



National Health and Nutrition Examination Survey (NHANES)

MEC Interviewers Procedures Manual



January 2016

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Overview of the MEC Interview Component

1

The Mobile Examination Center (MEC) Interview component of the NHANES consists of the use of questionnaires to address a variety of health-related topics. The MEC questionnaires are designed to obtain information concerning particular health behaviors and conditions, risk factors, and mental health. The questionnaires are administered to examinees 8 years of age or older. The MEC Interview is designed to be administered only with the study participant (SP) in the room.

1.1 Purpose of the MEC Questionnaires

There are three sections of the NHANES MEC Interview. The first section consists of questions in several topic areas administered through a computer-assisted personal interviewing (CAPI) system. The individual questionnaire health-related sections in CAPI are selectively administered to subjects based upon their age and sex. This section also consists of a series of questions about exposures to chemicals called volatile organic compounds (VOCs). The VOC questions are selectively administered based upon age and whether the SP is selected for the VOC subsample.

The second section of the interview is completed through the use of an audio computer-assisted-self-interviewing (ACASI) system. This system is generally used for sensitive topic areas. The subject listens to a recorded voice through a headset, as well as reading the questions on the screen. The subject then indicates his or her response to a question by touching the computer screen.

The third section of the interview is used to obtain and/or verify key pieces of demographic information or critical data items (CDI).

Questions in each of these sections are included for specific reasons, which relate to other NHANES components. For example, alcohol consumption and tobacco use are included since previous research has demonstrated that these risk factors may affect other health functions. The main purpose of the reproductive health section is to obtain information on pregnancy and reproductive history, birth control practices, and other reproductive health-related topics. The drug use questionnaire provides a brief assessment of the subject's use of marijuana, cocaine, and injectable street drugs.

1.2 Role and Responsibilities of the MEC Interviewer

As a MEC interviewer, you are to administer the MEC Questionnaires in a standardized fashion. You must be able to obtain cooperation of the SP in a friendly yet professional manner, in order to gain and maintain his or her focus on the various details of the MEC Interview. Since many of the topics covered in the interview are of a sensitive nature, SPs may be reluctant to respond to certain items. Therefore, an important aspect of your role is to establish a working relationship with each SP and to maintain that rapport throughout the entire interview. You must provide a supportive environment with proper encouragement and reassurances in order to avoid invalid results.

Especially in the case of children, the absence of a parent or guardian allows children to answer questions about themselves freely without feeling embarrassed or pressured. However, parents may have questions about the conduct of the interview and about the kinds of questions we will ask their child. A few parents may object to leaving their child alone to conduct the interview and, as with the case of any component for their child, they have the right to refuse participation. It is your role as an interviewer to be open and honest with parents about the questions their child will receive so that the parent can make an educated decision about whether their child should participate in the interview. If parents have questions or concerns, invite them to your room or a room not in use where you can sit down and address them privately. You can show the list of the age-specific CAPI and ACASI sections to the parent and describe the section topics without giving too much detail about questions so as to not negatively influence the parent's agreement to have the child participate. If the parent asks for additional information, it is acceptable to give an example of the questions asked. However, if the parent is not comfortable with leaving the child, do not try to convince him or her otherwise and code the interview as a refusal. Below are sample responses to questions that parents may have about the interview.

Why do you need to conduct the interview in private?

“Some of the questions ask your child to give his or her personal feelings. Your presence in the room may influence his or her responses. Conducting the interview with your child in private allows him or her to feel comfortable about answering the questions honestly. All of the questions we ask your child are age and gender specific.”

What kind of questions will you ask him or her?

Use the interview section list that is specific to children. You can show the list to the parent and explain and point out the sections the child will receive based on age and gender. Describe the section topics without giving too much detail about questions so as to not negatively influence the parent's agreement to have the child participate. However, if the parent asks for additional information, it is acceptable to give an example of the questions asked:

Examples:

- **Weight history.** “We will ask questions about how your child feels about his or her weight, if he or she has tried to lose weight and, if so, why.”
- **Reproductive health.** “We will ask your daughter questions about her period and a few other questions about her reproductive health.”
- **Depression screener.** “We will ask your child if he or she has experienced various symptoms that are linked to depression.”

You also provide an important link between the researchers who have developed the questionnaire as a means of characterizing the sample population and the SPs whose individual answers provide the data for the researchers to analyze. Moreover, you must be able to ensure that each SP hears and understands every item, and that each SP provides full and meaningful responses. Then you must record all responses precisely while maintaining interaction and rapport with the participant.

The quality of the data obtained in the MEC Interview depends on a high degree of consistency among interviewers in their presentation of the interview content and in their recording of the responses. In this way, the information gathered by different MEC Interviewers can be combined to create a valid and reliable characterization of the respondents' health behaviors, attitudes, and experiences.

1.3 Procedures for Administering the MEC Interview

Initially, you must create a warm, accepting, and private setting in which to interview. In greeting each SP by name, and introducing yourself to each SP, you convey a positive regard for the SP. After welcoming the SP and logging him or her into the system, answer any questions or concerns an individual may have prior to the start of the interview. If an SP asks for a description of the types of questions asked in the MEC Interview, keep the description of those questions quite general. Due

to the variety of questions and the sensitive nature of certain items, a detailed explanation of the topic areas may intimidate the SPs or negatively influence their participation. Tell the respondent that the questionnaire includes numerous items within several health-related areas, and that most items require only short answers or simply Yes/No responses, while a few ask for more complete answers. Emphasize that each part of the questionnaire will be explained in more detail as the interview progresses. Encourage the SP to feel free to ask for clarification on any part of the interview that seems unclear or confusing. Assure the SP that there are no right or wrong answers to the questionnaire items. Then, proceed with presenting the questionnaire items in their designated sequence.

1.4 Description of the MEC Questionnaires

The MEC Interview consists of questions on a variety of health-related behaviors, attitudes, and risk factors. As mentioned earlier, each section of the MEC Interview is targeted for a specific age or age/sex group, or subsample.

The sequence of the topics covered in the MEC Interview is designated for each age/sex target group as displayed in Table 1-1.

1.5 Data Collection Materials

Data collection for the NHANES MEC Interview entails the use of a computer-based interview program.

In addition to the computer-based interview, there are hand cards, female hormone charts, and a list of female hormones, which are used by SPs to help recall dates and to provide the SP with appropriate response categories.

The MEC questionnaires have been programmed to permit computerized administration and recording. The question-by-question specifications, which are provided in Chapter 4 of this manual, should be used as a study guide to help you learn the intent of each question prior to the start of the main study, and as a reference once the main study and the interviewing have begun.

Table 1-1. MEC questionnaire topics and eligibility by age and sex.

	Questionnaire section order	Eligibility by age/sex
Blaise-CAPI	Respondent Selection Section (RIQ) ^{1,2}	SPs 8+
	Volatile Toxicant (VTQ) ^{1,2}	Half sample of SPs 12+
	Pesticide Use (PUQ) ^{1,2}	SPs 8+
	Current Health Status (HSQ) ^{1,2}	SPs 12+
	Depression Screen (DPQ) ²	SPs 12+
	Tobacco (SMQ) ^{1,2}	SPs 12+
	Alcohol (ALQ) ^{1,2}	SPs 18+
	Reproductive Health (RHQ) ^{1,2}	Female SPs 12+
	Kidney Conditions (KIQ) ^{1,2}	SPs 20+
	Physical Activity (PAQ) ^{1,2}	SPs 12-15
	Weight History (WHQ) ³	SPs 8-15
Audio-CASI ⁴	Tobacco (SMQ)	SPs 12-17
	Alcohol (ALQ)	SPs 12-17
	Drugs (DUQ)	SPs 12-69
	Sexual Behavior (SXQ)	SPs 14-69
	Pubertal Maturation (PMQ)	SPs 8-19
Critical Data Items (CDI) ^{1,2}		12+ (collected during the interview)
		0-11 (collected via a separate utility)

¹ May be administered as a proxy interview.

² May be administered through any interpreter.

³ May be administered through a paid interpreter.

⁴ May not be administered as a proxy interview.

Equipment, Supplies, and Materials

2

2.1 Description of the MEC Interview Room and Computer Equipment

The two interview rooms in each mobile examination center (MEC) are equipped with a desk upon which the PC rests, and chairs for the interviewer and study participant (SP).

The interview rooms have sliding doors that are closed for privacy during the interview. The door remains closed for the audio-CASI portion of the interview, when the interviewer leaves the room.

The PC monitor, keyboard, microphone, and mouse rest on top of the desk, while the CPU is housed under the desk. As the connections to the CPU are on the SP's side of the desk, it is important that the SP does not touch, bump, or otherwise come in contact with the hardware.

For the CAPI sections of the interview, the PC is oriented toward the interviewer, while for the audio-CASI section and a portion of the cognitive functioning section, the monitor faces the SP. The monitor can be easily turned to face the SP at the appropriate time. The keyboard and mouse are for the interviewer's use only.

The SP uses the PC's monitor to record his or her responses to the audio-CASI questions, as the monitor is equipped with a touch screen. The touch screen is not used for any portions of the interview other than audio-CASI.

The SP listens to the audio-CASI questions through a set of headphones that are plugged into the monitor. Volume control buttons on the monitor control the volume for the headphones. Should the SP decline the use of the headphones, or should there be some other reason why headphones cannot be used for an SP, the headphones can be unplugged from the monitor.

A wall-mounted cabinet is located on the wall to the left of the interviewer. It holds extra supplies and is used to secure interviewing materials and equipment when the MEC is traveling from one stand to the next.

2.2 MEC Interview Supplies and Other Equipment

The following supplies and noncomputer equipment are used in the MEC Interview:

- Hygienic earphone covers;
- Sanitizing disposable wipes;
- Tissues;
- Dry erase marker pens;
- Solar-powered calculator;
- Microphone;
- English/Spanish dictionary; and
- Hand-held mirror.

2.2.1 Description and Use of Interview Supplies

Earphone Covers. The phone guards' hygienic earphone covers are used during the audio-CASI portion of the interview. Change the earphone covers for each SP, and then dispose of the used covers.

Sanitizing Disposable Wipes. The Purell sanitizing wipes are used to clean the hand cards.

Tissues. Tissues are provided as a general supply for use as needed.

Dry Erase Marker Pens. Pens are used to mark the reference period on the calendar hand cards.

Calculator. The solar-powered calculator is available for use by either the SP or interviewer to provide assistance in answering questions, particularly in the reproductive health portion of the CAPI interview.

Microphone. The microphone is used for recording SPs' responses during the cognitive functioning section of the interview. SPs' responses are scored by the interviewer at a later time. There is one microphone per interviewer and one backup per MEC.

English/Spanish Dictionary. An English/Spanish dictionary is provided as a reference for the interviewers.

Hand-held mirror. A hand-held mirror is provided to some SPs during the interview in case it is needed.

2.3 MEC Interviewer Materials

The interviewing materials needed for successful completion of your responsibilities as a MEC interviewer include:

- Navigational Functions – Quick Reference;
- Hand cards;
- Interviewer reference cards;
- Probe sheets (3);
- Laminated listing of hormone types;
- Female hormone chart;
- The NHANES informational brochure and form for Consent/Parental Permission/Assent;¹
- The Child Assent brochure and form;¹
- The Stored Specimen and Future Research Consent/Parental Permission/Assent Form.¹

The specific use of these items will be discussed in Chapters 3–6 of this manual.

2.4 Inventory, Equipment Setup, and Teardown Procedures

At the conclusion of each stand, you will complete an end-of-stand (EOS) inventory count of materials, equipment, and supplies required for the MEC Interview. Accurate counting is essential since the home office uses the information to ensure that sufficient quantities of replacement

¹ Forms not included on MEC Interview inventory sheets. The MEC manager supplies forms as needed.

supplies are shipped and to track supply usage and costs. When the inventory is complete, each examination room must be packed and all equipment secured for travel to the next stand.

Upon arrival at the next stand, all equipment and supplies must be unpacked and set up in preparation for the start of examinations at the new stand. Shipments of replenishment supplies must be verified against the packing list.

2.4.1 MEC Interview Room Teardown Procedures

Following is the list of tasks (and the responsible staff person) required to prepare the room for travel (Exhibit 2-1).

Exhibit 2-1. Teardown tasks

Task	Responsible staff person
1. Unplug keyboard, mouse, bar code wand, speakers, and headphones. Store the keyboard on the monitor stand with the monitor pressed down to hold it in place. Place the remaining items in one of the hanging wall holders. Do not put computer equipment in the component boxes or cabinet because the facilities and equipment specialist (FES) needs to be able to locate these items easily for setup.	Interviewer
2. Cover the computer monitor with the padded cozy and secure to the wall using the bungee cord provided.	Interviewer
3. Secure the telephone handset to the base with two rubber bands.	Interviewer
4. Each interviewer should pack the smaller supplies (i.e., dry erase markers, calculator, hand cards/charts, ink pens, Post-its, notebook) for their room in a large plastic bag.	Interviewer
5. Pack larger loose supplies (i.e., box of earphone covers, tissues, wet cleaning cloths) in cabinet and plastic storage containers. Fragile items (i.e., microphone, wall clock) should be wrapped in bubble wrap before being stored in the cabinet or plastic storage container.	Interviewer
6. Do not place heavy materials like manuals in the cabinet as they can shift during transit and fall out when opening the cabinet door. Place manuals in the clear multipurpose bin under the desk and secure it for travel.	Interviewer
7. Secure cabinet doors with Velcro strips.	Interviewer
8. Secure chairs for travel by placing on side and wedging them between the wall and desk.	Interviewer
9. Lock room door in open position for travel.	Interviewer

2.4.2 MEC Interview Room Setup Procedures

The following list of tasks (and responsible staff member) comprises setup procedures for the MEC Interview room (Exhibit 2-2).

Exhibit 2-2. Setup tasks

Task	Responsible staff person
1. Unpack computer monitor.	FES
2. Connect computer equipment (monitor, CPU, keyboard, wand, mouse, speaker).	FES
3. Remove rubber bands from telephone handset.	Interviewer
4. Unpack larger loose supplies (box of earphone covers, tissues, wet cleaning cloths) from cabinet and plastic storage containers.	Interviewer
5. Unpack smaller interviewing supplies (i.e., dry erase markers, calculator, hand cards/charts, ink pens, Post-its, notebook) from the large plastic bag.	Interviewer
6. Set up chairs.	Interviewer
7. Unlock room door.	Interviewer

Conducting the MEC Interview

3

The Mobile Examination Center (MEC) Interview component consists of an interview and associated tasks that are performed before the start and at the conclusion of the actual interview. This chapter details the sequence of tasks that compose the interview component.

3.1 Component Tasks

In your role as an NHANES MEC interviewer, you will be responsible for performing the following tasks:

1. Obtaining minor assent to participate in the study;
2. Obtaining minor assent for specimen storage and future research;
3. Logging in study participants (SPs);
4. Conducting the interview;
5. Completing/verifying critical data items; and
6. Ending the interview.

You will conduct Tasks 3, 4, and 6 with each SP 8 years of age or older. Tasks 1 and 2 depend upon the age of the SP and whether or not the information was collected successfully by one of the NHANES field interviewers. Task 5 is completed for all SPs 12 years of age and older. Each of these tasks is described in more detail in the sections that follow.

3.2 Obtaining Minor Assent to Participate

Like all research studies, NHANES has established procedures for informing subjects of what participation in the study involves, including procedures for documenting that informed consent has been obtained. In NHANES, the field interviewers have primary responsibility for ensuring that informed consent to participate in the examination portion of the study is obtained prior to the SP's

arrival at the MEC. The SP's parent or guardian must give **consent** for minors aged 7-17 years AND the SP must also give his or her written **assent** to participate.

Because all SPs must sign the form in the **presence of an interviewer**, a small number of minors may arrive at the MEC without having completed the required assent form. If the child is not at home when the field interviewer obtains parental consent, the interviewer cannot leave the form for the child to sign and bring to the MEC. In this event, it is your responsibility as the MEC interviewer to obtain assent in the MEC before any examination procedures are performed. The MEC coordinator will determine whether minor assent is required for an SP at the time the SP arrives at the MEC and will inform you of the need to obtain assent. After greeting the SP and escorting him or her to the MEC interview room, proceed with obtaining assent as described in this section.

There are **two** separate SP Consent/Assent Brochures:

- An NHANES Examination Brochure and SP Consent/Assent/Parental Permission form for SPs 12 years or older and parents of SPs under 18; and
- An NHANES Child Examination Assent Brochure and Assent Form for SPs 7–11 years old.

Both brochures consist of several pages of informational text. In the back pocket of the brochure for SPs 12 years or older is a Consent/Assent form. In the back pocket of the Child MEC Assent brochure for SPs 7-11 years old is an Assent form. The sequence of pages within the brochures and the placement of the Consent/Assent forms at the end ensures that the SP and/or the parent of the SP has read the text of the brochure before he or she signs the Consent/Assent form. The paragraphs that follow provide a specific explanation of each brochure and form.

NHANES Examination Brochure and SP Consent/Assent/Parental Permission Brochure for SPs 12 or Older and Parents of SPs under 18 – Exhibit 3-1

The text of this brochure addresses three general topics:

- A general explanation of the structure and goals of the survey;
- Questions and answers directed toward the examination process, how the data will be used, and the voluntary nature of the study; and

- A general explanation of the health examination. A list of the specific examinations SPs in each age group will receive and which exam results will be reported to the SP is included on a separate sheet that is inserted in the front pocket of the folder. This format allows the sheet to be updated as components are added to or dropped from the survey, or when pilot studies are conducted in selected stands.

The brochure contains pictures of a diverse group of people in various interview and examination situations.

The **Consent/Assent and Parental Permission for the Examination at the Mobile**

Examination Center is a separate form inserted in the back pocket of this brochure and is printed on 3-part paper. An example of the text of this appears on page 3-12.

The form has several areas **for signatures**. Use the following guidelines to complete the assent and signature process **for SPs 12-17 years old**.

- Ask the SP to read the brochure. Introduce each section briefly and then wait while the SP reads the text. For example, introduce the first section of the brochure with a statement such as “This first page tells you about the purpose of the study.” If you have any doubt about the SP’s ability to read or understand the text, read the brochure to the SP.
- **Print** the name of the SP on the line provided.
- Have the **SP** read the statement, then **sign** and date the form in the column on the right labeled **“SURVEY PARTICIPANT WHO IS 12 YEARS OLD OR OLDER.”**
- If the SP does **not** wish to receive the results of the exam, he or she must check the box next to the statement provided.
- Write your name on the line titled “Name of staff member present when this form was signed.”
- “Witness (if required)” refers to any witness used during the consent process. For example, if a respondent cannot read, read the whole brochure to him or her in the presence of a witness. If a respondent cannot read or write, have a witness testify that the respondent has been read the form information and consents to participate in the examination. In both cases, print the full name of the witness on the appropriate line and date the form.
- Record the SP’s 6-digit SP ID number.
- Return the completed form to the MEC coordinator.

Exhibit 3-1. NHANES Examination Consent Brochure and SP Consent/Assent/Parental Permission Form

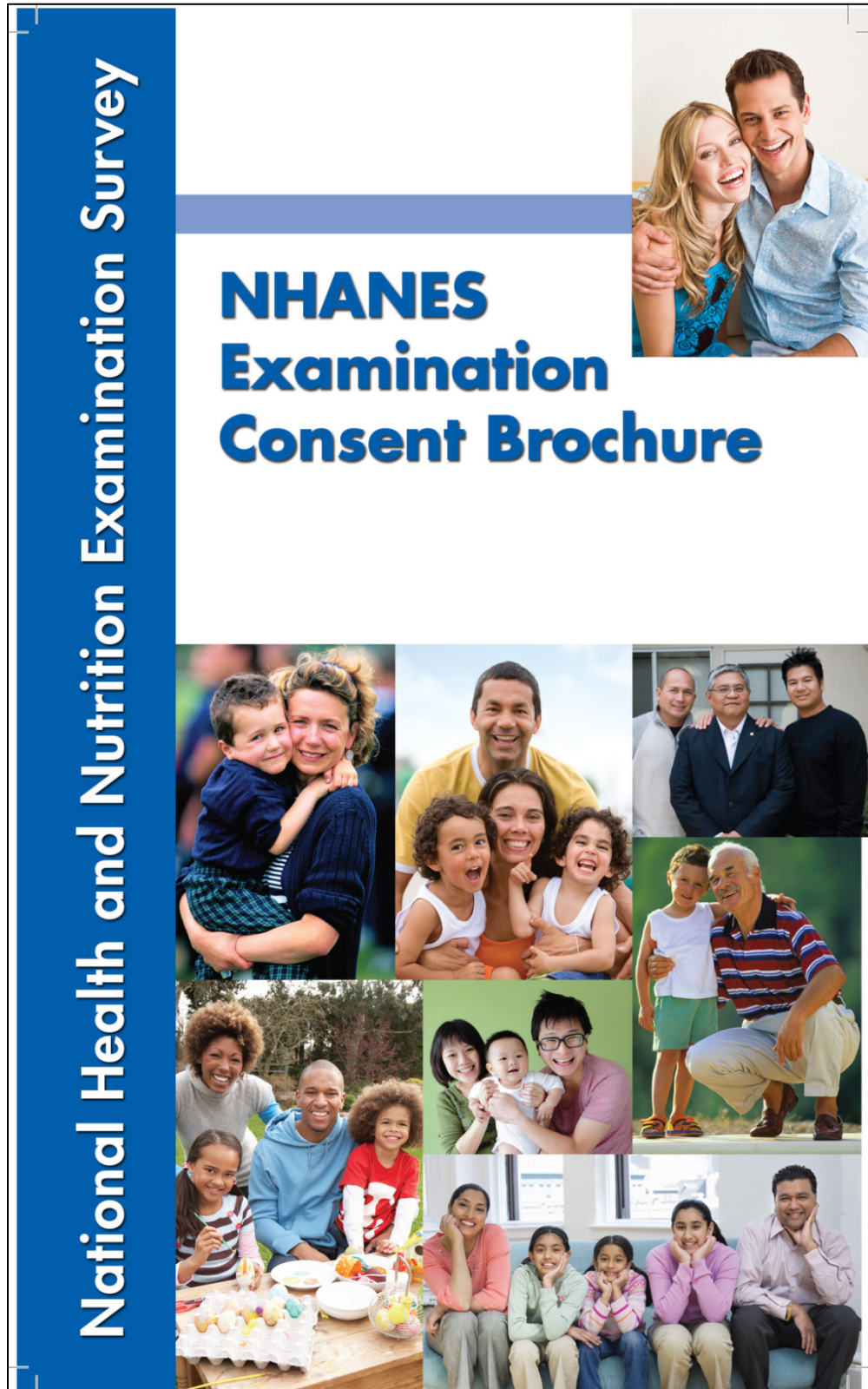


Exhibit 3-1. NHANES Examination Consent Brochure and SP Consent/Assent/Parental Permission Form (continued)

National Health and Nutrition Examination Survey

Overview



The National Health and Nutrition Examination Survey (NHANES) is a survey conducted by the National Center for Health Statistics, part of the Centers for Disease Control and Prevention. We have designed the survey to learn about the health and diet of people in the United States.

Our survey is unique. It combines a home interview with health measurements, which we do in mobile units. These special mobile centers travel across the country with a highly trained medical team. Our team looks at special health topics. We use the most up-to-date methods and equipment for medical and dental exams and other lab tests.

Why is this health survey important?



We will use the data gathered in this survey to find out the number of people with certain health problems—for example, diabetes and high blood pressure. We will look at diet and other habits that affect health, such as smoking and exercise. NHANES data will tell us the health and nutrition of people of all ages. It will also help design health programs and services, and expand our knowledge about the health of people in the United States.

What do I gain by taking part in the exam?

- Free health test results.
- The chance to help learn more about the health of the Nation.
- A token of thanks for your time and effort.

You may choose to be in the survey and you may allow your child to be in it, too. That is your choice. There is no penalty if you refuse. You may refuse any part of the exam and are free to drop out anytime. Also, during the interviews you may choose not to answer every question.

Exhibit 3-1. NHANES Examination Consent Brochure and SP Consent/Assent/Parental Permission Form (continued)

What will I be asked to do at the mobile center?



Upon arriving at the mobile center, you will be asked to change into a two-piece examination outfit.

Our medical team will then guide you to private rooms where we will check your:

Height and weight



Blood pressure



Hearing



Exhibit 3-1. NHANES Examination Consent Brochure and SP Consent/Assent/Parental Permission Form (continued)

National Health and Nutrition Examination Survey

Teeth



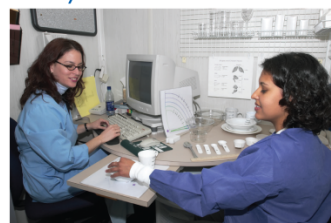
Body composition



We will collect blood and urine samples



And ask you questions about what you eat



If your appointment is scheduled in the morning, we will ask you not to eat or drink anything overnight. The health tests may take up to 4 hours. The time spent in the mobile center and the tests you receive will be based on your age and current medical condition. (For a full list of exams you may receive, see the Health Measurements List.)

Are the tests safe?

The tests are safe. Some tests may cause you slight discomfort. Examples are having a blood sample taken or not eating for 9 hours. For the blood sample, a person will have a small amount of blood drawn from a vein in his or her arm with a needle. People 12 years and older that have a morning exam will be asked to drink a sugary drink and have blood taken a second time. Although rare, the sugary drink can cause nausea, vomiting, bloating, or headache. We will not ask you to have any test that is wrong for you because of a health problem you have.

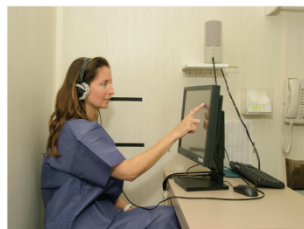
We will give a body composition test that involves low-dosage x-rays to persons aged 8 and older. Radiation exposure during this test is equal to a cross-country airline flight or a few days of natural background radiation. But because the body composition scan involves x-rays, no one who is pregnant should get this exam. We will get information about periods from girls and women, and those who have started their periods will have a urine pregnancy test. Those with a positive test will not have the body composition scan.

Exhibit 3-1. NHANES Examination Consent Brochure and SP Consent/Assent/Parental Permission Form (continued)

Medical errors and injuries are very rare. The NHANES program cannot provide money or other compensation if they occur. However, if you believe you have been harmed as a result of your participation in NHANES, we want to know about it. Please call us at 1-800-452-6115. You also have a right to file a claim under the Federal Tort Claims Act with the Centers for Disease Control and Prevention. We can provide you with information about how to do so. You must file the claim within two years after the date you became aware of the personal injury, loss of property, or other damage.

Will you ask personal questions?

At the mobile center you will be asked some personal questions. A trained interviewer will ask some of these questions. Other questions, like those about stages of body development for children and teens, sexual behaviors, and drug use, will be asked in complete privacy. The interviewer will leave the room. The questions will be on a computer screen. You answer by touching an answer on the screen.



Like all of the other data we collect, the answers you give us are kept strictly private. If you are under 18 years of age, we may notify your parents if we have reason to believe you may harm yourself because of sad feelings.

Will I get my results?

Yes, you will get a report of your results. If the exam shows urgent health problems, we will notify you at once and refer you for treatment. If some urgent problem is found through your lab tests, we will immediately send that information in a letter to your home address. If you wish, we will mail the routine results to you about 3-4 months after the exam. In general, we give results only to the person examined or to the parents or guardians of children. Some results, like those for sexually transmitted disease (STD) tests and pregnancy tests, are not put in writing. We report positive pregnancy test results only to the person tested if she is 14 years or older and doesn't already know she is pregnant. If a girl is younger than 14 and has a positive pregnancy test, we will inform both her and her parent or guardian. How we report STD test results is explained in the next section.



Some tests are not reported because they will be used only for research and are not used for medical care. Better ways to look at some of the tests may be developed in the future. Some of the tests may be read again. We will not report the results of future tests to you.

Exhibit 3-1. NHANES Examination Consent Brochure and SP Consent/Assent/Parental Permission Form (continued)

National Health and Nutrition Examination Survey

NHANES does not cover the cost of any health care you may decide to get after the exam. If you have questions about getting your results, please call 1-800-452-6115.

Will you test for sexually transmitted diseases (STDs)?

Teenagers (14 years and older) and adults under 60 years will have tests for STDs. We will not put these results in writing, but you can get STD test results a few weeks after the exam.

Before you leave the mobile center, you will be given a toll-free number, a password, and the dates to call for your results. Only you will get your test results by calling in and telling us your password. Parents will not be told their child's STD test results. If your test results show that you have a current health problem, we will talk with you about the results and tell you how to get treatment. We will keep all STD test results completely private, just like all other test results. If you do not want to be tested, you can tell a staff member. For details on the tests, please see the Health Measurements List.

Will my information be kept private?

We respect your privacy. Public laws keep all information you give private.

These laws do not allow us to give out data that identifies you or your family without your permission. This means that we cannot give out any facts about you, even if a court of law asks for them. However, if we find signs of child abuse during an exam, we will report it to the local department of social services or the police.

We will keep all survey data safe and secure. When we share data with our partners, we do so in a way that protects your privacy as required and guaranteed by law. Our interviewer can provide you a list of our partners if you wish to learn more.

Exhibit 3-1. NHANES Examination Consent Brochure and SP Consent/Assent/Parental Permission Form (continued)**How are NHANES data used?**

What you tell us, your exam results, and samples you give are a good resource for health science. Many federal agencies, universities, and other public and private groups use NHANES data. They use it to help find new cures and treatments for diseases and disabilities. The aim is to make the health of all people better. Results of this survey may be reported in journals, at major scientific meetings, or through other news media. None of these reports will ever name or use data that can point to any person who took part in the survey.

NHANES has been used in important national reports. One of these highlights the food we eat. Another tells us about the exposures we have to chemicals in the environment. The survey has also been used to track the number of people who are overweight or obese. Research using NHANES can be found on our website, listed on the back of this brochure.

Health research using NHANES can be enhanced by combining your survey records with other data sources. An example is linking your survey results with vital statistics and Medicare claims. To do this, we will ask your permission to collect your Social Security and Medicare numbers. As we told you before, we keep this information safe and secure.

Also, we may need to contact you in the future. To do this we will ask public or private agencies, such as the Post Office, to give us changes to your address. In the past, we have had the chance to call or revisit people who took part in this survey. We may contact you in the future to ask you to be part of other research projects. Your participation in future studies is voluntary.

Exhibit 3-1. NHANES Examination Consent Brochure and SP Consent/Assent/Parental Permission Form (continued)**More questions?**

Our survey representative can discuss other questions or concerns you might have or give you printed material that can help you. She or he can give you a phone number in your area that you can call for more facts about the survey.



Also, you can make a free call to Dr. Joseph Woodring of the U.S. Public Health Service to discuss any aspect of the survey.

He can be reached at 1-800-452-6115, Monday-Friday, 8:00 a.m.-5:30 p.m. EST. You may also contact him regarding any harm to you resulting from this survey. You can also get answers to your questions by mail (Room 4323, 3311 Toledo Rd., Hyattsville, MD 20782).

You may have questions about your rights as a participant in this research study. If so, please call the Research Ethics Review Board at the National Center for Health Statistics, toll-free, at 1-800-223-8118. Please leave a brief message with your name and phone number. Say that you are calling about Protocol # 2011-17. Your call will be returned as soon as possible.



Exhibit 3-1. NHANES Examination Consent Brochure and SP Consent/Assent/Parental Permission Form (continued)

OMB #

NATIONAL HEALTH AND NUTRITION EXAMINATION SURVEY
 CONSENT/ASSENT AND PARENTAL PERMISSION FOR EXAMINATION AT THE MOBILE EXAMINATION CENTER

Print name of participant _____

First	Middle	Last
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PARENT OR GUARDIAN OF SURVEY PARTICIPANT WHO IS UNDER 18 YEARS OLD:

For the Parent or Guardian of the Survey Participant who is a minor (unless the participant is an emancipated minor)

I have read the Examination Brochure and the Health Measurements List, which explain the nature and purpose of the survey. I freely choose to let my child take part in the survey.

 Signature of parent/guardian Date

FOR PARENT OR GUARDIAN OF SURVEY PARTICIPANT 12-17 YEARS:

I agree to have my child's interview about his/her current health status, diet, and health behaviors recorded for quality control.

I do not agree to have my child's interview about his/her current health status, diet, and health behaviors recorded for quality control.

SURVEY PARTICIPANT WHO IS 12 YEARS OLD OR OLDER:

I have read the Examination Brochure and the Health Measurements List, which explain the nature and purpose of the survey. I freely choose to take part in the survey.

 Signature of participant Date

If you are 18 and older and do not want a written report of your exam results, check here

I observed the interviewer read this form to the person named above and he/she agreed to participate by signing or marking this form.

 Witness (if required) Date

Name of staff member present when this form was signed:

Assurance of Confidentiality – All information which would permit identification of an individual, a practice, or an establishment will be held confidential, will be used only by NCHS staff, contractors, and other agents authorized by NCHS to perform statistical activities, only when required and with necessary controls, and will not be disclosed or released to other persons without the consent of the individual or establishment in accordance with section 308(d) of the Public Health Service Act (42 USC 242m) and the Confidential Information Protection and Statistical Efficiency Act (PL-107-347). By law, every employee as well as every 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.

 SP ID

01/2013

NHANES Child SP Examination Assent Brochure and Assent Form (SPs 7–11)**Exhibit 3-2**

The purpose of this brochure is to inform the child SP who is between the ages of 7-11 about the health interview and health examination and to ensure that he or she **agrees** to be examined. You should give the brochure to the child. The text of the brochure must be reviewed by the child OR the interviewer must review the brochure with the child.

This brochure is much shorter than the Parental Brochure. The basic concepts of the study are very simply stated and the language in the text has been simplified so that it is more appropriate for young children. The **Assent Form** is a separate form inserted in the back pocket of the brochure and is printed on 3-part paper. The Assent form should be read and signed by **the child**. The rules for signing the form are the same as those for the Adolescent Assent Form. The Child Assent Form appears on page 3-24.

The Child Assent Form has an area for the signature. Use the following guidelines to complete the signature process:

- Have the child sign the form on the line entitled “Signature of participant 7-11 years old”;
- Print the full name of the child on the lines provided;
- Print the full name of the witness (if required) on the appropriate line and date the form;
- Sign and date the form on the appropriate line; and
- Print the child’s SP ID in the space provided.

Allow the respondent adequate time to read the appropriate brochure including the Assent Form **thoroughly**. After the respondent has completed the form, review it carefully to ensure that all appropriate information has been filled out completely.

Remember, we are not allowed to conduct any examination component on any person who has not had an opportunity to read the appropriate SP Examination Assent Brochure and signed the appropriate assent forms.

Exhibit 3-2. NHANES Child Examination Assent Brochure and Assent Form

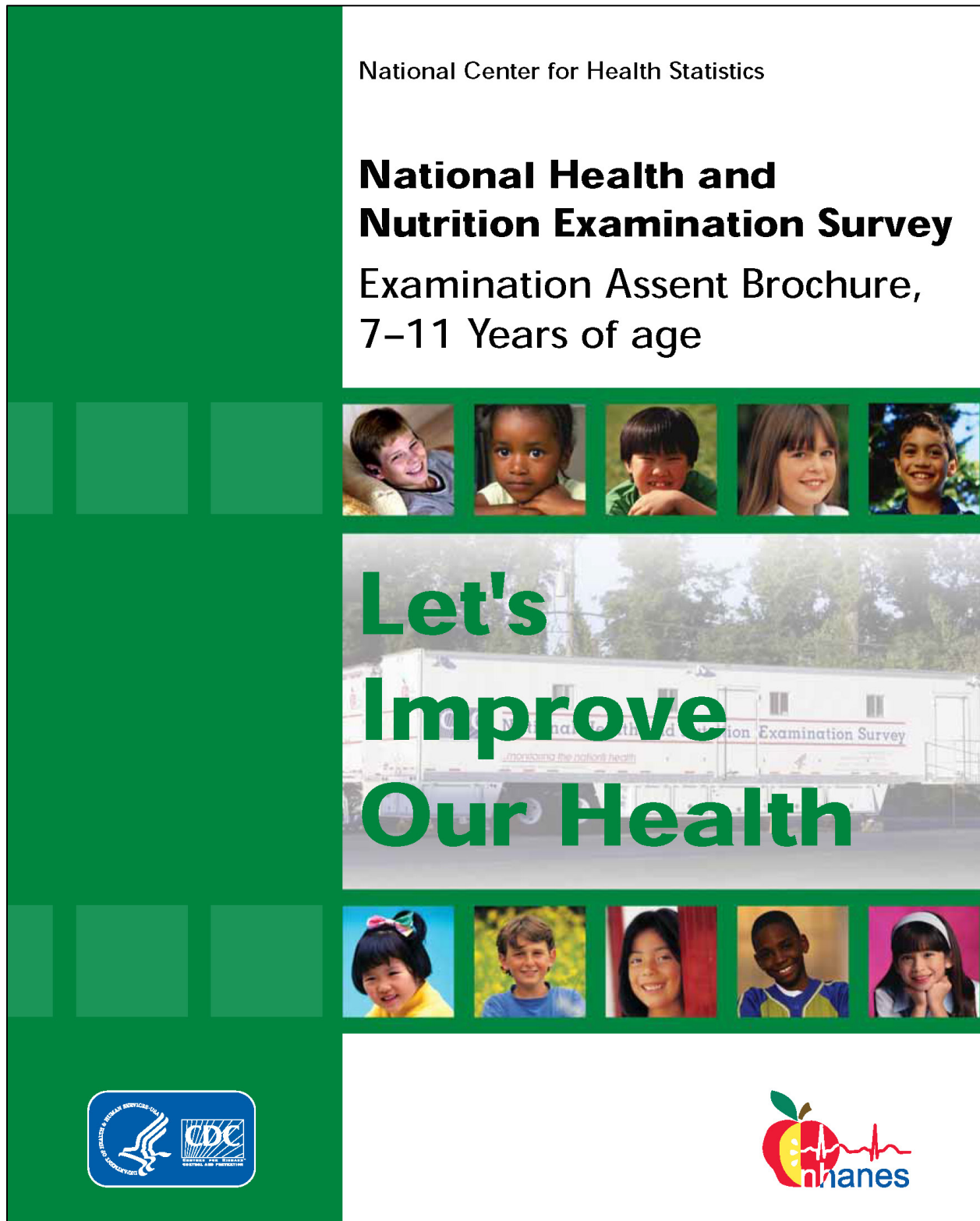


Exhibit 3-2. NHANES Child Examination Assent Brochure and Assent Form (continued)

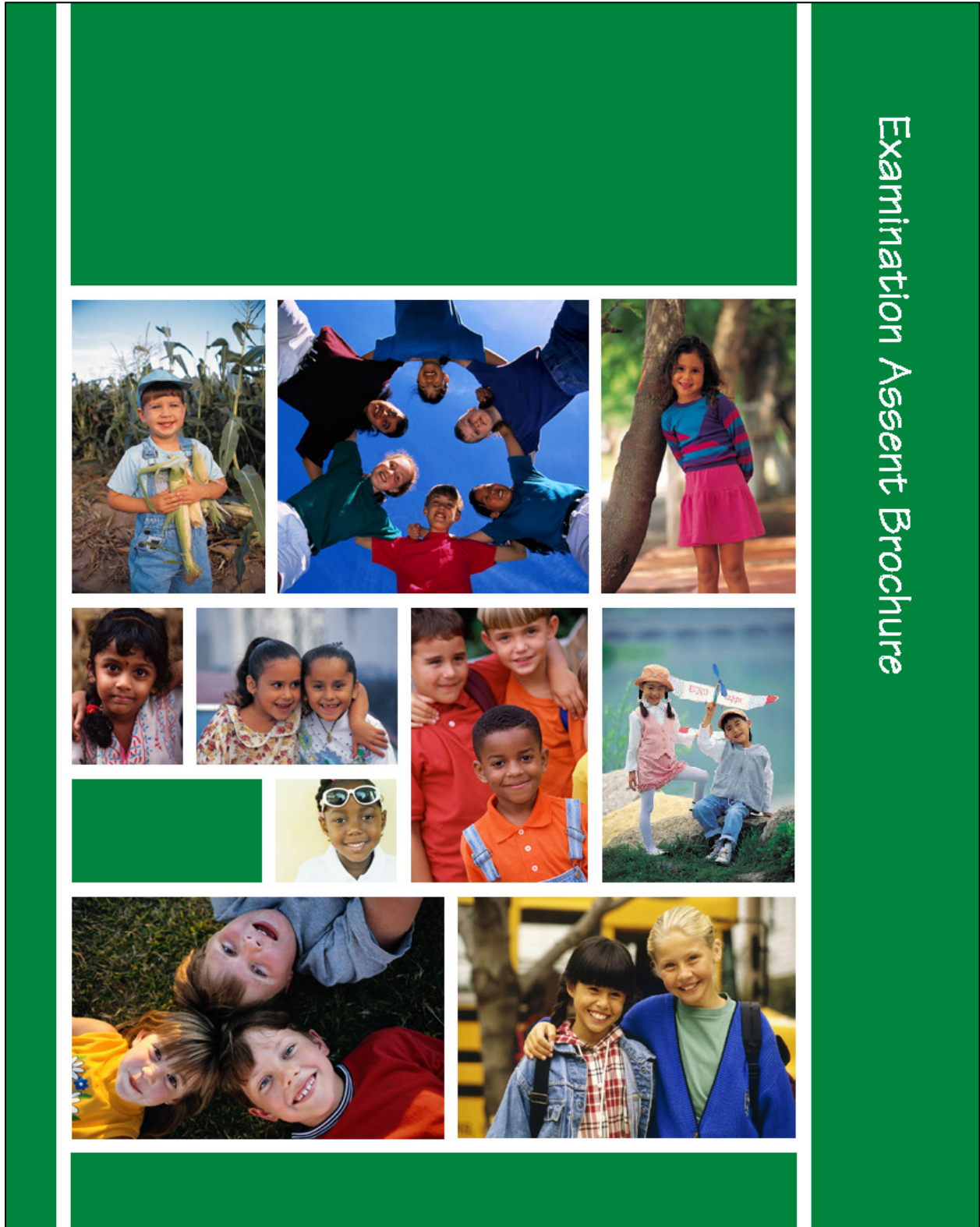


Exhibit 3-2. NHANES Child Examination Assent Brochure and Assent Form (continued)

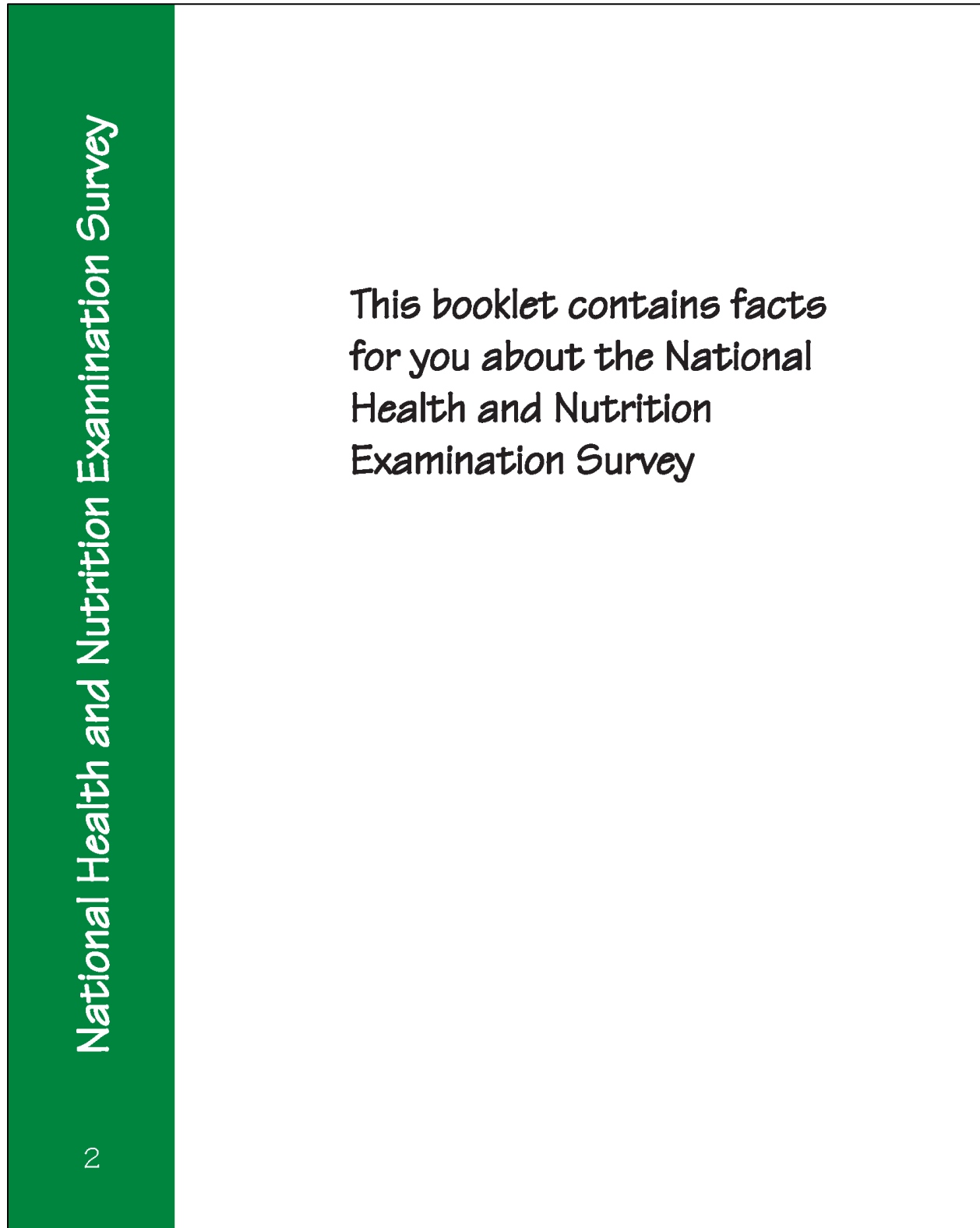


Exhibit 3-2. NHANES Child Examination Assent Brochure and Assent Form (continued)

The National Health and Nutrition Examination Survey (NHANES) studies the health and diet of people in this country.



The survey will look at how young people grow and develop. We will ask questions about what your body looks like. We will look at special health problems that may affect kids.

We go all over the United States in these vans.

About Your Exam


3

Exhibit 3-2. NHANES Child Examination Assent Brochure and Assent Form (continued)

National Health and Nutrition Examination Survey

4

The exam is like going to the doctor. Your exam will help us find out more about the health of children your age.



We will ask questions about what you eat and drink.

You will change into special exam clothes at the exam center.

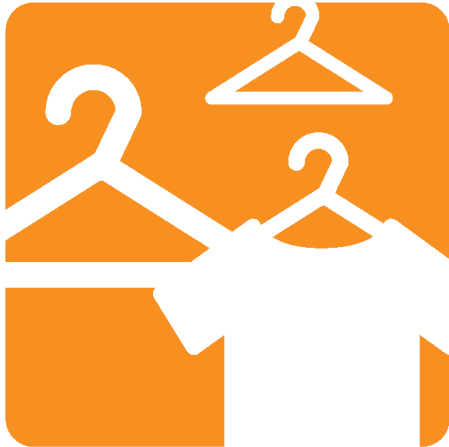


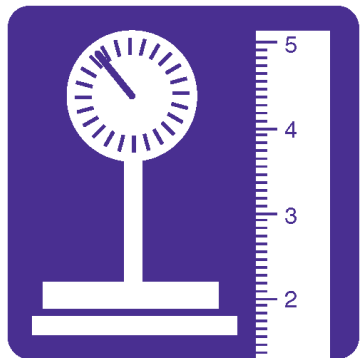
Exhibit 3-2. NHANES Child Examination Assent Brochure and Assent Form (continued)



Our doctor will take your pulse.



We will take your blood pressure.



We will see how much you weigh and how tall you are.

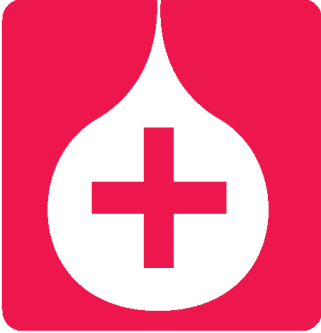


We will look at your teeth.

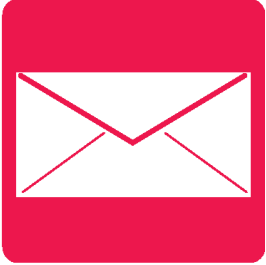
About Your Exam

Exhibit 3-2. NHANES Child Examination Assent Brochure and Assent Form (continued)

National Health and Nutrition Examination Survey



We will check your blood
and urine in our lab.



We will send you and
your parents a report
on your exam.

Exhibit 3-2. NHANES Child Examination Assent Brochure and Assent Form (continued)



Our staff will answer any questions you have.

We would like you to go to our mobile exam center vans for an exam. You will help us learn more about all children in the United States.

About Your Exam

7

Exhibit 3-2. NHANES Child Examination Assent Brochure and Assent Form (continued)

<p style="writing-mode: vertical-rl; transform: rotate(180deg);">Notes</p> <p>8</p>	
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Exhibit 3-2. NHANES Child Examination Assent Brochure and Assent Form (continued)

National Health and Nutrition Examination Survey

For more information about the National Center for Health Statistics, contact:

Information Dissemination Staff
National Center for Health Statistics
3311 Toledo Road, Room 5419
Hyattsville, Maryland 20782

Telephone: 1-800-CDC-INFO (1-800-232-4636)
TTY: 1-888-232-6348
Online request from: <http://www.cdc.gov/info>
Internet: <http://www.cdc.gov/nchs>

For more information about the National Health and Nutrition Examination Survey you may visit the NHANES Website at: <http://www.cdc.gov/nhanes>

CS246239 (06/2014)

Exhibit 3-2. NHANES Child Examination Assent Brochure and Assent Form (continued)

OMB # 0920-0237

National Health and Nutrition Examination Survey (NHANES)

Your parents say that you can take part in this special survey. You have just read about the survey in this book. The survey tells us about the health of people. We will ask you to have an exam at our vans that are here in your town. This exam is a little like going to the doctor. Other kids and their families will be at the center. You do not have to do this if you do not want to. If you take part, you will learn some things about yourself. You will help us learn a lot about other kids in the United States.

If you want to take part in the survey, write your name below.

Signature of participant 7-11 years old

Print name of participant

I observed the interviewer read this form to the person named above and he/she agreed to participate by signing or marking this form.

Witness (if required) _____
Date

Name of staff member present when this form was signed:

SP ID

01/2009

3.3 Obtaining Minor Assent for Specimen Storage and Future Research

As scientists learn more about health, important new research projects can be done using specimens (blood and urine) that are stored in a controlled environment. For this reason, we will ask to keep some of the SP specimens given during the time of the MEC examination for continuing studies. No specific studies are planned. However, as new ways to measure health and disease are discovered, other studies may be conducted that will add to the knowledge of the treatment and causes of disease.

All SPs who consent to the examination that includes blood and urine collection will be asked permission to keep blood and urine samples collected during the MEC examination for continuing studies. Exhibit 3-3 is a sample of the form that is used to record consent/assent/parental permission for these purposes.

The rules for signing this form are similar to those used for signing the MEC Examination Consent/Assent/Parental Permission forms. However, **in rare situations**, if the respondent refuses to check the items on the form or sign the form, he or she **should continue to be examined in the MEC**. In this case the SP's specimens will not be kept.

The text that follows provides a specific explanation of the form.

The form is divided into three general areas:

- **Questions and answers directed toward the goals and procedures of specimen storage and future research** – Allow the SP time to read the text of each question and answer.
- **Statements and required check boxes** – This part of the form contains two separate statements regarding permission to keep the SP's specimens for future health studies—one worded for the SP and the other worded for the parent of the SP.
- **Signature lines** – This part of the form contains four separate signature lines:
 - One for subjects 7 years of age or older;
 - One for the parent or guardian of SPs under age 18;
 - One for the NHANES staff member; and
 - One for a witness, as necessary.

Exhibit 3-3. Consent/Assent and Parental Permission for Specimen Storage and Continuing Studies

OMB # 0920-0237

**NATIONAL HEALTH AND NUTRITION EXAMINATION SURVEY (NHANES)
Consent/Assent and Parental Permission for Specimen Storage and Continuing Studies**

Print name of participant _____
First Middle Last

Q Why will a sample of blood and urine be kept for future health studies?

A We will store some of the blood and urine from persons who are examined in NHANES for future health studies. These samples will be frozen and kept in a specimen bank for as long as they last. Your participation is voluntary and no loss of benefits will result if you refuse.

Q What studies will be done with the samples?

A At this time, no specific studies are planned besides the tests included in the NHANES exam. As scientists learn more about health and diseases, other studies will be conducted that may include stored samples. There can be many additional studies on these samples.

We will keep strictly confidential all health data and samples that we collect in NHANES as required by Federal law. By confidential we mean that the information that we release to the public can not be used to identify you. Our staff is not allowed to discuss that any person is part of this survey under penalty of Federal laws: Section 308(d) of the Public Health Service Act (42 USC 242m), the Privacy Act of 1974 (5 USC 552A), and the Confidential Information Protection and Statistical Efficiency Act (PL 107-347).

Q Who can use the stored samples for further study?

A Researchers from Federal agencies, universities, and other scientific centers can submit proposals to use the stored specimens. These proposals will be reviewed for scientific merit and then by a separate board that determines if the study proposed is ethical. The NHANES program will always know which

samples belong to you or your child, but we will not give other researchers any information that could identify you or your child.

Q Will I receive results from any future testing of my specimens?

A Science and medicine are continually advancing. New tests and new ways of looking at results will be developed in the future. We can't predict what tests will be done or what the results will mean for your health. The NHANES program will not contact you or your family with results from these future studies. We will describe the completed studies on our website. If you are interested in your results from any of these studies, you may call our toll-free number, 1-800-452-6115 to request your specific results as they come available.

Q What are the benefits and risks for allowing my blood or urine sample to be used for future studies?

A You will not directly benefit but these studies may eventually help the health of people in the future. The risk of giving a sample includes the minor risk associated with taking the blood sample. There may also be a risk that some people may use the information from these studies to exaggerate or downplay differences among people. The ethics board that will review all studies using these samples will attempt to prevent any misuse of the information gained from the NHANES samples.

Q How can I remove blood or urine samples from the specimen bank?

A In the future, if you want samples removed from the specimen bank, call us toll-free at 1-800-452-6115.

The results of continuing studies of your stored specimens may help find new ways to prevent, treat, and cure many diseases.

For persons ages 7 and over, check a box

- Yes, my blood and urine may be kept for future health studies, and I understand that I will not be contacted with the results from these studies
- No, my blood and urine cannot be kept for future health studies

For parent/guardian of a child under the age of 18, check a box

- Yes, my child's blood and urine may be kept for future health studies, and I understand that I will not be contacted with the results from these studies
- No, my child's blood and urine cannot be kept for future health studies

Signature of participant age 7 or over _____ Date _____

Signature of parent/guardian of participant under 18 _____ Date _____
(Unless the participant is an emancipated minor)

I observed the interviewer read this form to the person named above and he/she agreed to participate by signing or marking this form.

Witness (if required) _____ Date _____

Name of staff member present when this form was signed:

SP ID _____

01/2011

Specific rules for completing the form in the MEC for SPs 7-17 years old are discussed below.

- The text of the form must be reviewed by the child, or the interviewer must review the text with the child.
- Have the SP read the statement printed under the label “For persons ages 7 and over, check this box.” If the SP **agrees** to have his or her specimens kept, the SP should **check** the box provided. **Note that the SP’s and/or parent’s signature alone does not constitute permission to keep specimens or conduct genetic research. Permission for these processes is determined by whether he or she has checked the box next to the appropriate statement.**
- Have the **SP sign** on the appropriate signature line (“Signature of participant age 7 and over”) and record the date.
- Sign your name and date the form under the line titled “Signature of staff member.”
- “Witness (if required)” refers to any witness used during the consent process. For example, if a respondent cannot read, read the text of the form to him or her in the presence of a witness. If the respondent cannot read or write, have a witness testify that the respondent has been read the form information and the appropriate statements. In both cases, print the full name of the witness on the appropriate line.
- Record the 6-digit SP ID on the lines provided.
- Return the completed form to the MEC coordinator.

NOTE: The form must be signed by the child in the presence of the interviewer or MEC staff in order to be considered complete. The form cannot be left with the parent for the child to answer and sign. It is acceptable for the child to sign a separate (identical) form in the MEC if he or she was not present to sign it in the presence of the interviewer. Also note that, in order to keep the child’s specimens for future research, **both** statements (one for the child and one for the parent/guardian) **must be checked**. The form is considered complete when all appropriate signatures and dates have been obtained.

As mentioned previously, in very rare situations the SP may refuse to sign the form. This should not jeopardize the examination process. Record the word “Refused” on the line designated for the SP’s signature. In this case, the SP’s specimens will not be kept.

3.4 Pesticide Use Questions

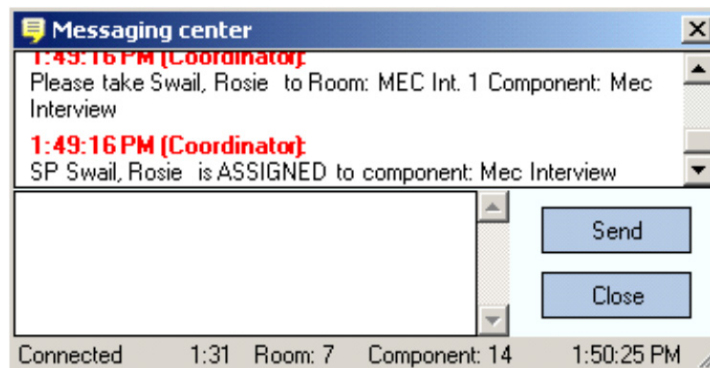
The MEC Interview contains two questions on recent pesticide use. For SPs 8-17 years of age, this information is collected from the child's parent or guardian during administration of the Automated Proxy (AP) application. The answers to the pesticide questions from the AP application automatically prefill into the MEC Interview application and become read only.

3.5 Logging in the SP

Procedures for logging the SP into the automated system are as follows:

1. Select the MEC Interview icon from your desktop at the start of a session.
2. Enter your interviewer password when prompted.
3. Open a new examination session when the SP has been assigned to the room. The Coordinator system will notify you that an SP has been assigned.

Press **Close** or click on the **X** in the upper right corner to close the notification message.



4. Wand the SP's identification bracelet or type in the SP's ID number on the Sample Person Pickup screen to log the SP into the interview. Verify the SP's name and identification number displayed on the screen.

3.6 Conducting the Interview

As described in Chapter 1, the MEC Interview consists of three main sections: the Blaise-CAPI health interview, the audio-CASI or ACASI interview on health behaviors of a sensitive nature, and the Critical Data Items (CDI). Administration of each section involves introducing and providing appropriate transitions between sections, asking the questions specific to the section and entering SP responses, and recording a section status.

3.6.1 Introducing the MEC Interview to the Respondent

The interview software automatically displays appropriate introductory statements for each of the three interview sections based on the age of the SP and whether the interview is being conducted with a proxy respondent.

The **Blaise-CAPI** introduction for SPs **8-11 years** of age is as follows:

- “During this interview, I will be asking you questions about your health and weight. Your answers will be kept private. Do you have any questions before we begin?”
- The **Blaise-CAPI** introduction for SPs **12 years of age and older** is as follows:

- “During this interview, I will be asking you questions about your home, current health status, and other health behaviors. Remember, all of your responses to these questions will be kept strictly confidential. Do you have any questions before we begin?”
- For interviews using a **proxy respondent**, the computer displays the following introduction:
 - “During this interview, I will be asking you questions about {SP’s} current health status and on other health behaviors.”

After conducting the Blaise-CAPI section of the interview, you will introduce the **audio-CASI section** by reading the ACASI Interview Introduction:

“Now I’d like you to use the headphones and listen to some questions. You will enter your responses into the computer by touching the screen. This will allow you to answer questions in complete privacy. I will leave the room during this time, but will be right down the hall to help you if you have a problem. Let’s go over some examples and then you’ll complete the interview on your own.”

After completing the ACASI section, you will introduce the **CDI section** by reading the brief introduction that appears on your computer screen:

“I would like to verify {your/SP’s} address.”

3.6.2 Administering the Actual Questionnaire

One of your primary responsibilities as a MEC interviewer is to administer the questionnaire. Successful administration of the questionnaire is a two-fold process. It involves:

- Making sure that each respondent hears the questions in exactly the way they are written in the questionnaire; and
- Making sure the respondent’s answers are faithfully and accurately recorded.

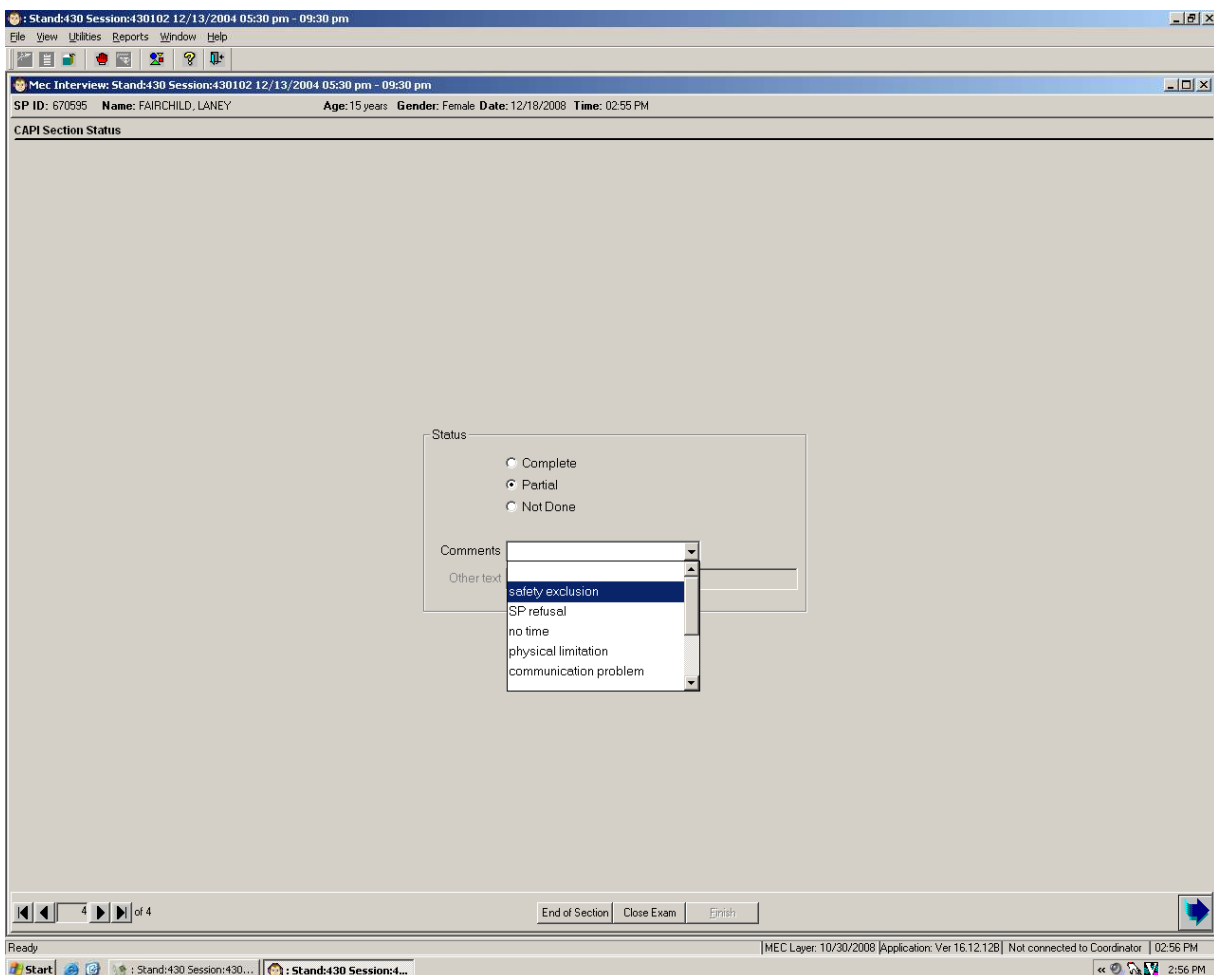
Specific instructions for administering the four sections of the questionnaire are contained in Chapter 4, Question-by-Question Specifications.

3.6.3 Recording a Status for Each Section

NHANES requires that a separate status code be recorded for each section of the interview. After the answer to the final question has been recorded, the automated system displays a section status screen. An example of the Blaise-CAPI section status screen is shown below.

The status for a particular section may be either “Complete,” “Partial,” or “Not done.” The program automatically displays a section status code according to predetermined criteria for all sections and is not editable by the interviewer.

A status of “Partial” or “Not done” requires you to enter a comment code from the drop-down box. Valid comments for the interview and their appropriate use are described in the *Integrated Survey Information System (ISIS) User Guide*.



3.7 Critical Data Items

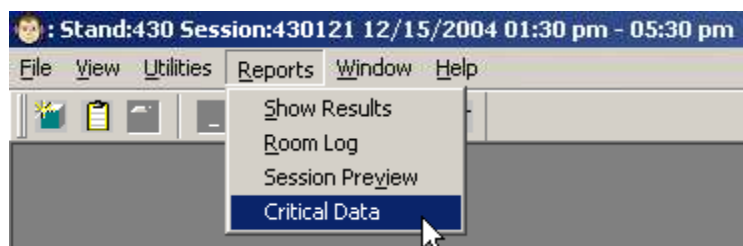
There are a few pieces of demographic information that are considered critical to the study and should be collected for each SP. These items include: street and mailing address, home telephone number, and Social Security number. For most SPs this information will have been collected previously by one of the field interviewers. At the time of the MEC Interview, it is your responsibility to attempt data collection for all missing items and to verify the existing information for selected items.

Procedures for verifying and collecting critical data items (CDI) vary depending upon the age of the SP. For SPs 12 years of age and older, you will collect the items as part of the MEC Interview, as described in Chapter 4. For SPs younger than 12 years of age, the SSN is collected during the automated proxy interview. The other critical data items for SPs younger than 12 are updated as needed by entering the information directly into the utility.

3.7.1 Critical Data Item Collection for SPs Younger than 12 Years of Age

Social Security number is the **only** CDI item that is consistently collected for this age group. It is collected during the automated proxy interview. The telephone and address screens are not verified for this age group; however, the CDI utility allows the MEC interviewers to make updates to these screens if the parent or guardian provides new information.

The Critical Data Report is a separate report listing all existing critical data that have been collected for SPs 11 years of age or younger. To generate a critical data report, click on “Reports” in the menu bar of the MEC Interview application and select “Critical Data” from the drop-down menu.



If any item is missing, the corresponding data field(s) are blank. The information is listed on a separate page for each SP. Use the scroll bar on the right side of the screen to navigate through the report. Print the report by clicking on “File” in the menu bar and selecting “Print.”

Stand:410 Session:410071 08/25/2004 01:30 pm - 05:30 pm

File View Utilities Reports Window Help

MEC Interview

Critical Data Items Report

480523 ASHWIN RAJA1

Current Mailing Address

Additional Address Line

Street #	Dir	Pre	Street Name	St/Rd/Ave	Dir	Post
2947	W		28TH	ST		

Unit/Apt/Bldg	Unit #	PO Box	RRHC #	RRHC Box
APT	1414			

City	State	Zip
FAIRFAX	VA	11224

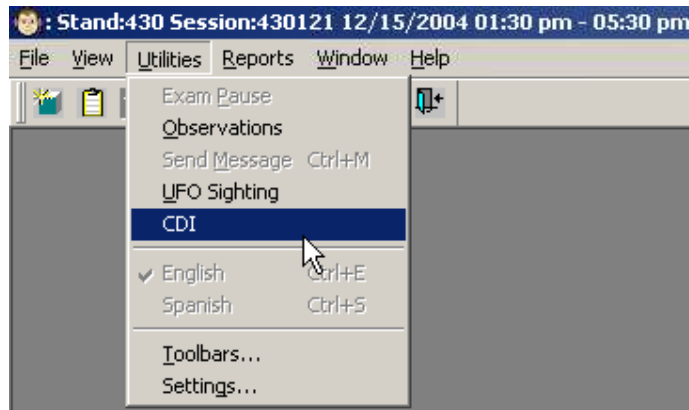
Current Phone Numbers

Home	(410) 456-3219
------	----------------

Ready | MEC Layer: 9/3/2009 | Application: 9.0.5 | Not connected to Coordinator | 10:58 AM

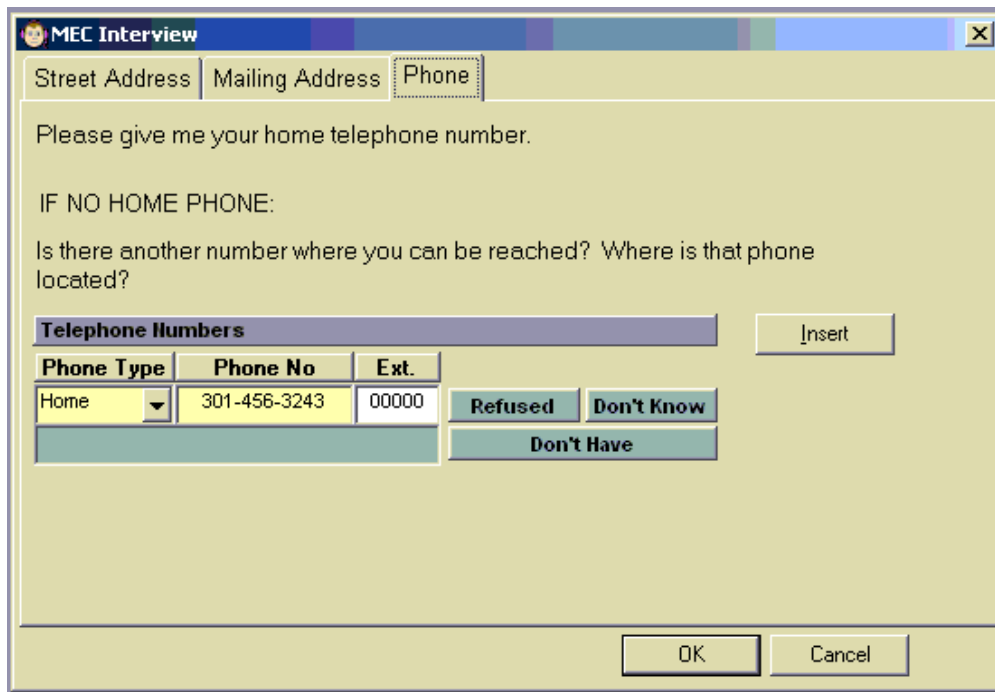
Start | Stand:410 Session:4... | 10:59 AM

To open the CDI utility, select “Utilities” in the menu bar and then select “CDI.”



Select the appropriate SP from the list by clicking on the SP’s name.

If the parent or guardian provides new telephone and/or address information, click on the phone number, street address, or mailing address tab as shown in the screens below. To make updates, click on the appropriate field to place the cursor in the box and then type in the correct information or select the appropriate response from the drop-down menu. To add a phone number after clicking on the phone number tab, click on “Insert” and another row will be provided for an additional number and phone type to be entered.



MEC Interview

Street Address | Mailing Address | Phone

I would like to verify your address. Please give me your complete address.

Additional Address Line

Street #	Dir Pre	Street Name	St/Rd/Ave	Dir Post
250	E	FERN	AVE	

Unit/Apt/Bldg	Unit #	PO Box	RRHC #	RRHC Box
APT	2C			

City	State	Zip
FAIRFAX	VA	12345-

OK Cancel

MEC Interview

Street Address | Mailing Address | Phone

In case we have to contact you again, please give me your complete mailing address.

Additional Address Line

Street #	Dir Pre	Street Name	St/Rd/Ave	Dir Post
250	E	FERN	AVE	

Unit/Apt/Bldg	Unit #	PO Box	RRHC #	RRHC Box
APT	2C			

City	State	Zip
FAIRFAX	VA	12345-

OK Cancel

3.8 Ending the Interview

At the conclusion of the interview, notify the MEC coordinator that you are done by clicking on the “Finish” button in the bottom center portion of the screen. Do not leave the examination open any

longer than necessary as this can lead to inaccurate estimates of the amount of time it takes to complete the interview component. It can also slow down the flow of SPs between components.

Thank the SP for his or her time and contribution to the study. Check whether the MEC coordinator has sent you a message advising you of the next component for the SP. If not, escort the SP back to the coordinator's area to await assignment to the next component.

MEC Interview Protocol: Question-By-Question Specifications

4

4.1 Question-by-Question Specifications Overview

This chapter contains the Question-by-Question specifications (QxQ specs) for the three sections of the MEC interview: Blaise-CAPI questions, Audio-CASI questions, and Critical Data Items (CDI). These specifications are designed to give you directions on the administration of each question.

The section is set up so that the corresponding text is shown along with the Question-by-Question specification. Explanations of and instructions for questions, definitions of words, and examples appear on the QxQ page across from the question they concern.

You will use the information presented here and during training to learn how to administer the interview. You should also use the specifications as a reference when you are interviewing to resolve problems encountered. When you have a question about the administration of the questionnaire while you are in the MEC, always look at the specifications first.

Each of the main interview sections has some section-specific instructions that remain the same, regardless of the topic or specific question. Some of these general specifications are also provided in this chapter.

Spanish translations of each section can be found in Appendix A.

4.1.1 General Rounding Rules

Many questions in the MEC interview require numeric responses. Occasionally, a respondent may give you an answer that is a fraction of a whole number. Unless indicated otherwise in the question-by-question specifications, the basic rules for rounding are:

- For fractions less than one-half, round down to the nearest whole number. For example, $3\frac{1}{4}$ becomes 3.

- For fractions more than one-half, round up to the nearest whole number. For example, $7\frac{3}{4}$ becomes 8.
- For fractions that are exactly one-half, round to the nearest even whole number. For example, $2\frac{1}{2}$ becomes 2.

4.1.2 Introduction to the MEC Interview Program









This section provides an introduction to the MEC Interview Program and general guidelines for navigating through the interview. Section-specific information and navigational features are provided in the QxQs for the individual sections.

4.1.2.1 MEC Interview Menu Items and Shortcuts

The menu items are located at the top of the MEC Interview window and can be accessed from the toolbar buttons. Dimmed toolbar buttons are not available for the window or pane that is currently active.

The menu buttons at the top of the **MEC Interview** window are identified as follows:



	Opens new sample person examination which brings up the sample person logon window (Hot Key: Ctrl+O)
	Review
	Closes an exam
	Pauses the current SP examination
	Sends message to coordinator
	Customizes toolbar buttons
	Displays program help
	Quits the Exam Application

4.1.2.2 Shortcuts for Menu Items

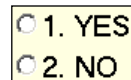
Most menus and menu items have an underlined “accelerator key” that enables you to access the menu from the keyboard instead of using the mouse. The accelerator letters for menus become visible when you hold down the **Alt** key. Use the **Alt** key in combination with the accelerator key to open a menu, then just press the accelerator key for the desired menu item. Some menu items also have a keyboard shortcut displayed after the menu item name. Keyboard shortcuts can be one of the F1-F12 keys along the top of the keyboard or a combination of the **Ctrl** key and one or more other keys. You can use keyboard shortcuts at any time.

Some menu items can also be accessed from toolbar buttons. A dimmed (grayed-out) toolbar button means that function is not available for the window or pane that is currently active.

4.1.2.3 Navigation

There are several different response types, depending on the kind of information requested: **Radio buttons**, **list boxes**, **check boxes**, **edit boxes**, and **drop-down lists**.

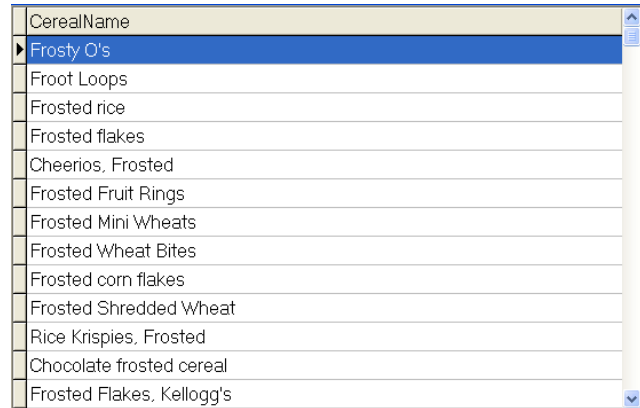
Radio buttons (single response) – Select a single response from a list of possible responses. Click on a response to select it.

A rectangular box containing two radio button options. The first option is "1. YES" with an unselected radio button. The second option is "2. NO" with an unselected radio button.

1. YES
 2. NO

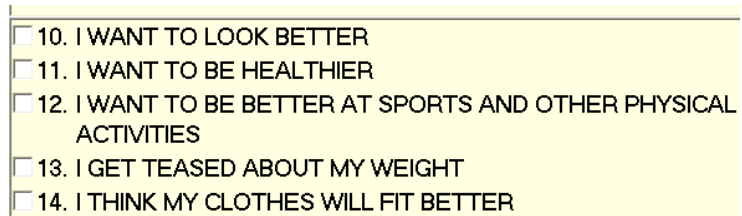
You can only select a single response. If you select the wrong response, click on the correct response to switch your selection.

List boxes – Similar to radio buttons but used for longer lists. Lists that don't fit on screen have a scroll bar on the right of the list box. If the response you want is not visible in the list, you may need to scroll down the list to find it. To scroll, click on the down arrow on the bottom of the scroll bar to the right of the list. To move down multiple items at a time, click and drag the slider down the scroll bar. You can scroll back up the list by clicking on the up arrow at the top of the scroll bar or by dragging the slider up.



Click on a response to select it.

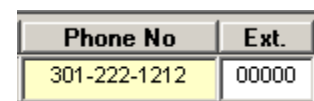
Check boxes (multiple choice/multiple response) – Select one or more responses from a list of possible responses. If you make a mistake, click again on a response to unselect it.



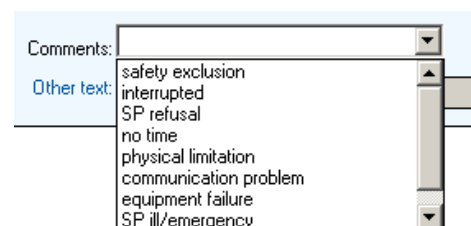
You can also enter the response codes, without spaces, on the keyboard unless otherwise noted.



Edit boxes – Click on a box to place the cursor in the box and then type a response in the box. Use TAB and SHIFT+TAB to move between boxes using the keyboard.



Drop-down lists – Click on the down arrow on the right side of the box to display the drop-down list, and then click on the desired choice.



Shortcut Keys

Use the arrow keys to move the cursor forward (↓) or backwards (↑) one answer field at a time.

The **Page Up** key backs up the interview to the previous screen.


The **Page Down** key advances the interview forward to the next screen.


Press the **Home** key to back up the interview to the first screen.

Pressing the **End** key advances the interview to the next appropriate question in the interview. Use this key when you have backed up in the interview to review or change an answer to a previous question. Press **End** when you are ready to continue with the interview. The program advances to the next unanswered item in the interview taking into account changes to the skip patterns as a result of modifications to a previous response.


Special Keys/Functions

Use the **F5** key or **question mark icon** () to enter a response of “Don’t Know”.

Use the **F6** or **refusal icon** () if the SP refuses to answer a question.

Select **F9** or the **paper clip icon** () to enter an interviewer note.

Switch the language of the Blaise-CAPI interview by selecting **F2**. You can also select “**Options**” then “**Form language**” from the Blaise menu bar. Choose “ENG English” to display the questions in English or “SPN Spanish” to display the questions in Spanish.

Use the **F1** key or select the **help icon** () to view help text associated with an item. To switch the language of the help text select “**Options**” then “**Form language**”. Choose “**TEXT Spanish Help**” to display the help text in Spanish. Choose “**HELP help**” to display the help text in English.

Press **F10** to exit the interview or select “**Forms**” then “**Exit**” from the Blaise menu bar. The **F10** key can be used quit the interview prematurely, or to exit Blaise after successfully completing the interview.

4.1.3 Beginning the MEC Interview

After logging the SP into the MEC Interview as described in Section 3.5, the first screen of the application allows you to change the language and select the proxy status. To change the language, select “utilities” in the menu bar and select the appropriate language. You can also use the hot keys Ctrl+S to change the language to Spanish or Ctrl+E to change the language to English. Please note, this sets the language for sections of the interview that are not Blaise-CAPI. Instructions for setting the language of the Blaise-CAPI interview are described in the special keys/functions section of Section 4.1.2.3. See Appendix A.1 for more information on launching the Spanish interview.

The middle portion of the screen consists of three questions. The responses to these three questions allow the application to properly skip the ACASI section based on the interview type, SP's age, and language spoken.

The screenshot displays the MEC Interview software interface. At the top, the title bar reads "MEC Interview: Stand:616 Session:616040 01/28/2011 08:30 am - 12:30 pm". Below the title bar, the interface shows the following information: "SP ID: 363830", "Name: SGH, BOARDER", "Age: 65 years", "Gender: Female", "Date: 01/24/2012", and "Time: 03:07 PM". The main section is titled "Proxy Question" and contains three questions, each with a dropdown menu:

- Is this a proxy interview? No
- Does SP speak English or Spanish? No
- Does SP speak Chinese, Korean, or Vietnamese?

At the bottom of the interface, there are navigation buttons: "End of Section", "Close Exam", and "Finish". A status bar at the very bottom shows "Ready", "MEC Layer: 12/12/2011", "Application: 10.1.8", "Not connected to Coordinator", and "03:07 PM".

4.2 The Blaise-CAPI Section of the MEC Interview

The Blaise-CAPI section of the MEC interview consists of ten separate sections, each of which collects information on health risk behaviors, medical history, or medical conditions for a specific health topic. An administrative section at the beginning of the interview collects information about the respondent and language of the interview.

Individual questions in the ten sections are derived from several sources including previous iterations of NHANES, the National Health Information Survey (NHIS), and a variety of other health, nutrition, and behavioral surveys. In addition, some of the questions are new to this iteration of NHANES.

Blaise Data Entry - c:\models\mec\mec

Forms Answer Navigate Options

THIS INTERVIEW IS SLATED TO BE AN SP INTERVIEW. IS THAT CORRECT?

1. YES
 2. NO

SProxy/Verify

LABEL

Language

Old 1/218 Dirty Navigate MEC

Start Blaise Data Entry 4:34 PM

Blaise Data Entry - c:\models\mec\mec

Forms Answer Navigate Options

WELCOME TO THE NHANES IV MEC QUESTIONNAIRE!

THE SP, Henry Grear, IS MALE, AND IS 50 YEARS OLD.

THE INTERVIEW WILL BE CONDUCTED WITH THE SP.

SProxy/Verify YES

LABEL

Language

Old 1/218 Modified Dirty Navigate MEC

Start Blaise Data Entry 4:34 PM

Blaise Data Entry - c:\models\mec\mec

Forms Answer Navigate Options

IN WHAT LANGUAGE WILL THIS INTERVIEW BE CONDUCTED?

1. ENGLISH
 2. SPANISH

SProxy/Verify YES

LABEL

Language

Old 1/218 Modified Dirty Navigate MEC

Start Blaise Data Entry 4:34 PM

4.2.1 CAPI Pre-Interview Screens

Before starting the CAPI interview, the interviewer must complete questions that allow CAPI to pull up the correct screens and word fills throughout the CAPI portion of the interview.

MIA060 This screen asks you to verify whether the interview will be conducted with the SP.
SPProxy If it is a proxy interview, code “No.” Coding “No” will trigger the computer to
Verify provide the appropriate word fills for a proxy interview. Code “Yes” if the
 interview is being conducted through an interpreter or directly with the SP.

MIA060 Confirm the name, gender, and age of the SP and whether the interview will be
SPProxy conducted with the SP or with a proxy.
Verify (cont.)

MIA055 Indicate whether the interview will be conducted in English or Spanish. Note that
Language this screen records, but does not set, the language of the interview.
 Use the F2 key or click on Options/Form Language on the menu bar to select
 either the English or Spanish version of the CAPI questionnaire.

Blaise Data Entry - c:\models\mec\mec

Forms Answer Navigate Options

INTERVIEWER: MARK MAIN RESPONDENT. SPECIFY RELATIONSHIP OF RESPONDENT TO SP IF OTHER THAN SP.

1. SP
 2. MOTHER
 3. FATHER
 4. SPOUSE
 5. SISTER OR BROTHER
 6. CHILD
 7. GRANDPARENT
 8. LEGAL GUARDIAN
 9. OTHER (SPECIFY)

LABEL RESPONDENT INFORMATION

RespTreeRelToSP RIQ005

Specify RIQ005OS

ProxyReason RIQ030

Specify RIQ030SP

Old 2/218 Modified Dirty Navigate MEC

Start Blaise Data Entry 4:34 PM

NHANES IV MEC Questionnaire

Forms Answer Navigate Options Year 9

WHY IS THIS INTERVIEW BEING CONDUCTED WITH A PROXY?

1. SP HAS COGNITIVE PROBLEMS
 2. SP HAS PHYSICAL PROBLEMS (SPECIFY)
 3. OTHER (SPECIFY)

LABEL RESPONDENT INFORMATION

99a05a RIQ005 2 Mother

99a RIQ005OS

99a05a RIQ030

4.2.2 Respondent Selection Section (RIQ)

You may be able to complete this section without asking the respondent any questions. However, do not assume you know the answer to a specific question. When in doubt, the general rule is to ask the respondent. Because this section is structured as a set of interviewer instructions, you will need to paraphrase the instruction slightly so that it works as a question to the respondent. This is one of the few places in the MEC Interview where you can deviate from the text that is displayed on the screen.

This section is completed for all SPs.

RIQ005 For most interviews you will code “1” to indicate the SP was the respondent. SP interviews skip to RIQ090.

For proxy interviews, record the relationship between the SP and the proxy.

RIQ030 This item collects the reason why a proxy interview was necessary. The majority of proxy interviews will be because of either cognitive problems due to such causes as a learning disability, dementia, etc., or a physical problem or illness. When recording physical illness as a reason, you are asked to specify the nature of the problem or illness.

Proxy interviews that are conducted for some reason other than cognitive or physical problems should be coded as “other” with an explanation as to the nature of the problem.

Blaise Data Entry - c:\models\mec\mec

Forms Answer Navigate Options

INTERVIEWER: WAS SP PRESENT IN THE ROOM DURING ANY PART OF THE INTERVIEW?

1. YES
 2. NO

SPPresence RIQ038

InterpreterUse RIQ090 NO

CodeTypeIntprtr RIQ100

LangOfIntvew RIQ140

Specify RIQ1400S

Old 3/218 Modified Dirty Navigate MEC

Start Blaise Data Entry Snagit/32 Catalog Viewer ... 4:42 PM

NHANES IV MEC Questionnaire

Forms Answer Navigate Options Year 11

During this interview, I will be asking you questions about your home, diet, current health status, and on other health behaviors. Remember, all of your responses to these questions will be kept strictly confidential. Do you have any questions before we begin?

99a RIQ100

99a00g RIQ140

99a RIQ1400S

CK0E09a RIQ149

NHANES IV MEC Questionnaire

Forms Answer Navigate Options Year 7

During this interview, I will be asking you questions about your health and weight. Your answers will be kept private. Do you have any questions before we begin?

99a RIQ100

99a00g RIQ140

99a RIQ1400S

CK05c RIQ149

- RIQ038 Code “Yes” if the SP was present for any part of the interview, regardless of whether the proxy consulted with the SP for answers to any of the questions. Because this section is completed at the beginning of the interview, you will code “Yes” if the SP is present at the start of the interview. In the unlikely event the SP is not present at the beginning but does join the interview in progress, remember to back up and change the code for this item.
- RIQ149 RIQ149 contains a brief introductory statement that is read to the respondent. There are three different versions of the introductory text depending upon the age of the SP and whether the interview is conducted with a proxy respondent.
- RIQ149 This introductory statement is used with SPs ages 12 years or older.
Version 1
- RIQ149 The application displays this introductory statement for SPs aged 8-11 years.
Version 2

MIAMES IV MEC Questionnaire

Forms Answer Navigate Options Year 11

During this interview, I will be asking you questions about Alec Rocha's current health status and on other health behaviors.

99a RIQ100
99a00g RIQ140
99a RIQ140OS
CK05d09a RIQ149

RIQ149 The application displays this introductory statement when the interview is administered
Version 3 through a proxy respondent.

The screenshot shows a web browser window titled "NHANES IV MEC Questionnaire". The browser's address bar shows "Year 11". The page content includes the following text:

First, I would like to ask you a few questions about your home.

Does your home have an attached garage?

Below the question, there are two radio button options:

- 1. YES
- 2. NO

At the bottom of the page, there is a list of question identifiers with corresponding checkboxes:

- 09a VTQ210
- 09a VTQ220
- 09a VTQ200a
- 09a VTQ230a

4.2.3 The Volatile Toxicant Section (VTQ) of the MEC Interview

NHANES includes a study of Volatile Organic Compounds (VOCs) to determine the prevalence of exposures to these types of chemicals. A one-half sample of SPs 12 years of age and older are randomly selected to participate in this study. A household interviewer collects a sample of tap water in the SPs household for analysis. When the SP comes to the MEC for their exam, the phlebotomist collects an additional tube of blood and the MEC interviewers administer a 19-item questionnaire.

The VTQ section collects data about the SP's home, activities, amount of time spent in various locations, and exposure to different chemicals over the past 48 hours. This section is also administered when the interview is conducted with a proxy respondent.

VTQ210 The first screen in this section introduces the section to the SP and asks the first question of the section.

This question refers to the residence where the SP spent the last 48 hours and specifically refers to whether or not the home has a garage. If the home does have a garage, a follow-up question asks if it is attached or not.

Home refers to the building where the SP lives. This can be a mobile trailer, apartment, townhouse, single, or multiple family building. An attached garage means that one side of a wall faces a living space and the other faces an external enclosure where an automobile is stored at least some of the time. Vehicles off-gas many chemicals of interest, especially fuel vapors. If the external structure never contains a vehicle, then it should be called a shed. An attached shed should be included with a basement and an attached garage.

NHANES IV MEC Questionnaire

Forms Answer Navigate Options Year 11

Is the source of water for your home from a private well?

1. YES
 2. NO

09a VTQ210	1	YES
09a VTQ220		
09a VTQ200a		
09a VTQ230a		

Forms Answer Navigate Options Recording Year 14

Do you currently store paints or fuels inside your home? Include your basement and attached garage.

1. YES
 2. NO

09a VTQ210	1	YES
09a VTQ220	1	YES
09a VTQ200a		
13 VTQ231a		

Forms Answer Navigate Options Recording Year 14

Do you currently store paints or fuels inside your home? Include your basement.

1. YES
 2. NO

09a VTQ210	2	NO
09a VTQ220	1	YES
09a VTQ200a		
13 VTQ231a		

VTQ220 This question asks the SP to report the source of water used in their home. Include all types of wells.

Bored Wells: An earth auger rotated by hand or power, bores the hole and carries the earth to the surface. Casing is usually steel, concrete, or plastic pipe.

Dug Wells: Historically, dug wells were excavated by hand shovel below the water table until incoming water exceeded the digger's bailing rate. The well was lined with stones, brick, tile, or other material to prevent collapse, and was covered with a cap of wood, stone, or concrete. Modern large-diameter dug wells are dug or bored by power equipment, and typically are lined with concrete tile.

Driven-Point (sand point) Wells: Constructed by driving assembled lengths of pipe into the ground with percussion equipment or by hand.

Drilled Wells: Constructed by either percussion or rotary-drilling machines. Drilled wells that penetrate unconsolidated material require installation of casing and a screen to prevent inflow of sediment and collapse.

If the SP indicates the source of water is from any of these types of private wells, or if spring water is piped in from a nearby mountain, select "Yes." If the SP reports that the source of water is from a municipal or city source, select "No."

VTQ200A This question asks the SP to decide if he or she currently has any paints or fuels stored inside their home. Include the basement and attached garage or attached shed if the SP reports having an attached garage in VTQ220. The program automatically inserts the appropriate fill depending on the response to VTQ220.

Include areas of the home, such as the basement and attached garage. Do not include separate storage facilities like barns or unattached sheds on the same property. Include all paints, both indoor and outdoor, and fuels like propane or butane. Do not include wood or coal. If the SP indicates he or she stores paint or fuels in any of these locations select "Yes."

VTQ200A SPs who do not have an attached garage receive this alternate form of the question.
(cont'd)

Form: Answer Navigate Options Recording Year 14

HELP AVAILABLE

Do you currently use moth balls, moth crystals or toilet bowl deodorizers inside your home?

1. YES
 2. NO

09a VTQ210	2	NO
09a VTQ220	1	YES
09a VTQ200a	1	YES
13 VTQ231a	1	

Question Text

Some toilet bowl deodorizers clip onto the toilet rim, others, such as deodorant blocks and gels, are placed inside the tank or hang inside the wall of the tank. Brand names include Bully, 2000 Flushes, Vanish, X-14, Ty-D-Bol, Toilet Duck, Clorox, Lime-A-Way, and Sno Bol.

- 1.
- 2.

Close Help

VTQ231A This question asks the SP to report if they currently use moth balls, moth crystals, or toilet bowl deodorizers inside the toilets in their home.

One traditional way to prevent fabric damage by moths is to pack sweaters and blankets in moth balls or moth crystals. Moth balls or moth crystals are naphthalene or camphor. They produce a characteristic odor. Naphthalene, also known as tar camphor, is a white crystalline solid with a distinctive moth ball odor. Naphthalene is available to the public as a pest repellent and is frequently contained in moth balls, moth flakes, and toilet bowl deodorizers.

Include all types of toilet bowl deodorizers, such as rim cages that clip onto the toilet bowl rim; deodorant blocks; deodorant gels; and wall-mounted “para” deodorant blocks packaged in a cardboard hanger that hangs on the wall or fits in a separate wall-hanging plastic container (extra). Consider brand names like Bully, 2000 Flushes, Vanish, X-14, Ty-D-Bol, Toilet Duck, Clorox, Lime-A-Way and Sno Bol.

VTQ231A Help text is available for this question.
(cont’d)

NHANES IV MEC Questionnaire
Forms - Answer - Navigate - Options - Recording 2015
PAUSE RESUME STOP

HELP AVAILABLE

In the last three days, did you inhale smoke from any source for 10 or more minutes?

1. YES
 2. NO

15a VTQ233a
15a VTQ233b
13c VTQ241_
13c VTQ241a

Question Text

Inhaled smoke includes smoke from campfires, fireplaces, marijuana, and tobacco products such as cigarettes, cigars and pipes.

1.
2.

Close Help

NHANES IV MEC Questionnaire
Forms - Answer - Navigate - Options - Recording 2015
PAUSE RESUME STOP

When did you last spend 10 or more minutes inhaling smoke?

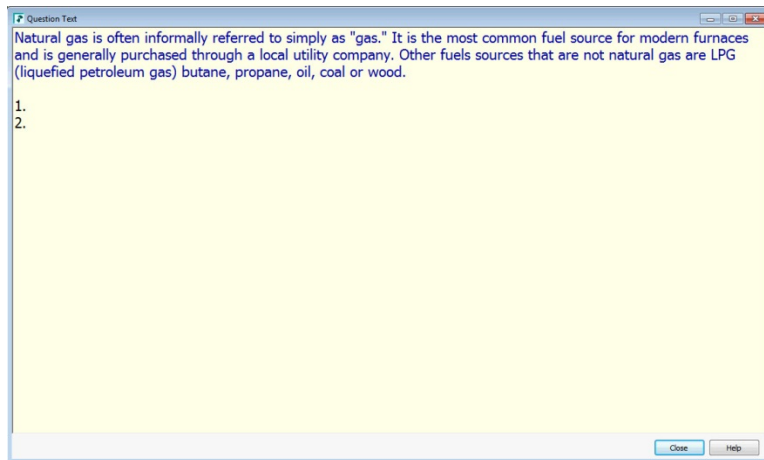
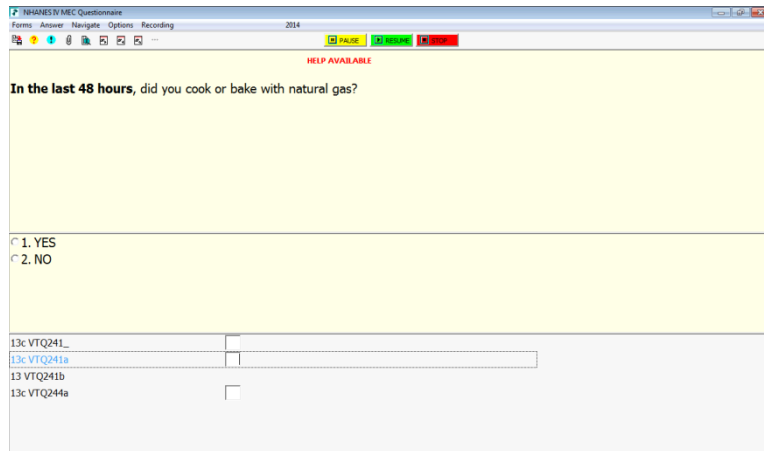
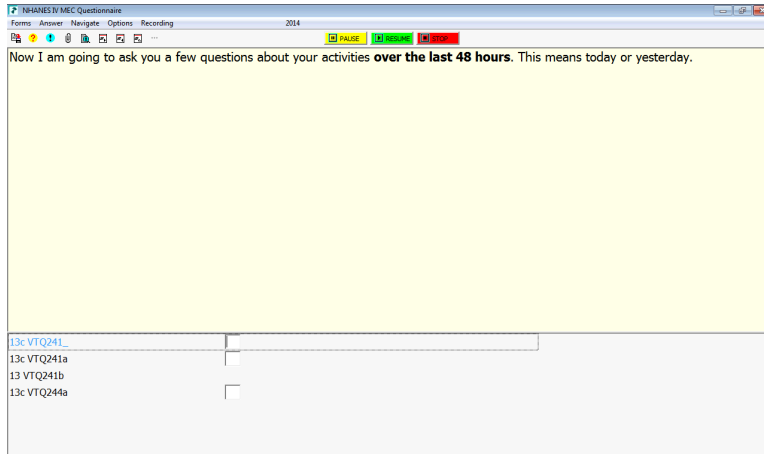
1. TODAY
 2. YESTERDAY
 3. MORE THAN 2 DAYS

15a VTQ233a	1	YES
15a VTQ233b		
13c VTQ241_		
13c VTQ241a		

VTQ233A This question asks the SP to report if he or she inhaled smoke from any source for 10 or more minutes in the last 3 days.

VTQ233A (cont'd) Help text is available for this question. Sources of inhaled smoke may include campfires, fireplaces, marijuana, and tobacco products.

VTQ233B This question asks the SP to report when he or she last spent 10 or more minutes inhaling smoke.



VTQ241_ Items VTQ241A through VTQ281F ask about the SP's activities over the past 48 hours. This screen introduces the next set of questions.

VTQ241A This screen asks the SP to report if they cooked with natural gas during the last 2 days. Natural gas is the most common fuel source for modern furnaces and is generally purchased through a local utility company. Other fuel sources that are not natural gas are LPG (liquefied petroleum gas), including: butane, propane, oil, coal, or wood. Natural gas is often informally referred to simply as "gas." If an SP says they cook with gas, but they do not know if it's "natural" gas, code it as "Yes."

VTQ241A Help text is available for this question.
(cont'd)

NHANES IV MEC Questionnaire
Forms - Answer - Navigate - Options - Recording 2015
PAUSE RESUME STOP

How long ago, in hours, did you cook or bake with natural gas?

1. ENTER HOURS
 2. ENTER DATE AND TIME

13c VTQ241a 1 YES
 15b VTQ241bG
 15b VTQ241bQ
 15b VTQ241bD
 15b VTQ241bT

NHANES IV MEC Questionnaire
Forms - Answer - Navigate - Options - Recording 2015
PAUSE RESUME STOP

How long ago, in hours, did you cook or bake with natural gas?

ENTER HOURS

13c VTQ241a 1 YES
 15b VTQ241bG 1 Hours
 15b VTQ241bQ
 15b VTQ241bD
 15b VTQ241bT

1. ENTER HOURS
 2. ENTER DATE AND TIME

15b VTQ241bG 2 DateAndTime
 15b VTQ241bQ
 15b VTQ241bD
 15b VTQ241bT

July 2015
 S M T W T F S
 1 2 3 4
 5 6 7 8 9 10 11
 12 13 14 15 16 17 18
 19 20 21 22 23 24 25
 26 27 28 29 30 31

15b VTQ241bG
 15b VTQ241bQ
 15b VTQ241bD
 15b VTQ241bT

15b VTQ241bG 2 DateAndTime
 15b VTQ241bQ
 15b VTQ241bD 7/25/2015
 15b VTQ241bT

15b VTQ244bG 2 DateAndTime
 15b VTQ244bQ 26
 15b VTQ244bD 7/25/2015
 15b VTQ244bT 9:00AM

VTQ241B This question asks the SP to report the number of hours between the time they cooked with natural gas and the current time.

Questions VTQ.241b, VTQ.244b, VTQ.251b, VTQ.261b, VTQ.271b, VTQ.281b, VTQ.281d, and VTQ.281f allow you to enter the number of hours if the SP reports a number of hours, OR enter the date and time reported if that's what the SP reports instead. Since SPs are required to answer this question, get the SP's best estimate.

If the SP reports a number of hours, you will first confirm the number of hours by confirming with the SP exactly what day and time the event occurred. After confirming, enter code "1" and press enter, then enter the number of hours. Use the rounding rules described in Section 4.1.1. If the number of hours is less than 1, enter 1. This number cannot be greater than 48 since the time reference for this question is the last 2 days.

If the SP reports a date and time, enter code "2" and press enter. To access the calendar, click on the down arrow and direct the mouse arrow to the correct day on the displayed month and left-click to select. To enter the time, use the numeric keys and [A/a] for times between midnight and 11:59 AM or [P/p] for times between 12:00 noon and 11:59 PM. The application will use our rounding rules to calculate the time since the event occurred.

NHANES IV MEC Questionnaire
 Forms - Answer - Navigate - Options - Recording
 2014
 PAUSE RESUME STOP

In the last 48 hours, did you pump gas into a car or other motor vehicle yourself?

1. YES
 2. NO

13c VTQ241_ NO
 13c VTQ241a
 13 VTQ241b
 13c VTQ244a

NHANES IV MEC Questionnaire
 Forms - Answer - Navigate - Options - Recording
 2015
 PAUSE RESUME STOP

How long ago, in hours, did you pump gas into a car or other motor vehicle yourself

1. ENTER HOURS
 2. ENTER DATE AND TIME

13c VTQ244a YES
 15b VTQ244bG
 15b VTQ244bQ
 15b VTQ244bD
 15b VTQ244bT

VTQ244A This question asks the SP to report if they pumped gas into a car or other motor vehicle during the last 2 days.

Include any grade of gasoline but do not include natural gas. Include pumping gas into a container, such as a lawn mower container. Do not record “Yes” if the SP reports being a passenger in a car into which gas was pumped. If the SP reports actually pumping gas into any car or motor vehicle, select “Yes.”

If VTQ244A is coded “Yes,” the interview continues with VTQ244B. Otherwise, the interview skips to VTQ251A.

VTQ244B This question asks the SP to report the number of hours between the time they pumped gas into a car and the current time.

NIHAMES IV MEC Questionnaire
 Forms Answer Navigate Options Recording 2014

In the last 48 hours, did you spend any time at a swimming pool, in a hot tub, or in a steam room?

1. YES
 2. NO

13 VTQ244b
 13c VTQ251a
 13 VTQ251b
 13c VTQ261a

NIHAMES IV MEC Questionnaire
 Forms Answer Navigate Options Recording 2015

How long ago, in hours, has it been since you spent time at a swimming pool, in a hot tub, or in a steam room?

1. ENTER HOURS
 2. ENTER DATE AND TIME

13c VTQ251a 1 YES
 15b VTQ251bG
 15b VTQ251bQ
 15b VTQ251bD
 15b VTQ251bT

VTQ251A This question asks the SP to report if they spent any time at a swimming pool, in a hot tub, or in a steam room during the last 2 days.

Determine if the SP spent any time at a swimming pool, in a hot tub, or in a steam room. The SP did not have to swim in the pool.

If VTQ251A is coded “Yes,” the interview continues with VTQ251B. Otherwise, the interview skips to VTQ261A.

VTQ251B This question asks the SP to report the number of hours between the time they were at a swimming pool, in a hot tub, or in a steam room and the current time.

NHANES IV MEC Questionnaire
Forms - Answer - Navigate - Options - Recording 2014

HELP AVAILABLE

In the last 48 hours, did you use dry cleaning solvents, visit a dry cleaning shop or wear clothes that had been dry-cleaned within the last week?

1. YES
 2. NO

13c VTQ244b NO
13c VTQ251a
13c VTQ251b
13c VTQ261a

Question Text

Examples of dry cleaning solvents include Guardsman Dry Cleaning Fluid, Amway prewash, LPS F-104 Dry Solvent, Dryel At-Home Dry Cleaning starter kit, Woolite Dry Clean at Home, and Bounce 15 minute Dry Cleaner.

1.
2.

Close Help

NHANES IV MEC Questionnaire
Forms - Answer - Navigate - Options - Recording 2015

How long ago, in hours, has it been since you used dry cleaning solvents, visited a dry cleaning shop or wore clothes that had been dry-cleaned within the last week?

1. ENTER HOURS
 2. ENTER DATE AND TIME

13c VTQ261a YES
15b VTQ261bG
15b VTQ261bQ
15b VTQ261bD
15b VTQ261bT

VTQ261A This question asks the SP to report if he/she used dry cleaning solvents, visited a dry cleaning shop or wore clothes that had been dry cleaned within the last week. The dry cleaning process cleans clothing with chemical solvents having little or no water. Examples of dry cleaning solvents include Guardsman Dry Cleaning Fluid, Amway prewash, LPS F-104 Dry Solvent, Dryel At-Home Dry Cleaning starter kit, Woolite Dry Clean at Home, and Bounce 15 minute Dry Cleaner. Determine if the SP used dry cleaning solvents or visited a dry cleaning shop during the last 2 days, or if they wore clothes that had been dry-cleaned within the last week or 7 days. If the SP meets either criterion, select “Yes.”

VTQ261A Help text is available for this question.
(cont’d)

VTQ261B This question asks the SP to report the number of hours between the time they used dry cleaning solvents, visited a dry cleaning shop, or wore clothes that had been dry cleaned and the current time.

NHANES IV MEC Questionnaire
Forms - Answer - Navigate - Options - Recording 2014

PAUSE RESUME STOP

In the last 48 hours, did you take a hot shower or bath for five minutes or longer?

1. YES
 2. NO

13c VTQ261b 2 NO
13c VTQ265a
13c VTQ265b
13c VTQ271a

NHANES IV MEC Questionnaire
Forms - Answer - Navigate - Options - Recording 2015

PAUSE RESUME STOP

How long ago, in hours, has it been since your last shower or hot bath?

1. ENTER HOURS
 2. ENTER DATE AND TIME

13c VTQ271a 1 YES
15b VTQ271bG
15b VTQ271bQ
15b VTQ271bD
15b VTQ271bT

VTQ271A This question asks the SP to report if they took a hot shower or bath for at least 5 minutes during the last 2 days.

Determine if the SP took a hot shower or bath for at least 5 minutes in the last 2 days. If the SP reports taking a hot shower or bath for a total of at least 5 minutes, select “Yes.” If the SP reports taking a cold or warm shower or a hot shower or bath for less than 5 minutes, select “No.”

If VTQ271A is coded “Yes,” the interview continues with VTQ271B. Otherwise, the interview skips to VTQ281A.

VTQ271B This question asks the SP to report the number of hours between the time they took a hot shower or bath and the current time.

13c VTQ271b

In the last 48 hours, did you breathe fumes from freshly painted indoor surfaces, paints, paint thinner, or varnish?

1. YES
 2. NO

13c VTQ281a

13 VTQ281b

13c VTQ281c

13c VTQ281a

How long ago, in hours, has it been since you breathed fumes from freshly painted indoor surfaces, paints, paint thinner, or varnish?

1. ENTER HOURS
 2. ENTER DATE AND TIME

13c VTQ281a

15b VTQ281bG

15b VTQ281bQ

15b VTQ281bD

15b VTQ281bT

VTQ281A VTQ281A through VTQ281F asks the SP to report if they breathed fumes from a variety of sources during the last 2 days. Determine if the SP breathed fumes from each source, individually. Record each answer. If known, workplace exposure to chemicals in the list of products should be coded as “Yes.”

This question asks the SP to report if they breathed fumes from paints, paint thinner, or varnish during the last 2 days.

Include all interior and exterior paints, spray paints used in arts and crafts, and oil-based artist paints. Paint thinner contains turpentine.

VTQ281B This question asks the SP to report the number of hours between the time they breathed fumes from freshly painted indoor surfaces, paints, paint thinner, or varnish and the current time.

NHANES IV MEC Questionnaire
Forms - Answer - Navigate - Options - Recording 2014

PAUSE RESUME STOP

In the last 48 hours, did you breathe fumes from diesel fuel or kerosene?

1. YES
 2. NO

13 VTQ271b
13c VTQ281a 2 NO
13 VTQ281b
13c VTQ281c

NHANES IV MEC Questionnaire
Forms - Answer - Navigate - Options - Recording 2015

PAUSE RESUME STOP

How long ago, in hours, has it been since you breathed fumes from diesel fuel or kerosene?

1. ENTER HOURS
 2. ENTER DATE AND TIME

13c VTQ281c 1 YES
15b VTQ281dG
15b VTQ281dQ
15b VTQ281dD
15b VTQ281dT

NHANES IV MEC Questionnaire
Forms - Answer - Navigate - Options - Recording 2014

PAUSE RESUME STOP

In the last 48 hours, did you breathe fumes from fingernail polish?

1. YES
 2. NO

13 VTQ281d
13c VTQ281e
13 VTQ281f

VTQ281C This question asks the SP to report if they breathed fumes from diesel fuel or kerosene during the last 2 days.

Diesel fuel is a crude oil. Kerosene is a hydrocarbon oil, chiefly of the methane series, used for burning in lamps. It is also called coal oil.

VTQ281D This question asks the SP to report the number of hours between the time they breathed fumes from diesel fuel or kerosene and the current time.

VTQ281E This question asks the SP to report if they breathed fumes from fingernail polish during the last 2 days. Nail polish contains acetone.

NHANES IV MEC Questionnaire

Forms Answer Navigate Options Recording 2015

How long ago, in hours, has it been since you breathed fumes from fingernail polish?

1. ENTER HOURS

2. ENTER DATE AND TIME

13c VTQ281e	1	YES
15b VTQ281fG		
15b VTQ281fQ		
15b VTQ281fD		
15b VTQ281fT		

VTQ281F This question asks the SP to report the number of hours between the time they breathed fumes from fingernail polish and the current time.

NIANES IV MEC Questionnaire

Forms Answer Navigate Options Year 11

In the **past 7 days**, were any chemical products used in your home to control fleas, roaches, ants, termites, or other insects?

THIS ITEM IS COLLECTED VIA PROXY FOR SPS 8-17.

1. YES
 2. NO

LABEL	Pesticide Use
05a PUQ100	<input type="checkbox"/>
05a07a PUQ110	<input type="checkbox"/>

NIANES IV MEC Questionnaire

Forms Answer Navigate Options Year 11

In the **past 7 days**, were any chemical products used in your lawn or garden to kill weeds?

CODE 'NO' IF THE RESPONDENT SAYS S/HE DOES NOT HAVE A LAWN OR GARDEN

THIS ITEM IS COLLECTED VIA PROXY FOR SPS 8-17.

1. YES
 2. NO

LABEL	Pesticide Use
05a PUQ100	2 NO
05a07a PUQ110	<input type="checkbox"/>

4.2.4 Pesticide Use (PUQ)

This is a short section comprised of just two items. The information from this section will be used to interpret the measurements of pesticide in biologic specimens (blood and urine) collected from SPs.

The pesticide questions are administered to SPs 8 years of age and older. For SPs 18 years and older the items are asked directly of the SP at the time of the MEC interview. For SPs 8-17 years of age the questions are asked of a proxy via the Automated Proxy Form. The application then prefills the PUQ questions and makes them read only in the Blaise instrument.

PUQ100 This item asks about the use of chemical products to control fleas, roaches, ants, termites, or other insects. The period of interest is the past 7 days, and only products used inside the SP's home should be considered.

Include all forms of products such as aerosol or pump sprays and powders, but do not include traps. Include topical flea and tick treatments applied to pets, flea collars, and mosquito repellants.

For SPs 8-17 years of age, DO NOT ASK PUQ100 directly of the SP. The responses will be prefilled. Simply select "enter" on the keyboard to move on to the next question.

PUQ110 This item obtains information on the use of chemical weed killers in the SPs lawn or garden. The period of interest is the past 7 days.

Enter a response of "no" if the SP reports he or she does not have a lawn or garden.

For SPs 8-17 years of age, DO NOT ASK PUQ110 directly of the SP. The responses will be prefilled. Simply select "enter" on the keyboard to move on to the next question.

Blaise Data Entry - N:\NH4\Prj-Test\Mecv1\Beth\mec

Forms Answer Navigate Options Year 2

First I have some general questions about your health.

Would you say your health in general is ...

1. excellent, 5. poor?
 2. very good.
 3. good.
 4. fair, or

LABEL	HEALTH STATUS SECTION
WouldYouSay HUQ010	
ThinkingAbout HSQ470	0
NowThinking HSQ480	0
DuringThePast HSQ490	0
Cold4Wks HSQ500	2

NO

Old 4/214 Modified Dirty Navigate MEC

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INHALES IV MEC Questionnaire

Forms Answer Navigate Options Recording 2014

HAND CARD HSQ1

The next questions are about your recent health during the 30 days outlined on the calendar.

Did you have a head cold or chest cold that started during those 30 days?

1. YES
 2. NO

LABEL	HEALTH STATUS SECTION
00a09a HUQ010	2
99ab00a0/a14a HSQ500	
99ab HSQ510	

VeryGood

4.2.5 Current Health Status (HSQ)

This section of the interview is administered to SPs 12 years of age and older. It is a short section that collects information about selected health conditions over the past 30 days and about blood donations.

HUQ010 This question asks the SP to indicate his or her general health status. It's important to note that we're interested in the subject's own perception of his or her health. If he or she is unsure or has difficulty characterizing his or her health status, remind the SP that there is no right or wrong answer and that you're simply interested in his or her opinion.

HSQ500 This question is the first in a series of questions designed to determine the frequency of colds and viral or bacterial infections during the past 30 days. Sinus infections should also be coded as "yes" responses. We are interested in a condition that started during the 30-day period, whether or not the condition exists at the time of the interview.

Blaise Data Entry - N:\NH4\Prj-Test\mecv1\Beth\mec

Forms Answer Navigate Options Recording Year 2

PAUSE RESUME STOP

HAND CARD HSQ1

Did you have a stomach or intestinal illness with vomiting or diarrhea that started during those 30 days?

1. YES
 2. NO

LABEL	HEALTH STATUS SECTION	
00a09a HUQ010	2	VeryGood
99ab00a07a14a HSQ500	1	YES
99ab HSQ510	1	

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Forms Answer Navigate Options Recording Year 2

PAUSE RESUME STOP

HAND CARD HSQ1

Did you have flu, pneumonia, or ear infections that started during those 30 days?

1. YES
 2. NO

99ab07a HSQ520	<input type="checkbox"/>
02a07a HSQ571	<input type="checkbox"/>
99ab07a HSQ580	<input type="checkbox"/>
99ab07a HSQ590	<input type="checkbox"/>

Blaise Data Entry - N:\NH4\Prj-Test\mecv1\Beth\mec

Forms Answer Navigate Options Year 2

During the past 12 months, that is, since March, 2001, have you donated blood?

1. YES
 2. NO

99ab HSQ510	2	NO
99ab HSQ520	2	NO
02a HSQ571	<input type="checkbox"/>	
99abk HSQ580	<input type="checkbox"/>	
99ab HSQ590	<input type="checkbox"/>	

Old 5/190 Modified Dirty Navigate MEC

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- HSQ510 This question specifically asks about stomach or intestinal illness with vomiting or diarrhea. A stomach condition without the presence of vomiting or diarrhea should not receive a “yes” response. Vomiting that is secondary to another condition (e.g., vertigo accompanied by vomiting or pregnancy-related nausea) and not due to a stomach illness should be coded as a “no” response.
- HSQ520 This question is used to assess the frequency of viral infections. Again, the reference period is the 30 days outlined on the hand card.
SPs younger than 16 years of age skip to the next section.
- HSQ571 This item asks the SP to indicate if they have donated blood in the previous year. Both whole blood and plasma donations should be coded “yes.” Blood drawn for laboratory analysis or self blood banking situations should be coded “no.”
Responses other than “yes” skip to HSQ590.

NHANES IV MEC Questionnaire

Forms Answer Navigate Options Year 9

How long ago was your last blood donation?

IF LESS THAN ONE MONTH, ENTER "1"
ENTER NUMBER OF MONTHS

99ab H5Q610	2	NO
99ab07a H5Q620	2	NO
02a07a H5Q671	1	YES
99abk07a H5Q680	<input type="text"/>	

NHANES IV MEC Questionnaire

Forms Answer Navigate Options Recording 2015

The next question is about the test for HIV, the virus that causes AIDS. Except for tests you may have had as part of blood donations, have you ever been tested for HIV?

1. YES
 2. NO

99ab07a15a H5Q520	2	NO
02a07a H5Q571	2	NO
99abk07a H5Q580	<input type="text"/>	
99ab07a15a H5Q590	<input type="text"/>	

HSQ580 SPs who have donated blood in the past year are asked how many months ago the last donation occurred. If the donation was made in the past month, enter “1.”

HSQ590 With the exception of HIV testing done as part of a blood donation, this question asks if the SP has ever had his or her blood tested for the presence of the Human Immunodeficiency Virus, which causes AIDS. To qualify for a “yes” response, the SP would have received, or been able to receive, the test results indicating the presence or absence of HIV in his or her blood. If the SP indicates hesitancy in answering this question, reassure him or her that you are only interested in whether he or she has been tested and not in the test results. In addition to testing prior to blood donation, HIV testing is commonly done during pregnancy, offered to many health care workers, and when applying for life insurance.

DPQ1

Not at all

Several days

More than half the days

Nearly every day

4.2.6 Depression Screen (DPQ)

SPs 12 years and older will be administered a depression screener questionnaire. Depression will be assessed using the Patient Health Questionnaire (PHQ-9). This screening instrument has been validated against independent structured diagnostic interviews in both clinical and general population studies, and serves both as a depression severity measure as well as a diagnostic instrument for the *Diagnostic and Statistical Manual of Mental Disorders*, 4th edition (DSM-IV) depressive disorders. The PHQ-9 refers to the previous 2-week interval and consists of nine items of depression symptoms and one question on functional impairment.

Analysis of the NHANES 2005-2006 data showed that 5.4% of Americans 12 and older experienced depression in any 2 week period. Rates were higher in 40-59 year olds, women, non Hispanic black persons than other demographic groups. Rates of depression were also higher among poor persons compared to those with higher incomes.

The depression screen is not administered if the MEC interview is completed with a proxy.

Hand Card DPQ1 is used with DPQ010-DPQ090 to assist the SP in quantifying the frequency of the symptoms. Use the following guidelines for probing and/or coding items.

- If the SP reports experiencing the symptom only once during the 2-week period for DPQ010-DPQ080, enter a code of “0” (not at all). If the SP reports experiencing the symptom only once during the 2-week period for DPQ090, enter a code of “1” (several days).
- If the SP gives a response that seems to fit between two categories, repeat those two options. For example, if he or she said “off and on,” repeat “would that be several days?” or “more than half the days?”
- Code the response as “more than half the days,” if the SP reports experiencing the symptom for a week or more in the past 2 weeks, but less frequently than “nearly every day.”
- Code the response as “nearly every day” if the symptom occurred almost every day during the past 2 weeks, or if the SP reports that he or she experienced the symptom on 12 or more days.

NIANES IV MEC Questionnaire
Forms Answer Navigate Options Year 7

HAND CARD DPQ1
Over the last 2 weeks, how often have you been bothered by any of the following problems:

little interest or pleasure in doing things? Would you say...

0. not at all,
 1. several days,
 2. more than half the days, or
 3. nearly every day?

LABEL	DEPRESSION SCREEN
05ac DPQ010	<input type="checkbox"/>
05ac DPQ020	<input type="checkbox"/>
05ac DPQ030	<input type="checkbox"/>

NIANES IV MEC Questionnaire
Forms Answer Navigate Options Year 7

HAND CARD DPQ1
[Over the last 2 weeks, how often have you been bothered by any of the following problems:]

feeling down, depressed, or hopeless?

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

LABEL	DEPRESSION SCREEN
05ac DPQ010	0 notatall
05ac DPQ020	<input type="checkbox"/>
05ac DPQ030	<input type="checkbox"/>

NIANES IV MEC Questionnaire
Forms Answer Navigate Options Year 7

HAND CARD DPQ1
[Over the last 2 weeks, how often have you been bothered by any of the following problems:]

trouble falling or staying asleep, or sleeping too much?

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

LABEL	DEPRESSION SCREEN
05ac DPQ010	0 notatall
05ac DPQ020	0 notatall
05ac DPQ030	<input type="checkbox"/>

- DPQ010 This is the first item to assess the presence of symptoms associated with depression. The question asks the respondent to quantify how often he or she has been bothered by little interest or pleasure in doing things, or anhedonia. Be sure to emphasize the period of interest (“last 2 weeks”) when reading the question.
- DPQ020 This item asks the SP to quantify how often he or she experienced a depressed mood during the past 2 weeks.
- DPQ030 SPs are asked to report how frequently they experienced problems sleeping. The question refers to three types of sleeping difficulties: problems falling asleep; difficulty staying asleep, or sleeping too much.

NIANES IV MEC Questionnaire
Forms Answer Navigate Options Year 7

HAND CARD DPQ1
[Over the last 2 weeks, how often have you been bothered by any of the following problems:]

feeling tired or having little energy?

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

05ac DPQ040		
05ac DPQ050		
05ac DPQ060		
05ac DPQ070		

NIANES IV MEC Questionnaire
Forms Answer Navigate Options Year 7

HAND CARD DPQ1
[Over the last 2 weeks, how often have you been bothered by any of the following problems:]

poor appetite or overeating?

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

05ac DPQ040	1	severaldays
05ac DPQ050		
05ac DPQ060		
05ac DPQ070		

NIANES IV MEC Questionnaire
Forms Answer Navigate Options Year 7

HAND CARD DPQ1
[Over the last 2 weeks, how often have you been bothered by any of the following problems:]

feeling bad about yourself - or that you are a failure, or have let yourself, or your family down?

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

05ac DPQ040	1	severaldays
05ac DPQ050	0	notatall
05ac DPQ060		
05ac DPQ070		

- DPQ040 SPs are asked to quantify how often they experienced a lack of energy or felt tired during the last 2 weeks.
- DPQ050 This item asks the SP to report how frequently he or she experienced problems eating, either a lack of appetite or eating too much.
- DPQ060 This item asks the SP to quantify how often he or she felt bad about himself or herself, experienced feelings of failure, or felt he or she had let himself/herself or a family member down.

NIANES IV MEC Questionnaire

Forms Answer Navigate Options Year 7

HAND CARD DPQ1
 [Over the last 2 weeks, how often have you been bothered by any of the following problems:]

trouble concentrating on things, such as reading the newspaper or watching TV?

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

05ac DPQ040	1	severaldays
05ac DPQ050	0	notatall
05ac DPQ060	0	notatall
05ac DPQ070		

NIANES IV MEC Questionnaire

Forms Answer Navigate Options Year 7

HAND CARD DPQ1
 [Over the last 2 weeks, how often have you been bothered by any of the following problems:]

moving or speaking so slowly that other people could have noticed? Or the opposite - being so fidgety or restless that you have been moving around a lot more than usual?

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

05ac DPQ080		
05ac DPQ090		
05a DPQ100		

NIANES IV MEC Questionnaire

Forms Answer Navigate Options Year 11

HAND CARD DPQ1
 Over the last 2 weeks, how often have you been bothered by the following problem:

Thoughts that you would be better off dead or of hurting yourself in some way?

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

05ad06a07a DPQ080	0	notatall
05ad06a07a09a DPQ090		
05a06a07a DPQ100		

DPQ070 DPQ070 asks the SP to report how frequently he or she had difficulty concentrating.

DPQ080 This item asks the SP to quantify how often he or she experienced problems moving or speaking so slowly that other people noticed, or was more restless or fidgety than usual.

DPQ090 This is the final item to assess symptoms of depression. SPs are asked about suicidal ideation, or about whether they have thought about harming themselves. If the SP reports experiencing the symptom only once during the 2-week period for DPQ090, enter a code of “1” (several days). Subjects who respond affirmatively to this item (i.e., responses of “several days,” “more than half the days,” or “nearly every day”) will be seen by the MEC physician for assessment and possible mental health referral. A notice is automatically sent to the physician when the Blaise CAPI instrument is closed.

NIMHANS IV MEC Questionnaire

Forms Answer Navigate Options Year 7

How **difficult** have these problems made it for you to do your work, take care of things at home, or get along with people?

C 0. Not at all difficult,
 C 1. somewhat difficult,
 C 2. very difficult, or
 C 3. extremely difficult?

05a DPQ080	<input type="text" value="1"/>	severaldays
05a DPQ090	<input type="text" value="1"/>	severaldays
05a DPQ100	<input type="text"/>	

DPQ100 DPQ100 assesses functional impairment. SPs are asked to quantify the extent to which symptoms of depression impair their ability to perform their daily activities or to get along with people. DPQ100 is only asked if at least one of the depressive symptoms is endorsed in DPQ010 through DPQ090.

NHANES IV MEC Questionnaire 2014

Forms Answer Navigate Options Recording

PAUSE RESUME STOP

HAND CARD SMQ1
 The following questions ask about use of tobacco products in the past **5 days**.

During the past **5 days**, including today, did you smoke cigarettes, pipes, cigars, little cigars or cigarillos, water pipes, hookahs, or e-cigarettes?

1. YES
 2. NO

LABEL	SMOKING SECTION
13a SMQ681	
13a SMQ692	
99abk13a SMQ710	

NHANES IV MEC Questionnaire 2014

Forms Answer Navigate Options Recording

PAUSE RESUME STOP

HAND CARD SMQ1
 Which of these products did you smoke?

(CHECK ALL THAT APPLY)

1. Cigarettes
 2. Pipes
 3. Cigars, or little cigars, or cigarillos
 4. Water pipes or Hookahs
 5. E-cigarettes

LABEL	SMOKING SECTION
13a SMQ681	1 YES
13a SMQ692	
99abk13a SMQ710	

4.2.7 Tobacco (SMQ)

The questions in this section cover current tobacco use for SPs 18 years of age and older and exposure to secondhand smoke for SPs 12-17 years old. Questions for SPs 18 and older focus only on the use of tobacco products during the past 5 days and questions for SPs 12-17 focus on exposure to secondhand smoke during the last 7 days. Youths 12-17 years of age are asked detailed questions on tobacco use in the audio-CASI portion of the interview.

SMQ681 This question, and the series that follow it, are used to quantify the level of usage for current users of smoking tobacco. Remember to read the entire question, even if the subject responds before you have completed reading the entire list of products. Hand Card SMQ1 is used with SMQ681 and SMQ692 to assist the SP in quantifying the frequency of the symptoms.

Subjects who respond other than “Yes” skip to questions about smokeless tobacco products.

SMQ692 If the SP reports having smoked any of these products in the past 5 days, this question asks the SP to specify which types of products he or she has smoked. The remainder of this question series follows up with questions appropriate only to those products the SP reports smoking in the past 5 days. The “past 5 days” refers to the current day and the 4 days immediately preceding the interview.

Remember to probe for “What other products did you smoke?”

7/19/2015 11:39 AM MEC Questionnaire

Forms Answer Navigate Options Recording Year 14

During the past 5 days, including today, on how many days did you smoke cigarettes?

ENTER NUMBER OF DAYS

LABEL	SMOKING SECTION	
13a SMQ681	1	YES
13a SMQ692	1-2-3-4-5	
99abk13a SMQ710	1	

7/19/2015 11:39 AM MEC Questionnaire

Forms Answer Navigate Options Recording Year 14

During the past 5 days, including today, on the days you smoked, how many cigarettes did you smoke each day?

IF R SAYS 95 OR MORE CIGARETTES PER DAY, ENTER 95.

ENTER NUMBER OF CIGARETTES

99abk00a13a SMQ720	
99abk00a13a SMQ725	
99ab13a SMQ740	
13a SMQ771	

Blaise Data Entry - C:\models\Mec\Mec

Forms Answer Navigate Options

When did you smoke your last cigarette? Was it...

1. today,
 2. yesterday, or
 3. 3 to 5 days ago?

TobaccoP5Use SMQ680	1	YES
TobaccoP5Types SMQ690	1-2-3-4-5-6	
CigaretP5Freq SMQ710	1	
CigaretP5AvgDay SMQ720	1	
SmokeLastcigaret SMQ725		

Old 7/218 Modified Dirty Navigate MEC

Start Exploring - M... Blaise Blaise Data ... Snagit/32 C... 4:10 PM

- SMQ710 This question quantifies the smoker's current use of cigarettes. In the 4 days immediately before the interview and the day of the interview, count the number of days the respondent smoked cigarettes, even if he or she took only a few puffs.
- SMQ720 This question is asked of all current cigarette smokers to determine the number of cigarettes, not packs, smoked in the past 5 days. Note that one pack contains 20 cigarettes if the SP needs assistance converting number of packs to cigarettes. We are interested in the average number of cigarettes smoked per day, only for those days in the past five that the respondent smoked. If the respondent indicates that he or she smokes more than 95 cigarettes per day on average, enter a response of "95."
- SMQ725 This question asks the respondent to indicate when in the past 5 days he or she last smoked a cigarette. Note that the response categories are read as part of the question. The SP's response to SMQ725 should be consistent with the information in SMQ710. For example, if the SP reports smoking cigarettes on each of the past 5 days (including today) in SMQ710, she or he should respond in SMQ725 that she or he smoked today. The computer program does not contain an edit to check for this, so you need to be alert to potential discrepant responses.

Forms Answer Navigate Options Recording Year 14

PAUSE RESUME STOP

During the past **5 days**, including today, on how many days did you smoke a pipe?

ENTER NUMBER OF DAYS

99abk00a13a SMQ720	2	
99abck00a13a SMQ725	2	YesterdayOr
99ab13a SMQ740		
13a SMQ771		

Forms Answer Navigate Options Recording Year 14

PAUSE RESUME STOP

During the past **5 days**, including today, on how many days did you smoke cigars, or little cigars or cigarillos?

ENTER NUMBER OF DAYS

99abk00a13a SMQ720		
99abck00a13a SMQ725		
99ab13a SMQ740		
13a SMQ771		

Forms Answer Navigate Options Recording Year 14

PAUSE RESUME STOP

During the past **5 days**, including today, on how many days did you smoke tobacco in a water pipe or Hookah?

ENTER NUMBER OF DAYS

13a SMQ845		
13a SMQ849		
13a SMQ851		
13a SMQ853		

SMQ740 If the respondent indicated that he or she smoked a pipe in the past 5 days, he or she will be asked this question. Refer to the specifications from SMQ710.

SMQ771 If the respondent indicated that he or she smoked a cigars, little cigars, or cigarillos in the past 5 days, he or she will be asked this question. Refer to the specifications from SMQ710.

Traditional cigars contain lightly rolled cured tobacco that is wrapped in a tobacco leaf. Cigarillos and little cigars are smaller than traditional cigars. Some are the same size as cigarettes and some come with plastic or wooden tips. Common brands are Black and Mild, Swisher Sweets, Dutch Master, Phillies Blunts, Prime Time and Winchester.

SMQ845 If the respondent indicated that he or she smoked tobacco in a water pipe or Hookah in the past 5 days, he or she will be asked this question. Refer to the specifications from SMQ710.

A hookah is a water pipe with a smoke chamber, a bowl, a pipe and a hose. Tobacco (often flavored) is heated, and the smoke passes through water and is then drawn through a rubber hose to a mouthpiece. There are many types of hookahs. People often smoke in groups in cafes or in hookah bars.

Forms Answer Navigate Options Recording Year 14

PAUSE RESUME STOP

During the past **5 days**, including today, on how many days did you smoke an e-cigarette?

ENTER NUMBER OF DAYS

13a SMQ845	2
13a SMQ849	1
13a SMQ851	
13a SMQ853	

Forms Answer Navigate Options Recording Year 14

PAUSE RESUME STOP

Smokeless tobacco products are placed in the mouth or nose and include chewing tobacco, snuff, snus, or dissolvables.

During the past **5 days**, including today, did you use any smokeless tobacco?

(Please do not include nicotine replacement products like patches, gum, lozenge, or spray which are considered products to help you stop smoking.)

1. YES

2. NO

13a SMQ845	2
13a SMQ849	1
13a SMQ851	
13a SMQ853	

Forms Answer Navigate Options Recording Year 14

PAUSE RESUME STOP

Which of these products did you use?

(CHECK ALL THAT APPLY)

1. Chewing tobacco

2. Snuff

3. Snus

4. Dissolvables

13a SMQ845	2
13a SMQ849	1
13a SMQ851	1
13a SMQ853	

YES

SMQ849 If the respondent indicated that he or she smoked an e-cigarette in the past 5 days, he or she will be asked this question. Refer to the specifications from SMQ710.

E-cigarettes look like regular cigarettes but are battery-powered. The device converts a nicotine-containing solution into a vapor mist (not smoke) which is inhaled by the user. It can be purchased as one-time disposable products or as reusable kits with a cartridge. Cartridges come in different flavors and nicotine concentrations. E-cigarettes are not regulated by the FDA as a nicotine delivery device.

SMQ851 This question, and the series that follow it, are used to quantify the level of usage for current users of smokeless tobacco. Remember to read the entire question, even if the subject responds before you have completed reading the entire list of products. Subjects who respond other than “yes” skip to questions about nicotine replacement therapy products.

SMQ853 If the SP reports having used any of these smokeless products in the past 5 days, this question asks the SP to specify which types of products he or she has used. The remainder of this question series follows up with questions appropriate only to those products the SP reports using in the past 5 days. The “past 5 days” refers to the current day and the 4 days immediately preceding the interview.

Remember to probe for “What other products did you use?”

Forms - Answer - Navigate - Options - Recording Year 14

PAUSE RESUME STOP

During the past **5 days**, including today, on how many days did you use chewing tobacco, such as Redman, Levi Garrett or Beechnut?

ENTER NUMBER OF DAYS

99ab13a SMQ800

99ab13a SMQ817

13a SMQ857

13a SMQ861

Forms - Answer - Navigate - Options - Recording Year 14

PAUSE RESUME STOP

During the past **5 days**, including today, on how many days did you use snuff, such as Skoal, Skoal Bandits, or Copenhagen?

ENTER NUMBER OF DAYS

99ab13a SMQ800

99ab13a SMQ817

13a SMQ857

13a SMQ861

Forms - Answer - Navigate - Options - Recording Year 14

PAUSE RESUME STOP

During the past **5 days**, including today, on how many days did you use snus?

ENTER NUMBER OF DAYS

99ab13a SMQ800

99ab13a SMQ817

13a SMQ857

13a SMQ861

- SMQ800 This question refers to the use of chewing tobacco. This tobacco-containing product is taken by mouth. The tobacco is not burned. If the respondent indicated that he or she used chewing tobacco in the past 5 days, he or she will be asked this question. Refer to the specifications from SMQ710.
- SMQ817 If the respondent indicated that he or she used snuff in the past 5 days, he or she will be asked this question. Snuff is taken by mouth or rarely, by nose. The tobacco is not burned. Refer to the specifications from SMQ710.
- SMQ857 If the respondent indicated that he or she used snus in the past 5 days, he or she will be asked this question. Snus (rhymes with “loose”) is moist tobacco in a small pouch that is placed under the lip. The tobacco is not burned. Refer to the specifications from SMQ710.

Forms Answer Navigate Options Recording Year 14

PAUSE RESUME STOP

During the past **5 days**, including today, on how many days did you use dissolvables such as strips or orbs?

ENTER NUMBER OF DAYS

99ab13a SMQ800
99ab13a SMQ817
13a SMQ857
13a SMQ861

3

Forms Answer Navigate Options Recording Year 14

PAUSE RESUME STOP

During the past **5 days**, including today, did you use any nicotine replacement therapy products such as nicotine patches, gum, lozenges, inhalers, or nasal sprays?

1. YES
 2. NO

13a SMQ863
99ab13a SMQ830
99ab13a SMQ840
13a SMQ860

Forms Answer Navigate Options Recording Year 14

PAUSE RESUME STOP

During the past **5 days**, including today, on how many days did you use any nicotine replacement therapy products such as nicotine patches, gum, lozenges, inhalers, or nasal sprays?

ENTER NUMBER OF DAYS

13a SMQ863
99ab13a SMQ830
99ab13a SMQ840
13a SMQ860

1 YES

- SMQ861 If the respondent indicated that he or she used dissolvables in the past 5 days, he or she will be asked this question. Dissolvable tobacco is finely milled tobacco that is pressed into shapes like tablets that dissolve in the mouth. It comes in a variety of shapes including round pellets (orbs), sticks, and flat strips. The tobacco is not burned. Refer to the specifications from SMQ710.
- SMQ863 This question, and the series that follow it, are used to quantify the level of usage for current users of nicotine replacement therapy products. Remember to read the entire question, even if the subject responds before you have completed reading the entire list of products.
Subjects who respond other than “yes” skip to the next section.
- SMQ830 This item applies to any nicotine-containing product that the respondent may have used in an effort to stop smoking. Use the specifications from SMQ710.

Forms Answer Navigate Options Recording Year 14

PAUSE RESUME STOP

When did you last use a nicotine replacement therapy product? Was it...

1. today,
 2. yesterday, or
 3. 3 to 5 days ago?

13a SMQ863	1	YES
99ab13a SMQ830	2	
99abc13a SMQ840	1	
13a SMQ860		

Forms Answer Navigate Options Recording Year 14

PAUSE RESUME STOP

The next questions are about your exposure to other people's tobacco smoke.

During the last 7 days, did you spend time in a **restaurant**?

1. YES
 2. NO

13a SMQ863		
99ab13a SMQ830		
99abc13a SMQ840		
13a SMQ860		

Forms Answer Navigate Options Recording Year 14

PAUSE RESUME STOP

While you were in a **restaurant**, did someone else smoke cigarettes or other tobacco products indoors?

1. YES
 2. NO

13a SMQ862		
13a SMQ870		
13a SMQ872		
13a SMQ874		

SMQ840 Follow the specifications for SMQ725. This is the last question for SPs 18 years of age and older.

SMQ860 This question is the first in a series of questions for SPs 12-17 years old about secondhand smoke exposure at various locations during the last 7 days. It is a two-tiered series of questions in that first the respondent is asked about whether he/she spent time at a location and then he/she is asked about smoking exposure at the location. All of the follow-up questions refer to smoking indoors. If only the respondent was smoking at any of these locations, do not include as an affirmative response.

The first question asks if the SP spent time in a restaurant during the past 7 days. Fast food restaurants, a formal sit down restaurant with a bar, a food court, and similar places are all included in this question.

SMQ862 SPs who report being in a restaurant in the last 7 days are asked if someone smoked cigarettes or other tobacco products indoors.

Forms - Answer - Navigate - Options - Recording Year 14

PAUSE RESUME STOP

During the last 7 days, did you ride in a **car or motor vehicle**?

1. YES
 2. NO

13a SMQ862	1	YES
13a SMQ870	<input type="checkbox"/>	
13a SMQ872	<input type="checkbox"/>	
13a SMQ874	<input type="checkbox"/>	

Forms - Answer - Navigate - Options - Recording Year 14

PAUSE RESUME STOP

While you were riding in a **car or motor vehicle**, did someone else smoke cigarettes or other tobacco products?

1. YES
 2. NO

13a SMQ862	1	YES
13a SMQ870	1	YES
13a SMQ872	<input type="checkbox"/>	
13a SMQ874	<input type="checkbox"/>	

Forms - Answer - Navigate - Options - Recording Year 14

PAUSE RESUME STOP

During the last 7 days, did you spend time in a **home other than your own**?

1. YES
 2. NO

13a SMQ862	1	YES
13a SMQ870	1	YES
13a SMQ872	1	YES
13a SMQ874	<input type="checkbox"/>	

SMQ870 This question asks if the SP rode in a car or motor vehicle during the past 7 days.

SMQ872 SPs who report riding in a car or motor vehicle in the last 7 days are asked if someone smoked cigarettes or other tobacco products inside the car.

SMQ874 This question asks if the SP spent time in a home other than his or her own during the last 7 days.

Forms Answer Navigate Options Recording Year 14

PAUSE RESUME STOP

While you were in a **home other than your own**, did someone else smoke cigarettes or other tobacco products indoors?

1. YES
 2. NO

13a SMQ876		
13a SMQ878		
13a SMQ880		

Forms Answer Navigate Options Recording Year 14

PAUSE RESUME STOP

During the last 7 days, were you in **any other indoor area**?

1. YES
 2. NO

13a SMQ876	1	YES
13a SMQ878		
13a SMQ880		

Forms Answer Navigate Options Recording Year 14

PAUSE RESUME STOP

While you were in the **other indoor area**, did someone else smoke cigarettes or other tobacco products?

1. YES
 2. NO

13a SMQ876	1	YES
13a SMQ878	1	YES
13a SMQ880		

- SMQ876 SPs who report being in a home other than their own in the last 7 days are asked if someone else smoked cigarettes or other tobacco products indoors.
- SMQ878 This question asks if the SP was in any other indoor area during the last 7 days. This is a broad question as respondents could have been at school, a store or any number of indoor locations that haven't been previously asked about in the past 7 days.
- SMQ880 SPs who report being in other indoor areas in the last 7 days are asked if someone smoked cigarettes or other tobacco products.

NIH/NIA IV MEC Questionnaire

Forms Answer Navigate Options Year 10

The next questions are about drinking alcoholic beverages. Included are liquor (such as whiskey or gin), beer, wine, wine coolers, and any other type of alcoholic beverage.

In **any one year**, have you had at least 12 drinks of any type of alcoholic beverage? By a drink, I mean a 12 oz. beer, a 5 oz. glass of wine, or one and a half ounces of liquor.

1. YES
 2. NO

LABEL ALCOHOL SECTION
 02a07a08a ALQ101 YES
 99abc00a02a05d07a ALQ110

Blaise Data Entry - C:\models\Mec\Mec

Forms Answer Navigate Options

In your **entire life**, have you had at least 12 drinks of any type of alcoholic beverage?

1. YES
 2. NO

LABEL ALCOHOL SECTION
 Had12Drinks1Yr ALQ100 2 NO
 Had12DrinksLife ALQ110

Old 10/218 Modified Dirty Navigate MEC

Start Exploring - M... Blaise Blaise Dat... Snagit/32 C... 4:12 PM

4.2.8 Alcohol Use (ALQ)

This section obtains information on the use of alcohol. Sample persons 18 years of age and older are asked these questions in the CAPI format, while SPs 12-17 years are asked alcohol-related questions in the audio-CASI section of the MEC Interview.

Questions in this section capture information on different types of drinking.

- ALQ101: Former drinkers/Current drinkers.
- ALQ110: Lifetime abstainers.
- ALQ120: Frequency of consumption in the past 12 months.
- ALQ130: Average alcohol consumption on days alcohol consumed in the past 12 months.
- ALQ141: Episodic heavy drinking.
- ALQ151: Excessive risky drinking.
- ALQ160: Binge drinking.

Interviewers should read the questions slowly and emphasize bolded words as they help distinguish each question. Some questions contain probes. Probes should only be used if the SP is having a difficulty with the question.

ALQ101 The introduction defines alcoholic beverages for the respondent. Be sure to read the entire introduction.

The question uses a reference period of any one year, not necessarily the last year. Make sure to emphasize the words “any one year.” The threshold for measuring alcohol intake for this question is 12 drinks, an average of one per month. If the SP answers “yes,” he or she skips to ALQ120. Otherwise, the SP continues with ALQ110.

ALQ110 Emphasize that this question is asking for lifetime consumption. SPs who only drink on special occasions would be included if they have had at least 12 drinks in their entire life. SPs who have not consumed at least 12 drinks in their lifetime are not asked additional questions in this section.

NHANES IV MEC Questionnaire

Forms Answer Navigate Options Year 11

In the past 12 months, how often did you drink any type of alcoholic beverage?

PROBE: How many days per week, per month, or per year did you drink?

ENTER '0' FOR NEVER
ENTER QUANTITY

NHANES IV MEC Questionnaire

Forms Answer Navigate Options Year 11

In the past 12 months, how often did you drink any type of alcoholic beverage? 1

PROBE: How many days per week, per month, or per year did you drink?

ENTER '0' FOR NEVER
ENTER QUANTITY

ENTER UNIT

1. WEEK
 2. MONTH
 3. YEAR

ALQ120 This item quantifies the number of days that the SP consumed alcohol in the past 12 months. The respondent has the option of choosing to estimate his or her answer in units of days per week, per month, or per year. Please record the answer in the unit specified by the SP.

If the SP indicates he or she didn't drink at all during the past 12 months, enter "0" in the quantity field. The program will automatically skip to the next appropriate question (ALQ150) without you having to enter a response in the unit field.

ALQ120
(cont.)

The screenshot shows a web browser window titled "NHANES IV MEC Questionnaire". The browser's address bar shows "Year 10". The page content includes the following text:

In the past 12 months, on those days that you drank alcoholic beverages, on the average, how many drinks did you have? (By a drink, I mean a 12 oz. beer, a 5 oz. glass of wine, or one and a half ounces of liquor.)

IF LESS THAN 1 DRINK, ENTER 1.

IF 95 DRINKS OR MORE, ENTER 95.

ENTER NUMBER OF DRINKS.

At the bottom of the form, there is a small text box containing the alphanumeric string "99ab07a06a ALQ130".

ALQ130 This question is collecting information on the average number of drinks that the SP normally consumes on the days that they drank alcohol. The responses to ALQ120 and ALQ130 should be consistent with the response to ALQ101. For example, if the SP reports a pattern of consumption that totals 12 or more drinks in the past year, the SP should have answered “yes” to ALQ101. There is no edit to check for this, so you will need to be alert to possible discrepancies.

The response to ALQ130 should reflect **average alcohol consumption** for the time period (unit) that was answered in ALQ120. Here are some examples.

- If the SP answers “7 days/week” in ALQ120 and had a glass of wine every day in the past week, then the average is ‘1’ drink.
- If the SP answers that they had alcohol “2 days/week” for ALQ120 and 4 drinks on each day they drank, then the average is ‘4’.
- “If the SP answers “7 days/week” in ALQ120 and had a glass of wine every day in the past week except one where they had 3, the average is ‘1’ drink.”

NHANES IV MEC Questionnaire

Forms Answer Navigate Options Year 11

In the past 12 months, on how many days did you have 5 or more drinks of any alcoholic beverage?

PROBE: How many days per week, per month, or per year did you have 5 or more drinks in a single day?
 ENTER '0' FOR NONE.
 ENTER QUANTITY

NHANES IV MEC Questionnaire

Forms Answer Navigate Options Year 11

In the past 12 months, on how many days did you have 5 or more drinks of any alcoholic beverage?

PROBE: How many days per week, per month, or per year did you have 5 or more drinks in a single day?
 ENTER '0' FOR NONE.
 ENTER QUANTITY

ENTER UNIT

1. WEEK
 2. MONTH
 3. YEAR

Blaise Data Entry - C:\models\Mec\Mec

Forms Answer Navigate Options

Was there ever a time or times in your life when you **drank 5 or more drinks** of any kind of alcoholic beverage **almost every day**?

1. YES
 2. NO

MT5DrEveryDay ALQ150

Old 14/218 Modified Dirty Navigate MEC

Start Exploring - M... Blaise Blaise Dat... Snagit/32 C... 4:13 PM

ALQ141 Men are asked on how many days specifically in the past year he had five or more drinks per day. Women are asked on how many days specifically in the past years she had four or more drinks per day. The response should not exceed the answer given in ALQ120.

“Responses should be recorded exactly how the SP reports it. Responses should not be converted to different units.”

ALQ141
(cont.)

ALQ151 This is a sensitive item, which seeks to obtain information on problem drinking by probing the SP’s past consumption habits. Men are asked about five or more drinks while females are asked about four or more drinks. The emphasis of this question is that four/five or more drinks were consumed almost every day.

Forms Answer Navigate Options Recording Year 14

PAUSE RESUME STOP

During the **past 30 days**, how many times did you **drink 4 or more drinks** of any kind of alcohol in about **two hours**?
 ENTER '0' FOR NEVER.

ENTER QUANTITY

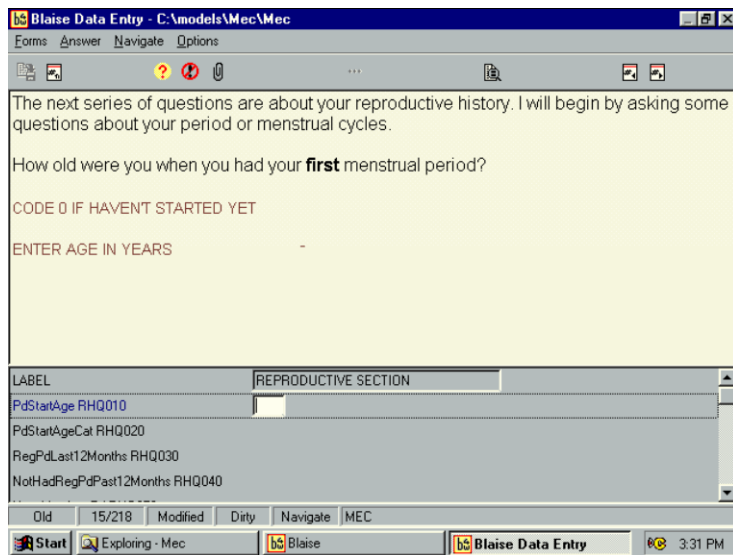
11a ALQ151	1	YES
13a ALQ160		

ALQ155 This is a sensitive item, which seeks to obtain information on the number of times the SP drank four or five drinks in a two hour period. Again, females will be asked about the number of times she drank four or more drinks in a two hour period while men will be asked about five or more drinks.

Note: Every two hour time frame is considered “1 time.” For example, if a female SP had 4 or more drinks from 8:00pm – 10:00pm and 4 or more drinks again from 10:00pm – 12:00am, it would count as 2 times even though it occurred during the same day. Use the calendar card for this question to aid SPs if necessary.

Binge drinkers are not necessarily excessive or habitual drinkers. Here is an example:

- In the past month, a male SP went to one happy hour, and had 5 or more drinks in less than 2 hours. The answer for ALQ155 is ‘1’. If he did that every Friday during happy hour, the answer for ALQ155 would be ‘4.’ Although the frequency of binge drinking is higher in the second scenario, he would not be considered an excessive or habitual drinker.



4.2.9 Reproductive Health (RHQ)

The main purpose of the section on Reproductive Health is to obtain information from women on menstrual history, reproductive-related surgery, birth control, pregnancy and reproductive history, gestational diabetes, hormone replacement therapy, and breastfeeding practices. Questions on participation in the Special Supplemental Nutrition Assistance Program (SNAP) for Women, Infants, and Children (WIC) are asked of currently pregnant, recently pregnant, and breastfeeding women. This section is administered to all female respondents 12 years of age and older although the sequence of questions varies by age.

The items throughout this section are sensitive in nature, and you should administer these items in a neutral and professional manner. Reassure hesitant respondents that all information will be kept completely confidential.

Many of the questions in this section ask the respondent to recall information covering long periods of time. The items may require considerable probing, using special personal events to place past events in time. If exact ages cannot be remembered, get a best estimate from the respondent. You may find it helpful to use the small calculator provided with your interviewing materials to assist the SP in determining her age when specific events occurred.

RHQ010 Although older SPs must think back many years, it is important to obtain as exact an age as possible. If the SP cannot recall her exact age, ask her to give you a best estimate. Recalling a grade in school or other personal event around that time in her life may help her remember. If the SP remembers her age at the time her menstrual periods started in terms of a year, ask her to convert the year to her age at the time her periods began. If the SP is still unable to recall her age, code “99” for “don’t know.” Coding “don’t know” will cause the program to display a follow-up question that attempts to obtain an age range.

If the SP has not started her period, enter “0.” If the SP hasn’t begun menstruating, the program skips to the end of the section.

Blaise Data Entry - C:\models\Mec\Mec

Forms Answer Navigate Options

Were you...

1. younger than 10,
 2. 10 to 12,
 3. 13 to 15, or
 4. 16 or older?

LABEL REPRODUCTIVE SECTION

PdStartAge RHQ010 ?

PdStartAgeCat RHQ020

RegPdLast12Months RHQ030

NotHadRegPdPast12Months RHQ040

Old 15/218 Modified Dirty Navigate MEC

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NHANES IV MEC Questionnaire

Forms Answer Navigate Options Recording 2015

PAUSE RESUME STOP

Have you had **at least one menstrual period** in the **past 12 months**? Please do not include bleedings caused by medical conditions, hormone therapy, or surgeries.

1. YES
 2. NO

LABEL REPRODUCTIVE SECTION

99abc07a RHQ010 12

99abc7a RHQ020

03a07a15a RHQ031

RHQ020 If the SP does not know her age in RHQ010, this question offers age range answers from which she can choose.

RHQ031 Women who have had at least one period in the past year should be coded as a “Yes.” Spotting or bleeding due to hormone use or surgery is not considered a period. However if a woman has very light or almost nonexistent bleeding because she is taking birth control pills or using an injectable, count that as a period. Ninety-five percent of women have completed menopause by 55 years of age, so elderly women who respond affirmatively to this question should always be probed to determine whether the bleeding is caused by hormone replacement therapy.

Forms Answer Navigate Options Recording Year 14

PAUSE [2] RESUME [3] [4]

HARD CARD RHQ 1

What is the reason that you have not had a **period** in the past 12 months?

1. PREGNANCY

2. BREAST FEEDING

3. HYSTERECTOMY

7. MENOPAUSE/CHANGE OF LIFE

9. OTHER

[3] RHQ043

07a RHQ282

03a07a RHQ291

07a RHQ305

RHQ043 Women who have not had a period in the past 12 months are asked to indicate the reason. Hand Card RHQ1 is used with this question to assist the SP. This is a “code one” response. If the SP reports multiple reasons, choose the appropriate response using recency as the selection criterion. For example, if a woman says her periods stopped because she was pregnant in the past year and she further reports that she is breastfeeding and her periods haven’t resumed, code “breastfeeding.” **Exception:** If the SP reports both hysterectomy and menopause, choose the appropriate response using what occurred first. For example, if the SP went through menopause and then had a hysterectomy, code “menopause.” If the SP had not gone through menopause (i.e. was still having periods when she had a hysterectomy), code “hysterectomy.”

Pregnancy – Code “1” if the SP is currently pregnant or was pregnant in the past year. This response will always need probing, since pregnancy should usually only result in a loss of menses for 9 months. This response will most likely be given for a situation where breastfeeding follows pregnancy, which should be coded as “breastfeeding.”

Breastfeeding – Code “2” if the SP is currently breastfeeding or was breastfeeding in the past year and this resulted in her having no periods.

Hysterectomy – Code “3” for women who had not gone through menopause before they had a hysterectomy.

Menopause/Change of Life – Code “7” for women who have gone through menopause naturally.

Other – Code “9” if the SP reports not having periods for any other reason not covered by the preceding categories such as having a medical condition or treatment that has caused her period to cease. Examples include women receiving chemotherapy treatment, anorexia, women who are getting injections for birth control and have had no bleeding, and competitive athletes whose level of body fat is sufficiently low that it has caused their periods to stop. Women who go through menopause following a hysterectomy should not be included in this group. These women are captured in a previous category, “Hysterectomy.”

NHANES IV MEC Questionnaire

Forms Answer Navigate Options Year 9

Have you had a hysterectomy, including a partial hysterectomy, that is, surgery to remove your uterus or womb?

MARK IF KNOWN, OTHERWISE ASK.

1. YES
 2. NO

07a RHQ197	8	
99ab07a RHQ200	1	YES
07a RHQ205	1	YES
07a RHQ282		

NHANES IV MEC Questionnaire

Forms Answer Navigate Options Recording 2015

How old were you when you had your hysterectomy?

ENTER AGE IN YEARS

13a RHQ043	7	Menopause
07a RHQ282	1	YES
03a07a15a RHQ291		
07a15a RHQ305		

Questions RHQ282 through RHQ332 obtain information about the SP's surgical history. Women younger than 20 years of age or currently pregnant are not asked these questions.

RHQ282 The surgical removal of the uterus or womb is called a hysterectomy. Note that a partial hysterectomy (that is, when the ovaries are not removed) should be recorded as a "Yes" response. A tubal ligation would not be counted as a "Yes" response to this question. Tubal ligation is a sterilization procedure which involves cutting and tying or blocking the fallopian tubes.

RHQ291 A "Yes" response to RHQ282 prompts this follow-up question. Obtain as exact an age as possible. If the SP remembers the operation in terms of a year rather than her age, help her to convert the year to her age at the time she underwent her hysterectomy.

Forms | Answer | Navigate | Options | Recording | 2015

Have you had **both** of your ovaries removed either when you had your uterus removed or at any other time?

1. YES
 2. NO

13a RHQ043	3	Hysterectomy
07a RHQ282	1	YES
03a07a15a RHQ291	40	
07a15a RHQ305		

Forms | Answer | Navigate | Options | Recording | 2015

Have you had **both** of your ovaries removed?

1. YES
 2. NO

13a RHQ043	7	Menopause
07a RHQ282	2	NO
03a07a15a RHQ291		
07a15a RHQ305		

RHQ305 An operation to remove the ovaries is called an oophorectomy. If the ovaries were removed at the same time as a hysterectomy (removal of the uterus) was performed, it would be called a total hysterectomy. It is possible to have both ovaries removed, only one ovary removed, or only part of an ovary removed.

This question asks if the SP had both ovaries removed either when her uterus was removed or at another time. If the SP states that only parts of both ovaries were removed, the response should be coded as “No.” An SP who had one ovary removed, but still has part of the second ovary, would also be coded as “No.” Only total removal of both ovaries would result in a code of “Yes.”

In a partial removal of the ovary, some portion of the ovary may be taken to remove a cyst, for example, but usually enough will be left to maintain hormone production and fertility. It is the continued production of hormones that is of interest in this question.

RHQ305 If the SP has not indicated in previous questions that she has had a hysterectomy,
cont'd she will receive this version of the question.

NIH/NHES IV MEC Questionnaire

Forms Answer Navigate Options Year 9

How old were you when you had your ovaries removed or last ovary removed if removed at different times?

ENTER AGE IN YEARS

03a RHQ291

07a RHQ305 YES

07b RHQ332

05ad RHQ395

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Forms Answer Navigate Options

About how old were you when you had your **last** menstrual period?

ENTER AGE IN YEARS

AgeLastMPd RHQ060

HowOldWereYou RHQ070

Old 16/214 Modified Dirty Navigate MEC

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RHQ332 This question obtains the SP's age at the time her ovaries were removed or her age at the time the second ovary was removed if they were removed at different times.

RHQ060 Women who have gone through menopause, had a hysterectomy, or whose periods have ceased due to another reason not covered by the categories listed (coded "3", "7", or "9" in RHQ043) are asked their age when they had their last period. The age reported here should be about the same age or younger than the age of hysterectomy reported in RHQ291.

Note: If a woman had a hysterectomy with ovaries removed at same time and before menopause, then all three ages of these ages (RHQ291, RHQ332, and RHQ060) should match.

NIH/NES FY MEC Questionnaire

Forms Answer Navigate Options Year 6

Were you ...

1. younger than 30,
 7. 55 or older?

2. 30 to 34,

3. 35 to 39,

4. 40 to 44,

5. 45 to 49,

6. 50 to 54, or

03c RHQ042 MenopauseORHysterectomy

03ac RHQ051

99abc RHQ060

99ab RHQ070

Forms Answer Navigate Options Recording Year 14

The next questions are about your pregnancy history.

Have you ever attempted to become pregnant over a period of at least a year without becoming pregnant?

1. YES
 2. NO

07a RHQ032

99abc RHQ060

99ab07a RHQ070

13 RHQ074

Forms Answer Navigate Options Recording Year 14

Have you ever been to a doctor or other medical provider because you have been unable to become pregnant?

1. YES
 2. NO

13 RHQ076

13 RHQ078

03a13 RHQ131

03c RHQ143

RHQ070 If the SP does not know her exact age in RHIQ060, this question offers age ranges from which she can choose.

RHQ074 This is the first of three questions that obtain information about the SP's infertility history. Women aged 18 to 59 receive these questions.

The SP is asked if she has ever attempted to become pregnant over a period of at least a year without becoming pregnant.

RHQ076 This question asks the SP if she has ever been to a doctor or other medical provider because she has been unable to become pregnant.

Forms - Answer - Navigate - Options - Recording Year 14

PAUSE RESUME STOP

Have you ever been treated for an infection in your fallopian tubes, uterus or ovaries, also called a pelvic infection, pelvic inflammatory disease, or PID?

1. YES
 2. NO

13 RHQ076	1	YES
13 RHQ078	1	
03a13 RHQ131		
03c RHQ143		

RH-HANES IV MEC Questionnaire 2015

Forms - Answer - Navigate - Options - Recording

PAUSE RESUME STOP

HELP AVAILABLE

Have you **ever** been pregnant? Please include current pregnancy, live births, miscarriages, stillbirths, tubal pregnancies and abortions.

MARK IF KNOWN. OTHERWISE ASK.

1. YES
 2. NO

13a RHQ076	1	YES
13a RHQ078	2	NO
03a13a15a RHQ131	1	
03c RHQ143		

RHQ078 The final question in this series asks if the SP has ever been treated for an infection in her fallopian tubes, uterus or ovaries. This is also called pelvic infection, pelvic inflammatory disease, or PID.

“Pelvic Inflammatory Disease (PID) occurs when bacteria move upward from a woman’s vagina or cervix (opening to the uterus) into her reproductive organs. Many different organisms can cause PID, but many cases are associated with gonorrhea and chlamydia, two very common bacterial STDs. PID can damage the fallopian tubes and tissues in and near the uterus and ovaries. It can lead to serious consequences including infertility, ectopic pregnancy (a pregnancy in the fallopian tube or elsewhere outside of the womb), abscess formation, and chronic pelvic pain.”

“It is estimated that more than 750,000 women experience an episode of acute PID in the U.S. every year. Up to 10-15% of these women may become infertile as a result of PID. A large proportion of the ectopic pregnancies occurring every year are due to the consequences of PID.” [Sexually Transmitted Diseases. Pelvic Inflammatory Disease (PID) – CDC Fact Sheet. <http://www.cdc.gov/std/PID/STDFact-PID.htm> (Accessed 12/21/2012).]

RHQ131 All women who have experienced menarche are asked this question. The phrase “current pregnancy” will not appear if it is not relevant. The answer to this question should include all pregnancies regardless of outcome. Possible outcomes and definitions are as follows:

Current pregnancy: Refers to a gestational period that has not yet terminated.

Pregnancy with live birth: Refers to a pregnancy that terminates with a live birth(s).

Miscarriage: Refers to a pregnancy that terminates naturally during the first 5 months (20 weeks) of pregnancy.

Stillbirth: Refers to a baby who is born dead after 6 or more months (>20 weeks) of pregnancy.

Tubal Pregnancy: Refers to a pregnancy that occurs in the fallopian tube.

Abortion: Refers to a pregnancy that is terminated during the first 6 months using induced methods. Methods include D&C, vacuum extraction, suction, and saline injections.

NHANES IV MEC Questionnaire 2015

Forms Answer Navigate Options Recording

HELP AVAILABLE

The next questions are about your pregnancy history.

Have you **ever** been pregnant? Please include live births, miscarriages, stillbirths, tubal pregnancies and abortions.

MARK IF KNOWN, OTHERWISE ASK.

1. YES

2. NO

13a RHQ076
13a RHQ078
03a1.3a1.5a RHQ131
03c RHQ143

Question Text

Miscarriage: Refers to a pregnancy that terminates naturally during the first 5 months (20 weeks) of pregnancy.

Stillbirth: Refers to a baby that is born dead after 6 or more months (>20 weeks) of pregnancy.

Tubal Pregnancy: Refers to a pregnancy that occurs in the fallopian tube.

Abortion: Refers to a pregnancy that is terminated during the first 6 months using induced methods. Methods include D&C, vacuum extraction, suction, and saline injections.

1.

2.

Close Help

RHQ.131 Women who did not receive the infertility questions receive this version of the question
(cont'd) that includes the introduction to the pregnancy history questions

RHQ.131 Help text is available for each of the outcomes in RHIQ131 by clicking on the Help
(cont'd) icon or pressing F1..

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Forms Answer Navigate Options Year 2

Are you pregnant **now**?

MARK IF KNOWN; OTHERWISE ASK.

1. YES

2. NO

03a RHQ131 1 YES

03c RHQ143

03c RHQ152

99abc RHQ160 1

99abc RHQ170 1

99abc00a RHQ180

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Forms Answer Navigate Options Recording 2015

HELP AVAILABLE

How many times have you been pregnant? Please count all your pregnancies including current pregnancy, live births, miscarriages, stillbirths, tubal pregnancies, and abortions.

ENTER NUMBER OF PREGNANCIES

99abc07a15a RHQ160

07a RHQ162

07a RHQ163

05a07a15a RHQ166

RHQ143 Only women who had a period in the past year or who have not gone through menopause or had a hysterectomy are asked this question.

RHQ160 Record the number of pregnancies regardless of outcome. Multiple outcomes from one pregnancy should be counted as only one pregnancy. Refer to the specifications for RHQ131 for definitions of various outcomes. The word “current pregnancy” will only appear if it is relevant.

NIH/NHS IV MEC Questionnaire
 Form: Answer Navigate Options Year 9
 HELP AVAILABLE
 During any pregnancy, were you ever told by a doctor or other health professional that you had diabetes, sugar diabetes or gestational diabetes? Please do not include diabetes that you may have known about before the pregnancy.

1. YES
 2. NO
 3. BORDERLINE

03c RHQ143 2 NO
 03c07a RHQ152
 99abce07a RHQ160 2
 07a RHQ162

NIH/NHS IV MEC Questionnaire
 Form: Answer Navigate Options Year 9
 HELP AVAILABLE
 During your pregnancy, were you ever told by a doctor or other health professional that you had diabetes, sugar diabetes or gestational diabetes? Please do not include diabetes that you may have known about before the pregnancy.

1. YES
 2. NO
 3. BORDERLINE

03c RHQ143
 03c07a RHQ152
 99abce07a RHQ160 1
 07a RHQ162

Question Text
 Gestational diabetes is a form of diabetes or high blood sugar found in pregnant women.

1.
 2.
 3.

Close Help

RHQ162 Pregnant women who have never had diabetes before but who have high blood sugar (glucose) levels during pregnancy are said to have gestational diabetes. “Reported rates of gestational diabetes range from 2% to 10% of pregnancies.” [National Diabetes Fact Sheet, 2011. http://www.cdc.gov/diabetes/pubs/pdf/ndfs_2011.pdf (Accessed on 12/21/2012)] High blood sugar levels can be unhealthy for both the mother and baby. If the diabetes isn’t treated, a baby may be more likely to have problems at birth, for example, low blood sugar level or jaundice, or a weight that is much more than is normal. If the baby is very large, the mother may have a more difficult delivery or need a cesarean section.

This question asks if the SP was ever told, during a pregnancy, by a doctor or other health professional that they had diabetes, sugar diabetes, or gestational diabetes. Some SPs may indicate that they had borderline diabetes during pregnancy. Borderline diabetes is when a fasting blood sugar level is above normal, but not high enough to be classified as diabetic. Do not count diabetes diagnosed before the pregnancy. Count the occurrence regardless of the outcome of the pregnancy.

RHQ162 Women who report only one pregnancy in RHQ160 are asked this alternate form of the (cont.) question.

RHQ162 Help text is available for this question. (cont.)

NHANES IV MEC Questionnaire

Forms Answer Navigate Options Year 9

How old were you when you were first told you had diabetes during a pregnancy?

ENTER AGE IN YEARS

07a RHQ163

05a RHQ166

05a RHQ169

07a RHQ172

NHANES IV MEC Questionnaire

Forms Answer Navigate Options Recording 2015

How many vaginal deliveries have you had? Please count stillbirths as well as live births.

COUNT THE NUMBER OF DELIVERIES, NOT THE NUMBER OF LIVE-BORN CHILDREN. FOR EXAMPLE, IF SP DELIVERED TWINS OR HAD ANY OTHER MULTIPLE BIRTH, COUNT AS A SINGLE DELIVERY.

ENTER NUMBER OF VAGINAL DELIVERIES

99abce07a15a RHQ160

07a RHQ162 No

07a RHQ163

05a07a15a RHQ166

NHANES IV MEC Questionnaire

Forms Answer Navigate Options Recording 2015

How many cesarean deliveries, also known as C-sections, have you had? (Please count stillbirths as well as live births.)

COUNT THE NUMBER OF DELIVERIES, NOT THE NUMBER OF LIVE-BORN CHILDREN. FOR EXAMPLE, IF SP DELIVERED TWINS OR HAD ANY OTHER MULTIPLE BIRTH, COUNT AS A SINGLE DELIVERY.

ENTER NUMBER OF CESAREAN DELIVERIES

05a07a15a RHQ169

07a15a RHQ172

07a13a15a RHQ173

05ag RHQ171

RHQ 163 This item asks for the SP's age when she was first told she had diabetes during a pregnancy.

RHQ166 Record the number of vaginal deliveries regardless of outcome (live birth or stillbirth). Do not count miscarriages. Multiple births should be counted as a single delivery.

RHQ169 Record the number of cesarean deliveries regardless of outcome (live birth or stillbirth). Do not count miscarriages. (Miscarriages occur within the first 5 months of pregnancy.) A cesarean delivery, or C-section, is the surgical delivery of a baby through the abdomen. Multiple births should be counted as a single delivery.

SPs who report a total of zero deliveries in their combined responses to RHQ166 and RHQ169 are skipped out of the remainder of the pregnancy history questions to the birth control history (RHQ.420).

NHANES IV MEC Questionnaire
Forms Answer Navigate Options Recording 2015

Did any of your deliveries result in a baby that weighed 9 pounds or more at birth? Please count stillbirths as well as live births.

IF SP ONLY RECALLS HER BABY'S BIRTH WEIGHT IN KILOS/GRAMS: 9 LB ~ 4.1 KG/ 4,100 G.

1. YES
 2. NO

05a07a15a RHQ169	<input type="checkbox"/>	1
07a15a RHQ172	<input type="checkbox"/>	1
07a13a15a RHQ173	<input type="checkbox"/>	
05ag RHQ171	<input type="checkbox"/>	

NHANES IV MEC Questionnaire
Forms Answer Navigate Options Recording 2015

How old were you when you delivered the first baby that weighed 9 pounds or more? (Please count stillbirths as well as live births.)

IF SP ONLY RECALLS HER BABY'S BIRTH WEIGHT IN KILOS/GRAMS: 9 LB ~ 4.1 KG/ 4,100 G.

ENTER AGE IN YEARS

1
 1 YES
 1

05a07a15a RHQ169	<input type="checkbox"/>	1
07a15a RHQ172	<input type="checkbox"/>	1 YES
07a13a15a RHQ173	<input type="checkbox"/>	
05ag RHQ171	<input type="checkbox"/>	

NHANES IV MEC Questionnaire
Forms Answer Navigate Options Year 0

How many of your deliveries resulted in a live birth?

FOR SINGLE DELIVERIES:
YES = 1
NO = 0

COUNT THE NUMBER OF TOTAL DELIVERIES, NOT NUMBER OF LIVE-BORN CHILDREN. FOR EXAMPLE, IF SP HAD TWINS OR OTHER MULTIPLE BIRTH, COUNT AS A SINGLE DELIVERY.

ENTER NUMBER OF DELIVERIES

05a RHQ166	<input type="checkbox"/>	1
05a RHQ169	<input type="checkbox"/>	1
05ag RHQ171	<input type="checkbox"/>	
99abc00a044 RHQ180	<input type="checkbox"/>	

RHQ172 This question seeks to determine if the SP gave birth to any children whose birth weight was 9 pounds or more, regardless of the outcome (live birth or stillbirth).

RHQ173 This item asks for the SP's age when she delivered a baby that weighed 9 pounds or more, regardless of the outcome. If more than one baby weighed 9 pounds or more, record the SP's age for the first one that weighed 9 pounds or more, regardless of the birth order.

RHQ171 This question counts the number of deliveries that resulted in live births, not the number of live-born children. Live births are defined as those in which the baby is born with any signs of life. If the baby dies shortly after birth, this should still be counted as a live birth.

Multiple births should be counted as a single delivery. For example, the birth of twins should be counted as a single delivery.

The skip pattern is dependent on the answer to RHQ171. If the SP reported no live births, she is asked RHQ184. If the SP reports one delivery (RHQ166 and RHQ169=1) resulting in one live birth (RHQ171=1) of an infant weighing 9 pounds or more, then she is asked RHQ184. If more than one live birth or one live birth of an infant weighing less than 9 pounds is reported, she is asked both RHQ180 and RHQ184.

NHANES IV MEC Questionnaire

Forms Answer Navigate Options Year 8

Did your delivery result in a live birth?

FOR SINGLE DELIVERIES:
YES = 1
NO = 0

COUNT THE NUMBER OF TOTAL DELIVERIES, NOT NUMBER OF LIVE-BORN CHILDREN. FOR EXAMPLE, IF SP HAD TWINS OR OTHER MULTIPLE BIRTH, COUNT AS A SINGLE DELIVERY.

ENTER NUMBER OF DELIVERIES

05a RHQ166

05a RHQ169

05ag RHQ171

99abc00a04d RHQ180

NHANES IV MEC Questionnaire

Forms Answer Navigate Options Recording 2015

How old were you at the time of your **first** live birth?

ENTER AGE IN YEARS

99abc00a04d15a RHQ180

NHANES IV MEC Questionnaire

Forms Answer Navigate Options Recording 2015

How old were you at the time of your **live** birth?

ENTER AGE IN YEARS

99abc00a04d15a RHQ180

RHQ171 (cont.) Women who report a total of one delivery in their combined responses to RHQ166 and RHQ169 are asked this alternate form of the question. Please note that the alternate wording requires a “Yes” or “No” response, but the data entry field is intended for a numeric response. If the SP responds “Yes,” this implies that she had one delivery that resulted in a live birth, so enter a code of “1.” If the SP answers “No,” enter a code of “0.”

RHQ180 The item asks for the SP’s age at the time of her first live birth.

RHQ180 Women who report one live birth receive this alternate form of the question.

RHAMES IV MEC Questionnaire

Forms Answer Navigate Options Recording 2015

PAUSE [1] RESUME [2] STOP [3]

What is the month and year of your last delivery? Please count stillbirths as well as live births.

WE ARE ASKING THE BIRTH MONTH AND YEAR OF THE WOMAN'S LAST CHILD OR THE DATE HER LAST PREGNANCY ENDED (IF STILLBIRTH).

ENTER MONTH

RHQ184M RHQ184Y

RHQ184[1]

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Forms Answer Navigate Options

Are you **now** breast feeding a child?

1. YES

2. NO

LivBirthLastAge RHQ190

BrstFedNow RHQ200

BrstFedDid1Child RHQ210

BrstFedDid1Mth RHQ220

BrstFedDid1MthHM RHQ230

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Forms Answer Navigate Options Recording Year 14

PAUSE [1] RESUME [2] STOP [3]

Have you **ever** taken birth control pills for any reason?

1. YES

2. NO

99abc00a05g RHQ420

99abc00a07a08a13 RHQ540

13 RHQ542

99ab05g07a RHQ554

RHQ184 Women are asked to report the month and year of her last delivery. They should count stillbirths as well as live births. Enter two digits for the month and four digits for the year. “Don’t know” can be entered for just the month or the year if the SP remembers only the month or the year of her last delivery.

RHQ200 This question asks if the SP is currently breastfeeding a child.

RHQ420 This question is a screening question to determine whether an SP has ever taken birth control pills for any reason. Women who report using birth control pills primarily to regulate their periods and not as a form of contraception should be coded “Yes.” Perimenopausal women (that is, women who have begun to exhibit menopausal symptoms but have not yet completed menopause) can be taking birth control pills.

The next series of questions obtains information on hormone replacement therapy (HRT). Women 20 years of age and older are asked these questions.

Forms Answer Navigate Options Recording 2015

PAUSE RESUME STOP

HAND CARD RHQ 2

Have you **ever** used female hormones such as estrogen and progesterone? Please include any forms of prescription female hormones, such as pills, creams, patches, and injectables, but **do not** include birth control methods or use for infertility.

IN SITUATIONS OF HORMONE USE FOR NON-MENOPAUSAL CONDITIONS, CODE HRT USE AS "NO".

1. YES
 2. NO

99ab07a RHQ200
 99abck00a05g RHQ420 1 YES
 99abck00a07a08a13b RHQ540
 13b RHQ542

NHANES IV MEC Questionnaire

Forms Answer Navigate Options Recording 2015

PAUSE RESUME STOP

HAND CARD RHQ 2

Which forms of female hormones have you used?

CODE ALL THAT APPLY

10. PILLS
 11. PATCHES
 12. CREAM/SUPPOSITORY/INJECTION
 13. OTHER

99ab07a RHQ200
 99abck00a05g RHQ420 2 NO
 99abck00a07a08a13b RHQ540 1 YES
 13b RHQ542

RHQ540 This item refers to the use of female hormones (e.g., estrogen, progestin) prescribed by a doctor. Hand Card RHQ2 is used with this question and RHQ.542, RHQ.554, RHQ.560, RHQ.570, and RHQ.576 to assist the SP. We are interested in all prescription forms of female hormones (pills, patches, creams, suppository, or hormone injections). However, do not include hormones used for birth control or for infertility treatment. In situations of hormone use for a non-menopausal condition (e.g., polycystic ovarian syndrome), code HRT use as “No.”

Female hormones may be used for the relief of menopausal symptoms, to prevent osteoporosis, or to prevent cardiovascular disease. Estrogen preparations are generally used to alleviate menopausal symptoms (hot flashes, night sweats, vaginal dryness), to prevent bone loss or thinning, or to prevent cardiovascular disease. Progesterone or progestin are used predominantly for their antiestrogenic effect in a woman using menopausal estrogens. Progesterone refers to a naturally occurring progestational hormone. Progestin refers to a large group of synthetic drugs that have a progesterone like effect.

Note: We will only collect detailed information on women using estrogen only or combined estrogen/progestin treatments.

RHQ542 Women who report using female hormones are asked to specify the form(s) they have used. Remember to probe for “What other forms have you used?” All products inserted into the vagina should be coded in the “cream/suppository” category. Examples of “other” products are gels, mists and any other products applied topically.

Women who have never used female hormones other than birth control pills or to treat infertility, skip to the end of the interview, unless they are currently pregnant, or have given birth in the last 2 years. These women skip to the series of questions on programs for women with young children (FSQ652-FSQ671).

NHANES IV MEC Questionnaire
Forms Answer Navigate Options Recording 2015
PAUSE RESUME STOP

HAND CARD R1Q2
Have you **ever** taken female hormone **pills** containing **estrogen only** like Premarin? Do not include birth control pills.

1. YES
 2. NO

99ab05g07a15a13b R1Q254

NHANES IV MEC Questionnaire
Forms Answer Navigate Options Recording 2015
PAUSE RESUME STOP

HAND CARD R2Q2
Not counting any time when you stopped taking them, for how long **altogether** did you take pills containing estrogen only?

CODE '1' FOR LESS THAN 1 MONTH
ENTER NUMBER

ENTER UNIT
 1. MONTHS
 2. YEARS

RHQ554 This question asks specifically about the SP's use of hormone pills containing estrogen only. The SP should not consider birth control pills when answering this question. Commonly used estrogen pills include Premarin, Menrium and Milprem. If the SP knows the name of a particular medication she is currently taking or may have taken in the past but is unsure whether it contains only estrogen, refer to the female hormone charts and lists to assist you in coding the correct response. If the medication is not listed, code "Don't Know" and enter the name of the medication as an interviewer remark.

Women who have had a hysterectomy are generally prescribed estrogen only. Estrogen used alone increases the risk of endometrial cancer, but taking a progestin with estrogen almost eliminates the risk of endometrial cancer. Therefore, a woman whose uterus has been removed has no risk of developing this form of cancer and does not need to take progestin.

It is important to note that an SP may have taken pills containing estrogen only at the same time she was taking pills containing progestin only. Code "Yes" if the SP has taken both estrogen-only and progestin-only pills concurrently.

Subjects answering other than "Yes," skip to RHQ570.

RHQ560 The SP should be allowed time to consider her reply. Provide assistance in helping her add up periods of time during which she was taking estrogen only hormone pills. Use the calculator to assist you as needed. Enter both a number and a unit of time. Code "1" if the SP reports using estrogen pills for less than 1 month.

For periods of time less than 5 years, code the response in months if some fraction of a year is reported. For example, if the SP says she used pills for 3 ½ years, convert this to 42 months. For periods of time 5 years or greater, follow the general rounding rules described in Section 4.1.1.

NHANES IV MEC Questionnaire
Forms Answer Navigate Options Recording 2015

PAUSE RESUME STOP

HAND CARD RHQ 2
Have you taken female hormone **pills** containing **both estrogen and progestin** like Prempro or Premphase? Do not include birth control pills.

1. YES
 2. NO

99abc07a15a13b RHQ570

NHANES IV MEC Questionnaire
Forms Answer Navigate Options Recording 2015

PAUSE RESUME STOP

HAND CARD RHQ 2
Not counting any time when you stopped taking them, for how long **altogether** did you take pills containing both estrogen and progestin?

CODE '1' FOR LESS THAN 1 MONTH
ENTER NUMBER

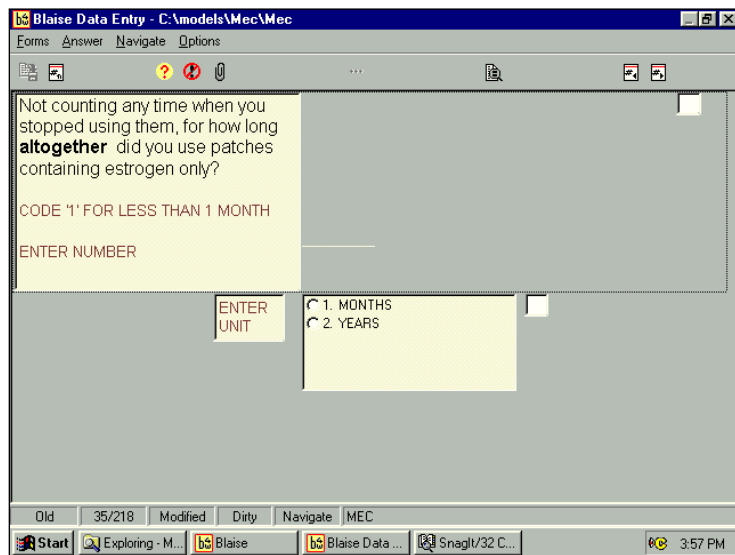
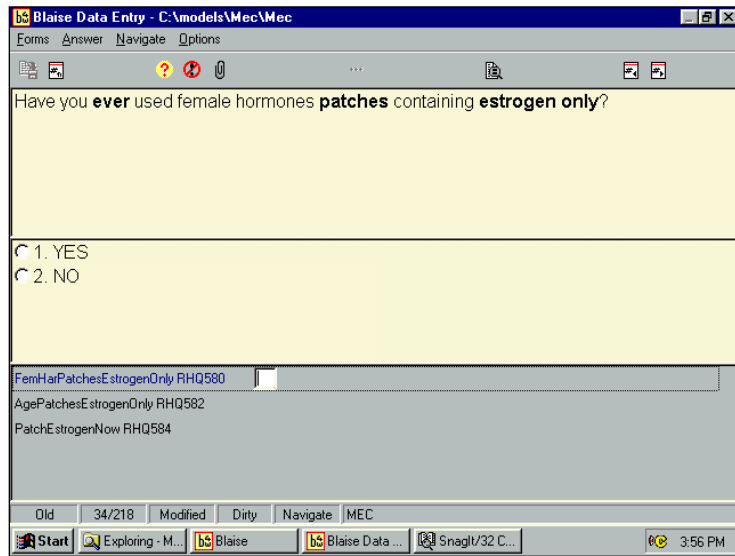
ENTER UNIT

1. MONTHS
 2. YEARS

The next questions, RHQ570 and RHQ576, follows the same sequence as questions RHQ554 and RHQ560. In this series, the SP is asked about the use of combined hormone pills containing both estrogen and progestin.

RHQ570 Refer to the specification for RHQ554. The two most common types of combined pills are Prempro and Premphase.
Subjects who respond other than “Yes” skip to questions on the next form of hormone used as reported in RHQ542.

RHQ576 Refer to the specifications for RHQ560.



The next questions, RHQ580 and RHQ586, ask about the use of female hormone patches containing estrogen only. The questions follow the same sequence as RHQ554 and RHQ560.

RHQ580 Refer to the specification for RHQ554. Subjects who respond other than “Yes” skip to RHQ596.

RHQ586 Refer to the specifications for RHQ560.

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Forms Answer Navigate Options

Have you **used** female hormone **patches** containing **both estrogen and progestin**?

1. YES
 2. NO

PatchesEstrogenProgestin RHQ596
 AgePatchesEstrogenProgestin RHQ598
 PatchestrgnPrgstnNow RHQ600

Old 38/218 Modified Dirty Navigate MEC

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Forms Answer Navigate Options

Not counting any time when you stopped using them, for how long **altogether** have you used patches containing both estrogen and progestin?

CODE '1' FOR LESS THAN 1 MONTH
 ENTER NUMBER

ENTER UNIT

1. MONTHS
 2. YEARS

Old 39/218 Modified Dirty Navigate MEC

Start Exploring - M... Blaise Blaise Data ... Snagit/32 C... 4:01 PM

The next questions, RHQ596 and RHQ602, ask about the use of combined female hormone patches. They follow the same sequence as RHQ554 and RHQ560.

RHQ596 Refer to the specification for RHQ554. Subjects who respond other than “Yes” skip to the next set of questions about WIC.

RHQ602 Refer to the specifications for RHQ560.

INHANES IV MEC Questionnaire
Forms Answer Navigate Options Recording 2015

PAUSE RESUME STOP

These next questions are about participation in WIC, that is, the Women, Infants, and Children Program.

During this pregnancy have you used WIC benefits to buy food for yourself?

1. YES
 2. NO

15a FSQ652a
15a FSQ672a
15a FSQ652b
15a FSQ672b

INHANES IV MEC Questionnaire
Forms Answer Navigate Options Recording 2015

PAUSE RESUME STOP

How many months pregnant were you when you first started to receive WIC benefits to buy food for yourself?

15a FSQ652a | 1 | YES
15a FSQ672a
15a FSQ652b
15a FSQ672b

This section of the Reproductive Health questionnaire contains questions about the Women, Infants, and Children Program (WIC). These questions are asked only of SPs who are currently pregnant or who have been pregnant in the last 2 years and determine WIC participation for pregnant women and postpartum women separately. The questions for postpartum women make it possible to determine whether a woman participated prenatally and/or postnatally. The questions provide information on duration of enrollment and may also serve as an indicator of women's health concerns/interest. The questions were adapted from the Early Childhood Longitudinal Study, Birth Cohort (ECLS-B).

FSQ652a Women who are currently pregnant are asked if they used WIC benefits to buy food for themselves for this pregnancy.

FSQ672a Women who respond "yes" to the previous question are asked how many months pregnant they were when they first started receiving WIC benefits to buy food for themselves..

NHANES IV MEC Questionnaire 2015

Forms - Answer - Navigate - Options - Recording

PAUSE | SKIP | STOP

These next questions are about participation in WIC, that is, the Women, Infants, and Children Program.

During your last pregnancy, did you use WIC benefits to buy food for yourself? Please include any stillbirth or miscarriage.

1. YES
 2. NO

15a FSQ652a
 15a FSQ672a
 15a FSQ652b
 15a FSQ672b

NHANES IV MEC Questionnaire 2015

Forms - Answer - Navigate - Options - Recording

PAUSE | SKIP | STOP

How many months pregnant were you when you first started to receive WIC benefits to buy food for yourself?

15a FSQ652a
 15a FSQ672a
 15a FSQ652b
 15a FSQ672b

1 YES

NHANES IV MEC Questionnaire 2015

Forms - Answer - Navigate - Options - Recording

PAUSE | SKIP | STOP

After your last child was born, did you use WIC benefits to buy food for yourself?

1. YES
 2. NO

15a FSQ652c
 15a FSQ662

FSQ652b Women who are not currently pregnant and report that their last birth occurred in the last 24 months are asked if they used WIC benefits to buy food for themselves during their last pregnancy. Women should report benefits used even if the pregnancy ended in a stillbirth or miscarriage.

FSQ672b Women who responded “yes” to the previous question (FSQ652b) are asked how many months pregnant they were when they first started receiving WIC benefits to buy food for themselves.

FSQ652c Women who are not currently pregnant and report that their last birth occurred in the last 24 months are asked if they used WIC benefits to buy food for themselves after their last child was born. Women who report more than one pregnancy are asked about their “last” child while women who report one pregnancy do not receive the word “last.”

The screenshot shows a software window titled "NHANES IV MEC Questionnaire" with a menu bar containing "Forms", "Answer", "Navigate", "Options", and "Recording". The year "2015" is displayed in the top right corner. Below the menu bar are several icons and three buttons labeled "PAUSE", "RESUME", and "STOP". The main content area is a large yellow rectangle containing the question: "Are you **now** receiving WIC benefits for yourself?". Below the question are two radio button options: "1. YES" and "2. NO". At the bottom of the window, there is a data entry section with two rows: "15a FSQ652c" and "15a FSQ662". The "15a FSQ652c" row has a dropdown menu showing "1" and a label "YES". The "15a FSQ662" row has an empty dropdown menu.

FSQ662 Women who are currently pregnant or report that their last birth occurred in the last 12 months are asked if they are now receiving WIC benefits for themselves.

NIH/NIDDK IV MEC Questionnaire
Forms Answer Navigate Options Year 6

HELP AVAILABLE

Many people have leakage of urine. The next few questions ask about urine leakage.

How often do you have urinary leakage? Would you say...

1. never,
 2. less than once a month,
 3. a few times a month,
 4. a few times a week, or
 5. every day and/or night?

LABEL	KIDNEY CONDITION SECTION
05a KIQ005	<input type="checkbox"/>
05a KIQ010	<input type="checkbox"/>
01a KIQ042	<input type="checkbox"/>

Question Text

Other terms for urinary leakage are not being able to hold your urine until you can reach a toilet, not being able to control your bladder, loss of urine control.

1.
 2.
 3.
 4.
 5.

Close Help

NIH/NIDDK IV MEC Questionnaire
Forms Answer Navigate Options Year 7

How much urine do you lose each time? Would you say...

1. drops,
 2. small splashes, or
 3. more?

LABEL	KIDNEY CONDITION SECTION
05a KIQ005	2 LessThanOnceMonth
05a KIQ010	<input type="checkbox"/>
01a KIQ042	<input type="checkbox"/>

4.2.10 Kidney Conditions (KIQ)

This section is administered to SPs 20 years of age and older. It obtains information about urinary incontinence and nocturia (the need to urinate frequently at night) that may be sensitive or embarrassing to some participants.

More than 13 million people in the United States—male and female, young and old, experience urinary incontinence. Women experience incontinence twice as often as men. This difference may be due to pregnancy and childbirth, menopause, and the structure of the female urinary tract. Both women and men can become incontinent from neurologic injury, birth defects, strokes, multiple sclerosis, and physical problems associated with aging. NHANES will provide national estimates on the prevalence of this condition and quality of life issues for those affected.

Self-reported information on urinary incontinence and nocturia will be used to assist in planning initiatives and other programs for the prevention and treatment of urologic conditions. KIQ questions on prostate cancer and benign prostatic hypertrophy were dropped from the survey in 2009.

NOTE: Pregnant women should respond according to their usual habits when NOT pregnant.

KIQ005 KIQ005 asks SPs to report how frequently they experience urinary leakage.

KIQ005 A help screen is available to provide assistance in defining urinary leakage. Other terms
(cont'd) for urinary leakage are not being able to hold your urine until you can reach a toilet, not
 being able to control your bladder, or loss of urine control.

KIQ010 SPs who respond other than “never,” “refused” or “don’t know” continue with
 KIQ010. This item asks SPs to indicate the amount of urine leakage experienced.

NHAMES IV MEC Questionnaire

Forms Answer Navigate Options Year 8

During the **past 12 months**, have you leaked or lost control of even a small amount of urine with an activity like coughing, lifting or exercise?

1. YES
 2. NO

LABEL KIDNEY CONDITION SECTION
 05a4g KIQ005 1 Never
 05a KIQ010
 01a KIQ042

NHAMES IV MEC Questionnaire

Forms Answer Navigate Options Recording 2015

PAUSE RECORD STOP

HARD CARD KIQ1

How frequently does this occur? Would you say this occurs...

1. less than once a month,
 2. a few times a month,
 3. a few times a week, or
 4. every day and/or night?

05a15a KIQ430
 01a07a KIQ044
 05a15a KIQ450
 01a07a KIQ046

Blaise Data Entry - N:\NH4\Prg-Test\Mecv1\Beth\mec

Forms Answer Navigate Options Year 2

During the **past 12 months**, have you leaked or lost control of even a small amount of urine with an urge or pressure to urinate and you couldn't get to the toilet fast enough?

1. YES
 2. NO

LABEL KIDNEY CONDITION SECTION
 Leak.agePrbn KIQ042 1 YES
 Leak.agePrbFreg KIQ043 1 EveryDay
 Leak.ageUrge KIQ044
 Leak.ageUrgeFreg KIQ045
 Leak.ageWDAc KIQ046

Old 6/218 Modified Dirty Navigate MEC

Start Inbox - Microsoft Outlook Exploring - Mec-int Blaise Data Entry 10:48 AM

KIQ042 This item deals with uncontrolled loss of urine when coughing, straining, sneezing, exercising, or lifting heavy objects (i.e., stress incontinence). Note that the period of interest is the past year.

KIQ430 If the SP indicates the presence of a bladder control problem as defined by KIQ042, this question obtains an estimate of the frequency of the problem. A hand card containing the response categories is provided for KIQ430, KIQ450, and KIQ470 to assist the SP with his/her response.

KIQ044 This item obtains information about problems with leakage or loss of control accompanied by feelings of urgency or pressure (i.e., urge incontinence). Again, the period of interest is the past 12 months.

NHANES IV MEC Questionnaire
Forms: Answer Navigate Options Recording 2015

PAUSE RESUME STOP

HARD CARD KIQ1
How frequently does this occur? Would you say this occurs...

1. less than once a month,
 2. a few times a month,
 3. a few times a week, or
 4. every day and/or night?

05a15a KIQ430	<input type="checkbox"/>	1	LessOnceMonth
01a07a KIQ044	<input type="checkbox"/>	1	YES
05a15a KIQ450	<input type="checkbox"/>		
01a07a KIQ046	<input type="checkbox"/>		

Blaise Data Entry - N:\NHANES\Prig-Test\Mecv1\Beth\mec
Forms: Answer Navigate Options Year 2

During the **past 12 months**, have you leaked or lost control of even a small amount of urine **without** an activity like coughing, lifting, or exercise, or an urge to urinate?

1. YES
 2. NO

LABEL	KIDNEY CONDITION SECTION		
LeakageProbm KIQ042	<input type="checkbox"/>	1	YES
LeakageProbFreq KIQ043	<input type="checkbox"/>	1	EveryDay
LeakageUrge KIQ044	<input type="checkbox"/>	1	YES
LeakageUrgeFreq KIQ045	<input type="checkbox"/>	1	EveryDay
LeakageWAct KIQ046	<input type="checkbox"/>		

Old 6/218 Modified Dirty Navigate MEC
 Start Inbox - Microsoft Outlook Exploring - Mec-int Blaise Data Entry 10:43 AM

NHANES IV MEC Questionnaire
Forms: Answer Navigate Options Recording 2015

PAUSE RESUME STOP

HARD CARD KIQ1
How frequently does this occur? Would you say this occurs...

1. less than once a month,
 2. a few times a month,
 3. a few times a week, or
 4. every day and/or night?

05a15a KIQ470	<input type="checkbox"/>		
01a KIQ050	<input type="checkbox"/>		
01a07a08a KIQ052	<input type="checkbox"/>		
05a07a KIQ480	<input type="checkbox"/>		

- KIQ450 If the SP indicates the presence of a bladder control problem as defined by KIQ044, this item obtains an estimate of the frequency of the problem. A hand card is provided.
- KIQ046 This question asks subjects to indicate whether they have experienced uncontrolled loss of urine without a sensation of urgency or an activity such as coughing, exercise, or lifting that causes sudden increases of pressure within the abdomen. The time frame of interest is the past year.
- KIQ470 Subjects who report the presence of a bladder control problem as defined by KIQ046 are asked to provide an estimate of the frequency of the problem. A hand card is provided.

Blaise Data Entry - N:\NH4\Prj-Test\Mecv1\Beth\mec Year 2

Forms Answer Navigate Options

During the **past 12 months**, how much did your leakage of urine bother you? Please select one of the following choices:

1. not at all. 5. greatly?

2. only a little.

3. somewhat.

4. very much, or

LeakageW/DaofFreq KIQ047 EveryDay

LeakageBother KIQ050

DaytoDayAffect KIQ052

Old 7/2/18 Modified Dirty Navigate MEC

Start Inbox - Microsoft Outlook Exploring - Mec-int Blaise Data Entry 10:49 AM

NHANES IV MEC Questionnaire Year 10

Forms Answer Navigate Options

During the **past 12 months**, how much did your leakage of urine affect your day-to-day activities? (Please select one of the following choices:)

1. not at all.

2. only a little.

3. somewhat.

4. very much, or

5. greatly?

05a KIQ470 FewTimesMonth

01a KIQ050 OnlyALittle

01a07a08a KIQ052

05a07a KIQ480

NHANES IV MEC Questionnaire Year 7

Forms Answer Navigate Options

During the **past 30 days**, how many times per night did you most typically get up to urinate, from the time you went to bed at night until the time you got up in the morning. Would you say...

0. 0

1. 1

2. 2

3. 3

4. 4

5. 5 or more?

05a KIQ470 LessOnceMonth

01a KIQ050 OnlyALittle

01a KIQ052 OnlyALittle

05a KIQ480

Subjects who report bladder control difficulties (i.e., KIQ042, KIQ044, or KIQ046 is coded “Yes”) are asked KIQ050 and KIQ052. All other subjects skip to KIQ480.

KIQ050 This item asks SPs to indicate how much their bladder control problems bothered them during the past year. Remember to read the entire list of response options.

KIQ052 In this question, subjects are asked to report how much their day-to-day activities were affected by bladder control difficulties. Again, the period of interest is the past year.

KIQ480 This item asks SPs to report whether and the extent to which they experienced excess urination at night (nocturia). Nocturia may be a symptom of prostate disease. The period of interest is the past month.

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4.2.11 Physical Activity and Physical Fitness (PAQ)

The PAQ section is administered to SPs 12 – 15 years old. The questionnaire used was developed by the World Health Organization for physical activity surveillance in countries. It collects information on physical activity participation in three settings/domains and sedentary behavior (i.e. reading, sitting with friends).

These settings/domains include:

- Activity at work;
- Travel to and from places; and
- Recreational activities.

It is important that the respondent focuses on the distinction between these settings/domains in the questions. Emphasize the setting you are asking about in the text of the question. There should be no overlap between the physical activities reported in the various settings.

Respondents are asked about the frequency of their physical activity in days of a typical week (7 days). Duration is asked in terms of minutes or hours. A typical week is defined as a week when a person is doing vigorous or moderate intensity activities and not an average over a period.

Vigorous-intensity activities are activities that require **hard** physical effort and cause **large increases** in breathing or heart rate.

Moderate-intensity activities are activities that require **moderate** physical effort and **small increases** in breathing or heart rate.

Probes are provided for some of the questions and should be used on an “as needed” basis as indicated on the screen.

NIH/NHES IV MEC Questionnaire
Forms Answer Navigate Options Year 14

I'd like to ask you some questions about your activities.

During the **past 7 days**, on how many days were you physically active for a total of **at least 60 minutes per day**? Add up all the time you spent in any kind of physical activity that increased your heart rate and made you breathe hard some of the time.

0. 0 days 5. 5 days
 1. 1 day 6. 6 days
 2. 2 days 7. 7 days
 3. 3 days
 4. 4 days

LABEL: 12a PAQ706 PHYSICAL ACTIVITY SECTION

NIH/NHES IV MEC Questionnaire
Forms Answer Navigate Options Year 11

Next I am going to ask you about the time you spend doing different types of physical activity in a typical week.

Think first about the time you spend doing work. Think of work as the things that you have to do such as paid or unpaid work, household chores, and yard work.

Does your work involve **vigorous-intensity** activity that causes **large increases** in breathing or heart rate like carrying or lifting heavy loads, digging or construction work for **at least 10 minutes continuously**?

1. YES
 2. NO

07a09a PAQ605
07ac PAQ610

NIH/NHES IV MEC Questionnaire
Forms Answer Navigate Options Year 14

In a typical week, on how many days do you do **vigorous-intensity** activities as part of your work?

PROBE IF NEEDED: Vigorous-intensity activity causes large increases in breathing or heart rate and is done for **at least 10 minutes continuously**.

INTERVIEWER: REMEMBER, WE ARE ONLY ASKING ABOUT WORK AND CHORES IN THIS QUESTION.

ENTER NUMBER OF DAYS

07a09a12a PAQ605 1 YES
07a12b PAQ610

PAQ706 The first question asks how many days the SP was physically active for at least 60 minutes during the past 7 days. The SP is asked to count any time doing a physical activity that increased his or her heart rate or made him or her breathe hard some of the time.

PAQ605 This series of questions ask about work. Examples of work include: paid and unpaid work, household chores, yard work.

This question asks about vigorous activities only.

If the individual is uncertain as to whether or not the physical activity engaged in was vigorous, emphasize that this activity should have been performed for at least **10 minutes continuously** and resulted in **large increases** in breathing or heart rate. If the SP still is unsure, inform the SP that later questions will ask about more moderate activities.

Responses other than “Yes” skip to PAQ620.

PAQ610 This question asks how many days in a typical week the SP does vigorous-intensity activities as part of their work.

MEC Interview Questionnaire
Form: Answer Navigate Options Year 14

How much time do you spend doing **vigorous-intensity** activities at work on a typical day?

PROBE IF NEEDED: Think about a typical day when you do vigorous-intensity activities during your work.

PROBE IF NEEDED: Vigorous-intensity activity causes large increases in breathing or heart rate and is done for at **least 10 minutes continuously**.

INTERVIEWER: REMEMBER, WE ARE ONLY ASKING ABOUT WORK AND CHORES.

ENTER NUMBER OF MINUTES OR HOURS

ENTER UNIT

1. MINUTES
 2. HOURS

MEC Interview Questionnaire
Form: Answer Navigate Options Year 9

Does your work involve **moderate-intensity** activity that causes **small increases** in breathing or heart rate such as brisk walking or carrying light loads for **at least 10 minutes continuously**?

1. YES
 2. NO

07a PAQ620
07a PAQ625

MEC Interview Questionnaire
Form: Answer Navigate Options Year 14

In a typical week, on how many days do you do **moderate-intensity** activities as part of your work?

PROBE IF NEEDED: Moderate-intensity activity causes small increases in breathing or heart rate and is done for at **least 10 minutes continuously**.

INTERVIEWER: REMEMBER, WE ARE ONLY ASKING ABOUT WORK AND CHORES.

ENTER NUMBER OF DAYS

07a PAQ620 1 YES
07a:12b PAQ625

PAQ615 This question refers to the amount of time spent doing vigorous-intensity activities at work on a typical day. Only activities that were undertaken **continuously for 10 minutes or more** should be considered.

If the SP has trouble calculating the amount of time, they should think of one day they can recall easily.

PAQ620 This question inquires about activities at work that are moderate only.

If the individual is uncertain as to whether or not the physical activity engaged in was moderate, emphasize that this activity should have been performed for at least **10 minutes continuously** and resulted in **small increases** in breathing or heart rate.

Responses other than “yes” skip to PAQ635.

PAQ625 This question asks how many days in a typical week the SP does moderate-intensity activities as part of their work.

NIAMS IV MEC Questionnaire
Form: Answer Navigate Options Year 14

How much time do you spend doing moderate-intensity activities at work on a typical day?

PROBE IF NEEDED: Think about a typical day when you do moderate-intensity activities during your work.

PROBE IF NEEDED: Moderate-intensity activity causes small increases in breathing or heart rate and is done for at least 10 minutes continuously.

INTERVIEWER: REMEMBER, WE ARE ONLY ASKING ABOUT WORK AND CHORES.

ENTER NUMBER OF MINUTES OR HOURS

ENTER UNIT

C 1. MINUTES
C 2. HOURS

NIAMS IV MEC Questionnaire
Form: Answer Navigate Options Year 14

The next questions exclude the physical activities at work that you have already mentioned. Now I would like to ask you about the usual way you travel to and from places. For example to school, for shopping, to work.

In a typical week, do you walk or use a bicycle for at least 10 minutes continuously to get to and from places?

C 1. YES
C 2. NO

07912b PAQ635
07a PAQ640

NIAMS IV MEC Questionnaire
Form: Answer Navigate Options Year 9

In a typical week, on how many days do you walk or bicycle for at least 10 minutes continuously to get to and from places?

ENTER NUMBER OF DAYS

07a PAQ635 1 YES
07a PAQ640

PAQ630 This question refers to the amount of time spent doing moderate-intensity activities at work on a typical day. Only activities that were undertaken **continuously for 10 minutes or more** should be considered.

If the SP has trouble calculating the amount of time, they should think of one day they can recall easily.

PAQ635 The introductory statement to the following questions transitions the SP to now focus on transport-related physical activities. It asks SPs to now think about how they travel around getting from place-to-place (i.e., to school, for shopping, to work). There should be no overlap between the physical activities already mentioned as part of work.

The following questions ask specifically about **walking** or **using a bicycle** for **at least 10 minutes continuously** to get to and from places.

Responses other than “yes” skip to PAQ650.

PAQ640 This question asks how many days in a typical week the SP walks or bicycles for **at least 10 minutes continuously** to get to and from places.

NHANES IV MEC Questionnaire

Forms Answer Navigate Options Year 9

How much time do you spend walking or bicycling for travel on a typical day?

PROBE IF NEEDED: Think about a typical day when you walk or bicycle for travel.

ENTER NUMBER (OF MINUTES OR HOURS)

ENTER UNIT

1. MINUTES

2. HOURS

NHANES IV MEC Questionnaire

Forms Answer Navigate Options Year 14

The next questions exclude the work and transport activities that you have already mentioned. Now I would like to ask you about sports, fitness and recreational activities.

In a typical week, do you do any **vigorous-intensity** sports, fitness, or recreational activities that cause **large increases** in breathing or heart rate like running or basketball for **at least 10 minutes continuously**?

1. YES

2. NO

07a12b PAQ650

07ac PAQ655

NHANES IV MEC Questionnaire

Forms Answer Navigate Options Year 9

In a typical week, on how many days do you do **vigorous-intensity** sports, fitness or recreational activities?

PROBE IF NEEDED: Vigorous-intensity activity causes large increases in breathing or heart rate and is done for **at least 10 minutes continuously**.

ENTER NUMBER OF DAYS

07a PAQ650

07ac PAQ655

1 YES

PAQ645 This question refers to the amount of time spent walking or bicycling for travel on a typical day. The SP should consider the total amount of time walking or bicycling for trips of 10 minutes or more.

If the SP has trouble calculating the amount of time, they should think of one day they can recall easily.

PAQ650 This introductory statement directs the participant to think about recreational activities. This can also be called discretionary or leisure time activities. It includes sports and exercise but is not limited to participation competitions. Activities reported should be done regularly and not just occasionally. It is important to focus on only recreational activities and not to include any activities already mentioned.

In this question, SPs are asked if they do any vigorous-intensity sports, fitness, or recreational activities that cause **large increases** in breathing or heart rate like running or basketball for **at least 10 minutes continuously**.

Responses other than “yes” skip to PAQ665.

PAQ655 This question asks how many days in a typical week the SP does vigorous-intensity sports, fitness, or recreational activities.

If the individual is uncertain as to whether or not the physical activity engaged in was vigorous, emphasize that this activity should have been performed for at least **10 minutes continuously** and resulted **large increases** in breathing or heart rate. If the SP still is unsure, inform the SP that later questions will ask about more moderate activities.

NHANES IV MEC Questionnaire
Forms Answer Navigate Options Year 9

How much time do you spend doing **vigorous-intensity** sports, fitness or recreational activities on a typical day?

PROBE IF NEEDED: Think about a typical day when you do vigorous-intensity sports, fitness or recreational activities.

ENTER NUMBER (OF MINUTES OR HOURS)

ENTER UNIT

1. MINUTES
 2. HOURS

NHANES IV MEC Questionnaire
Forms Answer Navigate Options Year 14

In a typical week, do you do any **moderate-intensity** sports, fitness, or recreational activities that cause a **small increase** in breathing or heart rate such as brisk walking, bicycling, swimming, or volleyball for **at least 10 minutes continuously**?

1. YES
 2. NO

07a12b PAQ665
07a PAQ670

NHANES IV MEC Questionnaire
Forms Answer Navigate Options Year 9

In a typical week, on how many days do you do **moderate-intensity** sports, fitness or recreational activities?

PROBE IF NEEDED: Moderate-intensity sports, fitness or recreational activities cause small increases in breathing or heart rate and is done for **at least 10 minutes continuously**.

ENTER NUMBER OF DAYS

07a PAQ665 1 YES
07a PAQ670

PAQ660 This question refers to the amount of time spent doing vigorous-intensity sports, fitness or recreational activities on a typical day. SPs should consider the total amount of time doing vigorous recreational activities for periods of **10 minutes or more**.

If the SP has trouble calculating the amount of time, they should think of one day they can recall easily.

PAQ665 This question asks about moderate activities only.

If the individual is uncertain as to whether or not the physical activity engaged in was moderate, emphasize that this activity should have been performed for at least **10 minutes continuously** and resulted in **small increases** in breathing or heart rate.

Responses other than “yes” skip to PAQ680.

PAQ670 This question asks how many days in a typical week the SP does moderate-intensity sports, fitness, or recreational activities.

NHANES IV MEC Questionnaire
Forms Answer Navigate Options Year 9

How much time do you spend doing moderate-intensity sports, fitness or recreational activities on a typical day?

PROBE IF NEEDED: Think about a typical day when you do moderate-intensity sports, fitness or recreational activities.

PROBE IF NEEDED: Moderate-intensity sports, fitness or recreational activities cause small increases in breathing or heart rate and is done for at least 10 minutes continuously.

ENTER NUMBER (OF MINUTES OR HOURS)

ENTER UNIT

1. MINUTES
 2. HOURS

NHANES IV MEC Questionnaire
Forms Answer Navigate Options Year 11

The following question is about sitting at school, at home, getting to and from places, or with friends including time spent sitting at a desk, traveling in a car or bus, reading, playing cards, watching television, or using a computer. Do not include time spent sleeping.

How much time do you usually spend sitting on a typical day?

ENTER NUMBER (OF MINUTES OR HOURS)

ENTER UNIT

1. MINUTES
 2. HOURS

NHANES IV MEC Questionnaire
Forms Answer Navigate Options Year 14

Now I will ask you first about TV watching and then about computer use.

Over the past 30 days, on average how many hours per day did you sit and watch TV or videos? Would you say ...

0. less than 1 hour, 5. 5 hours or more, or
 1. 1 hour, 6. You don't watch TV or videos
 2. 2 hours,
 3. 3 hours,
 4. 4 hours,

11a12b PAQ710
11a12b PAQ715
12ab PAQ722
12b PAQ724

PAQ675 This question refers to the amount of time spent doing moderate intensity sports, fitness, or recreation activities on a typical day. SPs should consider the total amount of time doing moderate recreational activities for periods of **10 minutes or more**.

If the SP has trouble calculating the amount of time, they should think of one day they can recall easily.

PAQ680 This question asks how much time is spent sitting on a typical day. The SP should consider the total time spent sitting at school, reading, watching television, using a computer, doing hand crafts (i.e., knitting), resting, etc. Do not include time spent sleeping.

PAQ710 This is the first of two questions about TV watching and computer use over the past 30 days. The SP is asked about the average time in hours he or she sat and watched TV or videos.

MIANIS IV MEC Questionnaire
 Form: Answer Navigate Options Year 14

HELP AVAILABLE

Over the past 30 days, on average how many **hours per day** did you use a computer or play computer games outside of school? Include Playstation, Nintendo DS, or other portable video games. Would you say ...

0. less than 1 hour, 5. 5 hours or more, or
 1. 1 hour, 6. You do not use a computer outside of work or school
 2. 2 hours,
 3. 3 hours,
 4. 4 hours,

11a12b PAQ710 _2hours
 11a12ab PAQ715 _____
 12ab PAQ722 _____
 12b PAQ724

MIANIS IV MEC Questionnaire
 Form: Answer Navigate Options Year 14

For the next questions, think about the sports, lessons, or physical activities you may have done during the **past 7 days?** Please do not include things you did during the school day like PE or gym class.

Did you do any physical activities during the **past 7 days?**

1. YES
 2. NO

11a12b PAQ710 _2hours
 11a12ab PAQ715 _2hours
 12ab PAQ722 _____
 12b PAQ724

PAQ715 The SP is asked how many hours on average per day he or she uses a computer or plays computer games. Computer use at or work or school is not counted. The SP should not include time previously mentioned. If the SP watches TV or videos at the same time as working on the computer, count this time with PAQ710.

PAQ722 The next series of questions asks the SP to think about sports, lessons, or physical activities done during the past 7 days. The SP should not count things done during the school day like PE or gym class. SP is first asked if he or she did any physical activities during the past 7 days.

What physical activities did you do during the **past 7 days**? Don't include activities you did during gym or PE.
 [PROBE: Did you do any other physical activities?]

CODE ALL THAT APPLY.

<input type="checkbox"/> 1. AEROBICS/WEIGHT TRAINING/GYM/EXERCISE	<input type="checkbox"/> 11. HIKING
<input type="checkbox"/> 2. BASEBALL/SOFTBALL/CATCH/ PITCHING	<input type="checkbox"/> 12. ICE HOCKEY
<input type="checkbox"/> 3. BASKETBALL	<input type="checkbox"/> 13. ICE SKATING
<input type="checkbox"/> 4. BIKE RIDING/DIRT BIKING/MOUNTAIN BIKING	<input type="checkbox"/> 14. JUMPING ROPE
<input type="checkbox"/> 5. CHEERLEADING	<input type="checkbox"/> 15. LACROSSE
<input type="checkbox"/> 6. DANCE	<input type="checkbox"/> 16. MARTIAL ARTS (KARATE/TAE KWON DO/JUDO, ETC.)
<input type="checkbox"/> 7. FIELD HOCKEY/STREET HOCKEY/ROLLER HOCKEY	<input type="checkbox"/> 17. PLAYING GAMES (PROBE: WERE YOU PHYSICALLY ACTIVE? IF NO, DON'T COUNT)
<input type="checkbox"/> 8. FOOTBALL	<input type="checkbox"/> 30. BACKYARD/PLAYGROUND GAMES AND ACTIVITIES
<input type="checkbox"/> 29. FRISBEE/ULTIMATE FRISBEE	<input type="checkbox"/> 18. ROLLER BLADING/ROLLER SKATING
<input type="checkbox"/> 9. GOLF	<input type="checkbox"/> 19. RUNNING/JOGGING
<input type="checkbox"/> 10. GYMNASTICS/TUMBLING	

11a12b PAQ710	2	.2hours
11a12b PAQ715	2	.2hours
12b PAQ722	1	YES
12b PAQ724		

What physical activities did you do during the **past 7 days**? Don't include activities you did during gym or PE.
 [PROBE: Did you do any other physical activities?]

CODE ALL THAT APPLY.

<input type="checkbox"/> 11. HIKING	<input type="checkbox"/> 20. SCOOTER RIDING (PROBE: DOES IT HAVE A MOTOR? IF YES, DON'T COUNT)
<input type="checkbox"/> 12. ICE HOCKEY	<input type="checkbox"/> 21. SKATEBOARDING
<input type="checkbox"/> 13. ICE SKATING	<input type="checkbox"/> 22. SOCCER
<input type="checkbox"/> 14. JUMPING ROPE	<input type="checkbox"/> 23. SWIMMING
<input type="checkbox"/> 15. LACROSSE	<input type="checkbox"/> 24. TENNIS
<input type="checkbox"/> 16. MARTIAL ARTS (KARATE/TAE KWON DO/JUDO, ETC.)	<input type="checkbox"/> 25. TRACK & FIELD
<input type="checkbox"/> 17. PLAYING GAMES (PROBE: WERE YOU PHYSICALLY ACTIVE? IF NO, DON'T COUNT)	<input type="checkbox"/> 31. TRAMPOLINE
<input type="checkbox"/> 30. BACKYARD/PLAYGROUND GAMES AND ACTIVITIES	<input type="checkbox"/> 26. VOLLEYBALL
<input type="checkbox"/> 18. ROLLER BLADING/ROLLER SKATING	<input type="checkbox"/> 27. WALKING
<input type="checkbox"/> 19. RUNNING/JOGGING	<input type="checkbox"/> 28. WRESTLING
	<input type="checkbox"/> 91. OTHER (SPECIFY)

11a12b PAQ710	2	.2hours
11a12b PAQ715	2	.2hours
12b PAQ722	1	YES
12b PAQ724		

PAQ724 This question asks the SP to name the physical activities he or she did during the past 7 days. This is a “code all that apply” item so remember to probe: “Anything else?” You can use the keyboard to enter multiple responses by putting a space after each entry.

NOTE: Some of the activities (i.e., #17 and #20) have probes beside the activity. If a probe is beside the response you enter, remember to probe to make sure the SP is including activities that are physically active.

PAQ724a Scroll right to see activities with codes 20 – 91 for this question.
(cont.)

This screenshot shows a web browser window titled "MEC Questionnaire" with a "Year 14" tab. The main content area is yellow and contains the question: "During the **past 7 days**, on how many days did you play **active** video games such as Wii Sports, Wii Fit, Xbox 360, Xbox Kinect, Playstation 3, or Dance, Dance Revolution?". Below the question are seven radio button options: "0. 0 days", "1. 1 day", "2. 2 days", "3. 3 days", "4. 4 days", "5. 5 days", "6. 6 days", and "7. 7 days". At the bottom, there are two input fields labeled "12b PAQ72405" and "12b PAQ731".

This screenshot shows a web browser window titled "MEC Questionnaire" with a "Year 14" tab. The main content area is yellow and contains the question: "On average, for how long did you play these **active** video games?". Below the question is the instruction "ENTER NUMBER (OF MINUTES OR HOURS)". At the bottom, there are four input fields labeled "12a PAQ7230S", "12a PAQ730", "12a PAQ733Q", and "12a PAQ733U". The "12a PAQ730" field contains the number "2" and is followed by a label "_2days".

PAQ731 The SP is asked how many days, in the past 7 days, he or she played active video games such as Wii Sports, Wii Fit, Xbox 360, Xbox Kinect, Playstation 3, or Dance Dance Revolution.

PAQ733 If the SP reports playing active video games, he or she is asked how long they played.

NHANES IV MEC Questionnaire Year 14

Forms Answer Navigate Options

In this question you can include activities done in school. On how many of the **past 7 days** did you exercise or participate in physical activity for at least 20 minutes that made you sweat and breathe hard, such as basketball, soccer, running, swimming laps, fast bicycling, fast dancing, or similar activities?

0. 0 days
 5. 5 days
 1. 1 day
 6. 6 days
 2. 2 days
 7. 7 days
 3. 3 days
 4. 4 days

12a PAQ677		
12a PAQ678		
12a PAQ740		
12a PAQ742		

NHANES IV MEC Questionnaire Year 14

Forms Answer Navigate Options

On how many of the **past 7 days** did you do exercises to strengthen or tone your muscles, such as push-ups, sit-ups, or weight lifting?

0. 0 days
 5. 5 days
 1. 1 day
 6. 6 days
 2. 2 days
 7. 7 days
 3. 3 days
 4. 4 days

12a PAQ677	2	_2days
12a PAQ678		
12a PAQ740		
12a PAQ742		

NHANES IV MEC Questionnaire Year 14

Forms Answer Navigate Options

The next questions ask about activities during the school year. If you are not currently in school, think about your activities when you were last in school.

Are students at your school allowed to use school facilities during lunch or during a free or elective period, such as the gymnasium, tennis courts, weight room, or track, during school time?

1. YES
 2. NO

12a PAQ677	2	_2days
12a PAQ678	2	_2days
12a PAQ740		
12a PAQ742		

PAQ677 The SP is asked how many days, in the past 7 days, he or she exercised or participated in physical activity for at least 20 minutes that made him or her sweat and breathe hard. Examples are provided.

PAQ678 The SP is asked how many days, during the past 7 days, he or she did exercises to strengthen or tone muscles. Examples are provided.

PAQ740 The next series of questions ask about activities during the school year or activities when he or she was last in school if the SP is not currently in school.

The first question in the series asks if students at their school are allowed to use school facilities during lunch or a free period during school time.

NHANES IV MEC Questionnaire
Year 14

Do you use school facilities for physical activity during school time?

1. YES
 2. NO

12a PAQ677	2	_2days
12a PAQ678	2	_2days
12a PAQ740	1	YES
12a PAQ742		

NHANES IV MEC Questionnaire
Year 14

Do you have PE or gym during school days?

1. YES
 2. NO

12a PAQ744	<input type="checkbox"/>	
12a PAQ746		
12a PAQ748		
12a PAQ755	<input type="checkbox"/>	

NHANES IV MEC Questionnaire
Year 14

How **often** do you have PE or gym?

1. 1 day a week
 2. 2 days a week
 3. 3 days a week
 4. 4 days a week, or
 5. Every day

12a PAQ744	1	YES
12ab PAQ746		
12ab PAQ748		
12a PAQ755		

PAQ742 If the SP reports being able to use school facilities during lunch or a free period during school time, the SP is asked if he or she uses the facilities.

PAQ744 This question asks if the SP has PE or gym during school days.

PAQ746 If the SP has PE or gym, he or she is asked how often.

NIANES IV MEC Questionnaire
Forms Answer Navigate Options Year 14

On average, how **long** is the PE or gym class?

1. LESS THAN 30 MINUTES
 2. 30-45 MINUTES
 3. MORE THAN 45 MINUTES

12a PAQ744	<input type="radio"/> 1	YES
12ab PAQ746	<input type="radio"/> 2	._2daysPerWeek
12ab PAQ748	<input type="radio"/>	
12a PAQ755	<input type="radio"/>	

NIANES IV MEC Questionnaire
Forms Answer Navigate Options Year 14

The following are activities that may be done before, during, or after school **other than** during PE or gym class. If you are not currently in school, think about your activities when you were **last in school**.

Do you participate in school sports or physical activity clubs?

1. YES
 2. NO

12a PAQ744	<input type="radio"/> 1	YES
12ab PAQ746	<input type="radio"/> 2	._2daysPerWeek
12ab PAQ748	<input type="radio"/> 2	._30_45min
12a PAQ755	<input type="radio"/>	

NIANES IV MEC Questionnaire
Forms Answer Navigate Options Year 14

HAND CARD PAQ1

In what school **sports** or **physical activity** clubs do you participate?

CODE ALL THAT APPLY.

<input type="checkbox"/> 1. BASEBALL/SOFTBALL	<input type="checkbox"/> 10. SOCCER
<input type="checkbox"/> 2. BASKETBALL	<input type="checkbox"/> 11. SWIMMING/DIVING
<input type="checkbox"/> 3. BOCCIE BALL	<input type="checkbox"/> 12. TENNIS
<input type="checkbox"/> 4. CHEERLEADING	<input type="checkbox"/> 13. TRACK AND FIELD
<input type="checkbox"/> 17. DANCE	<input type="checkbox"/> 20. TRAMPOLINE
<input type="checkbox"/> 5. FOOTBALL	<input type="checkbox"/> 14. VOLLEYBALL
<input type="checkbox"/> 18. FRISBEE/ULTIMATE FRISBEE	<input type="checkbox"/> 15. WRESTLING
<input type="checkbox"/> 6. GOLF	<input type="checkbox"/> 16. OTHER (SPECIFY)
<input type="checkbox"/> 7. GYMNASTICS	
<input type="checkbox"/> 8. HOCKEY	
<input type="checkbox"/> 9. LACROSSE	
<input type="checkbox"/> 19. RUNNING	

12b PAQ759	<input type="radio"/>	
12b PAQ75905	<input type="radio"/>	
12b PAQ679	<input type="radio"/>	
12b PAQ750	<input type="radio"/>	

PAQ748 The SP is asked how long PE or gym class is.

PAQ755 The next series of questions ask about activities done before, during, or after school, or activities when the SP was last in school if he or she is not currently in school. Activities in PE or gym should not be included.

The first question in the series asks if the SP participates in school sports or physical activity clubs.

PAQ759 This question asks the SP in what school sports or physical activity clubs he or she participates. Hand card PAQ1 is used with this question to assist the SP. This is a “code all that apply” item so remember to probe: “Anything else?” You can use the keyboard to enter multiple responses by putting a space after each entry.

MIANIS IV MEC Questionnaire
Form: Answer Navigate Options Year 14

About how many minutes do you think you should exercise or be physically active each day for good health?

INTERVIEWER: THIS INCLUDES ALL ACTIVITIES LIKE BICYCLING, DANCING, AND PLAYING BASKETBALL THAT SP DOES AT SCHOOL, AT HOME, AND ANYWHERE ELSE SP GETS EXERCISE.

1. LESS THAN 10 MINUTES,
 2. 10-15 MINUTES,
 3. 16-30 MINUTES,
 4. 31-45 MINUTES,
 5. 46-60 MINUTES, OR
 6. MORE THAN 60 MINUTES

12b PAQ759 18-5
 12b PAQ759OS
 12ab PAQ679
 12ab PAQ750

MIANIS IV MEC Questionnaire
Form: Answer Navigate Options Year 14

HAND CARD PAQ2

I am going to read a statement and I want you to let me know if you strongly agree, agree, neither agree nor disagree, disagree or strongly disagree with the statement.

I enjoy participating in PE or gym class.

1. STRONGLY AGREE
 2. AGREE
 3. NEITHER AGREE NOR DISAGREE
 4. DISAGREE
 5. STRONGLY DISAGREE

12b PAQ759 2
 12b PAQ759OS
 12ab PAQ679 2 _10_15min
 12ab PAQ750

MIANIS IV MEC Questionnaire
Form: Answer Navigate Options Year 14

In the past year, did you receive a Physical Fitness Test award, such as a President's Challenge or Fitnessgram award?

1. YES
 2. NO

12a PAQ770
 12a PAQ772
 12a PAQ772OS

- PAQ679 The SP is asked how many minutes he or she thinks they should exercise or be physically active each day for good health. This question is not asked if the interview has been coded as a proxy interview.
- PAQ750 SPs are given a scale ranging from strongly agree to strongly disagree and asked if they enjoy participating in PE or gym class. Hand card PAQ2 is used with this question to assist the SP. This question is not asked if the interview has been coded as a proxy interview.
- PAQ770 The SP is asked if he or she received a Physical Fitness Test award in the past year. The President's Challenge is a fitness test given in and outside of school. Fitnessgram is a **Error! Hyperlink reference not valid.** test battery that is usually administered to students at the beginning and at the end of a semester. The program is designed to assess the fitness levels of children in grades K-12.

NIJANES IV MEC Questionnaire

Form: Answer Navigate: Options Year 14

What Physical Fitness Test award did you receive?

PROBE IF NEEDED: Examples of physical fitness test awards are the FITNESSGRAM and the PRESIDENT'S CHALLENGE.

CODE ALL THAT APPLY.

1. Fitnessgram

2. President's Challenge

3. OTHER (SPECIFY)

12a PAQ770	1	YES
12a PAQ772		
12a PAQ772OS		

PAQ772 If the SP has received a Physical Fitness Test award, he or she is asked the name of it.

NIH/NIAHES IV MEC Questionnaire

Forms Answer Navigate Options Year 9

Do you consider yourself now to be...

1. fat or overweight.

2. too thin, or

3. about the right weight?

LABEL	WEIGHT HISTORY
05a07a WHQ030c	
05a WHQ500	
07a WHQ511	

NIH/NIAHES IV MEC Questionnaire

Forms Answer Navigate Options Year 9

Which of the following are you trying to do about your weight:

1. lose weight.

2. gain weight.

3. stay the same weight, or

4. not trying to do anything about your weight?

LABEL	WEIGHT HISTORY
05a07a WHQ030c	3 rightweight
05a WHQ500	
07a WHQ511	

4.2.12 Weight History (WHQ)

The weight history section includes questions on weight perception in children and adolescents ages 8-15 and if they are trying to do anything about their weight. WHQ is not administered if the interview is conducted with a proxy or if the interview is conducted with an interpreter that is a relative, neighbor, or friend.

One in six children and adolescents 2-19 years of age in the U.S. is now overweight. Overweight children have a 70 percent chance of becoming overweight or obese adults. High cholesterol and high blood pressure, risk factors for heart disease, occur with increased frequency in overweight children and adolescents compared to children with a healthy weight. The child overweight trends pose significant health and financial burden for our children and the Nation. A related problem has to do with weight loss practices. Children and adolescents are especially prone to fad diets and eating disorders. Unhealthy methods of weight loss can compromise growth and are not recommended by health care professionals. The NHANES is the first to provide national data on weight perception in children and adolescents. The information from this section will be used with sociodemographic and related nutrition and health information to develop public policies and programs to prevent and manage overweight among children and adolescents.

WHQ030C The first item in this section asks SPs to indicate whether they consider themselves overweight, underweight, or the right weight. We are interested in the SPs' perception of their weight, not what they may have been told by someone else.

WHQ500 WHQ500 obtains information about whether an SP is currently trying to lose weight, gain weight, or maintain their weight. There is also an option for SPs to report that they're not actively engaging in any type of weight control or loss practices.

NHANES IV MEC Questionnaire

Forms Answer Navigate Options Year 7

In the past year, how often have you tried to lose weight? Would you say...

1. never,

2. sometimes, or

3. a lot?

05a WHQ510OS

05a WHQ520

05a WHQ530

05a WHQ540

NHANES IV MEC Questionnaire

Forms Answer Navigate Options Year 10

Next, I'm going to ask you about meals.

By meal, I mean **breakfast, lunch and dinner**. During the **past 7 days**, how many meals did you get that were **prepared away from home** in places such as restaurants, fast food places, food stands, grocery stores, or from vending machines?

Please **do not** include meals provided as part of the school lunch or school breakfast.

1. ENTER NUMBER

2. NONE

NHANES IV MEC Questionnaire

Forms Answer Navigate Options Year 9

How many of those meals did you get from a fast-food or pizza place?

1. ENTER NUMBER

2. NONE

ENTER NUMBER

WHQ520 WHQ520 asks SPs to specify how frequently they've tried to lose weight in the past 12 months.

For SPs 8-11 years old this is the final item in WHQ.

DBQ895 This item asks SPs to provide the number of meals eaten during the past 7 days that were prepared somewhere other than at home or as part of the school lunch/breakfast program. Meals include breakfast, lunch, or dinner. Do not include snacks. Please remember to read the entire question so that the SP hears the complete list of food establishments and/or sources of meals they need to consider when answering the question.

If asked, school meals from “a la carte” counters or from vending machines that are not part of the school lunch/breakfast program should be counted as meals not prepared at a home. Frozen meals eaten at home count as meals prepared at a home. Fully cooked foods (such as a roast chicken) from a deli counter count as meals not prepared at a home. However, if only the chicken is bought at a deli, but the rest of the foods were prepared at home, the meal should be counted as prepared in a home. Leftovers from a restaurant that were taken home and then taken to school the next day (for 2 meals) should be counted as meals not prepared at a home.

Note: Meals prepared at “a” home, which does not have to be the SP’s own home, still count as meals prepared at home. Therefore, a meal eaten at a grandmother’s or friend’s house counts as a meal prepared at home.

The unit of interest is the number of times in past 7 days. If the SP reports that he or she never eats meals that are prepared outside a home, code “2” in the first data field. Otherwise, code “1” in the first data field, press “Enter” to enable the second data field and type in the number of meals in the past 7 days.

DBQ900 Among foods-away-from-home, fast food has been singled out as the source most closely associated with poor diets and obesity. This question asks how many of the meals reported in DBQ895 were from a fast food or pizza place.

NIH/NIAHES IV MEC Questionnaire

Forms: Answer, Navigate, Options Year 9

Some grocery stores sell "ready to eat" foods such as salads, soups, chicken, sandwiches and cooked vegetables in their salad bars and deli counters.

During the past 30 days, how often did you buy "ready to eat" foods at the grocery store? Please do not count frozen or canned foods.

1. ENTER NUMBER 1
2. NEVER

ENTER NUMBER OF TIMES (PER DAY, WEEK, OR MONTH) 2

ENTER UNIT 2
1. DAY
2. WEEK
3. MONTH

NIH/NIAHES IV MEC Questionnaire

Forms: Answer, Navigate, Options Year 9

HAND CARD WHQ2

During the past 30 days, how often did you eat frozen meals or frozen pizzas? Here are some examples of frozen meals and frozen pizzas.

1. ENTER NUMBER 1
2. NEVER

ENTER NUMBER OF TIMES (PER DAY, WEEK, OR MONTH) 2

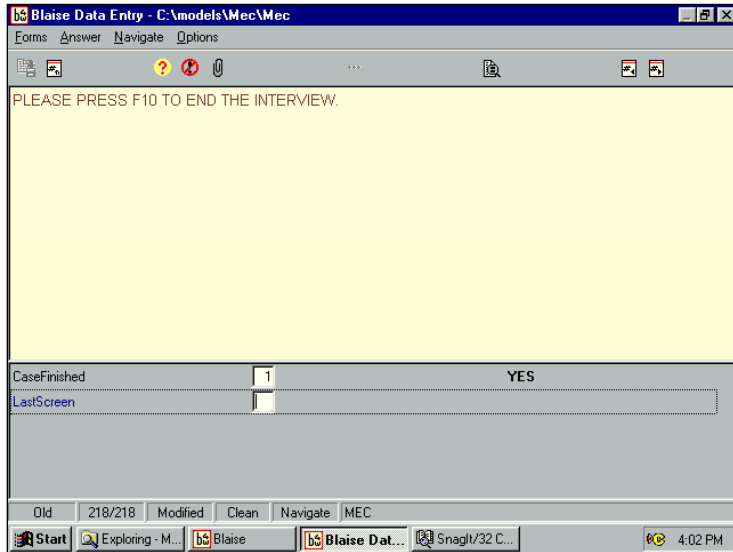
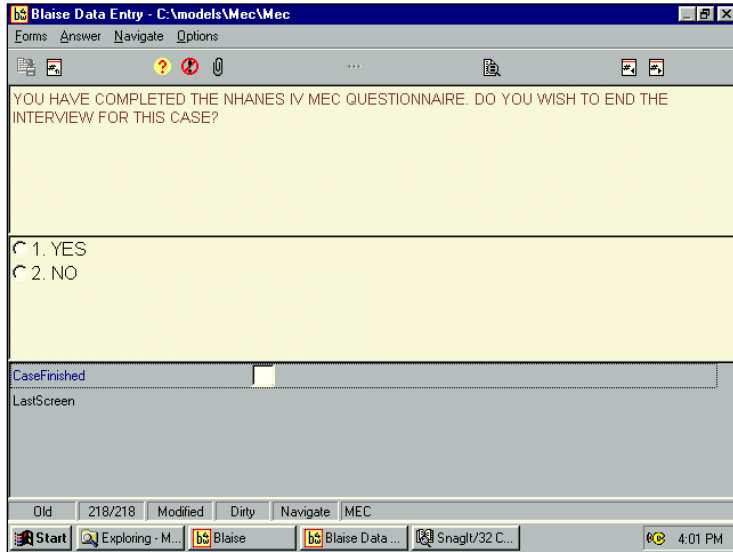
ENTER UNIT 3
1. DAY
2. WEEK
3. MONTH

CARD WHQ2



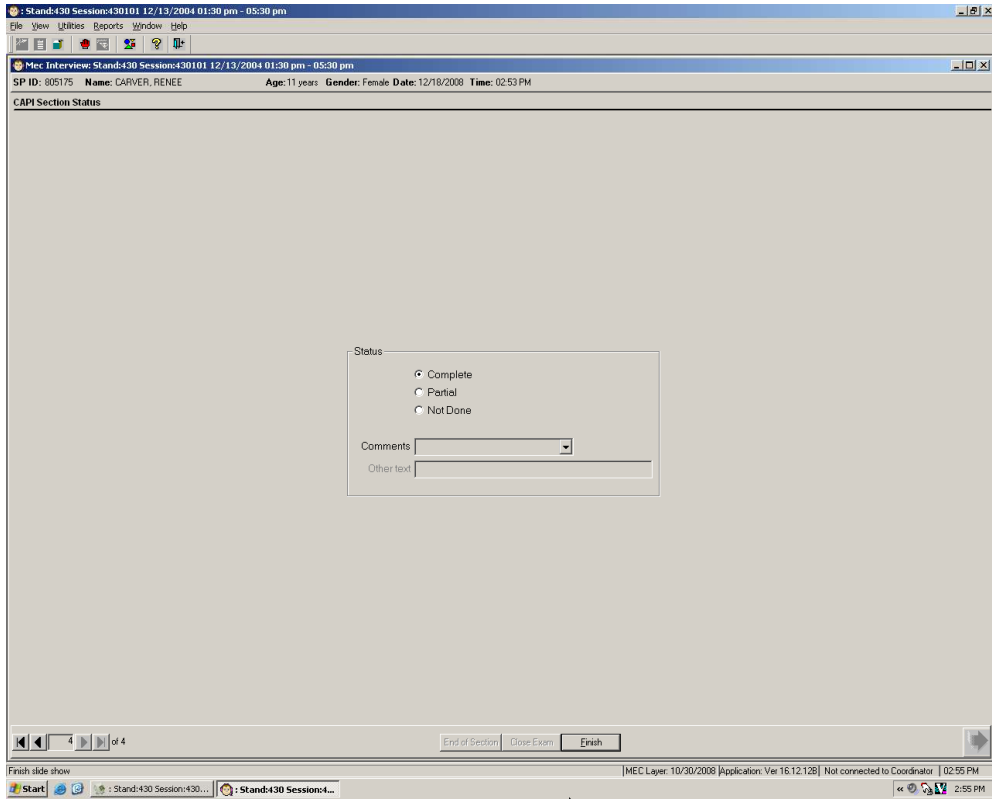
DBQ905 In addition to foods-away-from-home, ready-to-eat meals bought in stores are another increasingly important category of foods. This question asks how often the SP bought “ready to eat” foods at the grocery store during the past 30 days. Frozen and canned foods should not be counted.

DBQ910 This question asks the respondent to indicate the number of times per day, week, or month that they ate frozen meals or frozen pizza during the past 30 days. Always show the respondent card WHQ2 to assist in his or her response.



4.2.13 Ending the CAPI Interview

After completing the final CAPI section appropriate to the SP's age and gender, the computer program displays the "Case Finished" screen. Unless you need to backup for some reason or to change an answer to a previous question, enter "1" and proceed to the last screen. Press F10 to exit the interview.



Blaise-CAPI

Section

Status The section status code will automatically prefill.

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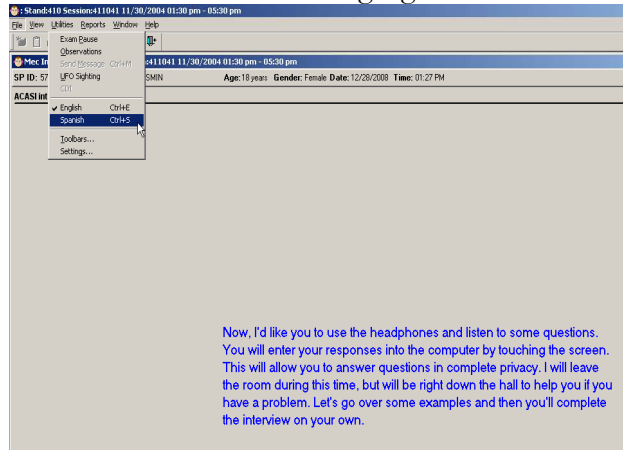
4.3 Audio-CASI Sections of the MEC Interview

The audio-CASI section of the MEC interview consists of five sections of questions, which are asked in this format because they contain sensitive topics. Research on the mode of interview indicates that respondents will be more honest and forthcoming in their answers if they can answer a self-administered mode. The audio-CASI allows SPs to both hear and read the questions and to move at their own speed through the sections as they touch the computer screen to indicate their response.

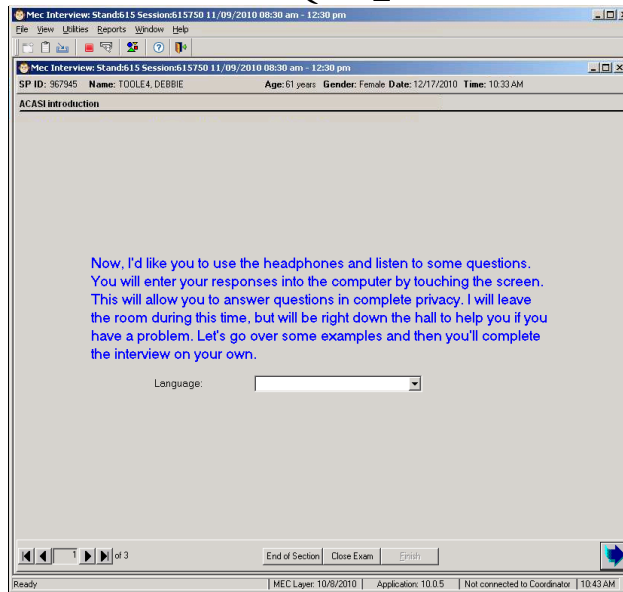
This method of administration is thought to be especially effective in eliciting answers from young people. Therefore, audio-CASI is used to administer tobacco and alcohol use questions to SPs aged 12 to 17. A set of sensitive items on pubertal maturation will be asked of SPs 8 to 19 years of age in the audio-CASI interview.

SPs aged 12 to 69 receive the section on drug use and SPs aged 14 to 69 receive the sexual behavior section in audio-CASI.

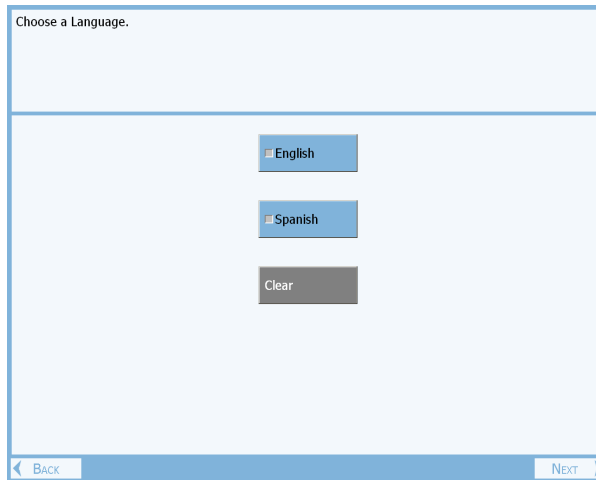
ACASI Language



TUQINT_



ACASI first screen



4.3.1 Beginning and Navigating the Audio-CASI Interview

The computer launches the audio-CASI section following the Blaise-CAPI interview for SPs 12 to 69 years old.

ACASI Language The language selected on the proxy/interpreter status screen at the beginning of the interview will carry over to the ACASI section. To change the language of the introduction screen and all of the ACASI screens between English and Spanish, select “utilities” from the menu bar and select the appropriate language.

TUQINT_ The interview begins with a brief set of practice screens. Read the ACASI Interview Introduction from screen and click the “next” arrow in the bottom right hand corner of the screen.

ACASI First Screen The first ACASI screen allows you to select either the language of the screens and corresponding voice files. Using the touch screen, select the correct language for the interview and touch the “next” button. The interview will begin with a brief set of practice screens. Turn the screen toward the SP and assist him or her with the practice screens. Have the SP work through the practice screens without the headphones, by listening to the audio through the speakers. If you need to change the language of the ACASI interview at any time, return to the first screen and change the language.

TUQ000_

These questions are for practice.
Please press the button to see the question.

TUQ010

Here is an example of one type of question:
'Are you tired?' Please select ...

Yes

No

TUQ020

Another type of question requires a number response. Answer by pressing the number buttons on the keypad.
'How many hours did you sleep last night?'
Please enter a number.

Number

1	2	3
4	5	6
7	8	9
0		

TUQ000_ This is the first practice screen. Instruct the SP to touch the “Next” button in the lower right hand corner to proceed to the next practice screen.

TUQ010 TUQ010 demonstrates how to record a simple yes or no response.

TUQ020 TUQ020 demonstrates how to record an answer to a question that requires a number response.

TUQ025

Another type of question requires you to answer with both a number and a unit of time. Answer by pressing the numbers on the keypad and then selecting a unit of time.

How long has it been since you watched a movie?

Please enter the number of days, weeks, months, or years, then select the unit of time.

The interface for TUQ025 features a numeric keypad on the left with buttons for digits 1-9 and 0, and a 'Clear' button below it. On the right, there is a vertical column of unit selection buttons: 'Days', 'Weeks', 'Months', and 'Years', with a 'Clear' button at the bottom. The entire keypad area is enclosed in a light blue border. At the bottom of the screen, there are 'BACK' and 'NEXT' navigation buttons.

TUQ027A

Another type of question asks you to select a picture or button.

Please choose the color that you like best.

The interface for TUQ027A displays four vertical panels, each labeled 'Drawing 1' through 'Drawing 4' at the bottom. Each panel contains a colored square: red, yellow, blue, and green. Below the panels is a 'Clear' button. The interface is framed by a light blue border with 'BACK' and 'NEXT' buttons at the bottom.

TUQ027B

Another type of question asks you to select a picture or button.

Please choose the color that you like best.


The interface for TUQ027B displays five vertical panels, each labeled 'Drawing 1' through 'Drawing 5' at the bottom. Each panel contains a colored square: red, yellow, blue, green, and purple. Below the panels is a 'Clear' button. The interface is framed by a light blue border with 'BACK' and 'NEXT' buttons at the bottom.

TUQ025 TUQ025 demonstrates how to record a more complex response that requires entering a number and a unit of time.

TUQ027A SPs aged 8 and 9 receive this practice screen which demonstrates picking an image.

TUQ027B SPs aged 10 and 11 receive this practice screen which demonstrates picking an image.

TUQ030

To go back to a previous question to change your response, touch the  BACK button.

 BACKNEXT 

TUQ040

Like all of the other questions that you have answered today, your responses will be kept confidential. If you are not sure about an answer, give us your best estimate. If you have any questions about how to use the computer, please ask your interviewer now.

 BACKNEXT 

TUQ040 (cont'd)

Like all of the other questions that you have answered today, your responses will be kept private. If you are not sure about an answer, give us your best guess. If you have any questions about how to use the computer, please ask your interviewer now.

 BACKNEXT 

TUQ030 After listening to the recorded instructions, demonstrate by backing up to TUQ020. Use the “clear” button to erase the response, and then enter a new response.

TUQ040 After listening to the recorded instructions and answering any questions, instruct the SP to put on the headphones. Make sure he or she is comfortable and can hear the questions before you leave the room. Instruct the SP to open the door when she or he is done with the ACASI interview.

TUQ040 SPs under the age of 12 receive this alternate form of the question with simplified
(cont'd) wording.

Non-Response Screen

Here is an example of one type of question:

'Are you tired?' Please select ...

You did not answer the previous question. Did you mean to answer, would you prefer not to answer the question, or you don't know the answer? Please select...

I really meant to answer.

I'd rather not answer.

I don't know the answer.

Clear



The specifications that follow are intended to assist you in answering questions that an SP may have in the course of responding to the computer-managed questioning.

Non-response Screen The audio-CASI is designed not to provide the respondent with an obvious option of stating that they don't know an answer or refusing to answer. However, there is a nonresponse option for the SP. This option exists in the form of a second screen which appears if the SP presses the "Next" button on the screen without answering the question. The screen will present SPs with three options: the first, that they really meant to answer the question; second, that they would rather not answer; and third, that they don't know the answer. Choosing the first response will take the SP back to the original question, while choosing the second or third option will skip the SP forward to the next appropriate question. If the SP goes back to a previous question to which they answered "I'd rather not answer" or "I don't know the answer," the answer categories will be unselected and if the SP decides to answer the question, they can simply select a response.

SMQ621_

The following questions are about cigarette smoking and other tobacco use. Do not include cigars or marijuana.

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SMQ621

About how many cigarettes have you smoked in your **entire life**?

Please select ...

<input type="checkbox"/> I have never smoked, not even a puff	<input type="checkbox"/> 16 to 25 cigarettes
<input type="checkbox"/> 1 or more puffs but never a whole cigarette	<input type="checkbox"/> 26 to 99 cigarettes
<input type="checkbox"/> 1 cigarette	<input type="checkbox"/> 100 or more cigarettes
<input type="checkbox"/> 2 to 5 cigarettes	<input type="button" value="Clear"/>
<input type="checkbox"/> 6 to 15 cigarettes	

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4.3.2 Tobacco (SMQ)

The questions in this section cover smoking history and current tobacco use. SPs 12-17 years of age are asked tobacco questions in the audio-CASI section of the interview.

SMQ621_ This section introduces the Tobacco section. Touch “Next” to proceed to the first question.

SMQ621 This question asks about the number of cigarettes smoked in the SP’s entire life. Respondents who have not smoked a whole cigarette are skipped to SMQ680.

SMQ631

How old were you when you smoked a whole cigarette for the **first** time?
Please enter an age or select zero for never smoked a whole cigarette.

1	2	3
4	5	6
7	8	9
0		
Clear		

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SMQ641

During the past **30 days**, on how many days did you smoke cigarettes?
Please enter a number or enter zero for none.

1	2	3
4	5	6
7	8	9
0		
Clear		

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SMQ050

How long has it been since you quit smoking cigarettes?
Please enter the number of days, weeks, months, or years, then select the unit of time.

1	2	3	Days
4	5	6	
7	8	9	
0			
Clear			
			Weeks
			Months
			Years
			Clear

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- SMQ631 This item asks for the age when the sample person first smoked a cigarette. Respondents can enter any age up to and including their age at the time of the interview. Respondents are instructed to enter zero if they never smoked a whole cigarette. Subjects who have never smoked a whole cigarette skip to SMQ680.
- SMQ641 This question is important to quantify the SP's smoking habit by asking the number of days he or she actually smoked over the month prior to the interview.
- If the SP did not smoke cigarettes in the past 30 days, he or she is instructed to enter a zero. The program then skips to SMQ670.
- SMQ050 If the SP has not smoked cigarettes in the past 30 days, they are asked how long it has been since he or she quit smoking.

SMQ055

How old were you when you **last** smoked cigarettes?
Please enter an age.

1	2	3
4	5	6
7	8	9
0		

Clear

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SMQ650

During the past **30 days**, on the days that you smoked, how many cigarettes did you smoke per day?
Please enter a number.

1	2	3
4	5	6
7	8	9
0		

Clear

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SMQ078

How soon after you wake up do you smoke? Would you say ...

<input type="checkbox"/> Within 5 minutes	<input type="checkbox"/> From more than 2 hours to 3 hours
<input type="checkbox"/> From 6 to 30 minutes	<input type="checkbox"/> From more than 3 hours to 4 hours
<input type="checkbox"/> From more than 30 minutes to one hour	<input type="checkbox"/> More than four hours
<input type="checkbox"/> From more than 1 hour to 2 hours	<div style="background-color: #808080; color: white; padding: 5px 20px; border: 1px solid black; display: inline-block;">Clear</div>

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SMQ055 The SP is asked for the age when he or she last smoked cigarettes if he or she has not smoked a cigarette in over a year.

SMQ650 This question is important to establish the current intensity of the SPs smoking habit. The SP is asked, on the days that he or she smoked, for the average number of cigarettes smoked.

SMQ078 This is the second question that establishes the intensity of the SP's habit. Current smokers are asked to indicate how soon after they wake up they smoke.

SMQ661

During the **past 30 days**, on the days that you smoked, which brand of cigarettes did you **usually** smoke?

Please select one of the following choices.

- Marlboro
- No usual brand
- Camel
- Hand-rolled cigarettes
- Newport
- Clear
- Other brand

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SMQ665A

Please select the Marlboro pack that looks most like the brand that you smoke. If the pack you smoke is not shown, select 'other Marlboro.'



BACK NEXT

SMQ665B

Please select the Camel pack that looks most like the brand that you smoke. If the pack you smoke is not shown, select 'other Camel.'



BACK NEXT

SMQ661 The top three brands used by smokers under age 18 are displayed, and the respondent is asked which one they usually smoke. Three additional options are offered should the SP smoke a brand other than the most popular brands for their age group.

SMQ665A SPs who report smoking Marlboro in SMQ661 are asked to select the image of the brand of Marlboro cigarettes that he or she smokes or select “other Marlboro.”

SMQ665B SPs who report smoking Camel in SMQ661 are asked to select the image of the brand of Camel cigarettes that he or she smokes or select “other Camel.”

SMQ665C

Please select the Newport pack that looks most like the brand that you smoke. If the pack you smoke is not shown, select 'other Newport.'

The form displays three cigarette packs side-by-side. The first pack is 'Newport CIGARETTES' with a green and white design. The second pack is 'Newport MENTHOL GOLD CIGARETTES' with a green and white design. The third pack is 'CIGARETTES OTHER NEWPORT' with a plain grey design. Below the packs is a 'Clear' button. At the bottom of the form are 'BACK' and 'NEXT' navigation buttons.

SMQ665D

Please select the pack that looks most like the brand that you smoke. If the pack you smoke is not shown, select 'other brand of cigarette.'

The form displays a grid of cigarette packs. The top row includes 'Basic', 'DORAL', 'DORAL', 'GPC', and 'GPC'. The bottom row includes 'KOOL', 'KOOL', 'Virginia Slims', and 'CIGARETTES OTHER BRAND'. Below the grid is a 'Clear' button. At the bottom of the form are 'BACK' and 'NEXT' navigation buttons.

SMQ670

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

Please select ...

The form contains three radio button options: 'Yes', 'No', and 'Clear'. Below these options are 'BACK' and 'NEXT' navigation buttons.

SMQ665C SPs who report smoking Newport in SMQ661 are asked to select the image of the brand of Newport cigarettes that he or she smokes or select “other Newport.”

SMQ665D SPs who report smoking a brand other than the major three listed in SMQ661 are asked to select the image of the brand of cigarettes that he or she smokes or select “other brand.”

SMQ670 This question is used to determine if the SP has made any attempt in the past year to quit smoking.

SMQ681_

The following questions ask about use of tobacco or nicotine products in the past **5 days**.

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SMQ681

During the past **5 days**, including today, did you smoke cigarettes, pipes, cigars, little cigars or cigarillos, water pipes, hookahs, or e-cigarettes?

Please select ...

Yes

No

Clear

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SMQ681_ Introductory screen

SMQ681 This question, and the series that follow it, are used to quantify the level of usage for current users of smoking tobacco products.

Subjects who respond other than “Yes” skip to questions about smokeless tobacco products.

SMQ692A

Which of these products did you smoke?
 Please select all that you used.

- Cigarettes
- Water pipes or Hookahs
- Pipes
- E-cigarettes
- Cigars, or little cigars, or cigarillos
-

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SMQ692B

Which of these products did you smoke?
 Please select all that you used.

- Pipes
- Cigars, or little cigars, or cigarillos
- Water pipes or Hookahs
- E-cigarettes
-

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SMQ692A If the SP reports having used any type of smoking tobacco product in the past 5 days, this question asks the SP to specify which types of products he or she has used. The remainder of this question series follows up with questions appropriate only to those products the SP reports using in the past 5 days. The “past 5 days” refers to the current day and the 4 days immediately preceding the interview.

SMQ692B SPs who reported smoking less than one cigarette in his or her lifetime or no cigarettes in the past 30 days, receive this alternate form of the question.

SMQ710

During the past **5 days**, including today, on how many days did you smoke cigarettes?
Please enter a number.

1	2	3
4	5	6
7	8	9
<div style="border: 1px solid black; padding: 5px 15px; display: inline-block;">0</div>		

Clear

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SMQ720

During the past **5 days**, including today, on the days you smoked, how many cigarettes did you smoke each day?
Please enter a number.

1	2	3
4	5	6
7	8	9
<div style="border: 1px solid black; padding: 5px 15px; display: inline-block;">0</div>		

Clear

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SMQ725

When did you smoke your last cigarette? Was it ...

Today

Yesterday

3 to 5 days ago

Clear

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- SMQ710 This question quantifies the smoker’s current use of cigarettes. SPs should count the number of days in the 4 days immediately before the interview and the day of the interview that they smoked cigarettes, even if they took only a few puffs.
- SMQ720 This question is asked of all current cigarette smokers to determine the number of cigarettes, not packs, smoked in the past 5 days. We are interested in the average number of cigarettes smoked per day, only for those days in the past five that the respondent smoked. If the respondent indicates that he or she smokes more than 95 cigarettes per day on average, the program will store a response of “95.” The “95” response is visible to the SP only if the SP backs up to review his or her response.
- SMQ725 This question asks the respondent to indicate when in the past 5 days he or she last smoked a cigarette.

SMQ740

During the past **5 days**, including today, on how many days did you smoke a pipe?
Please enter a number.

[Redacted]		
1	2	3
4	5	6
7	8	9
0		
Clear		

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SMQ771

During the past **5 days**, including today, on how many days did you smoke cigars or little cigars or cigarillos?
Please enter a number.

[Redacted]		
1	2	3
4	5	6
7	8	9
0		
Clear		

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SMQ845

During the past **5 days**, including today, on how many days did you smoke tobacco in a water pipe or Hookah?
Please enter a number.

[Redacted]		
1	2	3
4	5	6
7	8	9
0		
Clear		

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SMQ740 If the respondent indicated that he or she smoked a pipe in the past 5 days, he or she will be asked this question. Refer to the specifications from SMQ710.

SMQ771 If the respondent indicated that he or she smoked a cigar, little cigar, or cigarillo in the past 5 days, he or she will be asked this question. Refer to the specifications from SMQ710.

Traditional cigars contain lightly rolled cured tobacco that is wrapped in a tobacco leaf. Cigarillos and little cigars are smaller than traditional cigars. Some are the same size as cigarettes and some come with plastic or wooden tips. Common brands are Black and Mild, Swisher Sweets, Dutch Master, Phillies Blunts, Prime Time and Winchester.

SMQ845 If the respondent indicated that he or she smoked tobacco in a water pipe or hookah in the past 5 days, he or she will be asked this question. Refer to the specifications from SMQ710.

A hookah is a water pipe with a smoke chamber, a bowl, a pipe and a hose. Tobacco (often flavored) is heated, and the smoke passes through water and is then drawn through a rubber hose to a mouthpiece. There are many types of hookahs. People often smoke in groups in cafes or in hookah bars.

SMQ849

During the past 5 days, including today, on how many days did you smoke an e-cigarette?
Please enter a number.

1	2	3
4	5	6
7	8	9
0		
Clear		

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SMQ851_

Smokeless tobacco products are placed in the mouth or nose and can include chewing tobacco, snuff, snus or dissolvable tobacco.

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SMQ851

During the past 5 days, including today, did you use any smokeless tobacco?
Please do not include nicotine replacement therapy products like patches, gum, lozenge or spray which are considered products to help you stop smoking.

Please select ...

Yes

No

Clear

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SMQ849 If the respondent indicated that he or she smoked an e-cigarette in the past 5 days, he or she will be asked this question. Refer to the specifications from SMQ710.

E-cigarettes look like regular cigarettes but are battery-powered. The device converts a nicotine-containing solution into a vapor mist (not smoke) which is inhaled by the user. It can be purchased as one-time disposable products or as reusable kits with a cartridge. Cartridges come in different flavors and nicotine concentrations. E-cigarettes are not regulated by the FDA as a nicotine delivery device.

SMQ851_ Introductory screen for smokeless tobacco products.

SMQ851 This question, and the series that follow it, are used to quantify the level of usage for current users of smokeless tobacco products.

Subjects who respond other than “Yes” skip to questions about nicotine replacement therapy products.

SMQ853

Which of these products did you use?
Please select all that you used.

Chewing tobacco

Snuff

Snus

Dissolvables

Clear

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SMQ800

During the past **5 days**, including today, on how many days did you use chewing tobacco, such as Redman, Levi Garrett or Beechnut?
Please enter a number.

1 2 3

4 5 6

7 8 9

0

Clear

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- SMQ853 If the SP reports having used any type of smokeless tobacco product in the past 5 days, this question asks the SP to specify which types of products he or she has used. The remainder of this question series follows up with questions appropriate only to those products the SP reports using in the past 5 days. The “past 5 days” refers to the current day and the 4 days immediately preceding the interview.
- SMQ800 This question refers to the use of chewing tobacco. This tobacco-containing product is taken by mouth. The tobacco is not burned. If the respondent indicated that he or she used chewing tobacco in the past 5 days, he or she will be asked this question. Refer to the specifications from SMQ710.

SMQ817

During the past **5 days**, including today, on how many days did you use snuff, such as Skoal, Skoal Bandits, or Copenhagen?

Please enter a number.

[Redacted]		
1	2	3
4	5	6
7	8	9
0		
Clear		
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SMQ857

During the past 5 days, including today, on how many days did you use snus?

Please enter a number.

[Redacted]		
1	2	3
4	5	6
7	8	9
0		
Clear		
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SMQ861

During the past 5 days, including today, on how many days did you use dissolvables such as strips or orbs?

Please enter a number.

[Redacted]		
1	2	3
4	5	6
7	8	9
0		
Clear		
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SMQ817 If the respondent indicated that he or she used snuff in the past 5 days, he or she will be asked this question. Snuff is taken by mouth or rarely, by nose. The tobacco is not burned. Refer to the specifications from SMQ710.

SMQ857 If the respondent indicated that he or she used snus in the past 5 days, he or she will be asked this question. Snus (rhymes with “loose”) is moist tobacco in a small pouch that is placed under the lip. The tobacco is not burned. Refer to the specifications from SMQ710.

SMQ861 If the respondent indicated that he or she used dissolvable in the past 5 days, he or she will be asked this question. Dissolvable tobacco is finely milled tobacco that is pressed into shapes like tablets that dissolve in the mouth. It comes in a variety of shapes including round pellets (orbs), sticks, and flat strips. The tobacco is not burned. Refer to the specifications from SMQ710.

ALQ010_

The following questions ask about alcohol use. This includes beer, wine, wine coolers, and liquor such as rum, gin, vodka, or whiskey. This does not include drinking a few sips of wine for religious purposes.

ALQ010

How old were you when you had your **first** drink of alcohol, other than a few sips?
 Please select one of the following choices.

<input type="checkbox"/> I have never had a drink of alcohol other than a few sips	<input type="checkbox"/> 13 or 14 years old
<input type="checkbox"/> 8 years old or younger	<input type="checkbox"/> 15 or 16 years old
<input type="checkbox"/> 9 or 10 years old	<input type="checkbox"/> 17 years old or older
<input type="checkbox"/> 11 or 12 years old	<input type="button" value="Clear"/>

4.3.3 Alcohol Use (ALQ)

This section obtains information on the use of alcohol. Sample persons 12-17 years are asked alcohol-related questions in the audio-CASI format.

ALQ010_ This screen introduces the section and provides the SP with a definition of a drink. A “drink” is essentially, what the SP considers a drink to be; for example, a glass or can of beer, a glass of wine, a shot of hard liquor, or a mixed drink. It does not include drinking small amounts of wine for religious purposes.

ALQ010 This question obtains information on when a respondent had his or her first drink of alcohol other than just a few sips. Note that there is a response option that allows an SP to indicate that he or she has never had a drink of alcohol. The SP is presented with several age ranges.

ALQ022

During your life, on how many days have you had at least one drink of alcohol?
 Please select one of the following choices.

<input type="checkbox"/> 1 or 2 days	<input type="checkbox"/> 40 to 99 days
<input type="checkbox"/> 3 to 9 days	<input type="checkbox"/> 100 or more days
<input type="checkbox"/> 10 to 19 days	<input type="button" value="Clear"/>
<input type="checkbox"/> 20 to 39 days	

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ALQ031

During the past 30 days, on how many days did you have at least one drink of alcohol?
 Please select one of the following choices.

<input type="checkbox"/> 0 days	<input type="checkbox"/> 10 to 19 days
<input type="checkbox"/> 1 or 2 days	<input type="checkbox"/> 20 to 29 days
<input type="checkbox"/> 3 to 5 days	<input type="checkbox"/> All 30 days
<input type="checkbox"/> 6 to 9 days	<input type="button" value="Clear"/>

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ALQ042

During the past 30 days, on how many days did you have 5 or more drinks of alcohol in a row, that is, within a couple of hours?
 Please select one of the following choices.

<input type="checkbox"/> 0 days	<input type="checkbox"/> 6 to 9 days
<input type="checkbox"/> 1 day	<input type="checkbox"/> 10 to 19 days
<input type="checkbox"/> 2 days	<input type="checkbox"/> 20 or more days
<input type="checkbox"/> 3 to 5 days	<input type="button" value="Clear"/>

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- ALQ022 Note that this question asks for the number of days in the SP's life that he or she had at least one drink of alcohol. Response categories presented are ranges in the number of days. Responses of zero days skip the subject to the end of the alcohol section.
- ALQ031 This question narrows the reference period to the past 30 days. Note that there is a response option of “all 30 days.” Responses of zero days skip the subject to the end of the alcohol section.
- ALQ042 This item obtains information on potential alcohol abuse and problem drinking. Note that boys are asked for the number of days in the past 30 on which five or more drinks were consumed. Girls are asked for the number of days in the past 30 on which four or more drinks were consumed

DUQ200_

The following questions ask about use of drugs not prescribed by a doctor. Please remember that your answers to these questions are strictly confidential.

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DUQ200

The first questions are about marijuana and hashish. Marijuana is also called pot or grass. Marijuana is usually smoked, either in cigarettes, called joints, or in a pipe. It is sometimes cooked in food. Hashish is a form of marijuana that is also called "hash." It is usually smoked in a pipe. Another form of hashish is hash oil.

Have you **ever**, even once, used marijuana or hashish?

Please select ...

Yes

No

Clear

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DUQ210

How old were you the **first time** you used marijuana or hashish?

Please enter an age

1 2 3

4 5 6

7 8 9

0

Clear

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4.3.4 Drug Use (DUQ)

This section is administered to SPs aged 12 to 69 years. (SPs 60-69 years old only receive select questions in this section.) The questions focus on lifetime and regular use of marijuana and hashish and street or recreational drugs, as well as, the intravenous use of these drugs. Additional questions on age of initiation of specific drugs, duration of drug use, frequency of use in the past 30 days, and lifetime history of drug treatment are included in this section. No measurements for the presence of drug metabolites will be conducted. The use of drugs has been demonstrated to be a risk factor for sexually transmitted diseases. Injection drug use is also a risk for blood borne pathogens such as HIV, HBV, and HCV. Researchers will use the information on drug use along with sexual behavior questions to develop a profile of risk-taking behavior. Questions were added to the 2009-2010 NHANES survey to determine “regular” use of marijuana and hashish. These data are collected as co-factors to look at the potential association between oral HPV and head and neck squamous cell carcinoma.

DUQ200_ This screen introduces the section and reminds respondents that the information collected in the study is kept confidential.

After this introduction to the Drug Use section, SPs 60-69 years old skip to DUQ240.

DUQ200 DUQ200 through DUQ230 obtain information on marijuana and hashish use. This screen provides alternate terms that may be used to refer to marijuana or hashish and describes the various ways in which the drugs can be used.

The first question of the section also appears on this screen. This question asks SPs to indicate whether they have used marijuana at least one time in their life.

SPs who answer other than “yes” skip to DUQ240.

DUQ210 SPs who report having used marijuana or hashish in DUQ200 are asked their age when they first used these drugs.

DUQ211

Have you ever smoked marijuana or hashish at least **once a month for more than one year**?

Please select ...

Yes

No

Clear

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DUQ213

How old were you when you started smoking marijuana or hashish at least **once a month for one year**?

Please enter an age.

1 2 3

4 5 6

7 8 9

0

Clear

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DUQ215

How long has it been since you last smoked marijuana or hashish at least **once a month for one year**?

Please enter the number of days, weeks, months, or years, then select the unit of time.

1 2 3

4 5 6

7 8 9

0

Clear

Days

Weeks

Months

Years

Clear

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DUQ211 In 2009, five new questions (DUQ211, DUQ213, DUQ215, DUQ217, and DUQ219) were added to collect information on participants who “regularly” use marijuana. These questions were added because they may be related to oral human papillomavirus (HPV).

This question asks SPs if they have ever smoked marijuana at least once a month for more than one year.

DUQ213 SPs who report using marijuana regularly (at least once a month for more than one year) in DUQ211 are asked their age when they started smoking marijuana at least once a month for one year.

DUQ215 This question asks SPs to indicate the length of time since they last used marijuana at least once a month for one year.

This item is more complex than many questions in the ACASI interview. It contains two data fields on the same screen. First, SPs must enter a number using the calculator keypad. Next, the SP must select the appropriate unit of time (days, weeks, months, or years) from the options displayed on the right side of the screen.

DUQ217

During the time that you smoked marijuana or hashish, how often would you **usually** use it?
 Please select ...

Once per month	9-24 times per month (about 3-6 times per week)
2-3 times per month	25-30 times per month (one or more times per day)
4-8 times per month (about 1-2 times per week)	Clear

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DUQ219

During the time that you smoked marijuana or hashish, how many joints or pipes would you **usually** smoke in a day?
 Please select ...

1 per day
 2 per day
 3-5 per day
 Six or more per day

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DUQ220

How long has it been since you **last** used marijuana or hashish?
 Please enter the number of days, weeks, months, or years, then select the unit of time.

1	2	3	Days
4	5	6	Weeks
7	8	9	Months
	0		Years
Clear			Clear

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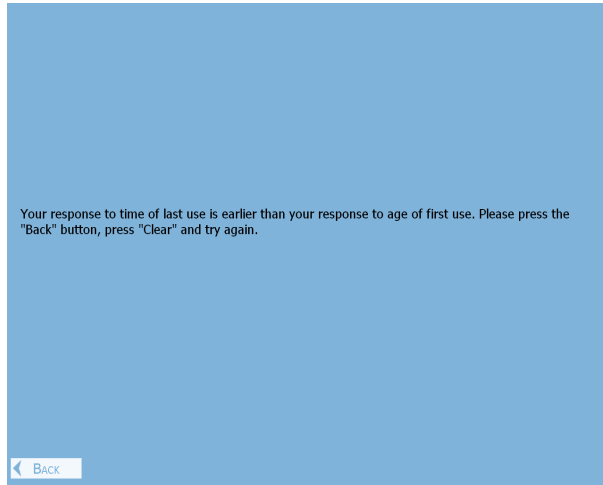
DUQ217 This question asks how often the SP usually used marijuana during the time they smoked it.

DUQ219 The final question used to collect information on participants who “regularly” use marijuana asks the SP how many joints or pipes he/she usually smoked in a day.

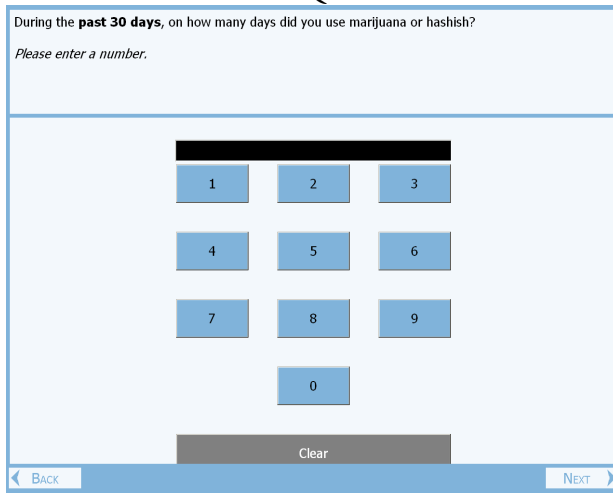
DUQ220 This question asks SPs to indicate the length of time since they last used marijuana or hashish.

This item requires the SP to enter a number and select a unit response. Refer to the specifications for DUQ215.

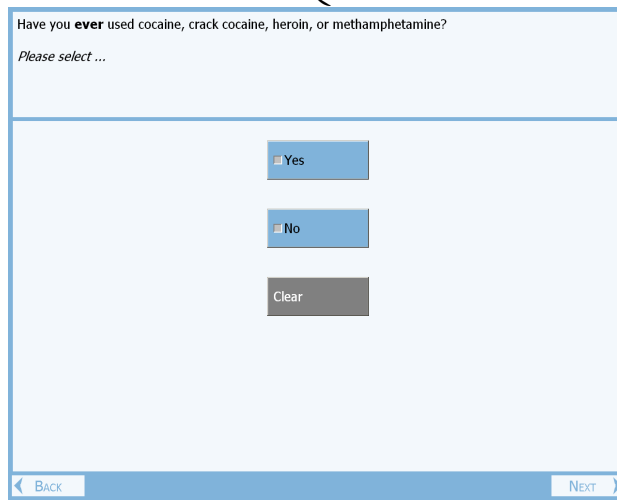
DUQ220 Error Message



DUQ230



DUQ240



- DUQ220 The program contains an edit to check whether the SP's response is valid based on the SP's current age and the age reported in DUQ210.
- Error An error window is displayed if the response to DUQ220 is invalid. To proceed with the interview, SPs must change either their response to DUQ220, or the age reported in DUQ210.
- DUQ230 Only SPs who report using marijuana or hashish within the past month in DUQ220 are asked DUQ230, which asks SPs to report on how many days in the past 30 they used marijuana.
- DUQ240 This question is a screener to determine whether the SP has ever used any of the following types of street or recreational drugs: cocaine, crack cocaine, heroin, or methamphetamine. SPs who respond other than "yes" skip to DUQ370.

DUQ250_

The following questions are about cocaine, including all the different forms of cocaine such as powder, "crack", "free base", and coca paste.

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DUQ250

Have you **ever**, even once, used cocaine, in any form?
Please select ...

Yes

No

Clear

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DUQ260

How old were you the **first time** you used cocaine, in any form?
Please enter an age.

[Redacted]		
1	2	3
4	5	6
7	8	9
0		

Clear

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DUQ250_ This screen introduces the series of questions on cocaine use (DUQ250–DUQ280). It lists the forms of cocaine of interest including powder, crack, free base, and coca paste.

DUQ250 DUQ250 asks respondents whether they have used any form of cocaine at least once in their lifetime. SPs who respond other than “yes” skip to DUQ290.

DUQ260 SPs who report having used cocaine in DUQ250 are asked their age at first use.

DUQ270

How long has it been since you **last** used cocaine, in any form?
 Please enter the number of days, weeks, months, or years, then select the unit of time.

1	2	3	Days	
4	5	6		Weeks
7	8	9		Months
0				Years
Clear				Clear

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DUQ272

During your **life**, altogether how many times have you used cocaine, in any form?
 Please select one of the following choices.

Once	50-99 times
2-5 times	100 times or more
6-19 times	Clear
20-49 times	

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DUQ280

During the **past 30 days**, on how many days did you use cocaine, in any form?
 Please enter a number.

1	2	3
4	5	6
7	8	9
0		
Clear		

← BACK NEXT →

DUQ270 This question asks SPs to indicate the length of time since they last used cocaine. This item requires the SP to enter a number and select a unit response. Refer to the specifications for DUQ215.

The program contains an edit to check whether the SP's response is valid based on the SP's current age and the age reported in DUQ260. An error window is displayed if the response to DUQ270 is invalid. (Refer to the screen for DUQ220 Error Message.) To proceed with the interview, SPs must change either their response to DUQ270, or the age reported in DUQ260.

DUQ272 DUQ272 asks respondents to indicate how many times they've used cocaine in their lifetime. SPs are asked to select from six predefined categories. SPs who report having used cocaine within the past month in DUQ270 continue with DUQ280. Otherwise, the interview skips to DUQ290.

DUQ280 SPs are asked to report the number of days they've used cocaine in the past month.

DUQ290_

The following questions are about heroin.

← BACK NEXT →

DUQ290

Have you **ever**, even once, used heroin?
Please select ...

Yes

No

Clear

← BACK NEXT →

DUQ300

How old were you the **first time** you used heroin?
Please enter an age.

1 2 3

4 5 6

7 8 9

0

Clear

← BACK NEXT →

DUQ290_ This screen introduces a series of questions on heroin use (DUQ290 – DUQ320).

DUQ290 DUQ290 asks respondents to indicate whether they've used heroin at least once in their lifetime.

SPs who answer other than “Yes” skip to DUQ330.

DUQ300 SPs who report having used heroin in DUQ290 are asked their age at first use.

DUQ310

How long has it been since you **last** used heroin?
Please enter the number of days, weeks, months, or years, then select the unit of time.

1	2	3	Days
4	5	6	
7	8	9	
0			
Clear			

Days
Weeks
Months
Years
Clear

← BACK NEXT →

DUQ320

During the **past 30 days**, on how many days did you use heroin?
Please enter a number.

1	2	3
4	5	6
7	8	9
0		
Clear		

← BACK NEXT →

DUQ330_

The following questions are about methamphetamine, also known as crank, crystal, ice or speed.

← BACK NEXT →

DUQ310 DUQ310 asks SPs to indicate the length of time since they last used heroin.

This item requires the SP to enter a number and select a unit response. Refer to the specifications for DUQ215.

The program contains an edit to check whether the response is valid based on the SP's current age and the age reported in DUQ300. An error window is displayed if the response to DUQ310 is valid. (Refer to DUQ220 Error Message.)

To proceed with the interview the respondent must change either their response to DUQ310, or the age reported in DUQ300.

SPs who report using heroin during the past month continue with DUQ320. Otherwise, the interview skips to DUQ330.

DUQ320 SPs are asked to report the number of days they've used heroin in the past month.

DUQ330_ This screen introduces a series of items on methamphetamine use (DUQ330–DUQ360). Various street names for methamphetamine are provided.

DUQ330

Have you **ever**, even once, used methamphetamine?

Please select ...

Yes

No

Clear

← BACK NEXT →

DUQ340

How old were you the **first time** you used methamphetamine?

Please enter an age.

1 2 3

4 5 6

7 8 9

0

Clear

← BACK NEXT →

DUQ350

How long has it been since you **last** used methamphetamine?

Please enter the number of days, weeks, months, or years, then select the unit of time.

1 2 3 Days

4 5 6 Weeks

7 8 9 Months

0 Years

Clear Clear

← BACK NEXT →

DUQ330 This item asks SPs to indicate whether they've used methamphetamine at least once in their lifetime.

SPs who answer other than "Yes" skip to DUQ370.

DUQ340 SPs who report having used methamphetamine in DUQ330 are asked their age at first use.

DUQ350 This item asks SPs to indicate the length of time since they last used methamphetamine.

DUQ350 requires the SP to enter a number and select a unit response. Refer to the specifications for DUQ215.

The program contains an edit to check whether the response is valid based on the SP's current age and the age reported in DUQ340. An error window is displayed if the response to DUQ350 is invalid. (Refer to DUQ220 Error Message.) To proceed with the interview the respondent must change either their response to DUQ350, or the age reported in DUQ340.

DUQ352

During your **life**, altogether how many times have you used methamphetamine?
 Please select one of the following choices.

Once 50-99 times

2-5 times 100 times or more

6-19 times Clear

20-49 times

← BACK NEXT →

DUQ360

During the **past 30 days**, on how many days did you use methamphetamine?
 Please enter a number.

1 2 3

4 5 6

7 8 9

0

Clear

← BACK NEXT →

DUQ370_

The following questions are about the different ways that certain drugs can be used.

← BACK NEXT →

DUQ352 DUQ352 asks respondents to indicate how many times they've used methamphetamine in their lifetime. SPs are asked to select from six predefined categories.

SPs who report having used methamphetamine within the past month in DUQ350 continue with DUQ360. Otherwise, the interview skips to DUQ370.

DUQ360 SPs are asked to report the number of days they've used methamphetamine in the past month.

DUQ370_ This screen introduces a series of questions on injection drug use (DUQ370–DUQ420).

DUQ370

Have you **ever**, even once, used a needle to inject a drug **not prescribed** by a doctor?
Please select ...

Yes

No

Clear

← BACK NEXT →

DUQ380

Which of the following drugs have you injected using a needle?
Please select all the drugs that you injected.

Cocaine

Steroids

Heroin

Any other drugs

Methamphetamine

Clear

← BACK NEXT →

DUQ390

How old were you when you **first** used a needle to inject any drug not prescribed by a doctor?
Please enter an age.

1 2 3

4 5 6

7 8 9

0

Clear

← BACK NEXT →

DUQ370 DUQ370 asks respondents to indicate whether they've ever used a needle to inject drugs not prescribed by a doctor.

SPs who respond other than "Yes" skip to either DUQ430, or to the end of the drug use questions, depending upon their responses to previous items.

DUQ380 This item asks SPs to specify the drug or drugs they've injected. Response options include cocaine, heroin, methamphetamine, or steroids. Respondents may also choose "any other drugs" if they've injected a drug that's not listed. This is a "code all that apply" item so SPs may select multiple responses.

DUQ390 SPs who report injecting a drug not prescribed by a doctor in DUQ370 are asked their age the first time they injected drugs.

DUQ400

How long ago has it been since you **last** used a needle to inject a drug not prescribed by a doctor?
 Please enter the number of days, weeks, months, or years, then select the unit of time.

1	2	3	Days	
4	5	6		Weeks
7	8	9		Months
0				Years
Clear				Clear

BACK NEXT

DUQ410

During your **life**, altogether how many times have you injected drugs not prescribed by a doctor?
 Please select one of the following choices.

Once	50-99 times
2-5 times	100 times or more
6-19 times	Clear
20-49 times	

BACK NEXT

DUQ420

Think about the period of your life when you injected drugs the **most often**. How often did you inject then?
 Please select one of the following choices.

More than once a day	At least once a month but not every week
About once a day	Less than once a month
At least once a week but not every day	Clear

BACK NEXT

DUQ400 This item asks SPs to indicate the length of time since they last injected a drug not prescribed by a doctor.

DUQ400 requires the SP to enter a number and select a unit response. Refer to the specifications for DUQ215.

The program contains an edit to check whether the response is valid based on the SP's current age and the age reported in DUQ390. An error window is displayed if the response to DUQ400 is invalid. (Refer to DUQ220 Error Message.) To proceed with the interview the respondent must change either his or her response to DUQ400, or the age reported in DUQ390.

DUQ410 DUQ410 asks respondents to indicate the number of times in their lifetime they've injected drugs not prescribed by a doctor. SPs select from six predefined categories.

Respondents who've injected drugs only once skip to DUQ430. Otherwise, the interview continues with DUQ420.

DUQ420 This item asks SPs to report how frequently they injected drugs during the time in their life when they injected drugs the most often. SPs select from one of five predefined responses.

DUQ430

Have you **ever** been in a drug treatment or drug rehabilitation program?

Please select ...

Yes

No

Clear

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NEXT →

DUQ430 SPs who report having used marijuana, cocaine, heroin, methamphetamine, or engaged in injection drug use, at least once in their lifetime, get asked DUQ430. Respondents are asked whether they've ever been in a drug treatment or rehab program.

SXQ615_

The next set of questions is about your sexual history. By sex, we mean vaginal, oral, or anal sex. Please remember that your answers are strictly confidential.

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SXQ615

Have you **ever** had **any** kind of sex?

Please select ...

Yes

No

Clear

← BACK

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SXQ700

Have you **ever** had vaginal sex, also called sexual intercourse, with a man? This means a man's penis in your vagina.

Please select ...

Yes

No

Clear

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NEXT →

4.3.5 Sexual Behavior (SXQ)

Information on sexual behavior is key to reducing the risk of STDs, including acquired immunodeficiency syndrome (AIDS). Such behaviors include delaying onset of sexual intercourse by adolescents, minimizing number of sexual partners and utilizing barrier contraceptives. Participants 14-69 years are asked about types of sexual behavior they have participated in, age of first intercourse, number of total sexual partners, number of partners for specific types of sexual behavior, use of condoms, and history of sexually-transmitted diseases. (SPs 60-69 years old only receive select questions in this section.) The questions on sexual behavior are included to provide for: targeting risk reduction efforts; assessing the results of such effort, and improving current understanding of the epidemiology of STDs. Additional questions on oral sex are also included in order to assess associations between oral sexual behavior and oral HPV infection. In 2009, the Sexual Behavior questionnaire was revised and split into two questionnaires, female and male.

4.3.5.1 Female Sexual Behavior (SXQ)

SXQ615_ This screen introduces the section. It provides a definition of sex to include vaginal, oral, or anal sex. The introduction includes a statement reassuring confidentiality, as the questions in this section deal with very private behaviors and issues.

SPs 14-17 years old will go to SXQ615. SPs 18+ years will go to SXQ700.

SXQ615 This question screens out SPs 14-17 years old who have never had sex. If the SP has never had sex, she will go to the end of the section.

SXQ700 This is the first question in the section for SPs 18+ years. This question asks if the SP ever had vaginal sex (sexual intercourse) with a man. A definition of vaginal sex is provided.

SXQ703

Have you **ever performed** oral sex on a man? This means putting your mouth on a man's penis or genitals.

Please select ...

Yes

No

Clear

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SXQ706

Have you **ever** had anal sex? This means contact between a man's penis and your anus or butt.

Please select ...

Yes

No

Clear

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SXQ709

Have you **ever** had **any** kind of sex with a woman? By sex, we mean sexual contact with another woman's vagina or genitals.

Please select ...

Yes

No

Clear

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- SXQ703 This question asks if the SP ever performed oral sex on a man. A definition of performing oral sex is provided.
- SXQ706 This question asks if the SP ever had anal sex with a man. A definition of anal sex is provided.
- SXQ709 This question asks if the SP ever had any kind of sex with a woman. A definition of “sex with a woman” is provided.

SXQ618

How old were you the first time you had **any** kind of sex, including vaginal, anal, or oral?
Please enter an age.

[Redacted]		
1	2	3
4	5	6
7	8	9
0		
Clear		

← BACK NEXT →

SXQ712

In **your lifetime**, with how many **men** have you had **any** kind of sex?
Please enter a number.

[Redacted]		
1	2	3
4	5	6
7	8	9
0		
Clear		

← BACK NEXT →

SXQ718

In the **past 12 months**, with how many **men** have you had **any** kind of sex?
Please enter a number or enter zero for none.

[Redacted]		
1	2	3
4	5	6
7	8	9
0		
Clear		

← BACK NEXT →

- SXQ618 This question asks how old the SP was the first time she had any kind of sex.
- SXQ712 Female SPs are asked for the total number of men with whom they've had any kind of sex in their entire lifetime. If the SP enters a response of zero, an error message will appear alerting the SP that her response is inconsistent with her previous responses about male sex partners.
- SXQ718 Female SPs are asked for the total number of men with whom they've had any kind of sex in the past 12 months. If the SP's response is greater than the lifetime number of male partners that was previously reported, an error message will appear.

SXQ724

In **your lifetime**, with how many **men** have you had **vaginal** sex? Vaginal sex means a man's penis in your vagina.

Please enter a number.

[Redacted]		
1	2	3
4	5	6
7	8	9
0		
Clear		

← BACK NEXT →

SXQ727

In the **past 12 months**, with how many **men** have you had **vaginal** sex? Vaginal sex means a man's penis in your vagina.

Please enter a number or enter zero for none.

[Redacted]		
1	2	3
4	5	6
7	8	9
0		
Clear		

← BACK NEXT →

SXQ621

How old were you when you first **performed** oral sex on a man? Performing oral sex means your mouth on a man's penis or genitals.

Please enter an age.

[Redacted]		
1	2	3
4	5	6
7	8	9
0		
Clear		

← BACK NEXT →

SXQ724 Female SPs who report having vaginal sex in SXQ700 are asked for the total number of men with whom they've had vaginal sex in their entire lifetime. A definition is provided.

If the SP enters a response of zero, an error message will appear alerting the SP that her response is inconsistent with her previous responses about male vaginal sex partners. If the SP's response is greater than the lifetime number of male partners that was previously reported, an error message will appear.

SXQ727 Female SPs who report having vaginal sex in SXQ700 are asked for the total number of men with whom they've had vaginal sex in the past 12 months. A definition is provided. If the SP's response is greater than the lifetime number of male vaginal sex partners that was previously reported, an error message will appear.

SXQ621 Female SPs who report performing oral sex on a man in SXQ703 are asked how old they were when they first performed oral sex on a man. A definition is provided.

SXQ624

In your **lifetime**, on how many **men** have you **performed oral sex**?

Please enter a number.

[Redacted]		
1	2	3
4	5	6
7	8	9
0		
Clear		

← BACK NEXT →

SXQ627

In the **past 12 months**, on how many **men** have you **performed oral sex**?

Please enter a number or enter zero for none.

[Redacted]		
1	2	3
4	5	6
7	8	9
0		
Clear		

← BACK NEXT →

SXQ630

How long has it been since the last time you **performed oral sex** on a **new male** partner? A new sexual partner is someone that you had never had sex with before.

Please enter a number.

[Redacted]			[Redacted]	
1	2	3	Days	
4	5	6	Weeks	
7	8	9	Months	
0			Years	
Clear			Clear	

← BACK NEXT →

SXQ624 Female SPs who report performing oral sex on a man in SXQ703 are asked for the total number of men on whom they've performed oral sex in their entire lifetime.

If the SP enters a response of zero, an error message will appear alerting the SP that her response is inconsistent with her previous responses about male oral sex partners.

SXQ627 Female SPs who report performing oral sex on a man in SXQ703 are asked for the total number of men on whom they've performed sex in the past 12 months.

If the SP's response is greater than the lifetime number of male oral sex partners that was previously reported, an error message will appear.

SXQ630 Females reporting more than one lifetime oral sex partner in SXQ624 are asked how long it has been since the last time she performed oral sex on a new male partner. A definition is provided for "a new sexual partner".

If the SP's response is earlier than her response to the age when she first performed oral sex on a man, an error message will appear.

SXQ736

In **your lifetime** with how many **women** have you had sex? By sex, we mean sexual contact with another woman's vagina or genitals.

Please enter a number.

1	2	3
4	5	6
7	8	9
<div style="border: 1px solid black; padding: 5px;">0</div>		

Clear

← BACK
NEXT →

SXQ739

In the **past 12 months**, with how many **women** have you had sex? By sex, we mean sexual contact with another woman's vagina or genitals.

Please enter a number or enter zero for none.

1	2	3
4	5	6
7	8	9
<div style="border: 1px solid black; padding: 5px;">0</div>		

Clear

← BACK
NEXT →

SXQ741

Have you **ever performed oral** sex on a **woman**? Performing oral sex means your mouth on a woman's vagina or genitals.

Please select ...

Yes

No

Clear

← BACK
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SXQ736 Female SPs who report having sex with a woman in SXQ709 are asked for the total number of women with whom they've had sex in their entire lifetime. A definition is provided.

If the SP enters a response of zero, an error message will appear alerting the SP that her response is inconsistent with her previous responses about sex with a female partner.

SXQ739 Female SPs who report having sex with a woman in SXQ709 are asked for the total number of women with whom they've had sex in the past 12 months. A definition is provided.

If the SP's response is greater than the lifetime number of female partners that was previously reported, an error message will appear.

SXQ741 This question asks if the SP has ever performed oral sex on a woman. A definition is provided.

SXQ633

How old were you when you first **performed** oral sex on a woman? Performing oral sex means your mouth on a woman's vagina or genitals.

Please enter an age.

[Redacted]		
1	2	3
4	5	6
7	8	9
0		
Clear		

← BACK NEXT →

SXQ636

In **your lifetime**, on how many **women** have you **performed oral** sex?

Please enter a number.

[Redacted]		
1	2	3
4	5	6
7	8	9
0		
Clear		

← BACK NEXT →

SXQ639

In the **past 12 months**, on how many **women** have you **performed oral** sex?

Please enter a number or enter zero for none.

[Redacted]		
1	2	3
4	5	6
7	8	9
0		
Clear		

← BACK NEXT →

SXQ633 Female SPs who report performing oral sex on a woman in SXQ741, receive questions SXQ633-SXQ639.

This question asks how old the SP was when she first performed oral sex on a woman. A definition is provided.

SXQ636 Female SPs who report performing oral sex on a woman in SXQ741 are asked for the total number of women on whom they've performed oral sex in their entire lifetime.

If the SP enters a response of zero, an error message will appear alerting the SP that her response is inconsistent with her previous responses about female oral sex partners.

SXQ639 Female SPs who report performing oral sex on a woman in SXQ741 are asked for the total number of women on whom they've performed oral sex in the past 12 months.

If the SP's response is greater than the lifetime number of female oral sex partners that was previously reported, an error message will appear.

SXQ642

How long has it been since the last time you **performed oral** sex on a **new female** partner? A new sexual partner is someone that you had never had sex with before.

Please enter a number.

<input type="text" value="1"/>	<input type="text" value="2"/>	<input type="text" value="3"/>	<input type="text" value="Days"/>
<input type="text" value="4"/>	<input type="text" value="5"/>	<input type="text" value="6"/>	<input type="text" value="Weeks"/>
<input type="text" value="7"/>	<input type="text" value="8"/>	<input type="text" value="9"/>	<input type="text" value="Months"/>
<input type="text" value="0"/>			<input type="text" value="Years"/>
<input type="text" value="Clear"/>			<input type="text" value="Clear"/>

SXQ744

The next set of questions is about all of your partners, males and females.

SXQ645

When you **performed oral** sex in the **past 12 months**, how often would you use **protection**, like a condom or dental dam?

Please select one of the following choices.

<input type="checkbox"/> Never	<input type="checkbox"/> Always
<input type="checkbox"/> Rarely	<input type="checkbox"/> Unsure
<input type="checkbox"/> Usually	<input type="text" value="Clear"/>

SXQ642 Females reporting more than one lifetime oral sex partner in SXQ636 are asked how long it has been since the last time she performed oral sex on a new female partner. A definition is provided for “a new sexual partner.”

If the SP’s response is earlier than her response to the age when she first performed oral sex on a woman, an error message will appear.

SXQ744 Women who report having sex with men and women receive this introduction before the next set of questions.

SXQ645 If an SP reports having oral sex in the past 12 months in SXQ627 or SXQ639, they are asked how often during the past 12 months they used a condom or dental dam when performing oral sex.

SXQ648

In the **past 12 months**, did you have **any** kind of sex with a person that you never had sex with before?

Please select ...

Yes

No

Clear

← BACK NEXT →

SXQ610

In the **past 12 months**, about how many **times** have you had vaginal or anal sex?

Please select one of the following choices.

Never

52-103 times

Once

104-364 times

2-11 times

365 times or more

12-51 times

Clear

← BACK NEXT →

SXQ250

In the **past 12 months**, about how often have you had vaginal or anal sex without using a condom?

Please select one of the following choices.

Never

Not always, but more than half the time

Less than half of the time

Always

About half of the time

Clear

← BACK NEXT →

- SXQ648 Females reporting sexual activity in the past 12 months (SXQ718, SXQ727, and SXQ739) are asked if they had sex with a person during that time that they never had sex with before.
- SXQ610 Female SPs who report having vaginal or anal sex (SXQ700 & SXQ706) are asked how many times they had vaginal and/or anal sex in the past 12 months.
- SXQ250 Female SPs who have had vaginal or anal sex at least once in the past year are asked how frequently they had unprotected sex.

SXQ651

Of the persons you had **any** kind of sex with in the **past 12 months**, how many were five or more years **older** than you?

Please enter a number or enter zero for none.

1	2	3
4	5	6
7	8	9
<div style="border: 1px solid black; padding: 5px 15px;">0</div>		

Clear

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SXQ654

Of the persons you had **any** kind of sex with in the **past 12 months**, how many were five or more years **younger** than you?

Please enter a number or enter zero for none.

1	2	3
4	5	6
7	8	9
<div style="border: 1px solid black; padding: 5px 15px;">0</div>		

Clear

← BACK
NEXT →

SXQ260

Has a doctor or other health care professional **ever** told you that you had genital herpes?

Please select ...

Yes

No

Clear

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SXQ651 A female SP with at least one sexual partner in the past year is asked how many of her partners were five or more years older than her.

If the SP's response is greater than the total number of partners reported in the past 12 months, an error message will appear.

SXQ654 A female SP with at least one sexual partner in the past year is asked how many of her partners were five or more years younger than her.

If the SP's response is greater than the total number of partners reported in the past 12 months, an error message will appear. If the sum of the responses to SXQ651 and SXQ654 are greater than the total number of partners reported in the past 12 months, an error message will appear alerting the SP that her response is inconsistent with her previous responses.

SXQ260 All SPs (14-59) who have indicated that they have ever been sexually active are asked a series of questions regarding sexually transmitted diseases.

Questions SXQ260 – SXQ753 ask SPs if a health care professional has **ever** told them that they had these conditions.

Genital herpes is a highly contagious venereal disease of the genitalia of either sex.

SXQ265

Has a doctor or other health care professional **ever** told you that you had genital warts?
Please select ...

Yes

No

Clear

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SXQ267

How old were you when you were first told that you had genital warts?
Please enter an age.

1 2 3

4 5 6

7 8 9

0

Clear

← BACK NEXT →

SXQ265 Genital warts are an elevation of viral origin upon the skin of the genitalia.

SXQ267 SPs who report having genital warts are asked the age when she was first told.

SXQ753

Has a doctor or other health care professional **ever** told you that you had human papillomavirus or HPV?

Please select ...

Yes

No

Clear

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SXQ270

In the **past 12 months**, has a doctor or other health care professional told you that you had gonorrhea, sometimes called GC or clap?

Please select ...

Yes

No

Clear

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SXQ753 Genital human papillomavirus (HPV) is the most common sexually transmitted infection (STI). The virus infects the skin and mucous membranes. There are more than 40 HPV types that can infect the genital areas of men and women, including the skin of the penis, vulva (area outside the vagina), and anus, and the linings of the vagina, cervix, and rectum.

Approximately 20 million Americans are currently infected with HPV, and another 6.2 million people become newly infected each year. At least 50 percent of sexually active men and women acquire genital HPV infection at some point in their lives.

SXQ270 SPs who have indicated that they have ever been sexually active are then asked if a health care professional has ever told them that they had these conditions **in the past 12 months**.

Gonorrhea, GC, or clap, is an infectious disease of the genital tract, rectum, or cervix, transmitted chiefly by sexual intercourse.

SXQ272

In the **past 12 months**, has a doctor or other health care professional told you that you had chlamydia?

Please select ...

Yes

No

Clear

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SXQ295

Which of the following best represents how you think of yourself?

Lesbian or Gay

Something else

Straight, that is, not lesbian or gay

I don't know the answer

Bisexual

Clear

← BACK Press the 'NEXT' button when you are ready to continue. NEXT →

SXQ272 Chlamydia is a venereal disease of the genital tract or cervix caused by the organism chlamydia trachomatis.

SXQ295 SXQ295 asks female SPs 18-59 years of age to indicate their sexual orientation

Error 1

Your response is not consistent with your previous responses about male sex partners. Please press the "Back" button, press "Clear," and try again.

← BACK

Error 2

Your response is not consistent with your previous responses about sex with a female partner. Please press the "Back" button, press "Clear," and try again.

← BACK

Error 3

Your response is greater than your lifetime number of male partners. Please press the "Back" button, press "Clear," and try again.

← BACK

Error 1 This is an example of an error message that will appear if an SP enters a response that is inconsistent with previous responses.

Error 2 This is another example of an error message that will appear if an SP enters a response that is inconsistent with previous responses.

Error 3 This is an example of an error message that will appear if an SP enters a response that is greater than the lifetime number of partners than was previously reported.

SXQ615_

The next set of questions is about your sexual history. By sex, we mean vaginal, oral, or anal sex. Please remember that your answers are strictly confidential.

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SXQ615

Have you **ever** had **any** kind of sex?

Please select ...

Yes

No

Clear

← BACK

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SXQ800

Have you **ever** had vaginal sex, also called sexual intercourse, with a woman? This means your penis in a woman's vagina.

Please select ...

Yes

No

Clear

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NEXT →

4.3.5.2 Male Sexual Behavior (SXQ)

SXQ615_ This screen introduces the section. It provides a definition of sex to include vaginal, oral, or anal sex. The introduction includes a statement reassuring confidentiality, as the questions in this section deal with very private behaviors and issues.

SPs 14-17 years old will go to SXQ615. SPs 18+ years will go to SXQ800.

SXQ615 This question screens out SPs 14-17 years old who have never had sex. If the SP has never had sex, he will go to the end of the section.

SXQ800 This is the first question in the section for SPs 18+ years. This question asks if the SP ever had vaginal sex (sexual intercourse) with a woman. A definition of vaginal sex is provided.

SXQ803

Have you **ever performed** oral sex on a woman? This means putting your mouth on a woman's vagina or genitals.

Please select ...

Yes

No

Clear

[← BACK](#) [NEXT →](#)

SXQ806

Have you **ever** had anal sex with a woman? Anal sex means contact between your penis and a woman's anus or butt.

Please select ...

Yes

No

Clear

[← BACK](#) [NEXT →](#)

SXQ809

Have you **ever** had **any** kind of sex with a man, including oral or anal?

Please select ...

Yes

No

Clear

[← BACK](#) [NEXT →](#)

SXQ803 This question asks if the SP ever performed oral sex on a woman. A definition of performing oral sex is provided.

SXQ806 This question asks if the SP ever had anal sex with a woman. A definition of anal sex is provided.

SXQ809 This question asks if the SP ever had any kind of sex with a man, including oral or anal.

SXQ618

How old were you the first time you had **any** kind of sex, including vaginal, anal, or oral?
Please enter an age.

[Redacted]		
1	2	3
4	5	6
7	8	9
0		
Clear		

← BACK NEXT →

SXQ812

In **your lifetime**, with how many **women** have you had **any** kind of sex?
Please enter a number.

[Redacted]		
1	2	3
4	5	6
7	8	9
0		
Clear		

← BACK NEXT →

SXQ818

In the **past 12 months**, with how many **women** have you had **any** kind of sex?
Please enter a number or enter zero for none.

[Redacted]		
1	2	3
4	5	6
7	8	9
0		
Clear		

← BACK NEXT →

SXQ618 This question asks how old the SP was the first time he had any kind of sex.

SXQ812 Male SPs are asked for the total number of women with whom they've had any kind of sex in their entire lifetime. If the SP enters a response of zero, an error message will appear alerting the SP that his response is inconsistent with his previous responses about female sex partners.

SXQ818 Male SPs are asked for the total number of women with whom they've had any kind of sex in the past 12 months. If the SP's response is greater than the lifetime number of female partners that was previously reported, an error message will appear.

SXQ824

In **your lifetime**, with how many **women** have you had **vaginal** sex? Vaginal sex means your penis in a woman's vagina.

Please enter a number.

[Redacted]		
1	2	3
4	5	6
7	8	9
0		
Clear		

← BACK NEXT →

SXQ827

In the **past 12 months**, with how many **women** have you had **vaginal** sex? Vaginal sex means your penis in a woman's vagina.

Please enter a number or enter zero for none.

[Redacted]		
1	2	3
4	5	6
7	8	9
0		
Clear		

← BACK NEXT →

SXQ633

How old were you when you first **performed** oral sex on a woman? Performing oral sex means your mouth on a woman's vagina or genitals.

Please enter an age.

[Redacted]		
1	2	3
4	5	6
7	8	9
0		
Clear		

← BACK NEXT →

SXQ824 Male SPs who report having vaginal sex in SXQ800 are asked for the total number of women with whom they've had vaginal sex in their entire lifetime. A definition is provided.

If the SP enters a response of zero, an error message will appear alerting the SP that his response is inconsistent with his previous responses about female vaginal sex partners. If the SP's response is greater than the lifetime number of female partners that was previously reported, an error message will appear.

SXQ827 Male SPs who report having vaginal sex in SXQ800 are asked for the total number of women with whom they've had vaginal sex in the past 12 months. A definition is provided.

If the SP's response is greater than the lifetime number of female vaginal sex partners that was previously reported, an error message will appear.

SXQ633 Male SPs who report performing oral sex on a woman in SXQ803, receive questions SXQ633-SXQ639.

This question asks how old the SP was when he first performed oral sex on a woman. A definition is provided.

SXQ636

In **your lifetime**, on how many **women** have you **performed oral** sex?
Please enter a number.

[Redacted]		
1	2	3
4	5	6
7	8	9
0		
Clear		

← BACK NEXT →

SXQ639

In the **past 12 months**, on how many **women** have you **performed oral** sex?
Please enter a number or enter zero for none.

[Redacted]		
1	2	3
4	5	6
7	8	9
0		
Clear		

← BACK NEXT →

SXQ642

How long has it been since the last time you **performed oral** sex on a **new female** partner? A new sexual partner is someone that you had never had sex with before.
Please enter a number.

[Redacted]			[Redacted]
1	2	3	Days
4	5	6	Weeks
7	8	9	Months
0			Years
Clear			Clear

← BACK NEXT →

SXQ636 Male SPs who report performing oral sex on a woman in SXQ803 are asked for the total number of women on whom they've performed oral sex in their entire lifetime.

If the SP enters a response of zero, an error message will appear alerting the SP that his response is inconsistent with his previous responses about female oral sex partners.

SXQ639 Male SPs who report performing oral sex on a woman in SXQ803 are asked for the total number of women on whom they've performed oral sex in the past 12 months.

If the SP's response is greater than the lifetime number of female oral sex partners that was previously reported, an error message will appear.

SXQ642 Males reporting more than one lifetime oral sex partner in SXQ636 are asked how long it has been since the last time he performed oral sex on a new female partner. A definition is provided for "a new sexual partner."

If the SP's response is earlier than his response to the age when he first performed oral sex on a woman, an error message will appear.

SXQ410

In **your lifetime**, with how many **men** have you had anal or oral sex?
Please enter a number or enter zero for none.

[Redacted]		
1	2	3
4	5	6
7	8	9
0		
Clear		

← BACK NEXT →

SXQ550

In the **past 12 months**, with how many **men** have you had anal or oral sex?
Please enter a number or enter zero for none.

[Redacted]		
1	2	3
4	5	6
7	8	9
0		
Clear		

← BACK NEXT →

SXQ836

In **your lifetime**, with how many **men** have you had anal sex?
Please enter a number or enter zero for none.

[Redacted]		
1	2	3
4	5	6
7	8	9
0		
Clear		

← BACK NEXT →

SXQ410 Male SPs are asked for the total number of men with whom they have had anal or oral sex in their entire lifetime.

If the SP enters a response of zero, an error message will appear alerting the SP that his response is inconsistent with his previous responses about male sex partners.

SXQ550 Male SPs who have had at least one male sexual partner in their lifetime are asked how many males they've had anal or oral sex with in the past year.

If the SP's response is greater than the lifetime number of male partners that was previously reported, an error message will appear.

SXQ836 Male SPs who report having sex with a man in SXQ809 are asked for the total number of men with whom they've had anal sex in their entire lifetime.

SXQ841

In the **past 12 months**, with how many **men** have you had anal sex?
Please enter a number or enter zero for none.

1 2 3
 4 5 6
 7 8 9
 0
 Clear

← BACK NEXT →

SXQ853

Have you **ever performed oral** sex on a **man**? Performing oral sex means your mouth on a man's penis or genitals.
Please select ...

Yes
 No
 Clear

← BACK NEXT →

SXQ621

How old were you when you first **performed oral** sex on a man? Performing oral sex means your mouth on a man's penis or genitals.
Please enter an age.

1 2 3
 4 5 6
 7 8 9
 0
 Clear

← BACK NEXT →

SXQ841 Male SPs who report having sex with a man in SXQ809 are asked for the total number of men with whom they've had anal sex in the past 12 months.

If the SP's response is greater than the lifetime number of male partners that was previously reported, an error message will appear.

SXQ853 This question asks if the SP has ever performed oral sex on a man. A definition is provided.

SXQ621 Male SPs who report performing oral sex on a man in SXQ703 are asked how old they were when they first performed oral sex on a man. A definition is provided.

SXQ624

In your **lifetime**, on how many **men** have you **performed oral** sex?
Please enter a number.

[Redacted]		
1	2	3
4	5	6
7	8	9
0		
Clear		

← BACK NEXT →

SXQ627

In the **past 12 months**, on how many **men** have you **performed oral** sex?
Please enter a number or enter zero for none.

[Redacted]		
1	2	3
4	5	6
7	8	9
0		
Clear		

← BACK NEXT →

SXQ624 Male SPs who report performing oral sex on a man in SXQ803 are asked for the total number of men on whom they've performed oral sex in their entire lifetime.

If the SP enters a response of zero, an error message will appear alerting the SP that his response is inconsistent with his previous responses about male oral sex partners.

SXQ627 Male SPs who report performing oral sex on a man in SXQ803 are asked for the total number of men on whom they've performed sex in the past 12 months.

If the SP's response is greater than the lifetime number of male oral sex partners that was previously reported, an error message will appear.

SXQ630

How long has it been since the last time you **performed oral** sex on a **new male** partner? A new sexual partner is someone that you had never had sex with before.

Please enter a number.

1	2	3	Days	
4	5	6		Weeks
7	8	9		Months
0				Years
Clear				Clear

◀ BACK NEXT ▶

SXQ844

The next set of questions is about all of your partners, males and females.

◀ BACK NEXT ▶

SXQ630 Males reporting more than one lifetime oral sex partner in SXQ624 are asked how long it has been since the last time he performed oral sex on a new male partner. A definition is provided for “a new sexual partner.”

If the SP’s response is earlier than his response to the age when he first performed oral sex on a man, an error message will appear.

SXQ844 Men who report having sex with men and women receive this instruction before the next set of questions.

SXQ645

When you **performed oral sex** in the **past 12 months**, how often would you use **protection**, like a condom or dental dam?

Please select one of the following choices.

Never
 Always

Rarely
 Unsure

Usually

SXQ648

In the **past 12 months**, did you have **any** kind of sex with a person that you never had sex with before?

Please select ...

Yes

No

SXQ610

In the **past 12 months**, about how many **times** have you had vaginal or anal sex?

Please select one of the following choices.

Never
 52-103 times

Once
 104-364 times

2-11 times
 365 times or more

12-51 times

- SXQ645 If an SP reports having oral sex in the past 12 months in SXQ627 or SXQ639, they are asked how often during the past 12 months they used a condom or dental dam when performing oral sex.
- SXQ648 Males reporting sexual activity in the past 12 months (SXQ818, SXQ827, and SXQ841) are asked if they had sex with a person during that time that they never had sex with before.
- SXQ610 Male SPs who report having vaginal or anal sex (SXQ800 & SXQ806) are asked how many times they had vaginal and/or anal sex in the past 12 months.

SXQ250

In the **past 12 months**, about how often have you had vaginal or anal sex without using a condom?
 Please select one of the following choices.

Never
 Not always, but more than half the time

Less than half of the time
 Always

About half of the time

SXQ651

Of the persons you had **any** kind of sex with in the **past 12 months**, how many were five or more years **older** than you?
 Please enter a number or enter zero for none.

SXQ654

Of the persons you had **any** kind of sex with in the **past 12 months**, how many were five or more years **younger** than you?
 Please enter a number or enter zero for none.

SXQ250 Male SPs who have had vaginal or anal sex at least once in the past year are asked how frequently they had unprotected sex.

SXQ651 A male SP with at least one sexual partner in the past year is asked how many of his partners were five or more years older than him.

SXQ654 A male SPs with at least one sexual partner in the past year is asked how many of his partners were five or more years younger than him.

If the SP's response is greater than the total number of partners reported in the past 12 months, an error message will appear. If the sum of the responses to SXQ651 and SXQ654 are greater than the total number of partners reported in the past 12 months, an error message will appear alerting the SP that his response is inconsistent with his previous responses.

SXQ260

Has a doctor or other health care professional **ever** told you that you had genital herpes?

Please select ...

Yes

No

Clear

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SXQ265

Has a doctor or other health care professional **ever** told you that you had genital warts?

Please select ...

Yes

No

Clear

[← BACK](#) [NEXT →](#)

SXQ260 All SPs (14-59) who have indicated that they have ever been sexually active are asked a series of questions regarding sexually transmitted diseases.

Questions SXQ260 and SXQ265 ask SPs if a health care professional has **ever** told them that they had these conditions.

Genital herpes is a highly contagious venereal disease of the genitalia of either sex.

SXQ265 Genital warts are an elevation of viral origin upon the skin of the genitalia.

SXQ267

How old were you when you were first told that you had genital warts?
Please enter an age.

1	2	3
4	5	6
7	8	9
0		
Clear		

◀ BACK NEXT ▶

SXQ270

In the **past 12 months**, has a doctor or other health care professional told you that you had gonorrhea, sometimes called GC or clap?
Please select ...

<input type="checkbox"/> Yes
<input type="checkbox"/> No
Clear

◀ BACK NEXT ▶

SXQ267 SPs who report having genital warts are asked the age when he was first told.

SXQ270 SPs who have indicated that they have ever been sexually active are then asked if a health care professional has ever told them that they had these conditions **in the past 12 months**.

Gonorrhea, GC, or clap, is an infectious disease of the genital tract, rectum or cervix, transmitted chiefly by sexual intercourse.

SXQ272

In the **past 12 months**, has a doctor or other health care professional told you that you had chlamydia?

Please select ...

Yes

No


Clear

← BACK NEXT →


SXQ280

Are you circumcised or uncircumcised?

Please select ...



Circumcised



Uncircumcised

Clear

← BACK NEXT →

SXQ293

Which of the following best represents how you think of yourself?

Gay

Something else

Straight, that is, not gay

I don't know the answer

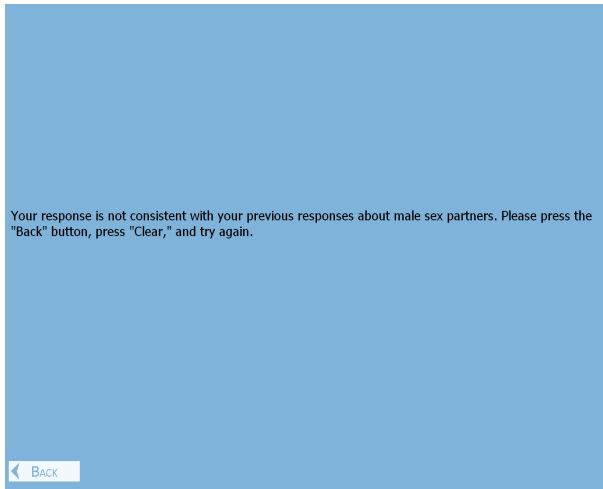
Bisexual

Clear

← BACK Press the 'NEXT' button when you are ready to continue. NEXT →

- SXQ272 Chlamydia is a venereal disease of the genital tract or cervix caused by the organism chlamydia trachomatis.
- SXQ280 Male SPs age 14-59, regardless of whether they've been sexually active, answer question SXQ280. Circumcision is the surgical process of removing the foreskin of the penis. This procedure, if done, is performed on babies, often within a few days of being born.
- SXQ293 Male SPs 18-59 years of age are asked SXQ293. This question asks the subject to indicate his sexual orientation.

Error 1



Error 2



Error 3



Error 1 This is an example of an error message that will appear if an SP enters a response that is inconsistent with previous responses.

Error 2 This is another example of an error message that will appear if an SP enters a response that is inconsistent with previous responses.

Error 3 This is an example of an error message that will appear if an SP enters a response that is greater than the lifetime number of partners than was previously reported.

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4.3.6 Pubertal Maturation

From a public health perspective, there are compelling reasons to include an assessment of pubertal maturation in NHANES, such as the uncertainty about the age of onset of puberty among U.S. children. Data from the NHANES III and other earlier studies showed a trend toward declining maturation age in U.S. children.¹⁻³ However, no recent nationally representative data on pubertal maturation have been collected since NHANES III ended in 1994.

Pubertal development correlates more closely with other physical changes in children and adolescents such as height, weight, bone density, and certain biochemical markers than chronological age. The onset and progression of pubertal maturation may be more closely related to behavioral and psychosocial phenomena than other physiologic changes because the physical changes that coincide with puberty are visible and because of societal expectations and reactions.

NHANES is the only national survey collecting physical and biochemical data on U.S. children and adolescents that can be used to identify factors relating to onset of puberty. In addition, pubertal maturation information in the NHANES can enhance the interpretation of other data currently collected on children and adolescents. For example, changes in bone density during adolescence are strongly associated with pubertal maturation status.^{4,5} Certain types of cancers, type II diabetes, and cardiovascular disease later in life, as well as behavioral disorders in adolescence, have been associated with altered puberty timing.⁶

An increase in obesity among U.S. children and adolescents has been linked to early onset of puberty in girls in a number of studies,^{7,8} although recently to a delay in boys.⁹ Environmental exposure to estrogenic endocrine disruptors has been associated with onset of precocious puberty based on findings that a relatively high proportion of children, primarily girls, who emigrated from developing to developed countries showed early onset of puberty (before 8 years of age) and that their blood serum contained elevated levels of estrogenic pesticides.¹⁰

Pubertal maturation information can also be useful in interpreting NHANES questionnaire data on adolescents. Pubertal changes are related to numerous aspects of adolescent development and experience, including psychosocial behavior, anxiety, depression, self-esteem, self-image, eating disorders, and early sexual activity.¹¹⁻¹⁴ Information on pubertal timing would be valuable in evaluating NHANES data on physical activity, mental health, and risk behavior in children and adolescents.

The Pubertal Maturation section will be administered in the ACASI section of MEC Interview to SPs aged 8 – 19. Before SPs under the age of 18 are assigned to the MEC Interview, a parent/guardian will be informed during the Automated Proxy Interview that his or her child will be asked questions about body development. If the parent or guardian does not want his or her child to receive the Pubertal Maturation questions, that section of the MEC Interview will be blocked.

If an SP is eligible for the PMQ section of ACASI, place the mirror on the desk near the SP after the ACASI practice screens and before you give the SP the headphones. Say “Here is a mirror. You can use to help you with some of the questions if you need to.” Do not provide details about what the mirror can be used for.

4.3.6.1 References

1. Herman-Giddens ME, Slora EJ, Wasserman RC, Bourdony CJ, Bhapkar MV, Koch GG, Hasemeier CM. Secondary sexual characteristics and menses in young girls seen in office practice: a study from the Pediatric Research in Office Settings network. *Pediatrics*. 1997;99:505-12.
2. Herman-Giddens ME, Kaplowitz PB, Wasserman R. Commentary - Navigating the recent articles on girls' puberty in *Pediatrics*: What do we know and where do we go from here? *Pediatrics*. 2004;113:911-17.
3. Sun SS, Schubert CM, Chumlea WC, Roche AF, Kulin HE, Lee PA, Himes JH, Ryan AS. National estimates of the timing of sexual maturation and racial differences among U.S. Children. *Pediatrics*. 2002;110:911-19.
4. Warner JT, Cowan FJ, Dunstan FD, Evans WD, Webb DK, Gregory JW. Measured and predicted bone mineral content in healthy boys and girls aged 6-18 years: adjustment for body size and puberty. *Acta Paediatr*. 1998;87:244-9.
5. Yilmaz D, Ersoy B, Bilgin E, Gümüşer G, Onur E, Pinar ED. Bone mineral density in girls and boys at different pubertal stages: relation with gonadal steroids, bone formation markers, and growth parameters. *J Bone Miner Metab*. 2005;23:476-82.
6. Golub MS, Collman GW, Foster PM, Kimmel CA, Rajpert-De Meyts E, Reiter EO, Sharpe RM, Skakkebaek NE, Toppari J. Public health implications of altered puberty timing. *Pediatrics*. 2008;121:S218-30.
7. Kaplowitz PB, Oberfield SE. Reexamination of the age limit for defining when puberty is precocious in girls in the United States: implications for evaluation and treatment. Drug and Therapeutics Executive Committee of the Lawson Wilkins Pediatric Endocrine Society. *Pediatrics*. 1999;104:936-41.

8. Wang Y. Is obesity associated with early sexual maturation? A comparison of the association in American boys versus girls. *Pediatrics*. 2002;110:903-10.
9. Lee JM, Kaciroti N, Appugliese D, Corwyn RF, Bradley RH, Lumeng JC. Body mass index and timing of pubertal initiation in boys. *Arch Pediatr Adolesc Med*. 2010;164:139-44.
10. Krstevska-Konstantinova M, Charlier C, Craen M, Du Caju M, Heinrichs C, de Beaufort C, Plomteux G, Bourguignon JP. Sexual precocity after immigration from developing countries to Belgium: evidence of previous exposure to organochlorine pesticides. *Hum Reprod*. 2001;16:1020-1026.
11. Graber JA, Seeley JR, Brooks-Gunn J, Lewinsohn PM. Is pubertal timing associated with psychopathology in young adulthood. *J Am Acad Child Adolesc Psychiatry*. 2004;43:718-26.
12. Zehr JL, Culbert KM, Sisk CL, Klump KL. An association of early puberty with disordered eating and anxiety in a population of undergraduate women and men. *Horm Behav*. 2007;52:427-35.
13. Kaltiala-Heino R, Kosunen E, Rimpelä M. Pubertal timing, sexual behaviour and self-reported depression in middle adolescence. *J Adolesc*. 2003;26:531-45.
14. Huerta R, Brizuela-Gamiño OL. Interaction of pubertal status, mood and self-esteem in adolescent girls. *J Reprod Med*. 2002 Mar;47(3):217-25.

PMQINT_

The following questions ask about changes that happen during puberty. Puberty is the time when your body develops into a young adult. The answers to questions about your body help us to understand how children and teenagers grow and change. Your answers will be kept private. Nobody can see your answers and we will not show them to anyone.

Please press the Next button to begin.

← BACK

NEXT →

PMQ010_

The next screen shows stages of breast development. Please look at the drawings and listen to the descriptions. Then choose the drawing that looks the most like your body.

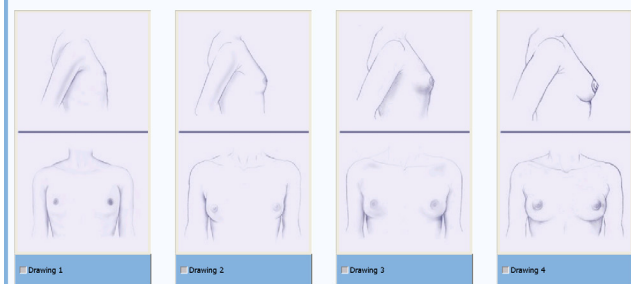
Please press the Next button to continue.

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PMQ020

Please choose the drawing that looks the most like your body.
 Drawing 1: The breasts are flat. The nipples stick out a little.
 Drawing 2: The breasts are small mounds. The nipples stick out more than in Drawing 1. There is more of the dark skin around the nipples than in Drawing 1.
 Drawing 3: The breasts and the darker skin around the nipples are bigger than in Drawing 2.
 Drawing 4: The nipple and the darker skin around the nipples make a mound that sticks out from the breast.



Drawing 1

Drawing 2

Drawing 3

Drawing 4

Clear

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NEXT →

PMQINT_ This screen introduces the Pubertal Maturation section. Touch “Next” to proceed to the first question.

PMQ010_ This screen introduces the breast development screen for females.

PMQ020 Females 8 – 9 years old are presented 4 stages of breast development and asked to select the drawing that looks most like their body.

PMQ030

Please choose the drawing that looks the most like your body.

Drawing 1: The breasts are flat. The nipples stick out a little.
 Drawing 2: The breasts are small mounds. The nipples stick out more than in Drawing 1. There is more of the dark skin around the nipples than in Drawing 1.
 Drawing 3: The breasts and the darker skin around the nipples are bigger than in Drawing 2.
 Drawing 4: The nipple and the darker skin around the nipples make a mound that sticks out from the breast.
 Drawing 5: Only the nipples stick out from the breast. The darker skin around the nipples does not stick out.

Clear

PMQ040

The next screen shows stages of hair growth in your private area. Please look at the drawings and listen to the descriptions. Then choose the drawing that looks the most like your body.

Please press the Next button to continue.

PMQ050

Please choose the drawing that looks the most like your body.

Drawing 1: There is no hair in this area.
 Drawing 2: There are a few long, soft hairs in the private area. The hairs can be straight or curly.
 Drawing 3: The hair is thicker and curlier and has spread out over more of the private area than in Drawing 2.
 Drawing 4: The hair is darker and curlier and covers a bigger area than in Drawing 3.

Clear

PMQ030 Females 10 – 19 years old are presented 5 stages of breast development and asked to select the drawing that looks most like her body.

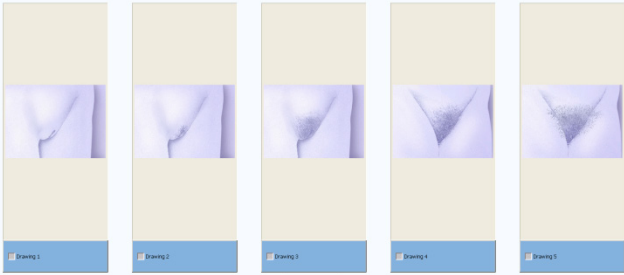
PMQ040 This screen introduces section for hair growth in the private area for females.

PMQ050 Females 8 – 9 years old are presented 4 stages of hair growth in the private area and asked to select the drawing that looks most like her body.

PMQ060

Please choose the drawing that looks the most like your body.

Drawing 1: There is no hair in this area.
 Drawing 2: There are a few long, soft hairs in the private area. The hairs can be straight or curly.
 Drawing 3: The hair is thicker and curlier and has spread out over more of the private area than in Drawing 2.
 Drawing 4: The hair is darker and curlier and covers a bigger area than in Drawing 3. There is no hair on the inside of the thighs.
 Drawing 5: There is hair on the inside of the thighs. The hair covers an area that is shaped like a triangle.



Clear

Back Next

PMQ070_

The next screen shows stages of penis, testicle, and scrotum growth in your private area. Please look at the drawings and listen to the descriptions. Then choose the drawing that looks the most like your body.

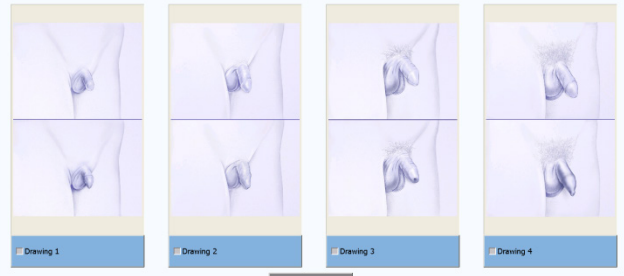
Please press the Next button to continue.

Back Next

PMQ080

Please choose the drawing that looks the most like your body.

Drawing 1: The penis, testicles (balls), and scrotum are about the same size as when you were younger.
 Drawing 2: The testicles (balls) are larger than in Drawing 1 and the scrotum is lower. The penis is only a little bigger compared to Drawing 1.
 Drawing 3: The penis is longer than Drawing 2. The testicles (balls) and scrotum are larger and have dropped lower than in Drawing 2.
 Drawing 4: The penis is longer and wider than in Drawing 3. The scrotum is bigger and the skin there is darker.



Clear

Back Next

PMQ060 Females 10 – 19 years old are presented 5 stages of hair growth in the private area and asked to select the drawing that looks most like their body.

PMQ070_ This screen introduces the penis, testicle, and scrotum growth section for males.

PMQ080 Males 8 – 9 years old are presented 4 stages of penis, testicle, and scrotum growth and asked to select the drawing that looks most like his body.

PMQ090

Please choose the drawing that looks the most like your body.

Drawing 1: The penis, testicles (balls), and scrotum are about the same size as when you were younger.
 Drawing 2: The testicles (balls) are larger than in Drawing 1 and the scrotum is lower. The penis is only a little bigger compared to Drawing 1.
 Drawing 3: The penis is longer than Drawing 2. The testicles (balls) and scrotum are larger and have dropped lower than in Drawing 2.
 Drawing 4: The penis is longer and wider than in Drawing 3. The scrotum is bigger and the skin there is darker.
 Drawing 5: The penis, scrotum and testicles are bigger than in Drawing 4.

Drawing 1
 Drawing 2
 Drawing 3
 Drawing 4
 Drawing 5

Clear

PMQ100_

The next screen shows stages of hair growth in your private area. Please look at the drawings and listen to the descriptions. Then choose the drawing that looks the most like your body.

Please press the Next button to continue.

PMQ110

Please choose the drawing that looks the most like your body.

Drawing 1: There is no hair.
 Drawing 2: There are a few long, soft hairs at the base of the penis. The hairs can be straight or curly.
 Drawing 3: The hair is thicker and curlier. There is hair growing on a bigger area than in Drawing 2.
 Drawing 4: The hair is darker and curlier and covers a bigger area than in Drawing 3.

Drawing 1
 Drawing 2
 Drawing 3
 Drawing 4

Clear

PMQ090 Males 10 – 19 years old are presented 5 stages of penis, testicle, and scrotum growth and asked to select the drawing that looks most like their body.

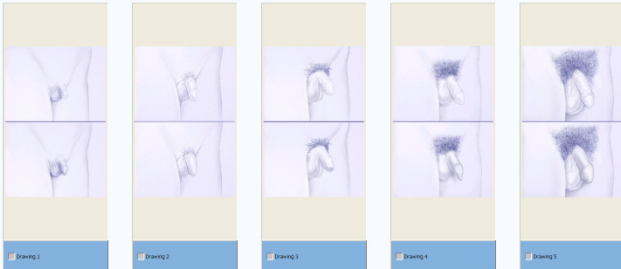
PMQ100_ This screen introduces the section for hair growth in the private area for males.

PMQ110 Males 8 – 9 years old are presented 4 stages of hair growth in the private area and asked to select the drawing that looks most like their body.

PMQ120

Please choose the drawing that looks the most like your body.

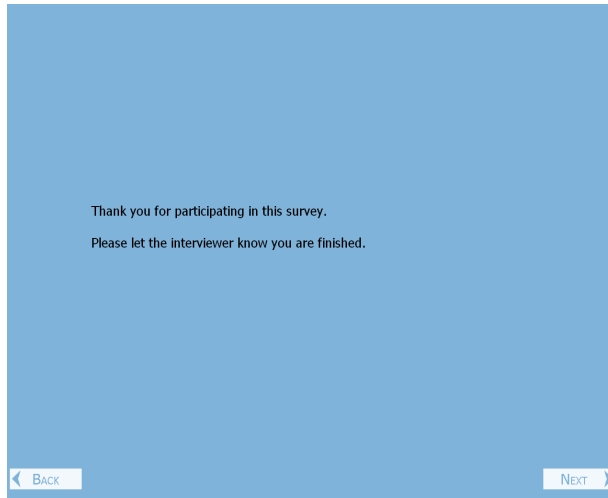
Drawing 1: There is no hair.
 Drawing 2: There are a few long, soft hairs at the base of the penis. The hairs can be straight or curly.
 Drawing 3: The hair is thicker and curlier. There is hair growing on a bigger area than in Drawing 2.
 Drawing 4: The hair is darker and curlier and covers a bigger area than in Drawing 3. There is no hair on the inside of the thigh.
 Drawing 5: The hair has spread to the inside of the thigh. The hair covers an area that is shaped like a triangle.



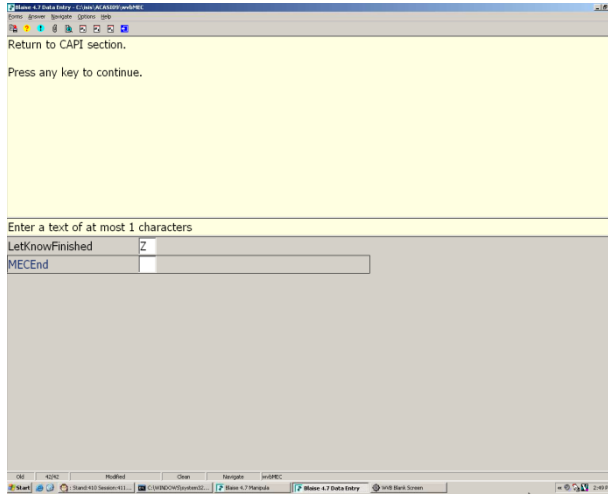
Drawing 1
 Drawing 2
 Drawing 3
 Drawing 4
 Drawing 5

PMQ120 Males 10 – 19 years old are presented 5 stages of hair growth in the private area and asked to select the drawing that looks most like their body.

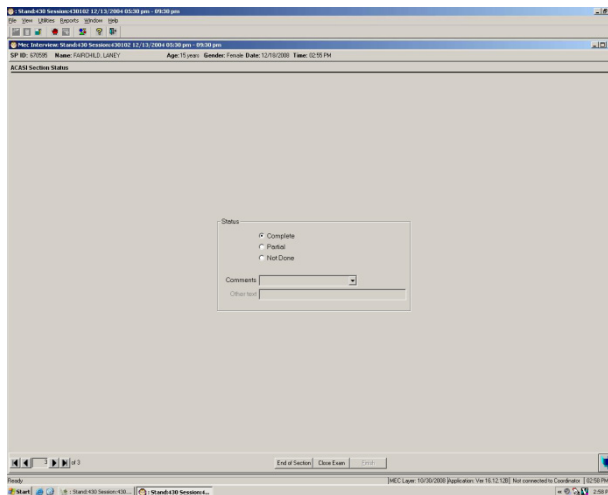
Final ACASI Screen



ACASI End Screen



ACASI Section Status



4.3.7 Ending the Audio-CASI Interview

Final
ACASI
Screen

When the SP has answered the final question appropriate for his or her age and gender, the program displays a screen that thanks the SP for his or her participation and instructs the SP to inform the MEC interviewer that he or she is finished.

After the SP notifies you that he or she has completed the audio-CASI portion of the interview, you will return to the interview room to close out this section of the interview and proceed with the remainder of the interview.

Unless the SP needs to back-up or change an answer, turn the computer so that it is facing you. Select “Next” on the touch screen.

ACASI
End
Screen

Press “Enter” on the keyboard to exit the ACASI interview.

ACASI
Section
Status

The ACASI section status will be pre-selected. Press “Next” to continue.

Stand:410 Session:410060 08/24/2004 08:30 am - 12:30 pm

File View Utilities Reports Window Help

MEC Interview: Stand:410 Session:410060 08/24/2004 08:30 am - 12:30 pm

SP ID: 916906 Name: FONTANA2, FREDDIE Age: 16 years Gender: Male Date: 12/23/2008 Time: 01:44 PM

Verify Street Address

I would like to verify your address. Please give me your complete address.

Additional Address Line

Street #	Dir	Pre	Street Name	St/Rd/Ave	Dir	Post
177			NORTHERN	AVE		

Unit/Apt/Bldg	Unit #	PO Box	RRHC #	RRHC Box
APT				

City	State	Zip
FAIRFAX	VA	12245

Is your mailing address the same as your street address?

Did you live at this address on 5/17/2005?

End of Section Close Exam Finish

Ready | MEC Layer: 10/30/2008 | Application: 9.0.0 | Not connected to Coordinator | 01:45 PM

4.4 Critical Data Items (CDI)

Critical data items (CDI) are verified and/or collected for SPs 12 years of age and older in the final section of the MEC interview. For most SPs this information will have been collected previously by one of the field interviewers. At the time of the MEC interview, it is your responsibility to attempt data collection for all missing items and to verify the existing information for selected items.

Verify Street Address The CDI section begins with a request to verify the SP’s street address. Verify that the existing information is correct and make any changes, as necessary.

Enter the address in the appropriate fields as follows:

- **Additional Address Line:** Use this field to enter additional address information that is not a street address. Examples include a university name, a nursing home name, or the name of an apartment complex. You should also use this field if a subject receives mail in care of another person (e.g., c/o John Jones).
- **Street #, Dir Pre, Street Name, St/Rd/Ave, Dir Post:** Enter the street number in the first data field on this line. When applicable, select the appropriate directional prefix or suffix (N, S, NE, SW, etc.) from the drop-down menu in the second and fifth data fields. Enter the complete street name in the third data field. Use the drop-down menu in the fourth field to select the street type (e.g., ST, RD, AVE, etc.).
- **Unit/Apt./Bldg.:** Use this field in conjunction with Unit # to indicate whether the number refers to an apartment, lot, room, suite, building, etc.
- **Unit #:** Enter the actual apartment (room, suite, bldg., etc.) unit number in this field.
- **PO Box, RRHC #, RRHC Box:** When applicable, enter a post office box number in the first field, a rural route number in the second field, and a rural post office box number in the third field. If a PO box number or Rural Route number is added and there is a street address, there will be a prompt to “Remove the street address.” Delete the street address as directed.
- **City, State, Zip:** Enter the full name of the city in the first field. Use the drop-down menu in the second field to select the appropriate state abbreviation. Enter the full six-digit ZIP code plus the four-digit suffix, when known.

After verifying the street address, determine whether the SP’s mailing address is the same as his or her street address and whether he or she lived at his or her current address at the time of the screener interview.

MEC Interview Protocol: Question-By-Question Specifications

SP ID: 99300 Name: FONTANA, FREDDIE Age: 15 years Gender: Male Date: 12/23/2008 Time: 01:44 PM

Verify Mailing Address

In case we have to contact you again, please give me your complete mailing address.

Additional Address Line

Street #	Dir	Pre	Street Name	SURPL/Other	Dir	Post
177			FOUNTAIN			

Unit/Box/Room	Unit #	PO Box	RRHC #	RRHC Box

City State Zip

Address

MEC Leap: 10/30/2008 Application: 9.0.0 Not connected to Coordinate 01:46 PM

MEC Interview Protocol: Question-By-Question Specifications

SP ID: 99300 Name: FONTANA, FREDDIE Age: 15 years Gender: Male Date: 12/23/2008 Time: 01:44 PM

Verify Phone numbers

Please give me your home telephone number.

IF NO HOME PHONE
Is there another number where you can be reached? Where is that phone located?

Telephone Numbers

Phone Type	Phone No.	Ext.
Home	202-555-1212	0000

Retrieved Don't Know

Don't Know

MEC Leap: 10/30/2008 Application: 9.0.0 Not connected to Coordinate 01:46 PM

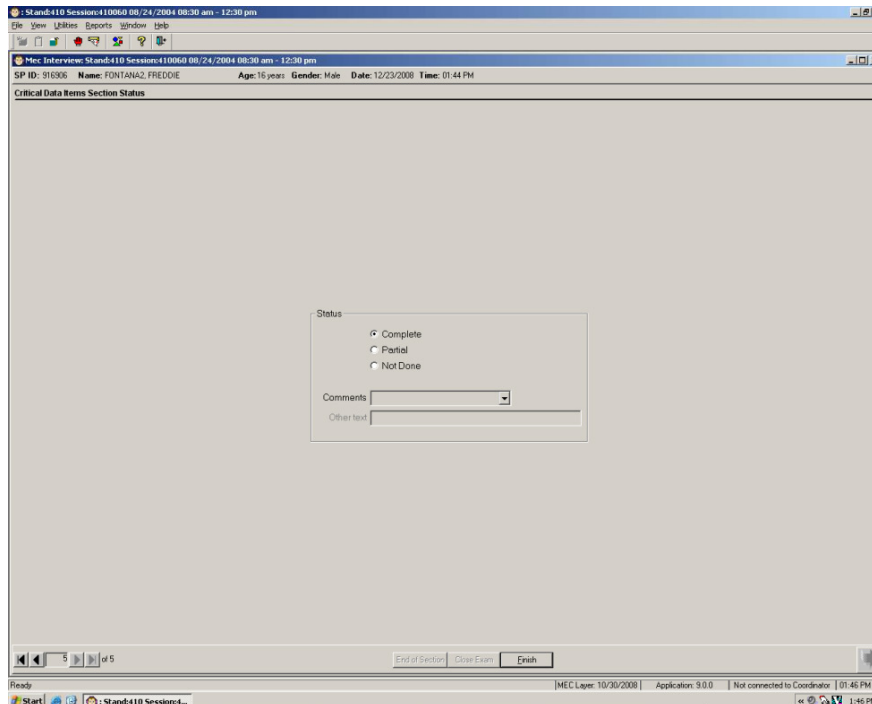
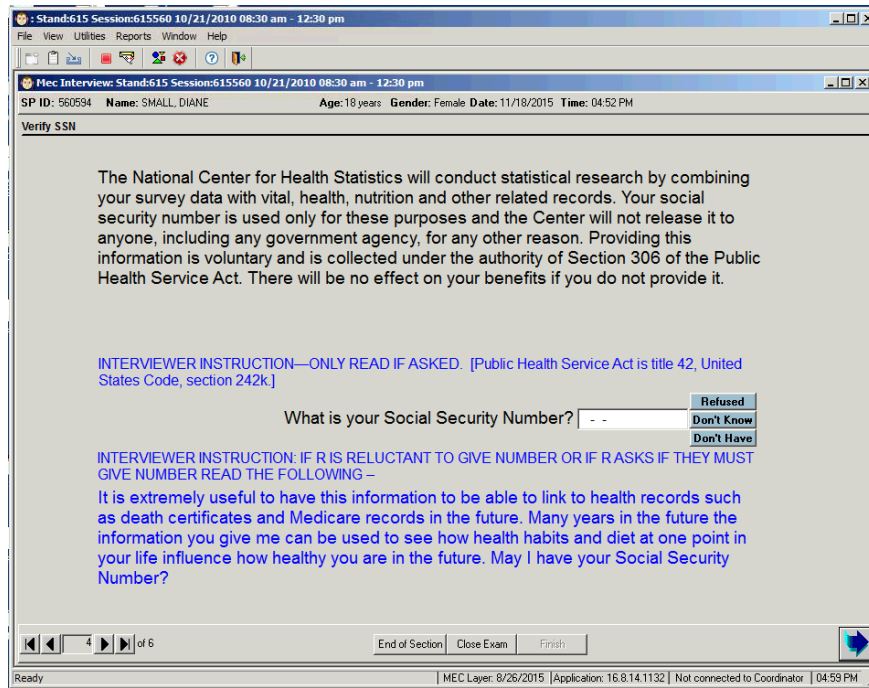
Click the arrow in the bottom right hand corner to bring up the next appropriate screen. If the mailing address differs from the street address, the program displays the “Verify Mailing Address” screen. Otherwise, the program displays the “Verify Phone Numbers” screen.

Verify Mailing Address The screen will contain any mailing address information we have for the SP. Verify that the information is correct and make any changes, as necessary, in the same manner as for street address. After verifying the mailing address, click the arrow in the bottom right hand corner to proceed to the “Verify Phone Numbers” screen.

Verify Phone Numbers The screen will display any phone numbers we have collected for the SP. You can not delete an existing phone number. You can only update existing number or add new numbers.

Verify that the home phone number reported by the SP is among the numbers listed. If not, click on “Insert” and the program will provide another row for an additional number. Select “Home” from the drop-down menu under “Phone type,” and enter the phone number and extension, as applicable, in the designated fields. If the SP reports that he or she does not have a home phone, check that this information isn’t already in the system. If not, click on “Insert” to enter a new phone number, highlight “Home” under phone type, and click on the box labeled “Don’t Have.”

If the SP does not have a home phone, read the probes to obtain additional phone numbers where the SP can be contacted. After checking that any additional numbers are not in the system, choose the correct phone type (office, mobile, other) and enter the phone number and extension, as appropriate. If you select a phone type of “other” an additional data field appears in which you should type in an explanation of where the phone is located.



Verify SSN If a valid Social Security Number (SSN) has been collected previously for this SP, the software will not display this screen. If a response of “don’t have” was previously recorded, confirm that the SP does not have a Social Security number. Occasionally, the SP may not have had an SSN at the time of the interview in the home, but has since obtained one. When attempting data collection for this item, you must read the entire question, including the lengthy disclaimer text.

The additional text should be read only if the SP is reluctant to give his or her SSN or asks if he or she must give an SSN.

The interviewer instruction gives more details about the Public Health Service Act. This instruction should be read only if the SP asks.

Press the arrow in the bottom right hand corner to proceed to the CDI Section Status screen.

CDI Section Status The section status will be prefilled and does not allow you to edit it. The status for the CDI section should always prefill to a “complete” status. Press “Finish” to exit the critical data section and exit the MEC Interview application.

This chapter describes the role of the mobile examination center (MEC) interviewer in identifying and documenting situations that warrant a referral to the MEC physician.

5.1 Referral Procedures

Certain information volunteered or reported during the MEC Interview should prompt a referral to the MEC physician. These situations are listed in Section 5.2. When the interviewer exits the Blaise CAPI instrument, the application will extract the DPQ.090 response and automatically post a mental health observation to the physician, alerting the physician that the examinee needs to be seen prior to leaving the MEC. The physician is responsible for assessing the mental health problem and facilitating a referral, when needed.

5.2 Situations Requiring a Mental Health Referral

Study participants (SPs) 12 years of age and older will be referred to the MEC physician prior to leaving the examination center in the following circumstances:

- During the Depression section (DPQ) of the Blaise CAPI interview, the SP reports that in the **past two weeks**, there have been several days or more when the SP had thoughts that he or she would be better off dead **or** the SP had thoughts about hurting himself or herself (i.e., SP responds “several days” [code 1], “more than half the days” [code 2], or “nearly every day” [code 3] to DPQ.090.)
- The participant becomes visibly upset while answering the question about suicide (e.g., crying, unable to answer question).

5.3 Generating a Mental Health Observation

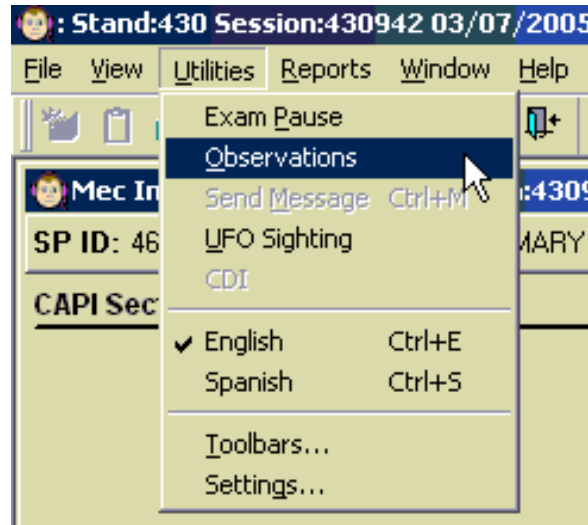
Whenever you encounter any of the situations listed in Section 5.2, a mental health observation to the physician must be generated. When you exit the Blaise CAPI instrument, the application will

extract the DPQ.090 response and automatically post a mental health observation to the physician if the response/code to DPQ.090 is greater than zero.

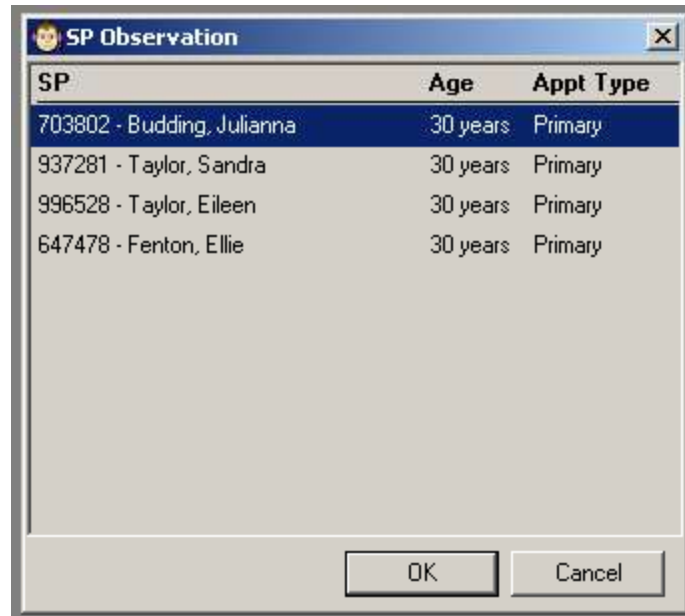
A physician observation must be entered manually if either of the following is true:

- The participant becomes visibly upset while answering the question about suicide, but answers “not at all” to the suicide question.
- The participant becomes too upset to answer the suicide question.

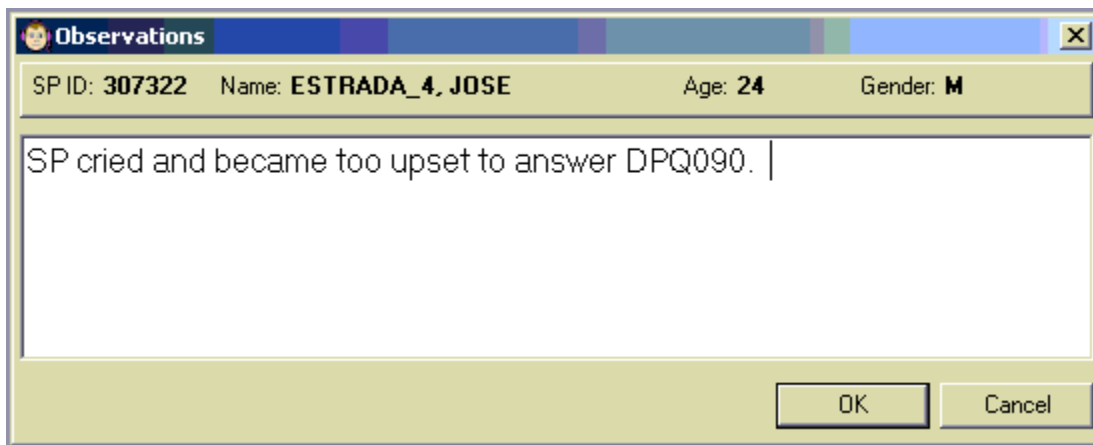
To manually enter an observation to the physician, select “Utilities” and “Observations” (as shown in the next screen) in the menu bar immediately after closing out the Blaise CAPI portion of the interview.



When entering an observation after exiting the MEC Interview application, the interviewer must select the correct SP from a pick list of SPs within the current session as shown in the SP pickup window (below).



A physician Observations window will appear. Write a note to the physician in the physician Observations window.



Quality control for the Mobile Examination Center (MEC) Interview consists of three main activities: data edits, observation/review of actual interviews, and data monitoring and review.

6.1 Data Edits

The MEC Interview data are keyed directly into an automated data entry system. Each of the three sections of the MEC Interview (CAPI, Audio-CASI or ACASI, and CDI) contains built-in error and consistency checks, although the number and type of checks vary across the sections. Checks may include range and valid response checks, skip pattern or branching checks, and checks for logical relationships. Depending upon the section, checks may be either soft or hard edits. Soft edits alert the interviewer to a potential error or problem but allow the interviewer to proceed after confirming that the entered value(s) are correct. Hard edits prohibit the interviewer from continuing with the interview until the error has been corrected.

6.2 Observation and Review of Interviews

NHANES home office and National Center for Health Statistics (NCHS) staff will observe a small number of live interviews for each MEC interviewer. The purpose of the observations is to determine whether appropriate interviewing techniques are being used. The observer will refer to a standard checklist of items (Exhibit 6-1) against which the interviewer will be evaluated. Among the items the observer will assess are ability to gain and maintain rapport, use of appropriate probes, ability to respond to study participant (SP) questions, and accurate entry of data.

Interviewers are also recorded electronically by the MEC Interview application for review by home office staff. Recorded interviews are evaluated using the same evaluation criteria as for interviews that are observed live.

Any problems identified during either observation or review of recorded interviews will be brought to the interviewer's attention and corrected.

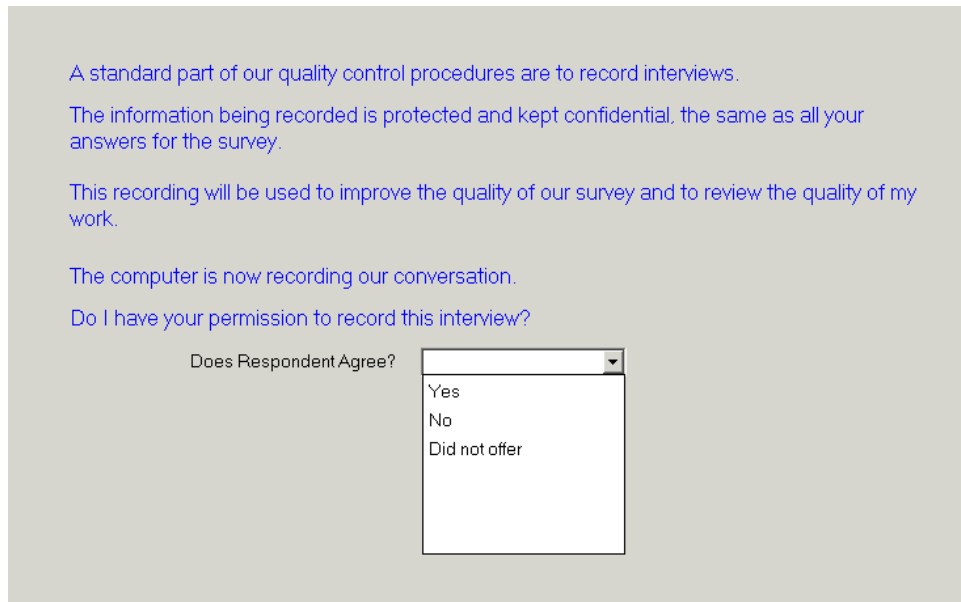
Exhibit 6-1. NHANES MEC Interviewer Evaluation Form

NHANES MEC INTERVIEWER EVALUATION FORM				
Date: _____				
Interviewer name: _____		Evaluator name: _____		Session Number/Age/Gender: _____
Interview Section/Form Evaluated: Assent/Consent <input type="checkbox"/> CAPI (All) <input type="checkbox"/> CAPI (Questionnaire(s)) <input type="checkbox"/> Specify: _____ ACASI <input type="checkbox"/> CDI <input type="checkbox"/>				
	Satisfactory	Unsatisfactory	General Comments for Response (optional)	
			Section (RHQ, VTQ, etc.)	Item Number
A. INTERVIEWER CHARACTERISTICS				
1. Manner (friendly yet professional)	<input type="checkbox"/>	<input type="checkbox"/>		
2. Rapport (effectively engages respondent)	<input type="checkbox"/>	<input type="checkbox"/>		
B. GENERAL ADMINISTRATION				
1. Gives appropriate instructions to respondent	<input type="checkbox"/>	<input type="checkbox"/>		
2. Answers respondent's questions clearly and accurately	<input type="checkbox"/>	<input type="checkbox"/>		
3. Reads questions as written	<input type="checkbox"/>	<input type="checkbox"/>		
4. Adjusts pace of interview to accommodate respondent	<input type="checkbox"/>	<input type="checkbox"/>		
5. Backs up in interview when appropriate	<input type="checkbox"/>	<input type="checkbox"/>		
6. Uses note functions, as appropriate	<input type="checkbox"/>	<input type="checkbox"/>		
7. Uses hand cards/interviewer materials, as appropriate	<input type="checkbox"/>	<input type="checkbox"/>		
8. Records responses accurately	<input type="checkbox"/>	<input type="checkbox"/>		
C. PROBING				
1. Listens to entire answer	<input type="checkbox"/>	<input type="checkbox"/>		
2. Listens for what may not be said and probes	<input type="checkbox"/>	<input type="checkbox"/>		
3. Probes unclear responses	<input type="checkbox"/>	<input type="checkbox"/>		
Constructive Suggestions for Interviewer:				

6.2.1 Procedures for Recording the Interview

After logging the SP into the interview, a consent screen will appear. The consent screen will be recorded; therefore, you will need to position the microphone close to the SP before you begin reading the consent screen. Note that should the interviewer feel that the offer of recording the interview may jeopardize the interview, he or she can indicate “Did Not Offer” to bypass the audio-recording screens. However, the standard procedure should be to read this script to all respondents.

After reading the consent screen, if the respondent does not agree, or if the option to record the interview was not offered to the participant, the interview will proceed without taping.



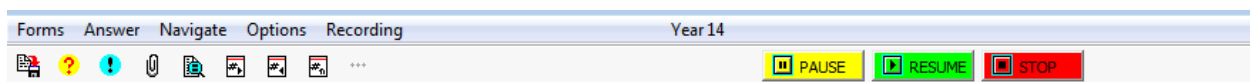
For SPs age 12-17, parents/guardians will be asked for consent to record their child's interview on the overall consent form for the MEC exam prior to arriving at the MEC. If the parent/guardian did not consent, the consent screen will not appear and the child's interview will proceed without taping. Interviews for SPs under the age of 12 are not recorded.

If the SP consents, the recording will start at the beginning of the CAPI. If an SP receives ACASI, the recording will end after the last question of the ACASI tutorial. If an SP does not receive ACASI, the recording will end before the Critical Data section.

6.2.2 Functionality in the CAPI Section

The CAPI section allows the interviewer to manually pause and un-pause the recording, as well as, completely stop and save the recording. This feature is not available in the ACASI section.

You will notice that the toolbar in the CAPI section has three colored buttons (below).



The audio recording service application has been designed to perform the following functions:

- Pause recording.
 - The yellow button will pause an active recording. Once paused, the system will indicate that the recording has been paused with this message:

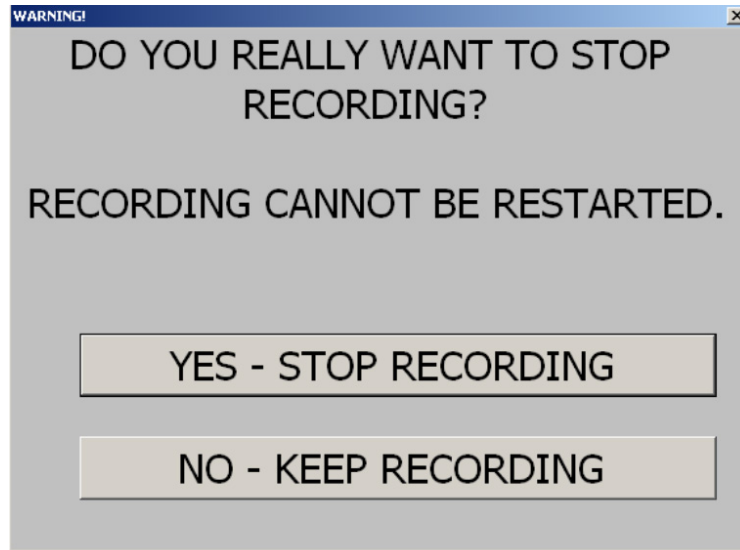


- If a recording is paused and the interviewer advances to the next screen without un-pausing the recording, a message box will appear with the following message:



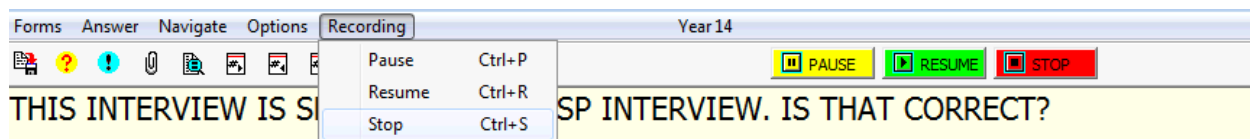
- When you press the OK button you will proceed to the next question. This is so you will not forget to un-pause a recording while in the interview.
- Resume recording.
 - The green button will resume the paused recording.

- Stop recording.
 - The red button will stop and save the current recording. You will get this message if you click on the Stop button:



- If you select “No,” you will continue recording. If you select “Yes,” you will stop recording and will not be able to start it again.

You will also note that the toolbar has an additional Recording Menu. Here you may also select from the drop-down menu to Pause, Resume, or Stop recording.



Functionality in the ACASI Section

In the ACASI section, you will not have the option to pause, resume, or stop the recording in the toolbar. If the SP has agreed to have the interview recorded, however, the system will record the interview.

6.3 Data Monitoring and Review

The home office will evaluate completed MEC Interviews to look for problem interviews (incompletes, refusals, extremely long interviews, etc.), additional interviewer notes, and comments. Home office staff will also review administrative data generated by the Integrated Survey Information System (ISIS) to assist in the identification of problem interviews and in the assessment of interview administration times.

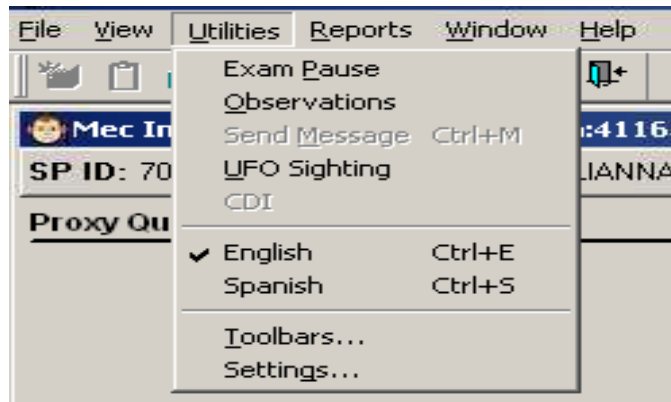
Appendix A.1

Launching the Spanish MEC Interview

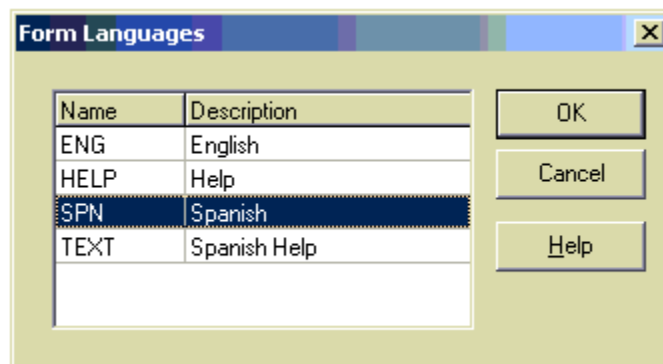
Appendix A.1

Launching the Spanish MEC Interview

After logging the SP into the MEC Interview as described in Section 3.5, the application allows you to select the interview language. In the toolbar under “**Utilities**” you can set the interview language to either English or Spanish. Please note, this sets the language for the Cognitive Functioning introduction, ACASI introduction, and Critical Data section of the interview. The language can be changed again, if necessary, on Cognitive Functioning introduction, ACASI introduction, and Critical Data screens by clicking on “**Utilities**” on the toolbar and selecting a different language.

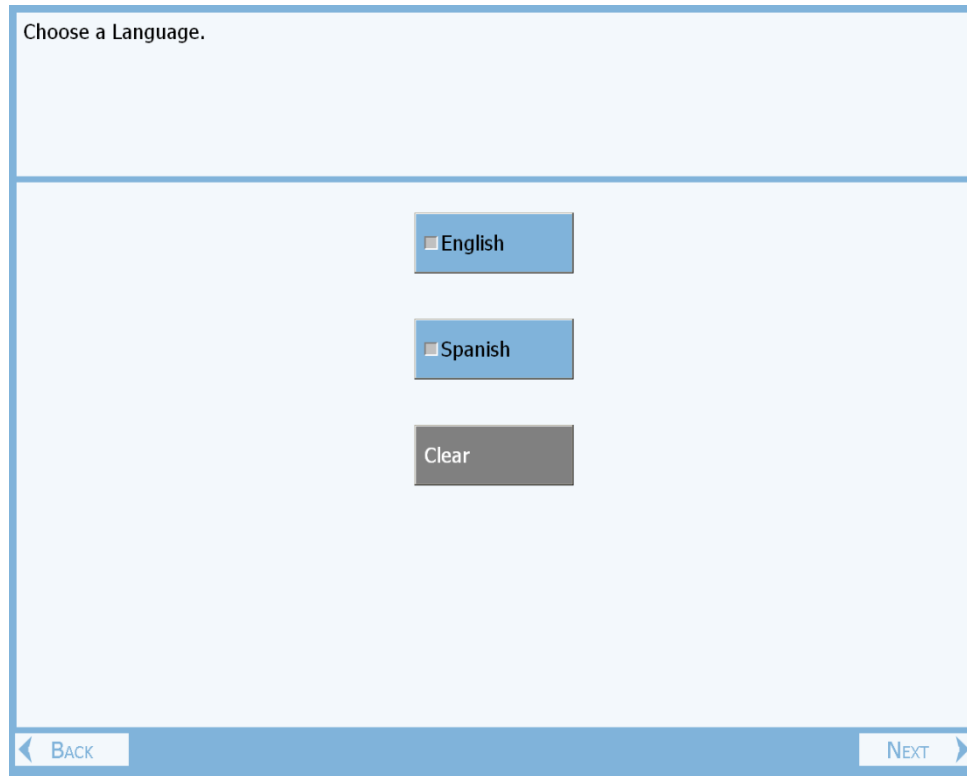


To set or switch the language of the Blaise CAPI interview, select **F2** or “**Options**” then “**Form language**” from the Blaise menu bar. Choose “ENG English” to display the questions in English or “SPN Spanish” to display the questions in Spanish.



To switch the language of the help text associated with an item, select **“Options”** then **“Form language.”** Choose **“TEXT Spanish Help”** to display the help text in Spanish. Choose **“HELP Help”** to display the Help text in English.

Once ACASI is launched, the first screen allows you to select the language of the ACASI screens and corresponding voice files.



To change the language after the ACASI interview has started, right click on the mouse, select **“Go To”** and **“Start”** to go back to the first ACASI screen and change the language. Touch the **“next”** button on the touch screen until you return to where you left off.

Appendix A.2

The Spanish CAPI Interview

RESPONDENT SELECTION SECTION - RIQ - MEC
Target Group: SPs 8+

RIQ.005 INTERVIEWER: MARK MAIN RESPONDENT. SPECIFY RELATIONSHIP OF RESPONDENT TO SP IF OTHER THAN SP.

- SP..... 1 (BOX 1)
- MOTHER..... 2
- FATHER..... 3
- SPOUSE..... 4
- SISTER OR BROTHER..... 5
- CHILD..... 6
- GRANDPARENT..... 7
- LEGAL GUARDIAN..... 8
- OTHER (SPECIFY) _____ 9

RIQ.030 WHY IS INTERVIEW BEING CONDUCTED WITH A PROXY?

- SP HAS COGNITIVE PROBLEMS..... 1
- SP HAS PHYSICAL PROBLEMS
(SPECIFY)..... 2
- OTHER (SPECIFY) 3

RIQ.038 INTERVIEWER: WAS SP PRESENT IN THE ROOM DURING ANY PART OF THE INTERVIEW?

- YES..... 1
- NO..... 2

BOX 1

CHECK ITEM RIQ.149:

- IF SP 8-11 YEARS AND INTERVIEW DONE WITH SURVEY PARTICIPANT (CODED '1' IN RIQ.005), DISPLAY THE FOLLOWING INTRODUCTORY TEXT: "Durante esta entrevista, le haré preguntas acerca de su salud y su peso. Sus respuestas se mantendrán privadas. ¿Desea hacer alguna pregunta antes de que empecemos?"
- IF SP 12 YEARS OR OLDER AND INTERVIEW DONE WITH SURVEY PARTICIPANT (CODED '1' IN RIQ.005), DISPLAY THE FOLLOWING INTRODUCTORY TEXT: "Durante esta entrevista, le haré preguntas sobre su casa, estado de salud actual y sobre otros comportamientos de salud. Recuerde, todas sus respuestas a estas preguntas serán mantenidas estrictamente en confidencia. ¿Desea hacer alguna pregunta antes de que empecemos?"
- OTHERWISE, DISPLAY THE FOLLOWING INTRODUCTORY TEXT: "Durante esta entrevista, le haré preguntas sobre el estado de salud actual de {SP} y sobre otros comportamientos de salud."

VOLATILE TOXICANT – VTQ
Target Group: SPs 12-150 Sub-Sampled into VOC

The VOC section is applicable for only those SPs that are subsampled into VOC. To determine if a particular SP is subsampled into VOC, check the mec_sp_subsample. If the SP in question has a record for subsample 1, they are subsampled for VOC and so should get the VOC section.

VTQ.210_ Primero quisiera hacerle algunas preguntas acerca de {su hogar/el hogar de SP}.

VTQ.210 ¿Tiene {su hogar/el hogar de él/ella} (una cochera/un garaje) unido(a) al hogar?

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

VTQ.220 ¿Es la fuente de agua para {su hogar/el hogar de él/ella} de un pozo privado?

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

VTQ.200a Actualmente, ¿guarda {usted/él/ella} pinturas o combustibles dentro de su hogar? Incluya el sótano {y (la cochera/el garaje) unido(a) a su hogar}.

CAPI INSTRUCTION:

IF SP HAS AN ATTACHED GARAGE (CODED '1' IN VTQ.210), DISPLAY {y (la cochera/el garaje) unido(a) a su hogar}.

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

VTQ.231a Actualmente, ¿usa {usted/él/ella} bolas o cristales de naftalina para las polillas o desodorante para la taza del (inodoro/excusado/wáter) dentro de su hogar?

HELP SCREEN SHOULD READ: Algunos desodorantes para el (inodoro/excusado/wáter) se cuelgan en la orilla de la taza, otros, como desodorantes en barras y gelatinas, se ponen en el tanque o se cuelgan dentro de la pared del tanque. Algunas marcas conocidas son Bully, 2000 Flushes, Vanish, X-14, Ty-D-Bol, Toilet Duck, Clorox, Lime-A-Way, y Sno Bol.

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

VTQ.233a **En los últimos tres días**, ¿respiró {usted/ella/él} **cualquier** tipo de humo por 10 o más minutos?

HELP SCREEN: El humo que se respiró incluye humo de fogatas, chimeneas, marihuana y productos de tabaco como cigarrillos, puros y pipas.

- YES 1
- NO 2 (VTQ.241_)
- REFUSED 7 (VTQ.241_)
- DON'T KNOW 9 (VTQ.241_)

VTQ.233b ¿Cuándo fue la última vez que {usted/ella/él} respiró humo por 10 o más minutos?

- TODAY 1
- YESTERDAY 2
- MORE THAN 2 DAYS 3
- REFUSED 7
- DON'T KNOW 9

VTQ.241 Ahora le voy a hacer algunas preguntas acerca de las actividades que {usted/SP} hizo en **las últimas 48 horas**, es decir hoy o ayer.

VTQ.241a **En las últimas 48 horas**, ¿horneó o cocinó {usted/ella/él} con gas natural?

HELP SCREEN: Al gas natural normalmente se le conoce simplemente como “gas”. Es la fuente más común de combustible para las calderas de calefacción modernas y por lo general se compra a una compañía de servicios públicos local. Otras fuentes de combustible, aparte del gas natural, son el gas licuado de petróleo, el butano, el propano, el aceite, el carbón y la leña.

- YES 1
- NO 2 (VTQ.244a)
- REFUSED 7 (VTQ.244a)
- DON'T KNOW 9 (VTQ.244a)

VTQ.241b ¿Cuánto tiempo hace, en horas, que {usted/él/ella} horneó o cocinó con gas natural?
G/Q/D/T

CAPI INSTRUCTION:

IF "1" IS ENTERED FOR GATE, ALLOW INTERVIEWER TO ENTER NUMBER OF HOURS WITH A HARD EDIT-RANGE OF 1 – 48.

IF "2" IS ENTERED FOR GATE, ALLOW INTERVIEWER TO ENTER "DATE EVENT OCCURRED" WITH A CALENDAR WHERE DATE CAN BE SELECTED AND "TIME EVENT OCCURRED". CALCULATE "HOURS SINCE EVENT OCCURRED" BASED ON THE CURRENT DATE AND TIME AND DISPLAY RESULT ON SCREEN. THE RESULT OF THE CALCULATION USING THE CALENDAR AND TIME GOES INTO Q. HARD EDIT RANGE IS 1 – 48.

THE APPLICATION WILL PERFORM THE FOLLOWING CONSISTENCY CHECKS AND ROUNDING RULE:

"DATE EVENT OCCURRED" AND "TIME EVENT OCCURRED" COMBINED MUST BE BEFORE CURRENT DATE AND TIME COMBINED.

WHEN "TIME SINCE EVENT OCCURRED" FALLS EXACTLY ON THE ONE-HALF, ROUND TO THE NEAREST EVEN WHOLE NUMBER.

HOURS

ENTER DATE AND TIME 2
REFUSED 77
DON'T KNOW 99

VTQ.244a **En las últimas 48 horas**, ¿le echó gasolina {usted mismo/él mismo (MPR)/ella misma (FPR)} a un carro u otro vehículo de motor?

YES 1
NO 2 (VTQ.251a)
REFUSED 7 (VTQ.251a)
DON'T KNOW 9 (VTQ.251a)

VTQ.244b ¿Cuánto tiempo hace, en horas, que {usted/él/ella} {mismo/mismo/misma} le echó gasolina a un carro o a
G/Q/D/T otro vehículo de motor?

CAPI INSTRUCTION:

IF "1" IS ENTERED FOR GATE, ALLOW INTERVIEWER TO ENTER NUMBER OF HOURS WITH A HARD EDIT- RANGE OF 1 – 48.

IF "2" IS ENTERED FOR GATE, ALLOW INTERVIEWER TO ENTER "DATE EVENT OCCURRED" WITH A CALENDAR WHERE DATE CAN BE SELECTED AND "TIME EVENT OCCURRED". CALCULATE "HOURS SINCE EVENT OCCURRED" BASED ON THE CURRENT DATE AND TIME AND DISPLAY RESULT ON SCREEN. THE RESULT OF THE CALCULATION USING THE CALENDAR AND TIME GOES INTO Q. HARD EDIT RANGE IS 1 – 48.

THE APPLICATION WILL PERFORM THE FOLLOWING CONSISTENCY CHECKS AND ROUNDING RULE:

"DATE EVENT OCCURRED" AND "TIME EVENT OCCURRED" COMBINED MUST BE BEFORE CURRENT DATE AND TIME COMBINED.

WHEN "TIME SINCE EVENT OCCURRED" FALLS EXACTLY ON THE ONE-HALF, ROUND TO THE NEAREST EVEN WHOLE NUMBER.

|_|_|
HOURS

ENTER DATE AND TIME 2
REFUSED 77
DON'T KNOW 99

VTQ.251a **En las últimas 48 horas**, ¿pasó {usted/él/ella} algún tiempo en una (alberca/piscina), en una tina tipo "hot tub" o en un cuarto de vapor?

YES 1
NO 2 (VTQ.261a)
REFUSED 7 (VTQ.261a)
DON'T KNOW 9 (VTQ.261a)

VTQ.251b ¿Cuánto tiempo hace, en horas, que {usted/él/ella} pasó algún tiempo en una (alberca/piscina), en una tina
G/Q/D/T tipo “hot tub” o en un cuarto de vapor?

CAPI INSTRUCTION:

IF “1” IS ENTERED FOR GATE, ALLOW INTERVIEWER TO ENTER NUMBER OF HOURS WITH A HARD EDIT– RANGE OF 1 – 48.

IF “2” IS ENTERED FOR GATE, ALLOW INTERVIEWER TO ENTER “DATE EVENT OCCURRED” WITH A CALENDAR WHERE DATE CAN BE SELECTED AND “TIME EVENT OCCURRED”. CALCULATE “HOURS SINCE EVENT OCCURRED” BASED ON THE CURRENT DATE AND TIME AND DISPLAY RESULT ON SCREEN. THE RESULT OF THE CALCULATION USING THE CALENDAR AND TIME GOES INTO Q. HARD EDIT RANGE IS 1 – 48.

THE APPLICATION WILL PERFORM THE FOLLOWING CONSISTENCY CHECKS AND ROUNDING RULE:

“DATE EVENT OCCURRED” AND “TIME EVENT OCCURRED” COMBINED MUST BE BEFORE CURRENT DATE AND TIME COMBINED.

WHEN “TIME SINCE EVENT OCCURRED” FALLS EXACTLY ON THE ONE-HALF, ROUND TO THE NEAREST EVEN WHOLE NUMBER.

HOURS

ENTER DATE AND TIME 2
REFUSED 77
DON'T KNOW 99

VTQ.261a **En las últimas 48 horas**, ¿usó usted disolventes para lavado en seco, visitó {usted/él/ella} una (limpiaduría/tintorería/lavandería) de lavado en seco o usó ropa que había sido lavada en seco dentro de la última semana?

HELP SCREEN: Algunos ejemplos de disolventes para lavado en seco son: “Guardman Dry Cleaning Fluid”, “Amway Prewash”, “LPS F-104 Dry Solvent”, “Dryel At-Home Dry Cleaning starter kit”, “Woolite Dry Clean at Home” y “Bounce 15 minute Dry Cleaner”.

YES 1
NO 2 (VTQ.271a)
REFUSED 7 (VTQ.271a)
DON'T KNOW 9 (VTQ.271a)

VTQ.261b ¿Cuánto tiempo hace, en horas, que {usted/ella/él} usó disolventes para lavado en seco, visitó una
G/Q/D/T (limpiaduría/tintorería/lavandería) de lavado en seco o usó ropa que había sido lavada en seco dentro de la
última semana?

CAPI INSTRUCTION:

IF "1" IS ENTERED FOR GATE, ALLOW INTERVIEWER TO ENTER NUMBER OF HOURS WITH A HARD EDIT- RANGE OF 1 – 48.

IF "2" IS ENTERED FOR GATE, ALLOW INTERVIEWER TO ENTER "DATE EVENT OCCURRED" WITH A CALENDAR WHERE DATE CAN BE SELECTED AND "TIME EVENT OCCURRED". CALCULATE "HOURS SINCE EVENT OCCURRED" BASED ON THE CURRENT DATE AND TIME AND DISPLAY RESULT ON SCREEN. THE RESULT OF THE CALCULATION USING THE CALENDAR AND TIME GOES INTO Q. HARD EDIT RANGE IS 1 – 48.

THE APPLICATION WILL PERFORM THE FOLLOWING CONSISTENCY CHECKS AND ROUNDING RULE:

"DATE EVENT OCCURRED" AND "TIME EVENT OCCURRED" COMBINED MUST BE BEFORE CURRENT DATE AND TIME COMBINED.

WHEN "TIME SINCE EVENT OCCURRED" FALLS EXACTLY ON THE ONE-HALF, ROUND TO THE NEAREST EVEN WHOLE NUMBER.

|_|_|
HOURS

ENTER DATE AND TIME 2
REFUSED 77
DON'T KNOW 99

VTQ.271a **En las últimas 48 horas**, ¿se dio {usted/él/ella} una ducha o un baño caliente por cinco minutos o más?

YES 1
NO 2 (VTQ.281a)
REFUSED 7 (VTQ.281a)
DON'T KNOW 9 (VTQ.281a)

VTQ.271b ¿Cuánto tiempo hace, en horas, que {usted/él/ella} se dio una ducha o un baño caliente?
G/Q/D/T

CAPI INSTRUCTION:

IF "1" IS ENTERED FOR GATE, ALLOW INTERVIEWER TO ENTER NUMBER OF HOURS WITH A HARD EDIT- RANGE OF 1 – 48.

IF "2" IS ENTERED FOR GATE, ALLOW INTERVIEWER TO ENTER "DATE EVENT OCCURRED" WITH A CALENDAR WHERE DATE CAN BE SELECTED AND "TIME EVENT OCCURRED". CALCULATE "HOURS SINCE EVENT OCCURRED" BASED ON THE CURRENT DATE AND TIME AND DISPLAY RESULT ON SCREEN. THE RESULT OF THE CALCULATION USING THE CALENDAR AND TIME GOES INTO Q. HARD EDIT RANGE IS 1 – 48.

THE APPLICATION WILL PERFORM THE FOLLOWING CONSISTENCY CHECKS AND ROUNDING RULE:

"DATE EVENT OCCURRED" AND "TIME EVENT OCCURRED" COMBINED MUST BE BEFORE CURRENT DATE AND TIME COMBINED.

WHEN "TIME SINCE EVENT OCCURRED" FALLS EXACTLY ON THE ONE-HALF, ROUND TO THE NEAREST EVEN WHOLE NUMBER.

|||
HOURS

ENTER DATE AND TIME 2
REFUSED 77
DON'T KNOW 99

VTQ.281a **En las últimas 48 horas,** ¿aspiró {usted/él/ella} gases de lugares interiores recién pintados, de pinturas, de disolvente de pintura o de barniz?

YES 1
NO 2 (VTQ.281c)
REFUSED 7 (VTQ.281c)
DON'T KNOW 9 (VTQ.281c)

VTQ.281b ¿Cuánto tiempo hace, en horas, que {usted/él/ella} aspiró los gases de lugares interiores recién pintados,
G/Q/D/T de pinturas, de disolvente de pintura o de barniz?

CAPI INSTRUCTION:

IF "1" IS ENTERED FOR GATE, ALLOW INTERVIEWER TO ENTER NUMBER OF HOURS WITH A HARD EDIT-RANGE OF 1 – 48.

IF "2" IS ENTERED FOR GATE, ALLOW INTERVIEWER TO ENTER "DATE EVENT OCCURRED" WITH A CALENDAR WHERE DATE CAN BE SELECTED AND "TIME EVENT OCCURRED". CALCULATE "HOURS SINCE EVENT OCCURRED" BASED ON THE CURRENT DATE AND TIME AND DISPLAY RESULT ON SCREEN. THE RESULT OF THE CALCULATION USING THE CALENDAR AND TIME GOES INTO Q. HARD EDIT RANGE IS 1 – 48.

THE APPLICATION WILL PERFORM THE FOLLOWING CONSISTENCY CHECKS AND ROUNDING RULE:

"DATE EVENT OCCURRED" AND "TIME EVENT OCCURRED" COMBINED MUST BE BEFORE CURRENT DATE AND TIME COMBINED.

WHEN "TIME SINCE EVENT OCCURRED" FALLS EXACTLY ON THE ONE-HALF, ROUND TO THE NEAREST EVEN WHOLE NUMBER.

HOURS

ENTER DATE AND TIME 2
REFUSED 77
DON'T KNOW 99

VTQ.281c **En las últimas 48 horas**, ¿aspiró {usted/él/ella} los gases de combustible diesel o de querosén?

YES 1
NO 2 (VTQ.281e)
REFUSED 7 (VTQ.281e)
DON'T KNOW 9 (VTQ.281e)

VTQ.281d ¿Cuánto tiempo hace, en horas, que {usted/él/ella} aspiró los gases de combustible diesel o de querosén?
G/Q/D/T

CAPI INSTRUCTION:

IF "1" IS ENTERED FOR GATE, ALLOW INTERVIEWER TO ENTER NUMBER OF HOURS WITH A HARD EDIT RANGE OF 1 – 48.

IF "2" IS ENTERED FOR GATE, ALLOW INTERVIEWER TO ENTER "DATE EVENT OCCURRED" WITH A CALENDAR WHERE DATE CAN BE SELECTED AND "TIME EVENT OCCURRED". CALCULATE "HOURS SINCE EVENT OCCURRED" BASED ON THE CURRENT DATE AND TIME AND DISPLAY RESULT ON SCREEN. THE RESULT OF THE CALCULATION USING THE CALENDAR AND TIME GOES INTO Q. HARD EDIT RANGE IS 1 – 48.

THE APPLICATION WILL PERFORM THE FOLLOWING CONSISTENCY CHECKS AND ROUNDING RULE:

"DATE EVENT OCCURRED" AND "TIME EVENT OCCURRED" COMBINED MUST BE BEFORE CURRENT DATE AND TIME COMBINED.

WHEN "TIME SINCE EVENT OCCURRED" FALLS EXACTLY ON THE ONE-HALF, ROUND TO THE NEAREST EVEN WHOLE NUMBER.

|_|_|
HOURS

ENTER DATE AND TIME 2
REFUSED 77
DON'T KNOW 99

VTQ.281e **En las últimas 48 horas**, ¿aspiró {usted/él/ella} los gases de esmalte para las uñas?

YES 1
NO 2 (END OF SECTION)
REFUSED 7 (END OF SECTION)
DON'T KNOW 9 (END OF SECTION)

VTQ.281f ¿Cuánto tiempo hace, en horas, que {usted/él/ella} aspiró gases de esmalte para las uñas?
G/Q/D/T

CAPI INSTRUCTION:

IF "1" IS ENTERED FOR GATE, ALLOW INTERVIEWER TO ENTER NUMBER OF HOURS WITH A HARD EDIT- RANGE OF 1 – 48.

IF "2" IS ENTERED FOR GATE, ALLOW INTERVIEWER TO ENTER "DATE EVENT OCCURRED" WITH A CALENDAR WHERE DATE CAN BE SELECTED AND "TIME EVENT OCCURRED". CALCULATE "HOURS SINCE EVENT OCCURRED" BASED ON THE CURRENT DATE AND TIME AND DISPLAY RESULT ON SCREEN. THE RESULT OF THE CALCULATION USING THE CALENDAR AND TIME GOES INTO Q. HARD EDIT RANGE IS 1 – 48.

THE APPLICATION WILL PERFORM THE FOLLOWING CONSISTENCY CHECKS AND ROUNDING RULE:

"DATE EVENT OCCURRED" AND "TIME EVENT OCCURRED" COMBINED MUST BE BEFORE CURRENT DATE AND TIME COMBINED.

WHEN "TIME SINCE EVENT OCCURRED" FALLS EXACTLY ON THE ONE-HALF, ROUND TO THE NEAREST EVEN WHOLE NUMBER.

HOURS

ENTER DATE AND TIME 2
REFUSED 77
DON'T KNOW 99

PESTICIDE USE – PUQ
Target Group: SPs 8+

PUQ.100 En los **últimos 7 días**, ¿se usó algún producto químico en {su hogar/el hogar de {él(M)/ella(F)}} para controlar las pulgas, cucarachas, hormigas, termitas u otros insectos?

CAP I INSTRUCTION:

IF SP 8-17 YEARS, DISPLAY THE FOLLOWING INTERVIEWER INSTRUCTION: "THIS ITEM IS COLLECTED VIA PROXY FOR SPS 8-17."

YES	1
NO	2
REFUSED	7
DON'T KNOW	9

PUQ.110 En los **últimos 7 días**, ¿se usó algún producto químico en {su jardín o césped/el jardín o césped de {él(M)/ella(F)}} para matar las malas hierbas/la maleza?

CODE 'NO' IF THE RESPONDENT SAYS S/HE DOES NOT HAVE A LAWN OR GARDEN.

CAP I INSTRUCTION:

IF SP 8-17 YEARS, DISPLAY THE FOLLOWING INTERVIEWER INSTRUCTION: "THIS ITEM IS COLLECTED VIA PROXY FOR SPS 8-17."

YES	1
NO	2
REFUSED	7
DON'T KNOW	9

CURRENT HEALTH STATUS – HSQ
Target Group: SPs 12+

HUQ.010 A continuación tengo algunas preguntas generales acerca de {su salud/la salud de SP}.

¿Diría que {su salud/la salud de SP} en general es...

- excelente, 1
- muy buena, 2
- buena, 3
- regular, o 4
- mala? 5
- REFUSED 7
- DON'T KNOW 9

HSQ.500 Las siguientes preguntas son acerca de {su salud/la salud de SP} reciente durante los 30 días indicados en el calendario.

¿Tuvo {usted/SP} un resfrío o catarro que empezó durante esos **30 días**?

HAND CARD HSQ1

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

HSQ.510 ¿Tuvo {usted/SP} enfermedad estomacal o intestinal con vómitos o diarrea que empezó durante esos **30 días**?

HAND CARD HSQ1

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

HSQ.520 ¿Tuvo {usted/SP} influenza o gripe, pulmonía/neumonía, o infección en los oídos que empezó durante esos **30 días**?

HAND CARD HSQ1

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

BOX 1

CHECK ITEM HSQ.560:
IF SP 16 YEARS OR OLDER, CONTINUE WITH HSQ.571.
OTHERWISE, GO TO END OF SECTION.

HSQ.571 Durante los **últimos 12 meses**, es decir, desde {DISPLAY CURRENT MONTH, DISPLAY LAST YEAR}, ¿ha donado {usted/SP} sangre?

- YES 1
- NO 2 (HSQ.590)
- REFUSED 7 (HSQ.590)
- DON'T KNOW 9 (HSQ.590)

HSQ.580 ¿Cuánto tiempo hace desde la última vez que {usted/SP} donó sangre?

IF LESS THAN ONE MONTH, ENTER '1'.

CAP I INSTRUCTION:
HARD EDIT VALUES: 1-12.

|_|_|

ANOTE LA CANTIDAD DE MESES

- REFUSED 77
- DON'T KNOW 99

HSQ.590 La siguiente pregunta es acerca de la prueba del VIH, el virus que causa el SIDA. Excepto por las pruebas que a {usted/SP} le pueden haber hecho como parte de las donaciones de sangre, ¿le han hecho a {usted/él/ella} alguna vez la prueba del VIH?

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

DEPRESSION SCREEN – DPQ
Target Group: SPs 12+

BOX 1

CHECK ITEM DPQ.001:

- IF INTERVIEW DONE ONLY WITH SURVEY PARTICIPANT (CODED '1' IN RIQ.005), CONTINUE.
- OTHERWISE, GO TO NEXT SECTION.

DPQ.010 Durante las **últimas 2 semanas**, ¿con qué frecuencia le han molestado los siguientes problemas:

Tener poco interés o placer en hacer las cosas? ¿Diría...

HANDCARD DPQ1

Nunca,	0
varios días,	1
más de la mitad de los días, o.....	2
casi todos los días?.....	3
REFUSED	7
DON'T KNOW	9

DPQ.020 [Durante las **últimas 2 semanas**, ¿con qué frecuencia le han molestado los siguientes problemas:]

Sentirse {desanimado(M)/desanimada(F)}, {deprimido(M)/deprimida(F)} o sin esperanza?

HANDCARD DPQ1

NUNCA.....	0
VARIOS DÍAS.....	1
MÁS DE LA MITAD DE LOS DÍAS	2
CASI TODOS LOS DÍAS	3
REFUSED	7
DON'T KNOW	9

DPQ.030 [Durante las **últimas 2 semanas**, ¿con qué frecuencia le han molestado los siguientes problemas:]

Con problemas en dormirse o en mantenerse {dormido(M)/dormida(F)}, o en dormir demasiado?

HANDCARD DPQ1

NUNCA.....	0
VARIOS DÍAS.....	1
MÁS DE LA MITAD DE LOS DÍAS	2
CASI TODOS LOS DÍAS	3
REFUSED	7
DON'T KNOW	9

DPQ.040 [Durante las **últimas 2 semanas**, ¿con qué frecuencia le han molestado los siguientes problemas:]

Sentirse {cansado(M)/cansada(F)} o tener poca energía?

HANDCARD DPQ1

NUNCA.....	0
VARIOS DÍAS.....	1
MÁS DE LA MITAD DE LOS DÍAS	2
CASI TODOS LOS DÍAS	3
REFUSED	7
DON'T KNOW	9

DPQ.050 [Durante las **últimas 2 semanas**, ¿con qué frecuencia le han molestado los siguientes problemas:]

Tener poco apetito o comer en exceso?

HANDCARD DPQ1

NUNCA.....	0
VARIOS DÍAS.....	1
MÁS DE LA MITAD DE LOS DÍAS	2
CASI TODOS LOS DÍAS	3
REFUSED	7
DON'T KNOW	9

DPQ.060 [Durante las **últimas 2 semanas**, ¿con qué frecuencia le han molestado los siguientes problemas:]

Sentir falta de amor propio – o que sea un fracaso o que se decepcionara a sí {mismo(M)/misma(F)} o a su familia?

HANDCARD DPQ1

NUNCA.....	0
VARIOS DÍAS.....	1
MÁS DE LA MITAD DE LOS DÍAS	2
CASI TODOS LOS DÍAS	3
REFUSED	7
DON'T KNOW	9

DPQ.070 [Durante las **últimas 2 semanas**, ¿con qué frecuencia le han molestado los siguientes problemas:]

Tener dificultad para concentrarse en cosas tales como leer el periódico o mirar la televisión?

HANDCARD DPQ1

NUNCA.....	0
VARIOS DÍAS.....	1
MÁS DE LA MITAD DE LOS DÍAS	2
CASI TODOS LOS DÍAS	3
REFUSED	7
DON'T KNOW	9

DPQ.080 [Durante las **últimas 2 semanas**, ¿con qué frecuencia le han molestado los siguientes problemas:]

Se mueve o habla tan lentamente que otra gente se podría dar cuenta - o por el contrario, está tan {agitado(M)/agitada(F)} o {inquieto(M)/inquieta(F)} que se mueve mucho más de lo acostumbrado?

HANDCARD DPQ1

NUNCA.....	0
VARIOS DÍAS.....	1
MÁS DE LA MITAD DE LOS DÍAS	2
CASI TODOS LOS DÍAS	3
REFUSED	7
DON'T KNOW	9

DPQ.090 Durante las **últimas 2 semanas**, ¿con qué frecuencia le ha molestado el siguiente problema:

Se le han ocurrido pensamientos de que sería mejor estar {muerto(M)/muerta(F)} o de que se haría daño de alguna manera?

HAND CARD DPQ1

NUNCA.....	0
VARIOS DÍAS.....	1
MÁS DE LA MITAD DE LOS DÍAS	2
CASI TODOS LOS DÍAS	3
REFUSED	7
DON'T KNOW	9

BOX 2

CHECK ITEM DPQ.095:

- IF RESPONSE TO ANY OF QUESTIONS DPQ.010 – DPQ.090 = 1, 2, OR 3, GO TO DPQ.100.
- OTHERWISE, GO TO NEXT SECTION.

DPQ.100 ¿Qué tan **difícil** se le ha hecho cumplir con su trabajo, atender su casa o relacionarse con otras personas debido a estos problemas?

¿Nada difícil,	0
algo difícil,	1
muy difícil,	2
extremadamente difícil?	3
REFUSED	7
DON'T KNOW	9

TOBACCO - SMQ
Target Group: SPs 12+ (CAPI)

BOX 1

CHECK ITEM SMQ.859:
IF SP AGED 12-17, GO TO SMQ.860.
OTHERWISE, CONTINUE.

SMQ.681 Las siguientes preguntas son acerca del uso de productos de tabaco en los últimos **5 días**.

Durante los últimos **5 días**, incluyendo hoy, ¿fumó {usted(SE)/él(MPR)/ella(FPR)} pipas de agua o “hookahs”, cigarrillos, pipas, puros, puritos o cigarrillos electrónicos?

HAND CARD SMQ1

YES	1
NO	2 (SMQ.851)
REFUSED	7 (SMQ.851)
DON'T KNOW	9 (SMQ.851)

SMQ.692 ¿Cuál de estos productos fumó {usted(SE)/él(MPR)/ella(FPR)}?

HAND CARD SMQ1

(CHECK ALL THAT APPLY)

Cigarrillos	1
Pipas	2
Puros, puritos o tabacos	3
Pipas de agua o “hookahs”	4
Cigarrillos electrónicos	5
REFUSED	77 (SMQ.851)
DON'T KNOW	99 (SMQ.851)

BOX 2

CHECK ITEM SMQ.701:
IF ‘CIGARETTES’ (CODE 1) IN SMQ.692, GO TO SMQ.710.
IF ‘PIPES’ (CODE 2) IN SMQ.692, GO TO SMQ.740.
IF ‘CIGARS’ (CODE 3) IN SMQ.692, GO TO SMQ.771.
IF ‘WATER PIPES OR HOOKAHS’ (CODE 4) IN SMQ.692, GO TO SMQ.845.
IF ‘E-CIGARETTE’ (CODE 5) IN SMQ.692, GO TO SMQ.849.

SMQ.710 Durante los últimos **5 días**, incluyendo hoy, ¿cuántos días fumó {usted(SE)/él(MPR)/ella(FPR)} cigarrillos?

HARD EDIT: RANGE 1 – 5.

| |

ANOTE LA CANTIDAD DE DÍAS

REFUSED 7

DON'T KNOW 9

SMQ.720 Durante los últimos **5 días**, incluyendo hoy, en los días que {usted(SE)/él(MPR)/ella(FPR)} fumó, ¿cuántos cigarrillos fumó {usted(SE)/él(MPR)/ella(FPR)} cada día?

IF R SAYS 95 OR MORE CIGARETTES PER DAY, ENTER 95.

HARD EDIT: RANGE 1 – 95.

| | | |

ANOTE LA CANTIDAD DE CIGARRILLOS

REFUSED 777

DON'T KNOW 999

SMQ.725 ¿Cuándo fumó {usted(SE)/él(MPR)/ella(FPR)} su último cigarrillo? ¿Fue esto. . .

hoy, 1

ayer o 2

hace de 3 a 5 días? 3

REFUSED 7

DON'T KNOW 9

BOX 3

CHECK ITEM SMQ.731:

IF 'PIPES' (CODE 2) IN SMQ.692, GO TO SMQ.740.

IF 'CIGARS' (CODE 3) IN SMQ.692, GO TO SMQ.771.

IF 'WATER PIPES OR HOOKAHS' (CODE 4) IN SMQ.692, GO TO SMQ.845.

IF 'E-CIGARETTE' (CODE 5) IN SMQ.692, GO TO SMQ.849.

OTHERWISE, GO TO SMQ.851.

SMQ.740 Durante los últimos **5 días**, incluyendo hoy, ¿cuántos días fumó {usted(SE)/él(MPR)/ella(FPR)} pipa?

HARD EDIT: RANGE 1 – 5.

|__|

ANOTE LA CANTIDAD DE DÍAS

REFUSED 7

DON'T KNOW 9

BOX 4

CHECK ITEM SMQ.761:

IF 'CIGARS' (CODE 3) IN SMQ.692, GO TO SMQ.771.

IF 'WATER PIPES OR HOOKAH' IN SMQ.692, GO TO SMQ.845.

IF 'E-CIGARETTE' (CODE 5) IN SMQ.692, GO TO SMQ.849.

OTHERWISE, GO TO SMQ.851.

SMQ.771 Durante los últimos **5 días**, incluyendo hoy, ¿cuántos días fumó {usted(SE)/él(MPR)/ella(FPR)} puros, puritos o tabacos?

HARD EDIT: RANGE 1 – 5.

|__|

ENTER NUMBER OF DAYS

REFUSED 7

DON'T KNOW 9

BOX 5

CHECK ITEM SMQ.791:

IF 'WATER PIPE' (CODE 4) IN SMQ.692, GO TO 845.

IF 'E-CIGARETTE' (CODE 5) IN SMQ.692, GO TO 849.

OTHERWISE, GO TO SMQ.851.

SMQ.845 Durante los últimos **5 días**, incluyendo hoy, ¿cuántos días fumó {usted(SE)/él(MPR)/ella(FPR)} tabaco en una pipa de agua o "hookah"?

HARD EDIT: RANGE 1 – 5.

|__|

ANOTE LA CANTIDAD DE DÍAS

REFUSED 7

DON'T KNOW 9

BOX 6

CHECK ITEM SMQ.847:
IF 'E-CIGARETTE' (CODE 5) IN SMQ.692, GO TO 849.
OTHERWISE, GO TO SMQ.851.

SMQ.849 Durante los últimos **5 días**, incluyendo hoy, ¿cuántos días fumó {usted(SE)/él(MPR)/ella(FPR)} un cigarrillo electrónico?

HARD EDIT: RANGE 1 – 5.

|_|
ANOTE LA CANTIDAD DE DÍAS

REFUSED 7
DON'T KNOW 9

SMQ.851 Los productos de tabaco que no se fuman se ponen en la boca o la nariz e incluyen productos como el tabaco de mascar, el “snuff” o rapé o sea tabaco en polvo, el “snus” o productos que se disuelven.

Durante los últimos **5 días**, incluyendo hoy, ¿usó {usted(SE)/él(MPR)/ella(FPR)} algún producto de tabaco el cual no se fuma?

(No incluya productos que reemplazan la nicotina, tales como parches, chicle, pastillas de chupar o aerosoles los cuales se consideran productos que ayudan a dejar de fumar.)

YES 1
NO 2 (SMQ.863)
REFUSED 7 (SMQ.863)
DON'T KNOW 9 (SMQ.863)

SMQ.853 ¿Cuáles de estos productos usó {usted/él/ella}?

(CHECK ALL THAT APPLY)

Tabaco de mascar 1
Snuff o rapé (tabaco en polvo) 2
Snus 3
Productos que se disuelven 4
REFUSED 7 (SMQ.863)
DON'T KNOW 9 (SMQ.863)

BOX 7

CHECK ITEM SMQ.855:

- IF 'CHEWING' (CODE 1) IN SMQ.853, GO TO SMQ.800.
- IF 'SNUFF' (CODE 2) IN SMQ.853, GO TO SMQ.817.
- IF 'SNUS' (CODE 3) IN SMQ.853, GO TO SMQ.857.
- IF 'DISSOLVABLES' (CODE 4) IN SMQ.853, GO TO SMQ.861.

SMQ.800 Durante los últimos **5 días**, incluyendo hoy, ¿cuántos días usó {usted(SE)/él(MPR)/ella(FPR)} tabaco de mascar, tal como Redman, Levi Garrett o Beechnut?

HARD EDIT: RANGE 1 – 5.

ANOTE LA CANTIDAD DE DÍAS

REFUSED 7
DON'T KNOW 9

BOX 8

CHECK ITEM SMQ.818:

IF 'SNUFF' (CODE 2) IN SMQ.853, GO TO SMQ.817.
IF 'SNUS' (CODE 3) IN SMQ.853, GO TO SMQ.857.
IF DISSOLVABLES (CODE 4) IN SMQ.853, GO TO SMQ.861.
OTHERWISE, GO TO SMQ.863.

SMQ.817 Durante los últimos **5 días**, incluyendo hoy, ¿cuántos días usó {usted(SE)/él(MPR)/ella(FPR)} rapé, tal como Skoal, Skoal Bandits, o Copenhagen?

HARD EDIT: RANGE 1 – 5.

ANOTE LA CANTIDAD DE DÍAS

REFUSED 7
DON'T KNOW 9

BOX 9

CHECK ITEM SMQ.821:

IF 'SNUS' (CODE 3) IN SMQ.853, GO TO SMQ.857.
IF DISSOLVABLES (CODE 4) IN SMQ.853, GO TO SMQ.861.
OTHERWISE, GO TO SMQ.863.

SMQ.857 Durante los últimos **5 días**, incluyendo hoy, ¿cuántos días usó {usted/él/ella} snus?

HARD EDIT: RANGE 1 – 5.

ANOTE LA CANTIDAD DE DÍAS

REFUSED 7
DON'T KNOW 9

BOX 10

CHECK ITEM SMQ.859:
IF DISSOLVABLES (CODE 4), CONTINUE.
OTHERWISE, GO TO SMQ.863.

SMQ.861 Durante los últimos **5 días**, incluyendo hoy, ¿cuántos días usó {usted/él/ella} productos de tabaco que se disuelven tales como *strips* o tiritas u *orbs* o pastillas?

HARD EDIT: RANGE 1 – 5.

ANOTE LA CANTIDAD DE DÍAS

REFUSED 7
DON'T KNOW 9

SMQ.863 Durante los últimos **5 días**, incluyendo hoy, ¿usó {usted(SE)/él(MPR)/ella(FPR)} algún producto para la terapia de reemplazo de nicotina tal como parches de nicotina, chicles de nicotina, pastillas para chupar, inhaladores o aerosoles nasales?

YES 1
NO 2 (END OF SECTION)
REFUSED 7 (END OF SECTION)
DON'T KNOW 9 (END OF SECTION)

SMQ.831 Durante los últimos **5 días**, incluyendo hoy, ¿cuántos días usó {usted(SE)/él(MPR)/ella(FPR)} algún producto de terapia de reemplazo de nicotina tal como parches de nicotina, chicles de nicotina, pastillas para chupar, inhaladores o aerosoles nasales?

HARD EDIT: RANGE 1 – 5.

ENTER NUMBER OF DAYS

REFUSED 7
DON'T KNOW 9

SMQ.841 ¿Cuándo fue la última vez que {usted(SE)/él(MPR)/ella(FPR)} usó un producto de terapia de reemplazo de nicotina ? ¿Fue esto . . .

- hoy,..... 1 (END OF SECTION)
- ayer o 2 (END OF SECTION)
- hace de 3 a 5 días?..... 3 (END OF SECTION)
- REFUSED 7 (END OF SECTION)
- DON'T KNOW 9 (END OF SECTION)

SMQ.860 Las siguientes preguntas son acerca de {su exposición/la exposición de él/ella} al humo de tabaco de otras personas.

Durante los últimos 7 días, ¿estuvo {usted/SP} en un **restaurante**?

- YES 1
- NO 2 (SMQ.870)
- REFUSED 7 (SMQ.870)
- DON'T KNOW 9 (SMQ.870)

SMQ.862 Mientras {usted/SP} estaba en un **restaurante**, ¿alguna persona fumó cigarrillos u otros productos de tabaco adentro del restaurante?

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

SMQ.870 Durante los últimos 7 días, ¿viajó {usted/SP} en un **automóvil u otro vehículo motorizado**?

- YES 1
- NO 2 (SMQ.874)
- REFUSED 7 (SMQ.874)
- DON'T KNOW 9 (SMQ.874)

SMQ.872 Mientras {usted/SP} viajaba en un **automóvil u otro vehículo motorizado**, ¿alguna persona fumó cigarrillos u otros productos de tabaco?

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

SMQ.874 Durante los últimos 7 días, ¿estuvo {usted/SP} en una **casa aparte de la {suya/de él/de ella}**?

- YES 1
- NO 2 (SMQ.878)
- REFUSED 7 (SMQ.878)
- DON'T KNOW 9 (SMQ.878)

SMQ.876 Mientras {usted/SP} estuvo en **una casa aparte de la {suya/de él/de ella}**, ¿alguna persona fumó cigarrillos u otros productos de tabaco dentro de la casa?

YES 1
NO 2
REFUSED 7
DON'T KNOW 9

SMQ.878 Durante los últimos 7 días, ¿estuvo {usted/SP} en **algún otro espacio cerrado**?

YES 1
NO 2 (END OF SECTION)
REFUSED 7 (END OF SECTION)
DON'T KNOW 9 (END OF SECTION)

SMQ.880 Mientras {usted/SP} estuvo en **algún otro espacio cerrado**, ¿alguna persona fumó cigarrillos u otros productos de tabaco?

YES 1
NO 2
REFUSED 7
DON'T KNOW 9

ALCOHOL USE – ALQ
Target Group: SPs 18+ (CAPI)

ALQ.101 Las siguientes preguntas son acerca de tomar bebidas alcohólicas. Están incluidos licores (tales como whiskey o ginebra), cerveza, vino, sangría o cualquier otro tipo de bebida alcohólica.

En **algún año determinado**, ¿ha tomado {usted/SP} al menos 12 bebidas alcohólicas de cualquier tipo? Por bebida, quiero decir una cerveza de 12 onzas, una copa de vino de 5 onzas o una onza y media de licor.

HAND CARD ALQ1

- YES 1 (ALQ.120)
- NO 2
- REFUSED 7
- DON'T KNOW 9

ALQ.110 En **toda su vida**, ¿se ha tomado {usted/SP} al menos 12 bebidas alcohólicas?

- YES 1
- NO 2 (END OF SECTION)
- REFUSED 7 (END OF SECTION)
- DON'T KNOW 9 (END OF SECTION)

ALQ.120 En los **últimos 12 meses**, ¿con qué frecuencia se tomó {usted/SP} algún tipo de bebida alcohólica?
Q/U

PROBE: ¿Cuántos días por semana, por mes o por año tomó {usted/SP}?

ENTER '0' FOR NEVER.

HARD EDIT: Range – 1-7 days/week, 1-32 days/month, 1-366 days/year
CAPI INSTRUCTION: IF QUANTITY CODED '0', GO TO BOX 1.

ENTER QUANTITY

- REFUSED 777 (BOX 1)
- DON'T KNOW 999 (BOX 1)

ENTER UNIT

- WEEK..... 1
- MONTH 2
- YEAR..... 3

BOX 1

CHECK ITEM ALQ.125:
IF SP DIDN'T DRINK (CODED '0') IN ALQ.120, GO TO ALQ.151.
OTHERWISE, CONTINUE WITH ALQ.130.

ALQ.130 En los **últimos 12 meses**, en aquellos días en que {usted/SP} se tomó algún tipo de bebida alcohólica, en **promedio**, ¿cuántas bebidas se tomó {usted(SE)/él(MPR)/ella(FPR)}? (Por bebida, quiero decir una cerveza de 12 onzas, una copa de vino de 5 onzas o una onza y media de licor.)

HAND CARD ALQ1

IF LESS THAN 1 DRINK, ENTER '1'.
IF 95 DRINKS OR MORE, ENTER '95'.

CAPI INSTRUCTION:

SOFT EDIT: IF RESPONSE >=20, THEN DISPLAY "USTED DIJO QUE EN LOS DÍAS QUE BEBIÓ, SE TOMÓ UN **PROMEDIO** DE {DISPLAY QUANTITY} BEBIDAS. ¿CORRECTO?"

HARD EDIT: If ALQ.101 = 2 or 9, ALQ.130 must be less than 12.

Error Message: "Number of drinks per day cannot be greater than number of drinks in any one year."

HARD EDIT: Range – 1-95

ENTER # OF DRINKS

REFUSED 777
DON'T KNOW 999

ALQ.141 Q/U En los **últimos 12 meses**, ¿cuántos **días** se tomó {usted/SP} {DISPLAY NUMBER} o más bebidas alcohólicas de cualquier tipo?

PROBE: ¿Cuántos días por semana, por mes o por año tomó {usted/SP} {DISPLAY NUMBER} o más bebidas alcohólicas en un solo día?

ENTER '0' FOR NONE.

CAPI INSTRUCTION:

IF SP = MALE, DISPLAY = 5
IF SP = FEMALE, DISPLAY = 4

CAPI INSTRUCTION: IF QUANTITY CODED '0', GO TO ALQ.151.

HARD EDIT: If ALQ.101 = 2 or 9, ALQ.141 must be less than 3 times per year.

Error Message: "Number of drinks must be less than 3 if SP never had more than 12 drinks per year."

HARD EDIT: Range – 1-7 days/week, 1-32 days/month, 1-366 days/year

ENTER QUANTITY

REFUSED 777 (ALQ.151)
DON'T KNOW 999 (ALQ.151)

ENTER UNIT

WEEK..... 1
MONTH..... 2
YEAR..... 3

ALQ.151 ¿Hubo alguna vez un tiempo o tiempos en {su vida/la vida de SP} cuando {usted(SE)/él(MPR)/ella(FPR)} **se tomó {DISPLAY NUMBER} o más bebidas alcohólicas** de cualquier tipo, **casi todos los días**?

CAPI INSTRUCTION:
IF SP = MALE, DISPLAY = 5
IF SP = FEMALE, DISPLAY = 4

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

BOX 2

CHECK ITEM ALQ.154:
IF ALQ.141 IS CODED '0' OR IF ALQ.120 IS CODED '0', GO TO END OF SECTION.
OTHERWISE, CONTINUE WITH ALQ.160.

ALQ.160 En **los últimos 30 días**, ¿cuántas veces **tomó** {usted/SP} **{DISPLAY NUMBER} o más bebidas alcohólicas** de cualquier tipo, en un periodo de aproximadamente **dos horas**?

ENTER '0' FOR NEVER.

CAPI INSTRUCTION:
IF SP = MALE, DISPLAY = 5
IF SP = FEMALE, DISPLAY = 4

SOFT EDIT: IF RESPONSE IS > 60 TIMES, THEN DISPLAY "USTED DIJO QUE EN LOS **ÚLTIMOS 30 DÍAS**, TOMÓ **{DISPLAY NUMBER} O MÁS** BEBIDAS ALCOHÓLICAS DE CUALQUIER TIPO, EN UN PERIODO DE APROXIMADAMENTE **DOS HORAS**, (DISPLAY QUANTITY) VECES. ¿CORRECTO?"

ENTER QUANTITY

- REFUSED 777
- DON'T KNOW 999

REPRODUCTIVE HEALTH – RHQ
Target Group: Female SPs Ages 12+

RHQ.010 La siguiente serie de preguntas es acerca de {su historia reproductiva/la historia reproductiva de SP}. Empezaré por hacer algunas preguntas acerca {de su período o ciclo menstrual/del período o ciclo menstrual de SP}.

¿Qué edad tenía {usted/SP} cuando {usted(SE)/ella(FPR)} tuvo su (primer período menstrual/primerera regla)?

CODE “0” IF HAVEN’T STARTED YET.

CAPI INSTRUCTION:

SOFT EDIT VALUES: AGE ≤8 AND ≥25 YEARS.

ERROR MESSAGE: “UNLIKELY RESPONSE. PLEASE VERIFY.”

HARD EDIT VALUES: AGE OF 1ST PERIOD CANNOT BE GREATER THAN CURRENT AGE.

ERROR MESSAGE: “AGE MENSTRUAL CYCLE STARTED CANNOT BE GREATER THAN AGE OF SP.”

SOFT EDIT: DISPLAY EDIT WHEN AGE OF SP IS GREATER THAN OR EQUAL TO 20 AND RHQ.010 IS CODED ‘0’.

ERROR MESSAGE: “IT IS UNLIKELY THAT SP’S 20 OR OLDER WILL NOT HAVE BEGUN TO MENSTRUATE. PLEASE VERIFY.”

□□□

ANOTE LA EDAD EN AÑOS

REFUSED 77
DON’T KNOW 99

BOX 1

CHECK ITEM RHQ.015:

- IF PERIODS HAVEN’T STARTED (CODED ‘0’), GO TO END OF SECTION.
- IF PERIODS HAVE STARTED AND SP REPORTS AGE (CODED ‘1’ – ‘76’) IN RHQ.010, OR IF SP REFUSES AGE (CODED ‘77’) IN RHQ.010, GO TO RHQ.031.
- OTHERWISE, CONTINUE.

RHQ.020 ¿Tenía {usted/SP} . . .

menos de 10 años, 1
de 10 a 12 años, 2
entre 13 y 15 años, o 3
16 o más años? 4
REFUSED 7
DON’T KNOW 9

RHQ.031 ¿Ha tenido {usted/SP} **al menos un período** en los **últimos 12 meses**? Por favor no incluya hemorragias causadas por condiciones médicas, terapia de hormonas o cirugías.

SOFT EDIT: DISPLAY EDIT WHEN AGE OF SP IS GREATER THAN OR EQUAL TO 60 AND RHQ.031 IS CODED YES.

ERROR MESSAGE: "IT IS UNLIKELY THAT SPS AGED 60 YEARS OR OLDER WILL STILL BE MENSTRUATING. PLEASE VERIFY."

- YES 1
- NO 2 (RHQ.043)
- REFUSED 7 (RHQ.060)
- DON'T KNOW 9 (RHQ.060)

BOX 1A

CHECK ITEM RHQ.033:

- IF SP < 20 YEARS OLD AND RHQ.031=1, GO TO BOX 3.
- IF SP 20+ YEARS OLD AND RHQ.031=1, GO TO RHQ 282.
- OTHERWISE, CONTINUE.

RHQ.043 ¿Cuál es la razón por la cual {usted/SP} no ha tenido **un período** en los últimos 12 meses?

HAND CARD RHQ 1

SOFT EDIT: DISPLAY EDIT WHEN AGE OF SP IS YOUNGER THAN OR EQUAL TO 50 AND RHQ.043 IS CODED 7 (MENOPAUSE/CHANGE OF LIFE).

ERROR MESSAGE: "UNLIKELY RESPONSE. PLEASE VERIFY."

- EMBARAZO 1 (BOX 3)
- AMAMANTANDO 2
- HISTERECTOMÍA 3
- MENOPAUSIA..... 7
- OTHER 9
- REFUSED 77
- DON'T KNOW 99

RHQ.282 ¿Le han hecho a {usted/SP} una histerectomía, incluyendo una histerectomía parcial, es decir, cirugía para **sacarle** el útero o matriz?

MARK IF KNOWN. OTHERWISE ASK.

HARD EDIT: IF RHQ043 CODED AS "3", BUT REPORTED "NO" TO RHQ282, DISPLAY THE FOLLOWING MESSAGE TO VERIFY THE ANSWERS TO RHQ043 AND RHQ282:

"Usted dijo que es debido a la histerectomía que no ha tenido la menstruación en los últimos 12 meses. ¿Es correcto?"

- YES 1
- NO 2 (RHQ.305)
- REFUSED 7 (RHQ.305)
- DON'T KNOW 9 (RHQ.305)

RHQ.291 ¿Qué edad tenía {usted/SP} cuando le hicieron la histerectomía?

CAPI INSTRUCTION:

HARD EDIT: RHQ.291 MUST BE EQUAL TO OR LESS THAN AGE OF SP.

ERROR MESSAGE: "AGE CANNOT BE GREATER THAN AGE OF SP."

|_|_|_|

ANOTE LA EDAD EN AÑOS

REFUSED 777

DON'T KNOW 999

RHQ.305 ¿Le han sacado a {usted/SP} los **dos** ovarios {ya sea cuando le sacaron el útero o en otra ocasión}?

CAPI INSTRUCTION: IF RHQ.282=1 DISPLAY "{ya sea cuando le sacaron el útero o en otra ocasión}"

YES 1

NO 2 (BOX 1B)

REFUSED 7 (RHQ.060)

DON'T KNOW 9 (RHQ.060)

RHQ.332 ¿Qué edad tenía {usted/SP} cuando le sacaron los ovarios o le sacaron el último ovario si se los sacaron en diferentes ocasiones?

CAPI INSTRUCTION:

HARD EDIT: RHQ.332 MUST BE EQUAL TO OR LESS THAN AGE OF SP.

ERROR MESSAGE: "AGE CANNOT BE GREATER THAN AGE OF SP."

|_|_|_|

ANOTE LA EDAD EN AÑOS

REFUSED 777

DON'T KNOW 999

BOX 1B

CHECK ITEM RHQ.334:

- IF RHQ.031 = 1 AND RHQ.282 = 2 AND RHQ.305 = 2, GO TO BOX 3.
- OTHERWISE, CONTINUE.

RHQ.060 ¿Más o menos qué edad tenía {usted/SP} cuando tuvo su **último** período?

SOFT EDIT: DISPLAY EDIT WHEN RHQ.060 IS GREATER THAN 59.

ERROR MESSAGE: "IT IS UNLIKELY THAT AN SP WILL HAVE HER LAST MENSTRUAL PERIOD AFTER AGE 59. PLEASE VERIFY."

SOFT EDIT: RHQ.060 MUST BE LESS THAN OR EQUAL TO RHQ.291 OR RHQ.332.

ERROR MESSAGE: "AGE OF SP AT LAST MENSTRUAL PERIOD CANNOT BE GREATER THAN AGE OF SP AT HYSTERECTOMY OR AGE OF SP AT OOPHORECTOMY."

HARD EDIT: RHQ.060 MUST BE EQUAL TO OR LESS THAN AGE OF SP.

ERROR MESSAGE: "AGE OF SP AT LAST MENSTRUAL PERIOD CANNOT BE GREATER THAN AGE OF SP."

□□□

ANOTE LA EDAD EN AÑOS

REFUSED 77
DON'T KNOW 99

BOX 2

CHECK ITEM RHQ.065:

- IF SP DOESN'T KNOW AGE AT LAST MENSTRUAL PERIOD (CODED '99') IN RHQ.060, CONTINUE.
- OTHERWISE, GO TO BOX 3.

RHQ.070 ¿Tenía {usted/SP} . . .

menos de 30 años, 1
entre 30 y 34 años, 2
entre 35 y 39 años, 3
entre 40 y 44 años, 4
entre 45 y 49 años, 5
entre 50 y 54 años, o 6
55 o más años? 7
REFUSED 77
DON'T KNOW 99

BOX 3

CHECK ITEM RHQ.072:

- IF SP IS 18-59 YEARS OLD, CONTINUE.
- OTHERWISE, GO TO RHQ.131.

RHQ.074 Las siguientes preguntas son acerca de {su historia de embarazo/la historia de embarazo de SP}.

¿Ha intentado {usted/SP} alguna vez, por lo menos durante un año, quedar embarazada y no lo ha logrado?

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

RHQ.076 ¿Alguna vez ha ido {usted/SP} al médico o a otro proveedor de cuidados de salud debido a que no ha podido quedar embarazada?

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

RHQ.078 ¿Alguna vez le han hecho tratamiento a {usted/SP} debido a una infección en las trompas de Falopio, en el útero o matriz o en los ovarios, conocida también como enfermedad pélvica inflamatoria?

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

RHQ.131 {Las siguientes preguntas son acerca de {su historia de embarazo/la historia de embarazo de SP}.}

¿Ha estado {usted/SP} **alguna vez** embarazada? Por favor incluya {embarazo actual}, nacimientos vivos, abortos espontáneos, nacimientos muertos, embarazos extrauterinos y abortos.

MARK IF KNOWN. OTHERWISE ASK.

CAP I INSTRUCTIONS:

IF SP IS AGED 12-17 OR 60+ DISPLAY {Las siguientes preguntas son acerca de {su historia de embarazo/la historia de embarazo de SP}.}

IF RHQ.043=1, DISPLAY {su embarazo actual}

HELP SCREEN SHOULD READ: Aborto espontáneo: se refiere a un embarazo que termina naturalmente durante los primeros 5 meses (20 semanas) de embarazo. Nacimiento muerto: se refiere a un bebé que nace muerto después de 6 o más meses (20 o más semanas) de embarazo. Embarazo extrauterino: se refiere a un embarazo que ocurre en las trompas de Falopio. Aborto: se refiere a un embarazo que se termina durante los 6 meses de embarazo usando métodos de inducción. Los métodos incluyen extracción con aspiradora o sea succión, inyecciones salinas y "D y L" o sea dilatación y legrado o raspado uterino.

- YES 1
- NO 2 (R HQ.420)
- REFUSED 7 (R HQ.420)
- DON'T KNOW 9 (R HQ.420)

BOX 6

CHECK ITEM RHQ.136:

- IF THE SP HAS EXPERIENCED MENOPAUSE (RHQ.043 = 7), GO TO RHQ.160.
- IF THE SP HAD HYSTERECTOMY (RHQ.043 = 3 OR RHQ.282 = 1), GO TO RHQ.160.
- OTHERWISE, CONTINUE.

RHQ.143 ¿Está {usted/SP} embarazada **ahora**?

MARK IF KNOWN. OTHERWISE ASK.

YES 1
NO 2
REFUSED 7
DON'T KNOW 9

RHQ.160 ¿Cuántas veces ha estado embarazada {usted/SP}? Por favor cuente todos {sus embarazos/los embarazos de ella} incluyendo {embarazo actual,} nacimientos vivos, abortos espontáneos, nacimientos muertos, embarazos extrauterinos y abortos.)

HELP SCREEN SHOULD READ: Aborto espontáneo: se refiere a un embarazo que termina naturalmente durante los primeros 5 meses (20 semanas) de embarazo. Nacimiento muerto: se refiere a un bebé que nace muerto después de 6 o más meses (20 o más semanas) de embarazo. Embarazo extrauterino: se refiere a un embarazo que ocurre en las trompas de Falopio. Aborto: se refiere a un embarazo que se termina durante los 6 meses de embarazo usando métodos de inducción. Los métodos incluyen extracción con aspiradora o sea succión, inyecciones salinas y "D y L" o sea dilatación y legrado o raspado uterino o sea raspado uterino.

CAPI INSTRUCTION: IF RHQ.143=1 DISPLAY {su embarazo actual}.

ANOTE LA CANTIDAD DE EMBARAZOS

REFUSED 77
DON'T KNOW 99

RHQ.162 **Durante {alguno de sus embarazos/su embarazo/el embarazo de SP}, ¿le dijo a {usted/SP} alguna vez un médico o algún otro profesional de salud que {usted/ella} tenía diabetes, diabetes de azúcar, o diabetes gestacional? Por favor no incluya diabetes de la cual {usted/SP} haya sabido antes del embarazo.**

CAPI INSTRUCTION:

IF RHQ.160 = 1, DISPLAY {su embarazo/el embarazo de SP}. OTHERWISE, DISPLAY {alguno de sus embarazos}.

HELP SCREEN SHOULD READ: Diabetes gestacional es una forma de diabetes o alta azúcar en la sangre encontrada en las mujeres embarazadas.

YES 1
NO 2 (BOX 7)
BORDERLINE 3 (BOX 7)
REFUSED 7 (BOX 7)
DON'T KNOW 9 (BOX 7)

RHQ.163 ¿Qué edad tenía {usted/SP} cuando se le dijo **por primera vez** que {usted/ella} tenía diabetes **durante un embarazo?**

SOFT EDIT: IF RHQ.143 = 1 AND RHQ.160 = 1, THEN RHQ.163 MUST BE EQUAL TO THE AGE OF THE SP OR THE AGE OF THE SP MINUS 1.

ERROR MESSAGE: "ES POCO PROBABLE QUE LE HAYAN DICHO POR PRIMERA VEZ A ESA EDAD QUE TENÍA DIABETES YA QUE ESTE ES SU PRIMER EMBARAZO. POR FAVOR VERIFIQUE."

HARD EDIT: RHQ.163 MUST BE EQUAL TO OR LESS THAN AGE OF SP.

ERROR MESSAGE: "AGE CANNOT BE GREATER THAN AGE OF SP."

SOFT EDIT: RHQ.163 MUST BE EQUAL TO OR GREATER THAN 12.

ERROR MESSAGE: "UNLIKELY AGE. PLEASE VERIFY."

ANOTE LA EDAD EN AÑOS

REFUSED 77

DON'T KNOW 99

BOX 7

CHECK ITEM RHQ.165:

- IF SP ONLY HAD ONE PREGNANCY (CODED '1') IN RHQ.160 AND CURRENTLY PREGNANT (CODED '1') IN RHQ.143, SKIP TO RHQ.420.
- OTHERWISE CONTINUE.

RHQ.166 ¿Cuántos partos vaginales ha tenido {usted/SP}? Por favor cuente los nacimientos muertos así como los vivos.

COUNT THE NUMBER OF DELIVERIES, NOT THE NUMBER OF LIVE-BORN CHILDREN. FOR EXAMPLE, IF SP DELIVERED TWINS OR HAD ANY OTHER MULTIPLE BIRTH, COUNT AS A SINGLE DELIVERY.

HARD EDIT: RHQ.166 MUST BE EQUAL TO OR LESS THAN RHQ.160.

ERROR MESSAGE: "NUMBER OF VAGINAL DELIVERIES CANNOT BE GREATER THAN THE NUMBER OF PREGNANCIES."

SOFT EDIT: IF RHQ.143 = 1, THEN RHQ.166 MUST BE EQUAL TO OR LESS THAN RHQ.160 MINUS 1.

ERROR MESSAGE: "Debido a que usted está actualmente embarazada es improbable que la cantidad de partos vaginales sea igual o mayor a la cantidad de sus embarazos. Por favor verifique."

ANOTE LA CANTIDAD

REFUSED 77

DON'T KNOW 99

BOX 7A

CHECK ITEM RHQ.168:

- IF NUMBER OF PREGNANCIES IN RHQ.160 EQUALS THE NUMBER OF VAGINAL DELIVERIES IN RHQ.166, SKIP TO RHQ.172.
- IF SP CURRENTLY PREGNANT (CODED '1') IN RHQ.143 AND THE NUMBER OF VAGINAL DELIVERIES IN RHQ.166 EQUALS THE NUMBER OF PREGNANCIES IN RHQ.160 MINUS 1, SKIP TO RHQ.172.
- OTHERWISE, CONTINUE WITH RHQ.169.

RHQ.169 ¿Cuántos partos por cesárea, también conocidos como C-section en inglés, ha tenido {usted/SP}? (Por favor cuente los nacimientos muertos así como los nacimientos vivos.)

COUNT THE NUMBER OF DELIVERIES, NOT THE NUMBER OF LIVE-BORN CHILDREN. FOR EXAMPLE, IF SP DELIVERED TWINS OR HAD ANY OTHER MULTIPLE BIRTH, COUNT AS A SINGLE DELIVERY.

SOFT EDIT: SUM OF RHQ.166 AND RHQ.169 MUST BE EQUAL TO OR LESS THAN RHQ.160.

ERROR MESSAGE: "It is unlikely that the number of deliveries (vaginal and cesarean deliveries combined) is greater than the number of pregnancies. Please verify."

SOFT EDIT: IF CURRENTLY PREGNANT (CODED '1' IN RHQ.143) THEN THE SUM OF RHQ.166 AND RHQ.169 SHOULD BE LESS THAN OR EQUAL TO RHQ.160 MINUS 1.

ERROR MESSAGE: "Since SP is currently pregnant, it is unlikely that the number of vaginal and cesarean deliveries is equal to or greater than the number of pregnancies. Please verify."

HARD EDIT: RHQ.169 MUST BE EQUAL TO OR LESS THAN RHQ.160.

ERROR MESSAGE: "Number of cesarean deliveries cannot be greater than the number of pregnancies."

|_|_|

ANOTE LA CANTIDAD

REFUSED 77

DON'T KNOW 99

BOX 7B

CHECK ITEM RHQ.170A:

- IF THE NUMBER OF DELIVERIES IN RHQ.166 AND RHQ.169 EQUALS ZERO, GO TO RHQ.420.
- OTHERWISE, CONTINUE WITH RHQ.172.

RHQ.172 {{Su parto/El parto de SP}}/{{Alguno de sus partos/Alguno de los partos de SP}} resultó en un bebé que pesaba 9 libras o más al nacer? Por favor cuente los nacimientos muertos así como también los nacimientos vivos.

INTERVIEWER INSTRUCTION: IF SP ONLY RECALLS HER BABY'S BIRTH WEIGHT IN KILOS/GRAMS:
9 LB ~ 4.1 KG/ 4,100 G.

CAPI INSTRUCTION:

IF SP HAD ONE DELIVERY (SUM OF RHQ.166 AND RHQ.169 = 1), DISPLAY {{SU PARTO/EL PARTO DE SP}}.

IF SP HAD MORE THAN ONE DELIVERY (SUM OF RHQ.166 AND RHQ.169 > 1), DISPLAY {{ALGUNO DE SUS PARTOS/ALGUNO DE LOS PARTOS DE SP}}.

YES	1
NO	2 (RHQ.171)
REFUSED	7 (RHQ.171)
DON'T KNOW	9 (RHQ.171)

RHQ.173 ¿Qué edad tenía {usted/SP} cuando dio a luz {a un/al primer} bebé que pesó 9 libras (4082 gramos) o más? (Por favor cuente los nacimientos muertos así como los nacimientos vivos.)

INTERVIEWER INSTRUCTION: IF SP ONLY RECALLS HER BABY'S BIRTH WEIGHT IN KILOS/GRAMS:
9 LB ~ 4.1 KG/ 4,100 G.

CAPI INSTRUCTION:

IF SP HAD ONE DELIVERY (SUM OF RHQ.166 AND RHQ.169 = 1), DISPLAY {a un}. OTHERWISE, DISPLAY {al primer}.

HARD EDIT: RHQ.173 MUST BE EQUAL TO OR LESS THAN AGE OF SP.
ERROR MESSAGE: "AGE CANNOT BE GREATER THAN AGE OF SP."

ANOTE LA CANTIDAD DE AÑOS

REFUSED	77
DON'T KNOW	99

RHQ.171 ¿Cuántos de {sus partos/los partos de ella} resultaron en nacimientos vivos? {¿Resultó {su parto/el parto de ella} en un nacimiento vivo?

CAPI INSTRUCTION:

IF SP HAD ONE DELIVERY (SUM OF RHQ.166 AND RHQ.169 = 1), REPLACE {¿Cuántos de {sus partos/los partos de ella} resultaron en nacimientos vivos?} WITH {¿Resultó {su parto/el parto de ella} en un nacimiento vivo?

FOR SINGLE DELIVERIES:

Yes = 1

No = 0

COUNT THE NUMBER OF TOTAL DELIVERIES, NOT NUMBER OF LIVE-BORN CHILDREN. FOR EXAMPLE, IF SP HAD TWINS OR OTHER MULTIPLE BIRTH, COUNT AS A SINGLE DELIVERY.

|_|_|

ANOTE LA CANTIDAD DE PARTOS

REFUSED 77

DON'T KNOW 99

BOX 8

CHECK ITEM RHQ.177:

- IF SP HAD NO DELIVERIES THAT RESULTED IN A LIVE BIRTH (CODED '0') IN RHQ.171, GO TO RHQ.184.
- IF SP HAD ONE DELIVERY (SUM OF RHQ.166 AND RHQ.169 = 1) AND THAT DELIVERY RESULTED IN A LIVE BIRTH (CODED '1') IN RHQ.171 AND SP DELIVERED ONE BABY THAT WEIGHED 9 POUNDS OR MORE (CODED '1') IN RHQ.172, GO TO RHQ.184.
- OTHERWISE, CONTINUE.

RHQ.180 ¿Qué edad tenía {usted/SP} en el momento de su {primer} nacimiento vivo?

CAPI INSTRUCTION:
IF SP HAD MORE THAN 1 LIVE BIRTH (CODED >= 2) IN RHQ.171, DISPLAY {primer}.

CAPI INSTRUCTION:
HARD EDIT: RHQ.180 MUST BE EQUAL TO OR LESS THAN AGE OF SP.
ERROR MESSAGE: 'AGE OF SP AT FIRST DELIVERY CANNOT BE GREATER THAN AGE OF SP.'
SOFT EDIT: DISPLAY EDIT WHEN RHQ.180 IS GREATER THAN OR EQUAL TO RHQ.010.
ERROR MESSAGE: "AGE OF SP AT FIRST LIVE BIRTH CANNOT BE LESS THAN AGE WHEN SP'S FIRST PERIOD STARTED."
SOFT EDIT: DISPLAY EDIT WHEN RHQ.180 IS GREATER THAN (RHQ.163 +1).
ERROR MESSAGE: "AGE OF SP AT FIRST LIVE BIRTH IS NOT LIKELY TO BE MORE THAN ONE YEAR GREATER THAN THE AGE WHEN SP'S FIRST TOLD HAVING DIABETES DURING A PREGNANCY. PLEASE VERIFY."
SOFT EDIT: DISPLAY EDIT WHEN RHQ.180 IS GREATER THAN RHQ.173.
ERROR MESSAGE: "AGE OF SP AT FIRST LIVE BIRTH IS NOT LIKELY TO BE GREATER THAN THE AGE WHEN SP FIRST DELIVERED A BABY THAT WEIGHTED 9 POUNDS OR MORE. PLEASE VERIFY."

____|.....
ANOTE LA EDAD EN AÑOS

REFUSED 77
DON'T KNOW 99

RHQ.184 ¿En qué mes y año tuvo su último parto? Cuente los nacimientos muertos y los nacimientos vivos.
M/Y

____|
MONTH

REFUSED77
DON'T KNOW99

____|.....(BOX9A)
YEAR

REFUSED7777 (RHQ.200)
DON'T KNOW9999 (RHQ.200)

HARD EDIT: DATE MUST BE EQUAL OR LESS THAN CURRENT MONTH/YEAR.
HARD EDIT VALUES FOR MONTH: 01 – 12.
HARD EDIT VALUES FOR YEAR: 1900 – 2100.

INTERVIEWER INSTRUCTION:
WE ARE ASKING THE BIRTH MONTH AND YEAR OF THE WOMAN'S LAST CHILD OR THE DATE HER LAST PREGNANCY ENDED (IF STILLBIRTH).

CAPI INSTRUCTIONS:
SEPARATE FIELDS FOR MONTH AND YEAR AND ALLOW ENTRY OF RF AND DK IN FIELDS.
HARD EDIT: DISPLAY ERROR WHEN ONLY ONE DIGIT IS ENTERED FOR MONTH.
ERROR MESSAGE: "ENTER TWO DIGITS FOR MONTH."

CAPI INSTRUCTIONS:

CALCULATE SP'S {AGE OF THIS LAST DELIVERY} AND USE THIS AGE IN THE FOLLOWING SOFT EDITS:

1. IF THE SP ONLY HAD ONE PREGNANCY (RHQ.160=1), AND THE DIFFERENCES BETWEEN {AGE OF THIS LAST DELIVERY} AND AGE REPORTED IN RHQ.163 IS MORE THAN 1 ($\{AGE OF THIS LAST DELIVERY\} - RHQ.163 > 1$ OR < 0), DISPLAY: "THIS MEANS THE SP WAS {AGE OF THIS LAST DELIVERY} YEARS OLD AT LAST DELIVERY. REPORTED AGE WHEN FIRST DIAGNOSED WITH GESTATIONAL DIABETES = {AGE AT RHQ.163}. SP ONLY REPORTED ONE PREGNANCY SO IT IS LIKELY THAT ONE OF THE REPORTED AGES IS INCORRECT. PLEASE VERIFY."
2. IF THE SP HAD MULTIPLE PREGNANCIES (RHQ.160>1), AND THE {AGE OF THIS LAST DELIVERY} IS LESS THAN WHAT WAS REPORTED IN RHQ.163, DISPLAY: "THIS MEANS THE SP WAS {AGE OF THIS LAST DELIVERY} YEARS OLD AT LAST DELIVERY. REPORTED AGE WHEN FIRST DIAGNOSED WITH GESTATIONAL DIABETES = {AGE AT RHQ.163}. IT IS UNLIKELY THAT SHE WAS DIAGNOSED WITH GESTATIONAL DIABETES AFTER HER LAST DELIVERY. PLEASE VERIFY."
3. IF THE SP ONLY HAD ONE PREGNANCY (RHQ.160=1), AND THE {AGE OF THIS LAST DELIVERY} IS DIFFERENT THAN THE AGE REPORTED IN RHQ.173, DISPLAY: "THIS MEANS THE SP WAS {AGE OF THIS LAST DELIVERY} YEARS OLD AT LAST DELIVERY. REPORTED AGE WHEN DELIVERED A BABY THAT WEIGHED 9 POUNDS OR MORE = {AGE AT RHQ.163}. SP ONLY REPORTED ONE PREGNANCY SO IT IS UNLIKELY THAT THESE TWO AGES ARE DIFFERENT. PLEASE VERIFY."
4. IF THE SP HAD MULTIPLE PREGNANCIES (RHQ.160>1), AND THE {AGE OF THIS LAST DELIVERY} IS LESS THAN WHAT REPORTED IN RHQ.173, DISPLAY: "THIS MEANS THE SP WAS {AGE OF THIS LAST DELIVERY} YEARS OLD AT LAST DELIVERY. THIS IS UNLIKELY BECAUSE SP REPORTED HAVING DELIVERED A BABY THAT WEIGHED 9 POUNDS OR MORE WHEN SHE WAS {AGE AT RHQ.173}. PLEASE VERIFY."
5. IF {AGE OF THIS LAST DELIVERY} IS LESS THAN WHAT REPORTED IN RHQ.180, DISPLAY: "THIS MEANS THE SP WAS {AGE OF THIS LAST DELIVERY} YEARS OLD AT LAST DELIVERY. THIS IS UNLIKELY BECAUSE THE SP REPORTED HAVING HER FIRST LIVE BIRTH WHEN SHE WAS {AGE AT RHQ.180}. PLEASE VERIFY."

BOX 9A

CHECK ITEM RHQ.187:

- IF THE DATE OF LAST DELIVERY IN RHQ.184 IS WITHIN THE LAST 24 MONTHS, CONTINUE.
- IF THE MONTH IN RHQ.184 IS "REFUSED" OR "DON'T KNOW" AND [(THE YEAR IN RHQ.184) > (CURRENT YEAR -3)], CONTINUE.
- OTHERWISE, GO TO RHQ.420.

RHQ.200 ¿Está {usted/SP} **ahora** amamantando/dándole pecho a un niño?

YES 1
 NO 2
 REFUSED 7
 DON'T KNOW 9

RHQ.420 ¿Ha tomado {usted/SP} **alguna vez** (pastillas/píldoras) anticonceptivas por alguna razón?

- YES 1
- NO 2 (RHQ.510)
- REFUSED 7 (RHQ.510)
- DON'T KNOW 9 (RHQ.510)

BOX 20

CHECK ITEM RHQ.535:

- IF SP 20 YEARS OF AGE OR OLDER, CONTINUE.
- OTHERWISE, GO TO BOX 24.

RHQ.540 ¿Ha usado {usted/SP} **alguna vez** hormonas femeninas tales como estrógeno y progesterona? Por favor incluya todas las formas de hormonas femeninas recetadas, tales como (pastillas/píldoras), cremas, parches e inyectables, pero **no** incluya métodos de control de la natalidad o anticonceptivos o uso para la infertilidad.

IN SITUATIONS OF HORMONE USE FOR NON-MENOPAUSAL CONDITIONS, CODE HRT USE AS "NO".

HAND CARD RHQ2

- YES 1
- NO 2 (BOX 24)
- REFUSED 7 (BOX 24)
- DON'T KNOW 9 (BOX 24)

RHQ.542 ¿Qué formas de hormonas femeninas ha usado {usted/SP}?

CODE ALL THAT APPLY

HAND CARD RHQ2

- PASTILLAS/PÍLDORAS 10
- PARCHES 11
- CREMA/SUPOSITORIO/INYECCIÓN 12
- OTHER 13
- REFUSED 77
- DON'T KNOW 99

BOX 21

CHECK ITEM RHQ.552:

IF SP USED FEMALE HORMONE PILLS (CODE '10') IN RHQ.542, CONTINUE.
OTHERWISE, GO TO BOX 22.

RHQ.554 ¿Ha tomado {usted/SP} **alguna vez (pastillas/píldoras)** de hormonas femeninas que contienen **estrógeno solamente**, tal como Premarin? No incluya (pastillas/píldoras) anticonceptivas.

HAND CARD RHQ2

YES 1
NO 2 (RHQ.570)
REFUSED 7 (RHQ.570)
DON'T KNOW 9 (RHQ.570)

RHQ.560 Sin contar ningún tiempo durante el cual {usted/SP} dejó de tomarlas, ¿por cuánto tiempo **en total** {ha tomado usted/tomó usted/ha tomado ella/tomó ella} píldoras que contienen estrógeno solamente?
Q/U

HAND CARD RHQ2

CODE "1" FOR LESS THAN 1 MONTH

ANOTE LA CANTIDAD

REFUSED 77
DON'T KNOW 99

ENTER UNIT

MESES 1
AÑOS 2

RHQ.570 ¿Ha tomado {usted/SP} (**pastillas/píldoras**) de hormonas femeninas que contienen **ambos, estrógeno y progestina**, tal como Prempro o Premphase? No incluya (pastillas/píldoras) anticonceptivas.

HAND CARD RHQ2

YES 1
NO 2 (BOX 22)
REFUSED 7 (BOX 22)
DON'T KNOW 9 (BOX 22)

RHQ.576 Sin contar ningún tiempo durante el cual {usted/SP} dejó de tomarlas, ¿por cuánto tiempo **en total** tomó {usted/ella} píldoras que contienen ambos, estrógeno y progestina?
Q/U

HAND CARD RHQ2

CODE "1" FOR LESS THAN 1 MONTH

|_|_|

ANOTE LA CANTIDAD

REFUSED 77

DON'T KNOW 99

ENTER UNIT

MESES 1

AÑOS 2

BOX 22

CHECK ITEM RHQ.578:

IF SP USED PATCHES (CODE '11') IN RHQ.542, CONTINUE WITH RHQ.580.
OTHERWISE, GO TO BOX 24.

RHQ.580 ¿Ha usado {usted/SP} **alguna vez parches** de hormonas femeninas que contienen **estrógeno solamente**?

YES 1

NO 2 (RHQ.596)

REFUSED 7 (RHQ.596)

DON'T KNOW 9 (RHQ.596)

RHQ.586 Sin contar ningún tiempo durante el cual {usted/SP} dejó de usarlos, ¿por cuánto tiempo **en total** usó {usted/ella} parches que contienen estrógeno solamente?
Q/U

CODE "1" FOR LESS THAN 1 MONTH

|_|_|

ANOTE LA CANTIDAD

REFUSED 77

DON'T KNOW 99

ENTER UNIT

MESES 1

AÑOS 2

RHQ.596 ¿Ha usado {usted/SP} **parches** de hormonas femeninas que contienen **ambos, estrógeno y progestina**?

YES 1

NO 2 (BOX 24)
REFUSED 7 (BOX 24)
DON'T KNOW 9 (BOX 24)

RHQ.602 Q/U Sin contar ningún tiempo durante el cual {usted/SP} dejó de usarlos, ¿por cuánto tiempo **en total** usó {usted/ella} parches que contienen ambos, estrógeno y progestina?

CODE "1" FOR LESS THAN 1 MONTH

ANOTE LA CANTIDAD

REFUSED 77
DON'T KNOW 99

ENTER UNIT

MESES 1
AÑOS 2

BOX 24

CHECK ITEM RHQ.642:

- IF SP CURRENTLY PREGNANT (CODED '1') IN RHQ.143, CONTINUE WITH FSQ.652a.
- ELSE IF RHQ.184 IS WITHIN THE LAST 24 MONTHS, GO TO FSQ.652b.
- ELSE IF THE MONTH IN RHQ.184 IS "REFUSED" OR "DON'T KNOW" AND [(THE YEAR IN RHQ.184) > (CURRENT YEAR – 3)], GO TO FSQ.652b.
- OTHERWISE, GO TO END OF SECTION.

FSQ.652a Las siguientes preguntas son acerca de la participación en WIC, es decir, el Programa para Mujeres, Infantes y Niños.

¿Durante este embarazo ha usado beneficios de WIC para comprar alimentos para usted?

YES 1
NO 2 (END OF SECTION)
REFUSED 7 (END OF SECTION)
DON'T KNOW 9 (END OF SECTION)

FSQ.672a ¿Cuántos meses de embarazo tenía usted cuando comenzó a recibir beneficios de WIC para comprar alimentos para usted?

ENTER NUMBER

REFUSED 77
DON'T KNOW 99

BOX 27
CHECK ITEM RHQ.644: ■ GO TO FSQ.662.

FSQ.652b Las siguientes preguntas son acerca de la participación en WIC, es decir, el Programa para Mujeres, Infantes y Niños.

Durante su último embarazo, ¿usó beneficios de WIC para comprar alimentos para usted? Por favor incluya nacimientos muertos o pérdidas/abortos espontáneos.

YES 1
NO 2 (FSQ.652c)
REFUSED 7 (FSQ.652c)
DON'T KNOW 9 (FSQ.652c)

FSQ.672b ¿Cuántos meses de embarazo tenía cuando comenzó a recibir beneficios de WIC para comprar alimentos para usted?

ENTER NUMBER

REFUSED 77
DON'T KNOW 99

FSQ.652c Después de que su {último} hijo nació, ¿usó los beneficios de WIC para comprar alimentos para usted?

IF RHQ.160 > 1, DISPLAY {último}.

YES 1
NO 2
REFUSED 7
DON'T KNOW 9

BOX 28
CHECK ITEM RHQ.646: ■ IF RHQ.184 IS WITHIN THE LAST 12 MONTHS, CONTINUE WITH FSQ.662. ■ IF THE MONTH IN RHQ.184 IS "REFUSED" OR "DON'T KNOW" AND [(THE YEAR IN RHQ.184) > (CURRENT YEAR - 2)], CONTINUE. ■ OTHERWISE, GO TO END OF SECTION.

FSQ.662 ¿Está usted recibiendo **ahora** beneficios de WIC para usted?

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

KIDNEY CONDITIONS - KIQ
New Target Group: SPs 20+

KIQ.005 A muchas personas se les sale la orina. Las siguientes preguntas son acerca de las personas a quienes se les sale la orina.

¿Qué tan frecuentemente se le sale la orina a {usted/SP}? ¿Diría {usted(SE)/él(MPR)/ella(FPR)} ...

CAPI INSTRUCTION:

HELP SCREEN: Otra manera de decir se le sale la orina es no poder contener la orina antes de llegar al baño, no poder controlar la vejiga, pérdida de control de la orina.

- nunca,..... 1 (KIQ.042)
- menos de una vez al mes, 2
- unas pocas veces al mes, 3
- unas pocas veces a la semana, o 4
- todos los días y/o noches?..... 5
- REFUSED 7 (KIQ.042)
- DON'T KNOW 9 (KIQ.042)

KIQ.010 ¿Cuánta orina pierde {usted/SP} cada vez? ¿Diría {usted(SE)/él(MPR)/ella(FPR)} ...

- gotas,..... 1
- salpicaduras pequeñas, o 2
- más?..... 3
- REFUSED 7
- DON'T KNOW 9

KIQ.042 Durante los **últimos 12 meses**, ¿ha perdido {usted/SP} el control o se le ha salido la orina, incluso una cantidad pequeña de orina debido a una actividad tal como toser, levantar algo o hacer ejercicios?

- YES 1
- NO 2 (KIQ.044)
- REFUSED 7 (KIQ.044)
- DON'T KNOW 9 (KIQ.044)

KIQ.430 ¿Qué tan frecuentemente le ocurre esto? ¿Diría {usted(SE)/él(MPR)/ella(FPR)} que esto le ocurre...

HAND CARD KIQ1

- menos de una vez al mes, 1
- unas pocas veces al mes, 2
- unas pocas veces a la semana, o 3
- todos los días y/o noches?..... 4
- REFUSED 7
- DON'T KNOW 9

KIQ.044 Durante los **últimos 12 meses**, ¿ha perdido {usted/SP} el control o se le ha salido la orina, incluso una cantidad pequeña, debido a que {usted(SE)/él(MPR)/ella(FPR)} tenía urgencia o presión para orinar y no pudo llegar al baño lo suficientemente rápido?

- YES 1
- NO 2 (KIQ.046)
- REFUSED 7 (KIQ.046)
- DON'T KNOW 9 (KIQ.046)

KIQ.450 ¿Qué tan frecuentemente le ocurre esto? ¿Diría {usted(SE)/él(MPR)/ella(FPR)} que esto le ocurre...

HAND CARD KIQ1

- menos de una vez al mes, 1
- unas pocas veces al mes, 2
- unas pocas veces a la semana, o 3
- todos los días y/o noches? 4
- REFUSED 7
- DON'T KNOW 9

KIQ.046 Durante los **últimos 12 meses**, ¿ha perdido {usted/SP} el control o se le ha salido la orina, incluso una cantidad pequeña, **sin** hacer una actividad tal como toser, levantar algo o hacer ejercicios, o sin tener urgencia para orinar?

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

KIQ.470 ¿Qué tan frecuentemente le ocurre esto? ¿Diría {usted(SE)/él(MPR)/ella(FPR)} que esto le ocurre...

HAND CARD KIQ1

- menos de una vez al mes, 1
- unas pocas veces al mes, 2
- unas pocas veces a la semana, o 3
- todos los días y/o noches? 4
- REFUSED 7
- DON'T KNOW 9

BOX 1
CHECK ITEM KIQ.048A:
■ IF 'YES' (CODED '1') IN KIQ.042 OR KIQ.044 OR KIQ.046, CONTINUE WITH KIQ.050.
■ OTHERWISE, GO TO KIQ.480.

KIQ.050 Durante los **últimos 12 meses**, ¿qué tanto le ha molestado a {usted(SE)/él(MPR)/ella(FPR)} la salida de la orina? Por favor seleccione una de las siguientes opciones:

- nada, 1
- un poco solamente, 2
- algo, 3
- mucho, o 4
- excesivamente? 5
- REFUSED 7
- DON'T KNOW 9

KIQ.052 Durante los **últimos 12 meses**, ¿qué tanto le ha afectado a {usted(SE)/él(MPR)/ella(FPR)} la salida de la orina en sus actividades diarias? (Por favor seleccione una de las siguientes opciones:)

- nada, 1
- un poco solamente, 2
- algo, 3
- mucho, o 4
- excesivamente? 5
- REFUSED 7
- DON'T KNOW 9

KIQ.480 Durante los **últimos 30 días**, ¿cuántas veces por noche se levantó {usted/SP} usualmente para orinar, desde el momento en que {usted(SE)/él(MPR)/ella(FPR)} se fue a acostar en la noche hasta el momento en que se levantó en la mañana? ¿Diría {usted(SE)/él(MPR)/ella(FPR)} que...

- 0, 0
- 1, 1
- 2, 2
- 3, 3
- 4, 4
- 5 o más? 5
- REFUSED 77
- DON'T KNOW 99

PHYSICAL ACTIVITY AND PHYSICAL FITNESS - PAQ
Target Group: SPs 12-15

PAQ.706 Ahora quiero hacerle algunas preguntas acerca de {sus actividades(SE)/las actividades de SP}.

Durante los **últimos 7 días**, ¿cuántos días {estuvo usted(SE)/estuvo SP} físicamente {activo(M)/activa(F)} por un total de **al menos 60 minutos al día**? Incluya todo el tiempo que {usted/SP} pasó en cualquier tipo de actividad física que le haya aumentado los latidos del corazón y le haya hecho respirar rápido parte del tiempo.

0 días	0
1 día	1
2 días	2
3 días	3
4 días.....	4
5 días.....	5
6 días.....	6
7 días.....	7
REFUSED	77
DON'T KNOW	99

PAQ.605 A continuación le voy a preguntar acerca del tiempo que {usted/SP} pasa haciendo diferentes tipos de actividades físicas en una semana típica.

Piense primero acerca del tiempo que {usted/SP} pasa trabajando. Piense en el trabajo como las cosas que {usted/SP} tiene que hacer tales como trabajo pagado o sin pago, trabajo en el hogar y trabajo en el jardín.

¿Incluye {su trabajo/el trabajo de SP} actividades de intensidad **vigorosa** que causan **grandes aumentos** del ritmo de la respiración o de los latidos del corazón, tales como acarrear o levantar cargas pesadas, trabajo de excavación o construcción por **al menos 10 minutos seguidos**?

YES	1
NO	2 (PAQ.620)
REFUSED	7 (PAQ.620)
DON'T KNOW	9 (PAQ.620)

PAQ.610 En una semana típica, ¿cuántos días hace {usted/SP} actividades de intensidad **vigorosa** como parte de su trabajo?

PROBE IF NEEDED: La actividad de intensidad vigorosa causa grandes aumentos del ritmo de la respiración o de los latidos del corazón y se hace **por al menos 10 minutos seguidos**.

INTERVIEWER: REMEMBER, WE ARE ONLY ASKING ABOUT WORK AND CHORES IN THIS QUESTION.

HARD EDIT: LESS THAN 1 DAY OR MORE THAN 7 DAYS
ERROR MESSAGE: LA CANTIDAD DE DÍAS DEBE SER ENTRE 1 Y 7.

|_|_|

ANOTE LA CANTIDAD DE DÍAS

REFUSED 77 (PAQ.620)
DON'T KNOW 99 (PAQ.620)

PAQ.615 ¿Cuánto tiempo pasa {usted/SP} haciendo actividades de intensidad **vigorosa** en un día típico de trabajo?
Q/U

PROBE IF NEEDED: Piense en un día típico en el cual hace actividades de intensidad vigorosa durante su trabajo.

PROBE IF NEEDED: La actividad de intensidad vigorosa causa grandes aumentos del ritmo de la respiración o de los latidos del corazón y se hace **por al menos 10 minutos seguidos**.

INTERVIEWER: REMEMBER, WE ARE ONLY ASKING ABOUT WORK AND CHORES.

SOFT EDIT: >4 HOURS.

ERROR MESSAGE: INTERVIEWER, YOU HAVE RECORDED THAT THE SP SPENDS MORE THAN 4 HOURS DOING VIGOROUS-INTENSITY ACTIVITIES AT WORK ON A TYPICAL DAY. PLEASE CONFIRM WITH SP THAT OVER 4 HOURS IS CORRECT.

HARD EDIT: LESS THAN 10 MINUTES OR 24 HOURS OR MORE.

ERROR MESSAGE: EL TIEMPO DEBE SER 10 MINUTOS O MÁS , PERO MENOS DE 24 HORAS.

|_|_|_|

ANOTE LA CANTIDAD DE MINUTOS U HORAS

REFUSED 7777 (PAQ.620)

DON'T KNOW 9999 (PAQ.620)

|_|

ENTER UNIT

MINUTOS 1

HORAS..... 2

PAQ.620 ¿Incluye {su trabajo/el trabajo de SP} actividades de intensidad **moderada** que causan **pequeños aumentos** del ritmo de la respiración o de los latidos del corazón tales como caminar rápidamente, acarrear o levantar cargas ligeramente pesadas por **al menos 10 minutos seguidos**?

YES 1

NO 2 (PAQ.635)

REFUSED 7 (PAQ.635)

DON'T KNOW 9 (PAQ.635)

PAQ.625 En una semana típica, ¿cuántos días hace {usted/SP} actividades de intensidad **moderada** como parte de su trabajo?

PROBE IF NEEDED: La actividad de intensidad moderada causa pequeños aumentos del ritmo de la respiración o de los latidos del corazón y se hace **por al menos 10 minutos seguidos**.

INTERVIEWER: REMEMBER, WE ARE ONLY ASKING ABOUT WORK AND CHORES.

HARD EDIT: LESS THAN 1 DAY OR MORE THAN 7 DAYS
ERROR MESSAGE: LA CANTIDAD DE DÍAS DEBE SER ENTRE 1 Y 7.

ANOTE LA CANTIDAD DE DÍAS

REFUSED 77 (PAQ.635)
DON'T KNOW 99 (PAQ.635)

PAQ.630 Q/U ¿Cuánto tiempo pasa {usted/SP} haciendo actividades de intensidad **moderada** en el trabajo en un día típico?

PROBE IF NEEDED: Piense en un día típico en el cual hace actividades de intensidad moderada durante su trabajo.

PROBE IF NEEDED: La actividad de intensidad moderada causa pequeños aumentos del ritmo de la respiración o de los latidos del corazón y se hace **por al menos 10 minutos seguidos**.

INTERVIEWER: REMEMBER, WE ARE ONLY ASKING ABOUT WORK AND CHORES.

SOFT EDIT: >4 HOURS.
ERROR MESSAGE: INTERVIEWER, YOU HAVE RECORDED THAT THE SP SPENDS MORE THAN 4 HOURS DOING MODERATE-INTENSITY ACTIVITIES AT WORK ON A TYPICAL DAY. PLEASE CONFIRM WITH SP THAT OVER 4 HOURS IS CORRECT.

HARD EDIT: LESS THAN 10 MINUTES OR 24 HOURS OR MORE.
ERROR MESSAGE: EL TIEMPO DEBE SER 10 MINUTOS O MÁS , PERO MENOS DE 24 HORAS.

ANOTE LA CANTIDAD DE MINUTOS U HORAS

REFUSED 7777 (PAQ.635)
DON'T KNOW 9999 (PAQ.635)

ENTER UNIT

MINUTOS 1
HORAS..... 2

PAQ.635 Las siguientes preguntas excluyen las actividades físicas en el trabajo que usted ya me ha mencionado. Ahora quisiera preguntarle acerca de la manera habitual por la cual {usted/SP} se traslada de un lugar a otro. Por ejemplo para ir a la escuela, de compras o al trabajo.

En una semana típica, ¿camina o usa una bicicleta {usted/SP} **al menos 10 minutos seguidos** para ir de un lugar a otro?

- YES 1
- NO 2 (PAQ.650)
- REFUSED 7 (PAQ.650)
- DON'T KNOW 9 (PAQ.650)

PAQ.640 En una semana típica, ¿cuántos días camina o usa una bicicleta {usted/SP} **al menos 10 minutos seguidos** para ir de un lugar a otro?

HARD EDIT: LESS THAN 1 DAY OR MORE THAN 7 DAYS
ERROR MESSAGE: LA CANTIDAD DE DÍAS DEBE SER ENTRE 1 Y 7.

ANOTE LA CANTIDAD DE DÍAS

- REFUSED 77 (PAQ.650)
- DON'T KNOW 99 (PAQ.650)

PAQ.645 Q/U En un día típico, ¿cuánto tiempo pasa {usted/SP} caminando o montando en bicicleta para trasladarse?

PROBE IF NEEDED: Piense en un día típico en el cual camina o monta en bicicleta para trasladarse.

SOFT EDIT: >4 HOURS.
ERROR MESSAGE: INTERVIEWER, YOU HAVE RECORDED THAT THE SP SPENDS MORE THAN 4 HOURS WALKING OR BICYCLING TO GET TO AND FROM PLACES ON A TYPICAL DAY. PLEASE CONFIRM WITH SP THAT OVER 4 HOURS IS CORRECT.

HARD EDIT: LESS THAN 10 MINUTES OR 24 HOURS OR MORE.
ERROR MESSAGE: EL TIEMPO DEBE SER 10 MINUTOS O MÁS, PERO MENOS DE 24 HORAS.

ANOTE LA CANTIDAD DE MINUTOS U HORAS

- REFUSED 7777 (PAQ.650)
- DON'T KNOW 9999 (PAQ.650)

ENTER UNIT

- MINUTOS 1
- HORAS..... 2

PAQ.650 Las siguientes preguntas excluyen las actividades del trabajo y de transporte que usted ya me ha mencionado. Ahora quisiera preguntarle acerca de deportes y actividades físicas para estar en buen estado físico y actividades de recreación.

En una semana típica, ¿hace {usted/SP} deportes o actividades físicas para estar en buen estado físico o actividades de recreación con intensidad **vigorosa** que le causan **grandes aumentos** del ritmo de la respiración o de los latidos del corazón, tales como correr o jugar básquetbol **al menos 10 minutos seguidos**?

- YES 1
- NO 2 (PAQ.665)
- REFUSED 7 (PAQ.665)
- DON'T KNOW 9 (PAQ.665)

PAQ.655 En una semana típica, ¿cuántos días hace {usted/SP} deportes o actividades físicas para estar en buen estado físico, o actividades de recreación de intensidad **vigorosa**?

PROBE IF NEEDED: La actividad de intensidad vigorosa causa grandes aumentos del ritmo de la respiración o de los latidos del corazón y se hace **por al menos 10 minutos seguidos**.

HARD EDIT: LESS THAN 1 DAY OR MORE THAN 7 DAYS
ERROR MESSAGE: LA CANTIDAD DE DÍAS DEBE SER ENTRE 1 Y 7.

ANOTE LA CANTIDAD DE DÍAS

- REFUSED 77 (PAQ.665)
- DON'T KNOW 99 (PAQ.665)

PAQ.660 Q/U En un día típico, ¿cuánto tiempo pasa {usted/SP} haciendo deportes o actividades físicas para estar en buen estado físico, o actividades de recreación de intensidad **vigorosa**?

PROBE IF NEEDED: Piense en un día típico en el cual hace deportes o actividades físicas para estar en buen estado físico, o actividades de recreación de intensidad vigorosa.

SOFT EDIT: >4 HOURS.

ERROR MESSAGE: INTERVIEWER, YOU HAVE RECORDED THAT THE SP SPENDS MORE THAN 4 HOURS DOING VIGOROUS-INTENSITY RECREATIONAL ACTIVITIES ON A TYPICAL DAY. PLEASE CONFIRM WITH SP THAT OVER 4 HOURS IS CORRECT.

HARD EDIT: LESS THAN 10 MINUTES OR 24 HOURS OR MORE.

ERROR MESSAGE: EL TIEMPO DEBE SER 10 MINUTOS O MÁS, PERO MENOS DE 24 HORAS.

|_|_|_|

ANOTE LA CANTIDAD DE MINUTOS U HORAS

REFUSED 7777 (PAQ.665)

DON'T KNOW 9999 (PAQ.665)

|_|

ENTER UNIT

MINUTOS 1

HORAS 2

PAQ.665 En una semana típica, ¿hace {usted/SP} algún deporte o alguna actividad física para estar en buen estado físico o actividad de recreación de intensidad **moderada** que causa **pequeños aumentos** del ritmo de la respiración o de los latidos del corazón, tales como caminar rápidamente, montar en bicicleta, nadar o jugar voleibol **al menos 10 minutos seguidos**?

YES 1

NO 2 (PAQ.680)

REFUSED 7 (PAQ.680)

DON'T KNOW 9 (PAQ.680)

PAQ.670 En una semana típica, ¿cuántos días hace {usted/SP} deportes o actividades físicas para estar en buen estado físico o actividades de recreación de **intensidad moderada**?

PROBE IF NEEDED: Los deportes o actividades físicas para estar en buen estado físico o actividades de recreación de intensidad moderada causan pequeños aumentos del ritmo de la respiración o de los latidos del corazón y se hacen **por al menos 10 minutos seguidos**.

HARD EDIT: LESS THAN 1 DAY OR MORE THAN 7 DAYS

ERROR MESSAGE: LA CANTIDAD DE DÍAS DEBE SER ENTRE 1 Y 7.

|_|_|

ANOTE LA CANTIDAD DE DÍAS

REFUSED 77 (PAQ.680)

DON'T KNOW 99 (PAQ.680)

PAQ.675 Q/U En un día típico, ¿cuánto tiempo pasa {usted/SP} haciendo deportes o actividades físicas para estar en buen estado físico, o actividades de recreación con intensidad **moderada**?

PROBE IF NEEDED: Piense en un día típico en el cual hace deportes o actividades físicas para estar en buen estado físico, o actividades de recreación con intensidad moderada.

PROBE IF NEEDED: Los deportes o actividades físicas para estar en buen estado físico, o actividades de recreación con intensidad moderada causan pequeños aumentos del ritmo de la respiración o de los latidos del corazón y se hacen **por al menos 10 minutos seguidos**.

SOFT EDIT: >4 HOURS.

ERROR MESSAGE: INTERVIEWER, YOU HAVE RECORDED THAT THE SP SPENDS MORE THAN 4 HOURS DOING MODERATE-INTENSITY RECREATIONAL ACTIVITIES ON A TYPICAL DAY. PLEASE CONFIRM WITH SP THAT OVER 4 HOURS IS CORRECT.

HARD EDIT: LESS THAN 10 MINUTES OR 24 HOURS OR MORE.

ERROR MESSAGE: EL TIEMPO DEBE SER 10 MINUTOS O MÁS, PERO MENOS DE 24 HORAS.

|_|_|_|

ANOTE LA CANTIDAD DE MINUTOS U HORAS

REFUSED 7777 (PAQ.680)

DON'T KNOW 9999 (PAQ.680)

|_

ENTER UNIT

MINUTOS 1

HORAS..... 2

PAQ.680 Q/U La siguiente pregunta es acerca de sentarse en la escuela, el hogar, para ir y venir a lugares o con amigos, incluyendo el tiempo que pasa {sentado(M)/sentada(F)} frente a un escritorio, viajando en carro o (camión/autobús/bus), leyendo, jugando cartas o naipes, mirando televisión o usando una computadora. No incluya el tiempo que pasa durmiendo.

En un día típico, ¿cuánto tiempo pasa {usted/SP} usualmente {sentado(M)/sentada(F)}?

SOFT EDIT: 18 HOURS OR MORE AND LESS THAN 3 HOURS.
ERROR MESSAGE: PLEASE VERIFY TIMES OF 18 HOURS OR MORE OR LESS THAN 3 HOURS.
HARD EDIT: 24 HOURS OR MORE.
ERROR MESSAGE: THE TIME SHOULD BE LESS THAN 24 HOURS.

ANOTE LA CANTIDAD DE MINUTOS U HORAS

REFUSED 7777 (PAQ.710)
DON'T KNOW 9999 (PAQ.710)

ENTER UNIT

MINUTOS 1
HORAS..... 2

PAQ.710 Ahora le voy a preguntar primero acerca de ver televisión y después acerca del uso de la computadora.

Durante los últimos 30 días, en promedio, ¿cuántas **horas al día** se sentó {usted/SP} a ver televisión o videos? ¿Diría usted que...?

menos de 1 hora,..... 0
1 hora, 1
2 horas,..... 2
3 horas,..... 3
4 horas,..... 4
5 horas o más, o 5
{Usted/SP} no ve televisión ni videos 8
REFUSED..... 77
DON'T KNOW 99

PAQ.715 Durante los últimos 30 días, en promedio, ¿cuántas **horas al día** usó {usted/SP} una computadora o jugó juegos de computadora fuera de la escuela, tales como Playstation, Nintendo DS u otros videojuegos portátiles? ¿Diría usted que...

- menos de 1 hora, 0
- 1 hora, 1
- 2 horas, 2
- 3 horas, 3
- 4 horas, o 4
- 5 horas o más, o..... 5
- {Usted/SP} no usa computadora fuera
del trabajo o de la escuela 8
- REFUSED 77
- DON'T KNOW 99

HELP SCREEN: Si SP ve televisión o videos al mismo tiempo que trabaja en la computadora, cuente este tiempo como ver televisión o videos.

PAQ.722 Para las siguientes preguntas, piense acerca de deportes, lecciones, o actividades físicas que {haya(SE)/SP haya} hecho durante los **últimos 7 días**. Por favor no incluya cosas que hizo durante el día de escuela, tal como durante la clase de educación física o gimnasia.

¿{Hizo usted(SE)/Hizo SP} alguna actividad física durante los **últimos 7 días**?

- YES 1
- NO 2 (PAQ.731)
- REFUSED 7 (PAQ.731)
- DON'T KNOW 9 (PAQ.731)

PAQ.724 Durante los **últimos 7 días**, ¿qué actividades físicas {hizo(SE)/hizo SP}? No incluya actividades que hizo durante la clase de educación física o gimnasia.

[PROBE: ¿{Hizo usted(SE)/hizo él(MPR)/hizo ella(FPR)} alguna otra actividad física?]

CODE ALL THAT APPLY

AERÓBICOS/LEVANTAMIENTO DE PESAS/ GIMNASIA/EJERCICIO	1
BÉISBOL/SÓFTBOL/CATCH/PITCHING	2
BALONCESTO	3
CICLISMO/CICLISMO SOBRE TIERRA/CICLISMO DE MONTAÑA	4
EQUIPO DE PORRISTAS O ANIMADORAS	5
BAILE/DANZA	6
HOCKEY SOBRE CÉSPED/HOCKEY EN LA/ CALLE/HOCKEY SOBRE RUEDAS	7
FÚTBOL AMERICANO	8
PLATILLO VOLADOR/"FRISBEE"/"ULTIMATE FRISBEE"	29
GOLF	9
GIMNASIA/ACROBACIA	10
CAMINATA	11
HOCKEY SOBRE HIELO	12
PATINAJE SOBRE HIELO	13
SALTAR CUERDA	14
LACROSSE	15
ARTES MARCIALES (KARATE/TAE KWON DO/ JUDO, ETC.)	16
JUEGOS (PROBE: ¿ESTUVO USTED FÍSICAMENTE ACTIVO(A)? SI NO, NO LO CUENTE)	17
JUEGOS Y ACTIVIDADES DE PATIO O DE RECREO	30
PATINAJE SOBRE RUEDAS	18
CORRER/TROTAR	19
ANDAR EN PATINETE (PROBE: ¿TIENE MOTOR? SI TIENE, NO LO CUENTE)	20
PATINETA/MONOPATÍN	21
FÚTBOL (SOCCER)	22
NATACIÓN	23
TENIS	24
ATLETISMO (CAMPO Y PISTA)	25
TRAMPOLÍN DE RESORTES/ PLATAFORMA DE RESORTES PARA SALTO	31
VÓLEIBOL	26
CAMINATA/PASEO	27
LUCHA LIBRE	28
OTHER (SPECIFY)	91
REFUSED	77
DON'T KNOW	99

PAQ.731 Durante los **últimos 7 días**, ¿cuántos días jugó {usted/SP} juegos de video **activos** tales como Wii Sports, Wii Fit, Xbox 360, Xbox Kinect, Playstation 3 o “Dance Dance Revolution”?

0 días.....	0 (PAQ.677)
1 día	1
2 días	2
3 días	3
4 días.....	4
5 días.....	5
6 días.....	6
7 días.....	7
REFUSED	77
DON'T KNOW	99

PAQ.733 En promedio, ¿cuánto tiempo jugó {usted/SP} estos juegos de video **activos**?
 Q/U

|_|_|_|
 ENTER NUMBER (OF MINUTES OR HOURS)

REFUSED	777 (PAQ.677)
DON'T KNOW	999 (PAQ.677)

ENTER UNIT

MINUTES	1
HOURS.....	2

SOFT EDIT: IF THE HOURS EXCEED 4 SAY UNUSUAL.
 SOFT EDIT: IF THE MINUTES ARE LESS THAN 10 CONFIRM THAT IT IS MINUTES NOT HOURS.

PAQ.677 En esta pregunta, se pueden incluir actividades que se hicieron en la escuela. Durante los **últimos 7 días**, ¿cuántos días {hizo usted(SE)/hizo SP} ejercicio o una actividad física, por al menos 20 minutos, que le hizo sudar y respirar rápido, tal como jugar baloncesto o fútbol, correr, nadar, montar rápido en bicicleta, bailar ritmos rápidos o actividades similares?

0 días.....	0
1 día	1
2 días.....	2
3 días.....	3
4 días.....	4
5 días.....	5
6 días.....	6
7 días.....	7
REFUSED	77
DON'T KNOW	99

PAQ.678 Durante los **últimos 7 días**, ¿cuántos días {hizo(SE)/hizo SP} ejercicios para fortalecer los músculos, tal como flexiones de brazos (lagartijas/plancha), ejercicios abdominales o levantamiento de pesas?

- 0 días..... 0
- 1 día 1
- 2 días..... 2
- 3 días..... 3
- 4 días..... 4
- 5 días..... 5
- 6 días..... 6
- 7 días..... 7
- REFUSED 77
- DON'T KNOW 99

PAQ.740 Las siguientes preguntas son acerca de actividades durante el año escolar. Si actualmente {usted/SP} no está en la escuela, piense en las actividades cuando {estaba(SE)/él estaba(MPR)/ella estaba(FPR)} en la escuela por última vez.

Durante el horario escolar, ¿se les permite a los estudiantes en {su escuela(SE)/la escuela de SP} usar las instalaciones y equipo de la escuela tales como el gimnasio, cancha de tenis, sala de pesas o las pistas durante la hora de almuerzo, el tiempo libre o un periodo de clase electivo?

- YES 1
- NO 2 (PAQ.744)
- REFUSED 7 (PAQ.744)
- DON'T KNOW 9 (PAQ.744)

PAQ.742 ¿{Usa usted(SE)/Usa SP} las instalaciones y el equipo de la escuela para hacer actividades físicas durante el horario escolar?

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

PAQ.744 ¿{Tiene usted(SE)/Tiene SP} clases de educación física o gimnasia durante los días de escuela?

- YES 1
- NO 2 (PAQ.755)
- REFUSED 7 (PAQ.755)
- DON'T KNOW 9 (PAQ.755)

PAQ.746 ¿Con qué **frecuencia** {tiene(SE)/tiene SP} clases de educación física o gimnasia?

- 1 día a la semana..... 1
- 2 días a la semana..... 2
- 3 días a la semana..... 3
- 4 días a la semana o..... 4
- Todos los días 5
- REFUSED 7
- DON'T KNOW 9

PAQ.748 En promedio, ¿cuánto **dura** la clase de educación física o gimnasia?

- MENOS DE 30 MINUTOS 1
- ENTRE 30 Y 45 MINUTOS..... 2
- MÁS DE 45 MINUTOS 3
- REFUSED 7
- DON'T KNOW 9

PAQ.755 Las siguientes actividades son actividades que se pueden hacer antes, durante o después de la escuela, **aparte** de la clase de educación física o gimnasia. Si actualmente {usted/SP} no está en la escuela, piense en sus actividades cuando {estaba(SE)/él estaba(MPR)/ella estaba(FPR)} en la escuela **por última vez.** ¿Participa {usted/SP} en deportes en la escuela o en otros equipos o grupos de actividades físicas?

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

PAQ.759 ¿En qué **deporte** en la escuela o en otros equipos o grupos de **actividad física** participa {usted/SP}?

CODE ALL THAT APPLY

HAND CARD PAQ1

- BÉISBOL/SÓFTBOL (BÉISBOL CON PELOTA BLANDA) 1
- BALONCESTO..... 2
- BOCHAS 3
- EQUIPO DE PORRISTAS O ANIMADORAS 4
- BAILE/DANZA..... 17
- FÚTBOL AMERICANO 5
- PLATILLO VOLADOR/"FRISBEE"/"ULTIMATE FRISBEE" 18
- GOLF 6
- GIMNASIA..... 7
- HOCKEY 8
- LACROSSE..... 9
- CORRER/TROTAR..... 19
- FÚTBOL (SOCCER) 10
- NATACIÓN/CLAVADOS (SALTOS)..... 11
- TENIS 12
- ATLETISMO (CAMPO Y PISTA)..... 13
- TRAMPOLÍN DE RESORTES/
PLATAFORMA DE RESORTES PARA SALTO 20
- VÓLEIBOL 14
- LUCHA LIBRE..... 15
- OTRO (SPECIFY) _____ 16
- REFUSED 77
- DON'T KNOW 99

BOX 1

CHECK ITEM PAQ.775:
IF MIA.065 = PROXY, SKIP TO PAQ.770.
OTHERWISE, CONTINUE.

PAQ.679 ¿Más o menos cuántos minutos {cree(SE)/cree SP} que debe hacer ejercicio o estar físicamente {activo(M)/activa(F)} todos los días para tener buena salud?

INTERVIEWER: THIS INCLUDES ALL ACTIVITIES LIKE BICYCLING, DANCING, AND PLAYING BASKETBALL THAT SP DOES AT SCHOOL, AT HOME, AND ANYWHERE ELSE SP GETS EXERCISE.

- MENOS DE 10 MINUTOS, 1
- ENTRE 10 Y 15 MINUTOS,..... 2
- ENTRE 16 Y 30 MINUTOS,..... 3
- ENTRE 31 Y 45 MINUTOS,..... 4
- ENTRE 46 Y 60 MINUTOS O 5
- MÁS DE 60 MINUTOS 6
- REFUSED 7
- DON'T KNOW 9

PAQ.750 Le voy a leer una afirmación y quiero que me diga si usted está totalmente de acuerdo, de acuerdo, ni de acuerdo ni en desacuerdo, en desacuerdo o totalmente en desacuerdo con la afirmación. Yo disfruto participando en la clase de educación física o gimnasia.

HAND CARD PAQ2

- TOTALMENTE DE ACUERDO 1
- DE ACUERDO..... 2
- NI DE ACUERDO NI EN DESACUERDO 3
- EN DESACUERDO 4
- TOTALMENTE EN DESACUERDO 5
- REFUSED 7
- DON'T KNOW 9

PAQ.770 El año pasado, ¿recibió {usted/SP} un premio por una prueba de estado físico, tal como el "President's Challenge" o el premio "Fitnessgram"?

- YES 1
- NO 2 (END OF SECTION)
- REFUSED 7 (END OF SECTION)
- DON'T KNOW 9 (END OF SECTION)

PAQ.772 ¿Qué premio recibió {usted/SP} por una Prueba de Estado Físico?

PROBE IF NEEDED: Ejemplos de un premio por una prueba de estado físico son "FITNESSGRAM" y el "PRESIDENT'S CHALLENGE".

CODE ALL THAT APPLY.

- Fitnessgram..... 1
- President's Challenge 2
- OTHER (SPECIFY) _____ 3
- REFUSED 7
- DON'T KNOW 9

WEIGHT HISTORY – WHQ
Target Group: SPs 8-15 years

BOX 1

CHECK ITEM WHQ.499:

- IF INTERVIEW DONE ONLY WITH SURVEY PARTICIPANT (CODED '1') IN RIQ.005 AND NO INTERPRETER USED (INT.001 CODED '2'), CONTINUE WITH WHQ.030mc.
- IF INTERVIEW DONE WITH SURVEY PARTICIPANT (CODED '1') IN RIQ.005 AND INTERPRETER USED (INT.001 CODED '1'), AND INTERPRETER SOURCE = 4, 5, 6, 7, OR 99 IN INT.007, CONTINUE WITH WHQ.030m.
- OTHERWISE, GO TO NEXT SECTION.

WHQ.030m ¿Consideras que hoy estás ...

- gordo(a) o con sobrepeso, 1
- muy delgado(a) o de bajo peso, o 2
- más o menos en el peso correcto? 3
- REFUSED 7
- DON'T KNOW 9

WHQ.500 ¿Cuál de las siguientes cosas estás tratando de hacer acerca de tu peso:

- bajar de peso, 1
- subir de peso, 2
- mantenerte en el mismo peso, o 3
- no estás tratando de hacer nada acerca de tu peso? 4
- REFUSED 7
- DON'T KNOW 9

WHQ.520 El año pasado, ¿con qué frecuencia trataste de bajar de peso? ¿Dirías...

- nunca, 1
- algunas veces, o 2
- muchas veces? 3
- REFUSED 7
- DON'T KNOW 9

BOX 2

CHECK ITEM WHQ.709:

- IF SP AGE >= 12, CONTINUE.
- OTHERWISE, GO TO END OF SECTION.

DBQ.895 A continuación voy a preguntarte acerca de comidas.
G/Q

Por comida, quiero decir **desayuno, comida/almuerzo y cena**. Durante los **últimos 7 días**, ¿cuántas comidas comiste que fueron **preparadas fuera del hogar** en lugares tales como restaurantes, lugares de comida rápida ("fast food"), puestos de comida, (tiendas/almacenes) de alimentos o de máquinas para vender comidas.

Por favor no incluyas comidas proporcionadas como parte de (una comida/un almuerzo) o desayuno escolar.

SOFT EDIT VALUES: 0-21

Error message: "Por favor verifica que comiste **más** de 3 comidas preparadas fuera del hogar **todos** los días durante los últimos 7 días.

|_|_|
ANOTE LA CANTIDAD

NINGUNA 2 (DBQ.905)
REFUSED 77 (DBQ.905)
DON'T KNOW 99 (DBQ.905)

DBQ.900 ¿Cuántas de esas comidas conseguiste en un lugar de comida rápida ("fast food") o pizzería?
G/Q

HARD EDIT: "DBQ.900 must be equal to or less than DBQ.895."

Error message: "La cantidad de comidas de un lugar de comida rápida ("fast food") o pizzería no puede ser mayor que la cantidad de comidas que comiste y que fueron preparadas fuera del hogar. ¿Puedes dar otra respuesta por favor?"

|_|_|
ANOTE LA CANTIDAD

NINGUNA 2 (DBQ.905)
REFUSED 7 (DBQ.905)
DON'T KNOW 9 (DBQ.905)

DBQ.905 G/Q/U Algunas tiendas de comestibles venden comidas “listas para comer”, tales como ensaladas, sopas, pollo, sándwiches/emparedados y verduras/vegetales cocidos(as) en sus secciones de ensaladas (“salad bar”) y “deli” (fiambrería).

Durante los **últimos 30 días**, ¿con qué frecuencia compraste comidas “listas para comer” en (una tienda/un almacén)? Por favor no incluyas alimentos congelados o enlatados.

|_|_|

ANOTE LA CANTIDAD DE VECES (AL DÍA, A LA SEMANA, O AL MES)

- NUNCA 2 (DBQ.910)
- REFUSED 7 (DBQ.910)
- DON'T KNOW 9 (DBQ.910)

ENTER UNIT

- DÍA 1
- SEMANA 2
- MES..... 3

DBQ.910 G/Q/U Durante los **últimos 30 días**, ¿con qué frecuencia comiste comidas o pizzas congeladas? Aquí hay unos ejemplos de comidas congeladas y de pizzas congeladas.

HAND CARD WHQ2

|_|_|

ANOTE LA CANTIDAD DE VECES (AL DÍA, A LA SEMANA, O AL MES)

- NUNCA 2 (END OF SECTION)
- REFUSED 7 (END OF SECTION)
- DON'T KNOW 9 (END OF SECTION)

ENTER UNIT

- DÍA 1
- SEMANA 2
- MES..... 3

Appendix A.3

The Spanish Audio-CASI

TOBACCO – SMQ
Target Group: SPs 12-17 (Audio-CASI)

SMQ.621_ Las siguientes preguntas son acerca de fumar cigarrillos y otros tipos de tabaco. No incluya (puros/tabacos) ni marihuana.

SMQ.621 Más o menos, ¿cuántos cigarrillos ha fumado en **toda su vida**?

INSTRUCTIONS TO SP:
Por favor seleccione. . .

- Nunca he fumado, ni siquiera una aspirada .. 1 (SMQ.681_)
- 1 o más aspiradas, pero nunca un cigarrillo completo..... 2 (SMQ.681_)
- 1 cigarrillo 3
- 2 a 5 cigarrillos 4
- 6 a 15 cigarrillos 5
- 16 a 25 cigarrillos 6
- 26 a 99 cigarrillos 7
- 100 o más cigarrillos..... 8
- REFUSED 77 (SMQ.681_)
- DON'T KNOW 99 (SMQ.681_)

SMQ.632 ¿Qué edad tenía usted cuando fumó un cigarrillo entero por **primera** vez?
SMQ.632a

INSTRUCTIONS TO SP:
Por favor anote una edad.

CAP I INSTRUCTION:
COMBINATION CONTROL: NUMBER PAD: ENTER AGE
ACCEPTABLE VALUES: 6-18 YEARS, REFUSED, DON'T KNOW.
IF R ENTERS 1-5, STORE 6 YEARS.

HARD EDIT: IF SMQ.632 > RIAAGEYR THEN ERROR.
ERROR MESSAGE: "Su respuesta es mayor que la edad anotada. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

HARD EDIT: IF SMQ.632 = 0 THEN ERROR.
ERROR MESSAGE: "Su respuesta debe ser mayor que 0. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

ANOTE LA EDAD

- EDAD 1-18
- REFUSED 77
- DON'T KNOW 99

SMQ.641 Durante los últimos **30 días**, ¿cuántos días fumó cigarrillos?

INSTRUCTIONS TO SP:

Por favor anote una cantidad o anote cero por ninguna.

CAPI INSTRUCTION:

ACCEPTABLE VALUES: 0-30, REFUSED, DON'T KNOW

HARD EDIT: IF SMQ.641 > 30 THEN ERROR.

ERROR MESSAGE: "Su respuesta no puede exceder 30 días. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

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ANOTE LA CANTIDAD DE DÍAS

REFUSED 77
DON'T KNOW 99

BOX 1A

CHECK ITEM SMQ.645:

- (IF 'NONE' (CODE '00'), 'REFUSED' (CODE '77'), OR 'DON'T KNOW' (CODE '99') IN SMQ.641) AND SMQ.621 NOT EQUAL TO 8, GO TO SMQ.681_.
- (IF 'NONE' (CODE '00'), 'REFUSED' (CODE '77'), OR 'DON'T KNOW' (CODE '99') IN SMQ.641) AND SMQ.621 = 8, CONTINUE.
- OTHERWISE, GO TO SMQ.650.

SMQ.050 ¿Cuánto tiempo hace que dejó de fumar cigarrillos?
Q/U

INSTRUCTIONS TO SP:

Por favor anote la cantidad de días, semanas, meses o años y después seleccione la unidad de tiempo.

|_|_|_|

ANOTE LA CANTIDAD (DE DÍAS, SEMANAS, MESES O AÑOS)

REFUSED 77777
DON'T KNOW 99999

ENTER UNIT

DÍAS 1
SEMANAS 2
MESES 3
AÑOS 4
REFUSED 7
DON'T KNOW 9

BOX 1A1

CHECK ITEM SMQ.051:

- IF SMQ.050 GREATER THAN OR EQUAL TO 1 YEAR (365 DAYS, 52 WEEKS, 12 MONTHS, OR 1 YEAR), CONTINUE.
- IF SMQ.050 LESS THAN 30 DAYS GO TO SMQ.650.
- OTHERWISE, GO TO SMQ.681_.

SMQ.055 ¿Qué edad tenía usted la **última vez** que fumó cigarrillos?

INSTRUCTIONS TO SP:
Por favor anote una edad.

CAPI INSTRUCTION:
HARD EDIT: IF RESPONSE IS LESS THAN SMQ.632, THEN ERROR.
ERROR MESSAGE: "Su respuesta es anterior a la edad en la cual dijo que fumó un cigarrillo completo por primera vez. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

|_|_|_|
ANOTE LA EDAD EN AÑOS

REFUSED 77777
DON'T KNOW 99999

BOX 1A2

CHECK ITEM SMQ.056:

- GO TO SMQ.681_.

SMQ.650 Durante los últimos **30 días**, en los días que usted fumó, ¿cuántos cigarrillos fumó al día?
SMQ.650a

INSTRUCTIONS TO SP:
Por favor anote una cantidad.

IF R SAYS 95 OR MORE CIGARETTES PER DAY, STORE 95.
ACCEPTABLE VALUES: 1-95, REFUSED, DON'T KNOW
HARD EDIT: IF SMQ.650 = 0 THEN ERROR.
ERROR MESSAGE: "Su respuesta debe ser mayor que 0. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

|_|_|_|
ANOTE LA CANTIDAD DE CIGARRILLOS

MÁS DE 1 PAQUETE DE
CIGARRILLOS 95
REFUSED 777
DON'T KNOW 999

SMQ.078 ¿Qué tan pronto fuma usted después de que despierta? ¿Diría...

Dentro de 5 minutos	1
De 6 a 30 minutos	2
De más de 30 minutos a 1 hora.....	3
De más de 1 hora a 2 horas	4
De más de 2 horas a 3 horas	5
De más de 3 horas a 4 horas	6
Más de 4 horas.....	7
REFUSED	77
DON'T KNOW	99

SMQ.661 Durante los **últimos 30 días**, en los días que fumó, ¿qué marca de cigarrillos fumó **usualmente**?

INSTRUCTIONS TO SP:

Por favor seleccione una de las siguientes opciones.

Marlboro	1
Camel	2
Newport.....	3
Otra marca.....	8
Ninguna marca en particular.....	9
Cigarrillos que uno mismo arma	10
REFUSED	77 (SMQ.670)
DON'T KNOW	99 (SMQ.670)

BOX 1B

CHECK ITEM SMQ.663:

IF MARLBORO BRAND (CODE '1'), GO TO SMQ.665A.

IF CAMEL (CODE '2'), GO TO SMQ.665B.

IF NEWPORT (CODE '3'), GO TO SMQ.665C.

IF OTHER BRAND (CODE '8'), GO TO SMQ.665D.

OTHERWISE, GO TO SMQ.670.

SMQ.665A Por favor, seleccione el paquete de Marlboro que más se parece a la marca que usted fuma. Si no encuentra el paquete que usted fuma, seleccione 'otro Marlboro.'

CAPRI INSTRUCTIONS: SHOW IMAGES OF MARLBORO RED, MARLBORO RED 83S, MARLBORO GOLD, MARLBORO GOLD MENTHOL, MARLBORO SILVER, MARLBORO BLACK, MARLBORO MENTHOL FF AND OTHER MARLBORO.

- MARLBORO RED 1 (SMQ.670)
- MARLBORO RED 83S 2 (SMQ.670)
- MARLBORO GOLD 3 (SMQ.670)
- MARLBORO GOLD MENTHOL 4 (SMQ.670)
- MARLBORO SILVER 5 (SMQ.670)
- MARLBORO BLACK 6 (SMQ.670)
- MARLBORO MENTHOL FF 7 (SMQ.670)
- OTHER MARLBORO 8 (SMQ.670)
- REFUSED 77 (SMQ.670)
- DON'T KNOW 99 (SMQ.670)

SMQ.665B Por favor, seleccione el paquete de Camel que más se parece a la marca que usted fuma. Si no encuentra el paquete que usted fuma, seleccione 'otro Camel.'

CAPRI INSTRUCTIONS: SHOW IMAGES OF CAMEL FILTERS, CAMEL BLUE, CAMEL CRUSH, CAMEL CRUSH BOLD, CAMEL MENTHOL, CAMEL MENTHOL SILVER, AND OTHER CAMEL.

- CAMEL FILTERS 1 (SMQ.670)
- CAMEL BLUE 2 (SMQ.670)
- CAMEL CRUSH 3 (SMQ.670)
- CAMEL CRUSH BOLD 4 (SMQ.670)
- CAMEL MENTHOL 5 (SMQ.670)
- CAMEL MENTHOL SILVER 6 (SMQ.670)
- OTHER CAMEL 7 (SMQ.670)
- REFUSED 77 (SMQ.670)
- DON'T KNOW 99 (SMQ.670)

SMQ.665C Por favor, seleccione el paquete de Newport que más se parece a la marca que usted fuma. Si no encuentra el paquete que usted fuma, seleccione 'otro Newport.'

CAPRI INSTRUCTIONS: SHOW IMAGES OF NEWPORT FF, NEWPORT MENTHOL GOLD AND OTHER NEWPORT.

- NEWPORT FF 1 (SMQ.670)
- NEWPORT MENTHOL GOLD 2 (SMQ.670)
- OTHER NEWPORT 3 (SMQ.670)
- REFUSED 77 (SMQ.670)
- DON'T KNOW 99 (SMQ.670)

SMQ.665D Por favor, seleccione el paquete que más se parece a la marca que usted fuma. Si no encuentra el paquete que usted fuma, seleccione 'otra marca de cigarrillos'.

CAPI INSTRUCTIONS: SHOW IMAGES OF BASIC FF, DORAL RED 100S, DORAL MENTHOL GOLD BOX 100S, GPC FF, GPC FF MENTHOL, KOOL BLUE MENTHOL 100S, KOOL TRUE MENTHOL, VIRGINIA SLIMS FF, AND OTHER BRAND.

BASIC FF	1
DORAL RED 100S	2
DORAL MENTHOL GOLD BOX 100S.....	3
GPC FF	4
GPC FF MENTHOL.....	5
KOOL BLUE MENTHOL 100S	6
KOOL TRUE MENTHOL	7
VIRGINIA SLIMS FF.....	8
OTHER BRAND	9
REFUSED	77
DON'T KNOW	99

SMQ.670 Durante los últimos **12 meses**, ¿ha dejado de fumar un día o más **debido a que usted estaba tratando de dejar de fumar?**

INSTRUCTIONS TO SP:
 Por favor seleccione . . .

Sí	1
No.....	2
REFUSED	7
DON'T KNOW	9

SMQ.681_ Las siguientes preguntas son acerca del uso de productos de tabaco en los últimos **5 días**.

SMQ.681 Durante los últimos **5 días**, incluyendo hoy, ¿fumó usted pipas de agua o "hookahs", cigarrillos, pipas, puros, puritos o cigarrillos electrónicos?

INSTRUCTIONS TO SP:
 Por favor seleccione . . .

CAPI INSTRUCTIONS:
 If SMQ.621 = 1 OR 2 or SMQ.641 = 00 then do not display {"cigarrillos, "}
 Recording Note: 2 wave files needed one with and one without the word cigarettes.

Sí	1
No.....	2 (SMQ.851)
REFUSED	7 (SMQ.851)
DON'T KNOW	9 (SMQ.851)

BOX 1C

CHECK ITEM SMQ.850:

- IF SMQ.621 = 1 OR 2 or SMQ.641 = 00, GO TO SMQ.692B
- OTHERWISE, CONTINUE WITH SMQ.692A.

SMQ.692A ¿Cuál de estos productos fumó? (CHECK ALL THAT APPLY)

INSTRUCTIONS TO SP:

Por favor seleccione todo lo que usó.

Cigarrillos.....	1 (BOX 2)
Pipas	2 (BOX 2)
Puros, puritos o tabacos	3 (BOX 2)
Pipas de agua o "hookahs".....	4 (BOX 2)
Cigarrillos electrónicos	5 (BOX 2)
REFUSED	77 (SMQ.851)
DON'T KNOW	99 (SMQ.851)

SMQ.692B ¿Cuál de estos productos fumó? (CHECK ALL THAT APPLY)

INSTRUCTIONS TO SP:

Por favor seleccione todo lo que usó.

Pipas	1
Puros, puritos o tabacos	2
Pipas de agua o "hookahs".....	3
Cigarrillos electrónicos	4
REFUSED	77 (SMQ.851)
DON'T KNOW	99 (SMQ.851)

BOX 2

CHECK ITEM SMQ.701:

- IF 'CIGARETTES' (CODE 1) IN SMQ.692A, GO TO SMQ.710.
- IF 'PIPES' (CODE 2) IN SMQ.692A OR (CODE 1) IN SMQ.692B, GO TO SMQ.740.
- IF 'CIGARS' (CODE 3) IN SMQ.692A OR (CODE 2) IN SMQ.692B, GO TO SMQ.771.
- IF 'WATER PIPE OR HOOKAH' (CODE 4) IN SMQ.692A OR (CODE 3) IN SMQ.692B, GO TO SMQ.845.
- IF 'E-CIGARETTE' (CODE 5) IN SMQ.692A OR (CODE 4) IN 692B, GO TO SMQ.849.

SMQ.710 Durante los últimos **5 días**, incluyendo hoy, ¿cuántos días fumó usted cigarrillos?

INSTRUCTIONS TO SP:
Por favor anote una cantidad.

CAPI INSTRUCTIONS:
HARD EDIT: IF SMQ.710 < 1 OR SMQ.710 > 5 THEN ERROR.
ERROR MESSAGE: "Por favor anote un número entre 1 y 5. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

ANOTE LA CANTIDAD DE DÍAS

REFUSED 7
DON'T KNOW 9

SMQ.720 Durante los últimos **5 días**, incluyendo hoy, en los días que fumó, ¿cuántos cigarrillos fumó usted cada día?
SMQ.720a

INSTRUCTIONS TO SP:
Por favor anote una cantidad.

CAPI INSTRUCTION:
IF R SAYS 95 OR MORE CIGARETTES PER DAY, STORE 95.
HARD EDIT: IF SMQ.720 = 0 THEN ERROR.
ERROR MESSAGE: "Su respuesta debe ser mayor que 0. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

ANOTE LA CANTIDAD DE CIGARRILLOS

MÁS DE 1 PAQUETE DE
CIGARRILLOS 95
REFUSED 777
DON'T KNOW 999

SMQ.725 ¿Cuándo fumó usted su último cigarrillo? ¿Fue esto. . .

Hoy 1
Ayer 2
Hace de 3 a 5 días 3
REFUSED 7
DON'T KNOW 9

BOX 3

CHECK ITEM SMQ.731:

- IF 'PIPES' (CODE 2) IN SMQ.692A OR (CODE 1) IN SMQ.692B, GO TO SMQ.740.
- IF 'CIGARS' (CODE 3) IN SMQ.692A OR (CODE 2) IN SMQ.692B, GO TO SMQ.771.
- F 'WATER PIPE OR HOOKAH' (CODE 4) IN SMQ.692A OR (CODE 3) IN SMQ.692B, GO TO SMQ.845.
- IF 'E-CIGARETTE' (CODE 5) IN SMQ.692A OR (CODE 4) IN SMQ.692B, GO TO SMQ.849.
- OTHERWISE, GO TO SMQ.851.

SMQ.740 Durante los últimos **5 días**, incluyendo hoy, ¿cuántos días fumó usted pipa?

INSTRUCTIONS TO SP:

Por favor anote una cantidad.

CAPI INSTRUCTIONS:

HARD EDIT: IF SMQ.740 < 1 OR SMQ.740 > 5 THEN ERROR.

ERROR MESSAGE: "Por favor anote un número entre 1 y 5. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

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ANOTE LA CANTIDAD DE DÍAS

REFUSED 7

DON'T KNOW 9

BOX 4

CHECK ITEM SMQ.761:

- IF 'CIGARS' (CODE 3) IN SMQ.692A OR (CODE 2) IN SMQ.692B, GO TO SMQ.771.
- IF 'WATER PIPES OR HOOKAH' (CODE 4) IN SMQ.692A OR (CODE 3) IN SMQ.692B, GO TO SMQ.845.
- IF 'E-CIGARETTE' (CODE 5) IN SMQ.692A OR (CODE 4) IN SMQ.692B, GO TO SMQ.849.
- OTHERWISE, GO TO SMQ.851.

SMQ.771 Durante los últimos **5 días**, incluyendo hoy, ¿cuántos días fumó usted puros, puritos o tabacos?

INSTRUCTIONS TO SP:
Por favor anote una cantidad.

CAP I INSTRUCTIONS:
HARD EDIT: IF SMQ.771 < 1 OR SMQ.771 > 5 THEN ERROR.
ERROR MESSAGE: "Por favor anote un número entre 1 y 5. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

ANOTE LA CANTIDAD DE DÍAS

REFUSED 7
DON'T KNOW 9

BOX 5

CHECK ITEM SMQ.791:

- IF 'WATERPIPE' (CODE 4) IN SMQ.692A OR (CODE 3) IN SMQ.692B, GO TO SMQ.845.
- IF 'E-CIGARETTE' (CODE 5) IN SMQ.692A OR (CODE 4) IN SMQ.692B, GO TO SMQ.849
- OTHERWISE GO TO SMQ.851.

SMQ.845 Durante los últimos **5 días**, incluyendo hoy, ¿cuántos días fumó usted tabaco en una pipa de agua o "hookah"?

INSTRUCTIONS TO SP:
Por favor anote una cantidad.

CAP I INSTRUCTIONS:
HARD EDIT: IF SMQ.845 < 1 OR SMQ.845 > 5 THEN ERROR.
ERROR MESSAGE: "Por favor anote un número entre 1 y 5. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

ANOTE LA CANTIDAD DE DÍAS

REFUSED 7
DON'T KNOW 9

BOX 6

CHECK ITEM SMQ.847:

- IF 'E-CIGARETTE' (CODE 5) IN SMQ.692A OR (CODE 4) IN SMQ.692B, GO TO SMQ.849.
- OTHERWISE GO TO SMQ.851.

SMQ.849 Durante los últimos **5 días**, incluyendo hoy, ¿cuántos días fumó usted un cigarrillo electrónico?

INSTRUCTIONS TO SP:
Por favor anote una cantidad.

CAPI INSTRUCTIONS:
IF SMQ.849 < 1 OR SMQ.849 > 5 THEN ERROR.
ERROR MESSAGE: "Por favor anote un número entre 1 y 5. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

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ANOTE LA CANTIDAD DE DÍAS

REFUSED 7
DON'T KNOW 9

SMQ.851 Los productos de tabaco que no se fuman se ponen en la boca o la nariz e incluyen productos como el tabaco de mascar, el "snuff" o rapé o sea tabaco en polvo, el "snus" o productos que se disuelven.

SMQ.851 Durante los últimos **5 días**, incluyendo hoy, ¿usó usted algún producto de tabaco el cual no se fuma?

INSTRUCTIONS TO SP:
No incluya productos que reemplazan la nicotina, tales como parches, chicle, pastillas de chupar o aerosoles los cuales se consideran productos que ayudan a dejar de fumar.

Por favor seleccione . . .

CAPI INSTRUCTIONS:

Yes 1
No 2 (END OF SECTION)
REFUSED 7 (END OF SECTION)
DON'T KNOW 9 (END OF SECTION)

SMQ.853 ¿Cuáles de estos productos usó usted? (CHECK ALL THAT APPLY)

INSTRUCTIONS TO SP:

Por favor seleccione todos los productos que usó

- Tabaco de mascar 1
- Snuff o rapé (tabaco en polvo) 2
- Snus 3
- Productos que se disuelven..... 4
- REFUSED 7 (END OF SECTION)
- DON'T KNOW 9 (END OF SECTION)

BOX 7

CHECK ITEM SMQ.855:

- IF 'CHEWING' (CODE 1) IN SMQ.853, GO TO SMQ.800.
- IF 'SNUFF' (CODE 2) IN SMQ.853, GO TO SMQ.817.
- IF 'SNUS' (CODE 3) IN SMQ.853, GO TO SMQ.857.
- IF 'DISSOLVABLES' (CODE 4) IN SMQ.853, GO TO SMQ.861.

SMQ.800 Durante los últimos **5 días**, incluyendo hoy, ¿cuántos días usó {usted(SE)/él(MPR)/ella(FPR)} tabaco de mascar, tal como Redman, Levi Garrett o Beechnut?.

INSTRUCTIONS TO SP:

Por favor anote una cantidad.

CAPI INSTRUCTIONS:

HARD EDIT: IF SMQ.800 < 1 OR SMQ.800 > 5 THEN ERROR.

ERROR MESSAGE: "Por favor anote un número entre 1 y 5. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

|__|

ANOTE LA CANTIDAD DE DÍAS

- REFUSED 7
- DON'T KNOW 9

BOX 8

CHECK ITEM SMQ.818:

- IF 'SNUFF' (CODE 2) IN SMQ.853, GO TO SMQ.817.
- IF 'SNUS' (CODE 3) IN SMQ.853, GO TO SMQ.857.
- IF 'DISSOLVABLES' (CODE 4) IN SMQ.853, GO TO SMQ.861.
- OTHERWISE, GO TO END OF SECTION.

SMQ.817 Durante los últimos **5 días**, incluyendo hoy, ¿cuántos días usó usted rapé, tal como Skoal, Skoal Bandits, o Copenhagen?

INSTRUCTIONS TO SP:
Por favor anote una cantidad.

CAP I INSTRUCTIONS:
HARD EDIT: IF SMQ.817 < 1 OR SMQ.817 > 5 THEN ERROR.
ERROR MESSAGE: "Por favor anote un número entre 1 y 5. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

ANOTE LA CANTIDAD DE DÍAS

REFUSED 7
DON'T KNOW 9

BOX 9

CHECK ITEM SMQ.821:

- IF 'SNUS' (CODE 3) IN SMQ.853, GO TO SMQ.857.
- IF 'DISSOLVABLES' (CODE 4) IN SMQ.853, GO TO SMQ.861.
- OTHERWISE, GO TO END OF SECTION.

SMQ.857 Durante los últimos **5 días**, incluyendo hoy, ¿cuántos días usó usted snus?

INSTRUCTIONS TO SP:
Por favor anote una cantidad.

CAP I INSTRUCTIONS:
HARD EDIT: IF SMQ.857 < 1 OR SMQ.857 > 5 THEN ERROR.
ERROR MESSAGE: "Por favor anote un número entre 1 y 5. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

ANOTE LA CANTIDAD DE DÍAS

REFUSED 7
DON'T KNOW 9

BOX 10

CHECK ITEM SMQ.859:

- IF 'DISSOLVABLES' (CODE 4) IN SMQ.853, GO TO SMQ.861.
OTHERWISE, GO TO END OF SECTION.

SMQ. 861 Durante los últimos **5 días**, incluyendo hoy, ¿cuántos días usó usted productos de tabaco que se disuelven tales como *strips* o tiritas u *orbs* o pastillas?

INSTRUCTIONS TO SP:
Por favor anote una cantidad.

CAP I INSTRUCTIONS:
HARD EDIT: IF SMQ.861 < 1 OR SMQ.861 > 5 THEN ERROR.
ERROR MESSAGE: "Por favor anote un número entre 1 y 5. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

|__|

ANOTE LA CANTIDAD DE DÍAS

REFUSED 7
DON'T KNOW 9

ALCOHOL USE – ALQ
Target Group: SPs 12-17 (Audio-CASI)

ALQ.010 _ Las siguientes preguntas son acerca del uso de alcohol. Esto incluye cerveza, vino, sangría y licores tales como ron, ginebra, vodka o wiskey. Esto no incluye tomar unos pocos sorbos de vino con propósitos religiosos.

ALQ.010 ¿Qué edad tenía usted cuando se tomó su **primera** bebida alcohólica, que no fueran unos pocos sorbos?

INSTRUCTIONS TO SP:

Por favor seleccione una de las siguientes opciones.

HARD EDIT: If (RIAAGEYR < 17 and ALQ.010 = 7) OR (RIAAGEYR < 15 and ALQ.010 in (6, 7)) OR (RIAAGEYR < 13 and ALQ.010 in (5, 6, 7)) then ERROR

Error message: “Su respuesta es mayor que la edad anotada. Por favor toque el botón “Atrás”, toque “Borrar” y hágalo de nuevo.”

- Nunca me he tomado una bebida alcohólica que no fueran unos pocos sorbos 1 (END OF SECTION)
- 8 años de edad o más joven..... 2
- 9 o 10 años de edad..... 3
- 11 o 12 años de edad..... 4
- 13 o 14 años de edad..... 5
- 15 o 16 años de edad..... 6
- 17 años de edad o mayor..... 7
- REFUSED 77
- DON'T KNOW 99

ALQ.022 Durante su vida, ¿cuántos días se ha tomado al menos una bebida alcohólica?

INSTRUCTIONS TO SP:

Por favor seleccione una de las siguientes opciones.

- 1 o 2 días..... 2
- 3 a 9 días..... 3
- 10 a 19 días..... 4
- 20 a 39 días..... 5
- 40 a 99 días..... 6
- 100 o más días..... 7
- REFUSED 77
- DON'T KNOW 99

ALQ.031 Durante los últimos 30 días, ¿cuántos días se ha tomado al menos una bebida alcohólica?

INSTRUCTIONS TO SP:

Por favor seleccione una de las siguientes opciones.

HARD EDIT: If (ALQ.022 = 2 and ALQ.031 in (3,4,5,6,7)) or (ALQ.022 =3 and ALQ.031 in (5,6,7)) or (ALQ.022 = 4 and ALQ.031 in (6,7)) then ERROR

Error message: "Su respuesta no es consistente con su consumo en toda la vida. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

0 días.....	1 (END OF SECTION)
1 o 2 días.....	2
3 a 5 días.....	3
6 a 9 días.....	4
10 a 19 días.....	5
20 a 29 días.....	6
Los 30 días.....	7
REFUSED	77
DON'T KNOW	99

ALQ.042 Durante los últimos 30 días, ¿cuántos días se ha tomado {DISPLAY NUMBER} bebidas alcohólicas seguidas, es decir, en un par de horas?

INSTRUCTIONS TO SP:

Por favor seleccione una de las siguientes opciones.

CAPI INSTRUCTION:

IF SP = MALE, DISPLAY = 5

IF SP = FEMALE, DISPLAY = 4

HARD EDIT: If (ALQ.031= 2 and ALQ.042 in (4,5,6,7)) or (ALQ.031=3 and ALQ.042 in (5,6,7)) or (ALQ.031 = 4 and ALQ.042 in (6,7)) or (ALQ.031 = 5 and ALQ.042 = 7) then ERROR

Error message: "Su respuesta no es consistente con su consumo en los últimos 30 días. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

0 días.....	1
1 día	2
2 días.....	3
3 a 5 días.....	4
6 a 9 días.....	5
10 a 19 días.....	6
20 o más días.....	7
REFUSED	77
DON'T KNOW	99

DRUG USE – DUQ
Target Group: SPs 12-69 (Audio-CASI)

DUQ.200_ Las siguientes preguntas son acerca del uso de drogas no recetadas por un médico. Por favor recuerde que sus respuestas a estas preguntas son estrictamente confidenciales.

BOX 1a
CHECK ITEM DUQ.201:
■ IF 60 – 69 YEARS GO TO DUQ.240.
■ ELSE CONTINUE.

DUQ.200 Las primeras preguntas son acerca de la marihuana y el hachís. La marihuana se conoce también como “mota” o “hierba”. La marihuana normalmente se fuma en cigarrillos, llamados “joints” o en una pipa. A veces se cocina con la comida. El hachís es una forma de marihuana que también se llama “hash”. Normalmente se fuma en pipa. Otra forma de hachís es el aceite de hachís.

Alguna vez, aunque sea una, ¿ha usado marihuana o hachís?

INSTRUCTIONS TO SP:
Por favor seleccione. . .

- | | |
|------------------|-------------|
| Sí | 1 |
| No | 2 (DUQ.240) |
| REFUSED | 7 (DUQ.240) |
| DON'T KNOW | 9 (DUQ.240) |

DUQ.210 ¿Qué edad tenía usted la **primera vez** que usó marihuana o hachís?

INSTRUCTIONS TO SP:
Por favor anote una edad.

ANOTE LA EDAD EN AÑOS

- | | |
|------------------|----|
| REFUSED | 77 |
| DON'T KNOW | 99 |

HARD EDIT VALUES: 0-59

Error message: “Su respuesta no puede exceder 59 años. Por favor toque el botón “Atrás”, toque “Borrar” y hágalo de nuevo.”

HARD EDIT: DUQ.210 must be equal to or less than current age.

Error message: “Su respuesta es mayor que la edad anotada. Por favor toque el botón “Atrás”, toque “Borrar” y hágalo de nuevo.”

DUQ.211 ¿Ha fumado usted alguna vez marihuana o hachís al menos **una vez al mes por más de un año?**

INSTRUCTIONS TO SP:
Por favor seleccione . . .

Sí	1
No	2 (DUQ.220G)
REFUSED	7 (DUQ.220G)
DON'T KNOW	9 (DUQ.220G)

DUQ.213 ¿Qué edad tenía cuando empezó a fumar marihuana o hachís al menos **una vez al mes durante un año?**

INSTRUCTIONS TO SP:
Por favor anote una edad.

ANOTE LA EDAD EN AÑOS

REFUSED	77
DON'T KNOW	99

HARD EDIT VALUES: 0-59

Error message: "Su respuesta no puede exceder 59 años. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

HARD EDIT: DUQ.213 must be equal to or less than current age.

Error message: "Su respuesta es mayor que la edad anotada. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

HARD EDIT: DUQ.213 must be equal to or greater than DUQ.210.

Error message: "Su respuesta es anterior a su respuesta sobre la edad en que usó marihuana o hachís por primera vez. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

DUQ.215 ¿Cuánto tiempo hace desde la **última vez** que usted fumó marihuana o hachís al menos **una vez al mes durante un año?**

INSTRUCTIONS TO SP: Por favor anote la cantidad de días, semanas, meses o años y después seleccione la unidad de tiempo.

CAPI INSTRUCTIONS:

HARD EDIT: If DUQ.215 equal to 0 weeks, 0 months, or 0 years, display error message.

Error message: "Su respuesta debe ser mayor que 0. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

|_|_|_|

ANOTE LA CANTIDAD DE DÍAS, SEMANAS, MESES O AÑOS

REFUSED 777
 DON'T KNOW 999

ENTER UNIT

Días 1
 Semanas 2
 Meses 3
 Años 4

DUQ.217 Durante el tiempo en que fumó marihuana o hachís, ¿con qué frecuencia la usaba **normalmente?**

INSTRUCTIONS TO SP:

Por favor seleccione. . .

Una vez al mes 1
 2-3 veces al mes..... 2
 4-8 veces al mes (más o menos 1-2 veces
 a la semana) 3
 9-24 veces al mes (más o menos 3-6 veces
 a la semana)..... 4
 25-30 veces al mes (una o más veces al día) 5
 REFUSED 7
 DON'T KNOW 9

DUQ.219 Durante el tiempo que fumó marihuana o hachís, ¿cuántos cigarrillos (joints) o pipas fumaba **normalmente** en un día?

INSTRUCTIONS TO SP:

Por favor seleccione. . .

1 al día..... 1
 2 al día..... 2
 3-5 al día 3
 Seis o más al día 4
 REFUSED 7
 DON'T KNOW 9

DUQ.220 ¿Cuánto tiempo hace desde la **última vez** que usted usó marihuana o hachís?
G/Q/U

INSTRUCTIONS TO SP:

Por favor anote la cantidad de días, semanas, meses o años y después seleccione la unidad de tiempo.

CAPI INSTRUCTIONS:

If SP Ref/DK then store 7/9 in DUQ.220G and DUQ.220U, 7/9-fill in DUQ.220Q.

If a value is entered in Quantity and Unit store Quantity in DUQ.220Q, Unit in DUQ.220U and 1 in DUQ.220G.

HARD EDIT: Response must be equal to or less than current age minus DUQ.210.

Error message: "Su respuesta al tiempo del uso de la última vez es anterior a la respuesta de la edad del uso por primera vez. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

HARD EDIT: If DUQ.220 equal to 0 weeks, 0 months, or 0 years, display error message.

Error message: "Su respuesta debe ser mayor que 0. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

|_|_|_|_|

ANOTE LA CANTIDAD DE DÍAS, SEMANAS, MESES O AÑOS

REFUSED 777

DON'T KNOW 999

ENTER UNIT

Días 1

Semanas 2

Meses 3

Años 4

BOX 1

CHECK ITEM DUQ.225:

- IF SP USED MARIJUANA WITHIN THE PAST MONTH (CODED 0-30 DAYS, OR 1-4 WEEKS, OR 1 MONTH IN DUQ.220), CONTINUE WITH DUQ.230.
- OTHERWISE, GO TO DUQ.240.

DUQ.230 Durante los **últimos 30 días**, ¿cuántos días usó usted marihuana o hachís?

INSTRUCTIONS TO SP:
Por favor anote una cantidad.

HARD EDIT VALUES: 1-30.

If DUQ.230 = 0, display error message: "Su respuesta debe ser mayor que 0. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

If DUQ.230 > 30, display error message: "Su respuesta no puede exceder 30 días. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

□□□□

ANOTE UNA CANTIDAD

REFUSED 77
DON'T KNOW 99

DUQ.240 ¿Ha usado **alguna vez** cocaína, "crack" cocaína, heroína, o metanfetamina?
(Target 12-69)

INSTRUCTIONS TO SP:
Por favor seleccione. . .

Sí 1
No 2 (DUQ.370_)
REFUSED 7 (DUQ.370_)
DON'T KNOW 9 (DUQ.370_)

DUQ.250_ Las siguientes preguntas son acerca de cocaína, incluidas todas las formas diferentes de cocaína, tales como en polvo, "crack", "free base" y pasta de coca.

DUQ.250 **Alguna vez**, aunque sea una, ¿ha usado cocaína, en alguna forma?
(Target 12-69)

INSTRUCTIONS TO SP:
Por favor seleccione. . .

Sí 1
No 2 (DUQ.290_)
REFUSED 7 (DUQ.290_)
DON'T KNOW 9 (DUQ.290_)

BOX 2a
CHECK ITEM DUQ.255:
■ IF 60 – 69 YEARS GO TO DUQ.290_.
■ ELSE CONTINUE.

DUQ.260 ¿Qué edad tenía usted la **primera vez** que usó cocaína, en alguna forma?

INSTRUCTIONS TO SP:
Por favor anote una edad.

ANOTE LA EDAD EN AÑOS

REFUSED 77
DON'T KNOW 99

HARD EDIT VALUES: 0-59

Error message: "Su respuesta no puede exceder 59 años. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

HARD EDIT: DUQ.260 must be equal to or less than current age.

Error message: "Su respuesta es mayor que la edad anotada. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

DUQ.270 ¿Cuánto tiempo hace desde la **última vez** que usted usó cocaína, en alguna forma?
G/Q/U

INSTRUCTIONS TO SP:
Por favor anote la cantidad de días, semanas, meses o años, y después seleccione la unidad de tiempo.

CAPI INSTRUCTIONS:

If SP Ref/DK then store 7/9 in DUQ.270G and DUQ.270U, 7/9-fill in DUQ.270Q.

If a value is entered in Quantity and Unit store Quantity in DUQ.270Q, Unit in DUQ.270U and 1 in DUQ.270G.

HARD EDIT: Response must be equal to or less than current age minus DUQ.260.

Error message: "Su respuesta al tiempo del uso de la última vez es anterior a la respuesta de la edad del uso por primera vez. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

HARD EDIT: If DUQ.270 equal to 0 weeks, 0 months, or 0 years, display error message.

Error message: "Su respuesta debe ser mayor que 0. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

ANOTE LA CANTIDAD DE DÍAS, SEMANAS, MESES O AÑOS

REFUSED 777
DON'T KNOW 999

ENTER UNIT

Días 1
Semanas 2
Meses 3
Años 4

DUQ.272 Durante toda su **vida**, ¿en total cuántas veces ha usado usted cocaína, en alguna forma?

INSTRUCTIONS TO SP:

Por favor seleccione una de las siguientes opciones.

Una vez	1
2-5 veces	2
6-19 veces	3
20-49 veces	4
50-99 veces	5
100 veces o más	6
REFUSED	77
DON'T KNOW	99

BOX 2

CHECK ITEM DUQ.275:

- IF SP USED COCAINE WITHIN THE PAST MONTH (CODED 0-30 DAYS, OR 1-4 WEEKS, OR 1 MONTH IN DUQ.270), CONTINUE WITH DUQ.280.
- OTHERWISE, GO TO DUQ.290_.

DUQ.280 Durante los **últimos 30 días**, ¿cuántos días usó usted cocaína en alguna forma?

INSTRUCTIONS TO SP:

Por favor anote una cantidad.

HARD EDIT VALUES: 1-30.

If DUQ.280 = 0, display error message: "Su respuesta debe ser mayor que 0. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

If DUQ.280 > 30, display error message: "Su respuesta no puede exceder 30 días. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

|_|_|

ANOTE UNA CANTIDAD

REFUSED	77
DON'T KNOW	99

DUQ.290_ Las siguientes preguntas son acerca de heroína.

DUQ.290 **Alguna vez**, aunque sea una, ¿ha usado heroína?

(Target 12-69)

INSTRUCTIONS TO SP:

Por favor seleccione. . .

Sí	1
No	2 (DUQ.330_)
REFUSED	7 (DUQ.330_)
DON'T KNOW	9 (DUQ.330_)

<p>BOX 3a</p> <p>CHECK ITEM DUQ.295:</p> <ul style="list-style-type: none"> ■ IF SP 60-69 YEARS GO TO DUQ.330_. ■ OTHERWISE, CONTINUE.
--

DUQ.300 ¿Qué edad tenía usted la **primera vez** que usó heroína?

INSTRUCTIONS TO SP:
Por favor anote una edad.

ANOTE LA EDAD EN AÑOS

REFUSED 77
DON'T KNOW 99

HARD EDIT VALUES: 0-59

Error message: "Su respuesta no puede exceder 59 años. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

HARD EDIT: DUQ.300 must be equal to or less than current age.

Error message: "Su respuesta es mayor que la edad anotada. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

DUQ.310 ¿Cuánto tiempo hace desde la **última vez** que usted usó heroína?
G/Q/U

INSTRUCTIONS TO SP:
Por favor anote la cantidad de días, semanas, meses o años y después seleccione la unidad de tiempo.

CAPI INSTRUCTIONS:

If SP Ref/DK then store 7/9 in DUQ.310G and DUQ.310U, 7/9-fill in DUQ.310Q.

If a value is entered in Quantity and Unit store Quantity in DUQ.310Q, Unit in DUQ.310U and 1 in DUQ.310G.

HARD EDIT: Response must be equal to or less than current age minus DUQ.300.

Error message: "Su respuesta al tiempo del uso de la última vez es anterior a la respuesta de la edad del uso por primera vez. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

HARD EDIT: If DUQ.310 equal to 0 weeks, 0 months, or 0 years, display error message.

Error message: "Su respuesta debe ser mayor que 0. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

ANOTE LA CANTIDAD DE DÍAS, SEMANAS, MESES O AÑOS

REFUSED 777
DON'T KNOW 999

ENTER UNIT

Días 1
Semanas 2
Meses 3
Años 4

BOX 3

CHECK ITEM DUQ.315:

- IF SP USED HEROIN WITHIN THE PAST MONTH (CODED 0-30 DAYS, OR 1-4 WEEKS, OR 1 MONTH IN DUQ.310), CONTINUE WITH DUQ.320.
- OTHERWISE, GO TO DUQ.330_.

DUQ.320 Durante los **últimos 30 días**, ¿cuántos días usó heroína?

INSTRUCTIONS TO SP:
Por favor anote una cantidad.

HARD EDIT VALUES: 1-30.

If DUQ.320 = 0, display error message: "Su respuesta debe ser mayor que 0. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

If DUQ.320 > 30, display error message: "Su respuesta no puede exceder 30 días. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

|_|_|

ANOTE UNA CANTIDAD

REFUSED 77

DON'T KNOW 99

DUQ.330_ Las siguientes preguntas son acerca de metanfetamina, conocida también como "crack", "cristal", "ice" o "speed".

DUQ.330 **Alguna vez**, aunque sea una, ¿ha usado metanfetamina?

(Target 12-69)

INSTRUCTIONS TO SP:
Por favor seleccione. . .

Sí 1

No 2 (DUQ.370_)

REFUSED 7 (DUQ.370_)

DON'T KNOW 9 (DUQ.370_)

BOX 4a

CHECK ITEM DUQ.335:

- IF SP 60-69 YEARS GO TO DUQ.370_
- OTHERWISE, CONTINUE.

DUQ.340 ¿Qué edad tenía usted la **primera vez** que usó metanfetamina?

INSTRUCTIONS TO SP:
Por favor anote una edad.

ANOTE LA EDAD EN AÑOS

REFUSED 77
DON'T KNOW 99

HARD EDIT VALUES: 0-59

Error message: "Su respuesta no puede exceder 59 años. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

HARD EDIT: DUQ.340 must be equal to or less than current age.

Error message: "Su respuesta es mayor que la edad anotada. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

DUQ.350 ¿Cuánto tiempo hace desde la **última vez** que usted usó metanfetamina?
G/Q/U

INSTRUCTIONS TO SP:
Por favor anote la cantidad de días, semanas, meses o años y después seleccione la unidad de tiempo.

CAPI INSTRUCTIONS:

If SP Ref/DK then store 7/9 in DUQ.350G and DUQ.350U, 7/9-fill in DUQ.350Q.

If a value is entered in Quantity and Unit store Quantity in DUQ.350Q, Unit in DUQ.350U and 1 in DUQ.350G.

HARD EDIT: Response must be equal to or less than current age minus DUQ.340.

Error message: "Su respuesta al tiempo del uso de la última vez es anterior a la respuesta de la edad del uso por primera vez. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

HARD EDIT: If DUQ.350 equal to 0 weeks, 0 months, or 0 years, display error message.

Error message: "Su respuesta debe ser mayor que 0. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

ANOTE LA CANTIDAD DE DÍAS, SEMANAS, MESES O AÑOS

REFUSED 777
DON'T KNOW 999

ENTER UNIT

Días 1
Semanas 2
Meses 3
Años 4

DUQ.352 Durante toda su **vida**, en total, ¿cuántas veces ha usado usted metanfetamina?

INSTRUCTIONS TO SP:

Por favor seleccione una de las siguientes opciones.

Una vez	1
2-5 veces	2
6-19 veces	3
20-49 veces	4
50-99 veces	5
100 veces o más	6
REFUSED	77
DON'T KNOW	99

BOX 4

CHECK ITEM DUQ.355:

- IF SP USED METHAMPHETAMINE WITHIN THE PAST MONTH (CODED 0-30 DAYS, OR 1-4 WEEKS, OR 1 MONTH IN DUQ.350), CONTINUE WITH DUQ.360.
- OTHERWISE, GO TO DUQ.370_.

DUQ.360 Durante los **últimos 30 días**, ¿cuántos días usó usted metanfetamina?

INSTRUCTIONS TO SP:

Por favor anote una cantidad.

HARD EDIT VALUES: 1-30.

If DUQ.360 = 0, display error message: "Su respuesta debe ser mayor que 0. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

If DUQ.360 > 30, display error message: "Su respuesta no puede exceder 30 días. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

|_|_|

ANOTE UNA CANTIDAD

REFUSED	77
DON'T KNOW	99

DUQ.370_ Las siguientes preguntas son acerca de las diferentes formas en que se pueden usar ciertas drogas.

DUQ.370 **Alguna vez**, aunque sea una, ¿ha usado una aguja para inyectarse una droga **no recetada** por un médico?
(Target 12-69)

INSTRUCTIONS TO SP:

Por favor seleccione. . .

Sí	1
No	2 (BOX 5)
REFUSED	7 (BOX 5)
DON'T KNOW	9 (BOX 5)

DUQ.380 ¿Cuál de las siguientes drogas se ha inyectado usted usando una aguja?
(Target 12-69)

INSTRUCTIONS TO SP:

Por favor seleccione todas las drogas que se ha inyectado.

CAPI INSTRUCTION:

SHOW ALL FIVE ITEMS ON SINGLE ACASI SCREEN

Cocaína	1
Heroína.....	2
Metanfetamina.....	3
Esteroides.....	4
Alguna otra droga	5
REFUSED	7
DON'T KNOW	9

DUQ.390 ¿Qué edad tenía usted la **primera vez** que usó una aguja para inyectarse cualquier droga no recetada por un médico?

(Target 12-69)

INSTRUCTIONS TO SP:

Por favor anote una edad.

ANOTE LA EDAD EN AÑOS

REFUSED	77
DON'T KNOW	99

HARD EDIT VALUES: 0-69

Error message: "Su respuesta no puede exceder 69 años. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

HARD EDIT: DUQ.390 must be equal to or less than current age.

Error message: "Su respuesta es mayor que la edad anotada. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

DUQ.400 ¿Cuánto tiempo hace desde la **última vez** que usted usó una aguja para inyectarse una droga no recetada
G/Q/U por un médico?
(Target 12-69)

INSTRUCTIONS TO SP:

Por favor anote la cantidad de días, semanas, meses, o años y después seleccione la unidad de tiempo.

CAPI INSTRUCTIONS:

If SP Ref/DK then store 7/9 in DUQ.400G and DUQ.400U, 7/9-fill in DUQ.400Q.

If a value is entered in Quantity and Unit store Quantity in DUQ.400Q, Unit in DUQ.400U and 1 in DUQ.400G.

HARD EDIT: Response must be equal to or less than current age minus DUQ.390.

Error message: "Su respuesta al tiempo del uso de la última vez es anterior a la respuesta de la edad del uso por primera vez. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

HARD EDIT: If DUQ.400 equal to 0 weeks, 0 months, or 0 years, display error message.

Error message: "Su respuesta debe ser mayor que 0. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

□□□□

ANOTE LA CANTIDAD DE DÍAS, SEMANAS, MESES O AÑOS

REFUSED 7777
DON'T KNOW 9999

ENTER UNIT

Días 1
Semanas 2
Meses 3
Años 4

DUQ.410 Durante toda su **vida**, en total, ¿cuántas veces ha usado una aguja para inyectarse drogas no recetadas
por un médico?
(Target 12-69)

INSTRUCTIONS TO SP:

Por favor seleccione una de las siguientes opciones.

Una vez 1 (BOX 5)
2-5 veces 2
6-19 veces 3
20-49 veces 4
50-99 veces 5
100 veces o más 6
REFUSED 77
DON'T KNOW 99

DUQ.420 Piense en el momento durante su vida en el cual se inyectó drogas **más frecuentemente**. ¿Con qué frecuencia se inyectaba en ese entonces?

(Target 12-69)

INSTRUCTIONS TO SP:

Por favor seleccione una de las siguientes opciones.

- Más de una vez al día 1
- Más o menos una vez al día..... 2
- Al menos una vez a la semana, pero no todos los días 3
- Al menos una vez al mes, pero no todas las semanas..... 4
- Menos de una vez al mes..... 5
- REFUSED 7
- DON'T KNOW 9

BOX 5

CHECK ITEM DUQ.426:

- IF SP 60-69 YEARS, GO TO END OF SECTION.
- IF SP HAS USED MARIJUANA (CODED '1') IN DUQ.200 OR SP HAS USED COCAINE, HEROIN, OR METHAMPHETAMINE (CODED '1') IN DUQ.240, OR SP HAS INJECTED ANY DRUG NOT PRESCRIBED BY A DOCTOR (CODED '1') IN DUQ.370, GO TO DUQ.430.
- OTHERWISE, GO TO END OF SECTION.

DUQ.430 ¿Ha estado usted **alguna vez** en un tratamiento para adicción a drogas o programa de rehabilitación de adicción a drogas?

INSTRUCTIONS TO SP:

Por favor seleccione. . .

- Sí 1
- No..... 2
- REFUSED 7
- DON'T KNOW 9

SEXUAL BEHAVIOR – (SXQ)
Target Group: Female SPs 14-69 (Audio-CASI)

SXQ.615_ El siguiente conjunto de preguntas es acerca de su historia sexual. Por relaciones sexuales, queremos decir sexo vaginal, oral o anal. Por favor recuerde que sus respuestas son estrictamente confidenciales.

BOX 1B
CHECK ITEM SXQ.773:
■ IF SP AGE GREATER THAN 17, GO TO SXQ.700.
■ OTHERWISE, CONTINUE.

SXQ.615 ¿Ha tenido **alguna vez algún** tipo de relación sexual?
(Target 14-17)

INSTRUCTIONS TO SP:
Por favor seleccione . . .

Sí	1
No.....	2 (END OF SECTION)
REFUSED	7 (END OF SECTION)
DON'T KNOW	9 (END OF SECTION)

SXQ.700 ¿Ha tenido **alguna vez** sexo vaginal, llamado también coito, con un hombre? Esto significa el pene de un hombre dentro de su vagina.
(Target 14-69)

INSTRUCTIONS TO SP:
Por favor seleccione . . .

Sí	1
No.....	2
REFUSED	7
DON'T KNOW	9

SXQ.703 ¿Le ha **hecho alguna vez** sexo oral a un hombre? Esto significa que usted pone la boca en el pene o los genitales de un hombre.
(Target 14-69)

INSTRUCTIONS TO SP:
Por favor seleccione . . .

Sí	1
No.....	2
REFUSED	7
DON'T KNOW	9

SXQ.706 ¿Ha tenido **alguna vez** sexo anal? Esto significa el contacto entre el pene de un hombre y su ano o trasero.
(Target 14-69)

INSTRUCTIONS TO SP:
Por favor seleccione . . .

- Sí 1
- No 2
- REFUSED 7
- DON'T KNOW 9

SXQ.709 ¿Ha tenido **alguna vez algún** tipo de relación sexual con una mujer? Por relaciones sexuales, queremos decir contacto sexual con la vagina o genitales de otra mujer.

INSTRUCTIONS TO SP:
Por favor seleccione . . .

- Sí 1
- No 2
- REFUSED 7
- DON'T KNOW 9

BOX 1A

CHECK ITEM SXQ.762:

- IF SP 60-69 YEARS AND SXQ.700 = 2 AND SXQ.703 = 2 AND SXQ.706 = 2 AND SXQ.709 = 2, GO TO END OF SECTION.
- IF SP 60-69 YEARS AND SXQ.703 = 1 AND SXQ.700 = 2 AND SXQ.706=2 AND SXQ.709 = 2, GO TO SXQ.618.
- IF SXQ.700, SXQ.706, AND SXQ.709 =2 AND SXQ.703 = 1, GO TO BOX 4.
- IF SXQ.700, SXQ.703, SXQ.706, AND SXQ.709 = 2, GO TO BOX 11.
- OTHERWISE, CONTINUE.

SXQ.618 ¿Qué edad tenía usted la primera vez que tuvo **algún** tipo de relación sexual, incluyendo {sexo vaginal, oral (Target 14-69) o anal/sexo vaginal o anal/sexo oral o vaginal/sexo oral o anal/sexo vaginal/sexo anal/sexo oral}?

INSTRUCTIONS TO SP:
Por favor anote una edad.

ENTER AGE IN YEARS

REFUSED 77
DON'T KNOW 99

CAP I INSTRUCTION:

IF SXQ.700 AND SXQ.703 = 1 AND SXQ.706 NOT EQUAL TO '1', DISPLAY {sexo oral o vaginal}.

IF SXQ.700 AND SXQ.709 = 1 AND SXQ.706 NOT EQUAL TO '1', DISPLAY {sexo oral o vaginal}.

IF SXQ.700 AND SXQ.706 = 1 AND SXQ.703 AND SXQ.709 NOT EQUAL TO '1',
DISPLAY {sexo vaginal o anal}.

IF SXQ.703 AND SXQ.706 = 1 AND SXQ.700 NOT EQUAL TO '1', DISPLAY {sexo oral o anal}.

IF SXQ.706 AND SXQ.709 = 1 AND SXQ.700 NOT EQUAL TO '1', DISPLAY {sexo oral o anal}.

IF SXQ.700 = 1 AND SXQ.703, SXQ.706, AND SXQ.709 NOT EQUAL TO '1', DISPLAY {sexo vaginal}.

IF SXQ.706 = 1 AND SXQ.700, SXQ.703, AND SXQ.709 NOT EQUAL TO '1', DISPLAY {sexo anal}.

IF SXQ.709 = 1 AND SXQ.700, AND SXQ.706 NOT EQUAL TO '1', DISPLAY {sexo oral}.

OTHERWISE, DISPLAY {sexo vaginal, oral o anal}.

HARD EDIT VALUES: 0-69

Error message: "Su respuesta no puede exceder 69 años. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

HARD EDIT: SXQ.618 must be equal to or less than current age.

Error message: "Su respuesta es mayor que la edad anotada. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

BOX 1

CHECK ITEM SXQ.701:

- IF SP 60-69 YEARS, AND SXQ.700 = 2 AND SXQ.703 = 2 AND SXQ.706 = 2 AND SXQ.709 = 1, GO TO END OF SECTION.
- IF SP 60-69 YEARS, GO TO SXQ.712.
- IF SXQ.703 = 1 AND SXQ.700 AND SXQ.706 = 2, GO TO BOX 4.
- IF SXQ.700 = 1 AND SXQ.703 AND SXQ.706 = 2, GO TO BOX 3.
- IF SXQ.709 = 1 AND SXQ.700, SXQ.703, AND SXQ.706 = 2, GO TO BOX 6.
- OTHERWISE, CONTINUE.

SXQ.712 En **toda su vida**, ¿con cuántos **hombres** ha tenido **algún** tipo de relación sexual?
(Target 14-69)

INSTRUCTIONS TO SP:
Por favor anote una cantidad.

ENTER NUMBER

REFUSED 77777
DON'T KNOW 99999

HARD EDIT: SXQ.712 must be greater than 0.
Error message: "Su respuesta no es consistente con sus respuestas anteriores acerca de sus compañeros sexuales. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

BOX 2

CHECK ITEM SXQ.715:

- IF SP 60-69 YEARS, GO TO END OF SECTION.
- OTHERWISE, GO TO SXQ.718

SXQ.718 En **los últimos 12 meses**, ¿con cuántos **hombres** ha tenido **algún** tipo de relación sexual?
(Target 14-69)

INSTRUCTIONS TO SP:
Por favor anote una cantidad o anote cero por ninguna.

ENTER NUMBER

REFUSED 77777
DON'T KNOW 99999

HARD EDIT: SXQ.718 must be equal to or less than SXQ.712.
Error message: "Su respuesta es mayor que la cantidad de parejas de sexo masculino que ha tenido en toda su vida. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

BOX 3

CHECK ITEM SXQ.721:

- IF SXQ.700 = 1, GO TO SXQ.724.
- OTHERWISE, GO TO BOX 4.

SXQ.724 En **toda su vida**, ¿con cuántos **hombres** ha tenido sexo **vaginal**? Sexo vaginal significa el pene de un hombre dentro de su vagina.
(Target 14-59)

INSTRUCTIONS TO SP:
Por favor anote una cantidad.

|_|_|_|_|

ENTER NUMBER

REFUSED 77777
DON'T KNOW 99999

HARD EDIT: SXQ.724 must be greater than zero.
Error message: "Su respuesta no es consistente con sus respuestas anteriores acerca de sus compañeros de sexo vaginal. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

HARD EDIT: SXQ.724 must be equal to or less than SXQ.712.

Error message: "Su respuesta es mayor que la cantidad de parejas de sexo masculino que ha tenido en toda su vida. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

SXQ.727 En los **últimos 12 meses**, ¿con cuántos **hombres** ha tenido sexo **vaginal**? Sexo vaginal significa el pene de un hombre dentro de su vagina.
(Target 14-59)

INSTRUCTIONS TO SP:
Por favor anote una cantidad o anote cero por ninguna.

|_|_|_|_|

ENTER NUMBER

REFUSED 77777
DON'T KNOW 99999

HARD EDIT: SXQ.727 must be equal to or less than SXQ.724.
Error message: "Su respuesta es mayor que la cantidad de sus compañeros de sexo vaginal de toda su vida. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

SOFT EDIT: SXQ.727 must be equal to or less than SXQ.718.
Error message: "Su respuesta es mayor que la cantidad de compañeros o compañeras sexuales que ha tenido en los últimos 12 meses. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

BOX 4

CHECK ITEM SXQ.730:

- IF SXQ.703 = 1, GO TO SXQ.621.
- OTHERWISE, GO TO BOX 6.

SXQ.621 ¿Qué edad tenía usted la primera vez que **le hizo** sexo oral a un hombre? Hacer sexo oral significa que (Target 14-59) usted pone la boca en el pene o los genitales de un hombre.

INSTRUCTIONS TO SP:
Por favor anote una edad.

ENTER AGE IN YEARS

REFUSED 77
DON'T KNOW 99

HARD EDIT VALUES: 0-59

Error message: "Su respuesta no puede exceder 59 años. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

HARD EDIT: SXQ.621 must be equal to or less than current age.

Error message: "Su respuesta es mayor que la edad anotada. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

HARD EDIT: SXQ.621 must be equal to or greater than SXQ.618

Error message: "Su respuesta es menor que su respuesta a la edad en la que tuvo por primera vez algún tipo de relación sexual."

SXQ.624 En **toda su vida** ¿a cuántos **hombres** les ha **hecho** sexo **oral**? (Target 14-59)

INSTRUCTIONS TO SP:
Por favor anote una cantidad.

ENTER NUMBER

REFUSED 77777
DON'T KNOW 99999

HARD EDIT: SXQ.624 must be greater than zero.

Error message: "Su respuesta no es consistente con sus respuestas anteriores acerca de sus compañeros de sexo oral. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo. "

HARD EDIT: SXQ.624 must be equal to or less than SXQ.712.

Error message: "Su respuesta es mayor que la cantidad de parejas de sexo masculino que ha tenido en toda su vida. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo. "

SXQ.627 En los **últimos 12 meses** ¿a cuántos **hombres** les ha **hecho** sexo **oral**?
(Target 14-59)

INSTRUCTIONS TO SP:

Por favor anote una cantidad o anote cero por ninguna.

ENTER NUMBER

REFUSED 77777
DON'T KNOW 99999

HARD EDIT: SXQ.627 must be equal to or less than SXQ.624.

Error message: "Su respuesta es mayor que la cantidad de compañeros de sexo oral de toda su vida. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

SOFT EDIT: SXQ.627 must be equal to or less than SXQ.718.

Error message: "Su respuesta es mayor que la cantidad de compañeros o compañeras sexuales que ha tenido en los últimos 12 meses. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

BOX 5

CHECK ITEM SXQ.765:

- IF SP HAD ONLY 1 LIFETIME ORAL SEX PARTNER (CODED '1') IN SXQ.624, GO TO BOX 6.
- OTHERWISE CONTINUE.

SXQ.630 ¿Cuánto tiempo hace desde la última vez que **le hizo** sexo **oral** a un **nuevo compañero sexual**? Un
(Target 14-59) nuevo compañero sexual es alguien con quien nunca antes había tenido relaciones sexuales.

INSTRUCTIONS TO SP:

Por favor anote la cantidad de días, semanas, meses o años y después seleccione la unidad de tiempo.

ENTER NUMBER (OF DAYS, WEEKS, MONTHS OR YEARS)

REFUSED 77777
DON'T KNOW 99999

ENTER UNIT

Días 1
Semanas 2
Meses 3
Años 4

HARD EDIT: Response must be equal to or less than current age minus SXQ.621.

Error message: "Su respuesta es anterior a su respuesta de la edad en que le hizo sexo oral a un hombre por primera vez. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

HARD EDIT: SXQ.630 must be equal to or less than current age.

Error message: "Su respuesta es mayor que la edad anotada. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

<p>BOX 6</p> <p>CHECK ITEM SXQ.733:</p> <ul style="list-style-type: none"> ■ IF SXQ.709 = 1, GO TO SXQ.736. ■ OTHERWISE, GO TO BOX 7.

SXQ.736 En **toda su vida**, ¿con cuántas **mujeres** ha tenido relaciones sexuales? Por relaciones sexuales, (Target 14-59) queremos decir contacto sexual con la vagina o genitales de otra mujer.

INSTRUCTIONS TO SP:
Por favor anote una cantidad.

|_|_|_|_|

ENTER NUMBER

REFUSED 77777
DON'T KNOW 99999

HARD EDIT: SXQ.736 must be greater than zero.
Error message: " Su respuesta no es consistente con sus respuestas anteriores acerca de sus relaciones sexuales con mujeres. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

SXQ.739 En **los últimos 12 meses**, ¿con cuántas **mujeres** ha tenido relaciones sexuales? Por relaciones sexuales, queremos decir contacto sexual con la vagina o genitales de otra mujer.

INSTRUCTIONS TO SP:
Por favor anote una cantidad o anote cero por ninguna.

|_|_|_|_|

ENTER NUMBER

REFUSED 77777
DON'T KNOW 99999

HARD EDIT: SXQ.739 must be equal to or less than SXQ.736.
Error message: "Su respuesta es mayor que la cantidad de compañeras sexuales de toda su vida. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

SXQ.741 ¿Le ha **hecho alguna vez** sexo **oral** a una **mujer**? Hacer sexo oral significa que usted pone la boca en la (Target 14-59) vagina o los genitales de otra mujer.

INSTRUCTIONS TO SP:
Por favor seleccione . . .

Sí	1
No	2 (BOX 7A)
REFUSED	7 (BOX 7A)
DON'T KNOW	9 (BOX 7A)

SXQ.633 ¿Qué edad tenía usted la primera vez que le **hizo** sexo oral a una mujer? Hacer sexo oral significa que (Target 14-59) usted pone la boca en la vagina o los genitales de una mujer.

INSTRUCTIONS TO SP:
Por favor anote una edad.

ENTER AGE IN YEARS

REFUSED 77
DON'T KNOW 99

HARD EDIT VALUES: 0-59

Error message: "Su respuesta no puede exceder 59 años. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

HARD EDIT: SXQ.633 must be equal to or less than current age.

Error message: "Su respuesta es mayor que la edad anotada. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

HARD EDIT: SXQ.633 must be equal to or greater than SXQ.618

Error message: "Su respuesta es menor que su respuesta a la edad en la que tuvo por primera vez algún tipo de relación sexual. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

SXQ.636 En **toda su vida**, ¿a cuántas **mujeres** les ha **hecho** sexo oral? (Target 14-59)

INSTRUCTIONS TO SP:
Por favor anote una cantidad.

ENTER NUMBER

REFUSED 77777
DON'T KNOW 99999

HARD EDIT: SXQ.636 must be greater than zero.

Error message: "Su respuesta no es consistente con sus respuestas anteriores acerca de sus compañeras de sexo oral. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

HARD EDIT: SXQ.636 must be equal to or less than SXQ.736.

Error message: "Su respuesta es mayor que la cantidad de compañeras sexuales de toda su vida. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

SXQ.639 En los **últimos 12 meses**, ¿a cuántas **mujeres** les ha **hecho sexo oral**?
(Target 14-59)

INSTRUCTIONS TO SP:

Por favor anote una cantidad o anote cero por ninguna.

ENTER NUMBER

REFUSED 77777
DON'T KNOW 99999

HARD EDIT: SXQ.639 must be equal to or less than SXQ.636.

Error message: "Su respuesta es mayor que la cantidad de compañeras de sexo oral de toda su vida. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

HARD EDIT: SXQ.639 must be equal to or less than SXQ.739.

Error message: "Su respuesta es mayor que la cantidad de parejas de sexo femenino que ha tenido en los últimos 12 meses. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

BOX 6B
CHECK ITEM SXQ.768:
■ IF SP HAD ONLY 1 LIFETIME ORAL SEX PARTNER (CODED '1') IN SXQ.636, GO TO BOX 7A .
■ OTHERWISE, CONTINUE.

SXQ.642 ¿Cuánto tiempo hace desde la última vez que **le hizo sexo oral** a una **nueva compañera sexual**? Una
(Target 14-59) nueva compañera sexual es alguien con quien nunca antes había tenido relaciones sexuales.

INSTRUCTIONS TO SP:

Por favor anote la cantidad de días, semanas, meses o años y después seleccione la unidad de tiempo.

ENTER NUMBER (OF DAYS, WEEKS, MONTHS OR YEARS)

REFUSED 77777
DON'T KNOW 99999

ENTER UNIT

Días 1
Semanas 2
Meses 3
Años 4

HARD EDIT: Response must be equal to or less than current age minus SXQ.633.

Error message: "Su respuesta es anterior a su respuesta de la edad en que le hizo sexo oral a una mujer por primera vez. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

HARD EDIT: SXQ.642 must be equal to or less than current age.

Error message: "Su respuesta es mayor que la edad anotada. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

BOX 7A

CHECK ITEM SXQ.744:

- IF SXQ.709 = 1 AND SXQ.700, SXQ.703, OR SXQ.706 = 1, THEN DISPLAY “El siguiente conjunto de preguntas es acerca de todos sus compañeros sexuales, hombres y mujeres.” THEN GO TO BOX 7.
- OTHERWISE, GO TO BOX 7.

BOX 7

CHECK ITEM SXQ.747:

- IF SP HAD ORAL SEX PARTNER IN PAST 12 MONTHS (SXQ.627 OR SXQ.639 GREATER THAN '0000'), THEN GO TO SXQ.645.
- OTHERWISE, GO TO BOX 7B.

SXQ.645 Cuando usted **hizo** sexo **oral** en los **últimos 12 meses**, ¿con qué frecuencia usó **protección**, tal como (Target 14-59) preservativo o condón o barrera dental?

INSTRUCTIONS TO SP:

Por favor seleccione una de las siguientes opciones.

- Nunca 1
- Raramente..... 2
- Usualmente 3
- Siempre 4
- Insegura 5

- REFUSED 7
- DON'T KNOW 9

BOX 7B

CHECK ITEM SXQ.771:

- IF SXQ.718, SXQ.727, SXQ.627, SXQ.639 OR SXQ.739 GREATER THAN '0000', GO TO SXQ.648.
- OTHERWISE, GO TO BOX 9.

SXQ.648 En los **últimos 12 meses**, ¿tuvo **algún** tipo de relación sexual con una persona con quien nunca antes (Target 14-59) había tenido relaciones sexuales?

INSTRUCTIONS TO SP:
Por favor seleccione . . .

- Sí 1
- No 2
- REFUSED 7
- DON'T KNOW 9

BOX 8A

CHECK ITEM SXQ.759:

- IF SXQ.700 OR SXQ.706 = 1, THEN CONTINUE.
- OTHERWISE, GO TO BOX 9,

SXQ.610 En los **últimos 12 meses**, ¿más o menos cuántas veces ha tenido usted sexo {vaginal o (Target 14-59) anal/vaginal/anal}?

INSTRUCTIONS TO SP:
Por favor seleccione una de las siguientes opciones.

- Nunca 0
- Una vez 1
- 2-11 veces 2
- 12-51 veces 3
- 52-103 veces 4
- 104-364 veces 5
- 365 veces o más 6

- REFUSED 77
- DON'T KNOW 99

CAPI INSTRUCTON:
IF SXQ.700 = 1 AND SXQ.706 = 2, DISPLAY {vaginal}.
IF SXQ.700 = 2 AND SXQ.706 = 1, DISPLAY {anal}.
OTHERWISE, DISPLAY {vaginal o anal}.

BOX 8

CHECK ITEM SXQ.246:

- IF SP DID NOT HAVE VAGINAL OR ANAL SEX (CODED '0') IN SXQ.610, GO TO BOX 9.
- OTHERWISE, CONTINUE WITH SXQ.250.

SXQ.250 En los **últimos 12 meses**, ¿más o menos con qué frecuencia ha tenido sexo {vaginal o anal/vaginal/anal}
(Target 14-59) sin usar preservativo o condón?

INSTRUCTIONS TO SP:

Por favor seleccione una de las siguientes opciones.

- Nunca 1
- Menos de la mitad del tiempo..... 2
- Más o menos la mitad del tiempo 3
- No siempre, pero más de la mitad del tiempo 4
- Siempre 5

- REFUSED 7
- DON'T KNOW 9

CAPI INSTRUCTON:

IF SXQ.700 = 1 AND SXQ.706 = 2, DISPLAY {vaginal}.

IF SXQ.700 = 2 AND SXQ.706 = 1, DISPLAY {anal}.

OTHERWISE, DISPLAY {vaginal o anal}.

BOX 9

CHECK ITEM SXQ.750:

- IF SP 14-29 YEARS AND IF SP HAD PARTNER IN PAST 12 MONTHS (SXQ.718 SXQ.727, SXQ.627, SXQ.639, OR SXQ.739 GREATER THAN '0000'), GO TO SXQ.651.
- OTHERWISE, GO TO SXQ.260.

SXQ.651 De las personas con quienes tuvo **algún** tipo de relación sexual en los **últimos 12 meses**, ¿cuántas eran
(Target 14-29) cinco o más años **mayores** que usted?

INSTRUCTIONS TO SP:

Por favor anote una cantidad o anote cero por ninguna.

|_|_|_|_|

ENTER NUMBER

- REFUSED 77777
- DON'T KNOW 99999

HARD EDIT FOR FEMALES: SXQ.651 must be equal to or less than (sum of SXQ.627, SXQ.639, SXQ.718, SXQ.727, and SXQ.739)

Error message: "Su respuesta es mayor que la cantidad de compañeros o compañeras sexuales que ha tenido en los últimos 12 meses. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

SXQ.654 De las personas con quienes tuvo **algún** tipo de relación sexual en los **últimos 12 meses**, ¿cuántas eran (Target 14-29) cinco o más años **menores** que usted?

INSTRUCTIONS TO SP:

Por favor anote una cantidad o anote cero por ninguna.

□□□□□

ENTER NUMBER

REFUSED 77777
DON'T KNOW 99999

HARD EDIT FOR FEMALES: SXQ.654 must be equal to or less than (sum of SXQ.627, SXQ.639, SXQ.718, SXQ.727, and SXQ.739)

Error message: "Su respuesta es mayor que la cantidad de compañeros o compañeras sexuales que ha tenido en los últimos 12 meses. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

HARD EDIT (combined) for SXQ.651 and SXQ.654

HARD EDIT FOR FEMALES: (sum of SXQ.651 and SXQ.654) must be equal to or less than (sum of SXQ.627, SXQ.639, SXQ.718, SXQ.727, and SXQ.739)

Error message: "Sus respuestas a las últimas dos preguntas no son consistentes con la cantidad total de compañeros o compañeras sexuales que ha tenido en los últimos 12 meses. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

SXQ.260 ¿Le ha dicho **alguna vez** un médico u otro profesional de servicios de salud que usted tenía herpes (Target 14-59) genital?

INSTRUCTIONS TO SP:

Por favor seleccione . . .

Sí 1
No 2
REFUSED 7
DON'T KNOW 9

SXQ.265 ¿Le ha dicho **alguna vez** un médico u otro profesional de servicios de salud que usted tenía verrugas (Target 14-59) genitales?

INSTRUCTIONS TO SP:

Por favor seleccione . . .

Sí 1
No 2 (SXQ.753)
REFUSED 7 (SXQ.753)
DON'T KNOW 9 (SXQ.753)

SXQ.267 ¿Qué edad tenía usted la primera vez que le dijeron que tenía verrugas genitales?
(Target 14-59)

INSTRUCTIONS TO SP:
Por favor anote la edad.

ENTER AGE IN YEARS

REFUSED 77
DON'T KNOW 99

HARD EDIT VALUES: 0-59

Error message: "Su respuesta no puede exceder 59 años. Por favor toque el botón "Atrás", toque "Borrar" y anote su respuesta de nuevo."

HARD EDIT: SXQ.618 must be equal to or less than current age.

Error message: Su respuesta es mayor que la edad anotada. Por favor toque el botón "Atrás", toque "Borrar" y anote su respuesta de nuevo.

SXQ.753 ¿Le ha dicho **alguna vez** un médico u otro profesional de servicios de salud que usted tenía el virus del papiloma humano o VPH?
(Target 14-59)

INSTRUCTIONS TO SP:
Por favor seleccione . . .

Sí 1
No 2
REFUSED 7
DON'T KNOW 9

SXQ.270 En los **últimos 12 meses**, ¿le ha dicho un médico u otro profesional de servicios de salud que usted tenía gonorrea, llamada a veces blenorragia?
(Target 14-59)

INSTRUCTIONS TO SP:
Por favor seleccione . . .

Sí 1
No 2
REFUSED 7
DON'T KNOW 9

SXQ.272 En los **últimos 12 meses**, ¿le ha dicho alguna vez un médico u otro profesional de servicios de salud que usted tenía clamidia?
(Target 14-59)

INSTRUCTIONS TO SP:
Por favor seleccione . . .

Sí 1
No 2
REFUSED 7
DON'T KNOW 9

BOX 11

CHECK ITEM SXQ.756:

- IF SP 18-59 YEARS, GO TO SXQ.295.
- OTHERWISE, GO TO END OF SECTION.

SXQ.295 ¿Cuál de las siguientes opciones representa mejor la manera en la que usted se identifica?
 (Target 18-59)

- Lesbiana o gay 1
- Heterosexual, o sea, no es gay o lesbiana 2
- Bisexual 3
- Otra cosa 4
- No sé la respuesta..... 9
- REFUSED 77
- DON'T KNOW..... 99

SXQ.654 De las personas con quienes tuvo **algún** tipo de relación sexual en los **últimos 12 meses**, ¿cuántas eran
 (Target 14-29) cinco o más años **menores** que usted?

INSTRUCTIONS TO SP:
 Por favor anote una cantidad o anote cero por ninguna.

|_|_|_|_|

ENTER NUMBER

- REFUSED 77777
- DON'T KNOW 99999

HARD EDIT FOR FEMALES: SXQ.654 must be equal to or less than (sum of SXQ.627, SXQ.639, SXQ.718, SXQ.727, and SXQ.739)

Error message: "Su respuesta es mayor que la cantidad de compañeros o compañeras sexuales que ha tenido en los últimos 12 meses. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

HARD EDIT (combined) for SXQ.651 and SXQ.654

HARD EDIT FOR FEMALES: (sum of SXQ.651 and SXQ.654) must be equal to or less than (sum of SXQ.627, SXQ.639, SXQ.718, SXQ.727, and SXQ.739)

Error message: "Sus respuestas a las últimas dos preguntas no son consistentes con la cantidad total de compañeros o compañeras sexuales que ha tenido en los últimos 12 meses. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

SXQ.260 ¿Le ha dicho **alguna vez** un médico u otro profesional de servicios de salud que usted tenía herpes
 (Target 14-59) genital?

INSTRUCTIONS TO SP:
 Por favor seleccione . . .

- Sí 1
- No 2
- REFUSED 7
- DON'T KNOW 9

SXQ.265 ¿Le ha dicho **alguna vez** un médico u otro profesional de servicios de salud que usted tenía verrugas genitales?
(Target 14-59)

INSTRUCTIONS TO SP:
Por favor seleccione . . .

Sí 1
No 2 (SXQ.753)
REFUSED 7 (SXQ.753)
DON'T KNOW 9 (SXQ.753)

SXQ.267 ¿Qué edad tenía usted la primera vez que le dijeron que tenía verrugas genitales?
(Target 14-59)

INSTRUCTIONS TO SP:
Por favor anote la edad.

ENTER AGE IN YEARS

REFUSED 77
DON'T KNOW 99

HARD EDIT VALUES: 0-59

Error message: "Su respuesta no puede exceder 59 años. Por favor toque el botón "Atrás", toque "Borrar" y anote su respuesta de nuevo."

HARD EDIT: SXQ.618 must be equal to or less than current age.

Error message: Su respuesta es mayor que la edad anotada. Por favor toque el botón "Atrás", toque "Borrar" y anote su respuesta de nuevo.

SXQ.753 ¿Le ha dicho **alguna vez** un médico u otro profesional de servicios de salud que usted tenía el virus del papiloma humano o VPH?
(Target 14-59)

INSTRUCTIONS TO SP:
Por favor seleccione . . .

Sí 1
No 2
REFUSED 7
DON'T KNOW 9

SXQ.270 En los **últimos 12 meses**, ¿le ha dicho un médico u otro profesional de servicios de salud que usted tenía gonorrea, llamada a veces blenorragia?
(Target 14-59)

INSTRUCTIONS TO SP:
Por favor seleccione . . .

Sí 1
No 2
REFUSED 7
DON'T KNOW 9

SXQ.272 En los **últimos 12 meses**, ¿le ha dicho alguna vez un médico u otro profesional de servicios de salud que usted tenía clamidia?
(Target 14-59)

INSTRUCTIONS TO SP:
Por favor seleccione . . .

- | | |
|------------------|---|
| Sí | 1 |
| No | 2 |
| REFUSED | 7 |
| DON'T KNOW | 9 |

BOX 11

CHECK ITEM SXQ.756:

- IF SP 18-59 YEARS, GO TO SXQ.295.
- OTHERWISE, GO TO END OF SECTION.

SXQ.295 ¿Cuál de las siguientes opciones representa mejor la manera en la que usted se identifica?
(Target 18-59)

- | | |
|---|---|
| Lesbiana o gay | 1 |
| Heterosexual, o sea, no es gay o lesbiana | 2 |
| Bisexual | 3 |
| Otra cosa | 4 |
| No sé la respuesta | 9 |
| REFUSED | 7 |

SEXUAL BEHAVIOR – (SXQ)
Target Group: Male SPs 14-69 (Audio-CASI)

SXQ.615_ El siguiente conjunto de preguntas es acerca de su historia sexual. Por relaciones sexuales, queremos decir sexo vaginal, oral o anal. Por favor recuerde que sus respuestas son estrictamente confidenciales.

BOX 1B
CHECK ITEM SXQ.873:
■ IF SP AGE GREATER THAN 17, GO TO SXQ.800.
■ OTHERWISE, CONTINUE.

SXQ.615 ¿Ha tenido **alguna vez algún** tipo de relación sexual?
(Target 14-17)

INSTRUCTIONS TO SP:
Por favor seleccione . . .

Sí	1
No.....	2 (BOX 8)
REFUSED	7 (BOX 8)
DON'T KNOW	9 (BOX 8)

SXQ.800 ¿Ha tenido **alguna vez** sexo vaginal, llamado también coito, con una mujer? Esto significa su pene dentro
(Target 14-69) de la vagina de una mujer.

INSTRUCTIONS TO SP:
Por favor seleccione . . .

Sí	1
No.....	2
REFUSED	7
DON'T KNOW	9

SXQ.803 ¿Le ha hecho alguna vez sexo oral a una mujer? Esto significa que usted pone la boca en la vagina o los
(Target 14-69) genitales de una mujer.

INSTRUCTIONS TO SP:
Por favor seleccione . . .

Sí	1
No.....	2
REFUSED	7
DON'T KNOW	9

SXQ.806 ¿Ha tenido **alguna vez** sexo anal con una mujer? Sexo anal significa el contacto entre su pene y el ano o trasero de una mujer.
(Target 14-69)

INSTRUCTIONS TO SP:
Por favor seleccione . . .

Sí	1
No	2
REFUSED	7
DON'T KNOW	9

SXQ.809 ¿Ha tenido **alguna vez algún** tipo de relación sexual con un hombre, incluyendo sexo oral o anal?
(Target 14-69)

INSTRUCTIONS TO SP:
Por favor seleccione . . .

Sí	1
No	2
REFUSED	7
DON'T KNOW	9

BOX 1A

CHECK ITEM SXQ.862:

- IF SP 60-69 YEARS AND SXQ.800 = 2 AND SXQ.806 = 2 AND SXQ.803 = 2 AND SXQ.809 = 2, GO TO END OF SECTION.
- IF SP 60-69 YEARS AND SXQ.803 = 1 AND SXQ.800 = 2 AND SXQ.806 = 2 AND SXQ.809 = 2, GO TO SXQ.618.
- IF SXQ.800, SXQ.806, AND SXQ.809 = 2 AND SXQ.803 = 1, GO TO BOX 4.
- IF SXQ.800, SXQ.803, SXQ.806, AND SXQ.809 = 2, GO TO BOX 12.
- OTHERWISE, CONTINUE.

SXQ.618 ¿Qué edad tenía usted la primera vez que tuvo **algún** tipo de relación sexual, incluyendo {sexo vaginal, oral o anal / sexo vaginal o anal / sexo oral o vaginal / sexo oral o anal / sexo vaginal / sexo anal / sexo oral}?
(Target 14-69)

INSTRUCTIONS TO SP:
Por favor anote una edad.

ENTER AGE IN YEARS

REFUSED 77
DON'T KNOW 99

CAPI INSTRUCTION:

IF SXQ.800 AND SXQ.803 = 1 AND SXQ.806 AND SXQ.809 NOT EQUAL TO '1',
DISPLAY { sexo oral o vaginal }.

IF SXQ.800 AND SXQ.806 = 1 AND SXQ.803 AND SXQ.809 NOT EQUAL TO '1',
DISPLAY { sexo vaginal o anal }.

IF SXQ.809 = 1 AND SXQ.800 NOT EQUAL TO '1', DISPLAY {sexo oral o anal}.
IF SXQ.803 AND SXQ.806 = 1 AND SXQ.800 NOT EQUAL TO '1', DISPLAY {sexo oral o anal}.

IF SXQ.800 = 1 AND SXQ.803, SXQ.806, AND SXQ.809 NOT EQUAL TO '1', DISPLAY {sexo vaginal}.
IF SXQ.806 = 1 AND SXQ.800, SXQ.803, AND SXQ.809 NOT EQUAL TO '1', DISPLAY {sexo anal}.

OTHERWISE, DISPLAY {sexo vaginal, oral o anal}.

HARD EDIT VALUES: 0-69

Error message: "Su respuesta no puede exceder 69 años. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

HARD EDIT: SXQ.618 must be equal to or less than current age.

Error message: "Su respuesta es mayor que la edad anotada. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

BOX 1

CHECK ITEM SXQ.801:

- IF SP 60-69 YEARS, AND SXQ.800 = 2 AND SXQ.803 = 2 AND SXQ.806 = 2 AND SXQ.809 = 1, GO TO BOX 5.
- IF SP 60-69 YEARS, GO TO SXQ.812.
- IF SXQ.803=1 AND SXQ.800 AND SXQ.806 = 2, GO TO BOX 4.
- IF SXQ.800=1 AND SXQ.803 AND SXQ.806 = 2, GO TO BOX 3.
- IF SXQ.809=1 AND SXQ.800, SXQ.803, AND SXQ.806 = 2, GO TO BOX 5.
- OTHERWISE, CONTINUE.

SXQ.812 En **toda su vida**, ¿con cuántas **mujeres** ha tenido **algún** tipo de relación sexual?
(Target 14-69)

INSTRUCTIONS TO SP:
Por favor anote una cantidad.

|_|_|_|_|
ENTER NUMBER

REFUSED 77777
DON'T KNOW 99999

HARD EDIT: SXQ.812 must be greater than zero.
Error message: "Su respuesta no es consistente con sus respuestas anteriores acerca de sus compañeras sexuales. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

BOX 2

CHECK ITEM SXQ.815:

- IF SP 60-69 YEARS AND SXQ.809 = 1, GO TO SXQ.410.
- IF SP 60-69 YEARS AND SXQ.809 NOT EQUAL TO 1, GO TO END OF SECTION.
- OTHERWISE, CONTINUE WITH SXQ.818.

SXQ.818 En los **últimos 12 meses**, ¿con cuántas **mujeres** ha tenido **algún** tipo de relación sexual?
(Target 14-59)

INSTRUCTIONS TO SP:
Por favor anote una cantidad o anote cero por ninguna.

|_|_|_|_|
ENTER NUMBER

REFUSED 77777
DON'T KNOW 99999

HARD EDIT: SXQ.818 must be equal to or less than SXQ.812.
Error message: "Su respuesta es mayor que la cantidad de compañeras sexuales de toda su vida. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

BOX 3

CHECK ITEM SXQ.821:

- IF SXQ.800 = 1, GO TO SXQ.824.
- OTHERWISE, GO TO BOX 4.

SXQ.824 En **toda su vida**, ¿con cuántas **mujeres** ha tenido sexo **vaginal**? Sexo vaginal significa su pene dentro de (Target 14-59) la vagina de una mujer.

INSTRUCTIONS TO SP:
Por favor anote una cantidad.

|_|_|_|_|

ENTER NUMBER

REFUSED 77777
DON'T KNOW 99999

HARD EDIT: SXQ.824 must be greater than zero.
Error message: "Su respuesta no es consistente con sus respuestas anteriores acerca de sus compañeras de sexo vaginal. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

HARD EDIT: SXQ.824 must be equal to or less than SXQ.812.
Error message: "Su respuesta es mayor que la cantidad de compañeras sexuales de toda su vida. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

SXQ.827 En los **últimos 12 meses**, ¿con cuántas **mujeres** ha tenido sexo **vaginal**? Sexo vaginal significa su pene (Target 14-59) dentro de la vagina de una mujer.

INSTRUCTIONS TO SP:
Por favor anote una cantidad o anote cero por ninguna.

|_|_|_|_|

ENTER NUMBER

REFUSED 77777
DON'T KNOW 99999

HARD EDIT: SXQ.827 must be equal to or less than SXQ.824.
Error message: "Su respuesta es mayor que la cantidad de compañeras de sexo vaginal de toda su vida. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."
SOFT EDIT: SXQ.827 must be equal to or less than SXQ.818.
Error message: "Su respuesta es mayor que la cantidad de compañeros o compañeras sexuales que ha tenido en los últimos 12 meses. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

BOX 4

CHECK ITEM SXQ.830:

- IF SXQ.803 = 1, GO TO SXQ.633.
- OTHERWISE, GO TO BOX 5.

SXQ.633 ¿Qué edad tenía usted la primera vez que le **hizo** sexo oral a una mujer? Hacer sexo oral significa que (Target 14-59) usted pone la boca en la vagina o los genitales de una mujer.

INSTRUCTIONS TO SP:
Por favor anote una edad.

ENTER AGE IN YEARS

REFUSED 77
DON'T KNOW 99

HARD EDIT VALUES: 0-59

Error message: "Su respuesta no puede exceder 59 años. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

HARD EDIT: SXQ.633 must be equal to or less than current age.

Error message: "Su respuesta es mayor que la edad anotada. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

HARD EDIT: SXQ.633 must be equal to or greater than SXQ.618

Error message: "Su respuesta es menor que su respuesta a la edad en la que tuvo por primera vez algún tipo de relación sexual. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

SXQ.636 En **toda su vida**, ¿a cuántas **mujeres** les ha **hecho** sexo oral? (Target 14-59)

INSTRUCTIONS TO SP:
Por favor anote una cantidad.

ENTER NUMBER

REFUSED 77777
DON'T KNOW 99999

HARD EDIT: SXQ.636 must be greater than zero.

Error message: "Su respuesta no es consistente con sus respuestas anteriores acerca de sus compañeras de sexo oral." Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

HARD EDIT: SXQ.636 must be equal to or less than SXQ.812.

Error message: "Su respuesta es mayor que la cantidad de compañeras sexuales de toda su vida. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

SXQ.639 En los **últimos 12 meses**, ¿a cuántas **mujeres** les ha **hecho** sexo **oral**?
(Target 14-59)

INSTRUCTIONS TO SP:
Por favor anote una cantidad o anote cero por ninguna.

|_|_|_|_|
ENTER NUMBER

REFUSED 77777
DON'T KNOW 99999

HARD EDIT: SXQ.639 must be equal to or less than SXQ.636.
Error message: "Su respuesta es mayor que la cantidad de compañeras de sexo oral de toda su vida. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."
SOFT EDIT: SXQ.639 must be equal to or less than SXQ.818.
Error message: "Su respuesta es mayor que la cantidad de compañeras sexuales que ha tenido en los últimos 12 meses. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

BOX 4B

CHECK ITEM SXQ.868:

- IF SP HAD ONLY 1 LIFETIME ORAL SEX PARTNER (CODED '1') IN SXQ.636, GO TO BOX 5.
- OTHERWISE CONTINUE.

SXQ.642 ¿Cuánto tiempo hace desde la última vez que **le hizo** sexo **oral** a una **nueva compañera sexual**? Una nueva compañera sexual es alguien con quien nunca antes había tenido relaciones sexuales.
(Target 14-59)

INSTRUCTIONS TO SP:
Por favor anote la cantidad de días, semanas, meses o años y después seleccione la unidad de tiempo.

|_|_|_|_|
ENTER NUMBER (OF DAYS, WEEKS, MONTHS OR YEARS)

REFUSED 77777
DON'T KNOW 99999

ENTER UNIT

Días 1
Semanas 2
Meses 3
Años 4

HARD EDIT: Response must be equal to or less than current age minus SXQ.633.
Error message: "Su respuesta es anterior a su respuesta de la edad en que le hizo sexo oral a una mujer por primera vez. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

HARD EDIT: SXQ.642 must be equal to or less than current age.
Error message: "Su respuesta es mayor que la edad anotada. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

BOX 5
CHECK ITEM SXQ.833: <ul style="list-style-type: none">■ IF SXQ.809 = 1, GO TO SXQ.410.■ OTHERWISE, GO TO BOX 9.

SXQ.410 En **toda su vida**, ¿con cuántos **hombres** ha tenido usted sexo anal u oral?
(Target 14-69)

INSTRUCTIONS TO SP:
Por favor anote una cantidad o anote cero por ninguna.

|_|_|_|_|
ANOTE LA CANTIDAD

REFUSED 77777
DON'T KNOW 99999

HARD EDIT: SXQ.410 must be greater than zero.
Error message: "Su respuesta no es consistente con sus respuestas anteriores acerca de sus compañeros sexuales (hombres). Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

BOX 5B
CHECK ITEM SXQ.875: <ul style="list-style-type: none">■ IF SP IS 60-69 YEARS, GO TO SXQ.836.■ OTHERWISE, CONTINUE WITH SXQ.550.

SXQ.550 En **los últimos 12 meses**, ¿con cuántos **hombres** ha tenido usted sexo anal u oral?
(Target 14-59)

INSTRUCTIONS TO SP:
Por favor anote una cantidad o anote cero por ninguna.

|_|_|_|_|
ANOTE LA CANTIDAD

REFUSED 77777
DON'T KNOW 99999

HARD EDIT: SXQ.550 must be equal to or less than SXQ.410.
Error message: "Su respuesta es mayor que la cantidad de parejas de sexo masculino que ha tenido en toda su vida. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

SXQ.836 En **toda su vida**, ¿con cuántos **hombres** ha tenido sexo anal?

(Target 14-69)

INSTRUCTIONS TO SP:

Por favor anote una cantidad o anote cero por ninguna.

|_|_|_|_|
ENTER NUMBER

REFUSED 77777
DON'T KNOW 99999

HARD EDIT: SXQ.836 must be equal to or less than SXQ.410.

Error message: "Su respuesta es mayor que la cantidad de parejas de sexo masculino que ha tenido en toda su vida. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

BOX 6

CHECK ITEM SXQ.839:

- IF SP IS 60-69 YEARS, GO TO SXQ.853.
- IF SP HAD NO ANAL SEX PARTNERS (CODED '0000' IN SXQ.836), GO TO SXQ.853.
- OTHERWISE, CONTINUE WITH SXQ.841.

SXQ.841 En **los últimos 12 meses**, ¿con cuántos **hombres** ha tenido sexo anal?

(Target 14-59)

INSTRUCTIONS TO SP:

Por favor anote una cantidad o anote cero por ninguna.

|_|_|_|_|
ENTER NUMBER

REFUSED 77777
DON'T KNOW 99999

HARD EDIT: SXQ.841 must be equal to or less than SXQ.836.

Error message: "Su respuesta es mayor que la cantidad de parejas de sexo masculino que ha tenido en toda su vida. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

HARD EDIT: SXQ.841 must be equal to or less than SXQ.550.

Error message: "Su respuesta es mayor que la cantidad de parejas de sexo masculino que ha tenido en los últimos 12 meses. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

SXQ.853 ¿Le ha **hecho alguna vez sexo oral** a un **hombre**? Hacer sexo oral significa que usted pone la boca en el (Target 14-69) pene o los genitales de un hombre.

INSTRUCTIONS TO SP:
Por favor seleccione . . .

- Sí 1
- No 2
- REFUSED 7
- DON'T KNOW 9

BOX 7

CHECK ITEM SXQ.847:

- IF SP NEVER HAD ORAL MALE PARTNER (CODED '2', '7', OR '9') IN SXQ.853 AND SP IS 60-69 YEARS, GO TO END OF SECTION.
- IF SP NEVER HAD ORAL MALE PARTNER (CODED '2', '7', OR '9') IN SXQ.853 AND SP IS 14-59 YEARS, GO TO BOX 9A.
- OTHERWISE, CONTINUE WITH SXQ.621.

SXQ.621 ¿Qué edad tenía usted la primera vez que **le hizo** sexo oral a un hombre? Hacer sexo oral significa que (Target 14-69) usted pone la boca en el pene o los genitales de un hombre.

INSTRUCTIONS TO SP:
Por favor anote una edad.

ENTER AGE IN YEARS

- REFUSED 77
- DON'T KNOW 99

HARD EDIT VALUES: 0-69
Error message: "Su respuesta no puede exceder 69 años. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."
HARD EDIT: SXQ.621 must be equal to or less than current age.
Error message: "Su respuesta es mayor que la edad anotada. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

HARD EDIT: SXQ.621 must be equal to or greater than SXQ.618
Error message: "Su respuesta es menor que su respuesta a la edad en la que tuvo por primera vez algún tipo de relación sexual. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

SXQ.624 En **toda su vida** ¿a cuántos **hombres** les ha **hecho** sexo **oral**?
(Target 14-69)

INSTRUCTIONS TO SP:
Por favor anote una cantidad.

|_|_|_|_|
ENTER NUMBER

REFUSED 77777
DON'T KNOW 99999

HARD EDIT: SXQ.624 must be greater than zero.
Error message: "Su respuesta no es consistente con sus respuestas anteriores acerca de sus compañeros de sexo oral. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

HARD EDIT: SXQ.624 must be equal to or less than SXQ.410.
Error message: "Su respuesta es mayor que la cantidad de parejas de sexo masculino que ha tenido en toda su vida. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo. "

BOX 8
CHECK ITEM SXQ.850:
■ IF SP 60-69 YEARS, GO TO END OF SECTION.
■ IF SP 14-17 YEARS AND SXQ.615 2, 7 OR 9; GO TO SXQ.280.
■ IF SXQ.800, SXQ.803, SXQ.806, AND SXQ.809 = 2, 7, OR 9, GO TO SXQ.280.
■ OTHERWISE, CONTINUE WITH SXQ.627.

SXQ.627 En los **últimos 12 meses** ¿a cuántos **hombres** les ha **hecho** sexo **oral**?
(Target 14-59)

INSTRUCTIONS TO SP:
Por favor anote una cantidad o anote cero por ninguna.

|_|_|_|_|
ENTER NUMBER

REFUSED 77777
DON'T KNOW 99999

HARD EDIT: SXQ.627 must be equal to or less than SXQ.624.
Error message: "Su respuesta es mayor que la cantidad de compañeros de sexo oral de toda su vida. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

HARD EDIT: SXQ.627 must be equal to or less than SXQ.550.
Error message: "Su respuesta es mayor que la cantidad de parejas de sexo masculino que ha tenido en los últimos 12 meses. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo. "

BOX 8B

CHECK ITEM SXQ.865:

- IF SP HAD ONLY 1 LIFETIME MALE ORAL SEX PARTNER (CODED '1') IN SXQ.624, GO TO BOX 9A.
- OTHERWISE CONTINUE.

SXQ.630 ¿Cuánto tiempo hace desde la última vez que **le hizo sexo oral** a un **nuevo compañero sexual**? Un (Target 14-59) nuevo compañero sexual es alguien con quien nunca antes había tenido relaciones sexuales.

INSTRUCTIONS TO SP:

Por favor anote la cantidad de días, semanas, meses o años y después seleccione la unidad de tiempo.

||_|_|_|
ENTER NUMBER (OF DAYS, WEEKS, MONTHS OR YEARS)

REFUSED 77777

DON'T KNOW 99999

ENTER UNIT

Días 1

Semanas 2

Meses 3

Años 4

HARD EDIT: Response must be equal to or less than current age minus SXQ.621.

Error message: "Su respuesta es anterior a su respuesta de la edad en que le hizo sexo oral a un hombre por primera vez. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

HARD EDIT: SXQ.630 must be equal to or less than current age.

Error message: "Su respuesta es mayor que la edad anotada. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

BOX 9A

CHECK ITEM SXQ.844:

- IF SP DID NOT HAVE A PARTNER IN PAST 12 MONTHS (SXQ.627, SXQ.639, SXQ.818, SXQ.827, SXQ.550 AND SXQ.841 CODED '0000' OR MISSING), GO TO SXQ.260.
- IF SXQ.809 = 1 AND SXQ.800, SXQ.803, OR SXQ.806 = 1, THEN DISPLAY "El siguiente conjunto de preguntas es acerca de todos sus compañeros sexuales, hombres y mujeres.", THEN GO TO BOX 9.
- OTHERWISE, GO TO BOX 9.

BOX 9

CHECK ITEM SXQ.845:

- IF SP HAD ORAL SEX PARTNER IN PAST 12 MONTHS (SXQ.627 OR SXQ.639 GREATER THAN '0000'), GO TO SXQ.645.
- OTHERWISE, GO TO BOX 9B.

SXQ.645 Cuando usted **hizo** sexo **oral** en los **últimos 12 meses**, ¿con qué frecuencia usó **protección**, tal como (Target 14-59) preservativo o condón o barrera dental?

INSTRUCTIONS TO SP:

Por favor seleccione una de las siguientes opciones.

- | | |
|------------------|---|
| Nunca | 1 |
| Raramente..... | 2 |
| Usualmente | 3 |
| Siempre | 4 |
| Inseguro | 5 |
| REFUSED | 7 |
| DON'T KNOW | 9 |

BOX 9B

CHECK ITEM SXQ.871:

- IF SXQ.818, SXQ.841, SXQ.827, SXQ.550, SXQ.627 OR SXQ.639 GREATER THAN '0000', GO TO SXQ.648.
- OTHERWISE, GO TO BOX 11.

SXQ.648 En los **últimos 12 meses**, ¿tuvo **algún** tipo de relación sexual con una persona con quien nunca antes (Target 14-59) había tenido relaciones sexuales?

INSTRUCTIONS TO SP:

Por favor seleccione . . .

- | | |
|------------------|---|
| Sí | 1 |
| No..... | 2 |
| REFUSED | 7 |
| DON'T KNOW | 9 |

BOX 10A

CHECK ITEM SXQ.859:

- IF SXQ.800, SXQ.806, AND SXQ.809 NOT EQUAL TO '1', GO TO BOX 11.
- OTHERWISE, GO TO SXQ.610.

SXQ.610 En los **últimos 12 meses**, ¿más o menos cuántas **veces** ha tenido usted sexo {vaginal o anal/vaginal/anal}?

INSTRUCTIONS TO SP:

Por favor seleccione una de las siguientes opciones.

Nunca	0
Una vez	1
2-11 veces	2
12-51 veces	3
52-103 veces	4
104-364 veces	5
365 veces o más	6
REFUSED	77
DON'T KNOW	99

CAPI INSTRUCTION:

IF SXQ.800 = 1 AND SXQ.806 AND SXQ.809 NOT EQUAL TO '1', DISPLAY {vaginal}.

IF SXQ.806 = 1 AND SXQ.800 NOT EQUAL TO '1', DISPLAY {anal}.

IF SXQ.836 GREATER THAN '0000' AND SXQ.800 NOT EQUAL TO '1', DISPLAY {anal}.

OTHERWISE, DISPLAY {vaginal o anal}.

BOX 10

CHECK ITEM SXQ.245:

- IF SP DID NOT HAVE VAGINAL OR ANAL SEX (CODED '0') IN SXQ.610, GO TO BOX 11.
- OTHERWISE, CONTINUE WITH SXQ.250.

SXQ.250 En los **últimos 12 meses**, ¿más o menos con qué frecuencia ha tenido usted sexo {vaginal o anal/vaginal/anal} sin usar preservativo o condón?

INSTRUCTIONS TO SP:

Por favor seleccione una de las siguientes opciones.

Nunca.....	1
Menos de la mitad del tiempo	2
Más o menos la mitad del tiempo.....	3
No siempre, pero más de la mitad del tiempo...	4
Siempre.....	5
REFUSED.....	7
DON'T KNOW	9

CAPI INSTRUCTION:

IF SXQ.800 = 1 AND SXQ.806 AND SXQ.809 NOT EQUAL TO '1', DISPLAY {vaginal}.

IF SXQ.806 = 1 AND SXQ.800 NOT EQUAL TO '1', DISPLAY {anal}.

OTHERWISE, DISPLAY {vaginal o anal}.

BOX 11

CHECK ITEM SXQ.856:

- IF SP 14-29 YEARS AND IF SP HAD PARTNER IN PAST 12 MONTHS (SXQ.627, SXQ.639, SXQ.818, SXQ.827, SXQ.550 OR SXQ.841 GREATER THAN '0000'), GO TO SXQ.651.
- OTHERWISE, GO TO SXQ.260.

SXQ.651 De las personas con quienes tuvo **algún** tipo de relación sexual en los **últimos 12 meses**, ¿cuántas eran (Target 14-29) cinco años o menos **mayores** que usted?

INSTRUCTIONS TO SP:
Por favor anote una cantidad o anote cero por ninguna.

|_|_|_|_|
ENTER NUMBER

REFUSED 77777
DON'T KNOW 99999

HARD EDIT FOR MALES: SXQ.651 must be equal to or less than (sum of SXQ.627, SXQ.639, SXQ.818, SXQ.827, and SXQ.841)

Error message: "Su respuesta es mayor que la cantidad de compañeros o compañeras sexuales que ha tenido en los últimos 12 meses. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

SXQ.654 De las personas con quienes tuvo **algún** tipo de relación sexual en los **últimos 12 meses**, ¿cuántas eran (Target 14-29) cinco años o menos **menores** que usted?

INSTRUCTIONS TO SP:
Por favor anote una cantidad o anote cero por ninguna.

|_|_|_|_|
ENTER NUMBER

REFUSED 77777
DON'T KNOW 99999

HARD EDIT FOR MALES: SXQ.654 must be equal to or less than (sum of SXQ.627, SXQ.639, SXQ.818, SXQ.827, and SXQ.841).

Error message: "Su respuesta es mayor que la cantidad de compañeros o compañeras sexuales que ha tenido en los últimos 12 meses. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

HARD EDIT (combined) for SXQ.651 and SXQ.654

HARD EDIT FOR MALES: (sum of SXQ.651 and SXQ.654) must be equal to or less than (sum of SXQ.627, SXQ.639, SXQ.818, SXQ.827, and SXQ.841).

Error message: "Sus respuestas a las últimas dos preguntas no son consistentes con la cantidad total de compañeros o compañeras sexuales que ha tenido en los últimos 12 meses. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

SXQ.260 ¿Le ha dicho **alguna vez** un médico u otro profesional de servicios de salud que usted tenía herpes genital?
(Target 14-59)

INSTRUCTIONS TO SP:
Por favor seleccione . . .

Sí	1
No	2
REFUSED	7
DON'T KNOW	9

SXQ.265 ¿Le ha dicho **alguna vez** un médico u otro profesional de servicios de salud que usted tenía verrugas genitales?
(Target 14-59)

INSTRUCTIONS TO SP:
Por favor seleccione . . .

Sí	1
No	2 (SXQ.270)
REFUSED	7 (SXQ.270)
DON'T KNOW	9 (SXQ.270)

SXQ.267 ¿Qué edad tenía usted la primera vez que le dijeron que tenía verrugas genitales?
(Target 14-59)

INSTRUCTIONS TO SP:
Por favor anote la edad.

ENTER AGE IN YEARS

REFUSED	77
DON'T KNOW	99

HARD EDIT VALUES: 0-59

Error message: "Su respuesta no puede exceder 59 años. Por favor toque el botón "Atrás", toque "Borrar" y anote su respuesta de nuevo."

HARD EDIT: SXQ.618 must be equal to or less than current age.

Error message: Su respuesta es mayor que la edad anotada. Por favor toque el botón "Atrás", toque "Borrar" y anote su respuesta de nuevo.

SXQ.270 En los **últimos 12 meses**, ¿le ha dicho un médico u otro profesional de servicios de salud que usted tenía gonorrea, llamada a veces blenorragia?
(Target 14-59)

INSTRUCTIONS TO SP:
Por favor seleccione . . .

Sí	1
No	2
REFUSED	7
DON'T KNOW	9

SXQ.272 En los **últimos 12 meses**, ¿le ha dicho alguna vez un médico u otro profesional de servicios de salud que usted tenía clamidia?
(Target 14-59)

INSTRUCTIONS TO SP:
Por favor seleccione . . .

- Sí 1
- No 2
- REFUSED 7
- DON'T KNOW 9

SXQ.280 ¿Está usted circuncidado o no circuncidado?
(Target 14-59)

INSTRUCTIONS TO SP:
Por favor seleccione . . .

CAP I INSTRUCTIONS:

Display the sketches below each selection. Sketch should display by default.
ACASI FIGURE SXQ1 – CLINICAL SKETCH OF CIRCUMCISED PENIS
ACASI FIGURE SXQ2 – CLINICAL SKETCH OF UNCIRCUMCISED PENIS

- Circuncidado..... 1
- No circuncidado..... 2
- REFUSED 7
- DON'T KNOW 9

BOX 12

CHECK ITEM SXQ.285:

- IF SP 18-59 YEARS, CONTINUE WITH SXQ.296.
- OTHERWISE, GO TO END OF SECTION.

SXQ.296 ¿Cuál de las siguientes opciones representa mejor la manera en la que usted se identifica?
(Target 18-59)

- Gay 1
- Heterosexual, o sea, no es gay 2
- Bisexual 3
- Otra cosa 4
- No sé la respuesta..... 9
- REFUSED 77
- DON'T KNOW..... 99

PUBERTAL MATURATION – PMQ
Target Group: SPs 8-19 (Audio-CASI)

PMQ.INT_ Las siguientes preguntas son acerca de los cambios que suceden durante la pubertad. La pubertad es el tiempo en el cual tu cuerpo se convierte en el de un joven o una joven. Las respuestas a las preguntas acerca de tu cuerpo nos ayudan a comprender cómo crecen y cambian los niños y las niñas y los adolescentes. Tus respuestas serán mantenidas en forma confidencial. Nadie puede ver tus respuestas y no se las mostraremos a nadie.

Por favor oprima el botón que dice “Siguiente” para empezar.

CAPI INSTRUCTION: THE INTRODUCTION ABOVE SHOULD APPEAR BY ITSELF ON ITS OWN SCREEN.

BOX 1

CHECK ITEM PMQ.005:

- IF SP = FEMALE, CONTINUE.
- OTHERWISE, GO TO PMQ.070.

PMQ.010_ La siguiente pantalla muestra etapas del desarrollo de los senos. Por favor mira los dibujos y escucha las descripciones. Después escoge el dibujo que más se parece a tu cuerpo.

Por favor oprime el botón que dice Siguiente para continuar.

CAPI INSTRUCTION: THE BREAST INTRODUCTION ABOVE SHOULD APPEAR BY ITSELF ON ITS OWN SCREEN.

BOX 2

CHECK ITEM PMQ.015:

- IF SP = FEMALE AND AGE = 8 OR 9, CONTINUE.
- OTHERWISE, GO TO PMQ.030.

PMQ.020 Por favor escoge el dibujo que más se parece a tu cuerpo.

CAP I INSTRUCTION: DISPLAY FEMALE BREAST IMAGES 1-4 ON BUTTONS. HIGHLIGHT EACH BUTTON AS THE DESCRIPTION OF THE DEVELOPMENT STAGE IS READ. LABEL EACH BUTTON BELOW THE IMAGE: Dibujo 1, Dibujo 2, Dibujo 3, Dibujo 4.

STAGE 1 FEMALE BREAST DESCRIPTION DISPLAY: Dibujo 1: Los senos son planos. Los pezones sobresalen un poquito.

STAGE 2 FEMALE BREAST DESCRIPTION DISPLAY: Dibujo 2: Los senos son pequeños montículos. Los pezones sobresalen más que en el Dibujo 1. Hay más piel oscura alrededor de los pezones que en el Dibujo 1.

STAGE 3 FEMALE BREAST DESCRIPTION DISPLAY: Dibujo 3: Los senos y la piel más oscura alrededor de los pezones son más grandes que en el Dibujo 2.

STAGE 4 FEMALE BREAST DESCRIPTION DISPLAY: Dibujo 4: Los pezones y la piel más oscura alrededor de los pezones forman un montículo que sobresale de los senos.

STAGE 1 FEMALE BREAST.....	1 (PMQ.040_)
STAGE 2 FEMALE BREAST.....	2 (PMQ.040_)
STAGE 3 FEMALE BREAST.....	3 (PMQ.040_)
STAGE 4 FEMALE BREAST.....	4 (PMQ.040_)
REFUSED	7 (PMQ.040_)
DON'T KNOW	9 (PMQ.040_)

PMQ.030 Por favor escoge el dibujo que más se parece a tu cuerpo.

CAP I INSTRUCTION: DISPLAY FEMALE BREAST IMAGES 1-5 ON BUTTONS. HIGHLIGHT EACH BUTTON AS THE DESCRIPTION OF THE DEVELOPMENT STAGE IS READ. LABEL EACH BUTTON BELOW THE IMAGE: Dibujo 1, Dibujo 2, Dibujo 3, Dibujo 4, Dibujo 5.

STAGE 1 FEMALE BREAST DESCRIPTION DISPLAY: Dibujo 1: Los senos son planos. Los pezones sobresalen un poquito.

STAGE 2 FEMALE BREAST DESCRIPTION DISPLAY: Dibujo 2: Los senos son pequeños montículos. Los pezones sobresalen más que en el Dibujo 1. Hay más piel oscura alrededor de los pezones que en el Dibujo 1.

STAGE 3 FEMALE BREAST DESCRIPTION DISPLAY: Dibujo 3: Los senos y la piel más oscura alrededor de los pezones son más grandes que en el Dibujo 2.

STAGE 4 FEMALE BREAST DESCRIPTION DISPLAY: Dibujo 4: Los pezones y la piel más oscura alrededor de los pezones forman un montículo que sobresale de los senos.

STAGE 5 FEMALE BREAST DESCRIPTION DISPLAY: Dibujo 5: Únicamente los pezones sobresalen de los senos. La piel más oscura alrededor de los pezones no sobresale.

STAGE 1 FEMALE BREAST.....	1
STAGE 2 FEMALE BREAST.....	2
STAGE 3 FEMALE BREAST.....	3
STAGE 4 FEMALE BREAST.....	4
STAGE 5 FEMALE BREAST.....	5
REFUSED	7
DON'T KNOW	9

PMQ.040 La siguiente pantalla muestra etapas del crecimiento del vello en tus partes privadas. Por favor mira los dibujos y escucha las descripciones. Después escoge el dibujo que más se parece a tu cuerpo.

Por favor oprime el botón que dice Siguiente para continuar.

CAPI INSTRUCTION: THE FEMALE HAIR GROWTH INTRODUCTION ABOVE SHOULD APPEAR BY ITSELF ON ITS OWN SCREEN.

BOX 3
CHECK ITEM PMQ.045: IF SP = FEMALE AND AGE = 8 OR 9, CONTINUE. OTHERWISE, GO TO PMQ.060.

PMQ.050 Por favor escoge el dibujo que más se parece a tu cuerpo.

CAPI INSTRUCTION: DISPLAY FEMALE HAIR GROWTH IMAGES 1-4 ON BUTTONS. HIGHLIGHT EACH BUTTON AS THE DESCRIPTION OF THE DEVELOPMENT STAGE IS READ. LABEL EACH BUTTON BELOW THE IMAGE: Dibujo 1, Dibujo 2, Dibujo 3, Dibujo 4.

STAGE 1 FEMALE HAIR DESCRIPTION DISPLAY: Dibujo 1: No hay vellos en esta parte.

STAGE 2 FEMALE HAIR DESCRIPTION DISPLAY: Dibujo 2: Hay unos pocos vellos largos y suaves en la parte privada. Los vellos pueden ser lisos o rizados.

STAGE 3 FEMALE HAIR DESCRIPTION DISPLAY: Dibujo 3: Los vellos son más gruesos y más rizados y se extienden un poco más sobre la parte privada que en el Dibujo 2.

STAGE 4 FEMALE HAIR DESCRIPTION DISPLAY: Dibujo 4: Los vellos son más oscuros y más rizados y cubren una parte más grande que en el Dibujo 3.

STAGE 1 FEMALE HAIR	1 (END OF SECTION)
STAGE 2 FEMALE HAIR	2 (END OF SECTION)
STAGE 3 FEMALE HAIR	3 (END OF SECTION)
STAGE 4 FEMALE HAIR	4 (END OF SECTION)
REFUSED	7 (END OF SECTION)
DON'T KNOW	9 (END OF SECTION)

PMQ.060 Por favor escoge el dibujo que más se parece a tu cuerpo.

CAPI INSTRUCTION: DISPLAY FEMALE HAIR GROWTH IMAGES 1-5 ON BUTTONS. HIGHLIGHT EACH BUTTON AS THE DESCRIPTION OF THE DEVELOPMENT STAGE IS READ. LABEL EACH BUTTON BELOW THE IMAGE: Dibujo 1, Dibujo 2, Dibujo 3, Dibujo 4, Dibujo 5.

STAGE 1 FEMALE HAIR DESCRIPTION DISPLAY: Dibujo 1: No hay vellos en esta parte.

STAGE 2 FEMALE HAIR DESCRIPTION DISPLAY: Dibujo 2: Hay unos pocos vellos largos y suaves en la parte privada. Los vellos pueden ser lisos o rizados.

STAGE 3 FEMALE HAIR DESCRIPTION DISPLAY: Dibujo 3: Los vellos son más gruesos y más rizados y se extienden un poco más sobre la parte privada que en el Dibujo 2.

STAGE 4 FEMALE HAIR DESCRIPTION DISPLAY: Dibujo 4: Los vellos son más oscuros y más rizados y cubren una parte más grande que en el Dibujo 3. No hay vellos en la entrepierna.

STAGE 5 FEMALE HAIR DESCRIPTION DISPLAY: Dibujo 5: Hay vellos en la entrepierna. Los vellos cubren una parte de forma triangular.

STAGE 1 FEMALE HAIR	1 (END OF SECTION)
STAGE 2 FEMALE HAIR	2 (END OF SECTION)
STAGE 3 FEMALE HAIR	3 (END OF SECTION)
STAGE 4 FEMALE HAIR	4 (END OF SECTION)
STAGE 5 FEMALE HAIR	5 (END OF SECTION)
REFUSED	7 (END OF SECTION)
DON'T KNOW	9 (END OF SECTION)

PMQ.070_ La siguiente pantalla muestra etapas del crecimiento del pene, los testículos (bolas o pelotas) y el escroto (tejido que envuelve los testículos). Por favor mira los dibujos y escucha las descripciones. Después escoge el dibujo que más se parece a tu cuerpo.

Por favor oprime el botón que dice Siguiente para continuar.

CAPI INSTRUCTION: THE PENIS, TESTICLE, AND SCROTUM GROWTH INTRODUCTION ABOVE SHOULD APPEAR BY ITSELF ON ITS OWN SCREEN.

BOX 4

CHECK ITEM PMQ.075:

IF SP = MALE AND AGE = 8 or 9, CONTINUE. OTHERWISE, GO TO PMQ.090.

PMQ.080 Por favor escoge el dibujo que más se parece a tu cuerpo.

CAPI INSTRUCTION: DISPLAY MALE PENIS, TESTICLE, AND SCROTUM GROWTH IMAGES 1-4 ON BUTTONS. HIGHLIGHT EACH BUTTON AS THE DESCRIPTION OF THE DEVELOPMENT STAGE IS READ. LABEL EACH BUTTON BELOW THE IMAGE: Dibujo 1, Dibujo 2, Dibujo 3, Dibujo 4.

STAGE 1 MALE PENIS DESCRIPTION DISPLAY: Dibujo 1: El pene, los testículos (bolas o pelotas) y el escroto (tejido que envuelve los testículos) son más o menos del mismo tamaño que cuando eras más pequeño.

STAGE 2 MALE PENIS DESCRIPTION DISPLAY: Dibujo 2: Los testículos (bolas o pelotas) son más grandes que en el Dibujo 1 y el escroto (tejido que envuelve los testículos) llega hasta más bajo. El pene es solamente un poco más grande comparado con el Dibujo 1.

STAGE 3 MALE PENIS DESCRIPTION DISPLAY: Dibujo 3: El pene es más largo que en el Dibujo 2. Los testículos (bolas o pelotas) y el escroto (tejido que envuelve los testículos) son más grandes y llegan más abajo que en el Dibujo 2.

STAGE 4 MALE PENIS DESCRIPTION DISPLAY: Dibujo 4: El pene es más largo y más grueso que en el Dibujo 3. El escroto (tejido que envuelve los testículos o bolas) es más grande y la piel es más oscura.

- STAGE 1 MALE PENIS 1 (PMQ.100_)
- STAGE 2 MALE PENIS 2 (PMQ.100_)
- STAGE 3 MALE PENIS 3 (PMQ.100_)
- STAGE 4 MALE PENIS 4 (PMQ.100_)
- REFUSED 7 (PMQ.100_)
- DON'T KNOW 9 (PMQ.100_)

PMQ.090 Por favor escoge el dibujo que más se parece a tu cuerpo.

CAPI INSTRUCTION: DISPLAY MALE PENIS, TESTICLE, AND SCROTUM GROWTH IMAGES 1-5 ON BUTTONS. HIGHLIGHT EACH BUTTON AS THE DESCRIPTION OF THE DEVELOPMENT STAGE IS READ. LABEL EACH BUTTON BELOW THE IMAGE: Dibujo 1, Dibujo 2, Dibujo 3, Dibujo 4, Dibujo 5.

STAGE 1 MALE PENIS DESCRIPTION DISPLAY: Dibujo 1: El pene, los testículos (bolas o pelotas) y el escroto (tejido que envuelve los testículos) son más o menos del mismo tamaño que cuando eras más pequeño.

STAGE 2 MALE PENIS DESCRIPTION DISPLAY: Dibujo 2: Los testículos (bolas o pelotas) son más grandes que en el Dibujo 1 y el escroto (tejido que envuelve los testículos) llega hasta más bajo. El pene es solamente un poco más grande comparado con el Dibujo 1.

STAGE 3 MALE PENIS DESCRIPTION DISPLAY: Dibujo 3: El pene es más largo que en el Dibujo 2. Los testículos (bolas o pelotas) y el escroto (tejido que envuelve los testículos) son más grandes y llegan más abajo que en el Dibujo 2.

STAGE 4 MALE PENIS DESCRIPTION DISPLAY: Dibujo 4: El pene es más largo y más grueso que en el Dibujo 3. El escroto (tejido que envuelve los testículos o bolas) es más grande y la piel es más oscura.

STAGE 5 MALE PENIS DESCRIPTION DISPLAY: Dibujo 5: El pene, el escroto (tejido que envuelve los testículos) y los testículos (bolas o pelotas) son más grandes que en el Dibujo 4.

- STAGE 1 MALE PENIS 1
- STAGE 2 MALE PENIS 2
- STAGE 3 MALE PENIS 3
- STAGE 4 MALE PENIS 4
- STAGE 5 MALE PENIS 5
- REFUSED 7
- DON'T KNOW 9

PMQ.100_ La siguiente pantalla muestra etapas del crecimiento del vello en tus partes privadas. Por favor mira los dibujos y escucha las descripciones. Después escoge el dibujo que más se parece a tu cuerpo.

Por favor oprime el botón que dice Siguiente para continuar.

CAPI INSTRUCTION: THE MALE HAIR GROWTH INTRODUCTION ABOVE SHOULD APPEAR BY ITSELF ON ITS OWN SCREEN.

BOX 5
CHECK ITEM PMQ.105: IF SP = MALE AND AGE = 8 or 9, CONTINUE. OTHERWISE, GO TO PMQ.120.

PMQ.110 Por favor escoge el dibujo que más se parece a tu cuerpo.

CAPI INSTRUCTION: DISPLAY MALE HAIR GROWTH IMAGES 1-4 ON BUTTONS. HIGHLIGHT EACH BUTTON AS THE DESCRIPTION OF THE DEVELOPMENT STAGE IS READ. LABEL EACH BUTTON BELOW THE IMAGE: Dibujo 1, Dibujo 2, Dibujo 3, Dibujo 4.

STAGE 1 MALE HAIR DESCRIPTION DISPLAY: Dibujo 1: No hay vellos.

STAGE 2 MALE HAIR DESCRIPTION DISPLAY: Dibujo 2: Hay unos pocos vellos largos y suaves en la base del pene. Los vellos pueden ser lisos o rizados.

STAGE 3 MALE HAIR DESCRIPTION DISPLAY: Dibujo 3: Los vellos son más gruesos y más rizados. Hay vellos creciendo en una parte más grande que en el Dibujo 2.

STAGE 4 MALE HAIR DESCRIPTION DISPLAY: Dibujo 4: Los vellos son más oscuros y rizados y cubren una parte más grande que en el Dibujo 3.

STAGE 1 MALE HAIR	1 (END OF SECTION)
STAGE 2 MALE HAIR	2 (END OF SECTION)
STAGE 3 MALE HAIR	3 (END OF SECTION)
STAGE 4 MALE HAIR	4 (END OF SECTION)
REFUSED	7 (END OF SECTION)
DON'T KNOW	9 (END OF SECTION)

PMQ.120 Por favor escoge el dibujo que más se parece a tu cuerpo.

CAP I INSTRUCTION: DISPLAY MALE HAIR GROWTH IMAGES 1-5 ON BUTTONS. HIGHLIGHT EACH BUTTON AS THE DESCRIPTION OF THE DEVELOPMENT STAGE IS READ. LABEL EACH BUTTON BELOW THE IMAGE: Dibujo 1, Dibujo 2, Dibujo 3, Dibujo 4, Dibujo 5.

STAGE 1 MALE HAIR DESCRIPTION DISPLAY: Dibujo 1: No hay vellos.

STAGE 2 MALE HAIR DESCRIPTION DISPLAY: Dibujo 2: Hay unos pocos vellos largos y suaves en la base del pene. Los vellos pueden ser lisos o rizados.

STAGE 3 MALE HAIR DESCRIPTION DISPLAY Dibujo 3: Los vellos son más gruesos y más rizados. Hay vellos creciendo en una parte más grande que en el Dibujo 2.

STAGE 4 MALE HAIR DESCRIPTION DISPLAY: Dibujo 4: Los vellos son más oscuros y más rizados y cubren una parte más grande que en el Dibujo 3. No hay vellos en la entrepierna.

STAGE 5 MALE HAIR DESCRIPTION DISPLAY: Dibujo 5: Los vellos se han extendido a la entrepierna. Los vellos cubren una parte de forma triangular.

STAGE 1 MALE HAIR	1
STAGE 2 MALE HAIR	2
STAGE 3 MALE HAIR	3
STAGE 4 MALE HAIR	4
STAGE 5 MALE HAIR	5
REFUSED	7
DON'T KNOW	9

VOICE SCRIPT TUTORIAL (ACASI)

INTRO1.WAV

Estas preguntas son de práctica. Por favor toque el botón "Siguiente" para ver la pregunta.

INTRO2.WAV

Aquí hay un ejemplo de un tipo de pregunta: "¿Está usted cansado(a)?" Por favor seleccione ..."

INTRO3.WAV

Otro tipo de pregunta requiere que se responda con un número. Conteste tocando los botones con números en el teclado. "¿Cuántas horas durmió usted anoche? Por favor anote una cantidad."

INTRO6.WAV

Otro tipo de pregunta requiere que se responda con un número y una unidad de tiempo. Conteste tocando los botones con números en el teclado y después seleccionando una unidad de tiempo. "¿Cuánto tiempo hace que no ve una película?"

INTRO4.WAV

Para volver a una pregunta anterior para cambiar su respuesta, toque el botón "Atrás".

INTRO5.WAV

Tal como las otras preguntas que usted ha contestado hoy, sus respuestas serán mantenidas en confidencia. Si no está seguro(a) de una respuesta, dénos su mejor estimación. Si desea hacer alguna pregunta acerca de cómo usar la computadora, por favor pregúntele a su entrevistador ahora.

INTRO5a.WAV

Tal como las otras preguntas que usted ha contestado hoy, sus respuestas serán mantenidas en privado. Si no está seguro(a) de una respuesta, dénos su mejor cálculo. Si desea hacer alguna pregunta acerca de cómo usar la computadora, por favor pregúntele a su entrevistador ahora.

INTRO7.WAV

Otro tipo de pregunta requiere que selecciones un dibujo o un botón

ERROR MESSAGES, GENERIC RESPONSES, AND INSTRUCTIONS (AUDIO-CASI)

AGE_INST.WAV

Por favor anote una edad.

AGE59.WAV

Su respuesta no puede exceder 59 años. Por favor toque el botón “Atrás”, toque “Borrar” y hágalo de nuevo.

AGE69.WAV

Su respuesta no puede exceder 69 años. Por favor toque el botón “Atrás”, toque “Borrar” y hágalo de nuevo.

BEGIN.WAV

Por favor oprima el botón que dice “Siguiente” para empezar.

CHOICES.WAV

Por favor seleccione una de las siguientes opciones.

COLOR.WAV

Por favor seleccione el color que más le gusta.

CONTINUE.WAV

Por favor oprima el botón que dice “Siguiente” para continuar.

DAYS.WAV

Días.

DRAW1.WAV

Dibujo 1.

DRAW2.WAV

Dibujo 2.

DRAW3.WAV

Dibujo 3.

DRAW4.WAV

Dibujo 4.

DRAW5.WAV

Dibujo 5.

DONTKNOW.WAV

No sé la respuesta.

DWMY_I.WAV

Por favor anote la cantidad de días, semanas, meses o años y después seleccione la unidad de tiempo.

ENTR_NUM.WAV

Por favor anote una cantidad.

Err1to5.WAV

Por favor anote un número entre 1 y 5. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo.

ERRAGE1.WAV

Su respuesta es mayor que la edad anotada. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo.

ERRAGE2.WAV

Su respuesta es mayor que la edad anotada. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo.

FINAL.WAV

Gracias por participar en esta encuesta. Por favor dígame al entrevistador(a) que usted terminó.

HI30.WAV

Su respuesta no puede exceder 30 días. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo.

INJCTERR.WAV

Anteriormente usted informó que había usado una aguja para inyectarse drogas **no** recetadas por un médico. ¿Cuál de estas drogas se inyectó?

FIRSTSMOKE.WAV

Su respuesta es anterior a la edad en la cual dijo que fumó un cigarrillo completo por primera vez. Por favor toque el botón “Atrás”, toque “Borrar” y hágalo de nuevo.

FIRSTUSE.WAV

Su respuesta es anterior a su respuesta sobre la edad en que usó marihuana o hachís por primera vez. Por favor toque el botón “Atrás”, toque “Borrar” y hágalo de nuevo.

LASTUSE.WAV

Su respuesta al tiempo del uso de la última vez es anterior a la respuesta de la edad del uso por primera vez. Por favor toque el botón “Atrás”, toque “Borrar” y hágalo de nuevo.

LIFEUSE.WAV

Su respuesta no es consistente con su consumo en toda la vida. Por favor toque el botón “Atrás”, toque “Borrar” y hágalo de nuevo.

MONTHS.WAV

Meses

MONTHUSE.WAV

Su respuesta no es consistente con su consumo en los últimos 30 días. Por favor toque el botón “Atrás”, toque “Borrar” y hágalo de nuevo.

NEXT.WAV

Toque el botón “Siguiente” cuando esté listo(a) para continuar.

NO.WAV

No.

NUM_ZERO.WAV

Por favor anote una cantidad o anote cero por ninguna.

PLS_SLCT.WAV

Por favor seleccione . . .

REFUSAL.WAV

Preferiría no contestar.

RETRY.WAV

Realmente tenía la intención de contestar.

Sx5err.WAV (SXQ.550, SXQ.718, SXQ.841, SXQ.836, SXQ.624)

Su respuesta es mayor que la cantidad de parejas de sexo masculino que ha tenido en toda su vida. Por favor toque el botón “Atrás”, toque “Borrar” y hágalo de nuevo.

Sx6err.WAV (SXQ.739, SXQ.818, SXQ.636)

Su respuesta es mayor que la cantidad de compañeras sexuales de toda su vida. Por favor toque el botón “Atrás”, toque “Borrar” y hágalo de nuevo.

Sx9err.WAV (SXQ.651, SXQ.654)

Su respuesta es mayor que la cantidad de compañeros o compañeras sexuales que ha tenido en los últimos 12 meses. Por favor toque el botón “Atrás”, toque “Borrar” y hágalo de nuevo.

Sx10err.WAV (SXQ.654)

Sus respuestas a las últimas dos preguntas no son consistentes con la cantidad total de compañeros o compañeras sexuales que ha tenido en los últimos 12 meses. Por favor toque el botón “Atrás”, toque “Borrar” y hágalo de nuevo.

Sx11err.WAV (SXQ.410, SXQ.712)

Su respuesta no es consistente con sus respuestas anteriores acerca de sus compañeros sexuales. Por favor toque el botón “Atrás”, toque “Borrar” y hágalo de nuevo.

Sx12err.WAV (SXQ.724)

Su respuesta no es consistente con sus respuestas anteriores acerca de sus compañeros de sexo vaginal. Por favor toque el botón “Atrás”, toque “Borrar” y hágalo de nuevo.

Sx13err.WAV (SXQ.727)

Su respuesta es mayor que la cantidad de sus compañeros de sexo vaginal de toda su vida. Por favor toque el botón “Atrás”, toque “Borrar” y hágalo de nuevo.

Sx14err.WAV (SXQ.624)

Su respuesta no es consistente con sus respuestas anteriores acerca de sus compañeros de sexo oral. Por favor toque el botón “Atrás”, toque “Borrar” y hágalo de nuevo.

Sx15err.WAV (SXQ.630)

Su respuesta es anterior a su respuesta de la edad en que le hizo sexo oral a un hombre por primera vez. Por favor toque el botón “Atrás”, toque “Borrar” y hágalo de nuevo.

Sx16err.WAV (SXQ.736)

Su respuesta no es consistente con sus respuestas anteriores acerca de sus relaciones sexuales con mujeres. Por favor toque el botón “Atrás”, toque “Borrar” y hágalo de nuevo.

Sx17err.WAV (SXQ.636)

Su respuesta no es consistente con sus respuestas anteriores acerca de sus compañeras de sexo oral. Por favor toque el botón “Atrás”, toque “Borrar” y hágalo de nuevo.

Sx18err.WAV (SXQ.642)

Su respuesta es anterior a su respuesta de la edad en que le hizo sexo oral a una mujer por primera vez. Por favor toque el botón “Atrás”, toque “Borrar” y hágalo de nuevo.

Sx19err.WAV (SXQ.812)

Su respuesta no es consistente con sus respuestas anteriores acerca de sus compañeras sexuales. Por favor toque el botón “Atrás”, toque “Borrar” y hágalo de nuevo.

Sx20err.WAV (SXQ.824)

Su respuesta no es consistente con sus respuestas anteriores acerca de sus compañeras de sexo vaginal. Por favor toque el botón “Atrás”, toque “Borrar” y hágalo de nuevo.

Sx21err.WAV (SXQ.827)

Su respuesta es mayor que la cantidad de compañeras de sexo vaginal de toda su vida. Por favor toque el botón “Atrás”, toque “Borrar” y hágalo de nuevo.

Sx22err.WAV (SXQ.836)

Su respuesta no es consistente con sus respuestas anteriores acerca de relaciones sexuales con un compañero. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo.

Sx23err.WAV (SXQ.627)

Su respuesta es mayor que la cantidad de compañeros de sexo oral de toda su vida. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo.

Sx24err.WAV (SXQ.639)

Su respuesta es mayor que la cantidad de compañeras de sexo oral de toda su vida. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo.

Sx25err.WAV (SXQ.633, 621)

"Su respuesta es menor que su respuesta a la edad en la que tuvo por primera vez algún tipo de relación sexual. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

Sx26err.WAV (SXQ.841, SXQ.627)

"Su respuesta es mayor que la cantidad de parejas de sexo masculino que ha tenido en los últimos 12 meses. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

Sx27err.WAV (SXQ.639)

"Su respuesta es mayor que la cantidad de parejas de sexo femenino que ha tenido en los últimos 12 meses. Por favor toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

TRYAGAIN.WAV

Por favor hágalo de nuevo.

WAS_IT.WAV

¿Fue esto . . .

WEEKS.WAV

Semanas

WHYNOT.WAV

Usted no contestó la pregunta anterior. ¿Tenía la intención de contestar, preferiría no contestar la pregunta, o no sabe la respuesta? Por favor seleccione...

WOULD_SAY.WAV

¿Diría . . .

YEARS.WAV

Años

YES.WAV

Sí

ZEROERR.WAV

Su respuesta debe ser mayor que cero. Por favor toque el botón “Atrás”, toque “Borrar” y hágalo de nuevo.

TOBACCO – SMQ
Target Group: SPs 12-19 (Audio-CASI)

SMQ621_.WAV

Las siguientes preguntas son acerca de fumar cigarrillos y otros tipos de tabaco. No incluya (puros/tabacos) ni marihuana.

SMQ621.WAV

¿Más o menos cuántos cigarrillos ha fumado en **toda su vida**?

SMQ621-1.WAV	Nunca he fumado, ni siquiera una aspirada
SMQ621-2.WAV	1 o más aspiradas, pero nunca un cigarrillo completo
SMQ621-3.WAV	1 cigarrillo
SMQ621-4.WAV	2 a 5 cigarrillos
SMQ621-5.WAV	6 a 15 cigarrillos
SMQ621-6.WAV	16 a 25 cigarrillos
SMQ621-7.WAV	26 a 99 cigarrillos
SMQ621-8.WAV	100 o más cigarrillos

SMQ631.WAV

¿Qué edad tenía usted cuando fumó un cigarrillo entero por **primera** vez?

SMQ630_I.WAV

Por favor anote una edad o seleccione cero si nunca fumó un cigarrillo entero.

SMQ641.WAV

Durante los últimos **30 días**, ¿cuántos días fumó cigarrillos?

SMQ050.WAV

¿Cuánto tiempo hace que dejó de fumar cigarrillos?

SMQ055.WAV

¿Qué edad tenía usted la **última vez** que fumó cigarrillos?

SMQ650.WAV

Durante los últimos **30 días**, en los días que usted fumó, ¿cuántos cigarrillos fumó al día?

SMQ078.WAV

¿Qué tan pronto después que despierta fuma usted?

SMQ078-1.WAV	Dentro de 5 minutos
SMQ078-2.WAV	De 6 a 30 minutos
SMQ078-3.WAV	De más de 30 minutos a 1 hora
SMQ078-4.WAV	De más de 1 hora a 2 horas
SMQ078-5.WAV	De más de 2 horas a 3 horas
SMQ078-6.WAV	De más de 3 horas a 4 horas
SMQ078-7.WAV	Más de 4 horas

SMQ661.WAV

Durante los **últimos 30 días**, en los días que fumó, ¿qué marca de cigarrillos fumó **usualmente**?

SMQ661-1.WAV	Marlboro
SMQ661-2.WAV	Camel
SMQ661-3.WAV	Newport
SMQ661-8.WAV	Otra marca
SMQ661-9.WAV	Ninguna marca en particular
SMQ661-10.WAV	Cigarrillos que uno mismo arma

SMQ665A.WAV

Por favor, seleccione el paquete de Marlboro que más se parece a la marca que usted fuma. Si no encuentra el paquete que usted fuma, seleccione 'otro Marlboro'.

SMQ665B.WAV

Por favor, seleccione el paquete de Camel que más se parece a la marca que usted fuma. Si no encuentra el paquete que usted fuma, seleccione 'otro Camel'.

SMQ665C.WAV

Por favor, seleccione el paquete de Newport que más se parece a la marca que usted fuma. Si no encuentra el paquete que usted fuma, seleccione 'otro Newport'.

SMQ665D.WAV

Por favor, seleccione el paquete que más se parece a la marca que usted fuma. Si no encuentra el paquete que usted fuma, seleccione 'otra marca de cigarrillos'.

SMQ670.WAV

Durante los últimos **12 meses**, ¿ha dejado de fumar un día o más **debido a que usted estaba tratando de dejar de fumar?**

SMQ681_.WAV

Las siguientes preguntas son acerca del uso de productos de tabaco en los últimos **5 días**.

DURING_THE_PAST.WAV

Durante los últimos **5 días**, incluyendo hoy, ¿fumó usted

CIGARETTES.WAV

cigarrillos

SMQ681.WAV

pipas de agua o “hookahs”, cigarrillos, pipas, puros, puritos o cigarrillos electrónicos?

SMQ692.WAV (SMQ.692A & B)

¿Cuál de estos productos fumó?

SELECT_ALL_USED.WAV (SMQ.692A & b and SMQ.853)

Por favor seleccione todo lo que usó.

SMQ692-1.WAV	Cigarrillos
SMQ692-2.WAV	Pipas
SMQ692-3.WAV	Puros, puritos o tabacos
SMQ692-4.WAV	Pipas de agua o “hookahs”
SMQ692-5.WAV	Cigarrillos electrónicos

SMQ710.WAV

Durante los últimos **5 días**, incluyendo hoy, ¿cuántos días fumó usted cigarrillos?

SMQ720.WAV

Durante los últimos **5 días**, incluyendo hoy, en los días que fumó, ¿cuántos cigarrillos fumó cada día?

SMQ725.WAV

¿Cuándo fumó usted su último cigarrillo? ¿Fue esto. . .

TODAY.WAV	Hoy
YESTER.WAV	Ayer
THREE.WAV	Hace de 3 a 5 días

SMQ740.WAV

Durante los últimos **5 días**, incluyendo hoy, ¿cuántos días fumó usted pipa?

SMQ771.WAV

Durante los últimos **5 días**, incluyendo hoy, ¿cuántos días fumó usted puros, puritos o tabacos?

SMQ845.WAV

Durante los últimos 5 días, (incluyendo hoy), ¿cuántos días fumó usted tabaco en una pipa de agua o “hookah”?

SMQ849.WAV

Durante los últimos 5 días, incluyendo hoy, ¿cuántos días fumó usted un cigarrillo electrónico?

SMQ851_.WAV

Los productos de tabaco que no se fuman se ponen en la boca o la nariz e incluyen productos como el tabaco de mascar, el “snuff” o rapé o sea tabaco en polvo, el “snus” o productos que se disuelven.

SMQ851.WAV

Durante los últimos 5 días, incluyendo hoy, ¿usó usted algún producto de tabaco el cual no se fuma?

SMQ851_I.WAV

No incluya productos que reemplazan la nicotina, tales como parches, chicle, pastillas de chupar o aerosoles los cuales se consideran productos que ayudan a dejar de fumar.

SMQ853.WAV

¿Cuáles de estos productos usó usted?

SMQ853-1.WAV	Tabaco de mascar
SMQ853-2.WAV	Snuff o rapé (tabaco en polvo)
SMQ853-3.WAV	Snus
SMQ853-4.WAV	Productos que se disuelven

SMQ800.WAV

Durante los últimos **5 días**, incluyendo hoy, ¿cuántos días usó usted tabaco de mascar, tal como Redman, Levi Garrett o Beechnut?

SMQ817.WAV

Durante los últimos **5 días**, incluyendo hoy, ¿cuántos días usó usted rapé, tal como Skoal, Skoal Bandits, o Copenhagen?

SMQ857.WAV

Durante los últimos **5 días**, incluyendo hoy, ¿cuántos días usó usted snus?

SMQ861.WAV

Durante los últimos **5 días**, incluyendo hoy, ¿cuántos días usó usted productos de tabaco que se disuelven tales como strips o tiritas u orbs o pastillas?

SMQ863.WAV

Durante los últimos **5 días**, incluyendo hoy, ¿usó usted algún producto para la terapia de reemplazo de nicotina tal como parches de nicotina, chicles de nicotina, pastillas para chupar, inhaladores o aerosoles nasales?

SMQ830.WAV

Durante los últimos **5 días**, incluyendo hoy, ¿cuántos días usó usted algún producto de terapia de reemplazo de nicotina tal como parches de nicotina, chicles de nicotina, pastillas para chupar, inhaladores o aerosoles nasales?

SMQ840.WAV

¿Cuándo fue la última vez que usted usó un producto de terapia de reemplazo de nicotina? ¿Fue esto . . .

ALCOHOL USE – ALQ
Target Group: SPs 12-17 (Audio-CASI)

ALQ010__.WAV

Las siguientes preguntas son acerca del uso de alcohol. Esto incluye cerveza, vino, sangría y licores tales como ron, ginebra, vodka o whiskey. Esto no incluye tomar unos pocos sorbos de vino con propósitos religiosos.

ALQ010.WAV

¿Qué edad tenía usted cuando se tomó su **primera** bebida alcohólica, que no fueran unos pocos sorbos?

ALQ010-1.WAV	Nunca me he tomado una bebida alcohólica que no fueran unos pocos sorbos.
ALQ010-2.WAV	8 años de edad o más joven
ALQ010-3.WAV	9 o 10 años de edad
ALQ010-4.WAV	11 o 12 años de edad
ALQ010-5.WAV	13 o 14 años de edad
ALQ010-6.WAV	15 o 16 años de edad
ALQ010-7.WAV	17 años de edad o mayor

ALQ022.WAV

Durante su vida, ¿cuántos días se ha tomado al menos una bebida alcohólica?

ALQ022-1.WAV	1 o 2 días
ALQ022-2.WAV	3 a 9 días
ALQ022-3.WAV	10 a 19 días
ALQ022-4.WAV	20 a 39 días
ALQ022-5.WAV	40 a 99 días
ALQ022-6.WAV	100 o más días

ALQ031.WAV

Durante los últimos 30 días, ¿cuántos días se ha tomado al menos una bebida alcohólica?

ALQ031-1.WAV	0 días
ALQ031-2.WAV	1 o 2 días
ALQ031-3.WAV	3 a 5 días
ALQ031-4.WAV	6 a 9 días
ALQ031-5.WAV	10 a 19 días
ALQ031-6.WAV	20 a 29 días
ALQ031-7.WAV	Los 30 días

ALQ042_4.WAV

Durante los últimos 30 días, ¿cuántos días se ha tomado 4 bebidas alcohólicas seguidas, es decir, en un par de horas?

ALQ042_5.WAV

Durante los últimos 30 días, ¿cuántos días se ha tomado 5 bebidas alcohólicas seguidas, es decir, en un par de horas?

ALQ041-1.WAV	0 días
ALQ041-2.WAV	1 día
ALQ041-3.WAV	2 días
ALQ041-4.WAV	3 a 5 días
ALQ041-5.WAV	6 a 9 días
ALQ041-6.WAV	10 a 19 días
ALQ041-7.WAV	20 o más días

DRUG USE – DUQ
Target Group: SPs 12-59 (Audio-CASI)

DUQ200_.WAV

Las siguientes preguntas son acerca del uso de drogas no recetadas por un médico. Por favor recuerde que sus respuestas a estas preguntas son estrictamente confidenciales.

DUQ200.WAV

Las primeras preguntas son acerca de la marihuana y el hachís. La marihuana se conoce también como mota o hierba. La marihuana normalmente se fuma en cigarrillos, llamados “joints” o en una pipa. A veces se cocina con la comida. El hachís es una forma de marihuana que también se llama “hash”. Normalmente se fuma en pipa. Otra forma de hachís es el aceite de hachís.

Alguna vez, aunque sea una, ¿ha usado marihuana o hachís?

DUQ210.WAV

¿Qué edad tenía usted la **primera vez** que usó marihuana o hachís?

DUQ211.WAV

¿Ha fumado usted alguna vez marihuana o hachís al menos **una vez al mes por más de un año**?

DUQ213.WAV

¿Qué edad tenía cuando empezó a fumar marihuana o hachís al menos **una vez al mes durante un año**?

DUQ215.WAV

¿Cuánto tiempo hace desde la última vez que usted fumó marihuana o hachís al menos **una vez al mes durante un año**?

DUQ217.WAV

Durante el tiempo en que fumó marihuana o hachís, ¿con qué frecuencia la usaba **normalmente**?

DUQ217-1.WAV	Una vez al mes
DUQ217-2.WAV	2-3 veces al mes
DUQ217-3.WAV	4-8 veces al mes (más o menos 1-2 veces a la semana)
DUQ217-4.WAV	9-24 veces al mes (más o menos 3-6 veces a la semana)
DUQ217-5.WAV	25-30 veces al mes (una o más veces al día)

DUQ219.WAV

Durante el tiempo que fumó marihuana o hachís, ¿cuántos cigarrillos (joints) o pipas fumaba **normalmente** en un día?

DUQ219-1.WAV	1 al día
DUQ219-2.WAV	2 al día
DUQ219-3.WAV	3-5 al día
DUQ219-4.WAV	Seis o más al día

DUQ220.WAV

¿Cuánto tiempo hace desde la **última vez** que usted usó marihuana o hachís?

DUQ230.WAV

Durante los **últimos 30 días**, ¿cuántos días usó usted marihuana o hachís?

DUQ240.WAV

¿Ha usado **alguna vez** cocaína, “crack” cocaína, heroína, o metanfetamina?

DUQ250_.WAV

Las siguientes preguntas son acerca de cocaína, incluidas todas las formas diferentes de cocaína, tales como en polvo, “crack”, “free base” y pasta de coca.

DUQ250.WAV

Alguna vez, aunque sea una, ¿ha usado cocaína, en alguna forma?

DUQ260.WAV

¿Qué edad tenía usted la **primera vez** que usó cocaína, en alguna forma?

DUQ270.WAV

¿Cuánto tiempo hace desde la **última vez** que usted usó cocaína, en alguna forma?

DUQ272.WAV

Durante toda su **vida**, ¿en total cuántas veces ha usado usted cocaína, en alguna forma?

- | | |
|---------------------|-----------------|
| DUQ272-1.WAV | Una vez |
| DUQ272-2.WAV | 2-5 veces |
| DUQ272-3.WAV | 6-19 veces |
| DUQ272-4.WAV | 20-49 veces |
| DUQ272-5.WAV | 50-99 veces |
| DUQ272-6.WAV | 100 veces o más |

DUQ280.WAV

Durante los **últimos 30 días**, ¿cuántos días usó usted cocaína en alguna forma?

DUQ290_.WAV

Las siguientes preguntas son acerca de heroína.

DUQ290.WAV

Alguna vez, aunque sea una, ¿ha usado heroína?

DUQ300.WAV

¿Qué edad tenía usted la **primera vez** que usó heroína?

DUQ310.WAV

¿Cuánto tiempo hace desde la **última vez** que usted usó heroína?

DUQ320.WAV

Durante los **últimos 30 días**, ¿cuántos días usó heroína?

DUQ330_.WAV

Las siguientes preguntas son acerca de metanfetamina, conocida también como crack, cristal, ice o speed. .

DUQ330.WAV

Alguna vez, aunque sea una, ¿ha usado metanfetamina?

DUQ340.WAV

¿Qué edad tenía usted la **primera vez** que usó metanfetamina?

DUQ350.WAV

¿Cuánto tiempo hace desde la **última vez** que usted usó metanfetamina?

DUQ352.WAV

Durante toda su **vida**, en total, ¿cuántas veces ha usado usted metanfetamina?

DUQ352-1.WAV	Una vez
DUQ352-2.WAV	2-5 veces
DUQ352-3.WAV	6-19 veces
DUQ352-4.WAV	20-49 veces
DUQ352-5.WAV	50-99 veces
DUQ352-6.WAV	100 veces o más

DUQ360.WAV

Durante los **últimos 30 días**, ¿cuántos días usó usted metanfetamina?

DUQ370_.WAV

Las siguientes preguntas son acerca de las diferentes formas en que se pueden usar ciertas drogas.

DUQ370.WAV

Alguna vez, aunque sea una, ¿ha usado una aguja para inyectarse una droga **no recetada** por un médico?

DUQ380.WAV

¿Cuál de las siguientes drogas se ha inyectado usted usando una aguja?

DUQ380_I.WAV

Por favor seleccione todas las drogas que se ha inyectado.

DUQ380-1.WAV	Cocaína
DUQ380-2.WAV	Heroína
DUQ380-3.WAV	Metanfetamina
DUQ380-4.WAV	Esteroides
DUQ380-5.WAV	Alguna otra droga

DUQ390.WAV

¿Qué edad tenía usted la **primera vez** que usó una aguja para inyectarse cualquier droga no recetada por un médico?

DUQ400.WAV

¿Cuánto tiempo hace desde la **última vez** que usted usó una aguja para inyectarse una droga no recetada por un médico?

DUQ410.WAV

Durante toda su **vida**, en total, ¿cuántas veces ha usado una aguja para inyectarse drogas no recetadas por un médico?

- DUQ410-1.WAV** Una vez
- DUQ410-2.WAV** 2-5 veces
- DUQ410-3.WAV** 6-19 veces
- DUQ410-4.WAV** 20-49 veces
- DUQ410-5.WAV** 50-99 veces
- DUQ410-6.WAV** 100 veces o más

DUQ420.WAV

Piense en el momento durante su vida en el cual se inyectó drogas **más frecuentemente**. ¿Con qué frecuencia se inyectaba en ese entonces?

- DUQ420-1.WAV** Más de una vez al día
- DUQ420-2.WAV** Más o menos una vez al día
- DUQ420-3.WAV** Al menos una vez a la semana, pero no todos los días
- DUQ420-4.WAV** Al menos una vez al mes, pero no todas las semanas
- DUQ420-5.WAV** Menos de una vez al mes

DUQ430.WAV

¿Ha estado usted **alguna vez** en un tratamiento para adicción a drogas o programa de rehabilitación de adicción a drogas?

SEXUAL BEHAVIOR – SXQ
Target Group: SPs 14-69 (Audio-CASI)

SXQ615_.WAV

El siguiente conjunto de preguntas es acerca de su historia sexual. Por relaciones sexuales, queremos decir sexo vaginal, oral o anal. Por favor recuerde que sus respuestas son estrictamente confidenciales.

SXQ615.WAV

¿Ha tenido **alguna vez algún** tipo de relación sexual?

SXQ700.WAV

¿Ha tenido **alguna vez** sexo vaginal, llamado también coito, con un hombre? Esto significa el pene de un hombre dentro de su vagina.

SXQ703.WAV

¿Le ha **hecho alguna vez** sexo oral a un hombre? Esto significa que usted pone la boca en el pene o los genitales de un hombre.

SXQ706.WAV

¿Ha tenido **alguna vez** sexo anal? Esto significa el contacto entre el pene de un hombre y su ano o trasero.

SXQ709.WAV

¿Ha tenido **alguna vez algún** tipo de relación sexual con una mujer? Por relaciones sexuales, queremos decir contacto sexual con la vagina o genitales de otra mujer.

SXQ618.WAV

¿Qué edad tenía usted la primera vez que tuvo **algún** tipo de relación sexual, incluyendo

SXQ618-1.WAV	sexo vaginal, oral o anal?
SXQ618-2.WAV	sexo vaginal o anal
SXQ618-3.WAV	sexo oral o vaginal
SXQ618-4.WAV	sexo oral o anal
SXQ618-5.WAV	sexo vaginal
SXQ618-6.WAV	sexo anal
SXQ618-7.WAV	sexo oral
SXQ712.WAV	

En **toda su vida**, ¿con cuántos **hombres** ha tenido **algún** tipo de relación sexual?

SXQ718.WAV

En **los últimos 12 meses**, ¿con cuántos **hombres** ha tenido **algún** tipo de relación sexual?

SXQ724.WAV

En **toda su vida**, ¿con cuántos **hombres** ha tenido sexo **vaginal**? Sexo vaginal significa el pene de un hombre dentro de su vagina.

SXQ727.WAV

En **los últimos 12 meses**, ¿con cuántos **hombres** ha tenido sexo **vaginal**? Sexo vaginal significa el pene de un hombre dentro de su vagina.

SXQ621.WAV

¿Qué edad tenía usted la primera vez que **le hizo** sexo oral a un hombre? Hacer sexo oral significa que usted pone la boca en el pene o los genitales de un hombre.

SXQ624.WAV

En **toda su vida** ¿a cuántos **hombres** les ha **hecho** sexo **oral**?

SXQ627.WAV

En **los últimos 12 meses** ¿a cuántos **hombres** les ha **hecho** sexo **oral**?

SXQ630.WAV

¿Cuánto tiempo hace desde la última vez que **le hizo** sexo **oral** a un **nuevo compañero sexual**? Un nuevo compañero sexual es alguien con quien nunca antes había tenido relaciones sexuales.

SXQ736.WAV

En **toda su vida**, ¿con cuántas **mujeres** ha tenido relaciones sexuales? Por relaciones sexuales, queremos decir contacto sexual con la vagina o genitales de otra mujer.

SXQ739.WAV

En **los últimos 12 meses**, ¿con cuántas **mujeres** ha tenido relaciones sexuales? Por relaciones sexuales, queremos decir contacto sexual con la vagina o genitales de otra mujer.

SXQ741.WAV

¿Le ha **hecho alguna vez** sexo **oral** a una **mujer**? Hacer sexo oral significa que usted pone la boca en la vagina o los genitales de otra mujer.

SXQ633.WAV

¿Qué edad tenía usted la primera vez que le **hizo** sexo oral a una mujer? Hacer sexo oral significa que usted pone la boca en la vagina o los genitales de una mujer.

SXQ636.WAV

En **toda su vida**, ¿a cuántas **mujeres** les ha **hecho** sexo **oral**?

SXQ639.WAV

En **los últimos 12 meses**, ¿a cuántas **mujeres** les ha **hecho** sexo **oral**?

SXQ642.WAV

¿Cuánto tiempo hace desde la última vez que **le hizo** sexo **oral** a una **nueva compañera sexual**? Una nueva compañera sexual es alguien con quien nunca antes había tenido relaciones sexuales.

SXQ744.WAV

El siguiente conjunto de preguntas es acerca de todos sus compañeros sexuales, hombres y mujeres.

SXQ645.WAV

Cuando usted **hizo** sexo **oral** en **los últimos 12 meses**, ¿con qué frecuencia usó **protección**, tal como preservativo o condón o barrera dental?

- | | |
|--------------------------|-------------|
| SXQ645-1.WAV | Nunca |
| SXQ645-2.WAV | Raramente |
| SXQ645-3.WAV | Usualmente |
| SXQ645-4.WAV | Siempre |
| SXQ645-5.WAV male | Inseguro(a) |

SXQ648.WAV

En los **últimos 12 meses**, ¿tuvo **algún** tipo de relación sexual con una persona con quien nunca antes había tenido relaciones sexuales?

SXQ651.WAV

De las personas con quienes tuvo **algún** tipo de relación sexual en los **últimos 12 meses**, ¿cuántas eran cinco años o más **mayores** que usted?

SXQ654.WAV

De las personas con quienes tuvo **algún** tipo de relación sexual en los **últimos 12 meses**, ¿cuántas eran cinco años o menos **menores** que usted?

SXQ800.WAV

¿Ha tenido **alguna vez** sexo vaginal, llamado también coito, con una mujer? Esto significa su pene dentro de la vagina de una mujer.

SXQ803.WAV

¿Le ha **hecho alguna vez** sexo oral a una mujer? Esto significa que usted pone la boca en la vagina o los genitales de una mujer.

SXQ806.WAV

¿Ha tenido **alguna vez** sexo anal con una mujer? Sexo anal significa el contacto entre su pene y el ano o trasero de una mujer.

SXQ809.WAV

¿Ha tenido **alguna vez algún** tipo de relación sexual con un hombre, incluyendo sexo oral o anal?

SXQ812.WAV

En **toda su vida**, ¿con cuántas **mujeres** ha tenido **algún** tipo de relación sexual?

SXQ818.WAV

En los **últimos 12 meses**, ¿con cuántas **mujeres** ha tenido **algún** tipo de relación sexual?

SXQ824.WAV

En **toda su vida**, ¿con cuántas **mujeres** ha tenido sexo **vaginal**? Sexo vaginal significa su pene dentro de la vagina de una mujer.

SXQ827.WAV

En los **últimos 12 meses**, ¿con cuántas **mujeres** ha tenido sexo **vaginal**? Sexo vaginal significa su pene dentro de la vagina de una mujer.

SXQ410.WAV

En **toda su vida**, ¿con cuántos **hombres** ha tenido usted sexo anal u oral?

SXQ550.WAV

En los últimos 12 meses, ¿con cuántos **hombres** ha tenido usted sexo anal u oral?

SXQ836.WAV

En **toda su vida**, ¿con cuántos **hombres** ha tenido sexo anal?

SXQ841.WAV

En los **últimos 12 meses**, ¿con cuántos **hombres** ha tenido sexo anal?

SXQ853.WAV

¿Le ha **hecho alguna vez** sexo **oral** a un **hombre**? Hacer sexo oral significa que usted pone la boca en el pene o los genitales de un hombre.

SXQ610.WAV

En los **últimos 12 meses**, ¿más o menos cuántas **veces** ha tenido usted

VAGINAL ANAL SEX.WAV

sexo vaginal o anal

VAGINAL SEX.WAV

sexo vaginal

ANAL SEX.WAV

sexo anal

SXQ610-0.WAV

Nunca

SXQ610-1.WAV

Una vez

SXQ610-2.WAV

2-11 veces

SXQ610-3.WAV

12-51 veces

SXQ610-4.WAV

52-103 veces

SXQ610-5.WAV

104-364 veces

SXQ610-6.WAV

365 veces o más

SXQ250.WAV

En los **últimos 12 meses**, ¿más o menos con qué frecuencia ha tenido

WITHOUT CONDOM.WAV

sin usar preservativo o condón

SXQ250-1.WAV

Nunca

SXQ250-2.WAV

Menos de la mitad del tiempo

SXQ250-3.WAV

Más o menos la mitad del tiempo

SXQ250-4.WAV

No siempre, pero más de la mitad del tiempo

SXQ250-5.WAV

Siempre

SXQ260.WAV

¿Le ha dicho **alguna vez** un médico u otro profesional de servicios de salud que usted tenía herpes genital?

SXQ265.WAV

¿Le ha dicho **alguna vez** un médico u otro profesional de servicios de salud que usted tenía verrugas genitales?

SXQ267.WAV

¿Qué edad tenía usted la primera vez que le dijeron que tenía verrugas genitales?

SXQ753.WAV

¿Le ha dicho **alguna vez** un médico u otro profesional de servicios de salud que usted tenía el virus del papiloma humano o VPH?

SXQ270.WAV

En los **últimos 12 meses**, ¿le ha dicho un médico u otro profesional de servicios de salud que usted tenía gonorrea, llamada a veces blenorragia?

SXQ272.WAV

En los **últimos 12 meses**, ¿le ha dicho alguna vez un médico u otro profesional de servicios de salud que usted tenía clamidia?

SXQ280.WAV

¿Está usted circuncidado o no circuncidado?

SXQ280-1.WAV

Circuncidado

SXQ280-2.WAV

No circuncidado

SXQ293.WAV

¿Cuál de las siguientes opciones representa mejor la manera en la que usted se identifica?

- | | |
|---------------------|--------------------------------|
| SXQ293-1.WAV | Gay |
| SXQ293-2.WAV | Heterosexual, o sea, no es gay |
| SXQ293-3.WAV | Bisexual |
| SXQ293-4.WAV | Otra cosa |

SXQ295.WAV

¿Cuál de las siguientes opciones representa mejor la manera en la que usted se identifica?

- | | |
|---------------------|---|
| SXQ295-1.WAV | Lesbiana o gay |
| SXQ295-2.WAV | Heterosexual, o sea, no es gay o lesbiana |
| SXQ295-3.WAV | Bisexual |
| SXQ295-4.WAV | Otra cosa |

PUBERTAL MATURATION – PMQ
Target Group: SPs 8-19 (Audio-CASI)

PMQ.INT_.WAV

Las siguientes preguntas son acerca de los cambios que suceden durante la pubertad. La pubertad es el tiempo en el cual tu cuerpo se convierte en el de un joven o una joven. Las respuestas a las preguntas acerca de tu cuerpo nos ayudan a comprender cómo crecen y cambian los niños y las niñas y los adolescentes. Tus respuestas serán mantenidas en forma confidencial. Nadie puede ver tus respuestas y no se las mostraremos a nadie.

PMQ.010_.WAV

La siguiente pantalla muestra etapas del desarrollo de los senos. Por favor mira los dibujos y escucha las descripciones. Después, escoge el dibujo que más se parece a tu cuerpo.

CHOOSE.WAV (PMQ.020, PMQ.030, PMQ.050, PMQ.060, PMQ.080, PMQ.090, PMQ.110, PMQ.120)
Por favor escoge el dibujo que más se parece a tu cuerpo.

BR_DRAW1.WAV

DIBUJO 1: Los senos son planos. Los pezones sobresalen un poquito.

BR_DRAW2.WAV

DIBUJO 2: Los senos son pequeños montículos. Los pezones sobresalen más que en el Dibujo 1. Hay más piel oscura alrededor de los pezones que en el Dibujo 1.

BR_DRAW3.WAV

DIBUJO 3: Los senos y la piel más oscura alrededor de los pezones son más grandes que en el Dibujo 2.

BR_DRAW4.WAV

Dibujo 4: Los pezones y la piel más oscura alrededor de los pezones forman un montículo que sobresale de los senos.

BR_DRAW5.WAV

Dibujo 5: Únicamente los pezones sobresalen de los senos. La piel más oscura alrededor de los pezones no sobresale.

PMQ.040_.WAV

La siguiente pantalla muestra etapas del crecimiento del vello en tus partes privadas. Por favor mira los dibujos y escucha las descripciones. Después escoge el dibujo que más se parece a tu cuerpo.

FH_DRAW1.WAV

Dibujo 1: No hay vellos en esta parte

FH_DRAW2.WAV

Dibujo 2: Hay unos pocos vellos largos y suaves en la parte privada. Los vellos pueden ser lisos o rizados.

FH_DRAW3.WAV

Dibujo 3: Los vellos son más gruesos y más rizados y se extienden un poco más sobre la parte privada que en el dibujo 2.

H_DRAW4-1.WAV (PMQ.050 & PMQ.110)

Dibujo 4: Los vellos son más oscuros y más rizados y cubren una parte más grande que en el dibujo 3

H_DRAW4-2.WAV (PMQ.060 & PMQ.120)

Dibujo 4: Los vellos son más oscuros y más rizados y cubren una parte más grande que en el Dibujo 3. No hay vellos en la entrepierna.

H_DRAW5.WAV (PMQ.060)

Dibujo 5: Hay vellos en la entrepierna. Los vellos cubren una parte de forma triangular.

MH_DRAW5.WAV (PMQ.120)

Dibujo 5: Los vellos se han extendido a la entrepierna. Los vellos cubren una parte de forma triangular.

PMQ.070_.WAV

La siguiente pantalla muestra etapas del crecimiento del pene, los testículos (bolas o pelotas) y el escroto (tejido que envuelve los testículos). Por favor mira los dibujos y escucha las descripciones. Después escoge el dibujo que más se parece a tu cuerpo.

MGEN_DRAW1.WAV

Dibujo 1: El pene, los testículos (bolas o pelotas) y el escroto (tejido que envuelve los testículos) son más o menos del mismo tamaño que cuando eras más pequeño.

MGEN_DRAW2.WAV

Dibujo 2: Los testículos (bolas o pelotas) son más grandes que en el dibujo 1 y el escroto (tejido que envuelve los testículos) llega hasta más bajo. El pene es solamente un poco más grande comparado con el dibujo 1.

MGEN_DRAW3.WAV

Dibujo 3: El pene es más largo que en el Dibujo 2. Los testículos (bolas o pelotas) y el escroto (tejido que envuelve los testículos) son más grandes y llegan más abajo que en el Dibujo 2.

MGEN_DRAW4.WAV

Dibujo 4: El pene es más largo y más grueso que en el Dibujo 3. El escroto (tejido que envuelve los testículos o bolas) es más grande y la piel es más oscura.

MGEN_DRAW5.WAV

Dibujo 5: El pene, el escroto (tejido que envuelve los testículos) y los testículos (bolas o pelotas) son más grandes que en el Dibujo 4.

PMQ.100_.WAV

La siguiente pantalla muestra etapas del crecimiento del vello en tus partes privadas. Por favor mira los dibujos y escucha las descripciones. Después escoge el dibujo que más se parece a tu cuerpo.

MH_DRAW1.WAV

Dibujo 1: No hay vellos.

MH_DRAW2.WAV

Dibujo 2: Hay unos pocos vellos largos y suaves en la base del pene. Los vellos pueden ser lisos o rizados.

MH_DRAW3.WAV

Dibujo 3: Los vellos son más gruesos y más rizados. Hay vellos creciendo en una parte más grande que en el Dibujo 2.

PMQ.130.WAV

¿Cómo fue el uso de la computadora para responder las preguntas? Por favor escoge una respuesta.

PMQ130-1.WAV

Fue fácil usar la computadora

PMQ130-2.WAV

Fue un poco difícil usar la computadora

PMQ130-3.WAV

Fue muy difícil usar la computadora

PMQ.140-A.WAV

¿Cómo fue escoger un dibujo de las partes privadas y vellos? Por favor escoge una respuesta.

PMQ140-1.WAV

No tuve problema para escoger un dibujo

PMQ140-2.WAV

Tuve un poco de problema para escoger un dibujo

PMQ140-3.WAV

Tuve mucho problema para escoger un dibujo

PMQ.140-B.WAV

¿Cómo fue escoger un dibujo de los senos y vellos? Por favor escoge una respuesta.

Appendix B

Launching the Asian MEC Interview

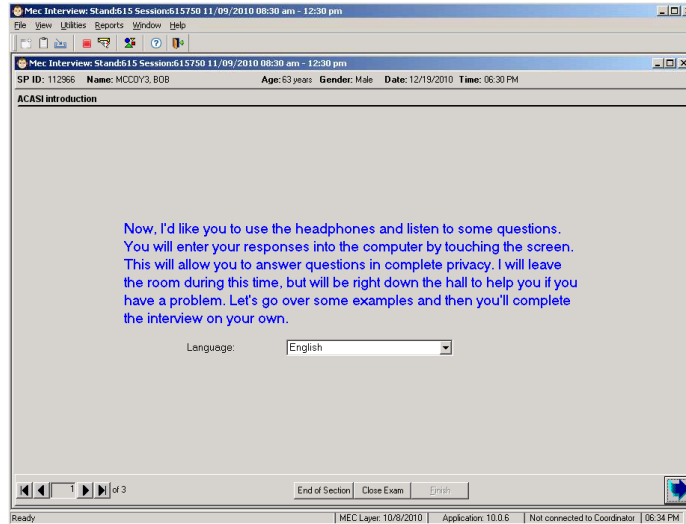
Appendix B

Launching the Asian MEC Interview

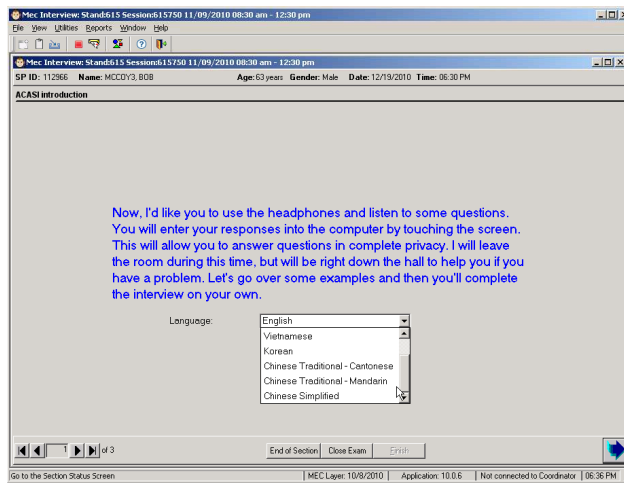
Select questionnaires of the MEC Interview have been translated into Chinese, Korean, and Vietnamese. Some of the translations appear on the screen and some appear in the Asian Interpreter notebook that the interpreter will use. If the translations are located in the interpreter notebook, the interpreter will use a hard-copy form to read the questions to the respondent.

Section	Questionnaire	Asian Translations Available	Translations Located
Blaise-CAPI	Depression Screener (DPQ)	Chinese (Simplified & Traditional), Korean, Vietnamese	Interpreter notebook
ACASI	Introduction	Chinese (Simplified & Traditional), Korean, Vietnamese	Interpreter notebook
	Drug Use (DUQ)	Chinese (Simplified, Traditional Cantonese, & Traditional Mandarin), Korean, Vietnamese	Screen
	Sexual Behavior – Male and Female (SXQ)	Chinese (Simplified, Traditional Cantonese, & Traditional Mandarin), Korean, Vietnamese	Screen
CDI	SSN Question	Chinese (Simplified & Traditional), Korean, Vietnamese	Interpreter notebook

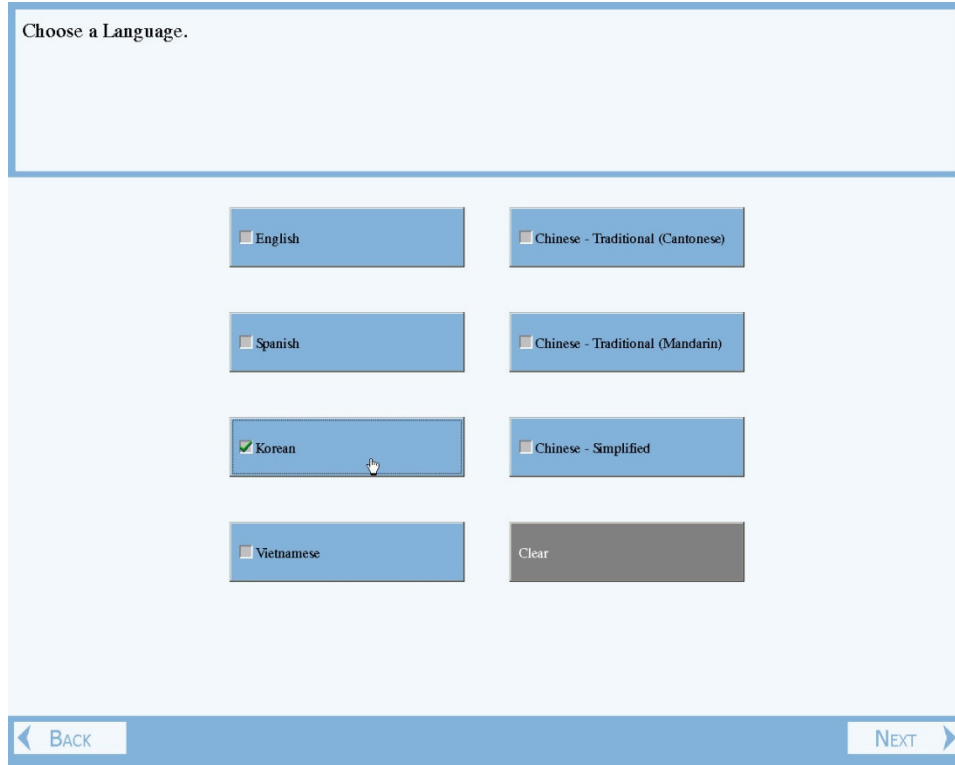
The MEC Interview application will preselect a language for the ACASI application based on information in the database. The preselected language will appear in a drop-down box on the ACASI introduction screen.



If the preselected language is incorrect, click the drop-down box and change the language.



The language chosen in the drop-down box will be preselected on the first ACASI screen. You can change the language that was preselected by touching the button with the language you want and selecting **“next.”**



To change the language after the ACASI interview has started, right click on the mouse, select “Go To” and “Start” to go back to the first ACASI screen and change the language. Touch the “next” button on the touch screen until you return to where you left off.