

CALIFORNIA

1986
BEHAVIORAL RISK FACTOR SURVEILLANCE SYSTEM
DATA COLLECTION INSTRUMENT

FIPS STATE CODE	STRATUM CODE	PSU NUMBER	RECORD NUMBER	DATE OF INTERVIEW MM DD YY	INTERVIEWER ID
0 6 (1-2)	1 (3)	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> (4-7)	<input type="text"/> (8)	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> (9-14)	<input type="text"/> <input type="text"/> (15-16)

HELLO. I'm _____ calling for the _____.
We're doing a study of the health practices of California residents.

Your number has been chosen randomly by the _____
to be included in the study, and we would like to ask some questions
about things people do which may affect their health.

1. Is this (17-19) (20-22) (23-24) YES -> GO TO QUESTION 2

NO -> Thank you very much, but I seem to have dialed the wrong
number. It is possible that your number may be called at
a later time. STOP

2. Is this a private residence? YES -> GO TO PAGE 2

NO -> Thank you very much, but we are only interviewing in
private residences. STOP

Refusal Information _____

FINAL DISPOSITION OF TELEPHONE CALL (25-26)

- | | |
|--|--|
| 01- Completed Interview | 08- Language barrier prevented completion of interview |
| 02- Refused Interview | 09- Interview terminated within questionnaire |
| 03- Non-working Number | 10- Line busy (multiple tries) |
| 04- No Answer (multiple tries) | 11- Selected respondent unable to respond because of physical or mental impairment |
| 05- Business Phone | |
| 06- No Eligible Respondent at this number | |
| 07- No Eligible Respondent could be reached during time period | |

Edited by: _____ Date: _____

Our study requires that we interview only one person who lives in your household.

1. How many members of your household, including yourself, are 18 years of age or older?

(27)

IF ONE PERSON HOUSEHOLD
GO TO ALL RESPONDENTS

2. How many are men and how many are women?

Men (28)

Women (29)

3. Who is the oldest man/woman who presently lives in this household?

4. Who is the next oldest man/woman who presently lives in this household?

INTERVIEWER: ORDER OF LISTING IS ALL MEN FIRST, OLDEST TO YOUNGEST THEN ALL WOMEN, OLDEST TO YOUNGEST.

Resident Number	Name/Relationship	LAST DIGIT OF TELEPHONE #										Resident Number
		0	1	2	3	4	5	6	7	8	9	
1		1	1	1	1	1	1	1	1	1	1	1
2		2	1	2	1	2	1	2	1	2	1	
3		3	1	2	3	1	2	3	1	2	X	3
4		1	2	3	4	1	2	3	4	X	X	4
5		2	3	4	5	1	2	3	4	5	1	5
6		5	6	1	2	3	4	X	X	X	X	6
7		2	3	4	5	6	7	1	X	X	X	7
8		8	1	2	3	4	5	6	7	X	X	8

The person in your household that I need to speak with is _____

INTERVIEWER: IF RESPONDENT IS NOT HOME, TRY TO ARRANGE TIME FOR CALLBACK

CALLBACK: _____
Date _____ Time _____

IF SCREENING WAS NOT DONE WITH RESPONDENT

Hello. I'm _____ (Name of Interviewer) calling for the _____ (Agency). I'm a member of a special research team. We're doing a study of _____ (State) residents regarding their health practices and day-to-day living habits. You have been randomly chosen to be included in the study from among the adult members of your household.

ALL RESPONDENTS

The interview will take about 10 minutes or perhaps a little less and all the information obtained in this study will be confidential.

Your name will not be used, but your responses will be grouped together with information from others participating in the study.

Of course, your part is voluntary and you can end the interview anytime you like. First, I'd like to begin by asking you about using seatbelts.....

SECTION A: SEATBELTS

1. How often do you use seatbelts when you drive or ride in a car?

SEATBELT

Would you say:	(PLEASE READ)	(30)
a. Always		1
b. Nearly Always		2
c. Sometimes		3
d. Seldom		4
e. Never		5
	Don't know/Not sure	7
	Never drive or ride in a car.....	8
	Refused	9

SECTION B: HYPERTENSION

These next questions are about hypertension or high blood pressure:

2. Have you ever been told by a doctor, nurse, or other health professional that you have high blood pressure?

HYPERT

(PROBE FOR DOCTOR, NURSE OR OTHER HEALTH PROFESSIONAL)	(31)	
a. No, <u>GO TO SECTION C, PAGE 6</u>	1	
b. Yes, by a Doctor	2	
c. Yes, by a Nurse	3	
d. Yes, by other Health Professional.....	4	
	Do not remember/Not sure, <u>GO TO SECTION C, PAGE 6</u>	7
	Refused, <u>GO TO SECTION C PAGE 6</u>	9

3. Have you been told on more than one occasion that your blood pressure was high, or have you been told this only once? HIGHBT1
(32)

- a. More than once 1
- b. Only once 2
- Do not remember/Not sure..... 7
- Refused 9

4. Is any medicine currently prescribed for your high blood pressure? BPTREAT
(33)

- a. Yes 1
- b. No, GO TO Q 6, PAGE 5..... 2
- Do not remember/Not sure..GO TO
Q 6, PAGE 5.. 7
- Refused, GO TO Q6, PAGE 5..... 9

5. Are you currently taking medicine for your high blood pressure? USETREAT
(34)

(Probe for "All or most of the time" or "Only occasionally" if necessary. If answer is "Yes", use "Yes, all or most of the time")

- a. Yes, all or most of the time 1
- b. Yes, only occasionally 2
- OR
- c. No 3
- Do not remember/Not sure 7
- Refused 9

6. Are you doing any of the following to help control your high blood pressure?

(PLEASE READ. CIRCLE APPROPRIATE ANSWER FOR EACH ITEM)

(PLEASE NOTE: "d4" IS DO NOT SMOKE)

		<u>YES</u>	<u>NO</u>	<u>NOT SURE</u>	<u>REFUSED</u>	
<i>LOWSALT</i>	a. Following a low salt diet.....	1	2	7	9	(35)
<i>WTWATCH</i>	b. Watching your weight.....	1	2	7	9	(36)
<i>VOIDSTRES</i>	c. Avoiding stress, relaxing	1	2	7	9	(37)
<i>CUTSMOKE</i>	d. Cutting down or stopping smoking.....	1	2	7	4 9	(38)
<i>EYERPROG</i>	e. Following an exercise program	1	2	7	9	(39)

7. As far as you know, is your blood pressure presently normal -- or under control--or is it still high?

BDUPNOW

(PLEASE NOTE: NORMAL OR UNDER CONTROL INCLUDES "RETURNED TO NORMAL" AND "NO LONGER HAVE HIGH BLOOD PRESSURE") (40)

- a. Normal..... 1
- b. Under control..... 2
- c. Still High 3
- Don't know/Not sure..... 7
- Refused 9

SECTION C: EXERCISE

The next few questions are about exercise, recreation, or physical activities other than your regular job duties.

8. During the past month, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening or walking for exercise? *EXERANY* (41)
- a. Yes, GO TO Q 10 1
 - b. No 2
 - Don't know/Not sure..... 7
 - Refused..... 9
9. Were there other activities or exercises that you participated in during the past month besides running, calisthenics, golf, yardwork or walking for exercise? *EXEROTH* (42)
- a. Yes..... 1
 - b. No, GO TO SECTION D, PAGE 9..... 2
 - Don't know/Not sure, GO TO SECTION D, PAGE 9... 7
 - Refused, GO TO SECTION D, PAGE 9 9
10. What type of physical activity or exercise did you spend the most time doing during the past month? *EXERACT1* (43-44)
- a. Activity —
 - SEE CODING LIST A
 - Refused..... 99

Activity

 ASK QUESTION 11 ONLY IF ANSWER TO Q10 IS RUNNING, JOGGING, WALKING, OR SWIMMING, ALL OTHERS, GO TO Q 12.

11. How far did you usually walk/run/jog/swim? *EXERDIS1* (45-47)
- a. Miles and tenths —
 - Dont't know/Not sure..... 777
 - Refused..... 999
- (SEE CODING LIST B
 IF RESPONSE IS NOT
 IN MILES AND TENTHS)

12. How many times per week or per month did you take part in this activity during the past month? *EXEROFT1*
(48-50)

- a. Times per week..... 1 ___
- OR
- b. Times per month..... 2 ___
- Don't know/Not sure..... 777
- Refused 999

13. And when you took part in this activity, for how many minutes or hours did you usually keep at it? *EXERHML*
(51-53)

- a. Hours & Minutes..... :__
- Don't know/Not sure 777
- Refused..... 999

14. Was there another physical activity or exercise that you participated in during the last month? *EXEROTH2*
(54)

- a. Yes..... 1
- b. No; GO TO SECTION D, PAGE 9..... 2
- Don't know/Not sure,
GO TO SECTION D, PAGE 9...... 7
- Refused, GO TO SECTION D, PAGE 9...... 9

15. What other type of physical activity gave you the next most exercise during the past month? *EXERACT2*
(55-56)

- a. Activity..... _____
- Don't know/Not sure,
GO TO SECTION D, PAGE 9..... 77
- Refused, GO TO SECTION D, PAGE 9..... 99

SEE CODING LIST A

Activity

ASK QUESTION 16 ONLY IF ANSWER TO Q15 IS RUNNING, JOGGING, WALKING, OR SWIMMING, ALL OTHERS GO TO Q 17

EXERDIS2
(57-59)

16. How far did you usually walk/run/jog/swim?

(SEE CODING LIST B
IF RESPONSE IS NOT
IN MILES AND TENTHS)

a. Miles & tenths _____
Don't know/Not sure..... 777
Refused..... 999

17. How many times per week or per month did you take part in this activity?

EXERDFTZ
(60-62)

a. Times per week..... 1 ____
OR
b. Times per month..... 2 ____
Don't know/Not sure..... 777
Refused..... 999

18. And when you took part in this activity, for how many minutes or hours did you usually keep at it?

EXERHMHZ
(63-65)

a. Hours and Minutes..... : ____
Don't know/Not sure..... 777
Refused..... 999

SECTION D: DIET

19. About how much do you weigh without shoes?

WEIGHT
(66-68)

a. Weight

Pounds

Don't know/Not sure..... 777

Refused 999

20. About how tall are you without shoes?

HEIGHT
(69-71)

a. Height.....

Ft. Inches

Don't know/Not sure..... 777

Refused..... 999

21. Are you now trying to lose weight?

LOSEWT
(72)

a. Yes..... 1

b. No, GO TO Q24, PAGE 10..... 2

Refused, GO TO Q24, PAGE 10... 9

22. Are you eating fewer calories to lose weight?

FEWCAL
(73)

a. Yes 1

b. No 2

Don't know/Not sure 7

Refused 9

23. Have you increased your physical activity to lose weight?

PHYACT
(74)

a. Yes 1

b. No 2

Don't know/Not sure 7

Refused 9

24. How often do you usually add salt to your food at the table? **ADDSALT**

Would you say (PLEASE READ) (75)

- a. Most of the time..... 1
- b. Sometimes..... 2
- c. Rarely..... 3
- d. Never..... 4

- Don't know/Not sure..... 7

- Refused..... 9

SECTION E: CIGARETTE SMOKING

Now, I would like to ask you a few questions about smoking cigarettes: *SMOKE100*

25. Have you smoked at least 100 cigarettes in your life? (76)

(100 cigarettes
= 5 packs)

- a. Yes 1
- b. No, GO TO SECTION F, PAGE 12..... 2
- Don't know/Not sure..... 8
- Refused 9

26. Do you smoke cigarettes now?

SMOKE NOW
(77)

- a. Yes 1
- b. No, GO TO SECTION F, PAGE 12..... 2
- Refused, GO TO SECTION F, PAGE 12... 9

27. On the average, about how many cigarettes a day do you now smoke?

SMOKE NUM
(78-79)

(1 Pack
= 20 cigarettes)

- a. Number of cigarettes — —
- b. Don't smoke regularly 88
- Refused 99

28. Have you stopped smoking for a week or more sometime during the past year?

SMOK QUIT
(80)

- a. Yes 1
- b. No 2
- Refused 9

SECTION F: SMOKELESS TOBACCO

The next questions are about smokeless tobacco, tobacco products most people call chewing tobacco or snuff.

29. Have you ever used or tried any smokeless tobacco products such as chewing tobacco or snuff? *USE EVER* (81)
- a. Yes 1
 - b. No, GO TO Q 33 2
 - Don't know/Not sure, GO TO Q 33 7
 - Refused, GO TO Q 33 9
30. Do you currently use any smokeless tobacco products such as chewing tobacco or snuff? *USE NOW* (82)
- a. Yes (includes occasional use) 1
 - b. No, GO TO Q 32 2
 - Don't know/Not sure, GO TO Q 33 7
 - Refused, GO TO Q 33 9
31. Have you stopped using smokeless tobacco for a week or more sometime during the past year? *USE QUIT* (83)
- a. Yes 1
 - b. No 2
 - Occasional Use Only 3
 - Don't know/Not sure 7
 - Refused 9
32. For how long have you been using/did you use smokeless tobacco? (84-85) *USE YRS*
- a. Number of Years
 - b. Less than 1 year 8 7
 - c. Occasional use only/Never used regularly .. 8 9
 - Don't know/Not sure, 7 7
 - Refused, 9 9

33. Do you think using smokeless tobacco can cause any of the following?

	<u>YES</u>	<u>NO</u>	<u>NOT SURE</u>	<u>REFUSED</u>	
<i>TOOTHDEC</i> a. Tooth decay	1	2	7	9	(86)
<i>MOUTHCA</i> b. Cancer of the mouth	1	2	7	9	(87)
<i>GUMDIS</i> c. Gum disease or mouth sores ..	1	2	7	9	(88)
<i>TEETHSTA</i> d. Stained teeth	1	2	7	9	(89)

SECTION G: ALCOHOL CONSUMPTION

These next few questions are about the use of beer, wine, or liquor-
all-kinds of alcoholic beverages that people drink at meals,
special occasions, or when just relaxing.

34. Have you had any beer, wine or liquor during the past month, *DRINK ANY*
that is, since _____? (90)

- a. Yes 1
- b. No, GO TO SECTION H, PAGE 17..... 2
- Refused, GO TO SECTION H, PAGE 17. 9

35. During the past month, how many days per week or per *DRK BEER*
month did you drink any beer? (91-93)

- a. Days per week 1 ___
- OR
- b. Days per month 2 ___
- c. Never or none GO TO Q 37, PAGE 15..... 888
- Don't know/Not sure, GO TO Q 37, .. 777
PAGE 15
- Refused GO TO Q 37, PAGE 15..... 999

36. On the days when you drank beer, about how many beers did you *NR BEER OCC*
drink on the average? (94-95)

- a. Number of beers ___
- Don't know/Not sure..... 77
- Refused 99

37. Also, during the past month, how many days per week or per month did you drink any wine? DRKWINE
(96-98)

a. Days per week 1 ___
OR

b. Days per month 2 ___

c. Never or none, GO TO Q 39..... 888

Don't know/Not sure, GO TO Q 39.. 777

Refused, GO TO Q 39..... 999

38. On the days when you drank wine, about how many glasses of wine did you drink on the average? NWINEOCC
(99-100)

a. Number of glasses of wine ___

Don't know/Not sure..... 77

Refused 99

39. And, during the past month, about how many days per week or per month did you have any liquor to drink, such as vodka, gin, rum or whiskey? DRKLIRR
(101-103)

a. Days per week 1 ___
OR

b. Days per month 2 ___

c. Never or none, GO TO Q 41, PAGE 16.... 888

Don't know/Not sure, GO TO Q 41,
PAGE 16. 777

Refused, GO TO Q 41, PAGE 16..... 999

40. On the days when you drank any liquor, about how many drinks did you have on the average? NLIRROCC
(104-105)

a. Number of drinks ___

Don't know/Not sure..... 77

Refused 99

41. Considering all types of alcoholic beverages, that is beer, wine, and liquor, as drinks, how many times during the past month did you have 5 or more drinks on an occasion? DRINKGE5
(106-107)

- a. Number of times — —
- b. None..... 88
- Don't know/Not sure..... 77
- Refused 99

42. And during the past month, how many times have you driven when you've had perhaps too much to drink? DRINKDRI
(108-109)

- a. Number of times — —
- b. None 88
- Don't know/Not sure..... 77
- Refused 99

SECTION H: DEMOGRAPHICS

And finally, these last few questions ask for a little more information about yourself.

AGE

43. How old were you on your last birthday? (110-111)

- a. CODE AGE IN YEARS..... _____
- Do not remember/Not sure 07
- Refused 09

44. What is your race?

RACE

Would you say (PLEASE READ) (112)

- a. White 1
- b. Black 2
- c. Asian or Pacific Islander 3
- d. Aleutian, Eskimo or American Indian.. 4
- e. Other specify _____ 5
- Do not know/Not sure 7
- Refused 9

45. Are you of Hispanic origin such as Mexican American, Latin American, Puerto Rican or Cuban?

HISPANIC

(113)

- a. Yes 1
- b. No 2
- Do not know/Not sure 7
- Refused 9

46. What is the highest grade or year of school you completed?

EDUCA
(114)

(READ ONLY IF NECESSARY)

- a. Eighth Grade or Less 1
- b. Some High School 2
- c. High School Grad or GED Certificate 3
- d. Some Technical School 4
- e. Technical School Graduate 5
- f. Some College 6
- g. College Graduate 7
- h. Post Grad or Professional Degree 8
- Refused 9

47. Are you currently:

(PLEASE READ)

EMPLOY
(115)

- a. Employed for wages 1
- b. Self employed..... 2
- c. Out of work for more than 1 year 3
- d. Out of work for less than 1 year 4
- e. Homemaker..... 5
- f. Student..... 6
- OR
- g. Retired 7
- Refused 9

MARITAL

48. And are you: (PLEASE READ) (116)
- a. Married 1
 - b. Divorced 2
 - c. Widowed 3
 - d. Separated 4
 - e. Never been married 5
 - OR
 - f. A member of an unmarried couple 6
 - Refused 9

INCOME
(117)

49. Which of the following categories best describes your annual household income from all sources? (PLEASE READ)
- a. Less than \$10,000..... 1
 - b. \$10 to \$15,000..... 2
 - c. \$15 to \$20,000..... 3
 - e. \$20 to \$25,000..... 4
 - e. \$25 to \$35,000..... 5
 - f. \$35 - 50,000..... 6
 - OR
 - g. Over 50,000..... 8
 - Don't know/Not sure..... 7
 - Refused..... 9

SEX
(118)

50. INTERVIEWER: INDICATE SEX OF RESPONDENT (ASK IF NECESSARY)
- a. Male 1
 - b. Female 2

INTERVIEWER: ASK THIS QUESTION ONLY TO FEMALES
BETWEEN 18 and 45, OTHERWISE, GO TO Q 52

PREGNANT
(119)

51. To your knowledge, are you now pregnant?

- a. Yes 1
- b. No 2
- Don't know/Not sure..... 7
- Refused 9

52. Are there any other telephone numbers which can be used to reach this household?

- a. Yes, GO TO Q 53
- b. No, CODE COLUMN 121, Q 53 AS "1" AND READ CLOSING STATEMENT

53. How many telephone numbers will reach this household including the number I used today?

(DIFFERENTIATE BETWEEN TELEPHONE NUMBERS AND TELEPHONE SETS IF NECESSARY. INCLUDE ALL TELEPHONE NUMBERS THAT CAN REACH HOUSEHOLD)

NUMPHONS
(120)

Total Telephone Numbers _____

SECTION I: HEALTH STATUS

Next , I have a couple of questions which ask about your health status.

54 . All in all, would you say that your health is excellent, good, fair or poor? *HLTH 600x*

- a. Excellent 1
- b. Good 2
- c. Fair 3
- d. Poor 4
- e. Refused 9

55 . I am going to read you a list of medical conditions and physical ailments that usually last for some time. As I read each one, please tell me if you have ever experienced this problem or been told by a medical doctor that you have this problem.

	<u>YES</u>	<u>NO</u>	<u>DON'T KNOW/ NOT SURE</u>	<u>REFUSED</u>	
a) Diabetes	1	2	7	9	DIABETES
b) Heart Trouble	1	2	7	9	HEART
c) Stroke	1	2	7	9	STROKE
d) Arthritis	1	2	7	9	ARTHRIT
e) Chronic Bronchitis or Emphysema	1	2	7	9	BRONCH
f) Asthma	1	2	7	9	ASTHMA
g) Kidney or Bladder Trouble	1	2	7	9	KIDNEY
h) Liver Trouble	1	2	7	9	LIVER
i) Cancer	1	2	7	9	CANCER
j) Frequent Headaches	1	2	7	9	HEADACHE
k) Frequent Back Trouble	1	2	7	9	BACK

nally I have a couple of additional questions
out seatbelts

ing the past month, when you have driven or ridden
car, were any of the passengers children
der four years of age?

IF NECESSARY, ADD: "...either your own or someone else's")

CHILDLT4

1. yes
2. no (skip to q 53p)
8. never ride in a car (skip to q 53p)
7. don't know / not sure (skip to q 53p)
9. not ascertained / refused (skip to q 53p)

stion ~~530~~ 57 column(s)

SAFTSEAT

there are children under four in the car,
often do they ride in a CAR SAFETY SEAT?
ould you say always, nearly always, sometimes,
eldom or never?

1. Always
2. Nearly Always
3. Sometimes
4. Seldom
5. Never
7. Don't know / not sure
8. Inap
9. Not ascertained / refused

CLOSING STATEMENT

This concludes this interview. Again, the information will be kept strictly confidential and will be used only for routine statistical research purposes. Thank you for your assistance. We greatly appreciate your time and cooperation.