

**2024 National Health Interview Survey (NHIS) Questionnaire**  
(Document Version: 07 February 2024)

## Contents

### 1. Introduction

This National Health Interview Survey (NHIS) questionnaire report provides the questions administered to NHIS respondents in the order they were asked. It is organized hierarchically into these parts: Contents, Index, and NHIS questionnaire, which in turn includes the Roster, Adult and Child modules.

### 2. Section Index

A section index is provided for each of the three modules: Roster, Adult, and Child. The index can be navigated via the Bookmarks pane to quickly get information about the different sections in the module. The display pane lists information about each section in the module including the three-letter section name, the section description, the type of content in the section (annual core, rotating core, sponsored or emerging content) and the page range in this document for each section for ease of printing.

### 3. NHIS questionnaire: Roster, Adult and Child modules

The questionnaire is the main part of the report and provides detailed information about each question in the survey. The hierarchy in the Bookmarks pane has three levels: module (Roster, Adult, Child), sections within each module, and questions within each section represented by the variable name in the instrument. The sections and questions are listed in questionnaire order. Selecting a specific question in the Bookmarks pane will display a detailed report for that question in the display pane while selecting a section abbreviation will display the report for the first question in the section.

In the question text field of the report, text displayed in **bold and in blue font** is an interviewer instruction which is sometimes followed by optional text in *gray, italic font*.

#### Information provided for each question includes:

- Question ID: unique alphanumeric code for each question beginning with the 3-letter section abbreviation
- Variable: instrument variable name for the question
- Interview Module: module where the question is located: Roster, Adult, or Child
- Content Type: indicates whether the question is part of the Annual Core, Rotating Core, Sponsored Content or Emerging Content
- Question Text: question wording administered to respondent with indicators for fills; may also include interviewer instructions
- Fills: table of contextual text substitutions that are filled into the question text
- Response: table of possible responses to the question
- Universe: group of respondents who received the question
- Skip Instructions: instructions for moving to the next question in the questionnaire

#### Additional information may include:

- Hard Edit: prompt received when response entered is not allowed; response must be changed in order to proceed
- Soft Edit: prompt received when response entered is questionable; must follow instructions in order to proceed
- Replicate To: indicates family-level information obtained in the Sample Adult interview that is copied to a replicated variable in the Sample Child and vice versa for efficiency when the Sample Child and the Sample Adult are in the same family.
- ? [F1]: indicates that there are notes available to the field representative to answer respondents questions about the topic.

### 4. Questionnaire Glossary

Description of variables listed in the skip and fills instructions of some survey questions that are used for the programming the interview.

## 2024 National Health Interview Survey (NHIS) Questionnaire

Navigate to the module of interest in the Bookmarks pane to see information about all the sections in the module in questionnaire order. The display pane will show a table with the following information for each section:

- Section abbreviation: a short, 3 letter abbreviation for the section, e.g., INS
- Section description: a description of the topic area for questions in the section
- Content type: a list of values indicating if the questions in the section come from annual core, rotating core, sponsored content or emerging content
- Page Range: range of pages in this document containing the content for each section

2024 National Health Interview Survey (NHIS) Questionnaire

Interview Module:Roster

Section Name	Section Description	Content Type	Page Range
ROS	Roster	Annual Core	9-10
HHC	Household Composition	Annual Core	11-40
REL	Relationship of children to parents	Annual Core	41-44
FAM	Family Composition	Annual Core	46-60

**2024 National Health Interview Survey (NHIS) Questionnaire**

Interview Module:Adult

Section Name	Section Description	Content Type	Page Range
VFY	Sample Adult Verification	Annual Core	61-97
HIS	Health Status	Annual Core	98-98
LSF	Life Satisfaction	Sponsored Content	99-99
HYP	Hypertension	Annual Core	100-104
CHL	Cholesterol	Annual Core	105-107
CVC	Cardiovascular Conditions	Annual Core	108-116
AST	Asthma	Annual Core	112-115
CAN	Cancer	Annual Core	116-129
DIB	Diabetes	Annual Core Emerging Content Sponsored Content	130-140
CON	Other Chronic Conditions	Annual Core	141-145
RCN	Rotating Conditions	Rotating Core	146-147
SCE	Sponsored Conditions-Ever	Rotating Core Sponsored Content	148-151
CFS	Chronic Fatigue Section	Sponsored Content	152-153
TSH	Taste and Smell Health Conditions	Sponsored Content	153-154
ISN	Immunosuppression	Sponsored Content	156-157
ALG	Allergies	Rotating Core	158-164
BMI	Current pregnancy, height, weight	Annual Core	165-173
VIS	Vision	Annual Core	175-177
HEA	Hearing	Annual Core Rotating Core	178-182
MOB	Mobility	Annual Core	183-196
COM	Communication	Annual Core Rotating Core	197-198
COG	Cognition	Annual Core	199-202
UPP	Self-care and Upper Body	Annual Core	203-205
SOC	Social Functioning	Annual Core	206-208
ADO	Age of Disability Onset	Sponsored Content	209-209
INS	Health Insurance	Annual Core	211-299
PAY	Difficulty Paying for Health Care	Annual Core	300-303
CVL	Long COVID	Sponsored Content	304-308
TSC	Taste and Smell - COVID	Sponsored Content	309-313
UTZ	Utilization	Annual Core	314-326
TLH	Telehealth	Annual Core	327-327
HIT	Internet access and health information technology	Emerging Content	328-332
PMD	Prescription Medication	Annual Core	333-337

IMS	Immunization	Annual Core Sponsored Content	338-364
ANX	Anxiety	Annual Core	365-367
DEP	Depression	Annual Core	368-370
MHC	Mental Health Care	Annual Core	371-375
SPD	Serious Psychological Distress	Rotating Core	376-382
REP	Repetitive Strain Injury	Rotating Core	383-390
INJ	Injury	Rotating Core	391-412
TBI	Concussions - past 12 months	Sponsored Content	413-418
FGE	Fatigue	Rotating Core	419-421
CIG	Cigarettes and E-cigarettes w/ Cigarette History	Annual Core Rotating Core Sponsored Content	422-438
OTB	Other Tobacco	Sponsored Content	439-443
LCS	Lung Cancer Screening	Sponsored Content	444-446
ALC	Alcohol Use	Rotating Core	447-455
PHY	Physical Activity	Rotating Core	456-465
WLK	Walking	Rotating Core	466-475
ENV	Perceptions of the Walking Environment	Sponsored Content	476-487
CPA	Content of Care - Physical Activity	Rotating Core	488-488
SUN	Sun Care and Protection	Sponsored Content	489-498
SLP	Sleep	Rotating Core	499-506
SSL	Social Support and Loneliness	Sponsored Content	507-509
TSM	Taste and Smell	Sponsored Content	510-519
ORN	Sexual Orientation	Annual Core	520-522
GNI	Gender Identity	Emerging Content	522-524
MAR	Marital Status	Annual Core	525-537
VET	Veterans Status	Annual Core	538-543
NAT	Nativity	Annual Core	544-549
LNG	Language Spoken at Home	Emerging Content	550-556
SCH	Schooling	Annual Core	557-558
EMP	Employment	Annual Core	559-567
EMD	Detailed Employment	Rotating Core	568-573
VOL	Volunteer Activities	Emerging Content	574-575
FEM	Employment of family members	Annual Core	578-578
INC	Family Income	Annual Core	579-600
FOO	Food Related Programs	Annual Core Sponsored Content	601-609
FDS	Food Security	Sponsored Content	610-620
HOU	Housing	Annual Core	621-624
SDH	Housing Costs	Emerging Content	625-625
TBH	Transportation Barrier to Care	Emerging Content	626-626

CIV	Civic Engagement	Emerging Content	627-628
REC	Person's name	Annual Core	629-631
TEL	Telephone Use	Annual Core	632-635
LNK	Linkage	Annual Core	363-640
THX	Thanks	Annual Core	641-641

**2024 National Health Interview Survey (NHIS) Questionnaire**

Interview Module:Child

Section Name	Section Description	Content Type	Page Range
VFY	Verification and demographic details	Annual Core	642-680
HIS	Health Status	Annual Core	681-681
AST	Asthma	Annual Core	682-686
DIB	Diabetes	Annual Core	687-688
DLD	Developmental and Learning Disabilities	Annual Core	689-698
ALG	Allergies	Rotating Core	699-705
TSH	Taste and Smell Health Conditions	Sponsored Content	706-707
BMI	Height and Weight	Rotating Core	708-717
VIS	Vision	Annual Core	719-721
HEA	Hearing	Annual Core	722-723
MOB	Mobility	Annual Core	724-733
UPP	Upper Body, Motor skills and self care	Annual Core	734-735
COM	Communication	Annual Core	736-739
COG	Cognition	Annual Core	740-741
ANX	Anxiety	Annual Core	742-742
DEP	Depression	Annual Core	743-743
BEH	Behavior	Annual Core	744-749
BSC	Baby Pediatric Symptom Checklist	Annual Core	750-762
SCH	Schooling	Annual Core	763-766
INS	Health Insurance	Annual Core	767-851
PAY	Difficulty Paying for Health Care	Annual Core	852-855
CVL	Long-COVID	Sponsored Content	856-860
UTZ	Utilization	Annual Core	861-876
TLH	Telehealth	Annual Core	877-877
PMD	Prescription medications	Annual Core	878-880
IMM	Immunization	Annual Core	881-887
CVV	COVID-19 vaccination	Sponsored Content	889-889
MHC	Mental health care	Annual Core	895-898
INJ	Injury	Rotating Core	899-917
TBI	Concussions - past 12 months	Sponsored Content	918-923
PHY	Physical Activity	Rotating Core	924-929
NHC	Neighborhood Characteristics	Rotating Core	930-933
SLP	Sleep	Rotating Core	934-939
SCR	Screen time	Rotating Core	940-940
TSM	Taste and Smell	Sponsored Content	941-946
PAR	Parent Demographics	Annual Core	947-966

NAT	Nativity	Annual Core	967-972
FEM	Employment of family members	Annual Core	973-975
INC	Family Income	Annual Core	976-996
FOO	Food Related Programs	Annual Core Sponsored Content	997-1005
FDS	Food Security	Sponsored Content	1006-1016
HOU	Housing	Annual Core	1017-1019
REC	Child's full name	Annual Core	1020-1022
TEL	Telephone ownership	Annual Core	1023-1024
LNK	Linkage	Annual Core	1025-1028
THX	Thanks	Annual Core	1029-1031



## 2024 National Health Interview Survey (NHIS) Questionnaire

Navigate the hierarchy in the Bookmarks pane to the module and section of interest. Selecting the module or section name will display the detail for the first variable for that module or section, respectively. Expanding the hierarchy further and selecting a question will display the detail for that specific question. The detailed report will show the following information for a question: Question ID, Variable, Content Type, Question Text, Fills, Response, Universe, Skip Instructions, and optionally, Hard Edit, Soft Edit and Replication.

2024 National Health Interview Survey (NHIS) Questionnaire

ROS: Roster

Question ID: ROS.0020.00.1 Variable: HHClock Interview Module: Roster Content Type: Annual Core

Question Text:

- \* The demographic information is now locked and cannot be changed.
- \* Enter '1' to continue with the interview.
- \* If reentering the case, press the END key to go to the next unanswered question.

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

HHC section has been locked.

Skip Instructions:

```
<1> If GEN.PCNTUNDER18 GT 0, [goto REL.WHOPAR]  
else [goto SASCSELECTION]
```

2024 National Health Interview Survey (NHIS) Questionnaire

ROS: Roster

Question ID: ROS.0030.00.1 Variable: ROSTERCHECK Interview Module: Roster Content Type: Annual Core

Question Text:

\* The roster will now be locked. If you are confident that it has been recorded accurately, enter 1 to continue. Otherwise go back and correct now.

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

At least one person in the household is greater than 18 and there is at least one child in the household and at least one person's age is not guessed and not all household members in the armed forces and the HHC section has not been locked.

Skip Instructions:

```
<1> If GEN.PCNTUNDER18 GT 0, [goto tblREL.WHOPAR]
if SURVTYPE=T and eligible adults [goto SELECT_SA]
elseif SURVTYPE=T and eligible children [goto SELECT_SC]
else [goto SASSELECTION]
```

2024 National Health Interview Survey (NHIS) Questionnaire

HHC: Household Composition

Question ID: HHC.0020.00.1 Variable: NAME\_FNAME Interview Module: Roster Content Type: Annual Core

Question Text:

^FNAME

\* Enter 999 if no more persons.

Fills:

FNAME	Description	NAME_FNAME Introduction
	Instruction	If first person in roster, fill: "Starting with you, what are the names of all the persons living or staying here?"  Else for next person fill: "What is the name of the next person living or staying here?"

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

All persons

Skip Instructions:

```
<allow 20> if name on fake/false name list [goto ERR2_NAME_FNAME];
elseif NAME_FNAME is identical to any other NAME_FNAME or ALIAS [goto ERR3_NAME_FNAME]
else [goto NAME_LNAME]
<999> if PX=01 [goto ERR1_NAME_FNAME]
else [goto USUALRES]
<RF,DK> [goto ALIAS]
```

Hard Edit:

Check Text	Check Description	Check Text
ERR1_NAME_FNAME	999 for first person hard edit	{check }  999 not allowed for the first person in the household.  Please correct.
ERR3_NAME_FNAME	Identical first name hard edit	{check }  First name cannot be the same as previous ^NameMatch.

**Soft Edit:**

Check Text	Check Description	Check Text
ERR2_NAME_FNAME	Fake name soft edit	<p>{signal }</p> <p>You are entering a possible fake/false name.</p> <p>Please correct.</p> <p>If this is a legitimate name, suppress this error message and continue. Otherwise, go back to the name field and enter a legitimate name. To enter an alias, enter 'Ctrl D' or 'Ctrl R' for 'Don't Know' or 'Refused' at the name field. Then, enter a matching identifier/alias at the next screen (ALIAS).</p>

2024 National Health Interview Survey (NHIS) Questionnaire

HHC: Household Composition

Question ID: HHC.0030.00.1 Variable: NAME\_LNAME Interview Module: Roster Content Type: Annual Core

Question Text:

\* Enter last name if provided. Last name is optional.

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

A valid first name was entered

Skip Instructions:

<allow 20,RF,DK,empty> [If PX<25 goto NAME\_FNAME for next person, else goto USUALRES]

2024 National Health Interview Survey (NHIS) Questionnaire

HHC: Household Composition

Question ID: HHC.0040.00.1 Variable: ALIAS Interview Module: Roster Content Type: Annual Core

Question Text:

How shall I refer to ^youthisperson for the rest of the interview?

Fills:

youthisperson	Description	you/this person
	Instruction	If subject=respondent, fill "you", else if subject NE respondent, fill "this person"

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Persons who don't know or refused to give first name.

Skip Instructions:

<allow 20> if ALIAS is identical to any other NAME\_FNAME or ALIAS [goto ERR1\_ALIAS]  
elseif ALIAS = 999 [goto ERR2\_ALIAS]  
else [If PX<25 goto NAME\_FNAME for next person, else goto USUALRES]

Hard Edit:

Check Text	Check Description	Check Text
ERR1_ALIAS	Identical alias hard edit	{check }  Alias cannot be the same as previous ^NameMatch.
ERR2_ALIAS	999 for alias hard edit	{check }  *999 not allowed as an alias.  *Please correct

2024 National Health Interview Survey (NHIS) Questionnaire

HHC: Household Composition

Question ID: HHC.0050.00.1 Variable: USUALRES Interview Module: Roster Content Type: Annual Core

Question Text:

^DoDoes ^youALIAS usually live here?

Fills:

DoDoes	Description	do/does
	Instruction	If subject=respondent, fill "do"; else if subject NE respondent fill "does"
youALIAS	Description	you/^ALIASNAME
	Instruction	If subject=respondent, fill "you"; else if subject ne respondent, fill "^ALIASNAME"
ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

All persons where NAME\_FNAME ne 999

Skip Instructions:

```
<1> if (PX < 25) [goto USUALRES for next person in household]
    else [goto MISPERM_MCHILD]
    elseif PX=25 and PCNT gt 1 or (PCNT=1 and HHSTAT_D[1]=1) [goto HHRESP]
    elseif PX=25 and PCNT=1 and HHSTAT_D[1]=empty [goto SEX]
    elseif PX=25 and PCNT=0 [goto EXIT]
<2,RF,DK> [goto ASKURE]
```



2024 National Health Interview Survey (NHIS) Questionnaire

HHC: Household Composition

Question ID: HHC.0060.00.1 Variable: ASKURE Interview Module: Roster Content Type: Annual Core

Question Text:

^DoDoes ^youALIAS have some other place where ^youthey usually live?

Fills:

DoDoes	Description	do/does
	Instruction	If subject=respondent, fill "do"; else if subject NE respondent fill "does"
youALIAS	Description	you/^ALIASNAME
	Instruction	If subject=respondent, fill "you"; else if subject ne respondent, fill "^ALIASNAME"
ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]
youthey	Description	you/they
	Instruction	If subject=respondent, fill "you", else if subject NE respondent, fill "they"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

If the usual residence is not here, or respondent refused or didn't know

Skip Instructions:

```
<1> [goto USUALSCHOOL]
<2,RF,DK> if (PX < 25) [goto USUALRES for next person in the household]
    else [goto MISPERM_MCHILD]
    elseif PX=25 and PCNT gt 1 or (PCNT=1 and HHSTAT_D[1]=1) [goto HHRESP]
    elseif PX=25 and PCNT=1 and HHSTAT_D[1]=empty [goto SEX]
    elseif PX=25 and PCNT=0 [goto EXIT]
```

2024 National Health Interview Survey (NHIS) Questionnaire

HHC: Household Composition

Question ID: HHC.0070.00.1 Variable: USUALSCHOOL Interview Module: Roster Content Type: Annual Core

Question Text:

^AreIs ^youALIAS usually away at school or college?

Fills:

AreIs	Description	Are/Is
	Instruction	If subject=respondent, fill "Are"; else if subject NE respondent, fill "Is"
youALIAS	Description	you/^ALIASNAME
	Instruction	If subject=respondent, fill "you"; else if subject ne respondent, fill "^ALIASNAME"
ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Person does not usually live in household and usual residence is elsewhere

Skip Instructions:

```
<1> [goto ONOFFCAMPUS]
<2,RF,DK> if (PX < 25) [goto USUALRES for next person in the household]
  else [goto MISPERMCHILD]
  elseif PX=25 and PCNT gt 1 or (PCNT=1 and HHSTAT_D[1]=1) [goto HHRESP]
  elseif PX=25 and PCNT=1 and HHSTAT_D[1]=empty [goto SEX]
  elseif PX=25 and PCNT=0 [goto EXIT]
```

2024 National Health Interview Survey (NHIS) Questionnaire

HHC: Household Composition

Question ID: HHC.0080.00.1 Variable: ONOFFCAMPUS Interview Module: Roster Content Type: Annual Core

Question Text:

^DoDoes ^youALIAS live in on-campus housing or off-campus housing?

\* **Read if necessary:** *On-campus housing includes residence halls and dorms where students live together. It also includes buildings that are owned, leased, or managed by the school. Fraternities and sororities are on-campus housing.*

Fills:

DoDoes	Description	do/does
	Instruction	If subject=respondent, fill "do"; else if subject NE respondent fill "does"
youALIAS	Description	you/^ALIASNAME
	Instruction	If subject=respondent, fill "you"; else if subject ne respondent, fill "^ALIASNAME"
ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]

Response:

1	On campus
2	Off campus
7	Refused
9	Don't Know

Universe:

Person's usual residence is not in the household and person has a usual residence other than the place of interview and lives away at school or college

Skip Instructions:

```
<1,2,RF,DK> if (PX < 25) [goto USUALRES for next person in the household]
  else [goto MISPER_S_MCHILD]
  elseif PX=25 and PCNT gt 1 or (PCNT=1 and HHSTAT_D[1]=1) [goto HHRESP]
  elseif PX=25 and PCNT=1 and HHSTAT_D[1]=empty [goto SEX]
  elseif PX=25 and PCNT=0 [goto EXIT]
```

2024 National Health Interview Survey (NHIS) Questionnaire

HHC: Household Composition

Question ID: HHC.0090.00.1 Variable: MISPERM\_MCHILD Interview Module: Roster Content Type: Annual Core

Question Text:

^ROSTEREXCEPTION

^HHROSTERINTRO

^HHROSTER

Have I missed any babies or small children?

Fills:

ROSTEREXCEPTION	Description	Exception to Roster
	Instruction	If PCNT < TOTPCNT, fill: "Students living in on-campus housing will be included in the interview. Other people who do not usually live here and have another residence elsewhere will not be included in this interview."
HHROSTERINTRO	Description	I have listed the household members as...
	Instruction	If PCNT ne 0, fill: I have listed the household members as...
HHROSTER	Description	Entire roster of non deleted people
	Instruction	entire roster for [^ALIASNAME[PX]] if HHSTAT ne 'D' (non deleted persons)
ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Less than 25 persons listed on roster

Skip Instructions:

<1>[goto NAME\_FNAME to add person to roster]  
 <2,RF,DK> [goto MISPERM\_MSCHOOL]

2024 National Health Interview Survey (NHIS) Questionnaire

HHC: Household Composition

Question ID: HHC.0140.00.1 Variable: MISPERMS\_SCHOOL Interview Module: Roster Content Type: Annual Core

Question Text:

\* Read if necessary.

I have listed the household members as...

^HHROSTER

Have I missed anyone who USUALLY lives here, but is away now at school or college?

Fills:

HHROSTER	Description	Entire roster of non deleted people
	Instruction	entire roster for [^ALIASNAME[PX]] if HHSTAT ne 'D' (non deleted persons)
ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Less than 25 persons listed on roster

Skip Instructions:

<1> [goto ERR\_MISPERMS\_SCHOOL]  
 [goto NAME\_FNAME to add person to roster]  
 <2,RF,DK> [goto MISPERMS\_MELSE]

Soft Edit:

Check Text	Check Description	Check Text
ERR_MISPERMS_SCHOOL		{signal }  Do not read to the respondent.  After adding the name of the household member who is now away at school or college to the roster, press the END key, enter '2' at USUALRES, enter '1' at ASKURE, and answer the USUALSCHOOL question.  Suppress message to continue.

2024 National Health Interview Survey (NHIS) Questionnaire

HHC: Household Composition

Question ID: HHC.0160.00.1 Variable: MISPERS\_MEISE Interview Module: Roster Content Type: Annual Core

Question Text:

\* Read if necessary.

I have listed the household members as...

^HHROSTER

Have I missed anyone else who USUALLY lives here, including people who are not related to you or people who are away traveling?

Fills:

HHROSTER	Description	Entire roster of non deleted people
	Instruction	entire roster for [^ALIASNAME[PX]] if HHSTAT ne 'D' (non deleted persons)
ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Less than 25 persons listed on roster

Skip Instructions:

```
<1> [goto NAME_FNAME to add person to roster]
<2,RF,DK> if PCNT = 0 [goto EXIT]
  elseif PCNT = 1 [goto SEX]
  elseif PCNT gt 1 or (PCNT=1 and HHSTAT_D[1]=1) [goto HHRESP]
```

2024 National Health Interview Survey (NHIS) Questionnaire

HHC: Household Composition

Question ID: HHC.0180.00.1 Variable: HHRESP Interview Module: Roster Content Type: Annual Core

Question Text:

Which adults living here would you say know about the members of this household?

- \* Person(s) selected must be over 18.
- \* You may select someone who is marked as deleted.
- \* Enter all that apply, separate with commas.

Response:

01-25	Person Number
-------	---------------

Universe:

All households with more than one non-deleted person OR there is only one non-deleted person in the household and deleted person is first person on roster and first person on the roster was answering for the household but does not usually live there.

Skip Instructions:

1 not IN HHRESP [goto HHRESPAVAIL]  
One Person selected at HHRESP and that person has HHSTAT\_D=1 [goto HHRESPPROXY]  
else [goto tb1Sex.bPerson.SEX]

2024 National Health Interview Survey (NHIS) Questionnaire

HHC: Household Composition

Question ID: HHC.0190.00.1 Variable: HHRESPAVAIL Interview Module: Roster Content Type: Annual Core

Question Text:

^HHRESP\_fill

Select the line number of the person who can continue the interview.

\* If no one is available press F9 to set up a callback.

Fills:

HHRESP_fill	Description	Of the people you just mentioned, who can speak with me now?/Can ^ALIASNAME speak with me now?
	Instruction	If multiple people are selected, fill "Of the people you just mentioned, who can speak with me now?" If one person is selected, fill "Can ^ALIASNAME speak with me now?"
ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]

Response:

01-25	Person Number
-------	---------------

Universe:

Person to whom you are speaking (LNO=1) is not knowledgeable

Skip Instructions:

<1-25> (person selected at HHRESPAVAIL has HHSTAT\_D=1) [goto HHRESPROXY]  
else [goto tblSex.bPerson.SEX]



2024 National Health Interview Survey (NHIS) Questionnaire

HHC: Household Composition

Question ID: HHC.0200.00.1 Variable: HHRESPPROXY Interview Module: Roster Content Type: Annual Core

Question Text:

\*^ALIASNAME does not usually live here.

^DoyouDoesALIAS take care of someone who lives here?

Fills:

ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]
DoyouDoesALIAS	Description	Do you/Does ^ALIASNAME
	Instruction	For person being spoken to (PX=LNO_RESP)fill: "Do you" For all other adults in family fill: "Does ^ALIASNAME"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Person selected at HHRESP or HHRESPAVAIL has been deleted from the roster.

Skip Instructions:

<1> [goto tblSex.bPerson.SEX]  
<2,RF,DK> [goto ERR\_HHRESPPROXY]

Soft Edit:

Check Text	Check Description	Check Text
ERR_HHRESPPROXY		{signal }  Person was deleted from this household.

2024 National Health Interview Survey (NHIS) Questionnaire

HHC: Household Composition

Question ID: HHC.0210.00.1 Variable: SEX Interview Module: Roster Content Type: Annual Core

Question Text:

Some of the questions in this survey are about topics like breast and prostate cancer, so it is important to know which questions apply. ^AreIs ^youALIAS male or female?

Fills:

AreIs	Description	Are/Is
	Instruction	If subject=respondent, fill "Are", else if subject NE respondent, fill "Is"
youALIAS	Description	you/^ALIASNAME
	Instruction	If subject=respondent, fill "you"; else if subject ne respondent, fill "^ALIASNAME"
ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]

Response:

1	Male
2	Female
7	Refused
9	Don't Know

Universe:

All nondeleted persons

Skip Instructions:

If last non-deleted person on roster [goto AGENO]  
 else [goto SEX for next non-deleted person on roster]

2024 National Health Interview Survey (NHIS) Questionnaire

HHC: Household Composition

Question ID: HHC.0220.01.1 Variable: AGENO Interview Module: Roster Content Type: Annual Core

Question Text:

\* 1 of 2

What is ^yourALIAS age?

\* Enter number for age.

Fills:

yourALIAS	Description	your/^ALIASNAME's
	Instruction	If PX=LNO_RESP fill "your"; else fill "^ALIASNAME's"
ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]

Response:

001-120	Range of values
997	Refused
999	Don't Know

Universe:

All nondeleted persons

Skip Instructions:

<001-120> [goto AGETP]  
<RF,DK> [goto AGE18]

2024 National Health Interview Survey (NHIS) Questionnaire

HHC: Household Composition

Question ID: HHC.0220.02.1 Variable: AGETP Interview Module: Roster Content Type: Annual Core

Question Text:

\* 2 of 2

\* Enter number for age time period.

Response:

1	Day(s)
2	Week(s)
3	Month(s)
4	Year(s)

Universe:

Valid number entered at AGENO[PX]

Skip Instructions:

If last non-deleted person on roster AND ((AGENO = RF, DK and AGE18 =1) or AGE LT 018 for everyone) then [goto Exit]  
elseif last non-deleted person on roster [goto NATORG]  
else [goto AGENO for next non-deleted person on roster]

**2024 National Health Interview Survey (NHIS) Questionnaire**

**HHC: Household Composition**

**Question ID:** HHC.0230.00.1    **Variable:** AGE18    **Interview Module:** Roster    **Content Type:** Annual Core

**Question Text:**

Certain sections of this interview depend on knowing if a person is 18 years or older. Could you please tell me if ^youALIAS ^areis less than 18 years old or 18 years or older?

**Fills:**

youALIAS	Description	you/^ALIASNAME
	Instruction	If subject=respondent, fill "you"; else if subject ne respondent, fill "^ALIASNAME"
ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]
areis	Description	Are/Is
	Instruction	If subject=respondent, fill "Are", else if subject NE respondent, fill "Is"

**Response:**

1	Less than 18
2	18 or older
7	Refused
9	Don't Know

**Universe:**

Refused or did not know age

**Skip Instructions:**

```
<RF,DK> [goto AGEGUESS]
<2> [goto AGE65]
<1> If last non-deleted person on roster AND ((AGENO=RF,DK and AGE18=1) or AGE LT 018 for
everyone then [goto Exit]
Else if last non-deleted person on roster [goto NATORG]
Else [goto AGENO for next non-deleted person on roster]
```

2024 National Health Interview Survey (NHIS) Questionnaire

HHC: Household Composition

Question ID: HHC.0240.00.1 Variable: AGE65 Interview Module: Roster Content Type: Annual Core

Question Text:

^AreIs ^youALIAS less than 65 years old or 65 years or older?

Fills:

AreIs	Description	Are/Is
	Instruction	If subject=respondent, fill "Are"; else if subject NE respondent, fill "Is"
youALIAS	Description	you/^ALIASNAME
	Instruction	If subject=respondent, fill "you"; else if subject ne respondent, fill "^ALIASNAME"
ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]

Response:

1	Less than 65
2	65 or older
7	Refused
9	Don't Know

Universe:

No numerical age provided and person is 18 or over

Skip Instructions:

<1,2,RF,DK> if last non-deleted person on roster [goto NATORG]  
else [goto AGENO for next non-deleted person on roster]

2024 National Health Interview Survey (NHIS) Questionnaire

HHC: Household Composition

Question ID: HHC.0250.00.1 Variable: AGE GUESS Interview Module: Roster Content Type: Annual Core

Question Text:

\* Use your judgement to guess if ^ALIASNAME is less than 18 or 18 or older.

Fills:

ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]

Response:

1	Less than 18
2	18 or older

Universe:

Skip Instructions:

If last non-deleted person on roster AND AGE GUESS = 1,2 for everyone then [goto Exit]  
elseif last non-deleted person on roster [goto NATORG]  
else [goto AGENO for next non-deleted person on roster]

2024 National Health Interview Survey (NHIS) Questionnaire

HHC: Household Composition

Question ID: HHC.0290.00.1 Variable: NATORG Interview Module: Roster Content Type: Annual Core

Question Text:

^NATORGAGE

Fills:

NATORGAGE	Description	Is ^ALIASNAME Hispanic or Latino?/^DoyouDoesALIAS consider ^yourhimself to be Hispanic or Latino?
	Instruction	If person is 17 or younger: "Is ^ALIASNAME Hispanic or Latino?" If person is 18 or older: "^DoyouDoesALIAS consider ^yourhimself to be Hispanic or Latino?"
ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]
DoyouDoesALIAS	Description	Do you/Does ^ALIASNAME
	Instruction	For person being spoken to (PX=LNO_RESP)fill: "Do you" For all other adults in family fill: "Does ^ALIASNAME"
yourhimself	Description	yourself/himself/herself/themself
	Instruction	if subject=respondent fill "yourself"; else if SEX=1 fill "himself" else if SEX=2 fill "herself" else if SEX=DK or RF fill "themself"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

All nondeleted persons

Skip Instructions:

If last non-deleted person on roster [goto RACE]  
else [goto NATORG for next non-deleted person on roster]



2024 National Health Interview Survey (NHIS) Questionnaire

HHC: Household Composition

Question ID: HHC.0300.00.1 Variable: RACE Interview Module: Roster Content Type: Annual Core

Question Text:

^RACEAGE

^RACEFILL

\* Enter all that apply, separate with commas.

Fills:

RACEAGE	Description	What race or races is ^ALIASNAME?/What race or races ^dodoes ^youALIAS consider ^yourhimherself to be?
	Instruction	If person is 17 or younger: "What race or races is ^ALIASNAME?" If person is 18 or older: "What race or races ^dodoes ^youALIAS consider ^yourhimherself to be?"
ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]
dodoes	Description	do/does
	Instruction	If subject=respondent, fill "do"; else if subject NE respondent fill "does"
youALIAS	Description	you/^ALIASNAME
	Instruction	If subject=respondent, fill "you"; else if subject ne respondent, fill "^ALIASNAME"
yourhimherself	Description	yourself/himself/herself/themself
	Instruction	if subject=respondent fill "yourself"; else if SEX=1 fill "himself" else if SEX=2 fill "herself" else if SEX=DK or RF fill "themself"
RACEFILL	Description	Race list fill
	Instruction	For first or only non-deleted person: Please select 1 or more of these categories: White, Black, African American, American Indian, Alaska Native, Native Hawaiian, Pacific Islander, Asian, or some other race?  Else fill: *Read if necessary: Please select 1 or more of these categories: White, Black, African American, American Indian, Alaska Native, Native Hawaiian, Pacific Islander, Asian, or some other race?

Response:

01	White
02	Black/African American
03	American Indian
04	Alaska Native
05	Native Hawaiian
06	Other Pacific Islander
07	Asian
08	Some other race
97	Refused

99	Don't Know
----	------------

**Universe:**

All nondeleted persons

**Skip Instructions:**

```
<8> IN RACE [goto RACE_SP]
<1-7,RF,DK> If last non-deleted person on roster AND at least one person with AGE18=2 or
AGEGUESS=2 or AGE[PX] = 17-64 [goto AFNOW]
elseif last non-deleted person on roster [goto EDUC]
else [goto RACE for next non-deleted person on roster]
```

2024 National Health Interview Survey (NHIS) Questionnaire

HHC: Household Composition

Question ID: HHC.0310.00.1 Variable: RACE\_SP Interview Module: Roster Content Type: Annual Core

Question Text:

^RACESPAGE

Start typing and then select from list. If race is not on the list, type "ZZ" and enter verbatim.

\* If any of the following are mentioned, back up to previous screen and correct the entry.

- White
- Black
- African American
- American Indian
- Alaska Native
- Native Hawaiian
- Pacific Islander
- Asian

\* If respondent provides more than one other race, select 'ZZ' from the lookup table. At the next question, enter ALL the other races in the verbatim field.

Fills:

RACESPAGE	Description	What other race or races is ^ALIASNAME?/What other race or races ^dodoes ^youALIAS consider ^yourhimherself to be?
	Instruction	If person is 17 or younger: "What other race or races is ^ALIASNAME?" If person is 18 or older: "What other race or races ^dodoes ^youALIAS consider ^yourhimherself to be?"
ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]
dodoes	Description	do/does
	Instruction	If subject=respondent, fill "do"; else if subject NE respondent fill "does"
youALIAS	Description	you/^ALIASNAME
	Instruction	If subject=respondent, fill "you"; else if subject ne respondent, fill "^ALIASNAME"
yourhimherself	Description	yourself/himself/herself/themself
	Instruction	if subject=respondent fill "yourself"; else if SEX=1 fill "himself" else if SEX=2 fill "herself" else if SEX=DK or RF fill "themself"

Response:

Verbatim	Verbatim values
ZZ	Other
97	Refused
99	Don't Know

Universe:

Person identifies as some other race

**Skip Instructions:**

```
<selection from picklist,RF,DK> If last non-deleted person on roster AND at least one person  
with AGE18=2 or AGE GUESS=2 or AGE[PX] = 17-64 [goto AFNOW]  
elseif last non-deleted person on roster [goto EDUC]  
else [goto RACE for next non-deleted person on roster]  
<ZZ> [goto RACE_VRBAT]
```

2024 National Health Interview Survey (NHIS) Questionnaire

HHC: Household Composition

Question ID: HHC.0320.00.1 Variable: RACE\_VRBAT Interview Module: Roster Content Type: Annual Core

Question Text:

\* Read if necessary.

^RACESPAGE

Fills:

RACESPAGE	Description	What other race or races is ^ALIASNAME?/What other race or races ^dodoes ^youALIAS consider ^yourhimherself to be?
	Instruction	If person is 17 or younger: "What other race or races is ^ALIASNAME?" If person is 18 or older: "What other race or races ^dodoes ^youALIAS consider ^yourhimherself to be?"
ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]
dodoes	Description	do/does
	Instruction	If subject=respondent, fill "do"; else if subject NE respondent fill "does"
youALIAS	Description	you/^ALIASNAME
	Instruction	If subject=respondent, fill "you"; else if subject ne respondent, fill "^ALIASNAME"
yourhimherself	Description	yourself/himself/herself/themself
	Instruction	if subject=respondent fill "yourself"; else if SEX=1 fill "himself" else if SEX=2 fill "herself" else if SEX=DK or RF fill "themself"

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Person identifies as some other race and Interviewer does not use pick-list to select this race

Skip Instructions:

```
<allow 80> If last non-deleted person on roster AND at least one person with AGE18=2 or
AGEGUESS=2 or AGE[PX] = 17-64 [goto AFNOW]
elseif last non-deleted person on roster [goto EDUC]
else [goto RACE for next non-deleted person on roster]
```

2024 National Health Interview Survey (NHIS) Questionnaire

HHC: Household Composition

Question ID: HHC.0330.00.1 Variable: AFNOW Interview Module: Roster Content Type: Annual Core

Question Text:

^AreYouIsALIASIs anyone now on full-time active duty with the Armed Forces?

*\*Read if necessary: Active duty does not include training for the Reserves or National Guard, but DOES include activation, for example, for service in the U.S. or in a foreign country, in support of military or humanitarian operations.*

Fills:

AreYouIsALIASIs anyone	Description	Are you/Is ^ALIASNAME/Is anyone in the household
	Instruction	If PCNTAGEAF=1 and that person=response, fill "Are you", elseif PCNTAGEAF=1 and that person NE response, fill "Is ^ALIASNAME" elseif PCNTAGEAF GT 1 fill "Is anyone in the household"
ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

At least one person in the household is greater than 18 and at least one person's age is not guessed and at least one non-deleted person age 17-64 years old or who is greater than or equal to 18 or whose age was guessed to be greater than or equal to 18

Skip Instructions:

```
<1> if GEN.PCNTAGEAF GT 1 [goto AFNOWWHO]
elseif GEN.PCNTAGEAF=1 and GEN.PCNT=1[goto EXIT]
elseif GEN.PCNTAGEAF=1 and GEN.PCNT GT 1[goto EDUC]
<2,RF,DK> [goto EDUC]
```

2024 National Health Interview Survey (NHIS) Questionnaire

HHC: Household Composition

Question ID: HHC.0340.00.1 Variable: AFNOWWHO Interview Module: Roster Content Type: Annual Core

Question Text:

Who is this? (Anyone else?)

\* Enter all that apply, separate with commas.

Response:

01-25	Person Number
-------	---------------

Universe:

At least 1 person in the Armed Forces & more than 1 person eligible to be in the Armed Forces

Skip Instructions:

<1-25> if all PX have GEN.HHSTAT\_D=1 or GEN.HHSTAT\_M = 1 [goto EXIT]  
else [goto EDUC]

2024 National Health Interview Survey (NHIS) Questionnaire

HHC: Household Composition

Question ID: HHC.0350.00.1 Variable: EDUC Interview Module: Roster Content Type: Annual Core

Question Text:

What is the HIGHEST level of school ^youALIAS ^havehas completed or the highest degree ^youALIAS ^havehas received?

\* Enter highest level of school completed.

Fills:

youALIAS	Description	you/^ALIASNAME
	Instruction	If subject=respondent, fill "you"; else if subject ne respondent, fill "^ALIASNAME"
ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]
havehas	Description	have/has
	Instruction	If subject=respondent, fill "have", else if subject NE respondent fill "has"

Response:

00	Never attended/kindergarten only
01	Grade 1-11
02	12th grade, no diploma
03	GED or equivalent
04	High School Graduate
05	Some college, no degree
06	Associate degree: occupational, technical, or vocational program
07	Associate degree: academic program
08	Bachelor's degree (Example: BA, AB, BS, BBA)
09	Master's degree (Example: MA, MS, MEng, MEd, MBA)
10	Professional School degree (Example: MD, DDS, DVM, JD)
11	Doctoral degree (Example: PhD, EdD)
97	Refused
99	Don't Know

Universe:

All non-deleted persons flagged as aged 18+

Skip Instructions:

<0-11,RF,DK> If last non-deleted adult on roster [goto next section]  
else [goto EDUC for next non-deleted adult on roster]



2024 National Health Interview Survey (NHIS) Questionnaire

HHC: Household Composition

Question ID: HHC.0360.00.1 Variable: EXIT Interview Module: Roster Content Type: Annual Core

Question Text:

Not every household in our survey is asked all questions. I have all the information about your household that I need at this time. Thank you for your assistance.

\* Enter '1' to continue.

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

All armed forces, all usual residence elsewhere, all under age 18, all where aged is guessed

Skip Instructions:

<1> [goto BCK.WHOREADLTR]

2024 National Health Interview Survey (NHIS) Questionnaire

REL: Relationship of children to parents

Question ID: REL.0010.00.1 Variable: WHOPAR Interview Module: Roster Content Type: Annual Core

Question Text:

Which people living in this household are ^ALIASNAME's parents? Please include biological, step, or adoptive parents, but not foster parents or other relatives who may act as parents.

\* If respondent is a foster parent or relative who acts as a parent, probe "Does ^ALIASNAME have any biological, step, or adoptive parents living in this household?"

\* Enter '0' if no biological, step, or adoptive parents live in the household.

\* Legal guardians who are not biological, step, or adoptive parents should not be selected at this question.

\* Enter all that apply, separate with commas.

Fills:

ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]

Response:

00	No biological, step, or adoptive parents
01	Name of Person 1
02	Name of Person 2
03	Name of Person 3
04	Name of Person 4
05	Name of Person 5
06	Name of Person 6
07	Name of Person 7
08	Name of Person 8
09	Name of Person 9
10	Name of Person 10
11	Name of Person 11
12	Name of Person 12
13	Name of Person 13
14	Name of Person 14
15	Name of Person 15
16	Name of Person 16
17	Name of Person 17
18	Name of Person 18
19	Name of Person 19
20	Name of Person 20
21	Name of Person 21
22	Name of Person 22
23	Name of Person 23

24	Name of Person 24
25	Name of Person 25
97	Refused
99	Don't Know

**Universe:**

All persons with age less than 18 years old or age was guessed or reported to be less than 18

**Skip Instructions:**

```
If <0> selected with any other value [goto ERR4_WHOPAR]
If AGEDIFF LT 15 [goto ERR1_WHOPAR]
elseif AGEDIFF GE 50 [goto ERR2_WHOPAR]
elseif AGEDIFF LE 0 [goto ERR3_WHOPAR]
<0, RF, DK> [goto FOSTPAR]
<1-25> If last non-deleted child on roster [goto next section]
else [goto WHOPAR for next non-deleted child on roster]
```

**Hard Edit:**

Check Text	Check Description	Check Text
ERR4_WHOPAR	0 and another entry	{check }  Invalid entry. Cannot mark 0 and a valid line number.  Please correct.

**Soft Edit:**

Check Text	Check Description	Check Text
ERR1_WHOPAR	Age difference between parent selected and child less than 15 years	{signal }  Age difference between parent and child is ^AGEDIFF years.  I have recorded the parent ^PARENTNAME is ^PARENTAGE years old and the child ^CHILDNAME is ^CHILDAGE years old.  Are these ages and relationships correct?  Please correct relationship code or age.
ERR2_WHOPAR	Age difference GE 50 years	{signal }  Age difference between parent and child is greater than or equal to 50 years.  I have recorded the parent ^PARENTNAME is ^PARENTAGE years old and the child ^CHILDNAME is ^CHILDAGE years old. Are these ages and relationships correct?  Please correct relationship code or age.
ERR3_WHOPAR	Parent is younger than child	{signal }  Please verify. Parent is younger than child.  I have recorded the parent ^PARENTNAME is ^PARENTAGE years old and the child ^CHILDNAME is ^CHILDAGE years old. Are these ages and relationships correct?  Please correct relationship code or age.

2024 National Health Interview Survey (NHIS) Questionnaire

REL: Relationship of children to parents

Question ID: REL.0040.00.1 Variable: WHOFOST Interview Module: Roster Content Type: Annual Core

Question Text:

Which people living in this household are ^ALIASNAME's foster parents?

**Read if necessary:** Please include grandparents or other family members if they are acting as foster parents under the supervision of a state or county child welfare agency.

\* Enter all that apply, separate with commas.

Fills:

ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]

Response:

01	Name of Person 1
02	Name of Person 2
03	Name of Person 3
04	Name of Person 4
05	Name of Person 5
06	Name of Person 6
07	Name of Person 7
08	Name of Person 8
09	Name of Person 9
10	Name of Person 10
11	Name of Person 11
12	Name of Person 12
13	Name of Person 13
14	Name of Person 14
15	Name of Person 15
16	Name of Person 16
17	Name of Person 17
18	Name of Person 18
19	Name of Person 19
20	Name of Person 20
21	Name of Person 21
22	Name of Person 22
23	Name of Person 23
24	Name of Person 24
25	Name of Person 25
97	Refused
99	Don't Know

**Universe:**

Child is in foster care

**Skip Instructions:**

```
If AGEDIFF LT 15 [goto ERR1_WHOFOST]
elseif AGEDIFF GE 50 [goto ERR2_WHOFOST]
elseif AGEDIFF LE 0 [goto ERR3_WHOFOST]
If last non-deleted child on roster [goto next section]
else [goto WHOPAR for next non-deleted child on roster]
```

**Soft Edit:**

Check Text	Check Description	Check Text
ERR1_WHOFOST	Age difference between foster parent selected and child less than 15 years	{signal }  Age difference between parent and child is ^AGEDIFF years.  I have recorded the foster parent ^FOSTPARNAME is ^FOSTPARAGE years old and the child ^CHILDNAME is ^CHILDAGE years old.  Are these ages and relationships correct?  Please correct relationship code or age.
ERR2_WHOFOST	Age difference GE 50 years	{signal }  Age difference between parent and child is greater than or equal to 50 years.  I have recorded the foster parent ^FOSTPARNAME is ^FOSTPARAGE years old and the child ^CHILDNAME is ^CHILDAGE years old. Are these ages and relationships correct?  Please correct relationship code or age.
ERR3_WHOFOST	Foster parent is younger than child	{signal }  Please verify. Parent is younger than child.  I have recorded the foster parent ^FOSTPARNAME is ^FOSTPARAGE years old and the child ^CHILDNAME is ^CHILDAGE years old. Are these ages and relationships correct?  Please correct relationship code or age.

2024 National Health Interview Survey (NHIS) Questionnaire

FAM: Family Composition

Question ID: FAM.0050.00.1 Variable: ALLFAM Interview Module: Roster Content Type: Annual Core

Question Text:

? [F1]

Is everyone in this household a member of the same family?

*\*Read if necessary: For this survey, a family is two or more people living together who are related by birth, marriage, or adoption, as well as any unrelated children who are cared for by the family, such as foster children, and any people living together as a couple and their children.*

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

The number of unique families as identified in REL section is greater than 1

Skip Instructions:

IF (Roster.PCNTEligibleSA > 1 OR Roster.PCNTEligibleSC > 1) [goto SASCID]  
ELSE [goto procSetFAMILY\_FLGs]

2024 National Health Interview Survey (NHIS) Questionnaire

FAM: Family Composition

Question ID: FAM.0060.00.1 Variable: SASCID Interview Module: Roster Content Type: Annual Core

Question Text:

One ^SASCID\_fill randomly selected from every household in the survey to be asked a series of health related questions. In this household, ^SASCID\_fill2 chosen.

Fills:

SASCID_fill	Description	adult and child are/adult is/child is
	Instruction	If PX_A gt 0 and PX_C gt 0, fill "adult and child are" elseif PX_A gt 0, fill "adult is" else fill "child is"
SASCID_fill2	Description	you and ^SCNAME were/^SANAME and ^SCNAME were/you were/^SANAME was/^SCNAME was
	Instruction	If PX_A gt 0 and PX_C gt 0 and HHRESPAVAIL = PX_A, fill "you and ^SCNAME were" elseif PX_A gt 0 and PX_C gt 0 and HHRESPAVAIL ne PX_A, fill "^SANAME and ^SCNAME were" elseif PX_A gt 0 and HHRESPAVAIL = PX_A, fill "you were" elseif PX_A gt 0 and HHRESPAVAIL ne PX_A, fill "^SANAME was" else fill "^SCNAME was"
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
SANAME	Description	Sample Adult's name
	Instruction	Sample Adult's name

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

Count of all persons eligible to be SA is greater than 1 or count of all persons eligible to be SC is greater than 1 or there are multiple adults or children in the family but only 1 adult or child is eligible to be the SA or SC because the others are in the Armed Forces.

Skip Instructions:

```
IF ALLFAM IN (2,RF,DK) AND PX_A > 0 AND PCNTFX_SA_AfterREL < PCNT {Not everyone in same family, there's a SA, and not everyone's in SA's famly} [goto FAMINTRO_SA]
ELSEIF ALLFAM IN (2,RF,DK) {Not everyone in same family (and there's a SC)} [goto procSetFX_RELATE_SA]
ELSE [goto procSetFAMILY_FLGs]
```

2024 National Health Interview Survey (NHIS) Questionnaire

FAM: Family Composition

Question ID: FAM.0070.00.1 Variable: FAMINTRO\_SA Interview Module: Roster Content Type: Annual Core

Question Text:

^FAMINTRO\_fill

I will now ask you some questions about how other people in this household are related to ^you\_SA.

Fills:

FAMINTRO_fill	Description	FAMINTRO_SA Introduction
	Instruction	If PCNTFX_SA_AFTERREL ge 2, fill "Based on questions I asked you earlier, we have that ^SAFAM are in the same family." else leave fill empty.
SAFAM	Description	List of people in SA's family
	Instruction	For all people with FAMILYA_FLG =1 and are not Household Respondent, fill with their names. If Household Respondent (Roster.HHC.HHRESPAVAIL) is on list of names, fill "you" for name and place name at the beginning of the list. Include Sample Adult in this list.
you_SA	Description	you/^ALIASNAME
	Instruction	If HHRESPAVAIL eq PX_A, fill "you" else fill "^ALIASNAME" of Sample Adult
ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

Not everyone in same family, there's a SA, and not everyone's in SA's family

Skip Instructions:

<1> [goto tblRelate\_SA.bPerson.RELATE for 1st non-deleted person on roster with FX\_REL[PX] ne FX\_REL[PX\_A]]



**2024 National Health Interview Survey (NHIS) Questionnaire**

**FAM: Family Composition**

**Question ID:** FAM.0140.00.1    **Variable:** FAMINTRO\_SC    **Interview Module:** Roster    **Content Type:** Annual Core

**Question Text:**

I will now ask you some questions about who in this household is related to ^SCNAME.

Based on questions I asked you earlier, we have that ^SCNames\_fill related to ^SCNAME.

**Fills:**

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
SCNames_fill	Description	List of people in Sample Child's family
	Instruction	<p>For all people with GEN.FAMILYC_FLG=1, fill with their names.</p> <p>Description: Person was identified as being in the SC's family at WHOPAR/WHOFOST OR (Sample Child is related to the Sample Adult and person on roster was placed in Sample Adult's family based on answer provided at RELATE), include their name as part of the list of SC's family.</p> <p>Do not Sample Child on list.</p> <p>If Household Respondent (Roster.HHC.HHRESPAVAIL) is on list of names, fill "you" for name and place name at the beginning of the list.</p> <p>If only one person on the list of names and person ne Roster.HHC.HHRESPAVAIL, follow list with "is".</p> <p>If more than one person on the list or only one person on list and person is Household Respondent (Roster.HHC.HHRESPAVAIL), follow list with "are".</p>

**Response:**

1	Enter 1 to Continue
---	---------------------

**Universe:**

Not everyone in same family and there is a SC, and there is no SA and not everyone in SC's family or SA/SC in separate families and not everyone in SA or SC's families or SA/SC in same family and not everyone in that family

**Skip Instructions:**

<1> [goto tblRelate\_SC.bPerson.RELATE for 1st non-deleted person on roster with FX\_RELATESA[PX] ne FX\_RELATESA[PX\_A] and FX\_RELATESA[PX] ne FX\_RELATESA[PX\_C]]

2024 National Health Interview Survey (NHIS) Questionnaire

FAM: Family Composition

Question ID: FAM.0240.00.1 Variable: KNOWSC Interview Module: Roster Content Type: Annual Core

Question Text:

Who lives here and is knowledgeable about and responsible for ^SCNAME's health care?

^ANYONEELSE

\* Enter all that apply, separate with commas.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
ANYONEELSE	Description	Anyone else
	Instruction	If PCNT_EligibleKNOWSC > 1 fill: "Read if necessary: Anyone else?"

Response:

00	Not on roster
01-25	Person Number
97	Refused
99	Don't Know

Universe:

There's a SC and either multiple eligible adults or only one eligible adult but that person is not a parent of the SC

Skip Instructions:

```
<RF,DK> [goto NOFAMSC]
<1-25> IF Roster.HHC.tblNAME.bPerson[PX_A].ONOFFCAMPUS IN (1,RF,DK) and (PX_A ne
Roster.HHC.HHRESPAVAIL) [goto ONCAMPINTRO_A]
ELSE [goto CASESTATUS]
```

2024 National Health Interview Survey (NHIS) Questionnaire

FAM: Family Composition

Question ID: FAM.0250.00.1 Variable: NOFAMSC Interview Module: Roster Content Type: Annual Core

Question Text:

\* Because there are no adults who are related to ^SCNAME living in this household, or respondent refused or did not know who was knowledgeable about and responsible for ^SCNAME's health care, the Sample Child Interview cannot be completed.

Not everyone in our survey is asked all questions. I have all the information that I need from you about ^SCNAME.

\* Enter '1' to continue.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

No one is knowledgeable about and responsible for the sample child's health or don't know or refused to identify knowledgeable person

Skip Instructions:

```
<1> if Roster.HHC.tblNAME.bPerson[PX_A].ONOFFCAMPUS IN (1,RF,DK) and (PX_A ne  
Roster.HHC.HHRESPAVAIL) [goto ONCAMPINTRO_A]  
elseif PX_A > 0 {there is a Sample Adult} [goto CASESTATUS]  
else [goto BCK.THANKS_SUF]
```

2024 National Health Interview Survey (NHIS) Questionnaire

FAM: Family Composition

Question ID: FAM.0260.00.1 Variable: ONCAMPINTRO\_A Interview Module: Roster Content Type: Annual Core

Question Text:

As I previously mentioned ^SANAME was randomly selected to be asked a series of health related questions. We would like to contact ^himherthem to complete ^hishertheir portion of this interview.

Fills:

SANAME	Description	Sample Adult's name
	Instruction	Sample Adult's name
himherthem	Description	him/her/them
	Instruction	If GEN.SEX_FINAL=1 fill "him"; else if GEN.SEX_FINAL=2 fill "her"; else if GEN.SEX_FINAL IN (DK, RF) fill "them"
hishertheir	Description	his/her/their
	Instruction	If GEN.SEX_FINAL=1 fill "his"; else if GEN.SEX_FINAL=2 fill "her"; else if GEN.SEX_FINAL IN (DK, RF) fill "their"

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

Sample Adult lives on campus or don't know or refuse and Sample Adult is not the Household Respondent

Skip Instructions:

<1>[goto TLNO\_FAM\_DRM]

2024 National Health Interview Survey (NHIS) Questionnaire

FAM: Family Composition

Question ID: FAM.0280.00.1 Variable: ONCAMPLNAME Interview Module: Roster Content Type: Annual Core

Question Text:

\* **Ask or verify:** What is ^SANAME's last name?

Fills:

SANAME	Description	Sample Adult's name
	Instruction	Sample Adult's name

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Adult lives on campus or don't know or refuse and Sample Adult is not Household Respondent

Skip Instructions:

<allow 20,RF,DK> [goto ONCAMPADD1\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

FAM: Family Composition

Question ID: FAM.0290.01.1 Variable: ONCAMPADD1\_A Interview Module: Roster Content Type: Annual Core

Question Text:

What is ^SANAME's exact mailing address on campus?

\* Enter the house or building number, house or building number suffix and street name.

Fills:

SANAME	Description	Sample Adult's name
	Instruction	Sample Adult's name

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Adult lives on campus or don't know or refuse and Sample Adult is not Household Respondent

Skip Instructions:

<allow 54, empty> [goto ONCAMPADD2\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

FAM: Family Composition

Question ID: FAM.0290.02.1 Variable: ONCAMPADD2\_A Interview Module: Roster Content Type: Annual Core

Question Text:

\* Enter the unit description.

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Adult lives on campus or don't know or refuse and Sample Adult is not Household Respondent

Skip Instructions:

<allow 54, empty> [goto ONCAMPPO\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

FAM: Family Composition

Question ID: FAM.0290.04.1 Variable: ONCAMPPO\_A Interview Module: Roster Content Type: Annual Core

Question Text:

\* Enter the city.

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Adult lives on campus or don't know or refuse and Sample Adult is not Household Respondent

Skip Instructions:

<allow 28, empty> [goto ONCAMPST\_A]



2024 National Health Interview Survey (NHIS) Questionnaire

FAM: Family Composition

Question ID: FAM.0290.05.1 Variable: ONCAMPST\_A Interview Module: Roster Content Type: Annual Core

Question Text:

\* Enter the state.

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Adult lives on campus or don't know or refuse and Sample Adult is not Household Respondent

Skip Instructions:

<allow 2> [goto ONCAMPZIP5\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

FAM: Family Composition

Question ID: FAM.0290.07.1 Variable: ONCAMPZIP5\_A Interview Module: Roster Content Type: Annual Core

Question Text:

\* Enter the zip code.

Response:

01001-99995	Range of values
99997	Refused
99999	Don't Know

Universe:

Sample Adult lives on campus or don't know or refuse and Sample Adult is not Household Respondent

Skip Instructions:

```
<01001-99996, RF, DK, empty>
if ONCAMPZIP5_A lt 5 characters [goto ERR1_ONCAMPZIP5_A]
elseif ONCAMPZIP5_A lt 01001 [goto ERR2_ONCAMPZIP5_A]
elseif (ONCAMPZIP5_A gt 99996 and SURVTYPE ne T) or (ONCAMPZIP5_A gt
99997 and SURVTYPE=T) [goto ERR3_ONCAMPZIP5_A]
else [goto ONCAMPZIP4_A]
```

Hard Edit:

Check Text	Check Description	Check Text
ERR2_ONCAMPZIP5_A	ONCAMPZIP5_A must be greater than or equal to 01001	{check }  A valid zip code must be entered.  Please correct.
ERR3_ONCAMPZIP5_A	ONCAMPZIP5_A gt 99996/99997	{check }  A valid zip code must be entered.  Please correct.
ERR1_ONCAMPZIP5_A	ONCAMPZIP5_A must have a length of 5	{check }  The entire zip code must be entered.  Please correct.

2024 National Health Interview Survey (NHIS) Questionnaire

FAM: Family Composition

Question ID: FAM.0290.08.1 Variable: ONCAMPZIP4\_A Interview Module: Roster Content Type: Annual Core

Question Text:

\* Enter the zip 4.

Response:

0000-9996	Range of values
9997	Refused
9999	Don't Know

Universe:

Sample Adult lives on campus or don't know or refuse and Sample Adult is not Household Respondent

Skip Instructions:

```
<0000-9997, RF, DK, empty>
if ONCAMPZIP4_A lt 4 characters [goto ERR1_ONCAMPZIP4_A]
elseif (ONCAMPZIP4_A gt 9996 and SURVTYPE ne T) or (ONCAMPZIP4_A gt 9997 and SURVTYPE=T) [goto ERR2_ONCAMPZIP4_A]
else [goto ONCAMPADDR_A]
```

Hard Edit:

Check Text	Check Description	Check Text
ERR1_ONCAMPZIP4_A	ONCAMPZIP4_A must have a length of 4	{check }  The entire zip code must be entered.  Please correct.
ERR2_ONCAMPZIP4_A	ONCAMPZIP4_A gt 9996/9997	{check }  A valid zip code must be entered.  Please correct.

2024 National Health Interview Survey (NHIS) Questionnaire

FAM: Family Composition

Question ID: FAM.0300.00.1 Variable: ONCAMPADDR\_A Interview Module: Roster Content Type: Annual Core

Question Text:

Please confirm the following information about the Sample Adult living on campus:

Name: ^SANAME

Phone Number: ^ONCAMPPHONE\_fill

Address:

^ONCAMPADD1\_A\_fill

^ONCAMPADD2\_A\_fill

^ONCAMPPO\_A\_fill, ^ONCAMPST\_A\_fill ^ONCAMPZIP5\_A\_fill - ^ONCAMPZIP4\_A\_fill

Fills:

SANAME	Description	Sample Adult's name
	Instruction	Sample Adult's name
ONCAMPPHONE_fill	Description	{Value of DISPLAYSTRING}
	Instruction	Fill the phone number associated with the on-campus SA from bContact.arrayPhones [Roster.FAM.TLNO_FAM_DRM].DisplayString
ONCAMPADD1_A_fill	Description	{Value of ONCAMPADD1_A}
	Instruction	Fill value from ONCAMPADD1_A
ONCAMPADD2_A_fill	Description	{Value of ONCAMPADD2_A}
	Instruction	Fill value from ONCAMPADD2_A
ONCAMPPO_A_fill	Description	{Value of ONCAMPPO_A}
	Instruction	Fill value from ONCAMPPO_A
ONCAMPST_A_fill	Description	{Value of ONCAMPST_A}
	Instruction	Fill value from ONCAMPST_A
ONCAMPZIP5_A_fill	Description	{Value of ONCAMPZIP5_A}
	Instruction	Fill value from ONCAMPZIP5_A
ONCAMPZIP4_A_fill	Description	{Value of ONCAMPZIP4_A}
	Instruction	Fill value from at ONCAMPZIP4_A

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

Sample Adult lives on campus or don't know or refuse and Sample Adult is not Household Respondent

Skip Instructions:

<1> [goto CASESTATUS]

2024 National Health Interview Survey (NHIS) Questionnaire  
VFY: Sample Adult Verification

Question ID: VFY.0010.00.1 Variable: CURRES\_A Interview Module: Adult Content Type: Annual Core

Question Text:

\* Enter the line number of the person to whom you are speaking.

Response:

00	Not on roster
01	Name of Person 1
02	Name of Person 2
03	Name of Person 3
04	Name of Person 4
05	Name of Person 5
06	Name of Person 6
07	Name of Person 7
08	Name of Person 8
09	Name of Person 9
10	Name of Person 10
11	Name of Person 11
12	Name of Person 12
13	Name of Person 13
14	Name of Person 14
15	Name of Person 15
16	Name of Person 16
17	Name of Person 17
18	Name of Person 18
19	Name of Person 19
20	Name of Person 20
21	Name of Person 21
22	Name of Person 22
23	Name of Person 23
24	Name of Person 24
25	Name of Person 25
97	Refused
99	Don't Know

Universe:

The Sample Adult section has not been started or completed or has a Sample Adult callback setup

Skip Instructions:

<1-25> [goto AVAIL\_A]



2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0050.00.1 Variable: PROXYLNO\_A Interview Module: Adult Content Type: Annual Core

Question Text:

\* Select the person in this household who is the proxy for ^SANAME.

Fills:

SANAME	Description	Sample Adult's name
	Instruction	Sample Adult's name

Response:

01	^ALIASNAME[1]
02	^ALIASNAME[2]
03	^ALIASNAME[3]
04	^ALIASNAME[4]
05	^ALIASNAME[5]
06	^ALIASNAME[6]
07	^ALIASNAME[7]
08	^ALIASNAME[8]
09	^ALIASNAME[9]
10	^ALIASNAME[10]
11	^ALIASNAME[11]
12	^ALIASNAME[12]
13	^ALIASNAME[13]
14	^ALIASNAME[14]
15	^ALIASNAME[15]
16	^ALIASNAME[16]
17	^ALIASNAME[17]
18	^ALIASNAME[18]
19	^ALIASNAME[19]
20	^ALIASNAME[20]
21	^ALIASNAME[21]
22	^ALIASNAME[22]
23	^ALIASNAME[23]
24	^ALIASNAME[24]
25	^ALIASNAME[25]
97	Refused
99	Don't Know

Universe:

Sample adult proxy is a relative or non relative who lives in the household

**Skip Instructions:**

```
<1-25> if PROXYLNO_A ne CURRES_A [goto INTMODE_A]
elseif PROXYLNO_A=CURRES_A and Roster.HHC.tblNAME.bPerson[PX_A].ONOFFCAMPUS IN (1,RF,DK) and
HHRESPSA_FLG ne 1 [goto VFYONCAMP_A]
else [goto VFYALL_A]
```



2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0060.00.1 Variable: PROXYCALL\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Can a callback with someone knowledgeable about ^SANAME's health be arranged?

Fills:

SANAME	Description	Sample Adult's name
	Instruction	Sample Adult's name

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Knowledgeable proxy is not available.

Skip Instructions:

```
<1> [goto bCallback.CB_POSSIBLE], then  
if there is a Sample child and they have not been interviewed [goto Child.VFY.CURRES_C]  
else [goto BCK.THANKS_CB]  
<2> if there is a Sample child and they have not been interviewed [goto Child.VFY.CURRES_C]  
elseif GEN.OUTCOME=203 [goto BCK.THANKS_SUF]  
else [goto BCK.THANKS_INSUF]
```

2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0070.00.1 Variable: INTMODE\_A Interview Module: Adult Content Type: Annual Core

Question Text:

\* How are you contacting ^SARESP?

Fills:

SARESP	Description	Sample Adult respondent's name
	Instruction	Fill Sample Adult respondent's name

Response:

1	Personal visit
2	Telephone

Universe:

Sample Adults 18+ and  
Not initially speaking to the Sample Adult but now speaking to the Sample Adult OR  
Now speaking to a proxy respondent who is not on the roster or refused or don't know if on the roster OR  
Now speaking to a proxy respondent who is on the roster and who wasn't who you were initially speaking to

Skip Instructions:

```
<1> if Roster.HHC.tblNAME.bPerson[PX_A].ONOFFCAMPUS IN (1,RF,DK) and GEN.HHRESPSA_FLG ne 1 [goto VFYONCAMP_A]  
else[goto VFYALL_A]  
<2> [goto TINTRO_A]
```

## 2024 National Health Interview Survey (NHIS) Questionnaire

### VFY: Sample Adult Verification

Question ID: VFY.0080.00.1 Variable: TINTRO\_A Interview Module: Adult Content Type: Annual Core

#### Question Text:

Hello, my name is (\* say your name). I'm calling from the U.S. Census Bureau. We are conducting the National Health Interview Survey on behalf of the National Center for Health Statistics, part of the Centers for Disease Control and Prevention (CDC). This is a nationwide survey about the health of both adults and children. I have some information from ^HHRESP. Now, I would like to ask you some questions.

\* **Read if necessary:** *I believe I am calling you on a cell phone.*

Before we continue, I have to ask: Are you currently driving a vehicle?

\* **Even if the respondent is using a hands-free device while driving, you must enter '1'.**

#### Fills:

HHRESP	Description	{Value of HHRESPAVAIL}
	Instruction	Display the name of the person selected at Roster.HHC.HHRESPAVAIL

#### Response:

1	Yes
2	No
7	Refused
9	Don't Know

#### Universe:

Sample Adults 18+ and interviewer is conducting a telephone interview with new respondent

#### Skip Instructions:

<1,RF,DK> [goto ATTN\_A]  
<2> [goto LETTER\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0090.00.1 Variable: ATTN\_A Interview Module: Adult Content Type: Annual Core

Question Text:

For your safety, we will call you back at another time.

\* Enter 1 to continue.

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

Sample Adults 18+ and interviewer is conducting a telephone interview with new respondent who is driving

Skip Instructions:

<1> [goto bCallback.CB\_POSSIBLE]

2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0100.00.1 Variable: LETTER\_A Interview Module: Adult Content Type: Annual Core

Question Text:

\* If sample adult is a new respondent read question below, otherwise enter 1

\* **Read if necessary:** A letter describing the National Health Interview Survey was sent to your home recently. Do you remember seeing the letter?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ and interviewer is conducting a telephone interview with new respondent who is not driving

Skip Instructions:

<1,2,RF,DK> [goto S\_INTRO\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0110.00.1 Variable: S\_INTRO\_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

\* If sample adult is a new respondent read question below, otherwise enter 1

\* **Read if necessary:** *There are a few things I need to cover before we continue. I'd like you to know that taking part in this survey is voluntary. You may choose not to answer any questions you don't wish to answer, or end the interview at any time without penalty. We are required by Federal law to develop and follow strict procedures to protect the confidentiality of your information and use your answers only for statistical research. I can describe these laws if you wish. Except for the National Center for Health Statistics and Census Bureau employees and specially designated agents, no one can see your answers until all information that could identify you and/or your family has been removed. Only after that will your data be made available to researchers. For most adults, the survey will take less than ^SATIME minutes. I'd like to continue now unless you have any questions.*

\* If respondent asks for more information about the privacy laws, press F1.

Fills:

SATIME	Description	35/45
	Instruction	If GEN.CSTAT=1 and GEN.SAMEFAM_FLG=1, fill: 35 else, fill: 45

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

Sample Adults 18+ and interviewer is conducting a telephone interview with new respondent who is not driving

Skip Instructions:

<1> if Roster.HHC.tb1NAME.bPerson[PX\_A].ONOFFCAMPUS IN (1,RF,DK) and GEN.HHRESPSA\_FLG ne 1 [goto VFYONCAMP\_A]  
else [goto VFYALL\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0120.00.1 Variable: VFYONCAMP\_A Interview Module: Adult Content Type: Annual Core

Question Text:

I want to confirm some information.

Do you live in on-campus housing or off-campus housing?

\* **Read if necessary:** *On-campus housing includes residence halls and dorms where students live together. It also includes buildings that are owned, leased, or managed by the school. Fraternities and sororities are on-campus housing.*

Response:

1	On campus
2	Off campus
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ living in on-campus housing and the Sample Adult is not the household respondent

Skip Instructions:

<1,RF,DK> [goto VFYALL\_A]  
<2> [goto NOMORE\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0130.00.1 Variable: VFYALL\_A Interview Module: Adult Content Type: Annual Core

Question Text:

^Verifyintro

I have recorded ^yoursexis, you are ^AGE\_A, ^NATORG\_A, and ^RACE\_A. Would you like to make any changes to this ^additionalinfo\_A?

^RACEVRBATvalue\_A

\* If respondent "refuses" or says "don't know", enter "2" for "no."

Fills:

Verifyintro	Description	I want to confirm some information.
	Instruction	If VFYONCAMP_A=empty "I want to confirm some information." else fill nothing
yoursexis	Description	your sex is male/your sex is female/you do not know your sex/you do not wish to provide your sex/your sex was not provided
	Instruction	If GEN.SEX_FINAL=1 fill "your sex is male" If GEN.SEX_FINAL=2 fill "your sex is female" If GEN.SEX_FINAL=DK and GEN.HHRESPSA_FLG=1 fill "you do not know your sex" If GEN.SEX_FINAL=RF and GEN.HHRESPSA_FLG=1 fill "you do not wish to provide your sex" If GEN.SEX_FINAL IN (DK,RF) and GEN.HHRESPSA_FLG ne 1 fill "your sex was not provided"
AGE_A	Description	{Value of AGE}/65 or older/between 18 and 64/18 and older
	Instruction	if GEN.AGE_FINAL ne RF, DK fill with age elseif GEN.AGE_FINAL IN (RF,DK) and Roster.HHC.tblAGE.blkPerson[PX_A].AGE65=2 fill "65 or older" elseif GEN.AGE_FINAL in (RF,DK) and Roster.HHC.tblAGE.blkPerson[PX_A].AGE65=1 fill "between 18 and 64" elseif GEN.AGE_FINAL IN (RF, DK) and Roster.HHC.tblAGE.blkPerson[PX_A].AGE65 IN (RF,DK,empty) fill "18 and older"
NATORG_A	Description	Verify Hispanic or Latino origin
	Instruction	If GEN.NATO_FINAL=1 fill: "you are of Hispanic or Latino origin" If GEN.NATO_FINAL=2 fill: "you are not of Hispanic or Latino origin" If GEN.NATO_FINAL=DK and GEN.HHRESPSA_FLG=1 fill: "you do not know if you are of Hispanic or Latino origin" If GEN.NATO_FINAL=RF and GEN.HHRESPSA_FLG=1 fill: "you do not wish to provide information about your Hispanic or Latino origin" If GEN.NATO_FINAL IN (DK,RF) and GEN.HHRESPSA_FLG ne 1 fill "information about your Hispanic or Latino origin was not provided"
RACE_A	Description	you are ^RACEFILLAND_A/you do not know your race/you do not wish to provide your race/your race was not provided
	Instruction	If race or races IN GEN.RACE_FINAL[PX_A].RACE_FINAL fill: "you are ^RACEFILLAND_A." If GEN.RACE_FINAL[PX_A].RACE_FINAL=DK and GEN.HHRESPSA_FLG=1 fill "you do not know your race." If GEN.RACE_FINAL[PX_A].RACE_FINAL=RF and GEN.HHRESPSA_FLG=1 fill: "you do not wish to provide your race." If GEN.RACE_FINAL[PX_A].RACE_FINAL IN (DK,RF) and GEN.HHRESPSA_FLG ne 1 fill "your race was not provided."
RACEFILLAND_A	Description	Categories selected at the RACE screen



	Instruction	Fill categories stored in GEN.RACE_FINAL[PX_A].RACE_FINAL. If more than two categories separate the categories with commas. Add the word "and" before the last category.  When GEN.RACE_FINAL[PX_A].RACE_FINAL=8, if GEN.RACE_FINAL[PX_A].RACE_SP_FINAL not in (ZZ,RF,DK) display picklist selection from GEN.RACE_FINAL[PX_A].RACE_SP_FINAL elseif GEN.HHRESPSA_FLG=1 and GEN.RACE_FINAL [PX_A].RACE_VERBAT_FINAL not in (empty,DK,RF) display GEN.RACE_FINAL[PX_A].RACE_VERBAT_FINAL else display "some other race"
additionalinfo_A	Description	if any information is missing "or provide additional information about"
	Instruction	See attachment for fill instructions
RACEVRBATvalue_A	Description	Information collected at RACEVRBAT for Sample Adult
	Instruction	IF GEN.HHRESPSA_FLG ne 1 and GEN.RACE_FINAL [PX_A].RACE_VRBAT_FINAL ne (empty,RF,DK), fill "*" If respondent wants information on which other race they are listed as, say ^RACE_VRBAT."
RACE_VRBAT	Description	{Value of RACE_VRBAT_FINAL}
	Instruction	Fill value from GEN.RACE_FINAL[PX].RACE_VRBAT_FINAL

**Response:**

1	Yes
2	No
7	Refused
9	Don't Know

**Universe:**

Sample adults 18+ and the Sample Adult or a proxy is available to continue the interview and the Sample Adult is not identified as away at college and living in off-campus housing

**Skip Instructions:**

```
<1> [goto VFYDEM_A]
<2> if GEN.SEX_FINAL IN (RF,DK) [goto SEXGUESS_A]
    elseif GEN.NATO_FINAL=1 [goto HISPTYPE_A]
    elseif GEN.RACE_FINAL=6 [goto PITYPE_A]
    elseif GEN.RACE_FINAL=7 [goto ASIANTYPE_A]
    elseif (NEWRACE_A=8 or (NEWRACE_A=empty and GEN.HHRESPSA_FLG ne 1 and
Roster.HHC.tb1RACE.bpersion.RACE_SP[PX_A] in (ZZ,RF,DK))) [goto RACEOTHER_A]
    else [goto BMONTH_A]
```

2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0140.00.1 Variable: VFYDEM\_A Interview Module: Adult Content Type: Annual Core

Question Text:

- \* **Read if necessary:** *What should I change?*
- \* **Enter all that apply, separate with commas.**

Response:

1	Sex
2	Age
3	Hispanic or Latino Origin
4	Race
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ would like to change demographic information

Skip Instructions:

```

if 1 IN VFYDEM_A [goto NEWSEX_A]
elseif (2,3,4) IN VFYDEM_A and GEN.SEX_FINAL[PX_A] IN (RF,DK) [goto SEXGUESS_A]
elseif 2 IN VFYDEM_A and GEN.SEX_FINAL[PX_A] NOT IN (RF,DK) [goto NEWAGE_A]
elseif 3 IN VFYDEM_A and GEN.SEX_FINAL[PX_A] NOT IN (RF,DK) [goto NEWNATORG_A]
elseif 4 IN VFYDEM_A and GEN.SEX_FINAL[PX_A] NOT IN (RF,DK) [goto NEWRACE_A]
<RF,DK> If GEN.SEX_FINAL[PX_A] IN (RF,DK) [goto SEXGUESS_A]
    elseif GEN.NATO_FINAL=1 [goto HISPTYPE_A]
    elseif GEN.RACE_FINAL=6 [goto PITYPE_A]
    elseif GEN.RACE_FINAL=7 [goto ASIANTYPE_A]
    elseif (NEWRACE_A=8 or (NEWRACE_A=empty and GEN.HHRESPSA_FLG ne 1 and
Roster.HHC.tb1RACE.bperson.RACE_SP[PX_A] in (ZZ,RF,DK))) [goto RACEOTHER_A]
    else [goto BMONTH_A]
    
```

2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0150.00.1 Variable: NEWSEX\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Are you male or female?

Response:

1	Male
2	Female
7	Refused
9	Don't Know

Universe:

Respondent said his/her sex is not correct

Skip Instructions:

```
if GEN.SEX_FINAL[PX_A]=RF,DK and NEWSEX_A=RF,DK [goto SEXGUESS_A]
elseif 2 IN VFYDEM_A [goto NEWAGE_A]
elseif 3 IN VFYDEM_A [goto NEWNATORG_A]
elseif 4 IN VFYDEM_A [goto NEWRACE_A]
elseif GEN.NATO_FINAL=1 [goto HISPTYPE_A]
elseif GEN.RACE_FINAL[PX_A].RACE_FINAL=6 [goto PITYPE_A]
elseif GEN.RACE_FINAL[PX_A].RACE_FINAL=7 [goto ASIANTYPE_A]
elseif (NEWRACE_A=8 or (NEWRACE_A=empty and GEN.HHRESPSA_FLG ne 1 and
Roster.HHC.tb1RACE.bperson.RACE_SP[PX_A] in (ZZ,RF,DK))) [goto RACEOTHER_A]
else [goto BMONTH_A]
```

2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0160.00.1 Variable: SEXGUESS\_A Interview Module: Adult Content Type: Annual Core

Question Text:

\* Enter your best guess of ^SANAME's sex.

Fills:

SANAME	Description	Sample Adult's name
	Instruction	Sample Adult's name

Response:

1	Male
2	Female

Universe:

Sample adults for whom there is no sex provided by the household respondent and did not give a sex when asked to verify information

Skip Instructions:

```
<1,2>
if 2 IN VFYDEM_A [goto NEWAGE_A]
elseif 3 IN VFYDEM_A [goto NEWNATORG_A]
elseif 4 IN VFYDEM_A [goto NEWRACE_A]
elseif GEN.NATO_FINAL=1 [goto HISPTYPE_A]
elseif GEN.RACE_FINAL=6 [goto PITYPE_A]
elseif GEN.RACE_FINAL=7 [goto ASIANTYPE_A]
elseif (NEWRACE_A=8 or (NEWRACE_A=empty and GEN.HHRESPSA_FLG ne 1 and
Roster.HHC.tb1RACE.bperson.RACE_SP[PX_A] in (ZZ,RF,DK))) [goto RACEOTHER_A]
else [goto BMONTH_A]
```

2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0170.00.1 Variable: NEWAGE\_A Interview Module: Adult Content Type: Annual Core

Question Text:

How old are you?

\* Enter age.

Response:

000-120	Range of values
997	Refused
999	Don't Know

Universe:

Sample Adult 18+ said his/her age is not correct

Skip Instructions:

```
<0-120, RF, DK> if 3 IN VFYDEM_A [goto NEWNATORG_A]
elseif 4 IN VFYDEM_A [goto NEWRACE_A]
elseif GEN.NATO_FINAL=1 [goto HISPTYPE_A]
elseif GEN.RACE_FINAL[PX_A].RACE_FINAL=6 [goto PITYPE_A]
elseif GEN.RACE_FINAL[PX_A].RACE_FINAL=7 [goto ASIANTYPE_A]
elseif (NEWRACE_A=8 or (NEWRACE_A=empty and GEN.HHRESPSA_FLG ne 1 and
Roster.HHC.tb1RACE.bperson.RACE_SP[PX_A] in (ZZ,RF,DK))) [goto RACEOTHER_A]
else [goto BMONTH_A]
```

2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0190.00.1 Variable: NEWNATORG\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Do you consider yourself to be Hispanic or Latino?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adult 18+ said his/her Hispanic Origin is not correct

Skip Instructions:

```
<1,2,RF,DK> if 4 IN VFYDEM_A [goto NEWRACE_A]
elseif GEN.NATO_FINAL=1 [goto HISPTYPE_A]
elseif GEN.RACE_FINAL[PX_A].RACE_FINAL=6 [goto PITYPE_A]
elseif GEN.RACE_FINAL[PX_A].RACE_FINAL=7 [goto ASIANTYPE_A]
elseif (NEWRACE_A=8 or (NEWRACE_A=empty and GEN.HHRESPSA_FLG ne 1 and
Roster.HHC.tblRACE.bperson.RACE_SP[PX_A] in (ZZ,RF,DK))) [goto RACEOTHER_A]
else [goto BMONTH_A]
```

2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0200.00.1 Variable: NEWRACE\_A Interview Module: Adult Content Type: Annual Core

Question Text:

What race or races do you consider yourself to be? Please select 1 or more of these categories:

White, Black, African American, American Indian, Alaska Native, Native Hawaiian, Pacific Islander, Asian, or some other race?

\* Enter all that apply, separate with commas.

Response:

01	White
02	Black/African American
03	American Indian
04	Alaska Native
05	Native Hawaiian
06	Other Pacific Islander
07	Asian
08	Some other race
97	Refused
99	Don't Know

Universe:

Sample Adult 18+ said his/her race is not correct

Skip Instructions:

```
<1-8,RF,DK> if GEN.NATO_FINAL=1 [goto HISPTYPE_A]
elseif GEN.RACE_FINAL[PX_A].RACE_FINAL=6 [goto PITYPE_A]
elseif GEN.RACE_FINAL[PX_A].RACE_FINAL=7 [goto ASIANTYPE_A]
elseif (NEWRACE_A=8 or (NEWRACE_A=empty and GEN.HHRESPSA_FLG ne 1 and
Roster.HHC.tblRACE.bperson.RACE_SP[PX_A] in (ZZ,RF,DK))) [goto RACEOTHER_A]
else [goto BMONTH_A]
```

2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0210.00.1 Variable: HISPTYPE\_A Interview Module: Adult Content Type: Annual Core

Question Text:

What is your Hispanic or Latino ancestry or origin, such as Mexican, Mexican American, ^CHICANOA, Central or South American, Puerto Rican, Cuban, Dominican (Republic), or Other Hispanic, ^LATINOA, or Spanish -- and if you have more than one, tell me all of them.

\* Enter all that apply, separate with commas.

Fills:

CHICANOA	Description	Chicano/Chicano or Chicana
	Instruction	If SEX_FINAL = 1 fill: "Chicano" if SEX_FINAL = 2,DK,RF fill "Chicano or Chicana"
LATINOA	Description	Latino/Latino or Latina
	Instruction	If SEX_FINAL= 1 fill: "Latino" if SEX_FINAL = 2,DK,RF fill "Latino or Latina"

Response:

01	Mexican, Mexican American, or Chicano(a)
02	Central American
03	South American
04	Puerto Rican
05	Cuban
06	Dominican (Republic)
07	Other Hispanic, Latino(a), or Spanish (specify)
97	Refused
99	Don't Know

Universe:

Respondent is of Hispanic Origin

Skip Instructions:

```
<7> [goto HISPOTHER_A]
<1-6,RF,DK>
if GEN.RACE_FINAL[PX_A]=6 [goto PITYPE_A]
elseif GEN.RACE_FINAL[PX_A]=7 [goto ASIANTYPE_A]
elseif (NEWRACE_A=8 or (NEWRACE_A=empty and GEN.HHRESPSA_FLG ne 1 and
Roster.HHC.tb1RACE.bPerson.RACE_SP[PX_A] in (ZZ,RF,DK))) [goto RACEOTHER_A]
else [goto BMONTH_A]
```



2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0220.00.1 Variable: HISPOTHER\_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

What is your Hispanic or Latino ancestry or origin? If you have more than one, tell me all of them.

\* Start typing and then select from list. If Hispanic or Latino ancestry is not on the list, type "ZZ" and enter verbatim.

\* If any of the following are mentioned, backup to previous screen and correct the entry.

- Mexican
- Mexican American
- Chicano/Chicana
- Central American (REFER TO HELP SCREEN)
- South American (REFER TO HELP SCREEN)
- Puerto Rican (Boricua)
- Cuban/Cuban American
- Dominican (Republic)

\* If respondent provides more than one other Hispanic or Latino ancestry or origin, select 'ZZ' from the lookup table. At the next question, enter ALL the other Hispanic or Latino ancestries or origins in the verbatim field.

Response:

Verbatim	Verbatim values
ZZ	Other
97	Refused
99	Don't Know

Universe:

Respondent is of Other Hispanic Origin

Skip Instructions:

```
<ZZ> [goto HISPVRBAT_A]
<lookup table selection,RF,DK> if GEN.RACE_FINAL[PX_A]=6 [goto PITYPE_A]
elseif GEN.RACE_FINAL[PX_A]=7 [goto ASIANTYPE_A]
elseif (NEWRACE_A=8 or (NEWRACE_A=empty and GEN.HHRESPSA_FLG ne 1 and
Roster.HHC.tb1RACE.bPerson.RACE_SP[PX_A] in (ZZ,RF,DK))) [goto RACEOTHER_A]
else [goto BMONTH_A]
```

2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0230.00.1 Variable: HISPVRBAT\_A Interview Module: Adult Content Type: Annual Core

Question Text:

\* **Read if necessary:** *What is your Hispanic or Latino ancestry or origin? If you have more than one, tell me all of them.*

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Adult 18+ who report some other Hispanic Ancestry and this is not chosen from the picklist

Skip Instructions:

```
<allow 80,RF,DK> if GEN.RACE_FINAL[PX_A].RACE_FINAL=6 [goto PITYPE_A]
elseif GEN.RACE_FINAL[PX_A].RACE_FINAL=7 [goto ASIANTYPE_A]
elseif (NEWRACE_A=8 or (NEWRACE_A=empty and GEN.HHRESPSA_FLG ne 1 and
Roster.HHC.tblRACE.bPerson.RACE_SP[PX_A].RACE_FINAL in (ZZ,RF,DK))) [goto RACEOTHER_A]
else [goto BMONTH_A]
```

2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0240.00.1 Variable: PITYPE\_A Interview Module: Adult Content Type: Annual Core

Question Text:

I have recorded that you are Pacific Islander. What specific ethnic group or groups are you-- such as Guamanian or Chamorro, Samoan, or other Pacific Islander? If you are more than one, tell me all of them.

\* Enter all that apply, separate with commas.

Response:

1	Guamanian or Chamorro
2	Samoan
3	Other Pacific Islander
7	Refused
9	Don't Know

Universe:

Respondent identifies race as Pacific Islander

Skip Instructions:

```
<3> [goto PIOTHER_A]
<1,2,RF,DK> if GEN.RACE_FINAL[PX_A].RACE_FINAL=7 [goto ASIANTYPE_A]
elseif (NEWRACE_A=8 or (NEWRACE_A=empty and GEN.HHRESPSA_FLG ne 1 and
Roster.HHC.tb1RACE.bPerson.RACE_SP[PX_A] IN (ZZ,RF,DK))) [goto RACEOTHER_A]
else [goto BMONTH_A]
```

2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0250.00.1 Variable: PIOTHER\_A Interview Module: Adult Content Type: Annual Core

Question Text:

\* **Read if necessary:** *I have recorded that you are Pacific Islander. What specific ethnic group or groups are you? If you are more than one, tell me all of them.*

\* **Start typing and then select from list. If Pacific Islander ethnic group is not on the list, type "ZZ" and enter verbatim.**

\* **If respondent provides more than one ethnic group, select 'ZZ' from the lookup table. At the next question, enter ALL the ethnic groups in the verbatim field.**

Response:

Verbatim	Verbatim values
ZZ	Other
97	Refused
99	Don't Know

Universe:

Sample Adult 18+ who identifies as Other Pacific Islander

Skip Instructions:

```
<ZZ> [goto PIVRBAT_A]
<picklist selection, RF, DK>
if GEN.RACE_FINAL[PX_A].RACE_FINAL=7 [goto ASIANTYPE_A]
elseif (NEWRACE_A=8 or (NEWRACE_A=empty and HHRESPSA_FLG ne 1 and
Roster.HHC.tb1RACE.bPerson.RACE_SP[PX_A] IN (ZZ,RF,DK))) [goto RACEOTHER_A]
else [goto BMONTH_A]
```

2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0260.00.1 Variable: PIVRBAT\_A Interview Module: Adult Content Type: Annual Core

Question Text:

\* **Read if necessary:** *I have recorded that you are Pacific Islander. What specific ethnic group or groups are you? If you are more than one, tell me all of them.*

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Adult 18+ who report some other group of Pacific Islander not on the picklist

Skip Instructions:

```
<allow 80,RF,DK>  
if GEN.RACE_FINAL[PX_A].RACE_FINAL=7 [goto ASIANTYPE_A]  
elseif (NEWRACE_A=8 or (NEWRACE_A=empty and GEN.HHRESPSA_FLG ne 1 and  
Roster.HHC.tb1RACE.bPerson.RACE_SP[PX_A] IN (ZZ,RF,DK))) [goto RACEOTHER_A]  
else [goto BMONTH_A]
```

2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0270.00.1 Variable: ASIANTYPE\_A Interview Module: Adult Content Type: Annual Core

Question Text:

I have recorded that you are Asian. What specific ethnic group or groups are you-- such as Asian Indian, Chinese, Filipino, Japanese, Korean, Vietnamese, or Other Asian? If you are more than one, tell me all of them.

\* Enter all that apply, separate with commas.

Response:

01	Asian Indian
02	Chinese
03	Filipino
04	Japanese
05	Korean
06	Vietnamese
07	Other Asian
97	Refused
99	Don't Know

Universe:

Sample Adult identifies race as Asian

Skip Instructions:

```
<7> [goto ASIANOTHER_A]
<1-6,RF,DK>
elseif (NEWRACE_A=8 or (NEWRACE_A=empty and GEN.HHRESPSA_FLG ne 1 and
Roster.HHC.tb1RACE.bPerson.RACE_SP[PX_A] in (ZZ,RF,DK)))[goto RACEOTHER_A]
else [goto BMONTH_A]
```

2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0280.00.1 Variable: ASIANOTHER\_A Interview Module: Adult Content Type: Annual Core

Question Text:

What is your specific Asian ethnic group or groups? If you have more than one, tell me all of them.

Start typing and then select from list. If Asian ethnic group is not on the list, type "ZZ" and enter verbatim.

\* If any of the following are mentioned, backup to previous screen and correct the entry.

(Asian) Indian

Chinese

Filipino

Japanese

Korean

Vietnamese

\* If respondent provides more than one ethnic group, select 'ZZ' from the lookup table. At the next question, enter ALL the ethnic groups in the verbatim field.

Response:

Verbatim	Verbatim values
ZZ	Other
97	Refused
99	Don't Know

Universe:

Respondent identifies as other Asian

Skip Instructions:

```
<allow 80,RF,DK> (NEWRACE_A=8 or (NEWRACE_A=empty and GEN.HHRESPSA_FLG ne 1 and Roster.HHC.tb1RACE.bPerson.RACE_SP[PX_A] in (ZZ,RF,DK))) [goto RACEOTHER_A] else [goto BMONTH_A]
```

2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0290.00.1 Variable: ASIANVRBAT\_A Interview Module: Adult Content Type: Annual Core

Question Text:

\* **Read if necessary:** *What is your specific Asian ethnic group or groups? If you have more than one, tell me all of them.*

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Adult 18+ who report some other ethnic group of Asian that is not on the picklist

Skip Instructions:

```
<allow 80,RF,DK>  
if (NEWRACE_A=8 or (NEWRACE_A=empty and GEN.HHRESPSA_FLG ne 1 and  
Roster.HHC.tb1RACE.bPerson.RACE_SP[PX_A] in (ZZ,RF,DK))) [goto RACEOTHER_A]  
else [goto BMONTH_A]
```



2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0300.00.1 Variable: RACEOTHER\_A Interview Module: Adult Content Type: Annual Core

Question Text:

What other race or races do you consider yourself to be?

Start typing and then select from list. If race is not on the list, type "ZZ" and enter verbatim.

\* If respondent provides more than one other race, select 'ZZ' from the lookup table. At the next question, enter ALL the other races in the verbatim field.

Response:

Verbatim	Verbatim values
ZZ	Other
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ and race was changed to "some other race" in verification section or where the Sample Adult respondent is not the Household respondent and did not report a new race and were identified by the household respondent as being "some other race" not on the roster other race picklist

Skip Instructions:

<ZZ> [goto RACEVRBAT]  
<picklist selection,RF,DK> [goto BMONTH\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0310.00.1 Variable: RACEVRBAT\_A Interview Module: Adult Content Type: Annual Core

Question Text:

\* **Read if necessary:** *What other race or races do you consider yourself to be?*

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample adults 18+ who are some other race and this is not selected from Sample adult picklist

Skip Instructions:

<verbatim,RF,DK> [goto BMONTH\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0340.01.1 Variable: BMONTH\_A Interview Module: Adult Content Type: Annual Core

Question Text:

\* 1 of 3

What is your date of birth?

Please give month, day, and year for the date of birth.

\* Enter month of birth.

Response:

01	January
02	February
03	March
04	April
05	May
06	June
07	July
08	August
09	September
10	October
11	November
12	December
97	Refused
99	Don't Know

Universe:

Sample adults 18+ and someone is available to continue the interview and date of birth was verified as incorrect fewer than 2 times

Skip Instructions:

<1-12,RF,DK> [goto BDAY\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0340.02.1 Variable: BDAY\_A Interview Module: Adult Content Type: Annual Core

Question Text:

\* 2 of 3

\* Enter day of birth.

Response:

01-31	Range of values
97	Refused
99	Don't Know

Universe:

Sample adults 18+ and someone is available to continue the interview and date of birth was verified as incorrect fewer than 2 times

Skip Instructions:

<1-31,RF,DK> Only allow valid days for month entered. if days not valid [goto ERR\_BDAY\_A]  
else [goto BYEAR\_A]

Hard Edit:

Check Text	Check Description	Check Text
ERR_BDAY_A	Invalid day for selected month hard edit	{check }  ^BDAY_A is not a valid day for ^BMONTH_A.

2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0340.03.1 Variable: BYEAR\_A Interview Module: Adult Content Type: Annual Core

Question Text:

- \* 3 of 3
- \* Enter year of birth.
- \* If year of birth is before 1900, enter 1900.

Response:

Year	Year
9997	Refused
9999	Don't Know

Universe:

Sample adults 18+ and someone is available to continue the interview and date of birth was verified as incorrect fewer than 2 times

Skip Instructions:

```
<1900-current year,RF,DK>
if (BYEAR_A gt current year) or (BYEAR_A=current year and BMONTH_A gt current month) or
(BYEAR_A=current year and BMONTH_A=current month and BDAY_A gt current day) [goto ERR_BYEAR_A]

elseif BDAY_A=29 and BMONTH_A=2 and (BYEAR=2000 or BYEAR_A/4 remainder ne 0) [goto
ERR_BDAYLEAP_A]

elseif GEN.AGE_FINAL IN (RF,DK) [goto AGE_GUESS_A]

elseif ((BYEAR_A not IN (RF,DK) and AGETEMP_A not IN (RF,DK) and AGETEMP_A ne AGE_CALC_A) AND
(AGETEMP_A not IN (RF,DK) and AGETEMP_A ne AGE_CALCMINUS1_A)) and DOB_COUNT_A ne 1 [goto
VFYDOB_A]

elseif (AGETEMP_A eq (AGE_CALC_A or AGE_CALCMINUS1_A)) or DOB_COUNT_A=1
if GEN.AGE_FINAL[PX_A] lt 18 [goto NOMORE_A]

else [goto next section]
```

Hard Edit:

Check Text	Check Description	Check Text
ERR_BDAYLEAP_A	Invalid day for selected month hard edit	{check }  ^BDAY_A is not a valid day for ^BMONTH_A.
ERR_BYEAR_A	Future date hard edit	{check }  Future date invalid

2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0370.00.1 Variable: AGE GUESS\_A Interview Module: Adult Content Type: Annual Core

Question Text:

\* An age has not been collected and we are unable to determine an age based upon the date of birth.

What is your best guess at ^ALIASNAME's age?

Fills:

ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]

Response:

018-120	Range of values
---------	-----------------

Universe:

Sample Adult's age is don't know or refused

Skip Instructions:

<18-120> [goto next section]

**2024 National Health Interview Survey (NHIS) Questionnaire**

**VFY: Sample Adult Verification**

**Question ID:** VFY.0380.00.1    **Variable:** VFYDOB\_A    **Interview Module:** Adult    **Content Type:** Annual Core

**Question Text:**

There is a difference between the age the computer calculated from your date of birth of ^AGEDOB\_A\_fill and the age I had previously recorded of ^TEMPAGE\_A.

I recorded your ^dateofbirth

**Fills:**

AGEDOB_A_fill	Description	Age(s) calculated from Date of Birth for SA
	Instruction	Fill one age calculated from AGE_CALC_A as "(age)" Fill two ages calculated from AGE_CALC_A and AGE_CALCMINUS1_A as "(age) or (age)"
TEMPAGE_A	Description	{Value of AGETEMP_A}
	Instruction	Fill value of AGETEMP_A
dateofbirth	Description	date of birth when any of BDAY_A, BMONTH_A or BYEAR_A are not valid
	Instruction	If BDAY_A, BMONTH,A and BYEAR_A are all valid, fill: "date of birth as ^BMONTH_A ^BDAY_A, ^BYEAR_A, is that correct?" If only BMONTH_A and BYEAR_A are valid, fill: "date of birth as ^BMONTH_A ^BYEAR_A, is that correct?" If only BDAY_A and BYEAR_A are valid, fill: "year of birth as ^BYEAR_A, is that correct?" If only BYEAR_A is valid, fill: "year of birth as ^BYEAR_A, is that correct?"
BMONTH_A	Description	{Value of BMONTH_A}
	Instruction	Fill value from Adult.VFY.BMONTH_A
BDAY_A	Description	{Value of BDAY_A}
	Instruction	Fill value from Adult.VFY.BDAY_A
BYEAR_A	Description	{Value of BYEAR_A}
	Instruction	Fill value from Adult.VFY.BYEAR_A

**Response:**

1	Yes
2	No
7	Refused
9	Don't Know

**Universe:**

Sample Adults whose age provided in either HHC or NEWAGE\_A does not match either age calculated from date of birth information

**Skip Instructions:**

```
<1,RF,DK> if GEN.AGE_FINAL[PX_A] lt 18 [goto NOMORE_A]
else [goto next section]
```

```
<2> if DOB_COUNT_A le 1 [goto BMONTH_A]
else if GEN.AGE_FINAL[PX_A] lt 18 [goto NOMORE_A]
else [goto next section]
```

2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0390.00.1 Variable: NOMORE\_A Interview Module: Adult Content Type: Annual Core

Question Text:

\* ^SANAME is no longer the sample adult for this family. End this interview and begin the Sample Child Interview. If there is no Sample Child or the Sample Child interview has been completed, EXIT

Not everyone in our survey is asked all questions. I have all the information that I need about you at this time.

\* Enter '1' to Continue.

Fills:

SANAME	Description	Sample Adult's name
	Instruction	Sample Adult's name

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

Sample adult whose age is now less than 18 or lives off campus

Skip Instructions:

```
<1> if there is a Sample Child that has not been interviewed [goto Child.VFY.CURRES_C]
else if GEN.OUTCOME IN 215 [goto BCK.THANKS_INSUF]
else [goto BCK.THANKS_SUF]
```



2024 National Health Interview Survey (NHIS) Questionnaire

HIS: Health Status

Question ID: HIS.0010.00.1 Variable: PHSTAT\_A Interview Module: Adult Content Type: Annual Core

Question Text:

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

Response:

1	Excellent
2	Very Good
3	Good
4	Fair
5	Poor
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-5,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

LSF: Life Satisfaction

Question ID: LSF.0010.00.3 Variable: LSATIS4\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

In general, how satisfied are you with your life? Are you very satisfied, satisfied, dissatisfied, or very dissatisfied?

Response:

1	Very satisfied
2	Satisfied
3	Dissatisfied
4	Very dissatisfied
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-4,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

HYP: Hypertension

Question ID: HYP.0010.00.1 Variable: HYPINTRO\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Now I am going to ask you about certain medical conditions.

\* Enter '1' to continue.

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto HYPEV\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

HYP: Hypertension

Question ID: HYP.0020.00.1 Variable: HYPEV\_A Interview Module: Adult Content Type: Annual Core

Question Text:

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

\* Enter '1' if respondent is taking medication to control his/her high blood pressure.

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto HYPDIF\_A]  
<2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

HYP: Hypertension

Question ID: HYP.0030.00.1 Variable: HYPDIF\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Were you told on two or more DIFFERENT visits that you had hypertension or high blood pressure?

\* Enter '1' if respondent is taking medication to control his/her high blood pressure.

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who were ever told they had hypertension

Skip Instructions:

<1> [goto HYP12M\_A]  
<2,RF,DK> [goto HYPMED\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

HYP: Hypertension

Question ID: HYP.0040.00.1 Variable: HYP12M\_A Interview Module: Adult Content Type: Annual Core

Question Text:

During the past 12 months, have you had hypertension or high blood pressure?

\* Enter '1' if respondent is taking medication to control his/her high blood pressure.

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who were ever told they had hypertension (2+ visits)

Skip Instructions:

<1,2,RF,DK> [goto HYPMED\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

HYP: Hypertension

Question ID: HYP.0050.00.1 Variable: HYPMED\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Are you NOW taking any medication prescribed by a doctor for your high blood pressure?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who were ever told they have hypertension

Skip Instructions:

<1,2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

CHL: Cholesterol

Question ID: CHL.0010.00.1 Variable: CHLEV\_A Interview Module: Adult Content Type: Annual Core

Question Text:

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

\* Enter '1' if respondent is taking medication to control his/her high cholesterol.

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto CHL12M\_A]  
<2,RF,DK> [goto next section]



2024 National Health Interview Survey (NHIS) Questionnaire

CHL: Cholesterol

Question ID: CHL.0020.00.1 Variable: CHL12M\_A Interview Module: Adult Content Type: Annual Core

Question Text:

During the past 12 months, have you had high cholesterol?

\* Enter '1' if respondent is taking medication to control his/her high cholesterol.

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who were ever told they had high cholesterol

Skip Instructions:

<1,2,RF,DK> [goto CHLMED\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

CHL: Cholesterol

Question ID: CHL.0030.00.1 Variable: CHLMED\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Are you NOW taking any medication prescribed by a doctor to help lower your cholesterol?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who were ever told they had high cholesterol

Skip Instructions:

<1,2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

CVC: Cardiovascular Conditions

Question ID: CVC.0010.00.1 Variable: CHDEV\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Have you EVER been told by a doctor or other health professional that you had  
...Coronary heart disease?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto ANGEV\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

CVC: Cardiovascular Conditions

Question ID: CVC.0020.00.1 Variable: ANGEV\_A Interview Module: Adult Content Type: Annual Core

Question Text:

\* **Read if necessary:** *Have you EVER been told by a doctor or other health professional that you had*

*...Angina, also called angina pectoris?*

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto MIEV\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

CVC: Cardiovascular Conditions

Question ID: CVC.0030.00.1 Variable: MIEV\_A Interview Module: Adult Content Type: Annual Core

Question Text:

\* **Read if necessary:** *Have you EVER been told by a doctor or other health professional that you had*

*...A heart attack, also called myocardial infarction?*

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto STREV\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

CVC: Cardiovascular Conditions

Question ID: CVC.0040.00.1 Variable: STREV\_A Interview Module: Adult Content Type: Annual Core

Question Text:

\* **Read if necessary:** *Have you EVER been told by a doctor or other health professional that you had*

*...A stroke?*

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

AST: Asthma

Question ID: AST.0010.00.1 Variable: ASEV\_A Interview Module: Adult Content Type: Annual Core

Question Text:

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

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto ASTILL\_A]  
<2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

AST: Asthma

Question ID: AST.0020.00.1 Variable: ASTILL\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Do you still have asthma?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who were ever told they have asthma

Skip Instructions:

<1,2,RF,DK> [goto ASAT12M\_A]



2024 National Health Interview Survey (NHIS) Questionnaire

AST: Asthma

Question ID: AST.0030.00.1 Variable: ASAT12M\_A Interview Module: Adult Content Type: Annual Core

Question Text:

During the past 12 months, have you had an episode of asthma or an asthma attack?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who were ever told they had asthma

Skip Instructions:

<1,2,RF,DK> [goto ASER12M\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

AST: Asthma

Question ID: AST.0040.00.1 Variable: ASER12M\_A Interview Module: Adult Content Type: Annual Core

Question Text:

During the past 12 months, have you had to visit an emergency room or urgent care center because of asthma?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who were ever told they had asthma

Skip Instructions:

<1,2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

CAN: Cancer

Question ID: CAN.0010.00.1 Variable: CANEV\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Have you EVER been told by a doctor or other health professional that you had  
...Cancer or a malignancy of any kind?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto CANKIND1\_A]  
<2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

CAN: Cancer

Question ID: CAN.0020.00.1 Variable: CANKIND1\_A Interview Module: Adult Content Type: Annual Core

Question Text:

What kind of cancer was it?

\* Enter code for the first kind of cancer.

Response:

01	Bladder
02	Blood
03	Bone
04	Brain
05	Breast
06	Cervix/Cervical
07	Colon
08	Esophagus/Esophageal
09	Gallbladder
10	Kidney
11	Larynx-trachea
12	Leukemia
13	Liver
14	Lung
15	Lymphoma
16	Melanoma
17	Mouth/tongue/lip
18	Ovary/Ovarian
19	Pancreas/Pancreatic
20	Prostate
21	Rectum/Rectal
22	Skin (melanoma)
23	Skin (non-melanoma)
24	Skin (don't know kind)
25	Stomach
26	Testis/Testicular
27	Throat - pharynx
28	Thyroid
29	Uterus/Uterine
30	Other
97	Refused

99	Don't Know
----	------------

**Universe:**

Sample Adults 18+ who were ever told they had cancer

**Skip Instructions:**

If GEN.SEX\_FINAL[PX\_A]=1 and CANKIND1\_A IN (6,18,29) [goto ERR1\_CANKIND\_A]  
elseif GEN.SEX\_FINAL[PX\_A]=2 and CANKIND1\_A IN (20,26) [goto ERR2\_CANKIND\_A]  
<1-30,RF,DK> [goto CANAGE1\_A]

**Soft Edit:**

Check Text	Check Description	Check Text
ERR1_CANKIND_A	CANKIND_A male soft edit	{signal }  Verify. Code 6 or 18 or 29 is unavailable for males.
ERR2_CANKIND_A	CANKIND_A female soft edit	{signal }  Verify. Code 20 or 26 is unavailable for females.

2024 National Health Interview Survey (NHIS) Questionnaire

CAN: Cancer

Question ID: CAN.0030.00.1 Variable: CANAGE1\_A Interview Module: Adult Content Type: Annual Core

Question Text:

How old were you when a doctor or other health professional first told you that you had ^CANKIND1?

\* Enter 1 if reported age is 1 or younger.

Fills:

CANKIND1	Description	{Value of CANKIND1_A}
	Instruction	If CANKIND1_A = RF,DK fill "this cancer"; else fill "bladder cancer" if CANKIND1_A = 1; else fill "blood cancer" if CANKIND1_A = 2; else fill "bone cancer" if CANKIND1_A = 3; else fill "brain cancer" if CANKIND1_A = 4; else fill "breast cancer" if CANKIND1_A = 5; else fill "cervical cancer" if CANKIND1_A = 6; else fill "colon cancer" if CANKIND1_A = 7; else fill "esophageal cancer" if CANKIND1_A = 8; else fill "gallbladder cancer" if CANKIND1_A = 9; else fill "kidney cancer" if CANKIND1_A = 10; else fill "larynx-trachea cancer" if CANKIND1_A = 11; else fill "leukemia" if CANKIND1_A = 12; else fill "liver cancer" if CANKIND1_A = 13; else fill "lung cancer" if CANKIND1_A = 14; else fill "lymphoma" if CANKIND1_A = 15; else fill "melanoma" if CANKIND1_A = 16; else fill "mouth/tongue/lip cancer" if CANKIND1_A = 17; else fill "ovarian cancer" if CANKIND1_A = 18; else fill "pancreatic cancer" if CANKIND1_A = 19; else fill "prostate cancer" if CANKIND1_A = 20; else fill "rectal cancer" if CANKIND1_A = 21; else fill "skin (melanoma) cancer" if CANKIND1_A = 22; else fill "skin (non-melanoma) cancer" if CANKIND1_A = 23; else fill "skin (don't know kind) cancer" if CANKIND1_A = 24; else fill "stomach cancer" if CANKIND1_A = 25; else fill "testicular cancer" if CANKIND1_A = 26; else fill "throat/pharynx cancer" if CANKIND1_A = 27; else fill "thyroid cancer" if CANKIND1_A = 28; else fill "uterine cancer" if CANKIND1_A = 29; else fill "other cancer" if CANKIND1_A = 30

Response:

001-120	Range of values
997	Refused
999	Don't Know

Universe:

Sample Adults 18+ who were ever told they had cancer

Skip Instructions:

<1-120,DK> [goto CANKIND2\_A]  
 <RF> if CANKIND1\_A=RF [goto next section] else [goto CANKIND2\_A]  
 If number in CANAGE1\_A gt GEN.AGE\_FINAL[PX\_A] [goto ERR\_CANAGE1\_A]

**Hard Edit:**

Check Text	Check Description	Check Text
ERR_CANAGE1_A	CANAGE1_A years with cancer greater than age hard edit	{check } ^CANAGE1_A years old is older than age ^SA_AGE.  Please correct.

2024 National Health Interview Survey (NHIS) Questionnaire

CAN: Cancer

Question ID: CAN.0040.00.1 Variable: CANKIND2\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Have you EVER had any other kinds of cancer?

\* If yes, ask respondent for second kind of cancer, enter code.

\* If no, enter '96' for no more.

Response:

01	Bladder
02	Blood
03	Bone
04	Brain
05	Breast
06	Cervix/Cervical
07	Colon
08	Esophagus/Esophageal
09	Gallbladder
10	Kidney
11	Larynx-trachea
12	Leukemia
13	Liver
14	Lung
15	Lymphoma
16	Melanoma
17	Mouth/tongue/lip
18	Ovary/Ovarian
19	Pancreas/Pancreatic
20	Prostate
21	Rectum/Rectal
22	Skin (melanoma)
23	Skin (non-melanoma)
24	Skin (don't know kind)
25	Stomach
26	Testis/Testicular
27	Throat - pharynx
28	Thyroid
29	Uterus/Uterine
30	Other



96	No more
97	Refused
99	Don't Know

**Universe:**

Sample Adults 18+ who were ever told they had cancer and mentioned or didn't know a first type of cancer OR gave a valid age or did not know age for first cancer

**Skip Instructions:**

```
If GEN.SEX_FINAL[PX_A]=1 and CANKIND2_A IN (6,18,29) [goto ERR1_CANKIND_A]
elseif GEN.SEX_FINAL[PX_A]=2 and CANKIND2_A IN (20,26) [goto ERR2_CANKIND_A]
<1-30,RF,DK> [goto CANAGE2_A]
<96> [goto next section]
```

2024 National Health Interview Survey (NHIS) Questionnaire

CAN: Cancer

Question ID: CAN.0050.00.1 Variable: CANAGE2\_A Interview Module: Adult Content Type: Annual Core

Question Text:

How old were you when a doctor or other health professional first told you that you had ^CANKIND2?

\* Enter 1 if reported age is 1 or younger.

Fills:

CANKIND2	Description	{Value of CANKIND2_A}
	Instruction	If CANKIND2_A = R,D fill "this cancer"; else fill "bladder cancer" if CANKIND2_A = 1; else fill "blood cancer" if CANKIND2_A = 2; else fill "bone cancer" if CANKIND2_A = 3; else fill "brain cancer" if CANKIND2_A = 4; else fill "breast cancer" if CANKIND2_A = 5; else fill "cervical cancer" if CANKIND2_A = 6; else fill "colon cancer" if CANKIND2_A = 7; else fill "esophageal cancer" if CANKIND2_A = 8; else fill "gallbladder cancer" if CANKIND2_A = 9; else fill "kidney cancer" if CANKIND2_A = 10; else fill "larynx-trachea cancer" if CANKIND2_A = 11; else fill "leukemia" if CANKIND2_A = 12; else fill "liver cancer" if CANKIND2_A = 13; else fill "lung cancer" if CANKIND2_A = 14; else fill "lymphoma" if CANKIND2_A = 15; else fill "melanoma" if CANKIND2_A = 16; else fill "mouth/tongue/lip cancer" if CANKIND2_A = 17; else fill "ovarian cancer" if CANKIND2_A = 18; else fill "pancreatic cancer" if CANKIND2_A = 19; else fill "prostate cancer" if CANKIND2_A = 20; else fill "rectal cancer" if CANKIND2_A = 21; else fill "skin (melanoma) cancer" if CANKIND2_A = 22; else fill "skin (non-melanoma) cancer" if CANKIND2_A = 23; else fill "skin (don't know kind) cancer" if CANKIND2_A = 24; else fill "stomach cancer" if CANKIND2_A = 25; else fill "testicular cancer" if CANKIND2_A = 26; else fill "throat/pharynx cancer" if CANKIND2_A = 27; else fill "thyroid cancer" if CANKIND2_A = 28; else fill "uterine cancer" if CANKIND2_A = 29; else fill "other cancer" if CANKIND2_A = 30

Response:

001-120	Range of values
997	Refused
999	Don't Know

Universe:

Sample Adults 18+ who selected a second kind of cancer or don't know the second kind of cancer or refused the second kind of cancer

Skip Instructions:

<1-120,DK> [goto CANKIND3\_A]  
 <RF> if CANKIND2\_A=RF [goto next section] else [goto CANKIND3\_A]  
 If CANAGE2\_A gt GEN.AGE\_FINAL[PX\_A] [goto ERR\_CANAGE2\_A]

**Hard Edit:**

Check Text	Check Description	Check Text
ERR_CANAGE2_A	CANAGE2_A age greater than years with cancer hard edit	{check } ^CANAGE2_A years old is older than age ^SA_AGE.  Please correct.

2024 National Health Interview Survey (NHIS) Questionnaire

CAN: Cancer

Question ID: CAN.0060.00.1 Variable: CANKIND3\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Have you EVER had any other kinds of cancer?

\* If yes, ask respondent for third kind of cancer, enter code.

\* If no, enter '96' for no more.

Response:

01	Bladder
02	Blood
03	Bone
04	Brain
05	Breast
06	Cervix/Cervical
07	Colon
08	Esophagus/Esophageal
09	Gallbladder
10	Kidney
11	Larynx-trachea
12	Leukemia
13	Liver
14	Lung
15	Lymphoma
16	Melanoma
17	Mouth/tongue/lip
18	Ovary/Ovarian
19	Pancreas/Pancreatic
20	Prostate
21	Rectum/Rectal
22	Skin (melanoma)
23	Skin (non-melanoma)
24	Skin (don't know kind)
25	Stomach
26	Testis/Testicular
27	Throat - pharynx
28	Thyroid
29	Uterus/Uterine
30	Other

96	No more
97	Refused
99	Don't Know

**Universe:**

Sample Adults 18+ who selected a second kind of cancer or don't know the second kind of cancer or gave a valid age for second cancer or did not know age for second cancer

**Skip Instructions:**

```
If GEN.SEX_FINAL=1 and CANKIND3_A IN (6,18,29) [goto ERR1_CANKIND_A]
elseif GEN.SEX_FINAL=2 and CANKIND3_A IN (20,26) [goto ERR2_CANKIND_A]
<1-30,RF,DK>[goto CANAGE3_A]
<96> [goto next section]
```

2024 National Health Interview Survey (NHIS) Questionnaire

CAN: Cancer

Question ID: CAN.0070.00.1 Variable: CANAGE3\_A Interview Module: Adult Content Type: Annual Core

Question Text:

How old were you when a doctor or other health professional first told you that you had ^CANKIND3?

\* Enter 1 if reported age is 1 or younger.

Fills:

CANKIND3	Description	{Value of CANKIND3_A}
	Instruction	If CANKIND3_A = R,D fill "this cancer"; else fill "bladder cancer" if CANKIND3_A = 1; else fill "blood cancer" if CANKIND3_A = 2; else fill "bone cancer" if CANKIND3_A = 3; else fill "brain cancer" if CANKIND3_A = 4; else fill "breast cancer" if CANKIND3_A = 5; else fill "cervical cancer" if CANKIND3_A = 6; else fill "colon cancer" if CANKIND3_A = 7; else fill "esophageal cancer" if CANKIND3_A = 8; else fill "gallbladder cancer" if CANKIND3_A = 9; else fill "kidney cancer" if CANKIND3_A = 10; else fill "larynx-trachea cancer" if CANKIND3_A = 11; else fill "leukemia" if CANKIND3_A = 12; else fill "liver cancer" if CANKIND3_A = 13; else fill "lung cancer" if CANKIND3_A = 14; else fill "lymphoma" if CANKIND3_A = 15; else fill "melanoma" if CANKIND3_A = 16; else fill "mouth/tongue/lip cancer" if CANKIND3_A = 17; else fill "ovarian cancer" if CANKIND3_A = 18; else fill "pancreatic cancer" if CANKIND3_A = 19; else fill "prostate cancer" if CANKIND3_A = 20; else fill "rectal cancer" if CANKIND3_A = 21; else fill "skin (melanoma) cancer" if CANKIND3_A = 22; else fill "skin (non-melanoma) cancer" if CANKIND3_A = 23; else fill "skin (don't know kind) cancer" if CANKIND3_A = 24; else fill "stomach cancer" if CANKIND3_A = 25; else fill "testicular cancer" if CANKIND3_A = 26; else fill "throat/pharynx cancer" if CANKIND3_A = 27; else fill "thyroid cancer" if CANKIND3_A = 28; else fill "uterine cancer" if CANKIND3_A = 29; else fill "other cancer" if CANKIND3_A = 30

Response:

001-120	Range of values
997	Refused
999	Don't Know

Universe:

Sample Adults 18+ who selected a third kind of cancer or don't know or refused the third kind of cancer

Skip Instructions:

<1-120,DK> [goto CANMORE\_A]  
 <RF> if CANKIND3\_A=RF [goto next section] else [goto CANMORE\_A]  
 if CANAGE3\_A gt GEN.AGE\_FINAL[PX\_A] [goto ERR\_CANAGE3\_A]

**Hard Edit:**

Check Text	Check Description	Check Text
ERR_CANAGE3_A	CANAGE3_A age with cancer greater than age	{check }  ^CANAGE3_A years old is older than age ^SA_AGE.  Please correct.

2024 National Health Interview Survey (NHIS) Questionnaire

CAN: Cancer

Question ID: CAN.0080.00.1 Variable: CANMORE\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Did you have any other kinds of cancer?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who selected a third kind of cancer or don't know the third kind of cancer or selected a valid age for third type of cancer or did not know age for third type of cancer

Skip Instructions:

<1,2,RF,DK> [goto next section]



2024 National Health Interview Survey (NHIS) Questionnaire

DIB: Diabetes

Question ID: DIB.0010.00.1 Variable: PREDIB\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Has a doctor or other health professional EVER told you that you had prediabetes or borderline diabetes?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> If GEN.SEX\_FINAL[PX\_A]=2 [goto GESDIB\_A]  
elseif GEN.SEX\_FINAL[PX\_A]=1,RF,DK [goto DIBEV\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

DIB: Diabetes

Question ID: DIB.0020.00.1 Variable: GESDIB\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Has a doctor or other health professional EVER told you that you had gestational diabetes, a type of diabetes that occurs ONLY during pregnancy?

\* **Read if necessary:** *Gestational diabetes is diabetes that you did not have before being pregnant and goes away after you are pregnant. Pregnant women are usually screened for gestational diabetes during the 24th to 28th week of pregnancy.*

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Female Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto DIBEV\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

DIB: Diabetes

Question ID: DIB.0030.00.1 Variable: DIBEV\_A Interview Module: Adult Content Type: Annual Core

Question Text:

^NOTPREGDM a doctor or other health professional EVER told you that you had diabetes?

Fills:

NOTPREGDM	Description	Has/Not including (gestational diabetes, prediabetes), has
	Instruction	If GESDIB_A ne 1 AND PREDIB_A ne 1: "Has" If GESDIB_A=1 AND PREDIB_A ne 1: "Not including gestational diabetes, has" If PREDIB_A=1 AND GESDIB_A ne 1: "Not including prediabetes, has" If GESDIB_A=1 AND PREDIB_A=1: "Not including prediabetes or gestational diabetes, has"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto DIBAGE\_A]  
<2,RF,DK> if PREDIB\_A=1 [goto DIBPILL\_A]  
else if PREDIB\_A=2,RF,DK [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

DIB: Diabetes

Question ID: DIB.0040.00.1 Variable: DIBAGE\_A Interview Module: Adult Content Type: Annual Core

Question Text:

How old were you when a doctor or other health professional FIRST told you that you had diabetes^NOTPREGDM2?

\* Enter '1' if reported age is 1 or younger.

Fills:

NOTPREGDM2	Description	not including (gestational diabetes, prediabetes)
	Instruction	If GESDIB_A ne 1 AND PREDIB_A ne 1: NO FILL If GESDIB_A=1 AND PREDIB_A ne 1: ", not including gestational diabetes" If PREDIB_A=1 AND GESDIB_A ne 1: ", not including prediabetes" If GESDIB_A=1 AND PREDIB_A=1: ", not including prediabetes or gestational diabetes"

Response:

001-120	Range of values
997	Refused
999	Don't Know

Universe:

Sample Adults 18+ who were told they had diabetes

Skip Instructions:

<1-120,RF,DK> if DIBAGE\_A gt GEN.AGE\_FINAL [goto ERR\_DIBAGE\_A]  
else [goto DIBPILL\_A]

Hard Edit:

Check Text	Check Description	Check Text
ERR_DIBAGE_A	DIBAGE_A age greater than SA age hard edit	{check }  ^DIBAGE_A years old is older than your age ^SA_AGE.  Please correct.

2024 National Health Interview Survey (NHIS) Questionnaire

DIB: Diabetes

Question ID: DIB.0050.00.1 Variable: DIBPILL\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Are you NOW taking diabetic pills to lower your blood sugar? These are sometimes called oral agents or oral hypoglycemic agents.

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who were told they had prediabetes and/or diabetes

Skip Instructions:

<1-2,RF,DK> [goto DIBINS\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

DIB: Diabetes

Question ID: DIB.0060.00.1 Variable: DIBINS\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Insulin can be taken by shot or pump. Are you NOW taking insulin?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who were told they had prediabetes and/or diabetes

Skip Instructions:

```
<1> if DIBEV_A=1 [goto DIBINSTIME_A]
else [goto DIBGLP_A]
<2,RF,DK> [goto DIBGLP_A]
```

2024 National Health Interview Survey (NHIS) Questionnaire

DIB: Diabetes

Question ID: DIB.0070.00.3 Variable: DIBINSTIME\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Thinking back to when you were first diagnosed with diabetes, how long was it before you started taking insulin?

Response:

1	Less than 1 month
2	1 month to less than 6 months
3	6 months to less than 1 year
4	1 year or more
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have diabetes and currently take insulin

Skip Instructions:

<1-4,RF,DK> [goto DIBINSSTOP\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

DIB: Diabetes

Question ID: DIB.0080.00.3 Variable: DIBINSSTOP\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Since you started taking insulin, have you ever stopped taking it for more than 6 months?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have diabetes and are taking insulin

Skip Instructions:

```
<1> if DIBINSTIME_A IN (1,2,3) [goto DIBINSSTYR_A]  
else [goto DIBGLP_A]  
<2,RF,DK> [goto DIBGLP_A]
```



2024 National Health Interview Survey (NHIS) Questionnaire

DIB: Diabetes

Question ID: DIB.0090.00.3 Variable: DIBINSSTYR\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Was this only during the first year after you were diagnosed with diabetes?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have diabetes, who started taking insulin less than 1 year from when they were diagnosed with diabetes, and who stopped taking insulin for more than 6 months

Skip Instructions:

<1,2,RF,DK> [goto DIBGLP\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

DIB: Diabetes

Question ID: DIB.0130.00.4 Variable: DIBGLP\_A Interview Module: Adult Content Type: Emerging Content

Question Text:

^INSULIN NOW taking any injectable medications to lower your blood sugar or lose weight?

\* **Read if necessary:** *These medications include GLP-1 injectables, such as Ozempic® (oh-ZEM-pik), Wegovy® (Wee-GOH-vee), Saxenda®, Victoza®, Trulicity®, Mounjaro® (mount-JER-roh), and Byetta®.*

Fills:

INSULIN	Description	Other than insulin, are you/Are you
	Instruction	If DIBINS_A=1, fill: "Other than insulin, are you" else, fill: "Are you"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who were told they had prediabetes and/or diabetes

Skip Instructions:

<1,2,RF,DK> if DIBEV\_A=1 [goto DIBTYPE\_A]  
else [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

DIB: Diabetes

Question ID: DIB.0140.00.1 Variable: DIBTYPE\_A Interview Module: Adult Content Type: Annual Core

Question Text:

According to your doctor or other health professional, what type of diabetes do you have? Is it type 1, type 2, or some other type? If you don't remember or weren't told, that's OK.

Response:

1	Type 1
2	Type 2
3	Other type of diabetes
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who were told they had diabetes

Skip Instructions:

<1-3,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

CON: Other Chronic Conditions

Question ID: CON.0010.00.1 Variable: COPDEV\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Have you EVER been told by a doctor or other health professional that you had  
...Chronic Obstructive Pulmonary Disease, C.O.P.D., emphysema, or chronic bronchitis?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto ARTHEV\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

CON: Other Chronic Conditions

Question ID: CON.0020.00.1 Variable: ARTHEV\_A Interview Module: Adult Content Type: Annual Core

Question Text:

\* **Read if necessary:** *Have you EVER been told by a doctor or other health professional that you had*

*...Some form of arthritis, rheumatoid arthritis, gout, lupus, or fibromyalgia (fy-bro-my-AL-jee-uh)?*

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto DEMENEV\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

CON: Other Chronic Conditions

Question ID: CON.0030.00.1 Variable: DEMENEV\_A Interview Module: Adult Content Type: Annual Core

Question Text:

\* **Read if necessary:** *Have you EVER been told by a doctor or other health professional that you had*

*...Dementia, including Alzheimer's disease?*

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto ANXEV\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

CON: Other Chronic Conditions

Question ID: CON.0040.00.1 Variable: ANXEV\_A Interview Module: Adult Content Type: Annual Core

Question Text:

\* **Read if necessary:** Have you EVER been told by a doctor or other health professional that you had

...Any type of anxiety disorder?

\* **Read if necessary:** Some common types of anxiety disorders include generalized anxiety disorder, social anxiety disorder, panic disorder, post-traumatic stress disorder, obsessive-compulsive disorder, and phobias.

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto DEPEV\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

CON: Other Chronic Conditions

Question ID: CON.0050.00.1 Variable: DEPEV\_A Interview Module: Adult Content Type: Annual Core

Question Text:

\* **Read if necessary:** Have you EVER been told by a doctor or other health professional that you had

...Any type of depression?

\* **Read if necessary:** Some common types of depression include major depression (or major depressive disorder), bipolar depression, dysthymia, post-partum depression, and seasonal affective disorder.

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto next section]



2024 National Health Interview Survey (NHIS) Questionnaire

RCN: Rotating Conditions

Question ID: RCN.0010.00.2 Variable: KIDWEAKEV\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

\* **Read if necessary:** *Have you EVER been told by a doctor or other health professional that you had*

*...Weak or failing kidneys?*

\* **Read if necessary:** *Do not include kidney stones, bladder infections, or incontinence.*

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto HEPEV\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

RCN: Rotating Conditions

Question ID: RCN.0030.00.2 Variable: LIVEREV\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

\* **Read if necessary:** *Have you EVER been told by a doctor or other health professional that you had*

*...Cirrhosis (suh-ROE-sis) or any other kind of long-term liver condition?*

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

SCE: Sponsored Conditions-Ever

Question ID: RCN.0020.00.2 Variable: HEPEV\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

\* **Read if necessary:** *Have you EVER been told by a doctor or other health professional that you had*

*...Hepatitis?*

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto LIVEREV\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

SCE: Sponsored Conditions-Ever

Question ID: SCE.0010.00.3 Variable: CROHNSEV\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Have you EVER been told by a doctor or other health professional that you had  
...Crohn's (Croans) disease?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto ULCCOLEV\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

SCE: Sponsored Conditions-Ever

Question ID: SCE.0020.00.3 Variable: ULCCOLEV\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

\* **Read if necessary:** *Have you EVER been told by a doctor or other health professional that you had*

*...Ulcerative Colitis?*

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto PSOREV\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

SCE: Sponsored Conditions-Ever

Question ID: SCE.0030.00.3 Variable: PSOREV\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

\* **Read if necessary:** Have you EVER been told by a doctor or other health professional that you had

...Psoriasis (sore-EYE-ah-sis)?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

CFS: Chronic Fatigue Section

Question ID: CFS.0010.00.3 Variable: CFSEV\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

\* **Read if necessary:** *Have you EVER been told by a doctor or other health professional that you had*

*...Chronic Fatigue Syndrome (CFS) or Myalgic Encephalomyelitis (My-AL-jick In-seff-ah-low-my-uh-LIE-tiss) (ME)?*

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto CFSNOW\_A]  
<2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

CFS: Chronic Fatigue Section

Question ID: CFS.0020.00.3 Variable: CFSNOW\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Do you still have Chronic Fatigue Syndrome (CFS) or ME?

\* **Read if necessary:** ME is also known as Myalgic Encephalomyelitis (My-AL-jick In-seff-ah-Low-my-uh-LIE-tiss).

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have been told by a doctor or other health professional that they had Chronic Fatigue Syndrome or Myalgic Encephalomyelitis

Skip Instructions:

<1,2,RF,DK> [goto next section]



2024 National Health Interview Survey (NHIS) Questionnaire

TSH: Taste and Smell Health Conditions

Question ID: TSH.0010.00.3 Variable: COLDFLU12M\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

During the past 12 months, have you had a head cold or flu for longer than a month?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto DRYMTH12M\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

TSH: Taste and Smell Health Conditions

Question ID: TSH.0020.00.3 Variable: DRYMTH12M\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

During the past 12 months, have you had persistent dry mouth?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

ISN: Immunosuppression

Question ID: ISN.0010.00.3 Variable: MEDRXTRT\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

In the past 12 months, have you taken prescription medication or had any medical treatments that a doctor or other health professional told you would weaken your immune system?

\* **Read if necessary:** *Examples include steroid or corticosteroid (Core-tih-coe-STAIR-oid) pills, such as prednisone (PRED-nuh-sown), or other oral or injected medications for treating many types of autoimmune conditions or certain cancers.*

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto HLTHCOND\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

ISN: Immunosuppression

Question ID: ISN.0020.00.3 Variable: HLTHCOND\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Do you currently have a health condition that a doctor or other health professional told you weakens the immune system^MEDTRT?

\* **Read if necessary:** *Examples include certain kinds of Leukemia, Lymphoma, or HIV infection.*

Fills:

MEDTRT	Description	, even without related medications or treatments
	Instruction	If MEDRXTRT_A=1, fill: ", even without related medications or treatments"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

ALG: Allergies

Question ID: ALG.0010.00.2 Variable: ALGINTRO\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

The next set of questions are about different types of allergies.

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto CURRESP\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

ALG: Allergies

Question ID: ALG.0020.00.2 Variable: CURRESP\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

Do you get symptoms such as sneezing, runny nose, or itchy or watery eyes due to hay fever, seasonal or year-round allergies?

\* **Read if necessary:** Hay fever, seasonal or year-round allergies may also be known as environmental allergies, allergic rhinitis or allergic conjunctivitis.

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto DXRESP\_A]  
<2,RF,DK> [goto CURFOOD\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

ALG: Allergies

Question ID: ALG.0030.00.2 Variable: DXRESP\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

Have you ever been told by a doctor or other health professional that you had hay fever, seasonal or year-round allergies?

\* **Read if necessary:** *Hay fever, seasonal or year-round allergies may also be known as environmental allergies, allergic rhinitis or allergic conjunctivitis.*

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with a current respiratory allergy

Skip Instructions:

<1,2,RF,DK> [goto CURFOOD\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

ALG: Allergies

Question ID: ALG.0040.00.2 Variable: CURFOOD\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

The next question is about food allergies. People with food allergies have reactions such as hives, vomiting, trouble breathing, or throat tightening that occur within two hours of eating a specific food.

Do you have an allergy to one or more foods?

\* **Read if necessary:** *Food allergies are different from food intolerances, such as lactose and gluten intolerance, and other digestive disorders, including irritable bowel syndrome.*

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto DXFOOD\_A]  
<2,RF,DK> [goto CURSKIN\_A]



2024 National Health Interview Survey (NHIS) Questionnaire

ALG: Allergies

Question ID: ALG.0050.00.2 Variable: DXFOOD\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

Have you ever been told by a doctor or other health professional that you had an allergy to one or more foods?

\* **Read if necessary:** *Food allergies are different from food intolerances, such as lactose and gluten intolerance, and other digestive disorders, including irritable bowel syndrome.*

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with a current food allergy

Skip Instructions:

<1,2,RF,DK> [goto CURSKIN\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

ALG: Allergies

Question ID: ALG.0060.00.2 Variable: CURSKIN\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

The next question is about an allergic skin condition. Do you get an itchy rash due to eczema or atopic dermatitis?

\* **Read if necessary:** *The rash can be dry, scaly, bumpy, or crusty and lasts for several days or longer without treatment. Eczema is different from hives which come and go in a few hours.*

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto DXSKIN\_A]  
<2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

ALG: Allergies

Question ID: ALG.0070.00.2 Variable: DXSKIN\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

Have you ever been told by a doctor or other health professional that you had eczema or atopic dermatitis?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with a current skin allergy

Skip Instructions:

<1,2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

BMI: Current pregnancy, height, weight

Question ID: BMI.0010.00.1 Variable: PREGNOW\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Are you currently pregnant?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Female Sample Adults 18-49 or age is don't know or refused

Skip Instructions:

<1,2,RF,DK> [goto HEIGHTFT\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

BMI: Current pregnancy, height, weight

Question ID: BMI.0020.01.1 Variable: HEIGHTFT\_A Interview Module: Adult Content Type: Annual Core

Question Text:

How tall are you without shoes?

\* Enter M to record metric measurements.

\* If ^SANAME's height is less than 2 feet, enter 2. If ^SANAME's height is greater than 7 feet, enter 7.

Fills:

SANAME	Description	Sample Adult's name
	Instruction	Sample Adult's name

Response:

02	2 feet
03	3 feet
04	4 feet
05	5 feet
06	6 feet
07	7 feet
M	Answered in Metric
97	Refused
99	Don't Know

Universe:

Sample Adult 18+

Skip Instructions:

If HEIGHTFT\_A NE <2-7,RF,DK,M> [goto ERR1\_HEIGHTFT\_A]  
 If HEIGHTFT\_A = <2,3> [goto ERR2\_HEIGHTFT\_A]

<2-7> [goto HEIGHTIN\_A]  
 <RF,DK> [goto WEIGHTLB\_A]  
 <M> [goto HEIGHTM\_A]

Hard Edit:

Check Text	Check Description	Check Text
ERR1_HEIGHTFT_A	Hard edit for height in feet	{check }  Only 2-7, Don't Know/Refused or M allowed in this field.  Please correct.

**Soft Edit:**

Check Text	Check Description	Check Text
ERR2_HEIGHTFT_A	Soft edit to verify height in feet	{signal }  Respondent's height in feet is ^HEIGHTFT?  Please verify.

2024 National Health Interview Survey (NHIS) Questionnaire

BMI: Current pregnancy, height, weight

Question ID: BMI.0020.02.1 Variable: HEIGHTIN\_A Interview Module: Adult Content Type: Annual Core

Question Text:

\* Enter inches.

\* Enter '0' if exactly ^HEIGHTFT feet tall.

Fills:

HEIGHTFT	Description	{Value of HEIGHTFT_A}
	Instruction	Fill value from Adult.BMI.HEIGHTFT_A

Response:

00	0 inches
01	1 inch
02	2 inches
03	3 inches
04	4 inches
05	5 inches
06	6 inches
07	7 inches
08	8 inches
09	9 inches
10	10 inches
11	11 inches
97	Refused
99	Don't Know

Universe:

Sample Adult 18+ and height is 2-7ft

Skip Instructions:

<0-11,RF,DK> [goto WEIGHTLB\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

BMI: Current pregnancy, height, weight

Question ID: BMI.0020.04.1 Variable: HEIGHTM\_A Interview Module: Adult Content Type: Annual Core

Question Text:

How tall are you without shoes?

\* Enter height in metric.

\* If the height is given in centimeters, press '0' at meters and enter the measure in centimeters (241 centimeters maximum).

Response:

0	0 meters
1	1 meter
2	2 meters
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who choose to give their height in metric measurements

Skip Instructions:

<0-2> [goto HEIGHTCM\_A]

<RF,DK> [goto WEIGHTLB\_A]



2024 National Health Interview Survey (NHIS) Questionnaire

BMI: Current pregnancy, height, weight

Question ID: BMI.0020.05.1 Variable: HEIGHTCM\_A Interview Module: Adult Content Type: Annual Core

Question Text:

- \* Enter centimeters.
- \* Enter height in metric.
- \* If ^SANAME's height is greater than 241 centimeters, enter 241.

Fills:

SANAME	Description	Sample Adult's name
	Instruction	Sample Adult's name

Response:

000-241	Range of values
997	Refused
999	Don't Know

Universe:

Sample Adults 18+ who entered 0 to 2 meters for height

Skip Instructions:

<0-241,RF,DK> [goto WEIGHTLB\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

BMI: Current pregnancy, height, weight

Question ID: BMI.0030.01.1 Variable: WEIGHTLB\_A Interview Module: Adult Content Type: Annual Core

Question Text:

^PREGWEIGH

\* Enter M to record metric measurements.

\* If ^SANAME's weight is less than 50 pounds, enter 50. If ^SANAME's weight is greater than 500 pounds, enter 500.

Fills:

PREGWEIGH	Description	How much did you weigh before your pregnancy?/How much do you weigh?
	Instruction	If GEN.SEX_FINAL=2 AND PREGNOW_A=1: "How much did you weigh before your pregnancy?" else: "How much do you weigh?"
SANAME	Description	Sample Adult's name
	Instruction	Sample Adult's name

Response:

050-500	Range of values
M	Answered in Metric
997	Refused
999	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

If WEIGHTLB\_A lt 50 or WEIGHTLB\_A gt 500 [goto ERR1\_WEIGHTLB\_A]  
elseif ((GEN.SEX\_FINAL[PX\_A]=1 and (WEIGHTLB\_A lt 113 or WEIGHTLB\_A gt 316)) or (GEN.SEX\_FINAL [PX\_A]=2 and (WEIGHTLB\_A lt 96 or WEIGHTLB\_A gt 293)) or (GEN.SEX\_FINAL[PX\_A] IN (RF,DK) and (WEIGHTLB\_A lt 96 or WEIGHTLB\_A gt 316))) [goto ERR2\_WEIGHTLB\_A]

<50-500,RF,DK> [goto next section]

<M> [goto WEIGHTKG\_A]

Hard Edit:

Check Text	Check Description	Check Text
ERR1_WEIGHTLB_A	SA weight pounds hard edit	{check }
		Weight is out of range. Only "50-500" or "M" or "Don't know/Refused" allowed in this field.

Soft Edit:

Check Text	Check Description	Check Text
ERR2_WEIGHTLB_A	SA weight pounds soft edit	{signal }
		Please verify that the weight was entered correctly. Probe only if necessary.

2024 National Health Interview Survey (NHIS) Questionnaire

BMI: Current pregnancy, height, weight

Question ID: BMI.0030.02.1 Variable: WEIGHTKG\_A Interview Module: Adult Content Type: Annual Core

Question Text:

^PREGWEIGH

\* Enter weight in kilograms.

\* If ^SANAME's weight is less than 23 kilograms, enter 23. If ^SANAME's weight is greater than 226 kilograms, enter 226.

Fills:

PREGWEIGH	Description	How much did you weigh before your pregnancy?/How much do you weigh?
	Instruction	If GEN.SEX_FINAL=2 AND PREGNOW_A=1: "How much did you weigh before your pregnancy?" else: "How much do you weigh?"
SANAME	Description	Sample Adult's name
	Instruction	Sample Adult's name

Response:

023-226	Range of values
997	Refused
999	Don't Know

Universe:

Sample Adults 18+ who chose to give their weight in metric measurements

Skip Instructions:

If WEIGHTKG\_A lt 23 or WEIGHTKG\_A gt 226 [goto ERR1\_WEIGHTKG\_A]  
elseif ((GEN.SEX\_FINAL[PX]=1 and (WEIGHTKG\_A lt 51 or WEIGHTKG\_A gt 143)) or (GEN.SEX\_FINAL [PX]=2 and (WEIGHTKG\_A lt 43 or WEIGHTKG\_A gt 133)) or (GEN.SEX\_FINAL[PX] IN (RF,DK) and (WEIGHTKG\_A lt 43 or WEIGHTKG\_A gt 143)))[goto ERR2\_WEIGHTKG\_A]

<23-226,RF,DK> [goto next section]

Hard Edit:

Check Text	Check Description	Check Text
ERR1_WEIGHTKG_A	SA weight KG hard edit	{check }  Weight is out of range (23-226).  Please correct.

Soft Edit:

Check Text	Check Description	Check Text
ERR2_WEIGHTKG_A	SA weight KG soft edit	{signal }  Please verify that the weight was entered correctly. Probe only if necessary.

2024 National Health Interview Survey (NHIS) Questionnaire

VIS: Vision

Question ID: VIS.0010.00.1 Variable: VISINTRO\_A Interview Module: Adult Content Type: Annual Core

Question Text:

The next questions ask about difficulties you may have doing certain activities because of a health problem.

\* Enter '1' to continue.

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto WEARGLSS\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

VIS: Vision

Question ID: VIS.0020.00.1 Variable: WEARGLSS\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Do you wear glasses or contact lenses?

\* **Read if necessary:** *Persons who wear glasses to read or to do other occasional tasks should answer yes to this question.*

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto VISIONDF\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

VIS: Vision

Question ID: VIS.0030.00.1 Variable: VISIONDF\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Do you have difficulty ^AGLASSCNTS? Would you say no difficulty, some difficulty, a lot of difficulty, or you cannot do this at all?

Fills:

AGLASSCNTS	Description	seeing, even when wearing glasses or contact lenses/seeing
	Instruction	If WEARGLSS_A=1 fill "seeing, even when wearing glasses or contact lenses"; else fill "seeing"

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-4,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

HEA: Hearing

Question ID: HEA.0010.00.1 Variable: HEARAIID\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Do you use a hearing aid?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1> [HEARAIIDFR\_A]  
<2,RF,DK> [HEARINGDF\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

HEA: Hearing

Question ID: HEA.0020.00.1 Variable: HEARAIDFR\_A Interview Module: Adult Content Type: Annual Core

Question Text:

How often do you use your hearing aid(s)? Would you say all of the time, some of the time, rarely, or never?

Response:

1	All of the time
2	Some of the time
3	Rarely
4	Never
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who use a hearing aid

Skip Instructions:

<1-4,RF,DK> [HEARINGDF\_A]



2024 National Health Interview Survey (NHIS) Questionnaire

HEA: Hearing

Question ID: HEA.0030.00.1 Variable: HEARINGDF\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Do you have difficulty hearing<sup>^</sup>HEARAID? Would you say no difficulty, some difficulty, a lot of difficulty, or you cannot do this at all?

Fills:

HEARAID	Description	, even when using your hearing aid(s)
	Instruction	If HEARAID_A=1, fill: ", even when using your hearing aid (s)" else NO FILL

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-3,RF,DK> [goto HEARQTRM\_A]  
<4> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

HEA: Hearing

Question ID: HEA.0040.00.2 Variable: HEARQTRM\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

Do you have difficulty hearing what is said in a conversation with one other person in a quiet room^HEARAID? Would you say no difficulty, some difficulty, a lot of difficulty, or you cannot do this at all?

Fills:

HEARAID	Description	, even when using your hearing aid(s)
	Instruction	If HEARAID_A=1, fill: ", even when using your hearing aid (s)" else NO FILL

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have no difficulty, some difficulty or a lot of difficulty hearing, even when using a hearing aid or refused or don't know

Skip Instructions:

<1-3,RF,DK> [goto HEARNYRM\_A]  
<4> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

HEA: Hearing

Question ID: HEA.0050.00.2 Variable: HEARNYRM\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

Do you have difficulty hearing what is said in a conversation with one other person in a noisier room^HEARAID?

\* **Read if necessary:** *Would you say no difficulty, some difficulty, a lot of difficulty, or you cannot do this at all?*

Fills:

HEARAID	Description	, even when using your hearing aid(s)
	Instruction	If HEARAID_A=1, fill: ", even when using your hearing aid (s)" else NO FILL

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have no difficulty, some difficulty, or a lot of difficulty, hearing what is said in a conversation with one other person in a quiet room, even when wearing their hearing aid(s) or refuse or don't know

Skip Instructions:

<1-4,RF,DK>[goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

MOB: Mobility

Question ID: MOB.0010.00.1 Variable: DIFF\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Do you have difficulty walking or climbing steps? Would you say no difficulty, some difficulty, a lot of difficulty, or you cannot do this at all?

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-4,RF,DK> [goto EQUIP\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

MOB: Mobility

Question ID: MOB.0020.00.1 Variable: EQUIP\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Do you use any equipment or receive help for getting around?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto CANEWLKR\_A]  
<2,RF,DK> [goto WLK100\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

MOB: Mobility

Question ID: MOB.0030.00.1 Variable: WLK100\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Do you have difficulty walking 100 yards on level ground, that would be about the length of one football field or one city block? Would you say no difficulty, some difficulty, a lot of difficulty, or you cannot do this at all?

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who do not use equipment or receive help for getting around or refused or don't know

Skip Instructions:

<1-3,RF,DK> [goto WLK13M\_A]  
<4> [goto STEPS\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

MOB: Mobility

Question ID: MOB.0040.00.1 Variable: WLK13M\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Do you have difficulty walking a third of a mile on level ground, that would be the length of five football fields or five city blocks?

\* **Read if necessary:** *Would you say no difficulty, some difficulty, a lot of difficulty, or you cannot do this at all?*

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have no difficulty, some difficulty, or a lot of difficulty walking 100 yards or refused or don't know

Skip Instructions:

<1-4,RF,DK> [goto STEPS\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

MOB: Mobility

Question ID: MOB.0050.00.1 Variable: STEPS\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Do you have difficulty walking up or down 12 steps?

\* **Read if necessary:** *Would you say no difficulty, some difficulty, a lot of difficulty, you cannot do this at all?*

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who do not use equipment or receive help for getting around or refused or don't know

Skip Instructions:

<1-4,RF,DK> [goto next section]



2024 National Health Interview Survey (NHIS) Questionnaire

MOB: Mobility

Question ID: MOB.0060.00.1 Variable: CANEWLKR\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Do you use any of the following...

...Cane or walker?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who use equipment or receive help for getting around

Skip Instructions:

<1,2,RF,DK> [goto WCHAIR\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

MOB: Mobility

Question ID: MOB.0070.00.1 Variable: WCHAIR\_A Interview Module: Adult Content Type: Annual Core

Question Text:

\* **Read if necessary:** *Do you use any of the following?*

...Wheelchair or scooter?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who use equipment or receive help for getting around

Skip Instructions:

<1,2,RF,DK> [goto PERASST\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

MOB: Mobility

Question ID: MOB.0080.00.1 Variable: PERASST\_A Interview Module: Adult Content Type: Annual Core

Question Text:

\* **Read if necessary:** *Do you use any of the following?*

...Someone's assistance?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who use equipment or receive help for getting around

Skip Instructions:

<1,2,RF,DK> [goto NOEQWLK100\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

MOB: Mobility

Question ID: MOB.0090.00.1 Variable: NOEQWLK100\_A Interview Module: Adult Content Type: Annual Core

Question Text:

WITHOUT THE USE OF YOUR AID, do you have difficulty walking 100 yards on level ground, that would be about the length of one football field or one city block? Would you say no difficulty, some difficulty, a lot of difficulty, or you cannot do this at all?

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who use equipment or receive help for getting around

Skip Instructions:

<1-3,RF,DK> [goto NOEQWLK13M\_A]  
<4> [goto NOEQSTEPS\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

MOB: Mobility

Question ID: MOB.0100.00.1 Variable: NOEQWLK13M\_A Interview Module: Adult Content Type: Annual Core

Question Text:

WITHOUT THE USE OF YOUR AID, do you have difficulty walking a third of a mile on level ground, that would be the length of five football fields or five city blocks?

\* **Read if necessary:** *Would you say no difficulty, some difficulty, a lot of difficulty, or you cannot do this at all?*

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have no difficulty, some difficulty, or a lot of difficulty walking 100 yards without the use of their aid or refused or don't know

Skip Instructions:

<1-4,RF,DK> [goto NOEQSTEPS\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

MOB: Mobility

Question ID: MOB.0110.00.1 Variable: NOEQSTEPS\_A Interview Module: Adult Content Type: Annual Core

Question Text:

WITHOUT THE USE OF YOUR AID, do you have difficulty walking up or down 12 steps?

\* **Read if necessary:** *Would you say no difficulty, some difficulty, a lot of difficulty, or you cannot do this at all?*

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who use equipment or receive help for getting around

Skip Instructions:

<1-4,RF,DK> if WCHAIR\_A ne 1 [goto EQWLK100\_A]  
else [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

MOB: Mobility

Question ID: MOB.0120.00.1 Variable: EQWLK100\_A Interview Module: Adult Content Type: Annual Core

Question Text:

WHEN USING YOUR AID, do you have difficulty walking 100 yards on level ground, that would be about the length of one football field or one city block?

\* **Read if necessary:** *Would you say no difficulty, some difficulty, a lot of difficulty, or you cannot do this at all?*

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who use equipment or receive help for getting around but do not use a wheelchair or scooter or refused or don't know

Skip Instructions:

<1-3,RF,DK> [goto EQWLK13M\_A]  
<4> [goto EQSTEPS\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

MOB: Mobility

Question ID: MOB.0130.00.1 Variable: EQWLK13M\_A Interview Module: Adult Content Type: Annual Core

Question Text:

WHEN USING YOUR AID, do you have difficulty walking a third of a mile on level ground, that would be the length of five football fields or five city blocks?

\* **Read if necessary:** *Would you say no difficulty, some difficulty, a lot of difficulty, or you cannot do this at all?*

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have no difficulty, some difficulty, or a lot of difficulty walking 100 yards, when using their aid or refused or don't know

Skip Instructions:

<1-4,RF,DK> [goto EQSTEPS\_A]



2024 National Health Interview Survey (NHIS) Questionnaire

MOB: Mobility

Question ID: MOB.0140.00.1 Variable: EQSTEPS\_A Interview Module: Adult Content Type: Annual Core

Question Text:

WHEN USING YOUR AID, do you have difficulty walking up or down 12 steps?

\* **Read if necessary:** *Would you say no difficulty, some difficulty, a lot of difficulty, or you cannot do this at all?*

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who use equipment or receive help for getting around but do not use a wheelchair or scooter

Skip Instructions:

<1-4,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

COM: Communication

Question ID: COM.0010.00.1 Variable: COMDIFF\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Using your usual language, do you have difficulty communicating, for example, understanding or being understood?

\* **Read if necessary:** *Would you say no difficulty, some difficulty, a lot of difficulty, or you cannot do this at all?*

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-4,RF,DK> [goto COMUSESL\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

COM: Communication

Question ID: COM.0020.00.2 Variable: COMUSESL\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

Do you use sign language?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

COG: Cognition

Question ID: COG.0010.00.1 Variable: COGMEMDFF\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Do you have difficulty remembering or concentrating?

*\*Read if necessary: Would you say no difficulty, some difficulty, a lot of difficulty, or you cannot do this at all?*

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,RF,DK> [goto next section]

<2-4> [goto COGTYPEDFF\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

COG: Cognition

Question ID: COG.0020.00.1 Variable: COGTYPEDFF\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Is that a difficulty with remembering, concentrating, or both?

Response:

1	Difficulty remembering only
2	Difficulty concentrating only
3	Difficulty with both remembering and concentrating
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have some difficulty, a lot of difficulty, or are unable to remember or concentrate

Skip Instructions:

<1,3> [goto COGFRQDFF\_A]  
<2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

COG: Cognition

Question ID: COG.0030.00.1 Variable: COGFRQDFF\_A Interview Module: Adult Content Type: Annual Core

Question Text:

How often do you have difficulty remembering? Would you say sometimes, often, or all of the time?

Response:

1	Sometimes
2	Often
3	All of the time
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have difficulty remembering or remembering and concentrating

Skip Instructions:

<1-3,RF,DK> [goto COGAMTDFE\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

COG: Cognition

Question ID: COG.0040.00.1 Variable: COGAMTDFD\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Do you have difficulty remembering a few things, a lot of things, or almost everything?

Response:

1	A few things
2	A lot of things
3	Almost everything
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have difficulty remembering or remembering and concentrating

Skip Instructions:

<1-3,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

UPP: Self-care and Upper Body

Question ID: UPP.0010.00.1 Variable: UPPSLFCR\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Do you have difficulty with self care, such as washing all over or dressing? Would you say no difficulty, some difficulty, a lot of difficulty, or you cannot do this at all?

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-4,RF,DK> [goto UPPRAISE\_A]



2024 National Health Interview Survey (NHIS) Questionnaire

UPP: Self-care and Upper Body

Question ID: UPP.0020.00.1 Variable: UPPRAISE\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Do you have difficulty raising a 2 liter bottle of water or soda from waist to eye level?

\* **Read if necessary:** *Would you say no difficulty, some difficulty, a lot of difficulty, or you cannot do this at all?*

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-4,RF,DK> [goto UPPOBJCT\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

UPP: Self-care and Upper Body

Question ID: UPP.0030.00.1 Variable: UPPOBJCT\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Do you have difficulty using your hands and fingers, such as picking up small objects, for example, a button or pencil, or opening or closing containers or bottles?

*\*Read if necessary: Would you say no difficulty, some difficulty, a lot of difficulty, or you cannot do this at all?*

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-4,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

SOC: Social Functioning

Question ID: SOC.0010.00.1 Variable: SOCERRNDS\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Because of a physical, mental, or emotional condition, do you have difficulty doing errands alone such as visiting a doctor's office or shopping?

\* **Read if necessary:** *Would you say no difficulty, some difficulty, a lot of difficulty, or you cannot do this at all?*

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-4,RF,DK> [goto SOCSCCLPAR\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

SOC: Social Functioning

Question ID: SOC.0020.00.1 Variable: SOCSCCLPAR\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Because of a physical, mental, or emotional condition, do you have difficulty participating in social activities such as visiting friends, attending clubs and meetings, or going to parties?

\* **Read if necessary:** *Would you say no difficulty, some difficulty, a lot of difficulty, or you cannot do this at all?*

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-4,RF,DK> [goto SOCWRKLIM\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

SOC: Social Functioning

Question ID: SOC.0030.00.1 Variable: SOCWRKLIM\_A Interview Module: Adult Content Type: Annual Core

Question Text:

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

\* **Read if necessary:** *Work includes paid work, volunteer work, school work, and homework.*

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

ADO: Age of Disability Onset

Question ID: ADO.0010.00.3 Variable: DEVDONSET\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

You said that you have difficulty with ^DIFF. Did ^THISDIFF begin before age 22?

Fills:

DIFF	Description	walking/climbing steps/walking or climbing steps/communicating/remembering/concentrating/remembering or concentrating/self-care/doing errands alone
	Instruction	<p>if (MOB.WLK100_A IN (3,4) or MOB.WLK13M_A IN (3,4) or MOB.NOEQWLK100_A IN (3,4) or MOB.NOEQWLK13M_A IN (3,4)), then fill "walking"</p> <p>if (MOB.STEPS_A IN (3,4) or MOB.NOEQSTEPS_A IN (3,4)), then fill "climbing steps"</p> <p>if none of MOB.WLK100_A, MOB.WLK13M_A, MOB.NOEQWLK100_A, MOB.NOEQWLK13M_A, MOB.STEPS_A, or MOB.NOEQSTEPS_A = 3 or 4, but MOB.DIFF_A = 3 or 4, then fill "walking or climbing steps"</p> <p>If COM.COMDIFF_A IN (3,4), then fill "communicating"</p> <p>If COG.COGMEMDFF_A IN (3,4), If COG.COGTYPEDFF_A IN (1,3), then fill "remembering" If COG.COGTYPEDFF_A IN (2,3), then fill "concentrating" If COG.COGTYPEDFF_A IN (DK,RF), then fill "remembering or concentrating"</p> <p>If UPP.UPPSLFCR_A = 3 or 4, then fill "self-care"</p> <p>If SOC.SOCERRNDS_A = 3 or 4, then fill "doing errands alone"</p> <p>If more than two of the above are true, then separate the fills with commas and place an "and" before the last item. If two of the above are true, separate them with "and"</p>
THISDIFF	Description	this difficulty/any of these difficulties
	Instruction	<p>if ADO.countDIFF=1, fill "this difficulty"</p> <p>elseif ADO.countDIFF gt 1, fill "any of these difficulties"</p>

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults age 22+ who said they had a lot of difficulty or could not do the following activities at all: Walking or climbing stairs, communicating, remembering or concentrating, self-care, or doing errands alone

Skip Instructions:

<1,2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0010.00.1 Variable: HICOV\_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

The next questions are about health insurance. Include health insurance obtained through employment or purchased directly as well as government programs like Medicare, Medicaid, and the Children's Health Insurance Program that provide medical care or help pay medical bills. Are you covered by any kind of health insurance or some other kind of health care plan?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

```
<1,RF,DK> [goto HIKIND_A]
<2> if (GEN.AGE_FINAL[PX_A] ge 65 or Roster.HHC.tblAGE.blkPerson[PX_A].AGE65=2) [goto
MCAREPRB_A]
else [goto MCAIDPRB_A]
```

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0020.00.1 Variable: HIKIND\_A Interview Module: Adult Content Type: Annual Core

Question Text:

[F1]

What kinds of health insurance or health care coverage do you have? Is it...Private health insurance, Medicare, Medicare supplement, Medicaid, Children's Health Insurance Program or CHIP, military related health care including TRICARE, CHAMPUS, VA health care and CHAMP-VA, Indian Health Service, a state-sponsored health plan, or an other government program?

\* Enter all that apply, separate with commas.

Response:

01	Private health insurance
02	Medicare
03	Medigap
04	Medicaid
05	Children's Health Insurance Program (CHIP)
06	Military related health care: TRICARE (CHAMPUS) / VA health care / CHAMP-VA
07	Indian Health Service
08	State-sponsored health plan
09	Other government program
10	No coverage of any type
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ covered by any kind of health insurance or health care coverage or refused/don't know if they have insurance or health care coverage.

Skip Instructions:

if more than 1 answer selected and (10 IN HIKIND\_A) [goto ERR1\_HIKIND\_A]  
 elseif (GEN.AGE\_FINAL[PX\_A] ge 65 or (GEN.AGE\_FINAL[PX\_A] IN (RF,DK) and Roster.HHC.tblAGE.blkPerson[PX\_A]=2) and 2 NOT IN HIKIND\_A [goto MCAREPRB\_A]  
 elseif (GEN.AGE\_FINAL[PX\_A] lt 65 or (GEN.AGE\_FINAL[PX\_A] IN (RF,DK) and Roster.HHC.tblAGE.blkPerson[PX\_A].AGE65 IN (1,RF,DK,empty)) and HIKIND\_A IN (10,RF,DK) [goto MCAIDPRB\_A]  
 else [goto SINCOVDE\_A]

Hard Edit:

Check Text	Check Description	Check Text
ERR1_HIKIND_A	Selecting no coverage and other categories hard edit	{check }
		Cannot mark "no coverage of any kind" and another type. Please correct.



2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0030.00.1 Variable: MCAREPRB\_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

Are you covered by Medicare?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 65+ who have not indicated they had Medicare in HIKIND\_A

Skip Instructions:

<1,2,RF,DK> [goto SINCOVDE\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0040.00.1 Variable: MCAIDPRB\_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

There is a program called Medicaid that pays for health care for persons in need. ^STATEMA Are you covered by Medicaid?

Fills:

STATEMA	Description	In ^STATENAME it is also called ^STMEDICAID.
	Instruction	if STMEDICAID ne empty, fill: "In ^STATENAME it is also called ^STMEDICAID." else fill: blank
STATENAME	Description	State name
	Instruction	If ST=AL, fill: Alabama else if ST=AK, fill: Alaska else if ST=AR, fill: Arkansas else if ST=AZ, fill: Arizona else if ST=CA, fill: California else if ST=CO, fill: Colorado else if ST=CT, fill: Connecticut else if ST=DE, fill: Delaware else if ST=DC, fill: District of Columbia else if ST=FL, fill: Florida else if ST=GA, fill: Georgia else if ST=HI, fill: Hawaii else if ST=ID, fill: Idaho else if ST=IL, fill: Illinois else if ST=IN, fill: Indiana else if ST=IA, fill: Iowa else if ST=KS, fill: Kansas else if ST=KY, fill: Kentucky else if ST=LA, fill: Louisiana else if ST=ME, fill: Maine else if ST=MD, fill: Maryland else if ST=MA, fill: Massachusetts else if ST=MI, fill: Michigan else if ST=MN, fill: Minnesota else if ST=MS, fill: Mississippi else if ST=MO, fill: Missouri else if ST=MT, fill: Montana else if ST=NE, fill: Nebraska else if ST=NV, fill: Nevada else if ST=NH, fill: New Hampshire else if ST=NJ, fill: New Jersey else if ST=NM, fill: New Mexico else if ST=NY, fill: New York else if ST=NC, fill: North Carolina else if ST=ND, fill: North Dakota else if ST=OH, fill: Ohio else if ST=OK, fill: Oklahoma else if ST=OR, fill: Oregon else if ST=PA, fill: Pennsylvania else if ST=RI, fill: Rhode Island else if ST=SC, fill: South Carolina else if ST=SD, fill: South Dakota else if ST=TN, fill: Tennessee else if ST=TX, fill: Texas else if ST=UT, fill: Utah else if ST=VT, fill: Vermont else if ST=VA, fill: Virginia else if ST=WA, fill: Washington else if ST=WV, fill: West Virginia else if ST=WI, fill: Wisconsin else if ST=WY, fill: Wyoming
STMEDICAID	Description	State Medicaid name

Instruction	<p>If AL then fill "Alabama Coordinated Health Network (ACHN)"</p> <p>If AK then fill "DenaliCare; Denali KidCare"</p> <p>If AZ then fill "Arizona Health Care Cost Containment System (AHCCCS)"</p> <p>If AR then fill "ARKidsFirst; ARHOME; Provider-Led Arkansas Shared Savings Entity (PASSE)"</p> <p>If CA then fill "Medi-Cal"</p> <p>If CO then fill "Health First Colorado"</p> <p>If CT then fill "HUSKY Health"</p> <p>If DC then fill "DC Medicaid; DC Healthy Families"</p> <p>If DE then fill "Diamond State Health Plan (DSHP)"</p> <p>If FL then fill "FL Statewide Medicaid Managed Care (SMMC)"</p> <p>If GA then fill "Peach State Health Plan (Peach State); Georgia Families"</p> <p>If HI then fill "Med-QUEST; QUEST Integration"</p> <p>If ID then fill "Healthy Connections"</p> <p>If IL then fill "HealthChoice Illinois"</p> <p>If IN then fill "Healthy Indiana Plan (HIP); Hoosier Healthwise; Hoosier Care Connect"</p> <p>If IA then fill "IA Health Link; Iowa Health and Wellness Plan"</p> <p>If KS then fill "KanCare; Kansas Medical Assistance Program (KMAP); OneCare Kansas"</p> <p>If KY then fill "Kentucky Medicaid"</p> <p>If LA then fill "Healthy Louisiana"</p> <p>If ME then fill "MaineCare"</p> <p>If MD then fill "HealthChoice"</p> <p>If MA then fill "MassHealth"</p> <p>If MI then fill "Healthy Michigan Plan (HMP)"</p> <p>If MN then fill "Medical Assistance (MA)"</p> <p>If MS then fill "MississippiCAN"</p> <p>If MO then fill "MO Healthnet"</p> <p>If MT then fill "Montana Medicaid; Healthy Montana Kids Plus (HMK Plus)"</p> <p>If NC then fill "NC Medicaid Managed Care"</p> <p>If ND then fill "North Dakota (ND) Medicaid"</p> <p>If NE then fill "Heritage Health"</p> <p>If NH then fill "NH Medicaid; Medical Assistance Program"</p> <p>If NJ then fill "NJ Family Care"</p> <p>If NM then fill "Centennial Care"</p> <p>If NV then fill "Nevada Medicaid (NVMedicaid)"</p> <p>If NY then fill "New York Medicaid Choice"</p> <p>If OH then fill "Ohio Medicaid Plan; Healthy Families; Healthy Start; Alternative Benefit Plan (ABP)"</p> <p>If OK then fill "SoonerCare; SoonerSelect"</p> <p>If OR then fill "Oregon Health Plan (OHP)"</p> <p>If PA then fill "Medical Assistance (MA); HealthChoices"</p> <p>If RI then fill "RIte Care"</p> <p>If SC then fill "Healthy Connections Prime"</p> <p>If SD then fill "South Dakota Medicaid Assistance"</p> <p>If TN then fill "TennCare"</p> <p>If TX then fill "State of Texas Access Reform (STAR); STAR +PLUS; STAR Kids"</p> <p>If UT then fill "Utah Medicaid; Utah Medicaid Integrated Care (UMIC)"</p> <p>If VT then fill "Green Mountain Care (Vermont Medicaid); Dr. Dynasaur"</p> <p>If VA then fill "Medallion 4.0; Commonwealth Care Plus (CCC Plus)"</p> <p>If WA then fill "Apple Health"</p> <p>If WV then fill "West Virginia State Medicaid Plan; Mountain Health Trust (MHT)"</p> <p>If WI then fill "ForwardHealth; BadgerCare Plus"</p> <p>If WY then fill "Wyoming Medicaid State Plan; WYhealth"</p>
-------------	--

**Response:**

1	Yes
2	No
7	Refused

9	Don't Know
---	------------

**Universe:**

Sample Adults 18-64 who have indicated they are uninsured, refused, or don't know their type of health insurance

**Skip Instructions:**

<1,2,RF,DK> [goto SINCOVDE\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0050.00.1 Variable: SINCOVDE\_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

^INADDITIONARE you covered by a SEPARATE plan that only pays for dental services?

Fills:

INADDITIONARE	Description	In addition to ^HITYPEANOSS, are/Are
	Instruction	If (HIKIND_A=1-9 or MCAREPRB_A=1 or MCAIDPRB_A=1), fill "In addition to ^HITYPEANOSS, are" else fill "Are"
HITYPEANOSS	Description	Type of health care plans without single service plans
	Instruction	fill coverage types from HIKIND_A, except HIKIND_A=10, HIKIND_A=1 fill: "private health insurance" HIKIND_A=2 fill: "Medicare" HIKIND_A=3 fill: "Medicare Supplement or Medigap" HIKIND_A=4 fill: "Medicaid" HIKIND_A=5 fill: "Children's Health Insurance Program (CHIP)" HIKIND_A=6 fill: "military related health care" HIKIND_A=7 fill: "Indian Health Service" HIKIND_A=8 fill: "a state-sponsored health plan" HIKIND_A=9 fill: "an other government program" if MCAREPRB_A=1, fill "Medicare" if MCAIDPRB_A=1, fill "Medicaid"  separate choices with a comma and separate the last two choices with "and"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto SINCOVVS\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0060.00.1 Variable: SINCOVVS\_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

Are you covered by a SEPARATE plan that only pays for vision services?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto SINCOVRX\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0070.00.1 Variable: SINCOVRX\_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

Are you covered by a SEPARATE plan that only pays for prescriptions?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto HICHANGE\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0080.00.1 Variable: HICHANGE\_A Interview Module: Adult Content Type: Annual Core

Question Text:

[F1]

I have recorded you are ^COVEREDA. Is this correct?

Fills:

COVEREDA	Description	not covered by health insurance/covered by ^HITYPEA
	Instruction	if HIKIND_A=10,R,D and (MCAIDPRB_A=2,R,D or MCAREPRB_A=2,R,D) and SINCOVDE_A=2,R,D and SINCOVVS_A=2,R,D and SINCOVRX_A=2,R,D fill: "not covered by health insurance" else fill: "covered by ^HITYPEA"
HITYPEA	Description	Type of health care plans with single service plans
	Instruction	fill coverage types from HIKIND_A, except HIKIND_A=10, HIKIND_A=1 fill: "private health insurance" HIKIND_A=2 fill: "Medicare" HIKIND_A=3 fill: "Medicare Supplement or Medigap" HIKIND_A=4 fill: "Medicaid" HIKIND_A=5 fill: "Children's Health Insurance Program (CHIP)" HIKIND_A=6 fill: "military related health care" HIKIND_A=7 fill: "Indian Health Service" HIKIND_A=8 fill: "a state-sponsored health plan" HIKIND_A=9 fill: "an other government program" if MCAREPRB_A=1, fill "Medicare"; if MCAIDPRB_A=1, fill "Medicaid" If SINCOVDE_A=1 and SINCOVRX_A=2,RF,DK and SINCOVVS_A=2,RF,DK, fill: "a single service dental plan" If SINCOVDE_A=2,RF,DK and SINCOVRX_A=1 and SINCOVVS_A=2,RF,DK, fill: "a single service prescription plan" If SINCOVDE_A=2,RF,DK and SINCOVRX_A=2,RF,DK and SINCOVVS_A=1, fill: "a single service vision plan" If SINCOVDE_A=1 and SINCOVRX_A=1 and SINCOVVS_A=2,RF,DK, fill: "single service dental and prescription plans" If SINCOVDE_A=1 and SINCOVRX_A=2,RF,DK and SINCOVVS_A=1, fill: "single service dental and vision plans" If SINCOVDE_A=2,RF,DK and SINCOVRX_A=1 and SINCOVVS_A=1, fill: "single service vision and prescription plans" If SINCOVDE_A=1 and SINCOVRX_A=1 and SINCOVVS_A=1, fill: "single service dental, vision and prescription plans"  separate choices with a comma and separate the last two choices with "and"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+



**Skip Instructions:**

```
<1,RF,DK>  
if 02 in HIKIND_A or MCAREPRB_A=1[goto MCPART_A]  
else if 04 in HIKIND_A or MCAIDPRB_A=1[goto MACHMN_A]  
else if 01 in HIKIND_A [goto SET_INSPRI_FLAG]  
else if 03 in HIKIND_A [goto SET_INSPRI_FLAG]  
else if 05 in HIKIND_A [goto CHNAME_A]  
else if 08 in HIKIND_A [goto OPNAME_A]  
else if 09 in HIKIND_A [goto OGNAME_A]  
else if 06 in HIKIND_A [goto MILSPC_A]  
else if 07 in HIKIND_A [goto HINOTYR_A]  
else if 10 in HIKIND_A and (MCAIDPRB_A IN (2,RF,DK) or MCAREPRB_A IN (2,RF,DK))[goto HILAST_A]  
else [goto FINISH_A]  
<2> [goto ERR1_HICHANGE_A]
```

**Soft Edit:**

Check Text	Check Description	Check Text
ERR1_HICHANGE_A	Answered health insurance coverage is incorrect	{signal }  Suppress this error to go back to HIKIND_A and update coverage.  Close this error to change your answer to HICHANGE_A.

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0090.00.1 Variable: MCPART\_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

What type of Medicare coverage do you have? Is it Part A - hospital insurance, Part B - medical insurance, or both?

Response:

1	Part A- hospital only
2	Part B- medical only
3	Both Part A and Part B
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with Medicare

Skip Instructions:

<1> [goto MCPARTD\_A]  
<2-3,RF,DK> [goto MCCHOICE\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0100.00.1 Variable: MCCHOICE\_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

Are you enrolled in a Medicare Advantage plan?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with Medicare that have part B Medicare or don't know or refused if they have part B Medicare

Skip Instructions:

<1,2,RF,DK> [goto MCHMO\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0110.00.1 Variable: MCHMO\_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

Are you under a Medicare managed care arrangement, such as an HMO, that is, a Health Maintenance Organization?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with Medicare that have part B Medicare or don't know or refused if they have part B Medicare

Skip Instructions:

```
<1> [goto MCANAME_A]  
<2,RF,DK> if MCCHOICE_A=1 [goto MCANAME_A]  
elseif MCCHOICE_A IN (2,RF,DK) [goto MCPARTD_A]
```

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0120.00.1 Variable: MCANAME\_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

What is the name of your Medicare Advantage or Medicare HMO plan?

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ with a Medicare Advantage plan or a Medicare managed care arrangement

Skip Instructions:

<allow 80,RF,DK> [goto MCDNCOV\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0121.00.1 Variable: MCDNCOV\_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

Does ^MEDADVNAME\_A pay for any of the costs for dental care?

Fills:

MEDADVNAME_A	Description	{value of MCANAME_A}
	Instruction	If MCANAME_A=RESPONSE, fill value of MCANAME_A elseif MCANAME_A IN (DK,RF), fill: "this Medicare Advantage or Medicare HMO plan"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with a Medicare Advantage plan or a Medicare managed care arrangement

Skip Instructions:

<1,2,RF,DK> [goto MCVSCOV\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0122.00.1 Variable: MCVSCOV\_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

Does ^MEDADVNAME\_A pay for any of the costs for routine vision care, such as glasses and contact lenses?

Fills:

MEDADVNAME_A	Description	{value of MCANAME_A}
	Instruction	If MCANAME_A=RESPONSE, fill value of MCANAME_A elseif MCANAME_A IN (DK,RF), fill: "this Medicare Advantage or Medicare HMO plan"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with a Medicare Advantage plan or a Medicare managed care arrangement

Skip Instructions:

<1,2,RF,DK> [goto MCPARTD\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0130.00.1 Variable: MCPARTD\_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

Are you enrolled in Medicare Part D, also known as the Medicare Prescription Drug Plan?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with Medicare

Skip Instructions:

```
<1,2,RF,DK>  
if 04 in HIKIND_A or MCAIDPRB_A=1 [goto MACHMN_A]  
elseif 01 in HIKIND_A [goto SET_INSPRI_FLAG]  
elseif 03 in HIKIND_A [goto SET_INSPRI_FLAG]  
elseif 05 in HIKIND_A [goto CHNAME_A]  
elseif 08 in HIKIND_A [goto OPNAME_A]  
elseif 09 in HIKIND_A [goto OGNAME_A]  
elseif 06 in HIKIND_A [goto MILSPC_A]  
else [goto HINOTYR_A]
```



2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0140.00.1 Variable: MACHMN\_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

The next questions are about Medicaid coverage. What is the name of your Medicaid health plan?

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ with Medicaid coverage

Skip Instructions:

<allow 80,RF,DK> [goto MAXCHNG\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0150.00.1 Variable: MAXCHNG\_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

Was your Medicaid obtained through Healthcare.gov or the ^MARKETPLACE?

Fills:

MARKETPLACE	Description	Health Insurance marketplace names
	Instruction	<p>If no state specified below, fill "Health Insurance Marketplace"</p> <p>If state specified below fill:</p> <p>If CA then fill "Health Insurance Marketplace, such as Covered California"</p> <p>If CO then fill "Health Insurance Marketplace, such as Connect for Health Colorado"</p> <p>If CT then fill "Health Insurance Marketplace, such as Access Health CT"</p> <p>If DC then fill "Health Insurance Marketplace, such as DC Health Link"</p> <p>If ID then fill "Health Insurance Marketplace, such as Your Health Idaho"</p> <p>If KY then fill "Health Insurance Marketplace, such as Kynect"</p> <p>If MA then fill "Health Insurance Marketplace, such as Massachusetts Health Connector"</p> <p>If ME then fill "Health Insurance Marketplace, such as CoverME"</p> <p>If MD then fill "Health Insurance Marketplace, such as Maryland Health Connection"</p> <p>If MN then fill "Health Insurance Marketplace, such as MNsure"</p> <p>If NJ then fill "Health Insurance Marketplace, such as GetCoveredNJ"</p> <p>If NV then fill "Health Insurance Marketplace, such as Nevada Health Link"</p> <p>If NM then fill "Health Insurance Marketplace, such as beWellnm"</p> <p>If NY then fill "Health Insurance Marketplace, such as NY State of Health"</p> <p>If PA then fill "Health Insurance Marketplace, such as Pennie"</p> <p>If RI then fill "Health Insurance Marketplace, such as HealthSource RI"</p> <p>If VA then fill "Health Insurance Marketplace, such as Virginia's Insurance Marketplace"</p> <p>If VT then fill "Health Insurance Marketplace, such as Vermont Health Connect"</p> <p>If WA then fill "Health Insurance Marketplace, such as Washington Healthplanfinder"</p>

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with Medicaid coverage

**Skip Instructions:**

<1,2,RF,DK> [goto MAPREM\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0160.00.1 Variable: MAPREM\_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

A health insurance premium is the amount you or a family member pay each month for health care coverage. Do you or a family member pay a premium for this Medicaid plan?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with Medicaid coverage

Skip Instructions:

<1,2,RF,DK> [goto MADEDUC\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0170.00.1 Variable: MADEDUC\_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

A deductible is the amount you have to pay for health care before your health insurance or health coverage plan will start paying your medical bills. Does your Medicaid plan have an annual deductible?

\* **Read if necessary:** *A deductible is different from a copay (copayment).*

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with Medicaid coverage

Skip Instructions:

```
<1> [goto MAHDHP_A]
<2,RF,DK>
if 01 in HIKIND_A [goto SET_INSPRI_FLAG]
else if 03 in HIKIND_A [goto SET_INSPRI_FLAG]
else if 05 in HIKIND_A [goto CHNAME_A]
else if 08 in HIKIND_A [goto OPNAME_A]
else if 09 in HIKIND_A [goto OGNAM_A]
else if 06 in HIKIND_A [goto MILSPC_A]
else [goto HINOTYR_A]
```

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0180.00.1 Variable: MAHDHP\_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

Is the annual deductible for medical care for this plan less than ^HDHPDED or ^HDHPDED or more?  
If there is a separate deductible for prescription drugs, hospitalization, or out-of-network care, do not include those deductible amounts here.

Fills:

HDHPDED	Description	Deductible threshold (may change in future year)
	Instruction	Fill: \$1,600

Response:

1	Deductible is less than \$1,500
2	Deductible is \$1,500 or more
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with Medicaid coverage who have a deductible

Skip Instructions:

```
<1,2,RF,DK>
if 01 in HIKIND_A [goto SET_INSPRI_FLAG]
elseif 03 in HIKIND_A [goto SET_INSPRI_FLAG]
elseif 05 in HIKIND_A [goto CHNAME_A]
elseif 08 in HIKIND_A [goto OPNAME_A]
elseif 09 in HIKIND_A [goto OGNAME_A]
elseif 06 in HIKIND_A [goto MILSPC_A]
else [goto HINOTYR_A]
```

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0270.00.1 Variable: PLANNAME1\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Earlier I recorded that ^SCNAME was covered by ^HIPNAM1\_C. Are you covered by this same plan as ^SCNAME?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
HIPNAM1_C	Description	{Value of HIPNAM1_C}
	Instruction	Fill value from Child.INS.HIPNAM1_C

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with private health insurance coverage, where the Sample Child interview has already been conducted, the Sample Child is in the same family, and the Sample Child also had private health insurance, and the first private plan is not self only coverage, a plan name was not don't know or refused, and the source and who pays for the coverage is not don't know or refused.

Skip Instructions:

```
<1> if Child.INS.bPlan[1].POLHLD_C ne 1 [goto POLHLDA1_A]
elseif Child.INS.bPlan[1].POLHLD_C=1 [goto PRPOLHP1_A]
<2,RF,DK> if INSPRI2_FLG2_A=1 and INSPRI2_FLG3_A=1 and INSPRI2_FLG4_A=1 and INSPRI2_FLG5_A=1 and
INSPRI_FLG=1 and SAMEFAM_FLG=1 and CHILD.INS.PLANNAME2_C=empty [goto PLANNAME2_A] else [goto
HIPNAM1_A]
```

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0280.00.1 Variable: POLHLDA1\_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

Health insurance plans are usually obtained in one person's name even if other family members are covered by that plan. That person is called the policyholder. Are you the policyholder for ^HIPNAM1\_C?

Fills:

HIPNAM1_C	Description	{Value of HIPNAM1_C}
	Instruction	Fill value from Child.INS.HIPNAM1_C

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with a shared private health plan with the Sample Child, where the child is not the policyholder for their first private plan or refused or don't know.

Skip Instructions:

<1> if INSPRI2\_FLG2\_A=1 and INSPRI2\_FLG3\_A=1 and INSPRI2\_FLG4\_A=1 and INSPRI2\_FLG5\_A=1 [goto PLANNAME2\_A]  
else [goto MORPLAN\_A]  
<2,RF,DK> [goto PRPOLHP1\_A]



2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0290.00.1 Variable: PRPOLHP1\_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

How are you related to the policyholder for ^HIPNAM1\_C? Are you the policyholder's child, spouse, former spouse, or are you related in some other way?

Fills:

HIPNAM1_C	Description	{Value of HIPNAM1_C}
	Instruction	Fill value from Child.INS.HIPNAM1_C

Response:

1	Child
2	Spouse
3	Former spouse
4	Some other relationship
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with a shared private health plan with the Sample Child, where the Child is the policy holder or where the Sample Adult is not the policyholder for the first plan or refused or don't know.

Skip Instructions:

<1-4,RF,DK> if INSPRI2\_FLG2\_A=1 and INSPRI2\_FLG3\_A=1 and INSPRI2\_FLG4\_A=1 and INSPRI2\_FLG5\_A=1  
[goto PLANNAME2\_A]  
else [goto MORPLAN\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0300.00.1 Variable: PLANNAME2\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Earlier I recorded that ^SCNAME was covered by a second plan: ^HIPNAM2\_C. Are you covered by this same plan as ^SCNAME?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
HIPNAM2_C	Description	{Value of HIPNAM2_C}
	Instruction	Fill value from Child.INS.HIPNAM2_C

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with private health insurance coverage, where the Sample Child interview has already been conducted, the Sample Child is in the same family, and the Sample Child also had private health insurance, and listed two plans. The second private plan is not self only coverage, a plan name was not don't know or refused, and the source and who pays for the coverage is not don't know or refused.

Skip Instructions:

```
<1> if Child.INS.bPlan[2].POLHLD_C ne 1 [goto POLHLDA2_A],
if Child.INS.bPlan[2].POLHLD_C=1 [goto PRPOLHP2_A]
<2,RF,DK> if PLANNAME1_A IN(2,RF,DK,empty) [goto HIPNAM1_A]
else [goto MORPLAN_A]
```

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0310.00.1 Variable: POLHLDA2\_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

\* **Read if necessary:** Health insurance plans are usually obtained in one person's name even if other family members are covered by that plan. That person is called the policyholder.

Are you the policyholder for ^HIPNAM2\_C?

Fills:

HIPNAM2_C	Description	{Value of HIPNAM2_C}
	Instruction	Fill value from Child.INS.HIPNAM2_C

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with a shared private health plan with the Sample Child, where the child is not the policyholder for their second private plan or refused or don't know.

Skip Instructions:

```
<1> if PLANNAME1_A IN (2,RF,DK,empty) [goto MORPLAN_A]
elseif 05 in HIKIND_A [goto CHNAME_A]
elseif 08 in HIKIND_A [goto OPNAME_A]
elseif 09 in HIKIND_A [goto OGNAME_A]
elseif 06 in HIKIND_A [goto MILSPC_A]
else [goto HINOTYR_A]

<2,RF,DK>[goto PRPOLHP2_A]
```

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0320.00.1 Variable: PRPOLHP2\_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

How are you related to the policyholder for ^HIPNAM2\_C? Are you the policyholder's child, spouse, former spouse, or are you related in some other way?

Fills:

HIPNAM2_C	Description	{Value of HIPNAM2_C}
	Instruction	Fill value from Child.INS.HIPNAM2_C

Response:

1	Child
2	Spouse
3	Former spouse
4	Some other relationship
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with a shared private health plan with the Sample Child, where the Sample Child is the policy holder for the second plan or the Sample Adult is not the policyholder for the second plan or refused or don't know.

Skip Instructions:

```
<1-4,RF,DK> if PLANNAME1_A IN (2,RF,DK,empty) [goto MORPLAN_A]
elseif 05 in HIKIND_A [goto CHNAME_A]
elseif 08 in HIKIND_A [goto OPNAME_A]
elseif 09 in HIKIND_A [goto OGNAME_A]
elseif 06 in HIKIND_A [goto MILSPC_A]
else [goto HINOTYR_A]
```

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0330.00.1 Variable: HIPNAM1\_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

It is important that we record the complete and accurate name of each private health insurance plan. What is the COMPLETE name of your plan? Do NOT include plans that only provide extra cash while in the hospital or plans that pay for only one type of service such as long term care, accidents, or dental care.

\* **Read if necessary:** *Do you have a health plan card or something with the plan name on it?*

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ enrolled in a Medigap plan or private health insurance and the sample adult did not share or refused or did not know if they shared or did not have a value for both of the two listed private plans for the sample child

Skip Instructions:

<allow 80,RF,DK> [goto MORPLAN\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0340.00.1 Variable: MORPLAN\_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

Are you covered by any other private health insurance plans?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ enrolled in a private health plan where the name of the plan was given or don't know or refused or the sample adult only shared one private plan with the Sample Child.

Skip Instructions:

```
<1> [goto HIPNAM2_A]
<2,RF,DK>
if (PLANNAME1_A=1 or PLANNAME2_A=1) then
  if 05 in HIKIND_A [goto CHNAME_A]
  elseif 08 in HIKIND_A [goto OPNAME_A]
  elseif 09 in HIKIND_A [goto OGNAM_A]
  elseif 06 in HIKIND_A [goto MILSPC_A]
  else [goto HINOTYR_A]
else [goto bPlan[1].POLHLD_A]
```

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0350.00.1 Variable: HIPNAM2\_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

What is the name of that private health insurance plan?

\* **Read if necessary:** *Do you have a health plan card or something with the plan name on it?*

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ with a second private health insurance plan

Skip Instructions:

<allow 80,RF,DK> [goto bPlan[1].POLHLD\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0370.00.1 Variable: POLHLD\_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

I am going to ask you some questions about ^FIRSTPLANA. Health insurance plans are usually obtained in one person's name even if other family members are covered by that plan. That person is called the policyholder. Are you the policyholder for ^THISPLANA?

Fills:

FIRSTPLANA	Description	this plan/this first plan/this ^HIPNAM1_A plan/this second plan/this ^HIPNAM2_A plan
	Instruction	if PlanNum=1 then if HIPNAM1_A IN (RF,DK) and HIPNAM2_A= empty fill: "this plan" elseif HIPNAM1_A IN (RF,DK) fill: "this first plan" else fill: "this ^HIPNAM1_A plan" if PlanNum=2 then if HIPNAM2_A IN (RF,DK) fill: "this second plan" else fill: "this ^HIPNAM2_A plan"
HIPNAM1_A	Description	{Value of HIPNAM1_A}
	Instruction	Fill value from Adult.INS.HIPNAM1_A
HIPNAM2_A	Description	{Value of HIPNAM2_A}
	Instruction	Fill value from Adult.INS.HIPNAM2_A
THISPLANA	Description	this plan/^HIPNAM1_A/^HIPNAM2_A
	Instruction	if PlanNum=1 then if HIPNAM1_A IN (RF,DK) fill: "this plan" else fill: "^HIPNAM1_A" if PlanNum=2 then if HIPNAM2_A IN (RF,DK) fill: "this plan" Else fill: "^HIPNAM2_A"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with private health insurance coverage where a plan name was given or refused or don't know.

Skip Instructions:

<1,RF,DK> [goto PRPLCOV\_A]  
<2> [goto PRPOLH\_A]



2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0380.00.1 Variable: PRPLCOV\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Does this plan cover someone other than yourself?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with private health insurance coverage where a plan name was given or refused or don't know and where the Sample Adult is the policyholder or refused or don't know

Skip Instructions:

<1,2,RF,DK> [goto PLNWRK\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0390.00.1 Variable: PRPOLH\_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

How are you related to the policyholder? Are you the policyholder's child, spouse, former spouse, or are you related in some other way?

Response:

1	Child
2	Spouse
3	Former spouse
4	Some other relationship
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with private health insurance who are not the policyholder

Skip Instructions:

<1-4,RF,DK> [goto PLNWRK\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0400.00.1 Variable: PLNWRK\_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

Which one of these categories best describes how this plan was obtained? Was it obtained through an employer or union, purchased directly, obtained through Healthcare.gov or the Affordable Care Act, also known as Obamacare, obtained through a state or local government or community program or obtained in some other way?

Response:

1	Through an employer, union, or professional association
2	Purchased directly
3	Through Healthcare.gov or the Affordable Care Act, also known as Obamacare
4	Through a state or local government or community program
5	Other
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with private health insurance coverage where a plan name was given or refused or don't know

Skip Instructions:

<1,3> [goto PLNPAY\_A]  
<2,4,RF,DK> [goto PLNEXCHG\_A]  
<5> [goto PLNWKSP\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0410.00.1 Variable: PLNWKSP\_A Interview Module: Adult Content Type: Annual Core

Question Text:

\* **Read if necessary:** *How was this plan obtained?*

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ with private health insurance coverage where a plan name was given or refused or don't know and private health insurance coverage was obtained from an other source

Skip Instructions:

<allow 80,RF,DK> [goto PLNEXCHG\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0420.00.1 Variable: PLNEXCHG\_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

Was the plan obtained through Healthcare.gov or the ^MARKETPLACE?

Fills:

MARKETPLACE	Description	Health Insurance marketplace names
	Instruction	If no state specified below, fill "Health Insurance Marketplace" If state specified below fill:  If CA then fill "Health Insurance Marketplace, such as Covered California" If CO then fill "Health Insurance Marketplace, such as Connect for Health Colorado" If CT then fill "Health Insurance Marketplace, such as Access Health CT" If DC then fill "Health Insurance Marketplace, such as DC Health Link" If ID then fill "Health Insurance Marketplace, such as Your Health Idaho" If KY then fill "Health Insurance Marketplace, such as Kynect" If MA then fill "Health Insurance Marketplace, such as Massachusetts Health Connector" If ME then fill "Health Insurance Marketplace, such as CoverME" If MD then fill "Health Insurance Marketplace, such as Maryland Health Connection" If MN then fill "Health Insurance Marketplace, such as MNSure" If NJ then fill "Health Insurance Marketplace, such as GetCoveredNJ" If NV then fill "Health Insurance Marketplace, such as Nevada Health Link" If NM then fill "Health Insurance Marketplace, such as beWellnm" If NY then fill "Health Insurance Marketplace, such as NY State of Health" If PA then fill "Health Insurance Marketplace, such as Pennie" If RI then fill "Health Insurance Marketplace, such as HealthSource RI" If VA then fill "Health Insurance Marketplace, such as Virginia's Insurance Marketplace" If VT then fill "Health Insurance Marketplace, such as Vermont Health Connect" If WA then fill "Health Insurance Marketplace, such as Washington Healthplanfinder"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with private health insurance coverage where a plan name was given or refused or don't know that is directly purchased, or obtained through a state, local, government or community program, or obtained another way, or refused/don't know how obtained

**Skip Instructions:**

<1,2,RF,DK> [goto PLNPAY\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0430.00.1 Variable: PLNPAY\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Who pays for this health insurance plan?

\* Enter all that apply, separate with commas.

Response:

1	Self or family (living in the household)
2	Employer or union
3	Someone outside the household
4	Medicare
5	Medicaid
6	Other government program
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with private health insurance coverage where a plan name was given or refused or don't know.

Skip Instructions:

```
if <1> IN PLNPAY_A [goto HICOSTN_A]  
else if <2-6> IN PLNPAY_A or PLNPAY_A IN (RF,DK)[goto PRDEDUC_A]
```

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0440.00.1 Variable: HICOSTN\_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

How much ^DOYOUFAM currently spend for health insurance premiums for ^FIRSTPLANA? Please include payroll deductions for premiums.

Fills:

DOYOUFAM	Description	do you/does your family
	Instruction	if PCNT_A=1 fill "do you", else fill "does your family"
FIRSTPLANA	Description	this plan/this first plan/this ^HIPNAM1_A plan/this second plan/this ^HIPNAM2_A plan
	Instruction	if PlanNum=1 then if HIPNAM1_A IN (RF,DK) and HIPNAM2_A= empty fill: "this plan" elseif HIPNAM1_A IN (RF,DK) fill: "this first plan" else fill: "this ^HIPNAM1_A plan" if PlanNum=2 then if HIPNAM2_A IN (RF,DK) fill: "this second plan" else fill: "this ^HIPNAM2_A plan"
HIPNAM1_A	Description	{Value of HIPNAM1_A}
	Instruction	Fill value from Adult.INS.HIPNAM1_A
HIPNAM2_A	Description	{Value of HIPNAM2_A}
	Instruction	Fill value from Adult.INS.HIPNAM2_A

Response:

00001-99995	Range of values
99997	Refused
99999	Don't Know

Universe:

Sample Adults 18+ with private health insurance coverage where a plan name was given or refused or don't know who paid for by self or family

Skip Instructions:

<20000-99995> [goto ERR1\_HICOSTN\_A]  
<1-19999> [goto HICOSTT\_A]  
<RF,DK> [goto PRDEDUC\_A]

Soft Edit:

Check Text	Check Description	Check Text
ERR1_HICOSTN_A		{signal }  [^HICOSTN_A] is unusually high. Please verify. Make corrections if necessary.



2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0440.02.1 Variable: HICOSTT\_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

\* Enter time period for premium payments.

Response:

01	Once a week
02	Once every 2 weeks
03	Once a month
04	Twice a month
05	Every two months
06	Quarterly (every 3 months)
07	Once a year
08	Twice a year
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ with private health insurance coverage where a plan name was given or refused or don't know who gave a premium amount.

Skip Instructions:

<1-8,RF,DK> [goto PRDEDUC\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0450.00.1 Variable: PRDEDUC\_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

A deductible is the amount you have to pay for health care before your health insurance or health coverage plan will start paying your medical bills. Does this health plan have an annual deductible?

\* **Read if necessary:** *A deductible is different from a copay (copayment).*

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with private health insurance plans where a plan name was given or refused or don't know.

Skip Instructions:

<1> [goto PRHDHP\_A]  
<2,RF,DK> [goto INTROCOV\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0460.00.1 Variable: PRHDHP\_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

Is the ^FAM\_A annual deductible for medical care for this plan less than ^HDHPAMT\_A, or ^HDHPAMT\_A or more? If there is a separate deductible for prescription drugs, hospitalization, or out-of-network care, do not include those deductible amounts here.

Fills:

FAM_A	Description	family
	Instruction	if POLHLD_A=2 or PRPLCOV_A=1, fill 'family'. Else no fill.
HDHPAMT_A	Description	^HDHPDED_family/^HDHPDED
	Instruction	if POLHLD_A=2 or PRPLCOV_A=1, fill "^HDHPDED_family" Else fill "^HDHPDED"
HDHPDED_family	Description	Family deductible threshold (may change in future year)
	Instruction	Fill: \$3,200
HDHPDED	Description	Deductible threshold (may change in future year)
	Instruction	Fill: \$1,600

Response:

1	Less than ^HDHPAMT_A
2	^HDHPAMT_A or more
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with private health insurance coverage where a plan name was given or refused or don't know with a deductible

Skip Instructions:

<1> [goto INTROCOV\_A]  
<2,RF,DK> [goto HSAHRA\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0470.00.1 Variable: HSAHRA\_A Interview Module: Adult Content Type: Annual Core

Question Text:

There are special accounts or funds that can be used to pay for medical expenses, sometimes referred to as Health Savings Accounts or HSAs, Health Reimbursement Accounts or HRAs, Personal Care accounts, Personal Medical funds, or Choice funds. These are DIFFERENT from Flexible Spending Accounts or FSAs. Is there one of these accounts or funds with this plan?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with private health insurance coverage where a plan name was given or refused or don't know with a high deductible

Skip Instructions:

<1,2,RF,DK> [goto INTROCOV\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0475.00.1 Variable: INTROCOV\_A Interview Module: Adult Content Type: Annual Core

Question Text:

The next three questions are about services ^FIRSTPLANA may cover.

\* Enter '1' to continue.

Fills:

FIRSTPLANA	Description	this plan/this first plan/this ^HIPNAM1_A plan/this second plan/this ^HIPNAM2_A plan
	Instruction	if PlanNum=1 then if HIPNAM1_A IN (RF,DK) and HIPNAM2_A= empty fill: "this plan" elseif HIPNAM1_A IN (RF,DK) fill: "this first plan" else fill: "this ^HIPNAM1_A plan" if PlanNum=2 then if HIPNAM2_A IN (RF,DK) fill: "this second plan" else fill: "this ^HIPNAM2_A plan"
HIPNAM1_A	Description	{Value of HIPNAM1_A}
	Instruction	Fill value from Adult.INS.HIPNAM1_A
HIPNAM2_A	Description	{Value of HIPNAM2_A}
	Instruction	Fill value from Adult.INS.HIPNAM2_A

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

Sample Adults 18+ with private health insurance coverage where a plan name was given or refused or don't know

Skip Instructions:

<1> [goto PRRXCOV\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0480.00.1 Variable: PRRXCOV\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Does ^FIRSTPLANA pay for any of the costs for medications prescribed by a doctor?

\* **Read if necessary:** *Even if you have not used this benefit, please answer if this plan would cover at least some of the costs if you were prescribed medications.*

Fills:

FIRSTPLANA	Description	this plan/this first plan/this ^HIPNAM1_A plan/this second plan/this ^HIPNAM2_A plan
	Instruction	if PlanNum=1 then if HIPNAM1_A IN (RF,DK) and HIPNAM2_A= empty fill: "this plan" elseif HIPNAM1_A IN (RF,DK) fill: "this first plan" else fill: "this ^HIPNAM1_A plan" if PlanNum=2 then if HIPNAM2_A IN (RF,DK) fill: "this second plan" else fill: "this ^HIPNAM2_A plan"
HIPNAM1_A	Description	{Value of HIPNAM1_A}
	Instruction	Fill value from Adult.INS.HIPNAM1_A
HIPNAM2_A	Description	{Value of HIPNAM2_A}
	Instruction	Fill value from Adult.INS.HIPNAM2_A

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with private health insurance coverage where the name of the plan was given or refused or don't know

Skip Instructions:

<1,2,RF,DK> [goto PRDNCOV\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0490.00.1 Variable: PRDNCOV\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Does ^FIRSTPLANA pay for any of the costs for dental care?

\* **Read if necessary:** *Even if you have not used this benefit, please answer if this plan would cover at least some of the costs if you did have dental care.*

Fills:

FIRSTPLANA	Description	this plan/this first plan/this ^HIPNAM1_A plan/this second plan/this ^HIPNAM2_A plan
	Instruction	if PlanNum=1 then if HIPNAM1_A IN (RF,DK) and HIPNAM2_A= empty fill: "this plan" elseif HIPNAM1_A IN (RF,DK) fill: "this first plan" else fill: "this ^HIPNAM1_A plan" if PlanNum=2 then if HIPNAM2_A IN (RF,DK) fill: "this second plan" else fill: "this ^HIPNAM2_A plan"
HIPNAM1_A	Description	{Value of HIPNAM1_A}
	Instruction	Fill value from Adult.INS.HIPNAM1_A
HIPNAM2_A	Description	{Value of HIPNAM2_A}
	Instruction	Fill value from Adult.INS.HIPNAM2_A

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with private health insurance coverage where the plan name was given or refused or don't know.

Skip Instructions:

<1,2,RF,DK> [goto PRVSCOV\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0500.00.1 Variable: PRVSCOV\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Does ^FIRSTPLANA pay for any of the costs for routine vision care, such as glasses and contact lenses?

\* **Read if necessary:** *Even if you have not used this benefit, please answer if this plan would cover at least some of the costs if you did have vision care.*

Fills:

FIRSTPLANA	Description	this plan/this first plan/this ^HIPNAM1_A plan/this second plan/this ^HIPNAM2_A plan
	Instruction	if PlanNum=1 then if HIPNAM1_A IN (RF,DK) and HIPNAM2_A= empty fill: "this plan" elseif HIPNAM1_A IN (RF,DK) fill: "this first plan" else fill: "this ^HIPNAM1_A plan" if PlanNum=2 then if HIPNAM2_A IN (RF,DK) fill: "this second plan" else fill: "this ^HIPNAM2_A plan"
HIPNAM1_A	Description	{Value of HIPNAM1_A}
	Instruction	Fill value from Adult.INS.HIPNAM1_A
HIPNAM2_A	Description	{Value of HIPNAM2_A}
	Instruction	Fill value from Adult.INS.HIPNAM2_A

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with private health insurance coverage where a plan name was given or refused or don't know.

Skip Instructions:

```
<1,2,RF,DK> If there is another plan [goto bPlan for next plan]
elseif 05 in HIKIND_A [goto CHNAME_A]
elseif 08 in HIKIND_A [goto OPNAME_A]
elseif 09 in HIKIND_A [goto OGNAME_A]
elseif 06 in HIKIND_A [goto MILSPC_A]
else [goto HINOTYR_A]
```



2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0510.00.1 Variable: CHNAME\_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

Earlier I recorded that you are covered by the Children's Health Insurance Program or CHIP. What is the name of the plan?

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ with a CHIP plan

Skip Instructions:

<allow 80,RF,DK> [goto CHXCHNG\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0520.00.1 Variable: CHXCHNG\_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

Was your CHIP plan obtained through Healthcare.gov or the ^MARKETPLACE?

Fills:

MARKETPLACE	Description	Health Insurance marketplace names
	Instruction	If no state specified below, fill "Health Insurance Marketplace" If state specified below fill:  If CA then fill "Health Insurance Marketplace, such as Covered California" If CO then fill "Health Insurance Marketplace, such as Connect for Health Colorado" If CT then fill "Health Insurance Marketplace, such as Access Health CT" If DC then fill "Health Insurance Marketplace, such as DC Health Link" If ID then fill "Health Insurance Marketplace, such as Your Health Idaho" If KY then fill "Health Insurance Marketplace, such as Kynect" If MA then fill "Health Insurance Marketplace, such as Massachusetts Health Connector" If ME then fill "Health Insurance Marketplace, such as CoverME" If MD then fill "Health Insurance Marketplace, such as Maryland Health Connection" If MN then fill "Health Insurance Marketplace, such as MNsure" If NJ then fill "Health Insurance Marketplace, such as GetCoveredNJ" If NV then fill "Health Insurance Marketplace, such as Nevada Health Link" If NM then fill "Health Insurance Marketplace, such as beWellnm" If NY then fill "Health Insurance Marketplace, such as NY State of Health" If PA then fill "Health Insurance Marketplace, such as Pennie" If RI then fill "Health Insurance Marketplace, such as HealthSource RI" If VA then fill "Health Insurance Marketplace, such as Virginia's Insurance Marketplace" If VT then fill "Health Insurance Marketplace, such as Vermont Health Connect" If WA then fill "Health Insurance Marketplace, such as Washington Healthplanfinder"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with a CHIP plan

**Skip Instructions:**

<1,2,RF,DK> [goto CHPREM\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0530.00.1 Variable: CHPREM\_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

A health insurance premium is the amount you or a family member pays each month for health care coverage. Do you or a family member pay a premium for this CHIP plan?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with a CHIP plan

Skip Instructions:

<1,2,RF,DK> [goto CHDEDUC\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0540.00.1 Variable: CHDEDUC\_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

A deductible is the amount you have to pay for health care before your health insurance or health coverage plan will start paying your medical bills. Does your CHIP plan have an annual deductible?

\* **Read if necessary:** *A deductible is different from a copay (copayment).*

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with a CHIP plan

Skip Instructions:

```
<1> [goto CHHDHP_A]
<2,RF,DK> if 08 in HIKIND_A [goto OPNAME_A]
  elseif 09 in HIKIND_A [goto OGNAM_A]
  elseif 06 in HIKIND_A [goto MILSPC_A]
  else [goto HINOTYR_A]
```

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0550.00.1 Variable: CHHDHP\_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

Is the annual deductible for medical care for this plan less than ^HDHPDED or ^HDHPDED or more?  
If there is a separate deductible for prescription drugs, hospitalization, or out-of-network care, do not include those deductible amounts here.

Fills:

HDHPDED	Description	Deductible threshold (may change in future year)
	Instruction	Fill: \$1,600

Response:

1	Deductible is less than \$1,500
2	Deductible is \$1,500 or more
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have a CHIP plan deductible

Skip Instructions:

```
<1,2,RF,DK> if 08 in HIKIND_A [goto OPNAME_A]  
elseif 09 in HIKIND_A [goto OGNAME_A]  
elseif 06 in HIKIND_A [goto MILSPC_A]  
else [goto HINOTYR_A]
```

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0560.00.1 Variable: OPNAME\_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

Earlier I recorded that you are covered by a state-sponsored plan. What is the name of the plan?

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ with a state-sponsored plan

Skip Instructions:

<allow 80,RF,DK> [goto OPXCHNG\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0570.00.1 Variable: OPXCHNG\_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

Was your state-sponsored plan obtained through Healthcare.gov or the ^MARKETPLACE?

Fills:

MARKETPLACE	Description	Health Insurance marketplace names
	Instruction	If no state specified below, fill "Health Insurance Marketplace" If state specified below fill:  If CA then fill "Health Insurance Marketplace, such as Covered California" If CO then fill "Health Insurance Marketplace, such as Connect for Health Colorado" If CT then fill "Health Insurance Marketplace, such as Access Health CT" If DC then fill "Health Insurance Marketplace, such as DC Health Link" If ID then fill "Health Insurance Marketplace, such as Your Health Idaho" If KY then fill "Health Insurance Marketplace, such as Kynect" If MA then fill "Health Insurance Marketplace, such as Massachusetts Health Connector" If ME then fill "Health Insurance Marketplace, such as CoverME" If MD then fill "Health Insurance Marketplace, such as Maryland Health Connection" If MN then fill "Health Insurance Marketplace, such as MNsure" If NJ then fill "Health Insurance Marketplace, such as GetCoveredNJ" If NV then fill "Health Insurance Marketplace, such as Nevada Health Link" If NM then fill "Health Insurance Marketplace, such as beWellnm" If NY then fill "Health Insurance Marketplace, such as NY State of Health" If PA then fill "Health Insurance Marketplace, such as Pennie" If RI then fill "Health Insurance Marketplace, such as HealthSource RI" If VA then fill "Health Insurance Marketplace, such as Virginia's Insurance Marketplace" If VT then fill "Health Insurance Marketplace, such as Vermont Health Connect" If WA then fill "Health Insurance Marketplace, such as Washington Healthplanfinder"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with a state-sponsored plan



**Skip Instructions:**

<1,2,RF,DK> [goto OPPREM\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0580.00.1 Variable: OPPREM\_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

A health insurance premium is the amount you or a family member pays each month for health care coverage. Do you or a family member pay a premium for this state-sponsored plan?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with a state-sponsored plan

Skip Instructions:

<1,2,RF,DK> [goto OPDEDUC\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0590.00.1 Variable: OPDEDUC\_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

A deductible is the amount you have to pay for health care before your health insurance or health coverage plan will start paying your medical bills. Does your state-sponsored plan have an annual deductible?

\* **Read if necessary:** *A deductible is different from a copay (copayment).*

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with a state-sponsored plan

Skip Instructions:

```
<1>[goto OPHDHP_A]
<2,RF,DK> if 09 in HIKIND_A [goto OGNAME_A]
  elseif 06 in HIKIND_A [goto MILSPC_A]
  else [goto HINOTYR_A]
```

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0600.00.1 Variable: OPHDHP\_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

Is the annual deductible for medical care for this plan less than ^HDHPDED or ^HDHPDED or more?  
If there is a separate deductible for prescription drugs, hospitalization, or out-of-network care, do not include those deductible amounts here.

Fills:

HDHPDED	Description	Deductible threshold (may change in future year)
	Instruction	Fill: \$1,600

Response:

1	Deductible is less than \$1,500
2	Deductible is \$1,500 or more
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with a state-sponsored plan with a deductible

Skip Instructions:

```
<1,2,RF,DK> if 09 in HIKIND_A [goto OGNAM_A]  
elseif 06 in HIKIND_A [goto MILSPC_A]  
else [goto HINOTYR_A]
```

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0610.00.1 Variable: OGNAME\_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

Earlier I recorded that you are covered by an other government program. What is the name of the plan?

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ who have an other government plan

Skip Instructions:

<allow 80,RF,DK> [goto OGXCHNG\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0620.00.1 Variable: OGXCHNG\_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

Was your other government plan obtained through Healthcare.gov or the ^MARKETPLACE?

Fills:

MARKETPLACE	Description	Health Insurance marketplace names
	Instruction	If no state specified below, fill "Health Insurance Marketplace" If state specified below fill:  If CA then fill "Health Insurance Marketplace, such as Covered California" If CO then fill "Health Insurance Marketplace, such as Connect for Health Colorado" If CT then fill "Health Insurance Marketplace, such as Access Health CT" If DC then fill "Health Insurance Marketplace, such as DC Health Link" If ID then fill "Health Insurance Marketplace, such as Your Health Idaho" If KY then fill "Health Insurance Marketplace, such as Kynect" If MA then fill "Health Insurance Marketplace, such as Massachusetts Health Connector" If ME then fill "Health Insurance Marketplace, such as CoverME" If MD then fill "Health Insurance Marketplace, such as Maryland Health Connection" If MN then fill "Health Insurance Marketplace, such as MNsure" If NJ then fill "Health Insurance Marketplace, such as GetCoveredNJ" If NV then fill "Health Insurance Marketplace, such as Nevada Health Link" If NM then fill "Health Insurance Marketplace, such as beWellnm" If NY then fill "Health Insurance Marketplace, such as NY State of Health" If PA then fill "Health Insurance Marketplace, such as Pennie" If RI then fill "Health Insurance Marketplace, such as HealthSource RI" If VA then fill "Health Insurance Marketplace, such as Virginia's Insurance Marketplace" If VT then fill "Health Insurance Marketplace, such as Vermont Health Connect" If WA then fill "Health Insurance Marketplace, such as Washington Healthplanfinder"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have an other government plan

**Skip Instructions:**

<1,2,RF,DK> [goto OGPREM\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0630.00.1 Variable: OGPREM\_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

A health insurance premium is the amount you or a family member pays each month for health care coverage. Do you or a family member pay a premium for your other government plan?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have an other government plan

Skip Instructions:

<1,2,RF,DK> [goto OGDEDUC\_A]



2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0640.00.1 Variable: OGDEDUC\_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

A deductible is the amount you have to pay for health care before your health insurance or health coverage plan will start paying your medical bills. Does your other government plan have an annual deductible?

\* **Read if necessary:** *A deductible is different from a copay (copayment).*

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with an other government plan

Skip Instructions:

```
<1> [goto OGDHDP_A]  
<2,RF,DK> if 06 in HIKIND_A [goto MILSPC_A]  
else [goto HINOTYR_A]
```

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0650.00.1 Variable: OGDHP\_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

Is the annual deductible for medical care for this plan less than ^HDHPDED or ^HDHPDED or more?  
If there is a separate deductible for prescription drugs, hospitalization, or out-of-network care, do not include those deductible amounts here.

Fills:

HDHPDED	Description	Deductible threshold (may change in future year)
	Instruction	Fill: \$1,600

Response:

1	Deductible is less than \$1,500
2	Deductible is \$1,500 or more
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with an other government plan with a deductible

Skip Instructions:

<1,2,RF,DK> if 06 in HIKIND\_A [goto MILSPC\_A]  
else [goto HINOTYR\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0660.00.1 Variable: MILSPC\_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

Earlier I recorded that you are covered by military related health care. What types of military related health care are you covered by?

\* Enter all that apply, separate with commas.

Response:

1	VA health care
2	TRICARE (CHAMPUS)
3	CHAMP-VA (do not include CHAMPUS)
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with military related health care

Skip Instructions:

<1-3,RF,DK> [goto HINOTYR\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0670.00.1 Variable: HILAST\_A Interview Module: Adult Content Type: Annual Core

Question Text:

How long has it been since you last had health care coverage that paid for doctor's visits or hospital stays?

Response:

0	Never
1	Within the past year (anytime less than 12 months ago)
2	Within the last 2 years (1 year but less than 2 years ago)
3	Within the last 3 years (2 years but less than 3 years ago)
4	Within the last 5 years (3 years but less than 5 years ago)
5	Within the last 10 years (5 years but less than 10 years ago)
6	10 years ago or more
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ without known health insurance and answered no, refused or don't know to the Medicaid probe or the Medicare probe.

Skip Instructions:

<1> [goto HILASTMY\_A]  
<2,3> [goto HISTOPJOB\_A]  
<4,5,6,0,RF,DK> [goto RSNHICOST\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0680.00.1 Variable: HILASTMY\_A Interview Module: Adult Content Type: Annual Core

Question Text:

In the past 12 months, how many months were you without coverage?

\* If less than 1 month, enter '1'.

Response:

01-12	Range of values
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ without known health insurance who last had insurance at some time within the last 12 months

Skip Instructions:

<1-12,RF,DK> [goto HISTOPJOB\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0690.00.1 Variable: HISTOPJOB\_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

Think about the last time that you did have health care coverage that paid for doctor's visits or hospital stays. I am going to read a list of reasons why someone might no longer be enrolled in coverage. Please tell me, yes or no, if this is a reason why you are no longer enrolled in your last health care plan.

You or the policyholder retired, lost a job, or changed employers?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have been uninsured for less than 3 years

Skip Instructions:

<1,2,RF,DK> [goto HISTOPMISS\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0700.00.1 Variable: HISTOPMISS\_A Interview Module: Adult Content Type: Annual Core

Question Text:

\* **Read if necessary:** *Are you no longer enrolled in your last health care plan because...*

You missed a deadline for signing up or paying for the coverage?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have been uninsured for less than 3 years

Skip Instructions:

<1,2,RF,DK> [goto HISTOPAGE\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0710.00.1 Variable: HISTOPAGE\_A Interview Module: Adult Content Type: Annual Core

Question Text:

\* **Read if necessary:** *Are you no longer enrolled in your last health care plan because...*

You became ineligible because of your age or because you left school?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have been uninsured for less than 3 years

Skip Instructions:

<1,2,RF,DK> [goto HISTOPCOST\_A]



2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0720.00.1 Variable: HISTOPCOST\_A Interview Module: Adult Content Type: Annual Core

Question Text:

\* **Read if necessary:** *Are you no longer enrolled in your last health care plan because...*

The cost for your coverage increased?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have been uninsured for less than 3 years

Skip Instructions:

<1,2,RF,DK> [goto HISTOPELIG\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0730.00.1 Variable: HISTOPELIG\_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

\* **Read if necessary:** *Are you no longer enrolled in your last health care plan because...*

You had Medicaid or other public coverage, but were no longer eligible?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have been uninsured for less than 3 years

Skip Instructions:

<1,2,RF,DK> [goto RSNHICOST\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0740.00.1 Variable: RSNHICOST\_A Interview Module: Adult Content Type: Annual Core

Question Text:

^INSREASONS Are you currently uninsured because coverage is not affordable?

Fills:

INSREASONS	Description	RSNHICOST_A Introduction
	Instruction	If HILAST_A IN (0,4,5,6,RF,DK) fill: "There are many reasons why people do not have health insurance coverage." If HILAST_A IN (1,2,3) fill: "We just discussed reasons you lost coverage. Now I am going to ask you some questions about why you haven't obtained coverage."

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ without known health insurance and answered no, refused or don't know to the Medicare probe or the Medicaid probe.

Skip Instructions:

<1,2,RF,DK> [goto RSNHIWANT\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0750.00.1 Variable: RSNHIWANT\_A Interview Module: Adult Content Type: Annual Core

Question Text:

There are other reasons that people do not have health insurance coverage. ^PLUSCOSTA you currently uninsured because...

...you do not need or want coverage?

Fills:

PLUSCOSTA	Description	In addition to cost, are/Are
	Instruction	if RSNHICOST_A = 1 then fill "In addition to cost, are" Else fill "Are"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ without known health insurance and answered no, refused or don't know to the Medicare probe or the Medicaid probe.

Skip Instructions:

<1,2,RF,DK> [goto RSNHIELIG\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0760.00.1 Variable: RSNHIELIG\_A Interview Module: Adult Content Type: Annual Core

Question Text:

\* **Read if necessary:** *There are other reasons that people do not have health insurance coverage.  
^PLUSCOSTA you currently uninsured because...*

...you are not eligible for coverage?

Fills:

PLUSCOSTA	Description	In addition to cost, are/Are
	Instruction	if RSNHICOST_A = 1 then fill "In addition to cost, are" Else fill "Are"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ without known health insurance and answered no, refused or don't know to the Medicaid probe or the Medicare probe

Skip Instructions:

<1,2,RF,DK> [goto RSNHICONF\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0770.00.1 Variable: RSNHICONF\_A Interview Module: Adult Content Type: Annual Core

Question Text:

\* **Read if necessary:** *There are other reasons that people do not have health insurance coverage. ^PLUSCOSTA you currently uninsured because...*

...the process of signing up for coverage is too difficult or confusing?

Fills:

PLUSCOSTA	Description	In addition to cost, are/Are
	Instruction	if RSNHICOST_A = 1 then fill "In addition to cost, are" Else fill "Are"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ without known health insurance and answered no, refused or don't know to the Medicaid probe or the Medicare probe

Skip Instructions:

<1,2,RF,DK> [goto RSNHIMEET\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0780.00.1 Variable: RSNHIMEET\_A Interview Module: Adult Content Type: Annual Core

Question Text:

\* **Read if necessary:** *There are other reasons that people do not have health insurance coverage.  
^PLUSCOSTA you currently uninsured because...*

...you cannot find a plan that meets your needs?

Fills:

PLUSCOSTA	Description	In addition to cost, are/Are
	Instruction	if RSNHICOST_A = 1 then fill "In addition to cost, are" Else fill "Are"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ without known health insurance and answered no, refused or don't know to the Medicaid probe or the Medicare probe

Skip Instructions:

<1,2,RF,DK> [goto RSNHIWAIT\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0790.00.1 Variable: RSNHIWAIT\_A Interview Module: Adult Content Type: Annual Core

Question Text:

\* **Read if necessary:** *There are other reasons that people do not have health insurance coverage.  
^PLUSCOSTA you currently uninsured because...*

...you applied for coverage but it has not started yet?

Fills:

PLUSCOSTA	Description	In addition to cost, are/Are
	Instruction	if RSNHICOST_A = 1 then fill "In addition to cost, are" Else fill "Are"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ without known health insurance and answered no, refused or don't know to the Medicare probe or the Medicaid probe

Skip Instructions:

<1,2,RF,DK> [goto RSNHIOTH\_A]



2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0800.00.1 Variable: RSNHIOTH\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Is there another reason that you currently do not have health insurance coverage?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ without known health insurance and answered no, refused or don't know to the Medicare probe or the Medicaid probe

Skip Instructions:

<1> [goto RSNHIOTHSP\_A]  
<2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0810.00.1 Variable: RSNHIOTHSP\_A Interview Module: Adult Content Type: Annual Core

Question Text:

What is your other reason for not having coverage?

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ who have another reason for not having coverage

Skip Instructions:

<allow 80,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0820.00.1 Variable: HINOTYR\_A Interview Module: Adult Content Type: Annual Core

Question Text:

In the past 12 months, was there any time when you did NOT have ANY health insurance or coverage?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with known health insurance coverage or responded yes to the medicare probe or medicaid probe

Skip Instructions:

<1> [goto HINOTMYR\_A]  
<2,RF,DK> [goto FINISH\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0830.00.1 Variable: HINOTMYR\_A Interview Module: Adult Content Type: Annual Core

Question Text:

In the past 12 months, about how many months were you without coverage?

\* If less than 1 month, enter '1'.

Response:

01-12	Range of values
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ with known health insurance coverage and did not have health insurance for some period of time in the past 12 months

Skip Instructions:

<1-12,RF,DK> [goto FINISH\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0840.00.1 Variable: FINISH\_A Interview Module: Adult Content Type: Annual Core

Question Text:

\* The Sample Adult health insurance section is now complete.

\* Enter '1' to continue.

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

PAY: Difficulty Paying for Health Care

Question ID: PAY.0010.00.1 Variable: PAYINTRO\_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

Now I am going to ask you about your medical bills. Include bills for doctors, dentists, hospitals, therapists, medication, equipment, and nursing home or home care.

^Dormfill

\* Enter '1' to continue.

Fills:

Dormfill	Description	think about family living in family home
	Instruction	If Roster.HHC.tblNAME.bPerson[PX_A].ONOFFCAMPUS=1, fill "When I ask about your family, please think about your family living at ^HNO ^HNOSUF ^STRNAME." else leave blank
HNO	Description	{Value of HNO}
	Instruction	Fill GEN.HNO
HNOSUF	Description	{Value of HNOSUF}
	Instruction	Fill GEN.HNOSUF
STRNAME	Description	{Value of STRNAME}
	Instruction	Fill GEN.STRNAME

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

Sample Adults 18+ living in same family as the Sample Child when the Sample Child PAY section has not been completed  
 or Sample Adults living in same family as Sample Child when the Sample Child respondent is not the Sample Adult and the Sample Child respondent answered don't or refused to PAYBLL12M\_C and PAYNOBLLNW\_C  
 or Sample adults living in different families than the Sample Child

Skip Instructions:

<1> [goto PAYBLL12M\_A]

Replicate To:

PAYINTRO\_C

2024 National Health Interview Survey (NHIS) Questionnaire

PAY: Difficulty Paying for Health Care

Question ID: PAY.0020.00.1 Variable: PAYBLL12M\_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

In the past 12 months, did ^youanyone have problems paying or were unable to pay any medical bills?

\* **Read if necessary:** Include bills for doctors, dentists, hospitals, therapists, medication, equipment, nursing home or home care.

Fills:

youanyone	Description	you/anyone in the family
	Instruction	If GEN.PCNT_A=1 fill "you"; else fill "anyone in the family"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ living in same family as the Sample Child when the Sample Child PAY section has not been completed  
or Sample Adults living in same family as Sample Child when the Sample Child respondent is not the Sample Adult and the Sample Child respondent answered don't or refused to PAYBILL12M\_C and PAYNOBLLNW\_C  
or Sample adults living in different families than the Sample Child

Skip Instructions:

<1,RF,DK> [goto PAYNOBLLNW\_A]  
<2> [goto PAYWORRY\_A]

Replicate To:

PAYBLL12M\_C

2024 National Health Interview Survey (NHIS) Questionnaire

PAY: Difficulty Paying for Health Care

Question ID: PAY.0030.00.1 Variable: PAYNOBLLNW\_A Interview Module: Adult Content Type: Annual Core

Question Text:

^DoyouDoesanyoneinfam currently have any medical bills that you are unable to pay at all?

Fills:

DoyouDoesanyoneinfam	Description	Do you/Does anyone in your family
	Instruction	If GEN.PCNT_A=1 fill "Do you"; else fill "Does anyone in your family"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ where anyone in the family has difficulty playing medical bills or don't know or refused and Sample Adult is living in same family as the Sample Child when the Sample Child PAY section has not been completed  
or Sample Adults living in same family as Sample Child when the Sample Child respondent is not the Sample Adult and the Sample Child respondent answered don't or refused to PAYBILL12M\_C and PAYNOBLLNW\_C  
or Sample adults living in different families than the Sample Child AND who said they/anyone in their family has problems paying their medical bills or don't know or refuse to answer if they/anyone in their family has problems paying bills

Skip Instructions:

<1,2,RF,DK> [goto PAYWORRY\_A]

Replicate To:

PAYNOBLLNW\_C



2024 National Health Interview Survey (NHIS) Questionnaire

PAY: Difficulty Paying for Health Care

Question ID: PAY.0040.00.1 Variable: PAYWORRY\_A Interview Module: Adult Content Type: Annual Core

Question Text:

If you get sick or have an accident, how worried are you that you will be able to pay your medical bills? Are you very worried, somewhat worried, or not at all worried?

Response:

1	Very worried
2	Somewhat worried
3	Not at all worried
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-3,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

CVL: Long COVID

Question ID: CVL.0010.00.3 Variable: CVDINTRO\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

The next set of questions are about coronavirus or COVID-19.

\* Enter '1' to continue.

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto EVERCOVID\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

CVL: Long COVID

Question ID: CVL.0020.00.3 Variable: EVERCOVID\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Have you ever had COVID-19?

\* **Read if necessary:** *Include being told by a doctor or other health professional that you had or likely had COVID-19. Also include antibodies or blood tests as well as other forms of testing for COVID-19, such as a nasal swabbing or throat swabbing. Also include if you had close contact with someone who had COVID-19 and you had symptoms.*

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto LONGCOVID1\_A]  
<2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

CVL: Long COVID

Question ID: CVL.0030.00.3 Variable: LONGCOVID1\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Did you have any symptoms lasting 3 months or longer that you did not have before having COVID-19?

**Read if necessary:** Long term symptoms may include tiredness or fatigue, difficulty thinking, concentrating, forgetfulness or memory problems, sometimes referred to as "brain fog," difficulty breathing or shortness of breath, joint or muscle pain, fast-beating or pounding heart (also known as heart palpitations), chest pain, dizziness on standing, smell or taste loss or alteration to smell or taste, ^menstrual and inability to exercise.

Fills:

menstrual	Description	menstrual changes
	Instruction	If GEN.SEX_FINAL=2,RF,DK and GEN.AGE_FINAL=9-58, fill "menstrual changes," else fill blank

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have ever had COVID-19

Skip Instructions:

<1> [goto SYMPNOW1\_A]  
<2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

CVL: Long COVID

Question ID: CVL.0040.00.3 Variable: SYMPNOW1\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Do you have symptoms NOW?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have ever had COVID-19 and had symptoms lasting 3 months or longer

Skip Instructions:

<1> [goto LCVDACT\_A]  
<2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

CVL: Long COVID

Question ID: CVL.0050.00.3 Variable: LCVDACT\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

How much do these long-term symptoms reduce your ability to carry out day-to-day activities compared with the time before you had COVID-19? Would you say not at all, a little, or a lot?

Response:

1	Not at all
2	A little
3	A lot
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with COVID-19 symptoms lasting 3 months or longer that they did not have before having coronavirus or COVID-19 and they have symptoms now

Skip Instructions:

<1-3,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

TSC: Taste and Smell - COVID

Question ID: TSC.0010.00.3 Variable: CVDSYMSM2\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

When you had coronavirus, or afterwards, did you lose some or all of your sense of smell or did you smell odors that were not there?

\* If the respondent indicates they lost some or all sense of smell or smelled odors that were not there, enter '1' for yes.

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who ever had COVID-19

Skip Instructions:

<1,2,RF,DK> [goto CVDPAROS\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

TSC: Taste and Smell - COVID

Question ID: TSC.0020.00.3 Variable: CVDPAROS\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

When you had coronavirus, or afterwards, did some strong odors smell differently from how they usually smelled?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who ever had COVID-19

Skip Instructions:

```
<1> [goto CVDSMREC2_A]  
<2,RF,DK> if CVDSYMSM2_A=1 [goto CVDSMREC2_A]  
else [goto CVDSYMTST2_A]
```



2024 National Health Interview Survey (NHIS) Questionnaire

TSC: Taste and Smell - COVID

Question ID: TSC.0030.00.3 Variable: CVDSMREC2\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Has your sense of smell fully recovered, partially recovered, or not recovered at all?

\* If the respondent's sense of smell has improved but is still worse than it was before, or if they still smell things that are not there, but less frequently than before, enter '2' for partially recovered.

Response:

1	Fully recovered
2	Partially recovered
3	Not recovered at all
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have ever had COVID-19 and lost some or all of their sense of smell or smelled odors that weren't there or some strong odors smelled differently

Skip Instructions:

<1-3,RF,DK> [goto CVDSYMTST2\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

TSC: Taste and Smell - COVID

Question ID: TSC.0040.00.3 Variable: CVDSYMTST2\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

When you had coronavirus, or afterwards, did you lose some or all of your ability to taste or did you have unwanted tastes or sensations in your mouth that did not go away?

\* If the respondent indicates they lost some or all of their ability to taste or had unwanted tastes or sensations in their mouth that did not go away, enter '1' for yes.

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who ever had COVID-19

Skip Instructions:

<1> [goto CVDSTREC2\_A]  
<2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

TSC: Taste and Smell - COVID

Question ID: TSC.0050.00.3 Variable: CVDTSTREC2\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Has your ability to taste fully recovered, partially recovered, or not recovered at all?

\* If the respondent's ability to taste has improved but is still worse than it was before, or if they still have unwanted tastes or sensations in their mouth, but less frequently than before, enter '2' for partially recovered.

Response:

1	Fully recovered
2	Partially recovered
3	Not recovered at all
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who ever had COVID-19 and lost some or all of their ability to taste or had unwanted tastes or sensations in their mouth that did not go away

Skip Instructions:

<1-3,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

UTZ: Utilization

Question ID: UTZ.0010.00.1 Variable: UTZINTRO\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Now, I would like to ask you about your health care, not including dental care.

\* Enter '1' to continue.

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto LASTDR\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

UTZ: Utilization

Question ID: UTZ.0020.00.1 Variable: LASTDR\_A Interview Module: Adult Content Type: Annual Core

Question Text:

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

\* **Read if necessary:** Do not include appointments by video or phone.

\* **Read if necessary:** Include doctors seen while a patient in a hospital.

\* **Read if necessary:** Do not include dental care.

Response:

0	Never
1	Within the past year (anytime less than 12 months ago)
2	Within the last 2 years (1 year but less than 2 years ago)
3	Within the last 3 years (2 years but less than 3 years ago)
4	Within the last 5 years (3 years but less than 5 years ago)
5	Within the last 10 years (5 years but less than 10 years ago)
6	10 years ago or more
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-6> [goto WELLNESS\_A]

<0,RF,DK> [goto USUALPL\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

UTZ: Utilization

Question ID: UTZ.0030.00.1 Variable: WELLNESS\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Was this a wellness visit, physical, or general purpose check-up?

\* **Read if necessary:** *This kind of visit typically includes: blood pressure, cholesterol, and blood sugar checks, height and weight measurements, and vaccinations. The doctor or other health professional may also discuss topics related to your health such as smoking, alcohol use, diet and exercise. These visits are usually scheduled in advance and occur when you are not sick or injured.*

\* **Read if necessary:** *If a wellness exam was combined with a sick care visit, include this visit.*

\* **Read if necessary:** *An obstetrician/gynecologist (OB/GYN) may perform this visit.*

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have seen a doctor

Skip Instructions:

<1> [goto USUALPL\_A]

<2,RF,DK> [goto WELLVIS\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

UTZ: Utilization

Question ID: UTZ.0040.00.1 Variable: WELLVIS\_A Interview Module: Adult Content Type: Annual Core

Question Text:

About how long has it been since you last saw a doctor or other health professional for a wellness visit, physical, or general purpose check-up?

\* **Read if necessary:** *This kind of visit typically includes: blood pressure, cholesterol, and blood sugar checks, height and weight measurements, and vaccinations. The doctor or other health professional may also discuss topics related to your health such as smoking, alcohol use, diet and exercise. These visits are usually scheduled in advance and occur when you are not sick or injured.*

\* **Read if necessary:** *If a wellness exam was combined with a sick care visit, include this visit.*

\* **Read if necessary:** *An obstetrician/gynecologist (OB/GYN) may perform this visit.*

Response:

0	Never
1	Within the past year (anytime less than 12 months ago)
2	Within the last 2 years (1 year but less than 2 years ago)
3	Within the last 3 years (2 years but less than 3 years ago)
4	Within the last 5 years (3 years but less than 5 years ago)
5	Within the last 10 years (5 years but less than 10 years ago)
6	10 years ago or more
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have seen a doctor, but the last visit was not a wellness visit or they didn't know or refused whether it was a wellness visit

Skip Instructions:

<0-6,RF,DK> [goto USUALPL\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

UTZ: Utilization

Question ID: UTZ.0050.00.1 Variable: USUALPL\_A Interview Module: Adult Content Type: Annual Core

Question Text:

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

Response:

1	Yes
2	There is NO place
3	There is MORE THAN ONE place
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,3,RF,DK> [goto USPLKIND\_A]  
<2> [goto RETURGINT\_A]



2024 National Health Interview Survey (NHIS) Questionnaire

UTZ: Utilization

Question ID: UTZ.0060.00.1 Variable: USPLKIND\_A Interview Module: Adult Content Type: Annual Core

Question Text:

What kind of place ^ISITGOMSTOFT - a doctor's office or health center; an urgent care center, a clinic in a drug store or grocery store; a hospital emergency room; a VA Medical Center or VA outpatient clinic; or some other place?

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

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

Fills:

ISITGOMSTOFT	Description	is it/do you go to most often
	Instruction	If USUALPL_A=1 fill "is it"; else fill "do you go to most often"

Response:

1	A doctor's office or health center
2	Urgent care center or clinic in a drug store or grocery store
3	Hospital emergency room
4	A VA Medical Center or VA outpatient clinic
5	Some other place
6	Does not go to one place most often
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with 1+ usual place of care or who don't know or refused to answer if they have a usual place of care

Skip Instructions:

<1-6,RF,DK> [goto RETURGIN\_T\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

UTZ: Utilization

Question ID: UTZ.0065.00.1 Variable: RETURGINT\_A Interview Module: Adult Content Type: Annual Core

Question Text:

The next questions are about your use of retail health clinics and urgent care centers.

\* Enter '1' to continue.

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto RETAILHC12M\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

UTZ: Utilization

Question ID: UTZ.0070.00.1 Variable: RETAILHC12M\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Retail health clinics are located in a pharmacy, grocery store, or supercenter.

During the past 12 months, how many times have you gone to a retail health clinic about your health?

\* Enter 96 if number is 96 or greater.

\* **Read if necessary:** Common examples of retail health clinics include places like CVS Minute Clinic, Walgreens Health Clinic, or clinics in a Walmart or Kroger supermarket. These clinics can provide common services such as certain vaccinations, as well as testing for or treatment of minor uncomplicated illnesses.

Response:

00-96	Range of values
97	Refused
99	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<0-39,RF,DK> [goto URGCC12M\_A]  
 <40-96> [goto ERR1\_RETAILHC12M\_A]

Soft Edit:

Check Text	Check Description	Check Text
ERR1_RETAILHC12M_A	Retail health clinic 40-96 times	{signal }  ^RETAILHC12M_A is an unusually large number. Did you visit a retail health clinic center about your health ^RETAILHC12M_A times in the past 12 months?  Please verify.

2024 National Health Interview Survey (NHIS) Questionnaire

UTZ: Utilization

Question ID: UTZ.0075.00.1 Variable: URGCC12M\_A Interview Module: Adult Content Type: Annual Core

Question Text:

An urgent care center is located in its own building or space. These centers can provide services such as x-rays and stitches.

During the past 12 months, how many times have you gone to an urgent care center about your health?

\* Enter 96 if number is 96 or greater.

\* Read if necessary: An urgent care center can provide common vaccinations, testing for or treatment of illnesses. They can also treat illnesses or injuries that require immediate care but are not serious enough to require a visit to a hospital emergency room.

\* Read if necessary: This is different from a hospital emergency room.

\* Read if necessary: These centers provide care during business hours, evenings, and weekends.

Response:

00-96	Range of values
97	Refused
99	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<0-39,RF,DK> [goto EMERGE12M\_A]

<40-96> [goto ERR1\_URGCC12M\_A]

Soft Edit:

Check Text	Check Description	Check Text
ERR1_URGCC12M_A	Urgent care 40-96 times	{signal }  ^URGCC12M_A is an unusually large number. Did you visit an urgent care center about your health ^URGCC12M_A times in the past 12 months?  Please verify.



2024 National Health Interview Survey (NHIS) Questionnaire

UTZ: Utilization

Question ID: UTZ.0090.00.1 Variable: HOSPONGT\_A Interview Module: Adult Content Type: Annual Core

Question Text:

During the past 12 months, have you been hospitalized overnight? ^PAST12MER\_A

Fills:

PAST12MER_A	Description	Do not include an overnight stay in the emergency room.
	Instruction	If ((EMERGE12M_A ge 01 and EMERGE12M_A le 96) or EMERGE12M_A IN (RF,DK): Fill: "Do not include an overnight stay in the emergency room."

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto MEDDL12M\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

UTZ: Utilization

Question ID: UTZ.0100.00.1 Variable: MEDDL12M\_A Interview Module: Adult Content Type: Annual Core

Question Text:

During the past 12 months, have you DELAYED getting medical care because of the cost?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto MEDNG12M\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

UTZ: Utilization

Question ID: UTZ.0110.00.1 Variable: MEDNG12M\_A Interview Module: Adult Content Type: Annual Core

Question Text:

During the past 12 months, was there any time when you needed medical care, but DID NOT GET IT because of the cost?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto next section]



2024 National Health Interview Survey (NHIS) Questionnaire

TLH: Telehealth

Question ID: TLH.0010.00.1 Variable: VIRAPP12M\_A Interview Module: Adult Content Type: Annual Core

Question Text:

During the past 12 months, have you had an appointment with a doctor, nurse, or other health professional by video or by phone?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

HIT: Internet access and health information technology

Question ID: HIT.0010.00.4 Variable: ACCSSINT\_A Interview Module: Adult Content Type: Emerging Content

Question Text:

Do you have access to the Internet?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto ACCSSHOM\_A]  
<2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

HIT: Internet access and health information technology

Question ID: HIT.0020.00.4 Variable: ACCSSHOM\_A Interview Module: Adult Content Type: Emerging Content

Question Text:

Do you have access to the Internet from your home?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with access to the Internet

Skip Instructions:

<1,2,RF,DK> [goto HITLOOK\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

HIT: Internet access and health information technology

Question ID: HIT.0030.00.4 Variable: HITLOOK\_A Interview Module: Adult Content Type: Emerging Content

Question Text:

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

To look for health or medical information.

\* **Read if necessary:** *Include Internet and data use through a computer, tablet, smartphone, or other electronic device.*

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with access to the Internet

Skip Instructions:

<1,2,RF,DK> [goto HITCOMM\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

HIT: Internet access and health information technology

Question ID: HIT.0040.00.4 Variable: HITCOMM\_A Interview Module: Adult Content Type: Emerging Content

Question Text:

\* **Read if necessary:** *During the past 12 months, have you used the Internet for any of the following reasons?*

To communicate with a doctor or doctor's office.

\* **Read if necessary:** *Include Internet and data use through a computer, tablet, smartphone, or other electronic device.*

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with access to the Internet

Skip Instructions:

<1,2,RF,DK> [goto HITTEST\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

HIT: Internet access and health information technology

Question ID: HIT.0050.00.4 Variable: HITTEST\_A Interview Module: Adult Content Type: Emerging Content

Question Text:

\* **Read if necessary:** *During the past 12 months, have you used the Internet for any of the following reasons?*

To look up medical test results.

\* **Read if necessary:** *Include Internet and data use through a computer, tablet, smartphone, or other electronic device.*

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with access to the Internet

Skip Instructions:

<1,2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

PMD: Prescription Medication

Question ID: PMD.0010.00.1 Variable: RX12M\_A Interview Module: Adult Content Type: Annual Core

Question Text:

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

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto RXSK12M\_A]  
<2,RF,DK> [goto RXDG12M\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

PMD: Prescription Medication

Question ID: PMD.0020.00.1 Variable: RXSK12M\_A Interview Module: Adult Content Type: Annual Core

Question Text:

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

...You skipped medication doses to save money.

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have taken prescription medication in the past 12 months

Skip Instructions:

<1,2,RF,DK> [goto RXLS12M\_A]



2024 National Health Interview Survey (NHIS) Questionnaire

PMD: Prescription Medication

Question ID: PMD.0030.00.1 Variable: RXLS12M\_A Interview Module: Adult Content Type: Annual Core

Question Text:

\* **Read if necessary:** *During the past 12 months, were any of the following true for you?*

...You took less medication to save money.

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have taken prescribed medication in the past 12 months

Skip Instructions:

<1,2,RF,DK> [goto RXDL12M\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

PMD: Prescription Medication

Question ID: PMD.0040.00.1 Variable: RXDL12M\_A Interview Module: Adult Content Type: Annual Core

Question Text:

\* **Read if necessary:** *During the past 12 months, were any of the following true for you?*

...You DELAYED filling a prescription to save money.

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have taken prescribed medication in the past 12 months

Skip Instructions:

<1,2,RF,DK> [goto RXDG12M\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

PMD: Prescription Medication

Question ID: PMD.0050.00.1 Variable: RXDG12M\_A Interview Module: Adult Content Type: Annual Core

Question Text:

During the past 12 months, was there any time when you needed prescription medication, but DID NOT GET IT because of the cost?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

IMS: Immunization

Question ID: IMS.0010.00.3 Variable: PREGFLUYR\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Were you pregnant any time ^AUGUSTYEAR?

Fills:

AUGUSTYEAR	Description	period of pregnancy
	Instruction	If INTERVIEW_MONTH=1-3, fill "since August 1st, ^LASTYEAR" elseif INTERVIEW_MONTH=4-7, fill "from August ^LASTYEAR through March ^YEAR" elseif INTERVIEW_MONTH=8-12, fill "since August 1st, ^YEAR"
LASTYEAR	Description	Last year
	Instruction	Fill year prior to current year
YEAR	Description	Year of Interview
	Instruction	Current Year

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Female sample adults 18-49 years or age is refused or don't know and who are not currently pregnant or don't know if they are currently pregnant or who are currently pregnant and the interview occurred between April-July

Skip Instructions:

<1,2,DK> [goto LIVEBIRTH\_A]  
<RF> [goto FLUINTRO\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

IMS: Immunization

Question ID: IMS.0020.00.3 Variable: LIVEBIRTH\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

During the past 12 months, did you have a pregnancy that ended in a live birth?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Female sample adults aged 18-49 of age or age is refused or don't know who did not refuse to answer if they are currently pregnant or if they were pregnant in between August and March

Skip Instructions:

<1,2,RF,DK> [goto FLUINTRO\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

IMS: Immunization

Question ID: IMS.0025.00.1 Variable: FLUINTRO\_A Interview Module: Adult Content Type: Annual Core

Question Text:

There are currently vaccines available for seasonal influenza and coronavirus or COVID-19. I will first ask you questions about seasonal flu vaccination and then about coronavirus or COVID-19 vaccination.

\* Enter '1' to continue.

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto SHTFLU12M\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

IMS: Immunization

Question ID: IMS.0030.00.1 Variable: SHTFLU12M\_A Interview Module: Adult Content Type: Annual Core

Question Text:

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

\* **Read if necessary:** *A flu vaccination is usually given in the fall and protects against influenza for the flu season.*

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto SHTFLUM\_A]  
<2,RF,DK> [goto SHTCVD191\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

IMS: Immunization

Question ID: IMS.0040.01.1 Variable: SHTFLUM\_A Interview Module: Adult Content Type: Annual Core

Question Text:

\* 1 of 2

During what month and year did you receive your most recent flu vaccine?

Response:

01	January
02	February
03	March
04	April
05	May
06	June
07	July
08	August
09	September
10	October
11	November
12	December
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ who had a flu shot in the past 12 months

Skip Instructions:

<1-12,DK> [goto SHTFLUY\_A]  
<RF> if Adult.BMI.PREGNOW\_A=1 and GEN.INTERVIEW\_MONTH IN (1,2,3,8,9,10,11,12) [goto FLUPREG\_A]  
elseif PREGFLUYR\_A=1 [goto FLUPREG2\_A]  
else [goto SHTCVD191\_A]



2024 National Health Interview Survey (NHIS) Questionnaire

IMS: Immunization

Question ID: IMS.0040.02.1 Variable: SHTFLUY\_A Interview Module: Adult Content Type: Annual Core

Question Text:

\* 2 of 2

\* Enter year of most recent flu vaccine.

Response:

Year	Year
9997	Refused
9999	Don't Know

Universe:

Sample Adults 18+ who gave a month for their last flu shot or who didn't know the month

Skip Instructions:

```
<valid year,RF,DK>
if SHTFLUM_A and SHTFLUY_A=a future date [goto ERR1_SHTFLUY_A]
elseif SHTFLUM_A and SHTFLUY_A=a date before 12 months ago [goto ERR2_SHTFLUY_A]
elseif PREGNOW_A=1 and GEN.INTERVIEW_MONTH IN (1,2,3,8,9,10,11,12) [goto FLUPREG_A]
elseif PREGFLUYR_A=1 [goto FLUPREG2_A]
else [goto SHTCVD191_A]
```

Hard Edit:

Check Text	Check Description	Check Text
ERR2_SHTFLUY_A	Date > 12 months ago hard edit	{check }  Date more than 12 months ago.  Please correct.
ERR1_SHTFLUY_A	Future date hard edit	{check }  Future date invalid.  Please correct.

2024 National Health Interview Survey (NHIS) Questionnaire

IMS: Immunization

Question ID: IMS.0050.00.3 Variable: FLUPREG\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Did you get a flu vaccination before or during your current pregnancy?

Response:

1	Before pregnancy
2	During pregnancy
7	Refused
9	Don't Know

Universe:

Female Sample Adults 18-49 or refused or don't know their age who are currently pregnant and received a flu vaccination in the past 12 months and the interview takes place in Jan-March or Aug-Dec

Skip Instructions:

<1,2,RF,DK> [goto SHTCVD191\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

IMS: Immunization

Question ID: IMS.0060.00.3 Variable: FLUPREG2\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Earlier you said you were pregnant sometime ^AUGUSTYEAR. Did you get a flu vaccination before, during, or after your pregnancy?

Fills:

AUGUSTYEAR	Description	period of pregnancy
	Instruction	If INTERVIEW_MONTH=1-3, fill "since August 1st, ^LASTYEAR" elseif INTERVIEW_MONTH=4-7, fill "from August ^LASTYEAR through March ^YEAR" elseif INTERVIEW_MONTH=8-12, fill "since August 1st, ^YEAR"
LASTYEAR	Description	Last year
	Instruction	Fill year prior to current year
YEAR	Description	Year of Interview
	Instruction	Current Year

Response:

1	Before pregnancy
2	During pregnancy
3	After pregnancy
7	Refused
9	Don't Know

Universe:

Female Sample Adults 18-49 years of age or refused or don't know their age who reported a pregnancy during August-March and received a flu vaccination in the past 12 months

Skip Instructions:

<1-3,RF,DK> [goto SHTCVD191\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

IMS: Immunization

Question ID: IMS.0061.00.3 Variable: SHTCVD191\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

The next questions are about coronavirus or COVID-19 vaccination. Have you had at least one dose of a COVID-19 vaccination?

\* **Read if necessary:** *The COVID-19 vaccination has been available since 2020.*

\* **Read if necessary:** *COVID-19 vaccines approved for use in the United States are made by Pfizer-BioNTech, also called Comirnaty® (koe-mir'-na-tee), Moderna, also called Spikevax®, Johnson and Johnson, and Novavax.*

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto SHTCVD19NM2\_A]  
<2,RF,DK> [goto SHTPNUEV\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

IMS: Immunization

Question ID: IMS.0062.00.3 Variable: SHTCVD19NM2\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

How many COVID-19 vaccinations have you received?

Response:

1	1 vaccination
2	2 vaccinations
3	3 or more vaccinations
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have received a COVID-19 vaccination

Skip Instructions:

<1-3> [goto CVDVAC1M2\_A]  
<RF,DK> [goto SHTPNUEV\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

IMS: Immunization

Question ID: IMS.0063.01.3 Variable: CVDVAC1M2\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

\* 1 of 2

During what month and year did you receive your MOST RECENT COVID-19 vaccination?

\* Enter month of most recent COVID-19 vaccination.

Response:

01	January
02	February
03	March
04	April
05	May
06	June
07	July
08	August
09	September
10	October
11	November
12	December
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ who have had one or more COVID-19 vaccinations

Skip Instructions:

<1-12,DK> [goto CVDVAC1Y2\_A]

<RF> [goto SHTPNUEV\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

IMS: Immunization

Question ID: IMS.0063.02.3 Variable: CVDVAC1Y2\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

\* 2 of 2

\* Enter year of most recent COVID-19 vaccination.

Response:

2000-2030	Range of values
9997	Refused
9999	Don't Know

Universe:

Sample Adults 18+ who gave month of most recent COVID-19 vaccination or don't know

Skip Instructions:

<current year,current year-1,current year-2,RF,DK> [goto SHTPNUEV\_A]  
 if CVDVAC1M2\_A and CVDVAC1Y2\_A=future date [goto ERR1\_CVDVAC1Y2\_A];  
 if CVDVAC1M2\_A and CVDVAC1Y2\_A=date prior to birth [goto ERR2\_CVDVAC1Y2\_A];  
 if CVDVAC1Y2\_A lt 2020 [goto ERR3\_CVDVAC1Y2\_A]  
 if CVDVAC1M2\_A=1-11 and CVDVAC1Y2\_A=2020 [goto ERR4\_CVDVAC1Y2\_A]

Hard Edit:

Check Text	Check Description	Check Text
ERR3_CVDVAC1Y2_A	Most recent COVID-19 vaccination before 2020	{check }  Date before 2020.  Please correct.
ERR2_CVDVAC1Y2_A	Most recent COVID-19 vaccination before DOB	{check }  Date prior to birth.  Please correct.
ERR1_CVDVAC1Y2_A	Most recent COVID-19 vaccination in future	{check }  Future date invalid.  Please correct.

**Soft Edit:**

Check Text	Check Description	Check Text
ERR4_CVDVAC1Y2_A	Date of most recent COVID-19 vaccination Jan-Nov 2020	{signal }  Date before December 2020 reported. Please verify and make corrections if necessary.



2024 National Health Interview Survey (NHIS) Questionnaire

IMS: Immunization

Question ID: IMS.0070.00.1 Variable: SHTPNUEV\_A Interview Module: Adult Content Type: Annual Core

Question Text:

A pneumonia shot is also known as a pneumococcal vaccine. Have you EVER had a pneumonia shot?

\* **Read if necessary:** *There are two types of pneumonia shots: polysaccharide (polly-SACK-ah-ride), also known as Pneumovax®, and conjugate, also known as Prevnar® or Vaxneuvance®.*

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

```
<1> [goto SHTPNEUNB_A]
<2,RF,DK> if GEN.AGE_FINAL[PX_A] ge 50 or ISN.MEDRXTRT_A=1 or ISN.HLTHCOND_A=1 [goto
SHTSHINGL1_A]
elseif (GEN.AGE_FINAL[PX_A] le 49 or GEN.AGE_FINAL[PX_A] IN (DK,RF)) and LIVEBIRTH_A=1 [goto
TDAPPREG_A]
else [goto SHTHEPA_A]
```

2024 National Health Interview Survey (NHIS) Questionnaire

IMS: Immunization

Question ID: IMS.0080.00.1 Variable: SHTPNEUNB\_A Interview Module: Adult Content Type: Annual Core

Question Text:

How many pneumonia shots have you ever had?

Response:

1	One pneumonia shot
2	Two pneumonia shots
3	More than two pneumonia shots
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who ever had a pneumonia shot

Skip Instructions:

```
<1-3,RF,DK> if GEN.AGE_FINAL[PX_A] ge 50 or ISN.MEDRXTRT_A=1 or ISN.HLTHCOND_A=1 [goto  
SHTSHINGL1_A]  
elseif (GEN.AGE_FINAL[PX_A] le 49 or GEN.AGE_FINAL[PX_A] IN (DK,RF)) and LIVEBIRTH_A=1 [goto  
TDAPPREG_A]  
else [goto SHTHEPA_A]
```

2024 National Health Interview Survey (NHIS) Questionnaire

IMS: Immunization

Question ID: IMS.0090.00.3 Variable: SHTSHINGL1\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Have you had a vaccine for shingles?

\* **Read if necessary:** *Shingles is an illness that results in a rash or blisters on the skin, and is usually painful. There are two vaccines that have been used to prevent shingles. The first was Zostavax®, which was available in the U.S. from 2006 through 2020 and required one shot. The other is Shingrix®, which has been available since 2017 and requires two shots.*

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 50+ or adults 18+ who have a weakened immune system

Skip Instructions:

```
<1> [goto SHINGYEAR_A]
<2,RF,DK> if (GEN.AGE_FINAL[PX_A] le 49 or GEN.AGE_FINAL[PX_A] IN (DK,RF)) and LIVEBIRTH_A=1
[goto TDAPPREG_A]
else [goto SHTHEPA_A]
```

2024 National Health Interview Survey (NHIS) Questionnaire

IMS: Immunization

Question ID: IMS.0100.00.3 Variable: SHINGYEAR\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

What year did you get your most recent shingles vaccine?

Response:

Year	Year
9997	Refused
9999	Don't Know

Universe:

Sample Adults 50+ or adults 18+ who have a weakened immune system who had a shingles vaccine

Skip Instructions:

```
<1900-2016> if date prior to birth [goto ERR2_SHINGYEAR_A]
elseif date prior to 2006 [goto ERR3_SHINGYEAR_A]
else if (GEN.AGE_FINAL[PX_A] le 49 or GEN.AGE_FINAL[PX_A] IN (DK,RF)) and LIVEBIRTH_A=1 [goto TDAPPREG_A]
else [goto SHTHEPA_A]
<2017-2020> [goto SHINGRIX3_A]
<2021-2030> if gt current year [goto ERR1_SHINGYEAR_A]
else [goto SHINGRIXFS1_A]
<RF,DK> [goto SHINGWHEN1_A]
```

Hard Edit:

Check Text	Check Description	Check Text
ERR1_SHINGYEAR_A	Future date hard edit	{check }  Future date invalid.  Please correct.
ERR2_SHINGYEAR_A	Date of most recent shingles shot is prior to Sample Adult's birth - hard edit	{check }  Date of most recent shingles shot is prior to Sample Adult's birth.  Please correct.

Soft Edit:

Check Text	Check Description	Check Text
ERR3_SHINGYEAR_A	Date of most recent shingles shot is prior to 2006- soft edit	{signal }  Date of most recent shingles shot is prior to 2006.  Please verify.



2024 National Health Interview Survey (NHIS) Questionnaire

IMS: Immunization

Question ID: IMS.0110.00.3 Variable: SHINGWHEN1\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Was it before 2017?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 50+ or adults 18+ who have a weakened immune system who had a shingles vaccination and refused or don't know the year they had it

Skip Instructions:

```
<1> if (GEN.AGE_FINAL[PX_A] le 49 or GEN.AGE_FINAL[PX_A] IN (DK,RF)) and LIVEBIRTH_A=1 [goto TDAPPREG_A]  
else [goto SHTHEPA_A]  
<2,RF,DK> [goto SHINGRIX3_A]
```

2024 National Health Interview Survey (NHIS) Questionnaire

IMS: Immunization

Question ID: IMS.0120.00.3 Variable: SHINGRIX3\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

There are two vaccines that have been used to prevent shingles. The first was Zostavax®, which was available in the U.S. from 2006 through 2020 and required one shot. The other is Shingrix®, which has been available since 2017 and requires two shots. Have you ever had any Shingrix® shots?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 50+ or adults 18+ who have a weakened immune system who had a shingles vaccine from 2017 through 2020

Skip Instructions:

```
<1> [goto SHINGRIX3_A]
<2,RF,DK> if (GEN.AGE_FINAL[PX_A] le 49 or GEN.AGE_FINAL[PX_A] IN (DK,RF)) and LIVEBIRTH_A=1
[goto TDAPPREG_A]
else [goto SHTHEPA_A]
```

2024 National Health Interview Survey (NHIS) Questionnaire

IMS: Immunization

Question ID: IMS.0140.00.3 Variable: SHINGRIXN3\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

How many Shingrix® shots have you ever had?

Response:

1	One Shingrix shot
2	Two Shingrix shots
7	Refused
9	Don't Know

Universe:

Sample Adults 50+ or adults 18+ who have a weakened immune system who had a Shingrix vaccine

Skip Instructions:

```
<1,2,RF,DK> if (GEN.AGE_FINAL[PX_A] le 49 or GEN.AGE_FINAL[PX_A] IN (DK,RF)) and LIVEBIRTH_A=1  
[goto TDAPPREG_A]  
else [goto SHTHEPA_A]
```



## 2024 National Health Interview Survey (NHIS) Questionnaire

### IMS: Immunization

Question ID: IMS.0150.00.3 Variable: SHINGRIXFS1\_A Interview Module: Adult Content Type: Sponsored Content

#### Question Text:

Shingrix® is the only shingles vaccine that has been available in the U.S. since 2021 and requires two shots. Was your most recent Shingrix® shot in ^SHINGYEAR\_A your first or second Shingrix® shot?

\* **Read if necessary:** *There are two vaccines that have been used to prevent shingles. The first was Zostavax®, which was available in the U.S. from 2006 through 2020 and required one shot. The other is Shingrix®, which has been available since 2017 and requires two shots.*

#### Fills:

SHINGYEAR_A	Description	{value of SHINGYEAR_A}
	Instruction	Fill value from IMS.SHINGYEAR_A

#### Response:

1	First shot
2	Second shot
7	Refused
9	Don't Know

#### Universe:

Sample Adults 50+ or adults 18+ who have a weakened immune system who had a most recent shingles vaccine in or after 2021

#### Skip Instructions:

<1,2,RF,DK> if (GEN.AGE\_FINAL[PX\_A] le 49 or GEN.AGE\_FINAL[PX\_A] IN (DK,RF)) and LIVEBIRTH\_A=1  
[goto TDAPPREG\_A]  
else [goto SHTHEPA\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

IMS: Immunization

Question ID: IMS.0170.00.3 Variable: TDAPPREG\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

A Tdap vaccination is a tetanus booster shot that also includes pertussis (per-TUH-sis) or whooping cough vaccine. Earlier you said that you had a pregnancy that ended in a live birth during the past 12 months. Did you receive a Tdap vaccine during this pregnancy?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Female Sample Adults 18-49 or age is refused or don't know who had a live birth in the past 12 months

Skip Instructions:

<1,2,RF,DK> [goto SHTHEPA\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

IMS: Immunization

Question ID: IMS.0180.00.3 Variable: SHTHEPA\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

The hepatitis A vaccine is given in two separate doses. Although it can be given as a combination vaccine with hepatitis B, it is different from the hepatitis B vaccine. Have you EVER received the hepatitis A vaccine?

\* **Read if necessary:** *The hepatitis A vaccine has been available since 1995. It is routinely given to some children starting at 1 year of age and to some adults and people who travel outside the United States.*

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto WORKHEALTH\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

IMS: Immunization

Question ID: IMS.0190.00.3 Variable: WORKHEALTH\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

In your work or volunteer activities, do you provide direct medical care to patients, such as being a doctor, nurse, dentist, therapist, home health care worker, or emergency responder?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto TRAVEL\_A]  
<2,RF,DK> [goto WRKHLTHFC\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

IMS: Immunization

Question ID: IMS.0200.00.3 Variable: WRKHLTHFC\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Even if you do not provide direct medical care to patients, do you do any kind of work or volunteer activities in a health care facility, such as in a hospital, doctor's office, dentist's office, clinic, nursing home, or residential care home?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who do not provide medical care to patients or refused or don't know

Skip Instructions:

<1,2,RF,DK> [goto TRAVEL\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

IMS: Immunization

Question ID: IMS.0210.00.3 Variable: TRAVEL\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Since 1995, have you traveled to any countries OTHER than Japan, Australia, New Zealand, Canada, and those in Europe?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

ANX: Anxiety

Question ID: ANX.0010.00.1 Variable: ANXFREQ\_A Interview Module: Adult Content Type: Annual Core

Question Text:

How often do you feel worried, nervous or anxious? Would you say daily, weekly, monthly, a few times a year, or never?

\* If respondent asks whether they are to answer about their emotional states after taking mood-regulating medications, say: "Please answer based on your usual use of medication."

Response:

1	Daily
2	Weekly
3	Monthly
4	A few times a year
5	Never
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-5,RF,DK> [goto ANXMED\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

ANX: Anxiety

Question ID: ANX.0020.00.1 Variable: ANXMED\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Do you take prescription medication for these feelings?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

```
<1,RF,DK> [goto ANXLEVEL_A]
<2> if ANXFREQ_A=5 [goto next section]
    else [goto ANXLEVEL_A]
```



2024 National Health Interview Survey (NHIS) Questionnaire

ANX: Anxiety

Question ID: ANX.0030.00.1 Variable: ANXLEVEL\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Thinking about the last time you felt worried, nervous or anxious, how would you describe the level of these feelings? Would you say a little, a lot, or somewhere in between?

Response:

1	A little
2	A lot
3	Somewhere in between a little and a lot
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who feel worried, anxious, or nervous daily, weekly, monthly, a few times a year or don't know or refused how often OR who do take medication for these feelings or don't know or refused if they take medication for these feelings

Skip Instructions:

<1-3,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

DEP: Depression

Question ID: DEP.0010.00.1 Variable: DEPFREQ\_A Interview Module: Adult Content Type: Annual Core

Question Text:

How often do you feel depressed? Would you say daily, weekly, monthly, a few times a year, or never?

\* If respondent asks whether they are to answer about their emotional states after taking mood-regulating medications, say: "Please answer based on your usual use of medication."

Response:

1	Daily
2	Weekly
3	Monthly
4	A few times a year
5	Never
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-5,RF,DK> [goto DEPMED\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

DEP: Depression

Question ID: DEP.0020.00.1 Variable: DEPMED\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Do you take prescription medication for depression?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,RF,DK> [goto DEPLEVEL\_A]  
<2> if DEPFREQ\_A=5 [goto next section]  
else [goto DEPLEVEL\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

DEP: Depression

Question ID: DEP.0030.00.1 Variable: DEPLEVEL\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Thinking about the last time you felt depressed, how depressed did you feel? Would you say a little, a lot, or somewhere in between?

Response:

1	A little
2	A lot
3	Somewhere in between a little and a lot
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who feel depressed daily, weekly, monthly, a few times a year or refused or don't know how often they feel depressed OR who do take medication or refused or don't know if they take medication for depression.

Skip Instructions:

<1-3,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

MHC: Mental Health Care

Question ID: MHC.0010.00.1 Variable: MHRX\_A Interview Module: Adult Content Type: Annual Core

Question Text:

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

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have not taken medication for worry or don't know or refused if they have and have not taken medication for depression or don't know or refused if they have

Skip Instructions:

<1,2,RF,DK> [goto MHTHRPY\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

MHC: Mental Health Care

Question ID: MHC.0020.00.1 Variable: MHTHRPY\_A Interview Module: Adult Content Type: Annual Core

Question Text:

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

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,RF,DK> [goto MHTPYNOW\_A]  
<2> [goto MHTHDLY\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

MHC: Mental Health Care

Question ID: MHC.0030.00.1 Variable: MHTPYNOW\_A Interview Module: Adult Content Type: Annual Core

Question Text:

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

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have received, or refused to answer or don't know if they have received counseling or therapy from a mental health professional in the past 12 months

Skip Instructions:

<1,2,RF,DK> [goto MHTHDLY\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

MHC: Mental Health Care

Question ID: MHC.0040.00.1 Variable: MTHDLY\_A Interview Module: Adult Content Type: Annual Core

Question Text:

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

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto MTHND\_A]



2024 National Health Interview Survey (NHIS) Questionnaire

MHC: Mental Health Care

Question ID: MHC.0050.00.1 Variable: MHTHND\_A Interview Module: Adult Content Type: Annual Core

Question Text:

During the past 12 months, was there any time when you needed counseling or therapy from a mental health professional, but DID NOT GET IT because of the cost?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

SPD: Serious Psychological Distress

Question ID: SPD.0010.00.2 Variable: SPDINTRO\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

Now I am going to ask you some questions about feelings you may have experienced over the past 30 days.

\* Enter '1' to continue.

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto SAD\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

SPD: Serious Psychological Distress

Question ID: SPD.0020.00.2 Variable: SAD\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

During the past 30 days, how often did you feel

...So sad that nothing could cheer you up?

Would you say all of the time, most of the time, some of the time, a little of the time, or none of the time?

Response:

1	All of the time
2	Most of the time
3	Some of the time
4	A little of the time
5	None of the time
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-5,RF,DK> [goto NERVOUS\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

SPD: Serious Psychological Distress

Question ID: SPD.0030.00.2 Variable: NERVOUS\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

During the past 30 days, how often did you feel

...Nervous?

Would you say all of the time, most of the time, some of the time, a little of the time, or none of the time?

Response:

1	All of the time
2	Most of the time
3	Some of the time
4	A little of the time
5	None of the time
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-5,RF,DK> [goto RESTLESS\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

SPD: Serious Psychological Distress

Question ID: SPD.0040.00.2 Variable: RESTLESS\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

\* **Read if necessary:** *During the past 30 days, how often did you feel*

...Restless or fidgety?

\* **Read if necessary:** *Would you say all of the time, most of the time, some of the time, a little of the time, or none of the time?*

Response:

1	All of the time
2	Most of the time
3	Some of the time
4	A little of the time
5	None of the time
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-5,RF,DK> [goto HOPELESS\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

SPD: Serious Psychological Distress

Question ID: SPD.0050.00.2 Variable: HOPELESS\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

\* **Read if necessary:** *During the past 30 days, how often did you feel*

...Hopeless?

\* **Read if necessary:** *Would you say all of the time, most of the time, some of the time, a little of the time, or none of the time?*

Response:

1	All of the time
2	Most of the time
3	Some of the time
4	A little of the time
5	None of the time
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-5,RF,DK> [goto EFFORT\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

SPD: Serious Psychological Distress

Question ID: SPD.0060.00.2 Variable: EFFORT\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

\* **Read if necessary:** *During the past 30 days, how often did you feel*

...That everything was an effort?

\* **Read if necessary:** *Would you say all of the time, most of the time, some of the time, a little of the time, or none of the time?*

Response:

1	All of the time
2	Most of the time
3	Some of the time
4	A little of the time
5	None of the time
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-5,RF,DK> [goto WORTHLESS\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

SPD: Serious Psychological Distress

Question ID: SPD.0070.00.2 Variable: WORTHLESS\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

\* **Read if necessary:** *During the past 30 days, how often did you feel*

*...Worthless?*

\* **Read if necessary:** *Would you say all of the time, most of the time, some of the time, a little of the time, or none of the time?*

Response:

1	All of the time
2	Most of the time
3	Some of the time
4	A little of the time
5	None of the time
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-5,RF,DK> [goto next section]



2024 National Health Interview Survey (NHIS) Questionnaire

REP: Repetitive Strain Injury

Question ID: REP.0010.00.2 Variable: REPSTRAIN\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

The next set of questions asks about injuries.

The first question is about repetitive strain injuries. By this, we mean injuries caused by repeating the same movement over an extended period. Examples include carpal tunnel syndrome, tennis elbow, or tendonitis.

During the past 3 months, did you have any injuries due to repetitive strain?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto REPLIMIT\_A]  
<2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

REP: Repetitive Strain Injury

Question ID: REP.0020.00.2 Variable: REPLIMIT\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

Were any repetitive strain injuries serious enough to limit your usual activities for at least 24 hours?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with a repetitive strain injury in the past 3 months

Skip Instructions:

<1> [goto REPSAWDOC\_A]  
<2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

REP: Repetitive Strain Injury

Question ID: REP.0030.00.2 Variable: REPSAWDOC\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

For the next questions, please think only about the repetitive strain injuries that limited your usual activities for at least 24 hours after the injury occurred.

During the past 3 months, did you talk to or see a doctor or other health professional about your repetitive strain injuries?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who were limited in usual activities for at least 24 hours because of repetitive strain injury

Skip Instructions:

<1,2,RF,DK> [goto REPWRKDAY\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

REP: Repetitive Strain Injury

Question ID: REP.0040.00.2 Variable: REPWRKDAYSA Interview Module: Adult Content Type: Rotating Core

Question Text:

During the past 3 months, how many days of work did you miss because of your repetitive strain injuries?

\* If respondent says none, no, or 0 days, ask: *Did you work at all the past 3 months?*

\* Enter '90' if respondent says they missed every day of work in the past 3 months.

\* Enter '91' if respondent says they did not work in the past 3 months.

Response:

00-90	Range of values
91	Did not work
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ who were limited in usual activities for at least 24 hours because of repetitive strain injury

Skip Instructions:

<1-90,DK> [goto REPFWTWORK\_A]

<0,RF> [goto REPSTOPCHG\_A]

<91> [goto REPWRKCAUS\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

REP: Repetitive Strain Injury

Question ID: REP.0050.00.2 Variable: REPFUTWRK\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

Do you expect to miss any more days of work because of your repetitive strain injuries?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who missed at least one day of work due to repetitive strain injury in past 3 months or don't know

Skip Instructions:

<1,2,RF,DK> [goto REPSTOPCHG\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

REP: Repetitive Strain Injury

Question ID: REP.0060.00.2 Variable: REPSTOPCHG\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

During the past 3 months, did you stop working or change jobs because of your repetitive strain injuries?

\* Enter 'no' if respondent says they did not work in the past 3 months.

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who missed 0 or more days of work due to repetitive strain injury in past 3 months or refused or don't know

Skip Instructions:

<1,2,RF,DK> [goto REPREDUCE\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

REP: Repetitive Strain Injury

Question ID: REP.0070.00.2 Variable: REPREDUCE\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

During the past 3 months, did you make a major change in your work activities, such as taking on fewer hours or lighter duties, because of your repetitive strain injuries?

\* Enter 'no' if respondent says they did not work in the past 3 months.

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who missed 0 or more days of work due to repetitive strain injury in past 3 months or refused or don't know

Skip Instructions:

<1,2,RF,DK> [goto REPWRKCAUS\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

REP: Repetitive Strain Injury

Question ID: REP.0080.00.2 Variable: REPWRKCAUS\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

Have you ever been told by a doctor or other health professional that any of your repetitive strain injuries were likely to be work-related?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who were limited in usual activities for at least 24 hours because of repetitive strain injury

Skip Instructions:

<1,2,RF,DK> [goto next section]



2024 National Health Interview Survey (NHIS) Questionnaire

INJ: Injury

Question ID: INJ.0010.00.2 Variable: INJINTRO\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

The next set of questions asks about SUDDEN injuries. People can be injured accidentally or on purpose. They may hurt themselves or others may cause them to be hurt.

\* Enter '1' to continue.

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto ANYINJURY\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INJ: Injury

Question ID: INJ.0020.00.2 Variable: ANYINJURY\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

^NOTREPS the past 3 months, did you have an accident or an injury where any part of your body was hurt?

Fills:

NOTREPS	Description	NOT INCLUDING ANY OF THE REPETITIVE STRAIN INJURIES YOU JUST MENTIONED, during/During
	Instruction	If REP.REPSTRAIN_A=1, fill: "NOT INCLUDING ANY OF THE REPETITIVE STRAIN INJURIES YOU JUST MENTIONED, during" If REP.REPSTRAIN_A=2,RF,DK, "During"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto INJLIMIT\_A]  
<2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

INJ: Injury

Question ID: INJ.0030.00.2 Variable: INJLIMIT\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

Did any of these injuries limit your usual activities for at least 24 hours after the injury occurred?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who reported sudden injury in past 3 months

Skip Instructions:

<1> [goto NUMINJ\_A]  
<2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

INJ: Injury

Question ID: INJ.0040.00.2 Variable: NUMINJ\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

For the next questions, please think only about the significant injuries that occurred during the past 3 months. By significant, I mean those injuries that limited your usual activities for at least 24 hours after the injury occurred.

^NOTREPS the past 3 months, how many times did these accidents or injury events occur?

\* Enter '96' if number is 96 or greater.

Fills:

NOTREPS	Description	NOT INCLUDING ANY OF THE REPETITIVE STRAIN INJURIES YOU JUST MENTIONED, during/During
	Instruction	If REP.REPSTRAIN_A=1, fill: "NOT INCLUDING ANY OF THE REPETITIVE STRAIN INJURIES YOU JUST MENTIONED, during" If REP.REPSTRAIN_A=2,RF,DK, "During"

Response:

01-96	Range of values
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ who reported sudden injury in past 3 months which limited activities for at least 24 hours

Skip Instructions:

<1-9,RF,DK> [goto INJHOME\_A]  
<10-96> [goto ERR1\_NUMINJ\_A], then [goto INJHOME\_A]

Soft Edit:

Check Text	Check Description	Check Text
ERR1_NUMINJ_A	High number of injuries	{signal }  ^NUMINJ_A is an unusually large number.  Please verify.

2024 National Health Interview Survey (NHIS) Questionnaire

INJ: Injury

Question ID: INJ.0050.00.2 Variable: INJHOME\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

During the past 3 months, did ^siginj\_A occur while you were at your home?

\* **Read if necessary:** *Include the yards, garage, basement, and other places on the home property.*

Fills:

siginj_A	Description	your significant injury/any of your significant injuries
	Instruction	If INJ.NUMINJ_A=1, fill: "your significant injury" If INJ.NUMINJ_A IN (2-96,RF,DK), fill: "any of your significant injuries"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who reported sudden injury in past 3 months which limited activities for at least 24 hours

Skip Instructions:

```
<1> if NUMINJ_A=1 [goto INJSPORTS_A]
elseif NUMINJ_A=2-96,RF,DK [goto INJWORK_A]
<2,RF,DK> [goto INJWORK_A]
```

2024 National Health Interview Survey (NHIS) Questionnaire

INJ: Injury

Question ID: INJ.0060.00.2 Variable: INJWORK\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

During the past 3 months, did ^siginj\_A occur while you were working at a job or business?

\* Enter 'no' if respondent says they did not work in the past 3 months.

Fills:

siginj_A	Description	your significant injury/any of your significant injuries
	Instruction	If INJ.NUMINJ_A=1, fill: "your significant injury" If INJ.NUMINJ_A IN (2-96,RF,DK), fill: "any of your significant injuries"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who reported more than 1 injury in the past 3 months or don't know or who reported 1 injury in the past 3 months but did not report an injury at home

Skip Instructions:

<1,2,RF,DK> [goto INJSPORTS\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INJ: Injury

Question ID: INJ.0070.00.2 Variable: INJSPORTS\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

During the past 3 months, did ^siginj\_A occur while you were playing sports or exercising, including walking, biking, or running, playing baseball, basketball, football or doing any other physical activity?

\* **Read if necessary:** Include recreational sports such as skating, skiing, tennis, golf, bowling, or fishing.

Fills:

siginj_A	Description	your significant injury/any of your significant injuries
	Instruction	If INJ.NUMINJ_A=1, fill: "your significant injury" If INJ.NUMINJ_A IN (2-96,RF,DK), fill: "any of your significant injuries"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who reported sudden injury in past 3 months which limited activities for at least 24 hours

Skip Instructions:

<1,2,RF,DK> [goto INJFALL\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INJ: Injury

Question ID: INJ.0080.00.2 Variable: INJFALL\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

During the past 3 months, did ^siginj\_A occur as a result of a fall or falling?

Fills:

siginj_A	Description	your significant injury/any of your significant injuries
	Instruction	If INJ.NUMINJ_A=1, fill: "your significant injury" If INJ.NUMINJ_A IN (2-96,RF,DK), fill: "any of your significant injuries"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who reported sudden injury in past 3 months which limited activities for at least 24 hours

Skip Instructions:

```
<1> if NUMINJ_A=1 [goto INJMOTOR_A]
elseif NUMINJ_A IN (2-96,RF,DK) and INJHOME_A=1 [goto INJFALLHOM_A]
elseif NUMINJ_A IN (2-96,RF,DK) and INJWORK_A=1 [goto INJFALLWRK_A]
else [goto INJMOTOR_A]
<2,RF,DK> [goto INJMOTOR_A]
```



2024 National Health Interview Survey (NHIS) Questionnaire

INJ: Injury

Question ID: INJ.0090.00.2 Variable: INJFALLHOM\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

Did any fall occur while you were at your home?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who had more than 1 significant injury or don't know or refused, and were injured as a result of a fall or falling, and who were injured at home

Skip Instructions:

<1,2,RF,DK> if INJWORK\_A=1 [goto INJFALLWRK\_A]  
else [goto INJMOTOR\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INJ: Injury

Question ID: INJ.0100.00.2 Variable: INJFALLWRK\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

Did any fall occur while you were working at a job or business?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who had more than 1 injury or don't know or refused, and were injured as a result of a fall or falling, and who were injured at work

Skip Instructions:

<1,2,RF,DK> [goto INJMOTOR\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INJ: Injury

Question ID: INJ.0110.00.2 Variable: INJMOTOR\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

During the past 3 months, did ^siginj\_A occur as a result of being in a motor vehicle crash or being hit by a motor vehicle while walking or biking?

\* **Read if necessary:** Motor vehicles include cars, trucks, vans, buses, motorcycles, motorized scooters, motorized wheelchairs, motorized carts, tractors, ATVs, snowmobiles, dune buggies, and other motorized vehicles.

Fills:

siginj_A	Description	your significant injury/any of your significant injuries
	Instruction	If INJ.NUMINJ_A=1, fill: "your significant injury" If INJ.NUMINJ_A IN (2-96,RF,DK), fill: "any of your significant injuries"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who reported sudden injury in past 3 months which limited activities for at least 24 hours

Skip Instructions:

<1> [goto INJMVTYPE\_A]  
<2,RF,DK> [goto INJCHORES\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INJ: Injury

Question ID: INJ.0120.00.2 Variable: INJMVTYPE\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

Were you a driver, passenger, bicyclist, pedestrian, or doing something else when this occurred?

\* Enter all that apply, separate with commas.

Response:

1	Driver
2	Passenger
3	Bicyclist
4	Pedestrian
5	Something else
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who reported a significant injury from a motor vehicle accident

Skip Instructions:

<1-5,RF,DK> [goto INJCHORES\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INJ: Injury

Question ID: INJ.0130.00.2 Variable: INJCHORES\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

During the past 3 months, did ^siginj\_A occur while you were doing household activities, such as housework, cooking, home maintenance, or yardwork?

Fills:

siginj_A	Description	your significant injury/any of your significant injuries
	Instruction	If INJ.NUMINJ_A=1, fill: "your significant injury" If INJ.NUMINJ_A IN (2-96,RF,DK), fill: "any of your significant injuries"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who reported sudden injury in past 3 months which limited activities for at least 24 hours

Skip Instructions:

<1,2,RF,DK> [goto INJSAWDOC\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INJ: Injury

Question ID: INJ.0140.00.2 Variable: INJSAWDOC\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

During the past 3 months, did you see or talk to a doctor or other health professional about ^siginj\_A?

Fills:

siginj_A	Description	your significant injury/any of your significant injuries
	Instruction	If INJ.NUMINJ_A=1, fill: "your significant injury" If INJ.NUMINJ_A IN (2-96,RF,DK), fill: "any of your significant injuries"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who reported sudden injury in past 3 months which limited activities for at least 24 hours

Skip Instructions:

```
<1> if UTZ.EMERGE12M_A IN (1-96,RF,DK) [goto INJER_A]
elseif UTZ.HOSPONGT_A IN (1,RF,DK) [goto INJHOSP_A]
else [goto INJBONES_A]
<2,RF,DK> [goto INJWRKDAY_A]
```

2024 National Health Interview Survey (NHIS) Questionnaire

INJ: Injury

Question ID: INJ.0150.00.2 Variable: INJER\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

During the past 3 months, did you go to an emergency room because of ^signj\_A?

Fills:

signj_A	Description	your significant injury/any of your significant injuries
	Instruction	If INJ.NUMINJ_A=1, fill: "your significant injury" If INJ.NUMINJ_A IN (2-96,RF,DK), fill: "any of your significant injuries"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who saw doctor about their injuries and went to the ER at least once in the past 12 months or don't know or refused

Skip Instructions:

<1,2,RF,DK> if UTZ.HOSPONGT\_A IN (1,RF,DK) [goto INJHOSP\_A]  
else [goto INJBONES\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INJ: Injury

Question ID: INJ.0160.00.2 Variable: INJHOSP\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

During the past 3 months, were you hospitalized overnight because of ^signj\_A?

Fills:

signj_A	Description	your significant injury/any of your significant injuries
	Instruction	If INJ.NUMINJ_A=1, fill: "your significant injury" If INJ.NUMINJ_A IN (2-96,RF,DK), fill: "any of your significant injuries"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who saw doctor about their injuries and reported being hospitalized at least once in the past 12 months or don't know or refused

Skip Instructions:

<1,2,RF,DK> [goto INJBONES\_A]



2024 National Health Interview Survey (NHIS) Questionnaire

INJ: Injury

Question ID: INJ.0170.00.2 Variable: INJBONES\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

During the past 3 months, did you have any broken bones as a result of ^signj\_A?

Fills:

signj_A	Description	your significant injury/any of your significant injuries
	Instruction	If INJ.NUMINJ_A=1, fill: "your significant injury" If INJ.NUMINJ_A IN (2-96,RF,DK), fill: "any of your significant injuries"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who saw a doctor about an injury

Skip Instructions:

<1,2,RF,DK> [goto INJSTITCH\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INJ: Injury

Question ID: INJ.0180.00.2 Variable: INJSTITCH\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

During the past 3 months, did you get any stitches or staples because of ^signj\_A?

Fills:

signj_A	Description	your significant injury/any of your significant injuries
	Instruction	If INJ.NUMINJ_A=1, fill: "your significant injury" If INJ.NUMINJ_A IN (2-96,RF,DK), fill: "any of your significant injuries"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who saw a doctor about an injury

Skip Instructions:

<1,2,RF,DK> [goto INJWRKDAY\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INJ: Injury

Question ID: INJ.0190.00.2 Variable: INJWRKDAYSA Interview Module: Adult Content Type: Rotating Core

Question Text:

During the past 3 months, how many days of work did you miss because of ^siginj\_A?

\* If respondent says none, no, or 0 days, ask: *Did you work at all the past 3 months?*

\* Enter '90' if respondent says they missed every day of work in the past 3 months.

\* Enter '91' if respondent says they did not work in the past 3 months.

Fills:

siginj_A	Description	your significant injury/any of your significant injuries
	Instruction	If INJ.NUMINJ_A=1, fill: "your significant injury" If INJ.NUMINJ_A IN (2-96,RF,DK), fill: "any of your significant injuries"

Response:

00-90	Range of values
91	Did not work
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ who had a significant sudden injury in the past 3 months that limited their usual activities for at least 24 hours

Skip Instructions:

<1-90,DK> [goto INJFUTWRK\_A]  
 <0,RF> [goto INJSTOPCHG\_A]  
 <91> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

INJ: Injury

Question ID: INJ.0200.00.2 Variable: INJFUTWRK\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

Do you expect to miss any more days of work because of ^siginj\_A that occurred during the past 3 months?

Fills:

siginj_A	Description	your significant injury/any of your significant injuries
	Instruction	If INJ.NUMINJ_A=1, fill: "your significant injury" If INJ.NUMINJ_A IN (2-96,RF,DK), fill: "any of your significant injuries"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have missed at least one day of work due to injury in past 3 months or don't know

Skip Instructions:

<1,2,RF,DK> [goto INJSTOPCHG\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INJ: Injury

Question ID: INJ.0210.00.2 Variable: INJSTOPCHG\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

During the past 3 months, did you stop working or change jobs because of ^signj\_A?

\* Enter 'no' if respondent says they did not work in the past 3 months.

Fills:

signj_A	Description	your significant injury/any of your significant injuries
	Instruction	If INJ.NUMINJ_A=1, fill: "your significant injury" If INJ.NUMINJ_A IN (2-96,RF,DK), fill: "any of your significant injuries"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have missed 0 or more days of work due to injury in past 3 months or refused or don't know

Skip Instructions:

<1,2,RF,DK> [goto INJREDUCE\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

INJ: Injury

Question ID: INJ.0220.00.2 Variable: INJREDUCE\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

During the past 3 months, did you make a major change in your work activities, such as taking on fewer hours or lighter duties, because of ^siginj\_A?

\* Enter 'no' if respondent says they did not work in the past 3 months.

Fills:

siginj_A	Description	your significant injury/any of your significant injuries
	Instruction	If INJ.NUMINJ_A=1, fill: "your significant injury" If INJ.NUMINJ_A IN (2-96,RF,DK), fill: "any of your significant injuries"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have missed 0 or more days of work due to injury in past 3 months or refused or don't know

Skip Instructions:

<1,2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

TBI: Concussions - past 12 months

Question ID: TBI.0010.00.3 Variable: TBIINTRO1\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

The next questions are about head injuries that may have occurred in the past 12 months. Please think about all head injuries, for example, from playing sports, car accidents, falls, or being hit by something or someone that may have occurred in the past 12 months.

\* Enter '1' to continue.

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto TBILCDCMG\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

TBI: Concussions - past 12 months

Question ID: TBI.0020.00.3 Variable: TBILDCMG\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

During the past 12 months, as a result of a blow or jolt to the head, have you been knocked out or lost consciousness, been dazed or confused, or had a gap in your memory?

\* **Read if necessary:** *Please think about all head injuries, for example, from playing sports, car accidents, falls, or being hit by something or someone that may have occurred in the past 12 months.*

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto TBIHLSBMC\_A]



2024 National Health Interview Survey (NHIS) Questionnaire

TBI: Concussions - past 12 months

Question ID: TBI.0030.00.3 Variable: TBIHLSBMC\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

During the past 12 months, as a result of a blow or jolt to the head, have you had headaches, sensitivity to light or noise, balance problems, or changes in mood or behavior?

\* **Read if necessary:** *Please think about all head injuries, for example, from playing sports, car accidents, falls, or being hit by something or someone that may have occurred in the past 12 months.*

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

```
<1> [goto TBISPORT_A]
<2,RF,DK> if TBILDCMG_A=1 [goto TBISPORT_A]
elseif TBILDCMG_A=2,RF,DK [goto next section]
```

2024 National Health Interview Survey (NHIS) Questionnaire

TBI: Concussions - past 12 months

Question ID: TBI.0040.00.3 Variable: TBISPORT\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

^CDCMG\_A Were you playing a sport or participating in a physical or recreational activity, such as jogging, biking, or pick-up games, when you experienced any of these blows or jolts to the head?

\* **Read if necessary:** *Include team or league sports competitions or practices.*

\* **Read if necessary:** *Include organized and non-organized sports.*

\* **Read if necessary:** *A pick-up game is when a group of players get together and spontaneously start a game, like basketball or soccer.*

Fills:

CDCMG_A	Description	Think about the blows or jolts to the head that caused you to lose consciousness...
	Instruction	If TBILCDCMG_A=1 and TBIHLSBMC_A=2,RF,DK, fill: "Think about the blows or jolts to the head that caused you to lose consciousness, become dazed or confused, or have a gap in your memory." else no fill

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who experienced TBI symptoms from a blow or jolt to the head over the past 12 months

Skip Instructions:

<1> [goto TBILEAGUE\_A]  
<2,RF,DK> [goto TBIEVAL\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

TBI: Concussions - past 12 months

Question ID: TBI.0050.00.3 Variable: TBILEAGUE\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Were you participating in an organized team or league sports competition or practice when you experienced any of these blows or jolts to the head?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who experienced TBI symptoms from a blow or jolt to the head over the past 12 months and had a sports or recreational injury

Skip Instructions:

<1,2,RF,DK> [goto TBIEVAL\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

TBI: Concussions - past 12 months

Question ID: TBI.0060.00.3 Variable: TBIEVAL\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

During the past 12 months, as a result of a blow or jolt to the head, were you evaluated for a concussion or brain injury by a doctor, nurse, paramedic, athletic trainer, or other health professional?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who experienced TBI symptoms from a blow or jolt to the head over the past 12 months

Skip Instructions:

<1,2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

FGE: Fatigue

Question ID: FGE.0010.00.2 Variable: FGEFRQTRD\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

In the past 3 months, how often did you feel very tired or exhausted? Would you say never, some days, most days, or every day?

Response:

1	Never
2	Some days
3	Most days
4	Every day
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto next section]  
<2-4,RF,DK> [goto FGELNGTRD\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

FGE: Fatigue

Question ID: FGE.0020.00.2 Variable: FGELNGTRD\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

Thinking about the last time you felt very tired or exhausted, how long did it last? Would you say some of the day, most of the day, or all of the day?

Response:

1	Some of the day
2	Most of the day
3	All of the day
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who felt very tired or exhausted some days, most days, every day, or refused or don't know

Skip Instructions:

<1-3,RF,DK> [goto FGELEVTRD\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

FGE: Fatigue

Question ID: FGE.0030.00.2 Variable: FGELEVTRD\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

Thinking about the last time you felt this way, how would you describe the level of tiredness?  
Would you say a little, a lot, or somewhere in between?

Response:

1	A little
2	A lot
3	Somewhere in between a little and a lot
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who felt very tired or exhausted some days, most days, every day, or refused or don't know

Skip Instructions:

<1-3,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

CIG: Cigarettes and E-cigarettes w/ Cigarette History

Question ID: CIG.0010.00.1 Variable: CIGINTRO\_A Interview Module: Adult Content Type: Annual Core

Question Text:

These next questions are about cigarette smoking.

\* Enter '1' to continue.

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto SMKEV\_A]



2024 National Health Interview Survey (NHIS) Questionnaire

CIG: Cigarettes and E-cigarettes w/ Cigarette History

Question ID: CIG.0020.00.1 Variable: SMKEV\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Have you smoked at least 100 cigarettes in your ENTIRE LIFE?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto SMKAGE\_A]  
<2,RF,DK> [goto ECIGEV\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

CIG: Cigarettes and E-cigarettes w/ Cigarette History

Question ID: CIG.0030.00.2 Variable: SMKAGE\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

How old were you when you FIRST started to smoke fairly regularly?

\* Smoking regularly is respondent defined. If asked about what this means, say that "It is whatever you consider as first starting to smoke fairly regularly."

\* Enter '6' if less than 6 years old.

\* Enter '95' if 95 years old or older.

\* Enter '96' if never smoked regularly.

Response:

06-95	Range of values
96	Never smoked regularly
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ who ever smoked 100 cigarettes

Skip Instructions:

<6-95,96,RF,DK> if SMKAGE\_A gt GEN.AGE\_FINAL and SMKAGE\_A ne 96 [goto ERR1\_SMKAGE\_A]  
 else [goto SMKNOW\_A]

Hard Edit:

Check Text	Check Description	Check Text
ERR1_SMKAGE_A	Age starting smoking exceeds current age	{check }  Starting age exceeds current age.  Please correct

2024 National Health Interview Survey (NHIS) Questionnaire

CIG: Cigarettes and E-cigarettes w/ Cigarette History

Question ID: CIG.0040.00.1 Variable: SMKNOA Interview Module: Adult Content Type: Annual Core

Question Text:

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

Response:

1	Every day
2	Some days
3	Not at all
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who ever smoked 100 cigarettes

Skip Instructions:

<1> [goto CIGNOW\_A]  
<2> [goto SMK30D\_A]  
<3> [goto SMKQTN\_A]  
<RF,DK> [goto ECIGEV\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

CIG: Cigarettes and E-cigarettes w/ Cigarette History

Question ID: CIG.0050.00.1 Variable: CIGNOW\_A Interview Module: Adult Content Type: Annual Core

Question Text:

On average, about how many cigarettes do you NOW smoke a day?

\* Enter '1' if less than 1 cigarette.

\* Enter '95' if 95 or more cigarettes.

Response:

01-95	Range of values
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ who are current every day smokers

Skip Instructions:

<1-95,RF,DK> [goto MENTHOLC\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

CIG: Cigarettes and E-cigarettes w/ Cigarette History

Question ID: CIG.0060.00.1 Variable: SMK30D\_A Interview Module: Adult Content Type: Annual Core

Question Text:

On how many of the past 30 days did you smoke a cigarette?

\* Enter '0' for None.

Response:

00-30	Range of values
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ who are current some day smokers

Skip Instructions:

<0> [goto MENTHOLC\_A]  
<1-30,RF,DK> [goto CIG30D\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

CIG: Cigarettes and E-cigarettes w/ Cigarette History

Question ID: CIG.0070.00.1 Variable: CIG30D\_A Interview Module: Adult Content Type: Annual Core

Question Text:

On average, when you smoked during the past 30 days, about how many cigarettes did you smoke a day?

\* Enter '1' if less than 1.

\* Enter '95' if 95 or more cigarettes.

Response:

01-95	Range of values
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ who have smoked any time in the past 30 days or refused or don't know

Skip Instructions:

<1-95,RF,DK> [goto MENTHOLC\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

CIG: Cigarettes and E-cigarettes w/ Cigarette History

Question ID: CIG.0075.00.3 Variable: MENTHOLC\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Do you usually smoke menthol or non-menthol cigarettes?

Response:

1	Menthol
2	Non-menthol
3	No usual type
7	Refused
9	Don't know

Universe:

Sample Adults 18+ who currently smoke cigarettes every day or some days

Skip Instructions:

<1-3,RF,DK> [goto SMKQT12M\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

CIG: Cigarettes and E-cigarettes w/ Cigarette History

Question ID: CIG.0080.00.2 Variable: SMKQT12M\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

During the past 12 months, have you stopped smoking for more than one day BECAUSE YOU WERE TRYING TO QUIT SMOKING?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who are every day or someday smokers

Skip Instructions:

<1,2,RF,DK> [goto AVGNUMCIG\_A]



2024 National Health Interview Survey (NHIS) Questionnaire

CIG: Cigarettes and E-cigarettes w/ Cigarette History

Question ID: CIG.0090.01.2 Variable: SMKQTN\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

\* 1 of 2

How long has it been since you quit smoking cigarettes?

\* Enter number for time since quit smoking.

Response:

001-365	Range of values
997	Refused
999	Don't Know

Universe:

Sample Adults 18+ who quit smoking

Skip Instructions:

<1-365> [goto SMKQTP\_A]

<RF,DK> [goto MENTHOLF\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

CIG: Cigarettes and E-cigarettes w/ Cigarette History

Question ID: CIG.0090.02.2 Variable: SMKQTPP\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

\* 2 of 2

\* Enter time period for time since quit smoking.

Response:

1	Day(s)
2	Week(s)
3	Month(s)
4	Year(s)
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who gave a number for how long ago they quit smoking

Skip Instructions:

```
<1-3,RF,DK> [goto MENTHOLF_A]
<4> if SMKERR1_CALC_A lt 15 [goto ERR1_SMKQTPP_A]
elseif SMKERR2_CALC_A gt GEN.AGE_FINAL[PX_A] [goto ERR2_SMKQTPP_A]
else [goto MENTHOLF_A]
```

Hard Edit:

Check Text	Check Description	Check Text
ERR2_SMKQTPP_A	Age started smoking plus years since quitting is greater than current age	{check }  Age started smoking (^SMKAGE_A years) + years since quitting (^SMKQTN_A) exceeds current age.  Please correct.

Soft Edit:

Check Text	Check Description	Check Text
ERR1_SMKQTPP_A	Former smokers who quit before the age of 15	{signal }  Respondent quit smoking before age 15?  Please verify.

2024 National Health Interview Survey (NHIS) Questionnaire

CIG: Cigarettes and E-cigarettes w/ Cigarette History

Question ID: CIG.0100.00.3 Variable: MENTHOLF\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Thinking back to the 12 MONTHS BEFORE YOU QUIT SMOKING CIGARETTES, during that time, did you usually smoke menthol or non-menthol cigarettes?

Response:

1	Menthol
2	Non-menthol
3	No usual type
7	Refused
9	Don't know

Universe:

Sample Adults 18+ who are former smokers

Skip Instructions:

<1-3,RF,DK> [goto AVGNUMCIG\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

CIG: Cigarettes and E-cigarettes w/ Cigarette History

Question ID: CIG.0110.00.3 Variable: AVGNUMCIG\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Over the entire time that you have smoked, what is the average number of cigarettes that you smoked per day?

\* Enter P to record packs smoked per day.

\* Enter '95' if 95 or more cigarettes.

Response:

01-94	Range of values
95	Varied
96	Never smoked regularly
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ who are every day or some day smokers or who have smoked in the past

Skip Instructions:

```
<P> [goto AVGPACKCIG_A]  
<00-94,95,RF,DK> if ((SMKQTN_A le 365 and SMKQTPP_A=1) or (SMKQTN_A le 52 and SMKQTPP_A=2) or  
(SMKQTN_A le 12 and SMKQTPP_A=3) or (SMKQTN_A le 1 and SMKQTPP_A=4)) [goto SMKTLK_A]  
else [goto ECIGEV_A]
```

2024 National Health Interview Survey (NHIS) Questionnaire

CIG: Cigarettes and E-cigarettes w/ Cigarette History

Question ID: CIG.0120.00.3 Variable: AVGPACKCIG\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

\* Enter the average number of packs of cigarettes smoked per day.

\* Read if necessary: 1 pack equals 20 cigarettes.

Response:

01	1/2 pack per day
02	1 pack per day
03	1 1/2 packs per day
04	2 packs per day
05	2 1/2 packs per day
06	3 packs per day
07	3 1/2 packs per day
08	4 or more packs per day
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ who want to answer average number of cigarettes smoked per day in packs

Skip Instructions:

<1-8,RF,DK> if ((SMKQTN\_A LE 365 and SMKQTP\_A=1) or (SMKQTN\_A le 52 and SMKQTP\_A=2) or (SMKQTN\_A le 12 and SMKQTP\_A=3) or (SMKQTN\_A le 1 and SMKQTP\_A=4)) [goto SMKTLK\_A] else [goto ECIGEV\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

CIG: Cigarettes and E-cigarettes w/ Cigarette History

Question ID: CIG.0130.00.2 Variable: SMKTLK1\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

In the past 12 months, has a doctor, dentist, or other health professional ADVISED you about ways to stop smoking or prescribed medication to help you quit?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who are current cigarette smokers or former cigarette smokers who have quit in the past 12 months

Skip Instructions:

<1,2,RF,DK> [goto ECIGEV\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

CIG: Cigarettes and E-cigarettes w/ Cigarette History

Question ID: CIG.0140.00.1 Variable: ECIGEV\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Have you ever used an e-cigarette or other electronic vaping product, even just one time, in your entire life?

\* **Read if necessary:** *Electronic cigarettes (e-cigarettes) and other electronic vaping products include JUULs, vape pens, e-cigars, and others. These products are battery-powered and usually contain nicotine and flavors such as fruit, mint, or candy.*

\* **These questions concern electronic vaping products for nicotine use.**

\* **Do not include marijuana use.**

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

```
<1> [goto ECIGNOW_A]
<2,RF,DK> if SMKNOW_A=3 and (SMKQTN_A le 365 and SMKQTP_A=1) or (SMKQTN_A le 104 and
SMKQTP_A=2) or (SMKQTN_A le 24 and SMKQTP_A=3) or (SMKQTN_A le 2 and SMKQTP_A=4) [goto
FQUITA1_A]
elseif SMKQT12M_A=1 [goto CQUITA1_A]
elseif SMKNOW_A IN (1,2) [goto QWANT_A]
else [goto next section]
```

2024 National Health Interview Survey (NHIS) Questionnaire

CIG: Cigarettes and E-cigarettes w/ Cigarette History

Question ID: CIG.0150.00.1 Variable: ECIGNOW\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Do you NOW use e-cigarettes or other electronic vaping products every day, some days, or not at all?

\* These questions concern electronic vaping products for nicotine use.

\* Do not include marijuana use.

Response:

1	Every day
2	Some days
3	Not at all
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have ever used e-cigarettes

Skip Instructions:

<1-3,RF,DK> [goto next section]



2024 National Health Interview Survey (NHIS) Questionnaire

OTB: Other Tobacco

Question ID: OTB.0010.00.3 Variable: CIGAREV\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Have you ever smoked a regular cigar, cigarillo, or a little filtered cigar EVEN ONE TIME?

\* **Read if necessary:** "Cigarillos" are medium cigars that sometimes are sold with plastic or wooden tips. Some common brands are Black and Mild, Swisher Sweets, Dutch Masters and Phillies Blunts. Cigarillos are usually sold individually or in packs of 5 or fewer. Little filtered cigars look like cigarettes and are usually brown in color. Like cigarettes, little filtered cigars have a spongy filter and are sold in packs of 20. Some common brands are Prime Time and Winchester.

\* **Read if necessary:** Do not include electronic cigars or e-cigars.

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample adults 18+

Skip Instructions:

<1> [goto CIGARCUR\_A]  
<2,RF,DK> [goto SMOKEELSEV\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

OTB: Other Tobacco

Question ID: OTB.0020.00.3 Variable: CIGARCUR\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Do you NOW smoke regular cigars, cigarillos, or little filtered cigars every day, some days, or not at all?

Response:

1	Every day
2	Some days
3	Not at all
7	Refused
9	Don't Know

Universe:

Sample adults 18+ who have ever smoked a regular cigar, cigarillo, or filtered cigar

Skip Instructions:

<1,RF,DK> [goto SMOKEELSEV\_A]  
<2,3> [goto CIGAR30D\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

OTB: Other Tobacco

Question ID: OTB.0030.00.3 Variable: CIGAR30D\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

On how many of the past 30 days have you smoked a regular cigar, cigarillo, or little filtered cigar?

Response:

00-30	Range of values
97	Refused
99	Don't Know

Universe:

Sample adults 18+ who now smoke a regular cigar, cigarillo, or little filtered cigar some days or not at all

Skip Instructions:

<0-30,RF,DK> [goto SMOKEELSEV\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

OTB: Other Tobacco

Question ID: OTB.0060.00.3 Variable: SMOKELSEV1\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

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

Have you ever used smokeless tobacco products EVEN ONE TIME?

\* **Read if necessary:** Do not include nicotine replacement therapy products such as patch, gum, lozenge, or spray, which are considered smoking cessation treatments.

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample adults 18+

Skip Instructions:

<1> [goto SMOKELSCR1\_A]  
<2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

OTB: Other Tobacco

Question ID: OTB.0070.00.3 Variable: SMOKELSCR1\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Do you NOW use smokeless tobacco products every day, some days, or not at all?

Response:

1	Every day
2	Some days
3	Not at all
7	Refused
9	Don't Know

Universe:

Sample adults 18+ who have ever used smokeless tobacco products

Skip Instructions:

<1-3,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

LCS: Lung Cancer Screening

Question ID: LCS.0010.00.3 Variable: CTSCANEV1\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Have you ever had a CT scan of your chest area? During this test, you are lying down and moved through a donut-shaped x-ray machine while holding your breath.

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 40+

Skip Instructions:

<1> [goto CTLANGWHN1\_A]  
<2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

LCS: Lung Cancer Screening

Question ID: LCS.0020.00.3 Variable: CTLNGWHN1\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

When did you have your most recent CT scan of your chest area?

Response:

1	Within the past year (anytime less than 12 months ago)
2	Within the past 2 years (1 year but less than 2 years ago)
3	Within the past 3 years (2 years but less than 3 years ago)
4	Within the past 5 years (3 years but less than 5 years ago)
5	Within the past 10 years (5 years but less than 10 year ago)
6	10 years ago or more
7	Refused
9	Don't Know

Universe:

Sample Adults 40+ who ever had a CT scan of their chest area

Skip Instructions:

<1-6,RF,DK> [goto CTLNGCAN1\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

LCS: Lung Cancer Screening

Question ID: LCS.0030.00.3 Variable: CTLNGCAN1\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Was your most recent CT scan of your chest area done to check or screen for lung cancer?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 40+ who ever had a CT scan of their chest area

Skip Instructions:

<1,2,RF,DK> [goto next section]



2024 National Health Interview Survey (NHIS) Questionnaire

ALC: Alcohol Use

Question ID: ALC.0010.00.2 Variable: DRKLIFE\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

These next questions are about drinking alcoholic beverages.

Alcohol includes beer, wine, wine coolers, liquors such as vodka, whiskey or rum, mixed drinks or cocktails with alcohol, and any other type of alcoholic drink.

In your ENTIRE LIFE, have you had at least 1 drink of any kind of alcohol, not counting small tastes or sips?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto DRK12MN\_A]  
<2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

ALC: Alcohol Use

Question ID: ALC.0020.01.2 Variable: DRK12MN\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

\* 1 of 2

During the past 12 months, how many days per week, per month or per year did you drink any type of alcoholic beverage?

\* **Read if necessary:** *Alcohol includes beer, wine, wine coolers, liquors such as vodka, whiskey or rum, mixed drinks or cocktails with alcohol, and any other type of alcoholic drink.*

\* Enter number for how often alcoholic beverages were consumed in the past 12 months. Then enter category of response (week, month, year).

\* Enter '0' for Never.

Response:

000-365	Range of values
997	Refused
999	Don't Know

Universe:

Sample Adults 18+ who have had at least 1 drink in their entire life

Skip Instructions:

<0> [goto DRK12ANYR\_A]  
<1-365> [goto DRK12MTP\_A]  
<DK> [goto DRKAVG12M\_A]  
<RF> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

ALC: Alcohol Use

Question ID: ALC.0020.02.2 Variable: DRK12MTP\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

\* 2 of 2

\* Enter time period for how often alcoholic beverages were consumed in the past year.

Response:

0	Never
1	Per week
2	Per month
3	Per year
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who gave a number for number of days drank per week/month/year

Skip Instructions:

```
<1-3> if ((DRK12MN_A gt 7 and DRK12MTP_A=1) or (DRK12MN_A gt 31 and DRK12MTP_A=2))[goto
ERR1_DRK12MTP_A] else [goto DRKAVG12M_A]
<RF,DK> [goto DRKAVG12M_A]
```

Hard Edit:

Check Text	Check Description	Check Text
ERR1_DRK12MTP_A	Number of days reported exceeds number of days in a given time period hard edit	{check }  ^DRK12MN_A days per ^DRK12MTP_A exceeds number possible in this time period.  Please correct.

2024 National Health Interview Survey (NHIS) Questionnaire

ALC: Alcohol Use

Question ID: ALC.0030.00.2 Variable: DRKAVG12M\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

When counting number of drinks, one drink is equal to a 12-ounce beer, a 5-ounce glass of wine, or one shot or 1.5 ounces of liquor. A larger 40-ounce beer would count as 3 drinks, or a cocktail drink with 2 shots would count as 2 drinks.

During the past 12 months, on those days that you drank alcoholic beverages, on average, how many DRINKS did you have?

- \* Enter '1' if 1 or fewer drinks.
- \* Enter '95' if 95 or more drinks.

Response:

01-95	Range of values
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ who drank at least once in the past year or don't know

Skip Instructions:

```
<1-3,RF,DK> [goto DRKBNG12M_A]
<4> if GEN.SEX_FINAL=2 [goto DRKANY30D_A]
elseif GEN.SEX_FINAL IN (1,RF,DK) [goto DRKBNG12M_A]
<5-95> [goto DRKANY30D_A]
<10-95> [goto ERR1_DRKAVG12M_A]
```

Soft Edit:

Check Text	Check Description	Check Text
ERR1_DRKAVG12M_A	10 or more daily drinks	{signal }  ^DRKAVG12M_A drinks is an usually high number.  Please verify.  Do not probe.

2024 National Health Interview Survey (NHIS) Questionnaire

ALC: Alcohol Use

Question ID: ALC.0040.00.2 Variable: DRK12ANYR\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

In ANY ONE YEAR, have you had at least 12 drinks of any type of alcoholic beverage?

\* **Read if necessary:** One drink is equivalent to a 12-ounce beer, a 5-ounce glass of wine, or a drink with one shot (1.5 ounces) of liquor. A 40-ounce beer would count as 3 drinks or a cocktail drink with 2 shots would count as 2 drinks.

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have not had a drink in the past 12 months

Skip Instructions:

<1,2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

ALC: Alcohol Use

Question ID: ALC.0050.00.2 Variable: DRKBNG12M\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

During the past 12 months, did you ever have ^BINGE drinks in a day?

Fills:

BINGE	Description	number of daily drinks at threshold for bingeing
	Instruction	If GEN.SEX_FINAL in (1,RF,DK) fill: "5 or more" If GEN.SEX_FINAL=2, fill: "4 or more"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who drank less than 4(female)/5(male, refused, don't know sex) drinks a day on average

Skip Instructions:

```
<1> [goto DRKANY30D_A]  
<2,RF,DK> if (DRKAVG12M_A IN (RF,DK) and DRK12MN_A GE 1) [goto DRKANY30D_A]  
elseif (DRK12MN_A GE 1 or DRKAVG12M_A GE 1)[goto DRKADVISE1_A]  
elseif (DRKAVG12M_A IN (RF,DK) AND DRK12MN_A=DK))[goto next section]
```

2024 National Health Interview Survey (NHIS) Questionnaire

ALC: Alcohol Use

Question ID: ALC.0060.00.2 Variable: DRKANY30D\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

The next question will ask you about ONLY the past 30 days.

During the past 30 days, did you have at least one drink of any type of alcoholic beverage?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who drank 4+(female)/5+(male, refused, don't know sex) drinks in a day in the last year or refused or don't know

Skip Instructions:

<1,RF,DK> [goto DRKBNG30D\_A]  
<2> [goto DRKADVISE1\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

ALC: Alcohol Use

Question ID: ALC.0070.00.2 Variable: DRKBNG30D\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

During the past 30 days, how many times did you have ^BINGE drinks on an occasion?

\* **Read if necessary:** *A drinking occasion is considered to be approximately two hours.*

\* **Enter '0' if none.**

\* **Enter '60' if 60 or more times.**

Fills:

BINGE	Description	number of daily drinks at threshold for bingeing
	Instruction	If GEN.SEX_FINAL in (1,RF,DK) fill: "5 or more" If GEN.SEX_FINAL=2, fill: "4 or more"

Response:

00-60	Range of values
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ who drank in the past 30 days or refused or don't know

Skip Instructions:

<0-60,RF,DK> [goto DRKADVISE1\_A]



2024 National Health Interview Survey (NHIS) Questionnaire

ALC: Alcohol Use

Question ID: ALC.0080.00.2 Variable: DRKADVISE1\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

During the past 12 months, has a doctor, dentist, or other health professional ADVISED you to stop or cut down on your drinking?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have had 1 or more drinks in the past 12 months

Skip Instructions:

<1,2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

PHY: Physical Activity

Question ID: PHY.0010.01.2 Variable: MODN\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

\* 1 of 2

The next questions are about physical activities such as exercise, sports, or physically active hobbies that you may do in your LEISURE time. We are interested in two types of physical activity --- moderate and vigorous-intensity. Moderate-intensity activities cause moderate increases in breathing or heart rate whereas vigorous-intensity activities cause large increases in breathing or heart rate.

How often do you do MODERATE-INTENSITY LEISURE-TIME physical activities?

\* **If necessary, prompt with:** *How many times per day, per week, per month, or per year do you do these activities?*

\* Enter number for moderate leisure-time physical activities.

\* Enter '0' for Never.

\* Enter '996' if unable to do this type of activity.

Response:

000-995	Range of values
996	Unable to do this type of activity
997	Refused
999	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-995> [goto MODTP\_A]

<0,996,RF,DK> [goto VIGN\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

PHY: Physical Activity

Question ID: PHY.0010.02.2 Variable: MODTP\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

- \* 2 of 2
- \* Enter time period for moderate leisure-time physical activities.

Response:

1	Per day
2	Per week
3	Per month
4	Per year
7	Refused
9	Don't know

Universe:

Sample Adults 18+ who do moderate physical activities

Skip Instructions:

```
<1-4> if ((MODN_A gt 4 and MODTP_A=1) or (MODN_A gt 28 and MODTP_A=2) or (MODN_A gt 31 and
MODTP_A=3) or (MODN_A gt 365 and MODTP_A=4)) [goto ERR1_MODTP_A]
else [goto MODLN_A]
<RF,DK> [goto VIGN_A]
```

Soft Edit:

Check Text	Check Description	Check Text
ERR1_MODTP_A	Unusually high soft edit	{signal }  ^MODN_A times per ^MODTP_A is unusually high.  Please verify.

2024 National Health Interview Survey (NHIS) Questionnaire

PHY: Physical Activity

Question ID: PHY.0020.01.2 Variable: MODLN\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

\* 1 of 2

About how long do you do these moderate leisure-time physical activities each time?

\* **Read if necessary:** *Moderate-intensity activities cause moderate increases in breathing or heart rate.*

\* **Enter number for length of moderate leisure-time physical activities.**

Response:

001-995	Range of values
997	Refused
999	Don't Know

Universe:

Sample Adults 18+ who do moderate physical activities

Skip Instructions:

<1-995> [goto MODLTP\_A]

<RF,DK> [goto VIGN\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

PHY: Physical Activity

Question ID: PHY.0020.02.2 Variable: MODLTP\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

\* 2 of 2

\* Enter time period for length of moderate leisure-time physical activities.

Response:

1	Minutes
2	Hours
7	Refused
9	Don't know

Universe:

Sample Adults 18+ who do moderate physical activities

Skip Instructions:

```
<1,2> if ((MODLN_A ge 120 and MODLTP_A=1) or (MODLN_A ge 2 and MODLTP_A=2)) [goto ERR1_MODLTP_A]
elseif (MODLN_A ge 25 and MODLTP_A=2) [goto ERR2_MODLTP_A]
else [goto VIGN_A]
<RF,DK> [goto VIGN_A]
```

Hard Edit:

Check Text	Check Description	Check Text
ERR2_MODLTP_A	Out of range hard edit	{check }  ^MODLN_A ^MODLTP_A is more than 24 hours a day and is not allowed.  Please correct.

Soft Edit:

Check Text	Check Description	Check Text
ERR1_MODLTP_A	Unusually high soft edit	{signal }  ^MODLN_A ^MODLTP_A is unusually high.  Please verify.

2024 National Health Interview Survey (NHIS) Questionnaire

PHY: Physical Activity

Question ID: PHY.0030.01.2 Variable: VIGN\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

\* 1 of 2

How often do you do VIGOROUS-INTENSITY LEISURE-TIME physical activities?

\* **Read if necessary:** *Vigorous-intensity activities cause large increases in breathing or heart rate.*

\* **Read if necessary:** *How many times per day, per week, per month, or per year do you do these activities?*

\* **Enter number for vigorous leisure-time physical activities.**

\* **Enter '0' for Never.**

\* **Enter '996' if unable to do this type of activity.**

Response:

000-995	Range of values
996	Unable to do this type of activity
997	Refused
999	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<0,996,RF,DK> [goto STRN\_A]

<1-995> [goto VIGTP\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

PHY: Physical Activity

Question ID: PHY.0030.02.2 Variable: VIGTP\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

\* 2 of 2

\* Enter time period for vigorous leisure-time physical activities.

Response:

1	Per day
2	Per week
3	Per month
4	Per year
7	Refused
9	Don't know

Universe:

Sample Adults 18+ who do vigorous physical activities

Skip Instructions:

<1-4> if (VIGN\_A gt 4 and VIGTP\_A=1) or (VIGN\_A gt 28 and VIGTP\_A=2) or (VIGN\_A gt 31 and VIGTP\_A=3) or (VIGN\_A gt 365 and VIGTP\_A=4) [goto ERR1\_VIGTP\_A]  
else [goto VIGLN\_A]

Soft Edit:

Check Text	Check Description	Check Text
ERR1_VIGTP_A	Unusually high soft edit	{signal }  ^VIGN_A times per ^VIGTP_A is unusually high.  Please verify.

2024 National Health Interview Survey (NHIS) Questionnaire

PHY: Physical Activity

Question ID: PHY.0040.01.2 Variable: VIGLN\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

\* 1 of 2

About how long do you do these vigorous leisure-time physical activities each time?

\* **Read if necessary:** *Vigorous-intensity activities cause large increases in breathing or heart rate.*

\* **Enter number for length of vigorous leisure-time physical activities.**

Response:

001-995	Range of values
997	Refused
999	Don't Know

Universe:

Sample Adults 18+ who do vigorous physical activities

Skip Instructions:

<1-995>[goto VIGLTP\_A]  
<RF,DK>[goto STRN\_A]



2024 National Health Interview Survey (NHIS) Questionnaire

PHY: Physical Activity

Question ID: PHY.0040.02.2 Variable: VIGLTP\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

\* 2 of 2

\* Enter time period for length of vigorous leisure-time physical activities.

Response:

1	Minutes
2	Hours
7	Refused
9	Don't know

Universe:

Sample Adults 18+ who do vigorous physical activities

Skip Instructions:

```
<1,2> if (VIGLN_A ge 120 and VIGLTP_A=1) or (VIGLN_A ge 2 and VIGLTP_A=2) [goto ERR1_VIGLTP_A]
elseif (VIGLN_A ge 25 and VIGLTP_A=2) [goto ERR2_VIGLTP_A]
else [goto STRN_A]
<RF,DK> [goto STRN_A]
```

Hard Edit:

Check Text	Check Description	Check Text
ERR2_VIGLTP_A	Out or range hard edit	{check }  ^VIGLN_A ^VIGLNTP_A is more than 24 hours a day and is not allowed.  Please correct.

Soft Edit:

Check Text	Check Description	Check Text
ERR1_VIGLTP_A	Unusually high soft edit	{signal }  ^VIGLN_A ^VIGLNTP_A is unusually high.  Please verify.

2024 National Health Interview Survey (NHIS) Questionnaire

PHY: Physical Activity

Question ID: PHY.0050.01.2 Variable: STRN\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

\* 1 of 2

Including activities that you mentioned earlier, how often do you do LEISURE-TIME physical activities specifically designed to STRENGTHEN your muscles such as sit-ups, push-ups, or lifting weights?

\* **Read if necessary:** *How many times per day, per week, per month, or per year do you do these activities?*

\* Enter number for strengthening activities.

\* Enter '0' for Never.

\* Enter '996' for Unable to do this type of activity.

Response:

000-995	Range of values
996	Unable to do this type of activity
997	Refused
999	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-995> [goto STRTP\_A]

<0,996,RF,DK> [goto next section]



2024 National Health Interview Survey (NHIS) Questionnaire

WLK: Walking

Question ID: WLK.0010.00.2 Variable: WLKTRAN\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

The next questions are about walking for transportation. This is walking you might have done to travel to and from work, to do errands, or to go from place to place. I will ask you separately about walking for other reasons like relaxation, exercise, or walking the dog.

In the past 7 days, did you walk for transportation?

\* **Read if necessary:** *Include walking to or from a bus, train, or rail stop.*

\* **Read if necessary:** *Do not include walking for relaxation or exercise.*

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who are able to walk

Skip Instructions:

<1> [goto WLKTRANDAY\_A]  
<2,RF,DK> [goto WLKLEIS\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

WLK: Walking

Question ID: WLK.0020.00.2 Variable: WLKTRANDAY\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

In the past 7 days, how many days did you walk for transportation?

Response:

01-07	Range of values
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ who have walked for transportation in the past 7 days

Skip Instructions:

<1-7> [goto WLKTRANTPD\_A]  
<RF,DK> [goto WLKLEIS\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

WLK: Walking

Question ID: WLK.0030.00.2 Variable: WLKTRANTPD\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

^WLKDAYT

Fills:

WLKDAYT	Description	How many times did you walk for transportation that day?/On average, how many times per day did you walk for transportation?
	Instruction	If WLKTRANDAY_A=1, fill: "How many times did you walk for transportation that day?" elseif WLKTRANDAY_A IN (2-7), fill: "On average, how many times per day did you walk for transportation?"

Response:

01-94	Range of values
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ who have walked for transportation at least one day in the past 7 days

Skip Instructions:

<1-94> [goto WLKTRANLGT\_A]  
<RF,DK> [goto WLKLEIS\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

WLK: Walking

Question ID: WLK.0040.01.2 Variable: WLKTRANLGT\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

\* 1 of 2

^WALKTIMETP

\* Enter number for length of walk for transportation.

Fills:

WALKTIMETP	Description	How long did that walk take?/On average, how long did those walks take?
	Instruction	If WLKTRANDAY_A=1 AND WLKTRANTPD_A=1, fill: "How long did that walk take?"  If WLKTRANDAY_A=2-7 OR WLKTRANTPD_A=2-94, fill: "On average, how long did those walks take?"

Response:

001-995	Range of values
997	Refused
999	Don't Know

Universe:

Sample Adults 18+ who have walked for transportation at least one time in the past 7 days

Skip Instructions:

<1-995> [goto WLKTRANTP\_A]  
<RF,DK> [goto WLKLEIS\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

WLK: Walking

Question ID: WLK.0040.02.2 Variable: WLKTRANTP\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

- \* 2 of 2
- \* Enter time period for length of walking for transportation.

Response:

1	Minutes
2	Hours
7	Refused
9	Don't know

Universe:

Sample Adults 18+ who entered a number for how long they walked for transportation in the past 7 days

Skip Instructions:

```
<1,2> if ((WLKTRANLGT_A GT 119 and WLKTRANTP_A=1) or (WLKTRANLGT_A GT 1 and WLKTRANTP_A=2))[goto ERR1_WLKTRANLGT_A]
<1,2> if ((WLKTRANLGT_A GE 25 and WLKTRANTP_A=2))[goto ERR2_WLKTRANLGT_A]
else [goto WLKLEIS_A]
<RF,DK> [goto WLKLEIS_A]
```

Hard Edit:

Check Text	Check Description	Check Text
ERR2_WLKTRANLGT_A	Amount of time walking is over 24 hours on average	{check }  Amount of time walking is more than 24 hours and is not allowed.  Please correct.

Soft Edit:

Check Text	Check Description	Check Text
ERR1_WLKTRANLGT_A	Amount of time walking is over 2 hours on average	{signal }  Amount of time walking is unusually high.  Please verify.



2024 National Health Interview Survey (NHIS) Questionnaire

WLK: Walking

Question ID: WLK.0050.00.2 Variable: WLKLEIS\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

Sometimes you may walk for fun, relaxation, exercise, or to walk the dog. In the past 7 days, did you walk for any of these reasons?

\* **Read if necessary:** *Do not include walking for transportation.*

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who are able to walk

Skip Instructions:

<1> [goto WLKLEISDAY\_A]  
<2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

WLK: Walking

Question ID: WLK.0060.00.2 Variable: WLKLEISDAY\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

In the past 7 days, how many days did you walk for leisure or exercise?

\* **Read if necessary:** *Walked for fun, relaxation, exercise, or to walk the dog.*

\* **Read if necessary:** *Do not include walking for transportation.*

Response:

01-07	Range of values
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ who have walked for leisure in the past 7 days

Skip Instructions:

<1-7> [goto WLKLEISTPD\_A]  
<RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

WLK: Walking

Question ID: WLK.0070.00.2 Variable: WLKLEISTPD\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

^WLKDAYL

Fills:

WLKDAYL	Description	How many times did you walk for leisure or exercise that day?/On average, how many times per day did you walk for leisure or exercise?
	Instruction	If WLKLEISDAY_A=1, fill: "How many times did you walk for leisure or exercise that day?" elseif WLKLEISDAY_A IN (2-7), fill: "On average, how many times per day did you walk for leisure or exercise?"

Response:

01-94	Range of values
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ who have walked for leisure at least one day in the past 7 days

Skip Instructions:

<1-94> [goto WLKLEISLGT\_A]  
<RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

WLK: Walking

Question ID: WLK.0080.01.2 Variable: WLKLEISLGT\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

\* 1 of 2

^WALKTIMELE

\* Enter number for length of walk for fun, relaxation, or exercise.

Fills:

WALKTIMELE	Description	How long did that walk take?/On average, how long did those walks take?
	Instruction	If WLKLEISDAY_A=1 AND WLKLEISTPD_A=1, fill: "How long did that walk take?"  elseif WLKLEISDAY_A=2-7 OR WLKLEISTPD_A=2-94, fill: "On average, how long did those walks take?"

Response:

001-995	Range of values
997	Refused
999	Don't Know

Universe:

Sample Adults 18+ who have walked for leisure at least once in the past 7 days

Skip Instructions:

<1-995> [goto WLKLEISTP\_A]  
<RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

WLK: Walking

Question ID: WLK.0080.02.2 Variable: WLKLEISTP\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

\* 2 of 2

\* Enter time period for length of walking for fun, relaxation, or exercise.

Response:

1	Minutes
2	Hours
7	Refused
9	Don't know

Universe:

Sample Adults 18+ who gave a number for amount of time walked for leisure in the past 7 days

Skip Instructions:

<1,2> if ((WLKLEISLGT\_A GT 119 and WLKLEISTP\_A=1) or (WLKLEISLGT\_A GT 1 and WLKLEISTP\_A=2))  
 [goto ERR1\_WLKLEISLGT\_A], then [goto next section]  
 <1,2> if (WLKLEISLGT\_A GE 25 and WLKLEISTP\_A=2)) [goto ERR2\_WLKLEISLGT\_A]  
 <RF,DK>[goto next section]

Hard Edit:

Check Text	Check Description	Check Text
ERR2_WLKLEISLGT_A	Amount of time walking is over 24 hours on average	{check }  Amount of time walking is more than 24 hours and is not allowed.  Please correct.

Soft Edit:

Check Text	Check Description	Check Text
ERR1_WLKLEISLGT_A	Amount of time walking is over 2 hours on average	{signal }  Amount of time walking is unusually high.  Please verify.

2024 National Health Interview Survey (NHIS) Questionnaire

ENV: Perceptions of the Walking Environment

Question ID: ENV.0010.00.3 Variable: HOMEWLK\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

How often does the ^TLwalking you reported earlier take place near ^HOME?

Would you say almost always, most of the time, some of the time, or never?

Fills:

TLwalking	Description	walking for leisure and transportation/walking for leisure/walking for transportation
	Instruction	If WLK.WLKLEIS_A=1 and WLK.WLKTRAN_A=1, fill: "walking for leisure and transportation" elseif WLK.WLKLEIS_A=1, fill: "walking for leisure" elseif WLK.WLKTRAN_A=1, fill: "walking for transportation"
HOME	Description	your home at ^HNO ^HNOSUF ^STRNAME/your home
	Instruction	If Roster.HHC.tb1NAME.bPerson[PX_A].ONOFFCAMPUS=1, fill "your home at ^HNO ^HNOSUF ^STRNAME" else fill "your home"
HNO	Description	{Value of HNO}
	Instruction	Fill GEN.HNO
HNOSUF	Description	{Value of HNOSUF}
	Instruction	Fill GEN.HNOSUF
STRNAME	Description	{Value of STRNAME}
	Instruction	Fill GEN.STRNAME

Response:

1	Almost always
2	Most of the time
3	Some of the time
4	Never
7	Refused
8	Not accertained
9	Don't know

Universe:

Sample Adults 18+ who report walking for transportation or leisure

Skip Instructions:

<1-4,RF,DK> [goto ROADSWLK\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

ENV: Perceptions of the Walking Environment

Question ID: ENV.0020.00.3 Variable: ROADSWLK\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

The next questions are about where you live. By where you live we mean in your neighborhood or near ^HOME.

Where you live, are there roads, sidewalks, paths or trails where you can walk?

Fills:

HOME	Description	your home at ^HNO ^HNOSUF ^STRNAME/your home
	Instruction	If Roster.HHC.tb1NAME.bPerson[PX_A].ONOFFCAMPUS=1, fill "your home at ^HNO ^HNOSUF ^STRNAME" else fill "your home"
HNO	Description	{Value of HNO}
	Instruction	Fill GEN.HNO
HNOSUF	Description	{Value of HNOSUF}
	Instruction	Fill GEN.HNOSUF
STRNAME	Description	{Value of STRNAME}
	Instruction	Fill GEN.STRNAME

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto SHOPSWLK\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

ENV: Perceptions of the Walking Environment

Question ID: ENV.0030.00.3 Variable: SHOPSWLK\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

\* **Read if necessary:** *Where you Live...*

Are there shops, stores, or markets that you can walk to?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto TRANSITWLK\_A]



2024 National Health Interview Survey (NHIS) Questionnaire

ENV: Perceptions of the Walking Environment

Question ID: ENV.0040.00.3 Variable: TRANSITWLK\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

\* **Read if necessary:** *Where you Live...*

Are there bus or transit stops that you can walk to?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto FUNWLK\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

ENV: Perceptions of the Walking Environment

Question ID: ENV.0050.00.3 Variable: FUNWLK\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

\* **Read if necessary:** *Where you Live...*

Are there places like movies, libraries, or places of worship that you can walk to?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto RELAXWLK\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

ENV: Perceptions of the Walking Environment

Question ID: ENV.0060.00.3 Variable: RELAXWLK\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

\* **Read if necessary:** *Where you Live...*

Are there places that you can walk to that help you relax, clear your mind, and reduce stress?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto SIDEWLK\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

ENV: Perceptions of the Walking Environment

Question ID: ENV.0070.00.3 Variable: SIDEWLK\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Where you live, do most streets have sidewalks?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto TRAFFICWLK\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

ENV: Perceptions of the Walking Environment

Question ID: ENV.0080.00.3 Variable: TRAFFICWLK\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

\* **Read if necessary:** *Where you Live...*

Does traffic make it unsafe for you to walk?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto CRIMEWLK\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

ENV: Perceptions of the Walking Environment

Question ID: ENV.0090.00.3 Variable: CRIMEWLK\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

\* **Read if necessary:** *Where you Live...*

Does crime make it unsafe for you to walk?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto ANIMALWLK\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

ENV: Perceptions of the Walking Environment

Question ID: ENV.0100.00.3 Variable: ANIMALWLK\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

\* **Read if necessary:** *Where you Live...*

Do dogs or other animals make it unsafe for you to walk?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto WEATHERWLK\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

ENV: Perceptions of the Walking Environment

Question ID: ENV.0110.00.3 Variable: WEATHERWLK\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

How often does the weather make you less likely to walk?

Would you say almost always, most of the time, some of the time, or never?

\* **Read if necessary:** We mean any kind of bad weather that makes you less likely to walk, such as hot, cold, rainy, snowy, and windy weather.

Response:

1	Almost always
2	Most of the time
3	Some of the time
4	Never
7	Refused
8	Not ascertained
9	Don't know

Universe:

Sample Adults 18+

Skip Instructions:

<1-4,RF,DK> [goto PEOPLEWLK\_A]



2024 National Health Interview Survey (NHIS) Questionnaire

ENV: Perceptions of the Walking Environment

Question ID: ENV.0120.00.3 Variable: PEOPLEWLK\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

How often are there people walking within sight of ^HOME?

Would you say every day, every 2 to 3 days, about once a week, or less than once a week?

Fills:

HOME	Description	your home at ^HNO ^HNOSUF ^STRNAME/your home
	Instruction	If Roster.HHC.tblNAME.bPerson[PX_A].ONOFFCAMPUS=1, fill "your home at ^HNO ^HNOSUF ^STRNAME" else fill "your home"
HNO	Description	{Value of HNO}
	Instruction	Fill GEN.HNO
HNOSUF	Description	{Value of HNOSUF}
	Instruction	Fill GEN.HNOSUF
STRNAME	Description	{Value of STRNAME}
	Instruction	Fill GEN.STRNAME

Response:

1	Every day
2	Every 2 to 3 days
3	About once a week
4	Less than once a week
7	Don't know
9	Refused

Universe:

Sample Adults 18+

Skip Instructions:

<1-4,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

CPA: Content of Care - Physical Activity

Question ID: CPA.0010.00.2 Variable: ADVACTIVE\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

During the past 12 months, has a doctor or other health professional ADVISED you to increase the amount of physical activity or exercise you get?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

SUN: Sun Care and Protection

Question ID: SUN.0010.00.3 Variable: SUNSKIN1\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

The next questions are about sun exposure and sunburns. By sunburn, we mean when even a small part of your skin turns red or hurts for 12 hours or more.

After several months of not being in the sun, if you THEN went out in the sun without sunscreen or protective clothing for one hour, which of these would happen to your skin?

Would you get a severe sunburn with blisters, have a moderate sunburn with or without peeling, burn mildly with some or no darkening or tanning, turn darker without sunburn, or would nothing happen to your skin?

\* **Read if necessary:** *Even if you do not go out in the sun, what would happen if you did?*

\* **Read if necessary:** *By sunburn, we mean when even a small part of your skin turns red or hurts for 12 hours or more.*

\* **Do not read the choice "do not go out in the sun." Select this choice if respondent volunteers.**

Response:

01	Get a severe sunburn with blisters
02	Have a moderate sunburn with peeling
03	Burn mildly with some or no darkening/tanning
04	Turn darker without sunburn
05	Nothing would happen to my skin
06	Do not go out in the sun
07	Other
97	Refused
99	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-6,RF,DK> [goto SUNTAN1\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

SUN: Sun Care and Protection

Question ID: SUN.0020.00.3 Variable: SUNTAN1\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Think about the past 12 months, when spending time outdoors, how often did you try to get some sun for the purpose of developing a tan? Would you say always, most of the time, sometimes, rarely, or never?

\* Do not read the choice "don't spend time outdoors." Select this choice if respondent volunteers.

Response:

1	Always
2	Most of the time
3	Sometimes
4	Rarely
5	Never
6	Don't spend time outdoors
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-6,RF,DK> [goto ANYSBURN1\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

SUN: Sun Care and Protection

Question ID: SUN.0030.00.3 Variable: ANYSBURN1\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

During the past 12 months, did you have a sunburn even on a small part of your skin?

**Read if necessary:** *By sunburn, we mean when even a small part of your skin turns red or hurts for 12 hours or more.*

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto NUMBURNS1\_A]  
<2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

SUN: Sun Care and Protection

Question ID: SUN.0040.00.3 Variable: NUMSBURNS1\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

During the past 12 months, how many times have you had a sunburn even on a small part of your skin?

\* **Read if necessary:** *If you can't remember exactly how many, just give your best guess.*

**Read if necessary:** *By sunburn, we mean when even a small part of your skin turns red or hurts for 12 hours or more.*

Response:

001-365	Range of values
997	Refused
999	Don't Know

Universe:

Sample Adults 18+ who had a sunburn in the past 12 months

Skip Instructions:

<1-39,RF,DK> [goto SBURNWRK\_A]  
<40-365> [goto ERR1\_NUMSBURNS1\_A]

Soft Edit:

Check Text	Check Description	Check Text
ERR1_NUMSBURNS1_A	Unusually high number of sunburns	{signal }  ^NUMSBURNS is an unusually high number.  Please confirm.

2024 National Health Interview Survey (NHIS) Questionnaire

SUN: Sun Care and Protection

Question ID: SUN.0050.00.3 Variable: SBURNWRK\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

The next questions are about your MOST RECENT sunburn in the past 12 months. Were you working at your job when you got sunburned?

\* **Read if necessary:** *By sunburn, we mean when even a small part of your skin turns red or hurts for 12 hours or more.*

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who had a sunburn in the past 12 months

Skip Instructions:

<1,2,RF,DK> if SUNTAN1\_A=1-4 [goto SBURNTAN\_A]  
else [goto SBURNPHY\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

SUN: Sun Care and Protection

Question ID: SUN.0060.00.3 Variable: SBURNTAN\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

\* **Read if necessary:** Think about the MOST RECENT time you got a sunburn.

Were you trying to get a tan?

\* **Read if necessary:** By sunburn, we mean when even a small part of your skin turns red or hurts for 12 hours or more.

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have had a sunburn in the past 12 months and report always, most of the time, sometimes, or rarely outdoor tanning

Skip Instructions:

<1,2,RF,DK> [goto SBURNPHY\_A]



2024 National Health Interview Survey (NHIS) Questionnaire

SUN: Sun Care and Protection

Question ID: SUN.0070.00.3 Variable: SBURNPHY\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

\* **Read if necessary:** Think about the MOST RECENT time you got a sunburn.

Were you exercising?

\* **Read if necessary:** By sunburn, we mean when even a small part of your skin turns red or hurts for 12 hours or more.

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who had a sunburn in the past 12 months

Skip Instructions:

<1,2,RF,DK> [goto SBURNWAT\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

SUN: Sun Care and Protection

Question ID: SUN.0080.00.3 Variable: SBURNWAT\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

\* **Read if necessary:** *Think about the MOST RECENT time you got a sunburn.*

Were you spending time in, on, or near the water such as a pool, lake, or ocean?

\* **If the respondent mentions swimming or another aquatic activity when exercising, enter '1'.**

\* **Read if necessary:** *By sunburn, we mean when even a small part of your skin turns red or hurts for 12 hours or more.*

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who had a sunburn in the past 12 months

Skip Instructions:

<1,2,RF,DK> [goto SBURNSCR\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

SUN: Sun Care and Protection

Question ID: SUN.0090.00.3 Variable: SBURNSCR\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

\* **Read if necessary:** Think about the MOST RECENT time you got a sunburn.

Were you using sunscreen?

\* **Read if necessary:** By sunburn, we mean when even a small part of your skin turns red or hurts for 12 hours or more.

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who had a sunburn in the past 12 months

Skip Instructions:

<1,2,RF,DK> if ALC.DRK12MN\_A=1-365 and ALC.DRK12MTP\_A=1-3 [goto SBURNALC\_A]  
else [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

SUN: Sun Care and Protection

Question ID: SUN.0100.00.3 Variable: SBURNALC\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

\* **Read if necessary:** Think about the MOST RECENT time you got a sunburn.

Were you drinking alcohol?

\* **Read if necessary:** By sunburn, we mean when even a small part of your skin turns red or hurts for 12 hours or more.

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who had a sunburn in the past 12 months and have had at least one drink of alcohol in the past 12 months

Skip Instructions:

<1,2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

SLP: Sleep

Question ID: SLP.0010.00.2 Variable: SLPHOURS\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

On average, how many hours of sleep do you get in a 24-hour period?

\* Enter hours in whole numbers, rounding 30 minutes (1/2 hour) or more UP to the next whole hour and dropping 29 or fewer minutes.

\* Enter 1 if the respondent reports less than 1 hour of sleep.

Response:

01-24	Range of values
97	Refused
99	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-5> [goto ERR1\_SLPHOURS\_A]

<6-24,RF,DK> [goto SLPREST\_A]

Soft Edit:

Check Text	Check Description	Check Text
ERR1_SLPHOURS_A	Soft error for few sleep hours	{signal }  Average number of hours of sleep is ^SLPHOURS.  Please verify.

2024 National Health Interview Survey (NHIS) Questionnaire

SLP: Sleep

Question ID: SLP.0020.00.2 Variable: SLPREST\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

During the past 30 days, how often did you wake up feeling well-rested?

Would you say never, some days, most days, or every day?

Response:

1	Never
2	Some days
3	Most days
4	Every day
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-4,RF,DK> [goto SLPFLL\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

SLP: Sleep

Question ID: SLP.0030.00.2 Variable: SLPFLL\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

During the past 30 days, how often did you have trouble falling asleep?

Would you say never, some days, most days, or every day?

Response:

1	Never
2	Some days
3	Most days
4	Every day
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-4,RF,DK> [goto SLPSTY\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

SLP: Sleep

Question ID: SLP.0040.00.2 Variable: SLPSTY\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

\* **Read if necessary:** *During the past 30 days...*

How often did you have trouble staying asleep?

\* **Read if necessary:** *Would you say never, some days, most days, or every day?*

\* **Include waking up too early.**

Response:

1	Never
2	Some days
3	Most days
4	Every day
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-4,RF,DK> [goto SLPMEDINTRO\_A]



2024 National Health Interview Survey (NHIS) Questionnaire

SLP: Sleep

Question ID: SLP.0050.00.2 Variable: SLPMEDINTRO\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

The next three questions are about sleep medications and supplements. For the first two questions, do not include marijuana or CBD products.

\* Enter '1' to continue.

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto SLPMED1\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

SLP: Sleep

Question ID: SLP.0060.00.2 Variable: SLPMED1\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

During the past 30 days, how often did you take any medications prescribed by a doctor to help you fall asleep or stay asleep?

Would you say never, some days, most days, or every day?

\* **Read if necessary:** Do not include marijuana or CBD products.

Response:

1	Never
2	Some days
3	Most days
4	Every day
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-4,RF,DK> [goto SLPMED2\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

SLP: Sleep

Question ID: SLP.0070.00.2 Variable: SLPMED2\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

During the past 30 days, how often did you take any over the counter (OTC) medications or supplements to help you fall asleep or stay asleep?

Would you say never, some days, most days, or every day?

\* **Read if necessary:** Do not include marijuana or CBD products.

Response:

1	Never
2	Some days
3	Most days
4	Every day
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-4,RF,DK> [goto SLPMED3\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

SLP: Sleep

Question ID: SLP.0080.00.2 Variable: SLPMED3\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

During the past 30 days, how often did you use marijuana or CBD products to help you fall asleep or stay asleep?

\* **Read if necessary:** *Would you say never, some days, most days, or every day?*

\* **Read if necessary:** *CBD is a substance found in the cannabis plant that does not cause a feeling of being high. CBD has been marketed in some products as a sleep aid.*

Response:

1	Never
2	Some days
3	Most days
4	Every day
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-4,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

SSL: Social Support and Loneliness

Question ID: SSL.0005.00.3 Variable: SSLINTRO\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

The next questions are about social and emotional support.

\* Enter '1' to continue.

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto SUPPORT\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

SSL: Social Support and Loneliness

Question ID: SSL.0010.00.3 Variable: SUPPORT\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

How often do you get the social and emotional support you need? Would you say always, usually, sometimes, rarely, or never?

Response:

1	Always
2	Usually
3	Sometimes
4	Rarely
5	Never
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-5,RF,DK> [goto LONELY\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

SSL: Social Support and Loneliness

Question ID: SSL.0020.00.3 Variable: LONELY\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

How often do you feel lonely? Would you say always, usually, sometimes, rarely, or never?

Response:

1	Always
2	Usually
3	Sometimes
4	Rarely
5	Never
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-5,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

TSM: Taste and Smell

Question ID: TSM.0010.00.3 Variable: SMELLDf\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

During the past 12 months, have you had difficulty with your sense of smell or ability to detect odors? Would you say no difficulty, a little difficulty, moderate difficulty, a lot of difficulty, or you cannot smell at all?

Response:

1	No difficulty
2	A little difficulty
3	Moderate difficulty
4	A lot of difficulty
5	Cannot smell at all
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-5,RF,DK> [goto SMELLCOMP\_A]



2024 National Health Interview Survey (NHIS) Questionnaire

TSM: Taste and Smell

Question ID: TSM.0020.00.3 Variable: SMELLCOMP\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

How would you rate your ability to smell now as compared to when you were ^25year5yearsyounger?  
Is it better, worse, or is there no change?

^YOUNGADULT

Fills:

25year5yearsyounger	Description	five years younger/25 years old
	Instruction	If GEN.AGE_FINAL[PX_A] lt 30 fill "five years younger" elseif GEN.AGE_FINAL[PX_A] ge 30 fill "25 years old" elseif GEN.AGE_FINAL[PX_A] in (RF,DK), fill: "a young adult"
YOUNGADULT	Description	FR Instruction for young adult
	Instruction	if GEN.AGE_FINAL[PX_A] in (RF,DK), fill: "* If the respondent indicates that she/he is a young adult, mark "no change"." else fill: blank

Response:

1	Better
2	Worse
3	No Change
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-3,RF,DK> [goto SMELLPHT\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

TSM: Taste and Smell

Question ID: TSM.0030.00.3 Variable: SMELLPHT\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

During the past 12 months, did you sometimes smell an unpleasant, bad, metallic, or burning odor when nothing was there?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto SMELLPAR\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

TSM: Taste and Smell

Question ID: TSM.0040.00.3 Variable: SMELLPAR\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

During the past 12 months, did some strong odors smell differently from how they usually smelled?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto TASTEDF\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

TSM: Taste and Smell

Question ID: TSM.0050.00.3 Variable: TASTEDF\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

During the past 12 months, have you had difficulty with your ability to taste sweet, sour, salty, or bitter foods and drinks? Would you say no difficulty, a little difficulty, moderate difficulty, a lot of difficulty, or you cannot taste at all?

Response:

1	No difficulty
2	A little difficulty
3	Moderate difficulty
4	A lot of difficulty
5	Cannot taste at all
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-5,RF,DK> [goto TASTECOMP\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

TSM: Taste and Smell

Question ID: TSM.0060.00.3 Variable: TASTECOMP\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Compared to when you were ^25year5yearsyounger, how would you rate your ability to taste sweet, sour, salty, or bitter foods and drinks? Is it better, worse, or is there no change?

^YOUNGADULT

Fills:

25year5yearsyounger	Description	five years younger/25 years old
	Instruction	If GEN.AGE_FINAL[PX_A] lt 30 fill "five years younger" elseif GEN.AGE_FINAL[PX_A] ge 30 fill "25 years old" elseif GEN.AGE_FINAL[PX_A] in (RF,DK), fill: "a young adult"
YOUNGADULT	Description	FR Instruction for young adult
	Instruction	if GEN.AGE_FINAL[PX_A] in (RF,DK), fill: "* If the respondent indicates that she/he is a young adult, mark "no change"." else fill: blank

Response:

1	Better
2	Worse
3	No Change
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-3,RF,DK> [goto TASTEFLAV\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

TSM: Taste and Smell

Question ID: TSM.0070.00.3 Variable: TASTEFLAV\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Compared to when you were ^25year5yearsyounger, how would you rate your ability to taste flavors such as chocolate, vanilla, or strawberry? Is it better, worse, or is there no change?

^YOUNGADULT

Fills:

25year5yearsyounger	Description	five years younger/25 years old
	Instruction	If GEN.AGE_FINAL[PX_A] lt 30 fill "five years younger" elseif GEN.AGE_FINAL[PX_A] ge 30 fill "25 years old" elseif GEN.AGE_FINAL[PX_A] in (RF,DK), fill: "a young adult"
YOUNGADULT	Description	FR Instruction for young adult
	Instruction	if GEN.AGE_FINAL[PX_A] in (RF,DK), fill: "* If the respondent indicates that she/he is a young adult, mark "no change"." else fill: blank

Response:

1	Better
2	Worse
3	No Change
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-3,RF,DK> [goto TASTEUNW\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

TSM: Taste and Smell

Question ID: TSM.0080.00.3 Variable: TASTEUNW\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

During the past 12 months, have you had an unwanted taste or other sensation in your mouth that does not go away?

\* **Read if necessary:** *This could include bad, metallic, or bitter tastes or burning or tingling sensations.*

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto TSTSMHP2\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

TSM: Taste and Smell

Question ID: TSM.0090.00.3 Variable: TSTSMHP2\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Have you ever talked to a doctor or other health professional about any problem with your ability to taste or smell?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto TSTSMLAST\_A]  
<2,RF,DK> [goto next section]



2024 National Health Interview Survey (NHIS) Questionnaire

TSM: Taste and Smell

Question ID: TSM.0100.00.3 Variable: TSTSMLAST\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

When was the last time you talked to a doctor or other health professional about any problem with your ability to taste or smell?

Response:

1	Within the past year (anytime less than 12 months ago)
2	Within the past 2 years (1 year but less than 2 years ago)
3	Within the past 3 years (2 years but less than 3 years ago)
4	Within the past 5 years (3 years but less than 5 years ago)
5	Within the past 10 years (5 years but less than 10 year ago)
6	10 years ago or more
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who discussed problems with or changes in ability to taste or smell with a doctor or health professional

Skip Instructions:

<1-6,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

ORN: Sexual Orientation

Question ID: ORN.0010.00.1 Variable: ORNINTRO\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Next we have some questions about your demographic characteristics, including sexual orientation, gender identity, income, employment, and veteran status. Like all your answers, these will be used to understand the health of different groups in the population and will be kept confidential.

\* Enter '1' to continue.

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto ORIENT\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

ORN: Sexual Orientation

Question ID: ORN.0020.00.1 Variable: ORIENT\_A Interview Module: Adult Content Type: Annual Core

Question Text:

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

Fills:

gaylesbian	Description	gay/lesbian or gay
	Instruction	If GEN.SEX_FINAL=1 fill "gay"; else if GEN.SEX_FINAL='2',RF,DK fill "lesbian or gay"

Response:

1	^GayLesbian
2	Straight, that is, not ^gaylesbian
3	Bisexual
4	Something else
5	I don't know the answer
7	Refused

Universe:

Sample Adults 18+

Skip Instructions:

<1-3,RF> [goto next section]  
<4,5> [goto ORIENTSP\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

ORN: Sexual Orientation

Question ID: ORN.0030.00.1 Variable: ORIENTSP\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Could you tell me what you mean by ^ORIENTSP?

^ORIENTSPDK

Fills:

ORIENTSP	Description	something else/don't know
	Instruction	if ORIENT_A=4, fill "something else" elseif ORIENT_A=5, fill "don't know"
ORIENTSPDK	Description	RIN you don't understand the words or in process of figuring out sexuality
	Instruction	if ORIENT_A=5, fill "* Read if necessary: For example, you don't understand the words, or you understand the words, but you have not figured out or are in the process of figuring out your sexuality?" else, no fill

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ who answer something else or don't know to sexual orientation

Skip Instructions:

<verbatim,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

GNI: Gender Identity

Question ID: GNI.0010.00.4 Variable: GENDER\_A Interview Module: Adult Content Type: Emerging Content

Question Text:

For this next question you may select more than one answer. Do you currently describe yourself as male, female, transgender, nonbinary, or another gender?

\* **Read if necessary:** *The purpose of this question is to get a better understanding about how people's gender impacts their health. Your privacy and confidentiality, and all your answers, are protected by law.*

Response:

1	Male
2	Female
3	Transgender
4	Nonbinary
5	Another gender
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-4,RF,DK> [goto next section]  
<5> [goto GENDSPEC\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

GNI: Gender Identity

Question ID: GNI.0020.00.4 Variable: GENDSPEC\_A Interview Module: Adult Content Type: Emerging Content

Question Text:

What term do you use to describe your gender?

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ who identify as another gender

Skip Instructions:

<allow 80,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

MAR: Marital Status

Question ID: MAR.0010.00.1 Variable: MARITAL\_A Interview Module: Adult Content Type: Annual Core

Question Text:

The next questions are about marriage and cohabitation. Are you now married, living with a partner together as an unmarried couple, or neither?

\* If respondent answers both married and living with a different partner together as an unmarried couple, enter living with partner.

Response:

1	Married
2	Living with a partner together as an unmarried couple
3	Neither
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ and the Child PAR section has not been completed for the Sample Adult or the Child PAR section has been completed for the Sample Adult and the Sample Adult is not the Sample Child respondent

Skip Instructions:

<1> [goto SPOUSLIV\_A]  
 <2> if GEN.PCNT16PLUS=1 [got ERR1\_MARITAL\_A] else [goto PARTNERWHO\_A]  
 <3,RF,DK> [goto EVRMARRIED\_A]

Soft Edit:

Check Text	Check Description	Check Text
ERR1_MARITAL_A	One person eligible to be living with a partner in household soft edit	{signal }  Respondent is the only person 16 or older on the household roster. There is no one else eligible to select.

2024 National Health Interview Survey (NHIS) Questionnaire

MAR: Marital Status

Question ID: MAR.0020.00.1 Variable: SPOUSLIV\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Does your spouse live here?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who are married

Skip Instructions:

<1> if GEN.PCNT16PLUS=1 [goto ERR1\_SPOUSLIV\_C] else [goto SPOUSWHO\_A]  
 <2> [goto SPOUSEP\_A]  
 <RF,DK> [goto next section]

Soft Edit:

Check Text	Check Description	Check Text
ERR1_SPOUSLIV_C	Only one person eligible to be married in household soft edit	{signal }  Respondent is the only person 16 or older on the household roster. There is no one else eligible to select.



2024 National Health Interview Survey (NHIS) Questionnaire

MAR: Marital Status

Question ID: MAR.0030.00.1 Variable: SPOUSWHO\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Which person is your spouse?

\* Enter line number of spouse.

\* Deleted persons cannot be selected. Enter '0' if respondent wishes to select a deleted person.

Response:

00	Not on roster
01-25	Person Number
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ with spouse in household

Skip Instructions:

<0-25> [goto SPOUSSEX\_A]

<RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

MAR: Marital Status

Question ID: MAR.0040.00.1 Variable: SPOUSSEX\_A Interview Module: Adult Content Type: Annual Core

Question Text:

I previously recorded ^SPOUSENAME's ^spousesex. Is this correct?

Fills:

SPOUSENAME	Description	Name of spouse
	Instruction	Fill name of spouse selected at SPOUSWHO_A
spousesex	Description	sex is male/sex is female/sex was not provided
	Instruction	if GEN.SEX_FINAL[person selected at SPOUSWHO_A]=1, fill "sex is male" if GEN.SEX_FINAL[person selected at SPOUSWHO_A]=2, fill "sex is female" if GEN.SEX_FINAL[person selected at SPOUSWHO_A] IN (DK,RF), fill "sex was not provided"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with spouse in household who entered a line number for their spouse

Skip Instructions:

<1,RF,DK> [goto next section]  
<2> [goto SPOUNWSEX\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

MAR: Marital Status

Question ID: MAR.0050.00.1 Variable: SPOUNWSEX\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Is ^SPOUSENAME male or female?

Fills:

SPOUSENAME	Description	Name of spouse
	Instruction	Fill name of spouse selected at SPOUSWHO_A

Response:

1	Male
2	Female
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with spouse with incorrect sex

Skip Instructions:

<1,2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

MAR: Marital Status

Question ID: MAR.0060.00.1 Variable: SPOUSEP\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Does your spouse not live here because you and your spouse are legally separated?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ whose spouse does not live in the household

Skip Instructions:

<1,2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

MAR: Marital Status

Question ID: MAR.0070.00.1 Variable: PARTNERWHO\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Which person is your partner?

\* Enter line number of partner.

\* Deleted persons cannot be selected. Enter '0' if respondent wishes to select a deleted person.

Response:

00	Not on roster
01-25	Person Number
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ who are living with unmarried partner in household

Skip Instructions:

<0-25> [goto PARTNERSEX\_A]  
<RF,DK> [goto EVRMARRIED\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

MAR: Marital Status

Question ID: MAR.0080.00.1 Variable: PARTNERSEX\_A Interview Module: Adult Content Type: Annual Core

Question Text:

I previously recorded ^PARTNERNAME's ^partnersex. Is this correct?

Fills:

PARTNERNAME	Description	Name of partner
	Instruction	Fill name of partner selected at PARTNERWHO_A
partnersex	Description	sex is male/sex is female/sex was not provided
	Instruction	if GEN.SEX_FINAL[person selected at PARTNERWHO_A]=1, fill "sex is male" if GEN.SEX_FINAL[person selected at PARTNERWHO_A]=2, fill "sex is female" if GEN.SEX_FINAL[person selected at PARTNERWHO_A] IN (DK,RF), fill "sex was not provided"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with partner in household who entered a line number for their partner

Skip Instructions:

<1,RF,DK> [goto EVRMARRIED\_A]  
<2> [goto PARTNEWSEX\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

MAR: Marital Status

Question ID: MAR.0090.00.1 Variable: PARTNEWSEX\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Is ^PARTNERNAME male or female?

Fills:

PARTNERNAME	Description	Name of partner
	Instruction	Fill name of partner selected at PARTNERWHO_A

Response:

1	Male
2	Female
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with partner with incorrect sex

Skip Instructions:

<1,2,RF,DK> [goto EVRMARRIED\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

MAR: Marital Status

Question ID: MAR.0100.00.1 Variable: EVRMARRIED\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Have you ever been married?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who are living with unmarried partner or who are not married or living with an unmarried partner or refused or don't know

Skip Instructions:

```
<1> if MARITAL_A=2 [goto LEGALSTAT_A]
elseif MARITAL_A=3 [goto WIDIVSEP_A]
else [goto next section]
<2,RF,DK> [goto next section]
```



2024 National Health Interview Survey (NHIS) Questionnaire

MAR: Marital Status

Question ID: MAR.0110.00.1 Variable: LEGALSTAT\_A Interview Module: Adult Content Type: Annual Core

Question Text:

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

Response:

1	Married
2	Widowed
3	Divorced
4	Separated
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who are living with a partner but have been married

Skip Instructions:

<1-4,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

MAR: Marital Status

Question ID: MAR.0120.00.1 Variable: WIDIVSEP\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Are you widowed, divorced, or separated?

Response:

1	Widowed
2	Divorced
3	Separated
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who are neither living with a partner nor married, but have been married

Skip Instructions:

<1-3,RF,DK> [goto FINISH\_MAR\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

MAR: Marital Status

Question ID: MAR.0130.00.1 Variable: FINISH\_MAR\_A Interview Module: Adult Content Type: Annual Core

Question Text:

\* The Sample Adult MAR section is now complete.

\* Enter '1' to continue.

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

Sample Adults 18+ and the Child PAR section has not been completed for the Sample Adult or the Child PAR section has been completed for the Sample Adult and the Sample Adult is not the Sample Child respondent

Skip Instructions:

<1> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

VET: Veterans Status

Question ID: VET.0010.00.1 Variable: AFVET\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Did you ever serve on active duty in the U.S. Armed Forces, military Reserves, or National Guard?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto AFVETTRN\_A]  
<2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

VET: Veterans Status

Question ID: VET.0020.00.1 Variable: AFVETTRN\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Were you on active duty ONLY for training in the Reserves or National Guard?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have ever served in the armed forces

Skip Instructions:

<1> [goto VADISB\_A]  
<2,RF,DK> [goto COMBAT\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

VET: Veterans Status

Question ID: VET.0030.00.1 Variable: COMBAT\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Did you ever serve in a foreign country during a time of armed conflict or on a humanitarian or peace-keeping mission?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have ever served in the armed forces and who were not only activated for training in the Reserves or National Guard

Skip Instructions:

<1,2,RF,DK> [goto VADISB\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

VET: Veterans Status

Question ID: VET.0040.00.1 Variable: VADISB\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Do you have a VA service-connected disability rating?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have ever served in the armed forces

Skip Instructions:

<1,2,RF,DK> [goto VAHOSP\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

VET: Veterans Status

Question ID: VET.0050.00.1 Variable: VAHOSP\_A Interview Module: Adult Content Type: Annual Core

Question Text:

During the past 12 months, did you receive any care at a Veteran's Health Administration facility or receive any other health care paid for by the VA?

\* **Read if necessary:** *Veteran's Health Administration facilities include VA hospitals, VA medical centers, VA outpatient clinics, and VA nursing homes.*

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have ever served in the armed forces

Skip Instructions:

<1> [goto next section]  
<2,RF,DK> if 1 IN Adult.INS.MILSPC\_A [goto next section]  
else [goto VACAREEV]



2024 National Health Interview Survey (NHIS) Questionnaire

VET: Veterans Status

Question ID: VET.0060.00.1 Variable: VACAREEV\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Have you ever enrolled in or used VA health care?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have ever served in the armed forces and did not receive care at a VHA facility or other health care paid for by the VA in the past 12 months and did not report VA health care when asked about insurance

Skip Instructions:

<1,2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

NAT: Nativity

Question ID: NAT.0010.00.1 Variable: NATUSBORN\_A Interview Module: Adult Content Type: Annual Core

Question Text:

^Askverify\_A Were you born in the United States or a U.S. territory?

Fills:

Askverify_A	Description	FR Instruction
	Instruction	If GEN.SARESPSC_FLG=1, fill "* Ask or verify:"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto NATSTBORN\_A]  
<2> [goto NATUSYR\_A]  
<RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

NAT: Nativity

Question ID: NAT.0020.00.1 Variable: NATSTBORN\_A Interview Module: Adult Content Type: Annual Core

Question Text:

In what state or U.S. territory were you born?

Response:

AL	Alabama
AK	Alaska
AZ	Arizona
AR	Arkansas
CA	California
CO	Colorado
CT	Connecticut
DE	Delaware
DC	District of Columbia
FL	Florida
GA	Georgia
GU	Guam
HI	Hawaii
ID	Idaho
IL	Illinois
IN	Indiana
IA	Iowa
KS	Kansas
KY	Kentucky
LA	Louisiana
ME	Maine
MD	Maryland
MA	Massachusetts
MI	Michigan
MN	Minnesota
MS	Mississippi
MO	Missouri
MT	Montana
NE	Nebraska
NV	Nevada
NH	New Hampshire
NJ	New Jersey

NM	New Mexico
NY	New York
NC	North Carolina
ND	North Dakota
OH	Ohio
OK	Oklahoma
OR	Oregon
PA	Pennsylvania
PR	Puerto Rico
RI	Rhode Island
SC	South Carolina
SD	South Dakota
TN	Tennessee
TX	Texas
UT	Utah
VT	Vermont
VA	Virginia
VI	U.S. Virgin Islands
WA	Washington
WV	West Virginia
WI	Wisconsin
WY	Wyoming
AS	American Samoa
MP	Northern Mariana Islands
97	Refused
99	Don't Know

**Universe:**

Sample Adults 18+ born in the United States or U.S. territory

**Skip Instructions:**

<American Samoa> [goto CITIZEN\_A]  
else [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

NAT: Nativity

Question ID: NAT.0040.00.1 Variable: NATUSYR\_A Interview Module: Adult Content Type: Annual Core

Question Text:

In what year did you come to the United States to stay?

Response:

Year	Year
9997	Refused
9999	Don't Know

Universe:

Sample Adults 18+ not born in the United States or U.S. territory

Skip Instructions:

<1900-Current Year,RF,DK> if NATUSYR\_A is a future year [goto ERR1\_NATUSYR\_A]  
 if NATUSYR\_A lt VFY.BYEAR\_A [goto ERR2\_NATUSYR\_A]  
 else [goto CITIZEN\_A]

Hard Edit:

Check Text	Check Description	Check Text
ERR1_NATUSYR_A	Future year hard edit	{check }  Future year invalid. Please correct.
ERR2_NATUSYR_A	Year prior to birth hard edit	{check }  Year is prior to date of birth. Please correct.

2024 National Health Interview Survey (NHIS) Questionnaire

NAT: Nativity

Question ID: NAT.0050.00.1 Variable: CITIZEN\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Are you a citizen of the United States?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ not born in the United States or U.S. territory or born in American Samoa

Skip Instructions:

<1> [goto NATCTZN\_A]  
<2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

NAT: Nativity

Question ID: NAT.0060.00.1 Variable: NATCTZN\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Were you born abroad to an American parent, born abroad and adopted by an American parent, or did you become a U.S. citizen by naturalization?

Response:

1	Born abroad to American parent
2	Born abroad and adopted by an American parent
3	Became U.S. citizen by naturalization
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ not born in the United States or a United States territory or born in the U.S. territory of American Samoa but are U.S. citizens

Skip Instructions:

<1-3,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

LNG: Language Spoken at Home

Question ID: LNG.0010.00.4 Variable: LANGHM\_A Interview Module: Adult Content Type: Emerging Content

Question Text:

\* If the interview is being conducted in a language other than English, do not read this question and enter '1' for yes.

Do you speak a language other than English at home?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto LANGSPEC\_A]  
<2,RF,DK> [goto next section]



2024 National Health Interview Survey (NHIS) Questionnaire

LNG: Language Spoken at Home

Question ID: LNG.0020.00.4 Variable: LANGSPEC\_A Interview Module: Adult Content Type: Emerging Content

Question Text:

\* If the interview is being conducted in a language other than English, do not read this question and enter the other language.

What other language do you speak most often at home?

Response:

AMHARIC	Amharic
ARABIC	Arabic
ARMENIAN	Armenian
BENGALI	Bengali
CHINESE	Chinese
CROATIAN	Croatian
CZECH	Czech
DUTCH	Dutch
FINNISH	Finnish
FORMOSAN	Formosan
FRENCH CREOLE	French Creole
FRENCH	French
GERMAN	German
GREEK	Greek
GUJARATHI	Gujarathi
HATIAN	Hatian
HEBREW	Hebrew
HINDI (URDU)	Hindi (Urdu)
HMONG	Hmong
HUNGARIAN	Hungarian
ILOCANO	Ilocano
INDONESIAN	Indonesian
ITALIAN	Italian
JAPANESE	Japanese
KOREAN	Korean
KRU	Kru
LITHUANIAN	Lithuanian
MALAYALAM	Malayalam
MANDARIN	Mandarin
MIN NAN CHINESE	Min Nan Chinese
MON-KHMER (CAMBODIAN)	Mon-Khmer (Cambodian)

NAVAHO	Navaho
NORWEGIAN	Norwegian
PANJAB	Panjab
PENNSYLVANIA DUTCH	Pennsylvania Dutch
PERSIAN	Persian
POLISH	Polish
PORTUGUESE	Portuguese
RUMANIAN	Rumanian
RUSSIAN	Russian
SAMOAN	Samoan
SERBOCROATIAN	Serbocroatian
SLOVAK	Slovak
SOMALI	Somali
SPANISH	Spanish
SWEDISH	Swedish
SYRIAC	Syriac
TAGALOG	Tagalog
THAI (LAOTIAN)	Thai (Laotian)
TURKISH	Turkish
UKRAINIAN	Ukrainian
VIETNAMESE	Vietnamese
YIDDISH	Yiddish
Other, specify	Other, Specify
97	Refused
99	Don't Know

**Universe:**

Sample Adults 18+ who speak a language other than English at home

**Skip Instructions:**

<1-53,RF,DK> [goto LANGMED\_A]  
 <54> [goto LANGSPECSP\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

LNG: Language Spoken at Home

Question ID: LNG.0040.00.4 Variable: LANGSPECSP\_A Interview Module: Adult Content Type: Emerging Content

Question Text:

\* Enter language spoken most often at home.

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ who speak a language other than English at home with an unlisted language

Skip Instructions:

<verbatim,RF,DK> [goto LANGMED\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

LNG: Language Spoken at Home

Question ID: LNG.0050.00.4 Variable: LANGMED\_A Interview Module: Adult Content Type: Emerging Content

Question Text:

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

Response:

1	English
2	Other language
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who speak a language other than English at home

Skip Instructions:

<1,2,RF,DK> [goto LANGDOC\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

LNG: Language Spoken at Home

Question ID: LNG.0060.00.4 Variable: LANGDOC\_A Interview Module: Adult Content Type: Emerging Content

Question Text:

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

Response:

1	English
2	Other language
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who speak a language other than English at home

Skip Instructions:

<1,2,RF,DK> if SOC.SOCSCCLPAR\_A=1-3 [goto LANGSOC\_A]  
else [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

LNG: Language Spoken at Home

Question ID: LNG.0070.00.4 Variable: LANGSOC\_A Interview Module: Adult Content Type: Emerging Content

Question Text:

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

Response:

1	English
2	Other language
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who speak a language other than English at home and who did not answer unable to do, refused, or don't know when asked if they have difficulty participating in social activities such as visiting friends, attending clubs and meetings, or going to parties

Skip Instructions:

<1,2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

SCH: Schooling

Question ID: SCH.0010.00.1 Variable: SCHCURENR\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Are you currently enrolled in or attending school?

\* **Read if necessary:** School includes high school, college, trade school, and professional school. Students may be enrolled part-time or full-time.

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto SCHDYSMSS\_A]  
<2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

SCH: Schooling

Question ID: SCH.0020.00.1 Variable: SCHEDYSMSS\_A Interview Module: Adult Content Type: Annual Core

Question Text:

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

Response:

000-365	Range of values
997	Refused
999	Don't Know

Universe:

Sample Adults 18+ who are currently enrolled in school

Skip Instructions:

<0-99,RF,DK> [goto next section]  
<100-365> [goto ERR1\_SCHEDYSMSS\_A]

Soft Edit:

Check Text	Check Description	Check Text
ERR1_SCHEDYSMSS_A	Missed 100-365 days	{signal }  ^SCHEDYSMSS_A is an unusually large number. Did you miss ^SCHEDYSMSS_A days of school because of illness, injury, or disability?  Please verify.



2024 National Health Interview Survey (NHIS) Questionnaire

EMP: Employment

Question ID: EMP.0010.00.1 Variable: EMPLASTWK\_A Interview Module: Adult Content Type: Annual Core

Question Text:

LAST WEEK, did you work for pay at a job or business?

\* If the respondent says ^heshetheywork, but not for pay, at a family-owned job or business, enter '1' for yes.

Fills:

heshetheywork	Description	he works/she works/they work
	Instruction	elseif GEN.SEX_FINAL=1 fill "he works" elseif GEN.SEX_FINAL=2 fill "she works" elseif GEN.SEX_FINAL IN (RF,DK) fill "they work"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto EMPHOURS\_A]  
<2> [goto EMPNOWRK\_A]  
<RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

EMP: Employment

Question ID: EMP.0020.00.1 Variable: EMPNOWRK\_A Interview Module: Adult Content Type: Annual Core

Question Text:

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

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who were not working for pay at a job or business last week

Skip Instructions:

<1> [goto EMPHOURS\_A]  
<2> [goto EMPWHYNOT\_A]  
<RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

EMP: Employment

Question ID: EMP.0030.00.1 Variable: EMPWHYNOT\_A Interview Module: Adult Content Type: Annual Core

Question Text:

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

\* Probe if necessary.

Response:

01	Unemployed, laid off, looking for work
02	Seasonal/contract work
03	Retired
04	Unable to work for health reasons/disabled
05	Taking care of house or family
06	Going to school
07	Working at a family-owned job or business not for pay
08	Other
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ who were not working for pay and were not on temporary leave from a job or business last week

Skip Instructions:

<1-6,8,RF,DK> [goto EMPWHENWRK\_A]  
<7> [goto EMPHOURS\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

EMP: Employment

Question ID: EMP.0040.00.1 Variable: EMPWHENWRK\_A Interview Module: Adult Content Type: Annual Core

Question Text:

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

Response:

1	Within the past 12 months
2	1-5 years ago
3	Over 5 years ago
4	Never worked
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ whose main reason for not working last week was because they couldn't find work, did seasonal or contract work, were retired, unable to work for health reasons, taking care of the house/family, going to school, or some other reason, or refused or don't know

Skip Instructions:

```
<1> if EMPWHYNOT_A=2 [goto EMPHOURS_A]  
else [goto EMPSICKLV_A]  
<2-4,RF,DK> [goto next section]
```

2024 National Health Interview Survey (NHIS) Questionnaire

EMP: Employment

Question ID: EMP.0050.00.1 Variable: EMPHOURS\_A Interview Module: Adult Content Type: Annual Core

Question Text:

^Whenwork many hours do you USUALLY work in total at ALL jobs or businesses?

Fills:

Whenwork	Description	When you are doing your seasonal or contract work, how/How
	Instruction	If EMPWHYNOT_A=2 fill "When you are doing your seasonal or contract work, how" else fill "How"

Response:

001-168	Range of values
997	Refused
999	Don't Know

Universe:

Sample Adults 18+ who were working at or were on temporary leave from a paid job or business last week, or worked but not for pay at a family business or had seasonal/contract work in the past 12 months

Skip Instructions:

<1-94> [goto EMPSICKLV\_A]  
 <95-168> [goto ERR1\_EMPHOURS\_A], then [goto EMPSICKLV\_A]  
 <RF,DK> [goto EMPFULLTIM\_A]

Soft Edit:

Check Text	Check Description	Check Text
ERR1_EMPHOURS_A	Hours worked last week/usually work per week unusually high	{signal }  ^EMPHOURS_A hours is unusually high. Please verify. Make corrections if necessary.

2024 National Health Interview Survey (NHIS) Questionnaire

EMP: Employment

Question ID: EMP.0060.00.1 Variable: EMPFULLTIM\_A Interview Module: Adult Content Type: Annual Core

Question Text:

^WhenworkDo you USUALLY work 35 hours or more per week in total at ALL jobs or businesses?

Fills:

WhenworkDo	Description	When you are doing your seasonal or contract work, do/Do
	Instruction	If EMPWHYNOT_A=2 fill: "When you are doing your seasonal or contract work, do" else "Do"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who refused or didn't know how many hours they usually work

Skip Instructions:

<1,2,RF,DK> [goto EMPSICKLV\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

EMP: Employment

Question ID: EMP.0070.00.1 Variable: EMPSICKLV\_A Interview Module: Adult Content Type: Annual Core

Question Text:

^LASTJOB paid sick leave available if you ^workneed it?

Fills:

LASTJOB	Description	When you last worked, was/Regarding your job or business, is
	Instruction	If EMPWHENWRK_A=1 and EMPWHYNOT_A ne 2 fill: "When you last worked, was" else fill: "Regarding your job or business, is"
workneed	Description	needed/need
	Instruction	If EMPWHENWRK_A=1 and EMPWHYNOT_A ne 2, fill: "needed"; else fill: "need"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who were working at or were on temporary leave from a paid job or business last week; who work, but not for pay at family business or who are not currently working but who had some period of employment in the past 12 months

Skip Instructions:

<1,2,RF,DK> [goto EMPHEALINS\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

EMP: Employment

Question ID: EMP.0080.00.1 Variable: EMPHEALINS\_A Interview Module: Adult Content Type: Annual Core

Question Text:

^LASTJOB health insurance offered to you through your workplace?

Fills:

LASTJOB	Description	When you last worked, was/Regarding your job or business, is
	Instruction	If EMPWHENWRK_A=1 and EMPWHYNOT_A ne 2 fill: "When you last worked, was" else fill: "Regarding your job or business, is"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who were working at or were on temporary leave from a paid job or business last week; who work, but not for pay at family business or who are not currently working but who had some period of employment in the past 12 months

Skip Instructions:

<1,2,RF,DK> [goto EMPDAYMISS\_A]



2024 National Health Interview Survey (NHIS) Questionnaire

EMP: Employment

Question ID: EMP.0090.00.1 Variable: EMPDAYMISS\_A Interview Module: Adult Content Type: Annual Core

Question Text:

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

\* **Read if necessary:** Do not include family or ^paternitymaternity Leave.

Fills:

paternitymaternity	Description	paternity/maternity/maternity or paternity
	Instruction	If GEN.SEX_FINAL=1 fill "paternity" else if GEN.SEX_FINAL=2 fill "maternity" else if GEN.SEX_FINAL=RF,DK fill "maternity or paternity"

Response:

000-365	Range of values
997	Refused
999	Don't Know

Universe:

Sample Adults 18+ who were working at or were on temporary leave from a paid job or business last week; who work, but not for pay at family business or who are not currently working but who had some period of employment in the past 12 months

Skip Instructions:

<0-99,RF,DK> [goto next section]  
<100-365> [goto ERR1\_EMPDAYMISS\_A] then [goto next section]

Soft Edit:

Check Text	Check Description	Check Text
ERR1_EMPDAYMISS_A	Days of work missed in the past 12 months unusually high	{signal }  ^EMPDAYMISS_A days is unusually high. Please verify. Make corrections if necessary.

2024 National Health Interview Survey (NHIS) Questionnaire

EMD: Detailed Employment

Question ID: EMD.0010.00.2 Variable: EMDWHOWRK1\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

^JOBFOR whom ^dodid you work ^job?

\* Enter the name of the company, business or employer.

\* Read if necessary for those with more than one MAIN job or business: Where ^dodid you work for the most amount of time?

Fills:

JOBFOR	Description	For/Thinking about the MAIN job you held in the past 12 months, for
	Instruction	If EMP.EMPLASTWK_A=1 or EMP.EMPNOWRK_A=1 or EMP.EMPWHYNOT_A=7 fill: "For" elseif EMP.EMPWHENWRK_A=1 fill: "Thinking about the MAIN job you held in the past 12 months, for"
dodid	Description	Do/Did
	Instruction	If EMP.EMPLASTWK_A=1 or EMP.EMPNOWRK_A=1 or EMP.EMPWHYNOT_A=7 fill: "Do" If EMP.EMPWHENWRK_A=1, fill: "Did"
job	Description	at your MAIN job or business
	Instruction	if (EMP.EMPLASTWK_A=1 or EMP.EMPNOWRK_A=1 or EMP.EMPWHYNOT_A=7) fill: "at your MAIN job or business" else no fill

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ who were working at or were on temporary leave from a paid job or business last week, or who work, but not for pay at a family-owned job or business, or who did not have a job or business last week but had a job or business in the past 12 months

Skip Instructions:

<verbatim,RF,DK> [goto EMDINDUST\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

EMD: Detailed Employment

Question ID: EMD.0020.00.2 Variable: EMDINDUST\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

What kind of business or industry ^iswas this?

\* **Read if necessary:** For example: hospital, newspaper publishing, mail order house, auto engine manufacturing, bank.

Fills:

iswas	Description	is/was
	Instruction	If EMP.EMPLASTWK_A=1 or EMP.EMPNOWRK_A=1 or EMP.EMPWHYNOT_A=7 fill "is" elseIf EMP.EMPWHENWRK_A=1, fill "was"

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ who were working at or were on temporary leave from a paid job or business last week, or who work, but not for pay at a family-owned job or business, or who did not have a job or business last week but had a job or business in the past 12 months

Skip Instructions:

<verbatim,RF,DK> [goto EMDKIND\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

EMD: Detailed Employment

Question ID: EMD.0030.00.2 Variable: EMDKIND1\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

What kind of work ^arewere you doing?

\* **Read if necessary:** For example: registered nurse, personnel manager, supervisor of order department, secretary, accountant.

Fills:

arewere	Description	are/were
	Instruction	If EMP.EMPLASTWK_A=1 or EMP.EMPNOWRK_A=1 or EMP.EMPWHYNOT_A=7, fill: "are" If EMP.EMPWHENWRK_A=1, fill: "were"

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ who were working at or were on temporary leave from a paid job or business last week, or who work, but not for pay at a family-owned job or business, or who did not have a job or business last week but had a job or business in the past 12 months

Skip Instructions:

<verbatim,RF,DK> [goto EMDIMPACT1\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

EMD: Detailed Employment

Question ID: EMD.0040.00.2 Variable: EMDIMPACT1\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

What ^arewere your most important activities or duties on this job or business?

\* **Read if necessary:** For example: patient care, directing hiring policies, supervising order clerks, typing and filing, reconciling financial records.

Fills:

arewere	Description	are/were
	Instruction	If EMP.EMPLASTWK_A=1 or EMP.EMPNOWRK_A=1 or EMP.EMPWHYNOT_A=7, fill: "are" If EMP.EMPWHENWRK_A=1, fill: "were"

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ who were working at or were on temporary leave from a paid job or business last week, or who work, but not for pay at a family-owned job or business, or who did not have a job or business last week but had a job or business in the past 12 months

Skip Instructions:

<verbatim,RF,DK> [goto EMDSUPER\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

EMD: Detailed Employment

Question ID: EMD.0050.00.2 Variable: EMDSUPER\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

^DoDid you supervise other employees as part of your job?

Fills:

Do/Did	Description	Do/Did
	Instruction	If EMP.EMPLASTWK_A=1 or EMP.EMPNOWRK_A=1 or EMP.EMPWHYNOT_A=7 fill: "Do" If EMP.EMPWHENWRK_A=1, fill: "Did"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who were working at or were on temporary leave from a paid job or business last week, or who work, but not for pay at a family-owned job or business, or who did not have a job or business last week but had a job or business in the past 12 months

Skip Instructions:

<1,2,RF,DK> [goto EMDWRKCAT1\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

EMD: Detailed Employment

Question ID: EMD.0060.00.2 Variable: EMDWRKCAT1\_A Interview Module: Adult Content Type: Rotating Core

Question Text:

Which of these BEST describes your MAIN job or ^WRKCAT?

\* [Read answer choices.](#)

Fills:

WRKCAT	Description	work situation/business in the past 12 months
	Instruction	If EMP.EMPLASTWK_A=1 or EMP.EMPNOWRK_A=1 or EMP.EMPWHYNOT_A=7, fill: "work situation" If EMP.EMPWHENWRK_A=1, fill: "business in the past 12 months"

Response:

1	Employee of a PRIVATE company for wages
2	A FEDERAL government employee
3	A STATE government employee
4	A LOCAL government employee
5	Self-employed in OWN business, professional practice or farm
6	Working WITHOUT PAY in a family-owned business or farm
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who were working at or were on temporary leave from a paid job or business last week, or who work, but not for pay at a family-owned job or business, or who did not have a job or business last week but had a job or business in the past 12 months

Skip Instructions:

<1-6,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

VOL: Volunteer Activities

Question ID: VOL.0010.00.4 Variable: CEVOLUN1\_A Interview Module: Adult Content Type: Emerging Content

Question Text:

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

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,RF> [goto next section]  
<2,DK> [goto CEVOLUN2\_A]



2024 National Health Interview Survey (NHIS) Questionnaire

VOL: Volunteer Activities

Question ID: VOL.0020.00.4 Variable: CEVOLUN2\_A Interview Module: Adult Content Type: Emerging Content

Question Text:

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

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who did not spend time volunteering in the past 12 months or don't know

Skip Instructions:

<1,2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

FEM: Employment of family members

Question ID: FEM.0010.00.1 Variable: FEMINTRO\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Now I'm going to ask you about some of the other members of your family.

\* Enter '1' to continue.

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

If Sample Adult lives in a family with at least one other adult AND  
(Sample Child and Sample Adult are not in the same family  
OR Sample Child and Sample Adult are in the same family AND Sample Child FEM section has not  
been completed  
OR the Sample Adult and Sample Child are in the same family and every question asked in the  
Sample Child FEM section was answered with RF/DK and the person answering the SC interview and  
the SA are different people.

Skip Instructions:

<1>[goto tblFEM\_A]

Replicate To:

FEMINTRO_C
------------

2024 National Health Interview Survey (NHIS) Questionnaire

FEM: Employment of family members

Question ID: FEM.0030.00.1 Variable: FEMWORK\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Does ^ALIASNAME work for pay at a job or business?

\* If the respondent says ^heshetheywork, but not for pay, at a family-owned job or business, enter '1' for yes.

Fills:

ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]
heshetheywork	Description	he works/she works/they work
	Instruction	elseif GEN.SEX_FINAL=1 fill "he works" elseif GEN.SEX_FINAL=2 fill "she works" elseif GEN.SEX_FINAL IN (RF,DK) fill "they work"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

If Sample Adult lives in a family with at least one other adult AND  
 (Sample Child and Sample Adult are not in the same family  
 OR Sample Child and Sample Adult are in the same family AND Sample Child FEM section has not  
 been completed  
 OR the Sample Adult and Sample Child are in the same family and every question asked in the  
 Sample Child FEM section was answered with RF/DK and the person answering the SC interview and  
 the SA are different people.

Skip Instructions:

<1> [goto FEMWKFT\_A]  
 <2,RF,DK> if there is another adult in the family [goto FEMWORK\_A] for the next adult 18+  
 else [goto next section]

Replicate To:

FEMWORK\_C

2024 National Health Interview Survey (NHIS) Questionnaire

FEM: Employment of family members

Question ID: FEM.0040.00.1 Variable: FEMWKFT\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Does ^ALIASNAME usually work 35 hours or more per week in total at ^hishertheir job or jobs?

Fills:

ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]
hishertheir	Description	his/her/their
	Instruction	If GEN.SEX_FINAL=1 fill "his"; else if GEN.SEX_FINAL=2 fill "her"; else if GEN.SEX_FINAL IN (DK, RF) fill "their"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

If Sample Adult lives in a family with at least one other adult AND  
(Sample Child and Sample Adult are not in the same family  
OR Sample Child and Sample Adult are in the same family AND Sample Child FEM section has not  
been completed  
OR the Sample Adult and Sample Child are in the same family and every question asked in the  
Sample Child FEM section was answered with RF/DK and the person answering the SC interview and  
the SA are different people.

Skip Instructions:

<1,2,RF,DK> if another adult in the family [goto FEMWORK\_A] for the next adult 18+  
else [goto next section]

Replicate To:

FEMWKFT\_C

2024 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0010.00.1 Variable: INCINTRO\_A Interview Module: Adult Content Type: Annual Core

Question Text:

The next questions are about your total ^FAMILY income in ^LASTYEAR BEFORE TAXES. ^INCSAFAM

\* **Read if necessary:** *Income is important in analyzing the health information we collect. For example, with this information, we can learn whether persons in one income group use certain types of medical services more or less often than those in another group. Please be assured that, like all other information you have provided, these answers will remain confidential.*

\* Enter '1' to continue.

Fills:

FAMILY	Description	family
	Instruction	If PCNT_A > 1 fill "family"
LASTYEAR	Description	Last year
	Instruction	Fill year prior to current year
INCSAFAM	Description	Based on questions asked earlier we have that your family consists of ^SAFAM.
	Instruction	If more than one person in the Sample Adult's family, fill "Based on questions asked earlier we have that your family consists of ^SAFAM." else no fill
SAFAM	Description	List of people in SA's family
	Instruction	For all people with FAMILYA_FLG =1 and are not Household Respondent, fill with their names. If Household Respondent (Roster.HHC.HHRESPAVAIL) is on list of names, fill "you" for name and place name at the beginning of the list. Include Sample Adult in this list.

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

Sample Adults 18+ and Sample Adult and Sample Child are in the same family and the Sample Child INC section has not been completed  
 OR the Sample Adult and Sample Child are not in the same family  
 OR Sample Adult and Sample Child are in the same family, Sample Child respondent answered all questions asked in the INC section with dk/rf and Sample Adult is not the Sample Child respondent

Skip Instructions:

<1> [goto INCWRKO\_A]

Replicate To:

INCINTRO\_C

2024 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0020.00.1 Variable: INCWRKO\_A Interview Module: Adult Content Type: Annual Core

Question Text:

In ^LASTYEAR, did ^YOUFAM18YRS receive income from wages, salaries, commissions, bonuses, tips, or self-employment?

^INCSAFAMoptional

Fills:

LASTYEAR	Description	Last year
	Instruction	Fill year prior to current year
YOUFAM18YRS	Description	you/you or any family members 18 or older
	Instruction	If PCNT18UP_A=1 fill "you" else if PCNT18UP_A GT 1 fill "you or any family members 18 or older"
INCSAFAMoptional	Description	Read if necessary: For the purpose of this survey, your family includes ^FAMVERSA_fill
	Instruction	If more than one person in the Sample Adult's family, fill "* Read if necessary: For the purpose of this survey, your family includes ^FAMVERSA_fill." else no fill
FAMVERSA_fill	Description	List of all people in Sample Adult's family
	Instruction	Loop through all persons on roster and add to list of names if:  -people related via REL (FAMA_REL_FLG = 1) or -people who are related to the SA (RELATE = 1-13) or -people in SC's family and the 1st person in HH in SC's family are related to the SA (RELATE = 1-13)  Do not include Sample Adult on list.  If Household Respondent (Roster.HHC.HHRESPAVAIL) is on list of names, fill "you" for name and place name at the beginning of the list. If only one person on the list of names and person ne Roster.HHC.HHRESPAVAIL, follow list with "is". If more than one person on the list or only one person on list and person is Household Respondent (Roster.HHC.HHRESPAVAIL), follow list with "are".

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ and Sample Adult and Sample Child are in the same family and the Sample Child INC section has not been completed  
OR the Sample Adult and Sample Child are not in the same family  
OR Sample Adult and Sample Child are in the same family, Sample Child respondent answered all questions asked in the INC section with dk/rf and Sample Adult is not the Sample Child respondent

Skip Instructions:

<1,2,RF,DK> [goto INCINTER\_A]

Replicate To:

INCWRKO\_C

2024 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0030.00.1 Variable: INCINTER\_A Interview Module: Adult Content Type: Annual Core

Question Text:

In ^LASTYEAR, did ^YOUFAMHERE receive income from interest-bearing accounts or investments, dividends from stocks or mutual funds, net rental income, royalty income, or income from estates and trusts?

Fills:

LASTYEAR	Description	Last year
	Instruction	Fill year prior to current year
YOUFAMHERE	Description	you/you or any family members
	Instruction	If PCNT_A=1 fill "you" else if PCNT_A GT 1 fill "you or any family members"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ and Sample Adult and Sample Child are in the same family and the Sample Child INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR Sample Adult and Sample Child are in the same family, Sample Child respondent answered all questions asked in the INC section with dk/rf and Sample Adult is not the Sample Child respondent

Skip Instructions:

<1,2,DK> [goto INCSSRR\_A]  
<RF> if INCWRKO\_A IN (1,2,DK) [goto INCSSRR\_A]  
else [goto next section]

Replicate To:

INCINTER\_C



2024 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0040.00.1 Variable: INCSSRR\_A Interview Module: Adult Content Type: Annual Core

Question Text:

\* **Read if necessary:** In ^LASTYEAR, did ^YOUFAMHERE receive...

Income from Social Security or Railroad Retirement?

Fills:

LASTYEAR	Description	Last year
	Instruction	Fill year prior to current year
YOUFAMHERE	Description	you/you or any family members
	Instruction	If PCNT_A=1 fill "you" else if PCNT_A GT 1 fill "you or any family members"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ and Sample Adult and Sample Child are in the same family and the INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR Sample Adult and Sample Child are in the same family, Sample Child respondent answered all questions asked in the INC section with dk/rf and Sample Adult is not the Sample Child respondent and the Sample Adult did not refuse both the income from wages and income from accounts questions

Skip Instructions:

<1,2,RF,DK> [goto INCSSISSDI\_A]

Replicate To:

INCSSRR\_C

2024 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0050.00.1 Variable: INCSSISSDI\_A Interview Module: Adult Content Type: Annual Core

Question Text:

**\*Read if necessary:** In ^LASTYEAR, did ^YOUFAMHERE receive...

Supplemental Security Income, SSI, or Social Security Disability Income, SSDI, which are different from Social Security?

Fills:

LASTYEAR	Description	Last year
	Instruction	Fill year prior to current year
YOUFAMHERE	Description	you/you or any family members
	Instruction	If PCNT_A=1 fill "you" else if PCNT_A GT 1 fill "you or any family members"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ and Sample Adult and Sample Child are in the same family and the INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR Sample Adult and Sample Child are in the same family, Sample Child respondent answered all questions asked in the INC section with dk/rf and Sample Adult is not the Sample Child respondent and the Sample Adult did not refuse both the income from wages and income from accounts questions

Skip Instructions:

<1> [goto SSISSDIBTH\_A]  
<2,RF,DK> [goto INCWELF\_A]

Replicate To:

INCSSISSDI\_C

2024 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0060.00.1 Variable: SSISSDIBTH\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Was this Supplemental Security Income, SSI, Social Security Disability Income, SSDI, or both?

Response:

1	SSI
2	SSDI
3	Both SSI and SSDI
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ where someone in the family gets SSI or SSDI and Sample Adult and Sample Child are in the same family and the Sample Child INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR Sample Adult and Sample Child are in the same family, Sample Child respondent answered all questions asked in the INC section with dk/rf and Sample Adult is not the Sample Child respondent

Skip Instructions:

<1-3,RF,DK> [goto SSISSDIDS\_B\_A]

Replicate To:

SSISSDIBTH\_C

2024 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0070.00.1 Variable: SSISSDIDSB\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Was this received as a disability benefit?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample adults 18+ where someone in the family gets SSI or SSDI and Sample Child and Sample Adult are in the same family and the INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR Sample Adult and Sample Child are in the same family, Sample Child respondent answered all questions asked in the INC section with dk/rf and Sample Adult is not the Sample Child respondent

Skip Instructions:

```
<1> if GEN.PCNT_A gt 1 [goto SSISSDIP_A]
elseif GEN.PCNT_A=1 [goto INCWELF_A]
<2,RF,DK> [goto INCWELF_A]
```

Replicate To:

SSISSDIDSB\_C

2024 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0090.00.1 Variable: SSISSDIP\_A Interview Module: Adult Content Type: Annual Core

Question Text:

In ^LASTYEAR, who received this disability benefit?

\* **Read if necessary:** Do NOT include a benefit received on behalf of someone else.

\* **Enter all that apply, separate with commas.**

Fills:

LASTYEAR	Description	Last year
	Instruction	Fill year prior to current year

Response:

00	Not on roster
01-25	Person Number
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ with more than one person in the family where someone in the family gets SSI or SSDI and SSI/SSDI was received as a disability benefit and Sample Adult and Sample Child are in the same family and the Sample Child INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR Sample Adult and Sample Child are in the same family, Sample Child respondent answered all questions asked in the INC section with dk/rf and Sample Adult is not the Sample Child respondent

Skip Instructions:

<1-25,RF,DK> [goto INCWELF\_A]

Replicate To:

SSISSDIP\_C

2024 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0100.00.1 Variable: INCWELF\_A Interview Module: Adult Content Type: Annual Core

Question Text:

In ^LASTYEAR, did ^YOUFAMHERE receive...

Any public assistance or welfare payments from the state or local welfare office?

Fills:

LASTYEAR	Description	Last year
	Instruction	Fill year prior to current year
YOUFAMHERE	Description	you/you or any family members
	Instruction	If PCNT_A=1 fill "you" else if PCNT_A GT 1 fill "you or any family members"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ and Sample Adult and Sample Child are in the same family and the Sample Child INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR Sample Adult and Sample Child are in the same family, Sample Child respondent answered all questions asked in the INC section with dk/rf and Sample Adult is not the Sample Child respondent and the Sample Adult did not refuse both the income from wages and income from accounts questions

Skip Instructions:

<1,2,RF,DK> [goto INCRETIRE\_A]

Replicate To:

INCWELF\_C

2024 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0110.00.1 Variable: INCRETIRE\_A Interview Module: Adult Content Type: Annual Core

Question Text:

\* **Read if necessary:** In ^LASTYEAR, did ^YOUFAMHERE receive...

Income from retirement, survivor, or disability pensions?

Fills:

LASTYEAR	Description	Last year
	Instruction	Fill year prior to current year
YOUFAMHERE	Description	you/you or any family members
	Instruction	If PCNT_A=1 fill "you" else if PCNT_A GT 1 fill "you or any family members"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ and Sample Adult and Sample Child are in the same family and the Sample Child INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR Sample Adult and Sample Child are in the same family, Sample Child respondent answered all questions asked in the INC section with dk/rf and Sample Adult is not the Sample Child respondent and the Sample Adult did not refuse both the income from wages and income from accounts questions

Skip Instructions:

<1,2,RF,DK> [goto INCOTHR\_A]

Replicate To:

INCRETIRE\_C

2024 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0120.00.1 Variable: INCOTHR\_A Interview Module: Adult Content Type: Annual Core

Question Text:

\* **Read if necessary:** In ^LASTYEAR, did ^YOUFAMHERE receive...

Any other sources of income such as VA payments from the Veterans Benefits Administration, unemployment compensation, child support, or alimony?

Fills:

LASTYEAR	Description	Last year
	Instruction	Fill year prior to current year
YOUFAMHERE	Description	you/you or any family members
	Instruction	If PCNT_A=1 fill "you" else if PCNT_A GT 1 fill "you or any family members"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ and Sample Adult and Sample Child are in the same family and the Sample Child INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR Sample Adult and Sample Child are in the same family, Sample Child respondent answered all questions asked in the INC section with dk/rf and Sample Adult is not the Sample Child respondent and the Sample Adult did not refuse both the income from wages and income from accounts questions

Skip Instructions:

<1,2,RF,DK> [goto INCTOTAL\_A]

Replicate To:

INCOTHR\_C



2024 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0130.00.1 Variable: INCTOTAL\_A Interview Module: Adult Content Type: Annual Core

Question Text:

^INCALLFAM

What is your best estimate of ^TOTALINCOME from all sources, before taxes, in ^LASTYEAR?

\* Enter '999995' if the reported income \$999,995 or greater.

Fills:

INCALLFAM	Description	INCTOTAL_A Introduction
	Instruction	IF PCNT_A GT 1 fill "When answering this next question, please remember to include your income PLUS the income of all family members living in this household."
TOTALINCOME	Description	your total income/the total income of all family members
	Instruction	If PCNT_A=1 fill "your total income" else if PCNT_A GT 1 fill "the total income of all family members"
LASTYEAR	Description	Last year
	Instruction	Fill year prior to current year

Response:

000000-999995	Range of values
999997	Refused
999999	Don't Know

Universe:

Sample Adults 18+ and Sample Adult and Sample Child are in the same family and the Sample Child INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR Sample Adult and Sample Child are in the same family, Sample Child respondent answered all questions asked in the INC section with dk/rf and Sample Adult is not the Sample Child respondent and the Sample Adult did not refuse both the income from wages and income from accounts questions

Skip Instructions:

<0-999> [goto ERR1\_INCTOTAL\_A]  
 <250001-999995> [goto ERR2\_INCTOTAL\_A]  
 <1000-250000> [goto next section]  
 <RF,DK> [goto INC250PCT\_A]

Soft Edit:

Check Text	Check Description	Check Text
ERR1_INCTOTAL_A	Income low soft edit	{signal }  Do not read to the respondent.  ^INCTOTAL_A is unusually low. Make corrections if necessary.

ERR2_INCTOTAL_A	Income high soft edit	{signal }  Do not read to the respondent.  ^INCTOTAL_A is unusually high. Make corrections if necessary.
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Replicate To:

INCTOTAL\_C

2024 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0150.01.1 Variable: INC250PCT\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Was your total ^FAMILY income from all sources less than ^250POVERTY\_A or ^250POVERTY\_A or more?

Fills:

FAMILY	Description	family
	Instruction	If PCNT_A > 1 fill "family"
250POVERTY_A	Description	250% of poverty threshold
	Instruction	Fill value stored in Adult.INC.INC250FILL_A

Response:

1	Less than ^250POVERTY_A
2	^250POVERTY_A or more
7	Refused
9	Don't Know

Universe:

Sample Adult 18+ who don't know or refuse the total family income and Sample Adult and Sample Child are in the same family and the Sample Child INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR Sample Adult and Sample Child are in the same family, Sample Child respondent answered all questions asked in the INC section with dk/rf and Sample Adult is not the Sample Child respondent

Skip Instructions:

```
<1> [goto INC138PCT_A]
<2> if GEN.PCNT_A=1 [goto INC75K_A]
elseif GEN.PCNT_A IN (2,4) [goto INC100K_A]
elseif GEN.PCNT_A=3 or GEN.PCNT_A ge 5 [goto INC400PCT_A]
<RF,DK> [goto next section]
```

Replicate To:

INC250PCT\_C

2024 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0160.01.1 Variable: INC138PCT\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Was your total ^FAMILY income from all sources less than ^138POVERTY\_A or ^138POVERTY\_A or more?

Fills:

FAMILY	Description	family
	Instruction	If PCNT_A > 1 fill "family"
138POVERTY_A	Description	138% of poverty threshold
	Instruction	Fill value stored in Adult.INC.INC138FILL_A

Response:

1	Less than ^138POVERTY_A
2	^138POVERTY_A or more
7	Refused
9	Don't Know

Universe:

Sample Adult 18+ answered less than 250% of poverty threshold and Sample Adult and Sample Child are in the same family and the Sample Child INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR Sample Adult and Sample Child are in the same family, Sample Child respondent answered all questions asked in the INC section with dk/rf and Sample Adult is not the Sample Child respondent

Skip Instructions:

<1> [goto INC100PCT\_A]  
<2> [goto INC200PCT\_A]  
<RF,DK> [goto next section]

Replicate To:

INC138PCT\_C

2024 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0170.01.1 Variable: INC100PCT\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Was your total ^FAMILY income from all sources less than ^100POVERTY\_A or ^100POVERTY\_A or more?

Fills:

FAMILY	Description	family
	Instruction	If PCNT_A > 1 fill "family"
100POVERTY_A	Description	100% of poverty threshold
	Instruction	Fill value stored in Adult.INC.INC100FILL_A

Response:

1	Less than ^100POVERTY_A
2	^100POVERTY_A or more
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who answered less than 138% of poverty threshold and Sample Adult and Sample Child are in the same family and the Sample Child INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR Sample Adult and Sample Child are in the same family, Sample Child respondent answered all questions asked in the INC section with dk/rf and Sample Adult is not the Sample Child respondent

Skip Instructions:

<1,2,RF,DK> [goto next section]

Replicate To:

INC100PCT\_C

2024 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0180.01.1 Variable: INC200PCT\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Was your total ^FAMILY income from all sources less than ^200POVERTY\_A or ^200POVERTY\_A or more?

Fills:

FAMILY	Description	family
	Instruction	If PCNT_A > 1 fill "family"
200POVERTY_A	Description	200% of poverty threshold
	Instruction	Fill value stored in Adult.INC.INC200FILL_A

Response:

1	Less than ^200POVERTY_A
2	^200POVERTY_A or more
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who answered 138% of poverty or more and Sample Adult and Sample Child are in the same family and the Sample Child INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR Sample Adult and Sample Child are in the same family, Sample Child respondent answered all questions asked in the INC section with dk/rf and Sample Adult is not the Sample Child respondent

Skip Instructions:

<1> if GEN.PCNT\_A ge 9 [goto INC100K\_A]  
else [goto next section]  
<2,RF,DK> [goto next section]

Replicate To:

INC200PCT\_C

2024 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0190.00.1 Variable: INC75K\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Was your total ^FAMILY income from all sources less than \$75,000 or \$75,000 or more?

Fills:

FAMILY	Description	family
	Instruction	If PCNT_A > 1 fill "family"

Response:

1	Less than \$75,000
2	\$75,000 or more
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who answered 250% of poverty threshold or more and is from a 1 person family and Sample Adult and Sample Child are in the same family and the Sample Child INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR Sample Adult and Sample Child are in the same family, Sample Child respondent answered all questions asked in the INC section with dk/rf and Sample Adult is not the Sample Child respondent

Skip Instructions:

<1> [goto INC400PCT\_A]  
<2> [goto INC100K\_A]  
<RF,DK> [goto next section]

Replicate To:

INC75K\_C

2024 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0200.00.1 Variable: INC100K\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Was your total ^FAMILY income from all sources less than \$100,000 or \$100,000 or more?

Fills:

FAMILY	Description	family
	Instruction	If PCNT_A > 1 fill "family"

Response:

1	Less than \$100,000
2	\$100,000 or more
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who answered \$75,000 or more OR answered 250% of poverty threshold or more and is from a 2 or 4 person family OR answered 200% of poverty threshold and is from a family of 9 or more people and Sample Adult and Sample Child are in the same family and the Sample Child INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR Sample Adult and Sample Child are in the same family, Sample Child respondent answered all questions asked in the INC section with dk/rf and Sample Adult is not the Sample Child respondent

Skip Instructions:

```
<1> if GEN.PCNT_A=2 [goto INC400PCT_A]
else [goto next section]
<2> if GEN.PCNT_A IN (1,2) [goto INC150K_A]
elseif GEN.PCNT_A=4 [goto INC400PCT_A]
elseif GEN.PCNT_A ge 9 [goto next section]
<RF,DK> [goto next section]
```

Replicate To:

INC100K\_C



2024 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0210.01.1 Variable: INC400PCT\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Was your total ^FAMILY income from all sources less than ^400POVERTY\_A or ^400POVERTY\_A or more?

Fills:

FAMILY	Description	family
	Instruction	If PCNT_A > 1 fill "family"
400POVERTY_A	Description	400% of poverty threshold
	Instruction	Fill value stored in Adult.INC.INC400FILL_A

Response:

1	Less than ^400POVERTY_A
2	^400POVERTY_A or more
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ and answered less than \$75,000  
 OR  
 answered less than \$100,000 and is from a 2 person family  
 OR  
 answered \$100,000 or more and is from a 4 person family or answered 250% of poverty threshold or more and is from a 3 or 5+ person family  
 and Sample Adult and Sample Child are in the same family and the Sample Child INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR Sample Adult and Sample Child are in the same family, Sample Child respondent answered all questions asked in the INC section with dk/rf and Sample Adult is not the Sample Child respondent

Skip Instructions:

```
<1> if GEN.PCNT_A IN (6,7,8) [goto INC150K_A]
else [goto next section]
<2> if GEN.PCNT_A IN (1,2) or GEN.PCNT_A ge 5 [goto next section]
else if GEN.PCNT_A IN (3,4) [goto INC150K_A]
<RF,DK> [goto next section]
```

Replicate To:

INC400PCT\_C

2024 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0220.00.1 Variable: INC150K\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Was your total ^FAMILY income from all sources less than \$150,000 or \$150,000 or more?

Fills:

FAMILY	Description	family
	Instruction	If PCNT_A > 1 fill "family"

Response:

1	Less than \$150,000
2	\$150,000 or more
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ answered \$100,000 or more and is from 1 or 2 person family OR respondent answered 400% of poverty or more and is from 3 or 4 person family OR respondent answered less than 400% of poverty and is from a family of 6, 7 or 8 persons and Sample Adult and Sample Child are in the same family and the Sample Child INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR Sample Adult and Sample Child are in the same family, Sample Child respondent answered all questions asked in the INC section with dk/rf and Sample Adult is not the Sample Child respondent

Skip Instructions:

<1,2,RF,DK> [goto next section]

Replicate To:

INC150K\_C

2024 National Health Interview Survey (NHIS) Questionnaire

F00: Food Related Programs

Question ID: F00.0010.00.1 Variable: FSNAP12M\_A Interview Module: Adult Content Type: Annual Core

Question Text:

At any time in the last 12 months did ^YOUFAMLVHERE\_A receive ^FSSNAPNM?

\* **Read if necessary:** *This program puts money on a SNAP EBT card that you can only use to buy food.*

Fills:

YOUFAMLVHERE_A	Description	you/any family members living here/you or any family members living at ^HNO ^HNOSUF ^STRNAME
	Instruction	If GEN.PCNT_A=1, fill: "you"; elseif GEN.PCNT_A gt 1 and Roster.HHC.tblNAME.bPerson [PX_A].ONOFFCAMPUS ne 1, fill: "any family members living here" elseif GEN.PCNT_A gt 1 and Roster.HHC.tblNAME.bPerson [PX_A].ONOFFCAMPUS=1, fill "you or any family members living at ^HNO ^HNOSUF ^STRNAME"
HNO	Description	{Value of HNO}
	Instruction	Fill GEN.HNO
HNOSUF	Description	{Value of HNOSUF}
	Instruction	Fill GEN.HNOSUF
STRNAME	Description	{Value of STRNAME}
	Instruction	Fill GEN.STRNAME
FSSNAPNM	Description	food stamp benefits/[state food stamp program name]

Instruction	<p>If AL then fill "Food Assistance Program or food stamp benefits"</p> <p>If AK then fill "SNAP or food stamp benefits"</p> <p>If AZ then fill "Nutrition Assistance or food stamp benefits"</p> <p>If AR then fill "SNAP or food stamp benefits"</p> <p>If CA then fill "CalFresh or food stamp benefits"</p> <p>If CO then fill "SNAP or food stamp benefits"</p> <p>If CT then fill "SNAP or food stamp benefits"</p> <p>If DE then fill "Food Supplement Program or food stamp benefits"</p> <p>If DC then fill "SNAP or food stamp benefits"</p> <p>If FL then fill "Food Assistance Program or food stamp benefits"</p> <p>If GA then fill "Georgia Food Stamp Program or food stamp benefits"</p> <p>If HI then fill "SNAP or food stamp benefits"</p> <p>If ID then fill "SNAP or food stamp benefits"</p> <p>If IL then fill "SNAP or food stamp benefits"</p> <p>If IN then fill "SNAP or food stamp benefits"</p> <p>If IA then fill "SNAP or food stamp benefits"</p> <p>If KS then fill "Food Assistance Program or food stamp benefits"</p> <p>If KY then fill "SNAP or food stamp benefits"</p> <p>If LA then fill "SNAP or food stamp benefits"</p> <p>If ME then fill "SNAP or food stamp benefits"</p> <p>If MD then fill "SNAP or food stamp benefits"</p> <p>If MA then fill "SNAP or food stamp benefits"</p> <p>If MI then fill "Food Assistance Program (FSP) or food stamp benefits"</p> <p>If MN then fill "SNAP or food stamp benefits"</p> <p>If MS then fill "SNAP or food stamp benefits"</p> <p>If MO then fill "SNAP or food stamp benefits"</p> <p>If MT then fill "SNAP or food stamp benefits"</p> <p>If NE then fill "SNAP or food stamp benefits"</p> <p>If NV then fill "SNAP or food stamp benefits"</p> <p>If NH then fill "SNAP or food stamp benefits"</p> <p>If NJ then fill "NJ SNAP or food stamp benefits"</p> <p>If NM then fill "SNAP or food stamp benefits"</p> <p>If NY then fill "SNAP or food stamp benefits"</p> <p>If NC then fill "Food and Nutrition Services or food stamp benefits"</p> <p>If ND then fill "SNAP or food stamp benefits"</p> <p>If OH then fill "Food Assistance Program or food stamp benefits"</p> <p>If OK then fill "SNAP or food stamp benefits"</p> <p>If OR then fill "SNAP or food stamp benefits"</p> <p>If PA then fill "SNAP or food stamp benefits"</p> <p>If RI then fill "SNAP or food stamp benefits"</p> <p>If SC then fill "SNAP or food stamp benefits"</p> <p>If SD then fill "SNAP or food stamp benefits"</p> <p>If TN then fill "SNAP or food stamp benefits"</p> <p>If TX then fill "SNAP or food stamp benefits"</p> <p>If UT then fill "SNAP or food stamp benefits"</p> <p>If VT then fill "3SquaresVT or food stamp benefits"</p> <p>If VA then fill "SNAP or food stamp benefits"</p> <p>If WA then fill "Basic Food or food stamp benefits"</p> <p>If WV then fill "SNAP or food stamp benefits"</p> <p>If WI then fill "FoodShare Wisconsin or food stamp benefits"</p> <p>If WY then fill "SNAP or food stamp benefits"</p>
-------------	---

**Response:**

1	Yes
2	No
7	Refused
9	Don't Know

**Universe:**

Sample Adults 18+ where the Sample Adult and Sample Child are in the same family and the Sample Child F00 section has not been completed OR the Sample Adult and Sample Child are not in the same family OR Sample Adult and Sample Child are in the same family and all questions in the Sample Child F00 section was answered with refused or don't know and the Sample Adult is not the Sample Child respondent

**Skip Instructions:**

```
<1> [goto FSNAP30D_A]
<2,RF,DK> if PCNTF1255_A ge 1 or PCNTC05_A ge 1 [goto FWIC12M_A]
else if PCNTC517_A ge 1 [goto FLUNCH12M1_A]
else [goto FINISH_F00_A]
```

**Replicate To:**

FSNAP12M\_C

2024 National Health Interview Survey (NHIS) Questionnaire

F00: Food Related Programs

Question ID: F00.0020.00.3 Variable: FSNAP30D\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Did ^YOUFAMLVHERE\_A receive ^FSSNAPNM in the LAST 30 days?

\* **Read if necessary:** *This program puts money on a SNAP EBT card that you can only use to buy food.*

Fills:

YOUFAMLVHERE_A	Description	you/any family members living here/you or any family members living at ^HNO ^HNOSUF ^STRNAME
	Instruction	If GEN.PCNT_A=1, fill: "you"; elseif GEN.PCNT_A gt 1 and Roster.HHC.tb1NAME.bPerson [PX_A].ONOFFCAMPUS ne 1, fill: "any family members living here" elseif GEN.PCNT_A gt 1 and Roster.HHC.tb1NAME.bPerson [PX_A].ONOFFCAMPUS=1, fill "you or any family members living at ^HNO ^HNOSUF ^STRNAME"
HNO	Description	{Value of HNO}
	Instruction	Fill GEN.HNO
HNOSUF	Description	{Value of HNOSUF}
	Instruction	Fill GEN.HNOSUF
STRNAME	Description	{Value of STRNAME}
	Instruction	Fill GEN.STRNAME
FSSNAPNM	Description	food stamp benefits/[state food stamp program name]

Instruction	<p>If AL then fill "Food Assistance Program or food stamp benefits"</p> <p>If AK then fill "SNAP or food stamp benefits"</p> <p>If AZ then fill "Nutrition Assistance or food stamp benefits"</p> <p>If AR then fill "SNAP or food stamp benefits"</p> <p>If CA then fill "CalFresh or food stamp benefits"</p> <p>If CO then fill "SNAP or food stamp benefits"</p> <p>If CT then fill "SNAP or food stamp benefits"</p> <p>If DE then fill "Food Supplement Program or food stamp benefits"</p> <p>If DC then fill "SNAP or food stamp benefits"</p> <p>If FL then fill "Food Assistance Program or food stamp benefits"</p> <p>If GA then fill "Georgia Food Stamp Program or food stamp benefits"</p> <p>If HI then fill "SNAP or food stamp benefits"</p> <p>If ID then fill "SNAP or food stamp benefits"</p> <p>If IL then fill "SNAP or food stamp benefits"</p> <p>If IN then fill "SNAP or food stamp benefits"</p> <p>If IA then fill "SNAP or food stamp benefits"</p> <p>If KS then fill "Food Assistance Program or food stamp benefits"</p> <p>If KY then fill "SNAP or food stamp benefits"</p> <p>If LA then fill "SNAP or food stamp benefits"</p> <p>If ME then fill "SNAP or food stamp benefits"</p> <p>If MD then fill "SNAP or food stamp benefits"</p> <p>If MA then fill "SNAP or food stamp benefits"</p> <p>If MI then fill "Food Assistance Program (FSP) or food stamp benefits"</p> <p>If MN then fill "SNAP or food stamp benefits"</p> <p>If MS then fill "SNAP or food stamp benefits"</p> <p>If MO then fill "SNAP or food stamp benefits"</p> <p>If MT then fill "SNAP or food stamp benefits"</p> <p>If NE then fill "SNAP or food stamp benefits"</p> <p>If NV then fill "SNAP or food stamp benefits"</p> <p>If NH then fill "SNAP or food stamp benefits"</p> <p>If NJ then fill "NJ SNAP or food stamp benefits"</p> <p>If NM then fill "SNAP or food stamp benefits"</p> <p>If NY then fill "SNAP or food stamp benefits"</p> <p>If NC then fill "Food and Nutrition Services or food stamp benefits"</p> <p>If ND then fill "SNAP or food stamp benefits"</p> <p>If OH then fill "Food Assistance Program or food stamp benefits"</p> <p>If OK then fill "SNAP or food stamp benefits"</p> <p>If OR then fill "SNAP or food stamp benefits"</p> <p>If PA then fill "SNAP or food stamp benefits"</p> <p>If RI then fill "SNAP or food stamp benefits"</p> <p>If SC then fill "SNAP or food stamp benefits"</p> <p>If SD then fill "SNAP or food stamp benefits"</p> <p>If TN then fill "SNAP or food stamp benefits"</p> <p>If TX then fill "SNAP or food stamp benefits"</p> <p>If UT then fill "SNAP or food stamp benefits"</p> <p>If VT then fill "3SquaresVT or food stamp benefits"</p> <p>If VA then fill "SNAP or food stamp benefits"</p> <p>If WA then fill "Basic Food or food stamp benefits"</p> <p>If WV then fill "SNAP or food stamp benefits"</p> <p>If WI then fill "FoodShare Wisconsin or food stamp benefits"</p> <p>If WY then fill "SNAP or food stamp benefits"</p>
-------------	---

**Response:**

1	Yes
2	No
7	Refused
9	Don't Know

**Universe:**

Sample Adults 18+ living in families where someone received food stamps in the last 12 months

**Skip Instructions:**

```
<1,2,RF,DK> if PCNTF1255_A ge 1 or PCNTC05_A ge 1 [goto FWIC12M_A]  
else if PCNTC517_A ge 1 [goto FLUNCH12M1_A];  
else [goto FINISH_F00_A]
```

**Replicate To:**

FSNAP30D\_C



**2024 National Health Interview Survey (NHIS) Questionnaire**

**FOO: Food Related Programs**

**Question ID:** F00.0030.00.1    **Variable:** FWIC12M\_A    **Interview Module:** Adult    **Content Type:** Annual Core

**Question Text:**

At any time in the last 12 months did ^YOUFAMLVHERE\_A receive benefits from the WIC program, that is, the Women, Infants, and Children program?

**Fills:**

YOUFAMLVHERE_A	Description	you/any family members living here/you or any family members living at ^HNO ^HNOSUF ^STRNAME
	Instruction	If GEN.PCNT_A=1, fill: "you"; elseif GEN.PCNT_A gt 1 and Roster.HHC.tb1NAME.bPerson [PX_A].ONOFFCAMPUS ne 1, fill: "any family members living here" elseif GEN.PCNT_A gt 1 and Roster.HHC.tb1NAME.bPerson [PX_A].ONOFFCAMPUS=1, fill "you or any family members living at ^HNO ^HNOSUF ^STRNAME"
HNO	Description	{Value of HNO}
	Instruction	Fill GEN.HNO
HNOSUF	Description	{Value of HNOSUF}
	Instruction	Fill GEN.HNOSUF
STRNAME	Description	{Value of STRNAME}
	Instruction	Fill GEN.STRNAME

**Response:**

1	Yes
2	No
7	Refused
9	Don't Know

**Universe:**

Sample Adults 18+ living in families with females 12-55 years of age or children 0-5 years of age AND the Sample Adult and Sample Child are in the same family and the Sample Child FOO section has not been completed OR the Sample Adult and Sample Child are not in the same family OR Sample Adult and Sample Child are in the same family and all questions in the Sample Child FOO section was answered with refused or don't know and the Sample Adult is not the sample child respondent OR the Sample Adult and Sample Child are in the same family and at least one question asked in Sample Child FOO section has a valid answer (not dk/rf) and the received WIC benefits question was not asked in the Sample Child FOO section

**Skip Instructions:**

```
<1,2,RF,DK> if PCNTC517_A ge 1 [goto FLUNCH12M1_A]
else [goto FINISH_F00_A]
```

**Replicate To:**

FWIC12M\_C

2024 National Health Interview Survey (NHIS) Questionnaire

FOO: Food Related Programs

Question ID: F00.0040.00.1 Variable: FLUNCH12M1\_A Interview Module: Adult Content Type: Annual Core

Question Text:

At any time in the last 12 months, did ^SCCHILDFAM\_A receive free or reduced-price breakfasts or lunches at school?

\* **Read if necessary:** *The National School Lunch Program and the School Breakfast Program provide cash assistance to states to operate breakfast and lunch programs in schools and residential childcare institutions. The programs provide low-price or free breakfasts and lunches to low-income children in kindergarten through 12th grade.*

Fills:

SCCHILDFAM_A	Description	^ALIASNAME/any child in your family
	Instruction	if PCNT517_A=1, fill: ^ALIASNAME of child in Sample Adult family, elseif PCNT517_A gt 1, fill "any child in your family",
ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ living in families with children between the ages of 5-17 and the Sample Adult and Sample Child are in the same family and the Sample Child F00 section has not been completed OR the Sample Adult and Sample Child are not in the same family OR the Sample Adult and Sample Child are in the same family and all questions in the Sample Child F00 section was answered with refused or don't know and the sample adult is not the sample child respondent

Skip Instructions:

<1,2,RF,DK> [goto FINISH\_F00\_A]

Replicate To:

FLUNCH12M1\_C

2024 National Health Interview Survey (NHIS) Questionnaire

FOO: Food Related Programs

Question ID: F00.0050.00.1 Variable: FINISH\_FOO\_A Interview Module: Adult Content Type: Annual Core

Question Text:

- \* The Sample Adult food related programs section is now complete.
- \* Enter '1' to continue.

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

Sample Adults 18+ where the Sample Adult FOO section has not been completed AND the Sample Adult and Sample Child are in the same family and the Sample Child FOO section has not been completed OR the Sample Adult and Sample Child are not in the same family OR Sample Adult and Sample Child are in the same family and all questions in the Sample Child FOO section was answered with refused or don't know and the sample adult is not the sample child respondent the OR Sample Adult and Sample Child are in the same family and at least one question asked in Sample Child FOO section has a valid answer (not dk/rf) and the received WIC benefits question was not asked in the Sample Child FOO section and within the family exist at least one female 12-55 years of age or child 0-5 years of age

Skip Instructions:

<1> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

FDS: Food Security

Question ID: FDS.0010.00.3 Variable: FDSINTRO\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

These next questions are about whether ^youyourfamily\_A ^waswere always able to afford the food you needed in the last 30 days. I'm going to read you several statements that people have made about their food situation. For these statements, please tell me whether the statement was often true, sometimes true, or never true for ^youyourfamily\_A in the last 30 days.

\* Enter '1' to continue.

Fills:

youyourfamily_A	Description	you/your family
	Instruction	If PCNT_A=1 "you" else "your family"
waswere	Description	were/was
	Instruction	If PCNT_A=1 "were" else "was"

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

Sample Child and Sample Adult are not in the same family  
 OR Sample Child and Sample Adult are in the same family AND Sample Child FDS section has not been completed  
 OR the Sample Adult and Sample Child are in the same family and every question asked in the Sample Child FDS section was answered with RF/DK and the person answering the SC interview and the SA are different people.

Skip Instructions:

<1> [goto FDSRUNOUT\_A]

Replicate To:

FDSINTRO\_C

2024 National Health Interview Survey (NHIS) Questionnaire

FDS: Food Security

Question ID: FDS.0020.00.3 Variable: FDSRUNOUT\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

The first statement is "^Iwe\_A worried whether ^myour\_A food would run out before ^Iwe\_A got money to buy more." Was that often true, sometimes true, or never true for ^youyourfamily\_A in the last 30 days?

Fills:

Iwe_A	Description	I/we
	Instruction	If PCNT_A=1 fill "I" else fill "we"
myour_A	Description	my/our
	Instruction	If PCNT_A=1 fill: "my" else fill: "our"
youyourfamily_A	Description	you/your family
	Instruction	If PCNT_A=1 "you" else "your family"

Response:

1	Often true
2	Sometimes true
3	Never true
7	Refused
9	Don't Know

Universe:

The Sample Child and Sample Adult are not in the same family  
 OR Sample Child and Sample Adult are in the same family AND Sample Child FDS section has not been completed  
 OR the Sample Adult and Sample Child are in the same family and every question asked in the Sample Child FDS section was answered with RF/DK and the person answering the SC interview and the SA are different people.

Skip Instructions:

<1-3,RF,DK> [goto FDSLAST\_A]

Replicate To:

FDSRUNOUT\_C

2024 National Health Interview Survey (NHIS) Questionnaire

FDS: Food Security

Question ID: FDS.0030.00.3 Variable: FDSLAST\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

"The food that ^Iwe\_A bought just didn't last, and ^Iwe\_A didn't have money to get more." Was that often true, sometimes true, or never true for ^youyourfamily\_A in the last 30 days?

Fills:

Iwe_A	Description	I/we
	Instruction	If PCNT_A=1 fill "I" else fill "we"
youyourfamily_A	Description	you/your family
	Instruction	If PCNT_A=1 "you" else "your family"

Response:

1	Often true
2	Sometimes true
3	Never true
7	Refused
9	Don't Know

Universe:

The Sample Child and Sample Adult are not in the same family  
 OR Sample Child and Sample Adult are in the same family AND Sample Child FDS section has not been completed  
 OR the Sample Adult and Sample Child are in the same family and every question asked in the Sample Child FDS section was answered with RF/DK and the person answering the SC interview and the SA are different people.

Skip Instructions:

<1-3,RF,DK> [goto FDSBALANCE\_A]

Replicate To:

FDSLAST\_C

2024 National Health Interview Survey (NHIS) Questionnaire

FDS: Food Security

Question ID: FDS.0040.00.3 Variable: FDSBALANCE\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

^Iwe\_A couldn't afford to eat balanced meals." Was that often true, sometimes true, or never true for ^youyourfamily\_A in the last 30 days?

Fills:

Iwe_A	Description	I/we
	Instruction	If PCNT_A=1 fill "I" else fill "we"
youyourfamily_A	Description	you/your family
	Instruction	If PCNT_A=1 "you" else "your family"

Response:

1	Often true
2	Sometimes true
3	Never true
7	Refused
9	Don't Know

Universe:

The Sample Child and Sample Adult are not in the same family  
 OR Sample Child and Sample Adult are in the same family AND Sample Child FDS section has not been completed  
 OR the Sample Adult and Sample Child are in the same family and every question asked in the Sample Child FDS section was answered with RF/DK and the person answering the SC interview and the SA are different people.

Skip Instructions:

<1-2> [goto FDSSKIP\_A]  
 <3,RF,DK> if FDSRUNOUT\_A IN (1,2) OR FDSLAST\_A IN (1,2) [goto FDSSKIP\_A];  
 else [goto next section]

Replicate To:

FDSBALANCE\_C

2024 National Health Interview Survey (NHIS) Questionnaire

FDS: Food Security

Question ID: FDS.0050.00.3 Variable: FDSSKIP\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

In the last 30 days, did ^youorother\_A ever cut the size of your meals or skip meals because there wasn't enough money for food?

Fills:

youorother_A	Description	you/you or other adults in your family
	Instruction	If PCNT18UP_A=1: fill "you" else "you or other adults in your family"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

The Sample Child and Sample Adult are not in the same family  
 OR Sample Child and Sample Adult are in the same family AND Sample Child FDS section has not been completed  
 OR the Sample Adult and Sample Child are in the same family and every question asked in the Sample Child FDS section was answered with RF/DK and the person answering the SC interview and the SA are different people and respondent answered often true or sometimes true in the last 30 days they worried that food would run out before they got money to buy more, or that the food that was bought didn't last and they didn't have money to get more or couldn't afford to eat balanced meals

Skip Instructions:

<1> [goto FDSSKIPDYS\_A]  
 <2,RF,DK> [goto FDSLESS\_A]

Replicate To:

FDSSKIP\_C



2024 National Health Interview Survey (NHIS) Questionnaire

FDS: Food Security

Question ID: FDS.0060.00.3 Variable: FDSSKIPDYS\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

In the last 30 days, how many days did this happen?

Response:

01-30	Range of values
97	Refused
99	Don't Know

Universe:

The Sample Child and Sample Adult are not in the same family  
OR Sample Child and Sample Adult are in the same family AND Sample Child FDS section has not been completed  
OR the Sample Adult and Sample Child are in the same family and every question asked in the Sample Child FDS section was answered with RF/DK and the person answering the SC interview and the SA are different people and respondent said that they or other adults in their family cut the size of their meals or skipped meals due to cost.

Skip Instructions:

<1-30,RF,DK> [goto FDSLESS\_A]

Replicate To:

FDSSKIPDYS\_C

2024 National Health Interview Survey (NHIS) Questionnaire

FDS: Food Security

Question ID: FDS.0070.00.3 Variable: FDSLESS\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

In the last 30 days, did ^youorother\_A ever eat less than you felt you should because there wasn't enough money for food?

Fills:

youorother_A	Description	you/you or other adults in your family
	Instruction	If PCNT18UP_A=1: fill "you" else "you or other adults in your family"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

The Sample Child and Sample Adult are not in the same family  
 OR Sample Child and Sample Adult are in the same family AND Sample Child FDS section has not been completed  
 OR the Sample Adult and Sample Child are in the same family and every question asked in the Sample Child FDS section was answered with RF/DK and the person answering the SC interview and the SA are different people and respondent answered often true or sometimes true that in the last 30 days they worried that food would run out before they got money to buy more, or that the food that was bought didn't last and they didn't have money to get more or couldn't afford to eat balanced meals.

Skip Instructions:

<1,2,RF,DK> [goto FDSHUNGRY\_A]

Replicate To:

FDSLESS\_C

2024 National Health Interview Survey (NHIS) Questionnaire

FDS: Food Security

Question ID: FDS.0080.00.3 Variable: FDSHUNGRY\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

In the last 30 days, were ^youorother\_A ever hungry but didn't eat because there wasn't enough money for food?

Fills:

youorother_A	Description	you/you or other adults in your family
	Instruction	If PCNT18UP_A=1: fill "you" else "you or other adults in your family"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

The Sample Child and Sample Adult are not in the same family  
 OR Sample Child and Sample Adult are in the same family AND Sample Child FDS section has not been completed  
 OR the Sample Adult and Sample Child are in the same family and every question asked in the Sample Child FDS section was answered with RF/DK and the person answering the SC interview and the SA are different people and respondent answered often true or sometimes true that in the last 30 days they worried that food would run out before they got money to buy more, or that the food that was bought didn't last and they didn't have money to get more or couldn't afford to eat balanced meals.

Skip Instructions:

<1,2,RF,DK> [goto FDSWEIGHT\_A]

Replicate To:

FDSHUNGRY\_C

2024 National Health Interview Survey (NHIS) Questionnaire

FDS: Food Security

Question ID: FDS.0090.00.3 Variable: FDSWEIGHT\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

In the last 30 days, did ^youorother\_A lose weight because there wasn't enough money for food?

Fills:

youorother_A	Description	you/you or other adults in your family
	Instruction	If PCNT18UP_A=1: fill "you" else "you or other adults in your family"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

The Sample Child and Sample Adult are not in the same family  
 OR Sample Child and Sample Adult are in the same family AND Sample Child FDS section has not been completed  
 OR the Sample Adult and Sample Child are in the same family and every question asked in the Sample Child FDS section was answered with RF/DK and the person answering the SC interview and the SA are different people and respondent answered often true or sometimes true that in the last 30 days they worried that food would run out before they got money to buy more, or that the food that was bought didn't last and they didn't have money to get more or couldn't afford to eat balanced meals.

Skip Instructions:

<1> [goto FDSNOTEAT\_A]  
 <2,RF,DK> if FDSSKIP\_A=1 or FDSLESS\_A=1 or FDSHUNGRY\_A=1 [goto FDSNOTEAT\_A]; else [goto next section]

Replicate To:

FDSWEIGHT\_C

2024 National Health Interview Survey (NHIS) Questionnaire

FDS: Food Security

Question ID: FDS.0100.00.3 Variable: FDSNOTEAT\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

In the last 30 days, did ^youorother\_A ever not eat for a whole day because there wasn't enough money for food?

Fills:

youorother_A	Description	you/you or other adults in your family
	Instruction	If PCNT18UP_A=1: fill "you" else "you or other adults in your family"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

The Sample Child and Sample Adult are not in the same family  
 OR Sample Child and Sample Adult are in the same family AND Sample Child FDS section has not been completed  
 OR the Sample Adult and Sample Child are in the same family and every question asked in the Sample Child FDS section was answered with RF/DK and the person answering the SC interview and the SA are different people and respondent answered they cut the size of the meals, skipped meals, were hungry but didn't eat, or lost weight in the last 30 days because there wasn't enough money for food.

Skip Instructions:

<1> [goto FDSNEDAYS\_A]  
 <2,RF,DK> [goto next section]

Replicate To:

FDSNOTEAT\_C

2024 National Health Interview Survey (NHIS) Questionnaire

FDS: Food Security

Question ID: FDS.0110.00.3 Variable: FDSNEDAYS\_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

In the last 30 days, how many days did this happen?

Response:

01-30	Range of values
97	Refused
99	Don't Know

Universe:

The Sample Child and Sample Adult are not in the same family  
OR Sample Child and Sample Adult are in the same family AND Sample Child FDS section has not been completed  
OR the Sample Adult and Sample Child are in the same family and every question asked in the Sample Child FDS section was answered with RF/DK and the person answering the SC interview and the SA are different people and respondent didn't eat for a whole day in last 30 days because there wasn't enough money for food

Skip Instructions:

<1-30,RF,DK> [goto next section]

Replicate To:

FDSNEDAYS\_C

2024 National Health Interview Survey (NHIS) Questionnaire

HOU: Housing

Question ID: HOU.0010.00.1 Variable: HOUYRSLIV\_A Interview Module: Adult Content Type: Annual Core

Question Text:

About how long ^YRSLIV?

Fills:

YRSLIV	Description	have you lived at ^HNO ^HNOSUF ^STRNAME/have you lived in this house/apartment
	Instruction	If Roster.HHC.tblname.bPerson[PX_A]ONOFFCAMPUS=1 fill "have you lived at ^HNO ^HNOSUF ^STRNAME" else fill "have you lived in this house/apartment"
HNO	Description	{Value of HNO}
	Instruction	Fill GEN.HNO
HNOSUF	Description	{Value of HNOSUF}
	Instruction	Fill GEN.HNOSUF
STRNAME	Description	{Value of STRNAME}
	Instruction	Fill GEN.STRNAME

Response:

1	Less than 1 year
2	1 to 3 years
3	4 to 10 years
4	11 to 20 years
5	More than 20 years
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-5,RF,DK> if ((GEN.SAMEFAM\_FLG=1 and GEN.HOU\_FLG\_C=empty) or (GEN.SAMEFAM\_FLG ne 1) or (GEN.SAMEFAM\_FLG=1 and GEN.HOU\_FLG\_C=2 and GEN.SARESPSC\_FLG ne 1))[goto HOUTENURE\_A] else [goto next section]

If GEN.AGE\_FINAL[PX\_A] lt 21 and HOUYRSLIV\_A=5 [goto ERR1\_HOUYRSLIV\_A]

Hard Edit:

Check Text	Check Description	Check Text
ERR1_HOUYRSLIV_A	Hard check when years lived in home exceeds age	{check }  Years in house/apartment exceed ^SANAME's age.  Please correct.

2024 National Health Interview Survey (NHIS) Questionnaire

HOU: Housing

Question ID: HOU.0020.00.1 Variable: HOUTENURE\_A Interview Module: Adult Content Type: Annual Core

Question Text:

^HOUTEN owned or rented by you ^SOMEFAM\_A?

\* If house has a mortgage, record as owned.

Fills:

HOUTEN	Description	Is this house/apartment at ^HNO ^HNOSUF ^STRNAME/Is this house/apartment
	Instruction	If Roster.HHC.tblName.bPerson[PX_A].ONOFFCAMPUS=1, fill "Is the house/apartment at ^HNO ^HNOSUF ^STRNAME" else fill "Is this house/apartment"
HNO	Description	{Value of HNO}
	Instruction	Fill GEN.HNO
HNOSUF	Description	{Value of HNOSUF}
	Instruction	Fill GEN.HNOSUF
STRNAME	Description	{Value of STRNAME}
	Instruction	Fill GEN.STRNAME
SOMEFAM_A	Description	or someone in your family
	Instruction	If PCNT18UP_A=1 fill: blank If PCNT18UP_A gt 1 fill: "or someone in your family"

Response:

1	Owned or being bought
2	Rented
3	Other arrangement
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ and Sample Adult and Sample Child are in the same family and the HOU section has not been completed OR the Sample Adult and Sample Child are not in the same family OR Sample Adult and Sample Child are in the same family and Sample child respondent answered refused or don't know to all questions in the sample child HOU section and the sample child respondent is not the sample adult respondent.

Skip Instructions:

<1,3,RF,DK> [goto next section]  
<2> [goto HOUGVASST\_A]

Replicate To:

HOUTENURE\_C



2024 National Health Interview Survey (NHIS) Questionnaire

HOU: Housing

Question ID: HOU.0030.00.1 Variable: HOUGVASST\_A Interview Module: Adult Content Type: Annual Core

Question Text:

^HOUGVT paying lower rent because the Federal, State, or local government is paying part of the cost?

\* **Read if necessary:** Federal, State, or Local government housing programs for persons with low income may take many forms. Government housing assistance could come from monetary assistance to help pay rent, a program called "Section 8," direct payments to landlords, vouchers, or other types of assistance from a local housing authority. Living in public housing is considered housing assistance from the government.

Fills:

HOUGVT	Description	Are you/Are you or anyone in your family/Is your family at ^HNO ^HNOSUF ^STRNAME
	Instruction	If Roster.HHC.tblName.bPerson[PX_A].ONOFFCAMPUS ne 1 and GEN.PCNT18UP_A=1, fill "Are you" elseif Roster.HHC.tblName.bPerson[PX_A].ONOFFCAMPUS ne 1 and PCNT18UP_A gt 1, fill "Are you or anyone in your family" elseif Roster.HHC.tblNAME.bPerson[PX_A].ONOFFCAMPUS=1, fill "Is your family at ^HNO ^HNOSUF ^STRNAME"
HNO	Description	{Value of HNO}
	Instruction	Fill GEN.HNO
HNOSUF	Description	{Value of HNOSUF}
	Instruction	Fill GEN.HNOSUF
STRNAME	Description	{Value of STRNAME}
	Instruction	Fill GEN.STRNAME

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with a house/apartment that is being rented AND Sample Adult and Sample Child are in the same family and the house/apartment is being owned/rented and the HOU section has not been completed OR the Sample Adult and Sample Child are not in the same family section

Skip Instructions:

<1,2,RF,DK> [goto next section]

Replicate To:

HOUGVASST\_C

2024 National Health Interview Survey (NHIS) Questionnaire

SDH: Housing Costs

Question ID: SDH.0010.00.4 Variable: HOUSECOST\_A Interview Module: Adult Content Type: Emerging Content

Question Text:

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

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

TBH: Transportation Barrier to Care

Question ID: TBH.0010.00.4 Variable: TRANSPOR\_A Interview Module: Adult Content Type: Emerging Content

Question Text:

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

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

CIV: Civic Engagement

Question ID: CIV.0010.00.4 Variable: CEMMETNG\_A Interview Module: Adult Content Type: Emerging Content

Question Text:

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

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto CEVOTELC\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

CIV: Civic Engagement

Question ID: CIV.0020.00.4 Variable: CEVOTELC\_A Interview Module: Adult Content Type: Emerging Content

Question Text:

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

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

REC: Person's name

Question ID: REC.0010.00.1 Variable: LNKFNNAME\_A Interview Module: Adult Content Type: Annual Core

Question Text:

\* **Ask or verify:** What is your full name?

\* **Enter first name.**

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<allow 20,RF,DK> [goto LNKMNNAME\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

REC: Person's name

Question ID: REC.0020.00.1 Variable: LNKMNAME\_A Interview Module: Adult Content Type: Annual Core

Question Text:

- \* Enter middle name.
- \* Press "Enter" to skip to last name if respondent has no middle name.

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<allow 20,RF,DK> [goto LNKLNAME\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

REC: Person's name

Question ID: REC.0030.00.1 Variable: LNKLNAME\_A Interview Module: Adult Content Type: Annual Core

Question Text:

\* Enter last name.

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<allow 20,RF,DK> [goto next section]



2024 National Health Interview Survey (NHIS) Questionnaire

TEL: Telephone Use

Question ID: TEL.0010.00.1 Variable: TELCURWRK\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Is there at least one telephone INSIDE ^HOME that is currently working and is not a cell phone?

Fills:

HOME	Description	your home at ^HNO ^HNOSUF ^STRNAME/your home
	Instruction	If Roster.HHC.tb1NAME.bPerson[PX_A].ONOFFCAMPUS=1, fill "your home at ^HNO ^HNOSUF ^STRNAME" else fill "your home"
HNO	Description	{Value of HNO}
	Instruction	Fill GEN.HNO
HNOSUF	Description	{Value of HNOSUF}
	Instruction	Fill GEN.HNOSUF
STRNAME	Description	{Value of STRNAME}
	Instruction	Fill GEN.STRNAME

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ where the Sample Adult and Sample Child are in the same family but TELCURWRK\_C has not been asked OR Sample Adult and Sample Child are in the same family, TELCURWRK\_C was answered don't know or refused and the Sample Adult is not the Sample Child Respondent or where the Sample Adult does not live in same family as Sample Child

Skip Instructions:

<1,2,RF,DK> [goto TELCEL\_A]

Replicate To:

TELCURWRK\_C

2024 National Health Interview Survey (NHIS) Questionnaire

TEL: Telephone Use

Question ID: TEL.0020.00.1 Variable: TELCEL\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Do you have a working cell phone?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1> if TELCURWRK\_A=1 or (TELCURWRK\_C=1 and GEN.SAMEFAM\_FLG=1)[goto PHONEUSE\_A]  
else[goto TLNO\_TEL\_SA]

<2,RF,DK> if (GEN.SAMEFAM\_FLG=1 and PHONELIVE\_C=empty) or (GEN.SAMEFAM\_FLG=1 and PHONELIVE\_C IN (RF,DK) and GEN.SARESPSC\_A ne 1) or (GEN.SAMEFAM\_FLG ne 1) and GEN.PCNT\_A gt 1 [goto PHONELIVE\_A]  
else [goto TLNO\_TEL\_SA]

**2024 National Health Interview Survey (NHIS) Questionnaire**

**TEL: Telephone Use**

**Question ID:** TEL.0030.00.1    **Variable:** PHONELIVE\_A    **Interview Module:** Adult    **Content Type:** Annual Core

**Question Text:**

Do you live with anyone ^ATHOME who has a working cell phone?

**Fills:**

ATHOME	Description	at your home at {Value of HNO} {Value of HNOSUF} {Value of STRNAME}
	Instruction	If Roster.HHC.tblNAME.bPerson[PX_A].ONOFFCAMPUS=1, fill "at your home at ^HNO ^HNOSUF ^STRNAME" else leave blank
HNO	Description	{Value of HNO}
	Instruction	Fill GEN.HNO
HNOSUF	Description	{Value of HNOSUF}
	Instruction	Fill GEN.HNOSUF
STRNAME	Description	{Value of STRNAME}
	Instruction	Fill GEN.STRNAME

**Response:**

1	Yes
2	No
7	Refused
9	Don't Know

**Universe:**

Sample Adults 18+ in a family with at least one other person without working cell phones where Sample Adult does not live in same family as Sample Child or Sample Adult and Sample Child are in the same family but PHONELIVE\_C has not been asked OR Sample Adult and Sample Child are in the same family, PHONELIVE\_C was answered dk/rf and the Sample Adult is not the Sample Child Respondent.

**Skip Instructions:**

<1,2,RF,DK> [goto TLNO\_TEL\_SA]

**Replicate To:**

PHONELIVE\_C

2024 National Health Interview Survey (NHIS) Questionnaire

TEL: Telephone Use

Question ID: TEL.0040.00.1 Variable: PHONEUSE\_A Interview Module: Adult Content Type: Annual Core

Question Text:

Of all the telephone calls that you answer, are all or almost all on your cell phones, some on your cell phone and some on your home phone, or very few or none on your cell phones?

Response:

1	All or almost all calls on cell phone
2	Some on cell phone and some on home phone
3	Very few or none on cell phone
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with working personal cell phone and who said they have a working land-line in household or in the same family as sample child respondent who said they have a working landline in the household.

Skip Instructions:

<1-3,RF,DK> [goto TLNO\_TEL\_SA]

2024 National Health Interview Survey (NHIS) Questionnaire

LNK: Linkage

Question ID: LNK.0010.00.1 Variable: LNKINTRO\_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

We would like the last four digits of your Social Security Number^medicarenum. This information will help us link your survey data with health-related records of other government agencies, and allow us to conduct additional research without taking up your time with more questions. The National Center for Health Statistics (NCHS) uses this information for research purposes only. Providing this information is voluntary. There will be no effect on your benefits if you do not provide this information. Federal laws authorize us to ask for this information. Like all other answers you have provided, this information will remain confidential.

*\* Read if necessary: The specific federal laws protecting your privacy and the confidentiality of your data are the Public Health Service Act (Title 42, U.S.C., Section 242m(d)); the Confidential Information Protection and Statistical Efficiency Act (44 U.S.C. §§ 3561-3583); and the Privacy Act of 1974 (5 U.S.C. § 552a). In addition to the above cited laws, NCHS complies with the Federal Cybersecurity Enhancement Act of 2015 (6 U.S.C. §§ 151 and 151 note) which protects Federal information systems from cybersecurity risks by screening their networks.*

*\* Read if necessary: NCHS collects health-related data from other government agencies, including records from Medicare and Medicaid Services, Social Security, housing, and death certificates. If you agree, NCHS will attempt to link records such as these with your survey data to give a fuller picture of the kinds of things that affect health. NCHS does this linkage. Your name and your information are not given to these agencies.*

*\* Read if necessary: If as*

Fills:

medicarenum	Description	, and the last four characters of your Medicare number
	Instruction	If INS.HIKIND_A=2 or INS.MCAREPRB_A=1, fill ", and the last four characters of your Medicare number" else, fill nothing

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto SSN4\_A]

2024 National Health Interview Survey (NHIS) Questionnaire

LNK: Linkage

Question ID: LNK.0020.00.1 Variable: SSN4\_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

What are the last four digits of your Social Security Number?

\* **Read if necessary:** *Providing this information is voluntary. There will be no effect on your benefits if you do not provide this information. Federal laws authorize us to ask for this information. Like all other information you have provided, these answers will remain confidential.*

\* **Read if asked about specific laws:** *The specific federal laws protecting your privacy and the confidentiality of your data are the Public Health Service Act, which is Title 42, U.S.C., Section 242m(d); the Confidential Information Protection and Statistical Efficiency Act (44 U.S.C. §§ 3561-3583); and the Privacy Act of 1974, which is 5 U.S.C. § 552a. In addition to the above cited laws, NCHS complies with the Federal Cybersecurity Enhancement Act of 2015 (6 U.S.C. §§ 151 and 151 note) which protects Federal information systems from cybersecurity risks by screening their networks.*

\* **Enter 'N' for no Social Security Number.**

Response:

0001-9999	Range of values
N	No Social Security Number
99997	Refused
99999	Don't Know

Universe:

Skip Instructions:

```
if SSN4_A=000-999 [goto ERR2_SSN4_A]
elseif SSN4_A NOT IN (N,RF,DK,000-999,0001-9999) [goto ERR3_SSN4_A]
<0001-9999> if Adult.INS.HIKIND_A=2 or Adult.INS.MCAREPRB_A=1 [goto LAST4C_A]
else [goto next section]
<N,RF,DK> if Adult.INS.HIKIND_A=2 or Adult.INS.MCAREPRB_A=1 [goto LAST4C_A]

else [goto RLINK_A]
```

Hard Edit:

Check Text	Check Description	Check Text
ERR2_SSN4_A	Entered less than four digits hard edit	{check }
		You must enter all four of the last four digits of the Social Security Number. Please correct.

ERR3_SSN4_A	SSN last four digits are 0000 or a letter other than N hard edit	<p>{check }</p> <p>The last 4 digits of a SSN should be between 0001-9999.</p> <p>For a respondent who does not want to provide the SSN, enter 'Ctrl D' or 'Ctrl R' for 'Don't Know' or 'Refused.'</p> <p>If a respondent does not have a SSN, enter 'N'.</p> <p>Please correct.</p>
-------------	--	--

2024 National Health Interview Survey (NHIS) Questionnaire

LNK: Linkage

Question ID: LNK.0040.00.1    Variable: LAST4C\_A    Interview Module: Adult    Content Type: Annual Core

Question Text:

?[F1]  
\* 1 of 2

What are the last four characters of your Medicare or Health Insurance Claim Number?

\* **Read if necessary:** *Providing this information is voluntary. There will be no effect on your benefits if you do not provide this information. Federal laws authorize us to ask for this information. Like all other information you have provided, these answers will remain confidential.*

\* **Read if asked about specific laws:** *The specific federal laws protecting your privacy and the confidentiality of your data are the Public Health Service Act, which is Title 42, U.S.C., Section 242m(d); the Confidential Information Protection and Statistical Efficiency Act (44 U.S.C. §§ 3561-3583); and the Privacy Act of 1974, which is 5 U.S.C. § 552a. In addition to the above cited laws, NCHS complies with the Federal Cybersecurity Enhancement Act of 2015 (6 U.S.C. §§ 151 and 151 note) which protects Federal information systems from cybersecurity risks by screening their networks.*

\* **Reports from memory are acceptable if the Medicare card (or some other form of documentation) is not available.**

\* **Enter the last four characters, which should be letter-letter-number-number.**

Response:

Verbatim	Verbatim values
9997	Refused
9999	Don't Know

Universe:

Sample adults 18+ who have Medicare

Skip Instructions:

if anything lt 4 alphanumeric characters [goto ERR1\_LAST4C\_A]  
elseif SSN4\_A IN (N,RF,DK) or LAST4C\_A IN (RF,DK) [goto RLINK\_A]  
else [goto next section]

Hard Edit:

Check Text	Check Description	Check Text
ERR1_LAST4C_A	Medicare number less than 4 characters	{check }  You must enter all four of the last four alphanumeric characters of the Medicare number.  Please correct.



2024 National Health Interview Survey (NHIS) Questionnaire

LNK: Linkage

Question ID: LNK.0060.00.1 Variable: RLINK\_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

May we try to link your survey data without a ^SSNMEDNUM?

*\* Read if necessary: Any data obtained are protected by strict federal laws, including the Public Health Service Act, which is Title 42, U.S.C., Section 242m(d); the Confidential Information Protection and Statistical Efficiency Act (44 U.S.C. §§ 3561-3583); and the Privacy Act of 1974, which is 5 U.S.C. § 552a. In addition to the above cited laws, NCHS complies with the Federal Cybersecurity Enhancement Act of 2015 (6 U.S.C. §§ 151 and 151 note) which protects Federal information systems from cybersecurity risks by screening their networks.*

Fills:

SSNMEDNUM	Description	consent by SSN or Medicare number
	Instruction	if (SSN4_A IN (N,RF,DK) and ((Adult.INS.HIKIND_A ne 2 and Adult.INS.MCAREPRB_A ne 1) or (MCN04_A ge 001 and MCN04_A le 9999) or (LAST4C_A NOT IN (empty,RF, DK)))) fill= "social security number"  elseif ((SSN4_A ge 0001 and SSN4_A le 9999) and (Adult.INS.HIKIND_A = 2 or Adult.INS.MCAREPRB_A =1) and (MCN04_A IN (RF, DK) or (LAST4C_A IN (RF,DK)))) fill = "Medicare or Health Insurance Claim Number"  else fill = "social security number, Medicare or Health Insurance Claim Number"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample adults 18+ who answered no SSN or refused or don't know last 4 digits of SSN or who answered refused or don't know at last 4 of Medicare number

Skip Instructions:

<1,2,RF,DK>[goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

THX: Thanks

Question ID: THX.0080.00.1 Variable: THANKS\_A Interview Module: Adult Content Type: Annual Core

Question Text:

\* Thank respondent for answering these questions. If there is a Sample Child interview to complete, ask for appropriate person to respond to these questions.

Enter '1' to continue.

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto next section]

**2024 National Health Interview Survey (NHIS) Questionnaire**

**VFY: Verification and demographic details**

**Question ID:** VFY.0040.00.1    **Variable:** CURRES\_C    **Interview Module:** Child    **Content Type:** Annual Core

**Question Text:**

The next questions are about ^SCNAME.

\* Enter the line number of the person to whom you are speaking.

\* If Sample Child respondent refuses to participate enter CTRL-R.

**Fills:**

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

**Response:**

01	Name of Person 1
02	Name of Person 2
03	Name of Person 3
04	Name of Person 4
05	Name of Person 5
06	Name of Person 6
07	Name of Person 7
08	Name of Person 8
09	Name of Person 9
10	Name of Person 10
11	Name of Person 11
12	Name of Person 12
13	Name of Person 13
14	Name of Person 14
15	Name of Person 15
16	Name of Person 16
17	Name of Person 17
18	Name of Person 18
19	Name of Person 19
20	Name of Person 20
21	Name of Person 21
22	Name of Person 22
23	Name of Person 23
24	Name of Person 24
25	Name of Person 25
97	Refused

**Universe:**

Sample Children 0-17

**Skip Instructions:**

```
<RF> if CBSTAT_A=1[goto BCK.THANKS_CB]
else if OUTCOME=215 [goto BCK.THANKS_INSUF]
else [goto BCK.THANKS_SUF]
If CURRES_C not in Roster.FAM.KNOWSC [goto KNOAVAIL_C]
Else if CURRES_C = LNO_HHRESP AND CURRES_C in Roster.FAM.KNOWSC [goto AVAIL_C]
Else if CURRES_C = LNO_HHRESP AND CURRES_C in Roster.FAM.KNOWSC AND CURRES_C not in
Roster.bREL.bPerson[PX_C].PARENTS[goto RELTIV_C]
Else if CURRES_C = LNO_HHRESP AND CURRES_C in Roster.FAM.KNOWSC AND CURRES_C in
Roster.bREL.bPerson[PX_C].PARENTS[goto VFYALL_C]
```

2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0060.00.1 Variable: KNOAVAIL\_C Interview Module: Child Content Type: Annual Core

Question Text:

^KNOAVAIL\_C\_fill

\* Enter the line number of available respondent from list or press F9 to set up a callback if no one is available or refused.

^KNOAVAIL\_C\_fill\_2

Fills:

KNOAVAIL_C_fill	Description	FR Instruction/I have recorded that ^KNOWSC ^areis_c knowledgeable about and responsible for ^SCNAME's health care. ^WHOIS currently available and willing to answer these questions?
	Instruction	If (KnowSC_Count = ActiveNotKnow_Count) fill : "* If there are no other knowledgeable people to select then press the end key." ELSE fill : "I have recorded that ^KNOWSC ^areis_c knowledgeable about and responsible for ^SCNAME's health care. ^WHOIS currently available and willing to answer these questions?"
KNOWSC	Description	List of household members who are knowledgeable about and responsible for the Sample Child
	Instruction	KNOWSC = list of people identified as being knowledgeable about and responsible for ^SCNAME's health as selected in Roster.FAM.KNOWSC. Add "and" before last name if list > 1.
areis_c	Description	is/are
	Instruction	If KNOAVAIL_Count = 1, fill 'is', else fill 'are'
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
WHOIS	Description	Is {Value of ALIAS}/Who is
	Instruction	If KNOAVAIL_Count = 1, fill "Is Alias[I]" else fill "Who is"
KNOAVAIL_C_fill_2	Description	FR Instruction
	Instruction	If (ActiveNotKnow_Count > 0) fill : "* People listed in gray have said that they are not knowledgeable about the SC. If you incorrectly set someone as not knowledgeable then you may select that person and continue the interview."

Response:

01	Name of Person 1
02	Name of Person 2
03	Name of Person 3
04	Name of Person 4
05	Name of Person 5
06	Name of Person 6
07	Name of Person 7
08	Name of Person 8

09	Name of Person 9
10	Name of Person 10
11	Name of Person 11
12	Name of Person 12
13	Name of Person 13
14	Name of Person 14
15	Name of Person 15
16	Name of Person 16
17	Name of Person 17
18	Name of Person 18
19	Name of Person 19
20	Name of Person 20
21	Name of Person 21
22	Name of Person 22
23	Name of Person 23
24	Name of Person 24
25	Name of Person 25
97	Refused

**Universe:**

Sample Children 0-17 and at least one knowledgeable person is still eligible for selection and speaking to the initial respondent and they are not knowledgeable OR speaking to a new respondent

**Skip Instructions:**

```
<01-25> [goto INTMODE_C]
<RF> if CBSTAT_A=1[goto BCK.THANKS_CB]
else if OUTCOME=215 [goto BCK.THANKS_INSUF]
else [goto BCK.THANKS_SUF]
<F9> [goto bCallback.ARRANGE_CALLBACK]
```

2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0080.00.1 Variable: INTMODE\_C Interview Module: Child Content Type: Annual Core

Question Text:

\*How are you contacting ^KNOAVAIL\_C?

Fills:

KNOAVAIL_C	Description	Name of person selected at KNOAVAIL_C
	Instruction	Display name of person whose line number was selected at KNOAVAIL_C

Response:

1	Personal visit
2	Telephone

Universe:

Sample Children 0-17 and interviewer is speaking to a new respondent

Skip Instructions:

```
<1> if HHRESPSC_FLG ne 1 [goto AVAIL_C]
else if HHRESPSC_FLG=1 and LNO_SCRESP not in Roster.bREL.bPerson[PX_C].PARENTS[goto RELTIV_C]
else [goto VFYALL_C]
<2> [goto TINTRO_C]
```

2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0090.00.1 Variable: TINTRO\_C Interview Module: Child Content Type: Annual Core

Question Text:

Hello, my name is (\* say your name). I'm calling from the U.S. Census Bureau. We are conducting the National Health Interview Survey on behalf of the National Center for Health Statistics, part of the Centers for Disease Control and Prevention (CDC). This is a nationwide survey about the health of both adults and children. I have some information from ^HHRESP. ^HHSEX told me that you would be a good person to talk to about the health of ^SCNAME.

\* Read if necessary: I believe I am calling you on a cell phone.

Before we continue, I have to ask: Are you currently driving a vehicle?

\* Even if the respondent is using a hands-free device while driving, you must enter '1'.

Fills:

HHRESP	Description	{Value of HHRESPAVAIL}
	Instruction	Display the name of the person selected at Roster.HHC.HHRESPAVAIL
HHSEX	Description	He/She/They
	Instruction	If GEN.SEX_FINAL[LNO_HHRESP]=1, fill: He elseif GEN.SEX_FINAL[LNO_HHRESP]=2, fill: She elseif GEN.SEX_FINAL[LNO_HHRESP] in (DK,RF), fill: They
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 and interviewer is conducting a telephone interview with new respondent

Skip Instructions:

<1,RF,DK> [goto ATTN\_C]

<2> [goto LETTER\_C]



2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0100.00.1 Variable: ATTN\_C Interview Module: Child Content Type: Annual Core

Question Text:

For your safety, we will call you back at another time.

\* Enter 1 to continue.

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

Sample Children 0-17 and interviewer is conducting a telephone interview with new respondent who is driving

Skip Instructions:

<1> [goto bCallback.CB\_POSSIBLE]

2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0110.00.1 Variable: LETTER\_C Interview Module: Child Content Type: Annual Core

Question Text:

\* If sample child respondent is a new respondent read question below, otherwise enter 1

\* **Read if necessary:** A letter describing the National Health Interview Survey was sent to your home recently. Do you remember seeing the letter?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 and interviewer is conducting a telephone interview with new respondent who is not driving

Skip Instructions:

<1,2,RF,DK> [goto S\_INTRO\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0120.00.1 Variable: S\_INTRO\_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

\* If sample child respondent is a new respondent read question below, otherwise enter 1

\* **Read if necessary:** *There are a few things I need to cover before we continue. I'd like you to know that taking part in this survey is voluntary. You may choose not to answer any questions you don't wish to answer, or end the interview at any time without penalty. We are required by Federal law to develop and follow strict procedures to protect the confidentiality of your information and use your answers only for statistical research. I can describe these laws if you wish. Except for the National Center for Health Statistics and Census Bureau employees and specially designated agents, no one can see your answers until all information that could identify you and/or your family has been removed. Only after that will your data be made available to researchers. For most children, the survey will take less than ^SCTIME minutes. I'd like to continue now unless you have any questions.*

\* If respondent asks for more information about the privacy laws, press F1.

Fills:

SCTIME	Description	20/30
	Instruction	If ASTAT=1 and SAMEFAM_FLG=1, fill: 20 Else, fill: 30

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

Sample Children 0-17 and interviewer is conducting a telephone interview with new respondent who is not driving

Skip Instructions:

```
<1> if HHRESPSC_FLG ne 1 [goto AVAIL_C]  
else if HHRESPSC_FLG=1 and LNO_SCRESP not in Roster.bREL.bPerson[PX_C].PARENTS[goto RELTIV_C]  
else [goto VFYALL_C]
```

2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0130.00.1 Variable: AVAIL\_C Interview Module: Child Content Type: Annual Core

Question Text:

I have recorded that you are knowledgeable about and responsible for ^SCNAME's health care. Is that correct?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused

Universe:

Sample Children 0-17 and at least one knowledgeable person is still eligible for section AND initial respondent wasn't the HH Resp and is knowledgeable OR picked a new respondent and respondent is not driving

Skip Instructions:

```
<1>If (LNO_SCRESP not in Roster.bREL.bPerson[PX_C].PARENTS) {respondent is not a parent} [goto RELTIV_C]
Else If Roster.tb1Name.bPerson[PX_C].ONOFFCAMPUS in (1,RF,DK) {Sample Child is on campus} [goto VFYONCAMP_C]
Else [goto VFYALL_C]
<2> if KNOAVAIL_Count gt 0 [goto KNOAVAIL_C]
Else [goto NOMORE_C]
<RF> if CBSTAT_A=1[goto BCK.THANKS_CB]
else if OUTCOME=215 [goto BCK.THANKS_INSUF]
else [goto BCK.THANKS_SUF]
```

**2024 National Health Interview Survey (NHIS) Questionnaire**

**VFY: Verification and demographic details**

**Question ID:** VFY.0150.00.1    **Variable:** RELTIV\_C    **Interview Module:** Child    **Content Type:** Annual Core

**Question Text:**

What is your relationship to ^SCNAME?

**Fills:**

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

**Response:**

01	Parent (Biological, adoptive, or step)
02	Grandparent
03	Aunt/Uncle
04	Brother/Sister
05	Other relative
06	Legal guardian
07	Foster parent
08	Other non-relative
97	Refused
99	Don't Know

**Universe:**

Sample Children 0-17 where the current respondent has not refused AND at least one person is knowledgeable about and responsible for the sample child AND the respondent is not driving while on the telephone AND the respondent has not refused or said he/she is not available AND the respondent was not identified as a parent in the roster section

**Skip Instructions:**

```
<9> [goto ERR_RELTIV_C]
<4,5,8,RF,DK> [goto VFYRESP_C]
<1,2,3,6,7> if Roster.tb1NAME.bPerson.[PX.C].ONOFFCAMPUS IN (1,RF,DK) and HHRESPSC_FLG ne 1
[goto VFYONCAMP_C]
Else [goto VFYALL_C]
```

**Soft Edit:**

Check Text	Check Description	Check Text
ERR_RELTIV_C	RELTIV_C soft edit	{signal }
		The spouse or partner of the Sample Child cannot answer questions about him/her.

2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0180.00.1 Variable: VFYRESP\_C Interview Module: Child Content Type: Annual Core

Question Text:

To confirm, are you RESPONSIBLE FOR ^SCNAME's health care?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 where person identified as Child respondent is Brother/Sister, Other Relative, Other Non-relative, refused or don't know

Skip Instructions:

```
<2,RF,DK>if KNOAVAIL_Count > 0 [goto KNOAVAIL_C]  
else [goto NOMORE_C]  
<1> if Roster.tb1Name.bPerson[PX_C].ONOFFCAMPUS in (1,RF,DK) [goto VFYONCAMP_C]  
Else [goto VFYALL_C]
```

2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0190.00.1 Variable: VFYONCAMP\_C Interview Module: Child Content Type: Annual Core

Question Text:

I want to confirm some information.

Does ^SCNAME live in on-campus housing or off-campus housing?

*\*Read if necessary: On-campus housing includes residence halls and dorms where students live together. It also includes buildings that are owned, leased, or managed by the school. Fraternities and sororities are on-campus housing.*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	On campus
2	Off campus
7	Refused
9	Don't Know

Universe:

A person who is knowledgeable or responsible for the sample child's health is available and the Sample Child is living in on-campus housing and the Sample Child respondent is not the household respondent and the Sample Child's spouse or partner is not the respondent

Skip Instructions:

<1,RF,DK> [goto VFYALL\_C]  
<2> [goto NOMORE\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0200.00.1 Variable: VFYALL\_C Interview Module: Child Content Type: Annual Core

Question Text:

\* Please verify the following information about the sample child before proceeding:

I have recorded ^childvsex, ^AGE\_C, ^NATORG\_C, and ^RACE\_C. Would you like to make any changes to this ^additionalinfo\_C?

[^RACEVRBATvalue\\_C](#)

\* If respondent "refuses" or says "don't know", enter "2" for "no."

Fills:

childvsex	Description	^SCNAME is male/^SCNAME is female/^SCNAME's sex is not known/^SCNAME's sex was not provided
	Instruction	If SEX_FINAL=1, fill: "^SCNAME is male" If SEX_FINAL=2, fill: "^SCNAME is female" If SEX_FINAL=DK, fill: "^SCNAME's sex is not known" If SEX_FINAL=RF, fill: "^SCNAME's sex was not provided"
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
AGE_C	Description	^SCNAME is ^AGENO_C ^AGETP_C old/^SCNAME is under 18
	Instruction	If AGE_FINAL NE ('RF', 'DK'), fill: "^SCNAME is ^AGENO_C ^AGETP_C old" If AGE_FINAL IN ('RF', 'DK'), fill: "^SCNAME is under 18"
AGENO_C	Description	{Value of AGENO}
	Instruction	Fill value from Roster.HHC.AGENO[PX]
AGETP_C	Description	{Value of AGETP}
	Instruction	Fill value from Roster.HHC.AGETP[PX]
NATORG_C	Description	Verify Hispanic or Latino origin
	Instruction	If NATO_FINAL=1 fill: "^SCNAME is of Hispanic or Latino Origin" If NATO_FINAL=2 fill: "^SCNAME is not of Hispanic or Latino Origin" If NATO_FINAL=DK fill: "whether ^SCNAME is of Hispanic or Latino Origin is not known" If NATO_FINAL=RF fill: "information about whether ^SCNAME is of Hispanic or Latino Origin was not provided"
RACE_C	Description	^SCNAME is ^RACEFILLAND_C/^SCNAME's race is not known/^SCNAME's race was not provided
	Instruction	If GEN.RACE_FINAL[PX_C].RACE_FINAL NE 'RF' OR 'DK', fill: "^SCNAME is ^RACEFILLAND_C." If GEN.RACE_FINAL[PX_C].RACE_FINAL='DK', fill: ^SCNAME's race is not known" If GEN.RACE_FINAL[PX_C].RACE_FINAL='RF', fill: ^SCNAME's race was not provided"
RACEFILLAND_C	Description	Categories selected at the RACE screen
	Instruction	Fill categories selected at the GEN.RACE_FINAL [PX_C].RACE_FINAL screen. If more than two categories separate the categories with commas. Add the word "and" before the last category. For category 8 (GEN.RACE_FINAL[PX_C].RACE_FINAL=8), if GEN.RACE_FINAL[PX_C].RACE_SP_FINAL not in ['ZZ',RF,DK] display picklist selection from GEN.RACE_FINAL[PX_C].RACE_SP_FINAL elseif HHRESPSC_FLG=1 display GEN.RACE_FINAL [PX_C].RACE_VRBAT_FINAL else display "some other race"



additionalinfo_C	Description	if any information is missing "or provide additional information about"
	Instruction	See attachment for fill instructions
RACEVRBATvalue_C	Description	Information collected at RACE_VRBAT for Sample Child
	Instruction	IF GEN.HHRESPSC_FLG ne 1 and GEN.RACE_FINAL [PX_C].RACE_VRBAT_FINAL ne (empty,RF,DK), fill "*" If respondent wants information on which other race ^SCNAME is listed as, say ^RACE_VRBAT."
RACE_VRBAT	Description	{Value of RACE_VRBAT_FINAL}
	Instruction	Fill value from GEN.RACE_FINAL[PX].RACE_VRBAT_FINAL

**Response:**

1	Yes
2	No
7	Refused
9	Don't Know

**Universe:**

Sample Children 0-17 where a person who is knowledgeable or responsible for the sample child's health has been identified and that knowledgeable person has not refused and the Sample Child lives on campus or refused or don't know and the Sample Child's spouse or partner is not the respondent

**Skip Instructions:**

```
<1> [goto VFYDEM_C]
<2> if GEN.SEX_FINAL[PX_C] IN (RF,DK) [goto SEXGUESS_C]
elseif NATO_FINAL=1 [goto HISPTYPE_C]
elseif RACE_FINAL=6 [goto PITYPE_C]
elseif RACE_FINAL=7 [goto ASIANTYPE_C]
elseif RACE_FINAL=8 [goto RACEOTHER_C]
else [goto BMONTH_C]
```

2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0210.00.1 Variable: VFYDEM\_C Interview Module: Child Content Type: Annual Core

Question Text:

- \* **Read if necessary:** *What should I change?*
- \* **Enter all that apply, separate with commas.**

Response:

1	Sex
2	Age
3	Hispanic or Latino Origin
4	Race
7	Refused
9	Don't Know

Universe:

Sample children 0-17 would like to change demographic information

Skip Instructions:

```
If 1 NOT IN VFYDEM_C and GEN.SEX_FINAL[PX_C] IN (DK,RF) [goto SEXGUESS_C]
elseif 1 IN VFYDEM_C [goto NEWSEX_C]
elseif 2 IN VFYDEM_C [goto NEWAGENO_C]
elseif 3 IN VFYDEM_C [goto NEWNATORG_C]
elseif 4 IN VFYDEM_C [goto NEWRACE_C]
<RF,DK> If GEN.SEX_FINAL[PX_C] IN (DK,RF) [goto SEXGUESS_C]

elseif NATO_FINAL=1 [goto HISPTYPE_C]
elseif RACE_FINAL=6 [goto PITYPE_C]
elseif RACE_FINAL=7 [goto ASIANTYPE_C]
elseif RACE_FINAL=8 [goto RACEOTHER_C]
else [goto BMONTH_C]
```

2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0220.00.1 Variable: NEWSEX\_C Interview Module: Child Content Type: Annual Core

Question Text:

Is ^SCNAME male or female?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Male
2	Female
7	Refused
9	Don't Know

Universe:

Respondent said sample child's sex is not correct

Skip Instructions:

```
if GEN.SEX_FINAL[PX_C]=RF,DK and NEWSEX_C=RF,DK [goto SEXGUESS_C]
elseif 2 IN VFYDEM_C [goto NEWAGENO_C]
elseif 3 IN VFYDEM_C [goto NEWNATORG_C]
elseif 4 IN VFYDEM_C [goto NEWRACE_C]
elseif NATO_FINAL=1 [goto HISPTYPE_C]
elseif RACE_FINAL=6 [goto PITYPE_C]
elseif RACE_FINAL=7 [goto ASIANTYPE_C]
elseif RACE_FINAL=8 [goto RACEOTHER_C]
else [goto BMONTH_C]
```

2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0230.00.1 Variable: SEXGUESS\_C Interview Module: Child Content Type: Annual Core

Question Text:

\*Enter your best guess of ^SCNAME's sex

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Male
2	Female

Universe:

Sample children for whom there is no sex provided by the household respondent and did not give a sex when asked to verify information and the Sample Child's spouse or partner is not the respondent

Skip Instructions:

```
<1,2>  
if 2 IN VFYDEM_C [goto NEWAGENO_C]  
elseif 3 IN VFYDEM_C [goto NEWNATORG_C]  
elseif 4 IN VFYDEM_C [goto NEWRACE_C]  
elseif NATO_FINAL=1 [goto HISPTYPE_C]  
elseif RACE_FINAL=6 [goto PITYPE_C]  
elseif RACE_FINAL=7 [goto ASIANTYPE_C]  
elseif RACE_FINAL=8 [goto RACEOTHER_C]  
else [goto BMONTH_C]
```

2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0240.01.1 Variable: NEWAGENO\_C Interview Module: Child Content Type: Annual Core

Question Text:

\* 1 of 2

How old is ^SCNAME?

\* Enter number for age.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

001-120	Range of values
997	Refused
999	Don't Know

Universe:

Sample Children 0-17 whose age is not correct

Skip Instructions:

goto [NEWAGETP\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0240.02.1 Variable: NEWAGETP\_C Interview Module: Child Content Type: Annual Core

Question Text:

\* 2 of 2

\* Enter number for age time period.

Response:

1	Day(s)
2	Week(s)
3	Month(s)
4	Year(s)

Universe:

Valid number entered at NEWAGENO\_C

Skip Instructions:

```
<1,2,3,4> if 3 IN VFYDEM_C [goto NEWNATORG_C]
elseif 4 IN VFYDEM_C [goto NEWRACE_C]
elseif NATO_FINAL=1 [goto HISPTYPE_C]
elseif RACE_FINAL=6 [goto PITYPE_C]
elseif RACE_FINAL=7 [goto ASIANTYPE_C]
elseif RACE_FINAL=8 [goto RACEOTHER_C]
else [goto BMONTH_C]
```

2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0260.00.1 Variable: NEWNATORG\_C Interview Module: Child Content Type: Annual Core

Question Text:

Is ^SCNAME Hispanic or Latino?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 whose Hispanic Origin is not correct

Skip Instructions:

```
<1,2,RF,DK> if 4 IN VFYDEM_C [goto NEWRACE_C]
elseif NATO_FINAL=1 [goto HISPTYPE_C]
elseif RACE_FINAL=6 [goto PITYPE_C]
elseif RACE_FINAL=7 [goto ASIANTYPE_C]
elseif RACE_FINAL=8 [goto RACEOTHER_C]
else [goto BMONTH_C]
```

2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0270.00.1 Variable: NEWRACE\_C Interview Module: Child Content Type: Annual Core

Question Text:

What race or races is ^SCNAME? Please select 1 or more of these categories:

White, Black, African American, American Indian, Alaska Native, Native Hawaiian, Pacific Islander, Asian, or some other race?

\* Enter all that apply, separate with commas.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

01	White
02	Black/African American
03	American Indian
04	Alaska Native
05	Native Hawaiian
06	Other Pacific Islander
07	Asian
08	Some other race
97	Refused
99	Don't Know

Universe:

Sample Children 0-17 whose race is not correct

Skip Instructions:

```
if NATO_FINAL=1 [goto HISPTYPE_C]
elseif RACE_FINAL=6 [goto PITYPE_C]
elseif RACE_FINAL=7 [goto ASIANTYPE_C]
elseif RACE_FINAL=8 [goto RACEOTHER_C]
else [goto BMONTH_C]
```



**2024 National Health Interview Survey (NHIS) Questionnaire**

**VFY: Verification and demographic details**

**Question ID:** VFY.0280.00.1    **Variable:** HISPTYPE\_C    **Interview Module:** Child    **Content Type:** Annual Core

**Question Text:**

What is ^SCNAME's Hispanic or Latino ancestry or origin, such as Mexican, Mexican American, ^CHICANOA, Central or South American, Puerto Rican, Cuban, Dominican (Republic), or Other Hispanic, ^LATINOA, or Spanish -- and if ^SCNAME has more than one, tell me all of them.

\* Enter all that apply, separate with commas.

**Fills:**

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
CHICANOA	Description	Chicano/Chicano or Chicana
	Instruction	If SEX_FINAL = 1 fill: "Chicano" if SEX_FINAL = 2,DK,RF fill "Chicano or Chicana"
LATINOA	Description	Latino/Latino or Latina
	Instruction	If SEX_FINAL= 1 fill: "Latino" if SEX_FINAL = 2,DK,RF fill "Latino or Latina"

**Response:**

01	Mexican, Mexican American, or Chicano(a)
02	Central American
03	South American
04	Puerto Rican
05	Cuban
06	Dominican (Republic)
07	Other Hispanic, Latino(a), or Spanish (specify)
97	Refused
99	Don't Know

**Universe:**

Sample Children 0-17 are of Hispanic Origin and a person who is knowledgeable or responsible for the sample child's health has been identified and that knowledgeable person has not refused and the Sample Child lives on campus or refused or don't know and the Sample Child's spouse or partner is not the respondent

**Skip Instructions:**

```
<7> [goto HISPOTHER_C]
<1-6,RF,DK>
if GEN.RACE_FINAL[PX_C]=6 [goto PITYPE_C]
elseif GEN.RACE_FINAL[PX_C]=7 [goto ASIANTYPE_C]
elseif GEN.RACE_FINAL[PX_C]=8 and (NEWRACE_C=8 or (HHRESPSC_FLG ne 1 and RACE_SP[PX_C] in
(ZZ,RF,DK))) [goto RACEOTHER_C]
else [goto BMONTH_C]
```

2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0290.00.1 Variable: HISPOTHER\_C Interview Module: Child Content Type: Annual Core

Question Text:

[F1]

What is ^SCNAME's Hispanic or Latino ancestry or origin? If ^SCNAME has more than one, tell me all of them.

Start typing and then select from list. If Hispanic or Latino ancestry is not on the list, type "ZZ" and enter verbatim.

If any of the following are mentioned, backup to previous screen and correct the entry.

- Mexican
- Mexican American
- Chicano/Chicana
- Central American (REFER TO HELP SCREEN)
- South American (REFER TO HELP SCREEN)
- Puerto Rican (Boricua)
- Cuban/Cuban American
- Dominican (Republic)

\* If respondent provides more than one other Hispanic or Latino ancestry or origin, select 'ZZ' from the lookup table. At the next question, enter ALL the other Hispanic or Latino ancestries or origins in the verbatim field.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

Verbatim	Verbatim values
ZZ	Other
97	Refused
99	Don't Know

Universe:

Sample Child is of Other Hispanic Origin

Skip Instructions:

```
<ZZ> [goto HISPVRBAT_C]
<lookup table selection,RF,DK>
if GEN.RACE_FINAL[PX_C]=6 [goto PITYPE_C]
elseif GEN.RACE_FINAL[PX_C]=7 [goto ASIANTYPE_C]
elseif GEN.RACE_FINAL[PX_C]=8 and (NEWRACE_C=8 or (GEN.HHRESPSC_FLG ne 1 and Roster.HHC.RACE_SP
[PX_C] in (ZZ,RF,DK))) [goto RACEOTHER_C]
else [goto BMONTH_C]
```

2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0300.00.1 Variable: HISPVRBAT\_C Interview Module: Child Content Type: Annual Core

Question Text:

\* **Read if necessary:** What is ^SCNAME's Hispanic or Latino ancestry or origin? If ^SCNAME has more than one, tell me all of them.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Child 0-17 where some other Hispanic Ancestry is reported and this is not chosen from the picklist

Skip Instructions:

```
<allow 80,RF,DK> if GEN.RACE_FINAL[PX_C]=6 [goto PITYPE_C]
elseif GEN.RACE_FINAL[PX_C]=7 [goto ASIANTYPE_C]
elseif GEN.RACE_FINAL[PX_C]=8 and (NEWRACE_C=8 or (GEN.HHRESPSC_FLG ne 1 and Roster.HHC.RACE_SP
[PX_C] in (ZZ,RF,DK))) [goto RACEOTHER_C]
else [goto BMONTH_C]
```

2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0310.00.1 Variable: PITYPE\_C Interview Module: Child Content Type: Annual Core

Question Text:

I have recorded that ^SCNAME is Pacific Islander. What specific ethnic group or groups is ^SCNAME-- such as Guamanian or Chamorro, Samoan, or other Pacific Islander? If ^SCNAME is more than one, tell me all of them.

\* Enter all that apply, separate with comma

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Guamanian or Chamorro
2	Samoan
3	Other Pacific Islander
7	Refused
9	Don't Know

Universe:

Sample children 0-17 identified as Pacific Islanders and a person who is knowledgeable or responsible for the sample child's health has been identified and that knowledgeable person has not refused and the Sample Child lives on campus or refused or don't know and the Sample Child's spouse or partner is not the respondent

Skip Instructions:

```
<3> [goto PIOTHER_C]
<1,2,RF,DK> if GEN.RACE_FINAL[PX_C]=7 [goto ASIANTYPE_C]
elseif GEN.RACE_FINAL[PX_C]=8 and (NEWRACE_C=8 or (GEN.HHRESPSC_FLG ne 1 and Roster.HHC.RACE_SP
[PX_C] in (ZZ,RF,DK))) [goto RACEOTHER_C]
else [goto BMONTH_C]
```

2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0320.00.1 Variable: PIOTHER\_C Interview Module: Child Content Type: Annual Core

Question Text:

\* **Read if necessary:** *I have recorded that ^SCNAME is Pacific Islander. What specific ethnic group or groups is ^SCNAME? If ^SCNAME is more than one, tell me all of them.*

\* **Start typing and then select from list. If Pacific Islander ethnic group is not on the list, type "ZZ" and enter verbatim.**

\* **If respondent provides more than one ethnic group, select 'ZZ' from the lookup table. At the next question, enter ALL the ethnic groups in the verbatim field.**

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

Verbatim	Verbatim values
ZZ	Other
97	Refused
99	Don't Know

Universe:

Sample Child who is "Other Pacific Islander"

Skip Instructions:

```
<ZZ> [goto PIVRBAT_C]
<lookup table selection, RF, DK>
if GEN.RACE_FINAL[PX_C]=7 [goto ASIANTYPE_C]
elseif GEN.RACE_FINAL[PX_C]=8 and (NEWRACE_C=8 or (GEN.HHRESPSC_FLG ne 1 and Roster.HHC.RACE_SP
[PX_C] in (ZZ,RF,DK))) [goto RACEOTHER_C]
else [goto BMONTH_C]
```

## 2024 National Health Interview Survey (NHIS) Questionnaire

### VFY: Verification and demographic details

Question ID: VFY.0330.00.1 Variable: PIVRBAT\_C Interview Module: Child Content Type: Annual Core

#### Question Text:

\* **Read if necessary:** I have recorded that ^SCNAME is Pacific Islander. What specific ethnic group or groups is ^SCNAME? If ^SCNAME is more than one, tell me all of them.

#### Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

#### Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

#### Universe:

Sample Child are some other group of Pacific Islander and this is not chosen from the picklist

#### Skip Instructions:

```
<allow 80,RF,DK>
if GEN.RACE_FINAL[PX_C]=7 [goto ASIANTYPE_C]
elseif GEN.RACE_FINAL[PX_C]=8 and (NEWRACE_C=8 or (GEN.HHRESPSC_FLG ne 1 and Roster.HHC.RACE_SP
[PX_C] in (ZZ,RF,DK))) [goto RACEOTHER_C]
else [goto BMONTH_C]
```

2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0340.00.1 Variable: ASIANTYPE\_C Interview Module: Child Content Type: Annual Core

Question Text:

I have recorded that ^SCNAME is Asian. What specific ethnic group or groups is ^SCNAME-- such as Asian Indian, Chinese, Filipino, Japanese, Korean, Vietnamese, or Other Asian? If ^SCNAME is more than one, tell me all of them.

\* Enter all that apply, separate with commas.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

01	Asian Indian
02	Chinese
03	Filipino
04	Japanese
05	Korean
06	Vietnamese
07	Other Asian
97	Refused
99	Don't Know

Universe:

Sample Children 0-17 identified as Asian and a person who is knowledgeable or responsible for the sample child's health has been identified and that knowledgeable person has not refused and the Sample Child lives on campus or refused or don't know and the Sample Child's spouse or partner is not the respondent

Skip Instructions:

```
<7> [goto ASIANOTHER_C]
<1-6,RF,DK>
elseif GEN.RACE_FINAL[PX_C]=8 and (NEWRACE_C=8 or (GEN.HHRESPSC_FLG ne 1 and Roster.HHC.RACE_SP
[PX_C] in (ZZ,RF,DK))) [goto RACEOTHER_C]
else [goto BMONTH_C]
```

2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0350.00.1 Variable: ASIANOTHER\_C Interview Module: Child Content Type: Annual Core

Question Text:

What is ^SCNAME's specific Asian ethnic group or groups? If ^SCNAME has more than one, tell me all of them.

Start typing and then select from list. If Asian ethnic group is not on the list, type "ZZ" and enter verbatim.

If any of the following are mentioned, backup to previous screen and correct the entry.

(Asian) Indian

Chinese

Filipino

Japanese

Korean

Vietnamese

\* If respondent provides more than one ethnic group, select 'ZZ' from the lookup table. At the next question, enter ALL the ethnic groups in the verbatim field.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

Verbatim	Verbatim values
ZZ	Other
97	Refused
99	Don't Know

Universe:

Sample Child who is "other Asian"

Skip Instructions:

```
<ZZ> [goto ASIANVRBAT_C]
<lookup table selection,RF,DK>
if GEN.RACE_FINAL[PX_C]=8 and (NEWRACE_C=8 or (NEWRACE_C=EMPTY and GEN.HHRESPSC_FLG ne 1 and
ROSTER.HHC.RACE_SP[PX_C] IN (ZZ,RF,DK))) [goto RACEOTHER_C]
else [goto BMONTH_C]
```



2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0360.00.1 Variable: ASIANVRBAT\_C Interview Module: Child Content Type: Annual Core

Question Text:

\* **Read if necessary:** What is ^SCNAME's specific Asian ethnic group or groups? If ^SCNAME has more than one, tell me all of them.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Child is some other ethnic group of Asian and this is not chosen from the picklist

Skip Instructions:

```
<allow 80,RF,DK>  
if GEN.RACE_FINAL[PX_C]=8 and (NEWRACE_C=8 or (NEWRACE_C=EMPTY and GEN.HHRESPSC_FLG ne 1 and  
ROSTER.HHC.RACE_SP[PX_C] IN (ZZ,RF,DK))) [goto RACEOTHER_C]  
else [goto BMONTH_C]
```

2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0370.00.1 Variable: RACEOTHER\_C Interview Module: Child Content Type: Annual Core

Question Text:

What other race or races is ^SCNAME?

Start typing and then select from list. If race is not on the list, type "ZZ" and enter verbatim.

\* If respondent provides more than one other race, select 'ZZ' from the lookup table. At the next question, enter ALL the other races in the verbatim field.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

Verbatim	Verbatim values
ZZ	Other
97	Refused
99	Don't Know

Universe:

Sample Child's race was changed to "some other race" in verification section or where the Sample Child respondent is not the Household respondent and were identified by the household respondent as being "some other race" not on the roster other race picklist and a person who is knowledgeable or responsible for the sample child's health has been identified and that knowledgeable person has not refused and the Sample Child lives on campus or refused or don't know and the Sample Child's spouse or partner is not the respondent

Skip Instructions:

<ZZ> [goto RACEVRBAT\_C]  
<lookup table selection, RF,DK> [goto BMONTH\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0380.00.1 Variable: RACEVRBAT\_C Interview Module: Child Content Type: Annual Core

Question Text:

\* **Read if necessary:** *What other race or races is ^SCNAME?*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Child's race was change to include "some other race" in verification section or where the Sample Child respondent is not the Household respondent and were identified by the household respondent as being "some other race" not on the roster other race picklist and the Sample Child Respondent did not select it from the Sample Adult other race picklist.

Skip Instructions:

<verbatim,RF,DK> [goto BMONTH\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0410.01.1 Variable: BMONTH\_C Interview Module: Child Content Type: Annual Core

Question Text:

\* 1 of 3

What is ^SCNAME's date of birth?  
Please give month, day, and year for the date of birth.

\* Enter month of birth.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

01	January
02	February
03	March
04	April
05	May
06	June
07	July
08	August
09	September
10	October
11	November
12	December
97	Refused
99	Don't Know

Universe:

A person who is knowledgeable or responsible for the sample child's health is available or there is only one parent over 18 and no other adults in the child's family or there are more than two adults and one of them is a parent who was identified as available at AVAIL\_C AND date of birth was verified as incorrect fewer than 2 times and the Sample Child's spouse or partner is not the respondent

Skip Instructions:

<1-12,RF,DK> [goto BDAY\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0410.02.1 Variable: BDAY\_C Interview Module: Child Content Type: Annual Core

Question Text:

\* 2 of 3

\* Enter day of birth.

Response:

01-31	Range of values
97	Refused
99	Don't Know

Universe:

A person who is knowledgeable or responsible for the sample child's health is available or there is only one parent over 18 and no other adults in the child's family or there are more than two adults and one of them is a parent who was identified as available at AVAIL\_C AND date of birth was verified as incorrect fewer than 2 times and the Sample Child's spouse or partner is not the respondent

Skip Instructions:

<1-31,RF,DK> Only allow valid days for month entered. if days not valid [goto ERR\_BDAY\_C]  
else [goto BYEAR\_C]

Hard Edit:

Check Text	Check Description	Check Text
ERR_BDAY_C	Invalid day for selected month hard edit	{check }  ^BDAY_C is not a valid day for ^BMONTH_C.

2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0410.03.1 Variable: BYEAR\_C Interview Module: Child Content Type: Annual Core

Question Text:

- \* 3 of 3
- \* Enter year of birth.

Response:

Year	Year
9997	Refused
9999	Don't Know

Universe:

A person who is knowledgeable or responsible for the sample child's health is available or there is only one parent over 18 and no other adults in the child's family or there are more than two adults and one of them is a parent who was identified as available at AVAIL\_C AND date of birth was verified as incorrect fewer than 2 times and the Sample Child's spouse or partner is not the respondent

Skip Instructions:

```
<1900-current year,RF,DK>
if (BYEAR_C gt current year) or (BYEAR_C=current year and BMONTH_C gt current month) or
(BYEAR_C=current year and BMONTH_C=current month and BDAY_C gt current day) [goto ERR_BYEAR_C]

elseif BDAY_C=29 and BMONTH_C=2 and (BYEAR=2000 or BYEAR_C/4 remainder ne 0) [goto
ERR_BDAYLEAP_C]

elseif AGETEMP_C in (RF,DK) AND BYEAR_C in (RF,DK) [goto NOMORE_C]

elseif ((BYEAR_C not IN (RF,DK) and AGETEMP_C not IN (RF,DK) and AGETEMP_C ne AGE_CALC_C) AND
(AGETEMP_C not IN (RF,DK) and AGETEMP_C ne AGE_CALCMINUS1_C)) and DOB_COUNT_C ne 1 [goto
VFYDOB_C]

elseif (AGETEMP_C eq AGE_CALC_C or AGE_CALCMINUS1_C) or DOB_COUNT_C=1
  if AGE_FINAL ge 18 [goto NOMORE_C]
  else [goto next section]
```

Hard Edit:

Check Text	Check Description	Check Text
ERR_BDAYLEAP_C	Invalid day for selected month hard edit	{check }  ^BDAY_C is not a valid day for ^BMONTH_C.
ERR_BYEAR_C	Future date hard edit	{check }  Future date invalid.

**2024 National Health Interview Survey (NHIS) Questionnaire**

**VFY: Verification and demographic details**

**Question ID:** VFY.0430.00.1    **Variable:** VFYDOB\_C    **Interview Module:** Child    **Content Type:** Annual Core

**Question Text:**

There is a difference between the age the computer calculated from ^SCNAME's date of birth of ^AGEDOB\_C\_fill and the age I had previously recorded of ^TEMPAGE\_C.

I recorded ^SCNAME's ^dateofbirth\_C

**Fills:**

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
AGEDOB_C_fill	Description	Age(s) calculated from Date of Birth for SC
	Instruction	Fill one age calculated from AGE_CALC_C as "(age) year(s) old" Fill two ages calculated from AGE_CALC_C and AGE_CALCMINUS1_C as "(age) or (age) year(s) old" If AGE_CALC_C or AGE_CALCMINUS1_C is equal to 0, then display as "less than 1"
TEMPAGE_C	Description	{Value of AGETEMP_C} year(s) old/less than 1
	Instruction	fill value of AGETEMP_C as "(age) year(s) old" If AGETEMP_C is equal to 0, then display as "less than 1"
dateofbirth_C	Description	date of birth when any of BDAY_C, BMONTH_C or BYEAR_C are not valid
	Instruction	If BDAY_C, BMONTH_C and BYEAR_C are all valid, fill: "date of birth as ^BMONTH_C ^BDAY_C, ^BYEAR_C, is that correct?" If only BMONTH_C and BYEAR_C are valid, fill: "date of birth as ^BMONTH_C ^BYEAR_C, is that correct?" If only BDAY_C and BYEAR_C are valid, fill: "year of birth as ^BYEAR_C, is that correct?" If only BYEAR_C is valid, fill: "year of birth as ^BYEAR_C, is that correct?"
BMONTH_C	Description	{Value of BMONTH_C}
	Instruction	Fill value from Child.VFY.BMONTH_C
BDAY_C	Description	{Value of BDAY_C}
	Instruction	Fill value from Child.VFY.BDAY_C
BYEAR_C	Description	{Value of BYEAR_C}
	Instruction	Fill value from Child.VFY.BYEAR_C

**Response:**

1	Yes
2	No
7	Refused
9	Don't Know

**Universe:**

Sample Children whose age provided in either HHC or NEWAGE\_C does not match either age calculated from date of birth information and the Sample Child's spouse or partner is not the respondent

**Skip Instructions:**

```
<1,RF,DK> if GEN.AGE_FINAL[PX_C] ge 18 [goto NOMORE_C]  
else [goto next section]
```

```
<2> if DOB_COUNT_C le 1 [goto BMONTH_C]  
elseif GEN.AGE_FINAL[PX_C] ge 18 [goto NOMORE_C]  
else [goto next section]
```



2024 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0440.00.1 Variable: NOMORE\_C Interview Module: Child Content Type: Annual Core

Question Text:

\* ^SCNAME no longer meets the requirements to be sample child for this family. End this interview and begin the Sample Adult Interview. If there is no Sample Adult or the Sample Adult interview has been completed, EXIT

^auxNoMore

Not everyone in our survey is asked all questions. I have all the information that I need from you about ^SCNAME.

\* Enter '1' to continue.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
auxNoMore	Description	If there is still a knowledgeable respondent available, back up and select that person.
	Instruction	IF KNOAVAIL_Count = 0, fill "* If there is still a knowledgeable respondent available, back up and select that person."

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

Sample child whose age is now over 17 or whose age is refused or don't know or who lives off-campus or there is no knowledgeable sample child respondent

Skip Instructions:

If there is a callback set for Sample Adult [goto BCK.THANKS\_CB]  
else if GEN.OUTCOME IN 215 [goto BCK.THANKS\_INSUF]  
else [goto BCK.THANKS\_SUF]

2024 National Health Interview Survey (NHIS) Questionnaire

HIS: Health Status

Question ID: HIS.0010.00.1 Variable: PHSTAT\_C Interview Module: Child Content Type: Annual Core

Question Text:

Would you say ^SCNAME's health in general is excellent, very good, good, fair, or poor?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Excellent
2	Very Good
3	Good
4	Fair
5	Poor
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<1-5,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

AST: Asthma

Question ID: AST.0010.00.1 Variable: ASTINTRO\_C Interview Module: Child Content Type: Annual Core

Question Text:

Now I am going to ask you about certain medical conditions.

\* Enter '1' to continue.

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

Sample Children 0-17

Skip Instructions:

<1> [goto ASEV\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

AST: Asthma

Question ID: AST.0020.00.1 Variable: ASEV\_C Interview Module: Child Content Type: Annual Core

Question Text:

Has a doctor or other health professional EVER told you that ^SCNAME had asthma?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<1> [goto ASTILL\_C]  
<2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

AST: Asthma

Question ID: AST.0030.00.1 Variable: ASTILL\_C Interview Module: Child Content Type: Annual Core

Question Text:

Does ^SCNAME still have asthma?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who were ever told they have asthma

Skip Instructions:

<1,2,RF,DK> [goto ASAT12M\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

AST: Asthma

Question ID: AST.0040.00.1 Variable: ASAT12M\_C Interview Module: Child Content Type: Annual Core

Question Text:

During the past 12 months, has ^SCNAME had an episode of asthma or an asthma attack?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who were ever told they had asthma

Skip Instructions:

<1,2,RF,DK> [goto ASER12M\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

AST: Asthma

Question ID: AST.0050.00.1 Variable: ASER12M\_C Interview Module: Child Content Type: Annual Core

Question Text:

During the past 12 months, did ^SCNAME have to visit an emergency room or urgent care center because of ^hisher\_C asthma?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who were ever told they had asthma

Skip Instructions:

<1,2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

DIB: Diabetes

Question ID: DIB.0010.00.1 Variable: PREDIB\_C Interview Module: Child Content Type: Annual Core

Question Text:

Has a doctor or other health professional EVER told you that ^SCNAME had prediabetes or borderline diabetes?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample children 0-17

Skip Instructions:

<1,2,RF,DK> [goto DIBEV\_C]



2024 National Health Interview Survey (NHIS) Questionnaire

DIB: Diabetes

Question ID: DIB.0020.00.1 Variable: DIBEV\_C Interview Module: Child Content Type: Annual Core

Question Text:

^NOTPRED a doctor or other health professional EVER told you that ^SCNAME had diabetes?

Fills:

NOTPRED	Description	Not including prediabetes, has/Has
	Instruction	If PREDIB_C=1: "Not including prediabetes, has" If PREDIB_C IN ('2','DK','RF'): "Has"
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<1,2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

DLD: Developmental and Learning Disabilities

Question ID: DLD.0010.00.1 Variable: ADHDEV\_C Interview Module: Child Content Type: Annual Core

Question Text:

Has a doctor or other health professional ever told you that ^SCNAME had Attention-Deficit/Hyperactivity Disorder or ADHD or Attention-Deficit Disorder or ADD?

\* **Read if necessary:** *Health professionals can include school psychologists and school nurses.*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 2-17

Skip Instructions:

<1> [goto ADHDNW\_C]  
<2,RF,DK> [goto IDEV1\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

DLD: Developmental and Learning Disabilities

Question ID: DLD.0020.00.1 Variable: ADHDNW\_C Interview Module: Child Content Type: Annual Core

Question Text:

Does ^SCNAME currently have Attention-Deficit/Hyperactivity Disorder or ADHD or Attention-Deficit Disorder or ADD?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 2-17 who had an ADHD diagnosis

Skip Instructions:

<1,2,RF,DK> [goto IDEV1\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

DLD: Developmental and Learning Disabilities

Question ID: DLD.0030.00.1 Variable: IDEV1\_C Interview Module: Child Content Type: Annual Core

Question Text:

Has a doctor or other health professional ever told you that ^SCNAME had an intellectual disability, previously known as mental retardation?

\* **Read if necessary:** *Health professionals can include school psychologists and school nurses.*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<1> [goto IDNW1\_C]  
<2,RF,DK> [goto ASDEV\_C] if GEN.AGE\_FINAL[PX\_C] ge 2 and GEN.AGE\_FINAL[PX\_C] le 17, else [goto DDEV\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

DLD: Developmental and Learning Disabilities

Question ID: DLD.0040.00.1 Variable: IDNW1\_C Interview Module: Child Content Type: Annual Core

Question Text:

Does ^SCNAME currently have an intellectual disability, previously known as mental retardation?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who had an intellectual disability diagnosis

Skip Instructions:

<1,2,RF,DK> if GEN.AGE\_FINAL[PX\_C] ge 2 and GEN.AGE\_FINAL[PX\_C] le 17 [goto ASDEV\_C]  
else [goto DDEV\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

DLD: Developmental and Learning Disabilities

Question ID: DLD.0050.00.1 Variable: ASDEV\_C Interview Module: Child Content Type: Annual Core

Question Text:

Has a doctor or other health professional ever told you that ^SCNAME had Autism, Asperger's disorder, pervasive developmental disorder, or autism spectrum disorder?

\* **Read if necessary:** *Health professionals can include school psychologists and school nurses.*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 2-17

Skip Instructions:

<1> [goto ASDNW\_C]  
<2,RF,DK> [goto DDEV\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

DLD: Developmental and Learning Disabilities

Question ID: DLD.0060.00.1 Variable: ASDNW\_C Interview Module: Child Content Type: Annual Core

Question Text:

Does ^SCNAME currently have Autism, Asperger's disorder, pervasive developmental disorder, or autism spectrum disorder?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 2-17 who had an autism spectrum disorder diagnosis

Skip Instructions:

<1,2,RF,DK> [goto DDEV\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

DLD: Developmental and Learning Disabilities

Question ID: DLD.0070.00.1 Variable: DDEV\_C Interview Module: Child Content Type: Annual Core

Question Text:

^NOTEVER a doctor or other health professional ever told you that ^SCNAME had any other developmental delay?

\* **Read if necessary:** *Health professionals can include school psychologists and school nurses.*

\* **Read if necessary:** *Developmental delays are significant delays in a child's development. Examples include cognitive, motor, speech, social, emotional and behavioral delays.*

Fills:

NOTEVER	Description	Has/Not including (ADHD, intellectual disability, autism spectrum disorder), has
	Instruction	If ADHDEV_C ne 1 AND IDEV1_C ne 1 and ASDEV_C ne 1 fill: "Has" If ADHDEV_C=1 AND IDEV1_C ne 1 and ASDEV_C ne 1 fill: "Not including ADHD, has" If ADHDEV_C ne 1 AND IDEV1_C=1 and ASDEV_C ne 1 fill: "Not including an intellectual disability, has" If ADHDEV_C ne 1 AND IDEV1_C ne 1 and ASDEV_C=1 fill: "Not including autism spectrum disorder, has" If ADHDEV_C=1 AND IDEV1_C=1 and ASDEV_C ne fill: "Not including ADHD or an intellectual disability, has" If ADHDEV_C=1 AND IDEV1_C ne 1 and ASDEV_C=1 fill: "Not including ADHD or autism spectrum disorder, has" If ADHDEV_C ne 1 AND IDEV1_C=1 and ASDEV_C=1 fill: "Not including an intellectual disability or autism spectrum disorder, has" If ADHDEV_C=1 AND IDEV1_C=1 and ASDEV_C=1 fill: "Not including ADHD, an intellectual disability or autism spectrum disorder, has"
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<1> [goto DDNW\_C]  
<2,RF,DK> if GEN.AGE\_FINAL[PX\_C] ge 2 and GEN.AGE\_FINAL[PX\_C] le 17 [goto LDEV\_C]  
else [goto next section]



2024 National Health Interview Survey (NHIS) Questionnaire

DLD: Developmental and Learning Disabilities

Question ID: DLD.0080.00.1 Variable: DDNW\_C Interview Module: Child Content Type: Annual Core

Question Text:

Does ^SCNAME still have this other developmental delay?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who had any other developmental delay diagnosis

Skip Instructions:

<1,2,RF,DK> if GEN.AGE\_FINAL[PX\_C] ge 2 and GEN.AGE\_FINAL[PX\_C] le 17 [goto LDEV\_C]  
else [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

DLD: Developmental and Learning Disabilities

Question ID: DLD.0090.00.1 Variable: LDEV\_C Interview Module: Child Content Type: Annual Core

Question Text:

Has a representative from a school or a health professional ever told you that ^SCNAME had a learning disability?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 2-17

Skip Instructions:

<1> [goto LDNW\_C]  
<2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

DLD: Developmental and Learning Disabilities

Question ID: DLD.0100.00.1 Variable: LDNW\_C Interview Module: Child Content Type: Annual Core

Question Text:

Does ^SCNAME currently have a learning disability?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 2-17 who had a learning disability diagnosis

Skip Instructions:

<1,2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

ALG: Allergies

Question ID: ALG.0010.00.2 Variable: ALGINTRO\_C Interview Module: Child Content Type: Rotating Core

Question Text:

The next set of questions are about different types of allergies.

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

Sample Children 0-17

Skip Instructions:

<1> [goto CURRESP\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

ALG: Allergies

Question ID: ALG.0020.00.2 Variable: CURRESP\_C Interview Module: Child Content Type: Rotating Core

Question Text:

Does ^SCNAME get symptoms such as sneezing, runny nose, or itchy or watery eyes due to hay fever, seasonal or year-round allergies?

\* **Read if necessary:** Hay fever, seasonal or year-round allergies may also be known as environmental allergies, allergic rhinitis or allergic conjunctivitis.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<1> [goto DXRESP\_C]  
<2,RF,DK> [goto CURFOOD\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

ALG: Allergies

Question ID: ALG.0030.00.2 Variable: DXRESP\_C Interview Module: Child Content Type: Rotating Core

Question Text:

Have you ever been told by a doctor or other health professional that ^SCNAME had hay fever, seasonal or year-round allergies?

\* **Read if necessary:** Hay fever, seasonal or year-round allergies may also be known as environmental allergies, allergic rhinitis or allergic conjunctivitis.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with a current respiratory allergy

Skip Instructions:

<1,2,RF,DK> [goto CURFOOD\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

ALG: Allergies

Question ID: ALG.0040.00.2 Variable: CURFOOD\_C Interview Module: Child Content Type: Rotating Core

Question Text:

The next question is about food allergies. People with food allergies have reactions such as hives, vomiting, trouble breathing, or throat tightening that occur within two hours of eating a specific food.

Does ^SCNAME have an allergy to one or more foods?

\* **Read if necessary:** *Food allergies are different from food intolerances, such as lactose and gluten intolerance, and other digestive disorders, including irritable bowel syndrome.*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<1> [goto DXFOOD\_C]  
<2,RF,DK> [goto CURSKIN\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

ALG: Allergies

Question ID: ALG.0050.00.2 Variable: DXFOOD\_C Interview Module: Child Content Type: Rotating Core

Question Text:

Have you ever been told by a doctor or other health professional that ^SCNAME had an allergy to one or more foods?

\* **Read if necessary:** *Food allergies are different from food intolerances, such as lactose and gluten intolerance, and other digestive disorders, including irritable bowel syndrome.*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with a current food allergy

Skip Instructions:

<1,2,RF,DK> [goto CURSKIN\_C]



2024 National Health Interview Survey (NHIS) Questionnaire

ALG: Allergies

Question ID: ALG.0060.00.2 Variable: CURSKIN\_C Interview Module: Child Content Type: Rotating Core

Question Text:

The next question is about an allergic skin condition. Does ^SCNAME get an itchy rash due to eczema or atopic dermatitis?

\* **Read if necessary:** *The rash can be dry, scaly, bumpy, or crusty and lasts for several days or longer without treatment. Eczema is different from hives which come and go in a few hours.*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<1> [goto DXSKIN\_C]  
<2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

ALG: Allergies

Question ID: ALG.0070.00.2 Variable: DXSKIN\_C Interview Module: Child Content Type: Rotating Core

Question Text:

Have you ever been told by a doctor or other health professional that ^SCNAME had eczema or atopic dermatitis?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with a current skin allergy

Skip Instructions:

<1,2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

TSH: Taste and Smell Health Conditions

Question ID: TSH.0010.00.3 Variable: COLDFLU12M\_C Interview Module: Child Content Type: Sponsored Content

Question Text:

During the past 12 months, has ^SCNAME had a head cold or flu for longer than a month?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample children 6-17

Skip Instructions:

<1,2,RF,DK> [goto DRYMTH12M\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

TSH: Taste and Smell Health Conditions

Question ID: TSH.0020.00.3 Variable: DRYMTH12M\_C Interview Module: Child Content Type: Sponsored Content

Question Text:

During the past 12 months, has ^SCNAME had persistent dry mouth?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample children 6-17

Skip Instructions:

<1,2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

BMI: Height and Weight

Question ID: BMI.0010.01.2 Variable: HEIGHTFT\_C Interview Module: Child Content Type: Rotating Core

Question Text:

How tall is ^SCNAME without shoes?

\* Enter feet.

\* If the child's height is given in inches, press '0' at feet and enter the measure in inches (36 inches maximum).

\* Enter 'M' to record metric measurements.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

00	0 feet
01	1 foot
02	2 feet
03	3 feet
04	4 feet
05	5 feet
06	6 feet
07	7 feet
M	Answered in Metric
97	Refused
99	Don't Know

Universe:

Sample Children 10-17

Skip Instructions:

```
if HEIGHTFT_C ne <0-7,RF,DK,M> [goto ERR1_HEIGHTFT_C]
<0-7> [goto HEIGHTIN_C]
<RF,DK> [goto WEIGHTLB_C]
<M> [goto HEIGHTM_C]
```

Hard Edit:

Check Text	Check Description	Check Text
ERR1_HEIGHTFT_C	Hard edit for height in feet	{check }  Only 0-7, Don't know/Refused, or M allowed in this field.  Please correct.

2024 National Health Interview Survey (NHIS) Questionnaire

BMI: Height and Weight

Question ID: BMI.0010.02.2 Variable: HEIGHTIN\_C Interview Module: Child Content Type: Rotating Core

Question Text:

- \* Enter inches.
- \* Enter '0' if exactly ^HEIGHTFT\_C feet tall.

Fills:

HEIGHTFT_C	Description	{Value of HEIGHTFT_C}
	Instruction	fill value from HEIGHTFT_C

Response:

00	0 inches
01	1 inch
02	2 inches
03	3 inches
04	4 inches
05	5 inches
06	6 inches
07	7 inches
08	8 inches
09	9 inches
10	10 inches
11	11 inches
97	Refused
99	Don't Know

Universe:

Sample Children 10-17 whose height in feet is 0-7

Skip Instructions:

```
If (HEIGHTFT_C=0) and (HEIGHTIN_C=0) [goto ERR1_HEIGHTIN_C]
elseif HEIGHTFT_C=1-7 and HEIGHTIN_C ge 12 [goto ERR2_HEIGHTIN_C]
elseif (GEN.SEX_FINAL=1 and
(GEN.AGE_FINAL=010 and (CHTINCH_C lt 50 or CHTINCH_C gt 60)) or
(GEN.AGE_FINAL=011 and (CHTINCH_C lt 52 or CHTINCH_C gt 62)) or
(GEN.AGE_FINAL=012 and (CHTINCH_C lt 53 or CHTINCH_C gt 64)) or
(GEN.AGE_FINAL=013 and (CHTINCH_C lt 56 or CHTINCH_C gt 67)) or
(GEN.AGE_FINAL=014 and (CHTINCH_C lt 58 or CHTINCH_C gt 70)) or
(GEN.AGE_FINAL=015 and (CHTINCH_C lt 61 or CHTINCH_C gt 72)) or
(GEN.AGE_FINAL=016 and (CHTINCH_C lt 63 or CHTINCH_C gt 74)) or
(GEN.AGE_FINAL=017 and (CHTINCH_C lt 63 or CHTINCH_C gt 74))) or
(GEN.SEX_FINAL=2 and
(GEN.AGE_FINAL=010 and (CHTINCH_C lt 50 or CHTINCH_C gt 60)) or
(GEN.AGE_FINAL=011 and (CHTINCH_C lt 51 or CHTINCH_C gt 62)) or
(GEN.AGE_FINAL=012 and (CHTINCH_C lt 54 or CHTINCH_C gt 65)) or
(GEN.AGE_FINAL=013 and (CHTINCH_C lt 57 or CHTINCH_C gt 67)) or
(GEN.AGE_FINAL=014 and (CHTINCH_C lt 58 or CHTINCH_C gt 68)) or
(GEN.AGE_FINAL=015 and (CHTINCH_C lt 59 or CHTINCH_C gt 69)) or
(GEN.AGE_FINAL=016 and (CHTINCH_C lt 59 or CHTINCH_C gt 69)) or
(GEN.AGE_FINAL=017 and (CHTINCH_C lt 59 or CHTINCH_C gt 69))) [goto ERR3_HEIGHTIN_C]
else <0-36,RF,DK> [goto WEIGHTLB_C]
```

**Hard Edit:**

Check Text	Check Description	Check Text
ERR1_HEIGHTIN_C	Hard edit for height in inches	{check }  Must enter an answer in at least the inches item.  Please correct.
ERR2_HEIGHTIN_C	Hard edit for height in inches	{check }  Number of inches exceeds maximum allowed.  Please correct.

**Soft Edit:**

Check Text	Check Description	Check Text
ERR3_HEIGHTIN_C	Soft edit for height in inches	{signal }  Please verify that the height was entered correctly. Probe only if necessary.

2024 National Health Interview Survey (NHIS) Questionnaire

BMI: Height and Weight

Question ID: BMI.0010.04.2 Variable: HEIGHTM\_C Interview Module: Child Content Type: Rotating Core

Question Text:

How tall is ^SCNAME without shoes?

\* Enter height in metric.

\* If the child's height is given in centimeters, press '0' at meters and enter the measure in centimeters (241 centimeters maximum).

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

0	0 meters
1	1 meter
2	2 meters
7	Refused
9	Don't Know

Universe:

Sample Children 10-17 whose current height will be entered in metric

Skip Instructions:

<0-2> [goto HEIGHTCM\_C]  
<RF,DK> [goto WEIGHTLB\_C]



2024 National Health Interview Survey (NHIS) Questionnaire

BMI: Height and Weight

Question ID: BMI.0010.05.2 Variable: HEIGHTCM\_C Interview Module: Child Content Type: Rotating Core

Question Text:

\* Enter height in centimeters.

Response:

000-241	Range of values
997	Refused
999	Don't Know

Universe:

Sample Children 10-17 whose height will be entered in metric, and who entered 0-2 for height in meters

Skip Instructions:

```
If (HEIGHTM_C IN (0)) and (HEIGHTCM_C IN (0)) [goto ERR1_HEIGHTCM_C]
elseif (HEIGHTM_C=2 and HEIGHTCM_C gt 41) or (HEIGHTM_C=1 and HEIGHTCM_C gt 141) [goto
ERR2_HEIGHTCM_C]
elseif (GEN.SEX_FINAL=1 and
(GEN.AGE_FINAL=010 and (CHTCM_C lt 127 or CHTCM_C gt 152)) or
(GEN.AGE_FINAL=011 and (CHTCM_C lt 131 or CHTCM_C gt 157)) or
(GEN.AGE_FINAL=012 and (CHTCM_C lt 136 or CHTCM_C gt 164)) or
(GEN.AGE_FINAL=013 and (CHTCM_C lt 142 or CHTCM_C gt 171)) or
(GEN.AGE_FINAL=014 and (CHTCM_C lt 149 or CHTCM_C gt 179)) or
(GEN.AGE_FINAL=015 and (CHTCM_C lt 155 or CHTCM_C gt 184)) or
(GEN.AGE_FINAL=016 and (CHTCM_C lt 159 or CHTCM_C gt 187)) or
(GEN.AGE_FINAL=017 and (CHTCM_C lt 161 or CHTCM_C gt 189))) or
(GEN.SEX_FINAL=2 and
(GEN.AGE_FINAL=010 and (CHTCM_C lt 126 or CHTCM_C gt 151)) or
(GEN.AGE_FINAL=011 and (CHTCM_C lt 131 or CHTCM_C gt 158)) or
(GEN.AGE_FINAL=012 and (CHTCM_C lt 137 or CHTCM_C gt 165)) or
(GEN.AGE_FINAL=013 and (CHTCM_C lt 144 or CHTCM_C gt 170)) or
(GEN.AGE_FINAL=014 and (CHTCM_C lt 148 or CHTCM_C gt 173)) or
(GEN.AGE_FINAL=015 and (CHTCM_C lt 150 or CHTCM_C gt 174)) or
(GEN.AGE_FINAL=016 and (CHTCM_C lt 150 or CHTCM_C gt 175)) or
(GEN.AGE_FINAL=017 and (CHTCM_C lt 151 or CHTCM_C gt 175))) [goto ERR3_HEIGHTCM_C]
<0-241,RK,DK> [goto WEIGHTLB_C]
```

Hard Edit:

Check Text	Check Description	Check Text
ERR1_HEIGHTCM_C	Hard edit for height in centimeters	{check }  Must enter an answer at least in centimeters item.  Please correct.
ERR2_HEIGHTCM_C	Hard edit for height in centimeters	{check }  Total height exceeds maximum allowed.  Please correct.

**Soft Edit:**

Check Text	Check Description	Check Text
ERR3_HEIGHTCM_C	Soft edit for height in centimeters	{signal }  Please verify that the height was entered correctly. Probe only if necessary.

2024 National Health Interview Survey (NHIS) Questionnaire

BMI: Height and Weight

Question ID: BMI.0020.01.2 Variable: WEIGHTLB\_C Interview Module: Child Content Type: Rotating Core

Question Text:

How much does ^SCNAME weigh now?

\* Enter 'M' to record metric measurements.

\* Enter '500' if 500 pounds or more.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

001-500	Range of values
M	Answered in Metric
997	Refused
999	Don't Know

Universe:

Sample Children 10-17

Skip Instructions:

```

if WEIGHTLB_C lt 1 or WEIGHTLB_C gt 500 [goto ERR1_WEIGHTLB_C]
elseif (GEN.SEX_FINAL=1 and
(GEN.AGE_FINAL=010 and (WEIGHTLB_C lt 53 or WEIGHTLB_C gt 109)) or
(GEN.AGE_FINAL=011 and (WEIGHTLB_C lt 59 or WEIGHTLB_C gt 124)) or
(GEN.AGE_FINAL=012 and (WEIGHTLB_C lt 65 or WEIGHTLB_C gt 140)) or
(GEN.AGE_FINAL=013 and (WEIGHTLB_C lt 73 or WEIGHTLB_C gt 155)) or
(GEN.AGE_FINAL=014 and (WEIGHTLB_C lt 82 or WEIGHTLB_C gt 170)) or
(GEN.AGE_FINAL=015 and (WEIGHTLB_C lt 92 or WEIGHTLB_C gt 184)) or
(GEN.AGE_FINAL=016 and (WEIGHTLB_C lt 101 or WEIGHTLB_C gt 196)) or
(GEN.AGE_FINAL=017 and (WEIGHTLB_C lt 109 or WEIGHTLB_C gt 207))) or
(GEN.SEX_FINAL=2 and
(GEN.AGE_FINAL=010 and (WEIGHTLB_C lt 53 or WEIGHTLB_C gt 113)) or
(GEN.AGE_FINAL=011 and (WEIGHTLB_C lt 59 or WEIGHTLB_C gt 129)) or
(GEN.AGE_FINAL=012 and (WEIGHTLB_C lt 66 or WEIGHTLB_C gt 145)) or
(GEN.AGE_FINAL=013 and (WEIGHTLB_C lt 74 or WEIGHTLB_C gt 160)) or
(GEN.AGE_FINAL=014 and (WEIGHTLB_C lt 81 or WEIGHTLB_C gt 171)) or
(GEN.AGE_FINAL=015 and (WEIGHTLB_C lt 87 or WEIGHTLB_C gt 180)) or
(GEN.AGE_FINAL=016 and (WEIGHTLB_C lt 92 or WEIGHTLB_C gt 186)) or
(GEN.AGE_FINAL=017 and (WEIGHTLB_C lt 96 or WEIGHTLB_C gt 190))) [goto ERR2_WEIGHTLB_C]
<1-500,RF,DK> [goto next section]
<M> [goto WEIGHTKG_C]
    
```

Hard Edit:

Check Text	Check Description	Check Text
ERR1_WEIGHTLB_C	Hard error for weight in pounds	{check }  Weight is out of range (1-500).  Please correct.

**Soft Edit:**

Check Text	Check Description	Check Text
ERR2_WEIGHTLB_C	Soft edit for weight in pounds	{signal }  Please verify that the weight was entered correctly. Probe only if necessary.

2024 National Health Interview Survey (NHIS) Questionnaire

BMI: Height and Weight

Question ID: BMI.0020.02.2 Variable: WEIGHTKG\_C Interview Module: Child Content Type: Rotating Core

Question Text:

How much does ^SCNAME weigh now?

\* Enter weight in kilograms.

\* Enter '226' if 226 kilograms or more.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

001-226	Range of values
997	Refused
999	Don't Know

Universe:

Sample Children 10-17 whose weight will be entered in metric

Skip Instructions:

```
if WEIGHTKG_C lt 1 or WEIGHTKG_C gt 226 [goto ERR1_WEIGHTKG_C]
elseif (GEN.SEX_FINAL=1 and
(GEN.AGE_FINAL=010 and (WEIGHTKG_C lt 24 or WEIGHTKG_C gt 49)) or
(GEN.AGE_FINAL=011 and (WEIGHTKG_C lt 27 or WEIGHTKG_C gt 56)) or
(GEN.AGE_FINAL=012 and (WEIGHTKG_C lt 29 or WEIGHTKG_C gt 63)) or
(GEN.AGE_FINAL=013 and (WEIGHTKG_C lt 33 or WEIGHTKG_C gt 70)) or
(GEN.AGE_FINAL=014 and (WEIGHTKG_C lt 37 or WEIGHTKG_C gt 77)) or
(GEN.AGE_FINAL=015 and (WEIGHTKG_C lt 42 or WEIGHTKG_C gt 83)) or
(GEN.AGE_FINAL=016 and (WEIGHTKG_C lt 46 or WEIGHTKG_C gt 89)) or
(GEN.AGE_FINAL=017 and (WEIGHTKG_C lt 49 or WEIGHTKG_C gt 94))) or
(GEN.SEX_FINAL=2 and
(GEN.AGE_FINAL=010 and (WEIGHTKG_C lt 24 or WEIGHTKG_C gt 51)) or
(GEN.AGE_FINAL=011 and (WEIGHTKG_C lt 27 or WEIGHTKG_C gt 59)) or
(GEN.AGE_FINAL=012 and (WEIGHTKG_C lt 30 or WEIGHTKG_C gt 66)) or
(GEN.AGE_FINAL=013 and (WEIGHTKG_C lt 33 or WEIGHTKG_C gt 72)) or
(GEN.AGE_FINAL=014 and (WEIGHTKG_C lt 37 or WEIGHTKG_C gt 78)) or
(GEN.AGE_FINAL=015 and (WEIGHTKG_C lt 40 or WEIGHTKG_C gt 82)) or
(GEN.AGE_FINAL=016 and (WEIGHTKG_C lt 42 or WEIGHTKG_C gt 84)) or
(GEN.AGE_FINAL=017 and (WEIGHTKG_C lt 43 or WEIGHTKG_C gt 86))) [goto ERR2_WEIGHTKG_C]
<1-226,RF,DK> [goto next section]
```

Hard Edit:

Check Text	Check Description	Check Text
ERR1_WEIGHTKG_C	Hard edit for weight in kilograms	{check }  Weight is out of range (1-226).  Please correct.

**Soft Edit:**

Check Text	Check Description	Check Text
ERR2_WEIGHTKG_C	Soft edit for weight in kilograms	{signal }  Please verify that the weight was entered correctly. Probe only if necessary.

2024 National Health Interview Survey (NHIS) Questionnaire

VIS: Vision

Question ID: VIS.0010.00.1 Variable: VISINTRO\_C Interview Module: Child Content Type: Annual Core

Question Text:

I would like to ask you some questions about difficulties ^SCNAME may have.

\* Enter '1' to continue.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

Sample Children 2-17

Skip Instructions:

<1> [goto WEARGLSS\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

VIS: Vision

Question ID: VIS.0020.00.1 Variable: WEARGLSS\_C Interview Module: Child Content Type: Annual Core

Question Text:

Does ^SCNAME wear glasses ^CONTACTS?

\* **Read if necessary:** *Persons who wear glasses to read or to do other occasional tasks should answer yes to this question.*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
CONTACTS	Description	or contact lenses
	Instruction	If AGE=5-17 fill "or contact lenses"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 2-17

Skip Instructions:

<1,2,RF,DK> [goto VISIONDF\_C]



2024 National Health Interview Survey (NHIS) Questionnaire

VIS: Vision

Question ID: VIS.0030.00.1 Variable: VISIONDF\_C Interview Module: Child Content Type: Annual Core

Question Text:

^GLASSCONTACT ^SCNAME have difficulty seeing? Would you say ^SCNAME has: no difficulty, some difficulty, a lot of difficulty, or ^heshe\_C cannot do this at all?

Fills:

GLASSCONTACT	Description	When wearing glasses ^CONTACTS does/Does
	Instruction	If WEARGLSS_C=1 fill "When wearing glasses ^CONTACTS does" else if WEARGLSS_C ne 1 "Does"
CONTACTS	Description	or contact lenses
	Instruction	If AGE=5-17 fill "or contact lenses"
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Children 2-17

Skip Instructions:

<1-4,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

HEA: Hearing

Question ID: HEA.0010.00.1 Variable: HEARAID\_C Interview Module: Child Content Type: Annual Core

Question Text:

Does ^SCNAME use a hearing aid?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 2-17

Skip Instructions:

<1,2,RF,DK> [goto HEARINGDF\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

HEA: Hearing

Question ID: HEA.0020.00.1 Variable: HEARINGDF\_C Interview Module: Child Content Type: Annual Core

Question Text:

^USEHRAID\_C ^SCNAME have difficulty hearing sounds like people's voices or music? Would you say ^SCNAME has: no difficulty, some difficulty, a lot of difficulty, or ^heshe\_C cannot do this at all?

Fills:

USEHRAID_C	Description	When using ^hisher_C hearing aid(s) does/Does
	Instruction	If HEARAID_C=1 fill "When using ^hisher_C hearing aid(s) does " else fill "Does "
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Children 2-17

Skip Instructions:

<1-4,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

MOB: Mobility

Question ID: MOB.0010.00.1 Variable: EQUIP\_C Interview Module: Child Content Type: Annual Core

Question Text:

Does ^SCNAME use any equipment or receive assistance for walking?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 2-17

Skip Instructions:

```
<1> if GEN.AGE_FINAL[PX_C]=2-4 [goto NOEQWLKDF_C]
else if GEN.AGE_FINAL[PX_C] ge 5 [goto NOEQWLK100_C]
<2,RF,DK> if GEN.AGE_FINAL[PX_C]=2-4 [goto WLKDF_C]
else if GEN.AGE_FINAL[PX_C] ge 5 [goto WLK100_C]
```

2024 National Health Interview Survey (NHIS) Questionnaire

MOB: Mobility

Question ID: MOB.0020.00.1 Variable: NOEQWLKDF\_C Interview Module: Child Content Type: Annual Core

Question Text:

Without using ^hisher\_C equipment or assistance, does ^SCNAME have difficulty walking? Would you say ^SCNAME has: no difficulty, some difficulty, a lot of difficulty, or ^heshe\_C cannot do this at all?

Fills:

hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Children 2-4 who use equipment or assistance for walking

Skip Instructions:

<1-4,RF,DK> [goto EQWLKDF\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

MOB: Mobility

Question ID: MOB.0030.00.1 Variable: EQWLKDF\_C Interview Module: Child Content Type: Annual Core

Question Text:

When using ^hisher\_C equipment or assistance, does ^SCNAME have difficulty walking?

*\*Read if necessary: Would you say ^SCNAME has: no difficulty, some difficulty, a lot of difficulty, or ^heshe\_C cannot do this at all?*

Fills:

hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Children 2-4 who use equipment or assistance for walking

Skip Instructions:

<1-4,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

MOB: Mobility

Question ID: MOB.0040.00.1 Variable: WLKDF\_C Interview Module: Child Content Type: Annual Core

Question Text:

Compared with children of the same age, does ^SCNAME have difficulty walking? Would you say ^SCNAME has: no difficulty, some difficulty, a lot of difficulty, or ^heshe\_C cannot do this at all?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Children 2-4 who do not use equipment or assistance for walking or Refused or Don't Know

Skip Instructions:

<1-4,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

MOB: Mobility

Question ID: MOB.0050.00.1 Variable: NOEQWLK100\_C Interview Module: Child Content Type: Annual Core

Question Text:

WITHOUT USING ^hisher\_C equipment or assistance, does ^SCNAME have difficulty walking 100 yards on level ground? That would be about the length of 1 football field or 1 city block. Would you say ^SCNAME has: no difficulty, some difficulty, a lot of difficulty, or ^heshe\_C cannot do this at all?

Fills:

hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Children 5-17 who use equipment or assistance for walking

Skip Instructions:

<1-3,RF,DK> [goto NOEQWLK13M\_C]  
<4> [goto EQWLK100\_C]



2024 National Health Interview Survey (NHIS) Questionnaire

MOB: Mobility

Question ID: MOB.0060.00.1 Variable: NOEQWLK13M\_C Interview Module: Child Content Type: Annual Core

Question Text:

WITHOUT USING ^hisher\_C equipment or assistance, does ^SCNAME have difficulty walking a third of a mile on level ground? That would be about the length of 5 football fields or 5 city blocks.

*\*Read if necessary: Would you say ^SCNAME has: no difficulty, some difficulty, a lot of difficulty, or ^heshe\_C cannot do this at all?*

Fills:

hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Children 5-17 who use equipment or assistance for walking and have no, some or a lot difficulty walking 100 yards when not using their equipment/assistance or Refused or Don't Know

Skip Instructions:

<1-4,RF,DK> [goto EQWLK100\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

MOB: Mobility

Question ID: MOB.0070.00.1 Variable: EQWLK100\_C Interview Module: Child Content Type: Annual Core

Question Text:

WHEN USING ^hisher\_C equipment or assistance, does ^SCNAME have difficulty walking 100 yards on level ground? That would be about the length of 1 football field or 1 city block.

*\*Read if necessary: Would you say ^SCNAME has: no difficulty, some difficulty, a lot of difficulty, or ^heshe\_C cannot do this at all?*

Fills:

hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Children 5-17 who use equipment or assistance for walking.

Skip Instructions:

<1-3,RF,DK> [goto EQWLK13M\_C]  
<4> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

MOB: Mobility

Question ID: MOB.0080.00.1 Variable: EQWLK13M\_C Interview Module: Child Content Type: Annual Core

Question Text:

WHEN USING ^hisher\_C equipment or assistance, does ^SCNAME have difficulty walking a third of a mile on level ground? That would be about the length of 5 football fields or 5 city blocks.

*\*Read if necessary: Would you say ^SCNAME has: no difficulty, some difficulty, a lot of difficulty, or ^heshe\_C cannot do this at all?*

Fills:

hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Children 5-17 who use equipment or assistance for walking and have no, some or a lot of difficulty walking 100 yards when using their equipment/assistance or Refused or Don't Know

Skip Instructions:

<1-4,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

MOB: Mobility

Question ID: MOB.0090.00.1 Variable: WLK100\_C Interview Module: Child Content Type: Annual Core

Question Text:

Compared with children of the same age, does ^SCNAME have difficulty walking 100 yards on level ground? That would be about the length of 1 football field or 1 city block. Would you say ^SCNAME has: no difficulty, some difficulty, a lot of difficulty, or ^heshe\_C cannot do this at all?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Children 5-17 who do not use equipment or assistance for walking or Refused or Don't Know

Skip Instructions:

<1-3,RF,DK> [goto WLK13M\_C]  
<4> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

MOB: Mobility

Question ID: MOB.0100.00.1 Variable: WLK13M\_C Interview Module: Child Content Type: Annual Core

Question Text:

Compared with children of the same age, does ^SCNAME have difficulty walking a third of a mile on level ground? That would be about the length of 5 football fields or 5 city blocks.

*\*Read if necessary: Would you say ^SCNAME has: no difficulty, some difficulty, a lot of difficulty, or ^heshe\_C cannot do this at all?*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Children 5-17 who do not use equipment or assistance for walking and have no difficulty, some difficulty, or a lot of difficulty walking 100 yards or Refused or Don't Know

Skip Instructions:

<1-4,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

UPP: Upper Body, Motor skills and self care

Question ID: UPP.0010.00.1 Variable: PICKUPDF\_C Interview Module: Child Content Type: Annual Core

Question Text:

Compared with children of the same age, does ^SCNAME have difficulty picking up small objects with ^hisher\_C hands?

*\*Read if necessary: Would you say ^SCNAME has: no difficulty, some difficulty, a lot of difficulty, or ^heshe\_C cannot do this at all?*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Children 2-4

Skip Instructions:

<1-4,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

UPP: Upper Body, Motor skills and self care

Question ID: UPP.0020.00.1 Variable: SELFCAREDF\_C Interview Module: Child Content Type: Annual Core

Question Text:

Does ^SCNAME have difficulty with self care, such as eating or dressing?

*\*Read if necessary: Would you say ^SCNAME has: no difficulty, some difficulty, a lot of difficulty, or ^heshe\_C cannot do this at all?*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Children 5-17

Skip Instructions:

<1-4,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

COM: Communication

Question ID: COM.0010.00.1 Variable: UNDRSTYOU\_C Interview Module: Child Content Type: Annual Core

Question Text:

Does ^SCNAME have difficulty understanding you?

*\*Read if necessary: Would you say ^SCNAME has: no difficulty, some difficulty, a lot of difficulty, or ^heshe\_C cannot do this at all?*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Children 2-4

Skip Instructions:

<1-4,RF,DK> [goto UNDRSTCHD\_C]



2024 National Health Interview Survey (NHIS) Questionnaire

COM: Communication

Question ID: COM.0020.00.1 Variable: UNDRSTCHD\_C Interview Module: Child Content Type: Annual Core

Question Text:

When ^SCNAME speaks, do you have difficulty understanding ^himherthem\_C?

*\*Read if necessary: Would you say ^SCNAME has: no difficulty, some difficulty, a lot of difficulty, or ^heshe\_C cannot do this at all?*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
himherthem_C	Description	him/her/them
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "him"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "them"
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Children 2-4

Skip Instructions:

<1-4,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

COM: Communication

Question ID: COM.0030.00.1 Variable: UNDRSTIHH\_C Interview Module: Child Content Type: Annual Core

Question Text:

When ^SCNAME speaks, ^doesheshedothey\_C have difficulty being understood by people inside of this household?

*\*Read if necessary: Would you say ^SCNAME has: no difficulty, some difficulty, a lot of difficulty, or ^heshe\_C cannot do this at all?*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
doesheshedothey_C	Description	does he/does she/do they
	Instruction	If SEX=1 fill: "does he" If SEX=2 fill: "does she" If SEX IN ('RF','DK') fill: "do they"
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Children 5-17

Skip Instructions:

<1-4,RF,DK> [goto UNDRSTOHH\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

COM: Communication

Question ID: COM.0040.00.1 Variable: UNDRSTOHH\_C Interview Module: Child Content Type: Annual Core

Question Text:

When ^SCNAME speaks, ^doesheshedothey\_C have difficulty being understood by people outside of this household?

*\*Read if necessary: Would you say ^SCNAME has: no difficulty, some difficulty, a lot of difficulty, or ^heshe\_C cannot do this at all?*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
doesheshedothey_C	Description	does he/does she/do they
	Instruction	If SEX=1 fill: "does he" If SEX=2 fill: "does she" If SEX IN ('RF','DK') fill: "do they"
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Children 5-17

Skip Instructions:

<1-4,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

COG: Cognition

Question ID: COG.0010.00.1 Variable: LEARNDF\_C Interview Module: Child Content Type: Annual Core

Question Text:

Compared with children of the same age, does ^SCNAME have difficulty learning things?

*\*Read if necessary: Would you say ^SCNAME has: no difficulty, some difficulty, a lot of difficulty, or ^heshe\_C cannot do this at all?*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Children 2-17

Skip Instructions:

<1-4,RF,DK> [goto REMEMBERDF\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

COG: Cognition

Question ID: COG.0020.00.1 Variable: REMEMBERDF\_C Interview Module: Child Content Type: Annual Core

Question Text:

Compared with children of the same age, does ^SCNAME have difficulty remembering things?

*\*Read if necessary: Would you say ^SCNAME has: no difficulty, some difficulty, a lot of difficulty, or ^heshe\_C cannot do this at all?*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Children 5-17

Skip Instructions:

<1-4,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

ANX: Anxiety

Question ID: ANX.0010.00.1 Variable: ANXFREQ\_C Interview Module: Child Content Type: Annual Core

Question Text:

How often does ^SCNAME seem very anxious, nervous, or worried? Would you say: daily, weekly, monthly, a few times a year, or never?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Daily
2	Weekly
3	Monthly
4	A few times a year
5	Never
7	Refused
9	Don't Know

Universe:

Sample Children 5-17

Skip Instructions:

<1-5,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

DEP: Depression

Question ID: DEP.0010.00.1 Variable: DEPFREQ\_C Interview Module: Child Content Type: Annual Core

Question Text:

How often does ^SCNAME seem very sad or depressed? Would you say: daily, weekly, monthly, a few times a year, or never?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Daily
2	Weekly
3	Monthly
4	A few times a year
5	Never
7	Refused
9	Don't Know

Universe:

Sample Children 5-17

Skip Instructions:

<1-5,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

BEH: Behavior

Question ID: BEH.0010.00.1 Variable: BEHDFPLYG\_C Interview Module: Child Content Type: Annual Core

Question Text:

Compared with children of the same age, does ^SCNAME have difficulty playing? Would you say ^SCNAME has: no difficulty, some difficulty, a lot of difficulty, or ^heshe\_C cannot do this at all?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Children 2-4

Skip Instructions:

<1-4,RF,DK> [goto BEHKBHYG\_C]



2024 National Health Interview Survey (NHIS) Questionnaire

BEH: Behavior

Question ID: BEH.0020.00.1 Variable: BEHKBHYG\_C Interview Module: Child Content Type: Annual Core

Question Text:

Compared with children of the same age, how much does ^SCNAME kick, bite, or hit other children or adults? Would you say: not at all, the same or less, more, or a lot more?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Not at all
2	The same or less
3	More
4	A lot more
7	Refused
9	Don't Know

Universe:

Sample Children 2-4

Skip Instructions:

<1-4,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

BEH: Behavior

Question ID: BEH.0030.00.1 Variable: BEHDFCNTR\_C Interview Module: Child Content Type: Annual Core

Question Text:

Compared with children of the same age, does ^SCNAME have difficulty controlling ^hisher\_C behavior?

*\*Read if necessary: Would you say ^SCNAME has: no difficulty, some difficulty, a lot of difficulty, or ^heshe\_C cannot do this at all?*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Children 5-17

Skip Instructions:

<1-4,RF,DK> [goto BEHDFPCS\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

BEH: Behavior

Question ID: BEH.0040.00.1 Variable: BEHDFPCS\_C Interview Module: Child Content Type: Annual Core

Question Text:

Does ^SCNAME have difficulty concentrating on an activity that ^heshe\_C enjoy^s doing?

*\*Read if necessary: Would you say ^SCNAME has: no difficulty, some difficulty, a lot of difficulty, or ^heshe\_C cannot do this at all?*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"
s	Description	s
	Instruction	if SEX_FINAL[PX_C]=1,2 fill "s" else fill blank

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Children 5-17

Skip Instructions:

<1-4,RF,DK> [goto BEHDFCHG\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

BEH: Behavior

Question ID: BEH.0050.00.1 Variable: BEHDFCHG\_C Interview Module: Child Content Type: Annual Core

Question Text:

Does ^SCNAME have difficulty accepting changes in ^hisher\_C routine?

*\*Read if necessary: Would you say ^SCNAME has: no difficulty, some difficulty, a lot of difficulty, or ^heshe\_C cannot do this at all?*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Children 5-17

Skip Instructions:

<1-4,RF,DK> [goto BEHDFMKFR\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

BEH: Behavior

Question ID: BEH.0060.00.1 Variable: BEHDFMKFR\_C Interview Module: Child Content Type: Annual Core

Question Text:

Does ^SCNAME have difficulty making friends?

*\*Read if necessary: Would you say ^SCNAME has: no difficulty, some difficulty, a lot of difficulty, or ^heshe\_C cannot do this at all?*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Children 5-17

Skip Instructions:

<1-4,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

BSC: Baby Pediatric Symptom Checklist

Question ID: BSC.0010.00.1 Variable: BSCINTRO\_C Interview Module: Child Content Type: Annual Core

Question Text:

- \* The following statements are not to be read to the respondent. They are displayed and included here for legal reasons.
- \* The Baby Pediatric Symptom Checklist is part of the larger Survey of Well-being of Young Children, copyrighted by Tufts Medical Center. For more information go to <https://www.floatinghospital.org/The-Survey-of-Wellbeing-of-Young-Children/Overview.aspx>
- \* Enter '1' to continue.

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

Sample Children under 2 years

Skip Instructions:

<1> [goto BSCNWPPL\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

BSC: Baby Pediatric Symptom Checklist

Question ID: BSC.0020.00.1 Variable: BSCNWPL\_C Interview Module: Child Content Type: Annual Core

Question Text:

These next questions are about ^SCNAME's behavior. Think about what you would expect of other children the same age, and tell me how much each statement applies to ^SCNAME.

Does ^SCNAME have a hard time being with new people? Would you say not at all, somewhat, or very much?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Not at all
2	Somewhat
3	Very much
7	Refused
9	Don't Know

Universe:

Sample Children with Age under 2 years

Skip Instructions:

<1-3,RF,DK> [goto BSCNWPLCS\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

BSC: Baby Pediatric Symptom Checklist

Question ID: BSC.0030.00.1 Variable: BSCNWPLCS\_C Interview Module: Child Content Type: Annual Core

Question Text:

Does ^SCNAME have a hard time in new places? Would you say not at all, somewhat, or very much?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Not at all
2	Somewhat
3	Very much
7	Refused
9	Don't Know

Universe:

Sample Children with Age under 2 years

Skip Instructions:

<1-3,RF,DK> [goto BSCCHG\_C]



2024 National Health Interview Survey (NHIS) Questionnaire

BSC: Baby Pediatric Symptom Checklist

Question ID: BSC.0040.00.1 Variable: BSCCHG\_C Interview Module: Child Content Type: Annual Core

Question Text:

Does ^SCNAME have a hard time with change?

\* **Read if necessary:** *Would you say not at all, somewhat, or very much?*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Not at all
2	Somewhat
3	Very much
7	Refused
9	Don't Know

Universe:

Sample Children with Age under 2 years

Skip Instructions:

<1-3,RF,DK> [goto BSCHLOPPL\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

BSC: Baby Pediatric Symptom Checklist

Question ID: BSC.0050.00.1 Variable: BSCHLOPPL\_C Interview Module: Child Content Type: Annual Core

Question Text:

Does ^SCNAME mind being held by other people?

\* **Read if necessary:** *Would you say not at all, somewhat, or very much?*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Not at all
2	Somewhat
3	Very much
7	Refused
9	Don't Know

Universe:

Sample Children with Age under 2 years

Skip Instructions:

<1-3,RF,DK> [goto BSCCRYALT\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

BSC: Baby Pediatric Symptom Checklist

Question ID: BSC.0060.00.1 Variable: BSCCRYALT\_C Interview Module: Child Content Type: Annual Core

Question Text:

Does ^SCNAME cry a lot?

\* **Read if necessary:** *Would you say not at all, somewhat, or very much?*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Not at all
2	Somewhat
3	Very much
7	Refused
9	Don't Know

Universe:

Sample Children with Age under 2 years

Skip Instructions:

<1-3,RF,DK> [goto BSCCLMDWN\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

BSC: Baby Pediatric Symptom Checklist

Question ID: BSC.0070.00.1 Variable: BSCCLMDWN\_C Interview Module: Child Content Type: Annual Core

Question Text:

Does ^SCNAME have a hard time calming down?

\* **Read if necessary:** *Would you say not at all, somewhat, or very much?*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Not at all
2	Somewhat
3	Very much
7	Refused
9	Don't Know

Universe:

Sample Children with Age under 2 years

Skip Instructions:

<1-3,RF,DK> [goto BSCFUSSY\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

BSC: Baby Pediatric Symptom Checklist

Question ID: BSC.0080.00.1 Variable: BSCFUSSY\_C Interview Module: Child Content Type: Annual Core

Question Text:

Is ^SCNAME fussy or irritable?

\* **Read if necessary:** *Would you say not at all, somewhat, or very much?*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Not at all
2	Somewhat
3	Very much
7	Refused
9	Don't Know

Universe:

Sample Children with Age under 2 years

Skip Instructions:

<1-3,RF,DK> [goto BSCSTHE\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

BSC: Baby Pediatric Symptom Checklist

Question ID: BSC.0090.00.1 Variable: BSCSTHE\_C Interview Module: Child Content Type: Annual Core

Question Text:

Is it hard to comfort ^SCNAME?

\* **Read if necessary:** *Would you say not at all, somewhat, or very much?*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Not at all
2	Somewhat
3	Very much
7	Refused
9	Don't Know

Universe:

Sample Children with Age under 2 years

Skip Instructions:

<1-3,RF,DK> [goto BSCSCHED\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

BSC: Baby Pediatric Symptom Checklist

Question ID: BSC.0100.00.1 Variable: BSCSCHD\_C Interview Module: Child Content Type: Annual Core

Question Text:

Is it hard to keep ^SCNAME on a schedule or routine?

\* **Read if necessary:** *Would you say not at all, somewhat, or very much?*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Not at all
2	Somewhat
3	Very much
7	Refused
9	Don't Know

Universe:

Sample Children with Age under 2 years

Skip Instructions:

<1-3,RF,DK> [goto BSCPTSLP\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

BSC: Baby Pediatric Symptom Checklist

Question ID: BSC.0110.00.1 Variable: BSCPTSLP\_C Interview Module: Child Content Type: Annual Core

Question Text:

Is it hard to put ^SCNAME to sleep?

\* **Read if necessary:** *Would you say not at all, somewhat, or very much?*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Not at all
2	Somewhat
3	Very much
7	Refused
9	Don't Know

Universe:

Sample Children with Age under 2 years

Skip Instructions:

<1-3,RF,DK> [goto BSCSTYSLP\_C]



2024 National Health Interview Survey (NHIS) Questionnaire

BSC: Baby Pediatric Symptom Checklist

Question ID: BSC.0120.00.1 Variable: BSCSTYSLP\_C Interview Module: Child Content Type: Annual Core

Question Text:

Does ^SCNAME have trouble staying asleep?

\* **Read if necessary:** *Would you say not at all, somewhat, or very much?*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Not at all
2	Somewhat
3	Very much
7	Refused
9	Don't Know

Universe:

Sample Children with Age under 2 years

Skip Instructions:

<1-3,RF,DK> [goto BSCPRLKSL\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

BSC: Baby Pediatric Symptom Checklist

Question ID: BSC.0130.00.1 Variable: BSCPRLKSL\_C Interview Module: Child Content Type: Annual Core

Question Text:

Is it hard for ^youmembersoffamily to get enough sleep because of ^SCNAME?

\* **Read if necessary:** *Would you say not at all, somewhat, or very much?*

Fills:

youmembersoffamily	Description	you/members of your family
	Instruction	If PCNT='2' fill "you" else fill "members of your family"
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Not at all
2	Somewhat
3	Very much
7	Refused
9	Don't Know

Universe:

Sample Children with Age under 2 years

Skip Instructions:

<1-3,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

SCH: Schooling

Question ID: SCH.0010.00.1 Variable: SCHEDYSMSS\_C Interview Module: Child Content Type: Annual Core

Question Text:

During the past 12 months, about how many days of school did ^SCNAME miss because ^HeShe\_C had an illness, injury, or disability?

\* Enter '996' if child did not go to school in the past 12 months.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
HeShe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

000-365	Range of values
996	No school in past 12 months
997	Refused
999	Don't Know

Universe:

Sample Children 5-17

Skip Instructions:

<0-99,996,RF,DK> [goto SCHPEDEV\_C]  
 <100-365> [goto ERR1\_SCHDYSMSS\_C]  
 <366-995> [goto ERR2\_SCHDYSMSS\_C]

Hard Edit:

Check Text	Check Description	Check Text
ERR2_SCHDYSMSS_C	hard check for days of missed school	{check } "366-995" days not allowed in this field.

Soft Edit:

Check Text	Check Description	Check Text
ERR1_SCHDYSMSS_C	soft edit for 100-365 days of missed school	{signal }  ^SCHEDYSMSS_C is an unusually large number, did ^SCNAME miss ^SCHEDYSMSS_C days of school because of illness, injury, or disability?  Please verify.

2024 National Health Interview Survey (NHIS) Questionnaire

SCH: Schooling

Question ID: SCH.0020.00.1 Variable: SCHSPEDEV\_C Interview Module: Child Content Type: Annual Core

Question Text:

Has ^SCNAME ever had a special education or early intervention plan, such as an Individualized Education Plan, an IEP, or an Individualized Family Service Plan, an IFSP?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<1> [goto SCHSPED\_C]  
<2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

SCH: Schooling

Question ID: SCH.0030.00.1 Variable: SCHSPED\_C Interview Module: Child Content Type: Annual Core

Question Text:

Does ^SCNAME currently have a special education or early intervention plan?

*\*Read if necessary: Consider special education or early intervention plans received during the past school year.*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who ever had a special education or early intervention plan

Skip Instructions:

<1> [goto SCHSPEDEM\_C]  
<2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

SCH: Schooling

Question ID: SCH.0040.00.1 Variable: SCHSPEDEM\_C Interview Module: Child Content Type: Annual Core

Question Text:

Does ^SCNAME receive these services to help with ^hisher\_C emotions, concentration, behavior, or mental health?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who currently have a special education or early intervention plan

Skip Instructions:

<1,2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0010.00.1 Variable: HICOV\_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

The next questions are about health insurance. Include health insurance obtained through employment or purchased directly as well as government programs like Medicare, Medicaid, and the Children's Health Insurance Program that provide medical care or help pay medical bills. Is ^SCNAME covered by any kind of health insurance or some other kind of health care plan?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<1,R,D> [goto HIKIND\_C]  
<2> [goto MCAIDPRB\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0020.00.1 Variable: HIKIND\_C Interview Module: Child Content Type: Annual Core

Question Text:

[F1]

What kinds of health insurance or health care coverage does ^SCNAME have? Is it...Private health insurance, Medicare, Medicare supplement, Medicaid, Children's Health Insurance Program or CHIP, military related health care including TRICARE, CHAMPUS, VA health care and CHAMP-VA, Indian Health Service, state-sponsored health plan, or an other government program?

\* Enter all that apply, separate with commas.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

01	Private health insurance
02	Medicare
03	Medigap
04	Medicaid
05	Children's Health Insurance Program (CHIP)
06	Military related health care: TRICARE (CHAMPUS) / VA health care / CHAMP-VA
07	Indian Health Service
08	State-sponsored health plan
09	Other government program
10	No coverage of any type
97	Refused
99	Don't Know

Universe:

Sample Children 0-17 covered by any kind of health insurance or health care coverage or refused/don't know if they have insurance or health care coverage.

Skip Instructions:

if > 1 answer selected and (<10> in HIKIND\_C) [goto ERR1\_HIKIND\_C]  
 else if HIKIND\_C=RF,DK or (<10> in HIKIND\_C) [goto MCAIDPRB\_C]  
 else [goto SINCOVDE\_C]

Hard Edit:

Check Text	Check Description	Check Text
ERR1_HIKIND_C	Selecting no coverage and other categories hard edit	{check } Cannot mark "no coverage of any kind" and another type. Please correct.



2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0030.00.1 Variable: MCAIDPRB\_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

There is a program called Medicaid that pays for health care for persons in need. ^STATEMA Is ^SCNAME covered by Medicaid?

Fills:

STATEMA	Description	In ^STATENAME it is also called ^STMEDICAID.
	Instruction	if STMEDICAID ne empty, fill: "In ^STATENAME it is also called ^STMEDICAID." else fill: blank
STATENAME	Description	State name
	Instruction	If ST=AL, fill: Alabama else if ST=AK, fill: Alaska else if ST=AR, fill: Arkansas else if ST=AZ, fill: Arizona else if ST=CA, fill: California else if ST=CO, fill: Colorado else if ST=CT, fill: Connecticut else if ST=DE, fill: Delaware else if ST=DC, fill: District of Columbia else if ST=FL, fill: Florida else if ST=GA, fill: Georgia else if ST=HI, fill: Hawaii else if ST=ID, fill: Idaho else if ST=IL, fill: Illinois else if ST=IN, fill: Indiana else if ST=IA, fill: Iowa else if ST=KS, fill: Kansas else if ST=KY, fill: Kentucky else if ST=LA, fill: Louisiana else if ST=ME, fill: Maine else if ST=MD, fill: Maryland else if ST=MA, fill: Massachusetts else if ST=MI, fill: Michigan else if ST=MN, fill: Minnesota else if ST=MS, fill: Mississippi else if ST=MO, fill: Missouri else if ST=MT, fill: Montana else if ST=NE, fill: Nebraska else if ST=NV, fill: Nevada else if ST=NH, fill: New Hampshire else if ST=NJ, fill: New Jersey else if ST=NM, fill: New Mexico else if ST=NY, fill: New York else if ST=NC, fill: North Carolina else if ST=ND, fill: North Dakota else if ST=OH, fill: Ohio else if ST=OK, fill: Oklahoma else if ST=OR, fill: Oregon else if ST=PA, fill: Pennsylvania else if ST=RI, fill: Rhode Island else if ST=SC, fill: South Carolina else if ST=SD, fill: South Dakota else if ST=TN, fill: Tennessee else if ST=TX, fill: Texas else if ST=UT, fill: Utah else if ST=VT, fill: Vermont else if ST=VA, fill: Virginia else if ST=WA, fill: Washington else if ST=WV, fill: West Virginia else if ST=WI, fill: Wisconsin else if ST=WY, fill: Wyoming
STMEDICAID	Description	State Medicaid name

	Instruction	<p>If AL then fill "Alabama Coordinated Health Network (ACHN)"</p> <p>If AK then fill "DenaliCare; Denali KidCare"</p> <p>If AZ then fill "Arizona Health Care Cost Containment System (AHCCCS)"</p> <p>If AR then fill "ARKidsFirst; ARHOME; Provider-Led Arkansas Shared Savings Entity (PASSE)"</p> <p>If CA then fill "Medi-Cal"</p> <p>If CO then fill "Health First Colorado"</p> <p>If CT then fill "HUSKY Health"</p> <p>If DC then fill "DC Medicaid; DC Healthy Families"</p> <p>If DE then fill "Diamond State Health Plan (DSHP)"</p> <p>If FL then fill "FL Statewide Medicaid Managed Care (SMMC)"</p> <p>If GA then fill "Peach State Health Plan (Peach State); Georgia Families"</p> <p>If HI then fill "Med-QUEST; QUEST Integration"</p> <p>If ID then fill "Healthy Connections"</p> <p>If IL then fill "HealthChoice Illinois"</p> <p>If IN then fill "Healthy Indiana Plan (HIP); Hoosier Healthwise; Hoosier Care Connect"</p> <p>If IA then fill "IA Health Link; Iowa Health and Wellness Plan"</p> <p>If KS then fill "KanCare; Kansas Medical Assistance Program (KMAP); OneCare Kansas"</p> <p>If KY then fill "Kentucky Medicaid"</p> <p>If LA then fill "Healthy Louisiana"</p> <p>If ME then fill "MaineCare"</p> <p>If MD then fill "HealthChoice"</p> <p>If MA then fill "MassHealth"</p> <p>If MI then fill "Healthy Michigan Plan (HMP)"</p> <p>If MN then fill "Medical Assistance (MA)"</p> <p>If MS then fill "MississippiCAN"</p> <p>If MO then fill "MO Healthnet"</p> <p>If MT then fill "Montana Medicaid; Healthy Montana Kids Plus (HMK Plus)"</p> <p>If NC then fill "NC Medicaid Managed Care"</p> <p>If ND then fill "North Dakota (ND) Medicaid"</p> <p>If NE then fill "Heritage Health"</p> <p>If NH then fill "NH Medicaid; Medical Assistance Program"</p> <p>If NJ then fill "NJ Family Care"</p> <p>If NM then fill "Centennial Care"</p> <p>If NV then fill "Nevada Medicaid (NVMedicaid)"</p> <p>If NY then fill "New York Medicaid Choice"</p> <p>If OH then fill "Ohio Medicaid Plan; Healthy Families; Healthy Start; Alternative Benefit Plan (ABP)"</p> <p>If OK then fill "SoonerCare; SoonerSelect"</p> <p>If OR then fill "Oregon Health Plan (OHP)"</p> <p>If PA then fill "Medical Assistance (MA); HealthChoices"</p> <p>If RI then fill "RIte Care"</p> <p>If SC then fill "Healthy Connections Prime"</p> <p>If SD then fill "South Dakota Medicaid Assistance"</p> <p>If TN then fill "TennCare"</p> <p>If TX then fill "State of Texas Access Reform (STAR); STAR +PLUS; STAR Kids"</p> <p>If UT then fill "Utah Medicaid; Utah Medicaid Integrated Care (UMIC)"</p> <p>If VT then fill "Green Mountain Care (Vermont Medicaid); Dr. Dynasaur"</p> <p>If VA then fill "Medallion 4.0; Commonwealth Care Plus (CCC Plus)"</p> <p>If WA then fill "Apple Health"</p> <p>If WV then fill "West Virginia State Medicaid Plan; Mountain Health Trust (MHT)"</p> <p>If WI then fill "ForwardHealth; BadgerCare Plus"</p> <p>If WY then fill "Wyoming Medicaid State Plan; WYhealth"</p>
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
---	-----

2	No
7	Refused
9	Don't Know

**Universe:**

Sample Children 0-17 who have indicated they are uninsured, refused, or don't know if they are insured

**Skip Instructions:**

<1,2,RF,DK> [goto SINCOVDE\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0040.00.1 Variable: SINCOVDE\_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

^INADDITIONIS ^SCNAME covered by a SEPARATE plan that only pays for dental services?

Fills:

INADDITIONIS	Description	In addition to ^HITYPECNOSS, is/Is
	Instruction	If (HIKIND_C=1-9 or MCAIDPRB_C=1), fill "In addition to ^HITYPECNOSS, is" else fill "Is"
HITYPECNOSS	Description	Type of health care plans without single service plans
	Instruction	fill coverage types from HIKIND_C, except HIKIND_C=10, HIKIND_C=1 fill: "private health insurance" HIKIND_C=2 fill: "Medicare" HIKIND_C=3 fill: "Medicare Supplement or Medigap" HIKIND_C=4 fill: "Medicaid" HIKIND_C=5 fill: "Children's Health Insurance Program (CHIP)" HIKIND_C=6 fill: "military related health care" HIKIND_C=7 fill: "Indian Health Service" HIKIND_C=8 fill: "a state-sponsored health plan" HIKIND_C=9 fill: "an other government program" if MCAIDPRB_C=1, fill "Medicaid"  separate choices with a comma and seperate the last two choices with "and"
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<1,2,RF,DK> [goto SINCOVVS\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0050.00.1 Variable: SINCOVVS\_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

Is ^SCNAME covered by a SEPARATE plan that only pays for vision services?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<1,2,RF,DK> [goto SINCOVRX\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0060.00.1 Variable: SINCOVRX\_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

Is ^SCNAME covered by a SEPARATE plan that only pays for prescriptions?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<1,2,RF,DK> [goto HICHANGE\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0070.00.1 Variable: HICHANGE\_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

I have recorded ^SCNAME is ^COVEREDC. Is this correct?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
COVEREDC	Description	not covered by health insurance/covered by ^HITYPEC
	Instruction	if HIKIND_C=10,R,D and MCAIDPRB_C=2,R,D and SINCOVDE_C=2,R,D and SINCOVVS_C=2,R,D and SINCOVRX_C=2,R,D fill: "not covered by health insurance" else fill: "covered by ^HITYPEC"
HITYPEC	Description	Type of health care plans with single service plans
	Instruction	fill coverage types from HIKIND_C, except HIKIND_C=10, HIKIND_C=1 fill: "private health insurance" HIKIND_C=2 fill: "Medicare" HIKIND_C=3 fill: "Medicare Supplement or Medigap" HIKIND_C=4 fill: "Medicaid" HIKIND_C=5 fill: "Children's Health Insurance Program (CHIP)" HIKIND_C=6 fill: "military related health care" HIKIND_C=7 fill: "Indian Health Service" HIKIND_C=8 fill: "a state-sponsored health plan" HIKIND_C=9 fill: "an other government program" if MCAIDPRB_C=1, fill "Medicaid" If SINCOVDE_C=1 and SINCOVRX_C=2,RF,DK and SINCOVVS_C=2,RF,DK, fill: "a single service dental plan" If SINCOVDE_C=2,RF,DK and SINCOVRX_C=1 and SINCOVVS_C=2,RF,DK, fill: "a single service prescription plan" If SINCOVDE_C=2,RF,DK and SINCOVRX_C=2,RF,DK and SINCOVVS_C=1, fill: "a single service vision plan" If SINCOVDE_C=1 and SINCOVRX_C=1 and SINCOVVS_C=2,RF,DK, fill: "single service dental and prescription plans" If SINCOVDE_C=1 and SINCOVRX_C=2,RF,DK and SINCOVVS_C=1, fill: "single service dental and vision plans" If SINCOVDE_C=2,RF,DK and SINCOVRX_C=1 and SINCOVVS_C=1, fill: "single service vision and prescription plans" If SINCOVDE_C=1 and SINCOVRX_C=1 and SINCOVVS_C=1, fill: "single service dental, vision, and prescription plans" separate choices with a comma and separate the last two choices with "and"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

**Skip Instructions:**

```
<1,RF,DK>  
if 2 in HIKIND_C [goto MCPART_C]  
else if 4 in HIKIND_C or MCAIDPRB_C=1[goto MACHMN_C]  
else if 1 in HIKIND_C [goto SET_INSPRI_FLAG]  
else if 3 in HIKIND_C [goto SET_INSPRI_FLAG]  
else if 5 in HIKIND_C [goto CHNAME_C]  
else if 8 in HIKIND_C [goto OPNAME_C]  
else if 9 in HIKIND_C [goto OGNAME_C]  
else if 6 in HIKIND_C [goto MILSPC_C]  
else if 7 in HIKIND_C [goto HINOTYR_C]  
else if 10 in HIKIND_C and MCAIDPRB_C IN (2,RF,DK) [goto HILAST_C]  
else [goto FINISH_C]  
<2> [goto ERR1_HICHANGE_C]
```

**Hard Edit:**

Check Text	Check Description	Check Text
ERR1_HICHANGE_C		{check }  Press enter to go back to HIKIND_C and update coverage.



2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0080.00.1 Variable: MCPART\_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

What type of Medicare coverage does ^SCNAME have? Is it Part A - hospital insurance, Part B - medical insurance, or both?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Part A- hospital only
2	Part B- medical only
3	Both Part A and Part B
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with Medicare

Skip Instructions:

<2,3,RF,DK> [goto MCCHOICE\_C] <1> [goto MCPARTD\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0090.00.1 Variable: MCCHOICE\_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

Is ^SCNAME enrolled in a Medicare Advantage plan?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with Medicare part B only or both parts A and B

Skip Instructions:

<1,2,RF,DK> [goto MCHMO\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0100.00.1 Variable: MCHMO\_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

Is ^SCNAME under a Medicare managed care arrangement, such as an HMO, that is, a Health Maintenance Organization?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with Medicare part B only or both parts A and B

Skip Instructions:

```
<1> [goto MCANAME_C]
<2,RF,DK> if MCCHOICE_C=1 [goto MCANAME_C]
           else if MCCHOICE_C=2,RF,DK, [goto MCPARTD_C]
```

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0110.00.1 Variable: MCANAME\_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

What is the name of ^SCNAME's Medicare Advantage or Medicare HMO plan?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Children 0-17 with a Medicare Advantage plan or a Medicare managed care arrangement

Skip Instructions:

<verbatim, RF, DK> [goto MCDNCOV\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0111.00.1 Variable: MCDNCOV\_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

Does ^MEDADVNAME\_C pay for any of the costs for dental care?

Fills:

MEDADVNAME_C	Description	{Value of MCANAME_C}/this Medicare Advantage or Medicare HMO plan
	Instruction	If MCANAME_C has value, fill value of MCANAME_C If MCANAME_C is DK/RF, fill: "this Medicare Advantage or Medicare HMO plan"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with a Medicare Advantage plan or a Medicare managed care arrangement

Skip Instructions:

<1,2,RF,DK> [goto MCVSCOV\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0112.00.1 Variable: MCVSCOV\_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

Does ^MEDADVNAME\_C pay for any of the costs for routine vision care, such as glasses and contact lenses?

Fills:

MEDADVNAME_C	Description	{Value of MCANAME_C}/this Medicare Advantage or Medicare HMO plan
	Instruction	If MCANAME_C has value, fill value of MCANAME_C If MCANAME_C is DK/RF, fill: "this Medicare Advantage or Medicare HMO plan"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with a Medicare Advantage plan or a Medicare managed care arrangement

Skip Instructions:

<1,2,RF,DK> [goto MCPARTD\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0120.00.1 Variable: MCPARTD\_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

Is ^SCNAME enrolled in Medicare Part D, also known as the Medicare Prescription Drug Plan?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with Medicare

Skip Instructions:

```
<1,2,RF,DK>
if 4 in HIKIND_C or MCAIDPRB_C=1[goto MACHMN_C]
else if 1 in HIKIND_C [goto SET_INSPRI_FLAG]
else if 3 in HIKIND_C [goto SET_INSPRI_FLAG]
else if 5 in HIKIND_C [goto CHNAME_C]
else if 8 in HIKIND_C [goto OPNAME_C]
else if 9 in HIKIND_C [goto OGNAME_C]
else if 6 in HIKIND_C [goto MILSPC_C]
else [goto HINOTYR_C]
```

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0130.00.1 Variable: MACHMN\_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

The next questions are about Medicaid coverage. What is the name of ^SCNAME's Medicaid health plan?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Children 0-17 with Medicaid coverage

Skip Instructions:

<allow 80, RF, DK> [goto MAXCHNG\_C]



2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0140.00.1 Variable: MAXCHNG\_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

Was ^SCNAME's Medicaid obtained through Healthcare.gov or the ^MARKETPLACE?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
MARKETPLACE	Description	Health Insurance marketplace names
	Instruction	<p>If no state specified below, fill "Health Insurance Marketplace"</p> <p>If state specified below fill:</p> <p>If CA then fill "Health Insurance Marketplace, such as Covered California"</p> <p>If CO then fill "Health Insurance Marketplace, such as Connect for Health Colorado"</p> <p>If CT then fill "Health Insurance Marketplace, such as Access Health CT"</p> <p>If DC then fill "Health Insurance Marketplace, such as DC Health Link"</p> <p>If ID then fill "Health Insurance Marketplace, such as Your Health Idaho"</p> <p>If KY then fill "Health Insurance Marketplace, such as Kynect"</p> <p>If MA then fill "Health Insurance Marketplace, such as Massachusetts Health Connector"</p> <p>If ME then fill "Health Insurance Marketplace, such as CoverME"</p> <p>If MD then fill "Health Insurance Marketplace, such as Maryland Health Connection"</p> <p>If MN then fill "Health Insurance Marketplace, such as MNsure"</p> <p>If NJ then fill "Health Insurance Marketplace, such as GetCoveredNJ"</p> <p>If NV then fill "Health Insurance Marketplace, such as Nevada Health Link"</p> <p>If NM then fill "Health Insurance Marketplace, such as beWellnm"</p> <p>If NY then fill "Health Insurance Marketplace, such as NY State of Health"</p> <p>If PA then fill "Health Insurance Marketplace, such as Pennie"</p> <p>If RI then fill "Health Insurance Marketplace, such as HealthSource RI"</p> <p>If VA then fill "Health Insurance Marketplace, such as Virginia's Insurance Marketplace"</p> <p>If VT then fill "Health Insurance Marketplace, such as Vermont Health Connect"</p> <p>If WA then fill "Health Insurance Marketplace, such as Washington Healthplanfinder"</p>

Response:

1	Yes
2	No
7	Refused
9	Don't Know

**Universe:**

Sample Children 0-17 with Medicaid coverage

**Skip Instructions:**

<1,2,RF,DK> [goto MAPREM\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0150.00.1 Variable: MAPREM\_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

A health insurance premium is the amount ^SCNAME or a family member pays each month for health care coverage. Does ^SCNAME or a family member pay a premium for this Medicaid plan?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with Medicaid coverage

Skip Instructions:

<1,2,RF,DK> [goto MADEDUC\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0160.00.1 Variable: MADEDUC\_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

A deductible is the amount you have to pay for health care before your health insurance or health coverage plan will start paying your medical bills. Does ^SCNAME's Medicaid plan have an annual deductible?

\* **Read if necessary:** *A deductible is different from a copay (copayment).*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with Medicaid coverage

Skip Instructions:

```
<1> [goto MAHDHP_C]
<2,RF,DK>
if 1 in HIKIND_C [goto SET_INSPRI_FLAG]
else if 3 in HIKIND_C [goto SET_INSPRI_FLAG]
else if 5 in HIKIND_C [goto CHNAME_C]
else if 8 in HIKIND_C [goto OPNAME_C]
else if 9 in HIKIND_C [goto OGNAME_C]
else if 6 in HIKIND_C [goto MILSPC_C]
else [goto HINOTYR_C]
```

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0170.00.1 Variable: MAHDHP\_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

Is the annual deductible for medical care for this plan less than ^HDHPDED or ^HDHPDED or more?  
If there is a separate deductible for prescription drugs, hospitalization, or out-of-network care, do not include those deductible amounts here.

Fills:

HDHPDED	Description	Deductible threshold (may change in future year)
	Instruction	Fill: \$1,600

Response:

1	Deductible is less than \$1,500
2	Deductible is \$1,500 or more
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with Medicaid coverage who have a deductible

Skip Instructions:

```
<1,2,RF,DK>
if 1 in HIKIND_C [goto SET_INSPRI_FLAG]
else if 3 in HIKIND_C [goto SET_INSPRI_FLAG]
else if 5 in HIKIND_C [goto CHNAME_C]
else if 8 in HIKIND_C [goto OPNAME_C]
else if 9 in HIKIND_C [goto OGNAME_C]
else if 6 in HIKIND_C [goto MILSPC_C]
else [goto HINOTYR_C]
```

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0260.00.1 Variable: PLANNAME1\_C Interview Module: Child Content Type: Annual Core

Question Text:

Earlier I recorded that ^YOUSANAME ^WEREWAS covered by ^HIPNAM1\_A. Is ^SCNAME covered by this same plan as ^YOUSANAME?

Fills:

YOUSANAME	Description	you/^SANAME
	Instruction	If GEN.SARESPSC_FLG=1, fill "you" else fill "^SANAME"
SANAME	Description	Sample Adult's name
	Instruction	Sample Adult's name
WEREWAS	Description	were/was
	Instruction	If SARESPSC_FLG=1, fill "were", else "was"
HIPNAM1_A	Description	{Value of HIPNAM1_A}
	Instruction	Fill value from Adult.INS.HIPNAM1_A
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with private health insurance coverage, where the Sample Adult interview has already been conducted, the Sample Adult is in the same family, and the Sample Adult also had private health insurance, and the first private plan is not self only coverage, a plan name was not don't know or refused, and the source and who pays for the coverage is not don't know or refused.

Skip Instructions:

```
<1> if Adult.INS.bPlan[1].POLHLD_A ne 1 [goto POLHLDA1_C],
if INSPRI2_FLG2_C=1 and INSPRI2_FLG3_C=1 and INSPRI2_FLG4_C=1 and INSPRI2_FLG5_C=1 [goto
PLANNAME2_C] else [goto MORPLAN_C]
<2,RF,DK> if INSPRI2_FLG2_C=1 and INSPRI2_FLG3_C=1 and INSPRI2_FLG4_C=1 and INSPRI2_FLG5_C=1
[goto PLANNAME2_C] else [goto HIPNAM1_C]
```

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0270.00.1 Variable: POLHLDA1\_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

Health insurance plans are usually obtained in one person's name even if other family members are covered by that plan. That person is called the policyholder. Is ^SCNAME the policyholder for ^HIPNAM1\_A?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
HIPNAM1_A	Description	{Value of HIPNAM1_A}
	Instruction	Fill value from Adult.INS.HIPNAM1_A

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with a shared private health plan with the Sample Adult, where the Sample Adult is not the policyholder for their first private plan or refused or don't know.

Skip Instructions:

<1,2,RF,DK> if INSPRI2\_FLG2\_C=1 and INSPRI2\_FLG3\_C=1 and INSPRI2\_FLG4\_C=1 and INSPRI2\_FLG5\_C=1  
 [goto PLANNAME2\_C]  
 else [goto MORPLAN\_C]

**2024 National Health Interview Survey (NHIS) Questionnaire**

**INS: Health Insurance**

**Question ID:** INS.0280.00.1    **Variable:** PLANNAME2\_C    **Interview Module:** Child    **Content Type:** Annual Core

**Question Text:**

Earlier I recorded that ^YOUSANAME ^WEREWAS covered by a second plan ^HIPNAM2\_A. Is ^SCNAME covered by this same plan as ^YOUSANAME?

**Fills:**

YOUSANAME	Description	you/^SANAME
	Instruction	If GEN.SARESPSC_FLG=1, fill "you" else fill "^SANAME"
SANAME	Description	Sample Adult's name
	Instruction	Sample Adult's name
WEREWAS	Description	were/was
	Instruction	If SARESPSC_FLG=1, fill "were", else "was"
HIPNAM2_A	Description	{Value of HIPNAM2_A}
	Instruction	Fill value from Adult.INS.HIPNAM2_A
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

**Response:**

1	Yes
2	No
7	Refused
9	Don't Know

**Universe:**

Sample Children 0-17 with private health insurance coverage, where the Sample Adult interview has already been conducted, the Sample Adult is in the same family, and the Sample Adult also had private health insurance, and listed two plans. The second private plan is not self only coverage, a plan name was not don't know or refused, and the source and who pays for the coverage is not don't know or refused.

**Skip Instructions:**

```
<1> if Adult.INS.bPlan[2].POLHLD_A ne 1 [goto POLHLDA2_C],
else if PLANNAME1_C IN(2,RF,DK) [goto MORPLAN_C]
else if 5 in HIKIND_C [goto CHNAME_C]
else if 8 in HIKIND_C [goto OPNAME_C]
else if 9 in HIKIND_C [goto OGNAME_C]
else if 6 in HIKIND_C [goto MILSPC_C]
else [goto HINOTYR_C]
<2,RF,DK> if PLANNAME1_C IN (2,RF,DK,empty) [goto HIPNAM1_C]
else [goto MORPLAN_C]
```



2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0290.00.1 Variable: POLHLDA2\_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

\* **Read if necessary:** Health insurance plans are usually obtained in one person's name even if other family members are covered by that plan. That person is called the policyholder.

Is ^SCNAME the policyholder for ^HIPNAM2\_A?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
HIPNAM2_A	Description	{Value of HIPNAM2_A}
	Instruction	Fill value from Adult.INS.HIPNAM2_A

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with a shared private health plan with the Sample Adult, where the adult is not the policyholder for their second private plan or refused or don't know

Skip Instructions:

```
<1,2,RF,DK> if PLANNAME1_C IN(2,RF,DK,empty) [goto MORPLAN_C]
else if 5 in HIKIND_C [goto CHNAME_C]
else if 8 in HIKIND_C [goto OPNAME_C]
else if 9 in HIKIND_C [goto OGNAME_C]
else if 6 in HIKIND_C [goto MILSPC_C]
else [goto HINOTYR_C]
```

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0300.00.1 Variable: HIPNAM1\_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

It is important that we record the complete and accurate name of each private health insurance plan. What is the COMPLETE name of ^SCNAME's plan? Do NOT include plans that only provide extra cash while in the hospital or plans that pay for only one type of service such as long term care, accidents, or dental care.

*\*Read if necessary: Do you have a health plan card or something with the plan name on it?*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Children 0-17 enrolled in a Medigap plan or private health insurance and the sample child did not share or refused or did not know if they shared or did not have a value for both of the two listed private plans for the sample adult

Skip Instructions:

<allow 80,RF,DK> [goto MORPLAN\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0310.00.1 Variable: MORPLAN\_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

Is ^SCNAME covered by any other private health insurance plans?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 enrolled in a private health plan where the name of the plan was given or don't know or refused or the sample child only shared one private plan with the Sample Adult

Skip Instructions:

```
<1> [goto HIPNAM2_C]
<2,RF,DK>
if (PLANNAME1_C = 1 or PLANNAME2_C = 1) then
  if 5 in HIKIND_C [goto CHNAME_C]
  else if 8 in HIKIND_C [goto OPNAME_C]
  else if 9 in HIKIND_C [goto OGNAME_C]
  else if 6 in HIKIND_C [goto MILSPC_C]
  else [goto HINOTYR_C]

else [goto bPlan[1].POLHLD_C]
```

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0320.00.1 Variable: HIPNAM2\_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

What is the name of that private health insurance plan?

\* **Read if necessary:** *Do you have a health plan card or something with the plan name on it?*

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Children 0-17 with a second private health insurance plan

Skip Instructions:

<allow 80,RF,DK> [goto bPlan[1].POLHLD\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0340.00.1 Variable: POLHLD\_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

I am going to ask you some questions about ^FIRSTPLANC. Health insurance plans are usually obtained in one person's name even if other family members are covered by that plan. That person is called the policyholder. Is ^SCNAME the policyholder for ^THISPLANC?

Fills:

FIRSTPLANC	Description	this plan/this first plan/this ^HIPNAM1_C plan/this second plan/this ^HIPNAM2_C plan
	Instruction	If PlanNum = 1 then if HIPNAM1_C IN (RF,DK) AND HIPNAM2_C=empty fill: "this plan" elseif HIPNAM1_C IN (RF,DK) fill: "this first plan" else fill: "this ^HIPNAM1_C plan" if PlanNum = 2 then if HIPNAM2_C IN (RF,DK) fill: "this second plan" else fill: "this ^HIPNAM2_C plan"
HIPNAM1_C	Description	{Value of HIPNAM1_C}
	Instruction	Fill value from Child.INS.HIPNAM1_C
HIPNAM2_C	Description	{Value of HIPNAM2_C}
	Instruction	Fill value from Child.INS.HIPNAM2_C
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
THISPLANC	Description	this plan/^HIPNAM1_C/^HIPNAM2_C
	Instruction	if PlanNum=1 then if HIPNAM1_C IN('RF','DK') fill: "this plan" Else fill: "^HIPNAM1_C" if PlanNum=2 then if HIPNAM2_C IN('RF','DK') fill: "this plan" Else fill: "^HIPNAM2_C"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with private health insurance coverage where a plan name was given or refused or don't know.

Skip Instructions:

<1,RF,DK> [goto PRPLCOV\_C]  
<2> [goto PLNWRK\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0350.00.1 Variable: PRPLCOV\_C Interview Module: Child Content Type: Annual Core

Question Text:

Does this plan cover someone other than ^SCNAME?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with private health insurance coverage where a plan name was given or refused or don't know and where the Sample Child is the policyholder or refused or don't know.

Skip Instructions:

<1,2,RF,DK> [goto PLNWRK\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0360.00.1 Variable: PLNWRK\_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

Which one of these categories best describes how this plan was obtained? Was it obtained through an employer or union, purchased directly, obtained through Healthcare.gov or the Affordable Care Act, also known as Obamacare, obtained through a state or local government or community program or obtained in some other way?

Response:

1	Through an employer, union, or professional association
2	Purchased directly
3	Through Healthcare.gov or the Affordable Care Act, also known as Obamacare
4	Through a state or local government or community program
5	Other
7	Refused
9	Don't Know

Universe:

Sample Children with private health insurance coverage where a plan name was given or refused or don't know.

Skip Instructions:

<1,3> [goto PLNPAY\_C]  
<2,4,RF,DK> [goto PLNEXCHG\_C]  
<5> [goto PLNWKSP\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0370.00.1 Variable: PLNWKSP\_C Interview Module: Child Content Type: Annual Core

Question Text:

\* **Read if necessary:** *How was this plan obtained?*

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Children 0-17 with private health insurance coverage where a plan name was given or refused or don't know and private health insurance coverage was obtained from an other source

Skip Instructions:

<allow 80,RF,DK> [goto PLNEXCHG\_C]



2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0380.00.1 Variable: PLNEXCHG\_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

Was the plan obtained through Healthcare.gov or the ^MARKETPLACE?

Fills:

MARKETPLACE	Description	Health Insurance marketplace names
	Instruction	<p>If no state specified below, fill "Health Insurance Marketplace"</p> <p>If state specified below fill:</p> <p>If CA then fill "Health Insurance Marketplace, such as Covered California"</p> <p>If CO then fill "Health Insurance Marketplace, such as Connect for Health Colorado"</p> <p>If CT then fill "Health Insurance Marketplace, such as Access Health CT"</p> <p>If DC then fill "Health Insurance Marketplace, such as DC Health Link"</p> <p>If ID then fill "Health Insurance Marketplace, such as Your Health Idaho"</p> <p>If KY then fill "Health Insurance Marketplace, such as Kynect"</p> <p>If MA then fill "Health Insurance Marketplace, such as Massachusetts Health Connector"</p> <p>If ME then fill "Health Insurance Marketplace, such as CoverME"</p> <p>If MD then fill "Health Insurance Marketplace, such as Maryland Health Connection"</p> <p>If MN then fill "Health Insurance Marketplace, such as MNSure"</p> <p>If NJ then fill "Health Insurance Marketplace, such as GetCoveredNJ"</p> <p>If NV then fill "Health Insurance Marketplace, such as Nevada Health Link"</p> <p>If NM then fill "Health Insurance Marketplace, such as beWellnm"</p> <p>If NY then fill "Health Insurance Marketplace, such as NY State of Health"</p> <p>If PA then fill "Health Insurance Marketplace, such as Pennie"</p> <p>If RI then fill "Health Insurance Marketplace, such as HealthSource RI"</p> <p>If VA then fill "Health Insurance Marketplace, such as Virginia's Insurance Marketplace"</p> <p>If VT then fill "Health Insurance Marketplace, such as Vermont Health Connect"</p> <p>If WA then fill "Health Insurance Marketplace, such as Washington Healthplanfinder"</p>

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with private health insurance coverage where a plan name was given or refused or don't know and who have private coverage that is directly purchased, or obtained through a state, local, government or community program, or obtained another way, or refused/don't know how obtained

**Skip Instructions:**

<1,2,RF,DK> [goto PLNPAY\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0390.00.1 Variable: PLNPAY\_C Interview Module: Child Content Type: Annual Core

Question Text:

Who pays for this health insurance plan?

\* Enter all that apply, separate with commas.

Response:

1	^SCNAME or family (living in the household)
2	Employer or union
3	Someone outside the household
4	Medicare
5	Medicaid
6	Other government program
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with private health insurance coverage where a plan name was given or refused or don't know and were enrolled in a private health plan where a plan name was given or refused or don't know.

Skip Instructions:

<1-6,RF,DK> if 1 IN PLNPAY\_C [goto HICOSTN\_C]  
else [goto PRDEDUC\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0400.01.1 Variable: HICOSTN\_C Interview Module: Child Content Type: Annual Core

Question Text:

[F1]

How much does ^SCNAME's family currently spend for health insurance premiums for ^FIRSTPLANC?  
Please include payroll deductions for premiums.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
FIRSTPLANC	Description	this plan/this first plan/this ^HIPNAM1_C plan/this second plan/this ^HIPNAM2_C plan
	Instruction	If PlanNum = 1 then if HIPNAM1_C IN (RF,DK) AND HIPNAM2_C=empty fill: "this plan" elseif HIPNAM1_C IN (RF,DK) fill: "this first plan" else fill: "this ^HIPNAM1_C plan" if PlanNum = 2 then if HIPNAM2_C IN (RF,DK) fill: "this second plan" else fill: "this ^HIPNAM2_C plan"
HIPNAM1_C	Description	{Value of HIPNAM1_C}
	Instruction	Fill value from Child.INS.HIPNAM1_C
HIPNAM2_C	Description	{Value of HIPNAM2_C}
	Instruction	Fill value from Child.INS.HIPNAM2_C

Response:

00001-99995	Range of values
99997	Refused
99999	Don't Know

Universe:

Sample Children 0-17 with private health insurance coverage where a plan name was given or refused or don't know who paid for by self or family

Skip Instructions:

<20000-99995> [goto ERR1\_HICOSTN\_C]  
<1-19999> [goto HICOSTT\_C]  
<RF,DK> [goto PRDEDUC\_C]

Soft Edit:

Check Text	Check Description	Check Text
ERR1_HICOSTN_C	Premium unusually high soft edit	{signal } [^HICOSTN_C] is unusually high. Please verify. Make corrections if necessary.

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0400.02.1 Variable: HICOSTT\_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

\* Enter time period for premium payments.

Response:

01	Once a week
02	Once every 2 weeks
03	Once a month
04	Twice a month
05	Every two months
06	Quarterly (every 3 months)
07	Once a year
08	Twice a year
97	Refused
99	Don't Know

Universe:

Sample Children 0-17 with private health insurance coverage where a plan name was given or refused or don't know who gave a premium amount.

Skip Instructions:

<1-8,RF,DK> [goto PRDEDUC\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0410.00.1 Variable: PRDEDUC\_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

A deductible is the amount you have to pay for health care before your health insurance or health coverage plan will start paying your medical bills. Does this health plan have an annual deductible?

\* **Read if necessary:** *A deductible is different from a copay (copayment).*

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with private health insurance plans where a plan name was given or refused or don't know.

Skip Instructions:

<1> [goto PRHDHP\_C]  
<2,RF,DK> [goto INTROCOV\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0420.00.1 Variable: PRHDHP\_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

Is the ^FAM\_C annual deductible for medical care for this plan less than ^HDHPAMT\_C, or ^HDHPAMT\_C or more? If there is a separate deductible for prescription drugs, hospitalization, or out-of-network care, do not include those deductible amounts here.

Fills:

FAM_C	Description	family
	Instruction	if POLHLD_C=2 or PRPLCOV_C=1, fill 'family'. Else no fill.
HDHPAMT_C	Description	^HDHPDED_family/^HDHPDED
	Instruction	if POLHLD_C=2 or PRPLCOV_C=1, fill "^HDHPDED_family" Else fill "^HDHPDED"
HDHPDED_family	Description	Family deductible threshold (may change in future year)
	Instruction	Fill: \$3,200
HDHPDED	Description	Deductible threshold (may change in future year)
	Instruction	Fill: \$1,600

Response:

1	Less than ^HDHPAMT_C
2	^HDHPAMT_C or more
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with private health insurance coverage where a plan name was given or refused or don't know with a deductible.

Skip Instructions:

<1> [goto INTROCOV\_C]  
<2,RF,DK> [goto HSAHRA\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0430.00.1 Variable: HSAHRA\_C Interview Module: Child Content Type: Annual Core

Question Text:

There are special accounts or funds that can be used to pay for medical expenses, sometimes referred to as Health Savings Accounts or HSAs, Health Reimbursement Accounts or HRAs, Personal Care accounts, Personal Medical funds, or Choice funds. These are DIFFERENT from Flexible Spending Accounts or FSAs. Is there one of these accounts or funds with this plan?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with private health insurance coverage where a plan name was given or refused or don't know with a high deductible

Skip Instructions:

<1,2,RF,DK> [goto INTROCOV\_C]



2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0435.00.1 Variable: INTROCOV\_C Interview Module: Child Content Type: Annual Core

Question Text:

The next three questions are about services ^FIRSTPLANC may cover.

\* Enter '1' to continue.

Fills:

FIRSTPLANC	Description	this plan/this first plan/this ^HIPNAM1_C plan/this second plan/this ^HIPNAM2_C plan
	Instruction	If PlanNum = 1 then if HIPNAM1_C IN (RF,DK) AND HIPNAM2_C=empty fill: "this plan" elseif HIPNAM1_C IN (RF,DK) fill: "this first plan" else fill: "this ^HIPNAM1_C plan" if PlanNum = 2 then if HIPNAM2_C IN (RF,DK) fill: "this second plan" else fill: "this ^HIPNAM2_C plan"
HIPNAM1_C	Description	{Value of HIPNAM1_C}
	Instruction	Fill value from Child.INS.HIPNAM1_C
HIPNAM2_C	Description	{Value of HIPNAM2_C}
	Instruction	Fill value from Child.INS.HIPNAM2_C

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

Sample Children 0-17 with private health insurance coverage where a plan name was given or refused or don't know

Skip Instructions:

<1> [goto PRRXCOV\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0440.00.1 Variable: PRRXCOV\_C Interview Module: Child Content Type: Annual Core

Question Text:

Does ^FIRSTPLANC pay for any of the costs for medications prescribed by a doctor?

\* **Read if necessary:** Even if ^SCNAME has not used this benefit, please answer if this plan would cover at least some of the costs if ^SCNAME were prescribed medications.

Fills:

FIRSTPLANC	Description	this plan/this first plan/this ^HIPNAM1_C plan/this second plan/this ^HIPNAM2_C plan
	Instruction	If PlanNum = 1 then if HIPNAM1_C IN (RF,DK) AND HIPNAM2_C=empty fill: "this plan" elseif HIPNAM1_C IN (RF,DK) fill: "this first plan" else fill: "this ^HIPNAM1_C plan" if PlanNum = 2 then if HIPNAM2_C IN (RF,DK) fill: "this second plan" else fill: "this ^HIPNAM2_C plan"
HIPNAM1_C	Description	{Value of HIPNAM1_C}
	Instruction	Fill value from Child.INS.HIPNAM1_C
HIPNAM2_C	Description	{Value of HIPNAM2_C}
	Instruction	Fill value from Child.INS.HIPNAM2_C
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with private health insurance coverage where the name of the plan was given or refused or don't know.

Skip Instructions:

<1,2,RF,DK> [goto PRDNCOV\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0450.00.1 Variable: PRDNCOV\_C Interview Module: Child Content Type: Annual Core

Question Text:

Does ^FIRSTPLANC pay for any of the costs for dental care?

\* **Read if necessary:** Even if ^SCNAME has not used this benefit, please answer if this plan would cover at least some of the costs if ^SCNAME did have dental care.

Fills:

FIRSTPLANC	Description	this plan/this first plan/this ^HIPNAM1_C plan/this second plan/this ^HIPNAM2_C plan
	Instruction	If PlanNum = 1 then if HIPNAM1_C IN (RF,DK) AND HIPNAM2_C=empty fill: "this plan" elseif HIPNAM1_C IN (RF,DK) fill: "this first plan" else fill: "this ^HIPNAM1_C plan" if PlanNum = 2 then if HIPNAM2_C IN (RF,DK) fill: "this second plan" else fill: "this ^HIPNAM2_C plan"
HIPNAM1_C	Description	{Value of HIPNAM1_C}
	Instruction	Fill value from Child.INS.HIPNAM1_C
HIPNAM2_C	Description	{Value of HIPNAM2_C}
	Instruction	Fill value from Child.INS.HIPNAM2_C
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with private health insurance coverage where the plan name was given or refused or don't know.

Skip Instructions:

<1,2,RF,DK> [goto PRVSCOV\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0460.00.1 Variable: PRVSCOV\_C Interview Module: Child Content Type: Annual Core

Question Text:

Does ^FIRSTPLANC pay for any of the costs for routine vision care, such as glasses and contact lenses?

\* **Read if necessary:** Even if ^SCNAME has not used this benefit, please answer if this plan would cover at least some of the costs if ^SCNAME did have vision care.

Fills:

FIRSTPLANC	Description	this plan/this first plan/this ^HIPNAM1_C plan/this second plan/this ^HIPNAM2_C plan
	Instruction	If PlanNum = 1 then if HIPNAM1_C IN (RF,DK) AND HIPNAM2_C=empty fill: "this plan" elseif HIPNAM1_C IN (RF,DK) fill: "this first plan" else fill: "this ^HIPNAM1_C plan" if PlanNum = 2 then if HIPNAM2_C IN (RF,DK) fill: "this second plan" else fill: "this ^HIPNAM2_C plan"
HIPNAM1_C	Description	{Value of HIPNAM1_C}
	Instruction	Fill value from Child.INS.HIPNAM1_C
HIPNAM2_C	Description	{Value of HIPNAM2_C}
	Instruction	Fill value from Child.INS.HIPNAM2_C
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with private health insurance coverage where a plan name was given or refused or don't know.

Skip Instructions:

```
<1,2,RF,DK> If there is another plan [goto bPlan for next plan]
else if 5 in HIKIND_C [goto CHNAME_C]
else if 8 in HIKIND_C [goto OPNAME_C]
else if 9 in HIKIND_C [goto OGNAME_C]
else if 6 in HIKIND_C [goto MILSPC_C]
else [goto HINOTYR_C]
```

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0470.00.1 Variable: CHNAME\_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

Earlier I recorded that ^SCNAME is covered by the Children's Health Insurance Program or CHIP. What is the name of the plan?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Children 0-17 with a CHIP plan

Skip Instructions:

<allow 80,RF,DK> [goto CHXCHNG\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0480.00.1 Variable: CHXCHNG\_C Interview Module: Child Content Type: Annual Core

Question Text:

[F1]

Was ^SCNAME's CHIP plan obtained through Healthcare.gov or the ^MARKETPLACE?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
MARKETPLACE	Description	Health Insurance marketplace names
	Instruction	<p>If no state specified below, fill "Health Insurance Marketplace"</p> <p>If state specified below fill:</p> <p>If CA then fill "Health Insurance Marketplace, such as Covered California"</p> <p>If CO then fill "Health Insurance Marketplace, such as Connect for Health Colorado"</p> <p>If CT then fill "Health Insurance Marketplace, such as Access Health CT"</p> <p>If DC then fill "Health Insurance Marketplace, such as DC Health Link"</p> <p>If ID then fill "Health Insurance Marketplace, such as Your Health Idaho"</p> <p>If KY then fill "Health Insurance Marketplace, such as Kynect"</p> <p>If MA then fill "Health Insurance Marketplace, such as Massachusetts Health Connector"</p> <p>If ME then fill "Health Insurance Marketplace, such as CoverME"</p> <p>If MD then fill "Health Insurance Marketplace, such as Maryland Health Connection"</p> <p>If MN then fill "Health Insurance Marketplace, such as MNsure"</p> <p>If NJ then fill "Health Insurance Marketplace, such as GetCoveredNJ"</p> <p>If NV then fill "Health Insurance Marketplace, such as Nevada Health Link"</p> <p>If NM then fill "Health Insurance Marketplace, such as beWellnm"</p> <p>If NY then fill "Health Insurance Marketplace, such as NY State of Health"</p> <p>If PA then fill "Health Insurance Marketplace, such as Pennie"</p> <p>If RI then fill "Health Insurance Marketplace, such as HealthSource RI"</p> <p>If VA then fill "Health Insurance Marketplace, such as Virginia's Insurance Marketplace"</p> <p>If VT then fill "Health Insurance Marketplace, such as Vermont Health Connect"</p> <p>If WA then fill "Health Insurance Marketplace, such as Washington Healthplanfinder"</p>

Response:

1	Yes
2	No
7	Refused
9	Don't Know

**Universe:**

Sample Children 0-17 with a CHIP plan

**Skip Instructions:**

<1,2,RF,DK> [goto CHPREM\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0490.00.1 Variable: CHPREM\_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

A health insurance premium is the amount ^SCNAME or a family member pays each month for health care coverage. Does ^SCNAME or a family member pay a premium for this CHIP plan?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with a CHIP plan

Skip Instructions:

<1,2,RF,DK> [goto CHDEDUC\_C]



2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0500.00.1 Variable: CHDEDUC\_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

A deductible is the amount you have to pay for health care before your health insurance or health coverage plan will start paying your medical bills. Does ^SCNAME's CHIP plan have an annual deductible?

\* **Read if necessary:** *A deductible is different from a copay (copayment).*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with a CHIP plan

Skip Instructions:

```
<1> [goto CHHDHP_C]
<2,RF,DK> if 8 in HIKIND_C [goto OPNAME_C]
  else if 9 in HIKIND_C [goto OGNAMC_C]
  else if 6 in HIKIND_C [goto MILSPC_C]
  else [goto HINOTYR_C]
```

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0510.00.1 Variable: CHHDHP\_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

Is the annual deductible for medical care for this plan less than ^HDHPDED or ^HDHPDED or more?  
If there is a separate deductible for prescription drugs, hospitalization, or out-of-network care, do not include those deductible amounts here.

Fills:

HDHPDED	Description	Deductible threshold (may change in future year)
	Instruction	Fill: \$1,600

Response:

1	Deductible is less than \$1,500
2	Deductible is \$1,500 or more
7	Refused
9	Don't Know

Universe:

Sample Children with a CHIP plan who have a deductible

Skip Instructions:

```
<1,2,RF,DK> if 8 in HIKIND_C [goto OPNAME_C]  
else if 9 in HIKIND_C [goto OGNAME_C]  
else if 6 in HIKIND_C [goto MILSPC_C]  
else [goto HINOTYR_C]
```

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0520.00.1 Variable: OPNAME\_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

Earlier I recorded that ^SCNAME is covered by a state-sponsored plan. What is the name of the plan?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Children 0-17 with a state-sponsored plan

Skip Instructions:

<verbatim,RF,DK> [goto OPXCHNG\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0530.00.1 Variable: OPXCHNG\_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

Was ^SCNAME's state-sponsored plan obtained through Healthcare.gov or the ^MARKETPLACE?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
MARKETPLACE	Description	Health Insurance marketplace names
	Instruction	<p>If no state specified below, fill "Health Insurance Marketplace"</p> <p>If state specified below fill:</p> <p>If CA then fill "Health Insurance Marketplace, such as Covered California"</p> <p>If CO then fill "Health Insurance Marketplace, such as Connect for Health Colorado"</p> <p>If CT then fill "Health Insurance Marketplace, such as Access Health CT"</p> <p>If DC then fill "Health Insurance Marketplace, such as DC Health Link"</p> <p>If ID then fill "Health Insurance Marketplace, such as Your Health Idaho"</p> <p>If KY then fill "Health Insurance Marketplace, such as Kynect"</p> <p>If MA then fill "Health Insurance Marketplace, such as Massachusetts Health Connector"</p> <p>If ME then fill "Health Insurance Marketplace, such as CoverME"</p> <p>If MD then fill "Health Insurance Marketplace, such as Maryland Health Connection"</p> <p>If MN then fill "Health Insurance Marketplace, such as MNsure"</p> <p>If NJ then fill "Health Insurance Marketplace, such as GetCoveredNJ"</p> <p>If NV then fill "Health Insurance Marketplace, such as Nevada Health Link"</p> <p>If NM then fill "Health Insurance Marketplace, such as beWellnm"</p> <p>If NY then fill "Health Insurance Marketplace, such as NY State of Health"</p> <p>If PA then fill "Health Insurance Marketplace, such as Pennie"</p> <p>If RI then fill "Health Insurance Marketplace, such as HealthSource RI"</p> <p>If VA then fill "Health Insurance Marketplace, such as Virginia's Insurance Marketplace"</p> <p>If VT then fill "Health Insurance Marketplace, such as Vermont Health Connect"</p> <p>If WA then fill "Health Insurance Marketplace, such as Washington Healthplanfinder"</p>

Response:

1	Yes
2	No
7	Refused
9	Don't Know

**Universe:**

Sample Children 0-17 with a state-sponsored plan

**Skip Instructions:**

<1,2,RF,DK> [goto OPPREM\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0540.00.1 Variable: OPPREM\_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

A health insurance premium is the amount ^SCNAME or a family member pays each month for health care coverage. Does ^SCNAME or a family member pay a premium for this state-sponsored plan?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with a state-sponsored plan

Skip Instructions:

<1,2,RF,DK> [goto OPDEDUC\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0550.00.1 Variable: OPDEDUC\_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

A deductible is the amount you have to pay for health care before your health insurance or health coverage plan will start paying your medical bills. Does ^SCNAME's state-sponsored plan have an annual deductible?

\* **Read if necessary:** *A deductible is different from a copay (copayment).*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with a state-sponsored plan

Skip Instructions:

```
<1>[goto OPHDHP_C]
<2,RF,DK> if 9 in HIKIND_C [goto OGNAME_C]
  else if 6 in HIKIND_C [goto MILSPC_C]
  else [goto HINOTYR_C]
```

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0560.00.1 Variable: OPHDHP\_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

Is the annual deductible for medical care for this plan less than ^HDHPDED or ^HDHPDED or more?  
If there is a separate deductible for prescription drugs, hospitalization, or out-of-network care, do not include those deductible amounts here.

Fills:

HDHPDED	Description	Deductible threshold (may change in future year)
	Instruction	Fill: \$1,600

Response:

1	Deductible is less than \$1,500
2	Deductible is \$1,500 or more
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with a state-sponsored plan with a deductible

Skip Instructions:

```
<1,2,RF,DK> if 9 in HIKIND_C [goto OGNAMC_C]  
else if 6 in HIKIND_C [goto MILSPC_C]  
else [goto HINOTYR_C]
```



2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0570.00.1 Variable: OGNAME\_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

Earlier I recorded that ^SCNAME is covered by an other government program. What is the name of the plan?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Children 0-17 who have an other government plan

Skip Instructions:

<allow 80,RF,DK> [goto OGXCHNG\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0580.00.1 Variable: OGXCHNG\_C Interview Module: Child Content Type: Annual Core

Question Text:

[F1]

Was ^SCNAME's other government plan obtained through Healthcare.gov or the ^MARKETPLACE?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
MARKETPLACE	Description	Health Insurance marketplace names
	Instruction	<p>If no state specified below, fill "Health Insurance Marketplace"</p> <p>If state specified below fill:</p> <p>If CA then fill "Health Insurance Marketplace, such as Covered California"</p> <p>If CO then fill "Health Insurance Marketplace, such as Connect for Health Colorado"</p> <p>If CT then fill "Health Insurance Marketplace, such as Access Health CT"</p> <p>If DC then fill "Health Insurance Marketplace, such as DC Health Link"</p> <p>If ID then fill "Health Insurance Marketplace, such as Your Health Idaho"</p> <p>If KY then fill "Health Insurance Marketplace, such as Kynect"</p> <p>If MA then fill "Health Insurance Marketplace, such as Massachusetts Health Connector"</p> <p>If ME then fill "Health Insurance Marketplace, such as CoverME"</p> <p>If MD then fill "Health Insurance Marketplace, such as Maryland Health Connection"</p> <p>If MN then fill "Health Insurance Marketplace, such as MNsure"</p> <p>If NJ then fill "Health Insurance Marketplace, such as GetCoveredNJ"</p> <p>If NV then fill "Health Insurance Marketplace, such as Nevada Health Link"</p> <p>If NM then fill "Health Insurance Marketplace, such as beWellnm"</p> <p>If NY then fill "Health Insurance Marketplace, such as NY State of Health"</p> <p>If PA then fill "Health Insurance Marketplace, such as Pennie"</p> <p>If RI then fill "Health Insurance Marketplace, such as HealthSource RI"</p> <p>If VA then fill "Health Insurance Marketplace, such as Virginia's Insurance Marketplace"</p> <p>If VT then fill "Health Insurance Marketplace, such as Vermont Health Connect"</p> <p>If WA then fill "Health Insurance Marketplace, such as Washington Healthplanfinder"</p>

Response:

1	Yes
2	No
7	Refused
9	Don't Know

**Universe:**

Sample Children 0-17 who have an other government plan

**Skip Instructions:**

<1,2,RF,DK> [goto OGPREM\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0590.00.1 Variable: OGPREM\_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

A health insurance premium is the amount ^SCNAME or a family member pays each month for health care coverage. Does ^SCNAME or a family member pay a premium for this other government plan?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who have an other government plan

Skip Instructions:

<1,2,RF,DK> [goto OGDEDUC\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0600.00.1 Variable: OGDEDUC\_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

A deductible is the amount you have to pay for health care before your health insurance or health coverage plan will start paying your medical bills. Does ^SCNAME's other government plan have an annual deductible?

\* **Read if necessary:** *A deductible is different from a copay (copayment).*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with an other government plan

Skip Instructions:

```
<1> [goto OGDHDP_C]
<2,RF,DK> if 6 in HIKIND_C [goto MILSPC_C]
else [goto HINOTYR_C]
```

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0610.00.1 Variable: OGDHP\_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

Is the annual deductible for medical care for this plan less than ^HDHPDED or ^HDHPDED or more?  
If there is a separate deductible for prescription drugs, hospitalization, or out-of-network care, do not include those deductible amounts here.

Fills:

HDHPDED	Description	Deductible threshold (may change in future year)
	Instruction	Fill: \$1,600

Response:

1	Deductible is less than \$1,500
2	Deductible is \$1,500 or more
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with an other government plan with a deductible

Skip Instructions:

<1,2,RF,DK> if 6 in HIKIND\_C [goto MILSPC\_C]  
else [goto HINOTYR\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0620.00.1 Variable: MILSPC\_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

Earlier I recorded that ^SCNAME is covered by military related health care. What types of military related health care ^areisSEX\_C ^heshe\_C covered by?

\* Enter all that apply, separate with commas.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
areisSEX_C	Description	is/are
	Instruction	if GEN_SEX_FINAL[PX_C] in (1,2) fill: "is" elseif GEN_SEX_FINAL[PX_C] in (DK,RF) fill: "are"
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

2	TRICARE (CHAMPUS)
3	CHAMP-VA (do not include CHAMPUS)
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with military related health care

Skip Instructions:

<2-3,RF,DK> [goto HINOTYR\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0630.00.1 Variable: HILAST\_C Interview Module: Child Content Type: Annual Core

Question Text:

How long has it been since ^SCNAME last had health care coverage that paid for doctor's visits or hospital stays?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

0	Never
1	Within the past year (anytime less than 12 months ago)
2	Within the last 2 years (1 year but less than 2 years ago)
3	Within the last 3 years (2 years but less than 3 years ago)
4	Within the last 5 years (3 years but less than 5 years ago)
5	Within the last 10 years (5 years but less than 10 years ago)
6	10 years ago or more
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 without known health insurance and answered no, refused or don't know to the Medicaid probe.

Skip Instructions:

<1> [goto HILASTMY\_C]  
 <2,3> [goto HISTOPJOB\_C]  
 <4,5,6,0,RF,DK> [goto RSNHICOST\_C]



2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0640.00.1 Variable: HILASTMY\_C Interview Module: Child Content Type: Annual Core

Question Text:

In the past 12 months, how many months was ^SCNAME without coverage?

\* If less than 1 month, enter '1'.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

01-12	Range of values
97	Refused
99	Don't Know

Universe:

Sample Children 0-17 without known health insurance who last had insurance at some time within the last 12 months

Skip Instructions:

<1-12,RF,DK> [goto HISTOPJOB\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0650.00.1 Variable: HISTOPJOB\_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

Think about the last time that ^SCNAME did have health care coverage. I am going to read a list of reasons why someone might no longer be enrolled in coverage. Please tell me, yes or no, if this is a reason why ^SCNAME is no longer enrolled in ^hisher\_C last health care plan.

The policyholder retired, lost a job, or changed employer?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who have been uninsured for less than 3 years

Skip Instructions:

<1,2,RF,DK> [goto HISTOPMISS\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0660.00.1 Variable: HISTOPMISS\_C Interview Module: Child Content Type: Annual Core

Question Text:

**\*Read if necessary:** *Is ^SCNAME no longer enrolled in ^hisher\_C last health care plan because...*

A deadline was missed for signing up or paying for ^hisher\_C coverage?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who have been uninsured for less than 3 years

Skip Instructions:

<1,2,RF,DK> [goto HISTOPAGE\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0670.00.1 Variable: HISTOPAGE\_C Interview Module: Child Content Type: Annual Core

Question Text:

**\*Read if necessary:** Is ^SCNAME no longer enrolled in ^hisher\_C last health care plan because...

^HeShe\_C became ineligible because of ^hisher\_C age or because ^heshe\_C left school?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"
HeShe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who have been uninsured for less than 3 years

Skip Instructions:

<1,2,RF,DK> [goto HISTOPCOST\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0680.00.1 Variable: HISTOPCOST\_C Interview Module: Child Content Type: Annual Core

Question Text:

**\*Read if necessary:** *Is ^SCNAME no longer enrolled in ^hisher\_C last health care plan because...*

The cost for the coverage increased?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who have been uninsured for less than 3 years

Skip Instructions:

<1,2,RF,DK> [goto HISTOPELIG\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0690.00.1 Variable: HISTOPELIG\_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

\* **Read if necessary:** *Is ^SCNAME no longer enrolled in ^hisher\_C last health care plan because...*

*^HeShe\_C had Medicaid, CHIP, or other public coverage, but ^werewas\_C no longer eligible?*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"
HeShe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"
werewas_C	Description	was/were
	Instruction	If SEX_FINAL_C=1,2 fill "was" else if SEX_FINAL_C=DK, RF fill "were"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who have been uninsured for less than 3 years

Skip Instructions:

<1,2,RF,DK> [goto RSNHICOST\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0700.00.1 Variable: RSNHICOST\_C Interview Module: Child Content Type: Annual Core

Question Text:

^INSREASONS\_C Is ^SCNAME currently uninsured because coverage is not affordable?

Fills:

INSREASONS_C	Description	RSNHICOST_C Introduction
	Instruction	If HILAST_C=0,4,5,6,RF,DK, fill: "There are many reasons why people do not have health insurance coverage." If HILAST_C=1,2,3, fill: "We just discussed reasons you lost coverage, now I am going to ask you some questions about why ^SCNAME hasn't obtained coverage."
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 without known health insurance and answered no, refused or don't know to the Medicaid probe.

Skip Instructions:

<1,2,RF,DK> [goto RSNHIWANT\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0710.00.1 Variable: RSNHIWANT\_C Interview Module: Child Content Type: Annual Core

Question Text:

There are other reasons that people do not have health insurance coverage. ^PLUSCOSTC ^SCNAME currently uninsured because...

...your family does not need or want coverage for ^SCNAME?

Fills:

PLUSCOSTC	Description	In addition to cost, is/Is
	Instruction	if REASNHICOST_C = 1 then fill "In addition to cost, is" Else fill "Is"
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 without known health insurance and answered no, refused or don't know to the Medicaid probe.

Skip Instructions:

<1,2,RF,DK> [goto RSNHIELIG\_C]



2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0720.00.1 Variable: RSNHIELIG\_C Interview Module: Child Content Type: Annual Core

Question Text:

\* **Read if necessary:** *There are other reasons that people do not have health insurance coverage. ^PLUSCOSTC ^SCNAME currently uninsured because...*

...^heshe\_C ^areisSEX\_C not eligible for coverage?

Fills:

PLUSCOSTC	Description	In addition to cost, is/Is
	Instruction	if REASNHICOST_C = 1 then fill "In addition to cost, is" Else fill "Is"
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"
areisSEX_C	Description	is/are
	Instruction	if GEN.SEX_FINAL[PX_C] in (1,2) fill: "is" elseif GEN.SEX_FINAL[PX_C] in (DK,RF) fill: "are"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 without known health insurance and answered no, refused or don't know to the Medicaid probe

Skip Instructions:

<1,2,RF,DK> [goto RSNHICONF\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0730.00.1 Variable: RSNHICONF\_C Interview Module: Child Content Type: Annual Core

Question Text:

\* **Read if necessary:** *There are other reasons that people do not have health insurance coverage. ^PLUSCOSTC ^SCNAME currently uninsured because...*

...the process of signing up for coverage for ^SCNAME is too difficult or confusing?

Fills:

PLUSCOSTC	Description	In addition to cost, is/Is
	Instruction	if REASNHCOST_C = 1 then fill "In addition to cost, is" Else fill "Is"
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 without known health insurance and answered no, refused or don't know to the Medicaid probe

Skip Instructions:

<1,2,RF,DK> [goto RSNHIMEET\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0740.00.1 Variable: RSNHIMEET\_C Interview Module: Child Content Type: Annual Core

Question Text:

**\*Read if necessary:** *There are other reasons that people do not have health insurance coverage. ^PLUSCOSTC ^SCNAME currently uninsured because...*

...your family cannot find a plan that meets ^SCNAME's needs?

Fills:

PLUSCOSTC	Description	In addition to cost, is/Is
	Instruction	if REASNHICOST_C = 1 then fill "In addition to cost, is" Else fill "Is"
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 without known health insurance and answered no, refused or don't know to the Medicaid probe

Skip Instructions:

<1,2,RF,DK> [goto RSNHIWAIT\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0750.00.1 Variable: RSNHIWAIT\_C Interview Module: Child Content Type: Annual Core

Question Text:

*\*Read if necessary: There are other reasons that people do not have health insurance coverage. ^PLUSCOSTC ^SCNAME currently uninsured because...*

...you applied for coverage for ^SCNAME but it has not started yet?

Fills:

PLUSCOSTC	Description	In addition to cost, is/Is
	Instruction	if REASNHICOST_C = 1 then fill "In addition to cost, is" Else fill "Is"
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 without known health insurance and answered no, refused or don't know to the Medicaid probe

Skip Instructions:

<1,2,RF,DK> [goto RSNHIOTH\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0760.00.1 Variable: RSNHIOTH\_C Interview Module: Child Content Type: Annual Core

Question Text:

Is there another reason that ^SCNAME currently does not have health insurance coverage?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 without known health insurance and answered no, refused or don't know to the Medicaid probe

Skip Instructions:

<1> [goto RSNHIOTHSP\_C]  
<2,RF,DK> [goto FINISH\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0770.00.1 Variable: RSNHIOTHSP\_C Interview Module: Child Content Type: Annual Core

Question Text:

What is the other reason for not having coverage?

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Children 0-17 who have another reason for not having coverage

Skip Instructions:

<allow 80,RF,DK> [goto FINISH\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0780.00.1 Variable: HINOTYR\_C Interview Module: Child Content Type: Annual Core

Question Text:

In the past 12 months, was there any time when ^SCNAME did NOT have ANY health insurance or coverage?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with known health insurance coverage or responded yes to the medicaid probe

Skip Instructions:

<1> [goto HINOTMYR\_C]  
<2,RF,DK> [goto FINISH\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0790.00.1 Variable: HINOTMYR\_C Interview Module: Child Content Type: Annual Core

Question Text:

In the past 12 months, about how many months was ^SCNAME without coverage?

\* If less than 1 month, enter '1'.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

01-12	Range of values
97	Refused
99	Don't Know

Universe:

Sample Children 0-17 with known health insurance coverage and did not have health insurance for some period of time in the past 12 months

Skip Instructions:

<1-12,RF,DK> [goto FINISH\_C]



2024 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0800.00.1 Variable: FINISH\_C Interview Module: Child Content Type: Annual Core

Question Text:

\* The Sample Child health insurance section is now complete.

\* Enter '1' to continue.

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

Sample Children 0-17

Skip Instructions:

<1> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

PAY: Difficulty Paying for Health Care

Question ID: PAY.0010.00.1 Variable: PAYINTRO\_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

Now I am going to ask you about your family's medical bills. Include bills for doctors, dentists, hospitals, therapists, medication, equipment, and nursing home or home care.

\* Enter '1' to continue.

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

Sample Children 0-17 living in same family as the Sample Adult when the PAY section of the Sample Adult has not been completed  
or Sample Children living in same family as Sample Adult when the Sample Child respondent is not the Sample Adult and the Sample Adult answered don't or refused to PAYBLL12M\_A and PAYNOBLLNW\_A  
or Sample children living in different families than the Sample Adult.

Skip Instructions:

<1> [goto PAYBILL12M\_C]

Replicate To:

PAYINTRO_A
------------

2024 National Health Interview Survey (NHIS) Questionnaire

PAY: Difficulty Paying for Health Care

Question ID: PAY.0020.00.1 Variable: PAYBLL12M\_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

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

\* **Read if necessary:** *Include bills for doctors, dentists, hospitals, therapists, medication, equipment, nursing home or home care.*

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 living in same family as the Sample Adult when the PAY section of the Sample Adult has not been completed  
or Sample Children living in same family as Sample Adult when the Sample Child respondent is not the Sample Adult and the Sample Adult answered don't or refused to PAYBILL12M\_A and PAYNOBLLNW\_A  
or Sample children living in different families than the Sample Adult.

Skip Instructions:

<1,RF,DK> [goto PAYNOBLLNW\_C]  
<2> [goto PAYWORRY\_C]

Replicate To:

PAYBLL12M\_A

2024 National Health Interview Survey (NHIS) Questionnaire

PAY: Difficulty Paying for Health Care

Question ID: PAY.0030.00.1 Variable: PAYNOBLLNW\_C Interview Module: Child Content Type: Annual Core

Question Text:

Does anyone in your family currently have any medical bills that you are unable to pay at all?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who said someone in their family had trouble paying bills and Sample Adult and Sample Child are in the same family and Sample Adult PAY section has not been completed OR the Sample Child and Sample Adult are not in the same family AND said anyone in their family had problems paying medical bills in the past 12 months or refused or didn't know if they had problems paying medical bills.

Skip Instructions:

<1,2,RF,DK> [goto PAYWORRY\_C]

Replicate To:

PAYNOBLLNW\_A

2024 National Health Interview Survey (NHIS) Questionnaire

PAY: Difficulty Paying for Health Care

Question ID: PAY.0040.00.1 Variable: PAYWORRY\_C Interview Module: Child Content Type: Annual Core

Question Text:

If ^SCNAME gets sick or has an accident, how worried are you that your family will be able to pay ^hisher\_C medical bills? Are you very worried, somewhat worried, or not at all worried?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"

Response:

1	Very worried
2	Somewhat worried
3	Not at all worried
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<1-3,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

CVL: Long-COVID

Question ID: CVL.0010.00.3 Variable: CVDINTRO\_C Interview Module: Child Content Type: Sponsored Content

Question Text:

The next set of questions are about coronavirus or COVID-19.

\* Enter '1' to continue.

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

Sample Children 0-17

Skip Instructions:

<1> [goto EVERCOVID\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

CVL: Long-COVID

Question ID: CVL.0020.00.3 Variable: EVERCOVID\_C Interview Module: Child Content Type: Sponsored Content

Question Text:

Has ^SCNAME ever had COVID-19?

\* **Read if necessary:** Include being told by a doctor or other health professional that ^SCNAME had or likely had COVID-19. Also include antibodies or blood tests as well as other forms of testing for COVID-19, such as a nasal swabbing or throat swabbing. Also include if ^SCNAME had close contact with someone who had COVID-19 and ^SCNAME had symptoms.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<1> [goto LONGCOVID1\_C]  
<2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

CVL: Long-COVID

Question ID: CVL.0030.00.3 Variable: LONGCOVID1\_C Interview Module: Child Content Type: Sponsored Content

Question Text:

Did ^SCNAME have any symptoms lasting 3 months or longer that ^heshe\_C did not have before having COVID-19?

*\* Read if necessary: Long term symptoms may include tiredness or fatigue, difficulty thinking, concentrating, forgetfulness or memory problems, sometimes referred to as "brain fog," difficulty breathing or shortness of breath, joint or muscle pain, fast-beating or pounding heart (also known as heart palpitations), chest pain, dizziness on standing, smell or taste loss or alteration in ability to smell or taste, ^menstrual and inability to exercise.*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"
menstrual	Description	menstrual changes
	Instruction	If GEN.SEX_FINAL=2,RF,DK and GEN.AGE_FINAL=9-58, fill "menstrual changes," else fill blank

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who have ever had COVID-19

Skip Instructions:

<1> [goto SYMPNOW1\_C]  
<2,RF,DK> [goto next section]



2024 National Health Interview Survey (NHIS) Questionnaire

CVL: Long-COVID

Question ID: CVL.0040.00.3 Variable: SYMPNOW1\_C Interview Module: Child Content Type: Sponsored Content

Question Text:

Does ^SCNAME have symptoms NOW?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who have ever had COVID-19 and had symptoms lasting 3 months or longer

Skip Instructions:

<1> [goto LCVDACT\_C]  
<2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

CVL: Long-COVID

Question ID: CVL.0050.00.3 Variable: LCVDACT\_C Interview Module: Child Content Type: Sponsored Content

Question Text:

How much do these long-term symptoms reduce ^SCNAME's ability to carry out day-to-day activities compared with the time before ^SCNAME had COVID-19? Would you say not at all, a little, or a lot?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Not at all
2	A little
3	A lot
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with COVID-19 symptoms lasting 3 months or longer that they did not have before having coronavirus or COVID-19 and they have symptoms now

Skip Instructions:

<1-3,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

UTZ: Utilization

Question ID: UTZ.0010.00.1 Variable: UTZINTRO\_C Interview Module: Child Content Type: Annual Core

Question Text:

^UTZINTRO2\_C

\* Enter '1' to continue.

Fills:

UTZINTRO2_C	Description	UTZ introduction
	Instruction	If AGE LT 1 fill "I would like to ask you about ^SCNAME's health care." else fill "Now, I would like to ask you about ^SCNAME's health care, not including dental care."
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

Sample Children 0-17

Skip Instructions:

<1> [goto LASTDR\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

UTZ: Utilization

Question ID: UTZ.0020.00.1 Variable: LASTDR\_C Interview Module: Child Content Type: Annual Core

Question Text:

About how long has it been since ^SCNAME last saw a doctor or other health professional about ^his/her\_C health?

\* **Read if necessary:** Do not include appointments by video or phone.

\* **Read if necessary:** Include doctors seen while a patient in a hospital.

\* **Read if necessary:** Do not include dental care.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
his/her_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"

Response:

0	Never
1	Within the past year (anytime less than 12 months ago)
2	Within the last 2 years (1 year but less than 2 years ago)
3	Within the last 3 years (2 years but less than 3 years ago)
4	Within the last 5 years (3 years but less than 5 years ago)
5	Within the last 10 years (5 years but less than 10 years ago)
6	10 years ago or more
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<1-6> [goto WELLNESS\_C]  
<0,RF,DK> [goto USUALPL\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

UTZ: Utilization

Question ID: UTZ.0030.00.1 Variable: WELLNESS\_C Interview Module: Child Content Type: Annual Core

Question Text:

Was this a well ^babychild visit, physical, or general purpose check-up?

\* **Read if necessary:** This kind of visit typically includes: height and weight measurements, vaccinations, and vision or hearing checks. The doctor or other health professional may also discuss topics related to ^SCNAME's health such as ^hisher\_C growth and development, diet and exercise, safety, and sleep patterns. These visits are usually scheduled in advance and occur when ^hesheistheyare\_C not sick.

\* **Read if necessary:** If a wellness exam was combined with a sick care visit, include this visit.

\* **Read if necessary:** An obstetrician/gynecologist (OB/GYN) may perform this visit.

Fills:

babychild	Description	baby/child
	Instruction	If AGE LE 2 fill "baby"; else if AGE GE 3 or AGE IN ('DK','RF') fill "child"
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"
hesheistheyare_C	Description	he is/she is/they are
	Instruction	If SEX_FINAL_C=1 fill: "he is" If SEX_FINAL_C=2 fill: "she is" If SEX_FINAL_C =blank fill: "they are"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who have seen a doctor

Skip Instructions:

<1> [goto USUALPL\_C]  
<2,RF,DK> [goto WELLVIS\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

UTZ: Utilization

Question ID: UTZ.0040.00.1 Variable: WELLVIS\_C Interview Module: Child Content Type: Annual Core

Question Text:

About how long has it been since ^SCNAME last saw a doctor or other health professional for a well ^babychild visit, physical, or general purpose check-up?

\* **Read if necessary:** This kind of visit typically includes: height and weight measurements, vaccinations, and vision or hearing checks. The doctor or other health professional may also discuss topics related to ^SCNAME's health such as ^hisher\_C growth and development, diet and exercise, safety, and sleep patterns. These visits are usually scheduled in advance and occur when ^hesheistheyare\_C not sick.

\* **Read if necessary:** If a wellness exam was combined with a sick care visit, include this visit.

\* **Read if necessary:** An obstetrician/gynecologist (OB/GYN) may perform this visit.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
babychild	Description	baby/child
	Instruction	If AGE LE 2 fill "baby"; else if AGE GE 3 or AGE IN ('DK','RF') fill "child"
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"
hesheistheyare_C	Description	he is/she is/they are
	Instruction	If SEX_FINAL_C=1 fill: "he is" If SEX_FINAL_C=2 fill: "she is" If SEX_FINAL_C =blank fill: "they are"

Response:

0	Never
1	Within the past year (anytime less than 12 months ago)
2	Within the last 2 years (1 year but less than 2 years ago)
3	Within the last 3 years (2 years but less than 3 years ago)
4	Within the last 5 years (3 years but less than 5 years ago)
5	Within the last 10 years (5 years but less than 10 years ago)
6	10 years ago or more
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 were reported to have seen a doctor, but the last visit was not a wellness visit or they didn't know or refused whether it was a wellness visit

Skip Instructions:

<0-6,RF,DK> [goto USUALPL\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

UTZ: Utilization

Question ID: UTZ.0050.00.1 Variable: USUALPL\_C Interview Module: Child Content Type: Annual Core

Question Text:

Is there a place that ^SCNAME USUALLY goes to if ^hesheistheyare\_C sick and needs health care?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hesheistheyare_C	Description	he is/she is/they are
	Instruction	If SEX_FINAL_C=1 fill: "he is" If SEX_FINAL_C=2 fill: "she is" If SEX_FINAL_C =blank fill: "they are"

Response:

1	Yes
2	There is NO place
3	There is MORE THAN ONE place
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<1,3,RF,DK> [goto USPLKIND\_C]  
<2> [goto RETURGIN\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

UTZ: Utilization

Question ID: UTZ.0060.00.1 Variable: USPLKIND\_C Interview Module: Child Content Type: Annual Core

Question Text:

What kind of place ^isitgomostoften - a doctor's office or health center; an urgent care center, a clinic in a drug store or grocery store; a hospital emergency room; or some other place?

\* **Read if necessary:** A doctor's office or health center is a place where ^heshe\_C see^s the same doctor or the same group of doctors every visit, where you usually need to make an appointment ahead of time, and where ^hisher\_C medical records are on file.

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

Fills:

isitgomostoften	Description	is it/^doesheshedothey go to most often
	Instruction	If USUALPL_C=1, fill: "is it" else fill: "^doesheshedothey go to most often"
doesheshedothey	Description	does he/does she/do they
	Instruction	If SEX=1 fill: "does he" If SEX=2 fill: "does she" If SEX IN ('DK','RF') fill: "do they"
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"
s	Description	s
	Instruction	if SEX_FINAL[PX_C]=1,2 fill "s" else fill blank
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"

Response:

1	A doctor's office or health center
2	Urgent care center or clinic in a drug store or grocery store
3	Hospital emergency room
4	Some other place
5	Does not go to one place most often
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with 1+ usual place of care or who don't know or refused to answer if they have a usual place of care

Skip Instructions:

<1-5,RF,DK> [goto RETURGINT\_C]



2024 National Health Interview Survey (NHIS) Questionnaire

UTZ: Utilization

Question ID: UTZ.0065.00.1 Variable: RETURGIN\_T\_C Interview Module: Child Content Type: Annual Core

Question Text:

The next questions are about ^SCNAME's use of retail health clinics and urgent care centers.

\* Enter '1' to continue.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

Sample Children 0-17

Skip Instructions:

<1> [goto RETAILHC12M\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

UTZ: Utilization

Question ID: UTZ.0070.00.1 Variable: RETAILHC12M\_C Interview Module: Child Content Type: Annual Core

Question Text:

Retail health clinics are located in a pharmacy, grocery store, or supercenter.

During the past 12 months, how many times has ^SCNAME gone to a retail health clinic about ^hisher\_C health?

\* Enter 96 if number is 96 or greater.

\* **Read if necessary:** Common examples of retail health clinics include places like CVS Minute Clinic, Walgreens Health Clinic, or clinics in a Walmart or Kroger supermarket. These clinics can provide common services such as certain vaccinations, as well as testing for or treatment of minor uncomplicated illnesses.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"

Response:

00-96	Range of values
97	Refused
99	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<0-39,RF,DK> [goto URGCC12M\_C]  
<40-96> [goto ERR1\_RETAILHC12M\_C]

Soft Edit:

Check Text	Check Description	Check Text
ERR1_RETAILHC12M_C	Retail health clinic 40-96 times	{signal }  ^RETAILHC12M_C is an unusually large number. Did ^SCNAME visit a retail health clinic center about ^hisher_C health ^RETAILHC12M_C times in the past 12 months?  Please verify.

2024 National Health Interview Survey (NHIS) Questionnaire

UTZ: Utilization

Question ID: UTZ.0075.00.1 Variable: URGCC12M\_C Interview Module: Child Content Type: Annual Core

Question Text:

An urgent care center is located in its own building or space. These centers can provide services such as x-rays and stitches.

During the past 12 months, how many times has ^SCNAME gone to an urgent care center about ^hisher\_C health?

\* Enter 96 if number is 96 or greater.

\* Read if necessary: An urgent care center can provide common vaccinations, testing for or treatment of illnesses. They can also treat illnesses or injuries that require immediate care but are not serious enough to require a visit to a hospital emergency room.

\* Read if necessary: This is different from a hospital emergency room.

\* Read if necessary: These centers provide care during business hours, evenings, and weekends.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"

Response:

00-96	Range of values
97	Refused
99	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<0-39,RF,DK> [goto EMERGE12M\_C]  
<40-96> [goto ERR1\_URGCC12M\_C]

Soft Edit:

Check Text	Check Description	Check Text
ERR1_URGCC12M_C	Urgent care 40-96 times	{signal }  ^URGCC12M_C is an unusually large number. Did ^SCNAME visit an urgent care center about ^hisher_C health ^URGCC12M_C times in the past 12 months?  Please verify.

2024 National Health Interview Survey (NHIS) Questionnaire

UTZ: Utilization

Question ID: UTZ.0080.00.1 Variable: EMERGE12M\_C Interview Module: Child Content Type: Annual Core

Question Text:

During the past 12 months, how many times has ^SCNAME gone to a hospital emergency room about ^hisher\_C health?

\* **Read if necessary:** *This includes emergency room visits that resulted in a hospital admission.*

\* **Enter '96' if number is 96 or more.**

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"

Response:

00-95	0-95 times
96	96+ times
97	Refused
99	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<0-39,RF,DK> if GEN.AGE\_FINAL GE 001 [goto HOSPONGT\_C]  
else [goto MEDDL12M\_C]  
<40-96> [goto ERR1\_EMERGE12M\_C]

Soft Edit:

Check Text	Check Description	Check Text
ERR1_EMERGE12M_C	ER 40-96 times	{signal }  ^EMERGE12M_C is an unusually large number. Did ^SCNAME visit a hospital emergency room about ^hishertheir health ^EMERGE12M_C times in the past 12 months?  Please verify.

2024 National Health Interview Survey (NHIS) Questionnaire

UTZ: Utilization

Question ID: UTZ.0090.00.1 Variable: HOSPONGT\_C Interview Module: Child Content Type: Annual Core

Question Text:

During the past 12 months, has ^SCNAME been hospitalized overnight? ^PAST12MER\_C

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
PAST12MER_C	Description	Do not include an overnight stay in the emergency room.
	Instruction	If ((EMERGE12M_C GE '01' and EMERGE12M_C LE '96') or EMERGE12M_C='RF','DK'): Fill: "Do not include an overnight stay in the emergency room."

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 1-17

Skip Instructions:

<1,2,RF,DK> [goto MEDDL12M\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

UTZ: Utilization

Question ID: UTZ.0100.00.1 Variable: MEDDL12M\_C Interview Module: Child Content Type: Annual Core

Question Text:

During the past 12 months, has medical care BEEN DELAYED for ^SCNAME because of the cost?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<1,2,RF,DK> [goto MEDNG12M\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

UTZ: Utilization

Question ID: UTZ.0110.00.1 Variable: MEDNG12M\_C Interview Module: Child Content Type: Annual Core

Question Text:

During the past 12 months, was there any time when ^SCNAME needed medical care, but DID NOT GET IT because of the cost?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<1,2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

TLH: Telehealth

Question ID: TLH.0010.00.1 Variable: VIRAPP12M\_C Interview Module: Child Content Type: Annual Core

Question Text:

During the past 12 months, has ^SCNAME had an appointment with a doctor, nurse, or other health professional by video or by phone?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<1,2,RF,DK> [goto next section]



2024 National Health Interview Survey (NHIS) Questionnaire

PMD: Prescription medications

Question ID: PMD.0010.00.1 Variable: RX12M\_C Interview Module: Child Content Type: Annual Core

Question Text:

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

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<1> [goto RXDL12M\_C]  
<2,RF,DK> [goto RXDG12M\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

PMD: Prescription medications

Question ID: PMD.0020.00.1 Variable: RXDL12M\_C Interview Module: Child Content Type: Annual Core

Question Text:

During the past 12 months, did you DELAY filling a prescription for ^SCNAME to save money?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who have taken prescription medication in the past 12 months

Skip Instructions:

<1,2,RF,DK> [goto RXDG12M\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

PMD: Prescription medications

Question ID: PMD.0030.00.1 Variable: RXDG12M\_C Interview Module: Child Content Type: Annual Core

Question Text:

During the past 12 months, was there any time when ^SCNAME needed prescription medication, but DID NOT GET IT because of the cost?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<1,2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

IMM: Immunization

Question ID: IMM.0001.00.1 Variable: FLUINTRO\_C Interview Module: Child Content Type: Annual Core

Question Text:

There are currently vaccines available for seasonal influenza and coronavirus or COVID-19. I will first ask you questions about seasonal flu vaccination and then about coronavirus or COVID-19 vaccination.

\* Enter '1' to continue.

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

Sample Children 0-17

Skip Instructions:

<1> [goto SHTFLU12M\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

IMM: Immunization

Question ID: IMM.0010.00.1 Variable: SHTFLU12M\_C Interview Module: Child Content Type: Annual Core

Question Text:

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

\* **Read if necessary:** *A flu vaccination is usually given in the fall and protects against influenza for the flu season.*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<1> [goto SHTFLUNUM\_C]  
<2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

IMM: Immunization

Question ID: IMM.0020.00.1 Variable: SHTFLUNUM\_C Interview Module: Child Content Type: Annual Core

Question Text:

During the past 12 months, how many flu vaccinations has ^SCNAME received?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	1 vaccination
2	2 or more vaccinations
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who have had a flu shot in the past 12 months

Skip Instructions:

<1,2> [goto FLUVAC1M\_C]  
<RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

IMM: Immunization

Question ID: IMM.0030.01.1 Variable: FLUVAC1M\_C Interview Module: Child Content Type: Annual Core

Question Text:

\* 1 of 2

During what month and year did ^SCNAME receive ^hisher\_C most recent flu vaccine?

\* Enter month of most recent flu vaccine.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"

Response:

01	January
02	February
03	March
04	April
05	May
06	June
07	July
08	August
09	September
10	October
11	November
12	December
97	Refused
99	Don't Know

Universe:

Sample Children 0-17 who have had one or more shots in the past 12 months

Skip Instructions:

<1-12,DK> [goto FLUVAC1Y\_C]  
 <RF> if SHTFLUNUM\_C=2 [goto FLUVAC2M\_C]  
 else if SHTFLUNUM\_C=1 [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

IMM: Immunization

Question ID: IMM.0030.02.1 Variable: FLUVAC1Y\_C Interview Module: Child Content Type: Annual Core

Question Text:

\* 2 of 2

\* Enter year of most recent flu vaccine.

Response:

Year	Year
9997	Refused
9999	Don't Know

Universe:

Sample Children 0-17 who have had one or more shots in the past 12 months and gave month/don't know month of flu shot

Skip Instructions:

```
<current year, current year-1,RF,DK> and SHTFLUNUM_C = 2 [goto FLUVAC2M_C]
else [goto next section]
if FLUVAC1M_C and FLUVAC1Y_C = a future date [goto ERR1_FLUVAC1Y_C];
if FLUVAC1M_C and FLUVAC1Y_C = a date prior to birth [goto ERR2_FLUVAC1Y_C];
if FLUVAC1M_C and FLUVAC1Y_C = a date prior to 12 months ago [goto ERR3_FLUVAC1Y_C]
```

Hard Edit:

Check Text	Check Description	Check Text
ERR1_FLUVAC1Y_C	1st flu vaccine in future	{check } Future date invalid
ERR3_FLUVAC1Y_C	1st flu vaccine before 12 mos	{check } Date before 12 months ago
ERR2_FLUVAC1Y_C	1st flu vaccine before dob	{check } Date prior to birth



2024 National Health Interview Survey (NHIS) Questionnaire

IMM: Immunization

Question ID: IMM.0040.01.1 Variable: FLUVAC2M\_C Interview Module: Child Content Type: Annual Core

Question Text:

\* 1 of 2

During what month and year did ^SCNAME receive the flu vaccine before that one?

\* Enter month of the flu vaccine.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

01	January
02	February
03	March
04	April
05	May
06	June
07	July
08	August
09	September
10	October
11	November
12	December
97	Refused
99	Don't Know

Universe:

Sample Children 0-17 who have had two or more flu shots in the past 12 months

Skip Instructions:

<1-12,DK> [goto FLUVAC2Y\_C]  
<RF> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

IMM: Immunization

Question ID: IMM.0040.02.1 Variable: FLUVAC2Y\_C Interview Module: Child Content Type: Annual Core

Question Text:

\* 2 of 2

\* Enter year of next most recent flu vaccine.

Response:

Year	Year
9997	Refused
9999	Don't Know

Universe:

Sample Children 0-17 who have had two or more flu shots and gave month/don't know month of 2nd vaccine dose

Skip Instructions:

<current year, current year-1,RF,DK> [goto next section]  
 If FLUVAC2M\_C and FLUVAC2Y\_C = a date in the future [goto ERR1\_FLUVAC2Y\_C]  
 If FLUVAC2M\_C and FLUVAC2Y\_C = a date prior to birth [goto ERR2\_FLUVAC2Y\_C]  
 If FLUVAC2M\_C and FLUVAC2Y\_C = a date prior to 12 months ago [goto ERR3\_FLUVAC2Y\_C]  
 If FLUVAC2M\_C and FLUVAC2Y\_C = a date more recent than answer given in (FLUVAC1M\_C and FLUVA1Y\_C) [goto ERR4\_FLUVAC2Y\_C]

Hard Edit:

Check Text	Check Description	Check Text
ERR2_FLUVAC2Y_C	2nd flu vaccine before dob	{check }  Date prior to birth
ERR3_FLUVAC2Y_C	2nd flu vaccine before 12 mos	{check }  Date before 12 months ago
ERR1_FLUVAC2Y_C	2nd flu vaccine in future	{check }  Future date invalid

Soft Edit:

Check Text	Check Description	Check Text
ERR4_FLUVAC2Y_C	2nd flu vaccine after 1st flu vaccine	{check }  The date entered for the second most recent flu vaccine is after the date of the most recent flu vaccine.  Please verify.

2024 National Health Interview Survey (NHIS) Questionnaire

CVV: COVID-19 vaccination

Question ID: CVV.0010.00.3 Variable: SHTCVD191\_C Interview Module: Child Content Type: Sponsored Content

Question Text:

The next questions are about coronavirus or COVID-19 vaccination.

Has ^SCNAME had at least one dose of a COVID-19 vaccination?

^COVIDAGES

*\*Read if necessary: COVID-19 vaccines approved for use in the United States are made by Pfizer-BioNTech, also called Comirnaty® (koe-mir'-na-tee), Moderna, also called Spikevax®, Johnson and Johnson, and Novavax. Approved vaccines vary by age.*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
COVIDAGES	Description	Read if necessary fills for COVID vaccination availability by age
	Instruction	If GEN.AGE_FINAL[PX_C] lt 5, fill: "* Read if necessary: The COVID-19 vaccination has been available for children under the age of 5 since June 2022." If GEN.AGE_FINAL[PX_C] ge 5 and GEN.AGE_FINAL[PX_C] le 11, fill: "* Read if necessary: The COVID-19 vaccination has been available for children between the ages of 5 and 11 since November 2021." If GEN.AGE_FINAL[PX_C] ge 12 and GEN.AGE_FINAL[PX_C] le 15, fill: "* Read if necessary: The COVID-19 vaccination has been available for children between the ages of 12 and 15 since May 2021." If GEN.AGE_FINAL[PX_C] ge 16 and GEN.AGE_FINAL[PX_C] le 17, fill: "* Read if necessary: The COVID-19 vaccination has been available for children between the ages of 16 and 17 since 2020."

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<1> [goto SHTCVD19NM2\_C]  
<2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

CVV: COVID-19 vaccination

Question ID: CVV.0020.00.3 Variable: SHTCVD19NM2\_C Interview Module: Child Content Type: Sponsored Content

Question Text:

How many COVID-19 vaccinations has ^SCNAME received?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	1 vaccination
2	2 vaccinations
3	3 or more vaccinations
7	Refused
9	Don't Know

Universe:

Sample Children who have received at least one COVID-19 vaccination

Skip Instructions:

<1-3> [goto CVDVAC1M2\_C]  
<RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

CVV: COVID-19 vaccination

Question ID: CVV.0030.01.3 Variable: CVDVAC1M2\_C Interview Module: Child Content Type: Sponsored Content

Question Text:

\* 1 of 2

During what month and year did ^SCNAME receive ^hisher\_C MOST RECENT COVID-19 vaccination?

\* Enter month of most recent COVID-19 vaccination.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"

Response:

01	January
02	February
03	March
04	April
05	May
06	June
07	July
08	August
09	September
10	October
11	November
12	December
97	Refused
99	Don't Know

Universe:

Sample Children who have had one or more COVID-19 vaccinations

Skip Instructions:

<1-12,DK> [goto CVDVAC1Y2\_C]  
 <RF> if AGE LE 4 [goto SHOTTYPE2\_C]  
 else [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

CVV: COVID-19 vaccination

Question ID: CVV.0030.02.3 Variable: CVDVAC1Y2\_C Interview Module: Child Content Type: Sponsored Content

Question Text:

\* 2 of 2

\* Enter year of most recent COVID-19 vaccination.

Response:

2000-2030	Range of values
9997	Refused
9999	Don't Know

Universe:

Sample Children who gave month of most recent COVID-19 vaccination or don't know

Skip Instructions:

```
<current year, current year-1, current year-2,RF,DK> if GEN.AGE_FINAL[PX_C] le 4 [goto SHOTTYPE2_C]; else [goto next section]
if CVDVAC1M2_C and CVDVAC1Y2_C = a future date [goto ERR1_CVDVAC1Y2_C];
if CVDVAC1M2_C and CVDVAC1Y2_C = a date prior to birth [goto ERR2_CVDVAC1Y2_C];
if CVDVAC1M2_C and CVDVAC1Y2_C = a date prior to 2020 [goto ERR3_CVDVAC1Y2_C];
if GEN.AGE_FINAL[PX_C] ge 16 and GEN.AGE_FINAL[PX_C] le 17 and CVDVAC1M2_C=1-11 and CVDVAC1Y2_C=2020 [goto ERR4_CVDVAC1Y2_C]
if GEN.AGE_FINAL[PX_C] ge 12 and GEN.AGE_FINAL[PX_C] le 15 and CVDVAC1M2_C and CVDVAC1Y2_C = date before May 2021 [goto ERR5_CVDVAC1Y2_C]
if GEN.AGE_FINAL[PX_C] ge 5 and GEN.AGE_FINAL[PX_C] le 11 and CVDVAC1M2_C and CVDVAC1Y2_C = date before Nov 2021 [goto ERR6_CVDVAC1Y2_C]
if GEN.AGE_FINAL[PX_C] lt 5 and CVDVAC1M2_C and CVDVAC1Y2_C = date before June 2022 [goto ERR7_CVDVAC1Y2_C]
```

Hard Edit:

Check Text	Check Description	Check Text
ERR1_CVDVAC1Y2_C	Most recent COVID-19 vaccination in future	{check }  Future date invalid.  Please correct.
ERR2_CVDVAC1Y2_C	Most recent COVID-19 vaccination before DOB	{check }  Date prior to birth.  Please correct.
ERR3_CVDVAC1Y2_C	Most recent COVID-19 vaccination before 2020	{check }  Date before 2020.  Please correct.

**Soft Edit:**

Check Text	Check Description	Check Text
ERR4_CVDVAC1Y2_C	Sample Child is 16-17 and date of most recent COVID-19 vaccination Jan-Nov 2020	{signal }  Date before December 2020 reported. Please verify and make corrections if necessary.
ERR5_CVDVAC1Y2_C	Sample Child is 12-15 and date of most recent COVID-19 vaccination before May 2021	{signal }  Date before May 2021 reported. Please verify and make corrections if necessary.
ERR6_CVDVAC1Y2_C	Sample Child is 5-11 and date of most recent COVID-19 vaccination before November 2021	{signal }  Date before November 2021 reported. Please verify and make corrections if necessary.
ERR7_CVDVAC1Y2_C	Sample Child is under 5 and date of most recent COVID-19 vaccination before June 2022	{signal }  Date before June 2022 reported. Please verify and make corrections if necessary.

2024 National Health Interview Survey (NHIS) Questionnaire

CVV: COVID-19 vaccination

Question ID: CVV.0050.00.3 Variable: SHOTTYPE2\_C Interview Module: Child Content Type: Sponsored Content

Question Text:

^FIRST\_C brand of COVID-19 vaccine did ^SCNAME receive?

*\*Read if necessary: COVID-19 vaccines approved for use in the United States are made by Pfizer-BioNTech, also called Comirnaty® (koe-mir'-na-tee), Moderna, also called Spikevax®, Johnson and Johnson, and Novavax. Approved vaccines vary by age.*

Fills:

FIRST_C	Description	For first shot, which/Which
	Instruction	If SHTCVD19NM2_C=2-3, fill "For ^hisher_C first shot, which" else fill "Which"
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Pfizer-BioNTech Comirnaty® shot
2	Moderna Spikevax® shot
3	Johnson and Johnson (Janssen) shot
4	Novavax shot
5	One of the brands that requires two initial shots, but not sure which brand
6	None of these brands
7	Refused
9	Don't Know

Universe:

Sample Children 0-4 who had at least one COVID-19 vaccination

Skip Instructions:

<1-6,RF,DK> [goto next section]



2024 National Health Interview Survey (NHIS) Questionnaire

MHC: Mental health care

Question ID: MHC.0010.00.1 Variable: MHRX\_C Interview Module: Child Content Type: Annual Core

Question Text:

During the past 12 months, did ^SCNAME take any prescription medication to help with ^hisher\_C emotions, concentration, behavior or mental health?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 2-17

Skip Instructions:

<1,2,RF,DK> [goto MHTHRPY\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

MHC: Mental health care

Question ID: MHC.0020.00.1 Variable: MHTHRPY\_C Interview Module: Child Content Type: Annual Core

Question Text:

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

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 2-17

Skip Instructions:

<1,2,RF,DK> [goto MTHDLY\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

MHC: Mental health care

Question ID: MHC.0030.00.1 Variable: MTHDLY\_C Interview Module: Child Content Type: Annual Core

Question Text:

During the past 12 months, has ^SCNAME been DELAYED in getting counseling or therapy from a mental health professional because of the cost?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 2-17

Skip Instructions:

<1,2,RF,DK> [goto MTHND\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

MHC: Mental health care

Question ID: MHC.0040.00.1 Variable: MHTHND\_C Interview Module: Child Content Type: Annual Core

Question Text:

During the past 12 months, was there any time when ^SCNAME needed counseling or therapy from a mental health professional, but DID NOT GET IT because of the cost?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 2-17

Skip Instructions:

<1,2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

INJ: Injury

Question ID: INJ.0010.00.2 Variable: INJINTRO\_C Interview Module: Child Content Type: Rotating Core

Question Text:

The next set of questions asks about all types of injuries. People can be injured accidentally or on purpose. They may hurt themselves or others may cause them to be hurt.

\* Enter '1' to continue.

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

Sample children 0-17

Skip Instructions:

<1> [goto ANYINJURY\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INJ: Injury

Question ID: INJ.0020.00.2 Variable: ANYINJURY\_C Interview Module: Child Content Type: Rotating Core

Question Text:

During the past 3 months, did ^SCNAME have an accident or an injury where any part of ^hisher\_C body was hurt?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample children 0-17

Skip Instructions:

<1> [goto INJLIMIT\_C]  
<2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

INJ: Injury

Question ID: INJ.0030.00.2 Variable: INJLIMIT\_C Interview Module: Child Content Type: Rotating Core

Question Text:

Did any of these injuries limit ^SCNAME's usual activities for at least 24 hours after the injury occurred?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample children 0-17 who had an injury in past 3 months

Skip Instructions:

<1> [goto NUMINJ\_C]  
<2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

INJ: Injury

Question ID: INJ.0040.00.2 Variable: NUMINJ\_C Interview Module: Child Content Type: Rotating Core

Question Text:

For the next questions, please think only about the significant injuries that occurred during the past 3 months. By significant, I mean those injuries that limited ^SCNAME's usual activities for at least 24 hours after the injury occurred.

During the past 3 months, how many times did ^SCNAME have a significant injury?

\* Enter '96' if number is 96 or greater.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

01-96	Range of values
97	Refused
99	Don't Know

Universe:

Sample Children 0-17 reported injuries in past 3 months which limited activities for at least 24 hours

Skip Instructions:

<1-9,RF,DK> [goto INJHOME\_C]  
 <10-96> [goto ERR1\_NUMINJ\_C]

Soft Edit:

Check Text	Check Description	Check Text
ERR1_NUMINJ_C	High number of injuries	{signal }  ^NUMINJ_C is an unusually large number.  Please verify.



2024 National Health Interview Survey (NHIS) Questionnaire

INJ: Injury

Question ID: INJ.0050.00.2 Variable: INJHOME\_C Interview Module: Child Content Type: Rotating Core

Question Text:

During the past 3 months, did ^siginj\_C occur while ^SCNAME was at ^hisher\_C home?

\* **Read if necessary:** *Include the yards, garage, basement, and other places on the home property.*

Fills:

siginj_C	Description	the significant injury/any significant injuries
	Instruction	If NUMINJ_C=1, fill: "the significant injury" elseif NUMINJ_C gt 1, fill: "any significant injuries" elseif NUMINJ_C in (DK,RF), fill: "any significant injuries"
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 reported injuries in past 3 months which limited activities for at least 24 hours

Skip Instructions:

```
<1> if NUMINJ_C=1 and GEN.AGE_FINAL le 2 [goto INJFALL_C]
elseif NUMINJ_C=1 and GEN.AGE_FINAL ge 3 [goto INJSPORTS_C]
elseif (NUMINJ_C gt 1 OR NUMINJ_C IN (RF,DK)) [goto INJSCHOOL_C]
<2,RF,DK> [goto INJSCHOOL_C]
```

2024 National Health Interview Survey (NHIS) Questionnaire

INJ: Injury

Question ID: INJ.0060.00.2 Variable: INJSCHOOL\_C Interview Module: Child Content Type: Rotating Core

Question Text:

During the past 3 months, did ^siginj\_C occur while ^SCNAME was at ^DAYCARESCHOOL?

\* **Read if necessary:** Include classrooms, playgrounds, sports fields, swimming pools, parking lots and other places on school or daycare property.

Fills:

siginj_C	Description	the significant injury/any significant injuries
	Instruction	If NUMINJ_C=1, fill: "the significant injury" elseif NUMINJ_C gt 1, fill: "any significant injuries" elseif NUMINJ_C in (DK,RF), fill: "any significant injuries"
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
DAYCARESCHOOL	Description	daycare/school or daycare/school
	Instruction	If GEN.AGE_FINAL[PX_C] ge 0 and GEN.AGE_FINAL[PX_C] le 2, fill: "daycare" If GEN.AGE_FINAL[PX_C] ge 3 and GEN.AGE_FINAL[PX_C] le 5, fill: "school or daycare" if GEN.AGE_FINAL[PX_C] ge 6 and GEN.AGE_FINAL[PX_C] le 17, fill: "school"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample children 0-17 who had more than one injury or didn't know or refused or who had one injury that did not occur at home

Skip Instructions:

<1,2,RF,DK> if GEN.AGE\_FINAL lt 3 [goto INJFALL\_C]  
elseif GEN.AGE\_FINAL ge 3 [goto INJSPORTS\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INJ: Injury

Question ID: INJ.0070.00.2 Variable: INJSPORTS\_C Interview Module: Child Content Type: Rotating Core

Question Text:

During the past 3 months, did ^siginj\_C occur while ^SCNAME was playing sports or exercising, including walking, biking, or running, playing baseball, basketball, football or doing any other physical activity?

\* **Read if necessary:** *Include recreational sports such as skating, skiing, tennis, golf, bowling, or fishing.*

Fills:

siginj_C	Description	the significant injury/any significant injuries
	Instruction	If NUMINJ_C=1, fill: "the significant injury" elseif NUMINJ_C gt 1, fill: "any significant injuries" elseif NUMINJ_C in (DK,RF), fill: "any significant injuries"
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample children 3-17 with injury in past 3 months which limited activities for at least 24 hours

Skip Instructions:

<1,2,RF,DK> [goto INJFALL\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INJ: Injury

Question ID: INJ.0080.00.2 Variable: INJFALL\_C Interview Module: Child Content Type: Rotating Core

Question Text:

During the past 3 months, did ^siginj\_C occur as a result of a fall or falling?

Fills:

siginj_C	Description	the significant injury/any significant injuries
	Instruction	If NUMINJ_C=1, fill: "the significant injury" elseif NUMINJ_C gt 1, fill: "any significant injuries" elseif NUMINJ_C in (DK,RF), fill: "any significant injuries"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample children 0-17 with injury in past 3 months which limited activities for at least 24 hours

Skip Instructions:

```
<1> if NUMINJ_C=1 [goto INJMOTOR_C]
elseif NUMINJ_C gt 1 or NUMINJ_C IN (RF,DK) and INJHOME_C=1 [goto INJFALLHOM_C]
elseif NUMINJ_C gt 1 or NUMINJ_C IN (RF,DK) and INJSCHOOL_C=1 [goto INJFALLSCH_C]
else [goto INJMOTOR_C]
<2,RF,DK> [goto INJMOTOR_C]
```

2024 National Health Interview Survey (NHIS) Questionnaire

INJ: Injury

Question ID: INJ.0090.00.2 Variable: INJFALLHOM\_C Interview Module: Child Content Type: Rotating Core

Question Text:

Did any fall occur while ^SCNAME was at ^hisher\_C home?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample children 0-17 who had more than 1 significant injury or refused or don't know, and were injured as a result of a fall or falling, and who were also injured at home

Skip Instructions:

<1,2,RF,DK> if INJSCHOOL\_C=1 [goto INJFALLSCH\_C]  
else [goto INJMOTOR\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INJ: Injury

Question ID: INJ.0100.00.2 Variable: INJFALLSCH\_C Interview Module: Child Content Type: Rotating Core

Question Text:

Did any fall occur while ^SCNAME was at ^DAYCARESCHOOL?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
DAYCARESCHOOL	Description	daycare/school or daycare/school
	Instruction	If GEN.AGE_FINAL[PX_C] ge 0 and GEN.AGE_FINAL[PX_C] le 2, fill: "daycare" If GEN.AGE_FINAL[PX_C] ge 3 and GEN.AGE_FINAL[PX_C] le 5, fill: "school or daycare" if GEN.AGE_FINAL[PX_C] ge 6 and GEN.AGE_FINAL[PX_C] le 17, fill: "school"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample children 0-17 who had more than 1 significant injury or refused or don't know, and were injured as a result of a fall or falling, and who were also injured at school

Skip Instructions:

<1,2,RF,DK> [goto INJMOTOR\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INJ: Injury

Question ID: INJ.0110.00.2 Variable: INJMOTOR\_C Interview Module: Child Content Type: Rotating Core

Question Text:

During the past 3 months, did ^siginj\_C occur as a result of being in a motor vehicle crash or being hit by a motor vehicle while walking or biking?

\* **Read if necessary:** Motor vehicles include cars, trucks, vans, buses, motorcycles, motorized scooters, motorized wheelchairs, motorized carts, tractors, ATVs, snowmobiles, dune buggies, and other motorized vehicles.

Fills:

siginj_C	Description	the significant injury/any significant injuries
	Instruction	If NUMINJ_C=1, fill: "the significant injury" elseif NUMINJ_C gt 1, fill: "any significant injuries" elseif NUMINJ_C in (DK,RF), fill: "any significant injuries"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample children 0-17 with injury in past 3 months which limited activities for at least 24 hours

Skip Instructions:

<1> [goto INJMVTYPE\_C]  
<2,RF,DK> [goto INJSAWDOC\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INJ: Injury

Question ID: INJ.0120.00.2 Variable: INJMVTYPE\_C Interview Module: Child Content Type: Rotating Core

Question Text:

Was ^SCNAME a ^DRIVER passenger, bicyclist, pedestrian, or doing something else when this occurred?

\* Enter all that apply, separate with commas.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
DRIVER	Description	driver
	Instruction	If GEN.AGE_FINAL[PX] ge 6, fill: "driver," else, no fill.

Response:

1	^INJDRIVER
2	Passenger
3	Bicyclist
4	Pedestrian
5	Something else
7	Refused
9	Don't Know

Universe:

Sample children 0-17 with a motor vehicle injury

Skip Instructions:

If GEN.AGE\_FINAL[PX\_C] lt 6 and INJMVTYPE\_C=1 [goto ERR1\_INJMVTYPE\_C]  
<1-5,RF,DK> [goto INJSAWDOC\_C]

Hard Edit:

Check Text	Check Description	Check Text
ERR1_INJMVTYPE_C	Driver selected for child under 6 years old	{check }  Verify. "Driver" is unavailable for children under 6 years old.



2024 National Health Interview Survey (NHIS) Questionnaire

INJ: Injury

Question ID: INJ.0130.00.2 Variable: INJSAWDOC\_C Interview Module: Child Content Type: Rotating Core

Question Text:

During the past 3 months, did ^SCNAME see a doctor or other health professional about ^siginj\_C?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
siginj_C	Description	the significant injury/any significant injuries
	Instruction	If NUMINJ_C=1, fill: "the significant injury" elseif NUMINJ_C gt 1, fill: "any significant injuries" elseif NUMINJ_C in (DK,RF), fill: "any significant injuries"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample children 0-17 with injury in past 3 months which limited activities for at least 24 hours

Skip Instructions:

```
<1> if UTZ.EMERGE12M_C IN (1-96,RF,DK) [goto INJER_C]
elseif UTZ.EMERGE12M_C=0 and UTZ.HOSPONGT_C IN (1,RF,DK) [goto INJHOSP_C]
else [goto INJBONES_C]
<2,RF,DK> [goto INJSCHDAYS_C]
```

2024 National Health Interview Survey (NHIS) Questionnaire

INJ: Injury

Question ID: INJ.0140.00.2 Variable: INJER\_C Interview Module: Child Content Type: Rotating Core

Question Text:

During the past 3 months, did ^SCNAME go to an emergency room because of ^signinj\_C?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
signinj_C	Description	the significant injury/any significant injuries
	Instruction	If NUMINJ_C=1, fill: "the significant injury" elseif NUMINJ_C gt 1, fill: "any significant injuries" elseif NUMINJ_C in (DK,RF), fill: "any significant injuries"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample children 0-17 who saw doctor about their injuries and either went to the ER in the past year or didn't know or refused if they went to the ER

Skip Instructions:

<1,2,RF,DK> if UTZ.HOSPONGT\_C IN (1,RF,DK) [goto INJHOSP\_C]  
else [goto INJBONES\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INJ: Injury

Question ID: INJ.0150.00.2 Variable: INJHOSP\_C Interview Module: Child Content Type: Rotating Core

Question Text:

During the past 3 months, was ^SCNAME hospitalized overnight for ^siginj\_C?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
siginj_C	Description	the significant injury/any significant injuries
	Instruction	If NUMINJ_C=1, fill: "the significant injury" elseif NUMINJ_C gt 1, fill: "any significant injuries" elseif NUMINJ_C in (DK,RF), fill: "any significant injuries"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample children 0-17 who saw a doctor for their injuries and were hospitalized overnight in the past year or didn't know or refused

Skip Instructions:

<1,2,RF,DK> [goto INJBONES\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INJ: Injury

Question ID: INJ.0160.00.2 Variable: INJBONES\_C Interview Module: Child Content Type: Rotating Core

Question Text:

During the past 3 months, did ^SCNAME have any broken bones as a result of ^siginj\_C?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
siginj_C	Description	the significant injury/any significant injuries
	Instruction	If NUMINJ_C=1, fill: "the significant injury" elseif NUMINJ_C gt 1, fill: "any significant injuries" elseif NUMINJ_C in (DK,RF), fill: "any significant injuries"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample children 0-17 who saw a doctor about an injury

Skip Instructions:

<1,2,RF,DK> [goto INJSTITCH\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INJ: Injury

Question ID: INJ.0170.00.2 Variable: INJSTITCH\_C Interview Module: Child Content Type: Rotating Core

Question Text:

During the past 3 months, did ^SCNAME get any stitches or staples because of ^signj\_C?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
signj_C	Description	the significant injury/any significant injuries
	Instruction	If NUMINJ_C=1, fill: "the significant injury" elseif NUMINJ_C gt 1, fill: "any significant injuries" elseif NUMINJ_C in (DK,RF), fill: "any significant injuries"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample children 0-17 who saw a doctor about an injury

Skip Instructions:

<1,2,RF,DK> [goto INJSCHDAYS\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INJ: Injury

Question ID: INJ.0180.00.2 Variable: INJSCHDAYS\_C Interview Module: Child Content Type: Rotating Core

Question Text:

During the past 3 months, how many days of ^DAYCARESCHOOL did ^SCNAME miss because of ^siginj\_C?

\* Enter '90' if ^SCNAME missed every day of daycare or school in the past 3 months

Fills:

DAYCARESCHOOL	Description	daycare/school or daycare/school
	Instruction	If GEN.AGE_FINAL[PX_C] ge 0 and GEN.AGE_FINAL[PX_C] le 2, fill: "daycare" If GEN.AGE_FINAL[PX_C] ge 3 and GEN.AGE_FINAL[PX_C] le 5, fill: "school or daycare" if GEN.AGE_FINAL[PX_C] ge 6 and GEN.AGE_FINAL[PX_C] le 17, fill: "school"
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
siginj_C	Description	the significant injury/any significant injuries
	Instruction	If NUMINJ_C=1, fill: "the significant injury" elseif NUMINJ_C gt 1, fill: "any significant injuries" elseif NUMINJ_C in (DK,RF), fill: "any significant injuries"

Response:

00-90	Range of values
97	Refused
99	Don't Know

Universe:

Sample children 0-17 who had an injury that limited their activities for at least 24 hours

Skip Instructions:

<0,RF> [goto next section]  
<1-90, DK> [goto INJFUTSCH\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

INJ: Injury

Question ID: INJ.0190.00.2 Variable: INJFUTSCH\_C Interview Module: Child Content Type: Rotating Core

Question Text:

Do you expect ^SCNAME to miss any more days of ^DAYCARESCHOOL because of ^siginj\_C that occurred during the past 3 months?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
DAYCARESCHOOL	Description	daycare/school or daycare/school
	Instruction	If GEN.AGE_FINAL[PX_C] ge 0 and GEN.AGE_FINAL[PX_C] le 2, fill: "daycare" If GEN.AGE_FINAL[PX_C] ge 3 and GEN.AGE_FINAL[PX_C] le 5, fill: "school or daycare" if GEN.AGE_FINAL[PX_C] ge 6 and GEN.AGE_FINAL[PX_C] le 17, fill: "school"
siginj_C	Description	the significant injury/any significant injuries
	Instruction	If NUMINJ_C=1, fill: "the significant injury" elseif NUMINJ_C gt 1, fill: "any significant injuries" elseif NUMINJ_C in (DK,RF), fill: "any significant injuries"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample children 0-17 who have missed at least one day of daycare or school due to injury in past 3 months or don't know

Skip Instructions:

<1,2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

TBI: Concussions - past 12 months

Question ID: TBI.0010.00.3 Variable: TBIINTRO1\_C Interview Module: Child Content Type: Sponsored Content

Question Text:

The next questions are about head injuries that may have occurred in the past 12 months. Please think about all head injuries, for example, from playing sports, car accidents, falls, or being hit by something or someone that may have occurred in the past 12 months.

\* Enter '1' to continue.

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

Sample Children 0-17

Skip Instructions:

<1> [goto TBILCDCMG\_C]



2024 National Health Interview Survey (NHIS) Questionnaire

TBI: Concussions - past 12 months

Question ID: TBI.0020.00.3 Variable: TBILDCMG\_C Interview Module: Child Content Type: Sponsored Content

Question Text:

During the past 12 months, as a result of a blow or jolt to the head, has ^SCNAME been knocked out or lost consciousness, been dazed or confused, or had a gap in ^hisher\_C memory?

\* **Read if necessary:** *Please think about all head injuries, for example, from playing sports, car accidents, falls, or being hit by something or someone that may have occurred in the past 12 months.*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<1,2,RF,DK> [goto TBIHLSBMC\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

TBI: Concussions - past 12 months

Question ID: TBI.0030.00.3 Variable: TBIHLSBMC\_C Interview Module: Child Content Type: Sponsored Content

Question Text:

During the past 12 months, as a result of a blow or jolt to the head, has ^SCNAME had headaches, sensitivity to light or noise, balance problems, or changes in mood or behavior?

\* **Read if necessary:** *Please think about all head injuries, for example, from playing sports, car accidents, falls, or being hit by something or someone that may have occurred in the past 12 months.*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

```
<1> [goto TBISPORT_C]
<2,RF,DK> if TBILCDCMG_C=1 [goto TBISPORT_C]
elseif TBILCDCMG_C=2,RF,DK [goto next section]
```

2024 National Health Interview Survey (NHIS) Questionnaire

TBI: Concussions - past 12 months

Question ID: TBI.0040.00.3 Variable: TBISPORT\_C Interview Module: Child Content Type: Sponsored Content

Question Text:

^CDCMG\_C Was ^SCNAME playing a sport or participating in a physical or recreational activity, such as playing on the playground, biking, or pick-up games, when ^heshe\_C experienced any of these blows or jolts to the head?

\* **Read if necessary:** Include team or league sports competitions or practices.

\* **Read if necessary:** Include organized and non-organized sports.

\* **Read if necessary:** A pick-up game is when a group of players get together and spontaneously start a game, like basketball or soccer.

Fills:

CDCMG_C	Description	Think about the blows or jolts to the head that caused ^SCNAME to lose consciousness...
	Instruction	If TBILCDCMG_C=1 and TBIHLSBMC_C=2,RF,DK, fill: "Think about the blows or jolts to the head that caused ^SCNAME to lose consciousness, become dazed or confused, or have a gap in ^hisher_C memory."  else no fill
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who experienced TBI symptoms from a blow or jolt to the head over the past 12 months

Skip Instructions:

<1> [goto TBILEAGUE\_C]  
<2,RF,DK> [goto TBIEVAL\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

TBI: Concussions - past 12 months

Question ID: TBI.0050.00.3 Variable: TBILEAGUE\_C Interview Module: Child Content Type: Sponsored Content

Question Text:

Was ^SCNAME participating in an organized team or league sports competition or practice when ^heshe\_C experienced any of these blows or jolts to the head?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who had a sports or recreational related injury

Skip Instructions:

<1,2,RF,DK> [goto TBIEVAL\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

TBI: Concussions - past 12 months

Question ID: TBI.0060.00.3 Variable: TBIEVAL\_C Interview Module: Child Content Type: Sponsored Content

Question Text:

During the past 12 months, as a result of a blow or jolt to the head, was ^SCNAME evaluated for a concussion or brain injury by a doctor, nurse, paramedic, athletic trainer, or other health professional?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who experienced TBI symptoms from a blow or jolt to the head over the past 12 months

Skip Instructions:

<1,2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

PHY: Physical Activity

Question ID: PHY.0010.00.2 Variable: SPORT\_C Interview Module: Child Content Type: Rotating Core

Question Text:

In the past 12 months, did ^SCNAME play or participate on a sports team or club or take sports lessons either at school or in the community?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 6-17

Skip Instructions:

<1,2,RF,DK> [goto PEGYM\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

PHY: Physical Activity

Question ID: PHY.0020.00.2 Variable: PEGYM\_C Interview Module: Child Content Type: Rotating Core

Question Text:

In the past 12 months, did ^SCNAME take a Physical Education, PE, or gym class?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 6-17

Skip Instructions:

<1,2,RF,DK> [goto PADAYS\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

PHY: Physical Activity

Question ID: PHY.0030.00.2 Variable: PADAYS\_C Interview Module: Child Content Type: Rotating Core

Question Text:

In a typical week during the school year, how often does ^SCNAME exercise, play a sport, or participate in physical activity for at least 60 minutes a day? Would you say never, some days, most days, or every day?

\* **Read if necessary:** *Please include exercise in and out of school.*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Never
2	Some days
3	Most days
4	Every day
7	Refused
9	Don't Know

Universe:

Sample Children 6-17

Skip Instructions:

<1-4,RF,DK> [goto STRENGTH\_C]



2024 National Health Interview Survey (NHIS) Questionnaire

PHY: Physical Activity

Question ID: PHY.0040.00.2 Variable: STRENGTH\_C Interview Module: Child Content Type: Rotating Core

Question Text:

In a typical week during the school year, how often does ^SCNAME do exercises to strengthen or tone ^hisher\_C muscles, such as sit-ups, push-ups, or weight lifting?

Would you say never, some days, most days, or every day?

\* **Read if necessary:** *Please include strengthening or toning activities in and out of school.*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"

Response:

1	Never
2	Some days
3	Most days
4	Every day
7	Refused
9	Don't Know

Universe:

Sample children 6-17

Skip Instructions:

<1-4,RF,DK> [goto WALK\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

PHY: Physical Activity

Question ID: PHY.0050.00.2 Variable: WALK\_C Interview Module: Child Content Type: Rotating Core

Question Text:

In a typical week during the school year, how often does ^SCNAME walk for at least 10 minutes at a time?

\* **Read if necessary:** *would you say never, some days, most days, or every day?*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Never
2	Some days
3	Most days
4	Every day
7	Refused
9	Don't Know

Universe:

Sample children 6-17

Skip Instructions:

<1-4,RF,DK> [goto BIKE\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

PHY: Physical Activity

Question ID: PHY.0060.00.2 Variable: BIKE\_C Interview Module: Child Content Type: Rotating Core

Question Text:

In a typical week during the school year, how often does ^SCNAME ride a bike for at least 10 minutes at a time?

\* **Read if necessary:** *would you say never, some days, most days, or every day?*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Never
2	Some days
3	Most days
4	Every day
7	Refused
9	Don't Know

Universe:

Sample children 6-17

Skip Instructions:

<1-4,RF,DK> [goto Next Section]

2024 National Health Interview Survey (NHIS) Questionnaire

NHC: Neighborhood Characteristics

Question ID: NHC.0010.00.2 Variable: SIDEWALK\_C Interview Module: Child Content Type: Rotating Core

Question Text:

The next questions are about where ^SCNAME lives. By where ^SCNAME lives we mean in ^hisher\_C neighborhood or near ^hisher\_C home.

Where ^SCNAME lives, are there roads, sidewalks, paths or trails where ^SCNAME can walk or ride a bicycle?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 6-17

Skip Instructions:

<1,2,RF,DK> [goto PARKS\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

NHC: Neighborhood Characteristics

Question ID: NHC.0020.00.2 Variable: PARKS\_C Interview Module: Child Content Type: Rotating Core

Question Text:

\* **Read if necessary:** *Where ^SCNAME Lives...*

Are there parks or playgrounds close enough for ^SCNAME to walk or bike to?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 6-17

Skip Instructions:

<1,2,RF,DK> [goto TRAFFIC\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

NHC: Neighborhood Characteristics

Question ID: NHC.0030.00.2 Variable: TRAFFIC\_C Interview Module: Child Content Type: Rotating Core

Question Text:

Where ^SCNAME lives, does traffic make it unsafe for ^SCNAME to walk or ride a bicycle, even with an adult?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 6-17

Skip Instructions:

<1,2,RF,DK> [goto CRIME\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

NHC: Neighborhood Characteristics

Question ID: NHC.0040.00.2 Variable: CRIME\_C Interview Module: Child Content Type: Rotating Core

Question Text:

*\*Read if necessary: Where ^SCNAME Lives...*

Does crime make it unsafe for ^SCNAME to walk or ride a bicycle, even with an adult?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 6-17

Skip Instructions:

<1,2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

SLP: Sleep

Question ID: SLP.0010.00.2 Variable: RESTED\_C Interview Module: Child Content Type: Rotating Core

Question Text:

In a typical ^SCHOOLWEEK, how often does ^SCNAME wake up well-rested?

Would you say never, some days, most days, or every day?

Fills:

SCHOOLWEEK	Description	week for children not in school, week during the school year for school-aged children.
	Instruction	If GEN.AGE_FINAL GE 2 and GEN.AGE_FINAL LE 5, fill: "week" If GEN.AGE_FINAL GE 6, fill: "week during the school year"
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Never
2	Some days
3	Most days
4	Every day
7	Refused
9	Don't Know

Universe:

Sample children 2-17

Skip Instructions:

<1-4,RF,DK> [goto OUTFBED\_C]



2024 National Health Interview Survey (NHIS) Questionnaire

SLP: Sleep

Question ID: SLP.0020.00.2 Variable: OUTFBED\_C Interview Module: Child Content Type: Rotating Core

Question Text:

\* **Read if necessary:** *In a typical ^SCHOOLWEEK...*

How often does ^SCNAME have difficulty getting out of bed in the morning?

\* **Read if necessary:** *Would you say never, some days, most days, or every day?*

Fills:

SCHOOLWEEK	Description	week for children not in school, week during the school year for school-aged children.
	Instruction	If GEN.AGE_FINAL GE 2 and GEN.AGE_FINAL LE 5, fill: "week" If GEN.AGE_FINAL GE 6, fill: "week during the school year"
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Never
2	Some days
3	Most days
4	Every day
7	Refused
9	Don't Know

Universe:

Sample children 2-17

Skip Instructions:

<1-4,RF,DK> [goto TIRED\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

SLP: Sleep

Question ID: SLP.0030.00.2 Variable: TIRED\_C Interview Module: Child Content Type: Rotating Core

Question Text:

\* **Read if necessary:** *In a typical ^SCHOOLWEEK...*

How often does ^SCNAME complain about being tired during the day?

\* **Read if necessary:** *Would you say never, some days, most days, or every day?*

Fills:

SCHOOLWEEK	Description	week for children not in school, week during the school year for school-aged children.
	Instruction	If GEN.AGE_FINAL GE 2 and GEN.AGE_FINAL LE 5, fill: "week" If GEN.AGE_FINAL GE 6, fill: "week during the school year"
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Never
2	Some days
3	Most days
4	Every day
7	Refused
9	Don't Know

Universe:

Sample Children 2-17

Skip Instructions:

<1-4,RF,DK> [goto NAPS\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

SLP: Sleep

Question ID: SLP.0040.00.2 Variable: NAPS\_C Interview Module: Child Content Type: Rotating Core

Question Text:

\* **Read if necessary:** *In a typical ^SCHOOLWEEK...*

How often does ^SCNAME nap or fall asleep during the day, such as in school, watching TV, or riding in a car?

\* **Read if necessary:** *Would you say never, some days, most days, or every day?*

Fills:

SCHOOLWEEK	Description	week for children not in school, week during the school year for school-aged children.
	Instruction	If GEN.AGE_FINAL GE 2 and GEN.AGE_FINAL LE 5, fill: "week" If GEN.AGE_FINAL GE 6, fill: "week during the school year"
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Never
2	Some days
3	Most days
4	Every day
7	Refused
9	Don't Know

Universe:

Sample Children 2-17

Skip Instructions:

<1-4,RF,DK> [goto BEDTIME\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

SLP: Sleep

Question ID: SLP.0050.00.2 Variable: BEDTIME\_C Interview Module: Child Content Type: Rotating Core

Question Text:

In a typical ^SCHOOLWEEKN, how often does ^SCNAME go to bed at the same time?

\* **Read if necessary:** *Would you say never, some days, most days, or every day?*

Fills:

SCHOOLWEEKN	Description	week for children not in school, week during the school year, on nights ^SCNAME had school the next day for school-aged children
	Instruction	If GEN.AGE_FINAL GE 2 and GEN.AGE_FINAL LE 5, fill: "week" If GEN.AGE_FINAL GE 6, fill: "week during the school year, on nights ^SCNAME had school the next day"
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Never
2	Some days
3	Most days
4	Every day
7	Refused
9	Don't Know

Universe:

Sample Children 2-17

Skip Instructions:

<1-4,RF,DK> [goto WAKETIME\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

SLP: Sleep

Question ID: SLP.0060.00.2 Variable: WAKETIME\_C Interview Module: Child Content Type: Rotating Core

Question Text:

In a typical ^SCHOOLWEEKD, how often does ^SCNAME wake up at the same time?

\* **Read if necessary:** *Would you say never, some days, most days, or every day?*

Fills:

SCHOOLWEEKD	Description	week for children not in school, week during the school year, on school days for school-aged children
	Instruction	If GEN.AGE_FINAL GE 2 and GEN.AGE_FINAL LE 5, fill: "week" If GEN.AGE_FINAL GE 6, fill: "week during the school year, on school days"
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Never
2	Some days
3	Most days
4	Every day
7	Refused
9	Don't Know

Universe:

Sample Children 2-17

Skip Instructions:

<1-4,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

SCR: Screen time

Question ID: SCR.0010.00.2 Variable: SCREENTIME\_C Interview Module: Child Content Type: Rotating Core

Question Text:

On most weekdays, does ^SCNAME spend more than 2 hours a day in front of a TV, computer, cellphone or other electronic device watching programs, playing games, accessing the internet, or using social media?

\* **Read if necessary:** Do not include time spent doing school work.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<1,2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

TSM: Taste and Smell

Question ID: TSM.0010.00.3 Variable: SMELLDf\_C Interview Module: Child Content Type: Sponsored Content

Question Text:

During the past 12 months, has ^SCNAME had difficulty with ^hisher\_C sense of smell or ability to detect odors? Would you say no difficulty, a little difficulty, moderate difficulty, a lot of difficulty, or ^SCNAME cannot smell at all?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"

Response:

1	No difficulty
2	A little difficulty
3	Moderate difficulty
4	A lot of difficulty
5	Cannot smell at all
7	Refused
9	Don't Know

Universe:

Sample children 6-17

Skip Instructions:

<1-5,RF,DK> [goto SMELLPHT\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

TSM: Taste and Smell

Question ID: TSM.0020.00.3 Variable: SMELLPHT\_C Interview Module: Child Content Type: Sponsored Content

Question Text:

During the past 12 months, did ^SCNAME sometimes smell an unpleasant, bad, metallic, or burning odor when nothing was there?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample children 6-17

Skip Instructions:

<1,2,RF,DK> [goto TASTEDF\_C]



2024 National Health Interview Survey (NHIS) Questionnaire

TSM: Taste and Smell

Question ID: TSM.0030.00.3 Variable: TASTEDF\_C Interview Module: Child Content Type: Sponsored Content

Question Text:

During the past 12 months, has ^SCNAME had difficulty with ^hisher\_C ability to taste sweet, sour, salty, or bitter foods and drinks? Would you say no difficulty, a little difficulty, moderate difficulty, a lot of difficulty, or ^SCNAME cannot taste at all?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"

Response:

1	No difficulty
2	A little difficulty
3	Moderate difficulty
4	A lot of difficulty
5	Cannot taste at all
7	Refused
9	Don't Know

Universe:

Sample children 6-17

Skip Instructions:

<1-5,RF,DK> [goto TASTEUNW\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

TSM: Taste and Smell

Question ID: TSM.0040.00.3 Variable: TASTEUNW\_C Interview Module: Child Content Type: Sponsored Content

Question Text:

During the past 12 months, has ^SCNAME had an unwanted taste or other sensation in ^hisher\_C mouth that does not go away?

\* **Read if necessary:** *This could include bad, metallic, or bitter tastes or burning or tingling sensations.*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample children 6-17

Skip Instructions:

<1,2,RF,DK> [goto TSTSMHP2\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

TSM: Taste and Smell

Question ID: TSM.0050.00.3 Variable: TSTSMHP2\_C Interview Module: Child Content Type: Sponsored Content

Question Text:

Has ^SCNAME ever talked to a doctor or other health professional about any problem with ^hisher\_C ability to taste or smell?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample children 6-17

Skip Instructions:

<1> [goto TSTSMLAST\_C]  
<2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

TSM: Taste and Smell

Question ID: TSM.0060.00.3 Variable: TSTSMLAST\_C Interview Module: Child Content Type: Sponsored Content

Question Text:

When was the last time ^SCNAME talked to a doctor or other health professional about any problem with ^hisher\_C ability to taste or smell?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"

Response:

1	Within the past year (anytime less than 12 months ago)
2	Within the past 2 years (1 year but less than 2 years ago)
3	Within the past 3 years (2 years but less than 3 years ago)
4	Within the past 5 years (3 years but less than 5 years ago)
5	Within the past 10 years (5 years but less than 10 year ago)
6	10 years ago or more
7	Refused
9	Don't Know

Universe:

Sample children 6-17 who discussed problems with or changes in ability to taste or smell with a doctor or health professional

Skip Instructions:

<1-6,RF,DK> if AGE\_FINAL=6-10 and TSTSMLAST\_C=6 [goto ERR1\_TSTSMLAST\_C]  
else [goto next section]

Hard Edit:

Check Text	Check Description	Check Text
ERR1_TSTSMLAST_C	Hard check for when years since last doctor's visit exceed child's age.	{check }  Years since last doctor's visit exceed child's age.  Please correct.

2024 National Health Interview Survey (NHIS) Questionnaire

PAR: Parent Demographics

Question ID: PAR.0010.00.1 Variable: PARINTRO\_C Interview Module: Child Content Type: Annual Core

Question Text:

Now I'm going to ask questions about ^SCNAME's parents living here.

\* Enter '1' to continue.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

Sample Children 0-17 with at least one resident parent who is a biological, adoptive, or step parent.

Skip Instructions:

<1> [goto tblPARREL]

2024 National Health Interview Survey (NHIS) Questionnaire

PAR: Parent Demographics

Question ID: PAR.0030.00.1 Variable: RELCHPAR\_C Interview Module: Child Content Type: Annual Core

Question Text:

^AreyouIspar ^SCNAME's biological, adoptive, or step ^fathermother?

Fills:

AreyouIspar	Description	Are you/Is {Value of ALIAS}
	Instruction	If PX=LNO_SCRESP, fill: "Are you" else fill: "Is ALIAS[PX]"
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
fathermother	Description	father/mother/parent
	Instruction	If GEN.SEX_FINAL[PX]='1', fill: "father" If GEN.SEX_FINAL[PX]='2', fill: "mother" If GEN.SEX_FINAL[PX]='(DK,RF)', fill: "parent"

Response:

1	Biological
2	Adoptive
3	Step
4	Other
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with at least one resident parent who is a biological, adoptive, or step parent.

Skip Instructions:

<1-4,RF,DK> if last parent in GEN.PARENTS\_FINAL[PX\_C].NONFOST\_FINAL [goto MARINTRO\_C if any parent in GEN.PARENTS\_FINAL[PX\_C].PARENTS\_FINAL has MAR\_FLG\_A ne 1]

else [goto tblPARBORN.bParent.PARBORN\_C for first parent in GEN.PARENTS\_FINAL [PX\_C].PARENTS\_FINAL where Adult.NAT.NATUSBORN\_A=empty]

else [goto next section]

else [goto RELCHPAR\_C for next parent listed at GEN.PARENTS\_FINAL[PX\_C].NONFOST\_FINAL]

\*\*Note: update skip instructions to tblPARBORN\*\*

2024 National Health Interview Survey (NHIS) Questionnaire

PAR: Parent Demographics

Question ID: PAR.0040.00.1 Variable: MARINTRO\_C Interview Module: Child Content Type: Annual Core

Question Text:

The next set of questions are about marriage and cohabitation.

\* Enter '1' to continue.

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

At least one parent has marital flag of 3 or blank, or at least one parent has marital flag of 2 and the parent is the sample adult and not the sample child respondent

Skip Instructions:

For the first parent in GEN.PARENTS\_FINAL[PX\_C].PARENTS\_FINAL with GEN.MAR\_FLG\_A ne 1,  
If GEN.MAR\_FLG\_A=blank or (GEN.MAR\_FLG\_A=2 and PX=PX\_A and SARESPSC\_FLG ne 1) [goto  
tblMAR.bParent.MARITAL\_C]  
Elseif GEN.MAR\_FLG\_A=3 [goto tblMAR.bPARENT.EVRMARRIED\_C]

**2024 National Health Interview Survey (NHIS) Questionnaire**

**PAR: Parent Demographics**

**Question ID:** PAR.0090.00.1    **Variable:** MARITAL\_C    **Interview Module:** Child    **Content Type:** Annual Core

**Question Text:**

^AreyouIspar married, living with a partner together as an unmarried couple, or neither?

**Fills:**

AreyouIspar	Description	Are you/Is {Value of ALIAS}
	Instruction	If PX=LNO_SCRESP, fill: "Are you" else fill: "Is ALIAS[PX]"

**Response:**

1	Married
2	Living with a partner together as an unmarried couple
3	Neither
7	Refused
9	Don't Know

**Universe:**

Sample Children 0-17 where parent's marital status is not determined in the Sample Adult section OR the parent's marital status is don't know or refused in the Sample adult section and the parent is the sample adult but not the sample child respondent OR the parent's marital status has not been obtained in this block

**Skip Instructions:**

<1> [goto SPOUSLIV\_C]  
 <2> if GEN.PCNT16PLUSNOSC=1 [got ERR1\_MARITAL\_C] else [goto PARTNERWHO\_C]  
 <3,RF,DK> [goto EVRMARRIED\_C]

**Soft Edit:**

Check Text	Check Description	Check Text
ERR1_MARITAL_C	One person eligible to be living with a partner in household soft edit	{signal }  Respondent is the only person 16 or older on the household roster. There is no one else eligible to select.



2024 National Health Interview Survey (NHIS) Questionnaire

PAR: Parent Demographics

Question ID: PAR.0100.00.1 Variable: SPOUSLIV\_C Interview Module: Child Content Type: Annual Core

Question Text:

Does ^yourPARspouse currently live in the household?

Fills:

yourPARspouse	Description	your spouse/{Value of ALIAS}'s spouse
	Instruction	if PX=LNO_SCRESP, fill: "your spouse" else fill: "ALIAS[PX]'s spouse"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 where one parent is married

Skip Instructions:

```
<1> if GEN.PCNT16PLUSNOSC=1 [goto ERR1_SPOUSLIV_C] else [goto SPOUSWHO_C]
<2> [goto SPOUSEP_C]
<RF,DK> loop through table for remaining parents else [goto tblPARBORN.bParent.PARBORN_C for
first parent in GEN.PARENTS_FINAL[PX_C].PARENTS_FINAL where Adult.NAT.NATUSBORN_A=empty] else
[goto next section]
```

2024 National Health Interview Survey (NHIS) Questionnaire

PAR: Parent Demographics

Question ID: PAR.0110.00.1 Variable: SPOUSEP\_C Interview Module: Child Content Type: Annual Core

Question Text:

Does ^yourPAR spouse not live here because ^youPAR and ^yourPAR spouse are legally separated?

Fills:

yourPAR	Description	your/{Value of ALIAS}'s
	Instruction	If PX=LNO_SCRESP, fill: "your" else fill ALIAS[PX] + " 's "
youPAR	Description	you/{Value of ALIAS}
	Instruction	If PX=LNO_SCRESP, fill: "you" else fill "ALIAS[PX]"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample children 0-17 where parent is married and their spouse doesn't live in the household

Skip Instructions:

<1,2,RF,DK> loop through table for remaining parents else [goto tblPARBORN.bParent.PARBORN\_C for first parent in GEN.PARENTS\_FINAL[PX\_C].PARENTS\_FINAL where Adult.NAT.NATUSBORN\_A=empty] else [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

PAR: Parent Demographics

Question ID: PAR.0120.00.1 Variable: SPOUSWHO\_C Interview Module: Child Content Type: Annual Core

Question Text:

Which person is ^yourPAR spouse?

\* Enter line number of spouse.

\* Deleted persons cannot be selected. Enter '0' if respondent wishes to select a deleted person.

Fills:

yourPAR	Description	your/{Value of ALIAS}'s
	Instruction	If PX=LNO_SCRESP, fill: "your" else fill ALIAS[PX] + " 's "

Response:

--	--

Universe:

Sample Children 0-17 where parent is married and spouse lives in the household

Skip Instructions:

<1-25> if MARITAL\_C=3 "Neither" for person selected at SPOUSWHO\_C [goto ERR1\_SPOUSWHO\_C]  
{person selected at SPOUSWHO\_C has conflicting answer of "Neither" married or living with a partner at MARITAL\_C}

elseif SPOUSLIV\_C=2 "Outside household" for person selected at SPOUSWHO\_C [goto ERR2\_SPOUSWHO\_C]  
{person selected at SPOUSWHO\_C has conflicting answer of married with a spouse living outside the household at SPOUSLIV\_C}

elseif person selected at SPOUSWHO\_C ((was already selected previously at SPOUSWHO\_C or PARTNERWHO\_C) or (already chose a spouse/partner)) [goto ERR3\_SPOUSWHO\_C]  
{person selected at SPOUSWHO\_C is already indicated as married to someone else/a partner of someone else}

else if GEN.SEX\_FINAL[SPOUSWHO\_C] IN('1','2') and GEN.SEX\_FINAL[PX] IN ('1','2') [goto SPOUSSEX\_C]  
else loop through table for remaining parents  
else [goto tblPARBORN.bParent.PARBORN\_C for first parent in GEN.PARENTS\_FINAL [PX\_C].PARENTS\_FINAL where Adult.NAT.NATUSBORN\_A=empty]  
else [goto next section]

<0,RF,DK> loop through table for remaining parents  
else [goto tblPARBORN.bParent.PARBORN\_C for first parent in GEN.PARENTS\_FINAL [PX\_C].PARENTS\_FINAL where Adult.NAT.NATUSBORN\_A=empty]  
else [goto next section]

Soft Edit:

Check Text	Check Description	Check Text
ERR1_SPOUSWHO_C	Person selected has conflicting answer of "Neither" married or living with a partner	{signal }  Person selected also has answer of "Neither" married or living together as an unmarried couple.  Please correct.

ERR2_SPOUSWHO_C	Person selected has conflicting answer of married with a spouse living outside the household	{signal }  Person selected was indicated to have a spouse living outside the household.  Please correct.
ERR3_SPOUSWHO_C	Person selected is already indicated as married to/a partner of someone else	{signal }  Person selected is already indicated as ^marriedpartner someone else.  Please correct.

2024 National Health Interview Survey (NHIS) Questionnaire

PAR: Parent Demographics

Question ID: PAR.0130.00.1 Variable: SPOUSSEX\_C Interview Module: Child Content Type: Annual Core

Question Text:

I have previously recorded that ^ParentX ^sex\_ParentX and that ^fillSPOUSWHO\_C ^sex\_SPOUSWHO\_C.  
Is that correct?

Fills:

ParentX	Description	you are/{Value of ALIAS} is
	Instruction	If PX=LNO_SCRESP, fill: "you are" else fill: "ALIAS[PX] is"
sex_ParentX	Description	male/female
	Instruction	If SEX[PX]=1, fill: "male" If SEX[PX]=2, fill: "female"
fillSPOUSWHO_C	Description	you are/{Value of ALIAS} is
	Instruction	If SPOUSWHO_C=LNO_SCRESP, fill: "you are" else fill "ALIAS[SPOUSWHO_C] is"
sex_SPOUSWHO_C	Description	male/female
	Instruction	If SEX[SPOUSWHO_C]=1 fill: "male" If SEX[SPOUSWHO_C]=2 fill: "female"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 where parent is married and spouse lives in the household and the sex of the residential parent of interest is not refused/don't know and the sex of the spouse of this parent is not refused/don't know

Skip Instructions:

<1,RF,DK> loop through table for remaining parents else [goto tblPARBORN.bParent.PARBORN\_C for first parent in GEN.PARENTS\_FINAL[PX\_C].PARENTS\_FINAL where Adult.NAT.NATUSBORN\_A=empty] else [goto next section]  
<2> [goto FIXSPOUSSEX\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

PAR: Parent Demographics

Question ID: PAR.0140.00.1 Variable: FIXSPOUSSEX\_C Interview Module: Child Content Type: Annual Core

Question Text:

Which was not correct?

\* Enter all that apply, separate with commas.

Response:

--	--

Universe:

Sample Children 0-17 where parent is married and spouse lives in the household and the sex of the residential parent of interest is not refused/don't know and the sex of the spouse of this parent is not refused/don't know, and the sex of one or both individuals was incorrect

Skip Instructions:

<1-25> loop through table for remaining parents else [goto tblPARBORN.bParent.PARBORN\_C for first parent in GEN.PARENTS\_FINAL[PX\_C].PARENTS\_FINAL where Adult.NAT.NATUSBORN\_A=empty] else [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

PAR: Parent Demographics

Question ID: PAR.0150.00.1 Variable: PARTNERWHO\_C Interview Module: Child Content Type: Annual Core

Question Text:

Which person is ^yourPAR partner?

\* Enter line number of partner.

\* Deleted persons cannot be selected. Enter '0' if respondent wishes to select a deleted person.

Fills:

yourPAR	Description	your/{Value of ALIAS}'s
	Instruction	If PX=LNO_SCRESP, fill: "your" else fill ALIAS[PX] + " 's "

Response:

--	--

Universe:

Sample Children 0-17 where parent is cohabitating with a partner and there are at least two people eligible to be cohabitating in the household

Skip Instructions:

<1-25> if MARITAL\_C=3 "Neither" for person selected at PARTNERWHO\_C [goto ERR1\_PARTNERWHO\_C]  
{person selected at PARTNERWHO\_C has conflicting answer of "Neither" married or living with a partner at MARITAL\_C}

elseif SPOUSLIV\_C=2 "Outside household" for person selected at PARTNERWHO\_C [goto ERR2\_PARTNERWHO\_C]  
{person selected at PARTNERWHO\_C has conflicting answer of married with a spouse living outside the household at SPOUSLIV\_C}

elseif person selected at PARTNERWHO\_C ((was already selected previously at SPOUSWHO\_C or PARTNERWHO\_C) or (already chose a spouse/partner)) [goto ERR3\_PARTNERWHO\_C]  
{person selected at PARTNERWHO\_C is already indicated as married to someone else/a partner of someone else}

elseif GEN.SEX\_FINAL[PX] IN ('1','2') and GEN.SEX\_FINAL[PARTNERWHO\_C] IN ('1','2')[goto PARTNERSEX\_C]  
else [goto EVRMARRIED\_C]

<0,RF,DK> [goto EVRMARRIED\_C]

Soft Edit:

Check Text	Check Description	Check Text
ERR1_PARTNERWHO_C	Person selected has conflicting answer of "Neither" married or living with a partner	{signal }  Person selected also has answer of "Neither" married or living together as an unmarried couple.  Please correct.
ERR2_PARTNERWHO_C	Person selected has conflicting answer of married with a spouse living outside the household	{signal }  Person selected was indicated to have a spouse living outside the household.  Please correct.

ERR3_PARTNERWHO_C	Person selected is already indicated as married to/a partner of someone else	<p>{signal }</p> <p>Person selected is already indicated as ^marriedpartner someone else.</p> <p>Please correct.</p>
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2024 National Health Interview Survey (NHIS) Questionnaire

PAR: Parent Demographics

Question ID: PAR.0160.00.1 Variable: PARTNERSEX\_C Interview Module: Child Content Type: Annual Core

Question Text:

I have previously recorded that ^ParentX ^sex\_ParentX and that ^fillPARTNERWHO\_C ^sex\_PARTNERWHO\_C. Is that correct?

Fills:

ParentX	Description	you are/{Value of ALIAS} is
	Instruction	If PX=LNO_SCRESP, fill: "you are" else fill: "ALIAS[PX] is"
sex_ParentX	Description	male/female
	Instruction	If SEX[PX]=1, fill: "male" If SEX[PX]=2, fill: "female"
fillPARTNERWHO_C	Description	you are/{Value of ALIAS} is
	Instruction	If PARTNERWHO_C=LNO_SCRESP, fill: "you are" else fill "ALIAS[PARTNERWHO_C] is"
sex_PARTNERWHO_C	Description	male/female
	Instruction	If GEN.SEX_FINAL[PARTNERWHO_C]=1 fill: "male" If GEN.SEX_FINAL[PARTNERWHO_C]=2 fill: "female"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 where parent is cohabitating with a partner and the partner lives in the household and the sex for the residential parent is not refused or don't know and the sex for the partner is not refused or don't know

Skip Instructions:

<1,RF,DK> [goto EVRMARRIED\_C]  
<2> [goto FIXPARTSEX\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

PAR: Parent Demographics

Question ID: PAR.0170.00.1 Variable: FIXPARTSEX\_C Interview Module: Child Content Type: Annual Core

Question Text:

Which was not correct?

\* Enter all that apply, separate with commas.

Response:

--	--

Universe:

Sample Children 0-17 where parent is cohabitating with a partner and the partner lives in the household and the sex for the residential parent is not refused/don't and the sex for the partner is not refused/don't know, and the sex of one or both of the individuals is incorrect.

Skip Instructions:

<1-25> [goto EVRMARRIED\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

PAR: Parent Demographics

Question ID: PAR.0180.00.1 Variable: EVRMARRIED\_C Interview Module: Child Content Type: Annual Core

Question Text:

^HaveyouHasPAR ever been married?

Fills:

HaveyouHasPAR	Description	Have you/Has {Value of ALIAS}
	Instruction	If PX=LNO_SCRESP, fill: "Have you" else, fill: "Has ALIAS[PX]"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 where parent is either cohabitating or not in relationship with anyone else in the household, or the marriage/cohabitation status is refused/don't know in the Adult section or the parent is reported as cohabitating with another parent

Skip Instructions:

```
<1> if (MARITAL_C=2 or GEN.PAR_FLG_C[PX]=3 or GEN.MAR_FLG_A[PX]=3) [goto LEGALSTAT_A]
elseif MARITAL_C=3 [goto WIDIVSEP_A]
else loop through table for remaining parents else [goto tblPARBORN.bParent.PARBORN_C for first
parent in GEN.PARENTS_FINAL[PX_C].PARENTS_FINAL where Adult.NAT.NATUSBORN_A=empty] else [goto
next section]
<2,RF,DK> loop through table for remaining parents else [goto tblPARBORN.bParent.PARBORN_C for
first parent in GEN.PARENTS_FINAL[PX_C].PARENTS_FINAL where Adult.NAT.NATUSBORN_A=empty] else
[goto next section]
```

2024 National Health Interview Survey (NHIS) Questionnaire

PAR: Parent Demographics

Question ID: PAR.0190.00.1 Variable: LEGALSTAT\_C Interview Module: Child Content Type: Annual Core

Question Text:

What is ^yourPAR current legal marital status?

Fills:

yourPAR	Description	your/{Value of ALIAS}'s
	Instruction	If PX=LNO_SCRESP, fill: "your" else fill ALIAS[PX] + " 's "

Response:

1	Married
2	Widowed
3	Divorced
4	Separated
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 where parent has been married and is living with a partner or person selected as a cohabitating partner in PAR or person selected as a cohabitating partner in MAR

Skip Instructions:

<1-4,RF,DK> loop through table for remaining parents else [goto tblPARBORN.bParent.PARBORN\_C for first parent in GEN.PARENTS\_FINAL[PX\_C].PARENTS\_FINAL where Adult.NAT.NATUSBORN\_A=empty] else [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

PAR: Parent Demographics

Question ID: PAR.0200.00.1 Variable: WIDIVSEP\_C Interview Module: Child Content Type: Annual Core

Question Text:

^AreyouIspar widowed, divorced, or separated?

Fills:

AreyouIspar	Description	Are you/Is {Value of ALIAS}
	Instruction	If PX=LNO_SCRESP, fill: "Are you" else fill: "Is ALIAS[PX]"

Response:

1	Widowed
2	Divorced
3	Separated
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 where parent is neither living with a partner nor married, but has been married

Skip Instructions:

<1-3,RF,DK> loop through table for remaining parents else [goto FINISH\_MAR\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

PAR: Parent Demographics

Question ID: PAR.0210.00.1 Variable: FINISH\_MAR\_C Interview Module: Child Content Type: Annual Core

Question Text:

\* The Sample Child MAR section is now complete.

\* Enter '1' to continue.

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

Skip Instructions:

```
<1> [goto tblPARBORN.bParent.PARBORN_C for first parent in GEN.PARENTS_FINAL[PX_C].PARENTS where  
Adult.NAT.NATUSBORN_A=empty]  
else [goto next section]
```

2024 National Health Interview Survey (NHIS) Questionnaire

PAR: Parent Demographics

Question ID: PAR.0230.00.1 Variable: PARBORN\_C Interview Module: Child Content Type: Annual Core

Question Text:

^WereyouWaspar born in the United States or a U.S. territory?

Fills:

WereyouWaspar	Description	Were you/Was {Value of ALIAS}
	Instruction	If PX=LNO_SCRESP, fill: "Were you" else fill: "Was ALIAS[PX]"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 where whether the parent was born in the US or US territory is unknown

Skip Instructions:

<1,2,RF,DK> loop through table for remaining parents else [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

PAR: Parent Demographics

Question ID: REL.0030.00.1 Variable: FOSTPAR Interview Module: Child Content Type: Annual Core

Question Text:

Is ^ALIASNAME currently in foster care? By that I mean is there an adult living in this household acting as a foster parent to ^ALIASNAME under the supervision of a state or county child welfare agency?

Fills:

ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Child has no parents identified

Skip Instructions:

<1> [goto WHOFOST]  
<2,RF,DK> If last non-deleted child on roster [goto next section]  
else [goto WHOPAR for next non-deleted child on roster]



2024 National Health Interview Survey (NHIS) Questionnaire

NAT: Nativity

Question ID: NAT.0010.00.1 Variable: NATUSBORN\_C Interview Module: Child Content Type: Annual Core

Question Text:

Was ^SCNAME born in the United States or a U.S. territory?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<1> [goto NATSTBORN\_C]  
<2> [goto NATUSYR\_C]  
<RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

NAT: Nativity

Question ID: NAT.0020.00.1 Variable: NATSTBORN\_C Interview Module: Child Content Type: Annual Core

Question Text:

In what state or U.S. territory was ^SCNAME born?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

AL	Alabama
AK	Alaska
AZ	Arizona
AR	Arkansas
CA	California
CO	Colorado
CT	Connecticut
DE	Delaware
DC	District of Columbia
FL	Florida
GA	Georgia
GU	Guam
HI	Hawaii
ID	Idaho
IL	Illinois
IN	Indiana
IA	Iowa
KS	Kansas
KY	Kentucky
LA	Louisiana
ME	Maine
MD	Maryland
MA	Massachusetts
MI	Michigan
MN	Minnesota
MS	Mississippi
MO	Missouri
MT	Montana
NE	Nebraska

NV	Nevada
NH	New Hampshire
NJ	New Jersey
NM	New Mexico
NY	New York
NC	North Carolina
ND	North Dakota
OH	Ohio
OK	Oklahoma
OR	Oregon
PA	Pennsylvania
PR	Puerto Rico
RI	Rhode Island
SC	South Carolina
SD	South Dakota
TN	Tennessee
TX	Texas
UT	Utah
VT	Vermont
VA	Virginia
VI	U.S. Virgin Islands
WA	Washington
WV	West Virginia
WI	Wisconsin
WY	Wyoming
AS	American Samoa
MP	Northern Mariana Islands
97	Refused
99	Don't Know

**Universe:**

Sample Children 0-17 born in the United States or U.S. territory

**Skip Instructions:**

```
<American Samoa> [goto CITIZEN_C]
else [goto next section]
```

2024 National Health Interview Survey (NHIS) Questionnaire

NAT: Nativity

Question ID: NAT.0040.00.1 Variable: NATUSYR\_C Interview Module: Child Content Type: Annual Core

Question Text:

In what year did ^SCNAME come to the United States to stay?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

Year	Year
9997	Refused
9999	Don't Know

Universe:

Sample Children 0-17 not born in the United States or U.S. territory

Skip Instructions:

```
<2000-Current Year,RF,DK>
if NATUSYR_C gt current year [goto ERR1_NATUSYR_C]
if NATUSYR_C lt VFY.BYEAR_C [goto ERR2_NATUSYR_C]
else [goto CITIZEN_C]
```

Hard Edit:

Check Text	Check Description	Check Text
ERR1_NATUSYR_C	The year reported in NATUSYR_C is a year in the future	{check }  Future year invalid. Please correct.
ERR2_NATUSYR_C	The year reported in NATUSYR_C is a year prior to child's birth	{check }  Year is prior to date of birth. Please correct.

2024 National Health Interview Survey (NHIS) Questionnaire

NAT: Nativity

Question ID: NAT.0050.00.1 Variable: CITIZEN\_C Interview Module: Child Content Type: Annual Core

Question Text:

Is ^SCNAME a citizen of the United States?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample children 0-17 not born in the United States or U.S. territory or born in American Samoa

Skip Instructions:

<1> [goto NATCTZN\_C]  
<2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

NAT: Nativity

Question ID: NAT.0060.00.1 Variable: NATCTZN\_C Interview Module: Child Content Type: Annual Core

Question Text:

Was ^SCNAME born abroad to an American parent, born abroad and adopted by an American parent, or did ^SCNAME become a U.S. citizen by naturalization?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Born abroad to American parent
2	Born abroad and adopted by an American parent
3	Became U.S. citizen by naturalization
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 are United States citizens

Skip Instructions:

<1-3,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

FEM: Employment of family members

Question ID: FEM.0010.00.1 Variable: FEMINTRO\_C Interview Module: Child Content Type: Annual Core

Question Text:

Now I have a few questions about ^youandothfam.

\* Enter '1' to continue.

Fills:

youandothfam	Description	you/other members of your family/you and other members of your family
	Instruction	<pre> IF LNO_SCRESP PX_A OR ( LNO_SCRESP = PX_A AND ( (SARESPSC_FLG 1 AND EMP_FLG_A=2) OR (EMP_FLG_A = EMPTY) ) )THEN     fill: "you" ENDIF  IF PCNT18UP_C &gt;= 2 THEN     IF fill = EMPTY THEN         fill: "other members of your family"     ELSEIF (PCNT18UP_C = 2 AND ( (SAMEFAM_FLG 1) OR ( (SAMEFAM_FLG = 1) AND ( (SARESPSC_FLG 1 AND EMP_FLG_A=2) OR (EMP_FLG_A = EMPTY) ) ) ) ) OR (PCNT18UP_C &gt; 2)THEN         fill: "you and other members of your family"     ENDIF ENDIF                     </pre>

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

Sample Child is not in the same family as the Sample Adult  
OR  
Sample Child is in same family as Sample Adult and there is one adult in family who is the Sample Adult and the Sample Adult Employment section has not been asked  
OR  
Sample Child is in the same family as Sample Adult and there are more than one adults in the family and the Sample Adult FEM section has not been asked  
OR  
Sample Child is in the same family as Sample Adult and there are more than one adults in the family and the Sample Adult FEM section was asked but has don't know/refused responses for all questions and the sample adult isn't the sample child respondent.

Skip Instructions:

[goto tblFEM\_C]

Replicate To:

FEMINTRO\_A

2024 National Health Interview Survey (NHIS) Questionnaire

FEM: Employment of family members

Question ID: FEM.0030.00.1 Variable: FEMWORK\_C Interview Module: Child Content Type: Annual Core

Question Text:

^DoesDoyouALIASNAME work for pay at a job or business?

\* If the respondent says ^heshetheywork, but not for pay, at a family-owned job or business, enter '1' for yes.

Fills:

DoesDoyouALIASNAME	Description	Do you/Does ^ALIASNAME
	Instruction	If PX=LNO_SCRESP, fill: "Do you" (that is if the subject of the question is the sample child respondent, fill: "Do you") else fill: "Does ^ALIASNAME"
ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]
heshetheywork	Description	he works/she works/they work
	Instruction	elseif GEN.SEX_FINAL=1 fill "he works" elseif GEN.SEX_FINAL=2 fill "she works" elseif GEN.SEX_FINAL IN (RF,DK) fill "they work"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

(Sample Child is not in the same family as the Sample Adult  
OR  
Sample Child is in same family as Sample Adult and there is one adult in family who is the Sample Adult and the Sample Adult Employment section has not been asked  
OR  
Sample Child is in the same family as Sample Adult and there are more than one adults in the family and the Sample Adult FEM section has not been asked  
OR  
Sample Child is in the same family as Sample Adult and there are more than one adults in the family and the Sample Adult FEM section was asked but has don't know/refused responses for all questions and the sample adult isn't the sample child respondent.)  
AND  
Person is in Sample Child's family and over the age of 18

Skip Instructions:

<1> [goto FEMWKFT\_C]  
<2,RF,DK> if there is another adult in the family [goto FEMWORK\_C] for the next adult 18+  
else [goto next section]

Replicate To:

FEMWORK\_A



2024 National Health Interview Survey (NHIS) Questionnaire

FEM: Employment of family members

Question ID: FEM.0040.00.1 Variable: FEMWKFT\_C Interview Module: Child Content Type: Annual Core

Question Text:

^DoesDoyouALIASNAME usually work 35 hours or more per week in total at ^hisheryour job or jobs?

Fills:

DoesDoyouALIASNAME	Description	Do you/Does ^ALIASNAME
	Instruction	If PX=LNO_SCRESP, fill: "Do you" (that is if the subject of the question is the sample child respondent, fill: "Do you") else fill: "Does ^ALIASNAME"
ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]
hisheryour	Description	your/his/her/their
	Instruction	If PX=LNO_SCRESP, fill: "your" (that is, if the subject of the question is the sample child respondent, fill: "your") else if SEX_FINAL[PX] = 1, fill "his" else if SEX_FINAL[PX] = 2, fill "her" else if SEX_FINAL[PX] in (DK,RF), fill "their"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

(Sample Child is not in the same family as the Sample Adult  
OR  
Sample Child is in same family as Sample Adult and there is one adult in family who is the Sample Adult and the Sample Adult Employment section has not been asked  
OR  
Sample Child is in the same family as Sample Adult and there are more than one adults in the family and the Sample Adult FEM section has not been asked  
OR  
Sample Child is in the same family as Sample Adult and there are more than one adults in the family and the Sample Adult FEM section was asked but has don't know/refused responses for all questions and the sample adult isn't the sample child respondent.)  
AND  
Person is in Sample Child's family and over the age of 18  
AND  
The adult in question works for pay at a job or business

Skip Instructions:

<1,2,RF,DK> if another adult in the family [goto FEMWORK\_C] for the next adult 18+  
else [goto next section]

Replicate To:

FEMWKFT\_A

2024 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0010.00.1 Variable: INCINTRO\_C Interview Module: Child Content Type: Annual Core

Question Text:

The next questions are about your total family income in ^LASTYEAR BEFORE TAXES. Based on questions asked earlier, we have that ^SCNAME's family consists of ^INCINTRO\_C\_fill.

\* **Read if necessary:** *Income is important in analyzing the health information we collect. For example, with this information, we can learn whether persons in one income group use certain types of medical services more or less often than those in another group. Please be assured that, like all other information you have provided, these answers will remain confidential.*

\* Enter '1' to continue.

Fills:

LASTYEAR	Description	Last year
	Instruction	Fill year prior to current year
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
INCINTRO_C_fill	Description	List of people in Sample Child's family including SC
	Instruction	For all people with FAMC_REL_FLG =1 OR (SAME_REL_FLG=1 for SC and tblRelate_SA.bPerson.RELATE in (1-13,DK,RF)) OR (FAMA_REL_FLG=1 and 1st person in SC's family has tblRelate_SA.bPerson.RELATE in (1-13,DK,RF), fill with their names.  Description: Person was identified as being in the SC's family at WHOPAR/WHOFOST OR (Sample Child is related to the Sample Adult and person on roster was placed in Sample Adult's family based on answer provided at RELATE), include their name as part of the list of SC's family.  Include sample child on the list.  If Household Respondent (Roster.HHC.HHRESPAVAIL) is on list of names, fill "you" for name and place name at the beginning of the list.  Include the word "and" before the last name on the list.

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

Sample Children 0-17 and Sample Adult and Sample Child are in the same family and the Sample Adult INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR the Sample Adult and the Sample Child are in the same family and the Sample Adult is not the Sample Child respondent and every question asked in the Sample Adult income section was don't know or refused

Skip Instructions:

<1> [goto INCWRKO\_C]

Replicate To:

INCINTRO\_A

2024 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0020.00.1 Variable: INCWRKO\_C Interview Module: Child Content Type: Annual Core

Question Text:

In ^LASTYEAR, did ^YOUFAM18YRS\_C receive income from wages, salaries, commissions, bonuses, tips, or self-employment?

\* **Read if necessary:** For the purpose of this survey, ^SCNAME's family includes ^FAMVERSC\_fill

Fills:

LASTYEAR	Description	Last year
	Instruction	Fill year prior to current year
YOUFAM18YRS_C	Description	you/you or any family members 18 or older
	Instruction	If GEN.PCNT18UP_C=1 fill "you" else if GEN.PCNT18UP_C GT 1 fill "you or any family members 18 or older"
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
FAMVERSC_fill	Description	List of all people in Sample Child's family
	Instruction	Loop through all persons on roster and add to list of names if FAMILYC_flg = 1  Do not include Sample Child on list.  If Household Respondent (Roster.HHC.HHRESPAVAIL) is on list of names, fill "you" for name and place name at the beginning of the list. If only one person on the list of names and person ne Roster.HHC.HHRESPAVAIL, follow list with "is". If more than one person on the list or only one person on list and person is Household Respondent (Roster.HHC.HHRESPAVAIL), follow list with "are".

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 and Sample Adult and Sample Child are in the same family and the Sample Adult INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR the Sample Adult and the Sample Child are in the same family and the Sample Adult is not the Sample Child respondent and every question asked in the Sample Adult income section was don't know or refused

Skip Instructions:

<1,2,RF,DK> [goto INCINTER\_C]

Replicate To:

INCWRKO\_A

2024 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0030.00.1 Variable: INCINTER\_C Interview Module: Child Content Type: Annual Core

Question Text:

In ^LASTYEAR, did ANY FAMILY MEMBERS receive income from interest-bearing accounts or investments, dividends from stocks or mutual funds, net rental income, royalty income, or income from estates and trusts?

Fills:

LASTYEAR	Description	Last year
	Instruction	Fill year prior to current year

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 and Sample Adult and Sample Child are in the same family and the Sample Adult INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR the Sample Adult and the Sample Child are in the same family and the Sample Adult is not the Sample Child respondent and every question asked in the Sample Adult income section was don't know or refused

Skip Instructions:

<1,2,RF,DK> [goto INCSSRR\_C]

Replicate To:

INCINTER\_A

2024 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0031.00.1 Variable: INCSSRR\_C Interview Module: Child Content Type: Annual Core

Question Text:

\* **Read if necessary:** In ^LASTYEAR, did ^YOUFAMHERE\_C receive...

Income from Social Security or Railroad Retirement?

Fills:

LASTYEAR	Description	Last year
	Instruction	Fill year prior to current year
YOUFAMHERE_C	Description	you/you or any family members
	Instruction	If GEN.PCNT_C=2 fill "you" else if GEN.PCNT_C GT 2 fill "you or any family members"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 and Sample Adult and Sample Child are in the same family and the Sample Adult INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR the Sample Adult and the Sample Child are in the same family and the Sample Adult is not the Sample Child respondent and every question asked in the Sample Adult income section was don't know or refused and both the income from wages and income from accounts questions have not been refused

Skip Instructions:

<1,2,RF,DK> [goto INCSSISSDI\_C]

Replicate To:

INCSSRR\_A

2024 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0040.00.1 Variable: INCSSISSDI\_C Interview Module: Child Content Type: Annual Core

Question Text:

\* **Read if necessary:** In ^LASTYEAR, did ANY FAMILY MEMBERS receive...

Supplemental Security Income, SSI, or Social Security Disability Income, SSDI, which are different from Social Security?

Fills:

LASTYEAR	Description	Last year
	Instruction	Fill year prior to current year

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 and Sample Adult and Sample Child are in the same family and the Sample Adult INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR the Sample Adult and the Sample Child are in the same family and the Sample Adult is not the Sample Child respondent and every question asked in the Sample Adult income section was don't know or refused and both the income from wages and income from accounts questions have not been refusedv

Skip Instructions:

<1> [goto SSISSDIBTH\_C]  
 <2,RF,DK> [goto INCWELF\_C]

Replicate To:

INCSSISSDI\_A

2024 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0050.00.1 Variable: SSISSDIBTH\_C Interview Module: Child Content Type: Annual Core

Question Text:

Was this Supplemental Security Income, SSI, Social Security Disability Income, SSDI, or both?

Response:

1	SSI
2	SSDI
3	Both SSI and SSDI
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 where someone in the family gets SSI or SSDI and  
Sample Child INC section has not been completed OR the Sample Adult and Sample Child are in the  
same family and the person who answered the Sample Adult questions is not the Sample Child  
respondent and every question asked in the Sample Adult income section was don't know or refused  
OR the Sample Adult and Sample Child are not in the same family

Skip Instructions:

<1-3,RF,DK> [goto SSISSDIDS\_B\_C]

Replicate To:

SSISSDIBTH\_A

2024 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0060.00.1 Variable: SSISSDIDSB\_C Interview Module: Child Content Type: Annual Core

Question Text:

Was this received as a disability benefit?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 living in families where someone in the family gets SSI or SSDI and Sample Adult and Sample Child are in the same family and the Sample Adult INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR the Sample Adult and Sample Child are in the same family and the person who answered the Sample Adult questions is not the Sample Child respondent and every question asked in the Sample Adult income section was don't know or refused

Skip Instructions:

<1> [goto SSISSDIP\_C]  
<2,RF,DK> [goto INCWELF\_C]

Replicate To:

SSISSDIDSB\_A



2024 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0070.00.1 Variable: SSISSDIP\_C Interview Module: Child Content Type: Annual Core

Question Text:

In ^LASTYEAR, who received this disability benefit?

\* **Read if necessary:** Do NOT include a benefit received on behalf of someone else.

\* **Enter all that apply, separate with commas.**

Fills:

LASTYEAR	Description	Last year
	Instruction	Fill year prior to current year

Response:

00	Not on roster
01-25	Person Number
97	Refused
99	Don't Know

Universe:

Sample Children 0-17 with more than one person in the family where someone in the family gets SSI or SSDI and SSI/SSDI was received as a disability benefit and Sample Adult and Sample Child are in the same family and the Sample Adult INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR the Sample Adult and Sample Child are in the same family and the person who answered the Sample Adult questions is not the Sample Child respondent and every question asked in the Sample Adult income section was don't know or refused

Skip Instructions:

<1-25,RF,DK> [goto INCWELF\_C]

Replicate To:

SSISSDIP\_A

2024 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0090.00.1 Variable: INCWELF\_C Interview Module: Child Content Type: Annual Core

Question Text:

In ^LASTYEAR, did ^YOUFAMHERE\_C receive...

Any public assistance or welfare payments from the state or local welfare office?

Fills:

LASTYEAR	Description	Last year
	Instruction	Fill year prior to current year
YOUFAMHERE_C	Description	you/you or any family members
	Instruction	If GEN.PCNT_C=2 fill "you" else if GEN.PCNT_C GT 2 fill "you or any family members"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 and Sample Adult and Sample Child are in the same family and the Sample Adult INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR the Sample Adult and the Sample Child are in the same family and the Sample Adult is not the Sample Child respondent and every question asked in the Sample Adult income section was don't know or refused and both the income from wages and income from accounts questions have not been refused

Skip Instructions:

<1,2,RF,DK> [goto INCRETIRE\_C]

Replicate To:

INCWELF\_A

2024 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0100.00.1 Variable: INCRETIRE\_C Interview Module: Child Content Type: Annual Core

Question Text:

\* **Read if necessary:** In ^LASTYEAR, did ^YOUFAMHERE\_C receive...

Income from retirement, survivor, or disability pensions?

Fills:

LASTYEAR	Description	Last year
	Instruction	Fill year prior to current year
YOUFAMHERE_C	Description	you/you or any family members
	Instruction	If GEN.PCNT_C=2 fill "you" else if GEN.PCNT_C GT 2 fill "you or any family members"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 and Sample Adult and Sample Child are in the same family and the Sample Adult INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR the Sample Adult and the Sample Child are in the same family and the Sample Adult is not the Sample Child respondent and every question asked in the Sample Adult income section was don't know or refused and both the income from wages and income from accounts questions have not been refused

Skip Instructions:

<1,2,RF,DK> [goto INCOTHR\_C]

Replicate To:

INCRETIRE\_A

2024 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0110.00.1 Variable: INCOTHR\_C Interview Module: Child Content Type: Annual Core

Question Text:

\* **Read if necessary:** In ^LASTYEAR, did ^YOUFAMHERE\_C receive...

Any other sources of income such as VA payments from the Veterans Benefits Administration, unemployment compensation, child support, or alimony?

Fills:

LASTYEAR	Description	Last year
	Instruction	Fill year prior to current year
YOUFAMHERE_C	Description	you/you or any family members
	Instruction	If GEN.PCNT_C=2 fill "you" else if GEN.PCNT_C GT 2 fill "you or any family members"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 and Sample Adult and Sample Child are in the same family and the Sample Adult INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR the Sample Adult and the Sample Child are in the same family and the Sample Adult is not the Sample Child respondent and every question asked in the Sample Adult income section was don't know or refused and both the income from wages and income from accounts questions have not been refused

Skip Instructions:

<1,2,RF,DK> [goto INCTOTAL\_C]

Replicate To:

INCOTHR\_A

2024 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0120.00.1 Variable: INCTOTAL\_C Interview Module: Child Content Type: Annual Core

Question Text:

When answering this next question, please remember to include your income PLUS the income of all family members living in this household.

What is your best estimate of the total income of all family members from all sources, before taxes, in the last calendar year?

\* Enter '999995' if the reported income is \$999,995 or greater.

Response:

000000-999995	Range of values
999997	Refused
999999	Don't Know

Universe:

Sample Children 0-17 and Sample Adult and Sample Child are in the same family and the Sample Adult INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR the Sample Adult and the Sample Child are in the same family and the Sample Adult is not the Sample Child respondent and every question asked in the Sample Adult income section was don't know or refused and both the income from wages and income from accounts questions have not been refused

Skip Instructions:

<0-999> [goto ERR1\_INCTOTAL\_C]  
 <250001-999995> [goto ERR2\_INCTOTAL\_C]  
 <1000-250000> [goto next section]  
 <RF,DK> [goto INC250PCT\_C]

Soft Edit:

Check Text	Check Description	Check Text
ERR1_INCTOTAL_C	Income low soft edit	{signal }  Do not read to the respondent.  ^INCTOTAL_C is unusually low. Make corrections if necessary.
ERR2_INCTOTAL_C	Income high soft edit	{signal }  Do not read to the respondent.  ^INCTOTAL_C is unusually high. Make corrections if necessary.

Replicate To:

INCTOTAL\_A

2024 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0140.01.1 Variable: INC250PCT\_C Interview Module: Child Content Type: Annual Core

Question Text:

Was your total family income from all sources less than ^250POVERTY\_C or ^250POVERTY\_C or more?

Fills:

250POVERTY_C	Description	250% of poverty threshold
	Instruction	Fill value stored in Child.INC.INC250PCT_C

Response:

1	Less than ^250POVERTY_C
2	^250POVERTY_C or more
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who don't know or refuse the total family income and Sample Adult and Sample Child are in the same family and the Sample Adult INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR the Sample Adult and the Sample Child are in the same family and the Sample Adult is not the Sample Child respondent and every question asked in the Sample Adult income section was don't know or refused

Skip Instructions:

```
<1> [goto INC138PCT_C]
<2> if GEN.PCNT_C=1 [goto INC75K_C]
elseif GEN.PCNT_C IN (2,4) [goto INC100K_C]
elseif GEN.PCNT_C=3 or GEN.PCNT_C ge 5 [goto INC400PCT_C]
<RF,DK> [goto next section]
```

Replicate To:

INC250PCT\_A

2024 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0150.01.1 Variable: INC138PCT\_C Interview Module: Child Content Type: Annual Core

Question Text:

Was your total family income from all sources less than ^138POVERTY\_C or ^138POVERTY\_C or more?

Fills:

138POVERTY_C	Description	138% of poverty threshold
	Instruction	Fill value stored in Child.INC.INC138PCT_C

Response:

1	Less than ^138POVERTY_C
2	^138POVERTY_C or more
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 answered less than 250% of poverty threshold and Sample Adult and Sample Child are in the same family and the Sample Adult INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR the Sample Adult and the Sample Child are in the same family and the Sample Adult is not the Sample Child respondent and every question asked in the Sample Adult income section was don't know or refused

Skip Instructions:

<1> [goto INC100PCT\_C]  
<2> [goto INC200PCT\_C]  
<RF,DK> [goto next section]

Replicate To:

INC138PCT\_A

2024 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0160.01.1 Variable: INC100PCT\_C Interview Module: Child Content Type: Annual Core

Question Text:

Was your total family income from all sources less than ^100POVERTY\_C or ^100POVERTY\_C or more?

Fills:

100POVERTY_C	Description	100% of poverty threshold
	Instruction	Fill value stored in Child.INC.INC100PCT_C

Response:

1	Less than ^100POVERTY_C
2	^100POVERTY_C or more
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who answered less than 138% of poverty threshold and Sample Adult and Sample Child are in the same family and the Sample Adult INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR the Sample Adult and the Sample Child are in the same family and the Sample Adult is not the Sample Child respondent and every question asked in the Sample Adult income section was don't know or refused

Skip Instructions:

<1,2,RF,DK> [goto next section]

Replicate To:

INC100PCT\_A



2024 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0170.01.1 Variable: INC200PCT\_C Interview Module: Child Content Type: Annual Core

Question Text:

Was your total family income from all sources less than ^200POVERTY\_C or ^200POVERTY\_C or more?

Fills:

200POVERTY_C	Description	200% of poverty threshold
	Instruction	Fill value stored in Child.INC.INC200PCT_C

Response:

1	Less than ^200POVERTY_C
2	^200POVERTY_C or more
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who answered 138% of poverty or more and Sample Adult and Sample Child are in the same family and the Sample Adult INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR the Sample Adult and the Sample Child are in the same family and the Sample Adult is not the Sample Child respondent and every question asked in the Sample Adult income section was don't know or refused

Skip Instructions:

<1> if GEN.PCNT ge 9 [goto INC100K\_C]  
else [goto next section]  
<2,RF,DK> [goto next section]

Replicate To:

INC200PCT\_A

2024 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0180.00.1 Variable: INC75K\_C Interview Module: Child Content Type: Annual Core

Question Text:

Was your total family income from all sources less than \$75,000 or \$75,000 or more?

Response:

1	Less than \$75,000
2	\$75,000 or more
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who answered 250% of poverty threshold or more and are from a 1 person family and Sample Adult and Sample Child are in the same family and the Sample Adult INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR the Sample Adult and the Sample Child are in the same family and the Sample Adult is not the Sample Child respondent and every question asked in the Sample Adult income section was don't know or refused

Skip Instructions:

<1> [goto INC400PCT\_C]  
<2> [goto INC100K\_C]  
<RF,DK> [goto next section]

Replicate To:

INC75K\_A

2024 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0190.00.1 Variable: INC100K\_C Interview Module: Child Content Type: Annual Core

Question Text:

Was your total family income from all sources less than \$100,000 or \$100,000 or more?

Response:

1	Less than \$100,000
2	\$100,000 or more
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who answered \$75,000 or more OR answered 250% of poverty threshold or more and are from a 2 or 4 person family or who answered less than 200% of the poverty level and are from a 9 or more person family and Sample Adult and Sample Child are in the same family and the Sample Adult INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR the Sample Adult and the Sample Child are in the same family and the Sample Adult is not the Sample Child respondent and every question asked in the Sample Adult income section was don't know or refused

Skip Instructions:

```
<1> if GEN.PCNT_C=2 [goto INC400PCT_C]
else [goto next section]
<2> if GEN.PCNT_C IN (1,2) [goto INC150K_C]
elseif GEN.PCNT_C=4 [goto INC400PCT_C]
elseif GEN.PCNT_C ge 9 [goto next section]
<RF,DK> [goto next section]
```

Replicate To:

INC100K\_A

2024 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0200.01.1 Variable: INC400PCT\_C Interview Module: Child Content Type: Annual Core

Question Text:

Was your total family income from all sources less than ^400POVERTY\_C or ^400POVERTY\_C or more?

Fills:

400POVERTY_C	Description	400% of poverty threshold
	Instruction	Fill value stored in Child.INC.INC400PCT_C

Response:

1	Less than ^400POVERTY_C
2	^400POVERTY_C or more
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who answered less than \$75,000 OR answered less than \$100,000 and are from a 2 person family OR answered \$100,000 or more and from a 4 person family OR answered 250% of poverty threshold or more and are from a 3 or 5+ person family and Sample Adult and Sample Child are in the same family and the Sample Adult INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR the Sample Adult and the Sample Child are in the same family and the Sample Adult is not the Sample Child respondent and every question asked in the Sample Adult income section was don't know or refused

Skip Instructions:

<1> if GEN.PCNT\_C IN (6,7,8) [goto INC150K\_C]  
 else [goto next section]  
 <2> if GEN.PCNT\_C IN (1,2) or GEN.PCNT\_C ge 5 [goto next section]  
 else if GEN.PCNT\_C IN (3,4) [goto INC150K\_C]  
 <RF,DK> [goto next section]

Replicate To:

INC400PCT\_A

2024 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0210.00.1 Variable: INC150K\_C Interview Module: Child Content Type: Annual Core

Question Text:

Was your total family income from all sources less than \$150,000 or \$150,000 or more?

Response:

1	Less than \$150,000
2	\$150,000 or more
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who answered \$100,000 or more and are from 1 or 2 person family OR answered 400% of poverty threshold or more and are from 3 or 4 person family OR answered less than 400% of poverty threshold and are from a family of 6, 7 or 8 persons and Sample Adult and Sample Child are in the same family and the Sample Adult INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR the Sample Adult and the Sample Child are in the same family and the Sample Adult is not the Sample Child respondent and every question asked in the Sample Adult income section was don't know or refused

Skip Instructions:

<1,2,RF,DK> [goto next section]

Replicate To:

INC150K\_A

2024 National Health Interview Survey (NHIS) Questionnaire

F00: Food Related Programs

Question ID: F00.0010.00.1 Variable: FSNAP12M\_C Interview Module: Child Content Type: Annual Core

Question Text:

At any time in the last 12 months did any family members living here receive ^FSSNAPNM?

\* **Read if necessary:** *This program puts money on a SNAP EBT card that you can only use to buy food.*

Fills:

FSSNAPNM	Description	food stamp benefits/[state food stamp program name]
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Instruction	<p>If AL then fill "Food Assistance Program or food stamp benefits"</p> <p>If AK then fill "SNAP or food stamp benefits"</p> <p>If AZ then fill "Nutrition Assistance or food stamp benefits"</p> <p>If AR then fill "SNAP or food stamp benefits"</p> <p>If CA then fill "CalFresh or food stamp benefits"</p> <p>If CO then fill "SNAP or food stamp benefits"</p> <p>If CT then fill "SNAP or food stamp benefits"</p> <p>If DE then fill "Food Supplement Program or food stamp benefits"</p> <p>If DC then fill "SNAP or food stamp benefits"</p> <p>If FL then fill "Food Assistance Program or food stamp benefits"</p> <p>If GA then fill "Georgia Food Stamp Program or food stamp benefits"</p> <p>If HI then fill "SNAP or food stamp benefits"</p> <p>If ID then fill "SNAP or food stamp benefits"</p> <p>If IL then fill "SNAP or food stamp benefits"</p> <p>If IN then fill "SNAP or food stamp benefits"</p> <p>If IA then fill "SNAP or food stamp benefits"</p> <p>If KS then fill "Food Assistance Program or food stamp benefits"</p> <p>If KY then fill "SNAP or food stamp benefits"</p> <p>If LA then fill "SNAP or food stamp benefits"</p> <p>If ME then fill "SNAP or food stamp benefits"</p> <p>If MD then fill "SNAP or food stamp benefits"</p> <p>If MA then fill "SNAP or food stamp benefits"</p> <p>If MI then fill "Food Assistance Program (FSP) or food stamp benefits"</p> <p>If MN then fill "SNAP or food stamp benefits"</p> <p>If MS then fill "SNAP or food stamp benefits"</p> <p>If MO then fill "SNAP or food stamp benefits"</p> <p>If MT then fill "SNAP or food stamp benefits"</p> <p>If NE then fill "SNAP or food stamp benefits"</p> <p>If NV then fill "SNAP or food stamp benefits"</p> <p>If NH then fill "SNAP or food stamp benefits"</p> <p>If NJ then fill "NJ SNAP or food stamp benefits"</p> <p>If NM then fill "SNAP or food stamp benefits"</p> <p>If NY then fill "SNAP or food stamp benefits"</p> <p>If NC then fill "Food and Nutrition Services or food stamp benefits"</p> <p>If ND then fill "SNAP or food stamp benefits"</p> <p>If OH then fill "Food Assistance Program or food stamp benefits"</p> <p>If OK then fill "SNAP or food stamp benefits"</p> <p>If OR then fill "SNAP or food stamp benefits"</p> <p>If PA then fill "SNAP or food stamp benefits"</p> <p>If RI then fill "SNAP or food stamp benefits"</p> <p>If SC then fill "SNAP or food stamp benefits"</p> <p>If SD then fill "SNAP or food stamp benefits"</p> <p>If TN then fill "SNAP or food stamp benefits"</p> <p>If TX then fill "SNAP or food stamp benefits"</p> <p>If UT then fill "SNAP or food stamp benefits"</p> <p>If VT then fill "3SquaresVT or food stamp benefits"</p> <p>If VA then fill "SNAP or food stamp benefits"</p> <p>If WA then fill "Basic Food or food stamp benefits"</p> <p>If WV then fill "SNAP or food stamp benefits"</p> <p>If WI then fill "FoodShare Wisconsin or food stamp benefits"</p> <p>If WY then fill "SNAP or food stamp benefits"</p>
-------------	---

**Response:**

1	Yes
2	No
7	Refused
9	Don't Know

**Universe:**

Sample Child 0-17 and Sample Adult and Sample Child are in the same family and the Sample Adult F00 section has not been completed OR the Sample Adult and Sample Child are not in the same family OR Sample Adult and Sample Child are in the same family and Sample Adult F00 section was not the Sample Child respondent and this person answered all questions asked in the F00 section with RF or DK.

**Skip Instructions:**

```
<1> [goto FSNAP30D_C]
<2,RF,DK> if PCNTF1255_C GE 1 or PCNTC05_C GE 1, [goto FWIC12M_C]
else if PCNTC517_C GE 1 [goto FLUNCH12M1_C]
else [goto FINISH_F00_C]
```

**Replicate To:**

FSNAP12M\_A



2024 National Health Interview Survey (NHIS) Questionnaire

F00: Food Related Programs

Question ID: F00.0020.00.3 Variable: FSNAP30D\_C Interview Module: Child Content Type: Sponsored Content

Question Text:

Did any family members living here receive ^FSSNAPNM in the LAST 30 days?

*\*Read if necessary: This program puts money on a SNAP EBT card that you can only use to buy food.*

Fills:

FSSNAPNM	Description	food stamp benefits/[state food stamp program name]
----------	-------------	---

Instruction	<p>If AL then fill "Food Assistance Program or food stamp benefits"</p> <p>If AK then fill "SNAP or food stamp benefits"</p> <p>If AZ then fill "Nutrition Assistance or food stamp benefits"</p> <p>If AR then fill "SNAP or food stamp benefits"</p> <p>If CA then fill "CalFresh or food stamp benefits"</p> <p>If CO then fill "SNAP or food stamp benefits"</p> <p>If CT then fill "SNAP or food stamp benefits"</p> <p>If DE then fill "Food Supplement Program or food stamp benefits"</p> <p>If DC then fill "SNAP or food stamp benefits"</p> <p>If FL then fill "Food Assistance Program or food stamp benefits"</p> <p>If GA then fill "Georgia Food Stamp Program or food stamp benefits"</p> <p>If HI then fill "SNAP or food stamp benefits"</p> <p>If ID then fill "SNAP or food stamp benefits"</p> <p>If IL then fill "SNAP or food stamp benefits"</p> <p>If IN then fill "SNAP or food stamp benefits"</p> <p>If IA then fill "SNAP or food stamp benefits"</p> <p>If KS then fill "Food Assistance Program or food stamp benefits"</p> <p>If KY then fill "SNAP or food stamp benefits"</p> <p>If LA then fill "SNAP or food stamp benefits"</p> <p>If ME then fill "SNAP or food stamp benefits"</p> <p>If MD then fill "SNAP or food stamp benefits"</p> <p>If MA then fill "SNAP or food stamp benefits"</p> <p>If MI then fill "Food Assistance Program (FSP) or food stamp benefits"</p> <p>If MN then fill "SNAP or food stamp benefits"</p> <p>If MS then fill "SNAP or food stamp benefits"</p> <p>If MO then fill "SNAP or food stamp benefits"</p> <p>If MT then fill "SNAP or food stamp benefits"</p> <p>If NE then fill "SNAP or food stamp benefits"</p> <p>If NV then fill "SNAP or food stamp benefits"</p> <p>If NH then fill "SNAP or food stamp benefits"</p> <p>If NJ then fill "NJ SNAP or food stamp benefits"</p> <p>If NM then fill "SNAP or food stamp benefits"</p> <p>If NY then fill "SNAP or food stamp benefits"</p> <p>If NC then fill "Food and Nutrition Services or food stamp benefits"</p> <p>If ND then fill "SNAP or food stamp benefits"</p> <p>If OH then fill "Food Assistance Program or food stamp benefits"</p> <p>If OK then fill "SNAP or food stamp benefits"</p> <p>If OR then fill "SNAP or food stamp benefits"</p> <p>If PA then fill "SNAP or food stamp benefits"</p> <p>If RI then fill "SNAP or food stamp benefits"</p> <p>If SC then fill "SNAP or food stamp benefits"</p> <p>If SD then fill "SNAP or food stamp benefits"</p> <p>If TN then fill "SNAP or food stamp benefits"</p> <p>If TX then fill "SNAP or food stamp benefits"</p> <p>If UT then fill "SNAP or food stamp benefits"</p> <p>If VT then fill "3SquaresVT or food stamp benefits"</p> <p>If VA then fill "SNAP or food stamp benefits"</p> <p>If WA then fill "Basic Food or food stamp benefits"</p> <p>If WV then fill "SNAP or food stamp benefits"</p> <p>If WI then fill "FoodShare Wisconsin or food stamp benefits"</p> <p>If WY then fill "SNAP or food stamp benefits"</p>
-------------	---

**Response:**

1	Yes
2	No
7	Refused
9	Don't Know

**Universe:**

Sample Child 0-17 and someone in the family received food stamps in the past 12 months

**Skip Instructions:**

```
<1,2,RF,DK> if PCNTF1255_C GE 1 or PCNTC05_C GE 1, [goto FWIC12M_C]  
else if PCNTC517_C GE 1 [goto FLUNCH12M1_C]  
else [goto FINISH_F00_C]
```

**Replicate To:**

FSNAP30D\_A

2024 National Health Interview Survey (NHIS) Questionnaire

FOO: Food Related Programs

Question ID: F00.0030.00.1 Variable: FWIC12M\_C Interview Module: Child Content Type: Annual Core

Question Text:

At any time in the last 12 months did any family members living here receive benefits from the WIC program, that is, the Women, Infants, and Children program?

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 living in families with females 12-55 years of age or children 0-5 years of age and Sample Adult and Sample Child are in the same family and the Sample Adult F00 section has not been completed OR the Sample Adult and Sample Child are not in the same family OR Sample Adult and Sample Child are in the same family and Sample Adult F00 section was asked to someone other than the Sample Child respondent and this person answered all questions asked in the F00 section with RF or DK.

Skip Instructions:

<1,2,RF,DK> If PCNTC517\_C GE 1 [goto FLUNCH12M1\_C]  
else [goto FINISH\_FOO\_C]

Replicate To:

FWIC12M\_A

**2024 National Health Interview Survey (NHIS) Questionnaire**

**FOO: Food Related Programs**

**Question ID:** F00.0040.00.1    **Variable:** FLUNCH12M1\_C    **Interview Module:** Child    **Content Type:** Annual Core

**Question Text:**

At any time in the last 12 months, did ^SCCHILD FAM\_C receive free or reduced-price breakfasts or lunches at school?

*\* **Read if necessary:** The National School Lunch Program and the School Breakfast Program provide cash assistance to states to operate breakfast and lunch programs in schools and residential childcare institutions. The programs provide low-price or free breakfasts and lunches to low-income children in kindergarten through 12th grade.*

**Fills:**

SCCHILD FAM_C	Description	^SCNAME/any child in your family
	Instruction	if PCNTC517_C=1, fill "^SCNAME", elseif PCNTC517_C gt 1, fill "any child in your family",
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

**Response:**

1	Yes
2	No
7	Refused
9	Don't Know

**Universe:**

Sample Children living in families with children between the ages of 5-17 and Sample Child are in the same family and the Sample Adult FOO section has not been completed OR the Sample Adult and Sample Child are not in the same family OR Sample Adult and Sample Child are in the same family and Sample Adult FOO section was asked to someone other than the Sample Child respondent and this person answered all questions asked in the FOO section with RF or DK.

**Skip Instructions:**

<1,2,RF,DK> [goto FINISH\_FOO\_C]

**Replicate To:**

FLUNCH12M1\_A

2024 National Health Interview Survey (NHIS) Questionnaire

FOO: Food Related Programs

Question ID: F00.0050.00.1 Variable: FINISH\_FOO\_C Interview Module: Child Content Type: Annual Core

Question Text:

- \* The Sample Child food related programs section is now complete.
- \* Enter '1' to continue.

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

Skip Instructions:

<1> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

FDS: Food Security

Question ID: FDS.0010.00.3 Variable: FDSINTRO\_C Interview Module: Child Content Type: Sponsored Content

Question Text:

These next questions are about whether you were always able to afford the food you needed in the last 30 days. I'm going to read you several statements that people have made about their food situation. For these statements, please tell me whether the statement was often true, sometimes true, or never true for your family in the last 30 days.

\* Enter '1' to continue.

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

Sample Child 0-17 and Sample Adult and Sample Child are in the same family and the Sample Adult FDS section has not been completed OR the Sample Adult and Sample Child are not in the same family OR the Sample Adult and Sample Child are in the same family and the Sample Adult answered refused or don't know to all questions in the Sample Adult FDS section and the Sample Child respondent is not the Sample Adult respondent

Skip Instructions:

<1> [goto FDSRUNOUT\_C]

Replicate To:

FDSINTRO_A
------------

2024 National Health Interview Survey (NHIS) Questionnaire

FDS: Food Security

Question ID: FDS.0020.00.3 Variable: FDSRUNOUT\_C Interview Module: Child Content Type: Sponsored Content

Question Text:

The first statement is "We worried whether our food would run out before we got money to buy more." Was that often true, sometimes true, or never true for your family in the last 30 days?

Response:

1	Often true
2	Sometimes true
3	Never true
7	Refused
9	Don't Know

Universe:

Sample Child 0-17 and Sample Adult and Sample Child are in the same family and the Sample Adult FDS section has not been completed OR the Sample Adult and Sample Child are not in the same family OR the Sample Adult and Sample Child are in the same family and the Sample Adult answered refused or don't know to all questions in the Sample Adult FDS section and the Sample Child respondent is not the Sample Adult respondent

Skip Instructions:

<1-3,RF,DK> [goto FDSLAST\_C]

Replicate To:

FDSRUNOUT\_A



2024 National Health Interview Survey (NHIS) Questionnaire

FDS: Food Security

Question ID: FDS.0030.00.3 Variable: FDSLAST\_C Interview Module: Child Content Type: Sponsored Content

Question Text:

"The food that we bought just didn't last, and we didn't have money to get more." Was that often true, sometimes true, or never true for your family in the last 30 days?

Response:

1	Often true
2	Sometimes true
3	Never true
7	Refused
9	Don't Know

Universe:

Sample Child 0-17 and Sample Adult and Sample Child are in the same family and the Sample Adult FDS section has not been completed OR the Sample Adult and Sample Child are not in the same family OR the Sample Adult and Sample Child are in the same family and the Sample Adult answered refused or don't know to all questions in the Sample Adult FDS section and the Sample Child respondent is not the Sample Adult respondent

Skip Instructions:

<1-3,RF,DK> [goto FDSBALANCE\_C]

Replicate To:

FDSLAST\_A

2024 National Health Interview Survey (NHIS) Questionnaire

FDS: Food Security

Question ID: FDS.0040.00.3 Variable: FDSBALANCE\_C Interview Module: Child Content Type: Sponsored Content

Question Text:

"We couldn't afford to eat balanced meals." Was that often true, sometimes true, or never true for your family in the last 30 days?

Response:

1	Often true
2	Sometimes true
3	Never true
7	Refused
9	Don't Know

Universe:

Sample Child 0-17 and Sample Adult and Sample Child are in the same family and the Sample Adult FDS section has not been completed OR the Sample Adult and Sample Child are not in the same family OR the Sample Adult and Sample Child are in the same family and the Sample Adult answered refused or don't know to all questions in the Sample Adult FDS section and the Sample Child respondent is not the Sample Adult respondent

Skip Instructions:

<1-2> [goto FDSSKIP\_C]  
<3,RF,DK> if FDSRUNOUT\_C IN (1,2) OR FDSLAST\_C IN (1,2) [goto FDSSKIP\_C];  
else [goto next section]

Replicate To:

FDSBALANCE\_A

2024 National Health Interview Survey (NHIS) Questionnaire

FDS: Food Security

Question ID: FDS.0050.00.3 Variable: FDSSKIP\_C Interview Module: Child Content Type: Sponsored Content

Question Text:

In the last 30 days, did ^youorother\_C ever cut the size of your meals or skip meals because there wasn't enough money for food?

Fills:

youorother_C	Description	you/you or other adults in your family
	Instruction	If PCNT18UP_C=1 fill "you" else fill: "you or other adults in your family"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Child 0-17 and Sample Adult and Sample Child are in the same family and the Sample Adult FDS section has not been completed OR the Sample Adult and Sample Child are not in the same family OR the Sample Adult and Sample Child are in the same family and the Sample Adult answered refused or don't know to all questions in the Sample Adult FDS section and the Sample Child respondent is not the Sample Adult respondent and respondent answered often true or sometimes true that in the last 30 days they worried that food would run out before they got money to buy more, or that the food that was bought didn't last and they didn't have money to get more or couldn't afford to eat balanced meals.

Skip Instructions:

<1> [goto FDSSKIPDYS\_C]  
<2,RF,DK> [goto FDSLESS\_C]

Replicate To:

FDSSKIP\_A

2024 National Health Interview Survey (NHIS) Questionnaire

FDS: Food Security

Question ID: FDS.0060.00.3 Variable: FDSSKIPDYS\_C Interview Module: Child Content Type: Sponsored Content

Question Text:

In the last 30 days, how many days did this happen?

Response:

01-30	Range of values
97	Refused
99	Don't Know

Universe:

Sample Child 0-17 and Sample Adult and Sample Child are in the same family and the Sample Adult FDS section has not been completed OR the Sample Adult and Sample Child are not in the same family OR the Sample Adult and Sample Child are in the same family and the Sample Adult answered refused or don't know to all questions in the Sample Adult FDS section and the Sample Child respondent is not the Sample Adult respondent respondent answered they skipped meals due to cost

Skip Instructions:

<1-30,RF,DK> [goto FDSLESS\_C]

Replicate To:

FDSSKIPDYS\_A

2024 National Health Interview Survey (NHIS) Questionnaire

FDS: Food Security

Question ID: FDS.0070.00.3 Variable: FDSLESS\_C Interview Module: Child Content Type: Sponsored Content

Question Text:

In the last 30 days, did ^youorother\_C ever eat less than you felt you should because there wasn't enough money for food?

Fills:

youorother_C	Description	you/you or other adults in your family
	Instruction	If PCNT18UP_C=1 fill "you" else fill: "you or other adults in your family"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Child 0-17 and Sample Adult and Sample Child are in the same family and the Sample Adult FDS section has not been completed OR the Sample Adult and Sample Child are not in the same family OR the Sample Adult and Sample Child are in the same family and the Sample Adult answered refused or don't know to all questions in the Sample Adult FDS section and the Sample Child respondent is not the Sample Adult respondent and respondent answered often true or sometimes true that in the last 30 days they worried that food would run out before they got money to buy more, or that the food that was bought didn't last and they didn't have money to get more or couldn't afford to eat balanced meals.

Skip Instructions:

<1,2,RF,DK> [goto FDSHUNGRY\_C]

Replicate To:

FDSLESS\_A

2024 National Health Interview Survey (NHIS) Questionnaire

FDS: Food Security

Question ID: FDS.0080.00.3 Variable: FDSHUNGRY\_C Interview Module: Child Content Type: Sponsored Content

Question Text:

In the last 30 days, were ^youorother\_C ever hungry but didn't eat because there wasn't enough money for food?

Fills:

youorother_C	Description	you/you or other adults in your family
	Instruction	If PCNT18UP_C=1 fill "you" else fill: "you or other adults in your family"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Child 0-17 and Sample Adult and Sample Child are in the same family and the Sample Adult FDS section has not been completed OR the Sample Adult and Sample Child are not in the same family OR the Sample Adult and Sample Child are in the same family and the Sample Adult answered refused or don't know to all questions in the Sample Adult FDS section and the Sample Child respondent is not the Sample Adult respondent and respondent answered often true or sometimes true that in the last 30 days they worried that food would run out before they got money to buy more, or that the food that was bought didn't last and they didn't have money to get more or couldn't afford to eat balanced meals.

Skip Instructions:

<1,2,RF,DK> [goto FDSWEIGHT\_C]

Replicate To:

FDSHUNGRY\_A

2024 National Health Interview Survey (NHIS) Questionnaire

FDS: Food Security

Question ID: FDS.0090.00.3 Variable: FDSWEIGHT\_C Interview Module: Child Content Type: Sponsored Content

Question Text:

In the last 30 days, did ^youorother\_C lose weight because there wasn't enough money for food?

Fills:

youorother_C	Description	you/you or other adults in your family
	Instruction	If PCNT18UP_C=1 fill "you" else fill: "you or other adults in your family"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Child 0-17 and Sample Adult and Sample Child are in the same family and the Sample Adult FDS section has not been completed OR the Sample Adult and Sample Child are not in the same family OR the Sample Adult and Sample Child are in the same family and the Sample Adult answered refused or don't know to all questions in the Sample Adult FDS section and the Sample Child respondent is not the Sample Adult respondent and respondent answered often true or sometimes true that in the last 30 days they worried that food would run out before they got money to buy more, or that the food that was bought didn't last and they didn't have money to get more or couldn't afford to eat balanced meals.

Skip Instructions:

<1> [goto FDSNOTEAT\_C]  
<2,RF,DK> if FDSSKIP\_C=1 or FDSLESS\_C=1 or FDSHUNGRY\_C=1 [goto FDSNOTEAT\_C]; else [goto next section]

Replicate To:

FDSWEIGHT\_A

2024 National Health Interview Survey (NHIS) Questionnaire

FDS: Food Security

Question ID: FDS.0100.00.3 Variable: FDSNOTEAT\_C Interview Module: Child Content Type: Sponsored Content

Question Text:

In the last 30 days, did ^youorother\_C ever not eat for a whole day because there wasn't enough money for food?

Fills:

youorother_C	Description	you/you or other adults in your family
	Instruction	If PCNT18UP_C=1 fill "you" else fill: "you or other adults in your family"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Child 0-17 and Sample Adult and Sample Child are in the same family and the Sample Adult FDS section has not been completed OR the Sample Adult and Sample Child are not in the same family OR the Sample Adult and Sample Child are in the same family and the Sample Adult answered refused or don't know to all questions in the Sample Adult FDS section and the Sample Child respondent is not the Sample Adult respondent and respondent answered they cut the size of the meals, skipped meals, were hungry but didn't eat, or lost weight in the last 30 days because there wasn't enough money for food.

Skip Instructions:

<1> [goto FDSNEDAYS\_C]  
<2,RF,DK> [goto next section]

Replicate To:

FDSNOTEAT\_A



2024 National Health Interview Survey (NHIS) Questionnaire

FDS: Food Security

Question ID: FDS.0110.00.3 Variable: FDSNEDAYS\_C Interview Module: Child Content Type: Sponsored Content

Question Text:

In the last 30 days, how many days did this happen?

Response:

01-30	Range of values
97	Refused
99	Don't Know

Universe:

Sample Child 0-17 and Sample Adult and Sample Child are in the same family and the Sample Adult FDS section has not been completed OR the Sample Adult and Sample Child are not in the same family OR the Sample Adult and Sample Child are in the same family and the Sample Adult answered refused or don't know to all questions in the Sample Adult FDS section and the Sample Child respondent is not the Sample Adult respondent and adults in the family have ever not eaten for a whole day because there wasn't enough money for food in the last 30 days

Skip Instructions:

<1-30,RF,DK> [goto next section]

Replicate To:

FDSNEDAYS\_A

2024 National Health Interview Survey (NHIS) Questionnaire

HOU: Housing

Question ID: HOU.0010.00.1 Variable: HOUYRSLIV\_C Interview Module: Child Content Type: Annual Core

Question Text:

About how long has ^SCNAME lived in this house/apartment?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Less than 1 year
2	1 to 3 years
3	4 to 10 years
4	More than 10 years
7	Refused
9	Don't Know

Universe:

Sample Children 1-17

Skip Instructions:

<1-4,RF,DK> if ((SAMEFAM\_FLG=1 and HOU\_FLG\_A=blank) or (SAMEFAM\_FLG ne 1) or (SAMEFAM\_FLG=1 and HOU\_FLG\_A=2 and SAREPSC\_FLG ne 1)) [goto HOUTENURE\_C]  
else [goto next section]

If GEN.AGE\_FINAL[PX\_C] lt 11 and HOUYRSLIV\_C=4 [goto ERR1\_HOUYRSLIV\_C]

Hard Edit:

Check Text	Check Description	Check Text
ERR1_HOUYRSLIV_C	Hard check when years lived in home exceeds age	{check } Years in house/apartment exceed child's age. Please correct.

2024 National Health Interview Survey (NHIS) Questionnaire

HOU: Housing

Question ID: HOU.0020.00.1 Variable: HOUTENURE\_C Interview Module: Child Content Type: Annual Core

Question Text:

Is this house/apartment owned or rented by you ^SOMEFAM\_C?

\* If house has a mortgage, record as owned.

Fills:

SOMEFAM_C	Description	or someone in your family
	Instruction	If PCNT_C=2 fill: blank If PCNT_C gt 2 fill: "or someone in your family"

Response:

1	Owned or being bought
2	Rented
3	Other arrangement
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 and Sample Adult and Sample Child are in the same family and the Sample Adult HOU section has not been completed OR the Sample Adult and Sample Child are not in the same family OR Sample Adult and Sample Child are in the same family and Sample Adult HOU section was asked to someone other than the Sample Child respondent and this person answered all questions asked in the HOU section with RF or DK.

Skip Instructions:

<1,3,RF,DK> [goto next section]  
<2> [got HOUVASST\_C]

Replicate To:

HOUTENURE\_A

2024 National Health Interview Survey (NHIS) Questionnaire

HOU: Housing

Question ID: HOU.0030.00.1 Variable: HOUVASST\_C Interview Module: Child Content Type: Annual Core

Question Text:

Is anyone in your family paying lower rent because the Federal, State, or local government is paying part of the cost?

*\* Read if necessary: Federal, State, or Local government housing programs for persons with low income may take many forms. Government housing assistance could come from monetary assistance to help pay rent, a program called "Section 8," direct payments to landlords, vouchers, or other types of assistance from a local housing authority. Living in public housing is considered housing assistance from the government.*

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 living in a house/apartment that is being rented and Sample Adult and Sample Child are in the same family and the Sample Adult HOU section has not been completed OR the Sample Adult and Sample Child are not in the same family OR Sample Adult and Sample Child are in the same family and Sample Adult HOU section was asked to someone other than the Sample Child respondent and this person answered all questions asked in the HOU section with RF or DK.

Skip Instructions:

<1,2,RF,DK> [goto next section]

Replicate To:

HOUVASST\_A

2024 National Health Interview Survey (NHIS) Questionnaire

REC: Child's full name

Question ID: REC.0010.00.1 Variable: LNKFNAME\_C Interview Module: Child Content Type: Annual Core

Question Text:

\* **Ask or verify:** What is ^SCNAME's full name?

\* **Enter first name.**

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<allow 20,RF,DK> [goto LNKMNAME\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

REC: Child's full name

Question ID: REC.0020.00.1 Variable: LNKMNAME\_C Interview Module: Child Content Type: Annual Core

Question Text:

- \* Enter middle name.
- \* Press "Enter" to skip to last name if child has no middle name.

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<allow 20,RF,DK> [goto LNKLNAME\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

REC: Child's full name

Question ID: REC.0030.00.1 Variable: LNKLNAME\_C Interview Module: Child Content Type: Annual Core

Question Text:

\* Enter last name.

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<allow 20,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

TEL: Telephone ownership

Question ID: TEL.0010.00.1 Variable: TELCURWRK\_C Interview Module: Child Content Type: Annual Core

Question Text:

Is there at least one telephone INSIDE ^SCNAME's home that is currently working and is not a cell phone?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who live in the same family as a sample adult, where TELCURWRK\_A has not be asked  
OR who live in the same family as a sample adult, where TELCURWRK\_A was answered don't know or refused and the sample child respondent is not the sample adult  
OR who do not live in the same family as the sample adult

Skip Instructions:

<1,2,RF,DK> [goto PHONELIVE\_C]

Replicate To:

TELCURWRK\_A



2024 National Health Interview Survey (NHIS) Questionnaire

TEL: Telephone ownership

Question ID: TEL.0020.00.1 Variable: PHONELIVE\_C Interview Module: Child Content Type: Annual Core

Question Text:

Does ^SCNAME live with anyone who has a working cell phone?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 in a family with at least one other person without working cell phones where Sample Adult does not live in same family as Sample Child or Sample Adult and Sample Child are in the same family but PHONELIVE\_A has not been asked OR Sample Adult and Sample Child are in the same family, PHONELIVE\_A was answered dk/rf and the Sample Adult is not the Sample Child Respondent.

Skip Instructions:

<1,2,RF,DK> [goto next section]

Replicate To:

PHONELIVE\_A

2024 National Health Interview Survey (NHIS) Questionnaire

LNK: Linkage

Question ID: LNK.0010.00.1 Variable: LNKINTRO\_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

We would like the last four digits of ^SCNAME's Social Security Number. This information will help us link ^hisher\_C survey data with other health-related records of other government agencies, and allow us to conduct additional research without taking up your time with more questions. The National Center for Health Statistics (NCHS) uses this information for research purposes only. Providing this information is voluntary. There will be no effect on ^SCNAME's benefits if you do not provide this information. Federal laws authorize us to ask for this information. Like all other answers you have provided, this information will remain confidential.

\* **Read if necessary:** *The specific federal laws protecting ^SCNAME's privacy and the confidentiality of ^hisher\_C data are the Public Health Service Act (Title 42, U.S.C., Section 242m(d)); the Confidential Information Protection and Statistical Efficiency Act (44 U.S.C. §§ 3561-3583); and the Privacy Act of 1974 (5 U.S.C. § 552a). In addition to the above cited laws, NCHS complies with the Federal Cybersecurity Enhancement Act of 2015 (6 U.S.C. §§ 151 and 151 note) which protects Federal information systems from cybersecurity risks by screening their networks.*

\* **Read if necessary:** *NCHS collects health-related data from other government agencies, including records from Medicare and Medicaid Services, Social Security, housing, and death certificates. If you agree, NCHS will attempt to link records such as these with ^SCNAME's survey data to give a fuller picture of the kinds of things that affect health. NCHS does this linkage. ^SCNAME's name and ^hisher\_C information are not given to these agencies.*

\* **Read if necessary: If asked:** *^SCNAME's data will not be linked to reco*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

Sample Children 0-17

Skip Instructions:

<1> [goto SSN4\_C]

2024 National Health Interview Survey (NHIS) Questionnaire

LNK: Linkage

Question ID: LNK.0020.00.1 Variable: SSN4\_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

What are the last four digits of ^SCNAME's Social Security Number?

**Read if necessary:** *Providing this information is voluntary. There will be no effect on ^SCNAME's benefits if you do not provide this information. Federal laws authorize us to ask for this information. Like all other information you have provided, these answers will remain confidential.*

**Read if asked about specific laws:** *The specific federal laws protecting ^SCNAME's privacy and the confidentiality of ^hisher\_C data are the Public Health Service Act, which is Title 42, U.S.C., Section 242m(d); the Confidential Information Protection and Statistical Efficiency Act (44 U.S.C. §§ 3561-3583); and the Privacy Act of 1974, which is 5 U.S.C. § 552a. In addition to the above cited laws, NCHS complies with the Federal Cybersecurity Enhancement Act of 2015 (6 U.S.C. §§ 151 and 151 note) which protects Federal information systems from cybersecurity risks by screening their networks.*

\* Enter 'N' if no Social Security Number.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"

Response:

0001-9999	Range of values
N	No Social Security Number
99997	Refused
99999	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

```
if SSN4_C=Adult.LNK.SSN4_A [goto ERR1_SSN4_C]
elseif SSN4_C=000-999 [goto ERR2_SSN4_C]
elseif SSN4_C NOT IN (N,DK,RF,000-999,0001-9999) [goto ERR3_SSN4_C]
<0001-9999> [goto THANKS_C]
<N,RF,DK> [goto RLINK_C]
```

Hard Edit:

Check Text	Check Description	Check Text
ERR2_SSN4_C	Entered less than four digits hard edit	{check }  You must enter all four of the last four digits of the Social Security Number.  Please correct.

ERR3_SSN4_C	SSN last four digits are 0000 or a letter other than N hard edit	<p>{check }</p> <p>The last 4 digits of a SSN may be between 0001-9999.</p> <p>For a respondent who does not want to provide the SSN, enter 'Ctrl D' or 'Ctrl R' for 'Don't Know' or 'Refused.'</p> <p>If a respondent does not have a SSN, enter 'N'.</p> <p>Please correct.</p>
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**Soft Edit:**

Check Text	Check Description	Check Text
ERR1_SSN4_C	SA and SC SSN the same soft edit	<p>{signal }</p> <p>The last four digits of ^SCNAME's Social Security Number are the same as the last four digits of ^SANAME's Social Security Number. Please verify.</p>

2024 National Health Interview Survey (NHIS) Questionnaire

LNK: Linkage

Question ID: LNK.0030.00.1 Variable: RLINK\_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

May we try to link ^SCNAME's survey data without a Social Security Number?

*\* Read if necessary: Any data obtained are protected by strict federal laws, including the Public Health Service Act, which is Title 42, U.S.C., Section 242m(d); the Confidential Information Protection and Statistical Efficiency Act (44 U.S.C. §§ 3561-3583); and the Privacy Act of 1974, which is 5 U.S.C. § 552a. In addition to the above cited laws, NCHS complies with the Federal Cybersecurity Enhancement Act of 2015 (6 U.S.C. §§ 151 and 151 note) which protects Federal information systems from cybersecurity risks by screening their networks.*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample child 0-17 where SSN was refused, don't know or not available.

Skip Instructions:

<1,2,RF,DK> [goto next section]

2024 National Health Interview Survey (NHIS) Questionnaire

THX: Thanks

Question ID: THX.0010.00.1 Variable: THANKS\_C Interview Module: Child Content Type: Annual Core

Question Text:

\* Thank respondent for answering these questions. If there is a Sample Adult interview to complete, ask for appropriate person to respond to these questions.

Enter '1' to continue.

Response:

1	Enter 1 to Continue
---	---------------------

Universe:

Sample Children 0-17

Skip Instructions:

<1> [goto SCRESP\_FNAME]

2024 National Health Interview Survey (NHIS) Questionnaire

THX: Thanks

Question ID: THX.0020.01.1 Variable: SCRESP\_FNAME Interview Module: Child Content Type: Annual Core

Question Text:

\* **Ask or verify:** In case I or someone from my office needs to get in touch with you, we need your full name. What is your full name?

\* **Enter first name.**

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<allow 20,RF,DK> [goto SCRESP\_LNAME]

2024 National Health Interview Survey (NHIS) Questionnaire

THX: Thanks

Question ID: THX.0020.02.1 Variable: SCRESP\_LNAME Interview Module: Child Content Type: Annual Core

Question Text:

\* Enter last name.

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<allow 20,RF,DK> [goto next section]



## Variable Glossary

NAME	Description
AGE	Age storage variable
AGE_CALC_A	Calculate age based on birth year given
AGE_CALC_C	Calculate age based on birth year given
AGE_CALCMINUS1_A	Calculate younger age if unable to accurately calculate respondent's age due to incomplete DOB
AGE_CALCMINUS1_C	Calculate younger age if unable to accurately calculate SC age due to incomplete DOB
AGE_FINAL	Final storage variable for AGE
AGEDIFF	Difference between parent selected at WHOPAR and child
AGETEMP_A	Temporary storage variable for AGE and NEWAGE
AGETEMP_C	Temporary storage variable for AGE and NEWAGE
ARRANGE_CALLBACK	Summary screen and landing point for parallel tab/F9
AVAIL_A	Sample Adult Available
CASESTATUS	Status display
CB_POSSIBLE	Is a callback possible for this section
CBSTAT_A	Status of Sample Adult callback
CHILDAGE	{Value of AGE}/is less than 1
CHILDNAME	{Value of ALIAS}
CHTCM_C	Total height in centimeters
CHTINCH_C	Total height in inches
DOB_COUNT_A	Counter used to loop back to recollect DOB one time
DOB_COUNT_C	Counter used to loop back to recollect DOB one time
FAMILYA_FLG	Identified as being in Sample Adult's family
FAMILYC_FLG	Identified as being in Sample Child's family
FITCOLGCUR_FLG_A	Sample Adult FIT or Cologuard is current flag
FOSTPARAGE	{Value of AGE}
FOSTPARNAME	{Value of ALIAS}
FX_REL	Family Number Based on Responses in tblREL
FX_RELATESA	Family Number Based on Responses given in tblREL and tblRELATESA
GICHECK_FLG	GICHECK loop flag
GNIPATH_FLG	Flag that is randomly set to determine the path that will be used in the Adult.GNI block
HHRESPSA_FLG	Sample Adult is the household respondent or the proxy who lives in the household is the household respondent
HHRESPSC_FLG	Sample Child respondent is the household respondent
HHSTAT_D	Indicates person is deleted
HHSTAT_M	Indicates person is active duty military

HOU_FLG_A	Sample Adult HOU completion flag
HOU_FLG_C	Sample Child HOU completion flag
INSPRI_FLG	Sample Adult has private health insurance (but not Medigap) and Sample Child has private health insurance (but not Medigap) flag
INSPRI2_FLG2_A	Sample Child is covered by more than 1 private health insurance plan flag
INSPRI2_FLG2_C	Sample Adult is covered by more than 1 private health insurance plan flag
INSPRI2_FLG3_A	Sample Child is not the policy holder of the second private plan OR Sample Child's first private plan covers others or don't know/refused if it covers others FLAG
INSPRI2_FLG3_C	Sample Adult is not the policy holder of the second private plan OR Sample Adult's second private plan covers others or don't know/refused if it covers others FLAG
INSPRI2_FLG4_A	Sample Child respondent provided a name for the second private plan FLAG
INSPRI2_FLG4_C	Sample Adult provided a name for the second private plan FLAG
INSPRI2_FLG5_A	The source of and who pays for the Sample Child's coverage are not refused or don't know for the second plan FLAG
INSPRI2_FLG5_C	The source of and who pays for the Sample Adult's coverage are not refused or don't know for the second plan FLAG
JOB2_FLG	JOB section flag 1 (JOBWRKSICK_A,JOBMISS_A)
KNOAVAIL_Count	Count of people available for selection at KNOAVAIL_C
LNO_HHRESP	Line number of Household Respondent
LNO_SCRESP	Line number of Sample Child respondent
MAR_FLG_A	Sample Adult MAR marital status flag (where we know which of the five legal marital status groups the adult ultimately falls into or the marital status of the adult's spouse/partner)
NATO_FINAL	Final storage variable for National Origin
NONFOST_FINAL	Final non-foster parents
OUTCOME	Outcome
PAR_FLG_C	Sample Child PAR marital status flag
PARENTAGE	{Value of AGE}
PARENTNAME	{Value of ALIAS}
PARENTS	Stores line numbers of people selected at WHOPAR or WHOFOST
PARENTS_FINAL	Final parents
PCNT	Count of all non-deleted household members
PCNT_A	Count of persons in Sample Adult family
PCNT_C	Count of persons in Sample Child family
PCNT_EligibleKNOWSC	Number of people eligible to be selected at KNOWSC
PCNT16PLUS	Count of persons 16 or older
PCNT16PLUSNOSC	Count of persons 16 or older minus the sample child
PCNT18PLUS	Count of persons 18 or older
PCNT66UP_A	Count of persons age 66+ in Sample Adult family
PCNT66UP_C	Count of persons age 66+ in Sample Child family
PCNTAGEAF	Count of persons eligible for Armed Forces question

PCNTC05_A	Count of children ages 0-5 in Sample Adult family
PCNTC05_C	Count of children ages 0-5 in Sample Child family
PCNTC517_A	Count of children ages 5-17 in Sample Adult family
PCNTC517_C	Count of children ages 5-17 in Sample Child family
PCNTEligibleSA	Count of all persons eligible to be the Sample Adult
PCNTEligibleSC	Count of all persons eligible to be the Sample Child
PCNTF1255_A	Count of females ages 12-55 in Sample Adult family
PCNTF1255_C	Count of females ages 12-55 in Sample Child family
PCNTFX_SA_AfterREL	Count of the number of people that are in the SA's family in FX_REL array (including SA)
PCNTUNDER18	Count of persons under 18 in HH
procSetFAMILY_FLGs	Procedure to set FAMILYA_FLG and FAMILYC_FLG
procSetFX_RELATE_SA	Procedure to set FX_RELATESA
PX_A	Line number of Sample Adult
PX_C	Line number of Sample Child
RACE_FINAL	Final storage variable for Race
RACE_VRBAT_FINAL	Final storage variable for other race verbatim
SAMEFAM_FLG	Sample Adult/Sample Child same family flag
SARESPSC_FLG	Sample Adult is Sample Child respondent
SASCSELECTION	Sample Adult and Sample Child random selection
SELECT_SA	Allows selection of Sample Adult for training cases
SELECT_SC	Allows selection of Sample Child for training cases
SEX_FINAL	Final storage variable for SEX
SMKERR1_CALC_A	Calculation of respondent's age when quit smoking
SMKERR2_CALC_A	Calculation of age started smoking + how long since quit smoking
SURVTYPE	Survey type
tblFEM_A	Adult Family Employment Table
tblFEM_C	Child Family Employment Table
tblPARBORN	Nativity of residential parents
tblPARREL	relationship status of child to non-foster residential parents
tblRELATE_SA	Relationship to Sample Adult
tblRELATE_SC	Relationship to Sample Child
THANKS_CB	Thanks - Will Call Back
THANKS_INSUF	Thanks for Your Time
THANKS_SUF	Thanks for Your Cooperation
TLNO_FAM_DRM	Line number of telephone number selected at PHONE_CONTACT for the Sample Adult living in on-campus housing
TLNO_TEL_SA	Line number of telephone number selected at PHONE_CONTACT for the Sample Adult
WHOREADLTR	Read the mailed advance letter