NIS Child Influenza Module (NIS-CIM) Hard Copy Questionnaire

Q4/2013 – Q2/2014

Confidential Information

Information contained on this form which would permit identification of any individual or establishment has been collected with a guarantee that it will be held in strict confidence by NORC and CDC, will be used only for purposes states in this study, and will not be disclosed or released to anyone other than authorized staff of CDC without the consent of the individual or establishment in accordance with Section 308(d) of the Public Health Service Act (42 U.S.C. 242.m)
Thank you for your answers, now I have some additional questions about other children in your household.

TERMINATE THE INTERVIEW..............................1  GO TO LF_UNDR18

Please tell me how many people less than 18 years old live in this household.

ENTER NUMBER OF CHILDREN ______
IF NO CHILDREN ENTER 00 ...........................1  GO TO LF_NOCHILD
IF GREATER THAN 0....................................1  GO TO LF_AGE_X
DON'T KNOW ............................................77  GO TO LF_ASK_ANOTHER
REFUSED ....................................................99  GO TO R1

Is there anyone in your household who knows how many people in this household are less than 18 years old?

NEW PERSON COMES TO PHONE ....................1  GO TO LF_NEWR
NO ............................................................2  GO TO LF_TERM

Hello, my name is _________________. I'm calling on behalf of the Centers for Disease Control and Prevention. We are doing a nationwide survey about the health of children and teenagers, and I was told that you were the person to talk with about the children in this household.

I AM THAT PERSON ....................................1  GO TO LF_UNDR18
NO, I AM NOT THAT PERSON ..........................2  GO TO LF_ASK_ANOTHER

Thank you, we'll try back another time.

Those are all the questions I have. I'd like to thank you on behalf of the Centers for Disease Control and Prevention for the time and effort you've spent answering these questions.
LF_AGE_X  IF S_UNDR18 = 1, FILL “age” AND “child”. ELSE, FILL “ages” AND “children”.

IF S_NUMB = 0, DISPLAY THIS TEXT WHEN ASKING ABOUT FIRST CHILD:
“Many of my questions are only for children of certain ages. So, I’ll know which questions to ask, please tell me the [age/ages] of the [child/children] less than 18 years old living in this household.” FOR ALL SUBSEQUENT CHILDREN (LOOP UNTIL # OF CHILDREN=S_UNDR18) DISPLAY: (READ IF NECESSARY: ”Please tell me the age of the next child who lives in this household.”)

DISPLAY FOR AGE_1 INTERVIEWER: ”IF RESPONDENT PROVIDES AGES FOR ALL CHILDREN UP FRONT, TYPE IN THE AGES AS CATI PROMPTS FOR THEM.”

ENTER 77 FOR DON’T KNOW AND 99 FOR REFUSED

IF AGE IS LESS THAN 1 MONTH OLD, RECORD 0 MONTHS.

ENTER NUMBER OF CHILDREN ________________  GO TO LF_CP_SELECTION

LF_CP_SELECTION

IF S3_EVAL_R OR TIS_S3_EVAL_R ARE NOT MISSING AND IF HH HAS CHILD OR CHILDREN 0-18 MONTHS AND/OR 36-155 MONTHS THEN COMPLETE A RANDOM SELECTION OF THIS/THESE CHILD/CHILDREN AND GO TO C12_INTRO, ELSE

IF S3_EVAL_R AND TIS_S3_EVAL_R ARE MISSING AND IF HH HAS CHILD OR CHILDREN 0-18 MONTHS AND/OR 36-155 MONTHS THEN COMPLETE A RANDOM SELECTION OF THIS/THESE CHILD/CHILDREN AND GO TO LF_TIS_S3_INTRO, ELSE GO TO LF_12_EXIT.

LF_TIS_S3_INTRO

Before we continue, I’d like you to know that taking part in this research is voluntary. You may choose not to answer any questions you don’t wish to answer, or end the interview at any time with no impact on the benefits you may receive. We are required by Federal laws to develop and follow strict procedures to protect your information and use your answers only for statistical research. I can describe these laws if you wish. In order to review my work, this call will be recorded and my supervisor may listen as I ask the questions. I’d like to continue now unless you have any questions.

CONTINUE .................................................................1  GO TO LF_TIS_S3_EVAL_R
RESPONDENT ASKS FOR DESCRIPTION OF LAW..................................................2  GO TO LF_TIS_S3_LAW
The Public Health Service Act is Title 42 of the US Code, Section 242k. The collection of information in this survey is authorized by Section 306 of this Act. Through the National Center for Health Statistics, the confidentiality of your responses is assured by Section 308d of this Act, and the Confidential Information Protection and Statistical Efficiency Act. Would you like me to read the Confidential Information Protection provisions to you?

IF RESPONDENT WOULD LIKE TO HEAR PROVISIONS, READ:

The information you provide will be used for statistical purposes only. In accordance with the Confidential Information Protection provisions of Title V, Subtitle A, Public Law 107-347 and other applicable Federal laws, your responses will be kept confidential and will not be disclosed in identifiable form to anyone other than employees or agents. By law, every employee of the National Center for Health Statistics and its collaborating agency and contractor, specifically the National Center for Immunization and Respiratory Diseases and the National Opinion Research Center, and their agents and contractors who work on this survey has taken an oath and is subject to a jail term of up to 5 years, a fine of up to $250,000, or both, if he or she willingly discloses ANY identifiable information about you or your household members.

YES, RESPONDENT AGREES TO RECORDING ......1 GO TO C12_INTRO
NO, RESPONDENT DOES NOT AGREE TO RECORDING .......................................................2 GO TO C12_INTRO

Thank you for your answers about your household
[IF CWTYPE=S THEN READ “and [S.C.’s health”].
[IF S.C. = S.P. THEN READ] “I have just a few more questions about [S.C.] and flu vaccinations.”
[ELSE IF NIS, TEEN OR SLAITS COMPLETE, READ] “I now have just a few questions about your [AGE ID] and flu vaccinations.”
[ELSE READ]: “I now have just a few questions about your [AGE ID] and flu vaccinations. The remainder of the survey will take about 5 minutes.”

CONTINUE .....................................................................1 GO TO LF_C1Q01

Is [S.C.] male or female?

MALE ..............................................................................1 GO TO LF_C1Q02
FEMALE ..........................................................................2 GO TO LF_C1Q02
DON’T KNOW ..................................................................77 GO TO LF_C1Q02
REFUSED .........................................................................99 GO TO LF_C1Q02

Longflu Children <1 year old at LF_AGE_X skip to FS3MTH
FS3MTH So I’ll know which vaccination questions to ask, please tell me the month, day, and year of 

ENTER 77 / 77 / 7777 FOR DON'T KNOW
ENTER 99 / 99 / 9999 FOR REFUSED

IT IS ACCEPTABLE TO ENTER 77/99 FOR ANY PART OF THE DATE. FOR 
EXAMPLE: 77/12/2012

ALL SKIP TO LF_A_CON

LF_A_CON That would make this child [calculated age from FS3MTH]; is that correct?

[if < 6 mo as of Dec 1, 2013, then child is ineligible]

(01) YES [IF ELIG, GO TO LF_C1Q02; ELSE GO TO FNOCHILD]
(02) NO [GO TO FS3MTH]

LF_C1Q02 What is your relationship to [S.C.]?

<table>
<thead>
<tr>
<th>Relationship</th>
<th>Go To</th>
</tr>
</thead>
<tbody>
<tr>
<td>BIOLOGICAL MOTHER</td>
<td>GO TO LF_C12Q6</td>
</tr>
<tr>
<td>STEP MOTHER</td>
<td>GO TO LF_C12Q6</td>
</tr>
<tr>
<td>FOSTER MOTHER</td>
<td>GO TO LF_C12Q6</td>
</tr>
<tr>
<td>ADOPTIVE MOTHER</td>
<td>GO TO LF_C12Q6</td>
</tr>
<tr>
<td>MOTHER, BUT TYPE REFUSED</td>
<td>GO TO LF_C12Q6</td>
</tr>
<tr>
<td>BIOLOGICAL FATHER</td>
<td>GO TO LF_C12Q6</td>
</tr>
<tr>
<td>STEP FATHER</td>
<td>GO TO LF_C12Q6</td>
</tr>
<tr>
<td>FOSTER FATHER</td>
<td>GO TO LF_C12Q6</td>
</tr>
<tr>
<td>ADOPTIVE FATHER</td>
<td>GO TO LF_C12Q6</td>
</tr>
<tr>
<td>FATHER, BUT TYPE REFUSED</td>
<td>GO TO LF_C12Q6</td>
</tr>
<tr>
<td>GRANDMOTHER</td>
<td>GO TO LF_C12Q6</td>
</tr>
<tr>
<td>GRANDFATHER</td>
<td>GO TO LF_C12Q6</td>
</tr>
<tr>
<td>AUNT</td>
<td>GO TO LF_C12Q6</td>
</tr>
<tr>
<td>UNCLE</td>
<td>GO TO LF_C12Q6</td>
</tr>
<tr>
<td>FEMALE GUARDIAN</td>
<td>GO TO LF_C12Q6</td>
</tr>
<tr>
<td>MALE GUARDIAN</td>
<td>GO TO LF_C12Q6</td>
</tr>
<tr>
<td>SISTER</td>
<td>GO TO LF_C12Q6</td>
</tr>
<tr>
<td>BROTHER</td>
<td>GO TO LF_C12Q6</td>
</tr>
<tr>
<td>COUSIN</td>
<td>GO TO LF_C12Q6</td>
</tr>
<tr>
<td>IN-LAW OF ANY TYPE</td>
<td>GO TO LF_C12Q6</td>
</tr>
<tr>
<td>OTHER RELATIVE</td>
<td>GO TO LF_C12Q6</td>
</tr>
<tr>
<td>PARENT’S BOYFRIEND/MALE PARTNER</td>
<td>GO TO LF_C12Q6</td>
</tr>
<tr>
<td>PARENT’S GIRLFRIEND/FEMALE PARTNER</td>
<td>GO TO LF_C12Q6</td>
</tr>
<tr>
<td>PARENT’S PARTNER, SEX REFUSED</td>
<td>GO TO LF_C12Q6</td>
</tr>
<tr>
<td>OTHER NON-RELATIVE OR FRIEND</td>
<td>GO TO LF_C12Q6</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>GO TO LF_C12Q6</td>
</tr>
<tr>
<td>REFUSED</td>
<td>GO TO LF_C12Q6</td>
</tr>
</tbody>
</table>
Since July 1, 2013 has [S.C.] had a flu vaccination? There are two types of flu vaccinations. One is a shot and the other is a spray, mist or drop in the nose.

YES ..................................................................................1  GO TO LF_C12Q8
NO ................................................................................... .2  GO TO LF_C12Q15
DON’T KNOW ....................................................................77  GO TO LF_C12Q15
REFUSED ........................................................................... 99  GO TO LF_C12Q15

How many flu vaccinations has [S.C.] received since July 1, 2013?

1 VACCINATION OR DOSE .............................................1  GO TO LF_C12Q9
2 VACCINATIONS OR DOSES .......................................2  GO TO LF_C12Q9
DON’T KNOW ....................................................................77  GO TO LF_C12Q12
REFUSED ........................................................................... 99  GO TO LF_C12Q12

During what month did [S.C.] receive [his/her] first dose of the flu vaccine, since July 1, 2013?

INTERVIEW INSTRUCTION: ENTER 77 FOR DON’T KNOW AND 99 FOR REFUSED

That was [FILL MONTH] of [FILL YEAR], correct?

YES ..................................................................................1  GO TO LF_C12Q9_A
NO ................................................................................... .2  GO TO LF_C12Q9

Was this a shot or a spray in the nose?

FLU SHOT ...............................................................................1  IF LF_C12Q8 = 2 GO TO LF_C12Q10, ELSE GO TO LF_C12Q12
FLU NASAL SPRAY OR “FLU MIST” ....................................2  IF LF_C12Q8 = 2 GO TO LF_C12Q10, ELSE GO TO LF_C12Q12
DON’T KNOW ....................................................................77  IF LF_C12Q8 = 2 GO TO LF_C12Q10, ELSE GO TO LF_C12Q12
REFUSED ........................................................................... 99  IF LF_C12Q8 = 2 GO TO LF_C12Q10, ELSE GO TO LF_C12Q12

During what month did [S.C.] receive [his/her] second dose of the flu vaccine, since July 1, 2013?

INTERVIEW INSTRUCTION: ENTER 77 FOR DON’T KNOW AND 99 FOR REFUSED

That was [FILL MONTH] of [FILL YEAR], correct?

YES ..................................................................................1  GO TO LF_C12Q10_A
NO ................................................................................... .2  GO TO LF_C12Q10
LF_C12Q10_A  Was this a shot or a spray in the nose?

FLU SHOT.................................................................1  GO TO LF_C12Q12
FLU NASAL SPRAY OR “FLU MIST”..............................2  GO TO LF_C12Q12
DON’T KNOW ..........................................................77  GO TO LF_C12Q12
REFUSED .....................................................................99  GO TO LF_C12Q12

LF_C12Q12  At what kind of place did [S.C.] get [his/her] most recent flu vaccination?

DOCTOR’S OFFICE ......................................................1
HEALTH DEPARTMENT ..................................................2
CLINIC OR HEALTH CENTER .......................................3
HOSPITAL .................................................................4
OTHER MEDICALLY-RELATED PLACE .........................5
PHARMACY OR DRUG STORE .....................................6
WORKPLACE ..................................................................7
ELEMENTARY/MIDDLE/HIGH SCHOOL .......................8
OTHER NON-MEDICALLY-RELATED PLACE ....................9
DON’T KNOW ..........................................................77
REFUSED .....................................................................99

GO TO LF_C12Q15.

LF_C12Q15  How likely is [S.C.] to get a flu vaccination between now and the end of June, 2014?
Would you say [FILL VAR: he/she]:

Will definitely get one.....................................................1
Will probably get one.......................................................2
Will probably not get one...............................................3
Will definitely not get one...............................................4
DON’T KNOW ..........................................................77
REFUSED .....................................................................99

GO TO LF_C12Q15

LF_C12Q15_A. Since July 1st, has [S.C.] had a visit to a doctor or other health professional about his or her health?

YES.................................01  [SKIP TO LF_C12Q15_REC]
NO .................................02  [SKIP TO LF_C12Q15_B]
DON’T KNOW ............77  [SKIP TO LF_C12Q15_B]
REFUSED .....................99  [SKIP TO LF_C12Q15_B]
LF_C12Q15_REC. Since July 1st, did a doctor or other health professional tell you they recommend or say it was a good idea for [S.C.] to get a flu vaccination?

YES ..........................01  [SKIP TO LF_C12Q15_B]
NO ............................02  [SKIP TO LF_C12Q15_RECNO]
DON'T KNOW ...............77  [SKIP TO LF_C12Q15_B]
REFUSED ........................99  [SKIP TO LF_C12Q15_B]

LF_C12Q15_RECNO You said a doctor or health professional did not recommend a flu vaccination for [S.C.]. Did he or she not mention the flu vaccination, mentioned it but was neutral, recommend not to get a flu vaccination, or did not give a recommendation because your child was already vaccinated?

DIDN'T MENTION FLU VACCINATION .......................................01
MENTIONED FLU VACCINATION BUT WAS NEUTRAL .................02
RECOMMENDED CHILD NOT GET A FLU VACCINATION ............03
DIDN'T GIVE A RECOMMENDATION BECAUSE CHILD ALREADY VACCINATED .........................................................04
DON'T KNOW .................................................................77
REFUSED ............................................................................99

ALL GO TO LF_C12Q15_B

LF_C12Q15_B. Since July 1st, did [S.C.'s] doctor or other health professional remind you by mail, phone call, email, or text message that [S.C.] should get a flu vaccination this season?

YES ........................................01  [SKIP TO LF_C12Q15_COM]
NO ..........................................02  [SKIP TO LOGIC_C12Q16]
DON'T KNOW ........................77  [SKIP TO LOGIC_C12Q16]
REFUSED .....................................99  [SKIP TO LOGIC_C12Q16]

LF_C12Q15_COM. How did you get a reminder? Was it by mail, phone, email, or text message?

CHOOSE ALL THAT APPLY

MAIL .....................................1
PHONE CALL ..........................2
EMAIL ....................................3
TEXT MESSAGE .......................4
DON'T KNOW ..........................77
REFUSED ..................................99

ALL GO TO LF_C12Q15_WHO
LF_C12Q15_WHO. Who sent you this reminder: a doctor’s office, health clinic, insurance company, pharmacy, health department, or some other place?

CHOOSE ALL THAT APPLY

- DOCTOR’S OFFICE............................ 1
- HEALTH CLINIC ............................ 2
- INSURANCE COMPANY ................... 3
- PHARMACY ........................................ 4
- HEALTH DEPARTMENT ................... 5
- OTHER ................................................. 6
- DON’T KNOW ...................................... 77
- REFUSED ........................................... 99

ALL GO TO LOGIC_C12Q16

LOGIC_C12Q16  IF CHILD IS <9 YEARS OLD AS OF AUGUST 1, 2013, GO TO LF_C12Q16; ELSE GO TO LF_Q01_INTRO

LF_C12Q16 Did [S.C.] receive any flu vaccinations during the last two flu seasons? This would be from July 1, 2011 to end of June, 2013?

INTERVIEWER INSTRUCTION: IF RESPONDENT ASKS IF THEY SHOULD INCLUDE THE H1N1 OR "SWINE FLU" VACCINE, AVAILABLE DURING OCTOBER 2009 – JUNE 2010, PLEASE READ: Do not include the 2009-10 pandemic H1N1 "swine flu" vaccination.

- YES.............................................................................. 1 GO TO LF_C12Q17
- NO ............................................................................... 2 GO TO LF_Q01_INTRO
- DON’T KNOW .............................................................. 77 GO TO LF_Q01_INTRO
- REFUSED ....................................................................... 99 GO TO LF_Q01_INTRO

LF_C12Q17 How many flu vaccinations did [S.C.] receive in the past two flu seasons, which were from July 1, 2011 to end of June 2013?

- ONE VACCINATION OR DOSE................................. 1 GO TO LF_Q01_INTRO
- TWO OR MORE VACCINATIONS OR DOSES ............ 2 GO TO LF_Q01_INTRO
- DON’T KNOW .............................................................. 77 GO TO LF_Q01_INTRO
- REFUSED ..................................................................... 99 GO TO LF_Q01_INTRO

LF_Q01_INTRO

Now I have a few more general questions about [S.C.] and your household.

LF_INSURE Does [S.C.] have any kind of health care coverage, including health insurance, prepaid plans such as HMOs, or government plans such as Medicaid?

- YES .............................................................................. 1 GO TO LF_INSURE_TYPE
- NO ............................................................................... 2 GO TO LF_HHSIZE
- DON’T KNOW .............................................................. 77 GO TO LF_HHSIZE
- REFUSED ..................................................................... 99 GO TO LF_HHSIZE
LF_INSURE_TYPE

Is that coverage Medicaid, the State Children’s Health Insurance Program, S-CHIP, [fill state S-CHIP program name], or some other type of insurance?

MEDICAID ........................................................................ 1 GO TO LF_HHSIZE
S-CHIP [FILL PROGRAM NAME] ......................................... 2 GO TO LF_HHSIZE
SOMETHING ELSE/PRIVATE INSURANCE/...
HMO PREPAID PLAN ......................................................... 3 GO TO LF_HHSIZE
DON'T KNOW .................................................................. 77 GO TO LF_HHSIZE
REFUSED ........................................................................... 99 GO TO LF_HHSIZE

LF_HHSIZE

Including the adults and all the children, how many people live in this household?

ENTER NUMBER ............................................................. GO TO LF_11Q01
DON'T KNOW .................................................................. 77 GO TO LF_11Q01
REFUSED ........................................................................... 99 GO TO LF_11Q01

LF_11Q01

Is [S.C.] of Hispanic or Latino origin?

HISPANIC OR LATINO INCLUDES MEXICAN, MEXICAN-AMERICAN, CENTRAL AMERICAN, SOUTH AMERICAN OR PUERTO RICAN, CUBAN, OR OTHER SPANISH-CARIBBEAN.

YES ............................................................................... 1 GO TO LF_11Q01A
NO ................................................................................... 2 GO TO LF_11Q02
DON'T KNOW .................................................................. 77 GO TO LF_11Q02
REFUSED .......................................................................... 99 GO TO LF_11Q02

LF_11Q01A

Is [S.C.] Mexican, Mexican-American, Central American, South American, Puerto Rican, Cuban, or other Spanish-Caribbean? CLICK ALL THAT APPLY

MEXICAN/MEXICANO ......................................................... 1 GO TO LF_11Q02
MEXICAN-AMERICAN ....................................................... 2 GO TO LF_11Q02
CENTRAL AMERICAN ...................................................... 3 GO TO LF_11Q02
SOUTH AMERICAN .......................................................... 4 GO TO LF_11Q02
PUERTO RICAN ............................................................... 5 GO TO LF_11Q02
CUBAN/CUBAN AMERICAN ........................................... 6 GO TO LF_11Q02
SPANISH-CARIBBEAN ...................................................... 7 GO TO LF_11Q02
OTHER SPANISH/HISPANIC (SPECIFY) ......................... 10 GO TO LF_11Q01A_OS
DON'T KNOW .................................................................. 77 GO TO LF_11Q02
REFUSED .......................................................................... 99 GO TO LF_11Q02

LF_11Q01A_OS

ENTER OTHER ............................................................. GO TO LF_11Q02
Now, I am going to read a list of categories. Please choose one or more of the following categories to describe [S.C.’s] race. Is [S.C.] White, Black or African American, American Indian, Alaska Native, Asian, Native Hawaiian or other Pacific Islander? MARK ALL THAT APPLY

WHITE .............................................................................1 GO TO LF_11Q01B
BLACK/AFRICAN AMERICAN ...................................2 GO TO LF_11Q01B
AMERICAN INDIAN .....................................................3 GO TO LF_11Q01B
ALASKA NATIVE .....................................................4 GO TO LF_11Q01B
ASIAN ..............................................................................5 GO TO LF_11Q01B
NATIVE HAWAIIAN .....................................................6 GO TO LF_11Q01B
PACIFIC ISLANDER ......................................................7 GO TO LF_11Q01B
OTHER ............................................................................8 GO TO LF_11Q02_OS
DON’T KNOW ................................................................77  GO TO LF_11Q01B
REFUSED ........................................................................99  GO TO LF_11Q01B

ENTER OTHER................................................................ GO TO LF_11Q02

[IF LF_C1Q02 = 1"Are you” ELSE] Is [S.C.’s mother] of Hispanic or Latino origin? HISPANIC OR LATINO INCLUDES MEXICAN, MEXICAN-AMERICAN, CENTRAL AMERICAN, SOUTH AMERICAN OR PUERTO RICAN, CUBAN, OR OTHER SPANISH-CARIBBEAN.

YES ..................................................................................1 GO TO LF_11Q01B_HISP
NO ................................................................................... .2 GO TO LF_11Q02B
DON’T KNOW ................................................................77  GO TO LF_11Q02B
REFUSED ..........................................................................99  GO TO LF_11Q02B

[IF LF_C1Q02 = 1"Are you” ELSE] Is [S.C.’s mother] Mexican, Mexican-American, Central American, South American, Puerto Rican, Cuban, or other Spanish-Caribbean? CLICK ALL THAT APPLY

MEXICAN/MEXICANO.................................................1 GO TO LF_11Q02B
MEXICAN-AMERICAN .................................................2 GO TO LF_11Q02B
CENTRAL AMERICAN ..................................................3 GO TO LF_11Q02B
SOUTH AMERICAN .................................................... 4 GO TO LF_11Q02B
PUERTO RICAN ............................................................5 GO TO LF_11Q02B
CUBAN/CUBAN AMERICAN ......................................6 GO TO LF_11Q02B
SPANISH-CARIBBEAN ...............................................7 GO TO LF_11Q02B
OTHER SPANISH/HISPANIC (SPECIFY)......................10 GO TO LF_11Q01B_HISPOS
DON’T KNOW ..............................................................77  GO TO LF_11Q02B
REFUSED ..........................................................................99  GO TO LF_11Q02B
Now, I'm going to read a list of categories. Please choose one or more of the following categories to describe [IF LF_C1Q02 = 1"your" ELSE] [S.C.’s mother’s] race. [IF LF_C1Q02 = 1"Are you" ELSE] Is [S.C.’s mother] White, Black or African American, American Indian, Alaska Native, Asian, or Native Hawaiian or other Pacific Islander? [MARK ALL THAT APPLY]

WHITE .............................................................................1 GO TO LF_11Q20
BLACK/AFRICAN AMERICAN ...................................2 GO TO LF_11Q20
AMERICAN INDIAN .....................................................3 GO TO LF_11Q20
ALASKA NATIVE .......................................................4 GO TO LF_11Q20
ASIAN ..............................................................................5 GO TO LF_11Q20
NATIVE HAWAIIAN .....................................................6 GO TO LF_11Q20
PACIFIC ISLANDER ......................................................7 GO TO LF_11Q20
OTHER ............................................................................8 GO TO LF_11Q02B_OS
DON’T KNOW ....................................................................77  GO TO LF_11Q20
REFUSED .............................................................................99  GO TO LF_11Q20

What is the highest grade or year of school [you have / [S.C.’s] [MOTHER TYPE] has] completed?

NOTE TO INTERVIEWER: AT THIS QUESTION, COLLECT INFORMATION ABOUT THE MOTHER (BIOLOGICAL, STEP, FOSTER, ADOPTIVE) LIVING IN THIS HOUSE.

8th GRADE OR LESS .....................................................1 GO TO LF_C19C
9th-12th GRADE NO DIPLOMA....................................2 GO TO LF_C19C
HIGH SCHOOL GRADUATE OR
GED COMPLETED .........................................................3 GO TO LF_C19C
COMPLETED A VOCATIONAL, TRADE,
OR BUSINESS SCHOOL PROGRAM ......................... 4 GO TO LF_C19C
SOME COLLEGE CREDIT BUT NO DEGREE ............... 5 GO TO LF_C19C
ASSOCIATE DEGREE (AA, AS) ................................. 6 GO TO LF_C19C
BACHELOR’S DEGREE (BA, BS, AB) ......................... 7 GO TO LF_C19C
MASTER’S DEGREE (MA, MS, MSW, MBA) ............. 8 GO TO LF_C19C
DOCTORATE (PhD, EdD) or PROFESSIONAL
DEGREE (MD, DDS, DVM, JD) .................................9 GO TO LF_C19C
DON’T KNOW ............................................................77  GO TO LF_C19C
REFUSED .............................................................................99  GO TO LF_C19C
Which of the following best describes your house or apartment? Is it owned or being bought, rented, or occupied by some other arrangement by you or someone in your household?

OWNED OR BEING BOUGHT.................................1 GO TO LF_11Q51
RENTED ................................................................2 GO TO LF_11Q51
OTHER ARRANGEMENT .............................................3 GO TO LF_11Q51
DON’T KNOW ........................................................77 GO TO LF_11Q51
REFUSED ................................................................99 GO TO LF_11Q51

Now I am going to ask you a few questions about your income. Please think about your total combined FAMILY income during (FILL LAST CALENDAR YEAR) for all members of the family. Can you tell me that amount before taxes?

HELP SCREEN: INCLUDE MONEY FROM JOBS, CHILD SUPPORT, SOCIAL SECURITY, RETIREMENT INCOME, UNEMPLOYMENT PAYMENTS, PUBLIC ASSISTANCE, AND SO FORTH. ALSO, INCLUDE INCOME FROM INTEREST, DIVIDENDS, NET INCOME FROM BUSINESS, FARM, OR RENT, AND ANY OTHER MONEY INCOME RECEIVED.

RECORD INCOME $ ......................................................77 GO TO LF_11Q15_CELL
REFUSED ................................................................99 GO TO LF_11Q15_CELL

Just to confirm that I entered the number correctly, the total combined family income was [FILL RESPONSE, LF_11Q51]?

YES ...........................................................................1 GO TO LF_11Q15_CELL
NO ...........................................................................2 GO TO LF_11Q51
DON’T KNOW ........................................................77 GO TO LF_11Q51
REFUSED ................................................................99 GO TO LF_11Q51

For the purposes of this survey, it is important to get at least a range for the total income received by all members of your household in [FILL LAST CALENDAR YEAR]. Would you say that the total combined income, before taxes, was above or below $20,000?

MORE THAN $20,000 ....................................................1 GO TO LF_11Q56
$20,000 ......................................................................2 GO TO LF_11Q15_CELL
LESS THAN $20,000 ......................................................3 GO TO LF_11Q53
DON’T KNOW ........................................................77 GO TO LF_11Q15_CELL
REFUSED ................................................................99 GO TO LF_11Q15_CELL

Was the total combined household income more or less than $10,000?

MORE THAN $10,000 ....................................................1 GO TO LF_11Q55
$10,000....................................................................2 GO TO LF_11Q15_CELL
LESS THAN $10,000 ......................................................3 GO TO LF_11Q54
DON’T KNOW ........................................................77 GO TO LF_11Q15_CELL
REFUSED ................................................................99 GO TO LF_11Q15_CELL
LF_11Q54 Was it more than $7,500?

YES ..................................................................................1   GO TO LF_11Q15_CELL
NO......................................................................................2   GO TO LF_11Q15_CELL
DON’T KNOW .................................................................77   GO TO LF_11Q15_CELL
REFUSED ........................................................................99   GO TO LF_11Q15_CELL

LF_11Q55 Was it more than $15,000?

YES ..................................................................................1   GO TO LF_11Q55A
NO......................................................................................2   GO TO LF_11Q55B
DON’T KNOW .................................................................77   GO TO LF_11Q15_CELL
REFUSED ........................................................................99   GO TO LF_11Q15_CELL

LF_11Q55A Was it more than $17,500?

YES ..................................................................................1   GO TO LF_11Q15_CELL
NO......................................................................................2   GO TO LF_11Q15_CELL
DON’T KNOW .................................................................77   GO TO LF_11Q15_CELL
REFUSED ........................................................................99   GO TO LF_11Q15_CELL

LF_11Q55B Was it more than $12,500?

YES ..................................................................................1   GO TO LF_11Q15_CELL
NO......................................................................................2   GO TO LF_11Q15_CELL
DON’T KNOW .................................................................77   GO TO LF_11Q15_CELL
REFUSED ........................................................................99   GO TO LF_11Q15_CELL

LF_11Q56 (READ IF NECESSARY: Was the total combined household income) more or less than $40,000?

MORE THAN $40,000.........................................................1   GO TO LF_11Q56A
$40,000................................................................................2   GO TO LF_11Q15_CELL
LESS THAN $40,000.........................................................3   GO TO LF_11Q57
DON’T KNOW .................................................................77   GO TO LF_11Q15_CELL
REFUSED ........................................................................99   GO TO LF_11Q15_CELL

LF_11Q56A (READ IF NECESSARY: Was the total combined household income) more or less than $60,000?

MORE THAN $60,000.........................................................1   GO TO LF_11Q58
$60,000................................................................................2   GO TO LF_11Q15_CELL
LESS THAN $60,000.........................................................3   GO TO LF_11Q56B
DON’T KNOW .................................................................77   GO TO LF_11Q15_CELL
REFUSED ........................................................................99   GO TO LF_11Q15_CELL
LF_11Q58 (READ IF NECESSARY: Was the total combined household income more or less than $75,000?)

MORE THAN $75,000 ......................................................1 GO TO LF_11Q15_CELL
$75,000...............................................................................2 GO TO LF_11Q15_CELL
LESS THAN $75,000.........................................................3 GO TO LF_11Q15_CELL
DON'T KNOW....................................................................77 GO TO LF_11Q15_CELL
REFUSED..............................................................................99 GO TO LF_11Q15_CELL

LF_11Q15_CELL

The next few questions are about the telephones in your household.

In total, how many working cell phones do you and your household members have available for personal use? Please do not count cell phones that are used exclusively for business purposes [If RDD_NCCELL_CCELL=2,3 and NEWPHONE_FLAG=0 then display: "and please include the number we called." ELSE If RDD_NCCELL_CCELL=2,3 and NEWPHONE_FLAG=1 then display: "and please include [OLD_NUMBER]."]

[If RDD_NCCELL_CCELL=2,3 and NEWPHONE_FLAG=1 display "INTERVIEWER NOTE: THE NUMBER FOR THIS CASE WAS CHANGED BY THE RESPONDENT ON A PREVIOUS CALL"]

ONE..................................................................................1 GO TO LF_C21_06Q3_CELL
TWO.................................................................................2 GO TO LF_C21_06Q3_CELL
THREE OR MORE ..........................................................3 GO TO LF_C21_06Q3_CELL
NONE.............................................................................4 GO TO LF_12Q13
DON'T KNOW ............................................................77 GO TO LF_C21_06Q3_CELL
REFUSED …………………………...99 GO TO LF_C21_06Q3_CELL

LF_C21_06Q3_CELL

Thinking just about the landline home phone, not your cell phone, if that telephone rang and someone were home, under normal circumstances how likely is it that it would be answered? Would you say extremely likely, somewhat likely, somewhat unlikely, or not at all likely?

EXTREMELY LIKELY……………..01 GO TO LF_CP_CELLUS
SOMewhat LIKELY……………..02 GO TO LF_CP_CELLUS
SOMewhat UNLIKELY …………03 GO TO LF_CP_CELLUS
NOT AT ALL LIKELY ………….….04 GO TO LF_CP_CELLUS
DON'T KNOW ……………………..77 GO TO LF_CP_CELLUS
REFUSED …………………………...99 GO TO LF_CP_CELLUS

LF_CP_CELLUS

IF C21_06Q3_CELL = 1, 2, 3, 77, 99 OR TIS_C21_06Q3_CELL = 1, 2, 3, 77, 99, OR LF_11Q15_CELL = 1, 2, 3, 77, OR 99 GO TO LF_11Q15_CELL_US

ELSE IF C21_06Q3_CELL = 4 OR TIS_C21_06Q3_CELL = 4, GO TO LF_12Q13

ELSE GO TO LF_11Q15_CELL_US
[IF NIS OR TEEN OR NSCH COMPLETED AND (C21_06Q3_CELL = 1, 2, 3 or TIS_C21_06Q3_CELL = 1, 2, 3 or C11Q15_CELL = 1, 2, 3) AND SAMPLE_USE_CODE IN (1, 2, 4) READ: Earlier you told me that you have at least one cell phone in your household.]

[IF NIS OR TEEN COMPLETED AND (C21_06Q3_CELL = 77, 99 or TIS_C21_06Q3_CELL = 77, 99) AND SAMPLE_USE_CODE IN (1, 2, 4) READ: The next few questions are about the telephones in your household.]

How many [IF C11Q15_CELL = 1, 2, 3 THEN DISPLAY: "of these"] cell phones do the adults in this household usually use? [If RDD_NCCELL_CELL=2,3 and NEWPHONE_FLAG=0 then display: "Please include the number we called." ELSE If RDD_NCCELL_CCELL=2,3 and NEWPHONE_FLAG=1 then display "Please include OLD_NUMBER]."]

[IF RDD_NCCELL_CELL=2,3 then display: "INTERVIEWER NOTE: THE NUMBER WE CALLED IS ASSUMED TO BE USUALLY USED, SO THE ANSWER MUST BE AT LEAST "ONE""

[IF RDD_NCCELL_CCELL=2,3 and NEWPHONE_FLAG=1 display "INTERVIEWER NOTE: THE NUMBER FOR THIS CASE WAS CHANGED BY THE RESPONDENT ON A PREVIOUS CALL."

ONE..................................................................................1 GO TO LF_11Q16
TWO...................................................................................2 GO TO LF_11Q16
THREE OR MORE..........................................................3 GO TO LF_11Q16
NONE................................................................................4 GO TO LF_11Q16
DON’T KNOW .................................................................77 GO TO LF_11Q16
REFUSED............................................................................99 GO TO LF_11Q16

LF_11Q16 Of all the telephone calls that you and your household receive, are nearly all received on cell phones, nearly all received on regular phones, or some received on cell phones and some received on regular phones?

NEARLY ALL RECEIVED ON CELL PHONES............1 GO TO LF_12Q13
NEARLY ALL RECEIVED ON REGULAR PHONES........................................2 GO TO LF_12Q13
SOME RECEIVED ON CELL PHONES AND SOME RECEIVED ON REGULAR PHONES........3 GO TO LF_12Q13
DON’T KNOW .................................................................77 GO TO LF_12Q13
REFUSED............................................................................99 GO TO LF_12Q13
IF RDD_NCELL_CCELL = 2 OR 3 AND IAP = 095 GO TO LF_ISLAND, ELSE IF RDD_NCELL_CCELL = 2 OR 3 AND IAP NE 095 GO TO LF_11Q22, ELSE:

Do you have more than one telephone number in your household? Do not include cell phones or numbers that are only used by a computer or fax machine.

READ IF NECESSARY: I'd like to know about the telephone numbers, not telephone extensions that ring to this household.

INTERVIEWER INSTRUCTION: COUNT BUSINESS TELEPHONE NUMBERS THAT RING TO THE HOUSEHOLD IF THEY ARE USED OCCASIONALLY FOR HOME USE.

YES .................................................................1  GO TO LF_C12Q14
NO .................................................................2  GO TO LF_11Q22
DON'T KNOW ......................................................77  GO TO LF_11Q22
REFUSED ...........................................................99  GO TO LF_11Q22

How many telephone numbers are residential numbers?

INTERVIEWER INSTRUCTION: THIS QUESTION IS ASKING FOR THE TOTAL NUMBER OF HOME TELEPHONE NUMBERS (INCLUDING THE NUMBER WE CALLED).

ONE .................................................................1  GO TO LF_11Q22
TWO .................................................................2  GO TO LF_11Q22
THREE OR MORE ...........................................3  GO TO LF_11Q22
NONE ...............................................................4  GO TO LF_11Q22
DON'T KNOW ....................................................77  GO TO LF_11Q22
REFUSED ...........................................................99  GO TO LF_11Q22

Please tell me your zip code.

____ ______ ______

DON'T KNOW ....................................................77777  GO TO LF_11Q22A
REFUSED ...........................................................99999  GO TO LF_11Q22A
LF_11Q22A In what city, county, and state you live?

CITY ____________________________
COUNTY ____________________________
STATE ____________________________ GO TO LF_11Q22D

LF_11Q22CONF

To confirm, you live in [TEXT FILL: CITY], [TEXT FILL: COUNTY] county, [TEXT FILL: STATE]. Is that correct?

YES ...............................................................1 GO TO LF_11Q22F
NO ...............................................................2 GO TO LF_11Q22B

LF_11Q22D Just to confirm, I have your zip code as [FILL FROM LF_11Q22]. Is that correct?

YES ...............................................................1 GO TO LF_11Q22F
NO ...............................................................2 GO TO LF_11Q22E

LF_11Q22E What is your zip code?

ENTER ZIP CODE ____________________________ GO TO LF_11Q22F

LF_11Q22F Do you live within city limits?

YES ...............................................................1 GO TO LF_12_EXIT
NO ...............................................................2 GO TO LF_12_EXIT
DON'T KNOW ..................................................77 GO TO LF_12_EXIT
REFUSED .........................................................99 GO TO LF_12_EXIT

LF_12_EXIT

Those are all the questions I have. I’d like to thank you on behalf of the Centers for Disease Control and Prevention for the time and effort you’ve spent answering these questions. If you have any questions about this survey, you may call my supervisor toll-free at [TEXTFILL: If Sample Use Code = 1, 2, 4, 5, 6: 1 – 8 7 7 – 2 6 7 – 8 1 5 4, if sample use code = 3: 1 - 8 8 8 - 9 9 0 - 9 9 8 6] . If you have questions about your rights as a survey participant, you may call the chairman of the Research Ethics Review Board at 1 - 8 0 0 - 2 2 3 - 8 1 1 8. Thank you again.