

**2007 SURVEY OF ADULT TRANSITION AND HEALTH (SATH)**

**SCREENER**

**SCREENER PART 1: LOCATE 2001 CSHCN RESPONDENT**

INTRO\_1 Hello, my name is \_\_\_\_\_. I'm calling on behalf of the Centers for Disease Control and Prevention. May I please speak to someone who is 18 years of age or older?

- |  |                              |
|--|------------------------------|
| (1) YES, I AM ≥ 18 YO                                      | [GO TO INTRO_1A]             |
| (2) THIS IS A BUSINESS                                     | [GO TO PH_CONF]              |
| (3) LANGUAGE BARRIER<br>(ANY LANGUAGE OTHER THAN ENGLISH)  | [GO TO TERM_BRIEF]           |
| (4) NO PERSON AT HOME WHO IS OVER 17                       | [GO TO S2_B]                 |
| (5) ANSWERING MACHINE                                      | [GO TO MSG_PENDING SCREENED] |
| (6) R WILL CALL 800 LINE/VERIFY WEBSITE                    | [GO TO UE-M1_NAME_WEB]       |
| (7) R ASKS FOR LETTER-MAILED                               | [GO TO UE-M1_NAME_WEB]       |
| (8) R ASKS FOR LETTER-EMAILED                              | [GO TO UE-M1_NAME_WEB]       |
| (9) SUPERVISOR REVIEW                                      | [GO TO CALL NOTES BOX]       |
| (RAISE YOUR HAND TO GET PERMISSION BEFORE USING THIS CODE) |                              |

SALZ\_BUS We are interviewing only private residences. Thank you very much.  
[TERMINATE INTERVIEW]

S2\_B Does anyone live in your household who is over 17 years old?

- |         |                                    |
|---------|------------------------------------|
| (1) YES | [GO TO [BLANK] SCRIPT SHOWN BELOW] |
| (2) NO  | [GO TO PH_CONF]                    |

[BLANK] Thank you, we'll try back another time.

PH\_CONF Before I go, I'd like to confirm the phone number I have dialed. Is this area code [FILL PHONE]?

- |   |                  |
|---|------------------|
| (1) YES   | [GO TO PH_TIME]  |
| (2) NO, MISDIAL                                 | [GO TO TERM_TY]  |
| (3) NO, NUMBER HAS CHANGED/<br>NUMBER FORWARDED | [GO TO NEWPHONE] |
| (99) REFUSED                                    | [GO TO TERM_TY]  |

NEWPHONE\_1 Can you tell me what number I have reached?  
 Nnn-nnn-nnnn [GO TO PH\_TIME]

PH\_TIME How many years have you had this telephone number (FILL "1-866-900-9601)?

(1) LESS THAN FOUR YEARS [GO TO SALZ\_BUS IF INTRO\_APPT01R OR  
 INTO\_APPT\_PNDG\_SCRD=2 ELSE GO TO TERM\_TY]  
 (2) MORE THAN FOUR YEARS [GO TO SALZ\_BUS IF INTRO\_APPT01R OR  
 INTO\_APPT\_PNDG\_SCRD=2 ELSE GO TO TERM\_TY]

TERM\_TY 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 would like more information  
 about the Survey of Adult Health and Transition, please call the study's toll-free number,866-900-9601)

INTRO\_1A In (INTDATE-YYYY), we conducted a nationwide telephone study on children's health with an adult at this  
 phone number about a child who was between the ages of 14-18 years of age at the time. This child would now  
 be approximately [FILL AGE] years old. The Centers for Disease Control and Prevention is now interested in  
 speaking to this [FILL AGE]-year old's [FILL RELATION] again.

Is [he/she] available?

(1) YES, CURRENTLY SPEAKING WITH HIM/HER [GO TO INTRO\_2001R]  
 (2) YES, R2001 COMES TO THE PHONE [GO TO INTRO\_R2001]  
 (3) YES, R2001 IS AVAILABLE BUT NEEDS THE IWER  
 TO CALL BACK SO R CAN SWITCH TO TTY [GO TO RELAYNOW\_ R2001]  
 (4) THIS PERSON NEEDS THE INTERVIEWER TO CALL  
 BACK LATER AND CONDUCT THE INTERVIEW  
 USING TTY [GO TO RELAYCBK\_ R2001]  
 (5) LANGUAGE BARRIER  
 (ANY LANGUAGE OTHER THAN ENGLISH) [GO TO TERM\_BRIEF]  
 (6) NO SUCH PERSON AT THIS NUMBER [GO TOPHONE\_01 INFO]  
 (7) NO, THE PERSON YOU NEED TO SPEAK WITH IS  
 NOT AVAILABLE. [GO TO CB1]  
 (8) NO, R2001 HAS MOVED [GO TO R2001\_CONT]  
 (9) NO, R2001ESPONDENT IS HOSPITALIZED,  
 INSTITUTIONALIZED OR INCARCERATED [GO TO TERM\_TY]  
 (10) NO, R2001ESPONDENT IS DECEASED [GO TO F1Q]  
 (11) NO, R2001ESPONDENT IS SERVING IN THE MILITARY  
 OR LIVING OUTSIDE USA [GO TO TERM\_TY]  
 (12) NO, THE PERSON DOES NOT KNOW HOW TO CONTACT  
 THE R2001 [GO TO REACH\_5]  
 (13) PERSON WANTS TO VERIFY THE LEGITIMACY OF  
 THE SURVEY OR NEEDS ADDITIONAL  
 INFORMATION [GO TO M1\_NAME\_WEB (UE)]  
 (14) R KNOWS 2 OR MORE POSSIBLE R2001ESPONDENTS  
 WHO LIVE OR USED TO LIVE AT THIS NUMBER [GO TO DOB\_PROBE]

(15) IF VOLUNTEERED: YOUTH IS SERVING IN THE MILITARY  
 OR LIVING OUTSIDE USA [GO TO WEB\_OFFER]  
 (16) IF VOLUNTEERED: YOUTH IS HOSPITALIZED,  
 INSTITUTIONALIZED OR INCARCERATED [GO TO TERM\_TY]  
 (17) IF VOLUNTEERED: YOUTH DOES NOT HAVE  
 ANY CONTACT INFO (HOMELESS, ETC.) [GO TO REACH\_5]  
 (18) IF VOLUNTEERED: YOUTH IS DECEASED [GO TO F1Q\_Y\_M]  
 (77) DON'T KNOW [GO TO REACH\_5]

RELAYNOW\_R2001

I have to call into the RELAY service to continue this interview. I will call you back in less than five minutes at [FILL SAMPLED PHONE 1-866-900-9601]. Please stay by your RELAY machine for the next five minutes. Thank you, and good bye.

RELAYCBK\_R2001

When would be a good time to call back to reach you using RELAY?

CREATE AN APPOINTMENT

PHONE\_  
01INFO

Do you know the person that had this phone number in 2001?

- (1) YES [GO TO R2001\_CONT]
- (2) NO [GO TO PH\_CONF]

REACH\_5

Do you know who else I can contact who might know this [FILL AGE\_CALC] year-old's / [FILL AGE\_CALC] year-old's [RELATION] contact information?

- (1) YES [GO TO LEAD\_REACH\_01  
IF R2001 LEAD; LEAD\_REACH\_Y IF YOUTH  
LEAD]
- (2) NO [GO TO PH\_CONF]
- (77) DON'T KNOW [GO TO PH\_CONF]
- (99) REFUSED [GO TO PH\_CONF]

REACH\_CB

When would be a good time to call back to reach (an adult) at this telephone number who would know of anyone who lives or used to live at this telephone number is currently 19 to 23 years old?

- (1) SET APPOINTMENT [USE APPT ICON]
- (77) DON'T KNOW [CALL NOTES BOX]
- (99) REFUSED [CALL NOTES BOX]

FILL CONTACT NAME AT APPOINTMENT SCREEN IF PROVIDED.

F1Q

I'm sorry to hear that (FILL SEX-HE/SHE) passed away. Please accept my condolences.

[GO TO YOUTH\_CONT]

F1Q\_Y

I'm sorry to hear that (FILL SEX-HE/SHE) passed away. I was calling about a study we are conducting for the Centers for Disease Control and Prevention but I will not need to continue. When did (FILL SEX-HE/SHE) pass away?

MMDDYYYY  
(77) DK  
(99) REF

[GO TO TERM\_DTH]

TERM\_DTH

Thank you, and please accept my condolences. Goodbye.

DOB\_  
PROBE

The person with whom I would like to speak would be the [FILL RELATION] of a [FILL MALE/FEMALE] child born on [FILL DOB-MMMDDYYYY]. Do you know who this might be?

TRAINING POINT: FAQ ABOUT HOW WE HAVE DOB AND WHY WE NEED TO CONFIRM IT.

- (1) YES [GO TO R2001\_CONT]
- (77) DON'T KNOW [GO TO REACH\_CB]

**PATH TO COLLECT POSSIBLE R2001s CONTACT INFORMATION**

R2001\_CONT

Could you please tell me the name of this [FILL CURRENT AGE] child's [FILL RELATION]?

IWER INSTRUCTION: IF R NOT COMFORTABLE PROVIDING NAME, ACCEPT INITIALS.

- (1) YES [GO TO R2001\_NAME\_A]
- (2) NO [GO TO R2001\_NAME\_D]
- (77) DON'T KNOW [GO TO R2001\_NAME\_D]
- (99) REFUSED [GO TO R2001\_NAME\_D]

R2001\_NAME\_A What is the [FILL RELATION]'s first name?

FIRST \_\_\_\_\_

R2001\_NAME\_B What is the [FILL RELATION]'s middle name?

MIDDLE \_\_\_\_\_

R2001\_NAME\_C What is the [FILL RELATION]'s last name?

LAST \_\_\_\_\_

R2001\_NAME\_D Does the [FILL RELATION] have a nickname, initials or another name that they may prefer?

- (1) YES [GO TO R2001\_NAME\_E]
- (2) NO [GO TO R2001\_PH\_X]
- (77) DON'T KNOW [GO TO R2001\_PH\_X]
- (99) REFUSED [GO TO R2001\_PH\_X]

R2001\_NAME\_E What is the nickname or initials ?

NICKNAME/OTHER NAME \_\_\_\_\_

R2001\_PH Could you please tell me (FILL R2001\_NAME\_A OR FILL R2001\_NAME\_D if given)'s (FILL BLANK OR second...fifth) phone number?

- (1) YES [RECORD phone number(s) IN R2001\_PH\_X]
- (2) NO [GO TO R2001\_EM\_X]
- (77) DON'T KNOW [GO TO R2001\_EM\_X]
- (99) REFUSED [GO TO R2001\_EM\_X]

R2001\_  
PH\_X

R2001 PHONE NUMBER COLLECTION SCREEN  
nnn-nnn-nnnn

[GO TO R2001\_PH\_CONF]

R2001\_PH\_  
CONF\_1

Is that a cellular telephone number?

- (1) YES [GO TO R2001\_CONFHH]
- (2) NO [GO TO R2001\_CONFHH]
- (77) DON'T KNOW [GO TO R2001\_CONFHH]
- (99) REFUSED [GO TO R2001\_CONFHH]

R2001\_  
CONFHH\_1

Is that number a private residence?

- (1) YES [GO TO R2001\_PH\_LOOP]
- (2) NO [GO TO R2001\_PH\_LOOP]
- (77) DON'T KNOW [GO TO R2001\_PH\_LOOP]
- (99) REFUSED [GO TO R2001\_PH\_LOOP]

R2001\_PH\_  
LOOP

Does (FILL R2001\_NAME\_A OR FILL R2001\_NAME\_D if given) have another phone number where (he/she) can be reached?

- (1) YES [GO TO NEXT R2001\_PH]
- (2) NO [GO TO R2001\_EM\_X]
- (77) DON'T KNOW [GO TO R2001\_EM\_X]
- (99) REFUSED [GO TO R2001\_EM\_X]

R2001\_  
\_EM\_X

Could you please tell me (FILL R2001\_NAME\_A OR FILL R2001\_NAME\_D if given)'s (FILL BLANK OR second...fifth) electronic mail or e-mail addresses?

- (1) YES [RECORD E-MAIL ADDRESS ELEMENTS IN R2001\_MAIL\_1 TO R2001\_EMAIL\_9]
- (2) NO [GO TO R2001\_AD\_X]
- (77) DON'T KNOW [GO TO R2001\_AD\_X]
- (99) REFUSED [GO TO R2001\_AD\_X]

R2001\_  
EMAIL\_X

EMAIL ADDRESS COLLECTION SCREEN

\_\_\_\_\_ @ \_\_\_\_\_.

R2001\_EM\_  
CONF

Is this email address for personal, business or school use?

- (1) PERSONAL [GO TO R2001\_EM\_LOOP]
- (2) BUSINESS [GO TO R2001\_EM\_LOOP]
- (3) SCHOOL USE [GO TO R2001\_EM\_LOOP]
- (77) DON'T KNOW [GO TO R2001\_EM\_LOOP]
- (99) REFUSED [GO TO R2001\_EM\_LOOP]

R2001\_EM\_ LOOP

Does (FILL R2001\_NAME\_A OR FILL R2001\_NAME\_D if given) have another email address where (he/she) can be reached?

- (19) YES [GO TO NEXT R2001\_EM\_X]
- (19) NO [GO TO R2001\_AD\_X]
- (19) DON'T KNOW [GO TO R2001\_AD\_X]
- (19) REFUSED [GO TO R2001\_AD\_X]

R2001\_AD\_X

Could you please tell (FILL R2001\_NAME\_A OR FILL R2001\_NAME\_D if given)'s [FILL BLANK OR second...fifth] street address or addresses [IF R2001PH\_1 through R2001PH\_9 not equal null then FILL in case we cannot reach them by phone]?

- (1) YES [GO TO R2001\_AD\_ST\_X]
- (2) NO [GO TO CONF\_INTRO\_01R]
- (77) DON'T KNOW [GO TO CONF\_INTRO\_01R]
- (99) REFUSED [GO TO CONF\_INTRO\_01R]

R2001\_AD\_ST\_X

What is the street address?

\_\_\_\_\_

R2001\_AD\_APT\_X

What is the apartment number?

APT # \_\_\_\_\_

R2001\_AD\_CITY\_X

What is the city and state?

CITY \_\_\_\_\_

R2001\_AD\_STATE\_X

State Dropdown Menu

R2001\_AD\_ZIP\_X

What is the zip code?

ZIP \_\_\_\_\_ [GO TO R2001CONYHH]

R2001 CONYHH\_X

Is that address a private residence?

- (1) YES [GO TO R2001\_AD\_LOOP]
- (2) NO [GO TO R2001\_INST]
- (77) DON'T KNOW [GO TO CONF\_INTRO\_01R]
- (99) REFUSED [GO TO CONF\_INTRO\_01R]

R2001\_INST\_X

Can you describe the type of residence?

- (1) UNIVERSITY/COLLEGE HOUSING (DORM) [GO TO R2001\_AD\_LOOP]
- (2) MILITARY BASE [GO TO R2001\_AD\_LOOP]
- (3) PRISON [GO TO R2001\_AD\_LOOP]
- (4) OTHER INSTITUTION [GO TO R2001\_AD\_LOOP]
- (77) DON'T KNOW [GO TO R2001\_AD\_LOOP]
- (99) REFUSED [GO TO R2001\_AD\_LOOP]

R2001\_AD\_  
LOOP

Does (FILL R2001\_NAME\_A OR FILL R2001\_NAME\_D if given) have another address where (he/she) can receive mail?

- |                 |                         |
|-----------------|-------------------------|
| (1) YES         | [GO TO NEXT R2001_AD_X] |
| (2) NO          | [GO TO CONF_INTRO_01R]  |
| (77) DON'T KNOW | [GO TO CONF_INTRO_01R]  |
| (99) REFUSED    | [GO TO CONF_INTRO_01R]  |

CONF\_INTRO\_  
01R

I would like to confirm that I have the correct information for the person that we'll be contacting.

CONF\_NAME\_  
01R

The name I have for this person is [FILL NAME OF FROM R2001NAME\_A- R2001\_NAME\_D].

Is this correct?

- |         |                             |
|---------|-----------------------------|
| (1) YES | [GO TO R2001_FUTCONT]       |
| (2) NO  | [GO TO R2001_CONT AND EDIT] |

R2001 FUTCONT

May we contact you again if we have problems contacting this person who may have completed the 2001 interview?

- |                 |                      |
|-----------------|----------------------|
| (1) YES         | [GO TO FUTCONT_NAME] |
| (2) NO          | [GO TO PH_CONF]      |
| (77) DON'T KNOW | [GO TO PH_CONF]      |
| (99) REFUSED    | [GO TO PH_CONF]      |

FUTCONT\_  
NAME

What is your name?

NAME\_\_\_\_\_

FUTCONT  
\_PHCONF

PHONE NUMBER COLLECTION SCREEN

nnn-~~nnn~~-nnnn

[GO TO PH\_CONF]

**SCREENER PART 2: OBTAIN CONSENT FROM 2001 CSHCN R & DETERMINE PROXY R**

INTRO\_2001R

(NOTE: Text in parentheses will appear if speaking with R2001. If R2001 is deceased, text in parentheses will be omitted.)

In [INTDATE-YYYY] we conducted a nationwide children’s health care telephone study with (you) about a [FILL AGE] \_\_ \_\_ year-old child in your household. (Thank you for participating in the 2001 interview.) The Centers for Disease Control and Prevention would like to enhance the information (you) provided in 2001 by speaking to (this/your) child about his or her current health care. This child would now be [FILL AGE\_CALC= ‘INTDATE MINUS DOB’ PLUS ‘CURRENTINTDATE-INTDATE’ = CURRENT AGE IN 2007’]. In appreciation, we’d like to offer [FILL SEX-him/her] \$20. [FILL SEX-He/She] can be interviewed by phone, or complete the survey on the Internet. (I’d like to continue unless you have any questions.)

IWER INSTRUCTION: IF NO QUESTIONS, ASK THE FOLLOWING:

Can you tell me how to find this [FILL AGE\_CALC]-year old?

- (1) YES, YOUTH COMES TO PHONE [GO TO NEW\_RESP\_SC]
- (2) YES, OUTSIDE OF HH/MOVED [GO TO YOUTH\_CONT]
- (3) YES, TWO OR MORE PEOPLE THAT AGE LIVE OR USED TO LIVE AT THIS NUMBER [GO TO DOB\_PROBE\_Y]
- (4) YES, YOUTH AVAILABLE-CALL BACK NEEDED FOR RELAY SWITCH [GO TO RELAY]
- (5) YES, YOUTH IS AVAILABLE BUT NEEDS CURRENT RESPONDENT TO INTERPRET [GO TO NEW\_RESP\_SC]
- (6) NO SUCH PERSON AT THIS NUMBER [GO TO REACH\_5]
- (7) NO, THE PERSON YOU NEED TO SPEAK WITH IS NOT AVAILABLE. [GO TO YOUTH\_CONT]
- (8) NO, THE PERSON DOES NOT KNOW HOW TO CONTACT THE YOUTH [GO TO REACH\_5]
- (9) NO, YOUTH IS HOSPITALIZED, INSTITUTIONALIZED OR INCARCERATED [GO TO TERM\_TY]
- (10) NO, YOUTH IS INCAPABLE [GO TO DIFF\_Q]
- (11) NO, YOUTH IS SERVING IN THE MILITARY OR LIVING OUTSIDE USA [GO TO WEB\_OFFER]
- (12) NO, YOUTH IS DECEASED [GO TO F1Q\_Y\_M]
- (13) PERSON NEEDS ADDITIONAL INFORMATION [GO TO -M1\_NAME\_WEB (UE)]
- (77) DON’T KNOW [GO TO REACH\_5]

DOB\_  
PROBE\_Y

The person I would like to speak with was born on [FILL DOB-MMMDDYYYY]. Do you know who this might be?

TRAINING POINT: FAQ ABOUT HOW WE HAVE DOB & WHY WE NEED TO CONFIRM IT

- (1) YES [GO TO INTRO\_R2001 at “Can you tell me how to find...?”]
- (77) Don’t Know [GO TO REACH\_5]



DIFF\_Q What difficulty does [FILL HE/SHE] have that prevents [FILL him/her] from participating?

- |                        |   |
|------------------------|---|
| (1) Hearing difficulty | [IF WEB_OFFER=2, GO TO RELAY THEN IF RELAY=3 GO TO PROXY] |
| (2) Speech difficulty  | [GO TO WEB_OFFER]   |
| (3) Cognitive barrier  | [GO TO PROXY_SCR]   |
| (4) Physical barrier   | [GO TO WEB_OFFER]   |
| (77) DK                | [GO TO WEB_OFFER]   |
| (99) REFUSED           | [GO TO PROXY_SCR]   |

WEB\_OFFER We have a web-based survey available. [FILL: Would you like to /Can they] complete the survey using the web?

[If entry from PDIFF, then fill with "Would you like to...". If entry from DIFF\_Q, then fill with "Can they...".]

- |         |                    |
|---------|--------------------|
| (1) YES | [GO TO WEB LETTER] |
| (2) NO  | [GO TO PROXY_SCR]  |

WEB\_LETTER We can email or mail a letter to you with directions on completing the survey via web. Which would you prefer?

- |                      |                          |
|----------------------|--------------------------|
| (1) EMAIL WEB LETTER | [GO TO WEB_LETTER_EMAIL] |
| (2) MAIL WEB LETTER  | [GO TO WEB_LETTER_MAIL]  |

WEB\_LETTER\_EMAIL

What is your email address? \_\_\_\_\_@\_\_\_\_\_.\_\_\_\_\_

- |                                  |                         |
|----------------------------------|-------------------------|
| (1) Continue                     | [GO TO WEB_LETTER_EXIT] |
| (99) Refused to give information | [GO TO TERM_TY]         |

WEB\_LETTER\_MAIL

What is your mailing address?

ADDRESS COLLECTION GRID

WEB\_LETTER\_EXIT

You will be receiving the letter in the next week or two. It will contain information about our web survey. It also contains a toll free number that you may call at any time with any questions you may have. When you call, please refer to the identification number printed on your letter.

[GO TO TERMINATE]

PROXY\_SCR Is the person who makes the majority of the decisions about the [FILL AGE]-year old's health care available?

- |                                     |                    |
|-------------------------------------|--------------------|
| (1) YES, CURRENTLY ON PHONE         | [START PROXY_INT]  |
| (2) YES, YOUTH MAKES OWN DECISOIONS | [GO TO WEB_OFFER]  |
| (3) NO, NOT AVAILABLE               | [GO TO REACH_PROX] |

(JAE: we have one more PROXY\_SCR at page 24)

REACH\_  
PROX Can you tell me how I could contact the person who makes the majority of the decisions about the [FILL AGE]-  
year old's health care?  
(1) YES [GO TO PROX\_NAME\_A]  
(2) NO [GO TO PH\_CONF]  
(77) DON'T KNOW [GO TO PH\_CONF]  
(99) REFUSED [GO TO PH\_CONF]

PROX\_NAME\_  
A What is first name of this person who makes these decisions?  
FIRST \_\_\_\_\_

PROX\_NAME\_  
B What is their middle name?  
MIDDLE \_\_\_\_\_

PROX\_NAME\_  
C What is their last name?  
LAST \_\_\_\_\_

PROX\_NAME\_  
D Does this person have a nickname, initials or another name that they may prefer?  
(1) YES [GO TO PROX\_NAME\_E]  
(2) NO [GO TO PROX\_PH\_X1]  
(77) DON'T KNOW [GO TO PROX\_PH\_X1]  
(99) REFUSED [GO TO PROX\_PH\_X1]

PROX\_NAME\_  
E What is the name or initials?  
NICKNAME/OTHER NAME \_\_\_\_\_

PROX\_NUM1 Could you please tell me this person's telephone number?  
(1) YES [GO TO PROX\_PH\_1X]  
(2) NO [GO TO PH\_CONF]  
(77) DON'T KNOW [GO TO PH\_CONF]  
(99) REFUSED [GO TO PH\_CONF]

PROX\_PH\_1X PROXY PHONE NUMBER COLLECTION SCREEN  
NNN-NNN-NNNN [GO TO PROX\_PH\_CONF\_X; GO  
TO PH\_CONF WHEN LAST #  
ENTERED]

PROX\_PH\_  
CONF\_X Is that a cellular telephone?  
(1) YES [GO TO PROX\_CONFHH]  
(2) NO [GO TO PROX\_CONFHH]  
(77) DON'T KNOW [GO TO PROX\_CONFHH]  
(99) REFUSED [GO TO PROX\_CONFHH]

PROX\_  
CONFHH\_X Is that number a private residence?  
(1) YES [GO TO PROX\_PH\_LOOP]  
(2) NO [GO TO PROX\_PH\_LOOP]  
(77) DON'T KNOW [GO TO PROX\_PH\_LOOP]  
(99) REFUSED [GO TO PROX\_PH\_LOOP]

PROX\_PH\_  
LOOP

Does (FILL PROX\_NAME\_A OR FILL PROX\_NAME\_D if given) have another phone number where (he/she) can be reached?

- (1) YES
- (2) NO
- (77) DON'T KNOW
- (99) REFUSED

[GO TO NEXT PROX\_PH\_X]  
[GO TO PH\_CONF]  
[GO TO PH\_CONF]  
[GO TO PH\_CONF]

**SCREENER PART 3: COLLECT YOUTH (2007 RESPONDENT) IDENTIFIERS AND LOCATING INFORMATION**

YOUTH\_CONT I'd like to collect a few pieces of information in order to contact this [FILL AGE]- year old. Could you please tell me the name of the youth?

IWER INSTRUCTION: IF R NOT COMFORTABLE PROVIDING NAME, ACCEPT INITIALS.

- (1) YES [GO TO YOUTH\_NAME\_A]
- (2) NO [GO TO YOUTH\_NAME\_D]
- (77) DON'T KNOW [GO TO YOUTH\_NAME\_D]
- (99) REFUSED [GO TO YOUTH\_NAME\_D]

YOUTH\_NAME\_A What is the youth's first name?  
FIRST \_\_\_\_\_

YOUTH\_NAME\_B What is the youth's middle name?  
MIDDLE \_\_\_\_\_

YOUTH\_NAME\_C What is the youth's last name?  
LAST \_\_\_\_\_

YOUTH\_NAME\_D Does the youth have a nickname, initials or another name that they may prefer?

- (1) YES [GO TO YOUTH\_NAME\_E]
- (2) NO [GO TO YOUTH\_PH1]
- (77) DON'T KNOW [GO TO YOUTH\_PH1]
- (99) REFUSED [GO TO YOUTH\_PH1]

YOUTH\_NAME\_E What is the name or initial?  
NICKNAME/OTHER NAME \_\_\_\_\_ [GO TO YOUTH\_PH1]

YOUTH\_PH Could you please tell me (FILL YOUTH\_NAME\_A OR FILL YOUTH\_NAME\_D if given)'s (FILL BLANK or second...fifth) phone number?

- (1) YES [RECORD phone number(s) IN YPH\_X]
- (2) NO [GO TO YOUTH\_EM\_X]
- (77) DON'T KNOW [GO TO YOUTH\_EM\_X]
- (99) REFUSED [GO TO YOUTH\_EM\_X]

YPH\_X YOUTH PHONE NUMBER COLLECTION SCREEN  
nnn-nnn-nnnn [GO TO YOUTH\_PH\_CONF]

IWER INSTRUCTION:  
WHEN IS THE BEST TIME TO CALL [FILL YOUTH\_NAME\_A]?

IF YES, SELECT APPOINTMENT SCREEN

YOUTH\_PH\_CONF Is the phone number that you've just given me a cellular telephone?

- (1) YES [GO TO YCONFHH]
- (2) NO [GO TO YCONFHH]
- (77) DON'T KNOW [GO TO YCONFHH]
- (99) REFUSED [GO TO YCONFHH]

YCONFHH Is that number a private residence?

- |                 |                       |
|-----------------|-----------------------|
| (1) YES         | [GO TO YOUTH_PH_LOOP] |
| (2) NO          | [GO TO YOUTH_PH_LOOP] |
| (77) DON'T KNOW | [GO TO YOUTH_PH_LOOP] |
| (99) REFUSED    | [GO TO YOUTH_PH_LOOP] |

YOUTH\_PH\_LOOP

Does (FILL YOUTH\_NAME\_A OR FILL YOUTH\_NAME\_D if given) have another phone number where (he/she) can be reached?

- |                 |                       |
|-----------------|-----------------------|
| (1) YES         | [GO TO NEXT YOUTH_PH] |
| (2) NO          | [GO TO YOUTH_EM_X]    |
| (77) DON'T KNOW | [GO TO YOUTH_EM_X]    |
| (99) REFUSED    | [GO TO YOUTH_EM_X]    |

YOUTH\_EM\_X

Could you please tell me (FILL SEX --> HIS/HER) (FILL BLANK OR second...fifth) electronic mail or e-mail addresses?

- |                 |  |
|-----------------|--|
| (1) YES         | [RECORD E-MAIL ADDRESS ELEMENTS IN YEMAIL_X] |
| (2) NO          | [GO TO YOUTH_AD_X]                           |
| (77) DON'T KNOW | [GO TO YOUTH_AD_X]                           |
| (99) REFUSED    | [GO TO YOUTH_AD_X]                           |

YEMAIL\_X

EMAIL ADDRESS COLLECTION SCREEN

\_\_\_\_\_@\_\_\_\_\_.

YOUTH\_EM\_CONF\_X

Is this an email address for personal, business or school use?

- |                 |                       |
|-----------------|-----------------------|
| (1) PERSONAL    | [GO TO YOUTH_EM_LOOP] |
| (2) BUSINESS    | [GO TO YOUTH_EM_LOOP] |
| (3) SCHOOL USE  | [GO TO YOUTH_EM_LOOP] |
| (77) DON'T KNOW | [GO TO YOUTH_EM_LOOP] |
| (99) REFUSED    | [GO TO YOUTH_EM_LOOP] |

YOUTH\_EM\_LOOP

Does (FILL YOUTH\_NAME\_A OR FILL YOUTH\_NAME\_D if given) have another email address where (he/she) can be reached?

- |                 |                         |
|-----------------|-------------------------|
| (1) YES         | [GO TO NEXT YOUTH_EM_X] |
| (2) NO          | [GO TO YOUTH_AD_X]      |
| (77) DON'T KNOW | [GO TO YOUTH_AD_X]      |
| (99) REFUSED    | [GO TO YOUTH_AD_X]      |

YOUTH\_AD\_X

Could you please tell me (HIS/HER) street address or mailing address [IF YPH\_X not equal null then FILL "in case we cannot reach them by phone."]?

- |                 |                       |
|-----------------|-----------------------|
| (1) YES         | [GO TO YOUTH_AD_ST_X] |
| (2) NO          | [GO TO CONF_INTRO]    |
| (77) DON'T KNOW | [GO TO CONF_INTRO]    |
| (99) REFUSED    | [GO TO CONF_INTRO]    |

YOUTH\_AD\_ ST\_X      What is the youth's street address or mailing address?  
\_\_\_\_\_

YOUTH\_AD\_ APT\_X      What is the youth's apartment number?  
APT # \_\_\_\_\_

YOUTH\_AD\_ CITY\_X      What is the youth's city and state?  
CITY \_\_\_\_\_

YOUTH\_AD\_ STATE\_X      State Dropdown Menu

YOUTH\_AD\_ ZIP\_X      What is the youth's zip code?  
ZIP \_\_\_\_\_  
[GO TO YCONYHH]

YCONYHH\_X      Is the youth's address you just gave me a private residence?

(1) YES      [GO TO YOUTH\_AD\_LOOP]  
(2) NO      [GO TO YOUTH\_INST]  
(77) DON'T KNOW      [GO TO YOUTH\_AD\_LOOP]  
(99) REFUSED      [GO TO YOUTH\_AD\_LOOP]

YOUTH\_ INST\_X      Can you describe the type of residence?

(1) UNIVERSITY/COLLEGE HOUSING (DORM)      [GO TO YOUTH\_AD\_LOOP]  
(2) MILITARY BASE      [GO TO YOUTH\_AD\_LOOP]  
(3) PRISON      [GO TO YOUTH\_AD\_LOOP]  
(4) OTHER INSTITUTION      [GO TO YOUTH\_AD\_LOOP]  
(77) DON'T KNOW      [GO TO YOUTH\_AD\_LOOP]  
(99) REFUSED      [GO TO YOUTH\_AD\_LOOP]

YOUTH\_AD\_ LOOP      Does (FILL YOUTH\_NAME\_A OR FILL YOUTH\_NAME\_D if given) have another street or mailing address where (he/she) can be reached?

(1) YES      [GO TO NEXT YOUTH\_AD\_X]  
(2) NO      [GO TO CONF\_INTRO]  
(77) DON'T KNOW      [GO TO CONF\_INTRO]  
(99) REFUSED      [GO TO CONF\_INTRO]

CONF\_INTRO      I would like to confirm that I have the correct information for the youth that we'll be contacting.  
  
[IWER INSTRUCTION: CONFIRM ALL NAMES AND SPELLINGS WITH THE RESPONDENT.]

CONF\_NAME      The name I have for the youth is [FILL YOUTH\_NAME\_A- YOUTH\_NAME\_D].  
  
Is this correct?

(1) YES      [GO TO CONFDOB\_X]  
(2) NO      [GO TO YOUTH\_NAME\_A - YOUTH\_NAME\_D TO EDIT]

CONF  
DOB

The [FILL birth date/age] I have for [FILL YOUTH\_NAME\_A OR FILL YOUTH\_NAME\_D if given] is [FILL: BIRTH DATE FROM DOB/ AGE].

(If DOB is not available, confirm age)

Is this correct?

(1) YES

[GO TO Y\_FUTCONT]

(2) NO

[GO TO SCR\_DOB]

SCR\_  
DOB

What is the correct month, day and year of birth of [FILL YOUTH\_NAME\_A OR FILL YOUTH\_NAME\_D if given]?

\_\_\_\_/\_\_\_\_/\_\_\_\_ (mm/dd/yyyy)

Y\_  
FUTCONT

May we contact you again if we have problems contacting [FILL YOUTH\_NAME\_A OR FILL YOUTH\_NAME\_D if given]?

(1) YES

[GO TO R2001\_NAMECONF\_A]

(2) NO

[GO TO TERMINATE]

(77) DON'T KNOW

[GO TO TERMINATE]

(99) REFUSED

[GO TO TERMINATE]

R2001\_  
NAMECONF\_A

What is your name?  
NAME \_\_\_\_\_

R2001\_  
PHONECONF\_A

And what is the best phone number to reach you?

PHONE NUMBER COLLECTION SCREEN

(1) Nnn-xxx-nnnn

[GO TO PH\_CONF]

(2) Another Phone Number

[R2001\_PHONECONF\_XX]

IWER INSTRUCTION:

WHEN IS THE BEST TIME TO CALL [FILL YOUTH\_NAME\_A]?

IF YES, SELECT APPOINTMENT ICON.

**SCREENER PART 4: COLLECT IDENTIFIERS AND LOCATING  
INFORMATION FOR 2001 OR 2007 RESPONDENT LEADS**

**PATH TO COLLECT INFORMATION FOR LEAD THAT KNOWS HOW TO CONTACT 2007 RESPONDENT (I.E.,  
YOUTH)**

LEAD\_REACH\_Y

Could you please tell me the name of the person that may know how to contact the [FILL AGE]-year-old?

IWER INSTRUCTION: IF R NOT COMFORTABLE PROVIDING NAME, ACCEPT INITIALS.

- |                 |                     |
|-----------------|---------------------|
| (1) YES         | [GO TO LEAD_NAME_A] |
| (2) NO          | [GO TO LEAD_NAME_D] |
| (77) DON'T KNOW | [GO TO LEAD_NAME_D] |
| (99) REFUSED    | [GO TO LEAD_NAME_D] |

LEAD\_NAME\_A What is the first name?

FIRST \_\_\_\_\_

LEAD\_NAME\_B What is the middle name?

MIDDLE \_\_\_\_\_

LEAD\_NAME\_C What is the last name?

LAST \_\_\_\_\_

LEAD\_NAME\_D Does the [FILL RELATION] have a nickname, initials or another name that they may prefer?

- |                 |                     |
|-----------------|---------------------|
| (1) YES         | [GO TO LEAD_NAME_E] |
| (2) NO          | [GO TO LEAD_PH_X]   |
| (77) DON'T KNOW | [GO TO LEAD_PH_X]   |
| (99) REFUSED    | [GO TO LEAD_PH_X]   |

LEAD\_NAME\_E What is the name or initials?

NICKNAME/OTHER NAME \_\_\_\_\_

LEAD\_PH\_X Could you please tell me (FILL LEAD\_NAME\_A OR FILL LEAD\_NAME\_D if given/else "this person")'s  
(FILL BLANK OR second...fifth) phone number?

- |                 |                                       |
|-----------------|---------------------------------------|
| (1) YES         | [RECORD phone number(s) IN LEAD_PH_X] |
| (2) NO          | [GO TO LEAD_EM_X]                     |
| (77) DON'T KNOW | [GO TO LEAD_EM_X]                     |
| (99) REFUSED    | [GO TO LEAD_EM_X]                     |

LEAD\_  
PH\_11\_X

LEAD R PHONE NUMBER COLLECTION SCREEN  
nnn-xxx-xxxx

[ GO TO LEAD\_PH\_CONF]

IWER INSTRUCTION:  
WHEN IS THE BEST TIME TO CALL?

IF YES, SELECT APPOINTMENT SCREEN



LEAD\_PH\_  
CONF\_X Is that a cellular telephone number?

- (1) YES [GO TO LEAD \_CONFHH]
- (2) NO [GO TO LEAD \_CONFHH]
- (77) DON'T KNOW [GO TO LEAD \_CONFHH]
- (99) REFUSED [GO TO LEAD \_CONFHH]

LEAD\_  
CONFHH\_X Is that number a private residence?

- (1) YES [GO TO LEAD \_PH\_LOOP]
- (2) NO [GO TO LEAD \_PH\_LOOP]
- (77) DON'T KNOW [GO TO LEAD \_PH\_LOOP]
- (99) REFUSED [GO TO LEAD \_PH\_LOOP]

LEAD\_PH\_  
LOOP\_X Does (FILL LEAD \_NAME\_A OR FILL LEAD \_NAME\_D if given) have another phone number where (he/she) can be reached?

- (1) YES [GO TO NEXT LEAD \_PH]
- (2) NO [GO TO LEAD \_EM\_X]
- (77) DON'T KNOW [GO TO LEAD \_EM\_X]
- (99) REFUSED [GO TO LEAD \_EM\_X]

LEAD  
\_EM\_X Could you please tell me (FILL LEAD R\_NAME\_A OR FILL LEAD R\_NAME\_D if given)'s (FILL BLANK OR second...fifth) electronic mail or e-mail addresses?

- (1) YES [RECORD E-MAIL ADDRESS ELEMENTS IN LEAD\_MAIL\_X]
- (2) NO [GO TO LEAD\_AD\_X]
- (77) DON'T KNOW [GO TO LEAD\_AD\_X]
- (99) REFUSED [GO TO LEAD\_AD\_X]

LEAD\_  
EMAIL\_X EMAIL ADDRESS COLLECTION SCREEN

\_\_\_\_\_ @ \_\_\_\_\_.

LEAD\_EM\_  
CONF\_X Is this email address for personal, business or school use?

- (1) PERSONAL [GO TO LEAD\_EM\_LOOP]
- (2) BUSINESS [GO TO LEAD\_EM\_LOOP]
- (3) SCHOOL USE [GO TO LEAD\_EM\_LOOP]
- (77) DON'T KNOW [GO TO LEAD\_EM\_LOOP]
- (99) REFUSED [GO TO LEAD\_EM\_LOOP]

LEAD\_EM\_  
LOOP\_X Does (FILL LEAD \_NAME\_A OR FILL LEAD \_NAME\_D if given) have another email address where (he/she) can be reached?

- (1) YES [GO TO NEXT LEAD\_EM\_X]
- (2) NO [GO TO LEAD\_AD\_X]
- (77) DON'T KNOW [GO TO LEAD\_AD\_X]
- (99) REFUSED [GO TO LEAD\_AD\_X]

LEAD\_AD  
\_X

Could you please tell (FILL LEAD \_NAME\_A OR FILL LEAD \_NAME\_D if given)'s [FILL BLANK OR second...fifth] street address or addresses [IF LEADPH\_1 through LEADRPH\_9] not equal null then FILL in case we cannot reach them by phone.].?

- |                 |                      |
|-----------------|----------------------|
| (1) YES         | [GO TO LEAD_AD_ST_X] |
| (2) NO          | [CONF_INTRO_LEAD]    |
| (77) DON'T KNOW | [CONF_INTRO_LEAD]    |
| (99) REFUSED    | [CONF_INTRO_LEAD]    |

LEAD\_AD\_  
ST\_X

What is the street address?

\_\_\_\_\_

LEAD\_AD\_  
APT\_X

What is the apartment number?

APT # \_\_\_\_\_

LEAD\_AD\_  
CITY\_X

What is the city and state?

CITY \_\_\_\_\_

LEAD\_AD\_  
STATE\_X

State Dropdown Menu

LEAD\_AD\_  
ZIP\_X

What is the zip code?

ZIP \_\_\_\_\_

[GO TO LEADCONYHH\_X]

LEAD  
CONYHH\_X

Is that address a private residence?

- |                 |                         |
|-----------------|-------------------------|
| (1) YES         | [GO TO LEAD_AD_LOOP]    |
| (2) NO          | [GO TO LEAD_INST]       |
| (77) DON'T KNOW | [GO TO CONF_INTRO_LEAD] |
| (99) REFUSED    | [GO TO CONF_INTRO_LEAD] |

LEAD\_  
INST\_X

Can you describe the type of residence?

- |                                       |                      |
|---------------------------------------|----------------------|
| (1) UNIVERSITY/COLLEGE HOUSING (DORM) | [GO TO LEAD_AD_LOOP] |
| (2) MILITARY BASE                     | [GO TO LEAD_AD_LOOP] |
| (3) PRISON                            | [GO TO LEAD_AD_LOOP] |
| (4) OTHER INSTITUTION                 | [GO TO LEAD_AD_LOOP] |
| (77) DON'T KNOW                       | [GO TO LEAD_AD_LOOP] |
| (99) REFUSED                          | [GO TO LEAD_AD_LOOP] |

LEAD\_AD\_  
LOOP

Does (FILL LEAD R\_NAME\_A OR FILL LEAD R\_NAME\_D if given) have another address where (he/she) can receive mail?

- |                 |                         |
|-----------------|-------------------------|
| (1) YES         | [GO TO NEXT LEAD_AD_X]  |
| (2) NO          | [GO TO CONF_INTRO_LEAD] |
| (77) DON'T KNOW | [GO TO CONF_INTRO_LEAD] |
| (99) REFUSED    | [GO TO CONF_INTRO_LEAD] |

CONF\_INTRO\_  
LEAD

I would like to confirm that I have the correct information for the person that we'll be contacting.  
[INTERVIEWER: CONFIRM ALL NAMES AND SPELLINGS WITH THE RESPONDENT.]

CONF\_NAME\_  
LEAD

The name I have for this person is [FILL NAME OF FROM LEADNAME\_A- LEAD\_NAME\_D].  
Is this correct?

- (1) YES
- (2) NO

[GO TO LEAD\_FUTCONT  
[GO TO LEAD\_CONT AND EDIT]

LEAD\_FUTCONT

May we contact you again if we have problems contacting this person who may have completed the interview?

- (1) YES
- (2) NO
- (77) DON'T KNOW
- (99) REFUSED

[GO TO FUTCONT\_LEAD\_NAME]  
[GO TO PH\_CONF]  
[GO TO PH\_CONF]  
[GO TO PH\_CONF]

FUTCONT\_  
LEAD\_NAME

What is your name?  
NAME \_\_\_\_\_

[GO TO PH\_CONF]

#### **PATH TO COLLECT INFORMATION FOR LEAD THAT KNOWS HOW TO CONTACT R2001ESPONDENT**

LEAD\_REACH\_01

Could you please tell me the name of the person that may know how to contact the [FILL AGE]-year-old'S  
[FILL RELATION]?

IWER INSTRUCTION: IF R NOT COMFORTABLE PROVIDING NAME, ACCEPT INITIALS.

- (1) YES
- (2) NO
- (77) DON'T KNOW
- (99) REFUSED

[GO TO LEAD\_NAME\_A\_01]  
[GO TO LEAD\_NAME\_D\_01]  
[GO TO LEAD\_NAME\_D\_01]  
[GO TO LEAD\_NAME\_D\_01]

LEAD\_NAME\_A\_01

What is the first name?  
FIRST \_\_\_\_\_

LEAD\_NAME\_B\_01

What is the middle name?  
MIDDLE \_\_\_\_\_

LEAD\_NAME\_C\_01

What is the last name?  
LAST \_\_\_\_\_

LEAD\_NAME\_D\_01

Is there a nickname, initials or another name that they may prefer?  
NICKNAME/OTHER NAME \_\_\_\_\_

LEAD\_PH\_01 Could you please tell me (FILL LEAD\_NAME\_A\_01 OR FILL LEAD\_NAME\_D\_01 if given)'s (FILL BLANK OR second...fifth) phone number?

(1)YES [RECORD phone number(s) IN LEAD\_PH\_X\_01]  
(2)NO [GO TO LEAD\_EM\_X\_01]  
(77)DON'T KNOW [GO TO LEAD\_EM\_X\_01]  
(99)REFUSED [GO TO LEAD\_EM\_X\_01]

LEAD\_  
PH\_X\_01

LEAD R PHONE NUMBER COLLECTION SCREEN

nnn-nnn-nnnn

[ GO TO LEAD\_PH\_CONF\_01]

IWER INSTRUCTION:

WHEN IS THE BEST TIME TO CALL [FILL YOUTH\_NAME\_A]?

IF YES, CREATE AN APPOINTMENT.

LEADR\_PH\_  
CONF\_01\_X

Is that a cellular telephone number?

(1)YES [GO TO LEAD\_CONFHH\_01]  
(2)NO [GO TO LEAD\_CONFHH\_01]  
(77)DON'T KNOW [GO TO LEAD\_CONFHH\_01]  
(99)REFUSED [GO TO LEAD\_CONFHH\_01]

LEAD

CONFHH\_01\_X Is that number a private residence?

(1)YES [GO TO LEAD\_PH\_LOOP\_01]  
(2)NO [GO TO LEAD\_PH\_LOOP\_01]  
(77)DON'T KNOW [GO TO LEAD\_PH\_LOOP\_01]  
(99)REFUSED [GO TO LEAD\_PH\_LOOP\_01]

LEAD\_PH\_  
LOOP\_01\_X

Does (FILL LEAD\_R\_NAME\_A\_01 OR FILL LEAD\_R\_NAME\_D\_01 if given) have another phone number where (he/she) can be reached?

(1)YES [GO TO NEXT LEAD\_R\_PH\_01\_X]  
(2)NO [GO TO LEAD\_EM\_X\_01]  
(77)DON'T KNOW [GO TO LEAD\_EM\_X\_01]  
(99)REFUSED [GO TO LEAD\_EM\_X\_01]

LEAD

\_EM\_01\_X

Could you please tell me (FILL LEAD\_NAME\_A\_01 OR FILL LEAD\_NAME\_D\_01 if given)'s (FILL BLANK OR second...fifth) electronic mail or e-mail addresses?

(1)YES [RECORD E-MAIL ADDRESS  
ELEMENTS IN LEAD\_MAIL\_01\_X\_01]  
(2)NO [GO TO LEAD\_AD\_X\_01]  
(77)DON'T KNOW [GO TO LEAD\_AD\_X\_01]  
(99)REFUSED [GO TO LEAD\_AD\_X\_01]

LEAD\_  
EMAIL\_01\_X

EMAIL ADDRESS COLLECTION SCREEN

\_\_\_\_\_ @ \_\_\_\_\_.

LEAD\_EM\_CONF\_X Is this email address for personal, business or school use?

(1)PERSONAL [GO TO LEAD\_EM\_LOOP\_01]  
 (2)BUSINESS [GO TO LEAD\_EM\_LOOP\_01]  
 (2)SCHOOL USE [GO TO LEAD\_EM\_LOOP\_01]  
 (77)DON'T KNOW [GO TO LEAD\_EM\_LOOP\_01]  
 (99)REFUSED [GO TO LEAD\_EM\_LOOP\_01]

LEAD\_EM\_LOOP\_01 Does (FILL LEAD\_NAME\_A OR FILL LEAD\_NAME\_D if given) have another email address where (he/she) can be reached?

(1)YES [GO TO NEXT LEAD\_EM\_X\_01]  
 (2)NO [GO TO LEAD\_AD\_X\_01]  
 (77)DON'T KNOW [GO TO LEAD\_AD\_X\_01]  
 (99)REFUSED [GO TO LEAD\_AD\_X\_01]

LEAD\_AD\_X\_01 Could you please tell (FILL LEAD\_NAME\_A OR FILL LEAD\_NAME\_D if given)'s [FILL BLANK OR second...fifth] street address or addresses [IF LEAD\_PH\_X entered then FILL "in case we cannot reach them by phone"]?

(1)YES [GO TO LEAD\_AD\_ST\_X\_01]  
 (2)NO [CONF\_INTRO\_LEAD\_01]  
 (77)DON'T KNOW [CONF\_INTRO\_LEAD\_01]  
 (99)REFUSED [CONF\_INTRO\_LEAD\_01]

LEAD\_AD\_ST\_01\_X What is the street address?  
 \_\_\_\_\_

LEAD\_AD\_APT\_01\_X What is the apartment number?  
 APT #\_\_\_\_\_

LEAD\_AD\_CITY\_01\_X What is the city and state?  
 CITY\_\_\_\_\_

LEAD\_AD\_STATE\_01\_X State Dropdown Menu

LEAD\_AD\_ZIP\_01\_X What is the zip code?  
 ZIP\_\_\_\_\_ [GO TO LEADCONYHH\_01\_X]

LEAD\_CONYHH\_01\_X Is that address a private residence?

(1) YES [GO TO LEAD\_AD\_LOOP\_01]  
 (2) NO [GO TO LEAD\_INST\_01]  
 (77) DON'T KNOW [GO TO [CONF\_INTRO\_LEAD\_01]  
 (99) REFUSED [GO TO CONF\_INTRO\_LEAD\_01]

LEAD\_  
INST\_01\_X Can you describe the type of residence?

(1)UNIVERSITY/COLLEGE HOUSING (DORM) [GO TO LEAD\_AD\_LOOP\_01]  
(2)MILITARY BASE [GO TO LEAD\_AD\_LOOP\_01]  
(3)PRISON [GO TO LEAD\_AD\_LOOP\_01]  
(4)OTHER INSTITUTION [GO TO LEAD\_AD\_LOOP\_01]  
(77)DON'T KNOW [GO TO LEAD\_AD\_LOOP\_01]  
(99)REFUSED [GO TO LEAD\_AD\_LOOP\_01]

LEAD\_AD\_  
LOOP\_01\_X Does (FILL LEAD R\_NAME\_A OR FILL LEAD R\_NAME\_D if given) have another address where (he/she) can receive mail?

(1)YES [GO TO NEXT LEAD\_AD\_X\_01]  
(2)NO [GO TO CONF\_INTRO\_LEAD\_01]  
(77)DON'T KNOW [GO TO CONF\_INTRO\_LEAD\_01]  
(99)REFUSED [GO TO CONF\_INTRO\_LEAD\_01]

CONF\_INTRO\_  
LEAD\_01 I would like to confirm that I have the correct information for the person that we'll be contacting.  
[INTERVIEWER: CONFIRM ALL NAMES AND SPELLINGS WITH THE RESPONDENT.]

CONF\_NAME\_  
LEAD\_01 The name I have for this person is [FILL NAME OF FROM LEADNAME\_A\_01- LEAD\_NAME\_D\_01].  
Is this correct?

(1)YES [GO TO LEAD\_FUTCONT\_01]  
(2)NO [GO TO LEADNAME\_A\_01 to D\_01 AND CORRECT]

LEAD\_FUTCONT\_01

May we contact you again if we have problems contacting this person who may have completed the 2001 interview?

(1)YES [GO TO FUTCONT\_LEAD\_NAME\_01]  
(2)NO [GO TO PH\_CONF]  
(77)DON'T KNOW [GO TO PH\_CONF]  
(99)REFUSED [GO TO PH\_CONF]

FUTCONT\_  
LEAD\_NAME\_01 What is your name?  
NAME \_\_\_\_\_  
[GO TO PH\_CONF]

FUTCONT\_LEAD\_  
\_NUM\_01 And what is the best phone number to reach you?

PHONE NUMBER COLLECTION SCREEN  
Nnn-nnn-nnnn

TERM\_  
BRIEF Thank you for your time (on behalf of the Centers for Disease Control).

TERMINATE 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 would like more information about the Survey of Adult Transition and Health, please call the study's toll-free number, 1-866-900-9601. If you have questions about your rights as a study participant, you may call 1-800-223-8118, toll-free, and leave a message asking to speak to the Chairperson of the Research Ethics Review Board.

## CATI QUESTIONNAIRE INTRODUCTION

NEW\_RESP

Hello, my name is \_\_\_\_\_. I'm calling on behalf of the Centers for Disease Control and Prevention.

[If youth name available, "May I please speak to [FILL YOUTHNAME\_A-YOUTH\_NAME\_D"]?

- |                               |                     |
|-------------------------------|---------------------|
| (1) Yes, youth comes to phone | [GO TO NEW_RESP_SC] |
| (2) No, youth unavailable     | [GO TO REACH_SC]    |

REACH\_SC

When would be a good time to call back to reach [FILL YOUTHNAME\_A-YOUTH\_NAME\_D"]?

CREATE AN APPOINTMENT

NEW\_RESP\_SC

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 young people in your age group, their health status and health care, and transition into adulthood. In [FILL INTDATE], we spoke to someone in your household about health care. We would now like to ask you about changes that may have occurred in your health in the past few years.

- |                 |                  |
|-----------------|------------------|
| (1)CONTINUE     | [GO TO SL_INTRO] |
| (2)PROXY NEEDED | [GO TO PDIFF]    |

PDIFF

What difficulty do you have that prevents you from participating for yourself?

- |                       |                             |
|-----------------------|-----------------------------|
| (1)Hearing difficulty | [GO TO PROXY_SCR/WEB_OFFER] |
| (2)Speech difficulty  | [GO TO PROXY_SCR/WEB_OFFER] |
| (3)Cognitive barrier  | [GO TO PROXY_SCR]           |
| (4)Physical barrier   | [GO TO PROXY_SCR/WEB_OFFER] |
| (77)DK                | [GO TO PROXY_SCR/WEB_OFFER] |
| (99)REFUSED           | [GO TO PROXY_SCR]           |

RELAY Thank you for this information. I can continue the RELAY interview in a few minutes, or schedule a time to call you back. Which would be better for you?

- |                                 |                  |
|---------------------------------|------------------|
| (1)CONTINUE NOW USING RELAY     | [GO TO RELAYNOW] |
| (2)SCHEDULE CALLBACK WITH RELAY | [GO TO RELAYCBK] |
| (77)DON'T KNOW                  | [GO TO RELAYNOW] |

RELAYNOW

I have to call into the RELAY machine to continue this interview. I will call you back in less than five minutes at [FILL SAMPLED PHONE 1-866-900-9601]. Please stay by your RELAY machine for the next five minutes. Thank you, and good bye.

RELAYCBK.

When would be a good time to call back to reach you using RELAY?

SELECT APPOINTMENT ICON

PROXY\_SCR



Is the person who makes the majority of the decisions about the [FILL AGE]-year old's health care available?

- |                                    |                         |
|------------------------------------|-------------------------|
| (1) YES, CURRENTLY ON PHONE        | [START PROXY INTERVIEW] |
| (2) YES, YOUTH MAKES OWN DECISOION | [GO TO PROXY_INT]       |
| (3) NO, NOT AVAILABLE              | [GO TO REACH_PROX ]     |

PROXY\_INT I understand that you are the person who makes the majority of the decisions about the [FILL NAME OR DOB/AGE]. The CDC is interested in either talking with (FILL him/her) for about 15 minutes, or having him/her complete the survey on the Internet. We understand that he/she is unable to do this. Is this correct? [PROBE TO DETERMINE IF CASE IS ELIGIBLE FOR PROXY COMPLETION AND CODE REASON:]

- |   |                                 |
|---|---------------------------------|
| (1)Yes, hearing difficulty  | [CONTINUE]                      |
| (2)Yes, speech difficulty   | [CONTINUE]                      |
| (3)Yes, cognitive barrier   | [CONTINUE]                      |
| (4)Yes, physical barrier  | [CONTINUE]                      |
| (5)No, youth is able to do the interview and is currently available | [TERMINATE AND CONTACT YOUTH R] |
| (6)No, youth is able to do the interview in separate household      | [GO TO YOUTH_CONT]              |

Because [FILL he/she] cannot be interviewed and you are knowledgeable about [FILL: his/her] healthcare, the CDC would like to interview you in [FILL: his/her] place. Please keep in mind that these questions are written to be asked of [FILL: NAME] directly, so please answer the questions as if they were being asked of [FILL:him/her].

SL\_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 question you do not wish to answer, or stop at any time without penalty. Your answers will be used for statistical purposes, and will be linked to your parent or guardian from several years ago. We are required by the Public Health Service Act to keep your answers strictly private. I can give you more information on this and other federal laws if you wish. They state that your answers will be used only for statistical research. The survey will take about 15 minutes. In appreciation, you will receive \$20. (IF CALLING KNOWN CELL PHONE NUMBER: You will also receive an additional \$5 to defer your costs for doing the interview on your cell phone.) I'd like to continue unless you have any questions. [SKIP IF PDIFF=1:] In order to review my work, my supervisor may record and listen as I ask the questions. I'd like to continue now unless you have any questions.

- |                                   |   |
|-----------------------------------|---|
| (1)CONTINUE, RECORDING ACCEPTABLE | [GO TO CONF_DOB_Y]                          |
| (2)CONTINUE, DO NOT RECORD        | [DISABLE RECODRDIING & GO TO<br>CONF_DOB_Y] |
| (3) PROXY NEEDED                  | [GO TO PDIFF]                               |

HELP SCREEN (SL\_INTRO IF NEEDED):

The Public Health Service Act is Volume 42 of the US Code, Section 242k. The collection of information in this survey is authorized by Section 306 of this Act. The confidentiality of your responses is assured by Section 308d of this Act and by the Confidential Information Protection and Statistical Efficiency Act.

CONF

DOB Before we begin, I'd like to confirm your date of birth. The birth date I have for you is [FILL: BIRTH DATE FROM 2001 DOB].

Is this correct?

(1) YES

[GO TO F2Q11]

(2) NO

[GO TO NEWDOB]

NEWDOB What is the correct month, day and year of birth?

\_\_\_\_/\_\_\_\_/\_\_\_\_ (mm/dd/yyyy)

GO TO SECTION 2: HEALTH AND FUNCTIONAL STATUS (F2Q11).

## 2007 Survey of Adult Transition and Health (SATH)

### WEB QUESTIONNAIRE INTRODUCTION

The Centers for Disease Control and Prevention (CDC) is doing a nationwide survey about the health of young adults, their health status and health care, and transition into adulthood. In 2001, we spoke to someone in your household about health care. We would now like to ask you about changes that may have occurred in your health in the past few years.

Taking part in this survey is voluntary. It will take about 15 minutes. In appreciation, you will receive \$20. You may choose not to answer any question you don't wish to answer—simply select the "Refused" option. You may also choose to stop the survey at any time, or stop now and continue it at a later time. You will be able to restart the survey where you left off.

We are required by the Public Health Service Act to keep your answers strictly private. Your answers will be used only for statistical purposes and will be linked to those of your parent or guardian from several years ago. By law, we will take all possible steps to protect your privacy and are required to use your answers only for statistical research. You can view a description of these laws by clicking here.

If you have any questions about this study, please call the study's toll-free number, 866-900-9601, or send an e-mail to 6414@norc.org.

**HOW TO NAVIGATE THIS WEB SURVEY:** You will use the computer mouse to select your answer to most questions. For some questions you might need to type in your answer. You must choose an answer in order to proceed to the next question.

Click the "Next" button to continue to the next question. To return to a question already answered, click the "Previous" button. You may choose not to answer any questions you don't wish to answer. Simply select the Refused option. You may also stop the survey at any time without penalty, or continue it at a later time.

If you would like to stop the survey and continue at a later time, simply click on the "Stop" button.

To begin the survey, click on the "Next" button shown below.

1. Please confirm your date of birth. The birth date we have for you is [FILL: BIRTH DATE FROM 2001 DOB]. Is this correct?

(1)YES

[GO TO F2Q11]

(2)NO

[GO TO NEWDOB\_X]

NEWDOB\_X What is the correct month, day and year of birth?

\_\_\_\_/\_\_\_\_/\_\_\_\_ (mm/dd/yyyy)

GO TO SECTION 2: HEALTH AND FUNCTIONAL STATUS (F2Q11).

## SECTION 1: HEALTH AND FUNCTIONAL STATUS

### Subdomain 1. General health status

F2Q11 In general, how would you describe your health? Would you say your health is excellent, very good, good, fair, or poor?

- (1) Excellent
- (2) Very good
- (3) Good
- (4) Fair
- (5) Poor
- (7) DON'T KNOW
- (9) REFUSED

F2Q12 About 6 years ago, your parent or guardian told us about your health. Compared with 6 years ago, would you say your health now is better, worse, or about the same?

- (1) Better
- (2) Worse
- (3) About the same
- (7) DON'T KNOW
- (9) REFUSED

F2Q13 Do you consider yourself to have any kind of disability?

- (1) Yes
- (2) No
- (7) Don't know
- (9) Refused

F2Q14 A person with special health care needs is someone who needs special health care services because of a medical, mental health, or other health condition. People with special health care needs might need medicine, therapy, or specialty care on a regular basis – stuff other people don't typically need or only need once in a while. Do you consider yourself to have a special health care need?

- (1) Yes
- (2) No
- (7) Don't know
- (9) Refused

**Subdomain 2. Activity limitations – daily living**

- F2Q21            Because of a physical, mental, or emotional problem, do you need the help of other persons with PERSONAL CARE NEEDS, such as eating, bathing, dressing, or getting around inside your home?
- (1) YES  
(2) NO  
(7) DON'T KNOW  
(9) REFUSED
- F2Q22            Because of a physical, mental, or emotional problem, do you need the help of other persons in handling ROUTINE NEEDS, such as everyday household chores, doing necessary business, shopping, or getting around for other purposes?
- (1) YES  
(2) NO  
(7) DON'T KNOW  
(9) REFUSED
- F2Q23            Does a physical, mental, or emotional problem interfere with your ability to participate in social, religious, or recreation activities like sports, clubs, parties, or church?
- (1) YES  
(2) NO  
(7) DON'T KNOW  
(9) REFUSED

**Subdomain 3. Activity limitations – work**

F2Q30 What were you doing most of the past 12 months: Working at a job or business, looking for work, taking care of your house or family, going to school, or something else?

- (1) Working at a job or business [SKIP TO F2Q32]
- (2) Looking for work [SKIP TO F2Q31]
- (3) Taking care of house or family [SKIP TO F2Q31]
- (4) Going to school [SKIP TO F2Q31]
- (5) Something else
- (7) DON'T KNOW [SKIP TO F2Q31]
- (9) REFUSED [SKIP TO F2Q31]

F2Q30A What were you doing most of the past 12 months?

TEXT FIELD: \_\_\_\_\_

F2Q31 Did you have a job or business at any time in the past 12 months?

- (1) YES
- (2) NO [SKIP TO Q37]
- (7) DON'T KNOW [SKIP TO Q37]
- (9) REFUSED [SKIP TO Q37]

F2Q32 In the past 12 months, how often has your health affected your ability to work at a job or business? Would you say:

- (1) Never [SKIP TO Q34]
- (2) Sometimes
- (3) Usually
- (4) Always
- (7) DON'T KNOW [SKIP TO Q34]
- (9) REFUSED [SKIP TO Q34]

F2Q33 Does your health affect your ability to work a great deal, some, or very little?

- (1) A great deal
- (2) Some, or
- (3) Very little?
- (7) DON'T KNOW
- (9) REFUSED

F2Q34 Because of your health, did you need any services, accommodations, or other assistance to help you do your job better?

- (1) YES [SKIP TO Q35]
- (2) NO [SKIP TO NEXT SUBDOMAIN]
- (7) DON'T KNOW [SKIP TO NEXT SUBDOMAIN]
- (9) REFUSED [SKIP TO NEXT SUBDOMAIN]

F2Q35 Did your job(s) or business(es) provide any services, accommodations, or other assistance to help you do your best there?

- (1) YES [SKIP TO Q36]
- (2) NO [SKIP TO NEXT SUBDOMAIN]
- (7) DON'T KNOW [SKIP TO NEXT SUBDOMAIN]
- (9) REFUSED [SKIP TO NEXT SUBDOMAIN]

F2Q36 Did you ask or apply for any services, accommodations, or other assistance from your job or business?

- (1) YES [SKIP TO NEXT SUBDOMAIN]
- (2) NO [SKIP TO NEXT SUBDOMAIN]
- (7) DON'T KNOW [SKIP TO NEXT SUBDOMAIN]
- (9) REFUSED [SKIP TO NEXT SUBDOMAIN]

F2Q37 Did you want to have a job or business at any time in the past 12 months?

- (1) YES
- (2) NO
- (7) DON'T KNOW
- (9) REFUSED

F2Q38 Do you have plans to have a job or business in the next 12 months?

- (1) YES
- (2) NO
- (7) DON'T KNOW
- (9) REFUSED

F2Q39 Does your health affect your ability to have a job or business?

- (1) YES
- (2) NO
- (7) DON'T KNOW
- (9) REFUSED

**Subdomain 4. Activity limitations – school**

IF F2Q30 = 4 (MAIN ACTIVITY IS SCHOOL), SKIP TO F2Q42.

F2Q41 In the past 12 months, did you attend any type of school?

- (1) YES
- (2) NO [SKIP TO Q47]
- (7) DON'T KNOW [SKIP TO Q47]
- (9) REFUSED [SKIP TO Q47]

F2Q42 In the past 12 months, how often has your health affected your ability to attend school? Would you say:

- (1) Never [SKIP TO Q44]
- (2) Sometimes
- (3) Usually
- (4) Always
- (7) DON'T KNOW [SKIP TO Q44]
- (9) REFUSED [SKIP TO Q44]

F2Q43 Does your health affect your ability to attend school a great deal, some, or very little?

- (1) A great deal
- (2) Some, or
- (3) Very little?
- (7) DON'T KNOW
- (9) REFUSED

F2Q44 Because of your health, did you need any services, accommodations, or other assistance to help you attend school or do your best there?

- (1) YES [SKIP TO Q45]
- (2) NO [SKIP TO NEXT SUBDOMAIN]
- (7) DON'T KNOW [SKIP TO NEXT SUBDOMAIN]
- (9) REFUSED [SKIP TO NEXT SUBDOMAIN]

F2Q45 Did the school(s) you attended provide any services, accommodations, or other assistance to help you do your best there?

- (1) YES [SKIP TO Q46]
- (2) NO [SKIP TO NEXT SUBDOMAIN]
- (7) DON'T KNOW [SKIP TO NEXT SUBDOMAIN]
- (9) REFUSED [SKIP TO NEXT SUBDOMAIN]



F2Q46 Did you ask or apply for any services, accommodations, or other assistance from your school?

- (1) YES [SKIP TO NEXT SUBDOMAIN]
- (2) NO [SKIP TO NEXT SUBDOMAIN]
- (7) DON'T KNOW [SKIP TO NEXT SUBDOMAIN]
- (9) REFUSED [SKIP TO NEXT SUBDOMAIN]

F2Q47 Did you want to attend any type of school in the past 12 months?

- (1) YES
- (2) NO
- (7) DON'T KNOW
- (9) REFUSED

F2Q48 Do you have plans to enroll in any type of school in the next 12 months?

- (1) YES
- (2) NO
- (7) DON'T KNOW
- (9) REFUSED

F2Q49 Does your health affect your ability to attend school or complete coursework?

- (1) YES
- (2) NO
- (7) DON'T KNOW
- (9) REFUSED

**Subdomain 5. Activity limitations – taking care of house or family**

IF F2Q30 = 3 (MAIN ACTIVITY IS TAKING CARE OF HOUSE OR FAMILY), ASK F2Q52. IF F2Q30 = (1,2,4,5,7,9), SKIP TO NEXT SUBDOMAIN.

F2Q52 In the past 12 months, how often has your health affected your ability to take care of your house or family?  
Would you say:

- (1) Never [SKIP TO Q54]
- (2) Sometimes
- (3) Usually
- (4) Always
- (7) DON'T KNOW [SKIP TO Q54]
- (9) REFUSED [SKIP TO Q54]

F2Q53 Does your health affect your ability to take care of your house or family a great deal, some, or very little?

- (1) A great deal
- (2) Some, or
- (3) Very little?
- (7) DON'T KNOW
- (9) REFUSED

F2Q54 Because of your health, did you need any services, accommodations, or other assistance to help you take care of your house or family?

- (1) YES [SKIP TO Q55]
- (2) NO [SKIP TO NEXT SUBDOMAIN]
- (7) DON'T KNOW [SKIP TO NEXT SUBDOMAIN]
- (9) REFUSED [SKIP TO NEXT SUBDOMAIN]

F2Q55 Did you receive any services, accommodations, or other assistance to help you take care of your house or family?

- (1) YES [SKIP TO Q56]
- (2) NO [SKIP TO NEXT SUBDOMAIN]
- (7) DON'T KNOW [SKIP TO NEXT SUBDOMAIN]
- (9) REFUSED [SKIP TO NEXT SUBDOMAIN]

F2Q56 Did you ask or apply for any services, accommodations, or other assistance to help you take care of your house or family?

- (1) YES
- (2) NO
- (7) DON'T KNOW
- (9) REFUSED

## SECTION 2: MEDICAL HOME

### Subdomain 1. Usual place for care

- F3Q01 Is there a place that you USUALLY go when you are sick or you need advice about your health?
- (01) YES
  - (02) THERE IS NO PLACE [SKIP TO Q03]
  - (03) THERE IS MORE THAN ONE PLACE
  - (77) DON'T KNOW [SKIP TO Q03]
  - (99) REFUSED [SKIP TO Q03]
- F3Q02 When you are sick or you need advice about your health, what kind of place do you go to most often? Is it a doctor's office, emergency room, hospital outpatient department, clinic, or some other place?
- (01) Doctor's office
  - (02) Hospital emergency room
  - (03) Hospital outpatient department
  - (04) Clinic or health center
  - (08) Some other place
  - (09) DOES NOT GO TO ONE PLACE MOST OFTEN
  - (77) DON'T KNOW
  - (99) REFUSED
- F3Q03 Is there a place that you USUALLY go when you need routine preventive care, such as a physical examination or check-up?
- (01) YES
  - (02) THERE IS NO PLACE [SKIP TO Q05]
  - (03) THERE IS MORE THAN ONE PLACE
  - (77) DON'T KNOW [SKIP TO Q05]
  - (99) REFUSED [SKIP TO Q05]
- F3Q04 When you need routine preventive care, what kind of place do you go to most often? Is it a doctor's office, emergency room, hospital outpatient department, clinic, or some other place?
- (01) Doctor's office
  - (02) Hospital emergency room
  - (03) Hospital outpatient department
  - (04) Clinic or health center
  - (08) Some other place
  - (09) DOES NOT GO TO ONE PLACE MOST OFTEN
  - (77) DON'T KNOW
  - (99) REFUSED
- F3Q05 A personal doctor or nurse is a health professional who knows you well and is familiar with your health history. This can be a general doctor, a specialist doctor, a nurse practitioner, or a physician's assistant. Do you have one or more persons you think of as your personal doctor or nurse?
- (01) Yes, one person
  - (02) Yes, more than one person
  - (03) No
  - (77) Don't Know
  - (99) Refused

**Subdomain 2. Continuous screening**

F3Q21 During the past 12 months, how many times have you seen a doctor, nurse, or other health care provider for preventive medical care such as a physical exam or checkup?

\_\_\_\_ TIMES  
(777) DON'T KNOW  
(999) REFUSED

F3Q22 During the past 12 months, how many times did you see a dentist for preventive dental care, such as check-ups and dental cleanings?

\_\_\_\_ TIMES  
(777) DON'T KNOW  
(999) REFUSED

IF F3Q21  $\geq$  1 OR F3Q22  $\geq$  1 THEN SKIP TO F3Q31. ELSE IF F3Q21 = (000,777,999) AND F3Q22 = (000,777,999) THEN ASK F3Q23.

F3Q23 During the past 12 months, did you see a doctor, nurse, or other health care provider for any kind of medical care?

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

### Subdomain 3. Foregone or delayed care

F3Q31 People often delay or do not get needed health care. Examples of needed health care include medical care as well as other types of care such as dental care, mental health services, and special types of therapies. In the past 12 months, have you delayed or gone without needed health care?

- (1) YES
- (2) NO [SKIP TO NEXT SUBDOMAIN]
- (7) DON'T KNOW [SKIP TO NEXT SUBDOMAIN]
- (9) REFUSED [SKIP TO NEXT SUBDOMAIN]

F3Q32\_INT There are many reasons people delay or do not get needed health care. Did you delay or did not get health care for yourself for any of the following reasons?

- (1) YES
- (2) NO
- (7) DON'T KNOW
- (9) REFUSED

F3Q32A You couldn't get through to the health care provider's office on the telephone.

F3Q32B You couldn't get an appointment soon enough.

F3Q32C The clinic or doctor's office was not open when you could get there.

F3Q32D Transportation was a problem.

F3Q32E You didn't have enough money to pay the health care provider.

F3Q32F The type of care you needed was not available in your area.

F3Q32G The health care provider did not have the skills you needed.

F3Q32H The type of care was not covered by your health plan.

F3Q32I You could not get approval from your health plan or doctor.

F3Q32J Once you get there, you have to wait too long to see the health care provider.

F3Q32K You have language, communication, or cultural problems with the health care provider.

F3Q32L Going to appointments conflicts with other responsibilities at home, school, or at work.

**Subdomain 4. Care coordination**

F3Q40 Does anyone help you arrange or coordinate your care among the different doctors or services that you use?

- (1) YES
- (2) NO
- (7) DON'T KNOW
- (9) REFUSED

F3Q41 During the past 12 months, have you felt that you could have used extra help arranging or coordinating your care among the different doctors or services?

- (1) YES
- (2) NO
- (7) DON'T KNOW
- (9) REFUSED

F3Q42 During the past 12 months, did you need a referral to see any doctors or receive any services?

- (1) YES
- (2) NO [SKIP TO NEXT SUBDOMAIN]
- (7) DON'T KNOW [SKIP TO NEXT SUBDOMAIN]
- (9) REFUSED [SKIP TO NEXT SUBDOMAIN]

F3Q43 Was getting referrals a big problem, a small problem, or not a problem?

- (1) Big problem
- (2) Small problem
- (3) Not a problem
- (7) DON'T KNOW
- (9) REFUSED

**Subdomain 5. Person-centered care**

IF F3Q23 = 2 (NO DOCTOR VISITS IN PAST YEAR), SKIP TO NEXT SUBDOMAIN.

F3Q51 During the past 12 months, how often did your doctors and other health care providers spend enough time with you? Would you say never, sometimes, usually, or always?

- (1) Never
- (2) Sometimes
- (3) Usually
- (4) Always
- (7) DON'T KNOW
- (9) REFUSED

F3Q52 During the past 12 months, how often did your doctors and other health care providers listen carefully to you? Would you say never, sometimes, usually, or always?

- (1) Never
- (2) Sometimes
- (3) Usually
- (4) Always
- (7) DON'T KNOW
- (9) REFUSED

F3Q53 How often are your doctors and other health care providers sensitive to your values and customs? Would you say never, sometimes, usually, or always?

- (1) Never
- (2) Sometimes
- (3) Usually
- (4) Always
- (7) DON'T KNOW
- (9) REFUSED

F3Q54 Information about your health or health care can include things such as the causes of any health problems, how to care for yourself now, and what changes to expect in the future. In the past 12 months, how often did you get the specific information you needed from your doctors and other health care providers? Would you say never, sometimes, usually, or always?

- (1) Never
- (2) Sometimes
- (3) Usually
- (4) Always
- (7) DON'T KNOW
- (9) REFUSED

F3Q55 During the past 12 months, how often did your doctors or other health care providers help you feel like a partner in your care? Would you say never, sometimes, usually, or always?

- (1) Never
- (2) Sometimes
- (3) Usually
- (4) Always
- (7) DON'T KNOW
- (9) REFUSED

F3Q56 During the past 12 months, how often did your doctors or other health care providers encourage you to take responsibility for your health care needs, such as taking medication, understanding your health, or following medical advice? Would you say never, sometimes, usually, or always?

- (1) Never
- (2) Sometimes
- (3) Usually
- (4) Always
- (7) DON'T KNOW
- (9) REFUSED

F3Q57 During the past 12 months, how often did your doctors or other health care providers talk directly to you and encourage you to ask questions? Would you say never, sometimes, usually, or always?

- (1) Never
- (2) Sometimes
- (3) Usually
- (4) Always
- (7) DON'T KNOW
- (9) REFUSED



**SECTION 3: TRANSITION SERVICES RELATED TO HEALTH**

- F4Q01 Have your doctors or other health care providers talked with you about how your health care needs might change as you got older?
- (1) YES
  - (2) NO [SKIP TO Q03]
  - (7) DON'T KNOW [SKIP TO Q03]
  - (9) REFUSED [SKIP TO Q03]
- F4Q02 Was a plan for addressing these changing needs developed with your doctors or other health care providers?
- (1) YES [SKIP TO Q04]
  - (2) NO [SKIP TO Q04]
  - (7) DON'T KNOW [SKIP TO Q04]
  - (9) REFUSED [SKIP TO Q04]
- F4Q03 Would a discussion about your health care needs have been helpful to you?
- (1) YES
  - (2) NO
  - (7) DON'T KNOW
  - (9) REFUSED
- F4Q04 Do any of your doctors or other health care providers treat only children, teenagers, or young adults?
- (1) YES
  - (2) NO [SKIP TO Q07]
  - (7) DON'T KNOW [SKIP TO Q07]
  - (9) REFUSED [SKIP TO Q07]
- F4Q05 Have they talked with you about eventually seeing doctors or other health care providers who treat adults?
- (1) YES [SKIP TO Q07]
  - (2) NO
  - (7) DON'T KNOW
  - (9) REFUSED

- F4Q06            Would a discussion about doctors who treat adults have been helpful to you?
- (1) YES  
(2) NO  
(7) DON'T KNOW  
(9) REFUSED
- F4Q07            Eligibility for health insurance often changes as children reach adulthood. Has anyone discussed with you how to obtain or keep some type of health insurance coverage?
- (1) YES            [SKIP TO Q09]  
(2) NO  
(7) DON'T KNOW  
(9) REFUSED
- F4Q08            Would a discussion about health insurance have been helpful to you?
- (1) YES  
(2) NO  
(7) DON'T KNOW  
(9) REFUSED
- F4Q09            Have your doctors or other health care providers helped you connect with other youth or adult mentors who could provide you with social, emotional, or career support?
- (1) YES  
(2) NO  
(7) DON'T KNOW  
(9) REFUSED

#### SECTION 4: COMMUNITY-BASED SERVICES

F5Q01 Most of the previous questions have been about medical services provided by your doctors. There are other types of services people may need or use because of their health. These services may be educational, vocational, or rehabilitation services, or community programs such as housing services, social services, or recreational services.

Thinking about your health needs and the health-related services that you need, have you had any difficulties trying to use any services during the past 12 months?

- (1) YES
- (2) NO [SKIP TO NEXT SUBDOMAIN]
- (7) DON'T KNOW [SKIP TO NEXT SUBDOMAIN]
- (9) REFUSED [SKIP TO NEXT SUBDOMAIN]

F5Q02 There are many reasons why people may have difficulty trying to use these services. Did you have difficulty trying to use these services for any of the following reasons?

- (1) YES
- (2) NO
- (7) DON'T KNOW
- (9) REFUSED

F5Q02\_A You could not get the information you needed.

F5Q02\_B There was too much paperwork required.

F5Q02\_C You didn't have enough money to pay for the services.

F5Q02\_D Transportation was a problem.

F5Q02\_E There were long waiting lists.

F5Q02\_F There were problems in communication between service providers.

F5Q02\_G You had language, communication, or cultural problems with the service providers.

F5Q02\_H You could not find service providers who had the skills you needed.

F5Q02\_I The types of services you needed were not available in your area.

F5Q02\_J The types of services you needed were available but you were not eligible.

F5Q02\_K The types of services you needed were available but you had used up all eligible benefits.

F5Q02\_L You didn't have the time to figure it all out.

## SECTION 5: HEALTH INSURANCE COVERAGE

### Subdomain 1. Current coverage and past year coverage

F6Q01\_INT The next questions are about health insurance.

F6Q01 Do you have any kind of health care coverage, including health insurance, prepaid plans such as HMOs, or government plans such as Medicaid?

- (1) YES [SKIP TO Q02]
- (2) NO [SKIP TO Q04]
- (7) DON'T KNOW [SKIP TO Q02]
- (9) REFUSED [SKIP TO Q02]

F6Q02 Are you insured by Medicaid, the State Children's Health Insurance Program (S-CHIP), or any other insurance program for people with low income or disabilities?

- (1) YES
- (2) NO
- (7) DON'T KNOW
- (9) REFUSED

IF Q01 IN (7, 9) AND Q02 IN (2, 7, 9), [SKIP TO Q04]  
ELSE, [SKIP TO Q03]

F6Q03 During the past 12 months, was there any time when you were not covered by ANY health insurance?

- (1) YES [SKIP TO NEXT SUBDOMAIN]
- (2) NO [SKIP TO NEXT SUBDOMAIN]
- (7) DON'T KNOW [SKIP TO NEXT SUBDOMAIN]
- (9) REFUSED [SKIP TO NEXT SUBDOMAIN]

F6Q04 During the past 12 months, have you had health care coverage?

- (1) YES [SKIP TO NEXT SUBDOMAIN]
- (2) NO [SKIP TO NEXT SUBDOMAIN]
- (7) DON'T KNOW [SKIP TO NEXT SUBDOMAIN]
- (9) REFUSED [SKIP TO NEXT SUBDOMAIN]

## Subdomain 2. Adequacy of health insurance

F6Q20 The next questions are about your health insurance or health care plans. Does your health insurance offer benefits or cover services that meet your needs? Would you say:

- (1) Never
- (2) Sometimes
- (3) Usually
- (4) Always
- (7) DON'T KNOW
- (9) REFUSED

F6Q22 Does your health insurance allow you to see the health care providers you need? Would you say:

- (1) Never
- (2) Sometimes
- (3) Usually
- (4) Always
- (7) DON'T KNOW
- (9) REFUSED

F6Q21A Not including health insurance premiums or costs that are covered by insurance, do you pay any money for your health care? Include out-of-pocket payments for all types of health-related needs such as co-payments, dental or vision care, medications, and any kind of therapy.

- (1) YES [SKIP TO Q21B]
- (2) NO [SKIP TO NEXT SUBDOMAIN]
- (7) DON'T KNOW [SKIP TO NEXT SUBDOMAIN]
- (9) REFUSED [SKIP TO NEXT SUBDOMAIN]

F6Q21B How often are these costs reasonable? Would you say:

- (1) Never
- (2) Sometimes
- (3) Usually
- (4) Always
- (7) DON'T KNOW
- (9) REFUSED

## SECTION 6. TRANSITION SERVICES RELATED TO SCHOOL

- F7\_INTRO Next, I would like to ask you some questions about your education.
- F7Q01 During the past 6 years, did you receive any vocational or career training to help you prepare for a job?
- (1) YES
  - (2) NO
  - (7) DON'T KNOW
  - (9) REFUSED
- F7Q02 What is the highest grade or year of school you have completed?
- (01) 8th GRADE OR LESS
  - (02) 9th-12th GRADE NO DIPLOMA
  - (03) HIGH SCHOOL GRADUATE OR GED COMPLETED
  - (04) COMPLETED A VOCATIONAL, TRADE, OR BUSINESS SCHOOL PROGRAM
  - (05) SOME COLLEGE CREDIT BUT NO DEGREE
  - (06) ASSOCIATE DEGREE (AA, AS)
  - (07) BACHELOR'S DEGREE (BA, BS, AB)
  - (08) MASTER'S DEGREE (MA, MS, MSW, MBA)
  - (09) DOCTORATE (PhD, EdD) or PROFESSIONAL DEGREE (MD, DDS, DVM, JD)
  - (77) DON'T KNOW
  - (99) REFUSED
- F7Q03 Did you ever meet with adults at school or somewhere else to set goals for what you would do after high school and make a plan for how to achieve them? Sometimes this is called a transition plan.
- (1) YES
  - (2) NO [SKIP TO NEXT SUBDOMAIN]
  - (7) DON'T KNOW [SKIP TO NEXT SUBDOMAIN]
  - (9) REFUSED [SKIP TO NEXT SUBDOMAIN]
- F7Q04 Did you participate in the development of that plan?
- (1) YES
  - (2) NO
  - (7) DON'T KNOW
  - (9) REFUSED

## SECTION 7. SELF-DETERMINATION

*Note: These items are adapted from the The Arc's Self-Determination Scale.*

F8\_INTRO      The next questions are statements about activities that you may do. For each statement, please indicate how often you do each activity: never, rarely, sometimes, usually, or always.

- (1) Never
- (2) Rarely
- (3) Sometimes
- (4) Usually
- (5) Always
- (7) DON'T KNOW
- (9) REFUSED

F8Q01\_A      I keep my appointments and meetings.

F8Q01\_B      I choose how to spend my personal money.

F8Q01\_C      I plan weekend activities that I like to do.

F8Q02      How often is the following statement true for you? "I am able to make choices that are important to me." Would you say that is never true, rarely true, sometimes true, usually true, or always true?

- (1) Never
- (2) Rarely
- (3) Sometimes
- (4) Usually
- (5) Always
- (7) DON'T KNOW
- (9) REFUSED

F8Q03      How often is the following statement true for you? "I am able to make friends in new situations." Would you say that is never true, rarely true, sometimes true, usually true, or always true?

- (1) Never
- (2) Rarely
- (3) Sometimes
- (4) Usually
- (5) Always
- (7) DON'T KNOW
- (9) REFUSED

## SECTION 8. SATISFACTION AND SUPPORT

- F9Q01 In general, how satisfied are you with your life? Would you say very satisfied, satisfied, dissatisfied, or very dissatisfied?
- (1) Very satisfied
  - (2) Satisfied
  - (3) Dissatisfied
  - (4) Very dissatisfied
  - (7) DON'T KNOW
  - (9) REFUSED
- F9Q02 How often do you get the social and emotional support you need from your family or friends? Would you say never, rarely, sometimes, usually, or always?
- (1) Never
  - (2) Rarely
  - (3) Sometimes
  - (4) Usually
  - (5) Always
  - (7) DON'T KNOW
  - (9) REFUSED
- F9Q03 If the option was available, would you like to connect with other youth or adult mentors who could provide you with social, emotional, or career support?
- (1) YES
  - (2) NO
  - (7) DON'T KNOW
  - (9) REFUSED
- F9Q04 Now, thinking about your health needs and all the medical and health-related services you receive, how satisfied or dissatisfied are you with those services? Would you say very satisfied, somewhat satisfied, somewhat dissatisfied or very dissatisfied?
- (1) Very satisfied
  - (2) Somewhat satisfied
  - (3) Somewhat dissatisfied
  - (4) Very dissatisfied
  - (7) DON'T KNOW
  - (9) REFUSED



## SECTION 9. DEMOGRAPHICS

F10\_INTRO Now I have a few more general questions about you and your household.

### Subdomain 1. Marital status and living arrangements

F10Q11 Are you currently married, separated, divorced, widowed, or never married?

- (1) Married
- (2) Separated
- (3) Divorced
- (4) Widowed
- (5) Never married
- (7) DON'T KNOW
- (9) REFUSED

F10Q12 Are you currently living with a spouse or partner?

- (1) YES
- (2) NO
- (7) DON'T KNOW
- (9) REFUSED

F10Q13 Are you currently living with your parent(s)?

- (1) YES
- (2) NO
- (7) DON'T KNOW
- (9) REFUSED

IF F10Q12 = 1 OR F10Q13 = 1, SKIP TO F10Q15.

F10Q14 Do you live alone?

- (1) YES
- (2) NO
- (7) DON'T KNOW
- (9) REFUSED

F10Q15 Are you happy with your current living arrangement, or would you like to change where you live or who you live with?

- (1) HAPPY WITH CURRENT ARRANGEMENT
- (2) WOULD LIKE TO CHANGE
- (7) DON'T KNOW
- (9) REFUSED

### Subdomain 2. Personal earnings and program participation

F10Q21 The next question is about your total income in the past 12 months, including income from all sources such as wages, salaries, Social Security, help from relatives and so forth. Can you tell me that amount before taxes?

\_\_\_\_\_ Dollars  
(777777) DON'T KNOW  
(999999) REFUSED

F10Q22 Compared to other people your age, do you think you have more ability, about the same ability, or less ability to pay for the things you need?

- (1) More ability
- (2) About the same ability
- (3) Less ability
- (7) DON'T KNOW
- (9) REFUSED

F10Q23 At any time during the past 12 months, even for one month, did you receive any cash assistance from a state or county welfare program, such as [state TANF name] or General Assistance?

- (1) YES
- (2) NO
- (7) DON'T KNOW
- (9) REFUSED

F10Q24 During the past 12 months, did you receive Food Stamps?

- (1) YES
- (2) NO
- (7) DON'T KNOW
- (9) REFUSED

F10Q25 During the past 12 months, did you receive Supplemental Security Income (also called SSI)?

- (1) YES
- (2) NO
- (7) DON'T KNOW
- (9) REFUSED

2007 Survey of Adult Transition and Health (SATH)

CATI QUESTIONNAIRE EXIT

ALL PATHS LEAD TO THIS EXIT PATH WHEN  
CONFDOB\_X or NEWDOB\_X NOT EQUAL NULL

CLOSE

Those are all the questions I have. Thank you for participating in the 2007 Survey of Adult Transition and Health (SATH). In appreciation of your time, we would like to send you 20 dollars.

(1) YES [GO TO AC\_NAME INTRO]  
(2) NO [GO TO AC\_REFUSED]

AC\_NAME INTRO

Can you please give me your name and mailing address?

AC\_NAME \_\_\_\_\_  
AC\_STREET \_\_\_\_\_  
AC\_CITY \_\_\_\_\_  
AC\_STATE \_\_\_\_\_  
AC\_ZIP \_\_\_\_\_

[GO TO CELL\_PAY]

CELL\_PAY

Did we conduct this survey on your cell phone?

(1) YES [GO TO CELL\_SCRIPT]  
(2) NO [GO TO AC\_REFUSED]

CELL\_SCRIPT

You will also receive an additional \$5 to defer your costs for doing the interview on your cell phone. [GO TO AC\_REFUSED]

AC\_REFUSED [BLANK]

(1) Address correct and confirmed [GO TO AC2]  
(99) Refused to give/confirm address [GO TO AC2]

AC2

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 would like more information about the Survey of Adult Health and Transition, please call the study's toll-free number, 1-866-900-9601. If you have questions about your rights as a study participant, you may call 1-800-223-8118, toll-free, and leave a message asking to speak to the Chairperson of the Ethics Review Board.

**2007 Survey of Adult Transition and Health (SATH)**

**WEB QUESTIONNAIRE EXIT**

ALL PATHS LEAD TO THIS EXIT PATH WHEN  
CONFDOB\_X or NEWDOB\_X NOT EQUAL NULL

Those are all the questions. Thank you for participating in the 2007 Survey of Adult Transition and Health (SATH). In appreciation of your time, we would like to send you 20 dollars.

Please enter your name and mailing address:

AC\_NAME \_\_\_\_\_

AC\_STREET \_\_\_\_\_

AC\_CITY \_\_\_\_\_

AC\_STATE \_\_\_\_\_

AC\_ZIP \_\_\_\_\_

AC2

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 would like more information about the 2007 Survey of Adult Transition and Health (SATH), please call the study's toll-free number, 1-866-900-9601. If you have questions about your rights as a study participant, you may call 1-800-223-8118, toll-free, and leave a message asking to speak to the Chairperson of the Ethics Review Board.

**2007 Survey of Adult Transition and Health (SATH)**

**CALL BACK SCRIPTS & ANSWERING MACHINE SCRIPTS**

**INTRO\_LEAD\_Y**

(Variation of INTRO\_1 should appear 1<sup>st</sup> when calling lead HH)

DESCRIPTION: CALLING LEAD HH TO GATHER SATH R's CONTACT INFORMATION/SPEAK WITH SATH R

In (INTDATE-YYYY), we conducted a nationwide telephone study on children's health about a child who was between the ages of 14-18 years of age at the time. This survey was conducted with the child's [FILL RELATION] who recently gave us your phone number in order to contact their [FILL son/daughter]. This child would now be approximately [FILL AGE] years old and the Centers for Disease Control and Prevention is now interested in speaking to [FILL HIM/HER].

Can you tell me how to find this [FILL AGE]-year-old?

- |   |                                 |
|---|---------------------------------|
| (1) YES, WILL GIVE SATH R CONTACT INFORMATION                                       | [GO TO YOUTH_CONT]              |
| (2) YES, SATH R IS ON/ COMES TO THE PHONE   | [GO TO NEW_RESP_SC]             |
| (3) R2001 COMES TO THE PHONE  | [GO TO INTRO_R2001]             |
| (4) CONFIRM BUSINESS  | [GO TO SALZ]                    |
| (5) R WILL CALL 800 LINE/VERIFY WEBSITE   | [GO TO M1_NAME_WEB_ADD]         |
| (6) ANSWERING MACHINE   | [GO TO MSG_REACH]               |
| (7) R ASKS FOR LETTER-MAILED  | [GO TO UNIVERSAL_EXIT-M1_NAME]  |
| (8) R ASKS FOR LETTER-EMAILED   | [GO TO UNIVERSAL_EXIT-M1_EMAIL] |
| (9) SUPERVISOR REVIEW<br>(RAISE YOUR HAND TO GET PERMISSION BEFORE USING THIS CODE) | [GO TO CALL NOTES BOX]          |
| (99) REFUSED  | [GO TO TERM_BRIEF]              |

**INTRO\_LEAD\_01R**

(Variation of INTRO\_1 should appear 1<sup>st</sup> when calling lead HH)

DESCRIPTION: CALLING LEAD HH TO GATHER R2001's CONTACT INFORMATION/SPEAK WITH R2001

In (INTDATE-YYYY), we conducted a nationwide telephone study on children's health about a child who was between the ages of 14-18 years of age at the time. The Centers for Disease Control and Prevention is now interested in speaking to the [FILL RELATION] of this child who would now be a [FILL AGE]-year old adult. A person from the household that participated in the 2001 interview gave us your phone number so that we may contact the parent who completed the 2001 survey.

Can you tell me how to find this [FILL AGE]-year old's [FILL RELATION]?

- |   |                                     |
|---|-------------------------------------|
| (1) YES, WILL GIVE R2001's CONTACT INFORMATION                                      | [GO TO R2001_CONT]                  |
| (2) YES, R2001 IS ON/ COMES TO THE PHONE  | [GO TO INTRO_R2001]                 |
| (3) CONFIRM BUSINESS  | [GO TO SALZ]                        |
| (4) 2001 LEAD WILL CALL 800 LINE/<br>VERIFY WEBSITE                                 | [GO TO M1_NAME_WEB_ADD]             |
| (5) ANSWERING MACHINE   | [GO TO MSG_REACH]                   |
| (6) 2001 LEAD ASKS FOR LETTER-MAILED  | [GO TO UNIVERSAL_EXIT-M1_NAME]      |
| (7) 2001 LEAD ASKS FOR LETTER-EMAILED   | [GO TO UNIVERSAL_EXIT-M1_EMAIL]     |
| (8) SUPERVISOR REVIEW<br>(RAISE YOUR HAND TO GET PERMISSION BEFORE USING THIS CODE) | [GO TO CALL NOTES BOX]              |
| (9) NEW PERSON COMES TO PHONE   | [GO TO INTRO_1 then INTRO_LEAD_01R] |
| (99) REFUSED  | [GO TO TERM_BRIEF]                  |

INTRO\_APPT\_PNDG\_SCRD

DESCRIPTION: APPT MADE WITH 2001 HOUSEHOLD MEMBER (HHM) BUT R2001 OR 2007 R HAS NOT BEEN IDENTIFIED (REACH\_CB)

IF NAME GIVEN: Hello. May I please speak to [FILL NAME]?

IF NAME NOT GIVEN INTRO BEGINS HERE:

Hello, my name is \_\_\_\_\_. I'm calling on behalf of the Centers for Disease Control and Prevention. We recently spoke with [FILL "you" if name given/ "someone in your household" if name not given] about an important survey on the healthcare of young adults. I'm calling to complete the interview now.

- |   |                              |
|---|------------------------------|
| (1) CONTINUE WITH INTERVIEW   | [GO TO S2_C]                 |
| (2) CONFIRM BUSINESS  | [GO TO SALZ_BUS_Y]           |
| (3) LANGUAGE BARRIER<br>(ANY LANGUAGE OTHER THAN ENGLISH)                           | [GO TO TERM_BRIEF]           |
| (4) NO PERSON AT HOME WHO IS OVER 17  | [GO TO S2_B]                 |
| (5) ANSWERING MACHINE   | [GO TO MSG_PENDING SCREENED] |
| (6) R WILL CALL 800 LINE/VERIFY WEBSITE   | [GO TO UE-M1_NAME_WEB]       |
| (7) R ASKS FOR LETTER-MAILED  | [GO TO UE-M1_NAME_WEB]       |
| (8) R ASKS FOR LETTER-EMAILED   | [GO TO UE-M1_NAME_WEB]       |
| (9) SUPERVISOR REVIEW<br>(RAISE YOUR HAND TO GET PERMISSION BEFORE USING THIS CODE) | [GO TO CALL NOTES BOX]       |

[GO TO TERM\_BRIEF]

INTRO\_  
APPT\_SCRND\_Y

DESCRIPTION: APPT TO RESUME A BREAK-OFF WITH 2007 R OR PROXY

\*\* [FILL NAME] IS BASED ON YOUTH\_NAME\_A OR PROX\_NAME\_A \*\*

IF NAME GIVEN: Hello. May I please speak to [FILL NAME]?

Hello, my name is \_\_\_\_\_. I'm calling on behalf of the Centers for Disease Control and Prevention. We started an interview with [FILL "you" (if name given)/ "a [FILL AGE]-year-old in your household" or "a proxy for a [FILL AGE]-year-old "the (if name not given)] about the healthcare of young adults. I'm calling back now to finish the interview. Are you the [FILL AGE]-year-old/ proxy for a [FILL AGE]-year-old that we started the interview with?

- |   |                              |
|---|------------------------------|
| (1) CONTINUE WITH INTERVIEW   | [GO TO S2_C]                 |
| (2) CONFIRM BUSINESS  | [GO TO SALZ_BUS_Y]           |
| (3) LANGUAGE BARRIER<br>(ANY LANGUAGE OTHER THAN ENGLISH)                           | [GO TO TERM_BRIEF]           |
| (4) NO PERSON AT HOME WHO IS OVER 17  | [GO TO S2_B]                 |
| (5) ANSWERING MACHINE   | [GO TO MSG_PENDING SCREENED] |
| (6) R WILL CALL 800 LINE/VERIFY WEBSITE   | [GO TO UE-M1_NAME_WEB]       |
| (7) R ASKS FOR LETTER-MAILED  | [GO TO UE-M1_NAME_WEB]       |
| (8) R ASKS FOR LETTER-EMAILED   | [GO TO UE-M1_NAME_WEB]       |
| (9) SUPERVISOR REVIEW<br>(RAISE YOUR HAND TO GET PERMISSION BEFORE USING THIS CODE) | [GO TO CALL NOTES BOX]       |

[GO TO TERM\_BRIEF]

TRAINING POINT: CONFIRM THAT YOU ARE SPEAKING WITH THE SAME PERSON WHO STARTED THE INTERVIEW.

INTRO\_  
APPT\_  
01R

DESCRIPTION: APPT TO RESUME A BREAK-OFF WITH R2001

\*\* [FILL NAME] IS BASED ON R2001\_NAME\_A \*\*

IF NAME GIVEN: Hello. May I please speak to [FILL NAME]?

IF NAME NOT GIVEN INTRO BEGINS HERE:

Hello, my name is \_\_\_\_\_. I'm calling on behalf of the Centers for Disease Control and Prevention. We started an interview with you or someone in your household about the healthcare of young adults. I'm calling back now to finish the interview.

[If name not given "May I please speak with the person we spoke with [FILL APPT SET DATE]]?

- |   |                              |
|---|------------------------------|
| (1) CONTINUE WITH INTERVIEW   | [GO TO S2_C]                 |
| (2) CONFIRM BUSINESS  | [GO TO SALZ_BUS_Y]           |
| (3) LANGUAGE BARRIER<br>(ANY LANGUAGE OTHER THAN ENGLISH)                           | [GO TO TERM_BRIEF]           |
| (4) NO PERSON AT HOME WHO IS OVER 17  | [GO TO S2_B]                 |
| (5) ANSWERING MACHINE   | [GO TO MSG_PENDING_SCREENED] |
| (6) R WILL CALL 800 LINE/VERIFY WEBSITE   | [GO TO UE-M1_NAME_WEB]       |
| (7) R ASKS FOR LETTER-MAILED  | [GO TO UE-M1_NAME_WEB]       |
| (8) R ASKS FOR LETTER-EMAILED   | [GO TO UE-M1_NAME_WEB]       |
| (9) SUPERVISOR REVIEW<br>(RAISE YOUR HAND TO GET PERMISSION BEFORE USING THIS CODE) | [GO TO CALL NOTES BOX]       |

[GO TO TERM\_BRIEF]

**TRAINING POINT: CONFIRM THAT YOU ARE SPEAKING WITH THE SAME PERSON WHO STARTED THE INTERVIEW.**

Intro\_1\_HUDI\_PENDGSCRND

DESCRIPTION: INTRO FOR 2001 HHM THAT HUNG UP DURING INTRO (HUDI)

Hello, my name is \_\_\_\_\_. I'm calling on behalf of the Centers for Disease Control and Prevention. We're conducting a nationwide study about the healthcare of young adults.

- |                            |                                   |
|----------------------------|-----------------------------------|
| (1)CONTINUE WITH INTERVIEW | [GO TO S1]                        |
| (2)CONFIRM BUSINESS        | [GO TO PH_CONF]                   |
| (3)ANSWERING MACHINE       | [GO TO GO TO MSG_PNDNG_<br>SCRND] |

Intro\_1\_HUDI\_Y

DESCRIPTION: INTRO FOR YOUTH HOUSHOLDS THAT HUNG UP DURING INTRO (HUDI)

Hello, my name is \_\_\_\_\_. I'm calling on behalf of the Centers for Disease Control and Prevention. We're conducting a nationwide study about the healthcare of young adults.

- |                            |                             |
|----------------------------|-----------------------------|
| (1)CONTINUE WITH INTERVIEW | [GO TO S1]                  |
| (2)ANSWERING MACHINE       | [GO TO MSG_PNDNG_<br>SCRND] |

S1 Am I speaking to someone who lives in this household who is over 17 years old?

(1) YES, I AM THAT PERSON [GO TO BREAK OFF POINT (INTRO)]  
(2) NO [GO TO S1\_SCRIPT]  
(3) THIS IS A BUSINESS [GO TO SALZ]  
(4) NEW PERSON COMES TO PHONE [GO BACK TO INTRO\_APPT\_PNDG\_SCRD ]  
(5) DOES NOT LIVE IN HOUSEHOLD [GO TO TERM\_BRIEF]  
(7) NO PERSON AT HOME WHO IS OVER 17 [GO TO S2\_B]  
REFUSED [GO TO TERM\_BRIEF]

S1\_SCRIPT Is there someone who lives in this household who is over 17 that I may speak with?

(1)YES, NEW PERSON COMES TO PHONE [GO TO INTRO\_APPT\_PNDG\_SCRD]  
(2)NO [GO TO S2B]

SALZ\_BUS\_Y Hello. May I please speak to [FILL NAME]?

(1)YES, YOUTH COMES TO PHONE [GO TO INTRO\_APPT\_SCRND\_Y]  
(2)NO, YOUTH NOT AVAILABLE [GO TO SALZ\_BUS\_Y\_APPT]

SALZ\_BUS\_Y\_APPT

What would be a good time for us to call (him/her) back?

CREATE AN APPOINTMENT

[GO TO TERM\_BRIEF WITHOUT TEXT IN PARENTHESES]

TERM\_BRIEF Thank you for your time (on behalf of the Centers for Disease Control).

S2\_B Does anyone live in your household who is over 17 years old?

(1)Yes [GO TO [BLANK] script shown below]  
(2)No [GO TO PH\_CONF]

[BLANK] Thank you, we'll try back another time.

S2\_C Just to confirm, am I speaking with the [FILL RELATION] of the [FILL AGE]/ [FILL AGE]-year old that we spoke with on [FILL APPT SET DATE]?

(1)Yes [GO TO REMIND 1]  
(2)No [GO TO CB1 TO SET AN APPOINTMENT]

REMIND1 I want to remind you that we will be asking questions about [you/ IF PROXY, THEN “the [FILL AGE] year-old”] or the rest of this interview.

**[CONTINUE WITH INTERVIEW AT POINT OF BREAKOFF]**



## ANSWERING MACHINE SCRIPTS

### Answering Machine:

MSG\_PENDING\_  
SCREENED

**(PLEASE READ SLOWLY AND CLEARLY.)**

Hello. The Centers for Disease Control and Prevention is conducting a survey about the healthcare of young adults. Would you please call us, toll-free, at 1-866-900-9601 to determine survey eligibility? For most people, the survey will be very brief and we would be glad to answer any questions you have. The toll-free number again is 1-866-900-9601. Thank you.

MSG\_REACH

DESCRIPTION: AM MESSAGE FOR RESPONDENT THAT MAY KNOW 2001 OR 2007'S CONTACT INFORMATION (NO PRIOR APPOINTMENT MADE)

**(PLEASE READ SLOWLY AND CLEARLY.)**

Hello. The Centers for Disease Control and Prevention is conducting a survey about the healthcare of young adults. Would you please call us, toll-free, at (FILL "1-866-900-9601" FOR REGULAR INTERVIEWS, ELSE FILL "1-866-900-9601" FOR RELAY INTERVIEWS)? We are available days, evenings, and weekends. This will be very brief and we would be glad to answer any questions you have. The toll-free number again is (FILL "1-866-900-9601" FOR REGULAR INTERVIEWS, ELSE FILL "1-866-900-9601" FOR RELAY INTERVIEWS). Thank you.

### Answering machine message for appointments:

MSG\_Y\_APPT

**(PLEASE READ SLOWLY AND CLEARLY.)**

Hello. I am calling on behalf of the Centers for Disease Control and Prevention regarding a nationwide study about the healthcare of young adults. When we spoke previously about this important study, you requested that we call you back at this time. I'm sorry that we've missed you. We'll try to contact you again soon but please feel free to return our call anytime at 1-866-900-9601. Also, if you have any questions, that number again is 1-866-900-9601. Thank you.

MSG\_APPT\_  
REACH

DESCRIPTION: MESSAGE FOR RESPONDENT THAT KNOWS 2001 OR 2007 RESPONDENT'S CONTACT INFORMATION (PRIOR APPOINTMENT SET)

**(PLEASE READ SLOWLY AND CLEARLY.)**

Hello. I am calling on behalf of the Centers for Disease Control and Prevention regarding a nationwide study about the healthcare of young adults. When we spoke previously about this important study, you requested that we call you back at this time. I'm sorry that we've missed you. We'll try to contact you again soon but please feel free to return our call anytime at (FILL "1-866-900-9601" FOR REGULAR INTERVIEWS ELSE FILL "1-866-900-9601" FOR RELAY INTERVIEWS).

## UNIVERSAL EXIT (UE)

### NO\_CONTACT

- |  |   |
|--|---|
| (1) CONTINUE   | [GO TO INTRO_1]                           |
| (2) ANSWERING MACHINE  | [GO TO MSG (OR SASERVIF NO MESSAGE LEFT)] |
| (3) OTHER TECHNOLOGICAL CIRCUMSTANCES                        | [GO TO CALL NOTES BOX]                    |
| (4) DISCONNECTED/NUMBER NOT ASSIGNED CALL CAN'T BE COMPLETED | [GO TO CALL NOTES BOX]                    |
| (5) FAX/MODEM/DATA LINE                                      | [TERMINATE]]                              |
| (6) PRIVACY MANAGER/NO INCOMING CALLS/                       |   |
| (7) CALL IS BLOCKED OR NOT ACCEPTED                          | [GO TO UNIVERSAL EXIT-P1]                 |
| (8) FAST BUSY  | [TERMINATE]                               |
| (9) NUMBER CHANGED   | [TERMINATE]                               |
| (10) ENGAGED/BUSY/ALL CIRCUITS ARE BUSY                      | [TERMINATE]                               |
| (11) NO REPLY/RING NO ANSWER                                 | [TERMINATE]                               |
| (12) SUPERVISOR REVIEW                                       | [GO TO CALL NOTES BOX]                    |
| (13) RESPONDENT CALLED INTO 800 LINE                         | [GO TO INTRO_1]                           |

### M1\_NAME\_

#### WEB

Do you have access to the internet?

- |         |  |
|---------|--|
| (1) Yes | [GO TO UNIVERSAL EXIT-M1_NAME_WEB_ADD] |
| (2) No  | [GO TO UNIVERSAL EXIT- M1_NAME]        |

### M1\_NAME\_

#### WEB\_ADD

I would like to offer you the project's web address. It provides a wealth of additional project information.

#### FILL WEB ADDRESS

M1\_EMAIL In order to email a letter to you, I will need to collect your email address. The letter will contain a toll-free number that you may call to complete the interview at your convenience.

\_\_\_\_\_@\_\_\_\_\_.\_\_\_\_\_

- |                                |                           |
|--------------------------------|---------------------------|
| (1) Continue                   | [GO TO UNIVERSAL EXIT-M2] |
| (2)Refused to give information | [GO TO UNIVERSAL EXIT-M3] |

### M2

You will be receiving the letter in the next week [FILL or two (if mailed)]. It will contain a toll free number that you may call at any time to complete the interview.

### M3

Thank you very much on behalf of the Centers for Disease Control and Prevention.

M1_NAME	In order to send you a letter, I will need to collect your name and mailing address. The letter will contain a toll-free number that you may call to complete the interview at your convenience. (Read if necessary: If you feel uncomfortable giving me your name, I can send the letter to "Resident".)
	(1) Continue [GO TO UNIVERSAL EXIT-M2]
	(2) Refused to give information [GO TO UNIVERSAL EXIT-M3]
M2	You will be receiving the letter in the next week or two. It will contain a toll free number that you may call at any time to complete the interview. Thank you very much on behalf of the Centers for Disease Control and Prevention.
M3	Thank you very much on behalf of the Centers for Disease Control and Prevention.
T1	Did the respondent agree to a call back or say something to indicate he/she was too busy to participate? ( Or do you need to code this case as a callback?)
	(1) Yes [GO TO UNIVERSAL EXIT-CB1]
	(2) No [GO TO UNIVERSAL EXIT-T2]
	(3) R requested letter-emailed [GO TO UNIVERSAL EXIT-M1_EMAIL]
	(4) R requested letter-mailed [GO TO UNIVERSAL EXIT-M1_NAME]
	(5) R will call 800 Line/Verify website [GO TO UNIVERSAL EXIT- VERIFY_INFO]
	(6) Take Me Off Your List [GO TO CALL NOTES BOX]
	(7) Out of Scope [GO TO CALL NOTES BOX]
	(8) R not over 17/R does not live in HH [GO TO CALL NOTES BOX]
	(9) Return to INTRO [GO TO INTRO IF T1 APPEARS DIRECTLY AFTER INTRO]
T2	Did the respondent say anything other than hello before he/she hung up?
	(1) Yes [GO TO UNIVERSALEXIT-T3]
	(2) No [TERMINATE]
T4	Did the respondent say this number was for a nationally recognized business, an academic, health, or government institution, or a home business that is not used for personal calls?
	(1) Yes-Business [TERMINATE]
	(2)Yes-Dorm/Prison/Hostel [TERMINATE]
	(3)No [GO TO UNIVERSAL EXIT-T5]
T5	Did the respondent say something to indicate that he/she refused to participate? ( Or did they just hang up?)
	(1) Yes [GO TO UNIVERSAL EXIT-R1]
	(2)No [GO TO UNIVERSAL EXIT-T6]

- T6 CODE AS GENERAL CALL BACK OR SUPERVISOR REVIEW
- (1) GENERAL CALL BACK [GO TO CALL NOTES BOX& TERMINATE]
  - (2) SUPERVISOR REVIEW [GO TO CALL NOTES BOX & TERMINATE]
- CB1 Is there ...
- (1) A specific time to call back [GO TO APPT SCREEN]
  - (2) A range of time to call back [GO TO APPT SCREEN]
  - (3) Someone else gave a  
time to call back [GO TO APPT SCREEN]
  - (4) No specific time to call back,  
said they were too busy [TERMINATE]
- VERIFY\_  
INFO REFER TO FAQ/JOB AID TO ANSWER RESPONDENT QUESTIONS
- (1) [TERMINATE] the Interview  
(Hang up) [GO TO CALL NOTES BOX]
  - (2)Continue Interview [GO TO INTRO\_1]
- R1 Was respondent male or female?
- (1) Male
  - (2)Female
  - (3)Could not be determined
- R2 What was the reason for refusing? (Multiple responses possible)
- (1) Too busy/Doing something else right now
  - (2) Interview will take too long
  - (3) Not interested
  - (4) No solicitation wanted/Don't need anything/  
Don't want to buy anything
  - (5) Requested not to be called back
  - (6) Concerned about confidentiality
  - (7) Won't give information over the phone
  - (8) Negative about Government
  - (9) Negative about surveys
  - (10) On National Do Not Call List
  - (11) No reason given
  - (12) None of the above

R3 What questions did the respondent ask? (multiple responses possible)

- (1) The study purpose
- (2) NORC
- (3) Who is sponsoring the study (NCHS, DHHS, CDC, NIP)
- (4) Source of name and address on letter
- (5) Questioned legitimacy of study
- (6) The use of the data
- (7) The confidentiality of the data
- (8) Access to study results.
- (9) How did you get my phone number?
- (10) Where are you calling from?
- (11) No questions
- (12) None of the above

R4 Did the respondent threaten legal or Governmental action or use hostile words or a hostile tone? These are refusals that are so strong that we don't want to call them back.

- |         |                        |
|---------|------------------------|
| (1) Yes | [GO TO CALL NOTES BOX] |
| (2) No  | [GO TO CALL NOTES BOX] |

P1 [BLANK]

IF A PRIVACY MANAGER ASKS YOU TO STATE YOUR NAME, SAY "On behalf of the Centers for Disease Control and Prevention."  
IF A PRIVACY MANAGER ASKS YOU TO ENTER THE NUMBER YOU ARE CALLING FROM, ENTER THE NIS TOLL FREE NUMBER (866-900-9601).

- |                                |                 |
|--------------------------------|-----------------|
| (1) Continue Interview         | [GO TO INTRO_1] |
| (2) Answering Machine          | [GO TO MSG_Y]   |
| (3) Ring no answer             | [GO TO SASERV]  |
| (4) Refused/ Number is invalid | [GO TO SASERV]  |
| (5) Take Me Off Your List      | [TERMINATE]     |