



Centers for Disease
Control and Prevention
National Center for
Health Statistics

2021 MEC ACASI Procedures Manual

December 2021



National Health and Nutrition Examination Survey

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1. Overview of the MEC ACASI Component

The Mobile Examination Center (MEC) Audio-Computer Assisted Self Interview (ACASI) consists of questionnaires on a variety of health-related topics, including socially sensitive behaviors. In NHANES, the ACASI questionnaires are designated for examinees 12 years of age and older, and individual questionnaire sections are selectively based on age. It is designed to be private with only the study participant (SP) in the room. Examiners will wait in the hallway, while the SP completes the ACASI. This allows the SP to complete the interview in private and the examiner to remain close by in case the SP needs help.

1.1 Purpose of the MEC ACASI

In the ACASI, a participant listens to pre-recorded questions through a headset and can simultaneously read the questions on the screen. The participant moves at their own speed through the sections and enters their responses by touching the computer screen. SPs who can read faster than the pre-recording do not have to wait for the recording to finish before selecting a response. Research on the mode of interview indicates that respondents will be more honest and forthcoming in their answers if they can answer using a self-administered mode. This improves the accuracy of data on sensitive behaviors and minimizes nonresponse.

Questions in the ACASI are included for specific reasons and are often directly related to a specific examination and laboratory component. For example, questions on current tobacco use will be linked to blood serum cotinine, a laboratory measurement. Other questions are asked because they provide valuable information on risk factors in the analysis of health conditions or specific disease outcomes. For example, the drug use questionnaire provides a brief assessment of marijuana, cocaine, and injectable street drugs use, which have been associated with higher incidence of sexually transmitted diseases.

1.2 ACASI Study Participants

It is critical that each SP be given the opportunity to complete the ACASI. The ACASI software includes special features to help SPs complete the interview. In addition to SPs being able to both hear and read the questions, the response options light up one at a time as the recording plays for each option. The ACASI tutorial provides the opportunity for SPs to see and become comfortable with the functionality of the system and for you to evaluate if the SP will be able to complete the ACASI. Do not assume that everyone who has a physical or mental impairment or cannot read will be unable to do the test. It is important to encourage reluctant SPs to try, and let them know that you will be available to help them if they need it.

1.2.1 Proxy Interviews and Interpreters

An SP may need a proxy to answer questions for them in the MEC for a number of reasons. A proxy's role varies depending on the SP and the exam. An SP may need a proxy to help them answer some questions or to answer all questions.

In some cases, an SP may have a proxy come with them to the exam room to help them answer questions, however, during your interaction with them, it may appear as though the SP can complete the interview on their own. Likewise, an SP may have an interpreter with them, however, during your interaction with them, it may appear as though the SP speaks English well enough to complete the interview in English. The ACASI is never administered as a proxy interview, and is only administered in English and Spanish. The proxy does not know the nature of the questions in the ACASI and, therefore, may not be able to accurately determine if the SP can complete the questionnaire. The examiner must evaluate the capabilities of the SP and make a decision for themselves and not based solely on the opinion of others.

1.2.2 Youth Participants

In the case of youths, the absence of a parent or guardian allows children to answer questions freely and honestly, without feeling uncomfortable or pressured. However, parents may have questions about the ACASI and about the question topics. A few parents may object to leaving their child alone, and, as with the case of any exam component for their child, they have the right to refuse their child's participation. It is your role as an examiner to be open and honest with parents about

the questions so that the parent can make an educated decision about whether their child should participate. If parents have questions or concerns, talk to them in a room where you can sit down and address their questions privately. You can use the list of the age-specific ACASI sections to guide your discussion with 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 their 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 them otherwise. Code the interview as a refusal. Below are sample responses to questions that parents may have about the interview.

Why is the interview conducted in private?

“Your child will complete the interview by themselves. This allows them to feel comfortable about answering the questions honestly. Your presence in the room may influence their response. I will not see any responses to their questions, either.”

What kind of questions will you ask?

Show the interview section list to the parent 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 their child participate. However, if the parent asks for additional information, it is acceptable to give an example of the questions asked:

Examples:

- **Physical Activity.** “We will ask questions about how often they exercise.”
- **Reproductive Health.** “We will ask your daughter questions about her period and a few other questions about her reproductive health.”
- **Tobacco.** “We will ask your child about the use of any tobacco products, including e-cigarettes.”
- **Alcohol.** “We will ask your child if they have ever had a drink of alcohol.”

1.2.3 Older Adults

In past NHANES, adults 70 and older have not answered any questions using the ACASI technology. At this time, however, ACASI questions on depression, current health status, tobacco, alcohol, and urinary incontinence will be asked of adults of all ages and adult women of all ages will be asked questions about reproductive health. While many older adults are completely comfortable using a computer, others may express a lack of confidence with the technology and will not have any experience using a touchscreen. The examples in the tutorial should help them overcome most psychological barriers. If they express any concerns to you during the tutorial, let them know that although the interview is intended to be in private, you are available should they need assistance.

If an SP wants to remove their hearing aids before putting on the headphones, it is acceptable for them to do so as long as they (or an accompanying family member) can remove and re-insert them without your help. SPs may also read the questions from the screen without using the headphones.

2. Equipment, Supplies, and Materials, and Testing the ACASI Applications

2.1 Description of the Multi-Purpose Room and Computer Equipment

The Multi-Purpose Rooms (MPRs) in each mobile examination center (MEC) are equipped with a desk upon which the PC rests, and there are chairs for the examiner and study participant (SP). A mounted cabinet is on the wall. It holds extra supplies and is used to secure materials and equipment when the MEC is traveling from one stand to the next.

The MPRs have doors that are closed for privacy during the interview. Each room is also equipped with a white noise machine that can be used to increase privacy during the interview.

The PC monitor, keyboard, 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 ACASI, the PC is oriented toward the SP. The monitor can easily be turned to face the SP at the appropriate time. The keyboard and mouse are for the examiner's use only.

The SP uses the PC's monitor to record their responses to the ACASI questions, as the monitor is equipped with a touchscreen. A stylus is provided for the SP to use for the touchscreen. If the SP does not want to use the stylus, ask them to use hand sanitizer before touching the screen.

The SP listens to the ACASI questions through a set of headphones that are plugged into the computer. Volume control buttons on the speaker and cord of the headphones control the volume for the headphones. Should the SP decline the use of the headphones, or should there be some other reason that the headphones cannot be used for an SP, the headphones can be unplugged from the computer.

2.2 MEC ACASI Supplies and Other Materials

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

- **Earphone Covers.** New hygienic earphone covers are placed over the earphone cushions for each SP and disposed of when the SP is done with the headphones. New earphone covers must be placed on the earphone cushions in front of the SP.
- **Sanitizing Disposable Wipes.** The sanitizing wipes are used to clean the stylus and hard surfaces of the headphones not covered by the earphone covers.
- **Stylus.** A stylus is given to the SP to use to enter responses on the touchscreen.
- **Solar-Powered Calculator.** The solar-powered calculator is available for use by either the SP or examiner to provide assistance in answering questions, particularly in the reproductive health portion of the interview.
- **Tissues and Hand Sanitizer.** Tissues and hand sanitizer are provided as a general supply for use as needed.

Examiners are also provided with a Navigational Functions – Quick Reference card to assist with ACASI navigation, and Examiner Reference cards to assist with SP questions.

2.3 Inventory, Equipment Setup, and Teardown Procedures

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

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 ACASI. Accurate counting is essential since the home office uses the information to ensure that sufficient quantities of replacement supplies are shipped, and to track supply usage and costs. When the inventory is complete, each examination room and all equipment must be cleaned, packed, and secured for travel to the next stand.

2.3.1 Setup Procedures

When you arrive at a new location, the FES will have already unpacked the computer monitor and set up the computer equipment. The following is a list of general and MEC ACASI-specific tasks the examiner must perform to set up the MPR (Exhibit 2-1).

Exhibit 2-1. Setup tasks

Task
1. Remove rubber bands from telephone handset.
2. Unpack larger loose MEC ACASI supplies from the cabinet and plastic storage containers.
3. Unpack smaller MEC ACASI supplies from the large plastic bag.
4. Set up chairs.
5. Unlock room door.
6. Unpack and connect the headphones.

2.3.2 Teardown Procedures

On teardown day, there are general and MEC ACASI-specific tasks that must be completed in each MPR. Below is a list of procedures that the examiner must perform to prepare the MPR for travel (Exhibit 2-2).

Exhibit 2-2. Teardown tasks

Task
1. Cover the computer monitor with the padded cozy and secure it to the wall using the bungee cord provided.
2. Put the keyboard, mouse, barcode wand, etc. against the monitor cozy and secure it with the bungee cord used for the monitor. Mice and wands can also be placed in the cozy pockets. Make sure the cord is tight enough around the monitor to hold the hardware in place without stressing it. Unplug the headphones, wrap them in bubble wrap, and store them in the cabinet or plastic storage container. 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.
3. Secure the telephone handset to the base with two rubber bands.
4. Each examiner should pack the smaller MEC ACASI supplies for their room in a large plastic bag.
5. Pack larger loose MEC ACASI supplies in the cabinet and plastic storage containers. Fragile items should be wrapped in bubble wrap before being stored in the cabinet or plastic storage container.
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. Manuals can be placed in a multipurpose bin under the desk and secured for travel.
7. Secure cabinet doors with Velcro strips.
8. Secure chairs for travel by placing them on their sides and wedging them between the wall and desk.
9. With the room door in open position, secure the door for travel using the locking pin located on the top corner of the wall beside the door.

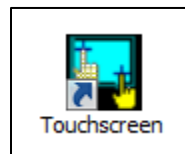
2.4 Testing the Functionality of Equipment

On dry run day, you will check your equipment to make sure everything is functioning properly in all rooms before the first day of exams. Some of these tests require the use of test SPs who have been added to the dry run session. There is more than one test SP on the dry run day session and the ages vary. ACASI can also be tested using a real dry run SP. Please note that you may need to test more than one thing on a particular test SP. All tests must be performed in every room where the ACASI is administered. The tests that you need to perform are described below.

2.4.1 Calibrate the Touchscreen

Calibrate the touchscreen on dry run day at the start of every stand and anytime the touchscreen isn't working properly. To calibrate the touchscreen, open the "Utility" folder on the desktop. Select the icon "Touchscreen" and follow the instructions on the screen (Exhibit 2-3).

Exhibit 2-3. Touchscreen icon



2.4.2 Testing the ACASI Application

Optimal testing of ACASI can be done with one designated test case aged 14 or 15, and another designated test case or real dry run SP between the ages of 20 and 59. One of the two SPs used for testing should be female. If you test ACASI with a dry run SP, explain to the SP that you need to make sure the application is working correctly. Go through the screens with the SP. The SP can either enter fake responses or you can enter the responses. When testing the functionality of ACASI, ensure that the sound is playing correctly, the correct screens are coming up, and the headphones are working. After checking the screens in English, go back to the beginning before exiting the application, change the language to Spanish, and go through the screens again.

2.4.3 Testing the Mental Health Referral System

The mental health referral system can be tested on any SP age 12+. Examiners should initiate this process while testing the ACASI application (Section 2.4.2) by doing the following:

- Pick one test SP to use in each room and code the response to the question “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?” (DPQ.090) as “several days,” “more than half the days,” or “nearly every day.”
- Notify the coordinator and clinician of the test SP who was used. (The clinician and coordinator will then follow the dry run testing procedure guidelines for their component.)

More details on the complete functionality of the mental health referral process can be found in Section 2.4.3.1.

2.4.3.1 Functionality of the Mental Health Referral Process

SPs aged 12 years and older will be referred to the clinician prior to leaving the examination center in the following circumstance:

- During the Depression section (DPQ) of the ACASI, the SP reports that in the **past two weeks**, there have been several days or more when the SP had thoughts that they would be better off dead **or** the SP had thoughts about hurting themselves (i.e., SP responds “several days,” “more than half the days,” or “nearly every day” to DPQ.090).

When the examiner exits the ACASI instrument, the application will extract the DPQ.090 response, and, if necessary, will automatically post a mental health observation to the clinician, alerting the clinician that the examinee needs to be seen prior to leaving the MEC. The clinician is responsible for assessing the problem and facilitating a referral, when needed.

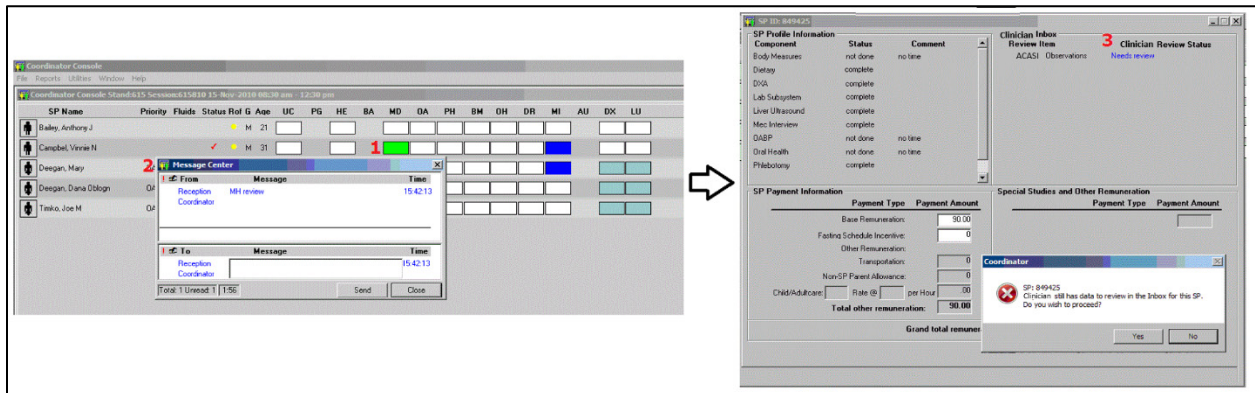
The MEC ACASI, clinician, and coordinator systems work together in the mental health referral process. The functionality of each application is explained below.

ACASI Application. When a mental health observation is posted in the database, ISIS (1) turns the clinician’s box on the coordinator’s screen to green, (2) sends a message to the coordinator application, and (3) adds a message to the coordinator’s clinician inbox pane.

Clinician Application. When an SP responds as “several days,” “more than half the days,” or “nearly every day,” ISIS generates a mental health observation in the clinician’s referral review inbox as soon as the ACASI application is closed. When the clinician opens the Referral Review screen and selects “Reviewed Status Codes,” ISIS automatically adds a message in the coordinator’s clinician inbox pane based on the code selected by the clinician.

Coordinator Application. During checkout, on the Checkout screen, the coordinator will see a list of referrals completed for that SP. If any referral issues are still pending and the coordinator continues with the checkout process, the system will generate an error message: “Clinician still has data to review in the inbox for this SP. Do you want to proceed?” (Exhibit 2-4) At this time the coordinator should speak to the clinician and arrange for the SP to return to the clinician’s room so the referral process can be completed.

Exhibit 2-4. Checkout screen



3. Conducting the MEC ACASI

The MEC ACASI component consists of an interactive tutorial for the SP that is conducted by the examinee, followed by the self-interview. This chapter details the sequence of tasks that compose the interview component, as well as navigational features specific to the ACASI software.

3.1 Component Tasks

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

1. Logging in study participants (SPs) and answering any questions they have;
2. Introducing the interview;
3. Administering the tutorial screens; and
4. Ending the interview.

Each of these tasks is described in more detail in the sections that follow.

3.1.1 Logging in the SP and Answering Questions

Initially, you must create a warm, accepting, and private setting in which this interview and other exam components will take place. In greeting each SP by name and introducing yourself, you convey a positive regard for the SP. After welcoming the SP and logging them into the system as described in Chapter 2 of the *MEC Operations Manual*, answer any questions or concerns they 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 ACASI, 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 simple Yes/No responses, while a few ask for more complete answers. Let the SP know that you will be nearby if they have difficulty with any part of the interview. Assure the SP that there are no right or wrong answers. Then, proceed with introducing the interview and presenting the tutorial questions.

3.1.2 Introducing the MEC ACASI to the Participant

The interview software automatically displays the introductory statement for the interview, as well as the appropriate introduction for each questionnaire in the interview based on the age of the SP.

You will introduce the **ACASI** by reading the 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. Let’s go over some examples and then you’ll complete the interview on your own.”

3.1.3 Responsibilities During the SP Self-Administration of ACASI

One of your primary responsibilities as an examiner during the tutorial is to help the SP, if they need assistance, get comfortable with entering their response into the computer using the touchscreen. Even though the interview is self-administered, you must still be familiar with the questions being asked in case the SP doesn’t quite understand the instructions or a particular question or response category. Descriptions of each question and the intent of the questions are contained in Chapter 4, Question-by-Question Specifications.

3.1.4 Ending the ACASI

At the conclusion of the ACASI, thank the SP for their time and contribution to the study, and close out the Exam Status screen. Do not leave the ACASI Exam Status screen 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.

Check whether the MEC coordinator has sent you a message advising you of the next component for the SP. If not, check with the coordinator regarding the SP’s next component.

3.2 Introduction to the MEC ACASI Technology

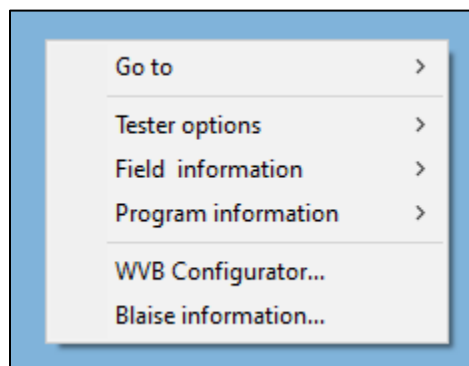
This section provides general guidelines for navigating through the ACASI.

3.2.1 Navigating the ACASI Application (Keys and Buttons)

The ACASI application is equipped with “Next” and “Back” buttons at the bottom of the screen that allow the participant to advance to the next screen and back-up to the previous question.

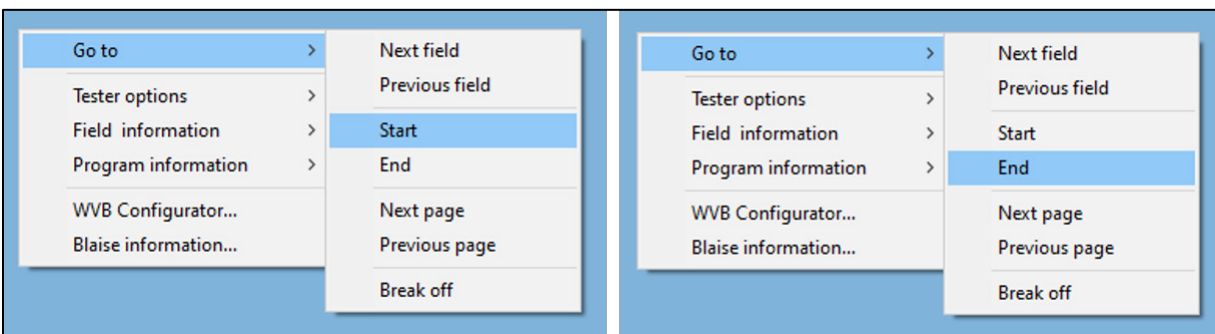
There are several navigation functions that can be accessed once the ACASI has started, by right clicking the mouse anywhere on the screen; however, you will only need to use a few of them. When you right click the mouse, a pop-up box will appear (Exhibit 3-1).

Exhibit 3-1. ACASI pop-up box



To skip back to the first ACASI screen or to skip to the last ACASI screen, select “Go to” on the pop-up box. Next, select “Start” to skip back to the first screen, or “End” to skip to the last screen (Exhibit 3-2).

Exhibit 3-2. Start and end navigation options

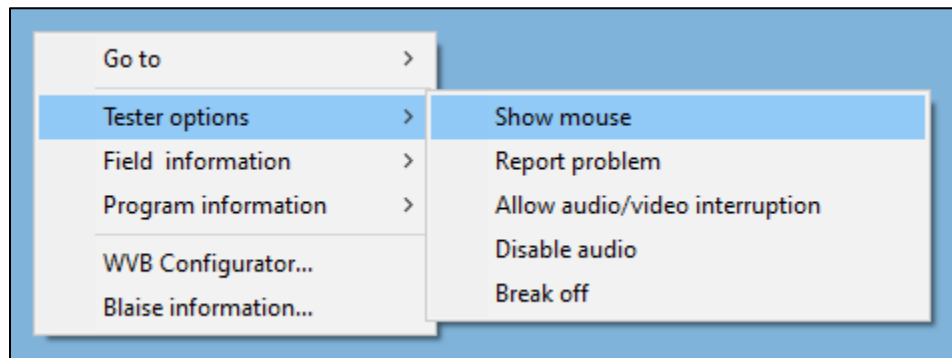


If you need to exit the interview before it is complete, always select “Go to” and “End.” Never, exit an interview early by putting in fake answers for the remaining questions or by closing the application using any other method. If you go back to the first screen, there is not a way to skip back

to where you left off. You will need to touch the “Next” button on the touchscreen until you return to where you left off.

If the touchscreen malfunctions, the SP can complete the interview using the mouse. To make the mouse cursor appear, right click the mouse anywhere on the screen to make the pop-up box appear. Select “Go to” on the pop-up box. Next, select “Tester options” and “Show mouse” (Exhibit 3-3).

Exhibit 3-3. Tester options



Occasionally, a blank blue screen will be visible instead of the blue question screen. The application is simply out of focus. Press “Alt” and “Tab” on the keyboard to toggle back to the Question screen.

A “Navigational Functions – Quick Reference” card is available in all rooms where the MEC ACASI is conducted. The card lists all of the navigational functions you may need.

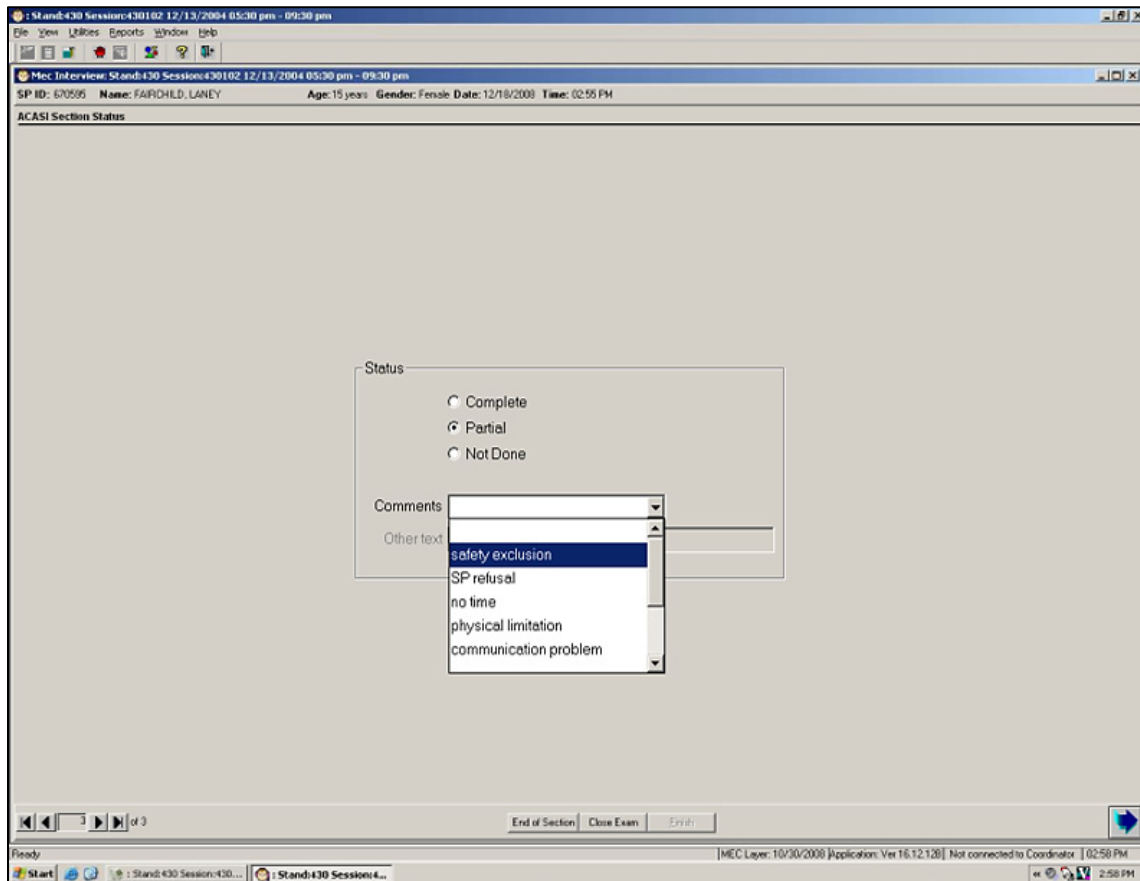
3.2.2 Recording a Status at the End of ACASI

NHANES requires that a status code be recorded for the interview. After the answer to the final question has been recorded, the automated system displays an Exam Status screen. An example of the ACASI Status screen is shown in Exhibit 3-4.

The status for the exam may be either “Complete,” “Partial,” or “Not done.” The program automatically displays a status code according to predetermined criteria for the interview, and is not editable by the examiner.

A status of “Partial” or “Not done” requires you to enter a comment code from the drop-down box (Exhibit 3-4). Valid comments for the interview and their appropriate use are described in Chapter 2 of the *MEC Operations Manual*.

Exhibit 3-4. Exam status screen



3.3 Responding to and Reporting SP Questions

There may be times when a respondent is having a difficult time with a question or, from your point of view, there may just not seem to be an appropriate response category. In these situations, tell the respondent to answer what they think the question is asking, or pick the closest response option. Encourage the SP to do their best. After the interview has concluded, you may send the component lead an email describing the situation.

Any unusual occurrence that happens during the operation of a stand should be reported by using the Unusual Field Occurrence (UFO) utility. This includes equipment issues, SP issues, protocol

issues (e.g., the next appropriate question did not appear on the screen), trailer issues, supply or inventory issues, or anything else related to the ACASI exam. It is not necessary to use screen prints when describing errors unless a screen print would be useful for describing the occurrence. If a screen print is taken, note it in the UFO and save it locally. Should ISIS or home office staff need to review the screen print, they can proxy into the MEC and retrieve the screenshot.

Whether you have a question for the component lead or you are sending a UFO to report a problem, always include a brief description of the SP's comment or situation. If, for example, the SP lets you know post-interview that they answered a question but have now changed their mind, you may have to probe to determine how the response was initially coded, and the change in response that is requested. While questions cannot usually be revised, feedback is used to edit responses during the NHANES data file editing and preparation phase.

4. MEC ACASI Question-By-Question Specifications

4.1 Chapter Overview

This chapter contains Question-by-Question specifications (QxQ specs) for the ACASI. These specifications are designed to give you information regarding the intent of each question.

The chapter 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 of interest.

You will use the information presented here and during training to learn how to administer the ACASI. The specifications will be used as a reference to resolve problems encountered. When you have a question about the administration of the interview or if an SP has difficulty answering a question and requests your assistance, these specifications are your first resource.

4.2 Description of the ACASI Questionnaire Sections

The MEC ACASI consists of questions on a variety of health-related behaviors, conditions, and disease-related risk factors. Some of the sections in the interview contain sensitive topics. 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.

The sequence of the topics covered in the MEC ACASI is designated for each age and gender target group as displayed in Table 4-1. Spanish translations of each questionnaire can be found in Appendix A.

Table 4-1. MEC ACASI questionnaire topics and eligibility by age and gender

Questionnaire section order	Eligibility by age/gender
Sexual Orientation (SXQ-0)	SPs 18-59
Depression Screener (DPQ)	SPs 12+
Reproductive Health (RHQ)	Female SPs 12+
Current Health Status (HSQ)	SPs 16+
Physical Activity (PAQ)	SPs 12-15
Tobacco (SMQ)	SPs 12+
Alcohol (ALQ)	SPs 12+
Kidney Conditions (KIQ)	SPs 20+
Drugs (DUQ)	SPs 12-59
Sexual Behavior (SXQ)	SPs 14-69

4.2.1 Beginning the MEC ACASI

After logging the SP in to the interview, the first screen consists of two screener questions that are not read to the SP (Exhibit 4-1). The responses to these two questions allow the application to properly skip the ACASI exam based on the interview type and language spoken.

Exhibit 4-1. ACASI screener questions

If the SP has a proxy or interpreter with them, before responding to the two questions on this screen, you will need to determine if the SP is able to complete the interview without a proxy or interpreter. If you think they can, explain to the proxy or interpreter that you would like to try having the SP complete the interview on their own. Contact the coordinator to determine where the proxy or interpreter should wait until the interview is complete.

This page intentionally blank.

TUQINT_

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. Let's go over some examples and then you'll complete the interview on your own.

Language:

ACASI First Screen

CHOOSE A LANGUAGE.

ENGLISH

SPANISH

Clear

4.2.2 Introducing the ACASI and the Tutorial

TUQINT_ After logging the SP in to the MEC ACASI and completing the two screener questions, the next screen is the introduction to ACASI. You can change the language of the introduction to Spanish as described in Chapter 2 of the *MEC Operations Manual*. Please note, changing the language on this screen sets the language for this screen only. The language for the ACASI practice screens and questions is set on the first ACASI screen.

Read the ACASI introduction from the screen and click the “next” arrow in the bottom right corner of the screen to advance to the ACASI practice screens.

ACASI
First
Screen The first ACASI screen allows you to select 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. If you need to change the language of the interview at any time, return to this 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.

1	2	3
4	5	6
7	8	9
0		
Clear		

TUQ000_ This is the first practice screen. Turn the screen toward the SP and instruct the SP to touch the “Next” button in the lower right corner to proceed to the next practice screen. Assist them with the practice screens as necessary. Have the SP work through the practice screens without the headphones, by listening to the audio through the speakers.

TUQ010 This example demonstrates how to record a simple yes or no response.

TUQ020 This example 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.

<input type="button" value="1"/>	<input type="button" value="2"/>	<input type="button" value="3"/>	<input type="button" value="Days"/>
<input type="button" value="4"/>	<input type="button" value="5"/>	<input type="button" value="6"/>	<input type="button" value="Weeks"/>
<input type="button" value="7"/>	<input type="button" value="8"/>	<input type="button" value="9"/>	<input type="button" value="Months"/>
<input type="button" value="0"/>			<input type="button" value="Years"/>

TUQ030

To go back to a previous question to change your response, touch the button.

TUQ035

Some questions have help available. When you see **HELP WITH THIS QUESTION** in the corner of the screen, press the words to open the help screen. Try it now.

Do you enjoy funny movies?

Please select...

HELP WITH THIS QUESTION

TUQ025 This example demonstrates how to record a more complex response that requires entering a number and a unit of time.

TUQ030 After listening to the recorded instructions, instruct the SP to touch the “Back” button to back up to TUQ025. Ask the SP to touch the “Clear” button to erase the response, and then enter a new response.

TUQ035 This question demonstrates the Help screen function. After listening to the recorded instruction, make sure the SP touches “HELP WITH THIS QUESTION” to bring up the Help screen.

TUQ035 Help Screen

Funny movies are movies that make you laugh out loud.
Now press the arrow button to return to the question and enter your answer.



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.

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Non-Response Screen

Some questions have help available. When you see **HELP WITH THIS QUESTION** in the corner of the screen, press the words to open the help screen. Try it now.

Do you enjoy funny movies?

Please select...

HELP WITH THIS QUESTION

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



TUQ035 TUQ035 After listening to the recorded instructions, instruct the SP to touch the arrow at the
Help bottom of the screen to return to the question and enter a response.
Screen

TUQ040 TUQ040 After listening to the recorded instructions and answering any questions, instruct the SP
to put on the headphones. Make sure they are comfortable and can hear the questions
before they start. Instruct the SP to notify you when they are done with the interview.

Non- The ACASI system is designed not to provide respondents with an obvious option of
Response stating that they don't know an answer or refuse to answer and therefore, does not
Screen include these possible responses as part of the tutorial. However, there is a nonresponse
option for the SP. For each question, a second screen appears if the SP does not
choose a response and instead presses the 'Next' button. The new screen presents SPs
with three choices: the first, that they really meant to answer the question; second, that
they would rather not answer (i.e., refusal); and third, that they don't know the answer.
Choosing the first response will return 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 changes their mind, and goes back to a previous question to which
they chose "I'd rather not answer" or "I don't know the answer," the response
categories will be deselected, and the SP may select a different response.

SXQ-O295

Do you think of yourself as lesbian or gay; straight, that is, not lesbian or gay; bisexual; something else; or you don't know the answer?

Please select one of the following choices.

Lesbian or gay

Something else

Straight, that is, not lesbian or gay

I don't know the answer

Bisexual

Clear

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SXQ-O296

Do you think of yourself as gay; straight, that is, not gay; bisexual; something else; or you don't know the answer?

Please select one of the following choices.

Gay

Something else

Straight, that is, not gay

I don't know the answer

Bisexual

Clear

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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.

4.2.3 Sexual Orientation (SXQ-0)

In recent years, public policy debates have heightened the need for high quality scientific data on the sexual orientation of adults and young people in the United States, particularly to allow researchers to identify the important role of sexual orientation as a predictor of health, social, and economic outcomes. This section contains a gender-specific question on sexual orientation for SPs 18-59 years of age.

SXQ-O295 This question asks female SPs 18-59 years of age to indicate their sexual identity. The SP is asked to select a response category that best represents how she thinks of herself.

SXQ-O296 This question asks male SPs 18-59 years of age to indicate their sexual identity. The SP is asked to select a response category that best represents how he thinks of himself.

DPQ010_

The first questions are about your feelings over the last 2 weeks.

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DPQ010_ cont'd

The next questions are about your feelings over the last 2 weeks.

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4.2.4 Depression Screener (DPQ)

SPs 12 years and older will be administered questions on symptoms associated with depression during the past 2 weeks using a standard instrument called 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.

The most recent analysis of the NHANES 2013-2016 data showed that 8.1 percent of Americans 20 years of age and older experienced depression in any 2-week period. Rates were higher among women compared with men, and non-Hispanic Asians had the lowest rates. The percentage of depression decreased as family incomes increased.

If the SP has trouble quantifying the frequency of the symptoms, encourage the SP to select the option that they think fits best. The following guidelines can be used if the SP has questions about the response categories.

- We do not provide a definition of “several days,” so the SP should select that option based on how they interpret “several days.”
- If the SP’s response seems to fit between two categories, focus the SP in on those two options. For example, if they said “off and on,” you would say, “Would that be several days or more than half the days?”
- The SP should select “more than half the days” when the SP has experienced the symptom for a week or more in the past 2 weeks, but less frequently than “nearly every day.”
- The SP should select “nearly every day” when the symptom occurred almost every day during the past 2 weeks, or if the SP experienced the symptom on 12 or more days.

DPQ010_ This screen introduces the Depression Screener section. Touch “Next” to proceed to the first question.

DPQ010_ SPs 18-59 years old receive this alternative version of the introduction to the
cont’d Depression Screener section. Touch “Next” to proceed to the first question.

DPQ010

Over the **last 2 weeks**, how often have you been bothered by any of the following problems:
little interest or pleasure in doing things?
Please select one of the following choices.

Not at all

Several days

More than half the days

Nearly every day

Clear

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DPQ020

Over the **last 2 weeks**, how often have you been bothered by:
feeling down, depressed, or hopeless?
Please select one of the following choices.

Not at all

Several days

More than half the days

Nearly every day

Clear

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DPQ030

Over the **last 2 weeks**, how often have you been bothered by:
trouble falling or staying asleep, or sleeping too much?
Please select one of the following choices.

Not at all

Several days

More than half the days

Nearly every day

Clear

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DPQ010 This is the first item to assess the presence of symptoms associated with depression. The question asks the respondent to quantify how often they have been bothered by little interest or pleasure in doing things, or anhedonia.

DPQ020 This item asks the SP to quantify how often they are bothered by a depressed mood during the past 2 weeks.

DPQ030 SPs are asked to report how frequently they are bothered by problems sleeping. The question refers to three types of sleeping difficulties: problems falling asleep, difficulty staying asleep, or sleeping too much.

DPQ040

Over the **last 2 weeks**, how often have you been bothered by:
feeling tired or having little energy?
Please select one of the following choices.

Not at all

Several days

More than half the days

Nearly every day

Clear

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DPQ050

Over the **last 2 weeks**, how often have you been bothered by:
poor appetite or overeating?
Please select one of the following choices.

Not at all

Several days

More than half the days

Nearly every day

Clear

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DPQ060

Over the **last 2 weeks**, how often have you been bothered by:
feeling bad about yourself - or that you are a failure or have let yourself or your family down?
Please select one of the following choices.

Not at all

Several days

More than half the days

Nearly every day

Clear

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DPQ040 SPs are asked to quantify how often they are bothered by a lack of energy or felt tired during the last 2 weeks.

DPQ050 This item asks the SP to report how frequently they are bothered by problems eating, either a lack of appetite or eating too much.

DPQ060 This item asks the SP to quantify how often they are bothered by feeling bad about themselves, feelings of failure, or feelings that they had let themselves or a family member down.

DPQ070

Over the **last 2 weeks**, how often have you been bothered by:
trouble concentrating on things, such as reading the newspaper or watching TV?
Please select one of the following choices.

Not at all

Several days

More than half the days

Nearly every day

Clear

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DPQ080

Over the **last 2 weeks**, how often have you been bothered by:
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?
Please select one of the following choices.

Not at all

Several days

More than half the days

Nearly every day

Clear

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DPQ090

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?
Please select one of the following choices.

Not at all

Several days

More than half the days

Nearly every day

Clear

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DPQ070 This question asks the SP to report how frequently they are bothered by difficulty concentrating.

DPQ080 This item asks the SP to quantify how often they are bothered by 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. SPs 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 clinician for assessment and possible mental health referral. A notice is automatically sent to the clinician when the ACASI instrument is closed.

DPQ100

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

Please select one of the following choices.

Not at all difficult

Somewhat difficult

Very difficult

Extremely difficult

Clear

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DPQ100 This question assesses functional impairment due to reported symptoms, and is therefore only asked if at least one of the depressive symptoms was endorsed in DPQ010 through DPQ090. SPs are asked to quantify the extent to which symptoms of depression get in the way of their ability to perform their daily activities or to get along with people. The response categories are slightly different than those of the previous symptom questions.

RHQ010_

The next series of questions are about your reproductive history. Help is available for many of the questions.

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RHQ010

How old were you when you had your **first** menstrual period?
Please enter an age or enter zero if you have not started your period.

1	2	3
4	5	6
7	8	9
0		
Clear		

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4.2.5 Reproductive Health (RHQ)

The main purpose of the section on Reproductive Health is to obtain information from women on menstrual history, reproductive-related surgery, pregnancy and reproductive history, and breastfeeding practices. This section is administered to all female respondents 12 years of age and older although the sequence of questions varies by age.

Some of the questions in this section ask the respondent to recall information covering long periods of time. If an SP has difficulty, it is helpful to ask them to think of special personal events to place past events in time. If exact ages cannot be remembered, instruct the respondent to enter her best estimate. 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_ This screen introduces the Reproductive Health section. Touch “Next” to proceed to the first question.

RHQ010 Although older SPs must think back many years, it is important to obtain as exact an age as possible. If the SP lets you know that she is having trouble answering the question and cannot recall her exact age, ask her to provide 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 use the calculator to convert the year to her age at the time her periods began.

If the SP has not started her period, the computer will instruct her to enter “0.” If the SP hasn’t begun menstruating, there will be no additional questions for her in this section.

RHQ031

Have you had **at least one menstrual period** in the **past 12 months**?

Please select ...

[HELP WITH THIS QUESTION](#)

Yes

No

Clear

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RHQ031 Help Screen

If you have had at least one very light period in the past 12 months because you use hormonal birth control, such as pills, injectables or IUDs, select "Yes."
If you have not had a period in the past 12 months, but you had bleeding due to medical conditions, hormone therapy, or surgeries, select "No."



RHQ031 Ninety-five percent of women have completed menopause by 55 years of age, so older women who respond affirmatively to this question will receive a message reminding them that bleeding caused by medical conditions, hormone replacement therapy, or surgeries should not be included.

RHQ031 A Help screen is available for this question. Women who have had at least one period in the past year should select “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, she should count that as a period.

Help
Screen

RHQ043

What is the reason that you have not had a **period** in the past 12 months?
Please select one of the following choices.

[HELP WITH THIS QUESTION](#)

<input type="checkbox"/> Pregnancy	<input type="checkbox"/> Menopause or the change of life
<input type="checkbox"/> Breast feeding	<input type="checkbox"/> Some other reason
<input type="checkbox"/> Hysterectomy	<input type="button" value="Clear"/>

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RHQ043 Women who have not had a period in the past 12 months are asked to indicate the reason. SPs can only choose one response. If the SP has problems answering this question because there may be more than one reason, you can ask her to 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, she should choose "breastfeeding." **Exception:** If the SP reports both hysterectomy and menopause, she should choose the appropriate response using what occurred first. For example, if the SP went through menopause and then had a hysterectomy, she should select "menopause." If the SP had not gone through menopause (i.e., was still having periods when she had a hysterectomy), she should select "hysterectomy."

The SP will see five "reasons" for no period on the screen. Below is additional information about each reason.

Pregnancy – The SP is currently pregnant or was pregnant in the past year. Pregnancy should usually only result in a loss of menses for 9 months, therefore, if breastfeeding has followed pregnancy, the SP should select "breastfeeding."

Breastfeeding – The SP is currently breastfeeding or was breastfeeding in the past year and this resulted in her having no periods.

Hysterectomy – The SP had not gone through menopause before they had a hysterectomy.

Menopause or the Change of Life – The SP has gone through a permanent cessation of her periods, naturally.

Some Other Reason – The SP has not had a single period in the past 12 months for any other reason not covered by the preceding categories, such as stress or having a medical condition or treatment or use of a hormonal contraceptive that has caused her period to cease. Examples include chemotherapy treatment, thyroid conditions, anorexia, birth control pills, IUDs, contraceptive implants and injections (in arm). Periods can also stop for competitive athletes whose level of body fat is sufficiently low. Women who go through menopause following a hysterectomy should not choose this option.

RHQ043 Help Screen

Select "some other reason" if you have not had a period in the past 12 months, for reasons including, but not limited to: hormonal birth control use; cancer; a thyroid condition; chemotherapy; excessive exercise; anorexia; low body weight.



RHQ282

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

Please select ...

Yes

No

Clear

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RHQ305

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

Please select ...

[HELP WITH THIS QUESTION](#)

Yes

No

Clear

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RHQ043 A Help screen is available for this question that gives examples of “some other reason.”
Help
Screen

Questions RHQ282 through RHQ332 obtain information about the SP’s reproductive surgical history. Women younger than 20 years of age who report having a period in the past 12 months are not asked these questions.

RHQ282 The surgical removal of the uterus or womb is called a hysterectomy. A partial hysterectomy removes just the uterus, leaving the cervix intact. A total hysterectomy removes the uterus and the cervix (<https://www.mayoclinic.org/tests-procedures/abdominal-hysterectomy/about/pac-20384559>). SPs who have had a partial hysterectomy should select “Yes.” SP’s should not count a tubal ligation (fallopian tubes “tied” to prevent pregnancy) as a “Yes” response to this question. Following a tubal ligation, a woman would continue to menstruate until she reaches menopause.

RHQ305 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. 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. Therefore, if only parts of both ovaries were removed, the SP should select “No.” If one ovary was removed, but the SP still has part of the second ovary, she should also select “No.” Only if total removal of both ovaries occurred should the SP select “Yes.”

RHQ305 cont'd

Have you had **both** of your ovaries removed?
Please select ...

[HELP WITH THIS QUESTION](#)

Yes


No

Clear

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RHQ305 Help Screen

It is possible to have both ovaries removed, only one ovary removed, or only part of an ovary removed. Ovaries may be removed during a hysterectomy. Select "Yes" only if a surgeon completely removed both ovaries.



RHQ332

How old were you when you had your ovaries removed or last ovary removed if removed at different times?
Please enter an age.

1	2	3
4	5	6
7	8	9
0		

Clear

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

RHQ305 Help Screen A Help screen is available that gives additional information about ovary removal.

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. Older women may report that they cannot remember an exact age. Please ask them to provide a best estimate.

RHQ060

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

Please enter an age.

1	2	3
4	5	6
7	8	9
0		
Clear		

◀ BACK NEXT ▶

RHQ078

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?

Please select ...

Yes

No

Clear

◀ BACK NEXT ▶

RHQ131_

The next questions are about your pregnancy history.

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RHQ060 Women who have gone through menopause, had a hysterectomy, or whose periods have ceased due to some other reason, are asked their age when they had their last period.

Note: If a woman had both ovaries removed and this procedure was the cause of her menopause, then the age that she had her last period would match with the age that she reported in RHQ332.

RHQ078 This question 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.”

RHQ131_ This is an introduction to the set of questions about pregnancy history.

RHQ131

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

Please select ...

HELP WITH THIS QUESTION

Yes


No

Clear

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RHQ131 Help Screen

Miscarriage is the loss of a baby before the 20th week of pregnancy.
Stillbirth is the loss of a baby at or after 20 weeks of pregnancy.
Tubal Pregnancy is a pregnancy that occurs in the fallopian tube.
Abortion is the termination of a pregnancy using induced methods.



RHQ143

Are you pregnant **now**?

Please select ...

Yes

No

Clear

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RHQ131 All women who have started their period (experienced menarche) are asked this question. The answer to this question should include all pregnancies regardless of outcome. Descriptions of each outcome are provided below.

Current pregnancy: Refers to known (or suspected) embryo, fetus, or unborn fetus in the uterus.

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

Miscarriage: Refers to a pregnancy that terminates naturally before the 20th week of pregnancy.

Stillbirth: Refers to the loss of a baby at or after 20 weeks of pregnancy.

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

Abortion: Refers to the termination of a pregnancy using induced methods.

RHQ131 Help text is available for each of the outcomes in RHQ131 by clicking on “Help with
Help this question” link on the screen.
Screen

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.

RHQ167

How many vaginal or Cesarean deliveries have you had? Please count all stillbirths as well as live births.
If you delivered twins or had any other multiple birth, count it as one delivery.

Please enter the total number of deliveries.

1	2	3
4	5	6
7	8	9
0		
Clear		

BACK NEXT

RHQ200

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

Please select ...

Yes

No

Clear

BACK NEXT

RHQ167 SPs should record the number of deliveries regardless of the method (vaginal or Cesarean) or outcome (live birth or stillbirth). SPs should not count miscarriages. Multiple births should be counted as a single delivery.

RHQ200 This question asks if the SP is currently breastfeeding a child. Women who report no deliveries in RHQ167 do not receive this question.

HSQ590_

The next question is about the test for HIV, the virus that causes AIDS.

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HSQ590

Except for tests you may have had as part of blood donations, have you ever been tested for HIV?

Please select ...

Yes

No

Clear

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4.2.6 Current Health Status (HSQ)

The current health status section is administered to SPs 16 years of age and older.

HSQ590_ This screen introduces the current health status section. Touch “Next” to proceed to the question.

HSQ590 With the exception of HIV testing done as part of a blood donation, this question asks if the SP has ever had their 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 their blood. 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.

PAQ706_

The next questions are about your activities.

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PAQ706

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.

Please select one of the following choices.

0 days

1 day

2 days

3 days

4 days

5 days

6 days

7 days

Clear

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PAQ711

On a typical day during the school year, about how many hours do you usually spend playing with a smartphone or computer, watching TV or movies, or playing video games?

Please enter a number.

1

2

3

4

5

6

7

8

9

0

Clear

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4.2.7 Physical Activity and Physical Fitness (PAQ)

The physical activity and physical fitness section is administered to SPs aged 12-15 years.

PAQ706_ This screen introduces the Physical Activity and Physical Fitness section. Touch “Next” to proceed to the first question.

PAQ706 The first question, which is included in CDC’s Youth Risk Behavior Survey, 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 their heart rate or made them breathe hard some of the time.

PAQ711 This asks about average time spent watching TV or videos and playing with electronic devices.

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 39 cigarettes
<input type="checkbox"/> 1 cigarette	<input type="checkbox"/> 40 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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SMQ632

How old were you when you smoked a whole cigarette for the **first time**?

Please enter an age.

[Input field]		
<input type="button" value="1"/>	<input type="button" value="2"/>	<input type="button" value="3"/>
<input type="button" value="4"/>	<input type="button" value="5"/>	<input type="button" value="6"/>
<input type="button" value="7"/>	<input type="button" value="8"/>	<input type="button" value="9"/>
<input type="button" value="0"/>		
<input type="button" value="Clear"/>		

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4.2.8 Tobacco (SMQ)

The questions in this section cover smoking history and current tobacco use for SPs 12-17 years of age and current tobacco use for SPs 18 years of age and older. Questions for SPs 18 and older focus only on recent tobacco use (during the past 5 days). Recent tobacco exposure of all kinds is desirable to link with biomarker (chemicals found in blood and urine) data.

SMQ621_ This screen introduces the Tobacco section for SPs aged 12-17. Questions SMQ621 – SMQ650 are for SPs aged 12-17 only. 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 SMQ681.

SMQ632 This item asks for the age when the youth first smoked a cigarette. Respondents can enter any age up to and including their age at the time of the interview.

SMQ641

On how many of the past **30 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	Weeks
7	8	9	Months
0			Years
Clear			Clear

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SMQ650

On average, when you smoked during the past **30 days**, how many cigarettes did you smoke a day?
Please enter a number.

1	2	3
4	5	6
7	8	9
0		
Clear		

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SMQ641 This question is important to quantify the SP's smoking habit by asking the number of days they actually smoked over the month prior to the interview.

If the SP did not smoke cigarettes in the past 30 days, they are instructed to enter a zero.

SMQ050 If the SP has not smoked cigarettes in the past 30 days, they are asked how long it has been since they quit smoking.

SMQ650 This question is important to establish the current intensity of the SPs smoking habit. The SP is asked, on the days that they smoked, for the average number of cigarettes smoked.

SMQ681_

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

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SMQ682

During the past **5 days**, including today, did you smoke cigarettes, pipes, regular cigars, cigarillos, or little filtered cigars, water pipes, or hookahs with tobacco?

Please select ...

Yes

No

Clear

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SMQ682 cont'd

During the past **5 days**, including today, did you smoke pipes, regular cigars, cigarillos, or little filtered cigars, water pipes, or hookahs with tobacco?

Please select ...

Yes

No

Clear

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SMQ681_ This screen introduces the Tobacco section for SPs aged 18 and older. SPs aged 12-17 skip this screen but are eligible to receive the questions after it. Touch “Next” to proceed to the first question.

SMQ682 This leading question, and the series that follow it, ask whether in the past 5 days, the SP smoked any of four of combustible tobacco products. In this series, herbal cigarettes that do not include tobacco, and e-cigarettes should not be counted.

Subjects who respond other than “Yes” skip to questions about e-cigarettes.

SMQ682 This is an alternative version of the screen for SPs aged 12-17 who reported smoking
cont'd less than one cigarette in their lifetime or no cigarettes in the past 30 days.

SMQ692A

Which of these products did you smoke?
Please select all that you used.

Cigarettes

Pipes

Regular cigars, cigarillos, or little filtered cigars

Water pipes or Hookahs with tobacco

SMQ692B

Which of these products did you smoke?
Please select all that you used.

Pipes

Regular cigars, cigarillos, or little filtered cigars

Water pipes or Hookahs with tobacco

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
0		

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 they have 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 Youths 12-17 years who reported smoking less than one cigarette in their lifetime or no cigarettes in the past 30 days, receive this alternate form of the question, which includes only the three other types of combustible tobacco products.

SMQ710 This question quantifies the SP’s current use of cigarettes over the past 5 days. SPs should count the number of days in the 4 days immediately before the interview and the day of the MEC exam (count as 5th day) that they smoked cigarettes (even if they took only a few puffs).

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
0		
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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SMQ740

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

Please enter a number.

1	2	3
4	5	6
7	8	9
0		
Clear		

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SMQ720 This question is asked of all SPs who currently smoke cigarettes, to determine the number of individual cigarettes, not packs, usually smoked each day. If the respondent indicates that they smoke 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 their response.

SMQ725 This question asks the respondent to indicate how long ago, over the past 5 days, they last smoked a cigarette.

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

SMQ771

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

Please enter a number.

1	2	3
4	5	6
7	8	9
0		
Clear		

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.

1	2	3
4	5	6
7	8	9
0		
Clear		

SMQ846

During the past **5 days**, including today, did you use e-cigarettes? You may also know them as JUUL[™], vape-pens, vapes, hookah-pens, e-hookahs, or vaporizers. These are battery-powered, usually contain liquid nicotine, and produce vapor instead of smoke.

Please select ...

Yes

No

Clear

SMQ771 If the respondent indicated that they smoked a cigar, little cigar, or cigarillo in the past 5 days, they 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 they smoked tobacco in a water pipe or hookah in the past 5 days, they 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.

SMQ846 This is the first of two questions about the use of e-cigarettes and other vaping devices during the past 5 days. This first question asks about the use of e-cigarettes (which are devices that look like regular cigarettes but are battery-powered) as well as all other vaping devices, including e-hookahs, vaping tanks, and products like JUUL (looks like a flash drive). All of these devices convert a nicotine-containing solution into a vapor mist (not smoke) which is inhaled by the user. They can be purchased as one-time disposable products or as reusable kits with a cartridge. Cartridges come in different flavors and nicotine concentrations. Vaping devices have been rapidly evolving and you may not have heard of the names of all of them.

The use of electronic vaping products for marijuana (or other non-nicotine substance) should not be included.

SMQ849

During the past **5 days**, including today, on how many days did you use e-cigarettes?
Please enter a number.

1	2	3
4	5	6
7	8	9
0		
Clear		

SMQ851_

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

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 ...

SMQ849 If the respondent indicated that they smoked an e-cigarette in the past 5 days, they will be asked how many days they used e-cigarettes in the past 5 days.

SMQ851_ This screen introduces the questions for smokeless tobacco products.

SMQ851 This question, and the question that follows it, is used to determine the use of smokeless tobacco products.

Participants aged 18 and older who respond other than “Yes” skip to questions about nicotine replacement therapy products. SPs aged 12-17 who respond other than “Yes” skip to the end of the section.

SMQ853

Which of these products did you use?
Please select all that you used.
(CHECK ALL THAT APPLY)

<input type="checkbox"/> Chewing tobacco	<input type="checkbox"/> Dissolvables
<input type="checkbox"/> Snuff	<input type="checkbox"/> Dip
<input type="checkbox"/> Snus	<input type="button" value="Clear"/>

SMQ863

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?
Please select ...

<input type="checkbox"/> Yes
<input type="checkbox"/> No
<input type="button" value="Clear"/>

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 they have used. The “past 5 days” refers to the current day and the 4 days immediately preceding the interview.

SMQ863 This question is used to identify current users of nicotine replacement therapy products for SPs 18 years and older. The “past 5 days” refers to the current day and the 4 days immediately preceding the interview. SPs aged 12-17 years do not receive this question.

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.

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4.2.9 Alcohol Use (ALQ)

This section obtains information on the use of alcohol for participants 12 years of age and older. Questions for SPs 18 years of age and older have been changed from previous versions to (1) be more useful when interpreting the liver ultrasound elastography measurements, (2) improve the comprehension by the survey participant (as suggested by cognitive testing conducted in 2016), (3) improve the flow of the interview, and (4) align alcohol questions with other Federal surveys that ask about alcohol use. One alcohol question (formerly ALQ.155 but now called ALQ.170) on excessive alcohol use (4/5 drinks on “*an occasion*”) in past 30 days had been moved from the dietary interview to the MEC ACASI.

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

ALQ111: Lifetime abstainers.

ALQ121: Frequency of consumption in the past 12 months.

ALQ130: Average alcohol consumption on days alcohol consumed in the past 12 months.

ALQ142: Excessive alcohol use (4/5 drinks at a time) in past 12 months.

ALQ270: Binge drinking of alcohol (4/5 drinks in 2 hours) in past 12 months.

ALQ280: Excessive alcohol use (8 drinks at a time) in past 12 months.

ALQ151: Lifetime history of chronic excessive alcohol use.

ALQ170: Excessive alcohol use (4/5 drinks) on “*an occasion*.”

ALQ010_ The first set of questions are for SPs aged 12-17 years. 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.

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"/> 0 days	<input type="checkbox"/> 20 to 39 days
<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"/>

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"/> 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"/>
<input type="checkbox"/> 13 or 14 years old	

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"/>

ALQ022 This question obtains information on how many days in the SP's life they have had at least one drink of alcohol. If the SP reports drinking "0 days," they will skip to the end of the section.

ALQ010 This question obtains information on when a respondent had their first drink of alcohol other than just a few sips. The SP is presented with several age ranges.

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

During the past 30 days, on how many days did you have 4 or more drinks of alcohol in a row, that is, within a couple of hours?

Please select one of the following choices.

0 days

6 to 9 days

1 day

10 to 19 days

2 days

20 or more days

3 to 5 days

ALQ111_

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.

ALQ111

In your **entire life**, have you had at least 1 drink of any kind of alcohol, not counting small tastes or sips? By a drink, I mean a 12 oz. beer, a 5 oz. glass of wine, or one and a half ounces of liquor.

Please select ...

EXAMPLES OF AN ALCOHOLIC DRINK

12 ounces
of beer



5 ounces of
wine



1.5 ounces
of hard
liquor



Yes

No

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 days on which five or more drinks were consumed. Girls are asked for the number of days in the past 30 days on which four or more drinks were consumed. This is the last alcohol use question for SPs aged 12-17 years.

ALQ111_ The screen introduces the alcohol use section for SPs aged 18 years and older.

ALQ111 The question uses a reference period of lifetime use, not necessarily the last year. The lifetime threshold for measuring alcohol intake for this question is 1 drink. If the SP answers “no,” they skip to the end of the section. Otherwise, the SP continues with ALQ121. Images with examples of various types of drinks are provided to assist the SP with their response.

ALQ121

During the **past 12 months**, about how often did you drink any type of alcoholic beverage?
In other words, how many days per week, per month, or per year did you drink?
Please select one of the following choices.

[HELP WITH THIS QUESTION](#)

<input type="checkbox"/> Every day	<input type="checkbox"/> Once a week	<input type="checkbox"/> 3 to 6 times in the last year
<input type="checkbox"/> Nearly every day	<input type="checkbox"/> 2 to 3 times a month	<input type="checkbox"/> 1 to 2 times in the last year
<input type="checkbox"/> 3 to 4 times a week	<input type="checkbox"/> Once a month	<input type="checkbox"/> Never in the last year
<input type="checkbox"/> 2 times a week	<input type="checkbox"/> 7 to 11 times in the last year	<input type="button" value="Clear"/>

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ALQ121 Help Screen

If you only drank part of the year, report what your drinking pattern was for most of the year. If you drank half of the year but did not drink during the other half of the year, report your current drinking pattern. Choose the closest response when a perfect option is not available.




[▶](#)

ALQ130

During the **past 12 months**, on those days that you drank alcoholic beverages, on **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.

Please enter a number.

EXAMPLES OF AN ALCOHOLIC DRINK

12 ounces of beer	
5 ounces of wine	
1.5 ounces of hard liquor	

1	2	3
4	5	6
7	8	9
0		
Clear		

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ALQ121 This item quantifies how often the SP consumed alcohol in the past 12 months. Respondents should focus on their usual drinking patterns and not unusual situations that occur once or twice a year. SPs who only drank part of the year due to a temporary situation (i.e., pregnancy, illness) should report drinking patterns over most of the year even if it results in what seems like an overestimation. If drinking and abstaining are split evenly over the year, SPs should record current behavior. SPs who drink infrequently should choose a close match when a perfect fit is not available.

ALQ121 A Help screen is provided for this question to help SPs who drink infrequently.
Help
Screen

ALQ130 This question is collecting information on the average number of drinks that the SP normally consumes on the days that they drank alcohol. Images with examples of various types of drinks are provided to assist the SP with their response.

The response to this question should reflect **average alcohol consumption** for the period that was answered in ALQ121. Here are some examples.

- If the SP answers “every day” in ALQ121 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 times a week” for ALQ121 and 4 drinks on each day they drank, then the average is “4.”
- If the SP answers “every day” in ALQ121 and had a glass of wine every day in the past week except one when they had 3, the average is “1” drink.

ALQ142

During the **past 12 months**, about how often did you have **4 or more drinks** of any alcoholic beverage?

In other words, how many days per week, per month, or per year did you have **4 or more drinks** in a single day?

<input type="checkbox"/> Every day	<input type="checkbox"/> Once a week	<input type="checkbox"/> 3 to 6 times in the last year
<input type="checkbox"/> Nearly every day	<input type="checkbox"/> 2 to 3 times a month	<input type="checkbox"/> 1 to 2 times in the last year
<input type="checkbox"/> 3 to 4 times a week	<input type="checkbox"/> Once a month	<input type="checkbox"/> Never in the last year
<input type="checkbox"/> 2 times a week	<input type="checkbox"/> 7 to 11 times in the last year	<input type="button" value="Clear"/>

ALQ270

During the **past 12 months**, about how often did you have **5 or more drinks** in a period of **two hours or less**?

Please select one of the following choices.

<input type="checkbox"/> Every day	<input type="checkbox"/> Once a week	<input type="checkbox"/> 3 to 6 times in the last year
<input type="checkbox"/> Nearly every day	<input type="checkbox"/> 2 to 3 times a month	<input type="checkbox"/> 1 to 2 times in the last year
<input type="checkbox"/> 3 to 4 times a week	<input type="checkbox"/> Once a month	<input type="checkbox"/> Never in the last year
<input type="checkbox"/> 2 times a week	<input type="checkbox"/> 7 to 11 times in the last year	<input type="button" value="Clear"/>

ALQ280

During the **past 12 months**, about how often did you have **8 or more drinks** in a **single day**?

Please select one of the following choices.

<input type="checkbox"/> Every day	<input type="checkbox"/> Once a week	<input type="checkbox"/> 3 to 6 times in the last year
<input type="checkbox"/> Nearly every day	<input type="checkbox"/> 2 to 3 times a month	<input type="checkbox"/> 1 to 2 times in the last year
<input type="checkbox"/> 3 to 4 times a week	<input type="checkbox"/> Once a month	<input type="checkbox"/> Never in the last year
<input type="checkbox"/> 2 times a week	<input type="checkbox"/> 7 to 11 times in the last year	<input type="button" value="Clear"/>

ALQ142 Men are asked how often, specifically in the past year, they had five or more drinks per day. Women are asked how often, specifically in the past year, they had four or more drinks per day. The response cannot be more times than the number of times reported in ALQ121.

ALQ270 Men are asked how often, specifically in the past year, they had five or more drinks in a period of two hours or less. Women are asked often, specifically in the past year, they had four or more drinks in a period of two hours or less. The response cannot be more times than the number of times reported in ALQ121.

ALQ280 The SP is asked how often, specifically in the past year, they had eight or more drinks in a single day. The response cannot be more times than the number of times reported in ALQ121.

ALQ151

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**?

Please select ...

Yes

No

Clear

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ALQ170

Considering all types of alcoholic beverages, during the **past 30 days**, how many times did you **have 5 or more drinks** on an occasion?

Please enter a number or enter zero for none.

[HELP WITH THIS QUESTION](#)


1	2	3
4	5	6
7	8	9
0		
Clear		

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ALQ170 Help Screen

An occasion is a period of several hours on the same day.



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.

ALQ170 Men are asked how often, specifically in the past 30 days, they had five or more drinks on an occasion. Women are asked how often, specifically in the past 30 days, they had four or more drinks on an occasion. "An occasion" is defined as a period of several hours on the same day.

ALQ170 A Help screen is provided to assist the SP with the definition of "an occasion."
Help
Screen

KIQ005_

The next few questions ask about urine leakage.

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KIQ005

Many people have leakage of urine. How often do you have urinary leakage?

Please select one of the following choices.

[HELP WITH THIS QUESTION](#)

never

a few times a week

less than once a month

every day and/or night

a few times a month

Clear

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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.

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

KIQ005_ This screen introduces to the KIQ section.

KIQ005 This question asks SPs to report how frequently they experience urinary leakage. SPs who respond other than “never,” “refused,” or “don’t know” continue with KIQ010.

KIQ005 Help Screen

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.



KIQ010

How much urine do you lose each time?

Please select one of the following choices.

drops

small splashes

more

Clear

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KIQ042

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?

Please select ...

Yes

No

Clear

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KIQ005 Help Screen A Help screen is available to provide assistance in defining urinary leakage. 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, or loss of urine control.

KIQ010 This item asks SPs to indicate the amount of urine leakage experienced.

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.

KIQ044

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?

Please select ...

Yes

No

Clear

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KIQ052

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.

not at all very much

only a little greatly

somewhat Clear

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KIQ481

In the **past 30 days**, during a typical night, how many times did you wake up and urinate?

Please select one of the following choices.

0 4

1 5 or more

2 Clear

3

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- 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.
- 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. Subjects who report bladder control difficulties (i.e., KIQ042 or KIQ044 is answered “Yes”) receive this question. All other participants skip to KIQ481.
- KIQ481 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 among men. The period of interest is the past month.

DUQ200_

The following questions ask about use of drugs. Please remember that your answers to these questions will be kept confidential.

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DUQ230

During the **past 30 days**, on how many days did you use marijuana or cannabis, also called pot or weed?

Please enter a number.

1	2	3
4	5	6
7	8	9
0		
Clear		

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DUQ250

Have you **ever**, even once, used cocaine including all the different forms of cocaine such as powder, 'crack', 'free base', and coca paste?

Please select ...

Yes

No

Clear

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4.2.11 Drug Use (DUQ)

This section is administered to SPs aged 12 to 59 years. This short set of questions ask about use of marijuana and recreational drugs, as well as intravenous use of drugs. The NHANES laboratory component does not conduct testing for the presence of any drugs or drug metabolites. Recreational drug use has been demonstrated to be a risk factor for sexually transmitted diseases. Intravenous 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.

DUQ200_ This screen introduces the section and reminds respondents that the information collected in the study is kept confidential.

DUQ230 SPs are asked to report on how many days in the past 30 they used marijuana or cannabis.

DUQ250 This question asks respondents whether they have used any form of cocaine at least once in their lifetime.

DUQ290

Have you **ever**, even once, used heroin?

Please select ...

Yes

No

Clear

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DUQ330

Have you **ever**, even once, used methamphetamine, also known as crank, crystal, ice or speed?

Please select ...

Yes

No

Clear

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DUQ370

Have you **ever**, even once, used a needle to inject a drug **not prescribed** by a doctor?

Please select ...

Yes

No

Clear

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DUQ290 This question asks respondents to indicate whether they've used heroin at least once in their lifetime.

DUQ330 This item asks SPs to indicate whether they've used methamphetamine at least once in their lifetime.

DUQ370 This question asks respondents to indicate whether they've ever used a needle to inject drugs not prescribed by a doctor.

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 will be kept confidential.

[← BACK](#)

[NEXT →](#)

SXQ615

Have you **ever** had **any** kind of sex?

Please select ...

Yes

No

Clear

[← BACK](#)

[NEXT →](#)

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

[← BACK](#)

[NEXT →](#)

4.2.12 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 using barrier contraceptives. Participants aged 14-69 years are asked about types of sexual behavior they have participated in, number of total sexual partners, and history of sexually transmitted diseases (SPs aged 60-69 years 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. SPs should report consensual and nonconsensual acts when responding to these questions. The Sexual Behavior questionnaire is split into two questionnaires, female and male.

4.2.12.1 Female Sexual Behavior (SXQ)

SXQ615_ This screen introduces the sexual behavior 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 aged 14-17 years will go to SXQ615. SPs aged 18+ years will go to SXQ700.

SXQ615 This question screens out SPs aged 14-17 years 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 aged 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

[← BACK](#) [NEXT →](#)

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

[← BACK](#) [NEXT →](#)

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

[← BACK](#) [NEXT →](#)

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.

SXQ712

In **your lifetime**, with how many **men** have you had **any** kind of sex?
Please enter a number.

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.

1	2	3
4	5	6
7	8	9
0		
Clear		

◀ BACK NEXT ▶

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
0		
Clear		

◀ BACK NEXT ▶

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.

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

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
0		
Clear		

[← BACK](#) [NEXT →](#)

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 →](#)

SXQ260

Has a doctor or other health care professional **ever** told you that you had genital herpes?

Please select ...

Yes

No

Clear

[← BACK](#) [NEXT →](#)

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.

SXQ648 Females reporting sexual activity in the past 12 months (SXQ718 and SXQ739) are asked if they had sex with a person during that time that they never had sex with before.

SXQ260 All SPs (aged 14-59 years) 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

Has a doctor or other health care professional **ever** told you that you had genital warts?

Please select ...

Yes

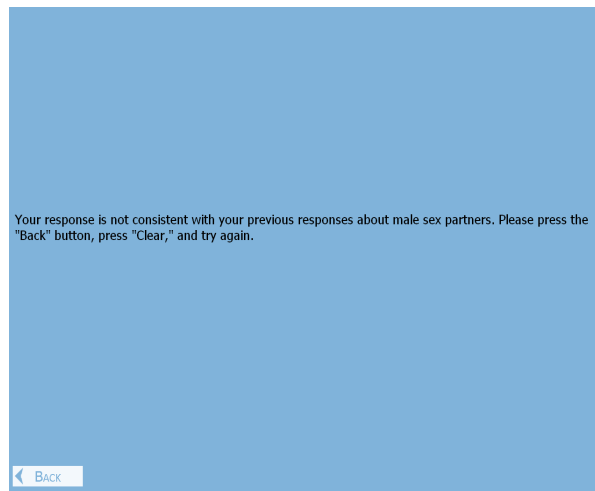
No

Clear

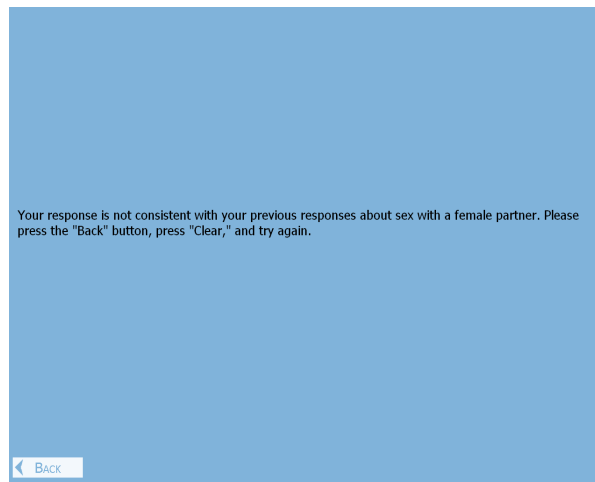
[← BACK](#) [NEXT →](#)

SXQ265 Genital warts are an elevation of viral origin upon the skin of the genitalia.

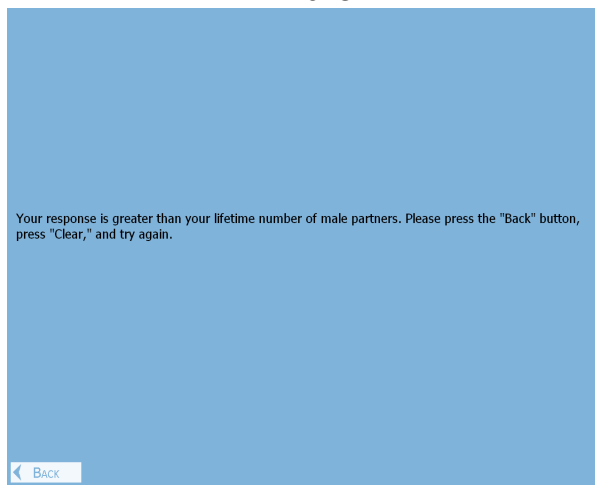
Error 1



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.

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 will be kept confidential.

[← BACK](#) [NEXT →](#)

SXQ615

Have you **ever** had **any** kind of sex?
Please select ...

Yes

No

Clear

[← BACK](#) [NEXT →](#)

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

[← BACK](#) [NEXT →](#)

4.2.12.2 Male Sexual Behavior (SXQ)

SXQ615_ This screen introduces the sexual behavior 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 aged 14-17 years will go to SXQ615. SPs aged 18+ years will go to SXQ800.

SXQ615 This question screens out SPs aged 14-17 years 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 aged 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.

SXQ812

In **your lifetime**, with how many **women** have you had **any** kind of sex?
Please enter a number.

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.

1	2	3
4	5	6
7	8	9
0		
Clear		

◀ BACK NEXT ▶

SXQ410

In **your lifetime**, with how many **men** have you had anal or oral sex?
Please enter a number or enter zero for none.

1	2	3
4	5	6
7	8	9
0		
Clear		

◀ BACK NEXT ▶

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.

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

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.

1	2	3
4	5	6
7	8	9
0		
Clear		

◀ BACK NEXT ▶

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 ▶

SXQ260

Has a doctor or other health care professional **ever** told you that you had genital herpes?
Please select ...

Yes

No

Clear

◀ BACK NEXT ▶

SXQ550 Male SPs who report having sex with a man in SXQ809 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.

SXQ648 Males reporting sexual activity in the past 12 months (SXQ818 and SXQ550) are asked if they had sex with a person during that time that they never had sex with before.

SXQ260 All SPs (aged 14-59 years) 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

Has a doctor or other health care professional **ever** told you that you had genital warts?

Please select ...

Yes

No

Clear

[← BACK](#) [NEXT →](#)

SXQ265 Genital warts are an elevation of viral origin upon the skin of the genitalia.

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.

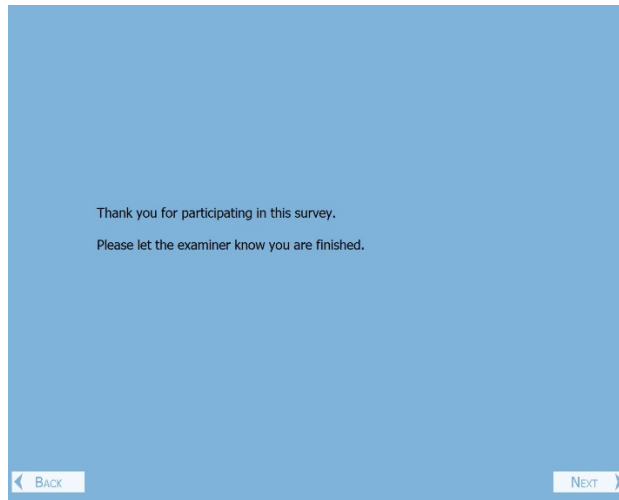
← BACK

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.

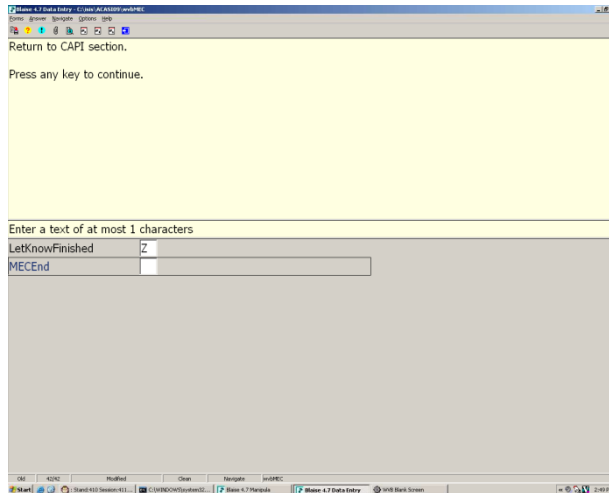
Error 2 This is another example of an error message that will appear if an SP enters a response that is inconsistent with previous responses.

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.

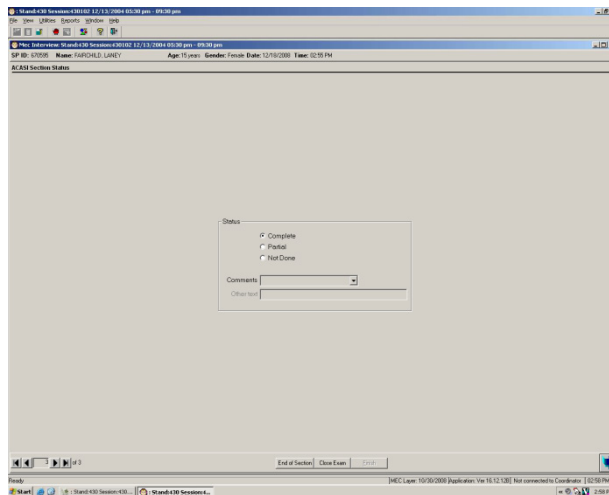
Final ACASI Screen



ACASI End Screen



ACASI Exam Status



4.2.13 Ending the ACASI

Final
ACASI
Screen

When the SP has answered the final question appropriate for their age and gender, the program displays a screen that thanks the SP for their participation and instructs the SP to inform the examiner that they are finished.

After the SP notifies you that they have completed the interview, you will close out the exam.

Unless the SP needs to back-up or change an answer, turn the monitor so that it is facing you. Select “Next” on the touch screen.

ACASI
End
Screen

Press “Enter” on the keyboard to exit the interview.

ACASI
Section
Status

The ACASI exam status will be pre-selected. Notify the MEC coordinator that you are done by clicking on the “Finish” button at the bottom center portion of the screen.

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Appendix A
ACASI Introduction and Practice Screens

ACASI INTRODUCTION AND PRACTICE SCREENS
Target Group: SPs 12+ (Audio-CASI)

TUQ.INT_ Quisiera que use los audífonos y escuche algunas preguntas. Usted anotará sus respuestas en la computadora tocando la pantalla. Esto le permitirá contestar las preguntas en completa privacidad. Revisemos algunos ejemplos y después usted completará la entrevista por su cuenta.

ACASI CHOOSE A LANGUAGE.
First Screen

ENGLISH
SPANISH

TUQ.000_ Estas preguntas son de práctica.

Por favor, toque el botón {NEXT BUTTON IMAGE} para ver la pregunta.

TUQ.010 Aquí hay un ejemplo de un tipo de pregunta:

“¿Está usted cansado(a)?”

INSTRUCTIONS TO SP:
Por favor, seleccione...

Sí 1
No..... 2
REFUSED 7
DON'T KNOW 9

TUQ.020 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?”

INSTRUCTIONS TO SP:
Por favor, anote una cantidad.

CASI INSTRUCTION: DISPLAY NUMBER KEYPAD WITH CLEAR BUTTON

|_|_|
NUMBER

REFUSED 77
DON'T KNOW 99

TUQ.025 Q/U 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?”

INSTRUCTIONS TO SP:

Por favor, anote la cantidad de días, semanas, meses o años y después seleccione la unidad de tiempo.

CAPI INSTRUCTION: DISPLAY NUMBER KEYPAD WITH CLEAR BUTTON ON LEFT AND DAYS, WEEKS, MONTHS, YEARS KEYPAD WITH CLEAR BUTTON ON THE RIGHT.


NUMBER

REFUSED 777
DON'T KNOW 999

ENTER UNIT

Días 1
Semanas 2
Meses 3
Años 4

TUQ.030 Para volver a una pregunta anterior para cambiar su respuesta, toque el botón {BACK BUTTON IMAGE}.

TUQ.035 Algunas preguntas tienen ayuda disponible. Cuando vea {HELP WITH THIS QUESTION IMAGE} en la esquina de la pantalla, toque las palabras para abrir la pantalla de ayuda. Inténtelo ahora.

‘¿Le gustan las comedias?’

INSTRUCTIONS TO SP:

Por favor, seleccione...

HELP TEXT: Las comedias son películas que nos hacen reír a carcajadas. .

Ahora oprima el botón “Atrás” para regresar a la pregunta y anote su respuesta.”

Sí 1
No 2
REFUSED 7
DON'T KNOW 9

TUQ.040 Tal como las otras preguntas que usted ha contestado hoy, sus respuestas serán mantenidas en confidencia. Si no está seguro(a) de una respuesta, denos su mejor estimación.

Non-
response
Screen

Usted no contestó la pregunta anterior. ¿Tenía la intención de contestar, preferiría no contestar la pregunta, o no sabe la respuesta? Por favor, seleccione ...

Realmente tenía la intención de contestar.
Preferiría no contestar.
No sé la respuesta.

ACASI
Last Screen

Gracias por participar en esta encuesta. Por favor, dígame al examinador que usted terminó.

SEXUAL ORIENTATION – (SXQ-O)
Target Group: SPs 18-59 (Audio-CASI)

BOX 1

CHECK ITEM SXQ.300:

- IF SP = FEMALE AND SP = 18 – 59 YEARS, CONTINUE WITH SXQ.295.
- ELSE IF SP = MALE AND SP = 18 – 59 YEARS, CONTINUE WITH SXQ.296.
- OTHERWISE, GO TO END OF SECTION.

SXQ.295 ¿Se considera usted a sí misma lesbiana o gay; heterosexual, o sea, no es gay o lesbiana; bisexual; otra cosa o no sabe la respuesta?

(Target 18-59)

INSTRUCTIONS TO SP:

Por favor, seleccione una de las siguientes opciones.

Lesbiana o gay	1 (END OF SECTION)
Heterosexual, o sea, no es gay o lesbiana	2 (END OF SECTION)
Bisexual	3 (END OF SECTION)
Otra cosa	4 (END OF SECTION)
No sé la respuesta.....	9 (END OF SECTION)
REFUSED	77 (END OF SECTION)
DON'T KNOW	99 (END OF SECTION)

SXQ.296 ¿Se considera usted a sí mismo gay; heterosexual, o sea, no es gay; bisexual; otra cosa o no sabe la respuesta?

(Target 18-59)

INSTRUCTIONS TO SP:

Por favor, seleccione una de las siguientes opciones.

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

DEPRESSION SCREEN – DPQ
Target Group: SPs 12+ (Audio-CASI)

DPQ.010_ Las {primeras/siguientes} preguntas son acerca de sus emociones durante las últimas dos semanas.

CAPI INSTRUCTION:

IF SPs AGE = 12-17 AND 60+, DISPLAY = primeras

IF SPs AGE = 18 – 59, DISPLAY = siguientes

DPQ.010 Durante las **últimas 2 semanas**, ¿con qué frecuencia le ha molestado alguno de los siguientes problemas:

Tener poco interés o placer en hacer las cosas?

INSTRUCTIONS TO SP:

Por favor, seleccione una de las siguientes opciones.

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.020 Durante las **últimas 2 semanas**, ¿con qué frecuencia le ha molestado:

Sentirse {desanimado(M)/desanimada(F)}, {deprimido(M)/deprimida(F)} o sin esperanza?

INSTRUCTIONS TO SP:

Por favor, seleccione una de las siguientes opciones.

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 ha molestado:

problemas en dormirse o en mantenerse {dormido(M)/dormida(F)} o dormir demasiado?

INSTRUCTIONS TO SP:

Por favor, seleccione una de las siguientes opciones.

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 ha molestado:

Sentirse {cansado(M)/cansada(F)} o tener poca energía?

INSTRUCTIONS TO SP:

Por favor, seleccione una de las siguientes opciones.

- 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 ha molestado:

Tener poco apetito o comer en exceso?

INSTRUCTIONS TO SP:

Por favor, seleccione una de las siguientes opciones.

- 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 ha molestado:

Sentir falta de amor propio – o que sea un fracaso o que se decepcionara a sí {mismo(M)/misma(F)} o a su familia?

INSTRUCTIONS TO SP:

Por favor, seleccione una de las siguientes opciones.

- 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 ha molestado:

Tener dificultad para concentrarse en cosas tales como leer el periódico o mirar la televisión?

INSTRUCTIONS TO SP:

Por favor, seleccione una de las siguientes opciones.

- 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 ha molestado:

moverse o hablar tan lentamente que otra gente se podría dar cuenta - o por el contrario, estar tan {agitado(M)/agitada(F)} o {inquieto(M)/inquieta(F)} que se mueve mucho más de lo acostumbrado?

INSTRUCTIONS TO SP:

Por favor, seleccione una de las siguientes opciones.

- 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?

INSTRUCTIONS TO SP:

Por favor, seleccione una de las siguientes opciones.

- 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?

INSTRUCTIONS TO SP:

Por favor, seleccione una de las siguientes opciones.

Nada difícil.....	0
Algo difícil.....	1
Muy difícil.....	2
Extremadamente difícil.....	3
REFUSED.....	7
DON'T KNOW.....	9

REPRODUCTIVE HEALTH – RHQ
Target Group: Female SPs Ages 12+ (Audio-CASI)

RHQ.010_ La siguiente serie de preguntas es acerca de su historia reproductiva. Hay ayuda disponible para muchas de las preguntas.

RHQ.010 ¿Qué edad tenía usted cuando tuvo su **primera** menstruación?

INSTRUCTIONS TO SP:

Por favor, anote una edad o anote cero si usted no ha tenido su primera menstruación.

CASI INSTRUCTION:

SOFT EDIT VALUES: AGE ≤8 YEARS.

ERROR MESSAGE: “Usted anotó 8 años o menos como la edad en la cual tuvo su primera menstruación. Si eso es correcto, toque el botón “Siguiente” para continuar. Si no es correcto, toque el botón “Atrás”, toque “Borrar” y anote otra edad.”

SOFT EDIT VALUES: AGE ≥ 25 YEARS.

ERROR MESSAGE: “Usted anotó 25 años o más como la edad en la cual tuvo su primera menstruación. Si eso es correcto, toque el botón “Siguiente” para continuar. Si no es correcto, toque el botón “Atrás”, toque “Borrar” y anote otra edad.”

HARD EDIT VALUES: AGE OF 1ST PERIOD CANNOT BE GREATER 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.”

SOFT EDIT: DISPLAY EDIT WHEN AGE OF SP IS GREATER THAN OR EQUAL TO 20 AND RHQ.010 IS CODED ‘0’.

ERROR MESSAGE: “Usted anotó que nunca ha tenido la menstruación. Si eso es correcto, toque el botón “Siguiente” para continuar. Si no es correcto, toque el botón “Atrás”, toque “Borrar” y anote otra edad.”

□□□

ENTER AGE IN YEARS

REFUSED 777

DON'T KNOW 999

BOX 1

CHECK ITEM RHQ.015:

- IF PERIODS HAVEN'T STARTED (CODED '0'), GO TO END OF SECTION.
- OTHERWISE, GO TO RHQ.031.

RHQ.031 ¿Ha tenido usted **al menos una menstruación** en los **últimos 12 meses**?

INSTRUCTIONS TO SP:
Por favor, seleccione . . .

HELP TEXT: Si ha tenido por lo menos una menstruación muy leve en los últimos 12 meses debido a que usa anticonceptivos hormonales como píldoras, inyecciones o dispositivos intrauterinos, seleccione “Sí.” Si no ha tenido la menstruación en los últimos 12 meses, pero ha tenido sangrados debido a condiciones de salud, terapia de hormonas o cirugías, seleccione “No.”

SOFT EDIT: DISPLAY EDIT WHEN AGE OF SP IS GREATER THAN OR EQUAL TO 60 AND RHQ.031 IS CODED YES.

ERROR MESSAGE: “Si no ha tenido la menstruación en los últimos 12 meses, pero ha tenido sangrados debido a condiciones de salud, terapia de hormonas o cirugías, toque el botón “Atrás” y seleccione “No.” De lo contrario toque el botón “Siguiente” para continuar.”

Sí	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 5.
- 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 no ha tenido **la menstruación** en los últimos 12 meses?

INSTRUCTIONS TO SP:
Por favor, seleccione una de las siguientes opciones.

HELP TEXT: Seleccione “otra razón” si usted no ha tenido la menstruación en los últimos 12 meses, por motivos que incluyen, pero no se limitan a lo siguiente: uso de anticonceptivos hormonales; cáncer; problema de la tiroides; quimioterapia; ejercicio excesivo; anorexia; bajo peso corporal.

SOFT EDIT: DISPLAY EDIT WHEN AGE OF SP IS YOUNGER THAN 45 AND RHQ.043 IS CODED 7 (MENOPAUSE/CHANGE OF LIFE).

ERROR MESSAGE: “Usted anotó que la razón por la cual no ha tenido la menstruación en los últimos 12 meses es debido a la menopausia, lo que quiere decir que su menstruación ha parado por completo. Si eso es correcto, toque el botón “Siguiente” para continuar. Si no es correcto, toque el botón “Atrás”, toque “Borrar” y seleccione otra razón.”

Embarazo	1 (BOX 5)
Amamantando	2
Histerectomía	3
Menopausia	7
Otra razón.....	9
REFUSED	77
DON'T KNOW	99

RHQ.282 ¿Le han hecho a usted una histerectomía, incluyendo una histerectomía parcial, es decir, cirugía para **sacarle** el útero o matriz?

INSTRUCTIONS TO SP:
Por favor, seleccione . . .

CAPI INSTRUCTION:
IF RHQ.043 = 3, fill = 1

- Sí 1
- No 2
- REFUSED 7
- DON'T KNOW 9

RHQ.305 ¿Le han sacado a usted los **dos** ovarios {ya sea cuando le sacaron el útero o en otra ocasión}?

HELP TEXT: Es posible sacar los dos ovarios, únicamente un ovario o únicamente parte de un ovario. Los ovarios se pueden sacar durante una histerectomía. Seleccione "Sí" únicamente si un cirujano le sacó completamente los dos ovarios

INSTRUCTIONS TO SP:
Por favor, seleccione . . .

CAPI INSTRUCTION: IF RHQ.282 = 1 DISPLAY {ya sea cuando le sacaron el útero o en otra ocasión}"

- Sí 1
- No 2 (BOX 1B)
- REFUSED 7 (RHQ.060)
- DON'T KNOW 9 (RHQ.060)

RHQ.332 ¿Qué edad tenía usted cuando le sacaron los ovarios o le sacaron el último ovario si se los sacaron en diferentes ocasiones?

INSTRUCTIONS TO SP:
Por favor, anote una edad.

CAPI INSTRUCTION:
HARD EDIT: RHQ.332 MUST BE EQUAL TO OR LESS THAN AGE OF SP.
ERROR MESSAGE: "Su respuesta es mayor que la edad anotada. Por favor, toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

ENTER AGE IN YEARS

- REFUSED 7777
- DON'T KNOW 9999

BOX 1B

CHECK ITEM RHQ.334:

- IF RHQ.031 = 1 AND RHQ.282 = 2 AND RHQ.305 = 2, GO TO BOX 5.
- OTHERWISE, CONTINUE.

RHQ.060 ¿Más o menos qué edad tenía usted cuando tuvo su **última** menstruación?

INSTRUCTIONS TO SP:
Por favor, anote una edad.

SOFT EDIT: DISPLAY EDIT WHEN RHQ.060 IS GREATER THAN 59.

ERROR MESSAGE: "Usted anotó que su última menstruación fue después de los 59 años de edad. Si eso es correcto, toque el botón "Siguiente" para continuar. Si no es correcto, toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

SOFT EDIT: RHQ.060 MUST BE LESS THAN OR EQUAL TO RHQ.332.

ERROR MESSAGE: "Usted anotó que la edad en la cual tuvo su última menstruación fue después de la edad en la cual le sacaron los dos ovarios. Si eso es correcto, toque el botón "Siguiente" para continuar. Si no es correcto, toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

HARD EDIT: RHQ.060 MUST BE EQUAL TO OR LESS THAN AGE OF SP.

ERROR MESSAGE: "Su respuesta es mayor que la edad anotada. Por favor, toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

ENTER AGE IN YEARS

REFUSED 777
DON'T KNOW 999

BOX 5

CHECK ITEM RHQ.086:

- IF SP IS 12-17 YEARS OLD, GO TO RHQ.131_.
- IF SP IS 18-59 YEARS OLD, CONTINUE.
- OTHERWISE, END OF SECTION.

RHQ.078 ¿Alguna vez le han hecho tratamiento a usted debido a una infección en las trompas de Falopio, en el útero o matriz o en los ovarios, conocida también como enfermedad pélvica inflamatoria?

INSTRUCTIONS TO SP:
Por favor, seleccione . . .

Sí 1
No 2
REFUSED 7
DON'T KNOW 9

RHQ.131_ Las siguientes preguntas son acerca de su historia de embarazo.

RHQ.131 ¿Ha estado usted **alguna vez** embarazada? Por favor, incluya embarazo actual, nacimientos vivos, pérdidas involuntarias del embarazo, nacimientos muertos, embarazos extrauterinos y abortos.

INSTRUCTIONS TO SP:

Por favor, seleccione . . .

HELP TEXT:

Pérdida involuntaria del embarazo es la pérdida de un bebé antes de las 20 semanas de embarazo.

Nacimiento muerto es la pérdida de un bebé a las 20 semanas o después de las 20 semanas de embarazo.

Embarazo extrauterino es un embarazo que ocurre en las trompas de Falopio.

Aborto es finalizar un embarazo usando métodos de inducción.

- Sí 1
- No 2 (END OF SECTION)
- REFUSED 7 (END OF SECTION)
- DON'T KNOW 9 (END OF SECTION)

BOX 6

CHECK ITEM RHQ.136:

- IF THE SP HAS EXPERIENCED MENOPAUSE (RHQ.043 = 7), GO TO RHQ.167.
- IF THE SP HAD HYSTERECTOMY (RHQ.043 = 3 OR RHQ.282 = 1), GO TO RHQ.167.
- OTHERWISE, CONTINUE.

RHQ.143 ¿Está usted embarazada **ahora**?

INSTRUCTIONS TO SP:

Por favor, seleccione . . .

- Sí 1
- No 2
- REFUSED 7
- DON'T KNOW 9

RHQ.167 ¿Cuántos partos vaginales o por cesárea ha tenido usted? Incluya los nacimientos muertos y también los vivos.

Si tuvo gemelos o tuvo otro nacimiento múltiple, cuéntelo como un parto.

INSTRUCTIONS TO SP:

Anote la cantidad total de partos.

ENTER NUMBER

- REFUSED 777
- DON'T KNOW 999

BOX 7B

CHECK ITEM RHQ.170A:

- IF THE NUMBER OF DELIVERIES IN RHQ.167 EQUALS ZERO, GO TO END OF SECTION.
- OTHERWISE, CONTINUE.

RHQ.200 ¿Está usted **ahora** amamantando o dándole pecho a un niño?

INSTRUCTIONS TO SP:

Por favor, seleccione . . .

- Sí 1
- No..... 2
- REFUSED 7
- DON'T KNOW 9

CURRENT HEALTH STATUS – HSQ
Target Group: SPs 16+ (Audio-CASI)

HSQ.590_ La siguiente pregunta es acerca de la prueba del VIH, el virus que causa el SIDA.

HSQ.590 Excepto por las pruebas que a usted le pueden haber hecho como parte de las donaciones de sangre, ¿le han hecho a usted alguna vez la prueba del VIH?

INSTRUCTIONS TO SP:

Por favor, seleccione . . .

- Sí 1
- No 2
- REFUSED 7
- DON'T KNOW 9

PHYSICAL ACTIVITY AND PHYSICAL FITNESS – PAQ
Target Group: SPs 12-15 (Audio-CASI)

PAQ.706_ Las siguientes preguntas son acerca de sus actividades.

PAQ.706 Durante los **últimos 7 días**, ¿cuántos días estuvo usted físicamente activo por un total de **al menos 60 minutos al día**? Incluya todo el tiempo que usted pasó en cualquier actividad física que le haya aumentado los latidos del corazón y le haya hecho respirar rápido parte del tiempo.

INSTRUCTIONS TO SP:

Por favor, seleccione una de las siguientes opciones.

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.711 En un día típico durante el año escolar, ¿aproximadamente cuántas horas pasa usted normalmente jugando en un smartphone o computadora, mirando televisión o películas o jugando videojuegos?

INSTRUCTIONS TO SP:

Por favor, anote una cantidad.

ENTER NUMBER OF HOURS

REFUSED	77
DON'T KNOW	99

SOFT EDIT: 18 – 24 HOURS.

ERROR MESSAGE: “Usted dijo que, en un día típico durante el año escolar, usted pasa normalmente 18 horas o más jugando en un smartphone o computadora, mirando televisión o películas o jugando videojuegos. Si eso es correcto, toque el botón “Siguiente” para continuar. Si no es correcto, toque el botón “Atrás”, toque “Borrar” y hágalo de nuevo.”

HARD EDIT: 25 HOURS OR MORE.

ERROR MESSAGE: “Por favor, anote un número entre 0 y 24. Por favor, toque el botón "Atrás", toque "Borrar" y hágalo de nuevo.”

TOBACCO – SMQ
Target Group: SPs 12+ (Audio-CASI)

BOX 1

CHECK ITEM SMQ.605:

- IF SP AGED 18+, GO TO SMQ.681_.
- OTHERWISE, CONTINUE.

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.

CAPI INSTRUCTION:
COMBINATION CONTROL: NUMBER PAD: ENTER AGE
ACCEPTABLE VALUES: 6-18 YEARS, REFUSED, DON'T KNOW.
IF R ENTERS 1-5, STORE 6 YEARS IN SMQ.632a.

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 cero. 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 En 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."

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 7777

DON'T KNOW 9999

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 LESS THAN 30 DAYS GO TO SMQ.650.
- OTHERWISE, GO TO SMQ.681_.

SMQ.650 En los **últimos 30 días**, en promedio, cuando fumó, ¿cuántos cigarrillos fumó al día?
SMQ.650a

INSTRUCTIONS TO SP:

Por favor, anote una cantidad.

CAP I INSTRUCTION:

IF R SAYS 95 OR MORE CIGARETTES PER DAY, STORE 95 IN SMQ.650a.

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

REFUSED 7777

DON'T KNOW 9999

SMQ.681_ Las siguientes preguntas son acerca del uso de productos de tabaco en los últimos **5 días**.

SMQ.682 Durante los últimos **5 días**, incluyendo hoy, ¿fumó usted {cigarrillos,} pipas, puros, puritos o puritos con filtro, pipas de agua o “hookahs” con tabaco?

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.846)
REFUSED	7 (SMQ.846)
DON'T KNOW	9 (SMQ.846)

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?

INSTRUCTIONS TO SP:

Por favor, seleccione todo lo que usó.

CAPI INSTRUCTION: CHECK ALL THAT APPLY

Cigarrillos.....	1 (BOX 2)
Pipas	2 (BOX 2)
Puros, puritos o puritos con filtro	3 (BOX 2)
Pipas de agua o hookahs con tabaco.....	4 (BOX 2)
REFUSED	77 (SMQ.846)
DON'T KNOW	99 (SMQ.846)

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 puritos con filtro	2
Pipas de agua o hookahs con tabaco.....	3
REFUSED	77 (SMQ.846)
DON'T KNOW	99 (SMQ.846)

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.

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 77

DON'T KNOW 99

SMQ.720 Durante los últimos **5 días**, en los días que fumó, ¿cuántos cigarrillos fumó 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 IN SMQ.720a.

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

REFUSED 7777

DON'T KNOW 9999

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.
- IF 'WATER PIPE OR HOOKAH (CODE 4) IN SMQ.692A OR (CODE 3) IN SMQ.692B, GO TO SMQ.845.
- OTHERWISE, GO TO SMQ.846.

SMQ.740 Durante los últimos **5 días**, incluyendo hoy, ¿cuántos días fumó usted en 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."

|_|

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.SMQ.845.
- OTHERWISE, GO TO SMQ.846.

SMQ.771 Durante los últimos **5 días**, incluyendo hoy, ¿cuántos días fumó usted puros, puritos o puritos con filtro?

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 77

DON'T KNOW 99

BOX 5

CHECK ITEM SMQ.791:

- IF 'WATERPIPE' (CODE 4) IN SMQ.692A OR (CODE 3) IN SMQ.692B, GO TO SMQ.845.
- OTHERWISE, GO TO SMQ.846.

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

SMQ.846 Durante los últimos **5 días**, incluyendo hoy, ¿fumó cigarrillos electrónicos? Es posible que también los conozca como JUUL™, cigarros electrónicos, vapeadores, plumas hookah, hookahs electrónicas o

vaporizadores. Funcionan con batería, normalmente contienen nicotina líquida y producen vapor en vez de humo.

INSTRUCTIONS TO SP:
Por favor, seleccione . . .

- Sí 1
- No 2 (SMQ.851_)
- REFUSED 7 (SMQ.851_)
- DON'T KNOW 9 (SMQ.851_)

SMQ.849 Durante los últimos **5 días**, incluyendo hoy, ¿cuántos días fumó usted cigarrillos electrónicos?

INSTRUCTIONS TO SP:
Por favor, anote una cantidad.

CAPI INSTRUCTIONS:
HARD EDIT: 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."

ENTER NUMBER OF DAYS

- REFUSED 7
- DON'T KNOW 9

SMQ.851_ Los productos de tabaco que no se fuma se ponen en la boca o la nariz e incluyen al tabaco de mascar, el rapé o tabaco de inhalar, el dip, el snus y los productos de tabaco que se disuelve.

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 . . .

- Sí 1
- No 2 (BOX 6)
- REFUSED 7 (BOX 6)
- DON'T KNOW 9 (BOX 6)

SMQ.853 ¿Cuáles de estos productos usó usted?

INSTRUCTIONS TO SP:

Por favor, seleccione todos los productos que usó.

CAPI INSTRUCTION: CHECK ALL THAT APPLY

Tabaco de mascar	1
Snuff o rapé (tabaco en polvo)	2
Snus	3
Productos que se disuelven.....	4
Dip	5
REFUSED	7
DON'T KNOW	9

BOX 6

CHECK ITEM SMQ.610:

- IF SP AGED 12 - 17, GO TO END OF SECTION.
- OTHERWISE, CONTINUE.

SMQ.863 Durante los últimos **5 días**, incluyendo hoy, ¿usó algún producto que reemplaza la nicotina, tal como parches, chicle, pastillas de chupar, inhaladores o aerosoles nasales con nicotina?

INSTRUCTIONS TO SP:

Por favor, seleccione . . .

Sí	1
No.....	2
REFUSED	7
DON'T KNOW	9

ALCOHOL USE – ALQ
Target Group: SPs 12+ (Audio-CASI)

BOX 1A
CHECK ITEM ALQ.005:
■ IF SP AGED 18+, GO TO ALQ.111_.
■ OTHERWISE, CONTINUE.

ALQ.010_ Las siguientes preguntas son acerca del uso de alcohol. Esto incluye cerveza, vino, sangría y licores tales como ron, ginebra, vodka o whisky. Esto no incluye tomar unos pocos sorbos de vino con propósitos religiosos.

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.

0 días.....	1 (END OF SECTION)
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.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."

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.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} o más 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 (END OF SECTION)
1 día	2 (END OF SECTION)
2 días.....	3 (END OF SECTION)
3 a 5 días.....	4 (END OF SECTION)
6 a 9 días.....	5 (END OF SECTION)
10 a 19 días.....	6 (END OF SECTION)
20 o más días.....	7 (END OF SECTION)
REFUSED	77 (END OF SECTION)
DON'T KNOW	99 (END OF SECTION)

ALQ.111_ Las siguientes preguntas son acerca de tomar bebidas alcohólicas. Están incluidos licores (tales como whisky o ginebra), cerveza, vino, sangría o cualquier otro tipo de bebida alcohólica.

ALQ.111 En **toda su vida**, ¿ha tomado usted al menos 1 bebida alcohólica de cualquier tipo, sin incluir probaditas o sorbos? Por bebida, quiero decir una cerveza de 12 onzas, una copa de vino de 5 onzas o una onza y media de licor.

INSTRUCTIONS TO SP:
Por favor, seleccione . . .

CAPI INSTRUCTION: SHOW IMAGES OF 12 OZ BEER, 5 OZ WINE, AND 1.5 OZ LIQUOR.

- Sí 1
- No 2 (END OF SECTION)
- REFUSED 7
- DON'T KNOW 9

ALQ.121 En los **últimos 12 meses**, ¿aproximadamente con qué frecuencia se tomó usted algún tipo de bebida alcohólica?

En otras palabras, ¿cuántos días a la semana, al mes o al año tomó usted?

INSTRUCTIONS TO SP:
Por favor, seleccione una de las siguientes opciones.

HELP SCREEN: Si solamente tomó parte del año, informe cuál era su frecuencia de bebida en la mayoría del año. Si solamente tomó durante medio año, pero no tomó durante la otra mitad, informe su frecuencia de bebida actual. Seleccione la respuesta más aproximada cuando no haya una respuesta exacta.

- Todos los días 1
- Casi todos los días 2
- 3 a 4 veces a la semana..... 3
- 2 veces a la semana..... 4
- Una vez a la semana..... 5
- 2 a 3 veces al mes..... 6
- Una vez al mes..... 7
- 7 a 11 veces en los últimos 12 meses..... 8
- 3 a 6 veces en los últimos 12 meses..... 9
- 1 a 2 veces en los últimos 12 meses..... 10
- Nunca en los últimos 12 meses..... 0
- REFUSED 77
- DON'T KNOW 99

BOX 1

CHECK ITEM ALQ.125:

- IF SP DIDN'T DRINK (CODED '0') IN ALQ.121, GO TO ALQ.151.
- OTHERWISE, CONTINUE WITH ALQ.130.

ALQ.130 En los **últimos 12 meses**, en aquellos días en que usted se tomó algún tipo de bebida alcohólica, en **promedio**, ¿cuántas bebidas se tomó usted? Por bebida, quiero decir una cerveza de 12 onzas, una copa de vino de 5 onzas o una onza y media de licor.

INSTRUCTIONS TO SP:

Por favor, anote una cantidad.

CAPI INSTRUCTIONS:

SHOW IMAGES OF 12 OZ BEER, 5 OZ WINE, AND 1.5 OZ LIQUOR.

IF R ENTERS LESS THAN 1 DRINK, STORE '1'.

IF R ENTERS 95 DRINKS OR MORE, STORE '95'.

SOFT EDIT: IF RESPONSE >=20, THEN DISPLAY "Usted dijo que en los días en que tomó, consumió en **promedio** 20 o más bebidas. Si eso es correcto, toque el botón "Siguiente" para continuar. Si no es correcto, toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

ENTER # OF DRINKS

REFUSED 777
DON'T KNOW 999

ALQ.142 En los **últimos 12 meses**, ¿aproximadamente con qué frecuencia se tomó usted **{DISPLAY NUMBER}** o **más bebidas alcohólicas** de cualquier tipo?

En otras palabras, ¿cuántos días a la semana, al mes o al año tomó usted **{DISPLAY CANTIDAD}** o **más bebidas** en un solo día?

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: ALQ.142 CANNOT HAVE A LOWER CODED VALUE THAN ALQ.121, UNLESS ALQ.142 IS CODED '0'.

ERROR MESSAGE: "Su respuesta no coincide con su respuesta anterior acerca de la frecuencia con que tomó durante los últimos 12 meses. Por favor, toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

Todos los días 1
Casi todos los días 2
3 a 4 veces a la semana..... 3
2 veces a la semana..... 4
Una vez a la semana..... 5
2 a 3 veces al mes..... 6
Una vez al mes..... 7
7 a 11 veces en los últimos 12 meses..... 8
3 a 6 veces en los últimos 12 meses..... 9
1 a 2 veces en los últimos 12 meses..... 10
Nunca en los últimos 12 meses..... 0 (ALQ.151)
REFUSED 77
DON'T KNOW 99

ALQ.270 En los **últimos 12 meses**, ¿aproximadamente con qué frecuencia tomó usted **{DISPLAY NUMBER}** o más **bebidas alcohólicas**, en un periodo de **dos horas o menos**?

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: ALQ.270 CANNOT HAVE A LOWER CODED VALUE THAN ALQ.121, UNLESS ALQ.270 IS CODED '0'.

ERROR MESSAGE: "Su respuesta no coincide con su respuesta anterior acerca de la frecuencia con que tomó durante los últimos 12 meses. Por favor, toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

- Todos los días 1
- Casi todos los días 2
- 3 a 4 veces a la semana..... 3
- 2 veces a la semana..... 4
- Una vez a la semana..... 5
- 2 a 3 veces al mes..... 6
- Una vez al mes..... 7
- 7 a 11 veces en los últimos 12 meses..... 8
- 3 a 6 veces en los últimos 12 meses..... 9
- 1 a 2 veces en los últimos 12 meses..... 10
- Nunca en los últimos 12 meses..... 0
- REFUSED 77
- DON'T KNOW 99

ALQ.280 En los **últimos 12 meses**, ¿aproximadamente con qué frecuencia tomó usted **8 o más** bebidas alcohólicas **en un solo día**?

INSTRUCTIONS TO SP:

Por favor, seleccione una de las siguientes opciones.

HARD EDIT: ALQ.280 CANNOT HAVE A LOWER CODED VALUE THAN ALQ.121, UNLESS ALQ.280 IS CODED '0'.

ERROR MESSAGE: "Su respuesta no coincide con su respuesta anterior acerca de la frecuencia con que tomó durante los últimos 12 meses. Por favor, toque el botón "Atrás", toque "Borrar" y hágalo de nuevo."

- Todos los días 1
- Casi todos los días 2
- 3 a 4 veces a la semana..... 3
- 2 veces a la semana..... 4
- Una vez a la semana..... 5
- 2 a 3 veces al mes..... 6
- Una vez al mes..... 7
- 7 a 11 veces en los últimos 12 meses..... 8
- 3 a 6 veces en los últimos 12 meses..... 9
- 1 a 2 veces en los últimos 12 meses..... 10
- Nunca en los últimos 12 meses..... 0 (ALQ.151)
- REFUSED 77
- DON'T KNOW 99

ALQ.151 ¿Hubo alguna vez un tiempo o tiempos en su vida cuando usted se **tomó {DISPLAY NUMBER} o más bebidas alcohólicas** de cualquier tipo **casi todos los días**?

INSTRUCTIONS TO SP:
Por favor, seleccione . . .

CAPI INSTRUCTION:
IF SP = MALE, DISPLAY = 5
IF SP = FEMALE, DISPLAY = 4

- Sí 1
- No 2
- REFUSED 7
- DON'T KNOW 9

BOX 2

CHECK ITEM ALQ.152:

- IF ALQ.121 = 0, OR ALQ.142 = 0, GO TO END OF SECTION.
- OTHERWISE, CONTINUE TO ALQ.170.

ALQ.170 Incluyendo todos los tipos de bebidas alcohólicas, **durante los últimos 30 días**, ¿cuántas veces **tomó {DISPLAY CANTIDAD} o más bebidas** en una ocasión?

INSTRUCTIONS TO SP:
Por favor, anote una cantidad o anote cero por ninguna.

HELP SCREEN: Una ocasión se refiere a un periodo de varias horas en un mismo día.

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 usted tomó {DISPLAY CANTIDAD} o más bebidas de cualquier tipo de alcohol en una ocasión, más de 60 veces. Si eso es correcto, toque el botón “Siguiente” para continuar. Si no es correcto, toque el botón “Atrás”, toque “Borrar” y hágalo de nuevo.

ENTER QUANTITY

- REFUSED 777
- DON'T KNOW 999

KIDNEY CONDITIONS - KIQ
New Target Group: SPs 20+ (Audio-CASI)

KIQ.005_ Las siguientes preguntas son acerca de las personas a quienes se les sale la orina.

KIQ.005 A muchas personas se les sale la orina. ¿Qué tan frecuentemente se le sale la orina a usted?

INSTRUCTIONS TO SP:

Por favor, seleccione una de las siguientes opciones.

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 4
- todos los días y/o noches 5
- REFUSED 7 (KIQ.042)
- DON'T KNOW 9 (KIQ.042)

KIQ.010 ¿Cuánta orina pierde usted cada vez?

INSTRUCTIONS TO SP:

Por favor, seleccione una de las siguientes opciones.

- gotas..... 1
- salpicaduras pequeñas..... 2
- más..... 3
- REFUSED 7
- DON'T KNOW 9

KIQ.042 Durante los **últimos 12 meses**, ¿ha perdido usted 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?

INSTRUCTIONS TO SP:

Por favor, seleccione...

- Sí 1
- No 2
- REFUSED 7
- DON'T KNOW 9

KIQ.044 Durante los **últimos 12 meses**, ¿ha perdido usted el control o se le ha salido la orina, incluso una cantidad pequeña, debido a que usted tenía urgencia o presión para orinar y no pudo llegar al baño lo suficientemente rápido?

INSTRUCTIONS TO SP:
Por favor, seleccione...

- Sí 1
- No 2
- REFUSED 7
- DON'T KNOW 9

BOX 1

CHECK ITEM KIQ.048A:

- IF 'YES' (CODED '1') IN KIQ.042 OR KIQ.044, CONTINUE WITH KIQ.052.
- OTHERWISE, GO TO KIQ.481.

KIQ.052 Durante los **últimos 12 meses**, ¿qué tanto le ha afectado a usted la salida de la orina en sus actividades diarias?

INSTRUCTIONS TO SP:
Por favor, seleccione una de las siguientes opciones.

- nada 1
- un poco solamente 2
- algo..... 3
- mucho 4
- excesivamente..... 5
- REFUSED 7
- DON'T KNOW 9

KIQ.481 Durante los **últimos 30 días**, en una noche normal, ¿cuántas veces se levantó usted usualmente para orinar?

INSTRUCTIONS TO SP:
Por favor, seleccione una de las siguientes opciones.

- 0 0
- 1 1
- 2 2
- 3 3
- 4 4
- 5 o más..... 5
- REFUSED 77
- DON'T KNOW 99

DRUG USE – DUQ
Target Group: SPs 12-59 (Audio-CASI)

DUQ.200_ Las siguientes preguntas son acerca del uso de drogas. Por favor, recuerde que sus respuestas a estas preguntas se mantendrán confidenciales.

DUQ.230 Durante los **últimos 30 días**, ¿cuántos días usó marihuana o cannabis, también conocida como “mota” o “hierba”?

INSTRUCTIONS TO SP:

Por favor, anote una cantidad o anote cero si nunca ha usado marihuana o cannabis.

HARD EDIT VALUES: 0-30.

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.”

ENTER A NUMBER

REFUSED 77
DON'T KNOW 99

DUQ.250 **Alguna vez**, aunque sea una, ¿ha usado cocaína, incluidas todas las formas diferentes de cocaína, tales como en polvo, “crack”, “free base” y pasta de coca?

INSTRUCTIONS TO SP:

Por favor, seleccione . . .

Sí 1
No 2
REFUSED 7
DON'T KNOW 9

DUQ.290 **Alguna vez**, aunque sea una, ¿ha usado heroína?

INSTRUCTIONS TO SP:

Por favor, seleccione . . .

Sí 1
No 2
REFUSED 7
DON'T KNOW 9

DUQ.330 **Alguna vez**, aunque sea una, ¿ha usado metanfetamina, conocida también como crack, cristal, ice o speed?

INSTRUCTIONS TO SP:
Por favor, seleccione . . .

Sí	1
No	2
REFUSED	7
DON'T KNOW	9

DUQ.370 **Alguna vez**, aunque sea una, ¿ha usado una aguja para inyectarse una droga **no recetada** por un médico?

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 se mantendrán 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.

(Target 14-69)

INSTRUCTIONS TO SP:

Por favor, seleccione . . .

Sí 1
No 2
REFUSED 7
DON'T KNOW 9

BOX 1

CHECK ITEM SXQ.702:

- IF SP 60-69 YEARS, GO TO END OF SECTION.
- IF SXQ.700 = 2 AND SXQ.703 = 2 AND SXQ.706 = 2 AND SXQ.709 = 2, GO TO END OF SECTION.
- SXQ.709 = 1 AND (SXQ.700, SXQ.703, AND SXQ.706 = 2), GO TO SXQ.736.
- OTHERWISE, CONTINUE.

SXQ.712 En **toda su vida**, ¿con cuántos **hombres** ha tenido **algún** tipo de relación sexual?
(Target 14-59)

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."

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 6

CHECK ITEM SXQ.733:

- IF SXQ.709 = 1, GO TO SXQ.736.
- OTHERWISE, GO TO BOX 7B.

SXQ.736 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.

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."

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

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
(Target 14-59) genitales?

INSTRUCTIONS TO SP:
Por favor, seleccione . . .

Sí	1
No	2
REFUSED	7
DON'T KNOW	9

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 se mantendrán 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 (END OF SECTION)
- REFUSED 7 (END OF SECTION)
- DON'T KNOW 9 (END OF SECTION)

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 1

CHECK ITEM SXQ.802:

- IF SP 60-69 YEARS, GO TO END OF SECTION.
- IF SXQ.800 = 2 AND SXQ.806 = 2 AND SXQ.803 = 2 AND SXQ.809 = 2, GO TO END OF SECTION.
- IF SXQ.809 = 1 AND (SXQ.800, SXQ.803, AND SXQ.806 = 2), GO TO SXQ.410.
- OTHERWISE, CONTINUE.

SXQ.812 En **toda su vida**, ¿con cuántas **mujeres** ha tenido **algún** tipo de relación sexual?
(Target 14-59)

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."

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 5
CHECK ITEM SXQ.833:
■ IF SXQ.809 = 1, GO TO SXQ.410.
■ OTHERWISE, GO TO BOX 9B.

SXQ.410 En **toda su vida**, ¿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.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."

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."

BOX 9B

CHECK ITEM SXQ.871:

- IF SXQ.818 OR SXQ.550 GREATER THAN '0000', GO TO SXQ.648.
- OTHERWISE, GO TO SXQ.260.

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

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 (Target 14-59) genitales?

INSTRUCTIONS TO SP:
Por favor, seleccione . . .

Sí	1
No.....	2
REFUSED	7
DON'T KNOW	9