
NO .... 2 (BOX 3H)

SCQ.282

CAPI INSTRUCTION: ADD CODE #2 (ASIAN) AS RACE IN SCQ.270.

BOX 3H

CHECK ITEM SCQ.282A:
CYCLE THROUGH BOX 3D – SCQ.280 FOR NEXT PERSON. IF NO NEXT
PERSON, CONTINUE.

SCQ.271　　　WARNING! REVIEW RACE FOR EACH PERSON! SAMPLING ALGORITHM WILL BE APPLIED.

{NAME　　　　　　RACE}

CAPI INSTRUCTIONS: DISPLAY NAME AND RACE(S) FOR EACH ENUMERATED PERSON AS
DETERMINED AT SCQ.270, SCQ.280, or SCQ.282. INTERVIEWER MAY BACK-UP TO CORRECT.

BOX 3I

CHECK ITEM SCQ.282B:
IF SCQ.260 = CODE 1 (YES-HISPANIC), APPLY HISPANIC SAMPLING
ALGORITHM AND SKIP TO BOX 4. OTHERWISE, CONTINUE WITH BOX 3J.

BOX 3J

CHECK ITEM SCQ.282C:
IF AT LEAST ONE CODE IN SCQ.270 = CODE 3 (BLACK), APPLY
BLACK/AFRICAN AMERICAN SAMPLING ALGORITHM AND SKIP TO BOX 4.
OTHERWISE, CONTINUE WITH BOX 3K.

BOX 3K

CHECK ITEM SCQ.282D:
IF SCQ.270 = 2 (ASIAN) OR IF SCQ.280 = 1, APPLY ASIAN SAMPLING
ALGORITHM AND SKIP TO BOX 4. OTHERWISE, GO TO BOX 3L.

BOX 3L

CHECK ITEM SCQ.282E:
APPLY WHITE/OTHER SAMPLING ALGORITHM.

BOX 4

CHECK ITEM SCQ.285:
IF NO PERSON IN THE HOUSEHOLD IS "POTENTIALLY ELIGIBLE" FOR THE
STUDY BASED ON SAMPLING MESSAGES FOR ETHNICITY OR RACE, GO
TO SCQ.500; OTHERWISE, CONTINUE.

SCQ.290   What is {your/{NAME}'s} birthdate?

                          ____ ____ ____
                          MM   DD   YYYY   (SCQ.291)

                          DK... 9 (SCQ.292)
                          RF... 7 (SCQ.292)

            CAPI INSTRUCTIONS: IF DATE OF BIRTH IS SPECIFIED, CALCULATE AGE AND POST IN THE
            "AGE" CELL FOR THE APPROPRIATE PERSON WITH THE CURSOR RESIDING IN THAT CELL AND
            SCQ.291 DISPLAYED ABOVE THE HH COMPOSITION MATRIX; ELSE

            GO TO SCQ.292.

SCQ.291   So {you are/{NAME} is} {AGE AS CALCULATED FROM DOB}?

            IF NECESSARY, RE-ENTER CORRECT AGE.

            CAPI INSTRUCTIONS: IF AGE IS RE-ENTERED BY THE INTERVIEWER, THE APPLICATION
            SHOULD ADJUST DOB YEAR IF VALID VALUES FOR DOB MONTH AND DAY EXIST. IF DOB
            MONTH, DAY AND YEAR ARE RF OR DK, DO **NOT** BACK-FILL THE DOB YEAR BASED ON THE
            ENTERED AGE.

SCQ.292   How old {are you/is {NAME}}?

            IF AGE IS LESS THAN 12 MONTHS, ENTER RF.

                          ____
                          AGE   (SCQ.301)

                          DK... 999 (SCQ.300)
                          RF... 777 (SCQ.300)

SCQ.300   About how old {are you/is {NAME}}?

            {AGE RANGES FOR SAMPLED RACE/ETHNICITY = BLACK OR HISPANIC}/{AGE RANGES FOR
            SAMPLED RACE/ETHNICITY = ASIAN}/{AGE RANGES FOR SAMPLED RACE/ETHNICITY =
            WHITES/OTHERS}; {AGE RANGES FOR DK/RF RACE/ETHNICITY}

                          DK... 9999
                          RF... 7777

CAPI INSTRUCTIONS: DISPLAY QUESTION TEXT ABOVE THE HH COMPOSITION MATRIX WITH THE CURSOR RESIDING IN THE "AGE RANGE" CELL ON THE MATRIX.

AGE RANGE CATEGORIES

Black non-Hispanic	M&F	0-11 mos. 1-2 yrs. 3-5 yrs.	White/Other Low Income	M&F	0-11 mos. 1-2 yrs. 3-5 yrs.
	M	6-11 yrs. 12-19 yrs. 20-39 yrs. 40-49 yrs. 50-59 yrs. 60+ yrs.		M	6-11 yrs. 12-19 yrs. 20-29 yrs. 30-39 yrs. 40-49 yrs. 50-59 yrs. 60-69 yrs. 70-79 yrs. 80+ yrs.
	F	6-11 yrs. 12-19 yrs. 20-39 yrs. 40-49 yrs. 50-59 yrs. 60+ yrs.		F	6-11 yrs. 12-19 yrs. 20-29 yrs. 30-39 yrs. 40-49 yrs. 50-59 yrs. 60-69 yrs. 70-79 yrs. 80+ yrs.
Hispanic	M&F	0-11 mos. 1-2 yrs. 3-5 yrs.			
	M	6-11 yrs. 12-19 yrs. 20-39 yrs. 40-49 yrs. 50-59 yrs. 60+ yrs.	White/Other Not Low Income	M&F	0-11 mos. 1-2 yrs. 3-5 yrs.
	F	6-11 yrs. 12-19 yrs. 20-39 yrs. 40-49 yrs. 50-59 yrs. 60+ yrs.		M	6-11 yrs. 12-19 yrs. 20-29 yrs. 30-39 yrs. 40-49 yrs. 50-59 yrs. 60-69 yrs. 70-79 yrs. 80+ yrs.
Asian non-Black/ non-Hispanic	M&F	0-11 mos. 1-2 yrs. 3-5 yrs.		F	6-11 yrs. 12-19 yrs. 20-29 yrs. 30-39 yrs. 40-49 yrs. 50-59 yrs. 60-69 yrs. 70-79 yrs. 80+ yrs.
	M	6-11 yrs. 12-19 yrs. 20-39 yrs. 40-49 yrs. 50-59 yrs. 60+ yrs.			
	F	6-11 yrs. 12-19 yrs. 20-39 yrs. 40-49 yrs. 50-59 yrs. 60+ yrs.			

DISPLAY THE FOLLOWING SOFT EDIT THE FIRST TIME A DK OR RF IS ENTERED. ACCEPT THE SECOND ENTRY.

 "A missing value here may result in inconclusive sampling. Please re-enter the value to confirm."

ACCEPT THE SECOND ENTRY.

SCQ.301   WARNING: REVIEW AGE FOR EACH PERSON! SAMPLING ALGORITHM WILL BE APPLIED.

{NAME   AGE   RANGE}

CAPI INSTRUCTIONS: DISPLAY NAME AND AGE AS DETERMINED AT SCQ291, SCQ292, OR SCQ300 FOR EACH ENUMERATED PERSON. INTERVIEWER MAY BACK-UP TO CORRECT.

BOX 5

CHECK ITEM SCQ.303:
APPLY THE SAMPLING ALGORITHM. IF NO PERSON IN THE HOUSEHOLD IS "POTENTIALLY ELIGIBLE" FOR THE STUDY BASED ON SAMPLING MESSAGES FO AGE, GO TO SCQ.500; ELSE

CONTINUE.

BOX 6

CHECK ITEM SCQ.315:
IF SAMPLING MESSAGE FOR LOW INCOME IS SET, CONTINUE; ELSE

GO TO BOX 12.

BOX 7

CHECK ITEM SCQ.320:
IF SCQ.027 = YES (1), GO TO BOX 12; ELSE

CONTINUE.

BOX 8

CHECK ITEM SCQ.325:
IF **ALL** HOUSEHOLD MEMBER'S SAMPLED RACE/ETHNICITY = HISPANIC
(1) OR BLACK (2), GO TO BOX 12; ELSE

IF **ANY** HOUSEHOLD MEMBER'S SAMPLED RACE/ETHNICITY =
WHITE/OTHER (3) AND ONE OR MORE PERSON'S IN THE HOUSEHOLD
COULD MEET THE LOW INCOME SAMPLING CRITERIA AND THOSE
PERSONS ARE NOT **ALL** ACTIVE MILITARY, CONTINUE; ELSE

GO TO BOX 12.

BOX 9

CHECK ITEM SCQ.330:
IF **ALL** HOUSEHOLD MEMBERS WHO WOULD MEET THE LOW INCOME
SAMPLING CRITERIA ARE ALREADY SAMPLED BASED ON GENDER,
ETHNICITY, RACE, AGE OR ARE ACTIVE MILITARY, GO TO BOX 12; ELSE

CONTINUE.

SCQ.340   Think about all the sources of income received by all the members in this household during the last 12 months, that is from {CURRENT MONTH} {LAST YEAR IN 4-DIGITS} to {LAST MONTH} {CURRENT YEAR IN 4-DIGITS}. Was the total income more or less than {DISPLAY EXACT THRESHOLD DOLLAR AMOUNT FOR # OF PEOPLE LIVING IN HOUSEHOLD}?

CAPI INSTRUCTIONS: DISPLAY 1.85 TIMES THE AMOUNT IN TABLE BELOW (185%) FOR THE 48 CONTIGUOUS STATES AND THE DISTRICT OF COLUMBIA OR HAWAII BASED ON THE SAMPLE ADDRESS.

INCOME THRESHOLDS:

	2019 Poverty Guidelines	
Persons in family	**The 48 contiguous states and the District of Columbia**	**Hawaii**
1	$12,490	14,380
2	16,910	19,460
3	21,330	24,540
4	25,750	29,620
5	30,170	34,700
6	34,590	39,780
7	39,010	44,860
8	43,430	49,940
For families/households with more than 8 persons: • add $4,420 for each additional person for the 48 contiguous states and the District of Columbia • add $5,080 for each additional person for Hawaii.		

SOURCE: *Federal Register No. 84FR1167, February 1,2019, pp. 1167-1168*

INTERVIEWER INSTRUCTIONS: IF INCOME EQUAL TO {DISPLAY EXACT THRESHOLD DOLLAR AMOUNT FOR # OF PEOPLE LIVING IN HOUSEHOLD}, CODE 'LESS'.

MORE .... 1 (BOX 12)
LESS .... 2 (BOX 12)
DK.. 9
RF 7

BOX 10

CHECK ITEM SCQ.345:
IF **ANY** CHILDREN IN HOUSEHOLD <6 YEARS OLD, CONTINUE; ELSE

GO TO BOX 12.

BOX 11

CHECK ITEM SCQ.347:
IF **ANY** MALES IN HOUSEHOLD >18, GO TO BOX 12; ELSE

TREAT HOUSEHOLD AS LOW INCOME FOR PURPOSES OF SAMPLING.

BOX 12

CHECK ITEM SCQ.355:
IF **ANY** INDIVIDUAL MEETS THE SPECIFIED SAMPLING CRITERIA BASED ON GENDER, ETHNICITY, RACE, AGE; OR INCOME LEVEL **AND** IS **NOT** ON ACTIVE MILITARY STATUS, GO TO SCQ.370; ELSE

IF SAMPLING FOR ALL INDIVIDUALS IS INCONCLUSIVE DUE TO CONFIRMED MISSING DATA (DK/RF) IN THE CRITICAL SAMPLING VARIABLES, GO TO SCQ.500, THEN TERMINATE THE SCREENER WITH AN ASSIGNED STATUS OF "INCOMPLETE"; ELSE

GO TO SCQ.500.

SCQ.370   THIS HOUSEHOLD HAS ELIGIBLE SURVEY PARTICIPANTS.

THE ELIGIBLE PERSON(S) SAMPLED IN THIS HOUSEHOLD ARE:

{UNIQUE NAMES, GENDERS, ETHNICITIES RACES, AGES OF SAMPLED PERSONS}

CAPI INSTRUCTIONS: SINCE THE SAMPLING ALGORITHM HAS BEEN RUN FOR THE LAST TIME, BACK-UP IS NOT ALLOWED AFTER THIS SCREEN.

SCQ.420   Is {REFERENCE PERSON}'s mailing address the same as {his/her} street address?
SFQ.220

YES 1 (SCQ.500)
NO 2 (SCQ.425)
DK.. 9 (SCQ.500)
RF.. 7 (SCQ.500)

SCQ.425
SFQ.225
  Please give me {REFERENCE PERSON}'s complete mailing address.

    HARD EDIT: IF "PO BOX" OR "P.O. BOX" IS ENTERED IN THE ADDITIONAL ADDRESS LINE, STREET #, OR STREET NAME FIELDS, DISPLAY "DO NOT ENTER P.O. BOX INFORMATION IN THIS FIELD. DELETE P.O. BOX FROM FIELD AND SELECT "PO BOX" FROM THE UNIT/APT/BLDG DROP DOWN MENU. ENTER THE P.O. BOX NUMBER IN THE UNIT # FIELD."

    HARD EDIT: IF "PO BOX" IS SELECTED FROM THE UNIT/APT/BLDG DROP DOWN MENU AND TEXT IS ENTERED IN THE ADDITIONAL ADDRESS LINE, STREET #, OR STREET NAME FIELDS, OR AN ITEM IS SELECTED FROM DIR PRE, ST/RD/AVE OR DIR POST DROP DOWN MENUS, DISPLAY, "DO NOT INCLUDE STREET ADDRESS INFORMATION WHEN SELECTING PO BOX AS THE MAILING ADDRESS. DELETE ALL STREET ADDRESS INFORMATION OR REMOVE P.O. BOX INFORMATION TO CONTINUE. IF THE ADDRESS IS A BOX OTHER THAN A P.O. BOX, SELECT "BOX" FROM THE DROP DOWN MENU."

    {#} {DIRECTION} {STREET NAME} {STREET/ROAD/AVENUE} {DIRECTION} {#}
    {PO BOX} {RURAL ROUTE #} {RURAL ROUTE BOX} {CITY} {STATE} { ZIP}

    CAPI INSTRUCTIONS: DISPLAY THE COMPLETE ADDRESS OF THE HOUSEHOLD AS COLLECTED IN SCQ070 OR SCQ080 AND ALLOW UPDATES IN ALL FIELDS. IF UPDATES ARE MADE, STORE THIS ADDRESS AS THE MAILING ADDRESS. IF NO UPDATES ARE MADE, RESET SCQ.420 TO "NO" AND CONTINUE TO SCQ.500.

SCQ.500 Other than me (or my colleague) talking to you about the survey, have you ever heard about the National Health and Nutrition Examination Survey?

    INTERVIEWER: READ 'OR MY COLLEAGUE' IF ANOTHER INTERVIEWER HAS VISITED THE HOUSE.

            YES 1 (SCQ.510)
            NO.. 2 (SCQ.520* or
            SCQ.430)
            DK .... 9 (SCQ.520* or
            SCQ.430)
            RF .... 7 (SCQ.520* or
            SCQ.430)

CAPI INSTRUCTION:
    DISPLAY QUESTION FOR 2019 AND/OR IF SOCIAL MEDIA PILOT ACTIVE IN STAND.
    SKIP TO SCQ.520 IF SOCIAL MEDIA PILOT IS ACTIVE IN STAND. OTHERWISE SKIP TO SCQ.430.

SCQ.510   From where did you hear about the survey?

CODE ALL THAT APPLY
HAND CARD #3

TV..	1
RADIO...	2
NEWSPAPER (PRINT OR ONLINE)......	3
SOCIAL MEDIA	4
OTHER WEBSITE	5
WORD OF MOUTH (HEARD FROM FAMILY, FRIENDS, OR CONTACTS)....	6
OTHER..	7
DK	99
RF	77

HELP SCREEN:
Social media refers to interactive electronic platforms that allow users to share ideas and information with a network of contacts (popular sites include Facebook, Twitter, Reddit, Snapchat, LinkedIn, etc.).

CAPI INSTRUCTION:
DISPLAY QUESTION FOR 2019 AND/OR IF SOCIAL MEDIA PILOT ACTIVE IN STAND.

SCQ.520   Do you have at least one social media account?

YES..	1
NO...	2
DK	9
RF	7

HELP SCREEN:
The term social media account is used to describe a person having an account on one of the social media platforms such as Facebook, Twitter, Reddit, Snapchat, LinkedIn, etc.

CAPI INSTRUCTION:
DISPLAY QUESTION ONLY IF SOCIAL MEDIA PILOT ACTIVE IN STAND.

SCQ.530   Did you or someone in your household see an ad for the National Health and Nutrition Examination Survey on Facebook or Instagram?

HARDCARD #4

YES..	1
NO...	2
DK	9
RF	7

CAPI INSTRUCTION:

        DISPLAY QUESTION ONLY IF SOCIAL MEDIA PILOT ACTIVE IN STAND.

SCQ.540   {Would seeing these ads on Facebook or Instagram/Did these ads} motivate you to learn more about the National Health and Nutrition Examination Survey?

YES	1
NO	2
DK	9
RF	7

        CAPI INSTRUCTION:
        IF SCQ.530=1, FILL "Did these ads"
        IF SCQ.530=2,9, OR 7, FILL "Would seeing these ads on Facebook or Instagram"

CAPI INSTRUCTION:

        DISPLAY QUESTION ONLY IF SOCIAL MEDIA PILOT ACTIVE IN STAND.

SCQ.430   Please give me your home telephone number in case my office wants to check my work.
SFQ.230

        (_____) - _____ - _____ - _____
        HOME TELEPHONE NUMBER   (SCQ.440a)

NO HOME TELEPHONE	2	(SCQ.460)
DK	9	(SCQ.460)
RF	7	(SCQ.460)

        CAPI INSTRUCTIONS: THE FIELD FOR "EXTENSION" IS ALLOWED TO BE BLANK.

SCQ.440a   In whose name is the telephone listed?
SFQ.240a

        INTERVIEWER INSTRUCTION: SELECT NAME FOR TELEPHONE LISTING FROM HOUSEHOLD ROSTER.

        _____   _____
        FIRST   LAST   (BOX 13)

UNLISTED	1	(BOX 13)
NOT ON LIST	2	(SCQ440b)
DK	9	(BOX 13)
RF	7	(BOX 13)

        CAPI INSTRUCTIONS: THE DEFAULT FILL FOR THE "NAME" FIELD SHOULD BE THE FIRST, LAST, AND SUFFIX NAME OF THE REFERENCE PERSON. HOWEVER, MOVING THE FOCUS OF THE CURSOR OVER THE "NAME" FILL PRODUCES A LIST DISPLAYING THE FIRST AND LAST NAMES OF ALL HH MEMBERS ON THE HH COMPOSITION MATRIX AND THE OPTIONS OF "UNLISTED", AND "NOT ON LIST".

SCQ.440b   [In whose name is the telephone listed?]
SFQ.240b

INTERVIEWER INSTRUCTION: ENTER NAME.

Name   _____   _____
{FIRST}   {LAST}   (BOX 13)

SCQ.460   Is there another number where you can be reached?

(_____) - _____ - _____ - _____
OTHER TELEPHONE NUMBER   (SCQ461)

NO .... 2 (BOX 13)
DK.. 9 (BOX 13)
RF.. 7 (BOX 13)

CAPI INSTRUCTIONS: THE FIELD FOR "EXTENSION" IS ALLOWED TO BE BLANK.

SCQ461   Where is that telephone located?

WORK 1
RELATIVE'S HOME 2
NEIGHBOR'S HOME................................... 3
CELL PHONE... 4
OTHER 5
DK.. 9
RF.. 7

BOX 13

CHECK ITEM SCQ.465:
IF THIS IS AN INELIGIBLE HOUSEHOLD, GO TO BOX 13A; ELSE
IF THIS IS AN ELIGIBLE HOUSEHOLD, GO TO SCQ_END2; ELSE
IF THIS IS A BREAK-OF, GO TO SCQ_END3 AND REQUIRE ENTRY OF
   DISPOSITION; ELSE
IF MISSING CRITICAL SAMPLING DATA, GO TO SCQ_END4; ELSE
IF SCQ.070 (ADDRESS VERIFICATION) IS "NO (WRONG ADDRESS)"; GO TO
   SCQ_END 5.

BOX 13A

CHECK ITEM SCQ.545:
IF CASE IS SELECTED FOR MDU PROCEDURE, CONTINUE TO SCQ.560;
ELSE GO TO SCQ_END1.

SCQ.560   We want to be sure that every household in this area has been given a chance to participate in this important survey. Are there any other living quarters here that we may have missed?

```
                        YES ......................................................  1
                        NO.........................................................  2  (SCQ_END1)
                        DK .........................................................  9  (SCQ_END1)
                        RF .........................................................  7  (SCQ_END1)
```

CAPI INSTRUCTION: DISPLAY IF CASE SELECTED FOR MDU PROCEDURE.

SCQ.570   COMPLETE THE HIDDEN DU FORM.

```
                        FORM COMPLETE................................  1
                        DK .........................................................  9
                        RF .........................................................  7
```

SCQ_END1   Thank you for your responses today {and if you had already answered these questions online}. No members of this household were selected for further participation in the survey.

CAPI INSTRUCTIONS:
IF THE CASE IS FLAGGED FOR WEBSCREENING (WEB_SCREENER FROM SAM_DU TABLE = YES), DISPLAY "and if you had already answered these questions online".

BOX 14A

CHECK ITEM SCQ.645:
IF CASE IS FLAGGED FOR THE PROMISED INCENTIVE, CONTINUE.
OTHERWISE GO TO BOX 14

CCQ.010   As a thank you for answering these questions, will you accept a ${INCENTIVE} debit card today?

DID THE RESPONDENT ACCEPT THE INCENTIVE?
```
                        YES ...............................................................  1
                        NO .................................................................  2  (BOX 14)
```

CAPI INSTRUCTIONS:
IF THE CASE IS FLAGGED FOR THE PROMISED SCREENER OR PROMISED SP INCENTIVE, DISPLAY INCENTIVE AMOUNT.

DISPLAY QUESTION ONLY IF INCENTIVE PILOT ACTIVE IN STAND.

CCQ.020   TAKE OUT A NEW DEBIT CARD FROM YOUR SUPPLY .

OPEN THE ENVELOPE.

SHOW THE RESPONDENT THE DEBIT CARD ATTACHED TO THE CARRIER SHEET.

Here is your Health Study debit card. This debit card is a VISA© Card and is accepted anywhere VISA©

is accepted. The card cannot be used to withdraw money from an ATM. Your payment will be available

for use on the card within 3 business days. You can find answers to most commonly asked questions

on the card carrier sheet along with phone numbers to call for additional information.

SCAN BARCODE OR MANUALLY ENTER THE 13 DIGIT NUMBER SHOWN ON THE CARD CARRIER

SHEET.
CAPI INSTRUCTION:
EDIT CHECK: ENTRY MUST BE 13 DIGITS. IF NOT, DISPLAY "THE BARCODE NUMBER SHOULD BE 13 DIGITS. PLEASE RE-ENTER OR CONFIRM YOU ARE SCANNING THE CORRECT BARCODE."

DISPLAY QUESTION ONLY IF INCENTIVE PILOT ACTIVE IN STAND.

BOX 1

CHECK ITEM CCQ.025:

IF NUMBER ENTERED USING SCANNER, SKIP TO CCQ.040.
IF NUMBER MANUALLY ENTERED, CONTINUE.

CCQ.030   RE-ENTER THE 13 DIGIT NUMBER SHOWN ON THE CARD CARRIER SHEET.

CAPI INSTRUCTION:

EDIT CHECK: THE NUMBER ENTERED IN CCQ.030 MUST MATCH THE NUMBER ENTERED IN CCQ.020. IF NUMBERS DO NOT MATCH, DISPLAY "THE TWO BARCODE NUMBERS DO NOT MATCH, PLEASE CHECK ENTRIES."

DISPLAY QUESTION ONLY IF INCENTIVE PILOT ACTIVE IN STAND.

CCQ.040   RECORD THE NAME OF THE CARD RECIPIENT AND THE AMOUNT ADDED TO THE CARD ON THE CARD CARRIER SHEET.

NAME AND AMOUNT RECORDED.......   1

CAPI INSTRUCTION:
DISPLAY QUESTION ONLY IF INCENTIVE PILOT ACTIVE IN STAND.

CCQ.050   TO WHOM DID YOU GIVE THE CARD?
            CARD RECIPIENT   _____
                        {FIRST NAME} {LAST NAME}

            CAPI INSTRUCTIONS:
            WHEN THE FOCUS OF THE CURSOR IS ON THE "CARD RECIPIENT" FIELD, THE ANSWER
            CHOICES SHOULD BE A LIST THAT DISPLAYS FIRST AND LAST NAMES OF ALL HH MEMBERS
            ON THE HH COMPOSITION MATRIX. THE LIST SHOULD BE SORTED BY ORDER ON ROSTER.

            DISPLAY QUESTION ONLY IF INCENTIVE PILOT ACTIVE IN STAND.

BOX 14

CHECK ITEM SCQ.575:
GO TO RIQ.010

SCQ_END2   Thank you for your responses today {and if you had already answered these questions online}. This
            household has eligible survey participants.

            [READ NAMES LISTED BELOW.]

                {UNIQUE NAMES, GENDERS, AGES OF SAMPLE PERSONS}

            [IF APPROPRIATE, EXPLAIN PARTICIPATION IN STUDY TO RESPONDENT.]

            CAPI INSTRUCTIONS:
            IF THE CASE IS FLAGGED FOR WEBSCREENING (WEB_SCREENER FROM SAM_DU TABLE =
            YES), DISPLAY "and if you had already answered these questions online".

SCQCONT   PERFORM THE RELATIONSHIP INTERVIEW AT THIS TIME?

                                YES .... 1 SCQ_MODULE 2)
                                NO 2 (RIQ.010)

            CAPI INSTRUCTIONS: IF CODED "YES" (1), UPON LEAVING THIS SCREEN, LAUNCH MODULE 2
            OF THE SCREENER, COLLECTING RELATIONSHIP INFORMATION.

RIQ.010   SELECT RESPONDENT FOR THE SCREENER MODULE 1 – HOUSEHOLD COMPOSITION.

            Respondent   _____
                        {FIRST NAME} {LAST NAME}

            CAPI INSTRUCTIONS: WHEN THE FOCUS OF THE CURSOR IS ON THE "RESPONDENT" FIELD,
            THE ANSWER CHOICES SHOULD BE A LIST THAT DISPLAYS FIRST AND LAST NAMES OF ALL
            HH MEMBERS ON THE HH COMPOSITION MATRIX.

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┌─────────────────────────────────────────────────────────────────────┐
│                              BOX 15                                   │
│                                                                       │
│ CHECK ITEM SCQ.585:                                                   │
│ GO TO INTERPRETER MODULE – INT_END1.                                  │
└─────────────────────────────────────────────────────────────────────┘
```

SCQ_END3   Thank you.

            SCQEND3 PROGRAMMER SPEC: AFTER EXITING FROM THIS SCREEN, PRESENT THE LIST OF
            DISPOSITIONS AND DO NOT ALLOW EXIT FROM THE APPLICATION WITHOUT ENTRY OF A
            DISPOSITION.

SCQ_END4   Thank you.

            [EXPLAIN TO RESPONDENT THAT YOU WILL NEED TO RETURN TO THE HOUSEHOLD TO
            COLLECT CRITICAL INFORMATION THAT WAS NOT PROVIDED THIS TIME.]

SCQ_END5   Thank you.

            LOCATE CORRECT ADDRESS AND RESTART SCREENER.

SCQ_END6   Thank you.

            IDENTIFY HOUSEHOLD RESIDENT WHO IS 18 YEARS OR OLDER.

            CAPI INSTRUCTION: KEEP SCREENER DISPOSITION AS 'NOT WORKED'.