

**New Immigrant Survey
Child Proxy Codebook¹
Section D – Health**

R00001.00 [PU_ID] Survey Year: 2003

SAMPLING UNIT IDENTIFICATION CODE - ORIGINAL SAMPLE

Sampling Unit Identification Code

810 000310 TO 938510: Respondent Case Number

810

Refusal(-1)	0				
Don't Know(-2)	0				
TOTAL =====>	810	VALID SKIP(-4)	0	NON-INTERVIEW(-5)	0

Min: 000310 Max: 938510 Mean: 494926.54

Lead In: None.

Default Next Question: R00002.00

R03377.00 [D1] Survey Year: 2003

HEALTH - R SELF-RATING

{CP, IM, SP - Next I have some questions about your health. Would} {OS - Would}
you say your health is excellent, very good, good, fair, or poor?

347	1 EXCELLENT
269	2 VERY GOOD
145	3 GOOD
38	4 FAIR
9	5 POOR

808

Refusal(-1)	2				
Don't Know(-2)	0				
TOTAL =====>	810	VALID SKIP(-4)	0	NON-INTERVIEW(-5)	0

Lead In: R03376.00[Default]

Default Next Question: R03378.00

R03378.00 [D2] Survey Year: 2003

¹ Due to the requirements of the program used to create the codebook, some variables follow a different naming convention in the codebook and data files. Variables in the questionnaire and data files in the form varname_x, where x=1, 2, 3, etc., have the form varname.0x where x=1,2,3, etc. in the codebook. Similarly, variables in the form varname_xmo and varname_xnu in the data files have the form varnamemo.0x and varnamenu.0x, respectively, in the codebook.

Descriptive statistics were automatically generated for those variables with amounts. Several questions collect information about amounts in different units, periods of time, currencies, etc. Descriptive statistics for these variables won't provide a good description of the data and further calculations will be needed.

COMPARISON OF R OVERALL HEALTH CONDITION WITH A YEAR AGO

Compared with your health a year ago, would you say that your health is better now, about the same, or worse?

117 1 BETTER
634 2 ABOUT SAME
57 3 WORSE

808

Refusal(-1) 2
Don't Know(-2) 0
TOTAL =====> 810 VALID SKIP(-4) 0 NON-INTERVIEW(-5) 0

Lead In: R03377.00[Default]
Default Next Question: R03379.00

R03379.00 [D3] Survey Year: 2003

COMPARISON OF R OVERALL HEALTH CONDITION BEFORE COMING TO U.S.

Compared with your health right before you most recently came to the United States to live, would you say that your health is better now, about the same, or worse?

70 1 BETTER
246 2 ABOUT SAME
65 3 WORSE

381

Refusal(-1) 2
Don't Know(-2) 8
TOTAL =====> 391 VALID SKIP(-4) 419 NON-INTERVIEW(-5) 0

Lead In: R03378.00[Default]
Default Next Question: R03380.00

R03380.00 [D4] Survey Year: 2003

HEALTH - DOCTOR EVER TOLD R IF HAD HIGH BLOOD PRESSURE/HYPERTENSION?

Has a doctor ever told you that you have high blood pressure or hypertension?

INTERVIEWER: IT MUST BE A DIAGNOSED CONDITION

72 1 Yes
736 2 No

808

Refusal(-1) 2
Don't Know(-2) 0
TOTAL =====> 810 VALID SKIP(-4) 0 NON-INTERVIEW(-5) 0

Lead In: R03379.00[Default]
Default Next Question: R03381.00

R03381.00 [D5] Survey Year: 2003

HEALTH - HOW LONG HAS R HAD HIGH BLOOD PRESSURE - LENGTH

How long have you had this condition?

INTERVIEWER: HOW LONG SINCE IT WAS DIAGNOSED

1	0
32	1 TO 4
18	5 TO 8
11	9 TO 14
5	15 TO 19
1	20 TO 24
2	30 TO 34
1	35 TO 39
1	40 TO 44

72

Refusal(-1)	0				
Don't Know(-2)	0				
TOTAL =====>	72	VALID SKIP(-4)	738	NON-INTERVIEW(-5)	0

Min: 0 Max: 40 Mean: 7.39

Lead In: R03380.00[Default]
Default Next Question: R03382.00

R03382.00 [D5A] Survey Year: 2003

HEALTH - HOW LONG HAS R HAD HIGH BLOOD PRESSURE - TIME UNIT

How long have you had this condition? UNIT

60	1 YEARS
11	2 MONTHS
0	3 WEEKS
0	4 DAYS

71

Refusal(-1)	0				
Don't Know(-2)	0				
TOTAL =====>	71	VALID SKIP(-4)	739	NON-INTERVIEW(-5)	0

Lead In: R03381.00[Default]
Default Next Question: R03383.00

R03383.00 [D6] Survey Year: 2003

HEALTH - HOW MUCH DOES HIGH BLOOD PRESSURE LIMIT NORMAL ACTIVITIES?

How much does this condition limit your normal daily activities? -- A lot,

somewhat, just a little, or not at all?

3	1 A LOT
4	3 SOMEWHAT
7	5 JUST A LITTLE
58	7 NOT AT ALL

72

Refusal(-1)	0				
Don't Know(-2)	0				
TOTAL =====>	72	VALID SKIP(-4)	738	NON-INTERVIEW(-5)	0

Lead In: R03382.00[Default]
Default Next Question: R03384.00

R03384.00 [D7] Survey Year: 2003

HEALTH - TAKING ANY MEDICATION TO LOWER HIGH BLOOD PRESSURE?

In order to lower your blood pressure, are you now taking any medication?

49	1 Yes
23	2 No

72

Refusal(-1)	0				
Don't Know(-2)	0				
TOTAL =====>	72	VALID SKIP(-4)	738	NON-INTERVIEW(-5)	0

Lead In: R03383.00[Default]
Default Next Question: R03385.00

R03385.00 [D8] Survey Year: 2003

HEALTH - DOCTOR EVER TOLD R IF HAD DIABETES OR HIGH BLOOD SUGAR?

Has a doctor ever told you that you have diabetes or high blood sugar?

27	1 Yes
781	2 No

808

Refusal(-1)	2				
Don't Know(-2)	0				
TOTAL =====>	810	VALID SKIP(-4)	0	NON-INTERVIEW(-5)	0

Lead In: R03384.00[Default]
Default Next Question: R03386.00

R03386.00 [D9] Survey Year: 2003

HEALTH - HOW LONG HAS R HAD DIABETES OR HIGH BLOOD SUGAR - LENGTH

How long have you had this condition?

INTERVIEWER: HOW LONG SINCE IT WAS DIAGNOSED

10 1 TO 4
10 5 TO 8
2 9 TO 14
1 15 TO 19
4 20 TO 24

27

Refusal(-1) 0
Don't Know(-2) 0
TOTAL =====> 27 VALID SKIP(-4) 783 NON-INTERVIEW(-5) 0

Min: 1 Max: 21 Mean: 7.41

Lead In: R03385.00[Default]
Default Next Question: R03387.00

R03387.00 [D9A] Survey Year: 2003

HEALTH - HOW LONG HAS R HAD DIABETES OR HIGH BLOOD SUGAR - TIME
UNIT

How long have you had this condition? UNIT

25 1 YEARS
2 2 MONTHS
0 3 WEEKS
0 4 DAYS

27

Refusal(-1) 0
Don't Know(-2) 0
TOTAL =====> 27 VALID SKIP(-4) 783 NON-INTERVIEW(-5) 0

Lead In: R03386.00[Default]
Default Next Question: R03388.00

R03388.00 [D10] Survey Year: 2003

HEALTH - HOW MUCH DOES DIABETES OR HIGH BLOOD SUGAR LIMIT NORMAL
ACTIVITIES?

How much does this condition limit your normal daily activities? -- A lot,
somewhat, just a little, or not at all?

2 1 A LOT
0 3 SOMEWHAT
6 5 JUST A LITTLE
19 7 NOT AT ALL

27

Refusal(-1) 0

Don't Know(-2) 0
TOTAL =====> 27 VALID SKIP(-4) 783 NON-INTERVIEW(-5) 0

Lead In: R03387.00[Default]
Default Next Question: R03389.00

R03389.00 [D11] Survey Year: 2003

HEALTH - TAKING ANY MEDICATION THAT YOU SWALLOW FOR DIABETES?

In order to treat or control your diabetes, are you now taking medication that you swallow?

19 1 Yes
8 2 No

27

Refusal(-1) 0
Don't Know(-2) 0
TOTAL =====> 27 VALID SKIP(-4) 783 NON-INTERVIEW(-5) 0

Lead In: R03388.00[Default]
Default Next Question: R03390.00

R03390.00 [D12] Survey Year: 2003

HEALTH - USING INSULIN OR A PUMP FOR DIABETES?

Are you now using insulin shots or a pump?

5 1 Yes
22 2 No

27

Refusal(-1) 0
Don't Know(-2) 0
TOTAL =====> 27 VALID SKIP(-4) 783 NON-INTERVIEW(-5) 0

Lead In: R03389.00[Default]
Default Next Question: R03391.00

R03391.00 [D13] Survey Year: 2003

HAVE CANCER

Has a doctor ever told you that you have cancer or a malignant tumor, excluding minor skin cancers?

11 1 Yes
797 2 No

808

Refusal(-1) 2
Don't Know(-2) 0

TOTAL =====> 810 VALID SKIP(-4) 0 NON-INTERVIEW(-5) 0

Lead In: R03390.00[Default]
Default Next Question: R03392.00

R03392.00 [D14] Survey Year: 2003

HOW LONG HAD CANCER

How long have you had or did you have this condition?

INTERVIEWER: HOW LONG SINCE IT WAS DIAGNOSED

4 1 TO 4
3 5 TO 8
2 9 TO 14
1 20 TO 24

10

Refusal(-1) 0
Don't Know(-2) 1 (Go To R03394.00)
TOTAL =====> 11 VALID SKIP(-4) 799 NON-INTERVIEW(-5) 0

Min: 2 Max: 20 Mean: 6.6

Lead In: R03391.00[Default]
Default Next Question: R03393.00

R03393.00 [D14A] Survey Year: 2003

TIME UNIT OF CANCER

How long have you had or did you have this condition? UNIT

4 1 YEARS
5 2 MONTHS
1 5 WEEKS
0 6 DAYS

10

Refusal(-1) 0
Don't Know(-2) 0
TOTAL =====> 10 VALID SKIP(-4) 800 NON-INTERVIEW(-5) 0

Lead In: R03392.00[Default]
Default Next Question: R03394.00

R03394.00 [D15] Survey Year: 2003

LIMIT ACTIVITY CANCER

How much does this condition limit your normal daily activities? -- A lot,
somewhat, just a little, or not at all?

0 1 A LOT

0 3 SOMEWHAT
1 5 JUST A LITTLE
10 7 NOT AT ALL

11

Refusal(-1) 0
Don't Know(-2) 0
TOTAL =====> 11 VALID SKIP(-4) 799 NON-INTERVIEW(-5) 0

Lead In: R03393.00[Default] R03392.00[-2:-2]
Default Next Question: R03395.00

R03395.00 [D16] Survey Year: 2003

TREATMENT FOR CANCER ANY

During the last year did you receive treatment for cancer?

INTERVIEWER: QXQ DEFINING TREATMENT

2 1 Yes
9 2 No

11

Refusal(-1) 0
Don't Know(-2) 0
TOTAL =====> 11 VALID SKIP(-4) 799 NON-INTERVIEW(-5) 0

Lead In: R03394.00[Default]
Default Next Question: R03396.00

R03396.00 [D17] Survey Year: 2003

TREATMENT FOR CANCER CHEMOTHERAPY OR MEDICATION

During the last year, what sort of treatments have you received for cancer?

Chemotherapy or medication?

0 1 Yes
2 2 No

2

Refusal(-1) 0
Don't Know(-2) 0
TOTAL =====> 2 VALID SKIP(-4) 808 NON-INTERVIEW(-5) 0

Lead In: R03395.00[Default]
Default Next Question: R03397.00

R03397.00 [D17A] Survey Year: 2003

TREATMENT FOR CANCER SURGERY OR BIOPSY

During the last year, what sort of treatments have you received for cancer?

Surgery or biopsy?

1 1 Yes
1 2 No

2

Refusal(-1) 0
Don't Know(-2) 0
TOTAL =====> 2 VALID SKIP(-4) 808 NON-INTERVIEW(-5) 0

Lead In: R03396.00[Default]
Default Next Question: R03398.00

R03398.00 [D17B] Survey Year: 2003

TREATMENT FOR CANCER RADIATION OR X-RAY

During the last year, what sort of treatments have you received for cancer?

Radiation or X-ray?

2 1 Yes
0 2 No

2

Refusal(-1) 0
Don't Know(-2) 0
TOTAL =====> 2 VALID SKIP(-4) 808 NON-INTERVIEW(-5) 0

Lead In: R03397.00[Default]
Default Next Question: R03399.00

R03399.00 [D17C] Survey Year: 2003

TREATMENT FOR CANCER MEDICATIONS OR TREATMENT FOR SYMPTOMS

During the last year, what sort of treatments have you received for cancer?

Medications or treatment for symptoms?

0 1 Yes
2 2 No

2

Refusal(-1) 0
Don't Know(-2) 0
TOTAL =====> 2 VALID SKIP(-4) 808 NON-INTERVIEW(-5) 0

Lead In: R03398.00[Default]
Default Next Question: R03400.00

R03400.00 [D17E] Survey Year: 2003

TREATMENT FOR CANCER NONE

During the last year, what sort of treatments have you received for cancer?

None?

0 1 Yes
2 2 No

2

Refusal(-1) 0
Don't Know(-2) 0
TOTAL =====> 2 VALID SKIP(-4) 808 NON-INTERVIEW(-5) 0

Lead In: R03399.00[Default]
Default Next Question: R03400a.00

R03400a.00 [D17F] Survey Year: 2003

TREATMENT FOR CANCER OTHER

During the last year, what sort of treatments have you received for cancer?

Other?

0 1 Yes
2 2 No

2

Refusal(-1) 0
Don't Know(-2) 0
TOTAL =====> 2 VALID SKIP(-4) 808 NON-INTERVIEW(-5) 0

Lead In: R03400.00[Default]
Default Next Question: R03401.00

R03401.00 [D18] Survey Year: 2003

YEAR MOST RECENT CANCER DIAGNOSED

In what year and month was your most recent cancer diagnosed? YEAR

5 1980 TO 1989
3 1990 TO 1999
3 2000 TO 2010: 2000+

11

Refusal(-1) 0
Don't Know(-2) 0
TOTAL =====> 11 VALID SKIP(-4) 799 NON-INTERVIEW(-5) 0

Min: 1980 Max: 2002 Mean: 1992.27

Lead In: R03400.00[Default]
Default Next Question: R03402.00

R03402.00 [D18A] Survey Year: 2003

MONTH MOST RECENT CANCER DIAGNOSED

In what year and month was your most recent cancer diagnosed? MONTH

1 1 JANUARY
2 2 FEBRUARY
0 3 MARCH
0 4 APRIL
1 5 MAY
0 6 JUNE
2 7 JULY
1 8 AUGUST
0 9 SEPTEMBER
0 10 OCTOBER
1 11 NOVEMBER
2 12 DECEMBER

10

Refusal(-1) 0
Don't Know(-2) 1
TOTAL =====> 11 VALID SKIP(-4) 799 NON-INTERVIEW(-5) 0

Lead In: R03401.00[Default]
Default Next Question: R03403.00

R03403.00 [D18B] Survey Year: 2003

STILL HAVE CANCER

Do you still have cancer?

1 1 Yes
10 2 No

11

Refusal(-1) 0
Don't Know(-2) 0
TOTAL =====> 11 VALID SKIP(-4) 799 NON-INTERVIEW(-5) 0

Lead In: R03402.00[Default]
Default Next Question: R03404.00

R03404.00 [D19] Survey Year: 2003

HAVE CHRONIC LUNG DISEASE

Has a doctor ever told you that you have chronic lung disease such as chronic
bronchitis or emphysema?

INTERVIEWER: DO NOT INCLUDE ASTHMA

```

      5      1 Yes
     803    2 No
-----
     808

Refusal(-1)      2
Don't Know(-2)   0
TOTAL =====> 810  VALID SKIP(-4)      0  NON-INTERVIEW(-5)      0

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Lead In: R03403.00[Default]
 Default Next Question: R03405.00

 R03405.00 [D20] Survey Year: 2003

HOW LONG HAD CHRONIC LUNG DISEASE

How long have you had this condition?

INTERVIEWER: HOW LONG SINCE IT WAS DIAGNOSED

```

      3      1 TO 4
      1      9 TO 14
      1     15 TO 19
-----
      5

Refusal(-1)      0
Don't Know(-2)   0
TOTAL =====> 5  VALID SKIP(-4)      805  NON-INTERVIEW(-5)      0

```

Min: 2 Max: 16 Mean: 7.4

Lead In: R03404.00[Default]
 Default Next Question: R03406.00

 R03406.00 [D20A] Survey Year: 2003

UNIT D20

How long have you had this condition? UNIT

```

      5      1 YEARS
      0      2 MONTHS
      0      3 WEEKS
      0      4 DAYS
-----
      5

Refusal(-1)      0
Don't Know(-2)   0
TOTAL =====> 5  VALID SKIP(-4)      805  NON-INTERVIEW(-5)      0

```

Lead In: R03405.00[Default]
 Default Next Question: R03407.00

 R03407.00 [D21] Survey Year: 2003

LIMIT ACTIVITY CHRONIC LUNG DISEASE

How much does this condition limit your normal daily activities? -- A lot, somewhat, just a little, or not at all?

0 1 A LOT
1 3 SOMEWHAT
0 5 JUST A LITTLE
4 7 NOT AT ALL

5

Refusal(-1) 0
Don't Know(-2) 0
TOTAL =====> 5 VALID SKIP(-4) 805 NON-INTERVIEW(-5) 0

Lead In: R03406.00[Default]
Default Next Question: R03408.00

R03408.00 [D22] Survey Year: 2003

TAKE MEDICATION FOR LUNG CONDITION

Are you now taking medication or other treatment for your lung condition?

2 1 Yes
3 2 No

5

Refusal(-1) 0
Don't Know(-2) 0
TOTAL =====> 5 VALID SKIP(-4) 805 NON-INTERVIEW(-5) 0

Lead In: R03407.00[Default]
Default Next Question: R03409.00

R03409.00 [D23] Survey Year: 2003

LUNG CONDITION LIMIT USUAL ACTIVITY?

Does your lung condition limit your usual activities, such as household chores or work?

1 1 Yes
4 2 No

5

Refusal(-1) 0
Don't Know(-2) 0
TOTAL =====> 5 VALID SKIP(-4) 805 NON-INTERVIEW(-5) 0

Lead In: R03408.00[Default]
Default Next Question: R03410.00

R03410.00 [D24]

Survey Year: 2003

HAVE HEART PROBLEM

Has a doctor ever told you that you had a heart attack, coronary heart disease, angina, congestive heart failure, or other heart problems?

INTERVIEWER: READ SLOWLY

15 1 Yes
793 2 No

808

Refusal(-1) 2
Don't Know(-2) 0
TOTAL =====> 810 VALID SKIP(-4) 0 NON-INTERVIEW(-5) 0

Lead In: R03409.00[Default]
Default Next Question: R03411.00

R03411.00 [D25]

Survey Year: 2003

LIMIT ACTIVITY HEART PROBLEM

How much does this condition limit your normal daily activities? -- A lot, somewhat, just a little, or not at all?

0 1 A LOT
4 3 SOMEWHAT
2 5 JUST A LITTLE
9 7 NOT AT ALL

15

Refusal(-1) 0
Don't Know(-2) 0
TOTAL =====> 15 VALID SKIP(-4) 795 NON-INTERVIEW(-5) 0

Lead In: R03410.00[Default]
Default Next Question: R03412.00

R03412.00 [D26]

Survey Year: 2003

TAKE MEDICATION HEART PROBLEM

Are you now taking or carrying medication for your heart problem?

7 1 Yes
8 2 No

15

Refusal(-1) 0
Don't Know(-2) 0
TOTAL =====> 15 VALID SKIP(-4) 795 NON-INTERVIEW(-5) 0

Lead In: R03411.00[Default]
Default Next Question: R03413.00

R03413.00 [D27] Survey Year: 2003

EVER HAD HEART ATTACK

Have you ever had a heart attack or myocardial infarction?

5 1 Yes
10 2 No

15

Refusal(-1) 0
Don't Know(-2) 0
TOTAL =====> 15 VALID SKIP(-4) 795 NON-INTERVIEW(-5) 0

Lead In: R03412.00[Default]
Default Next Question: R03414.00

R03414.00 [D28] Survey Year: 2003

YEAR FIRST HEART ATTACK

In what year and month was your FIRST heart attack? YEAR

3 1990 TO 1999
2 2000 TO 2010: 2000+

5

Refusal(-1) 0
Don't Know(-2) 0
TOTAL =====> 5 VALID SKIP(-4) 805 NON-INTERVIEW(-5) 0

Min: 1990 Max: 2001 Mean: 1997.8

Lead In: R03413.00[Default]
Default Next Question: R03415.00

R03415.00 [D28A] Survey Year: 2003

MONTH FIRST HEART ATTACK

In what year and month was your FIRST heart attack? MONTH

0 1 JANUARY
0 2 FEBRUARY
1 3 MARCH
1 4 APRIL
1 5 MAY
0 6 JUNE
0 7 JULY
1 8 AUGUST
0 9 SEPTEMBER
0 10 OCTOBER

0 11 NOVEMBER
 0 12 DECEMBER

 4

Refusal(-1) 0
 Don't Know(-2) 1
 TOTAL =====> 5 VALID SKIP(-4) 805 NON-INTERVIEW(-5) 0

Lead In: R03414.00[Default]
 Default Next Question: R03416.00

 R03416.00 [D29] Survey Year: 2003

NOW TAKE MEDICATION HEART ATTACK

Are you now taking or carrying medication because of your heart attack?

4 1 Yes
 1 2 No

 5

Refusal(-1) 0
 Don't Know(-2) 0
 TOTAL =====> 5 VALID SKIP(-4) 805 NON-INTERVIEW(-5) 0

Lead In: R03415.00[Default]
 Default Next Question: R03417.00

 R03417.00 [D30] Survey Year: 2003

HAD MORE THAN ONE HEART ATTACK

Have you had more than one heart attack?

1 1 Yes
 4 2 No

 5

Refusal(-1) 0
 Don't Know(-2) 0
 TOTAL =====> 5 VALID SKIP(-4) 805 NON-INTERVIEW(-5) 0

Lead In: R03416.00[Default]
 Default Next Question: R03418.00

 R03418.00 [D31] Survey Year: 2003

YEAR MOST RECENT HEART ATTACK

In what year and month was your FIRST heart attack? YEAR

1 1990 TO 1999

 1

Refusal(-1) 0
 Don't Know(-2) 0
 TOTAL =====> 1 VALID SKIP(-4) 809 NON-INTERVIEW(-5) 0

 Min: 1998 Max: 1998 Mean: 1998

Lead In: R03417.00[Default]
 Default Next Question: R03419.00

 R03419.00 [D31A] Survey Year: 2003

MONTH MOST RECENT HEART ATTACK

In what year and month was your FIRST heart attack? MONTH

0 1 JANUARY
 0 2 FEBRUARY
 0 3 MARCH
 0 4 APRIL
 0 5 MAY
 0 6 JUNE
 0 7 JULY
 0 8 AUGUST
 0 9 SEPTEMBER
 0 10 OCTOBER
 0 11 NOVEMBER
 0 12 DECEMBER

 0

Refusal(-1) 0
 Don't Know(-2) 1
 TOTAL =====> 1 VALID SKIP(-4) 809 NON-INTERVIEW(-5) 0

Lead In: R03418.00[Default]
 Default Next Question: R03420.00

 R03420.00 [D32] Survey Year: 2003

HAD ANGINA

During the last year have you had any angina or chest pains due to your heart?

4 1 Yes
 11 2 No

 15

Refusal(-1) 0
 Don't Know(-2) 0
 TOTAL =====> 15 VALID SKIP(-4) 795 NON-INTERVIEW(-5) 0

Lead In: R03419.00[Default]
 Default Next Question: R03421.00

 R03421.00 [D33] Survey Year: 2003

TAKE MEDICATION BECAUSE OF ANGINA

Are you now taking or carrying medications because of angina or chest pain?

3 1 Yes
1 2 No

4

Refusal(-1) 0
Don't Know(-2) 0
TOTAL =====> 4 VALID SKIP(-4) 806 NON-INTERVIEW(-5) 0

Lead In: R03420.00[Default]
Default Next Question: R03422.00

R03422.00 [D34] Survey Year: 2003

LIMIT ACTIVITY ANGINA

Are you limiting your usual activities because of your angina?

2 1 Yes
2 2 No

4

Refusal(-1) 0
Don't Know(-2) 0
TOTAL =====> 4 VALID SKIP(-4) 806 NON-INTERVIEW(-5) 0

Lead In: R03421.00[Default]
Default Next Question: R03423.00

R03423.00 [D35] Survey Year: 2003

HAVE CONGESTIVE HEART FAILURE

In the last year has a doctor told you that you have congestive heart failure?

0 1 Yes
15 2 No

15

Refusal(-1) 0
Don't Know(-2) 0
TOTAL =====> 15 VALID SKIP(-4) 795 NON-INTERVIEW(-5) 0

Lead In: R03422.00[Default]
Default Next Question: R03428.00

R03428.00 [D39] Survey Year: 2003

HAD TEST OF HEART WITH TUBES

In the last year, have you had a special test or treatment of your heart where tubes were inserted into your veins or arteries such as cardiac catheterization, coronary angiogram or angioplasty?

0 1 Yes
15 2 No

15

Refusal(-1) 0
Don't Know(-2) 0
TOTAL =====> 15 VALID SKIP(-4) 795 NON-INTERVIEW(-5) 0

Lead In: R03423.00[Default]
Default Next Question: R03431.00

R03431.00 [D41] Survey Year: 2003

HAD SURGERY ON HEART

In the last year, have you had surgery on your heart?

2 1 Yes
13 2 No

15

Refusal(-1) 0
Don't Know(-2) 0
TOTAL =====> 15 VALID SKIP(-4) 795 NON-INTERVIEW(-5) 0

Lead In: R03428.00[Default]
Default Next Question: R03432.00

R03432.00 [D42] Survey Year: 2003

IN U.S. HAD SURGERY ON HEART

Was this in the United States?

2 1 Yes
0 2 No

2

Refusal(-1) 0
Don't Know(-2) 0
TOTAL =====> 2 VALID SKIP(-4) 808 NON-INTERVIEW(-5) 0

Lead In: R03431.00[Default]
Default Next Question: R03433.00

R03433.00 [D43] Survey Year: 2003

HAD A STROKE

Has a doctor ever told you that you had a stroke?

2 1 Yes
 806 2 No

 808

Refusal(-1) 2
 Don't Know(-2) 0
 TOTAL =====> 810 VALID SKIP(-4) 0 NON-INTERVIEW(-5) 0

Lead In: R03432.00[Default]
 Default Next Question: R03434.00

 R03434.00 [D44] Survey Year: 2003

SEEN DOCTOR BECAUSE OF STROKE

In the last year, have you seen a doctor because of this or any other stroke?

2 1 Yes
 0 2 No

 2

Refusal(-1) 0
 Don't Know(-2) 0
 TOTAL =====> 2 VALID SKIP(-4) 808 NON-INTERVIEW(-5) 0

Lead In: R03433.00[Default]
 Default Next Question: R03435.00

 R03435.00 [D45] Survey Year: 2003

IN U.S. SEEN DOCTOR

Was this in the United States?

2 1 Yes
 0 2 No

 2

Refusal(-1) 0
 Don't Know(-2) 0
 TOTAL =====> 2 VALID SKIP(-4) 808 NON-INTERVIEW(-5) 0

Lead In: R03434.00[Default]
 Default Next Question: R03437.00

 R03437.00 [D46] Survey Year: 2003

HAD MORE THAN ONE STROKE

Have you had more than one stroke?

1 1 Yes
 1 2 No

```

-----
      2

Refusal(-1)          0
Don't Know(-2)      0
TOTAL =====>    2  VALID SKIP(-4)    808  NON-INTERVIEW(-5)    0

Lead In: R03435.00[Default]
Default Next Question: R03438.00
-----
R03438.00    [D47]                               Survey Year: 2003

```

HAVE REMAINING PROBLEMS DUE TO STROKE

Do you still have any remaining problems because of your (stroke/strokes)?

```

      2      1 Yes
      0      2 No
-----
      2

Refusal(-1)          0
Don't Know(-2)      0
TOTAL =====>    2  VALID SKIP(-4)    808  NON-INTERVIEW(-5)    0

Lead In: R03437.00[Default]
Default Next Question: R03439.00
-----
R03439.00    [D48]                               Survey Year: 2003

```

TAKE MEDICATION DUE TO STROKE

Are you now taking any medications because of your stroke (text fill: if D46=1: s; i.e. make stroke plural) or its (text fill: if D46=1: their; i.e. "their" in place of "its") complications?

```

      2      1 Yes
      0      2 No
-----
      2

Refusal(-1)          0
Don't Know(-2)      0
TOTAL =====>    2  VALID SKIP(-4)    808  NON-INTERVIEW(-5)    0

Lead In: R03438.00[Default]
Default Next Question: R03440.00
-----
R03440.00    [D49]                               Survey Year: 2003

```

YEAR MOST RECENT STROKE

In what year and month was your (text fill: if D46=1: most recent) stroke? YEAR

```

      1      1990 TO 1999
      1      2000 TO 2010: 2000+
-----

```

2

Refusal(-1)	0				
Don't Know(-2)	0				
TOTAL =====>	2	VALID SKIP(-4)	808	NON-INTERVIEW(-5)	0

Min: 1995 Max: 2000 Mean: 1997.5

Lead In: R03439.00[Default]
Default Next Question: R03441.00

R03441.00 [D49A] Survey Year: 2003

MONTH MOST RECENT STROKE

In what year and month was your (text fill: if D46=1: most recent) stroke? MONTH

0	1 JANUARY
0	2 FEBRUARY
0	3 MARCH
1	4 APRIL
0	5 MAY
0	6 JUNE
0	7 JULY
0	8 AUGUST
0	9 SEPTEMBER
0	10 OCTOBER
0	11 NOVEMBER
0	12 DECEMBER

1

Refusal(-1)	0				
Don't Know(-2)	1				
TOTAL =====>	2	VALID SKIP(-4)	808	NON-INTERVIEW(-5)	0

Lead In: R03440.00[Default]
Default Next Question: R03442.00

R03442.00 [D50] Survey Year: 2003

HAD EMOTIONAL PROBLEM

Have you ever had or has a doctor ever told you that you have any emotional, nervous, or psychiatric problems?

31	1 Yes
776	2 No

807

Refusal(-1)	3				
Don't Know(-2)	0				
TOTAL =====>	810	VALID SKIP(-4)	0	NON-INTERVIEW(-5)	0

Lead In: R03441.00[Default]
Default Next Question: R03443.00

R03443.00 [D51] Survey Year: 2003

GET PSYCHIATRIC TREATMENT

Do you now get psychiatric or psychological treatment for your problems?

14 1 Yes
17 2 No

31

Refusal(-1) 0
Don't Know(-2) 0
TOTAL =====> 31 VALID SKIP(-4) 779 NON-INTERVIEW(-5) 0

Lead In: R03442.00[Default]
Default Next Question: R03444.00

R03444.00 [D52] Survey Year: 2003

HOW LONG HAD PSYCHIATRIC TREATMENT

How long have you had or did you have this condition?

INTERVIEWER: HOW LONG SINCE IT WAS DIAGNOSED

13 1 TO 4
8 5 TO 8
4 9 TO 14
4 20 TO 24
1 45 TO 49

30

Refusal(-1) 0
Don't Know(-2) 1 (Go To R03446.00)
TOTAL =====> 31 VALID SKIP(-4) 779 NON-INTERVIEW(-5) 0

Min: 1 Max: 46 Mean: 8.2

Lead In: R03443.00[Default]
Default Next Question: R03445.00

R03445.00 [D52A] Survey Year: 2003

UNIT D52

How long have you had or did you have this condition? UNIT

25 1 YEARS
4 2 MONTHS
0 3 WEEKS
1 4 DAYS

30

Refusal(-1) 0
Don't Know(-2) 0
TOTAL =====> 30 VALID SKIP(-4) 780 NON-INTERVIEW(-5) 0

Lead In: R03444.00[Default]
Default Next Question: R03446.00

R03446.00 [D53] Survey Year: 2003

LIMIT ACTIVITY PSYCHIATRIC CONDITION

How much does this condition limit your normal daily activities? -- A lot, somewhat, just a little, or not at all?

4 1 A LOT
2 3 SOMEWHAT
2 5 JUST A LITTLE
23 7 NOT AT ALL

31

Refusal(-1) 0
Don't Know(-2) 0
TOTAL =====> 31 VALID SKIP(-4) 779 NON-INTERVIEW(-5) 0

Lead In: R03445.00[Default] R03444.00[-2:-2]
Default Next Question: R03447.00

R03447.00 [D54] Survey Year: 2003

TAKE TRANQUILIZERS

Do you now take tranquilizers, antidepressants, or pills for nerves?

38 1 Yes
769 2 No

807

Refusal(-1) 3
Don't Know(-2) 0
TOTAL =====> 810 VALID SKIP(-4) 0 NON-INTERVIEW(-5) 0

Lead In: R03446.00[Default]
Default Next Question: R03448.00

R03448.00 [D55] Survey Year: 2003

HAD ARTHRITIS

Have you ever had, or has a doctor ever told you that you have arthritis or rheumatism?

48 1 Yes
759 2 No

807

Refusal(-1) 3
 Don't Know(-2) 0
 TOTAL =====> 810 VALID SKIP(-4) 0 NON-INTERVIEW(-5) 0

Lead In: R03447.00[Default]
 Default Next Question: R03449.00

 R03449.00 [D56] Survey Year: 2003

HOW LONG HAD ARTHRITIS

How long have you had this condition?

INTERVIEWER: HOW LONG SINCE IT WAS DIAGNOSED

1 0
 13 1 TO 4
 11 5 TO 8
 17 9 TO 14
 4 20 TO 24
 1 25 TO 29

 47

Refusal(-1) 0
 Don't Know(-2) 1 (Go To R03451.00)
 TOTAL =====> 48 VALID SKIP(-4) 762 NON-INTERVIEW(-5) 0

Min: 0 Max: 26 Mean: 8.15

Lead In: R03448.00[Default]
 Default Next Question: R03450.00

 R03450.00 [D56A] Survey Year: 2003

UNIT D56

How long have you had this condition? UNIT

43 1 YEARS
 2 2 MONTHS
 1 3 WEEKS
 0 5 DAYS

 46

Refusal(-1) 0
 Don't Know(-2) 0
 TOTAL =====> 46 VALID SKIP(-4) 764 NON-INTERVIEW(-5) 0

Lead In: R03449.00[Default]
 Default Next Question: R03451.00

 R03451.00 [D57] Survey Year: 2003

LIMIT ACTIVITY ARTHRITIS

How much does this condition limit your normal daily activities? -- A lot, somewhat, just a little, or not at all?

2	1 A LOT
13	3 SOMEWHAT
14	5 JUST A LITTLE
19	7 NOT AT ALL

48

Refusal(-1)	0				
Don't Know(-2)	0				
TOTAL =====>	48	VALID SKIP(-4)	762	NON-INTERVIEW(-5)	0

Lead In: R03450.00[Default] R03449.00[-2:-2]

Default Next Question: R03452.00

R03452.00 [D58] Survey Year: 2003

TAKE MEDICATION ARTHRITIS

Are you currently taking any medication or other treatments for your arthritis or rheumatism?

11	1 Yes
37	2 No

48

Refusal(-1)	0				
Don't Know(-2)	0				
TOTAL =====>	48	VALID SKIP(-4)	762	NON-INTERVIEW(-5)	0

Lead In: R03451.00[Default]

Default Next Question: R03453.00

R03453.00 [D59] Survey Year: 2003

HAD ASTHMA

Have you ever had, or has a doctor ever told you that you have asthma?

50	1 Yes
756	2 No

806

Refusal(-1)	3				
Don't Know(-2)	1				
TOTAL =====>	810	VALID SKIP(-4)	0	NON-INTERVIEW(-5)	0

Lead In: R03452.00[Default]

Default Next Question: R03454.00

R03454.00 [D60] Survey Year: 2003

YEAR ASTHMA

About how many years have you had or did you have this condition?

INTERVIEWER: HOW LONG SINCE IT WAS DIAGNOSED

9	1 TO 4
8	5 TO 8
10	9 TO 14
7	15 TO 19
2	20 TO 24
4	25 TO 29
4	35 TO 39
1	40 TO 44
3	45 TO 49
1	50 TO 54

49

Refusal(-1)	0				
Don't Know(-2)	1	(Go To R03456.00)			
TOTAL =====>	50	VALID SKIP(-4)	760	NON-INTERVIEW(-5)	0

Min: 1 Max: 54 Mean: 16.53

Lead In: R03453.00[Default]
Default Next Question: R03455.00

R03455.00 [D60A] Survey Year: 2003

UNIT D60

About how many years have you had or did you have this condition? UNIT

49	1 YEARS
0	2 MONTHS
0	3 WEEKS
0	4 DAYS

49

Refusal(-1)	0				
Don't Know(-2)	0				
TOTAL =====>	49	VALID SKIP(-4)	761	NON-INTERVIEW(-5)	0

Lead In: R03454.00[Default]
Default Next Question: R03456.00

R03456.00 [D61] Survey Year: 2003

CURRENTLY HAVE ASTHMA

Do you currently have asthma?

36	1 Yes
14	2 No

50

Refusal(-1)	0				
Don't Know(-2)	0				
TOTAL =====>	50	VALID SKIP(-4)	760	NON-INTERVIEW(-5)	0

Lead In: R03455.00[Default] R03454.00[-2:-2]
Default Next Question: R03457.00

R03457.00 [D62] Survey Year: 2003

LIMIT ACTIVITY ASTHMA

How much does this condition limit your normal daily activities? -- A lot, somewhat, just a little, or not at all?

1	1 A LOT
2	3 SOMEWHAT
13	5 JUST A LITTLE
20	7 NOT AT ALL

36

Refusal(-1)	0				
Don't Know(-2)	0				
TOTAL =====>	36	VALID SKIP(-4)	774	NON-INTERVIEW(-5)	0

Lead In: R03456.00[Default]
Default Next Question: R03458.00

R03458.00 [D63] Survey Year: 2003

WEAR GLASSES

Do you normally wear glasses or corrective contact lenses?

385	1 Yes
423	2 No

808

Refusal(-1)	2				
Don't Know(-2)	0				
TOTAL =====>	810	VALID SKIP(-4)	0	NON-INTERVIEW(-5)	0

Lead In: R03457.00[Default]
Default Next Question: R03459.00

R03459.00 [D64] Survey Year: 2003

HOW IS EYESIGHT

Is your eyesight excellent, very good, good, fair, or poor (Text Fill: if D63=1: using glasses or corrective lenses as usual)?

326	1 EXCELLENT
249	2 VERY GOOD

197 3 GOOD
31 4 FAIR
5 5 POOR
1 6 (VOL) LEGALLY BLIND

809

Refusal(-1) 1
Don't Know(-2) 0
TOTAL =====> 810 VALID SKIP(-4) 0 NON-INTERVIEW(-5) 0

Lead In: R03458.00[Default]
Default Next Question: R03460.00

R03460.00 [D65] Survey Year: 2003

WEAR HEARING AID

Do you ever wear a hearing aid?

5 1 Yes
804 2 No

809

Refusal(-1) 1
Don't Know(-2) 0
TOTAL =====> 810 VALID SKIP(-4) 0 NON-INTERVIEW(-5) 0

Lead In: R03459.00[Default]
Default Next Question: R03461.00

R03461.00 [D66] Survey Year: 2003

HOW IS HEARING

Is your hearing excellent, very good, good, fair, or poor {text fill: if D65=1:
using a hearing aid as usual}?

382 1 EXCELLENT
235 5 VERY GOOD
164 6 GOOD
26 7 FAIR
2 9 POOR

809

Refusal(-1) 1
Don't Know(-2) 0
TOTAL =====> 810 VALID SKIP(-4) 0 NON-INTERVIEW(-5) 0

Lead In: R03460.00[Default]
Default Next Question: R03462.00

R03462.00 [D67] Survey Year: 2003

TROUBLED WITH PAIN

Are you often troubled with pain?

79 1 Yes
728 2 No

807

Refusal(-1) 3
Don't Know(-2) 0
TOTAL =====> 810 VALID SKIP(-4) 0 NON-INTERVIEW(-5) 0

Lead In: R03461.00[Default]
Default Next Question: R03463.00

R03463.00 [D68] Survey Year: 2003

HOW BAD IS PAIN

How bad is the pain most of the time: mild, moderate or severe?

30 1 MILD
36 2 MODERATE
12 3 SEVERE

78

Refusal(-1) 0
Don't Know(-2) 1
TOTAL =====> 79 VALID SKIP(-4) 731 NON-INTERVIEW(-5) 0

Lead In: R03462.00[Default]
Default Next Question: R03464.00

R03464.00 [D69] Survey Year: 2003

PAIN MAKES ACTIVITY DIFFICULT

Does the pain make it difficult for you to do your usual activities such as household chores or work?

41 1 Yes
38 2 No

79

Refusal(-1) 0
Don't Know(-2) 0
TOTAL =====> 79 VALID SKIP(-4) 731 NON-INTERVIEW(-5) 0

Lead In: R03463.00[Default]
Default Next Question: R03465.00

R03465.00 [D70] Survey Year: 2003

CHECK BREASTS MONTHLY

Do you check your breasts for lumps monthly?

250 1 Yes
231 2 No

481

Refusal(-1) 3
Don't Know(-2) 2
TOTAL =====> 486 VALID SKIP(-4) 324 NON-INTERVIEW(-5) 0

Lead In: R03464.00[Default]
Default Next Question: R03466.00

R03466.00 [D71] Survey Year: 2003

HAVE MAMMOGRAM

Did you have a mammogram or x-ray of the breast, to search for cancer in the last 12 months?

215 1 Yes
267 2 No

482

Refusal(-1) 4
Don't Know(-2) 0
TOTAL =====> 486 VALID SKIP(-4) 324 NON-INTERVIEW(-5) 0

Lead In: R03465.00[Default]
Default Next Question: R03467.00

R03467.00 [D72] Survey Year: 2003

HAVE PAP SMEAR

A PAP smear in the last year?

385 1 Yes
95 2 No

480

Refusal(-1) 6
Don't Know(-2) 0
TOTAL =====> 486 VALID SKIP(-4) 324 NON-INTERVIEW(-5) 0

Lead In: R03466.00[Default]
Default Next Question: R03468.00

R03468.00 [D73] Survey Year: 2003

HAD EXAMINATION OF PROSTATE

Have you ever had an examination of your prostate to screen for cancer?

123 1 Yes
200 2 No

323

Refusal(-1) 0
Don't Know(-2) 1
TOTAL =====> 324 VALID SKIP(-4) 486 NON-INTERVIEW(-5) 0

Lead In: R03467.00[Default]
Default Next Question: R03469.00

R03469.00 [D74] Survey Year: 2003

HAVE YOU EVER SMOKED CIGARETTES?

Have you ever smoked cigarettes?

INTERVIEWER: BY SMOKING WE MEAN MORE THAN 100 CIGARETTES IN YOUR LIFETIME, DO NOT INCLUDE PIPES OR CIGARS

229 1 Yes
577 2 No

806

Refusal(-1) 4
Don't Know(-2) 0
TOTAL =====> 810 VALID SKIP(-4) 0 NON-INTERVIEW(-5) 0

Lead In: R03468.00[Default]
Default Next Question: R03470.00

R03470.00 [D75] Survey Year: 2003

DO YOU SMOKE CIGARETTES NOW?

Do you smoke cigarettes now?

59 1 Yes
170 2 No

229

Refusal(-1) 0
Don't Know(-2) 0
TOTAL =====> 229 VALID SKIP(-4) 581 NON-INTERVIEW(-5) 0

Lead In: R03469.00[Default]
Default Next Question: R03471.00

R03471.00 [D76] Survey Year: 2003

HOW MANY CIGARETTESOR PACKS DO YOU USUALLY SMOKE IN A DAY NOW?

About how many cigarettes or packs do you usually smoke in a day now?

INTERVIEWER: PROBE FOR A RANGE

15	1
6	2
6	3
4	4
3	5
3	6
2	8
1	9
12	10
4	11 TO 20
1	21 TO 30

57

Refusal(-1)	1	(Go To R03473.00)			
Don't Know(-2)	1	(Go To R03473.00)			
TOTAL =====>	59	VALID SKIP(-4)	751	NON-INTERVIEW(-5)	0

Min:	1	Max:	30	Mean:	5.81
------	---	------	----	-------	------

Lead In: R03470.00[Default]
Default Next Question: R03472.00

R03472.00 [D76A] Survey Year: 2003

UNIT D76

About how many cigarettes or packs do you usually smoke in a day now? UNIT

46	1 CIGARETTES
11	2 PACKS

57

Refusal(-1)	0				
Don't Know(-2)	0				
TOTAL =====>	57	VALID SKIP(-4)	753	NON-INTERVIEW(-5)	0

Lead In: R03471.00[Default]
Default Next Question: R03473.00

R03473.00 [D77] Survey Year: 2003

HOW OLD WERE YOU WHEN YOU STARTED SMOKING?

About how old were you when you started smoking?

INTERVIEWER: IF LESS THAN ONE YEAR, CHOOSE ANSWER 'STARTED SMOKING X YEARS AGO'

200	1 YEARS OLD
7	2 YEAR STARTED SMOKING
18	3 STARTED SMOKING "X" YEARS AGO

225

Refusal(-1) 3 (Go To R03475.00)
 Don't Know(-2) 1 (Go To R03475.00)
 TOTAL =====> 229 VALID SKIP(-4) 581 NON-INTERVIEW(-5) 0

Lead In: R03472.00[Default] R03471.00[-1:-1] R03471.00[-2:-2]
 Default Next Question: R03474.00

 R03474.00 [D77A] Survey Year: 2003

YEARS D77

About how old were you when you started smoking? DIGITS

INTERVIEWER: ENTER '0' IF LESS THAN ONE YEAR

1	0
2	5 TO 8
31	9 TO 14
113	15 TO 19
44	20 TO 24
18	25 TO 29
7	30 TO 34
7	1800 TO 9999: Gave Year

 223

Refusal(-1) 0
 Don't Know(-2) 2
 TOTAL =====> 225 VALID SKIP(-4) 585 NON-INTERVIEW(-5) 0

Min: 0 Max: 1998 Mean: 79.9

Lead In: R03473.00[Default]
 Default Next Question: R03475.00

 R03475.00 [D78] Survey Year: 2003

HOW MANY CIGARETTES A DAY WHEN SMOKED MOST

When you were smoking the most, about how many cigarettes or packs did you usually smoke in a day?

INTERVIEWER: PROBE FOR A RANGE

74	1
28	2
21	3
9	4
15	5
5	6
3	7
3	8
39	10
15	11 TO 20
10	21 TO 30

 222

Refusal(-1) 2 (Go To R03477.00)
 Don't Know(-2) 5 (Go To R03477.00)
 TOTAL =====> 229 VALID SKIP(-4) 581 NON-INTERVIEW(-5) 0

Min: 1 Max: 30 Mean: 5.92

Lead In: R03474.00[Default] R03473.00[-2:-2] R03473.00[-1:-1]
 Default Next Question: R03476.00

 R03476.00 [D78A] Survey Year: 2003

UNIT D78

When you were smoking the most, about how many cigarettes or packs did you usually smoke in a day? UNIT

148 1 CIGARETTES
 74 2 PACKS

 222

Refusal(-1) 0
 Don't Know(-2) 0
 TOTAL =====> 222 VALID SKIP(-4) 588 NON-INTERVIEW(-5) 0

Lead In: R03475.00[Default]
 Default Next Question: R03477.00

 R03477.00 [D79] Survey Year: 2003

HOW OLD WERE YOU WHEN YOU WERE SMOKINGTHE MOST?

When you were smoking the most, about how old were you?

INTERVIEWER: IF LESS THAN ONE YEAR, CHOOSE ANSWER 'WAS SMOKING THE MOST X YEARS AGO'

196 1 YEARS OLD
 6 2 YEAR STARTED SMOKING
 22 3 STARTED SMOKING "X" YEARS AGO

 224

Refusal(-1) 2
 Don't Know(-2) 3
 TOTAL =====> 229 VALID SKIP(-4) 581 NON-INTERVIEW(-5) 0

Lead In: R03476.00[Default] R03475.00[-2:-2] R03475.00[-1:-1]
 Default Next Question: R03478.00

 R03478.00 [D79A] Survey Year: 2003

YEARS D79

When you were smoking the most, about how old were you? DIGITS

INTERVIEWER: ENTER '0' IF LESS THAN ONE YEAR

1	0
3	1 TO 4
2	5 TO 8
6	9 TO 14
45	15 TO 19
59	20 TO 24
49	25 TO 29
29	30 TO 34
17	35 TO 39
4	40 TO 44
3	45 TO 49
5	1800 TO 9999: Gave Year

223

Refusal(-1)	1				
Don't Know(-2)	0				
TOTAL =====>	224	VALID SKIP(-4)	586	NON-INTERVIEW(-5)	0
Min:	0	Max:	2004	Mean:	68.04

Lead In: R03477.00[Default]
Default Next Question: R03479.00

R03479.00 [D80] Survey Year: 2003

HOW MANY YEARS AGO DID YOU STOP SMOKING?

About how many years ago did you stop smoking?

INTERVIEWER: IF LESS THAN ONE YEAR, CHOOSE ANSWER 'STOPPED SMOKING X YEARS AGO'

49	1 YEARS OLD
16	2 YEAR STARTED SMOKING
103	3 STARTED SMOKING "X" YEARS AGO

168

Refusal(-1)	1	(Go To R03481.00)			
Don't Know(-2)	1	(Go To R03481.00)			
TOTAL =====>	170	VALID SKIP(-4)	640	NON-INTERVIEW(-5)	0

Lead In: R03478.00[Default]
Default Next Question: R03480.00

R03480.00 [D80A] Survey Year: 2003

YEARS D80

About how many years ago did you stop smoking? DIGITS

INTERVIEWER: ENTER "0" IF LESS THAN ONE YEAR

8	0
25	1 TO 4

25	5 TO 8
31	9 TO 14
26	15 TO 19
17	20 TO 24
10	25 TO 29
7	30 TO 34
5	35 TO 39
1	40 TO 44
3	45 TO 49
11	1800 TO 9999: Gave Year

169

Refusal(-1)	0				
Don't Know(-2)	1				
TOTAL =====>	170	VALID SKIP(-4)	640	NON-INTERVIEW(-5)	0
Min:	0	Max:	2003	Mean:	142.86

Lead In: R03479.00[Default]
Default Next Question: R03481.00

R03481.00 [D81] Survey Year: 2003

DRINK ALCOHOLIC BEVERAGES

Do you ever drink any alcoholic beverages such as beer, wine, or liquor?

INTERVIEWER: REFERS TO CURRENT ALCOHOL CONSUMPTION

459	1 Yes
346	2 No

805

Refusal(-1)	5				
Don't Know(-2)	0				
TOTAL =====>	810	VALID SKIP(-4)	0	NON-INTERVIEW(-5)	0

Lead In: R03480.00[Default] R03479.00[-1:-1] R03479.00[-2:-2]
Default Next Question: R03482.00

R03482.00 [D82] Survey Year: 2003

HOW MANY DAYS HAD ALCOHOL LAST 3 MOS

In the last three months, on average, how many days per week have you had any alcohol to drink?

(For example, beer, wine, or any drink containing liquor.)

100	0 (Go To R03485.00)
154	1
92	2
52	3
19	4
17	5

```

        6          6
       13         7
-----
      453

Refusal(-1)          1  (Go To R03485.00)
Don't Know(-2)       5  (Go To R03485.00)
TOTAL =====>    459  VALID SKIP(-4)    351  NON-INTERVIEW(-5)    0

Min:          0          Max:          7          Mean:          1.73

```

Lead In: R03481.00[Default]
 Default Next Question: R03483.00

 R03483.00 [D83] Survey Year: 2003

HOW MANY DAYS HAD FOUR OR MORE DRINKS

In the last three months, on how many days have you had four or more drinks on one occasion?

INTERVIEWER: USE ZERO FOR NONE

```

      238          0
       37          1
       39          2
       11          3
       10          4
        4          5
        3          6
        1          7
        3         10
        4        11 TO 20
        2        21 TO 30
        1        31 TO 9999999: 31+
-----
      353

Refusal(-1)          0
Don't Know(-2)       0
TOTAL =====>    353  VALID SKIP(-4)    457  NON-INTERVIEW(-5)    0

Min:          0          Max:          60          Mean:          1.21

```

Lead In: R03482.00[Default]
 Default Next Question: R03484.00

 R03484.00 [D84] Survey Year: 2003

EVER DRUNK ALCOHOLIC BEVERAGES

Have you ever drunk alcoholic beverages?

```

      113          1 Yes
      233          2 No
-----
      346

```

Refusal(-1) 5
 Don't Know(-2) 0
 TOTAL =====> 351 VALID SKIP(-4) 459 NON-INTERVIEW(-5) 0

Lead In: R03483.00[Default]
 Default Next Question: R03485.00

 R03485.00 [D85] Survey Year: 2003

EVER FELT SHOULD CUT DOWN ON DRINKING

Have you ever felt that you should cut down on drinking?

52 1 Yes
 520 2 No

 572

Refusal(-1) 0
 Don't Know(-2) 0
 TOTAL =====> 572 VALID SKIP(-4) 238 NON-INTERVIEW(-5) 0

Lead In: R03484.00[Default] R03482.00[0:0] R03482.00[-1:-1] R03482.00[-2:-2]
 Default Next Question: R03486.00

 R03486.00 [D86] Survey Year: 2003

HOW OFTEN LIGHT PHYSICAL ACTIVITY

The next few questions are about exercise. How often do you participate in light physical exercise such as walking, dancing, gardening, golfing, bowling etc.?

DIGITS

131 0
 75 1
 104 2
 114 3
 57 4
 77 5
 16 6
 222 7
 1 9
 5 10
 1 11 TO 20
 1 31 TO 9999999: 31+

 804

Refusal(-1) 3 (Go To R03489.00)
 Don't Know(-2) 3 (Go To R03489.00)
 TOTAL =====> 810 VALID SKIP(-4) 0 NON-INTERVIEW(-5) 0

Min: 0 Max: 35 Mean: 3.73

Lead In: R03485.00[Default]
 Default Next Question: R03487.00

R03487.00 [D86A] Survey Year: 2003

UNIT D86

How often do you participate in light physical exercise such as walking,
dancing, gardening, golfing, bowling etc.? UNIT

639	1 PER WEEK
26	2 PER MONTH
5	3 PER YEAR
3	4 OTHER PERIOD (SPECIFY)

673

Refusal(-1)	0				
Don't Know(-2)	0				
TOTAL =====>	673	VALID SKIP(-4)	137	NON-INTERVIEW(-5)	0

Lead In: R03486.00[Default]
Default Next Question: R03488.00

R03488.00 [D86B] Survey Year: 2003

SPECIFY D86A

Other Specify

Refusal(-1)	0				
Don't Know(-2)	0				
TOTAL =====>	3	VALID SKIP(-4)	807	NON-INTERVIEW(-5)	0

Lead In: R03487.00[Default]
Default Next Question: R03489.00

R03489.00 [D87] Survey Year: 2003

HOW OFTEN VIGOROUS PHYSICAL ACTIVITY

How often do you participate in vigorous physical exercise or sports such as
aerobics, running, swimming, or bicycling? DIGITS

438	0
88	1
104	2
74	3
37	4
29	5
9	6
19	7
1	10
3	11 TO 20

802

Refusal(-1)	4	(Go To R03492.00)
Don't Know(-2)	4	(Go To R03492.00)

TOTAL =====> 810 VALID SKIP(-4) 0 NON-INTERVIEW(-5) 0
 Min: 0 Max: 20 Mean: 1.32

Lead In: R03488.00[Default] R03486.00[-1:-1] R03486.00[-2:-2]
 Default Next Question: R03490.00

 R03490.00 [D87A] Survey Year: 2003

UNIT D87

How often do you participate in vigorous physical exercise or sports such as
 aerobics, running, swimming, or bicycling? UNIT

304 1 PER WEEK
 50 2 PER MONTH
 8 3 PER YEAR
 2 4 OTHER PERIOD (SPECIFY)

 364

Refusal(-1) 0
 Don't Know(-2) 0
 TOTAL =====> 364 VALID SKIP(-4) 446 NON-INTERVIEW(-5) 0

Lead In: R03489.00[Default]
 Default Next Question: R03491.00

 R03491.00 [D87B] Survey Year: 2003

SPECIFY D87A

Other (Specify)

Refusal(-1) 0
 Don't Know(-2) 0
 TOTAL =====> 2 VALID SKIP(-4) 808 NON-INTERVIEW(-5) 0

Lead In: R03490.00[Default]
 Default Next Question: R03492.00

 R03492.00 [D88] Survey Year: 2003

FELT SAD OR DEPRESSED

During the past 12 months, was there ever a time when you felt sad, blue, or
 depressed for two weeks or more in a row?

99 1 Yes
 702 2 No
 4 3 (VOL) DID NOT FEEL DEPRESSED BECAUSE ON ANTI-DEPRESSANT MEDICATION

 805

Refusal(-1) 4
 Don't Know(-2) 1
 TOTAL =====> 810 VALID SKIP(-4) 0 NON-INTERVIEW(-5) 0

Lead In: R03491.00[Default] R03489.00[-2:-2] R03489.00[-1:-1]
Default Next Question: R03493.00

R03493.00 [D89] Survey Year: 2003

TWO WEEK PERIOD WHEN FEELINGS WERE WORST

Please think of the two-week period during the past 12 months when these feelings were worst. During that time did the feelings of being sad, blue, or depressed usually last all day long, most of the day, about half the day, or less than half the day?

26 1 ALL DAY LONG
24 2 MOST OF THE DAY
24 3 ABOUT HALF THE DAY
25 4 LESS THAN HALF THE DAY

99

Refusal(-1) 0
Don't Know(-2) 0
TOTAL =====> 99 VALID SKIP(-4) 711 NON-INTERVIEW(-5) 0

Lead In: R03492.00[Default]
Default Next Question: R03494.00

R03494.00 [D90] Survey Year: 2003

TWO WEEK PERIOD IN U.S.

Was that two-week period in the United States?

48 1 Yes (Go To R03496.00)
2 2 No

50

Refusal(-1) 0
Don't Know(-2) 0
TOTAL =====> 50 VALID SKIP(-4) 760 NON-INTERVIEW(-5) 0

Lead In: R03493.00[Default]
Default Next Question: R03495.00

R03495.00 [D90AM0] Survey Year: 2003

IN WHAT COUNTRY FELT SAD

In what country was that?

1 305 LATIN AMERICA & THE CARIBBEAN
1 307 MIDDLE EAST & NORTH AFRICA

2

Refusal(-1) 0

Don't Know(-2) 0
TOTAL =====> 2 VALID SKIP(-4) 808 NON-INTERVIEW(-5) 0

Lead In: R03494.00[Default]
Default Next Question: R03496.00

R03496.00 [D91] Survey Year: 2003

FEEL THIS WAY EVERY DAY

During those two weeks, did you feel this way every day, almost every day, or less often than that?

28 1 EVERY DAY
18 2 ALMOST EVERY DAY
4 3 LESS OFTEN THAN THAT

50

Refusal(-1) 0
Don't Know(-2) 0
TOTAL =====> 50 VALID SKIP(-4) 760 NON-INTERVIEW(-5) 0

Lead In: R03495.00[Default] R03494.00[1:1]
Default Next Question: R03497.00

R03497.00 [D92] Survey Year: 2003

LOSE INTEREST

During those two weeks, did you lose interest in most things?

INTERVIEWER: IF R SAYS USUALLY NO INTEREST IN THINGS: REPEAT Q ADDING: 'MORE THAN IS USUAL FOR YOU'

29 1 Yes
16 2 No

45

Refusal(-1) 0
Don't Know(-2) 1
TOTAL =====> 46 VALID SKIP(-4) 764 NON-INTERVIEW(-5) 0

Lead In: R03496.00[Default]
Default Next Question: R03498.00

R03498.00 [D93] Survey Year: 2003

FEEL MORE TIRED

Thinking about those same two weeks, did you ever feel more tired out or low in energy than is usual for you?

33 1 Yes
12 2 No

45

Refusal(-1)	0				
Don't Know(-2)	1				
TOTAL =====>	46	VALID SKIP(-4)	764	NON-INTERVIEW(-5)	0

Lead In: R03497.00[Default]
Default Next Question: R03499.00

R03499.00 [D94] Survey Year: 2003

LOSE APPETITE

During those same two weeks, did you lose your appetite?

24	1 Yes
21	2 No

45	

Refusal(-1)	0				
Don't Know(-2)	1				
TOTAL =====>	46	VALID SKIP(-4)	764	NON-INTERVIEW(-5)	0

Lead In: R03498.00[Default]
Default Next Question: R03500.00

R03500.00 [D95] Survey Year: 2003

HAVE TROUBLE FALLING ASLEEP

Did you have more trouble falling asleep than you usually do during those two weeks?

30	1 Yes
15	2 No

45	

Refusal(-1)	0				
Don't Know(-2)	1				
TOTAL =====>	46	VALID SKIP(-4)	764	NON-INTERVIEW(-5)	0

Lead In: R03499.00[Default]
Default Next Question: R03501.00

R03501.00 [D96] Survey Year: 2003

D95 HAPPEN HOW OFTEN

Did that happen every night, nearly every night, or less often during those two weeks?

13	1 EVERY NIGHT
14	2 NEARLY EVERY NIGHT
3	3 LESS OFTEN

30

Refusal(-1)	0				
Don't Know(-2)	0				
TOTAL =====>	30	VALID SKIP(-4)	780	NON-INTERVIEW(-5)	0

Lead In: R03500.00[Default]
Default Next Question: R03502.00

R03502.00 [D97] Survey Year: 2003

HAVE TROUBLE CONCENTRATING

During that same two-week period did you have a lot more trouble concentrating than usual?

31	1 Yes
13	2 No

44	

Refusal(-1)	0				
Don't Know(-2)	2				
TOTAL =====>	46	VALID SKIP(-4)	764	NON-INTERVIEW(-5)	0

Lead In: R03501.00[Default]
Default Next Question: R03503.00

R03503.00 [D98] Survey Year: 2003

FEEL DOWN ON SELF

People sometimes feel down on themselves, and no good or worthless. During that two-week period, did you feel this way?

19	1 Yes
25	2 No

44	

Refusal(-1)	0				
Don't Know(-2)	2				
TOTAL =====>	46	VALID SKIP(-4)	764	NON-INTERVIEW(-5)	0

Lead In: R03502.00[Default]
Default Next Question: R03504.00

R03504.00 [D99] Survey Year: 2003

THINK ABOUT DEATH

Did you think a lot about death - either your own, someone else's, or death in general - during those two weeks?

18	1 Yes
27	2 No

45

Refusal(-1)	0				
Don't Know(-2)	1				
TOTAL =====>	46	VALID SKIP(-4)	764	NON-INTERVIEW(-5)	0

Lead In: R03503.00[Default]
Default Next Question: R03505.00

R03505.00 [D100] Survey Year: 2003

EVER FELT SAD ABOUT IMMIGRATION PROCESS

During the past 12 months, have you ever felt sad, blue, or depressed because of the process of becoming a permanent resident alien?

0	1 Yes
1	2 No

1

Refusal(-1)	0				
Don't Know(-2)	1				
TOTAL =====>	2	VALID SKIP(-4)	808	NON-INTERVIEW(-5)	0

Lead In: R03504.00[Default]
Default Next Question: R03507.00

R03507.00 [D102] Survey Year: 2003

HAVE PHYSICAL CONDITION THAT LIMIT WORK

Do you have any physical or nervous condition that limits the type of work or the amount of work you can do?

25	1 Yes
781	2 No

806

Refusal(-1)	4				
Don't Know(-2)	0				
TOTAL =====>	810	VALID SKIP(-4)	0	NON-INTERVIEW(-5)	0

Lead In: R03505.00[Default]
Default Next Question: R03508.00

R03508.00 [D103] Survey Year: 2003

CONDITION KEEP FROM DOING SOME WORK

Does this condition keep you from doing some types of work?

23	1 Yes
2	2 No

25

Refusal(-1)	0				
Don't Know(-2)	0				
TOTAL =====>	25	VALID SKIP(-4)	785	NON-INTERVIEW(-5)	0

Lead In: R03507.00[Default]
 Default Next Question: R03509.00

 R03509.00 [D104] Survey Year: 2003

HEALTH WHILE GROWING UP

Consider your health while you were growing up, from birth to age 16. Would you say that your health during that time was excellent, very good, good, fair, or poor?

515	1 EXCELLENT
177	2 VERY GOOD
93	3 GOOD
21	4 FAIR
2	5 POOR

 808

Refusal(-1)	2				
Don't Know(-2)	0				
TOTAL =====>	810	VALID SKIP(-4)	0	NON-INTERVIEW(-5)	0

Lead In: R03508.00[Default]
 Default Next Question: R03510.00

 R03510.00 [D105] Survey Year: 2003

MISS SCHOOL DUE TO HEALTH

Because of a health condition, did you ever miss school for one month or more?

40	1 Yes
768	2 No

 808

Refusal(-1)	2				
Don't Know(-2)	0				
TOTAL =====>	810	VALID SKIP(-4)	0	NON-INTERVIEW(-5)	0

Lead In: R03509.00[Default]
 Default Next Question: R03511.00

 R03511.00 [D106M0] Survey Year: 2003

MOST SERIOUS HEALTH CONDITION CAUSE D106

What was the most serious health condition that caused this problem?

1	1 ACCIDENT RESULTING IN INJURY
1	2 ALLERGIES

0	3 ANEMIA
1	4 APPENDICITIS
0	5 ARTHRITIS/RHEUMATISM/GOUT
4	6 ASTHMA/BRONCHITIS
1	7 BACK PROBLEMS
0	8 BLOOD CLOT SYMPTOMS/DVT
1	9 BROKEN LIMB
0	10 BURN OR SCALD
0	11 OTHER BROKEN BONE
2	12 CANCER/TUMOR
2	13 COLD OR FLU
0	14 CUT/LACERATIONS CUT/LACERATIONS
1	15 CYST OR BOIL
0	16 CYSTITIS/BLADDER DISEASE
0	17 DERMATITIS/RASH
0	18 DIABETES
0	19 EAR/HEARING PROBLEMS
1	20 EPILEPSY/PALSY
0	21 EYE/VISION PROBLEM
0	22 FAINTING
0	23 FEMALE REPRODUCTIVE PROBLEMS
0	24 FOOT PROBLEMS/INJURIES
0	25 GUNSHOT WOUND
1	26 HAND PROBLEMS/INJURIES
0	27 HEAD TRAUMA/INJURY
0	28 HEADACHE/MIGRAINES
0	29 HEART/CARDIOVASCULAR PROBLEMS
2	30 HEPATITIS
0	31 OTHER LIVER DISEASE
0	32 HERNIA
0	33 HERPES
0	34 INTESTINAL INFECTION/DIGESTIVE PROBLEMS
0	35 KIDNEY DISEASE
0	36 LUPUS
0	37 MALARIA/YELLOW FEVER
0	38 MALNUTRITION
1	39 MEASLES/CHICKEN POX/MUMPS
0	40 MENINGITIS
0	41 MENTAL HEALTH PROBLEMS
6	42 MONONUCLEOSIS
1	43 PARALYSIS
1	44 PLEURISY
2	45 PNEUMONIA
1	46 OTHER RESPIRATORY INFECTION
0	47 POISONING
0	48 POLIO
0	49 RHEUMATIC FEVER
0	50 SMALLPOX
0	51 SPRAIN/TEAR/DISLOCATION
4	52 SURGERY
0	53 THYROID PROBLEM
1	54 TONSILLITIS
0	55 TUBERCULOSIS/TB
0	56 TYPHOID/TYPHUS
0	57 ULCERS
4	99 UNKNOWN

39

Refusal(-1)	0				
Don't Know(-2)	1				
TOTAL =====>	40	VALID SKIP(-4)	770	NON-INTERVIEW(-5)	0

Lead In: R03510.00[Default]
Default Next Question: R03512.00

R03512.00 [D107] Survey Year: 2003

SPORTS RESTRICTED FOR THREE MONTHS

Because of a health condition, were your sports or physical activities ever restricted for three months or more?

37	1 Yes
769	2 No

806

Refusal(-1)	2				
Don't Know(-2)	2				
TOTAL =====>	810	VALID SKIP(-4)	0	NON-INTERVIEW(-5)	0

Lead In: R03511.00[Default]
Default Next Question: R03513.00

R03513.00 [D108M0] Survey Year: 2003

MOST SERIOUS HEALTH CONDITION CAUSE D107

What was the most serious health condition that caused this problem?

4	1 ACCIDENT RESULTING IN INJURY
0	2 ALLERGIES
0	3 ANEMIA
0	4 APPENDICITIS
0	5 ARTHRITIS/RHEUMATISM/GOUT
3	6 ASTHMA/BRONCHITIS
0	7 BACK PROBLEMS
0	8 BLOOD CLOT SYMPTOMS/DVT
7	9 BROKEN LIMB
0	10 BURN OR SCALD
1	11 OTHER BROKEN BONE
2	12 CANCER/TUMOR
0	13 COLD OR FLU
0	14 CUT/LACERATIONS CUT/LACERATIONS
0	15 CYST OR BOIL
0	16 CYSTITIS/BLADDER DISEASE
0	17 DERMATITIS/RASH
0	18 DIABETES
0	19 EAR/HEARING PROBLEMS
0	20 EPILEPSY/PALSY
0	21 EYE/VISION PROBLEM
0	22 FAINTING
0	23 FEMALE REPRODUCTIVE PROBLEMS

0 24 FOOT PROBLEMS/INJURIES
 0 25 GUNSHOT WOUND
 0 26 HAND PROBLEMS/INJURIES
 0 27 HEAD TRAUMA/INJURY
 0 28 HEADACHE/MIGRAINES
 0 29 HEART/CARDIOVASCULAR PROBLEMS
 0 30 HEPATITIS
 0 31 OTHER LIVER DISEASE
 0 32 HERNIA
 0 33 HERPES
 0 34 INTESTINAL INFECTION/DIGESTIVE PROBLEMS
 0 35 KIDNEY DISEASE
 0 36 LUPUS
 0 37 MALARIA/YELLOW FEVER
 0 38 MALNUTRITION
 0 39 MEASLES/CHICKEN POX/MUMPS
 0 40 MENINGITIS
 0 41 MENTAL HEALTH PROBLEMS
 1 42 MONONUCLEOSIS
 1 43 PARALYSIS
 0 44 PLEURISY
 1 45 PNEUMONIA
 0 46 OTHER RESPIRATORY INFECTION
 0 47 POISONING
 0 48 POLIO
 1 49 RHEUMATIC FEVER
 0 50 SMALLPOX
 8 51 SPRAIN/TEAR/DISLOCATION
 8 52 SURGERY
 0 53 THYROID PROBLEM
 0 54 TONSILLITIS
 0 55 TUBERCULOSIS/TB
 0 56 TYPHOID/TYPHUS
 0 57 ULCERS
 0 99 UNKNOWN

37

Refusal(-1) 0
 Don't Know(-2) 0
 TOTAL =====> 37 VALID SKIP(-4) 773 NON-INTERVIEW(-5) 0

Lead In: R03512.00[Default]
 Default Next Question: R03514.00

R03514.00 [D109] Survey Year: 2003

HOW OLD HAD HEALTH CONDITION D107

About how old were you when you had this serious health condition?

2 1 TO 4
 6 5 TO 8
 14 9 TO 14
 13 15 TO 19
 1 25 TO 29
 1 40 TO 44

37

Refusal(-1)	0				
Don't Know(-2)	0				
TOTAL =====>	37	VALID SKIP(-4)	773	NON-INTERVIEW(-5)	0
Min:	2	Max:	40	Mean:	13.65

Lead In: R03513.00[Default]
Default Next Question: R03515.00

R03515.00 [D110] Survey Year: 2003

CONFINE TO BED DUE TO HEALTH

Because of a health condition, were you ever confined to bed or home one month or more?

40	1 Yes
768	2 No

808

Refusal(-1)	2				
Don't Know(-2)	0				
TOTAL =====>	810	VALID SKIP(-4)	0	NON-INTERVIEW(-5)	0

Lead In: R03514.00[Default]
Default Next Question: R03516.00

R03516.00 [D111M0] Survey Year: 2003

MOST SERIOUS HEALTH CONDITION CAUSE D110

What was the most serious health condition that caused this problem?

3	1 ACCIDENT RESULTING IN INJURY
0	2 ALLERGIES
0	3 ANEMIA
1	4 APPENDICITIS
0	5 ARTHRITIS/RHEUMATISM/GOUT
1	6 ASTHMA/BRONCHITIS
1	7 BACK PROBLEMS
1	8 BLOOD CLOT SYMPTOMS/DVT
3	9 BROKEN LIMB
2	10 BURN OR SCALD
1	11 OTHER BROKEN BONE
1	12 CANCER/TUMOR
1	13 COLD OR FLU
1	14 CUT/LACERATIONS CUT/LACERATIONS
0	15 CYST OR BOIL
0	16 CYSTITIS/BLADDER DISEASE
0	17 DERMATITIS/RASH
0	18 DIABETES
0	19 EAR/HEARING PROBLEMS
0	20 EPILEPSY/PALSY

0 21 EYE/VISION PROBLEM
 0 22 FAINTING
 1 23 FEMALE REPRODUCTIVE PROBLEMS
 0 24 FOOT PROBLEMS/INJURIES
 0 25 GUNSHOT WOUND
 0 26 HAND PROBLEMS/INJURIES
 0 27 HEAD TRAUMA/INJURY
 0 28 HEADACHE/MIGRAINES
 1 29 HEART/CARDIOVASCULAR PROBLEMS
 2 30 HEPATITIS
 0 31 OTHER LIVER DISEASE
 0 32 HERNIA
 0 33 HERPES
 1 34 INTESTINAL INFECTION/DIGESTIVE PROBLEMS
 1 35 KIDNEY DISEASE
 0 36 LUPUS
 0 37 MALARIA/YELLOW FEVER
 0 38 MALNUTRITION
 1 39 MEASLES/CHICKEN POX/MUMPS
 0 40 MENINGITIS
 1 41 MENTAL HEALTH PROBLEMS
 4 42 MONONUCLEOSIS
 1 43 PARALYSIS
 0 44 PLEURISY
 2 45 PNEUMONIA
 0 46 OTHER RESPIRATORY INFECTION
 0 47 POISONING
 0 48 POLIO
 1 49 RHEUMATIC FEVER
 0 50 SMALLPOX
 2 51 SPRAIN/TEAR/DISLOCATION
 4 52 SURGERY
 0 53 THYROID PROBLEM
 0 54 TONSILLITIS
 0 55 TUBERCULOSIS/TB
 1 56 TYPHOID/TYPHUS
 0 57 ULCERS
 1 99 UNKNOWN

40

Refusal(-1) 0
 Don't Know(-2) 0
 TOTAL =====> 40 VALID SKIP(-4) 770 NON-INTERVIEW(-5) 0

Lead In: R03515.00[Default]
 Default Next Question: R03517.00

R03517.00 [D112] Survey Year: 2003

COMPARE CURRENT HEALTH TO PEOPLE IN HOME

If you compared your current health to people in your home country, how would you rate it - excellent, very good, good, fair, or poor?

159 1 EXCELLENT
 107 2 VERY GOOD

96 3 GOOD
 16 4 FAIR
 4 5 POOR

 382

Refusal(-1) 2
 Don't Know(-2) 7
 TOTAL =====> 391 VALID SKIP(-4) 419 NON-INTERVIEW(-5) 0

Lead In: R03516.00[Default]
 Default Next Question: R03518.00

 R03518.00 [D113] Survey Year: 2003

HOW OFTEN SEE DOCTOR BEFORE TO U.S.

Before you most recently came to the United States to live, about how often did you see a doctor? Was it more than once a year, about once a year, about once every two years, seldom, or never?

72 1 MORE THAN ONCE A YEAR
 117 2 ABOUT ONCE A YEAR
 15 3 ABOUT ONCE EVERY TWO YEARS
 118 4 SELDOM
 50 5 NEVER

 372

Refusal(-1) 8
 Don't Know(-2) 11
 TOTAL =====> 391 VALID SKIP(-4) 419 NON-INTERVIEW(-5) 0

Lead In: R03517.00[Default]
 Default Next Question: R03519.00

 R03519.00 [D114] Survey Year: 2003

COMPARE SIMILARITY IN DIET

Using a scale from one to ten where 10 indicates exactly the same and 1 means completely different, how would you compare the similarity in the diet in the food you now normally eat in the United States with the food you normally ate in your home country?

71 1
 13 2
 24 3
 22 4
 54 5
 17 6
 32 7
 33 8
 30 9
 79 10 TO 9999999999: 10+

 375

Refusal(-1)	8				
Don't Know(-2)	7				
Invalid Skip(-3)	1				
TOTAL =====>	391	VALID SKIP(-4)	419	NON-INTERVIEW(-5)	0

Min: 1 Max: 10 Mean: 5.81

Lead In: R03518.00[Default]
 Default Next Question: R03520.00

 R03520.00 [D115] Survey Year: 2003

RARELY ATE BEFORE U.S.

Is there something you eat a lot now that you rarely ate before you came to the United States?

176	1 Yes
200	2 No

376	

Refusal(-1)	8				
Don't Know(-2)	7				
TOTAL =====>	391	VALID SKIP(-4)	419	NON-INTERVIEW(-5)	0

Lead In: R03519.00[Default]
 Default Next Question: R03521.00

 R03521.00 [D116] Survey Year: 2003

MOST IMPORTANT THING EAT A LOT NOW

Please tell me the most important thing that you eat a lot now that you rarely ate before you came to the United States?

Refusal(-1)	0				
Don't Know(-2)	0				
TOTAL =====>	176	VALID SKIP(-4)	634	NON-INTERVIEW(-5)	0

Lead In: R03520.00[Default]
 Default Next Question: R03522.00

 R03522.00 [D117] Survey Year: 2003

ATE REGULARLY BEFORE US

Is there something you ate regularly before coming to the United States that you rarely eat now?

150	1 Yes
226	2 No

376	

Refusal(-1)	8
-------------	---

Don't Know(-2) 7
TOTAL =====> 391 VALID SKIP(-4) 419 NON-INTERVIEW(-5) 0

Lead In: R03521.00[Default]
Default Next Question: R03523.00

R03523.00 [D118] Survey Year: 2003

MOST IMPORTANT THING RARELY EAT NOW

Please tell me the most important thing that you ate regularly before coming to the United States that you rarely eat now?

Refusal(-1) 0
Don't Know(-2) 0
TOTAL =====> 149 VALID SKIP(-4) 661 NON-INTERVIEW(-5) 0

Lead In: R03522.00[Default]
Default Next Question: R03524.00

R03524.00 [D119] Survey Year: 2003

USUAL SOURCE OF HEALTH CARE IN U.S.

What is your usual source of your health care in the United States?

Refusal(-1) 0
Don't Know(-2) 0
TOTAL =====> 810 VALID SKIP(-4) 0 NON-INTERVIEW(-5) 0

Lead In: R03523.00[Default]
Default Next Question: R03526.00

R03526.00 [D121] Survey Year: 2003

USUAL SOURCE OF HEALTH CARE BEFORE PERMA

What was your usual source of health care before you became a permanent resident?

Refusal(-1) 0
Don't Know(-2) 0
TOTAL =====> 318 VALID SKIP(-4) 492 NON-INTERVIEW(-5) 0

Lead In: R03524.00[Default]
Default Next Question: R03527.00

R03527.00 [D122.01] Survey Year: 2003

HAS R EVER RECEIVED HEALTH TREATMENT - ACUPUNCTURE?

Have you ever received... acupuncture?

INTERVIEWER: PLEASE SELECT ALL THAT APPLY

94 1 Yes
715 2 No

809

Refusal(-1) 1
Don't Know(-2) 0
TOTAL =====> 810 VALID SKIP(-4) 0 NON-INTERVIEW(-5) 0

Lead In: R03526.00[Default]
Default Next Question: R03528.00

R03528.00 [D122.02] Survey Year: 2003

HAS R EVER RECEIVED HEALTH TREATMENT - CHIROPRACTIC CARE?

Have you ever received... chiropractic care?

INTERVIEWER: PLEASE SELECT ALL THAT APPLY

222 1 Yes
586 2 No

808

Refusal(-1) 1
Don't Know(-2) 1
TOTAL =====> 810 VALID SKIP(-4) 0 NON-INTERVIEW(-5) 0

Lead In: R03527.00[Default]
Default Next Question: R03529.00

R03529.00 [D122.03] Survey Year: 2003

HAS R EVER RECEIVED HEALTH TREATMENT - MASSAGE THERAPY?

Have you ever received... massage therapy?

INTERVIEWER: PLEASE SELECT ALL THAT APPLY

211 1 Yes
598 2 No

809

Refusal(-1) 1
Don't Know(-2) 0
TOTAL =====> 810 VALID SKIP(-4) 0 NON-INTERVIEW(-5) 0

Lead In: R03528.00[Default]
Default Next Question: R03530.00

R03530.00 [D122.04] Survey Year: 2003

HAS R EVER RECEIVED HEALTH TREATMENT - BIO-FEEDBACK TRAINING?

Have you ever received... bio-feedback training?

INTERVIEWER: PLEASE SELECT ALL THAT APPLY

16 1 Yes
789 2 No

805

Refusal(-1) 1
Don't Know(-2) 4
TOTAL =====> 810 VALID SKIP(-4) 0 NON-INTERVIEW(-5) 0

Lead In: R03529.00[Default]
Default Next Question: R03531.00

R03531.00 [D122.05] Survey Year: 2003

HAS R EVER RECEIVED HEALTH TREATMENT - TRAINING OR PRACTICE OF MEDITATION, IMAGERY, OR RELAXATION TECHNIQUES?

Have you ever received... training or practice of meditation, imagery, or relaxation techniques?

INTERVIEWER: PLEASE SELECT ALL THAT APPLY

107 1 Yes
702 2 No

809

Refusal(-1) 1
Don't Know(-2) 0
TOTAL =====> 810 VALID SKIP(-4) 0 NON-INTERVIEW(-5) 0

Lead In: R03530.00[Default]
Default Next Question: R03532.00

R03532.00 [D122.06] Survey Year: 2003

HAS R EVER RECEIVED HEALTH TREATMENT - HOMEOPATHIC TREATMENT?

Have you ever received... homeopathic treatment?

INTERVIEWER: PLEASE SELECT ALL THAT APPLY

74 1 Yes
734 2 No

808

Refusal(-1) 1
Don't Know(-2) 1
TOTAL =====> 810 VALID SKIP(-4) 0 NON-INTERVIEW(-5) 0

Lead In: R03531.00[Default]
Default Next Question: R03533.00

R03533.00 [D122.07] Survey Year: 2003

HAS R EVER RECEIVED HEALTH TREATMENT - SPIRITUAL HEALING OR PRAYER?

Have you ever received... spiritual healing or prayer?

INTERVIEWER: PLEASE SELECT ALL THAT APPLY

153 1 Yes
655 2 No

808

Refusal(-1) 1
Don't Know(-2) 1
TOTAL =====> 810 VALID SKIP(-4) 0 NON-INTERVIEW(-5) 0

Lead In: R03532.00[Default]
Default Next Question: R03534.00

R03534.00 [D122.08] Survey Year: 2003

HAS R EVER RECEIVED HEALTH TREATMENT - HYPNOSIS?

Have you ever received... hypnosis?

INTERVIEWER: PLEASE SELECT ALL THAT APPLY

35 1 Yes
773 2 No

808

Refusal(-1) 2
Don't Know(-2) 0
TOTAL =====> 810 VALID SKIP(-4) 0 NON-INTERVIEW(-5) 0

Lead In: R03533.00[Default]
Default Next Question: R03535.00

R03535.00 [D122.09] Survey Year: 2003

HAS R EVER RECEIVED HEALTH TREATMENT - TRADITIONAL MEDICINE?

Have you ever received... traditional medicine, such as Chinese, Ayurvedic, American Indian, etc.?

INTERVIEWER: PLEASE SELECT ALL THAT APPLY

60 1 Yes
748 2 No

808

Refusal(-1) 1
Don't Know(-2) 1
TOTAL =====> 810 VALID SKIP(-4) 0 NON-INTERVIEW(-5) 0

Lead In: R03534.00[Default]
Default Next Question: R03536.00

R03536.00 [D123.01]

Survey Year: 2003

R RECEIVED HEALTH TREATMENT DURING LAST YEAR IN OTHER COUNTRY?
ACUPUNCTURE

Did you receive ACUPUNCTURE during your last year in another country before coming to the United States to live?

11 1 Yes
30 2 No

41

Refusal(-1) 0
Don't Know(-2) 0
TOTAL =====> 41 VALID SKIP(-4) 769 NON-INTERVIEW(-5) 0

Lead In: R03535.00[Default]
Default Next Question: R03537.00

R03537.00 [D123.02]

Survey Year: 2003

R RECEIVED HEALTH TREATMENT DURING LAST YEAR IN OTHER COUNTRY?
CHIROPRACTIC CARE

Did you receive CHIROPRACTIC CARE during your last year in another country before coming to the United States to live?

8 1 Yes
59 2 No

67

Refusal(-1) 0
Don't Know(-2) 0
TOTAL =====> 67 VALID SKIP(-4) 743 NON-INTERVIEW(-5) 0

Lead In: R03536.00[Default]
Default Next Question: R03538.00

R03538.00 [D123.03]

Survey Year: 2003

R RECEIVED HEALTH TREATMENT DURING LAST YEAR IN OTHER COUNTRY?
MASSAGE THERAPY

Did you receive MASSAGE THERAPY during your last year in another country before coming to the United States to live?

16 1 Yes
53 2 No

69

Refusal(-1) 0
Don't Know(-2) 0
TOTAL =====> 69 VALID SKIP(-4) 741 NON-INTERVIEW(-5) 0

Lead In: R03537.00[Default]
Default Next Question: R03539.00

R03539.00 [D123.04] Survey Year: 2003

R RECEIVED HEALTH TREATMENT DURING LAST YEAR IN OTHER COUNTRY?
BIO-FEEDBACK TRAINING

Did you receive BIO-FEEDBACK TRAINING during your last year in another country before coming to the United States to live?

0 1 Yes
4 2 No

4

Refusal(-1) 0
Don't Know(-2) 0
TOTAL =====> 4 VALID SKIP(-4) 806 NON-INTERVIEW(-5) 0

Lead In: R03538.00[Default]
Default Next Question: R03540.00

R03540.00 [D123.05] Survey Year: 2003

R RECEIVED HEALTH TREATMENT DURING LAST YEAR IN OTHER COUNTRY?
TRAINING OR PRACTICE OF MEDITATION, IMAGERY, OR RELAXATION TECHNIQUES

Did you receive TRAINING OR PRACTICE OF MEDITATION, IMAGERY, OR RELAXATION TECHNIQUES during your last year in another country before coming to the United States to live?

4 1 Yes
21 2 No

25

Refusal(-1) 0
Don't Know(-2) 0
TOTAL =====> 25 VALID SKIP(-4) 785 NON-INTERVIEW(-5) 0

Lead In: R03539.00[Default]
Default Next Question: R03541.00

R03541.00 [D123.06] Survey Year: 2003

R RECEIVED HEALTH TREATMENT DURING LAST YEAR IN OTHER COUNTRY?
HOMEOPATHIC TREATMENT

Did you receive HOMEOPATHIC TREATMENT during your last year in another country before coming to the United States to live?

10 1 Yes
16 2 No

26

Refusal(-1) 0

Don't Know(-2) 0
TOTAL =====> 26 VALID SKIP(-4) 784 NON-INTERVIEW(-5) 0

Lead In: R03540.00[Default]
Default Next Question: R03542.00

R03542.00 [D123.07] Survey Year: 2003

R RECEIVED HEALTH TREATMENT DURING LAST YEAR IN OTHER COUNTRY?
SPIRITUAL HEALING OR PRAYER

Did you receive SPIRITUAL HEALING OR PRAYER during your last year in another country before coming to the United States to live?

14 1 Yes
19 2 No

33

Refusal(-1) 0
Don't Know(-2) 0
TOTAL =====> 33 VALID SKIP(-4) 777 NON-INTERVIEW(-5) 0

Lead In: R03541.00[Default]
Default Next Question: R03543.00

R03543.00 [D123.08] Survey Year: 2003

R RECEIVED HEALTH TREATMENT DURING LAST YEAR IN OTHER COUNTRY?
HYPNOSIS

Did you receive HYPNOSIS during your last year in another country before coming to the United States to live?

0 1 Yes
2 2 No

2

Refusal(-1) 0
Don't Know(-2) 0
TOTAL =====> 2 VALID SKIP(-4) 808 NON-INTERVIEW(-5) 0

Lead In: R03542.00[Default]
Default Next Question: R03544.00

R03544.00 [D123.09] Survey Year: 2003

R RECEIVED HEALTH TREATMENT DURING LAST YEAR IN OTHER COUNTRY?
TRADITIONAL MEDICINE, SUCH AS CHINESE, AYURVEDIC, AMERICAN INDIAN, ETC.

Did you receive TRADITIONAL MEDICINE, SUCH AS CHINESE, AYURVEDIC, AMERICAN INDIAN, ETC. during your last year in another country before coming to the United States to live?

11 1 Yes
16 2 No

27

Refusal(-1)	0				
Don't Know(-2)	0				
TOTAL =====>	27	VALID SKIP(-4)	783	NON-INTERVIEW(-5)	0

Lead In: R03543.00[Default]
Default Next Question: R03545.00

R03545.00 [D124.01] Survey Year: 2003

DID R RECEIVED HEALTH TREATMENT IN U.S.? ACUPUNCTURE

Did you ever receive ACUPUNCTURE in the United States?

77	1 Yes
17	2 No

94	

Refusal(-1)	0				
Don't Know(-2)	0				
TOTAL =====>	94	VALID SKIP(-4)	716	NON-INTERVIEW(-5)	0

Lead In: R03544.00[Default]
Default Next Question: R03546.00

R03546.00 [D124.02] Survey Year: 2003

DID R RECEIVED HEALTH TREATMENT IN U.S.? CHIROPRACTIC CARE

Did you ever receive CHIROPRACTIC CARE in the United States?

215	1 Yes
7	2 No

222	

Refusal(-1)	0				
Don't Know(-2)	0				
TOTAL =====>	222	VALID SKIP(-4)	588	NON-INTERVIEW(-5)	0

Lead In: R03545.00[Default]
Default Next Question: R03547.00

R03547.00 [D124.03] Survey Year: 2003

DID R RECEIVED HEALTH TREATMENT IN U.S.? MASSAGE THERAPY

Did you ever receive MASSAGE THERAPY in the United States?

197	1 Yes
14	2 No

211	

Refusal(-1)	0				
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Don't Know(-2) 0
TOTAL =====> 211 VALID SKIP(-4) 599 NON-INTERVIEW(-5) 0

Lead In: R03546.00[Default]
Default Next Question: R03548.00

R03548.00 [D124.04] Survey Year: 2003

DID R RECEIVED HEALTH TREATMENT IN U.S.? BIO-FEEDBACK TRAINING

Did you ever receive BIO-FEEDBACK TRAINING in the United States?

16 1 Yes
0 2 No

16

Refusal(-1) 0
Don't Know(-2) 0
TOTAL =====> 16 VALID SKIP(-4) 794 NON-INTERVIEW(-5) 0

Lead In: R03547.00[Default]
Default Next Question: R03549.00

R03549.00 [D124.05] Survey Year: 2003

DID R RECEIVED HEALTH TREATMENT IN U.S.? TRAINING OR PRACTICE OF MEDITATION, IMAGERY.
OR RELAXATION

Did you ever receive TRAINING OR PRACTICE OF MEDITATION, IMAGERY. OR RELAXATION in the United States?

92 1 Yes
15 2 No

107

Refusal(-1) 0
Don't Know(-2) 0
TOTAL =====> 107 VALID SKIP(-4) 703 NON-INTERVIEW(-5) 0

Lead In: R03548.00[Default]
Default Next Question: R03550.00

R03550.00 [D124.06] Survey Year: 2003

DID R RECEIVED HEALTH TREATMENT IN U.S.? HOMEOPATHIC TREATMENT

Did you ever receive HOMEOPATHIC TREATMENT in the United States?

53 1 Yes
21 2 No

74

Refusal(-1) 0
Don't Know(-2) 0

TOTAL =====> 74 VALID SKIP(-4) 736 NON-INTERVIEW(-5) 0

Lead In: R03549.00[Default]
Default Next Question: R03551.00

R03551.00 [D124.07] Survey Year: 2003

DID R RECEIVED HEALTH TREATMENT IN U.S.? SPIRITUAL HEALING OR PRAYER

Did you ever receive SPIRITUAL HEALING OR PRAYER in the United States?

142 1 Yes
11 2 No

153

Refusal(-1) 0
Don't Know(-2) 0
TOTAL =====> 153 VALID SKIP(-4) 657 NON-INTERVIEW(-5) 0

Lead In: R03550.00[Default]
Default Next Question: R03552.00

R03552.00 [D124.08] Survey Year: 2003

DID R RECEIVED HEALTH TREATMENT IN U.S.? HYPNOSIS

Did you ever receive HYPNOSIS in the United States?

34 1 Yes
1 2 No

35

Refusal(-1) 0
Don't Know(-2) 0
TOTAL =====> 35 VALID SKIP(-4) 775 NON-INTERVIEW(-5) 0

Lead In: R03551.00[Default]
Default Next Question: R03553.00

R03553.00 [D124.09] Survey Year: 2003

DID R RECEIVED HEALTH TREATMENT IN U.S.? TRADITIONAL MEDICINE, SUCH AS CHINESE, AYURVEDIC, AMERICAN INDIAN, ETC.

Did you ever receive TRADITIONAL MEDICINE, SUCH AS CHINESE, AYURVEDIC, AMERICAN INDIAN, ETC. in the United States?

42 1 Yes
18 2 No

60

Refusal(-1) 0
Don't Know(-2) 0
TOTAL =====> 60 VALID SKIP(-4) 750 NON-INTERVIEW(-5) 0

Lead In: R03552.00[Default]
Default Next Question: R03554.00

R03554.00 [D125] Survey Year: 2003

EVER TESTED FOR TB

Have you ever been tested for Tuberculosis?

620 1 Yes
173 2 No

793

Refusal(-1) 1
Don't Know(-2) 16
TOTAL =====> 810 VALID SKIP(-4) 0 NON-INTERVIEW(-5) 0

Lead In: R03553.00[Default]
Default Next Question: R03555.00

R03555.00 [D126] Survey Year: 2003

TEST POSITIVE FOR TB

Did you ever test positive for Tuberculosis?

36 1 Yes
583 2 No

619

Refusal(-1) 0
Don't Know(-2) 1
TOTAL =====> 620 VALID SKIP(-4) 190 NON-INTERVIEW(-5) 0

Lead In: R03554.00[Default]
Default Next Question: R03556.00

R03556.00 [D127] Survey Year: 2003

RECEIVE TREATMENT FOR TB

Did you receive any treatment for Tuberculosis?

20 1 Yes
16 2 No

36

Refusal(-1) 0
Don't Know(-2) 0
TOTAL =====> 36 VALID SKIP(-4) 774 NON-INTERVIEW(-5) 0

Lead In: R03555.00[Default]
Default Next Question: R03557.00

R03557.00 [D128] Survey Year: 2003

COMPLETE TREATMENT FOR TB

Did you complete your course of treatment for Tuberculosis?

18 1 Yes
2 2 No

20

Refusal(-1) 0
Don't Know(-2) 0
TOTAL =====> 20 VALID SKIP(-4) 790 NON-INTERVIEW(-5) 0

Lead In: R03556.00[Default]
Default Next Question: R03558.00

R03558.00 [D129M0] Survey Year: 2003

HOW MUCH WEIGH

About how much do you weigh? DIGITS

2 1 TO 50
32 51 TO 100
337 101 TO 150
313 151 TO 200
80 201 TO 250
12 251 TO 300

776

Refusal(-1) 18 (Go To R03560.00)
Don't Know(-2) 16 (Go To R03560.00)
TOTAL =====> 810 VALID SKIP(-4) 0 NON-INTERVIEW(-5) 0

Min: 50 Max: 300 Mean: 159

Lead In: R03557.00[Default]
Default Next Question: R03559.00

R03559.00 [D129AM0] Survey Year: 2003

UNIT WEIGH

About how much do you weigh? UNIT

750 1 POUNDS
26 2 KILOGRAMS

776

Refusal(-1) 0
Don't Know(-2) 0
TOTAL =====> 776 VALID SKIP(-4) 34 NON-INTERVIEW(-5) 0

Lead In: R03558.00[Default]
Default Next Question: R03560.00

R03560.00 [D130M0] Survey Year: 2003

HOW TALL

About how tall are you? DIGITS

INTERVIEWER: IF ANSWER IN FEET AND INCHES OR METERS AND CENTIMETERS, FIRST
COLLECT FEET/METERS AND INCHES/CENTIMETERS NEXT

3	0
45	1 TO 4
713	5 TO 8
3	150 TO 154
4	155 TO 159
6	160 TO 164
7	165 TO 169
5	170 TO 174
3	175 TO 179
2	180 TO 184
1	185 TO 189

792

Refusal(-1)	8				
Don't Know(-2)	10				
TOTAL =====>	810	VALID SKIP(-4)	0	NON-INTERVIEW(-5)	0

Min: 0 Max: 185 Mean: 11.22

Lead In: R03559.00[Default] R03558.00[-2:-2] R03558.00[-1:-1]
Default Next Question: R03561.00

R03561.00 [D130AM0] Survey Year: 2003

UNIT TALL

INTERVIEWER: PLEASE SELECT ALL THAT APPLY.

31	1 CENTIMETERS
33	2 METERS
724	3 FEET
0	4 INCHES

788

Refusal(-1)	0				
Don't Know(-2)	1				
TOTAL =====>	789	VALID SKIP(-4)	21	NON-INTERVIEW(-5)	0

Lead In: R03560.00[Default]
Default Next Question: R03562.00

R03562.00 [D130BM0] Survey Year: 2003

HOW TALL METERS AND FEET

About how tall are you? DIGITS

INTERVIEWER: ADDITIONAL CENTIMETERS OR INCHES

69	0
238	1 TO 4
301	5 TO 8
125	9 TO 14
1	15 TO 19
3	50 TO 54
1	55 TO 59
7	60 TO 64
6	65 TO 69
3	70 TO 74
1	75 TO 79
1	80 TO 84

756

Refusal(-1)	0				
Don't Know(-2)	1				
TOTAL =====>	757	VALID SKIP(-4)	53	NON-INTERVIEW(-5)	0

Min:	0	Max:	80	Mean:	6.9
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Lead In: R03561.00[Default]
Default Next Question: R03563.00

R03563.00 [D130CM0] Survey Year: 2003

ABOUT HOW TALL ARE YOU? UNITS IN CENTIMETERS OR INCHES

About how tall are you? UNIT

39	1 CENTIMETERS
649	2 INCHES

688

Refusal(-1)	0				
Don't Know(-2)	0				
TOTAL =====>	688	VALID SKIP(-4)	122	NON-INTERVIEW(-5)	0

Lead In: R03562.00[Default]
Default Next Question: R03564.00

R03564.00 [DTIMEEND] Survey Year: 2003

END SECTION D ELAPSED TIME

END SECTION D ELAPSED TIME

12	1 TO 100
17	101 TO 200

8 201 TO 300
 3 301 TO 400
 3 401 TO 500
 1 501 TO 600
 1 601 TO 700
 1 801 TO 900
 613 1001 TO 5000
 151 5001 TO 9999999999: >5001

810

Refusal(-1) 0
 Don't Know(-2) 0
 TOTAL =====> 810 VALID SKIP(-4) 0 NON-INTERVIEW(-5) 0

Min: 3 Max: 27096 Mean: 3565.25

Lead In: R03563.00[Default]
 Default Next Question: R03565.00

 niswgtsamp1
 Sampling weight

type: numeric (float)

range: [.40081793,2.2926381] units: 1.000e-08
 unique values: 16 missing .: 0/810

tabulation: Freq. Value
 58 .40081793
 30 .40088567
 62 .47498703
 67 .47724485
 28 .57269382
 56 .58522469
 64 .67768204
 51 .8316083
 60 .93188334
 29 1.0650096
 26 1.1303167
 47 1.3096434
 65 1.4066728
 56 1.4777939
 57 1.5621232
 54 2.2926381

Refusal(-1) 0
 Don't Know(-2) 0
 TOTAL =====> 810 VALID SKIP(-4) 0 NON-INTERVIEW(-5) 0