

Hello, I'm calling from the Indiana University Public Opinion Laboratory to help the Marion County Health Department conduct a study of health issues and needs in our community. You may have seen or heard about this study. We are surveying over 3,000 people in Marion County to ask about their physical activity and diet. Your answers to the survey will be confidential and no information will be released that will identify you as participating in the survey. If I ask you any question that you do not want to answer, just let me know and I will skip it. The survey will take 20 minutes or less.

*****RANDOM SELECTION OF RESPONDENT*****

>>>>>COUNTY VERIFICATION

First, I just want to verify that this is a residence telephone number in Marion County. Is that correct?

1 Yes

2 No/Don't know/Refuse (**TERMINATE INTERVIEW**)

>>>>>TOTAL PEOPLE IN HH

Next, I just need to know how many adults 18 years of age or older reside in your household so that one person can be picked at random to talk about these issues.

S1. Including yourself, how many adults 18 years of age or older currently live or stay in this home?

1. People: _____

7. Don't Know (**TERMINATE INTERVIEW**)

9. Refused (**TERMINATE INTERVIEW**)

>>>>>IF 6 OR FEWER IN HOUSEHOLD, PROGRAM RANDOMLY SELECTS RESPONDENT

>>>>>IF MORE THAN 6, PERSON WITH MOST RECENT BIRTHDAY IS RESPONDENT

>>>>>ONCE R IS IDENTIFIED, THEY ARE RE-READ INTRO AS NECESSARY

*****SCREENER QUESTIONS*****

I need to ask you some questions to make sure you meet the criteria for the survey.

Q1. Are you at least 18 years old?

1 Yes

2 No (**TERMINATE INTERVIEW**)

3 Don't know/Refuse (**TERMINATE INTERVIEW**)

Q1a. What year were you born? _____

Q2. RECORD RESPONDENT'S GENDER.

IF UNKNOWN, ASK "I need to know your gender. Are you male or female?"

1 Male (**SKIP TO Q4**)

2 Female

Q3. To your knowledge, are you now pregnant?

1 Yes

2 No

3 Don't know/Not sure

4 Refuse

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Q4. Are you of Hispanic or Latino origin, such as Mexican American, Latin American, Puerto Rican or Cuban?

1 Yes

2 No (**SKIP TO Q6**)

3 Don't know/Not sure (**SKIP TO Q6**)

4 Refuse (**SKIP TO Q6**)

Q5. Would you prefer that we ask the questions in Spanish?

1 Yes

2 No/Doesn't matter

>>>>>IF 'YES' RESPONDENT TOLD WE WILL HAVE ONE OF OUR SPANISH-SPEAKING INTERVIEWERS CALL BACK AND COMPLETE THE SURVEY

Q6. Which one of these groups would you say best represents your race?

1 White

2 Black or African American

3 Asian

4 Native Hawaiian or Other Pacific Islander

- 5 American Indian or Alaskan Native
- 6 Other (**SPECIFY**) _____
- 7 Don't know/Not sure (**DO NOT READ**)
- 8 Refuse (**DO NOT READ**)

>>>>>Q6_TEST WILL APPEAR FOR ONLY 2/3 OF RESPONDENTS. THE OTHER 1/3 WILL BE ASKED THE QUESTION AS Q66, TO ASSESS THE EFFECT OF WHERE THIS ITEM IS PLACED.

Q6_TEST. Would you say that in general your health is...[READ LIST]

- 1 Excellent
- 2 Very good
- 3 Good
- 4 Fair, or
- 5 Poor
- 6 Don't know/Not sure (**DO NOT READ**)
- 7 Refuse (**DO NOT READ**)

*****OPPORTUNITIES FOR PHYSICAL ACTIVITY*****

The next few questions are about physical activity at your job and in your neighborhood.

Q7. Are you currently employed?

- 1 Yes
- 2 No (**SKIP TO Q11**)
- 3 Don't know/Not sure
- 4 Refuse (**SKIP TO Q11**)

Q8. Does your job involve tasks that routinely keep you physically active?

- 1 Yes
- 2 No
- 3 Don't know/Not sure
- 4 Refuse

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Q9. Do you have an opportunity at your workplace to exercise, such as a workout room with exercise equipment or a basketball court?

- 1 Yes
- 2 No
- 3 Don't know/Not sure
- 4 Refuse

Q10. Does your work place provide incentives or other opportunities for you to get regular exercise, such as a membership or discounted membership to a health club or discounts on health insurance premiums?

- 1 Yes
- 2 No (**SKIP TO Q11**)
- 3 Don't know/Not sure (**SKIP TO Q11**)
- 4 Refuse (**SKIP TO Q11**)

Q10_OTH. What are they? _____

Q11. In your community, not within your home, do you have access to a safe, convenient and affordable place where you could exercise, such as a nearby walking park or trails, YMCA, or other exercise facility?

- 1 Yes (**SKIP TO #16**)
- 2 No
- 3 Don't know/Not sure
- 4 Refuse

Q12. Do you have safety concerns about exercising in your community?

- 1 Yes
- 2 No (**SKIP TO #16**)
- 3 Don't know/Not sure
- 4 Refuse

Q13. What safety concerns do you have? [DO NOT READ LIST]

- 1 Too many streets/intersections to cross
- 2 Traffic too dangerous

- 3 Gangs in neighborhood
- 4 Dangerous animals (for example, dogs)
- 5 Personal safety issues
- 6 Unsafe walkways
- 7 Other (SPECIFY)_____
- 8 Don't know/Not sure (**DO NOT READ**)
- 9 Refuse (**DO NOT READ**)

Q14. If your safety concerns could be addressed, would there be a convenient place in your community where you could exercise?

- 1 Yes
- 2 No (**SKIP TO #16**)
- 3 Don't know/Not sure (**SKIP TO #16**)
- 4 Refuse (**SKIP TO #16**)

Q15. Is that convenient place affordable?

- 1 Yes
- 2 No
- 3 Don't know/Not sure
- 4 Refuse

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Q16. Is cost a barrier to you being physically active?

- 1 Yes
- 2 No
- 3 Don't know/Not sure
- 4 Refuse

Q17. Do you consider it safe for children to play outside in your neighborhood, weather permitting? Would you say: [READ LIST]

- 1 Yes, definitely (**SKIP TO #18**)
- 2 Yes, sometimes, or (**SKIP TO #18**)
- 3 No
- 4 Don't know/Not sure (**DO NOT READ**) (**SKIP TO #18**)
- 5 Refuse (**DO NOT READ**) (**SKIP TO #18**)

Q17_OTH. Why not?_____

Q18. How often do you walk in your neighborhood for exercise? Would you say: [READ LIST]

- 1 Every day or nearly every day
- 2 A few times a week
- 3 A few times a month
- 4 Rarely, or
- 5 Never
- 6 Don't know/Not sure (**DO NOT READ**)
- 7 Refuse (**DO NOT READ**)

Q19. During the past 12 months, have you used a fitness trail, like the Monon Trail, in Indianapolis for recreation, transportation, or any other purpose?

- 1 Yes (**SKIP TO Q21**)
- 2 No
- 3 Don't know/Not sure
- 4 Refuse

20. What is the main reason you have not used a trail?

[ALLOW MULTIPLE RESPONSES. DO NOT READ THE LIST]

- 1 Trails are unsafe
- 2 There is nowhere to park
- 3 Too many strangers on the trails/Not comfortable w/other users
- 4 Inconvenient opening times
- 5 The trails are ugly
- 6 The trails are poorly lit
- 7 I don't have enough time
- 8 I go other places for recreation

- 9 I don't like or enjoy trail use/I'm not interested/I don't want to
- 10 There is no trail near my home/Inconvenient location
- 11 Other (SPECIFY)
- 12 Don't know/Not sure (**DO NOT READ**)
- 13 Refuse (**DO NOT READ**)

>>>>>>>>>**SKIP TO Q24**

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Q21. During the past month, which of these trails have you used?

a. the CENTRAL CANAL TOWPATH

- 1 Yes
- 2 No
- 3 Don't know/Not sure
- 4 Refuse

b. the FALL CREEK TRAIL

- 1 Yes
- 2 No
- 3 Don't know/Not sure
- 4 Refuse

c. the MONON TRAIL

- 1 Yes
- 2 No
- 3 Don't know/Not sure
- 4 Refuse

d. the PLEASANT RUN TRAIL

- 1 Yes
- 2 No
- 3 Don't know/Not sure
- 4 Refuse

e. the POGUE'S RUN TRAIL

- 1 Yes
- 2 No
- 3 Don't know/Not sure
- 4 Refuse

f. the WHITE RIVER WAPAHANI TRAIL

- 1 Yes
- 2 No
- 3 Don't know/Not sure
- 4 Refuse

Q21g. Have you used any other trails not mentioned previously?

- 1 Yes
- 2 No (**SKIP TO #22**)
- 3 Don't know/Not sure (**SKIP TO #22**)
- 4 Refuse (**SKIP TO #22**)

Q21G_OTH. What other trails have you used during the past month?

>>>>>>>>> IF RESPONDENT DID NOT ANSWER, "YES" TO ANY OF Q21A THROUGH Q21G, SKIP TO Q24

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Q22. During the past month, what is the total number of times you have used a trail?

- 1 Record # of times: _____
- 2 Don't know/Not sure
- 3 Refuse

Q23. How much time do you usually spend on the trail per visit?

- 1 Record time in hours: _____
- 2 Record time in minutes: _____

3 Don't know/Not sure

4 Refuse

*****AMOUNT OF PHYSICAL ACTIVITY*****

I am going to ask you about the time you spent being physically active in the last 7 days. Please answer each question even if you do not consider yourself to be an active person. Think about the activities you do at work, as part of your house and yard work, to get from place to place, and in your spare time for recreation, exercise or sport. Now, think about all the vigorous activities which take hard physical effort that you did in the last 7 days. Vigorous activities make you breathe much harder than normal and may include heavy lifting, digging, aerobics, or fast bicycling. Think only about those physical activities that you did for at least 10 minutes at a time.

Q24. During the last 7 days, on how many days did you do VIGOROUS physical activities?

1 Record # of days: _____

2 Don't know/Not sure (**SKIP TO Q26**)

3 Refuse (**SKIP TO Q26**)

>>>>>>**IF # OF DAYS = 0, SKIP TO Q26**

Q25. How much time did you usually spend doing VIGOROUS activities on one of those days?

1 Record HOURS per day: _____ (**SKIP TO Q26**)

2 Record MINUTES per day: _____ (**SKIP TO Q26**)

3 Don't know/Not sure* (**SKIP TO Q25A**)

4 Refuse (**SKIP TO Q26**)

*INTERVIEWER: An average time for one of the days on which the R does vigorous activity is being sought. If the R can't answer because the pattern of time spent varies widely from day to day use "Don't know"

Q25a. How much time in total did you spend OVER THE LAST 7 DAYS doing vigorous physical activities?

1 Record HOURS per week: _____

2 Record MINUTES per week: _____

3 Don't know/Not sure

4 Refuse

Now think about activities which take moderate physical effort that you did in the last 7 days. Moderate physical activities make you breathe somewhat harder than normal and may include carrying light loads, bicycling at a regular pace, or doubles tennis. Do not include walking. Again, think about only those physical activities that you did for at least 10 minutes at a time.

Q26. During the last 7 days, on how many days did you do moderate physical activities?

1 Record # of days: _____

2 Don't know/Not sure (**SKIP TO Q28**)

3 Refuse (**SKIP TO Q28**)

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Q27. How much time did you usually spend doing MODERATE physical activities on one of those days?

1 Record HOURS per day: _____ (**SKIP TO Q28**)

2 Record MINUTES per day: _____ (**SKIP TO Q28**)

3 Don't know/Not sure* (**SKIP TO Q27A**)

4 Refuse (**SKIP TO Q28**)

*INTERVIEWER: An average time for one of the days on which the R does MODERATE activity is being sought. If the R can't answer because the pattern of time spent varies widely from day to day use "Don't know"

Q27a. What is the total amount of time you spent OVER THE LAST 7 DAYS doing moderate physical activities?

1 Record HOURS per week: _____

2 Record MINUTES per week: _____

3 Don't know/Not sure

4 Refuse

Now think about the time you spent walking in the last 7 days. This includes at work and at home, walking to travel from place to place, and any other walking you might do solely for recreation, sport, exercise, or leisure.

Q28. During the last 7 days, on how many days did you walk for at least 10 minutes at a time?

1 Record # of days: _____

2 Don't know/Not sure (**SKIP TO ACTIVITY LEVEL**)

3 Refuse (**SKIP TO ACTIVITY LEVEL**)

Q29. How much time did you usually spend walking on one of those days?

- 1 Record HOURS per day: _____ (SKIP TO ACTIVITY LEVEL)
- 2 Record MINUTES per day: _____ (SKIP TO ACTIVITY LEVEL)
- 3 Don't know/Not sure* (SKIP TO Q29A)
- 4 Refuse (SKIP TO ACTIVITY LEVEL)

*INTERVIEWER: An average time for one of the days on which the R walks is being sought. If the R can't answer because the pattern of time spent varies widely from day to day use "Don't know"

Q29a. What is the total amount of time you spent walking OVER THE LAST 7 DAYS?

- 1 Record HOURS per week: _____
- 2 Record MINUTES per week: _____
- 3 Don't know/Not sure
- 4 Refuse

*****IPAQ CALCULATION*****

IF RESPONDENT ACTIVITY LEVEL IS ABOVE CERTAIN THRESHOLDS, ASK Q30 (THE "READINESS TO CHANGE" QUESTION THAT ASSUMES THE RESPONDENT IS ALREADY ACTIVE). OTHERWISE, ASK Q31. THE FOLLOWING CALCULATIONS ASSESS WHETHER THE RESPONDENT'S ACTIVITY EXCEEDS THE THRESHOLDS, WHICH ARE 20 MIN/DAY VIGOROUS ACTIVITY 3 DAYS/WK, OR 20 MIN/DAY MODERATE ACTIVITY OR WALKING 5 DAYS/WK, OR 600 METS/DAY 5 DAYS/WK.
 $METS = (VIG. MINUTES * 8) + (MOD. MINUTES * 4) + (WALKING MINUTES * 3.3)$

NOTE: 0 records skipped to Q30 that should not have, due to the Q25A calculation not being divided by 7.

NOTE: 4 records skipped to Q30 that should not have, due to the Q27A calculation not being divided by 7.

NOTE: 6 other records skipped to Q30 that should not have, due to the Q29A calculation not being divided by 7.

*****FOR THOSE WHO ARE MODERATE/VIGOROUS BY IPAQ*****

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Q30. From what you just told me, your activity meets the definition for "regular exercise", which is at least 20-60 minutes per session, 3 to 5 times per week. How long have you been active at this level? [READ RESPONSES]

- 1 Less than 6 months
- 2 More than 6 months
- 3 Don't know/Not sure (DO NOT READ)
- 4 Refuse (DO NOT READ)

*****FOR THOSE WHO ARE NOT MODERATE OR VIGOROUS BY IPAQ*****

Q31. Have you thought about increasing your physical activity level? Would you say: [READ RESPONSES]

- 1 Yes
- 2 No (SKIP TO Q32)
- 3 Don't know/Not sure (SKIP TO Q32)
- 4 Refuse (SKIP TO Q32)

Q31A. When do you anticipate beginning an increase in your physical activity? Would you say: [READ RESPONSES]

- 1 Within the next 30 days
- 2 Within the next 6 months
- 3 I do not intend to in the next 6 months
- 4 Don't know/Not sure (DO NOT READ)
- 5 Refuse (DO NOT READ)

*****FOOD AVAILABILITY AND CONSUMPTION*****

Q32. Is there a store convenient to you that sells a good variety of fresh or frozen fruits and vegetables?

- 1 Yes
- 2 No (SKIP TO Q34)
- 3 Don't know/Not sure (SKIP TO Q34)
- 4 Refuse (SKIP TO Q34)

Q33. Does the cost of the fresh or frozen fruits and vegetables fit within your budget?

- 1 Yes
- 2 No
- 3 Don't know/Not sure
- 4 Refuse

The next several questions are about what you eat on an average day.

Q34. A serving of fruit is a medium whole fruit like apples, peaches, pears, a 1/2 cup of chopped or canned fruit or berries, or a 1/4 cup of dried fruit, like raisins. How many servings of fruit do you eat on an average DAY?

1 Record number of servings _____

2 Don't know/Not sure

3 Refuse

Q35. A serving of vegetables is a cup of raw vegetables or a half a cup of cooked vegetables. Not counting French fries or chips, how many servings of vegetables do you eat on an average DAY?

1 Record number of servings _____

2 Don't know/Not sure

3 Refuse

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Q36. The next few questions are about things you drink. Remember that a regular can of soda is 12 ounces. How many 12 oz. (can) servings of soft drinks, like soda, cola, lemonade, sweet tea, or other sugar-sweetened drinks, do you drink on an average day? Don't include diet drinks.

1 Record number of servings _____

2 Don't know/Not sure

3 Refuse

Q37. How many 6 oz. or 3/4 cup servings of 100% fruit juice, like 100% orange, apple or grape juice, do you drink in an average DAY?

1 Record number of servings _____

2 Don't know/Not sure

3 Refuse

Q38. How many 6 oz. or 3/4 cup servings of 100% vegetable juice, like V8 or tomato juice, do you drink on an average day?

1 Record number of servings _____

2 Don't know/Not sure

3 Refuse

Q39. How many servings of less healthy foods, such as chips, a piece of pie or cake, cookies, candy or ice cream do you eat on an average day?

1 Record number of servings _____

2 Don't know/Not sure

3 Refuse

Q40. In general, how often do you eat a snack between meals? Would you say: [READ CHOICES]

1 More than once a day

2 Once a day (**SKIP TO Q41**)

3 Four to six times a week (**SKIP TO Q41**)

4 One to three times a week (**SKIP TO Q41**)

5 Rarely, or (**SKIP TO Q42**)

6 Never (**SKIP TO Q42**)

7 Don't know/Not sure (**DO NOT READ**) (**SKIP TO Q42**)

8 Refuse (**DO NOT READ**) (**SKIP TO Q42**)

Q40A. How many times a day do you snack between meals?

1 Record number of times _____

2 Don't know/Not sure

3 Refuse

Q41. When you do snack between meals, how often is it a healthy food such as fresh fruit, vegetables or nuts to eat?

Would you say: [READ CHOICES]

1 Almost all the time

2 Most of the time

3 Some of the time

4 Rarely, or

5 Never

6 Don't know/Not sure (**DO NOT READ**)

7 Refuse (**DO NOT READ**)

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Q42. Think about a serving of meat being the size of a deck of cards before cooking. How many servings of red meat do you eat during an average day or week? Red meat would include beef, lamb, pork

or sausage.

1 Record number of servings per WEEK _____

2 Record number of servings per DAY _____

3 Don't know/Not sure

4 Refuse

*****EATING HABITS*****

The next several questions are about what you eat on an average WEEK.

Q43. How many meals do you eat in a car during an average WEEK?

1 Record number of meals _____

2 Don't know/Not sure

3 Refuse

Q44. How many times do you eat meals prepared at home during an average WEEK?

1 Record number of meals _____

2 Don't know/Not sure

3 Refuse

Q45. How many times during an average WEEK do you eat meals at home where eating is the primary activity -- that is you are not watching television, reading, or on the computer at the same time?

1 Record number of times _____

2 Don't know/Not sure

3 Refuse

Q46. How many meals do you eat at a sit-down restaurant or fast food restaurant during an average WEEK?

1 Record number of times _____

2 Don't know/Not sure

3 Refuse

Q47. How many times do you eat meals or snacks while watching television during an average WEEK?

1 Record number of times _____

2 Don't know/Not sure

3 Refuse

Q48. Have you thought about improving your diet to eat more healthfully? Would you say:[READ CHOICES]

1 Yes

2 No (**SKIP TO Q49**)

3 Currently I am eating healthfully (**SKIP TO Q48B**)

4 Don't know/Not sure (DO NOT READ) (**SKIP TO Q49**)

5 Refuse (DO NOT READ) (**SKIP TO Q49**)

48a. When do you anticipate starting the improvement in your diet? Would you say: [READ CHOICES]

1 Within the next 30 days

2 Within the next 6 months

3 I do not intend to in the next 6 months

4 Don't know/Not sure (DO NOT READ)

>>>>>>>(**SKIP TO Q49**)

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48b. How long have you been eating healthfully? Would you say...[READ CHOICES]

1 Six months or less

2 Seven months or more

3 Don't know (DO NOT READ)

4 Refuse (DO NOT READ)

Q49. Do you look for nutrition labels or symbols (like a heart symbol) on menu items at restaurants and fast food establishments? Would you say: [READ LIST]

1 Yes, all of the time

2 Yes, most of the time

3 Yes, some of the time

4 No, not really

5 Don't know/Not sure (DO NOT READ)

6 Refuse (DO NOT READ)

Q50. Do you read the nutrition labels to determine what foods you buy? Would you say: [READ LIST]

1 Yes, all of the time

- 2 Yes, most of the time
- 3 Yes, some of the time
- 4 No, not really
- 5 Don't know/Not sure (DO NOT READ)
- 6 Refuse (DO NOT READ)

Q51. Do you use nutritional labels to decide the amount you should eat (serving size)? Would you say: [READ LIST]

- 1 Yes, all of the time
- 2 Yes, most of the time
- 3 Yes, some of the time
- 4 No, not really
- 5 Don't know/Not sure (DO NOT READ)
- 6 Refuse (DO NOT READ)

*****INTERVIEW CONSIDERED COMPLETED AT THIS POINT*****
 *****OBESITY/OVERWEIGHT*****

Next, I need to ask you some questions that might make you uncomfortable, but they are very important for this survey. I wanted to remind you that we will keep your responses confidential. Let me know if you don't want to answer any of them.

Q52. About how tall are you now without shoes?

- 1 Record height: FEET: _____ + INCHES: _____
- 2 Don't know/Not sure
- 3 Refuse

Q53. About how much do you weigh NOW without shoes?

- 1 Record weight in pounds _____
- 2 Don't know/Not sure
- 3 Refuse

Q53a. When was the last time you were weighed or weighed yourself?

- 1 Record # of DAYS since weighed last _____
- 2 Don't know/Not sure
- 3 Refuse

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Q54. How much did you weigh a year ago?

- 1 Record weight in pounds _____
- 2 Don't know/Not sure
- 3 Refuse

>>>>>>>> IF CHANGE IN WEIGHT IS LESS THAN 5 POUNDS (| Q53-Q54 | < 5), SKIP TO Q57

Q55. Was the change between your current weight and weight a year ago intentional?

- 1 Yes
- 2 No
- 3 Don't know/Not sure
- 4 Refuse

Q56. Do you consider yourself now to be: [READ LIST]

- 1 Overweight
- 2 Underweight
- 3 About the right weight
- 4 Don't know/Not sure (DO NOT READ)
- 5 Refuse (DO NOT READ)

Q57. During the past 12 months, have you tried to lose weight?

- 1 Yes
- 2 No (SKIP TO Q60)
- 3 Don't know/Not sure (SKIP TO Q60)
- 4 Refuse (SKIP TO Q60)

Q58. How did you try to lose weight? [MARK ALL THAT APPLY - DO NOT READ]

- 1 Ate less food (amount)
- 2 Switched to foods with lower calories
- 3 Ate less fat

- 4 Exercised more
- 5 Skipped meals
- 6 Ate "Diet" foods or products
- 7 Used a liquid diet such as Slimfast or Optifast
- 8 Joined weight loss program (Weight Watchers, Jenny Craig, etc.)
- 9 Other (SPECIFY)_____

10 Don't know

11 Refuse

>>>>>> **IF (Q55 < 1) SKIP TO Q60**

Q59. Why did you want to lose weight? [MARK ALL THAT APPLY - DO NOT READ]

- 1 To reduce risk of heart disease
- 2 To reduce risk of diabetes
- 3 To reduce risk of other diseases (SPECIFY DISEASE)
- 4 To look better
- 5 To feel better
- 6 To function better
- 7 To be healthier
- 8 Other (SPECIFY)_____

9 Don't know/Not sure

10 Refuse

*****HEALTH STATUS & ADVICE FROM DOCTOR*****

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Next, I would like to ask you some questions about visits you have had with your doctor.

Q60. In the past 12 months, have you seen your doctor?

- 1 Yes
- 2 No (**SKIP TO Q63**)
- 3 Don't know/Not sure (**SKIP TO Q63**)
- 4 Refuse (**SKIP TO Q63**)

Q61. Did your doctor give you advice about nutrition in the past 12 months?

- 1 Yes
- 2 No
- 3 Don't know/Not sure
- 4 Refuse

Q62. Did your doctor give you advice about physical activity in the past 12 months?

- 1 Yes
- 2 No
- 3 Don't know/Not sure
- 4 Refuse

Q63. As you may know, there are some health problems that are caused by being overweight. Please tell me any health problems you can think of that are caused by being overweight?

(DO NOT READ LIST. ALLOW MULTIPLE RESPONSES)

- 1 High blood pressure/hypertension
- 2 High blood cholesterol/dyslipidemia
- 3 Type 2 (non-insulin dependent) diabetes
- 4 Insulin resistance, glucose intolerance (a sign of pre-diabetes)
- 5 High insulin levels/hyperinsulinemia
- 6 Coronary heart disease/myocardial infarction
- 7 Congestive heart failure
- 8 Other (SPECIFY)_____

9 Don't know/Not sure

10 Refuse

Next, I want to ask you about smoking cigarettes.

Q64. Have you ever smoked at least 100 cigarettes in your entire life?

- 1 Yes
- 2 No (**SKIP TO Q66**)
- 3 Don't know/Not sure

4 Refuse

Q65. Do you now smoke every day, some days or not at all?

1 Everyday

2 Some days

3 Not at all

4 Don't know/Not sure (DO NOT READ)

5 Refuse (DO NOT READ)

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The next several questions are about your general health.

Q66. Would you say that in general your health is...[READ LIST]

1 Excellent

2 Very good

3 Good

4 Fair, or

5 Poor

6 Don't know/Not sure (DO NOT READ)

7 Refuse (DO NOT READ)

Q67. During the past 30 days, for about how many days did poor physical or mental health keep you from being physically active?

1 Record # of DAYS _____

2 Don't know/Not sure

3 Refuse

Q68. Are you limited in any way in any activities because of physical, mental, or emotional problems?

1 Yes

2 No (**SKIP TO Q70**)

3 Don't know/Not sure

4 Refuse

Q69. What health conditions do you have that might keep you from exercising as much as you should?

1 Injury

2 Arthritis or other chronic pain

3 Physical handicap

4 Disease (SPECIFY) _____

5 Other (SPECIFY) _____

6 Don't know/Not sure

7 Refuse

Q70. During the past 30 days, for about how many days have you felt sad, blue, or depressed?

1 Record # of DAYS _____

2 Don't know/Not sure

3 Refuse

70a. On a typical night, how many hours of sleep do you get?

1 Less than 6 hours

2 6 to 7 hours

3 8 hours

4 More than 8 hours

5 Don't know

6 Refuse

Q71. Has a doctor, nurse or other health professional ever told you that you had any of the following?

a. A heart attack, also called a myocardial infarction

1 Yes

2 No

3 Don't know/Not sure

4 Refuse

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b. Angina or coronary heart disease

1 Yes

- 2 No
 - 3 Don't know/Not sure
 - 4 Refuse
 - c. A stroke
 - 1 Yes
 - 2 No
 - 3 Don't know/Not sure
 - 4 Refuse
 - d. Diabetes or high blood sugar
 - 1 Yes
 - 2 No
 - 3 Don't know/Not sure
 - 4 Refuse
 - e. High blood pressure
 - 1 Yes
 - 2 No
 - 3 Don't know/Not sure
 - 4 Refuse
 - f. High cholesterol
 - 1 Yes
 - 2 No
 - 3 Don't know/Not sure
 - 4 Refuse
 - g. Chronic lung disease, asthma or emphysema
 - 1 Yes
 - 2 No
 - 3 Don't know/Not sure
 - 4 Refuse
 - h. Arthritis
 - 1 Yes
 - 2 No
 - 3 Don't know/Not sure
 - 4 Refuse
 - Q71I. Has a doctor, nurse or other health professional ever told you that you had any other chronic health problem?
 - 1 Yes
 - 2 No (**SKIP TO Q72**)
 - 3 Don't know/Not sure (**SKIP TO Q72**)
 - 4 Refuse (**SKIP TO Q72**)
 - Q71I_OTH. What other chronic health problems have you been told that you have?
-

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Q72. Has a doctor ever told you that you were overweight?

- 1 Yes
- 2 No (**SKIP TO Q73**)
- 3 Don't know/Not sure (**SKIP TO Q73**)
- 4 Refuse (**SKIP TO Q73**)

Q72a. About how long ago was that?

- 1 Record # of years here _____
- 2 Don't know/Not sure
- 3 Refuse

ENTER "0" IF LESS THAN 1 YEAR AGO

The last questions are about you and your household.

Q73. How many people live in your household?

- 1 Record TOTAL # of people in household _____
- 2 Don't know/Not sure

3 Refuse

Q73A. How many of the people in your household are less than 18 years of age?

1 Record # of people UNDER 18 in household _____

2 Don't know/Not sure

3 Refuse

Q74. What is the highest grade or year of school you completed? [DO NOT READ THE LIST]

1 Never attended school or only attended kindergarten

2 Grades 1 through 8 (Elementary)

3 Grades 9 through 11 (Some high school)

4 Grade 12 or GED (High school graduate)

5 College 1 year to 3 years (Some college or technical school)

6 College 4 years or more (College graduate)

7 Don't know/ Not sure

8 Refused

>>>>>>>>> Q75, Q76, AND Q77 DETERMINE WHAT RANGE OF FEDERAL POVERTY LEVEL % WITHIN WHICH THE HOUSEHOLD INCOME FALLS. THIS DEPENDS ON THE NUMBER OF PERSONS IN THE HOUSEHOLD.

Household income can affect your opportunities to exercise or to purchase whatever food you'd like, so we'd like to ask about your household income, in broad ranges.

Q75. Is your annual household income less than _____

1 Yes

2 No (**SKIP TO Q78**)

3 Don't know/Not sure

4 Refuse (**SKIP TO Q78**)

>>>>>>>>> ASK ACCORDING TO NUMBER OF PERSONS IN THE HOUSEHOLD.

IF (Q73 =DK/REFUSE) SHOW "\$92,880"

IF (Q73 = 1) SHOW "\$26,940"

IF (Q73 = 2) SHOW "\$36,360"

IF (Q73 = 3) SHOW "\$45,780"

IF (Q73 = 4) SHOW "\$55,200"

IF (Q73 = 5) SHOW "\$64,620"

IF (Q73 = 6) SHOW "\$74,040"

IF (Q73 = 7) SHOW "\$83,460"

IF (Q73 = 8) SHOW "\$92,880"

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IF (Q73 > 8) SHOW "ANSWER" OF [$\$92880 + ((Q73 - 8) * 9240)$]

Q76. Is your annual household income less than _____

1 Yes

2 No (**SKIP TO Q78**)

3 Don't know/Not sure

4 Refuse (**SKIP TO Q78**)

>>>>>>>>> ASK ACCORDING TO NUMBER OF PERSONS IN THE HOUSEHOLD

IF (Q73 =DK/REFUSE) SHOW "\$61,920"

IF (Q73 = 1) SHOW "\$17,960"

IF (Q73 = 2) SHOW "\$24,240"

IF (Q73 = 3) SHOW ""\$30,520"

IF (Q73 = 4) SHOW "\$36,800"

IF (Q73 = 5) SHOW "\$43,080"

IF (Q73 = 6) SHOW "\$49,360"

IF (Q73 = 7) SHOW "\$55,640"

IF (Q73 = 8) SHOW "\$61,920"

IF (Q73 > 8) SHOW "ANSWER" OF [$\$61920 + ((Q73 - 8) * 6280)$]

Q77. Is your annual household income less than _____

1 Yes

2 No

3 Don't know/Not sure

4 Refuse

>>>>>>>>>INSTRUCTIONS

IF (Q73 =DK/REFUSE) SHOW "\$30,960"

IF (Q73 = 1) SHOW "\$ 8,980"

IF (Q73 = 2) SHOW "\$12,120"

IF (Q73 = 3) SHOW "\$15,260"

IF (Q73 = 4) SHOW "\$18,400"

IF (Q73 = 5) SHOW "\$21,540"

IF (Q73 = 6) SHOW "\$24,680"

IF (Q73 = 7) SHOW "\$27,820"

IF (Q73 = 8) SHOW "\$30,960"

IF (Q73 > 8) SHOW "ANSWER" OF [$\$30960 + ((Q73 - 8) * 3140)$]

Q78. What are the street names for the closest intersection to your home?

1 Record Street Names _____

2 Don't know/Not sure

3 Refuse

We are planning to ask individuals from the population to attend a meeting to discuss some findings from this survey. A small incentive will be provided.

Q79. Would you be willing to participate in a group discussion about topics in this survey?

1 Yes

2 No (**SKIP TO END**)

COLLECT RESPONDENT INFO:

What is your name? _____ CONFIRM PROPER SPELLING

May we contact you at this telephone number?

1 Yes

2 No

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If 'no', at what telephone number may we contact you? _____

What is your email address, if you have one? _____

That was the last question. Thank you very much for your help in health planning for the community. Good-bye.