



california
health
interview
survey

CHIS 2022

Adult CATI Questionnaire

(Interviewer-Administered)

Version 1.01 Spanish

January 12, 2022

Adult Respondents Age 18 and Older

Collaborating Agencies:

- UCLA Center for Health Policy Research
- California Department of Health Care Services
- California Department of Public Health

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Guide to Questionnaire Formatting

The following are from the 2022 CHIS Adult questionnaire, slightly modified and in no given order.

Legend (each item is identified only once)

Programming note	Defines a skip pattern or text display for the subsequent question(s).
QID	Designates location of question, i.e. 'QA21_A1': Adult questionnaire, Section A, question #1. The question # in the QID denotes question order. This may vary between survey cycles.
Var ID	Unique ID of each question. This generally stays the same between survey cycles. This variable name correlates with the name found in the data file.
Lowercase text	On CATI, this text is read to the respondent.
Uppercase text	On CATI, this text is NOT read to the respondent.
If Needed statement	On CATI, this text is only read if interview deems it helpful for respondent.
Interviewer Note	On CATI, this serves as additional instruction for the interviewer and is not read at loud.
Range	On CATI, this text is not read. SR: indicates soft range- allowable entry but will prompt verification message. HR: indicates hard range- not an allowable entry.
Skip note	Defines skip patterns dependent on the responses of the preceding question(s).
Dynamic text	{...} and (...) Denotes that text is automatically filled based on previous responses.

PROGRAMMING NOTE 'QA21_A1' :
SET AADATE = CURRENT DATE (YYYYMMDD)

'QA21_A1' [AA1] - What is your date of birth?

MONTH _____ [RANGE: 1-12]

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

DAY _____ [RANGE: 1-31]

YEAR _____ [RANGE: 1907-2004]

- 7 REFUSED
- 8 DON'T KNOW

'QA21_A8' [AD68B] - Just to confirm, you were assigned {INSERT RESPONSE FROM 'QA21_A5'} at birth and now describe yourself as {INSERT RESPONSE FROM 'QA21_A6' OR 'QA21_A7'}. Is that correct?

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, goto 'QA21_A6' AND FLAG 'QA21_A8' = 1

'QA21_K2' [AK7] - How long have you worked at your main job?

[IF NEEDED, SAY: "That is, for your current employer."]

[INTERVIEWER NOTE: IF LESS THAN 1 MONTH BUT MORE THAN 0 DAYS, ENTER 1 MONTH]

_____ MONTHS [HR: 0-12]
_____ YEARS [HR: 0-50]

- 7 REFUSED
- 8 DON'T KNOW

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NOTE: Please consult the CHIS 2022 Data Dictionaries for additional information on variables, the population universe answering a specific question, and data file content.

Section A: Demographic Information, Part I

PROGRAMMING NOTE 'QA21_A1' :
SET AADATE = CURRENT DATE (YYYYMMDD)

'QA21_A1' [AA1] - What is your date of birth?

¿En qué mes y año nació?

MONTH _____ [RANGE: 1-12]

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

DAY _____ [RANGE: 1-31]

YEAR _____ [RANGE: 1907-2004]

- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_A2' :
IF 'QA21_A1' = -7 OR -8 (REF/DK), CONTINUE WITH 'QA21_A2' ;
ELSE GO TO 'QA21_A5'

'QA21_A2' [AA1A] - What month and year were you born?

¿En qué mes y año nació?

MONTH _____ [RANGE: 1-12]

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

YEAR _____ [RANGE: 1907-2004]

- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_A3' :
IF 'QA21_A2' = -7 OR -8 (REF/DK) THEN CONTINUE WITH 'QA21_A3' ;
ELSE GO TO 'QA21_A5'

'QA21_A3' [AA2] - What is your age, please?

¿Me podría decir su edad por favor?

_____ YEARS OF AGE [RANGE: 0-120]

- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_A4' :
IF 'QA21_A3' = -7 OR -8 (REF/DK) THEN CONTINUE WITH 'QA21_A4' ;
ELSE GO TO 'QA21_A5'

'QA21_A4' [AA2A] - Are you between 18 and 29, between 30 and 39, between 40 and 44, between 45 and 49, between 50 and 64, or 65 or older?

¿Tiene usted entre 18 y 29 años, entre 30 y 39 años, entre 40 y 44 años, entre 45 y 49 años, entre 50 y 64 años o tiene 65 años de edad o más?

- 1 BETWEEN 18 AND 29
- 2 BETWEEN 30 AND 39
- 3 BETWEEN 40 AND 44
- 4 BETWEEN 45 AND 49
- 5 BETWEEN 50 AND 64
- 6 65 OR OLDER
- 7 REFUSED
- 8 DON'T KNOW

POST NOTE 'QA21_A4' : AAGE ENUM.AGE
CALCULATE VALUE OF AAGE BASED ON 'QA21_A1' , 'QA21_A2' , OR 'QA21_A3' TO USE IN ALL
AGE-RELATED QUESTIONS;
IF 'QA21_A1' , 'QA21_A2' , OR 'QA21_A3' = -7 OR -8 (REF/DK), THEN USE 'QA21_A4' ;
ELSE USE ENUM.AGE

PROGRAMMING NOTE 'QA21_A5':
IF PROXY=1, GO TO 'QA21_A9'

'QA21_A5' [AD65D] - On your original birth certificate, was your sex assigned as male or female?

En su certificado de nacimiento original, ¿el sexo que le asignaron fue hombre o mujer?

- 01 MALE
- 02 FEMALE
- 7 REFUSED
- 8 DON'T KNOW

'QA21_A6' [AD66B] - Do you currently describe yourself as male, female, or transgender?

¿Actualmente se describe a sí mismo(a) como hombre, mujer o transgénero?

- 01 MALE
- 02 FEMALE
- 03 TRANSGENDER
- 04 NONE OF THESE
- 7 REFUSED
- 8 DON'T KNOW

If = -7, -8 go to 'QA21_A9'

If = 1, 2, 3, goto 'PN_QA21_A8'

PROGRAMMING NOTE 'QA21_A7':
IF 'QA21_A6' = 4 THEN CONTINUE WITH 'QA21_A7';
ELSE SKIP TO PN_'QA21_A8'

'QA21_A7' [AD67B] - What is your current gender identity?

¿Cuál es su identidad sexual actual?

- 1 SPECIFY: (_____)
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_A8':IF ['QA21_A5' = 1 (MALE AT BIRTH) AND 'QA21_A6' = 1 (IDENTIFIES AS MALE)] OR ['QA21_A5' = 2 (FEMALE AT BIRTH) AND 'QA21_A6' = 2 (IDENTIFIES AS FEMALE)] OR 'QA21_A5'=-7,-8 OR 'QA21_A6'=-7, -8 THEN SKIP TO 'QA21_A9' ;ELSE CONTINUE WITH 'QA21_A8' ; DISPLAYS;IF ['QA21_A5' = 1 (MALE AT BIRTH) AND 'QA21_A6' = 2 (FEMALE), THEN DISPLAY {male} and {female};IF ['QA21_A5' = 1 (MALE AT BIRTH) AND 'QA21_A6' = 3 (TRANSGENDER), THEN DISPLAY {male} and {transgender}; IF ['QA21_A5' = 2 (FEMALE AT BIRTH) AND 'QA21_A6' =1 (MALE), THEN DISPLAY {female} and {male};IF ['QA21_A5' = 2 (FEMALE AT BIRTH) AND 'QA21_A6' = 3 (TRANSGENDER), THEN DISPLAY {female} and {transgender};

'QA21_A8' [AD68B] - Just to confirm, you were assigned {INSERT RESPONSE FROM AD65D} at birth and now describe yourself as {INSERT RESPONSE FROM 'AD66' OR 'QA21_A7'}. Is that correct?

Solo para confirmar, le asignaron el sexo al nacer y ahora se describe como {INSERT RESPONSE FROM AD65D}. ¿Es esto correcto?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

IF = 2, goto 'QA21_A6' AND FLAG 'QA21_A8' = 1

'QA21_A9' [AA4] - Are you Latino or Hispanic?

¿Es usted latino(a) o hispano(a)?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto 'PN_QA21_A11'

'QA21_A10' [AA5] - And what is your Latino or Hispanic ancestry or origin? Such as Mexican, Salvadoran, Cuban, Honduran-- and if you have more than one, tell me all of them.

¿Y cuál es su ascendencia u origen latino o hispano? Por ejemplo, mexicano, salvadoreño, cubano, hondureño- y si usted tiene más de uno, dígame los todos

[IF NECESSARY, GIVE MORE EXAMPLES]

[CODE ALL THAT APPLY]

- 01 MEXICAN/MEXICAN AMERICAN/CHICANO
- 04 SALVADORAN
- 05 GUATEMALAN
- 06 COSTA RICAN
- 07 HONDURAN
- 08 NICARAGUAN
- 09 PANAMANIAN
- 10 PUERTO RICAN
- 11 CUBAN
- 12 SPANISH-AMERICAN (FROM SPAIN)
- 91 OTHER LATINO (SPECIFY: _____)
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_A11' :

**IF 'QA21_A9' = 1 (YES, LATINO/HISPANIC) DISPLAY 'You said you are Latino or Hispanic. Also,';
IF MORE THAN ONE RACE GIVEN AFTER ENTERING RESPONSES FOR 'QA21_A11', CONTINUE
WITH PROGRAMMING NOTE 'QA21_A14';
ELSE FOLLOW SKIPS AS INDICATED FOR SINGLE RESPONSES**

'QA21_A11' [AA5A] - {You said you are Latino or Hispanic. Also,} please tell me which one or more of the following you would use to describe yourself. Would you describe yourself as Native Hawaiian, Other Pacific Islander, American Indian, Alaska Native, Asian, Black, African American, or White?

{Me dijo que usted es latino(a) o hispano(a). Además,} por favor dígame cuál o cuáles de los siguientes usaría usted para describirse a sí mismo(a). ¿Se describiría a sí mismo/a como nativo/a de Hawái, de las islas del Pacífico, indio/a americano/a, nativo/a de Alaska, asiático/a, negro/a, afroamericano/a o blanco/a?

[IF R SAYS 'NATIVE AMERICAN' CODE AS '4']

[IF R GIVES ANOTHER RESPONSE YOU MUST SPECIFY WHAT IT IS]

[CODE ALL THAT APPLY]

- 01 WHITE
- 02 BLACK OR AFRICAN AMERICAN
- 03 ASIAN
- 04 AMERICAN INDIAN OR ALASKA NATIVE
- 05 PACIFIC ISLANDER
- 06 NATIVE HAWAIIAN
- 7 REFUSED
- 8 DON'T KNOW
- 91 OTHER (SPECIFY: _____)

If 'QA21_A11'=1 Or 2, go to 'PN_QA21_A19'

If 'QA21_A11'=3, go to 'PN_QA21_A17'

If 'QA21_A11'=5, go to 'QA21_A18'

If 'QA21_A11'=6, go to 'QA21_A19'

If 'QA21_A11'=1, go to 'QA21_A12'

If 'QA21_A11'=2, go to 'QA21_A13'

PROGRAMMING NOTE 'QA21_A12' :

**IF 'QA21_A11' = 1 (WHITE), CONTINUE WITH 'QA21_A12';
ELSE GO TO PROGRAMMING NOTE 'QA21_A14'**

'QA21_A12' [AA5H]- What are your white origin or origins?

¿Cuál es el origen o cuáles son los orígenes de su raza blanca?

For example, German, Irish, English, Italian, Armenian, Iranian, etc.

Por ejemplo, alemán, irlandés, inglés, italiano, armenio, iraní, etc.

- 1 (SPECIFY: _____)
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_A13' :
IF 'QA21_A11' = 2 (BLACK OR AFRICAN AMERICAN), CONTINUE WITH 'QA21_A13';
ELSE GO TO PROGRAMMING NOTE 'QA21_A14'

'QA21_A13' [AA5I]- What are your Black origin or origins?

¿Cuál es el origen o cuáles son los orígenes de su raza negra?

For example, African American, Nigerian, Ethiopian, Jamaican, Haitian, Ghanaian, etc.

Por ejemplo, afroamericano, nigeriano, etíope, jamaicano, haitiano, ghanés, etc.

- 1 (SPECIFY: _____)
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_A14' :
IF 'QA21_A11' = 4 (AMERICAN INDIAN OR ALASKA NATIVE), CONTINUE WITH 'QA21_A14' ;
ELSE GO TO PROGRAMMING NOTE 'QA21_A17'

'QA21_A14' [AA5B] - You said, American Indian or Alaska Native, and what is your tribal heritage? If you have more than one tribe, tell me all of them.

Usted dijo indio(a) americano(a) o nativo(a) de Alaska. ¿De qué tribu es descendiente?

[CODE ALL THAT APPLY]

- 1 APACHE
- 2 BLACKFOOT/BLACKFEET
- 3 CHEROKEE
- 4 CHOCTAW
- 5 MEXICAN AMERICAN INDIAN
- 6 NAVAJO
- 7 POMO
- 8 PUEBLO
- 9 SIOUX
- 10 YAQUI
- 91 OTHER TRIBE (SPECIFY: _____)
- 7 REFUSED
- 8 DON'T KNOW

'QA21_A15' [AA5C] - Are you an enrolled member in a federally or state recognized tribe?

¿Es usted miembro inscrito en una tribu reconocida por el estado o el gobierno federal?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto 'PN_QA21_A17'

'QA21_A16' [AA5D] - Which tribe are you enrolled in?

¿En qué tribu está inscrito(a) usted?

- 1 APACHE
 - 2 BLACKFOOT/BLACKFEET
 - 3 CHEROKEE
 - 4 CHOCTAW
 - 5 MEXICAN AMERICAN INDIAN
 - 6 NAVAJO
 - 7 POMO
 - 8 PUEBLO
 - 9 SIOUX
 - 10 YAQUI
 - 91 OTHER TRIBE (SPECIFY: _____)
- APACHE
- 1 MESCALERO APACHE, NM
 - 2 APACHE (NOT SPECIFIED)
 - 3 OTHER APACHE (SPECIFY: _____)
- BLACKFEET
- 4 BLACKFOOT/BLACKFEET
- CHEROKEE
- 5 WESTERN CHEROKEE
 - 6 CHEROKEE (NOT SPECIFIED)
 - 7 OTHER CHEROKEE (SPECIFY: _____)
- CHOCTAW
- 8 CHOCTAW OKLAHOMA
 - 9 CHOCTAW (NOT SPECIFIED)
 - 10 OTHER CHOCTAW (SPECIFY: _____)
- NAVAJO
- 11 NAVAJO (NOT SPECIFIED)
- POMO
- 12 HOPLAND BAND, HOPLAND RANCHERIA
 - 13 SHERWOOD VALLEY RANCHERIA
 - 14 POMO (NOT SPECIFIED)
 - 15 OTHER POMO (SPECIFY: _____)
- PUEBLO
- 16 HOPI
 - 17 YSLETA DEL SUR PUEBLO OF TEXAS
 - 18 PUEBLO (NOT SPECIFIED)
 - 19 OTHER PUEBLO (SPECIFY: _____)
- SIOUX
- 20 OGLALA/ PINE RIDGE SIOUX
 - 21 SIOUX (NOT SPECIFIED)
 - 22 OTHER SIOUX (SPECIFY: _____)
- YAQUI
- 23 PASCUA YAQUI TRIBE OF ARIZONA
 - 24 YAQUI (NOT SPECIFIED)
 - 25 OTHER YAQUI (SPECIFY: _____)
- OTHER
- 91 OTHER (SPECIFY: _____)
 - 7 REFUSED
 - 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_A17' :
IF 'QA21_A11' = 3 (ASIAN) CONTINUE WITH 'QA21_A17' ;
ELSE GO TO PROGRAMMING NOTE 'QA21_A18'

'QA21_A17' [AA5E] - You said Asian, and what specific ethnic group are you, such as Chinese, Filipino, Vietnamese? If you are more than one, tell me all of them.

Usted dijo asiático(a), ¿y de qué grupo étnico específico es usted, tal como chino, filipino o vietnamita? Si usted es de más de un grupo, dígame los todos.

[CODE ALL THAT APPLY]

- 1 BANGLADESHI
- 2 BURMESE
- 3 CAMBODIAN
- 4 CHINESE
- 5 FILIPINO
- 6 HMONG
- 7 INDIAN (INDIA)
- 8 INDONESIAN
- 9 JAPANESE
- 10 KOREAN
- 11 LAOTIAN
- 12 MALAYSIAN
- 13 PAKISTANI
- 14 SRI LANKAN
- 15 TAIWANESE
- 16 THAI
- 17 VIETNAMESE
- 91 OTHER ASIAN (SPECIFY: _____)
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_A18' :
IF 'QA21_A11' = 5 (OTHER PACIFIC ISLANDER) CONTINUE WITH 'QA21_A18' ;
ELSE GO TO PROGRAMMING NOTE 'QA21_A19'

'QA21_A18' [AA5E1] - You said you are Pacific Islander. What specific ethnic group are you, such as Samoan, Tongan, or Guamanian? If you are more than one, tell me all of them.

Usted dijo que es de una isla del Pacífico. ¿De qué grupo étnico específico es usted, tal como samoano, tongano o guameño? Si usted es de más de un grupo, dígamelos todos.

[CODE ALL THAT APPLY]

- 1 SAMOAN/AMERICAN SAMOAN
- 2 GUAMANIAN
- 3 TONGAN
- 4 FIJIAN
- 91 OTHER PACIFIC ISLANDER (SPECIFY: _____)
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_A19' :
IF 'QA21_A9' = 1 (LATINO) AND ['QA21_A11' = 6 (NATIVE HAWAIIAN) OR 'QA21_A11' = 5 (OTHER PACIFIC ISLANDER) OR 'QA21_A11' = 4 (AMERICAN INDIAN OR ALASKA NATIVE) OR 'QA21_A11' = 3 (ASIAN) OR 'QA21_A11' = 2 (BLACK/AFRICAN AMERICAN) OR 'QA21_A11' = 1 (WHITE) OR 'QA21_A11' = 91 (OTHER)], CONTINUE WITH 'QA21_A19' ;
ELSE IF THERE WERE MULTIPLE RESPONSES TO 'QA21_A11' , 'QA21_A17' , OR 'QA21_A18' [NOT COUNTING -7 OR -8 (REF/DK)], CONTINUE WITH 'QA21_A19' ;
ELSE SKIP TO 'QA21_A21'

'QA21_A19' [AA5G] - You said that you are: {INSERT MULTIPLE RESPONSES FROM AA5, AA5A, AA5E AND AA5E1}.

Usted me dijo que es: {INSERT MULTIPLE RESPONSES FROM AA5, AA5A, AA5E AND AA5E1}

Do you identify with any one race in particular?

¿Se identifica usted con alguna raza en particular?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto 'QA21_A21'

PROGRAMMING NOTE FOR 'QA21_A20' :IF 'QA21_A9' = 1 (YES, LATINO) AND 'QA21_A10' ≠ (-7 OR -8), DO NOT DISPLAY 'QA21_A20' = 14 (LATINO);IF 'QA21_A11' = 5 (YES, OTHER PACIFIC ISLANDER) AND 'QA21_A18' = [(1 TO 4) OR 91], DO NOT DISPLAY 'QA21_A20' = 17 (OTHER PACIFIC ISLANDER);IF 'QA21_A11' = 3 AND 'QA21_A17' = [(1 TO 17) OR 91], DO NOT DISPLAY 'QA21_A20' = 19 (ASIAN)

'QA21_A20' [AA5F] - Which do you most identify with?

¿Con cuál se identifica usted más?

[INTERVIEWER NOTE: IF R UNABLE TO CHOOSE ONE, OFFER 'BOTH/ALL/MULTIRACIAL']

- 01 MEXICAN/MEXICAN AMERICAN/CHICANO
- 04 SALVADORAN
- 05 GUATEMALAN
- 06 COSTA RICAN
- 07 HONDURAN
- 08 NICARAGUAN
- 09 PANAMANIAN
- 10 PUERTO RICAN
- 11 CUBAN
- 11 CUBANO
- 12 SPANISH-AMERICAN (FROM SPAIN)
- 91 OTHER LATINO (SPECIFY: _____)
- 14 LATINO
- 14 LATINO
- 16 NATIVE HAWAIIAN
- 17 OTHER PACIFIC ISLANDER
- 18 AMERICAN INDIAN OR ALASKAN NATIVE
- 19 ASIAN
- 20 BLACK OR AFRICAN AMERICAN
- 21 WHITE
- 22 RACE, OTHER SPECIFY
- 30 BANGLADESHI
- 31 BURMESE
- 32 CAMBODIAN
- 33 CHINESE
- 34 FILIPINO
- 35 HMONG
- 36 INDIAN (INDIA)
- 37 INDONESIAN
- 38 JAPANESE
- 39 KOREAN
- 40 LAOTIAN
- 41 MALAYSIAN
- 42 PAKISTANI
- 43 SRI LANKAN
- 44 TAIWANESE
- 45 THAI
- 46 VIETNAMESE
- 49 ASIAN, OTHER (SPECIFY: _____)
- 50 SAMOAN/ AMERICAN SAMOAN
- 51 GUAMANIAN
- 52 TONGAN
- 53 FIJIAN

- 55 PACIFIC ISLANDER, OTHER SPECIFY: _____
- 90 BOTH/ALL/MULTIRACIAL
- 95 NONE OF THESE
- 7 REFUSED
- 8 DON'T KNOW

'QA21_A21' [AH36] - What languages do you speak at home?

¿Qué idiomas habla usted en su hogar?

[CODE ALL THAT APPLY.]

[PROBE: 'Any others?']

- 1 ENGLISH
- 2 SPANISH
- 3 CANTONESE
- 4 VIETNAMESE
- 5 TAGALOG
- 6 MANDARIN
- 7 KOREAN
- 8 ASIAN INDIAN LANGUAGES (INCLUDING HINDI, PUNJABI, URDU)
- 9 RUSSIAN
- 91 OTHER 1 (SPECIFY: _____)
- 92 OTHER 2 (SPECIFY: _____)
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_A22' :

IF 'QA21_A21' = 1 ONLY (ENGLISH IS ONLY LANGUAGE SPOKEN AT HOME), GO TO PROGRAMMING NOTE 'QA21_A23' ;

IF 'QA21_A21' >1 (SPEAKS LANGUAGE OTHER THAN ENGLISH AT HOME), CONTINUE WITH 'QA21_A22' AND DISPLAY: 'Since you speak a language other than English at home, we are interested in your own opinion of how well you speak English' AND DROP RESPONSE CATEGORY 'Not at all?';

SET AH37ENGL = ENGLSPAN TO STORE INTERVIEW LANGUAGE AT TIME 'QA21_A22' WAS ASKED

'QA21_A22' [AH37] - {Since you speak a language other than English at home, we are interested in your own opinion of how well you speak English.} Would you say you speak English...

{Ya que en su hogar se habla más de un idioma, nos interesa saber su opinión sobre qué tan bien habla el inglés.} ¿Diría usted que habla inglés

- 01 Very well,
- 01 *Muy bien*
- 02 Well,
- 02 *Bien*
- 03 Not well, or
- 03 *No bien, o*
- 04 Not at all?
- 04 *No lo habla?*
- 7 REFUSED
- 8 DON'T KNOW

'QA21_A23' [AH43] - Are you now married, living with a partner in a marriage-like relationship, widowed, divorced, separated, or never married?

¿Está usted actualmente casado(a), viviendo con su pareja en una relación similar a la del matrimonio, viudo(a), divorciado(a), separado(a) o nunca se ha casado?

[IF R MENTIONS MORE THAN ONE, CODE THE LOWEST NUMBER THAT APPLIES]

- 1 MARRIED
- 2 LIVING WITH PARTNER
- 3 WIDOWED
- 4 DIVORCED
- 5 SEPARATED
- 6 NEVER MARRIED
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_A24' :

IF ['QA21_A23' = 1 OR 2 (MARRIED OR LIVING WITH PARTNER)], THEN CONTINUE WITH 'QA21_A24' ;

IF 'QA21_A23' = 1, THEN DISPLAY 'spouse';

IF 'QA21_A23' = 2, THEN DISPLAY 'partner';

ELSE GO TO PROGRAMMING NOTE 'QA21_A26'

'QA21_A24' [AH44] - Is your {spouse/partner} also living in your household?

¿Vive su {esposo(a)/pareja} también en su casa?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_A25' [SC11A] - May I have your {spouse/partner}'s age and gender?

¿Podría darme el primer la edad de su {esposo(a)/pareja}?

[ENTER SPOUSE'S/PARTNER'S AGE AND SEX]

SPOUSE/PARTNER AGE [SR: 18-120] _____

SPOUSE/PARTNER SEX _____

**PROGRAMMING NOTE 'QA21_A26':
IF CHILD ROSTER NOT ALREADY COMPLETE, CONTINUE;
ELSE GOTO 'QA21_B1'**

'QA21_A26' [SC7B] - How many children, age 11 and younger including babies, normally live in this household?

¿Cuántos niños de hasta 11 años, incluyendo bebés, viven usualmente en este hogar?

CHILDREN UNDER 12 _____

'QA21_A27' [SC8B] - And, how many adolescents age 12-17, normally live in this household?

¿Cuántos adolescentes de entre 12 y 17 años viven usualmente en este hogar?

CHILDREN 12 -17 _____

POST NOTE SC8: SET KIDCNT = SC7 + SC8

'QA21_A28' [SC13A1] - {Let's start with the oldest} What is (the child's/this child's/the next child's) first name or initials?

Comencemos con el mayor} ¿Cómo se llama o cuáles son las iniciales (del menor/de este menor/del siguiente menor)?

Name/ Initials given (SPECIFY) _____

-7 REFUSED

'QA21_A29' [SC13A2] - What is (the child's/this child's) age?

¿Cuántos años tiene (el menor/este menor)?

_____ AGE

-7 REFUSED

**PROGRAMMING NOTE 'QA21_A30':
IF KIDCNT =1 INSERT 'the child's'
IF KIDCNT >1 INSERT 'this child's'**

'QA21_A30' [GENDER6] - What is {the child's/this child's} gender?

¿Cuál es el género {del menor/de este menor}?

- 01 MALE
 02 FEMALE
 3 REFUSED

PROGRAMMING NOTE 'QA21_A31':
IF AGE IS REFUSED FOR ANY CHILD ROSTER MEMBER, ASK 'QA21_A31' FOR EACH ROSTER MEMBER WITHOUT AN AGE
NOTE 'QA21_A31' IS PART OF THE CHILD ROSTER
(IF 'QA21_A29' =-7,-8. ASK 'QA21_A31' IMMEDIATELY FOR THAT CHILD BEFORE ROSTERING NEXT CHILD)
(IF 'QA21_A28' = -7,-8 AND 'QA21_A29'=-7,-8 INSERT 'the child'
AND DO NOT DISPLAY CHILD NAME/SEX)

'QA21_A31' [SC15A4] - Is {CHILD NAME/ the child} (READ LIST. ENTER ONE ONLY)

¿Tiene {CHILD NAME/el menor}..

- 01 0 to 5 years old, or
- 01 0 a 5 años, o
- 02 6 to 11 years old, or
- 02 de 6 a 11 años, o
- 03 12 to 17 years old?
- 03 de 12 a 17 años?
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_A32':
IF KIDCNT =1 INSERT 'the child'
IF KIDCNT >1 INSERT 'all the children'

'QA21_A32' [SC14B4] - Are you the parent or legal guardian of (the child/all the children) in your household?

¿Es usted el padre o tutor legal de (el niño / todos los niños) en su hogar?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_A33':
IF 'QA21_A32' = 2
ASK 'QA21_A34' FOR EACH CHILD IN THE ROSTER

'QA21_A33' [SC14B] - Are you the parent or legal guardian of {CHILD NAME/AGE/SEX}?

¿Es usted el padre/la madre o el tutor de (CHILD NAME/AGE/SEX)?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

**PROGRAMMING NOTE 'QA21_A34': IF NAME GIVEN AT 'QA21_A25' INSERT 'QA21_A25' NAME ELSE INSERT AR ADULT NAME/AGE/SEX's spouse/partner)
IF KIDCNT =1 INSERT 'the child'
IF KIDCNT >1 INSERT 'all the children'**

'QA21_A34' [SC14C1] - Is {SC11A NAME/ AR ADULT NAME/AGE/SEX 's spouse/partner) the parent or legal guardian of (the child/all the children) in your household?

¿Es {SC11A NAME/ AR ADULT NAME/AGE/SEX 's spouse/partner) el padre/la madre o el tutor de (CHILD NAME/AGE/SEX)?

- 1 YES
- 2 NO
- 3 REFUSED
- 4 DON'T KNOW

POST NOTE: IF 'QA21_A34' =1 AUTO POPULATE 'QA21_A35' AS 'YES' FOR ALL CHILDREN IN HH

**PROGRAMMING NOTE 'QA21_A35': IF 'QA21_A34' =2
ASK 'QA21_A35' FOR EACH CHILD IN THE ROSTER**

'QA21_A35' [SC14C2] - Is (INSERT AR ADULT NAME/ AGE/SEX's husband/wife/partner) the parent or legal guardian of (PERSON NAME/AGE/SEX)?

¿Es (INSERT AR ADULT NAME/ AGE/SEX's husband/wife/partner) el padre/la madre o el tutor de (PERSON NAME/AGE/SEX)?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE SC15A1:

IF AGE IS REFUSED FOR ANY CHILD ROSTER MEMBER, ASK SC15A FOR EACH ROSTER MEMBER WITHOUT AN AGE

NOTE: SC15A IS PART OF THE CHILD ROSTER

PROGRAMMING NOTE:

IF 'QA21_A33'=1 THEN

CHILD1CNT = COUNT OF CHILDREN IN 'QA21_A33' AGED 0 TO 5 YRS

CHILD2CNT = COUNT OF CHILDREN IN 'QA21_A33' AGED 6 TO 11 YRS

TEENCNT = COUNT OF CHILDREN IN 'QA21_A33' AGED 12 TO 17 YRS

Child selection from only those with 'QA21_A33'=1

IF CHILD2CNT=0,

IF CHILD1CNT=1, CHILD AGED 0 TO 5 YRS IS [SELECTED CHILD],

ELSE IF CHILD1CNT>1, SELECT [SELECTED CHILD] WITH PROBABILITY 1/CHILD1CNT

ELSE IF CHILD1CNT=0,

IF CHILD2CNT=1, CHILD AGED 6 TO 11 YRS IS [SELECTED CHILD],

ELSE IF CHILD2CNT>1, SELECT [SELECTED CHILD] WITH PROBABILITY 1/CHILD2CNT

ELSE,

FOR EACH CHILD AGED 0 TO 5: SET CHILDPROB = $2 \times \text{CHILD1CNT} / (2 \times \text{CHILD1CNT} + \text{CHILD2CNT})$

FOR EACH CHILD AGED 6 TO 11: SET CHILDPROB = $\text{CHILD2CNT} / (2 \times \text{CHILD1CNT} + \text{CHILD2CNT})$

SELECT [SELECTED CHILD] FROM CHILDREN AGED 0 TO 11 WITH PROBABILITY CHILDPROB

Teen selection from only those with 'QA21_A33'=1

IF TEENCNT=1, CHILD AGED 12 TO 17 YRS IS [SELECTED TEEN],

ELSE IF TEENCNT IS > 1, SELECT [SELECTED TEEN] WITH PROBABILITY 1/TEENCNT

'QA21_A36' [SC13A] - ("I", "We") have recorded ^f('hkidHH')"child" : "children"17 or younger in this household. Have we missed anyone aged 17 or younger who usually lives here but is temporarily away?

("He", "Hemos")^ registrado a ('hkidHH'). ? "niño o niña de 17 años de edad o menor" : "niños de 17 años de edad o menores" en este hogar. ¿Nos faltó alguien de 17 años de edad o menor que normalmente vive aquí pero está fuera temporalmente?

- 1 NO, NO ONE MISSED
- 2 YES

If = 2, Go back to "QA21_A36'_Loop1'

POST NOTE SC13:

DO CHILD AND TEEN SELECTION BASED ON CRITERIA

CHILD_INDEX HOLDS THE VALUE OF THE SELECTED CHILD

TEEN_INDEX HOLDS THE VALUE OF THE SELECTED TEEN

SET_CHILD IS SET TO 1 IF A CHILD IS SELECTED

SET_TEEN IS SET TO 1 IF A TEEN IS SELECTED

'QA21_A37' [SC17B] - What is your relationship to {CHILD NAME/ AGE/SEX}?

¿Cuál es su relación con {CHILD NAME/AGE/SEX}?

- 1 MOTHER (BIRTH/ADOPTIVE/STEP/FOSTER)
- 2 FATHER (BIRTH/ADOPTIVE/STEP/FOSTER)
- 3 SISTER (BIRTH/ADOPTIVE/STEP/FOSTER)
- 4 BROTHER (BIRTH/ADOPTIVE/STEP/FOSTER)
- 5 GRANDMOTHER
- 6 GRANDFATHER
- 7 AUNT
- 8 UNCLE
- 9 COUSIN
- 10 OTHER RELATIVE
- 11 NONRELATIVE

POST NOTE 'QA21_A37':

IF A CHILD IS SELECTED, CONDUCT CHILD INTERVIEW FIRST AND DISPLAY INTRO1C 'We would now like to ask you some questions about (CHILD). This section of the interview takes about 15 minutes.'

Section B: Health Conditions

PROGRAMMING NOTE 'QA22_B1' :

IF TRANSITION STATEMENT EXPERIMENT SAMPLE (TSE=1), DISPLAY "Would you say that in general your health is excellent, very good, good, fair, or poor?"

ELSE IF TRANSITION STATEMENT CONTROL SAMPLE (TSE=2), DISPLAY "These next questions are about your health. Would you say that in general your health is excellent, very good, good, fair, or poor?"

'QA22_B1' [AB1] – {{ Would you say that in general your health is excellent, very good, good, fair, or poor? /These next questions are about your health.

Would you say that in general your health is excellent, very good, good, fair, or poor?}}

{{ En general, ¿diría usted que su salud es excelente, muy buena, buena, regular o mala?/ Estas preguntas que siguen son sobre su salud. En general, ¿diría usted que su salud es excelente, muy buena, buena, regular o mala?}}

- 1 EXCELLENT
- 2 VERY GOOD
- 3 GOOD
- 4 FAIR
- 5 POOR
- 7 REFUSED
- 8 DON'T KNOW

'QA21_B2' [AB17B] - Has a doctor ever told you that you have asthma?

¿Le ha dicho un doctor alguna vez que usted tenía asma?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto 'PN_QA21_B8'

'QA21_B3' [AB40] - Do you still have asthma?

¿Usted todavía tiene asma?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_B4' [AB41] - During the past 12 months, have you had an episode of asthma or an asthma attack?

Durante los últimos 12 meses, ¿ha tenido un episodio de asma o un ataque de asma?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_B5' [AB42] - During the past 12 months, how many days of work did you miss due to asthma?

Durante los últimos 12 meses, ¿cuántos días de trabajo perdió debido al asma?

[INTERVIEWER NOTE: IF NOT WORKING, ENTER ZERO]

_____ DAYS (0 - 365)

- 7 REFUSED
- 8 DON'T KNOW

'QA21_B6' [AB18] - Are you now taking a daily medication to control your asthma that was prescribed or given to you by a doctor?

¿Está tomando actualmente algún medicamento diario para controlar el asma que le haya sido dado o recetado por un médico?

[IF NEEDED, SAY: 'This includes both oral medicine and inhalers. This is different from inhalers used for quick relief.']

[IF NEEDED, SAY: 'Esto incluye medicamentos orales o que tienen que ser inhalados. Este medicamento es diferente a los inhaladores que se usan para alivio rápido.']

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_B7' [AB43] - Have your doctors or other medical providers worked with you to develop a plan so that you know how to take care of your asthma?

¿Le han hablado sus doctores u otros proveedores de atención médica sobre la preparación de un plan para que usted sepa cómo controlar su asma?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_B8' :IF 'QA21_A5' = 2 (FEMALE AT BIRTH) DISPLAY 'Other than during pregnancy, has';ELSE BEGIN DISPLAY WITH 'Has'

'QA21_B8' [AB22] - {Other than during pregnancy, has/Has} a doctor ever told you that you have diabetes or sugar diabetes?

{Sin contar los meses de embarazo, ¿le ha/ ¿Le ha} dicho un doctor alguna vez que tenía diabetes o diabetes de azúcar?

- 1 YES
- 2 NO
- 3 BORDERLINE OR PRE-DIABETES
- 7 REFUSED
- 8 DON'T KNOW

If = 3, goto 'QA21_B17'

PROGRAMMING NOTE 'QA21_B9': IF 'QA21_A5' = 2 (FEMALE AT BIRTH) DISPLAY "Other than during pregnancy, has"; ELSE BEGIN DISPLAY WITH "Has"

'QA21_B9' [AB99] - {Other than during pregnancy, has/Has} a doctor ever told you that you have pre-diabetes or borderline diabetes?

{Además de durante el embarazo, ¿le ha/ ¿Le ha} dicho un médico alguna vez que tiene prediabetes o diabetes marginal?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

**PROGRAMMING NOTE 'QA21_B10' :
IF 'QA21_B8' = 1 THEN CONTINUE WITH 'QA21_B10' ;
ELSE SKIP TO PROGRAMMING NOTE 'QA21_B17'**

'QA21_B10' [AB23] - How old were you when a doctor first told you that you have diabetes?

¿Qué edad tenía usted cuando un doctor le dijo por primera vez que usted tenía diabetes?

_____ AGE IN YEARS

- 7 REFUSED
- 8 DON'T KNOW

'QA21_B11' [AB51] - Were you told that you had Type 1 or Type 2 diabetes?

¿Le dijeron que tenía diabetes Tipo 1 o Tipo 2?

[IF NEEDED, SAY: 'Type 1 diabetes results from the body's failure to produce insulin and is usually diagnosed in children and young adults, but it can develop at any age. Type 2 diabetes results from insulin resistance and is the most common form of diabetes.']

[IF NEEDED, SAY: 'La diabetes Tipo 1 es causada porque el cuerpo no puede producir insulina y se diagnostica normalmente en niños y adultos jóvenes, pero puede desarrollarse a cualquier edad. La diabetes Tipo 2 es causada por la resistencia a la insulina y es la forma más común de diabetes']

- 1 TYPE 1
- 2 TYPE 2
- 91 ANOTHER TYPE (Specify: _____)
- 4 DOUBLE DIABETES (TYPE 1 AND TYPE 2)
- 7 REFUSED
- 8 DON'T KNOW

'QA21_B12' [AB24] - Are you now taking insulin?

¿Está tomando insulina actualmente?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_B13' [AB25] - Do you now take diabetic pills to lower your blood sugar?

¿Toma usted actualmente píldoras antidiabéticas para bajar el nivel de azúcar en la sangre?

[IF NEEDED, SAY: 'These are sometimes called oral agents or oral hypoglycemic agents.']

[IF NEEDED, SAY: 'A estas píldoras a veces se les llama agentes orales o agentes hipoglucémicos orales.']

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_B14' [AB27] - About how many times in the last 12 months has a doctor or other health professional checked you for hemoglobin 'A one C'?

¿Alrededor de cuántas veces, durante los últimos 12 meses, ha revisado un médico u otro profesional de la salud si tiene hemoglobina A1c?

[IF R NEVER HEARD OF IT, ENTER 995.]

_____ NUMBER OF TIMES [HR: 0-52]

- 7 REFUSED
- 8 DON'T KNOW

'QA21_B15' [AB63] - When was the last time you had an eye exam in which the pupils were dilated? This would have made your eyes sensitive to bright light for a short time.

¿Cuándo fue la última vez que le hicieron un examen de los ojos en el que le dilataron las pupilas? Este examen causa que los ojos queden más sensibles a la luz brillante durante un período corto de tiempo

- 1 WITHIN THE PAST MONTH
- 2 WITHIN THE PAST YEAR (1-12 MONTHS AGO)
- 3 WITHIN THE PAST 2 YEARS (1-2 YEARS AGO)
- 4 2 OR MORE YEARS AGO
- 5 NEVER
- 7 REFUSED
- 8 DON'T KNOW

'QA21_B16' [AB112] - Have your doctors or other medical providers worked with you to develop a plan so that you know how to take care of your diabetes?

¿Le han hablado sus doctores u otros proveedores de atención médica sobre la preparación de un plan para que usted sepa cómo controlar su diabetes?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_B17' [AB29] - Has a doctor ever told you that you have high blood pressure?

¿Le ha dicho alguna vez un doctor que usted tenía la presión arterial alta?

- 1 YES
- 2 NO
- 03 HIGH NORMAL/BORDERLINE/PRE-HYPERTENSION
- 7 REFUSED
- 8 DON'T KNOW

'QA21_B18' [AB34] - Has a doctor ever told you that you have any kind of heart disease?

¿Le ha dicho un doctor alguna vez que tenía algún tipo de enfermedad del corazón?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA22_B19' [AB148] - Has a doctor ever told you that you had a cancer of any kind?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

Section CV: COVID-19

'QA21_CV1' [CV1] - Have you ever had, or thought you might have had, the Coronavirus, COVID-19?

¿Tuvo o piensa que pudo haber tenido la enfermedad por coronavirus o COVID-19?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If= 2, -7, -8 goto 'QA21_CV3'

'QA20_CV2' [CV2] - Did you contact a health professional about your COVID-19 concerns?

¿Contactó a un/a profesional de la salud en relación con sus preocupaciones sobre la COVID-19?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_CV3' [CV4] - Were you ever tested for COVID-19?

¿Se sometió a un examen para detectar COVID-19 alguna vez?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto 'PN_QA21_CV5'

'QA21_CV4' [CV5] - Did you ever receive a positive test result for COVID-19?

¿Se sometió a un examen para detectar COVID-19 alguna vez?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA22_CV5':
IF ('QA22_CV1' =2,-3 AND 'QA22_CV3' =2,-3) OR ('QA22_CV1' =2,-3 AND 'QA22_CV4' =2,-3)),
GOTO TO 'QA22_CV6'; ELSE CONTINUE WITH 'QA22_CV5'

'QA22_CV5' [CV15]- Long-lasting COVID-19 symptoms could include tiredness, shortness of breath, changes to taste or smell, finding it hard to concentrate, or any other symptoms that impact on everyday functioning. Did you experience any of these symptoms for 2 months or longer?

Los síntomas duraderos de COVID-19 pueden incluir cansancio, falta de aire, cambios en el gusto y el olfato, dificultades para concentrarse, o cualquier otro síntoma que afecte el funcionamiento diario.
¿Experimentó Tuvo alguno de estos síntomas por 2 meses o más?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA22_CV6' [CV7B] - Have you experienced any of the following situations because of the Coronavirus or COVID-19 pandemic?

¿Ha pasado por alguna de las siguientes situaciones debido a la pandemia del coronavirus o COVID-19?

Select all that apply

- 01 I've lost my regular job due to layoffs, business closures, or market changes.
- 01 *Perdí mi trabajo regular debido a despidos, cierre de negocios o cambios en el mercado.*
- 02 I've lost my regular job due to vaccine mandates, or other COVID-19 safety policies
- 02 *Perdí mi trabajo regular debido a los mandatos de vacunación u otras políticas de seguridad relacionadas con COVID-19.*
- 03 I've had a reduction in hours, or a reduction in income.
- 03 *He tenido una reducción de horas de trabajo o una reducción de ingresos.*
- 04 I work entirely from home.
- 04 *Trabajo completamente desde casa.*
- 05 I work some days each week from home and some days each week in person.
- 05 *Algunos días de la semana trabajo desde casa y otros persona.*
- 06 I've continued to work entirely in person because it is required by my employer
- 06 *Continué trabajando persona únicamente porque así lo exige mi empleador.*
- 07 I've quit my regular job to take care of myself or a family member due to COVID-19 illness.
- 07 *Renuncié a mi trabajo regular para cuidar de mí o de un miembro de mi familia por la enfermedad de COVID-19.*
- 08 I've had difficulty in obtaining childcare, or had an increase in childcare expenses.
- 08 *He tenido dificultades para conseguir cuidado infantil o tuve un aumento en los gastos de cuidado infantil.*
- 09 I've had financial difficulties with paying rent or mortgage.
- 09 *He tenido dificultades económicas para pagar la renta o la hipoteca.*
- 10 I've had financial difficulties with basic necessities, such as paying bills, tuition, affording groceries, etc.
- 10 *He tenido dificultades económicas para pagar necesidades básicas, como recibos o gastos en educación, o para comprar alimentos, etc..*
- 11 I've been treated unfairly because of my race/ethnicity.
- 11 *Me han tratado injustamente debido a mi raza/origen étnico.*
- 12 I've experienced other challenges (Specify: _____)
- 12 *I've experienced other challenges (Specify: _____)*
- 13 None of these
- 13 *Ninguna de las opciones anteriores*
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA22_CV7': IF AA5A=3,5,6 AND ('QA22_CV6' =8 OR 9), CONTINUE WITH 'QA22_CV7', ELSE SKIP TO PN 'QA22_CV8'

'QA22_CV7' [CVA11] – Please select which types of bill(s) you had trouble paying during the COVID-19 pandemic:

Seleccione el tipo de factura que tuvo problemas para pagar durante la pandemia de COVID-19:

Select all that apply

Seleccione todas las opciones que correspondan.

- 01 Mortgage
- 01 *Hipoteca*
- 02 Rent
- 02 *Alquiler o renta*
- 03 Car payment
- 03 *Cuota del automóvil*
- 04 Car, home, or health insurance
- 04 *Seguro de automóvil, de hogar o de salud*
- 05 Home utilities
- 05 *Servicios públicos del hogar*
- 06 Credit card
- 06 *Tarjeta de crédito*
- 91 Other (Specify: _____)
- 91 *Otra opción (especifique: _____)*
- 07 None of these
- 07 *Ninguna de las opciones anteriores*

PROGRAMMING NOTE 'QA22_CV8': IF (AA5A=4 OR PART OF CONTROL GROUP), CONTINUE WITH 'QA22_CV8', ELSE SKIP TO 'QA22_CV11'

(Only administered for a subset of AIAN and selected non-AIAN respondents)

'QA22_CV8' [CVAIAN1] – Did your household receive COVID-19 relief stimulus checks in either 2020 or 2021?

¿Recibió su hogar cheques de estímulo de alivio por la pandemia de COVID-19 en 2020 o 2021?

[IF NEEDED, SAY: “Stimulus checks were called 2020 Coronavirus Aid, Relief, and Economic Security (CARES) Act, 2021 American Relief Plan (ARP), or the California Golden State Stimulus payments. Please do not consider the new Child Tax Credit funds from 2021.”]

[IF NEEDED, SAY: “Los cheques de estímulo se denominaron Ley de Ayuda, Alivio y Seguridad Económica para el Coronavirus (CARES) de 2020 [2020 Coronavirus Aid, Relief, and Economic Security (CARES) Act], Plan de Ayuda Estadounidense (ARP) de 2021 [2021 American Relief Plan (ARP)] o pagos de Estímulo del Estado Dorado de California [California Golden”]

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If=2, -7, -8 goto 'PN_QA22_CV10'

'QA22_CV9' [CVAIAN2] – How did your household use the stimulus money?

.¿Cómo utilizó su hogar el dinero de estímulo?

Check all that apply

- 1 RENT/MORTGAGE
- 2 ESSENTIALS LIKE FOOD OR CHILD CARE
- 3 PAYING OFF DEBTS, INCLUDING CREDIT CARDS
- 4 OTHER BILLS, SUCH AS CAR PAYMENTS, INSURANCE, OR UTILITIES PAYMENTS
- 5 VACATION, LEISURE OR RECREATION
- 6 SAVINGS
- 7 OTHER (SPECIFY:_____)
- 7 REFUSED
- 8 DON'T KNOW

'QA22_CV10' [CVAIAN3] – During the COVID-19 pandemic, how did you receive your healthcare?

Durante la pandemia de COVID-19, ¿cómo recibió su atención médica?

[IF NEEDED, SAY: “Please include mental, physical, eye, and dental care. ”]

[IF NEEDED, SAY: “Incluya atención mental, física, de la vista y dental. ”]

Select all that apply

Seleccione todas las opciones que correspondan.

- 1 I used some phone or video appointments instead of in-person appointments
- 1 *Algunas de las citas fueron por teléfono o video en lugar de citas en persona*
- 2 I continued to attend some healthcare appointments in-person
- 2 *Seguí asistiendo a algunas citas médicas en persona*
- 3 I delayed or did not receive some necessary care due to the pandemic
- 3 *Me retrasé o no recibí la atención necesaria debido a la pandemia*
- 4 None of the above
- 4 *Ninguna de las opciones anteriores*
- 7 REFUSED
- 8 DON'T KNOW

'QA22_CV11' [CV16]- Have you been fully vaccinated, partially vaccinated, or are you not vaccinated, for COVID-19?

¿Está completa o parcialmente vacunado/a contra COVID-19, o no lo está, COVID-19?

[IF NEEDED, SAY: “Fully vaccinated means one of the following: Receiving two shots of the Pfizer or Moderna vaccine, a single shot of the Johnson & Johnson vaccine, or two shots of the AstraZeneca or Sinovac vaccine (these are not approved in the US but are available in other countries).”]

[IF NEEDED, SAY: “Completamente vacunado/a significa una de las siguientes opciones: Recibió dos dosis de la vacuna Pfizer o Moderna, una dosis de la vacuna Johnson & Johnson, o dos dosis de la vacuna AstraZeneca o de la Sinovac (estas últimas no están aprobadas en Estados Unidos pero están disponibles en otros países).”]

- 1 Fully vaccinated
- 1 *Completamente vacunado/a*
- 2 Partially vaccinated
- 2 *Parcialmente vacunado/a*
- 3 Not vaccinated
- 3 *Sin vacunar*
- 7 REFUSED
- 8 DON'T KNOW

If = 1 goto 'QA22_CV13'

If = 2, 3 goto 'QA22_CV12'

If = -7,-8 goto 'QA22_CV15'

PROGRAMMING NOTE 'QA22_CV12': IF ('QA22_CV11'=2), CONTINUE AND DISPLAY “fully vaccinated”; ELSE DISPLAY “vaccinated”

'QA22_CV12' [CV17]- What are the reasons why you are not {fully} vaccinated?

¿Cuáles son las razones por las que no está {completamente} vacunado/a?

Select all that apply

- 1 I am worried about side effects
- 1 *Me preocupan los efectos secundarios*
- 2 I think the vaccine was developed too quickly
- 2 *Creo que la vacuna fue desarrollada demasiado rápido*
- 3 I don't know enough about the vaccine to make the decision to get it
- 3 *No sé lo suficiente sobre la vacuna como para tomar la decisión de ponérmela*
- 4 I think a vaccine for COVID-19 is unnecessary
- 4 *Creo que la vacuna contra COVID-19 no es necesaria*
- 5 I don't believe in vaccines in general
- 5 *En general no creo en las vacunas*
- 6 I do plan to get fully vaccinated
- 6 *Sí tengo planes de vacunarme completamente*
- 91 Something else, (specify:_____)
- 91 *Otra cosa (especifique:_____)*
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA22_CV13': IF 'QA22_CV11'=1, CONTINUE ELSE GOTO 'QA22_CV14'

'QA22_CV13' [CV18]- How likely are you to receive a COVID-19 booster shot?

¿Cuán probable es que reciba una vacuna de refuerzo contra COVID-19?

- 1 Very likely
- 1 *Muy probable*
- 2 Somewhat likely
- 2 *Algo probable*
- 3 Not very likely
- 3 *No muy probable*
- 4 Not at all likely
- 4 *Nada probable*
- 5 Already received a booster
- 5 *Ya recibí una dosis de refuerzo*
- 7 REFUSED
- 8 DON'T KNOW

If = 1, 2, 5, -7, -8 goto 'QA22_CV15'

PROGRAMMING NOTE 'QA22_CV14': IF 'QA22_CV13'=3, CONTINUE AND DISPLAY "not very likely"; ELSE IF 'QA22_CV13'=4 DISPLAY "not at all"

'QA22_CV14' [CV19]- What are the reasons why you are {not very/not at all} likely to receive a COVID-19 booster shot?

¿Cuáles son las razones por las que {no es muy /no es para nada probable} que reciba una vacuna de refuerzo contra COVID-19?

Select all that apply

- 1 I am worried about side effects
- 1 *Me preocupan los efectos secundarios*
- 2 I think the vaccine was developed too quickly
- 2 *Creo que la vacuna fue desarrollada demasiado rápido*
- 3 I don't know enough about the booster vaccine to make the decision to get it
- 3 *No sé lo suficiente sobre la vacuna como para tomar la decisión de ponérmela*
- 4 I think a booster vaccine for COVID-19 is unnecessary
- 4 *Creo que la vacuna contra COVID-19 no es necesaria*
- 5 I don't believe in vaccines in general
- 5 *En general no creo en las vacunas*
- 6 I do plan to get fully vaccinated
- 6 *Sí tengo planes de vacunarme completamente*
- 91 Something else, (specify:_____)
- 7 REFUSED
- 8 DON'T KNOW

'QA22_CV15' [CV10] - When leaving your home in the past week (last 7 days), how often have you done the following? Response options are: Never, Sometimes, Usually, or Always.

Quando salió de su casa la semana pasada (últimos 7 días), ¿cuán a menudo hizo lo siguiente? Las opciones de respuesta son: Nunca, a veces, por lo general o siempre.

Wore a face covering of any kind

Llevaba una cubierta facial de cualquier tipo

- 1 NEVER
- 2 SOMETIMES
- 3 USUALLY
- 4 ALWAYS
- 5 I DID NOT LEAVE HOME IN THE PAST WEEK

'QA22_CV16' [CV22] – In the past 30 days, have you participated in any gatherings with more than 1,000 attendees (if indoors) or 10,000 attendees (if outdoors)?

En los últimos 30 días, ¿ha participado en reuniones con más de 1,000 asistentes (en interiores) o 10,000 asistentes (al aire libre)?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA22_CV17' [CV20]- Where do you get updated news and information about COVID-19?

¿De dónde obtiene noticias e información actualizadas sobre COVID-19?

Select all that apply

- 01 Television
- 01 *La televisión*
- 02 Radio
- 02 *La radio*
- 03 Newspaper
- 03 *Los periódicos*
- 04 Governmental agencies
- 04 *Agencias gubernamentales*
- 05 Your doctor
- 05 *Su médico*
- 06 Family members
- 06 *Miembros de la familia*
- 17 Friends
- 17 *Amigos*
- 08 Your employer
- 08 *Su empleador*
- 09 Social media, such as Facebook, Twitter, Instagram, and WeChat
- 09 *Redes sociales, como Facebook, Twitter, Instagram y WeChat*
- 10 Religious leader
- 10 *Líder religioso*
- 11 Elders/Community leaders
- 11 *Adultos mayores/Líderes comunitarios*
- 12 None of these
- 12 *Ninguna de las opciones anteriores*
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA22_CV18' - ONLY DISPLAY RESPONSES SELECTED IN 'QA22_CV17'; ELSE IF ONLY ONE RESPONSE SELECTED, GOTO 'QA22_CV19'

'QA22_CV18' [CV21]- Where do you get most of your information about COVID-19?

¿De dónde obtiene la mayor parte de la información sobre el COVID-19?

- 01 Television
- 01 *La televisión*
- 02 Radio
- 02 *La radio*
- 03 Newspaper
- 03 *Los periódicos*
- 04 Governmental agencies
- 04 *Agencias gubernamentales*
- 05 Your doctor
- 05 *Su médico*
- 06 Family members
- 06 *Miembros de la familia*
- 17 Friends
- 17 *Amigos*
- 08 Your employer
- 08 *Su empleador*
- 09 Social media, such as Facebook, Twitter, Instagram, and WeChat
- 09 *Redes sociales, como Facebook, Twitter, Instagram y WeChat*
- 10 Religious leader
- 10 *Líder religioso*
- 11 Elders/Community leaders
- 11 *Adultos mayores/Líderes comunitarios*
- 7 REFUSED
- 8 DON'T KNOW

'QA22_CV19' [AG21] –In what languages are the TV shows, radio stations, or newspapers that you usually watch, listen, or read?

¿En qué idioma ve, escucha o lee usualmente prefiere para los programas de TV, estaciones de radio o periódicos?

- 01 ONLY ENGLISH
- 02 BOTH ENGLISH AND OTHER LANGUAGE(S)
- 03 ONLY OTHER LANGUAGE(S)
- 7 REFUSED
- 8 DON'T KNOW

'QA21_CV20' [CV14] - State and local guidelines for gathering with persons outside your household include recommendations such as gathering outdoors only, limiting gathering size, wearing face coverings, and staying home when sick.

Las pautas estatales y locales para reunirse con personas que no viven en su hogar incluyen recomendaciones tales como reunirse solamente al aire libre, limitar el tamaño de la reunión, usar cubiertas para la cara y quedarse en casa cuando esté enfermo.

In the past 30 days, when you gathered with persons not living in your household, how often have you followed state and local guidelines?

En los últimos 30 días, cuando se reunió con personas que no viven en su hogar, ¿con qué frecuencia siguió las pautas estatales y locales?

- 1 NEVER
- 2 SOMETIMES
- 3 USUALLY
- 4 ALWAYS

PROGRAMMING NOTE 'QA22_CV22': IF AA5A=3,5,6, CONTINUE WITH 'QA22_CV22', ELSE SKIP TO 'QA22_C1'

'QA22_CV22' [CVA1] - Over the past 12 months, have you experienced any of the following situations because of the Coronavirus or COVID-19 outbreak.

Durante los últimos 12 meses, ¿ha pasado por alguna de las siguientes situaciones debido al brote del coronavirus o COVID-19?

I have directly experienced a hate incident due to Coronavirus.

He sufrido directamente un incidente motivado por el odio debido al coronavirus.

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2,-7, -8 goto 'QA22_CV24'

'QA22_CV23' [CVA2] – Did you experience...

¿Pasó por alguna de las siguientes situaciones?

Select all that apply

Seleccione todas las opciones que correspondan.

- 01 Physical abuse or attack,
- 01 *Abuso o ataque físico*
- 02 Verbal abuse or insults,
- 02 *Abuso verbal o insultos*
- 03 Cyberbullying, or
- 03 *Ciberacoso*
- 04 Something else? (Specify: _____)
- 04 *¿Alguna otra situación? (Especifique: _____)*
- 05 None of these
- 05 *Ninguno de los anteriores*
- 7 REFUSED
- 8 DON'T KNOW

'QA22_CV24' [CVA3] - Over the past 12 months, have you experienced any of the following situations because of the Coronavirus or COVID-19 outbreak.

Durante los últimos 12 meses, ¿ha pasado por alguna de las siguientes situaciones debido al brote del coronavirus o COVID-19

I have witnessed another Asian or Pacific Islander person being treated unfairly due to their race, ethnicity, or national origin.

He visto que trataban injustamente a otra persona de las islas de Asia o del Pacífico debido a su raza, su origen étnico o su nacionalidad.

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA22_CV25' [CVA4] – Over the past 12 months, have you experienced any of the following situations because of the Coronavirus or COVID-19 outbreak.

Durante los últimos 12 meses, ¿ha pasado por alguna de las siguientes situaciones debido al brote del coronavirus o COVID-19

I have had difficulties performing my work due to poor internet or lack of usable computer.

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA22_CV26' [CVA7] – Please tell us the extent to which you agree or disagree with the following statements.

Díganos en qué medida está de acuerdo o en desacuerdo con las siguientes afirmaciones.

I feel that my city or local government has done a good job managing the COVID-19 outbreak. Do you...

Siento que mi ciudad o mi gobierno local ha hecho un buen trabajo manejando el brote de COVID-19.

- 01 Strongly agree,
- 01 *Completamente de acuerdo*
- 02 Agree,
- 02 *De acuerdo*
- 03 Neither agree nor disagree,
- 03 *Ni de acuerdo ni en desacuerdo*
- 04 Disagree, or
- 04 *En desacuerdo*
- 05 Strongly disagree?
- 05 *Completamente en desacuerdo*
- 7 REFUSED
- 8 DON'T KNOW

'QA22_CV27' [CVA8] – I feel that the national government has done a good job managing the COVID-19 outbreak.

Siento que el gobierno nacional ha hecho un buen trabajo manejando el brote de COVID-19.

Do you...

- 01 Strongly agree,
- 01 *Completamente de acuerdo*
- 02 Agree,
- 02 *De acuerdo*
- 03 Neither agree nor disagree,
- 03 *Ni de acuerdo ni en desacuerdo*
- 04 Disagree, or
- 04 *En desacuerdo*
- 05 Strongly disagree?
- 05 *Completamente en desacuerdo*
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA22_CV28': IF SELECTED SCHOOL-AGE CHILD IN HH CONTINUE, ELSE SKIP TO PN_ 'QA22_CV29'

'QA22_CV28' [CVA9] – [CHILD'S NAME]'s school has made efforts to continue educating students during the "stay at home orders" that met my child's needs.Do you...

La escuela de \[NOMBRE DEL NIÑO/A] ha hecho esfuerzos para continuar educando a los estudiantes durante las "órdenes de quedarse en casa" que satisfacen las necesidades de mi hijo/a.

- 01 Strongly agree,
- 01 *Completamente de acuerdo*
- 02 Agree,
- 02 *De acuerdo*
- 03 Neither agree nor disagree,
- 03 *Ni de acuerdo ni en desacuerdo*
- 04 Disagree, or
- 04 *En desacuerdo*
- 05 Strongly disagree?
- 05 *Completamente en desacuerdo*
- 7 REFUSED
- 8 DON'T KNOW

- 06 MY CHILD'S SCHOOL HAS STOPPED INSTRUCTION

PROGRAMMING NOTE 'QA22_CV29': IF SELECTED TEEN IN HH CONTINUE, ELSE SKIP TO 'QA22_C1'

'QA22_CV29' [CVA10] – [TEEN'S NAME]'s school has made efforts to continue educating students during the "stay at home orders" that met my teen's needs.Do you...

La escuela de \[NOMBRE DEL ADOLESCENTE] ha hecho esfuerzos para continuar educando a los estudiantes durante las "órdenes de quedarse en casa" que satisfacen las necesidades de mi hijo/a adolescente.

- 01 Strongly agree,
- 01 *Completamente de acuerdo*
- 02 Agree,
- 02 *De acuerdo*
- 03 Neither agree nor disagree,
- 03 *Ni de acuerdo ni en desacuerdo*
- 04 Disagree, or
- 04 *En desacuerdo*
- 05 Strongly disagree?
- 05 *Completamente en desacuerdo*
- 7 REFUSED
- 8 DON'T KNOW

- 06 MY CHILD'S SCHOOL HAS STOPPED INSTRUCTION

Section C: Health Behaviors

'QA21_C1' [AE2] - Now think about the foods you ate or drank during the past month that is, the past 30 days, including meals and snacks.

Ahora piense en los alimentos que comió o bebió en el último mes, esto es durante los últimos 30 días, incluidas comidas y refrigerios.

During the past month, how many times did you eat fruit? Do not count juices. You can tell me per day, per week, or month.

En el último mes, ¿cuántas veces comió fruta? No cuente los jugos. Especifique si esto es por día, por semana o por mes

[IF NEEDED, SAY: 'Your best guess is fine.']

[IF NEEDED, SAY: 'Un cálculo aproximado es suficiente.']

[IF R GIVES A NUMBER WITHOUT A TIME FRAME, ASK: 'Was that per day, week or month?']

_____TIMES

- 1 PER DAY [HR: 0-10; SR: 0-9]
- 2 PER WEEK [HR: 0-70; SR: 0-9]
- 3 PER MONTH [HR: 0-210; SR: 0-149]
- 7 REFUSED
- 8 DON'T KNOW

'QA21_C2' [AE7] - [During the past month,] how many times did you eat vegetables like green salad, green beans, or potatoes? {Do not include fried potatoes or cooked dried beans such as refried beans, baked beans or bean soup.}

Durante el último mes,] ¿cuántas veces comió vegetales como ensalada de verdes, ejotes o papas? No incluya papas fritas o frijoles secos cocidos, como frijoles refritos, frijoles horneados o sopa de frijoles.

[IF NEEDED, SAY: 'You can tell me per day, per week, or month']

[IF NEEDED, SAY: 'Puede decirme eso fue al día, a la semana o al mes']

[IF STRONGLY NEEDED, SAY: 'Such as tomatoes, carrots, onions, or broccoli.']

[ONLY IF RESPONDENT ASKS ABOUT RICE, SAY: 'Rice is not a vegetable.']

_____TIMES

- 1 PER DAY [HR: 0-10; SR: 0-9]
- 2 PER WEEK [HR: 0-70; SR: 0-9]
- 3 PER MONTH [HR: 0-210; SR: 0-149]
- 7 REFUSED
- 8 DON'T KNOW

'QA21_C3' [AC46] - During the past month, how often did you drink sweetened fruit drinks, sports, or energy drinks?

[En el último mes,] ¿Con qué frecuencia tomó bebidas azucaradas de fruta, bebidas deportivas o bebidas energéticas?

[IF NEEDED, SAY: 'You can tell me per day, per week, or month']

[IF NEEDED, SAY: 'Especifique si esto es por día, por semana o por mes']

[IF NEEDED, SAY: 'Such as lemonade, Gatorade, Snapple, or Red Bull.']

[IF NEEDED, SAY: 'Como limonada, Gatorade, Snapple o Red Bull.']

[DO NOT READ. FOR INTERVIEWER INFORMATION ONLY. THIS ALSO INCLUDES DRINKS SUCH AS: FRUIT JUICES OR DRINKS YOU MADE AT HOME AND ADDED SUGAR TO, KOOL-AID, TAMPICO, HAWAIIAN PUNCH, CRANBERRY COCKTAIL, HI-C, SNAPPLE, SUGAR CANE JUICE, AND VITAMIN WATER. DO NOT INCLUDE: 100% FRUIT JUICES OR SODA, YOGURT DRINKS, CARBONATED WATER, OR FRUIT-FLAVORED TEAS.]

_____TIMES

- 1 PER DAY [HR: 0-10; SR: 0-9]
- 2 PER WEEK [HR: 0-70; SR: 0-9]
- 3 PER MONTH [HR: 0-210; SR: 0-149]
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA22_C4':

IF TSE=1, DISPLAY " Altogether, have you smoked at least 100 or more cigarettes in your entire lifetime?"

IF TSE=2, DISPLAY "Now, I am going to ask about various health behaviors. Altogether, have you smoked at least 100 or more cigarettes in your entire lifetime?"

'QA22_C4' [AE15] – {{ Altogether, have you smoked at least 100 or more cigarettes in your entire lifetime /Now, I am going to ask about various health behaviors. Altogether, have you smoked at least 100 or more cigarettes in your entire lifetime?}}

{{ En total, ¿ha fumado por lo menos 100 o más cigarrillos en toda su vida?/ Ahora voy a preguntarle sobre varios comportamientos relacionados con la salud. En total, ¿ha fumado por lo menos 100 o más cigarrillos en toda su vida?}}

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If =2, -7, -8 go to PN_'QA21_C12'

'QA21_C5' [AE15A] - Do you now smoke cigarettes every day, some days, or not at all?

¿Fuma usted ahora cigarrillos todos los días, algunos días o nunca?

- 1 EVERY DAY
- 2 SOME DAYS
- 3 NOT AT ALL
- 7 REFUSED
- 8 DON'T KNOW

If = 1, 2, go to PN_AC169

PROGRAMMING NOTE 'QA21_C6':

**IF R LIVES IN LA COUNTY SERVICE PROVIDER AREA (SPA) 1, 2, 4 OR 5, CONTINUE;
ELSE GO TO PN_ 'QA21_C11'**

**IF 'QA21_C4' = 1 AND 'QA21_C5' = 3 AND 55 <= SRAGE <=80, THEN CONTINUE WITH
'QA21_C6'; ELSE GO TO PN_ 'QA21_C7':**

'QA21_C6' [AC168] – Did you quit smoking in the last 15 years?

¿Dejó de fumar en los últimos 15 años?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_C7':

IF 'QA21_C4' =1 AND 55 <= SRAGE <= 80, THEN CONTINUE; ELSE GOTO PN_ 'QA21_C11'

'QA21_C7' [AC169] - Altogether, how many years have you smoked?

En total, ¿cuántos años ha fumado?

_____ Number of years [HR: 0-SRAGE]

PROGRAMMING NOTE 'QA21_C8':
IF 'QA21_C7'=1, THEN CONTINUE AND DISPLAY "YEAR";
ELSE IF 'QA21_C7">1, THEN CONTINUE AND DISPLAY "YEARS"
ELSE GOTO PN_ 'QA21_C11'

'QA21_C8' [AC170] - On the year(s) you smoked, on average, how many cigarettes did you smoke per day?

En el/los año que fumaba, en promedio, ¿cuántos cigarrillos fumaba al día?

[IF NEEDED: A pack usually contains 20 cigarettes]

[IF NEEDED: Un paquete generalmente contiene 20 cigarrillos]

_____ Number of cigarettes [0-99]

POST NOTE:

PACKYEARS = 'QA21_C7' X ('QA21_C8'/20)

PROGRAMMING NOTE 'QA21_C9':
IF PACKYEARS >=30 THEN CONTINUE, ELSE GOTO PN_ AC173'

'QA21_C9' [AC171] – During the past year, have you had a low-dose computed tomography test, also known as a lung cancer screening?

Durante el último año, ¿le hicieron una prueba de tomografía computarizada de dosis baja, también conocida como examen para la detección de cáncer de pulmón?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

**PROGRAMMING NOTE 'QA21_C10';
IF 'QA21_C9' = 2 (NO), THEN CONTINUE WITH 'QA21_C10'; ELSE GOTO PN_ 'QA21_C11'**

'QA21_C10' [AC172] – What is the **one** most important reason why you have not had a tomography test in the past year?

¿Cuál es la razón principal por la que usted no se ha hecho una prueba de tomografía en el último año?

- 1 NO REASON
- 2 DIDN'T KNOW IT WAS NEEDED
- 3 DOCTOR DIDN'T TELL IT WAS NEEDED
- 4 HAVEN'T HAD PROBLEMS
- 5 PUT IT OFF/LAZINESS
- 6 TOO EXPENSIVE/NO INSURANCE
- 7 PAINFUL/EMBARRASSING
- 8 TOO YOUNG
- 9 NO ACCESS TO HEALTHCARE/NO DOCTOR NEAR ME
- 10 TRANSPORTATION PROBLEM
- 11 COMPETING PRIORITIES (WORK, CHILDCARE, CAREGIVING)
- 7 REFUSED
- 8 DON'T KNOW

**PROGRAMMING NOTE 'QA21_C11' ;
IF 'QA21_C5' = 3, THEN CONTINUE; ELSE GOTO PN_ 'QA21_C12'**

'QA21_C11' [AC173] - How long has it been since you last smoked a cigarette, even one or two puffs?

¿Cuánto tiempo ha pasado desde la última vez que fumó un cigarrillo, incluso una o dos inhalaciones?

[INTERVIEWER NOTE: IF R SAYS, "10 YEARS OR LONGER", CODE THIS AS 10 YEARS]

_____ AMOUNT OF TIME
_____ UNIT OF TIME

- 1 DAYS[HR: 0-365]
- 2 WEEKS [HR: 0-52]
- 3 MONTHS [HR: 0-12]
- 4 YEARS [HR: 0-AAGE]
- 7 REFUSED
- 8 DON'T KNOW

If > 30 DAYS or > 5 WEEKS or > 1 MONTH or = -7, -8, go to PN_ 'QA21_C18'

**PROGRAMMING NOTE 'QA21_C12':
IF 'QA21_C4' = 2, -7, -8 OR 'QA21_C5' = 1, 2 OR 'QA21_C11' <= 30 DAYS OR 'QA21_C11' <= 5 WEEKS OR 'QA21_C11' <= 1 MONTH, CONTINUE WITH 'QA21_C12'; ELSE GO TO 'QA21_C17';**

'QA21_C12' [AC174] - During the past 30 days, on how many days did you smoke cigarettes?

Durante los últimos 30 días, ¿cuántos días fumó cigarrillos?

[INTERVIEWER NOTE: IF R SAYS, "NEVER SMOKED", CODE THIS AS 0 DAYS]

_____ NUMBER OF DAYS [HR: 0-30]

- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_C13': IF 'QA21_C5' = 1 (SMOKE EVERY DAY), CONTINUE WITH 'QA21_C13'; ELSE IF 'QA21_C5' = 2 (SMOKE SOME DAYS) OR 'QA21_C12' > 0 (PAST 30-DAY SMOKER), GO TO 'QA21_C14'; ELSE GO TO 'E-CIGARETTE INTRO';

'QA21_C13' [AD32] - On average, how many cigarettes do you now smoke a day?

En promedio, ¿cuántos cigarrillos al día fuma usted actualmente?

[INTERVIEWER NOTE: IF R SAYS, A 'PACK', CODE AS 20 CIGARETTES]

_____ NUMBER OF CIGARETTES [HR: 0-120]

- 7 REFUSED
- 8 DON'T KNOW

Any answer, go to 'QA21_C15'

PROGRAMMING NOTE 'QA21_C14' : F 'QA21_C5' = 2 (SMOKE SOME DAYS) OR 'QA21_C12' > 0 (PAST 30-DAY SMOKER), CONTINUE WITH 'QA21_C14' ; ELSE GO TO 'QA21_C15'

'QA21_C14' [AE16] - In the past 30 days, when you smoked, how many cigarettes did you smoke in a typical day?

En los últimos 30 días, cuando fumó, ¿cuántos cigarrillos fumó al día?

[IF NEEDED, SAY: 'If you did not smoke everyday in the past 30 days, consider the days you did smoke.' AND IF R SAYS, A 'PACK', CODE THIS AS 20 CIGARETTES]

[IF NEEDED, SAY: 'Si no fumó todos los días durante los últimos 30 días, tenga en cuenta los días que sí fumó.' AND IF R SAYS, A 'PACK', CODE THIS AS 20 CIGARETTES]

_____ NUMBER OF CIGARETTES [HR: 0-120]

- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_C15':IF 'QA21_C5' = 1 (SMOKE EVERY DAY), THEN READ "How";ELSE IF 'QA21_C5' = 2 (SMOKE SOME DAYS) OR 'QA21_C12' > 0 (PAST 30-DAY SMOKER), THEN READ "On days when you smoke, how";

'QA21_C15' [AC54B] - {On days when you smoke, how/How} soon after you awake do you usually smoke your first cigarette?

{En los días en que fuma, cuánto/Cuántos} por lo general, qué tan pronto después de despertarse se fuma su primer cigarrillo?

[INTERVIEWER NOTE: IF R SAYS, "IMMEDIATELY", CODE THIS AS 0]

[INTERVIEWER NOTE: IF R SAYS, "I DON'T SMOKE AFTER WAKING UP", CODE THIS AS 999]

_____ AMOUNT OF TIME [0-24 HOURS]

- 1 MINUTES
- 2 HOURS
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_C16':IF 'QA21_C4' = 1 (SMOKE EVERY DAY) OR 2 (SMOKE SOME DAYS), CONTINUE WITH 'QA21_C16'

'QA21_C16' [AC175] - Were any of the cigarettes you smoked in flavors, such as mint or menthol?

¿Alguno de los cigarrillos que fumó tenía sabores, como menta o mentol?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_C17' [AC176] - How old were you when you smoked your first whole cigarette?

¿Qué edad tenía cuando fumó por primera vez todo un cigarrillo?

_____ AGE IN YEARS [HR: 1 THRU AAGE (OR 105 IF AAGE = -7)]

- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'NEW_CTGPC6':IF 'QA21_C5' = 1 (SMOKE EVERY DAY) OR 'QA21_C5' = 2 (SMOKE SOME DAYS) OR 'QA21_C12' > 0 (PAST 30-DAY SMOKER) OR 'NEW_CTGPC1' <= 365 DAYS OR 'NEW_CTGPC1' <= 52 WEEKS OR 'QA21_C11' <= 1 YEAR, CONTINUE WITH 'QA21_C18'; ELSE GO TO 'E-CIGARETTE INTRO';

'QA21_C18' [AC177] - Were you smoking cigarettes at all around this time 12 months ago?

¿Fumaba cigarrillos por esta época hace 12 meses?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_C19' :IF 'QA21_C5' = 1 (SMOKE EVERY DAY) OR 'QA21_C5' = 2 (SMOKE SOME DAYS), CONTINUE WITH 'QA21_C19' ;ELSE GO TO 'E-CIGARETTE INTRO'

'QA21_C19' [AC49] - During the past 12 months, have you stopped smoking for one day or longer because you were trying to quit smoking?

En los últimos 12 meses, ¿ha dejado usted de fumar por un día o más porque estaba tratando de dejar de fumar?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8 go to 'QA21_C21'

'QA21_C20' [AC178] - I'd like you to ask you about the last attempt you made to quit smoking. During that attempt, how long did you go without smoking a cigarette?

Me gustaría preguntarle sobre el último intento que hizo para dejar de fumar. Durante ese intento, ¿cuánto tiempo pasó sin fumar un cigarrillo?

_____ AMOUNT OF TIME
 _____ UNIT OF TIME

- 1 DAYS[HR: 0-365]
- 2 WEEKS [HR: 0-52]
- 3 MONTHS [HR: 0-12]
- 7 REFUSED
- 8 DON'T KNOW

'QA21_C21' [AC77] - In the past 12 months, did a doctor or other health professional advise you to quit smoking?

En los últimos 12 meses, ¿le aconsejó un doctor u otro profesional de la salud que dejara de fumar?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_C22' [AC50] - Are you thinking about quitting smoking in the next six months?

¿Está pensando en dejar de fumar en los próximos seis meses?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA22_C23':

IF TSE=1, DISPLAY “ *Electronic cigarettes and other electronic vaping products typically contain nicotine, and flavors. They may also be called e-cigs, vape pens, pod mods, hookah pens or e-hookah. Popular brands include JUUL, Blu, NJOY, Suorin, and Vuse.*

Have you ever used an e-cigarette or other electronic vaping product, even just once in your lifetime? Do not include products used only for marijuana”

IF TSE=2, DISPLAY “*The next questions are about electronic cigarettes and other electronic vaping products. These products typically contain nicotine, flavors, and other ingredients. They may also be called e-cigs, vape pens, pod mods, hookah pens or e-hookah. Popular brands include JUUL, Blu, NJOY, Suorin, and Vuse. Do not include products used only for marijuana.*

Have you ever used an e-cigarette or other electronic vaping product, even just once in your lifetime?”

'QA22_C23' [AC81C] – {{ Electronic cigarettes and other electronic vaping products typically contain nicotine, and flavors. They may also be called e-cigs, vape pens, pod mods, hookah pens or e-hookah. Popular brands include JUUL, Blu, NJOY, Suorin, and Vuse. Do not include products used only for marijuana./ The next questions are about electronic cigarettes and other electronic vaping products. These products typically contain nicotine, flavors, and other ingredients. They may also be called e-cigs, vape pens, pod mods, hookah pens or e-hookah. Popular brands include JUUL, Blu, NJOY, Suorin, and Vuse. Have you ever used an e-cigarette or other electronic vaping product, even just once in your lifetime?}}

{{ Estos productos suelen contener nicotina, sabores y otros ingredientes. También se les conoce como cigarros electrónicos, lapiceras para vapear, pod mods, lapiceras hooka o hooka electrónica. Algunas de las marcas populares son JUUL, Blu, NJOY, Suorin y Vuse. Especifique el uso de JUUL o juuling en su respuesta. No incluya productos que se usen solamente para marihuana/ Las siguientes preguntas son sobre cigarrillos electrónicos y otros productos electrónicos para vapear. Estos productos suelen contener nicotina, sabores y otros ingredientes. También se les conoce como cigarros electrónicos, lapiceras para vapear, pod mods, lapiceras hooka o hooka electrónica. Algunas de las marcas populares son JUUL, Blu, NJOY, Suorin y Vuse. Especifique el uso de JUUL o juuling en su respuesta. No incluya productos que se usen solamente para marihuana.}}

'QA21_C23' [AC81C] - Have you ever used an e-cigarette or other electronic vaping product, even just once in your lifetime?

¿Alguna vez usó un cigarrillo electrónico u otro producto electrónico para vapear, aunque haya sido solamente una vez en su vida?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8 goto 'QA21_C33'

'QA21_C24' [AC82C] - In the past 30 days, on how many days did you use an e-cigarette or other electronic vaping product?

Durante los últimos 30 días, ¿cuántos días usó un cigarrillo electrónico u otro producto electrónico para vapear?

_____ NUMBER OF DAYS [HR: 0 -30]

- 7 REFUSED
- 8 DON'T KNOW

'QA21_C25' [AC134] - Were any of the e-cigarettes you used in flavors such as mint, fruit, candy, or wine?

¿Algunos de los cigarrillos electrónicos que usó tenían sabores como menta, fruta, caramelo o vino?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, go to 'PN_ 'QA21_C32'

'QA21_C26' [AC179] - Which flavor did you use in e-cigarettes or other electronic vaping products? Was it...?

¿Qué sabor usó en los cigarrillos electrónicos o vapeadores electrónicos? Era...

Fruit flavored (e.g. cherry, grape, mango)?

¿Con sabor a frutas (por ejemplo, cereza, uva, mango)?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_C27' [AC180] - Which flavor did you use in e-cigarettes or other electronic vaping products? Was it...?

¿Qué sabor usó en los cigarrillos electrónicos o vapeadores electrónicos? Era...

Candy or sweet flavored (e.g. chocolate, vanilla)?

¿Con sabor a caramelos o dulces (por ejemplo, chocolate, vainilla)?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_C28' [AC181] - Which flavor did you use in e-cigarettes or other electronic vaping products? Was it...?

¿Qué sabor usó en los cigarrillos electrónicos o vapeadores electrónicos? Era...

Alcohol or liquor flavored (e.g. wine, Russian cream, honey bourbon, cognac)?

¿Con sabor a alcohol o licor (por ejemplo, vino, crema rusa, bourbon de miel, coñac)?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_C29' [AC182] - Which flavor did you use in e-cigarettes or other electronic vaping products? Was it...?

¿Qué sabor usó en los cigarrillos electrónicos o vapeadores electrónicos? Era...

Mint flavored (e.g. arctic ice, menthol, wintergreen)?

¿Con sabor a menta (por ejemplo, hielo ártico, mentol, gaultería)?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_C30' [AC183] - Which flavor did you use in e-cigarettes or other electronic vaping products? Was it...?

¿Qué sabor usó en los cigarrillos electrónicos o vapeadores electrónicos? Era...

Tobacco flavored?

¿Con sabor a tabaco?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_C31' [AC184] - Which flavor did you use in e-cigarettes or other electronic vaping products? Was it...?

¿Qué sabor usó en los cigarrillos electrónicos o vapeadores electrónicos? Era...

Some other flavor?

¿Algún otro sabor?

- 1 YES (SPECIFY: _____)
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_C32': IF 'AC82C>0', THEN CONTINUE, ELSE SKIP TO 'QA21_C33'

'QA21_C32' [AC185] - Do you plan to quit using e-cigarette or other electronic vaping products for good...?

¿Planea dejar de usar cigarrillos electrónicos o vapeadores electrónicos para siempre...?

- 1 In the next 30 days
- 1 *En los próximos 30 días*
- 2 In the next 3 months
- 2 *En los próximos 3 meses*
- 3 In the next 6 months
- 3 *En los próximos 6 meses*
- 4 In the next year
- 4 *En el próximo año*
- 5 Do not have a plan to quit
- 7 REFUSED
- 8 DON'T KNOW

'QA21_C33' [AC135] - During the past 30 days, on how many days did you use chewing tobacco, snuff, or snus?

Durante los últimos 30 días, ¿cuántos días usó tabaco de mascar, tabaco para aspirar o snus?

- 1 0 DAYS
- 2 1-2 DAYS
- 3 3-5 DAYS
- 4 6-9 DAYS
- 5 10-19 DAYS
- 6 20-29 DAYS
- 7 30 DAYS
- 7 REFUSED
- 8 DON'T KNOW

If = 1, -7, -8 goto 'QA21_C35'

'QA21_C34' [AC136] - Were any of the chewing tobacco you used in flavors such as mint, fruit, candy, or wine?

¿Algunos de los tabacos de mascar que usó tenían sabores como menta, fruta, caramelo o vino?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_C35' [AC137] - During the past 30 days, on how many days did you smoke cigarillos, or little cigars?

Durante los últimos 30 días, ¿cuántos días fumó cigarrillos o puros pequeños?

- 1 0 DAYS
- 2 1-2 DAYS
- 3 3-5 DAYS
- 4 6-9 DAYS
- 5 10-19 DAYS
- 6 20-29 DAYS
- 7 30 DAYS
- 7 REFUSED
- 8 DON'T KNOW

If = 1, -7, or -8 goto 'QA21_C37'

'QA21_C36' [AC138] - Were any of the cigarillos you smoked in flavors such as mint, fruit, candy, or wine?

¿Algunos de los cigarrillos que fumó tenían sabores como menta, fruta, caramelo o vino?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_C37' [AC139] - During the past 30 days, on how many days did you smoke big cigars?

Durante los últimos 30 días, ¿cuántos días fumó cigarros/puros?

- 1 0 DAYS
- 2 1-2 DAYS
- 3 3-5 DAYS
- 4 6-9 DAYS
- 5 10-19 DAYS
- 6 20-29 DAYS
- 7 30 DAYS
- 7 REFUSED
- 8 DON'T KNOW

If = 1, -7, -8 goto 'QA21_C39'

'QA21_C38' [AC140] - Were any of the cigars you smoked in flavors such as mint, fruit, candy, or wine?

¿Algunos de los cigarros/puros que fumó tenían sabores como menta, fruta, caramelo o vino?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_C39' [AC141] - During the past 30 days, on how many days did you use a hookah water pipe?

Durante los últimos 30 días, ¿cuántos días usó una pipa de agua hooka?

- 1 0 DAYS
- 2 1-2 DAYS
- 3 3-5 DAYS
- 4 6-9 DAYS
- 5 10-19 DAYS
- 6 20-29 DAYS
- 7 30 DAYS
- 7 REFUSED
- 8 DON'T KNOW

If = 1, -7 or -8 goto 'PN_'QA21_C41'

'QA21_C40' [AC142] - Were any of the hookahs you smoked in flavors such as mint, fruit, candy, or wine?

¿Algunas de las hookas que fumó tenían sabores como menta, fruta, caramelo o vino?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_C41':

IF 'QA21_C5' = 1, 2 OR 'QA21_C12' > 0 OR 'QA21_C24' > 0 OR 'QA21_C33' > 1 OR 'QA21_C35' > 1 OR 'QA21_C37' > 1 OR 'QA21_C39' > 1, CONTINUE WITH 'QA21_C41'; ELSE GO TO 'QA21_C42'

'QA21_C41' [AC186] - When you first started using tobacco products, did you start with a flavored tobacco product, such as those flavoured with mint or menthol, fruit, candy or wine?

Quando empezó a usar productos de tabaco, ¿empezó con un producto de tabaco con sabores, como los que tienen sabor a menta o mentol, frutas, dulces, o caramelos, o vino?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_C42' [AC187] - "During the past year, when has someone else smoked tobacco or vaped around you in California?"

Durante el último año, ¿cuándo fue que otra persona fumó tabaco o vapeó cerca de usted en California?

[INTERVIEWER NOTE: IF R SAYS, "NEVER HAD SOMEONE SMOKE OR VAPE AROUND YOU", CODE AS 5]

- 1 In the past week
- 1 *En la última semana*
- 2 In the past two weeks
- 2 *En las últimas dos semanas*
- 3 In the past month
- 3 *En el último mes*
- 4 Longer than a month ago, but within the past year
- 4 *Hace más de un mes, pero durante el último año*
- 5 No one has smoked tobacco or vaped around me within the past year
- 5 *Nadie ha fumado tabaco ni usado vapeadores cerca de mí durante el último año*
- 7 REFUSED
- 8 DON'T KNOW

If >2 goto 'QA21_C47'

'QA21_C43' [AC188] - In the past two weeks, were you exposed to secondhand tobacco smoke or e-cigarette vapor.... on the sidewalks?

En las últimas dos semanas, estuvo expuesto al humo de segunda mano o al vapor de un cigarrillo electrónico.... en la calle?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_C44' [AC189] - {In the past two weeks, were you exposed to secondhand tobacco smoke or e-cigarette vapor?} Were you exposed...?

En las últimas dos semanas, ¿estuvo expuesto/a al humo de segunda mano o al vapor de un cigarrillo electrónico...

Inside your home?

Dentro de su casa?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_C45' [AC190] - {In the past two weeks, were you exposed to secondhand tobacco smoke or e-cigarette vapor?} Were you exposed...?

En las últimas dos semanas, estuvo expuesto al humo de segunda mano o al vapor de un cigarrillo electrónico...

Inside your workplace(do not include home-based workplace)? Please indicate if you did not work in the past two weeks.

¿Dentro de su lugar de trabajo(no incluye lugar de trabajo en el hogar)? No trabajó en las últimas dos semanas

- 1 YES
- 2 NO
- 3 DID NOT WORK IN PAST TWO WEEKS
- 7 REFUSED
- 8 DON'T KNOW

'QA21_C46' [AC191] - {In the past two weeks, were you exposed to secondhand tobacco smoke or e-cigarette vapor?} Were you exposed...?

En las últimas dos semanas, estuvo expuesto al humo de segunda mano o al vapor de un cigarrillo electrónico...

At a public park or beach?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_C47' [AC143] - Which statement best describes smoking or vaping a tobacco product, including e-cigarettes, inside your home?

¿Cuál frase describe mejor cómo se puede fumar o vapear un producto de tabaco, inclusive cigarrillos electrónicos, dentro de su casa?

- 01 NOT ALLOWED ANYWHERE OR AT ANY TIME INSIDE MY HOME
- 02 ALLOWED IN SOME PLACES OR AT SOME TIMES INSIDE MY HOME
- 03 ALLOWED ANYWHERE AND AT ANY TIME INSIDE MY HOME
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA22_C48':

IF TSE=1, DISPLAY " There are many methods for consuming marijuana, also called cannabis weed, or hashish, and other products containing THC. Methods for consuming these products, include smoking, vaporizing, dabbing, eating, or drinking. Have you ever, even once, tried marijuana or hashish in any form?"

IF TSE=2, DISPLAY "The next questions are about marijuana also called cannabis or weed, hashish, and other products containing THC. There are many methods for consuming these products, such as smoking, vaporizing, dabbing, eating, or drinking. Have you ever, even once, tried marijuana or hashish in any form?"

'QA22_C48' [AC115] – {{ There are many methods for consuming marijuana, also called cannabis weed, or hashish, and other products containing THC. Methods for consuming these products, include smoking, vaporizing, dabbing, eating, or drinking.

Have you ever, even once, tried marijuana or hashish in any form?/ The next questions are about marijuana also called cannabis or weed, hashish, and other products containing THC. There are many methods for consuming these products, such as smoking, vaporizing, dabbing, eating, or drinking.

Have you ever, even once, tried marijuana or hashish in any form?}}

{{ Hay muchos métodos para consumir estos productos, como fumarlos, vaporizarlos, untarlos, comerlos o beberlos. ¿Alguna vez ha probado la marihuana o el hachís aunque sea una sola vez?/ Las preguntas que siguen son sobre la marihuana, también llamada cannabis o hierba, el hachís y otros productos que contienen tetrahidrocannabinol (THC). Hay muchos métodos para consumir estos productos, como fumarlos, vaporizarlos, untarlos, comerlos o beberlos. ¿Alguna vez ha probado la marihuana o el hachís aunque sea una sola vez?}}

[IF NEEDED: THC is the active ingredient in marijuana.]

[IF NEEDED: El THC es el ingrediente activo de la marihuana.]

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, go to 'QA21_C63'

'QA21_C49' [AC116] - How long has it been since you last used marijuana or hashish?

¿Cuánto tiempo ha pasado desde la última vez que consumió marihuana o hachís?

[INTERVIEWER NOTE: IF LESS THAN ONE DAY SINCE LAST USED MARIJUANA OR HASHISH, ENTER 0]

-
- 1 DAYS [HR: 0-365]
 - 2 MONTHS [HR: 0-12]
 - 3 YEARS [0-99]
 - 7 REFUSED
 - 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_C50':
IF 'QA21_C49' >=30 DAYS OR >1 MONTH, THEN GO TO 'QA21_C76';
ELSE CONTINUE WITH 'QA21_C50';

'QA21_C50' [AC117] - During the past 30 days, on how many days did you use marijuana, hashish, or another THC product?

Durante los últimos 30 días, ¿cuántos días consumió marihuana, hachís u otro producto con THC?

- 1 0 DAYS
- 2 1-2 DAYS
- 3 3-5 DAYS
- 4 6-9 DAYS
- 5 10-19 DAYS
- 6 20-29 DAYS
- 7 30 DAYS
- 7 REFUSED
- 8 DON'T KNOW

If = 1, go to 'QA21_C63'

'QA21_C51' [AC118] - How often have you used tobacco and marijuana at the same time? Would you say...

¿Con qué frecuencia ha consumido tabaco y marihuana al mismo tiempo?

- 1 USUALLY
- 1 GENERALMENTE
- 2 SOMETIMES
- 2 A VECES
- 3 NEVER
- 3 NUNCA
- 7 REFUSED
- 8 DON'T KNOW

'QA21_C52' [AC119] - During the past 30 days, how did you use marijuana? Did you...

Durante los últimos 30 días, ¿de qué manera consumió la marihuana?

Smoke it in a joint, bong, or pipe?

¿La fumó en un cigarrillo, una pipa de vidrio o una pipa?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_C53' [AC120] - During the past 30 days, how did you use marijuana? Did you...

Durante los últimos 30 días, ¿de qué manera consumió la marihuana?

Smoke part or all of a cigar with marijuana in it, which is sometimes called a blunt?

¿Fumó parte de o todo un cigarrillo de marihuana, que a veces se llama blunt?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_C54' [AC121] - [During the past 30 days, how did you use marijuana?] Did you...

Durante los últimos 30 días, ¿de qué manera consumió la marihuana?

Eat it?

¿La comió?

[IF NEEDED SAY: For example, in brownies, cakes, cookies or candy]

[IF NEEDED SAY: Por ejemplo, en brownies, tortas, galletas o caramelos]

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_C55' [AC122] - [During the past 30 days, how did you use marijuana?] Did you...

Durante los últimos 30 días, ¿de qué manera consumió la marihuana?

Drink it?

¿La bebió?

[IF NEEDED SAY: For example, in tea, cola, alcohol or other drinks]

[IF NEEDED SAY: Por ejemplo, en té, refrescos de cola, bebidas alcohólicas u otras bebidas]

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_C56' [AC123] - [During the past 30 days, how did you use marijuana?] Did you...

Durante los últimos 30 días, ¿de qué manera consumió la marihuana?

Vaporize it?

¿La vaporizó?

[IF NEEDED SAY: For example, in an e-cigarette type vaporizer]

[IF NEEDED SAY: *Por ejemplo, en un vaporizador del tipo de un cigarrillo electrónico*]

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_C57' [AC124] - [During the past 30 days, how did you use marijuana?] Did you...

Durante los últimos 30 días, ¿de qué manera consumió la marihuana?

Dab it?

¿Se la untó?

[IF NEEDED SAY: For example, using butane hash oil, wax or concentrates]

[IF NEEDED SAY: *Por ejemplo, usando aceite de hachís, cera o concentrados*]

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_C58' [AC125] - [During the past 30 days, how did you use marijuana?] Did you...

Durante los últimos 30 días, ¿de qué manera consumió la marihuana?

Use it some other way?

¿La consumió de alguna otra manera?

- 1 YES (SPECIFY _____)
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_C59' [AC126] - Was any of your marijuana use in the past month recommended by a doctor or other health care provider?

¿Fue alguna de la marihuana que consumió en el último mes recomendada por un médico o por otro proveedor de atención médica?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, go to 'QA21_C76'

'QA21_C60' [AC127] - Was all of your marijuana use in the past month recommended by a doctor or other health care provider?

¿Fue toda la marihuana que consumió en el último mes recomendada por un médico o por otro proveedor de atención médica?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_C63' [AC192] - During the past year, when has someone else smoked marijuana around you in California?

Durante el último año, ¿cuándo fue que otra persona fumó marihuana cerca de usted en California?

[INTERVIEWER NOTE: IF R SAYS, "NEVER HAD SOMEONE SMOKE MARIJUANA AROUND YOU", CODE AS 5]

- 1 In the past week
- 1 *En la última semana*
- 2 In the past two weeks
- 2 *En las últimas dos semanas*
- 3 In the past month
- 3 *En el último mes*
- 4 Longer than a month ago, but within the past year
- 4 *Hace más de un mes, pero durante el último año*
- 5 No one has smoked marijuana around me within the past year
- 5 *Nadie ha fumado marihuana cerca de mí durante el último año*
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_C61':IF 'QA21_C49' >30 DAYS OR >1 MONTH, THEN GO TO 'AC195'IF USED MORE THAN 1 METHOD USED IN AC119-AC125 CONTINUE WITH 'QA21_C61' AND DISPLAY ONLY RESPONSE OPTIONS WHERE =1 FOR AC119-AC125; ELSE GO TO AC195

'QA21_C61' [AC193]- During the past 30 days, how did you use marijuana or cannabis most often?

Durante los últimos 30 días, ¿de qué manera usó la marihuana o el cannabis más frecuentemente?

- 1 SMOKE IT IN A JOINT, BONG, OR PIPE
- 2 SMOKE PART OR ALL OF A CIGAR WITH MARIJUANA IN IT
- 3 EAT IT
- 4 DRINK IT
- 5 VAPORIZE IT
- 6 DAB IT
- 91 OTHER, SPECIFY
- 7 REFUSED
- 8 DON'T KNOW

'QA21_C62' [AC194]- Where did you get the marijuana or cannabis you used in the past 30 days?

¿De dónde sacó la marihuana o el cannabis que usó en los últimos 30 días?

- 1 Licensed cannabis dispensary
- 1 *Dispensario de cannabis con licencia*
- 2 Vape or smoke shop
- 2 *Tienda de cigarrillos o vapeado*
- 3 Another type of shop
- 2 *Otro tipo de tienda*
- 4 Cannabis delivery service
- 4 *Servicio de entrega de cannabis*
- 5 Website
- 5 *Sitio web*
- 6 Pop-up shop
- 6 *Tienda emergente*
- 7 Family or friend
- 7 *Familia o amigo*
- 8 Another person
- 8 *Otra persona*
- 9 I grow or make it myself
- 9 *Cultivo o lo hago yo mismo*
- 91 Other, specify
- 91 *Otro, especifique* _____
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA22_C64':

IF TSE=1, DISPLAY " CBD, or cannabidiol, is a chemical found in both marijuana and hemp plants that many people use for medicinal purposes. CBD does not make the user high.

These questions specifically ask about products that contain CBD, but not THC.

Have you ever, even once, tried CBD in any form?"

IF TSE=2, DISPLAY "In the following questions, we are specifically asking about products that contain CBD, but not THC. CBD, or cannabidiol, is a chemical found in both marijuana and hemp plants that many people use for medicinal purposes. CBD does not make the user high.

Have you ever, even once, tried CBD in any form?"

'QA22_C64' [AC195]- {{CBD, or cannabidiol, is a chemical found in both marijuana and hemp plants that many people use for medicinal purposes. CBD does not make the user high.

These questions specifically ask about products that contain CBD, but not THC.

Have you ever, even once, tried CBD in any form?/ In the following questions, we are specifically asking about products that contain CBD, but not THC. CBD, or cannabidiol, is a chemical found in both marijuana and hemp plants that many people use for medicinal purposes. CBD does not make the user high. }}

{{ El CBD, o cannabidiol, es una sustancia química que se encuentra tanto en la marihuana como en las plantas de cáñamo que muchas personas usan con fines medicinales. El CBD no droga al usuario. ¿ Probó alguna vez CBD en alguna forma, aunque hubiera sido solamente una vez?En las siguientes preguntas, específicamente preguntamos sobre productos que contienen CBD, pero no THC. El CBD, o cannabidiol, es una sustancia química que se encuentra tanto en la marihuana como en las plantas de cáñamo que muchas personas usan con fines medicinales. El CBD no droga al usuario. ¿ Probó alguna vez CBD en alguna forma, aunque hubiera sido solamente una vez?}}

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If 2,-7,-8 goto 'QA21_C76'

'QA21_C65'[AC196] - How long has it been since you last used CBD in any form?

¿Cuánto tiempo ha pasado desde la última vez que usó CBD en alguna forma?

- 1 DAYS [HR: 0-365]
- 2 MONTHS [HR: 0-12]
- 3 YEARS [0-99]
- 7 REFUSED
- 8 DON'T KNOW

PN: COMPUTE CBDLASTUSE = (YEAR*365)+(MONTH*30)+(DAY)

If CBDLASTUSE>=30, goto 'QA21_C76'

'QA21_C66' [AC197] - During the past 30 days, on how many days did you use CBD or CBD product?

Durante los últimos 30 días, ¿cuántos días usó CBD o productos de CBD?

- 1 0 DAYS
- 2 1-2 DAYS
- 3 3-5 DAYS
- 4 6-9 DAYS
- 5 10-19 DAYS
- 6 20-29 DAYS
- 7 30 DAYS OR MORE
- 7 REFUSED
- 8 DON'T KNOW

If =1, goto 'QA21_C76'

'QA21_C67' [AC198]- During the past 30 days, how did you use CBD? Did you... Take it orally?

Durante los últimos 30 días, ¿cómo usó CBD? ¿Lo usó por vía oral?

For example, sublingual tinctures, pills, capsules, or drops

Por ejemplo, tinturas, píldoras, cápsulas o gotas sublinguales

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_C68' [AC199]- During the past 30 days, how did you use CBD? Did you... Eat it?

Durante los últimos 30 días, ¿cómo usó CBD? ¿Lo... comió en un alimento?

For example, edibles, like cookies or gummies

Por ejemplo, comestibles, como galletas o gomitas.

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_C69' [AC200]- During the past 30 days, how did you use CBD? Have you... Drink it?

Durante los últimos 30 días, ¿cómo usó CBD? ¿Lo... bebió?

For example in a tea or soda

Por ejemplo, en un té o refresco

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_C70' [AC201]- During the past 30 days, how did you use CBD? Did you... apply it on your skin?

Durante los últimos 30 días, ¿cómo usó CBD? ¿Lo... aplicó en su piel?

For example in a cream, lotion or oil that is applied to the skin.

Por ejemplo, en una crema, loción o aceite que se aplica sobre la piel.

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_C71' [AC202]- During the past 30 days, how did you use CBD? Did you... Smoke it?

Durante los últimos 30 días, ¿cómo usó CBD? ¿Lo fuma?

For example, in a joint, bong, cigar (blunt) or pipe

Por ejemplo, en un porro, bong, cigarro (blunt) o pipa

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_C72' [AC203]- During the past 30 days, how did you use CBD? Did you... vaporize it?

Durante los últimos 30 días, ¿de qué manera usó CBD?

For example, in an e-cigarette type vaporizer.

Por ejemplo, en un vaporizador tipo cigarrillo electrónico

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_C73' [AC204]- During the past 30 days, how did you use CBD? Did you... dab it?

Durante los últimos 30 días, ¿de qué manera usó CBD?

For example, inhaling the smoke made from heating concentrated CBD wax, resin, or oils.

Por ejemplo, inhalando el humo producido al calentar cera, resina o aceites de CBD concentrados.

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_C74' [AC205]- During the past 30 days, how did you use CBD? Did you... use it some other way?

Durante los últimos 30 días, ¿de qué manera usó CBD? ¿Lo... usó de otra manera?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'AC206: IF USED MORE THAN 1 METHOD USED IN AC198- AC205 CONTINUE WITH 'QA21_C75' AND DISPLAY ONLY RESPONSE OPTIONS WHERE AC198- AC205=1; ELSE GO TO AC128

'QA21_C75' [AC206] - During the past 30 days, how did you use CBD most often?

Durante los últimos 30 días, ¿de qué manera usó CBD más frecuentemente?

- 1 TAKE IT ORALLY
- 2 EAT IT
- 3 DRINK IT
- 3 APPLY IT ON YOUR SKIN
- 4 SMOKE IT
- 5 VAPORIZE IT
- 6 DAB IT
- 91 USE IT ANOTHER WAY
- 7 REFUSED
- 8 DON'T KNOW

'QA21_C76' [AC128] - Have you used heroin in the past 12 months?

¿Ha consumido heroína en los últimos 12 meses?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_C77' [AC129] - Examples of prescription painkillers are Vicodin®, OxyContin®, Norco®, Hydrocodone, Percocet® and Methadone. In the past 12 months, have you used any prescription painkiller in a way that did not follow your doctor's directions?

Por ejemplo, Vicodin, oxycontin, Norco, hidrocodona, Percocet y metadona. En los últimos 12 meses, ¿ha usado usted algún analgésico de venta bajo receta de una manera contraria a las indicaciones de su médico?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, go to 'QA21_C83'

'QA21_C78' [AC131] - Did you get the prescription(s) from one doctor or from more than one doctor?

¿Obtuvo la(s) receta(s) de un solo médico o de más de un médico?

- 01 ONE DOCTOR
- 02 MORE THAN ONE DOCTOR
- 03 DIDN'T GET IT FROM A DOCTOR
- 7 REFUSED
- 8 DON'T KNOW

'QA21_C79' [AC133] - What condition or conditions have you taken the medicine for?

¿Para qué afección o afecciones ha tomado usted el medicamento?

[CHECK ALL THAT APPLY]

- 1 DENTAL WORK/ DENTAL PAIN
- 2 SURGERY, NOT ACCIDENT RELATED
- 3 RECENT INJURY
- 4 CHRONIC PAIN, REGARDLESS OF CAUSE
- 91 OTHER (SPECIFY)_____
- 7 REFUSED
- 8 DON'T KNOW

'QA21_C80' [AC163] - What is your best estimate of the number of days you used prescription pain killers in any way a doctor did not direct you to use during the past 30 days?

¿Cuál es su mejor cálculo del número de días que usó analgésicos de venta bajo receta de un modo no indicado por un médico durante los últimos 30 días?

_____ [0-30 DAYS]
 _____ [DE 0 A 30 DÍAS]

If <1, goto 'QA21_C83'/'PN_QA21_C83'

'QA21_C81' [AC164] - During the past 30 days did you use prescription pain killers in any way a doctor did not direct you to use them while:

Durante los últimos 30 días, ¿usó analgésicos de venta bajo receta de un modo no indicado por un médico mientras hacía alguna de las siguientes actividades...?

Drinking alcohol or within a couple of hours of drinking?

Beber alcohol o en las horas siguientes a haber bebido?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_C82' [AC165] - During the past 30 days did you use prescription pain killers in any way a doctor did not direct you to use them while:

Durante los últimos 30 días, ¿usó analgésicos de venta bajo receta de un modo no indicado por un médico mientras hacía alguna de las siguientes actividades...?

Using Benzodiazepines?

Usar benzodiazepinas?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_C83' [AC166] - Have you used methamphetamines in the past 12 months?

Ha usado metanfetaminas durante los últimos 12 meses?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_C84' [AC167] - Have you used any prescription stimulants (such as Adderall®, Dexedrine®) in any way a doctor did not direct you to use it in the past 12 months?

¿Ha usado algún estimulante de venta bajo receta (es decir, Adderall, Dexedrine) de un modo no indicado por un médico durante los últimos 12 meses?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA22_C85':

IF TSE=1, DISPLAY “ *In these questions a drink means a can or bottle of beer; a wine cooler or a glass of wine, champagne, or sherry; a shot of liquor or a mixed drink or cocktail. Have you ever, even once, had a drink of any type of alcoholic beverage? Please do not include times when you only had a sip or two from a drink.*”

IF TSE=2, DISPLAY “*These questions are about drinks of alcoholic beverages. In these questions a drink means a can or bottle of beer; a wine cooler or a glass of wine, champagne, or sherry; a shot of liquor or a mixed drink or cocktail. Have you ever, even once, had a drink of any type of alcoholic beverage? Please do not include times when you only had a sip or two from a drink.*”

'QA22_C85' [AC207]- {{ In these questions a drink means a can or bottle of beer; a wine cooler or a glass of wine, champagne, or sherry; a shot of liquor or a mixed drink or cocktail.

Have you ever, even once, had a drink of any type of alcoholic beverage? Please do not include times when you only had a sip or two from a drink./These questions are about drinks of alcoholic beverages. In these questions a drink means a can or bottle of beer; a wine cooler or a glass of wine, champagne, or sherry; a shot of liquor or a mixed drink or cocktail.

Have you ever, even once, had a drink of any type of alcoholic beverage? Please do not include times when you only had a sip or two from a drink.}}

{{ En éstas preguntas, una bebida significa una lata o botella de cerveza; un refresco de fruta con vino o una copa de vino, champán o jerez; un trago de licor o una bebida mixta o cóctel. ¿Alguna vez bebió algún tipo de bebida alcohólica aunque hubiera sido solamente una vez?No incluya las ocasiones en las que solo tomó un sorbo o dos de una bebida/ Estas preguntas se refieren a las bebidas alcohólicas. En éstas preguntas, una bebida significa una lata o botella de cerveza; un refresco de fruta con vino o una copa de vino, champán o jerez; un trago de licor o una bebida mixta o cóctel. ¿Alguna vez bebió algún tipo de bebida alcohólica aunque hubiera sido solamente una vez?No incluya las ocasiones en las que solo tomó un sorbo o dos de una bebida}}

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2,-7, -8 go to 'QA21_C90'

'QA21_C86' [AC208]- How long has it been since you last drank an alcoholic beverage?

¿Cuánto tiempo ha pasado desde la última vez que bebió una bebida alcohólica?

- 1 Within the past 30 days
- 1 *En los últimos 30 días*
- 2 More than 30 days ago, but within the past 12 months
- 2 *Hace más de 30 días, pero en los últimos 12 meses*
- 3 More than 12 months ago
- 3 *Hace más de 12 meses*
- 7 REFUSED
- 8 DON'T KNOW

If = 2,3, -7, -8 go to 'QA21_C90'

'QA21_C87' [AC209]- Think specifically about the past 30 days, up to and including today. During the past 30 days, on how many days did you drink one or more drinks of an alcoholic beverage?

Piense específicamente en los últimos 30 días, hasta el día de hoy inclusive. Durante los últimos 30 días, ¿cuántos días bebió una o más bebidas alcohólicas?

In these questions a drink means a can or bottle of beer; a wine cooler or a glass of wine, champagne, or sherry; a shot of liquor or a mixed drink or cocktail.

- 1 NUMBER OF DAYS [RANGE 1-30]
- 7 REFUSED
- 8 DON'T KNOW

'QA21_C88' [AC210]- On the days that you drank during the past 30 days, how many drinks did you usually have each day? Count as a drink a can or bottle of beer; a wine cooler or a glass of wine, champagne, or sherry; a shot of liquor or a mixed drink or cocktail.

En los días que bebió durante los últimos 30 días, ¿cuántas bebidas tomó por lo general cada día? Cuente como bebida una lata o botella de cerveza; un refresco de fruta con vino o una copa de vino, champán o jerez; un trago de licor o una bebida mixta o cóctel.

- 1 NUMBER OF DRINKS [SR: 1-20, HR: 0-99]
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_C89': IF 'QA21_A5'=1 THEN DISPLAY "4 or more" ELSE IF 'QA21_A5'=2 THEN DISPLAY "5 or more"

'QA21_C89' [AC211]- During the past 30 days, on how many days did you have {4/5} or more drinks on the same occasion? By 'occasion,' we mean at the same time or within a couple of hours of each other.

Durante los últimos 30 días, ¿cuántos días tomó {4/5} o más tragos en la misma ocasión? Por "ocasión", queremos decir al mismo tiempo o con un par de horas de diferencia.

- 1 NUMBER OF DAYS [RANGE 0-30]
- 7 REFUSED
- 8 DON'T KNOW

**PROGRAMMING NOTE 'QA21_C90':
IF PROXY=1, GO TO 'QA21_D2'**

'QA21_C90' [AC160] - On a scale from 1 to 10, where 1 is not at all important, and 10 is extremely important, how important do you think genetics and medical care are to a person's health?

Según una escala del 1 al 10, en donde 1 es 'nada importante' y 10 es 'sumamente importante', ¿qué tan importante considera que es la genética para la salud de una persona?

_____ [HR: 1-10]

'QA21_C91' [AC161] - On a scale from 1 to 10, where 1 is not at all important, and 10 is extremely important, how important do you think individual or environmental factors – such as a person's behaviors or access to healthy foods or recreation – are to a person's health?

Según una escala del 1 al 10, donde 1 es 'nada importante' y 10 es 'sumamente importante', ¿qué tan importante considera que son los factores individuales o ambientales, como los comportamientos de una persona o su acceso a actividades recreativas o alimentos saludables, para la salud de una persona?

_____ [HR: 1-10]

Section GV: Gun Violence

PROGRAMMING NOTE 'QA22_GV1':

IF TSE=1, DISPLAY "How many firearms are kept in or around your home?

Include weapons such as pistols, shotguns, and rifles. Include those kept in a garage, outdoor storage area, or motor vehicle. Do not count BB guns, starter pistols, or guns that cannot fire.

We are asking about firearms in a health survey because of our interest in firearm-related injuries."

IF TSE=2, DISPLAY "The next questions are about firearms. Please include weapons such as pistols, shotguns, and rifles. Include those kept in a garage, outdoor storage area, or motor vehicle. Please do not count BB guns, starter pistols, or guns that cannot fire.

We are asking these in a health survey because of our interest in firearm-related injuries.

How many firearms are kept in or around your home?"

'QA22_GV1' [AGV1]- {{How many firearms are kept in or around your home?

Include weapons such as pistols, shotguns, and rifles. Include those kept in a garage, outdoor storage area, or motor vehicle. Do not count BB guns, starter pistols, or guns that cannot fire.

We are asking about firearms in a health survey because of our interest in firearm-related injuries./ The next questions are about firearms. Please include weapons such as pistols, shotguns, and rifles. Include those kept in a garage, outdoor storage area, or motor vehicle. Please do not count BB guns, starter pistols, or guns that cannot fire. How many firearms are kept in or around your home? }}

{{¿Cuántas armas de fuego conserva dentro o alrededor de su casa? Incluye armas como pistolas, escopetas y rifles. Incluye las que se guardan en un garaje, un área de almacenamiento al aire libre o un vehículo motorizado. No incluyas las pistolas de perdigones, las pistolas de largada o las pistolas que no pueden disparar. Las preguntamos en una encuesta de salud debido a nuestro./ Las siguientes preguntas son sobre armas de fuego. Incluye armas como pistolas, escopetas y rifles. Incluye las que se guardan en un garaje, un área de almacenamiento al aire libre o un vehículo motorizado. No incluyas las pistolas de perdigones, las pistolas de largada o las pistolas que no pueden disparar. ¿Cuántas armas de fuego conserva dentro o alrededor de su casa?}}

[IF NEEDED, SAY; " We are asking these in a health survey because of our interest in firearm-related injuries."]

[IF NEEDED, SAY; " Las preguntamos en una encuesta de salud debido a nuestro."]

How many firearms are kept in or around your home?

¿Cuántas armas de fuego conserva dentro o alrededor de su casa?

- _____ Number of firearms [0-999]
- 7 REFUSED
- 8 DON'T KNOW

If= 0, -7, -8 go to 'QA21_GV7'

'QA21_GV2' [AGV2]- How many of these firearms are handguns?

¿Cuántas de estas armas de fuego son pistolas?

- _____ Number of handguns [0-999]
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_GV3': IF 'QA21_GV1'=1, THEN ASK 'QA21_GV3'; ELSE GO TO PN_ 'QA21_GV4';

'QA21_GV3' [AGV3]- Is that firearm a handgun?

¿Es un arma de fuego una pistola?

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_GV4': IF 'QA21_GV1'>1, THEN ASK 'QA21_GV4'; ELSE GO TO PN_ 'QA21_GV5';

'QA21_GV4' [AGV4] – How many of the firearms you keep in or around your home are...

¿Cuántas de las armas de fuego que tiene dentro o alrededor de su casa están...?

- 01 Loaded and locked only with a trigger lock
- 01 *Cargada y bloqueada solo con un seguro de gatillo* [_____] # of firearms
- 02 Loaded and stored in a lock box or in another locked cabinet/container
- 02 *Cargada y almacenada en una caja de seguridad o en otro armario/contenedor con cierre* [_____] # of firearms
- 03 Loaded and unlocked
- 03 *Cargada y sin bloquear* [_____] # of firearms
- 04 Unloaded and locked only with a trigger lock
- 04 *Descargada y bloqueada solo con un seguro de gatillo* [_____] # of firearms
- 05 Unloaded and locked with a cable lock, in a lock box or in another locked cabinet/container
- 05 *Descargada y bloqueada con un cable de bloqueo, en una caja de seguridad o en otro* [_____] # of firearms
- 06 Unloaded and unlocked [_____] # of firearms
- 06 *Descargada y sin bloquear* [_____] # of firearms
- 07 REFUSED
- 08 DON'T KNOW

PROGRAMMING NOTE 'NEW_GQ'5: IF 'QA21_GV1'=1, THEN ASK 'QA21_GV5'; ELSE GO TO 'QA21_GV7';

'QA21_GV5' [AGV5]– Is the firearm kept loaded?

¿El arma de fuego se mantiene cargada?

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_GV6' [AGV6]– Is the firearm...

El arma de fuego está...

- 01 Unlocked
- 01 *Sin bloquear*
- 02 Locked up with a trigger lock
- 02 *Bloqueada con un seguro de gatillo*
- 03 Locked up with a cable lock, in a lock box or in another locked cabinet/container
- 03 *Bloqueada con un cable de bloqueo, en una caja de seguridad o en otro armario/contenedor con cierre*

'QA21_GV7' [AGV7] – How worried are you about being the victim of gun violence? Are you...

¿Qué tan preocupado/a está por ser víctima de violencia armada?

- 01 Very worried
- 01 *Muy preocupado*
- 02 Somewhat worried
- 02 *Algo preocupado/a*
- 03 Not too worried
- 03 *No muy preocupado*
- 04 Not at all worried
- 04 *Para nada preocupado*
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_GV8': IF AGE 18-25, CONTINUE ELSE SKIP TO 'QA21_D2'

'QA21_GV8' [AGV8] – If you wanted a firearm, do you think you would be able to get one within 2 days?

Si quisiera un arma de fuego, ¿cree que podría conseguir una en 2 días?

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

Section D: General Health, Disability, and Sexual Health

PROGRAMMING NOTE 'QA22_D2':

IF TSE=1, DISPLAY “ How tall are you without shoes?You answer in feet and inches or centimeters”

IF TSE=2, DISPLAY “These next questions are about your height and weight. How tall are you without shoes?”

You answer in feet and inches or centimeters”

'QA22_D2' [AE17] – {{ How tall are you without shoes?/These next questions are about your height and weight. How tall are you without shoes?

{{¿Cuánto mide usted sin zapatos?/ Las preguntas que siguen son sobre su estatura y peso. ¿Cuánto mide usted sin zapatos?}}

[IF NEEDED, SAY: 'About how tall?']

[IF NEEDED, SAY: '¿Más o menos cuánto mide?']

_____ FEET (RANGE 3-7)

_____ INCHES (RANGE 0-11)

_____ CENTIMETERS (RANGE 0-300)

-7 REFUSED

-8 DON'T KNOW

PROGRAMMING NOTE 'QA21_D3' :

IF 'QA21_A5' = 2 (FEMALE AT BIRTH) AND [AAGE < 50 OR 'QA21_A4' < 5 (YOUNGER THAN 50 YEARS OLD)], DISPLAY 'When not pregnant, how';

ELSE DISPLAY 'How'

'QA21_D3' [AE18] - {When not pregnant, how/How} much do you weigh without shoes?

{Cuando no está embarazada, ¿cuánto / ¿Cuánto} pesa sin zapatos? Puede responder en libras o kilogramos.

[IF NEEDED, SAY: 'About how much?']

[IF NEEDED, SAY: '¿Más o menos cuánto?']

_____ POUNDS

_____ KILOGRAMS

-7 REFUSED

-8 DON'T KNOW

'QA21_D4' [AD50] - Are you blind or deaf, or do you have a severe vision or hearing problem?

¿Es usted ciego(a), sordo(a), o tiene algún problema grave con la vista u oído?

1 YES

2 NO

-7 REFUSED

-8 DON'T KNOW

If = 2, -7, -8, goto 'QA21_D9'

'QA21_D5' [AL8] - Are you legally blind?

¿Es usted legalmente ciego(a)?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

**PROGRAMMING NOTE 'QA21_D9':
IF PROXY=1, GO TO PN_ 'QA21_D13'**

'QA21_D6' [AD43B] - We are asking a few questions about people's sexual experiences. All answers will be kept private.

Estamos haciendo algunas preguntas sobre las experiencias sexuales de las personas. Todas las respuestas se mantendrán privadas.

In the past 12 months, how many sexual partners have you had?

Durante los últimos 12 meses, ¿con cuántas personas ha tenido relaciones sexuales?

_____ NUMBER OF PARTNERS [HR: 0 - 99, SR: 0 - 20]

If >=0, goto 'QA21_D8'

- 7 REFUSED
- 8 DON'T KNOW

If = -7, goto 'QA21_D8'

'QA21_D7' [AD44B] - Can you give me your best guess?

¿Podría darme un número aproximado?

[IF R PROVIDES EXACT NUMBER, ENTER AS GIVEN. OTHERWISE CODE INTO CATEGORIES PROVIDED]

_____ NUMBER OF PARTNERS [HR: 0 - 99, SR: 0 - 20]

- 1 0 PARTNERS
- 2 1 PARTNER
- 3 2-3 PARTNERS
- 4 4-5 PARTNERS
- 5 6-10 PARTNERS
- 6 MORE THAN 10 PARTNERS
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_D8'
IF 'QA21_D6' = 0 (NO SEXUAL PARTNERS IN LAST 12 MONTHS) OR AD44 =0, GO TO PROGRAMMING NOTE 'QA21_D12' ;
ELSE CONTINUE WITH 'QA21_D8' ;
IF 'QA21_D6' OR 'QA21_D7' = 1 (ONE PARTNER IN LAST 12 MONTHS), DISPLAY "Is that partner male or female";
ELSE DISPLAY "In the past 12 months, have your sexual partners been male, female, or both male and female"

'QA21_D8' [AD45B] - {Is that partner male or female/In the past 12 months, have your sexual partners been male, female, or both male and female}?

{¿Es esa persona hombre o mujer? / Durante los últimos 12 meses, ¿las personas con quienes ha tenido relaciones sexuales han sido hombres, mujeres, o de ambos sexos, hombres y mujeres?}

- 01 MALE
- 02 FEMALE
- 03 BOTH MALE AND FEMALE
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_D9'
IF 'QA21_A6' =2, 3, 4, -3 (IDENTIFIES AS FEMALE, TRANSGENDER, NONE OF THESE, SKIPPED), DISPLAY "Lesbian, Gay" IN QUESTION AND "{Lesbian or} Gay" IN RESPONSE CATEGORY;
ELSE DISPLAY "Gay" IN QUESTION AND "Gay" IN RESPONSE CATEGORY

'QA21_D9' [AD46C] - Do you think of yourself as {lesbian or} gay; straight, that is, not {lesbian or} gay; bisexual; something else; or you don't know the answer?

¿Se considera {lesbiana o} gay; heterosexual, es decir, no {lesbiana o} gay; bisexual; algo distinto; o no sabe la respuesta?

- 02 {LESBIAN OR} GAY
- 01 STRAIGHT, NOT {LESBIAN OR} GAY
- 03 BISEXUAL
- 93 SOMETHING ELSE (SPECIFY: _____)
- 7 REFUSED
- 8 DON'T KNOW
- 06 I DON'T KNOW

PROGRAMMING NOTE 'QA21_D10' :
IF ['QA21_A6' = 1 (IDENTIFIES AS MALE) AND 'QA21_D8' = 1 (MALE)] OR ['QA21_A6' = 2 (IDENTIFIES AS FEMALE) AND 'QA21_D8' = 2 (FEMALE)] OR ['QA21_D11' = 3, -3] OR [IF 'QA21_D9' ≠ 1] CONTINUE WITH 'QA21_D10' ;
ELSE GO TO 'QA21_D12'

'QA21_D10' [AD60B] - Are you legally married to someone of the same sex?

¿Está usted legalmente casado(a) con alguien de su mismo sexo?

[INTERVIEWER NOTE: DO NOT INCLUDE LEGAL DOMESTIC PARTNERSHIP. INCLUDE LEGAL SAME SEX MARRIAGES PERFORMED IN CALIFORNIA AND OTHER STATES.]

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 1, goto 'PN_QA21_D12'

'QA21_D11' [AD61B] - Are you recognized by the state of California as a legally registered domestic partner to someone of the same sex?

¿Está usted legalmente reconocido(a) por el Estado de California como pareja doméstica de alguien del mismo sexo?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_D12';IF ['QA21_A5' = 1 OR 'QA21_A6' = 1 (MALE AT BIRTH OR IDENTIFIES AS MALE)] AND 'QA21_D11' = 1 OR 3 (SEXUAL PARTNERS MALE OR BOTH FEMALE AND MALE), THEN CONTINUE WITH 'QA21_D12';ELSE IF ('QA21_A6' = 1 AND 'QA21_A5' = 2) OR ('QA21_A6' = 2 AND 'QA21_A5' = 1), THEN CONTINUE WITH 'QA21_D12';ELSE IF 'QA21_A6' = 3 (IDENTIFIES AS TRANSGENDER), THEN CONTINUE WITH 'QA21_D12';ELSE IF 'QA21_A6' = 1 AND 'QA21_D9' = 2 OR 3, THEN CONTINUE WITH 'QA21_D12';ELSE SKIP TO 'QA21_D16';

'QA21_D12' [AD79] - People who do not have HIV can take one pill a day to lower their risk of getting HIV. This is called pre-exposure prophylaxis, or PrEP. The pill is also called Truvada®.

Las personas que no tienen VIH pueden tomar una pastilla al día para reducir el riesgo de contraer VIH. Esto se denomina profilaxis previa a la exposición o PrEP por sus siglas en inglés. La pastilla también se llama Truvada®.

At any time in the past 30 days, have you taken PrEP or Truvada®?

¿En algún momento en los últimos 30 días tomó PrEP o Truvada®?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 1, goto 'QA21_D16'

'QA21_D13' [AD80] - In the past 12 months, have you taken any PrEP or Truvada®?

¿En los últimos 12 meses tomó alguna PrEP o Truvada®?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 1, goto 'QA21_D16'

'QA21_D14' [AD81] - Have you ever taken any PrEP or Truvada®?

¿Alguna vez ha tomado alguna PrEP o Truvada®?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 1, goto 'QA21_D16'

'QA21_D15' [AD82] - Before today, have you ever heard of PrEP or Truvada®?

Antes de hoy, ¿había oído hablar de PrEP o Truvada®?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_D16' [AD83] - Have you ever been tested for HIV, the virus that causes AIDS?

¿Le han hecho alguna vez la prueba del VIH, el virus que causa el SIDA?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -3, goto 'QA21_D18'

'QA21_D17' [AD84] - For your most recent HIV test, were you offered the test or did you ask for the test?

En cuanto a su prueba de VIH más reciente, ¿le ofrecieron hacerle la prueba o usted pidió que le hicieran la prueba?

- 1 I WAS OFFERED THE TEST
- 2 I ASKED FOR THE TEST
- 3 I DON'T REMEMBER
- 4 I WAS REQUIRED TO TAKE THE TEST
- 91 OTHER (SPECIFY:_____)
- 7 REFUSED
- 8 DON'T KNOW

If = 1, 2, 3, 4, 91, -7, -8, goto PN_ 'QA21_F1'

'QA21_D18' [AD85] - Were you ever offered an HIV test?

¿Alguna vez le ofrecieron hacerle una prueba de VIH?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

Section F: Mental Health

PROGRAMMING NOTE 'QA21_F1':
IF PROXY=1, GO TO 'QA21_G1'

'QA21_F1' [AJ29] - The following questions ask about how you have been feeling during the past 30 days.

Las siguientes preguntas son acerca de cómo se ha sentido durante los últimos 30 días.

About how often during the past 30 days did you feelnervous?

¿ Durante los últimos 30 días, ¿ más o menos con qué frecuencia se ha sentido nervioso(a)?

- 1 ALL OF THE TIME
- 2 MOST OF THE TIME
- 3 SOME OF THE TIME
- 4 A LITTLE OF THE TIME
- 5 NONE OF THE TIME

'QA21_F2' [AJ30] - During the past 30 days, about how often did you feel hopeless—all of the time, most of the time, some of the time, a little of the time, or none of the time?

¿ Durante los últimos 30 días, ¿ más o menos con qué frecuencia se ha sentido sin esperanzas?

- 1 ALL
- 2 MOST
- 3 SOME
- 4 A LITTLE
- 5 NONE / NEVER
- 7 REFUSED
- 8 DON'T KNOW

'QA21_F3' [AJ31] - During the past 30 days, about how often did you feel restless or fidgety?

¿ Durante los últimos 30 días, ¿ más o menos con qué frecuencia se ha sentido inquieto(a) o intranquilo(a)?

[IF NEEDED, SAY: 'All of the time, most of the time, some of the time, a little of the time, or none of the time?']

IF NEEDED, SAY: ¿ Siempre, casi siempre, algunas veces, muy pocas veces, nunca?

- 1 ALL
- 2 MOST
- 3 SOME
- 4 A LITTLE
- 5 NONE / NEVER
- 7 REFUSED
- 8 DON'T KNOW

'QA21_F4' [AJ32] - How often did you feel so depressed that nothing could cheer you up?

¿ Durante los últimos 30 días, ¿más o menos con qué frecuencia se tan deprimido(a) que nada le podía levantar el ánimo?

[IF NEEDED, SAY: 'All of the time, most of the time, some of the time, a little of the time, or none of the time?']

IF NEEDED, SAY: ¿Siempre, casi siempre, algunas veces, muy pocas veces, nunca?

- 1 ALL
- 2 MOST
- 3 SOME
- 4 A LITTLE
- 5 NONE / NEVER
- 7 REFUSED
- 8 DON'T KNOW

'QA21_F5' [AJ33] - During the past 30 days, about how often did you feel that everything was an effort?

¿ Durante los últimos 30 días, ¿más o menos con qué frecuencia se que todo era un esfuerzo?

[IF NEEDED, SAY: 'All of the time, most of the time, some of the time, a little of the time, or none of the time?']

IF NEEDED, SAY: ¿Siempre, casi siempre, algunas veces, muy pocas veces, nunca?

- 1 ALL
- 2 MOST
- 3 SOME
- 4 A LITTLE
- 5 NONE / NEVER
- 7 REFUSED
- 8 DON'T KNOW

'QA21_F6' [AJ34] - During the past 30 days, about how often did you feel worthless?

¿ Durante los últimos 30 días, ¿más o menos con qué frecuencia se no valía nada?

[IF NEEDED, SAY: 'All of the time, most of the time, some of the time, a little of the time, or none of the time?']

IF NEEDED, SAY: ¿Siempre, casi siempre, algunas veces, muy pocas veces, nunca?

- 1 ALL
- 2 MOST
- 3 SOME
- 4 A LITTLE
- 5 NONE / NEVER
- 7 REFUSED
- 8 DON'T KNOW

'QA21_F7' [AF62] - Please tell me yes or no. Was there ever a month in the past 12 months when these feelings occurred more often than they did in the past 30 days?

Por favor, dígame si o no. ¿Hubo algún mes en los últimos 12 meses en que se haya sentido así con más frecuencia que en los últimos 30 días?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_F8' :
IF 'QA21_F7' = 1 THEN CONTINUE WITH 'QA21_F8' ;
ELSE SKIP TO PROGRAMMING NOTE 'QA21_F14' intro

'QA21_F8' [AF63] - The next questions are about the one month in the past 12 months when you were at your worst emotionally.

Las preguntas que siguen son acerca de ese mes en los últimos 12 meses cuando usted se sintió peor emocionalmente.

During that same month, how often did you feel nervous- all of the time, most, some, a little, or none of the time?

Durante ese mismo mes, ¿con qué frecuencia se sintió nervioso(a)?

- 1 ALL
- 2 MOST
- 3 SOME
- 4 A LITTLE
- 5 NONE / NEVER
- 7 REFUSED
- 8 DON'T KNOW

'QA21_F9' [AF64] - During that same month, how often did you feel hopeless- all of the time, most, some, a little, or none of the time?

Durante ese mismo mes, ¿con qué frecuencia se ha sentido sin esperanzas?

- 1 ALL
- 2 MOST
- 3 SOME
- 4 A LITTLE
- 5 NONE / NEVER
- 7 REFUSED
- 8 DON'T KNOW

'QA21_F10' [AF65] - How often did you feel restless or fidgety?

Durante ese mismo mes, ¿con qué frecuencia se ha sentido inquieto(a) o intranquilo(a)?

[IF NEEDED, SAY: 'All of the time, most of the time, some of the time, a little of the time, or none of the time?']

IF NEEDED, SAY: ¿Siempre, casi siempre, algunas veces, muy pocas veces, nunca?

- 1 ALL
- 2 MOST
- 3 SOME
- 4 A LITTLE
- 5 NONE / NEVER
- 7 REFUSED
- 8 DON'T KNOW

'QA21_F11' [AF66] - How often did you feel so depressed that nothing could cheer you up?

Durante ese mismo mes, ¿con qué frecuencia se tan deprimido(a) que nada le podía levantar el ánimo?

[IF NEEDED, SAY: 'All of the time, most of the time, some of the time, a little of the time, or none of the time?']

IF NEEDED, SAY: ¿Siempre, casi siempre, algunas veces, muy pocas veces, nunca?

- 1 ALL
- 2 MOST
- 3 SOME
- 4 A LITTLE
- 5 NONE
- 7 REFUSED
- 8 DON'T KNOW

'QA21_F12' [AF67] - How often did you feel that everything was an effort?

Durante ese mismo mes, ¿con qué frecuencia se todo era un esfuerzo?

[IF NEEDED, SAY: 'All of the time, most of the time, some of the time, a little of the time, or none of the time?']

IF NEEDED, SAY: ¿Siempre, casi siempre, algunas veces, muy pocas veces, nunca?

- 1 ALL
- 2 MOST
- 3 SOME
- 4 A LITTLE
- 5 NONE / NEVER
- 7 REFUSED
- 8 DON'T KNOW

'QA21_F13' [AF68] - How often did you feel worthless?

Durante ese mismo mes, ¿con qué frecuencia se no valía nada?

[IF NEEDED, SAY: 'All of the time, most of the time, some of the time, a little of the time, or none of the time?']

IF NEEDED, SAY: ¿Siempre, casi siempre, algunas veces, muy pocas veces, nunca?

- 1 ALL
- 2 MOST
- 3 SOME
- 4 A LITTLE
- 5 NONE / NEVER
- 7 REFUSED
- 8 DON'T KNOW

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IF 'QA21_F1'-'QA21_F6' > 0 THEN,
IF 'QA21_F1'-'QA21_F6' = 1 THEN 'QA21_F1'_R-'QA21_F6'_R = 4;
ELSE IF 'QA21_F1'-'QA21_F6' = 2 THEN 'QA21_F1'_R-'QA21_F6'_R = 3;
ELSE IF 'QA21_F1'-'QA21_F6' = 3 THEN 'QA21_F1'_R-'QA21_F6'_R = 2;
ELSE IF 'QA21_F1'-'QA21_F6' = 4 THEN 'QA21_F1'_R-'QA21_F6'_R = 1;
ELSE IF 'QA21_F1'-'QA21_F6' = 5 THEN 'QA21_F1'_R-'QA21_F6'_R = 0;
ELSE 'QA21_F1'_R-'QA21_F6'_R = 'QA21_F1'-'QA21_F6';
IF 'QA21_F8'-'QA21_F13' > 0 THEN,
IF 'QA21_F8'-'QA21_F13' = 1 THEN 'QA21_F8'_R-'QA21_F13'_R = 4;
ELSE IF 'QA21_F8'-'QA21_F13' = 2 THEN 'QA21_F8'_R-'QA21_F13'_R = 3;
ELSE IF 'QA21_F8'-'QA21_F13' = 3 THEN 'QA21_F8'_R-'QA21_F13'_R = 2;
ELSE IF 'QA21_F8'-'QA21_F13' = 4 THEN 'QA21_F8'_R-'QA21_F13'_R = 1;
ELSE IF 'QA21_F8'-'QA21_F13' = 5 THEN 'QA21_F8'_R-'QA21_F13'_R = 0;
ELSE 'QA21_F8'_R-'QA21_F13'_R = 'QA21_F8'-'QA21_F13';
IF ('QA21_F1'_R - 'QA21_F6'_R) >= 0 (NON-MISSING) THEN DO;
IF ('QA21_F1'_R + 'QA21_F2'_R + 'QA21_F3'_R + 'QA21_F4'_R + 'QA21_F5'_R + 'QA21_F6'_R) > 8
OR
('QA21_F8'_R + 'QA21_F9'_R + 'QA21_F10'_R + 'QA21_F11'_R + 'QA21_F12'_R + 'QA21_F13'_R) >
8, THEN CONTINUE WITH 'QA21_F14' INTRO;
IF ('QA21_F8'_R - 'QA21_F13'_R) 7 OR
('QA21_F8'_R + 'QA21_F9'_R + 'QA21_F10'_R + 'QA21_F11'_R + 'QA21_F12'_R + 'QA21_F13'_R) >
7, THEN CONTINUE WITH 'QA21_F14' INTRO;
IF 'QA21_F7' = 1 THEN DISPLAY 'again, please';
ELSE SKIP TO 'QA21_F19';

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'AF69B_INTRO' [AF69B_INTRO] - Think {again, please} about the month in the past 12 months when you were at your worst emotionally.

Piense otra vez, por favor, en el mes, durante los últimos 12 meses, en el que se sintió peor emocionalmente.

PROGRAMMING NOTE 'QA21_F14' :
IF AGE > 70 GO TO 'QA21_F15' ;
ELSE CONTINUE WITH 'QA21_F14'

'QA21_F14' [AF69B] - Did your emotions interfere a lot, some, or not at all with your performance at work/school?

¿Tuvieron sus emociones mucha influencia, alguna influencia o ninguna influencia en su desempeño en el trabajo?

- 1 A LOT
- 2 SOME
- 3 NOT AT ALL
- 4 I DO NOT WORK
- 7 REFUSED
- 8 DON'T KNOW

'QA21_F15' [AF70B] - Did your emotions interfere a lot, some, or not at all with your household chores?

¿Tuvieron sus emociones mucha influencia, alguna influencia o ninguna influencia en las tareas o quehaceres de su casa?

- 1 A LOT
- 2 SOME
- 3 NOT AT ALL
- 7 REFUSED
- 8 DON'T KNOW

'QA21_F16' [AF71B] - Did your emotions interfere a lot, some, or not at all with your social life?

¿Tuvieron sus emociones mucha influencia, alguna influencia o ninguna influencia en su vida social?

- 1 A LOT
- 2 SOME
- 3 NOT AT ALL
- 7 REFUSED
- 8 DON'T KNOW

'QA21_F17' [AF72B] - Did your emotions interfere a lot, some, or not at all with your relationship with friends and family?

¿Tuvieron sus emociones mucha influencia, alguna influencia o ninguna influencia en las relaciones con sus amigos y su familia?

- 1 A LOT
- 2 SOME
- 3 NOT AT ALL
- 7 REFUSED
- 8 DON'T KNOW

'QA21_F18' [AF73B] - Now think about the past 12 months. About how many days out of the past 365 days were you totally unable to work or carry out your normal activities because of your feeling nervous, depressed, or emotionally stressed?

Ahora piense en los últimos 12 meses. De los 365 días, ¿durante cuántos días le fue imposible o no fue capaz de trabajar o llevar a cabo sus actividades normales debido a que se sentía nervioso(a), deprimido(a) o estresado(a) emocionalmente?

_____ NUMBER OF DAYS

- 7 REFUSED
- 8 DON'T KNOW

'QA21_F19' [AF81] - Was there ever a time during the past 12 months when you felt that you might need to see a professional because of problems with your mental health, emotions or nerves or your use of alcohol or drugs?

¿Hubo alguna vez en los últimos 12 meses en que usted pensó que posiblemente necesitaba ver a un profesional debido a problemas con su salud mental, sus emociones o nervios, o su consumo de alcohol o drogas?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto 'QA21_F21'

'QA21_F20' [AJ1] - Does your insurance cover treatment for mental health problems, such as visits to a psychologist or psychiatrist?

¿Cubre su seguro tratamiento de problemas de salud mental, tal como visitas al psicólogo o al psiquiatra?

- 1 YES
- 2 NO
- 03 DON'T HAVE INSURANCE
- 7 REFUSED
- 8 DON'T KNOW

'QA21_F21' [AF74] - In the past 12 months have you seen your primary care physician or general practitioner for problems with your mental health, emotions, nerves, or your use of alcohol or drugs?

En los últimos 12 meses, ¿ha visto a su doctor de atención primaria o doctor general para problemas con su salud mental, sus emociones, nervios, o consumo de alcohol o drogas?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_F22' [AF75] - In the past 12 months have you seen any other professional, such as a counselor, psychiatrist, or social worker for problems with your mental health, emotions, nerves, or your use of alcohol or drugs?

En los últimos 12 meses, ¿ha visto a cualquier otro profesional, tal como un consejero, un psiquiatra o un trabajador social para problemas con su salud mental, sus emociones, nervios, o consumo de alcohol o drogas?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_F23' :
IF 'QA21_F21' = 1 OR 'QA21_F22' = 1 THEN CONTINUE WITH 'QA21_F23' ;
ELSE SKIP TO 'QA21_F28'

'QA21_F23' [AF76] - Did you seek help for your mental or emotional health or for an alcohol or drug problem?

¿Buscó usted ayuda para su salud mental o emocional, o por un problema de alcohol o drogas?

- 1 MENTAL-EMOTIONAL HEALTH
- 2 ALCOHOL-DRUG PROBLEM
- 3 BOTH MENTAL AND ALCOHOL-DRUG PROBLEMS
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_F24' :
IF 'QA21_F23' = 1, display: 'mental or emotional health';
IF 'QA21_F23' = 2, display: 'use of alcohol or drugs';
IF 'QA21_F23' = 3, display: 'mental or emotional health and your use of alcohol or drugs';
ELSE SKIP TO 'QA21_F25'

'QA21_F24' [AF77] - In the past 12 months, how many visits did you make to a professional for problems with your {mental or emotional health/use of alcohol or drugs/mental or emotional health and your use of alcohol or drugs}? Do not count overnight hospital stays.

En los últimos 12 meses, ¿cuántas veces fue a ver a un profesional debido a problemas con su salud mental o emocional/ consumo de alcohol o drogas/ salud mental o emocional y consumo de alcohol o drogas? No cuente las veces que tuvo que pasar la noche en el hospital.

_____ NUMBER OF VISITS [HR: 0 - 365, SR: 0 - 52]

- 7 REFUSED
- 8 DON'T KNOW

'QA21_F25' [AF78] - Are you still receiving treatment for these problems from one or more of these providers?

Todavía está recibiendo tratamiento de alguno de estos proveedores debido a uno o más de estos problemas?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 1, -7, -8, goto 'QA21_F28'

'QA21_F26' [AF79] - Did you complete the recommended full course of treatment?

¿Terminó usted el completo tratamiento recomendado?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 1, -7, -8, goto 'QA21_F28'

'QA21_F27' [AF80] - What is the main reason you are no longer receiving treatment?

¿Cuál es el motivo principal por el que ya no está recibiendo tratamiento?

- 1 GOT BETTER/ NO LONGER NEEDED TREATMENT
- 2 NOT GETTING BETTER
- 3 WANTED TO HANDLE PROBLEM ON MY OWN
- 4 HAD BAD EXPERIENCES WITH TREATMENT
- 5 LACK OF TIME OR TRANSPORTATION
- 6 TOO EXPENSIVE
- 7 INSURANCE DOES NOT COVER
- 91 OTHER (SPECIFY: _____)
- 7 REFUSED
- 8 DON'T KNOW

'QA21_F28' [AJ5] - During the past 12 months, did you take any prescription medications, such as an antidepressant or sedative, almost daily for two weeks or more, for an emotional or personal problem?

Durante los últimos 12 meses, ¿tomó alguna medicina con receta, como antidepresivos o sedantes, casi a diario por dos semanas o más, debido a algún problema emocional o personal?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMING NOTE 'QA21_F29' :IF 'QA21_F19' = 1 AND ('QA21_F21' ≠ 1 AND 'QA21_F22' ≠ 1) (PERCEIVED NEED, BUT NO TREATMENT) CONTINUE WITH 'QA21_F29';ELSE SKIP TO AG44

'QA21_F29' [AF82] - Here are some reasons people have for not seeking help even when they think they might need it. Please mark 'yes' or 'no' for whether each statement applies to why you did not see a professional.

Una persona podría decidir no buscar ayuda de un profesional, aunque crea que posiblemente la necesita, por algunas razones que mencionamos a continuación. Dígame 'sí' o 'no' si piensa que cada una de estas razones explica por qué no vio usted a un profesional.

You were concerned about the cost of treatment.

Le preocupaba el costo del tratamiento.

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_F30' [AF83] - You did not feel comfortable talking with a professional about your personal problems.

Se sentía incómodo(a) hablando con un profesional acerca de sus problemas personales

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_F31' [AF84] - You were concerned about what would happen if someone found out you had a problem.

Le preocupaba qué iba a pasar si alguien se enteraba de que tenía un problema

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_F32' [AF85] - You had a hard time getting an appointment.

Le fue muy difícil conseguir una cita

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA22_F33':

IF TSE=1, DISPLAY " People may use the internet for streaming video/music, playing games, checking social media, using apps, browsing the web, etc, on a computer or on a phone or mobile device.

On a typical day, how often do you use the internet?"

IF TSE=2, DISPLAY "The next questions are about your use of technology.

People may use the internet for streaming video/music, playing games, checking social media, using apps, browsing the web, etc, on a computer or on a phone or mobile device.

On a typical day, how often do you use the internet?"

'QA22_F33' [AG44] – {{People may use the internet for streaming video/music, playing games, checking social media, using apps, browsing the web, etc, on a computer or on a phone or mobile device.

On a typical day, how often do you use the internet? Would you say../ The next questions are about your use of technology.

People may use the internet for streaming video/music, playing games, checking social media, using apps, browsing the web, etc, on a computer or on a phone or mobile device.

On a typical day, how often do you use the internet? Would you say..}}

{{ Las personas pueden usar el Internet para ver videos o escuchar música por streaming, jugar videojuegos, revisar las redes sociales, usar aplicaciones, navegar en Internet, etc., en una computadora, un teléfono celular o un dispositivo móvil. En un día típico, ¿con qué frecuencia usa el Internet por cualquier motivo?/ Las siguientes preguntas tratan sobre su uso de la tecnología. Las personas pueden usar el Internet para ver videos o escuchar música por streaming, jugar videojuegos, revisar las redes sociales, usar aplicaciones, navegar en Internet, etc., en una computadora, un teléfono celular o un dispositivo móvil. En un día típico, ¿con qué frecuencia usa el Internet por cualquier motivo? }}

- 01 ALMOST CONSTANTLY
- 02 MANY TIMES A DAY
- 03 A FEW TIMES A DAY
- 04 LESS THAN A FEW TIMES A DAY
- 7 REFUSED
- 8 DON'T KNOW

'QA21_F34' [AG45] - On a typical day, how often do you use a computer or mobile device for social media? Would you say...

En un día típico, ¿con qué frecuencia usa una computadora o dispositivo móvil para acceder a las redes sociales?

[IF NEEDED: 'Social media may include Facebook, Instagram, Twitter, Snapchat, YouTube, etc.]

[IF NEEDED: 'Las redes sociales pueden incluir Facebook, Instagram, Twitter, Snapchat, youtube, etc' .]

- 01 ALMOST CONSTANTLY
- 02 MANY TIMES A DAY
- 03 A FEW TIMES A DAY
- 04 LESS THAN A FEW TIMES A DAY
- 7 REFUSED
- 8 DON'T KNOW

'QA21_F35' [AG46] - In the past 12 months, have you tried to get help from an on-line tool, including mobile apps or texting services for problems with your mental health, emotions, nerves, or your use of alcohol or drugs?

Durante los últimos 12 meses, ¿ha intentado obtener ayuda de una herramienta en línea, lo que incluye aplicaciones móviles o servicios de mensajería de texto, con relación a problemas sobre su salud mental, emociones, nervios o consumo de alcohol o drogas?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, goto 'QA21_F37'

If =-7,-8 goto 'QA21_F38'

'QA21_F36' [AG47] - How useful was this? Would you say...

¿Qué tan útil le resultó? ¿Diría que...

- 01 Very
- 01 *Muy útil*
- 02 Somewhat
- 02 *Algo útil*
- 03 Not at all
- 03 *Nada útil*
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_F37': IF 'QA21_F35' =2 AND 'QA21_F19' = 1 THEN CONTINUE WITH 'QA21_F37' ; ELSE SKIP TO 'QA21_F38'

'QA21_F37' [AG48] - What is the main reason you did not try to get help from an on-line tool, including mobile apps, or texting services?

¿Cuál es el motivo principal por el que no trató de obtener ayuda a través de una herramienta en línea, incluyendo aplicaciones móviles o servicios por mensajes de texto?

- 1 GOT BETTER/ NO LONGER NEEDED
- 2 WANTED TO HANDLE PROBLEM MYSELF
- 3 DON'T OWN A SMARTPHONE OR COMPUTER OR DON'T HAVE ENOUGH SPACE TO DOWNLOAD NEW APPS
- 4 DIDN'T KNOW ABOUT THESE APPS
- 5 DON'T TRUST MOBILE APPS
- 6 CONCERNS ABOUT PRIVACY AND SECURITY OF DATA
- 7 DON'T THINK IT WOULD BE HELPFUL OR WORK
- 8 COST
- 9 DON'T HAVE TIME
- 10 RECEIVED TRADITIONAL/ FACE-TO-FACE SERVICES
- 11 DON'T THINK I NEEDED IT
- 12 DON'T HAVE ENOUGH SPACE TO DOWNLOAD NEW APPS
- 91 OTHER (SPECIFY: _____)
- 7 REFUSED
- 8 DON'T KNOW

'QA21_F38' [AG49] - In the past 12 months, have you connected online with people that have mental health or alcohol/drug concerns similar to yours through methods such as social media, blogs, and online forums?

Durante los últimos 12 meses, ¿has estado en contacto con personas en línea que tienen inquietudes similares a las tuyas en cuanto a la salud mental o el alcohol/las drogas, a través de medios como redes sociales, blogs o foros en línea?

[IF NEEDED: 'Examples include online forums or closed social media groups on specific issues, doing hashtag searches on social media, or following people with similar health conditions.']

[IF NEEDED: 'Algunos ejemplos son foros en línea o grupos cerrados en las redes sociales sobre temas específicos, hacer búsquedas por etiquetas en las redes sociales o seguir a personas con afecciones similares.']

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_F39' [AG50] - In the past 12-months, have you used online tools to find, be referred to, contact, or connect with a mental health professional?

Durante los últimos 12 meses, ¿ha usado herramientas en línea para buscar, recibir una referencia, contactarse o comunicarse con un profesional de la salud?

[IF NEEDED: 'Examples of online tools include texting, on-line messaging, video chat, or a mental health or health-related mobile app.']

[IF NEEDED: 'Por ejemplo, por mensaje de texto, mensajes en línea, videochat o una aplicación móvil relacionada con la salud o la salud mental.']

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA22_F40':-: IF ADULTCNT>=2 OR (ADULTCNT>=1 AND KIDCNT>=1), CONTINUE, DISPLAY "OR MEMBERS OF YOUR HOUSEHOLD"

IF TSE=1, DISPLAY "Potentially hazardous weather-related events that are increasing in California, including extreme heat waves, flooding, wildfires, smoke from wildfires, and the public safety power shutoffs of electricity to prevent a wildfire.

In the past two years, have you or members of your household personally experienced any of these events?"

IF TSE=2, DISPLAY "The next set of questions are about potentially hazardous weather-related events that are increasing in California, including extreme heat waves, flooding, wildfires, smoke from wildfires, and the public safety power shutoffs of electricity to prevent a wildfire.

In the past two years, have you or members of your household personally experienced any of these events?"

'QA22_F40' [AF110]- {{Potentially hazardous weather-related events that are increasing in California, including extreme heat waves, flooding, wildfires, smoke from wildfires, and the public safety power shutoffs of electricity to prevent a wildfire.

In the past two years, have you or members of your household personally experienced any of these events?/ The next set of questions are about potentially hazardous weather-related events that are increasing in California, including extreme heat waves, flooding, wildfires, smoke from wildfires, and the public safety power shutoffs of electricity to prevent a wildfire.

In the past two years, have you or members of your household personally experienced any of these events?}}

{{Eventos potencialmente peligrosos relacionados con el clima que se están incrementando en California, incluyendo olas de calor extremo, inundaciones, incendios forestales, humo de incendios forestales, y cortes de electricidad por motivos de seguridad pública para prevenir incendios forestales. En los últimos dos años, ¿pasó usted o algún miembro de su hogar por alguno de estos eventos personalmente?/ El siguiente conjunto de preguntas trata sobre eventos extremos relacionados con el clima que han ocurrido en California, que incluye olas de calor, inundaciones, incendios forestales, humo de incendios forestales y cortes de electricidad por motivos de seguridad pública para prevenir incendios forestales. En los últimos dos años, ¿pasó usted o algún miembro de su hogar por alguno de estos eventos personalmente?}}

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

If 2, -7, -8 goto 'QA21_G1'

PROGRAMMING NOTE 'QA21_F41':-: IF ADULTCNT>=2 OR (ADULTCNT>=1 AND KIDCNT>=1), CONTINUE, DISPLAY "OR THE PHYSICAL HEALTH OF MEMBERS OF YOUR HOUSEHOLD"

'QA21_F41' [AF111] - Was your physical health {or the physical health of members of your household} harmed by any of these events?

¿Fue su salud física { o la salud física de los miembros de su hogar } dañada por alguno de estos eventos?

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_F42':-: IF ADULTCNT>=2 OR (ADULTCNT>=1 AND KIDCNT>=1), CONTINUE, DISPLAY "OR THE MENTAL HEALTH OF MEMBERS OF YOUR HOUSEHOLD"

'QA21_F42' [AF112] - Was your mental health {or the mental health of members of your household} harmed by any of these events?

¿Fue su salud mental { o la salud mental de los miembros de su hogar } dañada por alguno de estos eventos?

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_F43' [AF113] - Did you have to leave because the property was...

¿Su propiedad o sus finanzas fueron dañadas por alguno de estos eventos?

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA22_F44' [AAPI18]- Hate crimes or incidents may include times someone experienced verbal or physical abuse, or damages to their property because of their race or ethnicity. This topic may bring up unwanted past experiences. We will provide support information at the end of these questions for those in need.

Los incidentes o crímenes de odio pueden incluir el abuso físico o verbal sufrido por alguien, o los daños a sus propiedades debido a su raza u origen étnico. Este tema puede traer recuerdos indeseados de experiencias pasadas. Al finalizar estas preguntas, incluiremos información de ayuda para quienes la necesiten.

Have you ever been a victim of a hate crime or hate incident in the United States?

Ha sido alguna vez víctima de un incidente o crimen de odio en Estados Unidos?

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA22_F44': IF QA22_F43' = 1, CONTINUE WITH 'QA22_F44'; ELSE SKIP TO PROGRAMMING NOTE 'INTRO'

'QA22_F44' [AAPI19A]- Did you experience any hate crimes or hate incidents before 2020?

¿Sufrió algún incidente o crimen de odio antes del 2020?

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA22_F45' [AAPI19B]- Did you experience any hate crimes or hate incidents in 2020?

¿Sufrió algún incidente o crimen de odio en el 2020?

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA22_F46' [AAPI19C]- Have you experienced any hate crimes or hate incidents in 2021?

¿Ha sufrido algún incidente o crimen de odio en el 2021?

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA22_F47' [AAPI19D]- Have you experienced any hate crimes or hate incidents in 2022?

¿Ha sufrido algún incidente o crimen de odio en el 2022?

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

HATECRIMERESOURCE [HATECRIMERESOURCE]- If you would like to speak with someone for emotional support about your experience with hate crimes or incidents, someone is available 24 hours a day to provide information to help you. The toll-free number is 855-845-7415. You do not have to provide your full name or contact information if you prefer to stay anonymous. Or, I can also provide you with a website if you want to chat with someone online.

Si desea hablar con alguien para asistencia emocional relacionada con su experiencia con incidentes o crímenes de odio, hay personas que están disponible las 24 horas del día con información que le ayude. El número gratuito es 855-845-7415. No tiene la obligación de dar su nombre completo ni información de contacto si prefiere permanecer anónimo/a. También puede visitar <https://www.mentalhealthsf.org/peer-run-warmline/> para obtener información sobre cómo conseguir ayuda.

[PROVIDE WEBSITE IF REQUESTED: The website address is www.mentalhealthsf.org/ In the middle of the page, you can click on the “talk to a peer now” button.]

[PROVIDE WEBSITE IF REQUESTED: La dirección del sitio web es www.mentalhealthsf.org. En el centro de la página, puede hacer clic sobre el botón “talk to a peer now” [“hablar con un asesor par ahora.]

[SPEAK SLOWLY WHEN GIVING THE HOTLINE NUMBER AND/OR WEBSITE.]

[IF NEEDED, WAIT UNTIL THEY HAVE SOMETHING TO WRITE DOWN THE NUMBER AND/OR WEBSITE AND REPEAT THE NUMBER AND/OR WEBSITE. ASK THEM TO READ IT BACK TO YOU.]

Section G: Demographic Information, Part II

PROGRAMMING NOTE 'INTRO':

**IF CHILD INTERVIEW COMPLETED AND 'QA21_A37'=1 AND CH12 = (2 or 3), DISPLAY "Your answers are confidential and will not be reported to Immigration Services." OR
IF CHILD INTERVIEW COMPLETED AND 'QA21_A37'=2 AND CH15= (2 or 3), DISPLAY "Your answers are confidential and will not be reported to Immigration Services."**

'INTRO' [INTRO]- Now a few more questions about your background. {Your answers are confidential and will not be reported to Immigration Services.}

Ahora tengo algunas preguntas sobre usted. { Sus respuestas son confidenciales y no serán reportadas al Servicio de Inmigración.}

PROGRAMMING NOTE 'QA21_G1':

IF CHILD INTERVIEW COMPLETED AND 'QA21_B1'=1, MARK 'QA21_G1'= CH11 AND GO TO 'QA21_G2';

IF CHILD INTERVIEW COMPLETED AND 'QA21_B1'=2, MARK 'QA21_G1'= CH14 AND GO TO 'QA21_G2';

ELSE CONTINUE WITH 'QA21_G1'

'QA21_G1' [AH33] - In what country were you born?

¿En qué país nació?

[SELECT FROM MOST LIKELY COUNTRIES]

- 1 UNITED STATES
- 2 AMERICAN SAMOA
- 3 CANADA
- 4 CHINA
- 09 GUAM
- 16 JAPAN
- 17 KOREA
- 18 MEXICO
- 19 PHILIPPINES
- 22 PUERTO RICO
- 25 VIETNAM
- 26 VIRGIN ISLANDS
- 91 OTHER (SPECIFY: _____)
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_G2' :
IF 'QA21_G1' ≠ 1, (NOT BORN IN US) GO TO PN_ 'QA21_G4' ;
ELSE IF 'QA21_G1' = 1 OR -3 (BORN IN US, SKIPPED) CONTINUE WITH 'QA21_G2';
IF CHILD INTERVIEW COMPLETED ['QA21_B1'=1, 2 AND 'QA21_G1'=1 DISPLAY "You previously mentioned you were born in the United States."];
ELSE DISPLAY "In what country was your mother born"

'QA21_G2' [AH34] – {You previously mentioned you were born in the United States}. In what country was your mother born?

{Anteriormente, usted mencionó que nació en Estados Unidos}. ¿En qué país nació tu madre?

[SELECT FROM MOST LIKELY COUNTRIES]

[FOR RESPONDENTS WHO WERE ADOPTED, QUESTION REFERS TO ADOPTIVE PARENTS]

- 1 UNITED STATES
- 2 AMERICAN SAMOA
- 3 CANADA
- 4 CHINA
- 09 GUAM
- 16 JAPAN
- 17 KOREA
- 18 MEXICO
- 19 PHILIPPINES
- 22 PUERTO RICO
- 25 VIETNAM
- 26 VIRGIN ISLANDS
- 91 OTHER (SPECIFY: _____)
- 7 REFUSED
- 8 DON'T KNOW

'QA21_G3' [AH35] - In what country was your father born?

¿En qué país nació su padre?

[SELECT FROM MOST LIKELY COUNTRIES]

[FOR RESPONDENTS WHO WERE ADOPTED, QUESTION REFERS TO ADOPTIVE PARENTS]

- 1 UNITED STATES
- 2 AMERICAN SAMOA
- 3 CANADA
- 4 CHINA
- 09 GUAM
- 16 JAPAN
- 17 KOREA
- 18 MEXICO
- 19 PHILIPPINES
- 22 PUERTO RICO
- 25 VIETNAM
- 26 VIRGIN ISLANDS
- 91 OTHER (SPECIFY: _____)
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA22_G4' :IF 'QA22_G1' = 1 (USA) OR 9 (GUAM) OR 22 (PUERTO RICO) OR 26 (VIRGIN ISLANDS) OR [IF CHILD INTERVIEW COMPLETED AND '[(SC17B'=1 AND CH11A=1) OR (SC17B=2 AND CH14A=1)]], CODE AH39=1 AND GO TO PROGRAMMING NOTE 'QA22_G9' ELSE CONTINUE WITH 'QA22_G4'
IF TSE=1, DISPLAY "Are you a citizen of the United States?"
IF TSE=2, DISPLAY "The next questions are about citizenship and immigration. Are you a citizen of the United States?"

'QA22_G4' [AH39] – {{ Are you a citizen of the United States?/ The next questions are about citizenship and immigration./Are you a citizen of the United States?}}

{{ ¿Es usted ciudadano(a) de los Estados Unidos?/ Las preguntas siguientes son acerca de ciudadanía e inmigración. ¿Es usted ciudadano(a) de los Estados Unidos?}}

- 1 YES
- 2 NO
- 3 APPLICATION PENDING
- 7 REFUSED
- 8 DON'T KNOW

If = 1, goto 'QA21_G8'

PROGRAMMING NOTE 'QA21_G5' :IF 'QA21_G1' = 2 (AMERICAN SAMOA), GO TO PROGRAMMING NOTE 'QA21_G6'

'QA21_G5' [AH40] - Are you a permanent resident with a green card? Your answers are confidential and will not be reported to Immigration Services.

¿Es usted residente permanente con una tarjeta verde? Sus respuestas son confidenciales y no serán reportadas al Servicio de Inmigración.

[IF NEEDED, SAY: 'People usually call this a 'Green Card' but the color can also be pink, blue, or white.']

[IF NEEDED, SAY: 'La gente normalmente le llama a esto La 'Tarjeta verde 'o Green Card pero también puede ser de color rosa, azul o blanca.']

- 1 YES
- 2 NO
- 3 APPLICATION PENDING
- 7 REFUSED
- 8 DON'T KNOW

'QA21_G6' [AH41] - About how many years have you lived in the United States?

Aproximadamente, ¿cuántos años ha vivido usted en los Estados Unidos?

[FOR LESS THAN A YEAR, ENTER 1 YEAR]

_____ NUMBER OF YEARS
_____ YEAR (FIRST CAME TO LIVE IN U.S.)

- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_G7' : IF 'QA21_G4' = 1 (NATURALIZED) OR AH40 = 1 (HAS GREEN CARD), GO TO 'QA21_G9'; ELSE CONTINUE WITH 'QA21_G7'

'QA21_G7' [AG36B]- Are you are currently here on any of the following: a tourist visa, a student visa, a work visa or permit, or another document which permits you to stay in the U.S. for a limited amount of time?

¿Está actualmente en alguna de las siguiente situaciones: una visa de turista, una visa de estudiante, una visa o permiso de trabajo, u otro documento que le permita permanecer en los EE. UU. por una cantidad limitada de tiempo ?

[INTERVIEWER: CHECK FIRST MENTION.]

[INTERVIEWER: CIRCLE "4" ONLY IF VOLUNTEERED. DO NOT PROBE.]

- 1 TOURIST VISA
- 2 STUDENT VISA
- 3 WORK VISA OR PERMIT
- 4 DEFERRED ACTION FOR CHILDHOOD ARRIVALS OR "DACA"
- 6 ANOTHER DOCUMENT WHICH PERMITS STAY FOR LIMITED TIME
- 8 REFUGEE/ASYLUM STATUS
- 91 OTHER (SPECIFY: _____)
- 7 REFUSED
- 8 DON'T KNOW

If= 8, -7, -8 goto 'QA21_G9'

'QA21_G8' [AG37B]- Is this visa or document still valid or has it expired?

¿Esta visa o documento aún es válido/a o venció?

- 1 VALID
- 2 EXPIRED
- 3 APPLICATION PENDING
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_G9' :
IF [AAGE < 30 OR 'QA21_A4' = 1 (AGE 18-29)] AND ['QA21_A24' = 1 (SPOUSE/PARTNER LIVING IN HH) AND 3 OR MORE ADULTS LIVE IN HH OR 'QA21_A23' = 3, 4, 5, 6, -7, OR -8 (WIDOWED, DIVORCED, SEPARATED, NEVER MARRIED, REF, DK) AND 2 OR MORE ADULTS LIVING IN HH], CONTINUE WITH 'QA21_G9' ;
ELSE GO TO PROGRAMMING NOTE 'QA21_G10'

'QA21_G9' [AH43A] - Are you now living with either of your parents?

¿Está usted viviendo actualmente con su padre o con su madre?

[INTERVIEWER NOTE: IF R MENTIONS IN-LAWS, CODE AS YES]

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_G10' :
ANY CHILDREN IN 'QA21_A36' ARE AGE 13 OR LESS, CONTINUE WITH 'QA21_G10' ;
ELSE GO TO 'QA21_G12' ;
IF ANY CHILD IN ROSTER 'QA21_A36' < 14 AND CHILD IN ROSTER ≥ 14 DISPLAY 'for any children under age 14';
IF 'QA21_A23' = 1 (MARRIED) AND 'QA21_A24' =1 (SPOUSE/PARTNER LIVING IN HH), DISPLAY 'you or your spouse';
ELSE IF 'QA21_A24' = 1 (SPOUSE/PARTNER LIVING IN HH), DISPLAY 'you or your partner';
ELSE DISPLAY 'you'

'QA21_G10' [AH44A] - In the past month, did you use any paid childcare {for any children under age 14} while {you or your spouse/you or your partner/you} worked, were in school, or looked for work?

Durante el mes pasado, ¿pagó algún tipo de cuidado infantil por cualquier niño menor de 14 años mientras {usted o su esposo(a)/pareja/usted} trabajaba, iba a la escuela o buscaba empleo?

[IF NEEDED, SAY: 'This includes Head Start, day care centers, before- or after-school care programs, and any baby-sitting arrangements.']

[IF NEEDED, SAY: 'Esto incluye Head Start, guarderías infantiles, programas antes o después de la escuela y cualquier arreglo para que otra persona cuide a su niño(a) mediante un pago.']

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto 'QA21_G12'

'QA21_G11' [AH44B] - In the past month, how much did you pay for all child care arrangements and programs?

Durante los últimos 30 días, ¿cuánto pagó en total por todos los arreglos y programas para cuidar niños?

[IF NEEDED, SAY: 'If it is easier for you, you can tell me what you paid in a typical week last month. You or any other adult in your household.']

[IF NEEDED, SAY: 'Si le es más fácil, puede decirme lo que pagó usted o cualquier otro adulto en su hogar en unasemana normal durante el mes pasado.']

\$_____ AMOUNT LAST MONTH [HR: 0-8,000]

\$_____ AMOUNT IN TYPICAL WEEK [HR: 0-3,000]

- 3 THERE WAS NO PAYMENT IN THE LAST MONTH
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_G12' :
IF CHILD INTERVIEW COMPLETE AND AR ≠ CHILD INTERVIEW RESPONDENT OR CHILD INTERVIEW NOT COMPLETE, CONTINUE WITH 'QA21_G12' ;
ELSE GO TO 'QA21_G13'

'QA21_G12' [AH47] - What is the highest grade of education you have completed and received credit for?

¿Cuál es el grado de educación más alto que usted ha completado y por el que ha recibido reconocimiento?

- 30 NO FORMAL EDUCATION
- 2 GRADE SCHOOL
- 3 HIGH SCHOOL OR EQUIVALENT
- 4 4-YEAR COLLEGE OR UNIVERSITY
- 5 GRADUATE OR PROFESSIONAL SCHOOL
- 6 2-YEAR JUNIOR OR COMMUNITY COLLEGE
- 7 VOCATIONAL, BUSINESS, OR TRADE SCHOOL
- 7 REFUSED
- 8 DON'T KNOW (OUT OF RANGE)

Grade
Grado

- 1 1ST GRADE
- 2 2ND GRADE
- 3 3RD GRADE
- 4 4TH GRADE
- 5 5TH GRADE
- 6 6TH GRADE
- 7 7TH GRADE
- 8 8TH GRADE

High
Secundaria

- 9 9TH GRADE
- 10 10TH GRADE
- 11 11TH GRADE
- 12 12TH GRADE

College
Secundaria

- 9 9TH GRADE
- 10 10TH GRADE
- 11 11TH GRADE
- 12 12TH GRADE

Graduate
Posgrado

- 18 1ST YEAR OF GRADUATE OR PROFESSIONAL SCHOOL
- 19 2ND YEAR OF GRADUATE OR PROFESSIONAL SCHOOL (MA/MS)
- 20 3RD YEAR OF GRADUATE OR PROFESSIONAL SCHOOL
- 21 MORE THAN 3 YEARS OF GRADUATE OR PROFESSIONAL SCHOOL (PHD)

Community

Colegio universitario

- 22 1ST YEAR OF JUNIOR OR COMMUNITY COLLEGE
- 23 2ND YEAR OF JUNIOR OR COMMUNITY COLLEGE (AA/AS)

Business

Escuela de negocios

- 24 1ST YEAR OF VOCATIONAL, BUSINESS, OR TRADE SCHOOL
- 25 2ND YEAR OF VOCATIONAL, BUSINESS, OR TRADE SCHOOL
- 26 MORE THAN 2 YEARS OF VOCATIONAL, BUSINESS, OR TRADE SCHOOL

'QA21_G13' [AG22] - Did you ever serve on active duty in the Armed Forces of the United States?

¿Ha estado usted alguna vez en el servicio militar activo en las Fuerzas Armadas de los Estados Unidos?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto 'QA21_G18'

'QA21_G14' [AG23] - When did you serve?

¿Cuándo estuvo en las Fuerzas Armadas?

FROM _____ (DYNAMIC RANGE - STARTING RANGE FOR EACH PERSON SHOULD BE THEIR BIRTH YEAR)

TO _____

PROGRAMMING NOTE 'QA21_G14': IF 'QA21_G13' =1 AND 'QA21_G14' = MISSING, CONTINUE WITH 'QA21_G14'; ELSE SKIP TO 'QA21_G15'

OR

[CHECK ALL THAT APPLY]

- 1 WORLD WAR II (SEPT 1940 TO JULY 1947)
- 2 KOREAN WAR (JUNE 1950 TO JAN 1955)
- 3 VIETNAM WAR (AUG 1964 TO APRIL 1975)
- 4 GULF WAR/ OPERATION DESERT STORM (1990 TO 1991)
- 5 AFGHANISTAN/ OPERATION ENDURING FREEDOM (2001 TO PRESENT)
- 6 IRAQ WAR / OPERATION IRAQI FREEDOM (2003 TO PRESENT)
- 7 REFUSED
- 8 DON'T KNOW

'QA21_G15' [AG24] - Altogether, how long did you serve?

En total, ¿cuánto tiempo estuvo en las Fuerzas Armadas?

_____ YEARS

_____ MONTHS

- 7 REFUSED
- 8 DON'T KNOW

'QA21_G16' [AG31] - Do you have a VA service-connected disability rating?

¿Tiene usted asignado un nivel de discapacidad asociado con el servicio del Departamento de Asuntos de los Veteranos de Estados Unidos?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_G17':IF 'QA21_G16' =1, CONTINUE WITH 'QA21_G17';ELSE SKIP TO 'QA21_G18'

'QA21_G17' [AG32] - What is your service-connected disability rating?

¿El arma de fuego se guarda cargada?

- 01 0 PERCENT
- 02 10 OR 20 PERCENT
- 03 30 OR 40 PERCENT
- 04 50 OR 60 PERCENT
- 05 70 PERCENT OR HIGHER
- 7 REFUSED
- 8 DON'T KNOW

'QA21_G18' [AK1] - Which of the following were you doing last week?

¿Cuál de las siguientes actividades hizo la semana pasada?

IF NEEDED: IF R MENTIONS 'WORKING REMOTELY', CODE AS 'WORKING AT A JOB OR BUSINESS'

IF NEEDED: SI TRABAJÓ DE MANERA REMOTA DESDE SU HOGAR, SELECCIONE TRABAJAR EN UN EMPLEO O EMPRESA.'

- 1 WORKING AT A JOB OR BUSINESS,
- 2 WITH A JOB OR BUSINESS BUT NOT AT WORK,
- 3 LOOKING FOR WORK, OR
- 4 NOT WORKING AT A JOB OR BUSINESS?
- 7 REFUSED
- 8 DON'T KNOW

If = 1, -7, -8, goto 'PN_QA21_G22'

'QA21_G19' [AK2] - What is the main reason you did not work last week?

¿Cuál es el motivo principal por el que no trabajó la semana pasada?

[IF NEEDED, SAY: 'Main reason is the most important reason.']

[IF NEEDED, SAY: 'El motivo principal es el motivo más importante.']

- 1 TAKING CARE OF HOUSE OR FAMILY
- 2 ON PLANNED VACATION
- 3 COULDN'T FIND A JOB
- 4 GOING TO SCHOOL/STUDENT
- 5 RETIRED
- 6 DISABLED
- 7 UNABLE TO WORK TEMPORARILY
- 8 ON LAYOFF OR STRIKE
- 9 ON FAMILY OR MATERNITY LEAVE
- 10 OFF SEASON
- 11 SICK
- 91 OTHER
- 7 REFUSED
- 8 DON'T KNOW

If = 5, 6, goto 'QA21_G21'

'QA21_G20' [AG10] - Do you usually work?

¿Trabaja usted por lo general?

- 1 YES
- 2 NO
- 3 LOOKING FOR WORK
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_G21' :
IF [AAGE = -7 OR -8 OR AAGE < 65] AND ['QA21_G20' = 2 (DOES NOT USUALLY WORK) OR
'QA21_G19' = 5 (RETIRED) OR 6 (DISABLED)] CONTINUE WITH 'QA21_G21' ;
ELSE GO TO PROGRAMMING NOTE 'QA21_G22'

'QA21_G21' [AL22] - Are you receiving Social Security Disability Insurance or SSDI?

¿Recibe usted Ingreso de Seguro Social por Incapacidad (o SSDI)?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 1, 2, -7, -8, goto 'PN_QA21_G26'

PROGRAMMING NOTE 'QA21_G22' :
IF 'QA21_G18' = 1, 2, -7, OR -8 (working, with job, DK, or RF) OR 'QA21_G20' = 1 (usually works),
CONTINUE WITH 'QA21_G22' ;
ELSE GO TO PROGRAMMING NOTE 'QA21_G26'

'QA21_G22' [AK4] - On your main job, are you employed by a private company, the government, or are you self-employed, or are you working without pay in a family business or farm?

En su trabajo principal, ¿trabaja usted para: una compañía privada, el gobierno, o trabaja por cuenta propia, o está trabajando sin recibir pago en un negocio o finca de la familia

[IF NEEDED, SAY: 'Where did you work most hours?']

[IF NEEDED, SAY: 'Dónde trabajó más horas?']

- 1 PRIVATE COMPANY, NON-PROFIT ORGANIZATION OR FOUNDATION
- 2 GOVERNMENT
- 3 SELF-EMPLOYED
- 4 FAMILY BUSINESS OR FARM
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_G23' :IF 'QA21_G22' = 2 (GOVERNMENT EMPLOYEE), DISPLAY 'What kind of agency or department is this?' and '[PROBE FOR AND RECORD BOTH THE LEVEL OF GOVERNMENT (E>G., STATE, LOCAL) AND THE FUNCTION (E.G., BUDGET OFFICE, POLICE, ETC.)];ELSE DISPLAY 'What kind of business or industry is this?' AND '[IF NEEDED, SAY: 'What do they make or do at this business?']'

'QA21_G23' [AK5] - {What kind of agency or department is this? / What kind of business or industry is this?}

{¿Qué clase de agencia o departamento es? / ¿Qué tipo de negocio o industria es?}

{[PROBE FOR AND RECORD BOTH THE LEVEL OF GOVERNMENT (E.G., STATE, LOCAL) AND THE FUNCTION (E.G., BUDGET OFFICE, POLICE, ETC.) / [IF NEEDED, SAY: 'What do they make or do at this business?']][INTERVIEWER: ENTER DESCRIPTION]

_____ (GOVERNMENT AGENCY OR DEPARTMENT/BUSINESS OR INDUSTRY)

- 7 REFUSED
- 8 DON'T KNOW

'QA21_G24' [AK6] - What is the main kind of work you do?

¿Cuál es el tipo de trabajo que usted hace principalmente?

[MAIN JOB = WHERE WORKS MOST HOURS.]

[INTERVIEWER: ENTER DESCRIPTION]

_____ (OCCUPATION)

- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_G25' :

IF 'QA21_G22' = 2 (GOVERNMENT EMPLOYEE), CODE 'QA21_G25' = 8 AND GO TO 'QA21_G26' ;
IF 'QA21_G22' = 3 (SELF-EMPLOYED), CONTINUE WITH 'QA21_G25' AND DISPLAY "Including yourself, about" and "you";
ELSE CONTINUE WITH 'QA21_G25' AND DISPLAY "About" and "your employer";

'QA21_G25' [AK8] - {Including yourself, about/About} how many people are employed by {your employer/you} at all locations?

{Contándose usted mismo(a), ¿más o menos / ¿Más o menos,} cuántos empleados trabajan para usted en todos los lugares donde funciona su empresa?

[IF NEEDED, SAY: 'Your best guess is fine.']

[IF NEEDED, SAY: 'Puede darnos un número aproximado.']

- 1 1 OR 2
- 2 3-9
- 3 10-24
- 4 25-50
- 5 51-100
- 6 101-200
- 7 201-999
- 8 1,000 OR MORE
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_G26' :

IF 'QA21_A23' = 1 (MARRIED) OR 'QA21_D13' = 1 OR 'QA21_D14' = 1, CONTINUE WITH 'QA21_G26' ;
IF 'QA21_A23' = 1, THEN DISPLAY 'spouse';
ELSE IF 'QA21_D13' = 1 OR 'QA21_D14' = 1, THEN DISPLAY 'partner';
ELSE GO TO 'QA21_H1'

'QA21_G26' [AG8] – Which of the following was your {spouse/partner} doing last week?

¿Cuál de las siguientes actividades hizo la semana pasada su {esposo(a)/pareja}?

- 1 WORKING AT A JOB OR BUSINESS,
- 2 WITH A JOB OR BUSINESS BUT NOT AT WORK,
- 3 LOOKING FOR WORK, OR
- 4 NOT WORKING AT A JOB OR BUSINESS?
- 7 REFUSED
- 8 DON'T KNOW

If = 1, 2, goto 'QA21_G28'

'QA21_G27' [AG11] - Does your {spouse/partner} usually work?

¿Trabaja su {esposo(a)/pareja} por lo general?

- 1 YES
- 2 NO
- 3 LOOKING FOR WORK
- 7 REFUSED
- 8 DON'T KNOW

If = 2, 3, -7, -8, goto 'QA21_H1'

'QA21_G28' [AG9] - On your {spouse's/partner's} main job, is {he/she} employed by a private company, the government, or is {he/she} self-employed, or is {he/she} working without pay in a family business or farm?

En el trabajo principal de su {esposo(a)/pareja}, ¿trabaja {él/ella} para: una compañía privada, el gobierno, o trabaja por cuenta propia, o está trabajando sin recibir pago en un negocio o finca de la familia?

- 1 PRIVATE COMPANY, NON-PROFIT ORGANIZATION OR FOUNDATION
- 2 GOVERNMENT
- 3 SELF-EMPLOYED
- 4 FAMILY BUSINESS OR FARM
- 7 REFUSED
- 8 DON'T KNOW

Section H: Health Insurance

PROGRAMMING NOTE 'QA22_H1' :

IF TSE=1, DISPLAY "Is there a place that you usually go to when you are sick or need advice about your health?"

IF TSE=2, DISPLAY "The next topics are about health insurance and health care.

Is there a place that you usually go to when you are sick or need advice about your health?"

'QA22_H1' [AH1] - {{Is there a place that you usually go to when you are sick or need advice about your health?/The next topics are about health insurance and health care.

Is there a place that you usually go to when you are sick or need advice about your health?}}

{{¿Hay algún lugar al que usted va normalmente cuando está enfermo(a) o necesita consejos sobre su salud?/ Los temas siguientes están relacionados con el seguro de salud y el cuidado de la salud? ¿Hay algún lugar al que usted va normalmente cuando está enfermo(a) o necesita consejos sobre su salud?}}

[INTERVIEWER NOTE: SELECT '3' OR '4' ONLY IF VOLUNTEERED. DO NOT PROBE.]

- 1 YES
- 2 NO
- 3 DOCTOR/MY DOCTOR
- 4 KAISER
- 5 MORE THAN ONE PLACE
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto 'QA21_H3'

PROGRAMMING NOTE 'QA21_H2' :IF 'QA21_H1' = 1 (YES) OR 5 (MORE THAN ONE PLACE) DISPLAY 'What kind of place do you go to most often--a medical';ELSE IF 'QA21_H1' = 3 (DOCTOR/MY DOCTOR), DISPLAY 'Is your doctor in a private';ELSE IF 'QA21_H1' = 4 (KAISER) CIRCLE '1' FOR 'QA21_H2' AND GO TO 'QA21_H3'

'QA21_H2' [AH3] - {What kind of place do you go to most often—a medical/Is your doctor in a private} doctor's office, a clinic or hospital clinic, an emergency room, or some other place?

{¿A qué tipo de lugar va usted con más frecuencia —el consultorio de un doctor / ¿Está su doctor en un consultorio particular de médico}, una clínica o clínica de hospital, {en} una sala de emergencias o en algún otro lugar?

- 1 DOCTOR'S OFFICE/KAISER/OTHER HMO
- 2 CLINIC/ HOSPITAL CLINIC
- 3 EMERGENCY ROOM
- 91 SOME OTHER PLACE (SPECIFY: _____)
- 92 NO ONE PLACE
- 7 REFUSED
- 8 DON'T KNOW

'QA21_H3' [AH12] -During the past 12 months, did you visit a hospital emergency room for your own health?

Durante los últimos 12 meses, ¿fue a la sala de emergencias de un hospital debido a su propia salud?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto 'QA21_H5'

'QA21_H4' [AH95] - How many times did you do that?

¿Cuántas veces hizo eso?

[IF NEEDED, SAY: 'During the past 12 months, how many times did you visit a hospital emergency room for your own health?']

[IF NEEDED, SAY: 'Durante los últimos 12 meses, ¿cuántas veces fue a la sala de emergencias de un hospital debido a su propia salud?']

_____ NUMBER OF TIMES [HR: 0 - 200]

- 7 REFUSED
- 8 DON'T KNOW

'QA21_H5' [AI1] - MediCARE is a health insurance program for people 65 years and older or persons with certain disabilities. At this time, are you covered by MediCARE?

MediCARE es un programa de seguro de salud para personas de 65 años o más o personas con ciertas discapacidades. En este momento, ¿tiene usted cobertura de Medicare?

[INTERVIEWER NOTE: INCLUDE MEDICARE MANAGED PLANS AS WELL AS THE ORIGINAL MEDICARE PLAN.]

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 1, goto 'QA21_H8'

If = -7, -8, goto 'QA21_H14'

POST-NOTE 'QA21_H5' :

IF 'QA21_H5' = 1, SET ARMCARE = 1 AND SET ARINSURE = 1

PROGRAMMING NOTE 'QA21_H6' :
IF [AAGE > 64 OR 'QA21_A4' = 6 (65 OR OLDER) OR ENUM.AGE > 64] AND 'QA21_H5' = 2 (NOT COVERED BY MEDICARE), CONTINUE WITH 'QA21_H6' ;
ELSE GO TO PROGRAMMING NOTE 'QA21_H8'

'QA21_H6' [A12] - Is it correct that you are not covered by MediCARE even though you told me earlier that you are 65 or older?

¿Es correcto que usted no no tiene cobertura de MediCARE aun cuando usted me dijo anteriormente que tiene 65 años o es mayor?

- 1 CORRECT, I AM NOT COVERED BY MEDICARE
- 2 NOT CORRECT, I AM COVERED BY MEDICARE
- 7 REFUSED
- 8 DON'T KNOW

If = 1, -7, -8, goto 'PN_QA21_H14'

If = 2, goto 'PN_QA21_H8'

POST-NOTE 'QA21_H6' :

IF 'QA21_H6' =2, SET ARMCARE = 1 AND SET ARINSURE = 1

'QA21_H7' [A13] - What is your age, please?

¿Me podría decir su edad por favor?

_____ YEARS OF AGE [HR: 18-105]

If >=0 , goto 'PN_QA21_H14'

- 7 REFUSED
- 8 DON'T KNOW

If = -7, -8, go to 'PN_QA21_H14'

POST NOTE 'QA21_H7' : AIDATE

SET AIDATE = CURRENT DATE (YYYYMMDD);

SET AAGE = 'QA21_H7' ;

IF AAGE < 18, CODE AS IA AND TERMINATE

PROGRAMMING NOTE 'QA21_H8' :
IF ARMCARE = 1, CONTINUE WITH 'QA21_H8' ;
ELSE GO TO PROGRAMMING NOTE 'QA21_H14'

'QA21_H8' [AH123] - Is this a MediCARE Advantage Plan?

¿Es este un Plan MediCARE Advantage?

[IF NEEDED, SAY: 'MediCARE Advantage plans, sometimes called Part C plans, are offered by private companies approved by MediCARE. MediCARE Advantage plans provide Medicare Part A and Part B coverage.']

[IF NEEDED, SAY: 'Los planes MediCARE Advantage, a veces conocidos como planes Parte C, son ofrecidos por compañías privadas aprobadas por MediCARE. Los planes MediCARE Advantage proporcionan cobertura de Medicare Parte A y Parte B.']

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If=1, goto 'QA21_H10'

POST-NOTE 'QA21_H8' ;
IF 'QA21_H8' = 1, SET ARMADV= 1

'QA21_H9' [A14] - Some people who are eligible for MediCARE also have private insurance that is sometimes called Medigap or Medicare Supplement. Do you have this type of health insurance?

Algunas personas que reúnen los requisitos para MediCARE, también tienen un seguro privado que a veces se llama Medigap o póliza del seguro suplementario de Medicare. ¿Tiene usted este tipo de seguro de salud?

[IF NEEDED, SAY: 'These are policies that cover health care costs not covered by MediCARE alone.']

[IF NEEDED, SAY: 'Estas son pólizas que cubren los costos de los servicios de salud que no están cubiertos por MediCARE solamente.']

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto 'PN_QA21_H14'

POST-NOTE FOR 'QA21_H9' :
IF 'QA21_H9' = 1, SET ARSUPP = 1

PROGRAMMING NOTE 'QA21_H10' :
IF ARMADV ≠ 1 (DOES NOT HAVE MEDICARE ADVANTAGE) AND ARSUPP ≠ 1 (DOES NOT HAVE SUPPLEMENT), THEN SKIP TO PROGRAMMING NOTE 'QA21_H14' ;
DISPLAYS;
IF ARMADV = 1 (MEDICARE ADVANTAGE), DISPLAY 'MediCARE Advantage plan';
IF ARSUPP = 1 (HAS SUPPLEMENT), DISPLAY 'MediCARE Supplement plan';

'QA21_H10' [AH126] - For the {MediCARE Advantage plan/MediCARE Supplement plan}, did you sign up directly, or did you get this insurance through a current employer, a former employer, a union, a family business, AARP, or some other way?

Para el/la {plan MediCARE Advantage/póliza del seguro suplementario de MediCARE}, ¿usted se inscribió directamente, o lo obtuvo a través de su empleador actual, un empleador anterior, un sindicato, un negocio familiar, AARP o de alguna otra forma?

[IF NEEDED, SAY: 'AARP stands for the American Association of Retired Persons.']

[IF NEEDED, SAY: 'AARP son las siglas en inglés de Asociación Americana de Personas Retiradas.']

- 1 DIRECTLY
- 2 YOUR CURRENT EMPLOYER
- 3 YOUR FORMER EMPLOYER
- 4 UNION
- 5 FAMILY BUSINESS
- 6 AARP
- 7 SPOUSE'S / PARTNER'S EMPLOYER
- 8 SPOUSE'S / PARTNER'S UNION
- 9 PROFESSIONAL/FRATERNAL ORGANIZATION
- 91 OTHER
- 7 REFUSED
- 8 DON'T KNOW

'QA21_H11' [AH53] - Do you pay any or all of the premium or cost for this health plan? Do not include the cost of any co-pays or deductibles you or your family may have had to pay.

¿Paga usted una parte o toda la prima o el costo de este plan de salud? No incluya el costo de ningún pago compartido o de deducibles que usted o su familia tengan que pagar.

[IF NEEDED, SAY: 'Copays are the partial payments you make for your health care each time you see a doctor or use the health care system, while someone else pays for your main health care coverage.']

[IF NEEDED, SAY: 'Los copagos son pagos parciales que usted hace para su atención médica cada vez que va a un médico o usa el sistema de atención médica, mientras que un tercero paga su cobertura de atención médica principal.']

[IF NEEDED, SAY: 'A deductible is the amount you pay for medical care before your health plan starts paying.']

[IF NEEDED, SAY: 'Un deducible es el monto que usted paga por atención médica antes de que su plan de salud comience a pagar.']

[IF NEEDED, SAY: 'Premium is the monthly charge for the cost of your health insurance plan.']

[IF NEEDED, SAY: 'La prima es el pago mensual por el costo de su plan de seguro de salud.']

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_H12' [AH54] - Does anyone else, such as an employer, a union, or professional organization pay all or some portion of the premium or cost for this health plan?

¿Hay otras personas, tales como un empleador, un sindicato o una organización profesional que paguen toda, o una parte de la prima o del costo de este plan de salud?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto 'PN_QA21_H14'

'QA21_H13' [AH55] - Who is that?

¿Quién lo paga?

[IF NEEDED, SAY: 'Who besides yourself pays any portion of that cost for that plan, such as your employer, a union, or professional organization?']

[IF NEEDED, SAY: '*¿Quién, además de usted, paga por una parte del costo de este plan, como por ejemplo, su empleador, un sindicato o una organización profesional?*']

[CODE ALL THAT APPLY]

[PROBE: 'Any others?']

[PROBE: '*¿Alguien más?*']

- 1 YOUR CURRENT EMPLOYER
- 2 YOUR FORMER EMPLOYER
- 3 UNION
- 4 SPOUSE'S / PARTNER'S EMPLOYER
- 5 SPOUSE'S/PARTNER'S FORMER EMPLOYER
- 6 PROFESSIONAL/FRATERNAL ORGANIZATION
- 7 MEDICAID/MEDI-CAL ASSISTANCE
- 91 OTHER
- 7 REFUSED
- 8 DON'T KNOW

POST-NOTE FOR 'QA21_H13' :

IF 'QA21_H13' = 7, SET ARMCAL = 1;

PROGRAMMING NOTE 'QA21_H14' :

IF ARMCAL = 1, DISPLAY 'Is it correct that you are';

ELSE DISPLAY 'Are you'

'QA21_H14' [A16] - {Is it correct that you are/Are you} covered by Medi-CAL?

{¿Es cierto que usted tiene / ¿Tiene usted} cobertura de Medi-CAL?

[IF NEEDED, SAY: " Medi-Cal is a health insurance program for low-income individuals in California."]

[IF NEEDED, SAY: '*Medi-Cal es un programa de seguro de salud para personas de bajos ingresos en California*']

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

POST-NOTE FOR 'QA21_H14' :

IF 'QA21_H14' = 1, SET ARMCAL = 1 AND SET ARINSURE = 1;

IF ARMCAL = 1 AND 'QA21_H14' = 2, SET ARMCAL = 0

PROGRAMMING NOTE 'QA21_H15' :

IF ARSUPP = 1, DISPLAY 'Besides the Medicare supplement plan you told me about' AND 'any other';

ELSE IF ARMADV = 1, DISPLAY 'Besides the Medicare Advantage plan you told me about' AND 'any other';

ELSE DISPLAY 'a'

'QA21_H15' [A18] - {Besides the Medicare supplement plan you told me about/Besides the Medicare Advantage plan you told me about}, Are you covered by {any other/a} health insurance plan or HMO through a current or former employer or union?

{Además de la póliza del seguro suplementario de Medicare que me mencionó/Además del plan Medicare Advantage que me mencionó,} ¿tiene usted cobertura de {algún otro/un} plan de seguro de salud o HMO a través de un empleador o sindicato actual o anterior?

[IF NEEDED, SAY: '...either through your own or someone else's employment?']

[IF NEEDED, SAY: '... ya sea a través de su propio empleo de alguna otra persona?']

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

POST-NOTE FOR 'QA21_H15' :

IF 'QA21_H15' = 1, SET AREMPOTH = 1 AND SET ARINSURE = 1

PROGRAMMING NOTE 'QA21_H16' :

IF ARINSURE ≠ 1 (NO COVERAGE FROM MEDICARE, MEDI-CAL, AND EMPLOYER), CONTINUE WITH 'QA21_H16' ;

ELSE GO TO PROGRAMMING NOTE 'QA21_H18'

'QA21_H16' [A111] - Are you covered by a health insurance plan that you purchased directly from an insurance company or HMO, or through Covered California?

¿Tiene usted cobertura de un plan de seguro de salud que usted compró directamente a una compañía de seguros o HMO o mediante Covered California?

[IF NEEDED, SAY: 'Don't include a plan that pays only for certain illnesses such as cancer or stroke, or only gives you 'extra cash' if you are in a hospital.']

[IF NEEDED, SAY: 'No incluya planes que pagan solamente por ciertas enfermedades, como cáncer o derrame cerebral, o que solamente le dan 'dinero extra' si está hospitalizado.']

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto 'PN_QA21_H18'

POST-NOTE FOR 'QA21_H16' :

IF 'QA21_H16' = 1, SET ARDIRECT = 1 AND SET ARINSURE = 1

PROGRAMMING NOTE 'QA21_H17' :
IF ARDIRECT = 1, THEN CONTINUE WITH 'QA21_H17' ;
ELSE GO TO PROGRAMMING NOTE 'QA21_H18'

'QA21_H17' [AH104] - How did you purchase this health insurance – directly from an insurance company or HMO, or through Covered California?

¿Cómo compró este seguro de salud -- directamente a una compañía de seguro de salud o HMO o mediante Covered California?

- 1 INSURANCE COMPANY OR HMO
- 2 COVERED CALIFORNIA
- 91 OTHER (SPECIFY: _____)
- 7 REFUSED
- 8 DON'T KNOW

POST-NOTE FOR 'QA21_H17' :
IF 'QA21_H17' = 2, THEN SET ARHBEX = 1

PROGRAMMING NOTE FOR 'QA21_H18' :
IF 'QA21_H15' = 1 (EMPLOYER-BASED COVERAGE) OR 'QA21_H16' = 1 (PURCHASED OWN COVERAGE), CONTINUE WITH 'QA21_H18' ;
ELSE GO TO PROGRAMMING NOTE 'QA21_H20'

'QA21_H18' [AI9] - Was this plan obtained in your own name or in the name of someone else?

¿Se obtuvo este plan a nombre suyo o a nombre de otra persona

[IF NEEDED, SAY: 'Even someone who does not live in this household.']
 [IF NEEDED, SAY: 'Aún de alguien que no viva en este hogar.']

- 1 IN YOUR OWN NAME
- 2 IN SOMEONE ELSE'S NAME
- 7 REFUSED
- 8 DON'T KNOW

If = 1, -7, -8, goto 'PN_QA21_H20'

POST-NOTE FOR 'QA21_H18' :
IF 'QA21_H15' = 1 AND 'QA21_H18' = 1 SET AREMPOWN = 1 AND SET ARINSURE = 1 AND SET AREMPOTH = 0;
IF 'QA21_H15' = 1 AND 'QA21_H18' = 2, -7, OR -8 SET AREMPOTH = 1 AND SET ARINSURE = 1;
IF 'QA21_H16' = 1 AND 'QA21_H18' = 1 SET ARDIROWN = 1 AND ARINSURE = 1;
IF 'QA21_H16' = 1 AND 'QA21_H18' = 2, -7, OR -8 SET ARDIROTH = 1 AND ARINSURE = 1

PROGRAMMING NOTE 'QA21_H19' :
IF 'QA21_A23' = 1 (MARRIED) OR 'QA21_D13' = 1 OR 'QA21_D14' = 1 OR IF 'QA21_G9' = 1 (LIVING WITH PARENTS) OR IF [AAGE < 26 OR 'QA21_A4' = 1 (BETWEEN 18 AND 29)], CONTINUE WITH 'QA21_H19' ;
ELSE GO TO PROGRAMMING NOTE 'QA21_H20' ;
IF 'QA21_A23' = 1, THEN DISPLAY 'spouse's name';
IF 'QA21_A23' ≠ 1 AND ('QA21_D13' = 1 OR 'QA21_D14' = 1), THEN DISPLAY 'partner's name;
IF 'QA21_G9' = 1 OR AAGE < 26, THEN DISPLAY 'parent's name';

'QA21_H19' [A19A] - Is the plan in your {spouse's name,} {partner's name,} {parent's name,} or someone else's name?

¿Está el plan a {nombre de su esposo(a),} {nombre de su pareja,} {nombre de uno de sus padres} o a nombre de otra persona?

- 1 IN SPOUSE'S/PARTNER'S NAME
- 2 IN PARENT'S NAME
- 3 IN SOMEONE ELSE'S NAME
- 7 REFUSED
- 8 DON'T KNOW

POST-NOTE FOR 'QA21_H19' :

IF 'QA21_H15' = 1 AND 'QA21_H19' = 1 SET AREMPSP = 1 AND AREMPOTH = 0 AND ARSAMESP=1;

IF 'QA21_H17' = 2 AND 'QA21_H19' = 1 SET AREMPSP = 1 AND AREMPOTH = 0 AND ARSAMESP=1 AND SPHBEX = 1;

IF 'QA21_H15' = 1 AND 'QA21_H19' = 2 SET AREMPPAR=1 AND AREMPOTH = 0;

IF 'QA21_H16' = 1 AND 'QA21_H19' = 1 SET ARDIRSP = 1 AND ARDIROTH = 0 AND ARSAMESP=1;

IF 'QA21_H16' = 1 AND 'QA21_H19' = 2 SET ARDIRPAR = 1 AND ARDIROTH = 0

PROGRAMMING NOTE 'QA21_H20' :
IF 'QA21_H15' = 1 (EMPLOYER-BASED COVERAGE) AND 'QA21_G25' =< 5 (FIRM SIZE <=100),
CONTINUE WITH 'QA21_H20' AND DISPLAY;
IF AREMPOWN = 1 THEN DISPLAY {you};
IF AREMPSP = 1 OR AREMPPAR =1 OR AREMPOTH = 1 THEN DISPLAY {he or she};
ELSE GO TO PROGRAMMING NOTE 'QA21_H21' ;

'QA21_H20' [AH105] - How did {you/he or she} sign up for this health insurance – through an employer, through a union, or through Covered California's SHOP program?

¿Cómo se inscribió {usted/él o ella} en este seguro de salud – mediante un empleador, mediante un sindicato o mediante el programa SHOP de Covered California?

[IF NEEDED, SAY: 'SHOP is the Small Business Health Options Program administered by Covered California']

[IF NEEDED, SAY: 'SHOP son las siglas en inglés del Programa de Opciones de Salud para los Pequeños Negocios y es administrado por Covered California.']

- 1 EMPLOYER
- 2 UNION
- 3 SHOP / COVERED CALIFORNIA
- 92 OTHER (SPECIFY: _____)
- 7 REFUSED
- 8 DON'T KNOW

POST-NOTE FOR 'QA21_H20' :

IF 'QA21_H20' = 3, THEN SET ARHBEX = 1

PROGRAMMING NOTE 'QA21_H21'
IF ARHBEX = 1, THEN CONTINUE WITH 'QA21_H21' ;
ELSE GO TO PROGRAMMING NOTE 'QA21_H23' ;

'QA21_H21' [AH106] - Was this a bronze, silver, gold or platinum plan?

¿Era un plan bronce, plata, oro o platino (bronze, silver, gold o platinum)?

- 1 BRONZE
- 2 SILVER
- 3 GOLD
- 4 PLATINUM
- 5 MEDI-CAL / MEDICAID
- 6 MINIMUM COVERAGE PLAN / CATASTROPHIC
- 92 OTHER (SPECIFY: _____)
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_H22' :
IF 'QA21_H20' = 3, THEN GO TO 'QA21_H23' ;
ELSE CONTINUE WITH 'QA21_H22' ;

'QA21_H22' [AH107] - Was there a subsidy or discount on the premium for this plan?

¿Había un subsidio o descuento en la prima de este plan?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_H23' :
IF 'QA21_H15' = 1 (EMPLOYER-BASED COVERAGE) OR 'QA21_H16' = 1 (PURCHASED OWN COVERAGE), CONTINUE WITH 'QA21_H23' ;
ELSE GO TO PROGRAMMING NOTE 'QA21_H28'

'QA21_H23' [AH57] - Do you pay any or all of the premium or cost for this health plan? Do not include the cost of any co-pays or deductibles you or your family may have had to pay.

¿Paga usted una parte o el total de la prima o del costo de este plan de salud? No incluya el costo de ningún copago o deducible que haya tenido que pagar usted o su familia.

[IF NEEDED, SAY: 'Copays are the partial payments you make for your health care each time you see a doctor or use the health care system, while someone else pays for your main health care coverage.']

[IF NEEDED, SAY: 'Los copagos son pagos parciales que usted hace para su atención médica cada vez que va a un médico o usa el sistema de atención médica, mientras que un tercero paga su cobertura de atención médica principal.']

[IF NEEDED, SAY: 'A deductible is the amount you pay for medical care before your health plan starts paying.']

[IF NEEDED, SAY: 'Un deducible es el monto que usted paga por atención médica antes de que su plan de salud comience a pagar.']

[IF NEEDED, SAY: 'Premium is the monthly charge for the cost of your health insurance plan.']

[IF NEEDED, SAY: 'La prima es el pago mensual por el costo de su plan de seguro de salud.']

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, goto 'PN_QA21_H26'

'QA21_H24' [AH128] - How much do you {does your family} pay each month for your {your family} health insurance plan? Your best guess is fine.

¿Cuánto paga usted {su familia} al mes por su plan de seguro salud {el plan de seguro salud de su familia}? Un cálculo aproximado es suficiente.

[IF NEEDED, SAY: Do not include the cost of any co-pays or deductibles you or your family may have had to pay]

[IF NEEDED, SAY: 'No incluya el costo de ningún pago compartido o de deducibles que usted o su familia tengan que pagar.']

[IF NEEDED, SAY: 'Copays are the partial payments you make for your health care each time you see a doctor or use the health care system, while someone else pays for your main health care coverage.']

[IF NEEDED, SAY: 'Los copagos son pagos parciales que usted hace para su atención médica cada vez que va a un médico o usa el sistema de atención médica, mientras que un tercero paga su cobertura de atención médica principal.']

[IF NEEDED, SAY: 'A deductible is the amount you pay for medical care before your health plan starts paying.']

[IF NEEDED, SAY: Un deducible es el monto que usted paga por atención médica antes de que su plan de salud comience a pagar.']

[IF NEEDED, SAY: 'Premium is the monthly charge for the cost of your health insurance plan.']

[IF NEEDED, SAY: 'La prima es el pago mensual por el costo de su plan de seguro de salud.']

_____ (AMOUNT) [HR: 0 -9997, SR: 0 - 2000]

- 7 REFUSED
- 8 DON'T KNOW

'QA21_H25' [AH58] - Does anyone else, such as an employer, a union, or professional organization pay all or some portion of the premium or cost for this health plan?

¿Hay otras personas, tales como un empleador, un sindicato o una organización profesional que pague toda o una parte de la prima o costo de este plan de salud?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto 'PN_QA21_H28'

**PROGRAMMING NOTE 'QA21_H26' : IF 'QA21_H23' = 2, THEN DISPLAY 'Who besides yourself pays any portion of the cost for this plan, such as your employer, a union, or professional organization';
ELSE DISPLAY 'Who is that'**

'QA21_H26' [AH56] - {Who besides yourself pays any portion of the cost for this plan, such as your employer, a union, or professional organization/Who is that}?

¿Quién, además de usted, paga por una parte del costo de este plan, como por ejemplo, su empleador, un sindicato o una organización profesional?

[IF NEEDED, SAY: 'Who besides yourself pays any portion of that cost for that plan, such as your employer, a union, or professional organization?]

[IF NEEDED, SAY: '¿Quién, además de usted, paga por una parte del costo de este plan, como por ejemplo, su empleador, un sindicato o una organización profesional?']

[CODE ALL THAT APPLY]

[PROBE: 'Any others?']

[PROBE: '¿Alguien más?']

- 1 YOUR CURRENT EMPLOYER
- 2 YOUR FORMER EMPLOYER
- 3 UNION
- 4 SPOUSE'S / PARTNER'S EMPLOYER
- 5 SPOUSE'S/PARTNER'S FORMER EMPLOYER
- 6 PROFESSIONAL/FRATERNAL ORGANIZATION
- 7 MEDICAID/MEDI-CAL ASSISTANCE
- 91 OTHER
- 7 REFUSED
- 8 DON'T KNOW

POST-NOTE 'QA21_H26' :

IF 'QA21_H26' = 1, 2, OR 3, THEN SET AREMPOWN = 1;

IF 'QA21_H26' = 4 OR 5, THEN SET AREMPSP = 1;

IF 'QA21_H26' = 6, THEN SET AROTHER = 1;

IF 'QA21_H26' = 9, SET ARMCARE = 1 AND SET ARDIRECT = 0;

IF 'QA21_H26' = 7, SET ARMCAL = 1 AND SET ARDIRECT = 0;

IF 'QA21_H26' = 11, SET ARHBEX = 1;

IF 'QA21_H26' = 91, THEN SET AROTHER = 1

'QA21_H27' [AH129] - How much do they contribute to your plan each month?

¿Cuánto aportan a su plan cada mes?

_____ (AMOUNT) [HR: 0 -9997, SR: 0 - 2000]

- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_H28' :IF ['QA21_G18' = 1 OR 2 (R WORKED LAST WEEK) OR 'QA21_G20' = 1 (R USUALLY WORKS)] AND 'QA21_G22' ≠ 3 (NOT SELF-EMPLOYED) AND AREMPOW ≠ 1 (NO EMPLOYER-BASED COVERAGE), CONTINUE WITH 'QA21_H28' ; ELSE GO TO PROGRAMMING NOTE 'QA21_H32'

'QA21_H28' [A113] - Does your employer offer health insurance to any of its employees?

¿Ofrece su empleador seguro de salud a alguno de sus empleados?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto 'PN_QA21_H32'

'QA21_H29' [A114] - Are you eligible to be in this plan?

¿Reúne usted los requisitos para este plan?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, goto 'QA21_H31'

If = -7, -8 goto 'PN_QA21_H32'

'QA21_H30' [A115] - What is the one main reason why you aren't in this plan?

Cuál es la razón principal por la cual usted no está inscrito(a) en este plan?

- 01 COVERED BY ANOTHER PLAN
- 02 PLAN TOO EXPENSIVE
- 03 DIDN'T LIKE PLAN OFFERED
- 04 DON'T NEED OR BELIEVE IN HEALTH INSURANCE
- 91 OTHER (SPECIFY: _____)
- 7 REFUSED
- 8 DON'T KNOW

If = 1, 2, 3, 4, 91, -7, -8, goto 'PN_QA21_H32'

'QA21_H31' [A115A] - What is the one main reason why you are not eligible for this plan?

Cuál es la razón principal por la cual usted no puede estar inscrito(a) en este plan?

- 01 HAVEN'T YET WORKED FOR THIS EMPLOYER LONG ENOUGH TO BE COVERED
- 02 CONTRACT OR TEMPORARY EMPLOYEES NOT ALLOWED IN PLAN
- 03 DON'T WORK ENOUGH HOURS PER WEEK OR WEEKS PER YEAR
- 91 OTHER (SPECIFY: _____)
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_H32' :
IF ARINSURE ≠ 1 (NO COVERAGE FROM MEDICARE, MEDI-CAL, EMPLOYER, OR PRIVATE PLAN), CONTINUE WITH 'QA21_H32' ;
ELSE GO TO PN 'QA21_H33'

'QA21_H32' [A116] - Are you covered by CHAMPUS/CHAMP-VA, TRICARE, VA or some other military health care?

¿Tiene usted cobertura de CHAMPUS/CHAMP-VA, TRICARE, VA o algún otro plan de salud para militares?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

POST-NOTE 'QA21_H32' :
IF 'QA21_H32' = 1, SET ARMILIT = 1 AND SET ARINSURE = 1

PROGRAMMING NOTE 'QA21_H33' :
IF ARINSURE ≠ 1 (NO COVERAGE FROM MEDICARE, MEDI-CAL, EMPLOYER, PRIVATE PLAN, MILITARY PLAN) CONTINUE WITH 'QA21_H33' ;
ELSE GO TO PROGRAMMING NOTE 'QA21_H34'

'QA21_H33' [A117] - Are you covered by some other government health program, such as AIM, 'Mister MIP,' the Family PACT program, Healthy Kids, or something else?

¿Tiene usted cobertura de algún otro programa de salud del gobierno, como AIM, 'Mister MIP', el programa Family PACT, Healthy Kids u otro programa?

[IF NEEDED, SAY: 'AIM means Access for Infants and Mothers; Mister MIP or MRMIP means Major Risk Medical Insurance Program; Family PACT is the state program that pays for contraception/reproductive health services for uninsured lower income women and men.']
[IF NEEDED, SAY: 'AIM significa Acceso para Niños y Madres; 'Mister MIP' significa Programa de Seguro Médico de Alto Riesgo; Family PACT es el programa estatal que paga por servicios de salud relacionados con la reproducción y anticonceptivos para mujeres y hombres de bajos ingresos que no tienen seguro.']

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

POST-NOTE 'QA21_H33' :
IF 'QA21_H33' = 1, SET AROTHGOV = 1 AND SET ARINSURE = 1

PROGRAMMING NOTE 'QA21_H34' :
IF ARINSURE ≠ 1 (NO COVERAGE FROM MEDICARE, MEDI-CAL, EMPLOYER, PRIVATE PLAN, MILITARY PLAN, AND OTHER GOVERNMENT PLAN), CONTINUE WITH 'QA21_H34' ;
ELSE GO TO PROGRAMMING NOTE 'QA21_H38'

'QA21_H34' [A118] - Do you have any health insurance coverage through a plan that I missed?

¿Tiene usted alguna cobertura de seguro de salud a través de un plan que yo no haya mencionado?

- 1 YES
- 1 SÍ
- 2 NO
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto 'PN_QA21_H38'

'QA21_H35' [A119] - What type of health insurance do you have?

¿Qué tipo de seguro de salud tiene?

[CODE ALL THAT APPLY.]

[PROBE: 'Any others?']

[PROBE: '¿Alguien más?']

[IF R GIVES NAME OF PRIVATE PLAN, THEN PROBE: 'Do you get this plan through a current or former employer/union, through a school, professional association, trade group, or other organization, or directly from the health plan?']

[IF R GIVES NAME OF PRIVATE PLAN, THEN PROBE: '¿Consiguió usted este plan a través de un empleador/sindicato actual o anterior, de una escuela, una asociación profesional, un grupo comercial u otra organización, o directamente del plan de salud?']

- 1 THROUGH CURRENT OR FORMER EMPLOYER/UNION
- 2 THROUGH SCHOOL, PROFESSIONAL ASSOCIATION, TRADE GROUP, OR OTHER ORGANIZATION
- 3 PURCHASED DIRECTLY FROM HEALTH PLAN
- 4 MEDICARE
- 5 MEDI-CAL
- 7 CHAMPUS/CHAMP-VA, TRICARE, VA OR SOME OTHER MILITARY HEALTH CARE
- 8 INDIAN HEALTH SERVICE, TRIBAL HEALTH PROGRAM OR URBAN INDIAN CLINIC
- 10 COVERED CALIFORNIA
- 11 SHOP THROUGH COVERED CALIFORNIA
- 91 OTHER GOVERNMENT HEALTH PLAN
- 92 OTHER NON-GOVERNMENT HEALTH PLAN
- 7 REFUSED
- 8 DON'T KNOW

POST-NOTE 'QA21_H35' :

IF 'QA21_H35' = 1, SET AREMPOTH = 1 AND SET ARINSURE = 1;

IF 'QA21_H35' = 2, SET AREMPOTH = 1 AND SET ARINSURE = 1;

IF 'QA21_H35' = 3, SET ARDIRECT = 1 AND SET ARINSURE = 1;

IF 'QA21_H35' = 4, SET ARMCARE = 1 AND SET ARINSURE = 1;

IF 'QA21_H35' = 5, SET ARMCAL = 1 AND SET ARINSURE = 1;

IF 'QA21_H35' = 7, SET ARMILIT = 1 AND SET ARINSURE = 1;

IF 'QA21_H35' = 8, SET ARIHS = 1;

IF 'QA21_H35' = 10, SET ARHBEX = 1 AND ARDIRECT = 1 AND ARINSURE = 1 AND ARDIROTH = 1;

IF 'QA21_H35' = 11, SET ARHBEX = 1 AND SET ARINSURE = 1 AND AREMPOTH = 1;

IF 'QA21_H35' = 91, SET AROTHGOV = 1 AND SET ARINSURE = 1;

IF 'QA21_H35' = 92, -7, OR -8, SET AROTHER = 1 AND SET ARINSURE = 1

PROGRAMMING NOTE 'QA21_H36' :
IF 'QA21_H35' = 1, 2, OR 3 CONTINUE WITH 'QA21_H36' ;
ELSE GO TO PROGRAMMING NOTE 'QA21_H38'

'QA21_H36' [AH59] - Was this plan obtained in your own name or in the name of someone else?

¿Obtuvo este plan a su nombre o a nombre de otra persona?

[PROBE: 'Even someone who does not live in this household?']

[PROBE: 'Incluso alguien que no viva en esta casa.']

- 1 IN YOUR OWN NAME
- 1 A SU PROPIO NOMBRE
- 2 IN SOMEONE ELSE'S NAME
- 2 A NOMBRE DE ALGUIEN MÁS
- 7 REFUSED
- 8 DON'T KNOW

If = 1, -7, -8, goto 'PN_QA21_H38'

POST-NOTE 'QA21_H36' :

IF ('QA21_H35' = 1 OR 2 OR KAI19 = 11) AND 'QA21_H36' = 1 THEN SET AREMPOWN = 1 AND SET AREMPOTH = 0 AND SET ARINSURE = 1;

IF ('QA21_H35' = 3 OR 10) AND 'QA21_H36' = 1 THEN SET ARDIROWN = 1 AND SET ARDIROTH = 0 AND SET ARINSURE = 1;

IF ('QA21_H35' = 1 OR 2) AND ('QA21_H36' = 2, -7, OR -8), SET AREMPOTH = 1 AND AREMPOWN = 0 AND SET ARINSURE = 1;

IF 'QA21_H35' = 1 AND ('QA21_H36' = 2, -7, OR -8) SET ARDIROTH = 1 AND ARDIROWN = 0 AND SET ARINSURE = 1

PROGRAMMING NOTE 'QA21_H37' :
IF 'QA21_A23' = 1 (MARRIED) OR 'QA21_D13' = 1 OR 'QA21_D14' = 1 OR IF 'QA21_G9' = 1 (LIVING WITH PARENTS) OR AAGE < 26, CONTINUE WITH 'QA21_H37' ;
ELSE GO TO PROGRAMMING NOTE 'QA21_H38' ;
IF 'QA21_A23' = 1 THEN DISPLAY 'spouse's name';
IF 'QA21_A23' ≠ 1 AND ('QA21_D13' = 1 OR 'QA21_D14' = 1), THEN DISPLAY 'partner's name';
IF 'QA21_G9' = 1 OR AAGE < 26, THEN DISPLAY 'parent's name';

'QA21_H37' [AH60] - Is the plan in your {spouse's name,} {partner's name,} {parent's name,} or someone else's name?

¿Está el plan a nombre de {spouse's name,} {partner's name,} {parent's name,} o a nombre de otra persona?

- 1 IN SPOUSE'S / PARTNER'S NAME
- 1 A NOMBRE DE SU CÓNYUGE/PAREJA
- 2 IN PARENT'S NAME
- 2 A NOMBRE DE ALGUNO DE SUS PADRES
- 3 IN SOMEONE ELSE'S NAME
- 3 A NOMBRE DE ALGUIEN MÁS
- 7 REFUSED
- 8 DON'T KNOW

POST-NOTE 'QA21_H37' :

IF 'QA21_H37' = 1, SET AREMPSP = 1 AND SET AREMPOTH = 0 AND ARSAMESP=1;

IF 'QA21_H37' = 2, SET AREMPPAR = 1 AND SET AREMPOTH = 0

PROGRAMMING NOTE 'QA21_H38' :
IF ARIHS ≠ 1 AND 'QA21_A11' = 4 (AMERICAN INDIAN OR ALASKA NATIVE), CONTINUE WITH 'QA21_H38' ;
ELSE GO TO PROGRAMMING NOTE AI37intro

'QA21_H38' [AI20] - Are you covered by the Indian Health Service, Tribal Health Program, or Urban Indian Clinic?

¿Tiene usted cobertura del Servicio de Salud Indígena, el Programa de Salud Tribal o Clínica Indígena Urbana?

- 1 YES
- 1 SÍ
- 2 NO
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

POST-NOTE 'QA21_H38' :

IF 'QA21_H38' = 1, SET ARIHS = 1

PROGRAMMING NOTE AI37intro :
IF ['QA22_A23' = 1 (MARRIED) OR 'QA22_D13' = 1 OR 'QA22_D14' = 1] AND 'QA22_A24' = 1
(SPOUSE/PARTNER LIVING IN HH) CONTINUE WITH AI37intro ;
IF 'QA22_A23' = 1, THEN DISPLAY 'spouse';
ELSE IF 'QA22_D13' = 1 OR 'QA22_D14' = 1, THEN DISPLAY 'partner';
ELSE GO TO PROGRAMMING NOTE 'QA22_H61'
IF TRANSITION STATEMENT EXPERIMENT SAMPLETSE=1, DO NOT DISPLAY 'QA22_H38'
ELSE IF TSE=2, DISPLAY 'QA22_H38'

'QA21_H39' [AI37intro] - These next questions are about the type of health insurance your {spouse/partner} may have.

Las siguientes preguntas son sobre el tipo de seguro de salud que pueda tener su {espos(a)/pareja}.

PROGRAMMING NOTE 'QA22_H39' :
IF SPOUSE 65 OR OLDER THEN
IF ARMCARE ≠ 1, CONTINUE WITH 'QA22_H39' WITHOUT DISPLAY
ELSE IF ARMCARE = 1, CONTINUE WITH 'QA22_H39' AND DISPLAY "You said that you are
covered by Medicare." AND "also";
ELSE GO TO PROGRAMMING NOTE 'QA22_H42'
IF TSE=1, DISPLAY " You said that you are covered by Medicare.} Is (SPOUSE/PARTNER) {also}
covered by Medicare?"
IF TSE=2, DISPLAY "{You said that you are covered by Medicare.} Is (SPOUSE/PARTNER) {also}
covered by Medicare?"

'QA22_H39' [AI37] - {{ {You said that you are covered by Medicare.} Is (**SPOUSE/PARTNER**) {also} covered by Medicare?/ {You said that you are covered by Medicare.} Is (SPOUSE/PARTNER) {also} covered by Medicare?}}

{{ {Usted dijo que tiene cobertura de Medicare.} ¿Tiene su {espos(a)/pareja} cobertura de Medicare {también}?/{Usted dijo que tiene cobertura de Medicare.} ¿Tiene su {espos(a)/pareja} cobertura de Medicare {también}?}}

- 1 YES
- 1 Sí
- 2 NO
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

POST-NOTE 'QA21_H40' :
IF 'QA21_H40' = 1, SET SPM CARE = 1 AND SET SPINSURE = 1

PROGRAMMING NOTE 'QA21_H41' :
IF SPMPCARE ≠ 1, SKIP TO PROGRAMMING NOTE 'QA21_H42' ;
DISPLAYS;
IF SPMPCARE = 1 AND ARMADV ≠ 1, CONTINUE WITH 'QA21_H41' WITHOUT DISPLAY;
ELSE IF SPMPCARE = 1 AND ARMADV = 1, CONTINUE WITH 'QA21_H41' AND DISPLAY 'You said that you have a Medicare Advantage plan.' AND 'also';
IF 'QA21_A23' = 1 (MARRIED) THEN DISPLAY 'spouse's';
ELSE IF 'QA21_D13' = 1 OR 'QA21_D14' = 1 THEN DISPLAY 'partner's';

'QA21_H41' [AH127] - {You said that you have a Medicare Advantage plan.} Does your {spouse/partner}{also} have a Medicare Advantage plan?

{Usted dijo que tiene un plan Medicare Advantage.} ¿Tiene su {espos(a)/pareja} {también} un plan de Medicare Advantage?

[IF NEEDED, SAY: 'MediCARE Advantage plans, sometimes called Part C plans, are offered by private companies approved by MediCARE. MediCARE Advantage plans provide Medicare Part A and Part B coverage.']

[IF NEEDED, SAY: 'Los planes MediCARE Advantage, a veces conocidos como planes Parte C, son ofrecidos por compañías privadas aprobadas por MediCARE. Los planes MediCARE Advantage proporcionan cobertura de Medicare Parte A y Parte B.']

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

POST-NOTE 'QA21_H41' :

IF 'QA21_H41' = 1, THEN SET SPMADV = 1 AND SET SPINSURE = 1

PROGRAMMING NOTE 'QA21_H42' :
IF SPMADV = 1, THEN SKIP TO PROGRAMMING NOTE 'QA21_H43' ;
ELSE IF SPMPCARE = 1 AND ARSUPP ≠ 1, CONTINUE WITH 'QA21_H42' WITHOUT DISPLAY;
ELSE IF SPMPCARE = 1 AND ARSUPP = 1, CONTINUE WITH 'QA21_H42' AND DISPLAY 'You said that you have a Medicare Supplement plan.' AND 'also';
IF 'QA21_A23' = 1 (MARRIED), THEN DISPLAY 'spouse';
ELSE IF 'QA21_D13' = 1 OR 'QA21_D14' = 1 THEN DISPLAY 'partner';
ELSE GO TO PROGRAMMING NOTE 'QA21_H43'

'QA21_H42' [AI37A] - {You said that you have a Medicare Supplement plan.} Does your {partner/spouse} {also} have a Medicare supplement plan?

{Usted dijo que tiene una póliza del seguro suplementario de Medicare.} ¿Tiene su {espos(a)/pareja} {también} una póliza del seguro suplementario de Medicare?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

POST-NOTE 'QA21_H42' :

IF 'QA21_H42' = 1, THEN SET SPSUPP = 1 AND SET SPINSURE = 1

PROGRAMMING NOTE 'QA21_H43' :
IF ARMCAL = 1, CONTINUE WITH 'QA21_H43' ;
DISPLAY 'also' IF ARMCARE =1;
ELSE GO TO PROGRAMMING NOTE 'QA21_H44'

'QA21_H43' [AI38] - You said you {also} have Medi-Cal. Is (SPOUSE/PARTNER) also covered by Medi-Cal?

Usted dijo que {también} tiene Medi-Cal. ¿Está su {espos(a)/pareja} cubierto(a) también por Medi-Cal?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

POST-NOTE 'QA21_H43' :
IF 'QA21_H43' = 1, SET SPMCAL = 1 AND SET SPINSURE = 1

PROGRAMMING NOTE 'QA21_H44' :
IF AREMPOWN = 1 AND ARHBEX ≠ 1, CONTINUE WITH 'QA21_H44' ;
IF ARMCARE = 1 OR ARMCAL = 1, THEN DISPLAY 'also';
ELSE GO TO PROGRAMMING NOTE 'QA21_H45'

'QA21_H44' [AI40] - You said you have insurance from your current or former employer or union. Is (SPOUSE/PARTNER) {also} covered by the insurance from your employer or union?

Usted dijo que tiene seguro a través de su empleador o sindicato actual o antiguo. ¿Tiene su {espos(a)/pareja} cobertura {también} del seguro que usted tiene a través de su empleador o sindicato?

- 1 YES
- 2 NO
- 3 OTHER
- 7 REFUSED
- 8 DON'T KNOW

If = 1, goto 'PN_QA21_H47'

POST-NOTE 'QA21_H44' :
IF 'QA21_H44' = 1, SET SPEMPSP = 1 AND SET SPINSURE = 1 AND ARSAMESP=1;

PROGRAMMING NOTE 'QA21_H45' :
IF ARHBEX = 1 AND (AREMPOWN = 1 OR AREMPOTH = 1 OR AREMPSP = 1), THEN CONTINUE WITH 'QA21_H45' ;
IF ARMCARE = 1 OR ARMCAL = 1, THEN DISPLAY 'also';
ELSE GO TO PROGRAMMING NOTE 'QA21_H46'

'QA21_H45' [AH108] - You said you have health insurance through Covered California's SHOP program. Is (SPOUSE/PARTNER) {also} covered by this health insurance?

Usted dijo que tiene seguro de salud mediante el programa SHOP de Covered California. ¿Tiene su {espos(a)/pareja} {también} cobertura de este seguro de salud?

[IF NEEDED, SAY: 'SHOP is the Small Business Health Options Program administered by Covered California']

[IF NEEDED, SAY: 'SHOP son las siglas en inglés del programa de Opciones de Salud para los Pequeños Negocios y es administrado por Covered California.']

- 1 YES
- 2 NO
- 91 OTHER
- 7 REFUSED
- 8 DON'T KNOW

If = 1, goto 'PN_QA21_H47'

POST-NOTE 'QA21_H45' :

IF 'QA21_H45' = 1, SET SPEMPSP = 1 AND SET SPINSURE = 1 AND ARSAMESP=1 AND SPHBEX = 1;

PROGRAMMING NOTE AI40A :
IF 'QA21_G26' = 1 OR 2 (SPOUSE/PARTNER EMPLOYED) OR 'QA21_G27' = 1 (USUALLY WORKS), CONTINUE WITH 'QA21_H46' ;
IF AREMPSP = 1 AND 'QA21_A23' = 1, DISPLAY 'You said you have insurance from your spouse's employer or union.';
ELSE IF AREMPSP = 1 AND ('QA21_D13' = 1 OR 'QA21_D14' = 1), THEN DISPLAY 'You said you have insurance from your partner's employer or union.';
IF SPINSURE = 1, THEN DISPLAY 'also';
ELSE GO TO PROGRAMMING NOTE 'QA21_H47'

'QA21_H46' [AI40A] - {You said you have insurance from your spouse's employer or union./You said you have insurance from your partner's employer or union.} Does (SPOUSE/PARTNER) {also} have coverage through {his/her} own employer?

{Usted dijo que tiene seguro a través del empleador o sindicato de su esposo(a)./Usted dijo que tiene seguro a través del empleador o sindicato de su pareja. ¿Tiene su {espos(a)/pareja} {también} seguro de salud a través de su propio empleador?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

POST-NOTE 'QA21_H46' :

IF 'QA21_H46' = 1, SET SPEMPOWN = 1 AND SET SPINSURE = 1

PROGRAMMING NOTE 'QA21_H47' :
IF ARDIRECT = 1 AND ARHBEX ≠ 1, CONTINUE WITH 'QA21_H47' ;
IF ARMCARE = 1 OR ARMCAL = 1 OR AREMPOWN = 1, DISPLAY 'also';
ELSE GO TO PROGRAMMING NOTE 'QA21_H48'

'QA21_H47' [AI41] - You said you {also} have a plan you purchased directly from the insurer. Is (SPOUSE/PARTNER) {also} covered by this plan?

Usted dijo que {también} tiene un plan que compró directamente de la compañía de seguros. ¿Tiene su {esposo(a)/pareja} cobertura {también} de este plan?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

POST-NOTE 'QA21_H47' :
IF 'QA21_H47' = 1, SET SPDIRECT = 1 AND SET SPINSURE = 1 AND ARSAMESP=1;

PROGRAMMING NOTE 'QA21_H48' :
IF ARDIRECT =1 AND ARHBEX = 1, CONTINUE WITH 'QA21_H48' ;
IF ARMCARE = 1 OR ARMCAL = 1 OR AREMPOWN = 1, DISPLAY 'also';
ELSE GO TO PROGRAMMING NOTE 'QA21_H49'

'QA21_H48' [AH109] - You said you have a plan you purchased directly from Covered California. Is (SPOUSE/PARTNER) {also} covered by this plan?

Usted dijo que tiene un plan que compró directamente a Covered California. ¿Tiene su {esposo(a)/pareja} {también} cobertura de este plan?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

POST-NOTE 'QA21_H48' :
IF 'QA21_H48' = 1, SET SPDIRECT = 1 AND SET SPINSURE = 1 AND ARSAMESP=1 AND SPHBEX = 1;

PROGRAMMING NOTE 'QA21_H49' :
IF ARMILIT = 1, CONTINUE WITH 'QA21_H49' ;
IF ARMCARE = 1 OR ARMCAL = 1 OR ARDIRECT = 1 OR AREMPOWN = 1, DISPLAY 'also';
ELSE GO TO PROGRAMMING NOTE 'QA21_H50'

'QA21_H49' [A142] - You said you {also} have health insurance through CHAMPUS/CHAMPUS-VA, VA, TRICARE, or some other military healthcare. Is (SPOUSE/PARTNER) also covered by this plan?

Usted dijo que {también} tiene seguro de salud a través de CHAMPUS/CHAMPUS-VA, TRICARE, VA o algún otro tipo de seguro de salud para militares. ¿Tiene su {esposo(a)/pareja} cobertura de este plan también?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

POST-NOTE 'QA21_H49' :
IF 'QA21_H49' = 1, SET SPMILIT = 1 AND SET SPINSURE = 1 AND ARSAMESP=1;

PROGRAMMING NOTE 'QA21_H50' :
IF AROTHGOV = 1, CONTINUE WITH 'QA21_H50' ;
IF 'QA21_H36' = 91, THEN DISPLAY 'some government health plan':
IF ARMCARE = 1 OR ARMCAL = 1 OR ARDIRECT = 1 OR AREMPOWN = 1 OR ARMILIT = 1,
DISPLAY 'also';
ELSE GO TO PROGRAMMING NOTE 'QA21_H51'

'QA21_H50' [A142A] - You said you {also} have health insurance through some government health plan. Is (SPOUSE/PARTNER) also covered by this plan?

Usted dijo que {también} tiene seguro de salud a través de {AIM/MRMIP/Family PACT/PCIP /un plan de salud del gobierno}. ¿Tiene su {esposo(a)/pareja} cobertura de este plan también?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

POST-NOTE 'QA21_H50' :
IF 'QA21_H50' = 1, SET SPOTHGOV = 1 AND SET SPINSURE = 1 AND ARSAMESP =1

PROGRAMMING NOTE 'QA21_H51' :
IF SPINSURE ≠ 1, DISPLAY 'any';
ELSE DISPLAY 'through any other source'

'QA21_H51' [AI46] – Does (SPOUSE/PARTNER) have {any} health insurance coverage {through any other source}?

¿Tiene su {esposo(a)/pareja} {algún} seguro de salud {a través de otra fuente}?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, goto 'PN_QA21_H53'

If = -7, -8, goto 'PN_QA21_H57'

'QA21_H52' [A147] - What type of health insurance does {he/she} have?

¿Qué tipo de seguro de salud tiene {él/ella}?

[CODE ALL THAT APPLY.]

[PROBE: 'Any others?']

[PROBE: '¿Algún otro?']

[IF NEEDED, SAY: 'Such as from a current or former employer, or that they purchased directly from a health plan.']

[IF NEEDED, SAY: 'Tal como de un empleador actual o anterior, o comprado directamente de un plan de salud.']

[IF R GIVES NAME OF PRIVATE PLAN, THEN PROBE: 'Did {he/she} get this plan through a current or former employer/union, through a school, professional association, trade group, or other organization, or directly from the health plan?']

[IF R GIVES NAME OF PRIVATE PLAN, THEN PROBE: '¿Consiguió usted este plan a través de un empleador/sindicato actual o anterior, de una escuela, una asociación profesional, un grupo comercial u otra organización, o directamente del plan de salud?']

- 1 THROUGH CURRENT OR FORMER EMPLOYER/UNION
- 2 THROUGH SCHOOL, PROFESSIONAL ASSOCIATION, TRADE GROUP OR OTHER ORGANIZATION
- 3 PURCHASED DIRECTLY FROM HEALTH PLAN (BY R OR ANYONE ELSE)
- 4 MEDICARE
- 5 MEDI-CAL
- 7 CHAMPUS/CHAMP-VA, TRICARE, VA OR SOME OTHER MILITARY HEALTH CARE
- 8 INDIAN HEALTH SERVICE, TRIBAL HEALTH PROGRAM OR URBAN INDIAN CLINIC
- 10 COVERED CALIFORNIA
- 11 SHOP THROUGH COVERED CALIFORNIA
- 91 OTHER GOVERNMENT HEALTH PLAN
- 92 OTHER NON-GOVERNMENT HEALTH PLAN
- 7 REFUSED
- 8 DON'T KNOW

POST-NOTE 'QA21_H52' :

IF 'QA21_H52' = 1, SET SPEMPOTH = 1 AND SET SPINSURE = 1;

IF 'QA21_H52' = 2, SET SPEMOTH = 1 AND SET SPINSURE = 1;

IF 'QA21_H52' = 3, SET SPDIRECT = 1 AND SET SPINSURE = 1;

IF 'QA21_H52' = 4, SET SPMPCARE = 1 AND SET SPINSURE = 1;

IF 'QA21_H52' = 5, SET SPMCAL = 1 AND SET SPINSURE = 1;

IF 'QA21_H52' = 7, SET SPMILIT = 1 AND SET SPINSURE = 1;

IF 'QA21_H52' = 8, SET SPIHS = 1;

IF 'QA21_H52' = 10, SET SPHBEX = 1 AND SPDIRECT = 1 AND SPINSURE = 1 AND SPDIROTH = 1

;

IF 'QA21_H52' = 11, SET SPHBEX = 1 AND SET SPINSURE = 1 AND SET SPEMPOTH = 1;

IF 'QA21_H52' = 91, SET SPOTHGOV = 1 AND SET SPINSURE = 1;

IF 'QA21_H52' = 92, -7, OR -8, SET SPOTHER = 1 AND SET SPINSURE = 1

PROGRAMMING NOTE 'QA21_H53' :
IF SPINSURE ≠ 1, CONTINUE WITH 'QA21_H53' ;
ELSE IF SPINSURE = 1 AND (SPEMPOTH = 1 OR SPDIRECT = 1), THEN SKIP TO PROGRAMMING
NOTE 'QA21_H55' ;
ELSE GO TO PROGRAMMING NOTE 'QA21_H57'

'QA21_H53' [AI48] - You said that (SPOUSE/PARTNER) has no health insurance from any source. Is this correct?

Usted dijo que el {esposo(a)/pareja} no tiene seguro de salud de ninguna fuente. ¿Correcto?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 1, -7, -8, goto 'PN_QA21_H57'

'QA21_H54' [A149] - What type of health insurance does {he/she} have?

¿Qué tipo de seguro de salud tiene {él/ella}?

[CODE ALL THAT APPLY]

[PROBE: 'Any others?']

[PROBE: '¿Algún otro?']

[IF R GIVES NAME OF PRIVATE PLAN, THEN PROBE: 'Did {he/she} get this plan through a current or former employer/union, through a school, professional association, trade group, or other organization, or directly from the health plan?']

[IF R GIVES NAME OF PRIVATE PLAN, THEN PROBE: '¿Consiguió usted este plan a través de un empleador/sindicato actual o anterior, de una escuela, una asociación profesional, un grupo comercial u otra organización, o directamente del plan de salud?']

- 1 THROUGH CURRENT OR FORMER EMPLOYER/UNION
- 2 THROUGH SCHOOL, PROFESSIONAL ASSOCIATION, TRADE GROUP OR OTHER ORGANIZATION
- 3 PURCHASED DIRECTLY FROM HEALTH PLAN (BY R OR ANYONE ELSE)
- 4 MEDICARE
- 5 MEDI-CAL
- 7 CHAMPUS/CHAMP-VA, TRICARE, VA OR SOME OTHER MILITARY HEALTH CARE
- 8 INDIAN HEALTH SERVICE, TRIBAL HEALTH PROGRAM OR URBAN INDIAN CLINIC
- 10 COVERED CALIFORNIA
- 11 SHOP THROUGH COVERED CALIFORNIA
- 91 OTHER GOVERNMENT HEALTH PLAN
- 92 OTHER NON-GOVERNMENT HEALTH PLAN
- 7 REFUSED
- 8 DON'T KNOW

POST-NOTE 'QA21_H54' :

IF 'QA21_H54' = 1, SET SPEMPOTH = 1 AND SET SPINSURE = 1;

IF 'QA21_H54' = 2, SET SPEMPOTH = 1 AND SET SPINSURE = 1;

IF 'QA21_H54' = 3, SET SPDIRECT = 1 AND SET SPINSURE = 1;

IF 'QA21_H54' = 4, SET SPMPCARE = 1 AND SET SPINSURE = 1;

IF 'QA21_H54' = 5, SET SPMCAL = 1 AND SET SPINSURE = 1;

IF 'QA21_H54' = 7, SET SPMILIT = 1 AND SET SPINSURE = 1;

IF 'QA21_H54' = 8, SET SPIHS = 1;

IF 'QA21_H54' = 10, SET SPHBEX = 1 AND SET SPDIRECT = 1 AND SET SPINSURE = 1 AND SPDIROTH = 1;

IF 'QA21_H54' = 11, SET SPHBEX = 1 AND SET SPINSURE = 1 AND SPEMOTH = 1;

IF 'QA21_H54' = 91, SET SPOTHGOV = 1 AND SET SPINSURE = 1;

IF 'QA21_H54' = 92, -7, OR -8, SET SPOTHER = 1 AND SET SPINSURE = 1;

PROGRAMMING NOTE 'QA21_H55' :

IF 'QA21_H52' = (1, 2, 3, 10, 11) OR 'QA21_H54' = (1, 2, 3, 10, 11) THEN CONTINUE WITH 'QA21_H55' ;

IF 'QA21_A23' = 1 (MARRIED), THEN DISPLAY 'spouse's';

ELSE IF 'QA21_D13' = 1 OR 'QA21_D14' = 1 THEN DISPLAY 'partner's';

ELSE SKIP TO PROGRAMMING NOTE 'QA21_H57'

'QA21_H55' [AH62] - Was this plan obtained in your {spouse's/partner's} name or in the name of someone else?

¿Este plan se obtuvo a nombre de su {esposo(a)/pareja}, o a nombre de otra persona?

[IF NEEDED, SAY: 'Even someone who does not live in this household.']

[IF NEEDED, SAY: 'Incluso alguien que no viva en esta casa.']

- 1 IN SPOUSE'S / PARTNER'S NAME
- 1 A NOMBRE DE SU CÓNYUGE/PAREJA
- 2 IN SOMEONE ELSE'S NAME
- 2 A NOMBRE DE ALGUIEN MÁS
- 7 REFUSED
- 8 DON'T KNOW

If = 1, -7, -8, goto 'PN_QA21_H57'

POST-NOTE 'QA21_H55' :

IF 'QA21_H55' = 1 AND ['QA21_H52' = (1 OR 2) OR 'QA21_H54' = (1 OR 2)], SET SPEMPOW = 1 AND SPEMPOT = 0;

IF 'QA21_H55' = 1 AND ['QA21_H52' = 3 OR 'QA21_H54' = 3], SET KSPDIROW = 1;

IF 'QA21_H55' = 1 AND ['QA21_H52' = 10 OR 'QA21_H54' = 10], SET SPHBEX = 1 AND SPDIROW = 1;

IF 'QA21_H55' = 1 AND ['QA21_H52' = 11 OR 'QA21_H54' = 11], SET SPHBEX = 1 AND SPEMPOW = 1;

'QA21_H56' [AH63] - Is the plan in your name, parent's name, or someone else's name?

¿Está el plan a su nombre, a nombre de sus padres o a nombre de otra persona?

- 1 IN ADULT RESPONDENT'S NAME
- 2 IN ADULT RESPONDENT'S PARENT'S NAME
- 3 IN SOMEONE ELSE'S NAME
- 7 REFUSED
- 8 DON'T KNOW

POST NOTE 'QA21_H56':

IF 'QA21_H56' = 1 AND ['QA21_H52' = (1 OR 2) OR 'QA21_H54' = (1 OR 2)], SET SPEMPAR = 1 AND SPEMPOT = 0 AND ARSAMES = 1;

IF 'QA21_H56' = 1 AND ['QA21_H52' = 3 OR 'QA21_H54' = 3], SET SPDIPAR = 1 AND ARSAMES = 1;

IF 'QA21_H56' = 1 AND ['QA21_H52' = 10 OR 'QA21_H54' = 10], SET SPHBEX = 1 AND SPDIPAR = 1 AND ARSAMES = 1;

IF 'QA21_H56' = 1 AND ['QA21_H52' = 11 OR 'QA21_H54' = 11], SET SPHBEX = 1 AND SPEMPAR = 1 AND ARSAMES = 1;

IF 'QA21_H56' = 2, SET SPARPAR = 1 AND SET SPEMPOT = 0;

PROGRAMMING NOTE 'QA21_H57' :
IF SPEMPOW = 1 (HAS EMPLOYER BASED COVERAGE IN OWN NAME), GO TO 'QA21_H61' ;
ELSE IF [('QA21_G26'=1 OR 2) OR ('QA21_G27'=1)] AND 'QA21_G28'≠3 CONTINUE WITH
'QA21_H57' ;
IF 'QA21_A23' = 1 (MARRIED), THEN DISPLAY 'spouse's';
ELSE IF 'QA21_D13' = 1 OR 'QA21_D14' = 1 (LEGAL SAME-SEX COUPLE) THEN DISPLAY
'partner's'
ELSE GO TO PROGRAMMING NOTE 'QA21_H61'

'QA21_H57' [AI43] - Does your {spouse's/partner's} employer offer health insurance to any of its employees?

El empleador de su {esposo(a)/partner}, ¿ofrece seguro de salud a alguno de sus empleados?

- 1 YES
- 1 SÍ
- 2 NO
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto 'PN_QA21_H61'

'QA21_H58' [AI44] - Is {he/she} eligible to be in this plan?

El empleador de su {esposo(a)/partner}, ¿ofrece seguro de salud a alguno de sus empleados?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, goto 'QA21_H60'

If = -7, -8, goto 'PN_QA21_H61'

'QA21_H59' [AI45] - What is the ONE main reason why {he/she} isn't in this plan?

¿Cuál es LA razón principal por la que {él/ella} no está inscrito(a) en este plan?

- 01 COVERED BY ANOTHER PLAN
- 02 PLAN TOO EXPENSIVE
- 03 DIDN'T LIKE PLAN OFFERED
- 04 DON'T NEED OR BELIEVE IN HEALTH INSURANCE
- 91 OTHER (SPECIFY: _____)
- 7 REFUSED
- 8 DON'T KNOW

If = 1, 2, 3, 4, 91, -7, -8, goto 'PN_QA21_H61'

'QA21_H60' [A145A] - What is the one main reason why {he/she} is not eligible for this plan?

¿Cuál es la razón principal por la que {él/ella} no está inscrito(a) en este plan?

- 01 HAVEN'T YET WORKED FOR THIS EMPLOYER LONG ENOUGH TO BE COVERED
- 02 CONTRACT OR TEMPORARY EMPLOYEES NOT ALLOWED IN PLAN
- 03 DON'T WORK ENOUGH HOURS PER WEEK OR WEEKS PER YEAR
- 91 OTHER (SPECIFY: _____)
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_H61' :

IF ARMCARE = 1 (R HAS MEDICARE) AND (AREMPOWN ≠ 1 AND AREMPOTH ≠ 1 AND ARDIRECT ≠ 1 AND ARMCAL ≠ 1 AND ARMILIT ≠ 1 AND ARIHS ≠ 1 AND ARHBEX ≠ 1 AND AROTHGOV ≠ 1 AND AROTHER ≠ 1), THEN SKIP TO PN 'QA21_H64' ;

IF ARMCARE ≠ 1 AND AREMPOWN ≠ 1 AND AREMPOTH ≠ 1 AND ARDIRECT ≠ 1 AND ARMCAL ≠ 1 AND ARMILIT ≠ 1 AND ARIHS ≠ 1 AND ARHBEX ≠ 1 AND AROTHGOV ≠ 1 AND AROTHER ≠ 1, THEN SKIP TO GO TO 'QA21_H83' ;

ELSE CONTINUE WITH 'QA21_H61' DISPLAY;

IF ['QA21_A23' = 1 (MARRIED) OR AD60 = 1 OR AD61 = 1 (LEGAL SAME-SEX COUPLE)] AND [IF ARMCARE = 1 (R HAS MEDICARE) AND (AREMPOWN = 1 OR AREMPOTH = 1 OR ARDIRECT = 1 OR ARMCAL = 1 OR ARMILIT = 1 OR ARIHS = 1 OR ARHBEX = 1 OR AROTHGOV = 1 OR AROTHER = 1)], DISPLAY "Besides your MediCARE plan you told me about earlier, I have some questions about your other health plan." AND "other" ;

IF ['QA21_A23' = 1 (MARRIED) OR AD60 = 1 OR AD61 = 1 (LEGAL SAME-SEX COUPLE)] AND [IF ARMCARE = 1 (R HAS MEDICARE) AND (ARMCAL = 1)], DISPLAY "Besides your MediCARE plan you told me about earlier, I have some questions about your other health plan." AND "Medi-CAL" ;

IF ARMCARE = 1 (R HAS MEDICARE) AND (AREMPOWN = 1 OR AREMPOTH = 1 OR ARDIRECT = 1 OR ARMILIT = 1 OR ARIHS = 1 OR ARHBEX = 1 OR AROTHGOV = 1 OR AROTHER = 1), DISPLAY "Besides your MediCARE plan you told me about earlier, I have some questions about your other health plan." AND "other" ;

[IF ARMCARE = 1 (R HAS MEDICARE) AND (ARMCAL = 1)], DISPLAY "Besides your MediCARE plan you told me about earlier, I have some questions about your other health plan." AND "Medi-CAL" ;

IF ['QA21_A23' = 1 (MARRIED) OR AD60 = 1 OR AD61 = 1 (LEGAL SAME-SEX COUPLE)] AND [(AREMPOWN = 1 OR AREMPOTH = 1 OR ARDIRECT = 1 OR OR ARMILIT = 1 OR ARIHS = 1 OR ARHBEX = 1 OR AROTHGOV = 1 OR AROTHER = 1), AND ARMCARE ≠ 1 (R DOES NOT HAVE MEDICARE)], DISPLAY "Next, I have some questions about your own main health plan."; AND";
IF ['QA21_A23' = 1 (MARRIED) OR AD60 = 1 OR AD61 = 1 (LEGAL SAME-SEX COUPLE)] AND [ARMCAL = 1 AND ARMCARE ≠ 1 (R DOES NOT HAVE MEDICARE)], DISPLAY Next, I have some questions about your own main health plan." AND "Medi-Cal";

IF (AREMPOWN = 1 OR AREMPOTH = 1 OR ARDIRECT = 1 OR OR ARMILIT = 1 OR ARIHS = 1 OR ARHBEX = 1 OR AROTHGOV = 1 OR AROTHER = 1), AND ARMCARE ≠ 1 (R DOES NOT HAVE MEDICARE), DISPLAY";

IF ARMCAL = 1 AND ARMCARE ≠ 1 (R DOES NOT HAVE MEDICARE), DISPLAY "Medi-Cal";
ELSE DISPLAY, "Is your health plan an HMO?"

'QA21_H61' [AI22C] - {Besides your MediCARE plan you told me about earlier, I have some questions about your other health plan./Next, I have some questions about your own main health plan.}

{Además del plan de MediCARE que me mencionó antes, tengo algunas preguntas sobre **su** otro plan de seguro de salud. /Ahora tengo algunas preguntas sobre **su** propio plan de salud principal.}

Is your {Medi-Cal/other} health plan an HMO?

¿Es su {plan de salud Medi-Cal/otro plan de salud} una HMO?

[IF NEEDED, SAY: 'HMO stands for Health Maintenance Organization. With an HMO, you must use the doctors and hospitals belonging to its network. If you go outside the network, generally it will not be paid for unless it's an emergency.']

[IF NEEDED, SAY: 'HMO son las iniciales de Health Maintenance Organization (Organización para el Mantenimiento de la Salud). Con una HMO usted tiene que ir a los doctores y hospitales de la red de su plan. Si va fuera de la red, por lo general no cubrirán esos gastos a menos que haya sido una emergencia médica.']

[IF R SAYS 'POS' OR 'POINT OF SERVICE', CODE AS 'YES.' IF R SAYS PPO, CODE 'NO.']

[IF R HAS MORE THAN ONE HEALTH PLAN, SAY: 'Your main health plan.']

[IF R HAS MORE THAN ONE HEALTH PLAN, SAY: 'Su plan de salud principal.']

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 1, goto 'PN_QA21_H63'

PROGRAMMING NOTE 'QA21_H62' :
IF ARMCAL = 1 (R HAS MEDI-CAL), GO TO 'QA21_H63' ;
ELSE CONTINUE WITH 'QA21_H62' ;

'QA21_H62' [AH122] - Is your health plan a PPO or EPO?

¿Es su plan de salud un PPO o un EPO?

[IF NEEDED, SAY: 'EPO stands for Exclusive Provider Organization. With an EPO, you must use the in-network doctors and hospitals. If it's an emergency, you can see doctors and specialists directly without a referral from your primary care provider.]

[IF NEEDED, SAY: 'EPO son las siglas en inglés de Exclusive Provider Organization (Organización de Proveedores Exclusivos). Con una EPO, usted debe ir a los doctores y hospitales dentro de la red, a menos que sea una emergencia. Usted puede tener acceso a doctores y especialistas directamente sin sin que lo(a) refiera su profesional de cuidado médico principal.]

[IF NEEDED, SAY: 'PPO stands for Preferred Provider Organization. With a PPO, you can use any doctors and hospitals, but you pay less if you use doctors and hospitals that belong to your plan's network. Also, you can access doctors and specialists directly without a referral from your primary care provider.]

[IF NEEDED, SAY: 'PPO son las siglas en inglés de Preferred Provider Organization (Organización de Proveedores Preferidos). Con una PPO, usted puede ir a cualquier médico y hospital, pero paga menos si va a los médicos y hospitales que pertenecen a la red de su plan. Asimismo, puede tener acceso a médicos y especialistas directamente y sin una remisión de su profesional de cuidado médico principal.]

[IF R HAS MORE THAN ONE HEALTH PLAN, SAY: 'Your main health plan.']

[IF R HAS MORE THAN ONE HEALTH PLAN, SAY: 'Su plan de salud principal.']

- 1 PPO
- 2 EPO
- 91 Other (Specify: _____)
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_H63' :
IF ARINSURE = 1 AND ARMCARE ≠ 1, THEN CONTINUE WITH 'QA21_H63' AND DISPLAY 'your main';
IF ARINSURE = 1 AND ARMCARE = 1, THEN CONTINUE WITH 'QA21_H63' AND DISPLAY 'this'

'QA21_H63' [A122A] - What is the name of {your main/this} health plan?

¿Cómo se llama {su plan de salud principal/este plan de salud}?

[IF R HAS DIFFICULTY RECALLING NAME, PROBE: 'Do you have an insurance card or something else with the plan name on it?']

[IF R HAS DIFFICULTY RECALLING NAME, PROBE: '¿ Tiene usted una tarjeta de seguro u otro documento donde aparezca el nombre del plan?']

- 1 ACCESS SENIOR HEALTHCARE
- 2 AETNA
- 3 AETNA GOLDEN MEDICARE
- 4 AIDS HEALTHCARE FOUNDATION, LA
- 5 ALAMEDA ALLIANCE FOR HEALTH
- 83 ALTAMED HEALTH SERVICES
- 7 ANTHEM BLUE CROSS OF CALIFORNIA
- 8 ASPIRE HEALTH PLAN
- 9 BLUE CROSS CALIFORNIACARE
- 79 BLUE CROSS SENIOR SECURE
- 11 BLUE SHIELD 65 PLUS
- 12 BLUE SHIELD OF CALIFORNIA
- 13 BRAND NEW DAY (UNIVERSAL CARE)
- 14 CALIFORNIA HEALTH AND WELLNESS PLAN
- 15 CALIFORNIAKIDS (CALKIDS)
- 16 CAL OPTIMA (CALOPTIMA ONE CARE)
- 17 CALVIVA HEALTH
- 18 CARE 1ST HEALTH PLAN
- 19 CAREMORE HEALTH PLAN
- 21 CENTER FOR ELDERS' INDEPENDENCE
- 80 CEN CAL HEALTH
- 22 CENTRAL CALIFORNIA ALLIANCE FOR HEALTH
- 23 CENTRAL HEALTH PLAN
- 24 CHINESE COMMUNITY HEALTH PLAN
- 25 CHOICE PHYSICIANS NETWORK
- 26 CIGNA HEALTHCARE
- 27 CITIZENS CHOICE HEALTHPLAN
- 28 COMMUNITY CARE HEALTH PLAN
- 29 COMMUNITY HEALTH GROUP
- 81 CONTRA COSTA HEALTH PLAN
- 31 DAVITA HEALTHCARE PARTNERS PLAN
- 32 EASY CHOICE HEALTH PLAN
- 33 EPIC HEALTH PLAN
- 34 GEM CARE HEALTH PLAN
- 35 GOLD COAST HEALTH PLAN
- 36 GOLDEN STATE MEDICARE HEALTH PLAN
- 38 HEALTH NET
- 39 HEALTH NET SENIORITY PLUS
- 40 HEALTH PLAN OF SAN JOAQUIN
- 41 HEALTH PLAN SAN JP AUTHORITY

- 42 HERITAGE PROVIDER NETWORK
- 43 HUMANA GOLD PLUS
- 44 HUMANA HEALTH PLAN
- 45 IEHP (INLAND EMPIRE HEALTH PLAN)
- 46 INTER VALLEY HEALTH PLAN
- 82 HEALTH ADVANTAGE
- 47 KAISER PERMANENTE
- 48 KAISER PERMANENTE SENIOR ADVANTAGE
- 49 KERN FAMILY HEALTH CARE
- 50 L.A. CARE HEALTH PLAN
- 51 MD CARE
- 54 MOLINA HEALTHCARE OF CALIFORNIA
- 55 MONARCH HEALTH PLAN
- 56 ON LOK SENIOR HEALTH SERVICES
- 57 PARTNERSHIP HEALTHPLAN OF CALIFORNIA
- 58 PIH HEALTH CARE SOLUTIONS
- 59 PREMIER HEALTH PLAN SERVICES
- 60 PRIMECARE MEDICAL NETWORK
- 61 PROVIDENCE HEALTH NETWORK
- 68 SCRIPPS HEALTH PLAN SERVICES
- 69 SEASIDE HEALTH PLAN
- 84 SAN FRANCISCO HEALTH PLAN
- 90 SANTA CLARA FAMILY HEALTH PLAN
- 86 SAN MATEO HEALTH COMMISION
- 88 SANTA BARBARA
- 92 SATELLITE HEALTH PLAN
- 67 SCAN HEALTH PLAN
- 70 SHARP HEALTH PLAN
- 71 SUTTER HEALTH PLAN
- 72 SUTTER SENIOR CARE
- 73 UNITED HEALTHCARE
- 74 UNITED HEALTHCARE SECURE HORIZON
- 75 UNIVERSITY HEALTHCARE ADVANTAGE
- 76 VALLEY HEALTH PLAN
- 77 VENTURA COUNTY HEALTH CARE PLAN
- 78 WESTERN HEALTH ADVANTAGE
- 93 CHAMPUS/CHAMP-VA
- 87 TRICARE/TRICARE FOR LIFE/TRICARE PRIME
- 89 VA HEALTH CARE SERVICES
- 52 MEDI-CAL
- 53 MEDICARE
- 85 OTHER (SPECIFY: _____)
- 7 REFUSED
- 8 DON'T KNOW

POST NOTE 'QA21_H63' :
IF 'QA21_H63' = 93, 87, OR 89 THEN SET ARMILIT=1

PROGRAMMING NOTE 'QA21_H64' :
IF ARMCARE = 1 (R HAS MEDI-CARE) AND (AREMPOTH ≠ 1 OR ARDIRECT ≠ 1 OR ARMCAL ≠ 1 OR ARMILIT ≠ 1 OR ARIHS ≠ 1 OR ARHBEX ≠ 1 OR AROTHGOV ≠ 1 OR AROTHER ≠ 1) AND 'QA21_A23' = 1 (MARRIED) OR 'QA21_D13' = 1 OR 'QA21_D14' = 1 (LEGAL SAME-SEX COUPLE), DISPLAY 'Next I have some questions about your own main health plan.'

'QA21_H64' [AI25] - {Next, I have some questions about your own main health plan.} Are you covered for your prescription drugs? That is, does some plan pay any part of the cost?

¿Su seguro cubre medicamentos recetados? Es decir, ¿tiene un plan que paga alguna parte de los costos?

- 1 YES
- 1 SÍ
- 2 NO
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_H65' :
IF AREMPOWN = 1 OR AREMPSP = 1 OR AREMPPAR = 1 OR ARDIRECT = 1 OR AREMPOTH = 1 THEN CONTINUE WITH 'QA21_H65' ;
ELSE GO TO 'QA21_H70'

'QA21_H65' [AH71] - Does your health plan have a deductible that is more than \$1,000?

¿Tiene su plan de salud un deducible de más de \$1,000 dólares?

[IF NEEDED, SAY: 'A deductible is the amount you have to pay before your plan begins to pay for your medical care.']

[IF NEEDED, SAY: 'El deducible es la cantidad que usted tiene que pagar antes de que su plan empiece a pagar por su atención médica.']

- 1 YES
- 2 NO
- 3 YES, BUT ONLY WHEN WE GO OUT OF NETWORK
- 7 REFUSED
- 8 DON'T KNOW

'QA21_H66' [AH72] - Does your health plan have a deductible for all covered persons that is more than \$2,000?

¿Tiene su plan de salud un deducible de más de \$2,000 dólares por todas las personas que tienen cobertura?

[IF NEEDED, SAY: 'A deductible is the amount you have to pay before your plan begins to pay for your medical care.']

[IF NEEDED, SAY: 'El deducible es la cantidad que usted tiene que pagar antes de que su plan empiece a pagar por su atención médica.']

- 1 YES
- 2 NO
- 3 YES, BUT ONLY WHEN WE GO OUT OF NETWORK
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_H67' :

**IF ARINSURE = 1 AND (AREMPOTH=1 OR ARDIRECT=1 OR ARHBEX = 1 OR AREMPOWN =1 OR ARDIROWN =1 OR ARDIROTH =1 OR AREMPSP =1 OR ARDIRSP =1 OR AREMPPAR =1 OR SPHBEX =1 OR ARDIRPAR =1 THEN CONTINUE WITH 'QA21_H67' ;
ELSE CONTINUE WITH 'QA21_H70'**

'QA21_H67' [AH73B] - Do you have a special account or fund you can use to pay for medical expenses?

¿Tiene alguna cuenta o un fondo especial que pueda utilizar para pagar gastos médicos?

[IF NEEDED, SAY: 'The accounts are sometimes referred to as Health Savings Accounts (HSAs) or Health Reimbursement Accounts (HRAs). Other similar accounts include- Personal care accounts, Personal medical funds, or Choice funds. Do not include employer-provided Flexible Spending Accounts (FSAs).']

[IF NEEDED, SAY: 'Las cuentas también se conocen por nombres como Cuentas de Ahorro para la Salud (HSAs), Arreglos de Reembolsos por Salud (HRAs) y otras cuentas similares. Otras cuentas de este tipo pueden ser las Cuentas personales para gastos médicos, Fondos personales para gastos médicos o Fondos de beneficios, y son diferentes de las cuentas Cuentas de gastos flexibles proporcionadas por el empleador. .']

- 1 YES
- 1 SÍ
- 2 NO
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto 'QA21_H70'

'QA21_H68' [AH130] - Do you have money in this account?

¿Tiene dinero en esa cuenta?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto 'QA21_H70'

'QA21_H69' [AH131] - How much money do you have in this account? Your best guess is fine.

¿Cuánto dinero tiene en esa cuenta? Un cálculo aproximado es suficiente?

_____ (AMOUNT)

- 7 REFUSED
- 8 DON'T KNOW

'QA21_H70' [AI31] - Thinking about your current health insurance, did you have this same insurance for all 12 of the past 12 months?

Pensando en su seguro de salud actual, ¿tuvo usted este mismo seguro todos los 12 meses en los últimos 12 meses?

- 1 YES
- 1 SÍ
- 2 NO
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW
- 8 NO SÉ

If = 2, goto 'QA21_H72'

If = -7, goto 'QA21_H78'

If = -8, goto 'QA21_H73'

'QA21_H71' [AH132] - How long have you had your current health insurance?

¿Cuánto tiempo hace que tiene su seguro de salud actual?

[IF MORE THAN 0 DAYS BUT LESS THAN 1 MONTH, CODE AS 1 MONTH]

_____ NUMBER OF YEARS

If >=0, goto 'QA21_H76'

_____ NUMBER OF MONTHS

If >=0, goto 'QA21_H76'

- 7 REFUSED
- 8 DON'T KNOW

If =-7, -8,, goto 'QA21_H76'

'QA21_H72' [AH133] - Out of the last 12 months, how many months did you have your current health insurance plan?

De los últimos 12 meses, ¿cuántos meses tuvo usted su plan de seguro salud actual?

[IF MORE THAN 0 DAYS BUT LESS THAN 1 MONTH, CODE AS 1 MONTH]

_____ NUMBER OF MONTHS

- 7 REFUSED
- 8 DON'T KNOW

'QA21_H73' [AI32] - During the past 12 months, when you were not covered by your current health insurance, did you have any other health insurance?

Durante los últimos 12 meses, cuando no tenía la cobertura del seguro de salud que tiene ahora, ¿tenía usted otro seguro de salud?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If =2, -7, -8, goto 'QA21_H76'

'QA21_H74' [AI33] - Was your other health insurance Medi-CAL, a plan you obtained through an employer, a plan you purchased directly from an insurance company, a plan you purchased through Covered California, or some other plan?

¿Era su otro seguro de salud Medi-Cal, un plan que usted obtuvo a través de un empleador, un plan que compró directamente a una compañía de seguros, un plan que compró mediante Covered California o era otro plan?

[CODE ALL THAT APPLY]

[PROBE: 'Any others?']

[PROBE: '¿Algún otro?']

- 1 MEDI-CAL
- 3 THROUGH CURRENT OR FORMER EMPLOYER/UNION
- 5 PURCHASED DIRECTLY
- 6 COVERED CALIFORNIA
- 91 OTHER HEALTH PLAN
- 7 REFUSED
- 8 DON'T KNOW

**PROGRAMMING NOTE 'QA21_H75':
IF MORE THAN ONE RESPONSE FROM 'QA21_H74', THEN CONTINUE WITH 'QA21_H75';
ELSE GO TO 'QA21_H76'**

'QA21_H75' [AH134] - Before your current plan, which health insurance did you have?

Antes de su plan actual, ¿qué seguro de salud tenía?

- 1 MEDI-CAL
- 3 THROUGH CURRENT OR FORMER EMPLOYER/UNION
- 5 PURCHASED DIRECTLY
- 6 COVERED CALIFORNIA
- 91 OTHER HEALTH PLAN
- 7 REFUSED
- 8 DON'T KNOW

**PROGRAMMING NOTE 'QA21_H76':
IF 'QA21_H73'≠1 OR 'QA21_H70' = 1, THEN CONTINUE WITH 'QA21_H76';
ELSE GO TO 'QA21_H77'**

'QA21_H76' [AH135] - Before your current plan, did you have other health insurance through Medi-CAL, through an employer, a plan you purchased directly from an insurance company, a plan you purchased through Covered California, or some other plan?

¿Era su otro seguro de salud Medi-Cal, un plan que usted obtuvo a través de un empleador, un plan que compró directamente a una compañía de seguros, un plan que compró mediante Covered California o era otro plan?

- 1 MEDI-CAL
- 3 THROUGH CURRENT OR FORMER EMPLOYER/UNION
- 5 PURCHASED DIRECTLY
- 6 COVERED CALIFORNIA
- 91 OTHER HEALTH PLAN
- 95 NO OTHER HEALTH PLAN
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_H77':

IF 'QA21_H76' = 95, THEN SKIP TO 'QA21_H78', ELSE CONTINUE.

IF ONLY ONE RESPONSE FROM 'QA21_H74' THEN DISPLAY THAT RESPONSE

ELSE IF 'QA21_H75' >0 DISPLAY RESPONSE FROM 'QA21_H75'

ELSE IF 'QA21_H76' >0 DISPLAY RESPONSE FROM 'QA21_H76'

IF 'QA21_H74' OR AH143 OR 'QA21_H76'=1 DISPLAY 'the medi-CAL plan'

IF 'QA21_H74' OR AH143 OR 'QA21_H76'=3 DISPLAY 'plan through current or former employer or union'

IF 'QA21_H74' OR AH143 OR 'QA21_H76'=5 DISPLAY 'plan you purchased directly'

IF 'QA21_H74' OR AH143 OR 'QA21_H76'=6 DISPLAY 'the Covered California plan'

IF 'QA21_H74' OR AH143 OR 'QA21_H76'=91 DISPLAY 'the other health plan'

'QA21_H77' [AH136] - How long did you have the {medi-CAL/ Covered California plan/other health} plan {through current or former employer or union/ you purchased directly}?

¿Cuánto tiempo tuvo \{el plan de medi-CAL/el plan de Covered California/otro plan de salud\} \{a través de su empleador o su sindicato actual o anterior/que compró directamente\}?

[IF MORE THAN 0 DAYS BUT LESS THAN 1 MONTH, CODE AS 1 MONTH]

_____ NUMBER OF YEARS

_____ NUMBER OF MONTHS

If >=0, goto 'QA21_H78'

- 7 REFUSED
- 8 DON'T KNOW

'QA21_H78' [AH137] - During the past 12 months, did you change your health insurance plan?

Durante los últimos 12 meses, ¿cambió su cónyuge su plan de seguro médico?

[IF NEEDED: Please include changes in health plan from the same or different health insurance companies.]

[IF NEEDED: *Incluya cambios en el plan médico de la misma compañía de seguros médicos o de una compañía diferente.*]

- 1 YES
- 1 SÍ
- 2 NO
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_H79':
IF 'QA21_H70' = 2, -7, -8 OR 'QA21_H73' = 1, -7, -8 THEN CONTINUE,
ELSE SKIP TO 'QA21_H80'

'QA21_H79' [A134] - During the past 12 months, was there any time when you had no health insurance at all?

Durante los últimos 12 meses, ¿hubo un momento en el que usted no tuvo ningún seguro de salud?

- 1 YES
- 1 SÍ
- 2 NO
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_H80':IF 'QA21_H79'=1 OR 'QA21_H73'=2, THEN CONTINUE WITH 'QA21_H80', ELSE SKIP TO PN 'QA21_H91'.

'QA21_H80' [A135] - For how many months of the past 12 months did you have no health insurance at all?

¿Por cuántos meses durante los últimos 12 meses no tuvo usted ningún seguro de salud?

[IF MORE THAN 0 DAYS BUT LESS THAN 1 MONTH, CODE AS 1 MONTH]

_____ NUMBER OF MONTHS [HR: 0-11]

If = 0, goto 'PN_QA21_H91'

'PN_QA21_H93' -7 REFUSED
 -8 DON'T KNOW

If = -7, -8, goto 'PN_QA21_H91'

'QA21_H81' [A136] - What is the one main reason why you did not have any health insurance during those months?

¿Cuál es LA razón principal por la que usted no tuvo ningún seguro de salud durante esos meses?

- 1 CAN'T AFFORD/TOO EXPENSIVE
- 2 NOT ELIGIBLE DUE TO WORKING STATUS/CHANGED EMPLOYER/LOST JOB
- 3 NOT ELIGIBLE DUE TO HEALTH OR OTHER PROBLEMS
- 4 NOT ELIGIBLE DUE TO CITIZENSHIP/IMMIGRATION STATUS
- 5 FAMILY SITUATION CHANGED
- 6 DON'T BELIEVE IN INSURANCE
- 7 DID NOT HAVE INSURANCE WHILE SWITCHING INSURANCE COMPANIES
- 8 CAN GET HEALTH CARE FOR FREE/PAY FOR OWN CARE
- 91 OTHER (SPECIFY: _____)
- 7 REFUSED
- 8 DON'T KNOW

If = 2, goto 'QA21_H82'

'QA21_H82' [AH140] – Was this due to a lost job, reduction in hours, change in employer, or something else?

¿Fue esto debido a la pérdida del empleo, la reducción de horas de trabajo, el cambio de empleador u otro motivo?

- 1 Lost job
- 1 *Pérdida del empleo*
- 2 Reduction in hours
- 2 *Reducción de horas de trabajo*
- 3 Change in employer
- 3 *Cambio de empleador*
- 91 Something else (Specify: _____)
- 91 *Otro motivo (Especifique: _____)*
- 7 REFUSED
- 8 DON'T KNOW

'QA21_H83' [AH74] - During the time that you were uninsured, did you try to find health insurance on your own?

Mientras estuvo sin seguro, ¿trató de encontrar seguro de salud por su cuenta?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 1, 2, -7, -8, goto 'PN_QA21_H91'

'QA21_H84' [AI24] - What is the one main reason why you do not have any health insurance?

¿Cuál es el motivo principal por el que usted no tiene seguro de salud?

[IF R SAYS NO NEED, PROBE WHY]

- 1 CAN'T AFFORD/TOO EXPENSIVE
- 2 NOT ELIGIBLE DUE TO WORKING STATUS/CHANGED EMPLOYER/LOST JOB
- 3 NOT ELIGIBLE DUE TO HEALTH OR OTHER PROBLEMS
- 4 NOT ELIGIBLE DUE TO CITIZENSHIP/IMMIGRATION STATUS
- 5 FAMILY SITUATION CHANGED
- 6 DON'T BELIEVE IN INSURANCE
- 7 DID NOT HAVE INSURANCE WHILE SWITCHING INSURANCE COMPANIES
- 8 CAN GET HEALTH CARE FOR FREE/PAY FOR OWN CARE
- 91 OTHER (SPECIFY: _____)
- 7 REFUSED
- 8 DON'T KNOW

If = 2, goto 'QA21_H85'

'QA21_H85' [AH141]– Was this due to a lost job, reduction in hours, change in employer, or something else?

¿Fue esto debido a la pérdida del empleo, la reducción de horas de trabajo, el cambio de empleador u otro motivo?

- 1 Lost job
- 1 *Pérdida del empleo*
- 2 Reduction in hours
- 2 *Reducción de horas de trabajo*
- 3 Change in employer
- 3 *Cambio de empleador*
- 91 Something else (Specify: _____)
- 91 *Otro motivo (Especifique: _____)*
- 7 REFUSED
- 8 DON'T KNOW

'QA21_H86' [AH75] - During the time that you have been uninsured, have you tried to find health insurance on your own?

Durante el tiempo que usted no ha tenido seguro, ¿ha tratado de encontrar seguro de salud por su cuenta?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_H87' [AI27] - Were you covered by health insurance at any time during the past 12 months?

¿Tuvo cobertura de un seguro de salud en algún momento durante los últimos 12 meses?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 1, goto 'QA21_H89'

'QA21_H88' [AI28] - How long has it been since you last had health insurance?

¿Cuánto tiempo hace desde la última vez que tuvo seguro de salud?

- 1 MORE THAN 12 MONTHS AGO, BUT NOT MORE THAN 3 YEARS
- 2 MORE THAN 3 YEARS
- 3 NEVER HAD HEALTH INSURANCE
- 7 REFUSED
- 8 DON'T KNOW

If = 1, 2, 3, -7, -8, goto 'PN_QA21_H91'

'QA21_H89' [AI29] - For how many months out of the last 12 months did you have health insurance?

¿Por cuántos meses de los últimos 12 meses tuvo usted seguro de salud?

[IF LESS THAN ONE MONTH BUT MORE THAN 0 DAYS, ENTER 1]

_____ MONTHS [HR: 0-12]

If =0, goto 'PN_QA21_H91'

- 7 REFUSED
- 8 DON'T KNOW

'QA21_H90' [AI30] - During that time when you had health insurance, was your insurance Medi-CAL, a plan you obtained from an employer, a plan you purchased directly from an insurance company, a plan you purchased through Covered California, or some other plan?

Durante ese tiempo en que tenía seguro de salud, ¿era el seguro que tenía Medi-CAL, Healthy Families, un plan que obtuvo a través de un empleador, un plan que compró directamente a una compañía de seguros, un plan que compró mediante Covered California o era otro plan?

[CODE ALL THAT APPLY]

[PROBE: 'Any others?']

[PROBE: '¿Algún otro?']

- 1 MEDI-CAL
- 3 THROUGH CURRENT OR FORMER EMPLOYER OR UNION
- 5 PURCHASED DIRECTLY
- 6 COVERED CALIFORNIA
- 91 OTHER HEALTH PLAN
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_H91' :

IF ARINSURE ≠ 1 OR 'QA21_H74' = 2 OR ARDIRECT = 1 OR 'QA21_H90' = (5, 6) OR 'QA21_H74' = (5, 6) OR ARHBEX = 1 OR SPHBEX = 1; THEN CONTINUE WITH 'QA21_H91' ;

ELSE GO TO PROGRAMMING NOTE 'QA21_H108'

IF PROXY=1, GO TO 'QA21_H109'

'QA21_H91' [AH103h] - In the past 12 months, did you try to purchase a health insurance plan directly from an insurance company or HMO, or through Covered California?

En los últimos 12 meses, ¿trató de comprar un plan de seguro de salud directamente a una compañía de seguros o HMO, o mediante Covered California?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto 'PN_QA21_H110'

'QA21_H92' [AH110h] - Was that directly from an insurance company or HMO, or through Covered California, or both from an insurance company and through Covered California?

¿Fue directamente a una compañía de seguros o HMO, o mediante Covered California, o tanto de una compañía de seguros como mediante Covered California?

- 1 DIRECTLY FROM AN INSURANCE COMPANY OR HMO
- 2 THROUGH COVERED CALIFORNIA
- 3 BOTH FROM AN INSURANCE COMPANY AND THROUGH COVERED CALIFORNIA
- 7 REFUSED
- 8 DON'T KNOW

If = -7, -8, goto 'QA21_H95'

'AH111h'PROGRAMMING NOTE 'QA21_H93' :

**IF 'QA21_H92' = 1; THEN CONTINUE WITH 'QA21_H93' ;
IF 'QA21_H92' = 3; THEN CONTINUE WITH 'QA21_H93' AND DISPLAY "First, think about your experience trying to purchase insurance directly from an insurance company or HMO."
ELSE GO TO PROGRAMMING NOTE 'QA21_H97' ;**

'QA21_H93' [AH98h] - {First, think about your experience trying to purchase insurance directly from an insurance company or HMO.}

{Primero, piense en su experiencia al intentar comprar un seguro directamente a una compañía de seguros o HMO.}

How difficult was it to find a plan with the coverage you needed? Was it...

¿Cuánta dificultad tuvo para encontrar un plan con la cobertura que necesitaba?

- 01 VERY DIFFICULT
- 02 SOMEWHAT DIFFICULT
- 03 NOT TOO DIFFICULT
- 04 NOT AT ALL DIFFICULT
- 7 REFUSED
- 8 DON'T KNOW

'QA21_H94' [AH99h] - How difficult was it to find a plan you could afford? Was it...

¿Cuánta dificultad tuvo para encontrar un plan que pudiera pagar?

- 01 VERY DIFFICULT
- 02 SOMEWHAT DIFFICULT
- 03 NOT TOO DIFFICULT
- 04 NOT AT ALL DIFFICULT
- 7 REFUSED
- 8 DON'T KNOW
- 7 REFUSED
- 8 DON'T KNOW

'QA21_H95' [AH100h] - Did anyone help you find a health plan?

¿Le ayudó alguien a encontrar un plan de seguro de salud?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto 'PN_QA21_H97'

'QA21_H96' [AH101h] - Who helped you?

¿Quién le ayudó?

- 1 BROKER
- 2 FAMILY MEMBER/FRIEND
- 3 INTERNET
- 91 OTHER (SPECIFY: _____)
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_H97' :

IF 'QA21_H92' = 2; THEN CONTINUE WITH 'QA21_H97' ;

IF 'QA21_H92' = 3; THEN CONTINUE WITH 'QA21_H97' AND DISPLAY "Now, think about your experience with Covered California."

ELSE GO TO PROGRAMMING NOTE 'QA21_H91' ;

'QA21_H97' [AH111h] - {Now, think about your experience with Covered California.}

{Ahora, piense en su experiencia con Covered California.}

How difficult was it to find a plan with the coverage you needed through Covered California? Was it...

¿Qué tan difícil fue encontrar un plan mediante Covered California con la cobertura que usted necesitaba?

- 01 VERY DIFFICULT
- 02 SOMEWHAT DIFFICULT
- 03 NOT TOO DIFFICULT
- 04 NOT AT ALL DIFFICULT
- 7 REFUSED
- 8 DON'T KNOW
- 7 REFUSED
- 8 DON'T KNOW

'QA21_H98' [AH112h] - How difficult was it to find a plan you could afford? Was it...

¿Qué tan difícil fue encontrar un plan que pudiera pagar?

- 01 VERY DIFFICULT
- 02 SOMEWHAT DIFFICULT
- 03 NOT TOO DIFFICULT
- 04 NOT AT ALL DIFFICULT
- 7 REFUSED
- 8 DON'T KNOW
- 7 REFUSED
- 8 DON'T KNOW

'QA21_H99'[AH113h] - Did anyone help you find a health plan?

¿Le ayudó alguien a encontrar un plan de salud?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto 'QA21_H101'

'QA21_H100' [AH114h] - Who helped you?

¿Quién le ayudó?

- 1 BROKER
- 2 FAMILY MEMBER/FRIEND
- 3 INTERNET
- 4 CERTIFIED ENROLLMENT COUNSELOR
- 91 OTHER (SPECIFY: _____)
- 7 REFUSED
- 8 DON'T KNOW

'QA21_H101' [AH115h] - Did you have all the information you felt you needed to make a good decision on a health plan?

¿Tenía toda la información que usted creyó que necesitaba para tomar una buena decisión respecto a un plan de salud?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_H102' :
IF 'QA21_A22' > 1 (R SPEAKS ENGLISH LESS THAN VERY WELL), THEN CONTINUE WITH 'QA21_H102' ;ELSE GO TO 'QA21_H103' ;

'QA21_H102' [AH116h] - Were you able to get information about your health plan options in your language?

¿Pudo obtener información en su idioma acerca de sus opciones de plan de salud?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_H103' [AH117h] - Was the cost of the plan you selected very important, somewhat important, or not important in choosing your plan?

Al seleccionar su plan, ¿fue el costo del plan que seleccionó muy importante, algo importante o nada importante?

- 1 VERY IMPORTANT
- 2 SOMEWHAT IMPORTANT
- 3 NOT IMPORTANT
- 7 REFUSED
- 8 DON'T KNOW

'QA21_H104'[AH118h] - Was getting care from a specific doctor very important, somewhat important, or not important in choosing your plan?

Al seleccionar su plan, ¿recibir atención de un doctor en particular fue muy importante, algo importante o nada importante?

- 1 VERY IMPORTANT
- 2 SOMEWHAT IMPORTANT
- 3 NOT IMPORTANT
- 7 REFUSED
- 8 DON'T KNOW

'QA21_H105' [AH119h] - Was getting care from a specific hospital very important, somewhat important, or not important in choosing your plan?

Al seleccionar su plan, ¿obtener atención de un hospital en particular fue muy importante, algo importante o nada importante?

- 1 VERY IMPORTANT
- 2 SOMEWHAT IMPORTANT
- 3 NOT IMPORTANT
- 7 REFUSED
- 8 DON'T KNOW

'QA21_H106' [AH120h] - Was the choice of doctor's in the plan's network very important, somewhat important, or not important in choosing your plan?

Al seleccionar su plan, ¿la opción de doctores en la red del plan fue muy importante, algo importante o nada importante?

- 1 VERY IMPORTANT
- 2 SOMEWHAT IMPORTANT
- 3 NOT IMPORTANT
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_H107' :
IF 'QA21_H21' = 1 THEN DISPLAY "Bronze"
ELSE IF 'QA21_H21' = 2 THEN DISPLAY "Silver"
ELSE IF 'QA21_H21' = 3 THEN DISPLAY "Gold"
ELSE IF 'QA21_H21' = 4 THEN DISPLAY "Platinum"
ELSE IF 'QA21_H21' = 6 THEN DISPLAY "Minimum coverage"
ELSE DISPLAY "";

'QA21_H107' [AH121h] - Finally, what was the most important reason you chose your {Bronze/Silver/Gold/Platinum/Minimum coverage} plan?

Finalmente, ¿cuál fue la razón más importante al seleccionar su plan {Bronce/Plata/Oro/Platino / Cobertura mínima}?

Was it the cost, that you could get care from a specific doctor, that you could go to a certain hospital, the choice of providers in your plan's network, or was it something else?

¿Fue el costo, el poder obtener atención de un doctor en particular, el poder ir a un hospital en particular, la opción de profesionales de la salud en la red de su plan o fue otra razón?

- 1 COST
- 2 SPECIFIC DOCTOR
- 3 SPECIFIC HOSPITAL
- 4 CHOICE OF DOCTORS IN NETWORK
- 91 OTHER (SPECIFY: _____)
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_H108':
IF ARINSURE = 1, CONTINUE WITH 'QA21_H108';
ELSE SKIP TO 'QA21_H109';
IF PROXY=1, GO TO 'QA21_H110'

'QA21_H108' [AH139] - Overall, how satisfied are you with your current health insurance plan? Are you...

En general, ¿qué tan satisfecho(a) está usted con su plan de seguro salud actual?

- 01 VERY SATISFIED
- 02 SOMEWHAT SATISFIED
- 03 SOMEWHAT DISSATISFIED, OR
- 04 VERY DISSATISFIED?
- 7 REFUSED
- 8 DON'T KNOW

'QA21_H109' [AH14] - During the past 12 months, were you a patient in a hospital overnight or longer?

Durante los últimos 12 meses, ¿fue usted paciente en un hospital durante la noche o por más tiempo?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_H110':
IF ARMCAL =1 OR ARINSURE ≠ 1, SKIP TO 'QA21_H112';
ELSE IF 'QA21_H75' = 1 (COVERAGE IN THE PAST 12 MONTHS) DISPLAY "The following questions are about your current health plan", AND CONTINUE WITH 'QA21_H110'

'QA21_H110' [AH79B] - {The following questions are about your current health plan.}

While you've had your current health plan, have you ever reached the limit of what your insurance company would pay for?

{Las preguntas que siguen son sobre su plan de salud actual.} ¿Mientras tenía su plan de salud actual, alcanzó el límite de lo que su compañía de seguros pagaría?

[IF NEEDED, SAY: 'ever for your current health plan.']

[IF NEEDED, SAY: 'alguna vez lo alcanzó con su plan de salud actual.']

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto 'QA21_H112'

'QA21_H111' [AH80B] - Did this happen in the past 12 months?

¿Esto sucedió en los últimos 12 meses?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_H112' [AH81B] - During the past 12 months, did you have medical bills that you had problems paying or were unable to pay, either for yourself or any family member in your household?

En los últimos 12 meses, ¿tuvo problemas para pagar o no pudo pagar facturas médicas, ya sea para usted o para cualquier miembro de su hogar?

[IF NEEDED, SAY: 'Dental bills should be included.']

[IF NEEDED, SAY: 'Deben incluirse las facturas por atención dental.']

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto PN_'QA21_I1'

'QA21_H113' [AH83B] - What is the total amount of medical bills?

¿Cuál es el monto total de las facturas médicas?

[IF NEEDED, SAY: 'The bills can be from earlier years as well as this year.']

[IF NEEDED, SAY: 'Las facturas pueden ser de años anteriores y también de este año.']

- 1 LESS THAN \$1,000
- 2 \$1,000 TO LESS THAN \$2,000
- 3 \$2,000 TO LESS THAN \$4,000
- 4 \$4,000 TO LESS THAN \$8,000
- 5 \$8,000 OR MORE
- 6 NONE
- 7 REFUSED
- 8 DON'T KNOW

'QA21_H114' [AH84B] - Were you or your family member uninsured at the time care was provided?

¿Usted o el miembro de su familia no tenía seguro de salud en el momento en que recibió atención?

- 1 YES
- 2 NO
- 3 MORE THAN ONE PERSON WITH MEDICAL BILL PROBLEMS, SOME UNINSURED AND SOME INSURED.
- 7 REFUSED
- 8 DON'T KNOW

'QA21_H115' [AH85B] - Because of these medical bills, were you unable to pay for basic necessities like food, heat, or rent?

Debido a estas facturas médicas, ¿no pudo pagar necesidades básicas como alimentos, calefacción o la renta?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_H116' [AH86B] - Because of these medical bills, did you take on credit card debt?

Debido a estas facturas médicas, ¿contrajo una deuda con la tarjeta de crédito?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

Section I: Child and Adolescent Health Insurance

PROGRAMMING NOTE 'QA22_I1' :
IF NO SELECTED CHILD, GO TO PROGRAMMING NOTE 'QA22_I36' TO ASK ABOUT SELECTED ADOLESCENT;
IF ARINSURE ≠ 1, GO TO PROGRAMMING NOTE 'QA22_I2' ;
ELSE CONTINUE WITH 'QA22_I1'
IF TSE=1, DISPLAY “ Does (CHILD) have the same health insurance as you?”
IF TSE=2, DISPLAY “These next questions are about health insurance (CHILD) may have. Does (CHILD) have the same insurance as you?”

'QA22_I1' [CF10A] - {{ Does (CHILD) have the same health insurance as you?/These next questions are about health insurance (CHILD) may have.

Does (CHILD) have the same health insurance as you?}}

{{ ¿ Tiene (CHILD) el mismo seguro de salud que tiene usted?/ Las preguntas que siguen son acerca del seguro de salud que (CHILD) pueda tener. ¿ Tiene (CHILD) el mismo seguro de salud que tiene usted?}}

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 1, goto 'QA21_I18'

POST-NOTE 'QA21_I1' :

IF 'QA21_I1' = 1 AND ARMCARE = 1, SET CHMCARE = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;

IF 'QA21_I1' = 1 AND ARMCAL = 1, SET CHMCAL = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;

IF 'QA21_I1' = 1 AND AREMPOWN = 1, SET CHEMP = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;

IF 'QA21_I1' = 1 AND AREMPSP = 1, SET CHEMP = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;

IF 'QA21_I1' = 1 AND AREMPPAR = 1, SET CHEMP = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;

IF 'QA21_I1' = 1 AND AREMPOTH = 1, SET CHEMP = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;

IF 'QA21_I1' = 1 AND ARDIRECT = 1, SET CHDIRECT = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;

IF 'QA21_I1' = 1 AND ARMILIT = 1, SET CHMILIT = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;

IF 'QA21_I1' = 1 AND AROTHGOV = 1, SET CHOTHGOV = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;

IF 'QA21_I1' = 1 AND AROTHER = 1, SET CHOTHER = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;

IF 'QA21_I1' = 1 AND ARIHS = 1, SET CHIHS = 1

IF 'QA21_I1' = 1 AND ARHBEX = 1, SET CHHBEX = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;

PROGRAMMING NOTE 'QA21_I2' :
IF SPINSURE ≠ 1, THEN SKIP TO 'QA21_I3' ;
ELSE IF 'QA21_I1' = 2 AND ARSAMESP = 1, THEN SKIP TO 'QA21_I3' ;
ELSE CONTINUE WITH 'QA21_I2'

'QA21_I2' [MA1] - Does (CHILD) have the same insurance as {your spouse/your partner/SPOUSE NAME/ PARTNER NAME}?

¿Tiene (CHILD) el mismo seguro que tiene su {esposo(a)/pareja}?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 1, goto 'QA21_I18'

IF 'QA21_I2' = 1 AND SPOTHGOV = 1, SET CHOTHGOV = 1 AND SET CHINSURE = 1 AND SPSAMECH=1;

IF 'QA21_I2' = 1 AND SPIHS = 1, SET CHIHS = 1

IF 'QA21_I2' = 1 AND SPHBEX = 1, SET CHHBEX = 1 AND SET CHINSURE = 1 AND SPSAMECH=1;

IF 'QA21_I2' = 1 AND SPARPAR = 1, THEN SET CHOTHER = 1 AND SET CHINSURE = 1 AND SPSAMECH = 1

IF 'QA21_I2' = 1 AND SPEMPSP = 1, SET CHEMP = 1 AND SET CHINSURE = 1 AND SPSAMECH=1;

IF 'QA21_I2' = 1 AND SPEMPAR = 1, SET CHEMP = 1 AND SET CHINSURE = 1 AND

SPSAMECH=1;

IF 'QA21_I2' = 1 AND SPEMPOTH = 1, SET CHEMP = 1 AND SET CHINSURE = 1 AND

SPSAMECH=1;

IF 'QA21_I2' = 1 AND SPDIRECT = 1, SET CHDIRECT = 1 AND SET CHINSURE = 1 AND

SPSAMECH=1;

IF 'QA21_I2' = 1 AND SPMILIT = 1, SET CHMILIT = 1 AND SET CHINSURE = 1 AND SPSAMECH=1;

IF 'QA21_I2' = 1 AND SPOTHER = 1, SET CHOTHER = 1 AND SET CHINSURE = 1 AND

SPSAMECH=1;

POST-NOTE 'QA21_I2' :

IF 'QA21_I2' = 1 AND SPMCARE = 1, SET CHMCARE = 1 AND SET CHINSURE = 1 AND SPSAMECH=1;

IF 'QA21_I2' = 1 AND SPMCAL = 1, SET CHMCAL = 1 AND SET CHINSURE = 1 AND

SPSAMECH=1;

IF 'QA21_I2' = 1 AND SPEMPOWN = 1, SET CHEMP = 1 AND SET CHINSURE = 1 AND

SPSAMECH=1;

'QA21_I3' [CF1] - Is {he/she} currently covered by Medi-CAL?

¿Está {él/ella} cubierto(a) actualmente por Medi-CAL?

[IF NEEDED, SAY: " Medi-Cal is a health insurance program for low-income individuals in California."]

[IF NEEDED, SAY: Medi-Cal es un programa de seguro de salud para personas de bajos ingresos en California.]

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

POST-NOTE 'QA21_I3' :

IF 'QA21_I3' = 1, SET CHMCAL = 1 AND SET CHINSURE = 1

'QA21_I4' [CF3] - Is (CHILD) covered by a health insurance plan or HMO through your own or someone else's employment or union?

¿Está cubierto(a) (CHILD) por un plan de seguro de salud o HMO a través del empleo o sindicato suyo o de alguna otra persona?

[INTERVIEW NOTE: CODE 'YES' IF R MENTIONS 'SHOP' PROGRAM THROUGH COVERED CALIFORNIA]

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto 'PN_QA21_I6'

POST-NOTE 'QA21_I4' :

IF 'QA21_I4' = 1, SET CHEMP = 1 AND CHINSURE = 1

'QA21_I5' [AI90] - Is this plan through an employer, through a union, or through Covered California's SHOP program?

¿Es este plan mediante un empleador, mediante un sindicato o mediante el programa SHOP de Covered California?

[IF NEEDED, SAY: 'SHOP is the Small Business Health Options Program administered by Covered California']

[IF NEEDED, SAY: 'SHOP son las siglas en inglés del programa de Opciones de Salud para los Pequeños Negocios y es administrado por Covered California']

- 1 EMPLOYER
- 2 UNION
- 3 SHOP / COVERED CALIFORNIA
- 92 OTHER (SPECIFY: _____)
- 7 REFUSED
- 8 DON'T KNOW

POST-NOTE FOR 'QA21_I5' :

IF 'QA21_I5' = 3, THEN SET CHHBEX = 1

PROGRAMMING NOTE 'QA21_I6' :

IF CHINSURE = 1 THEN GO TO 'QA21_I8' ;

ELSE CONTINUE WITH 'QA21_I6'

'QA21_I6' [CF4] - Is (CHILD) covered by a health insurance plan that you purchased directly from an insurance company or HMO, or through Covered California?

¿Tiene (CHILD) cobertura de un plan de seguro de salud que usted compró directamente a una compañía de seguros o HMO, o mediante Covered California?

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[IF NEEDED, SAY: 'Do not include a plan that pays only for certain illnesses, such as cancer or stroke, or only gives you 'extra cash' if you are in a hospital']

[IF NEEDED, SAY: 'No incluya planes que solamente pagan por ciertas enfermedades como cáncer o derrame cerebral o que solamente le dan 'dinero extra' si está hospitalizado.']

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto 'PN_QA21_I12'

POST-NOTE 'QA21_I6' :

IF 'QA21_I6' = 1, SET CHDIRECT = 1 AND CHINSURE = 1

PROGRAMMING NOTE 'QA21_I7' :
IF CHDIRECT = 1, THEN CONTINUE WITH 'QA21_I7' ;
ELSE GO TO PROGRAMMING NOTE 'QA21_I8'

'QA21_I7' [AI91] - How did you purchase this health insurance – directly from an insurance company or HMO, or through Covered California?

¿Cómo compró este seguro de salud – directamente a una compañía de seguro de salud o HMO, o mediante Covered California?

- 1 INSURANCE COMPANY OR HMO
- 2 COVERED CALIFORNIA
- 91 OTHER (SPECIFY: _____)
- 7 REFUSED
- 8 DON'T KNOW

POST-NOTE FOR 'QA21_I7' :
IF 'QA21_I7' = 2, THEN SET CHHBEX = 1

PROGRAMMING NOTE 'QA21_I8'
IF CHHBEX = 1 AND CHDIRECT = 1, THEN CONTINUE WITH 'QA21_I8' ;
ELSE GO TO PROGRAMMING NOTE 'QA21_I9' ;

'QA21_I8' [AI93] - Was there a subsidy or discount on the premium for this plan?

Había un subsidio o descuento en la prima de este plan?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_I9' :IF CHEMP = 1 (EMPLOYER-BASED COVERAGE) OR CHDIRECT = 1 (PURCHASED OWN COVERAGE), CONTINUE WITH 'QA21_I9' ;ELSE GO TO 'QA21_I12'

'QA21_I9' [A154] - Do you pay any or all of the premium or cost for (CHILD)'s health plan? Do not include the cost of any co-pays or deductibles you or your family may have had to pay.

¿Paga usted una parte o toda la prima o el costo del plan de salud de (CHILD)? No incluya el costo de cualquier pago compartido o deducible que usted o su familia tengan que pagar.

[IF NEEDED, SAY: 'Copays are the partial payments you make for your health care each time you see a doctor or use the health care system, while someone else pays for your main health care coverage.']

[IF NEEDED, SAY: 'Los pagos compartidos son los pagos parciales que usted hace por la atención médica que recibe cada vez que va al doctor o usa el sistema de atención médica, mientras alguien más paga la cobertura principal de su atención médica.']

[IF NEEDED, SAY: 'A deductible is the amount you pay for medical care before your health plan starts paying.']

[IF NEEDED, SAY: 'El deducible es la cantidad que usted tiene que pagar antes de que su plan empiece a pagar por su atención médica.']

[IF NEEDED, SAY: 'Premium is the monthly charge for the cost of your health insurance plan.']

[IF NEEDED, SAY: 'Prima es el cargo mensual por el costo de su plan de seguro de salud.']

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_I10' [A150] - Does anyone else, such as an employer, a union, or professional organization pay all or some portion of the premium or cost for (CHILD)'s health plan?

¿Hay alguien más, tal como un empleador, un sindicato, o una organización profesional que pague toda o una parte de la prima o del costo del plan de salud de (CHILD)?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto 'PN_QA21_I12'

'QA21_I11' [A151] - Who else pays all or some portion of the cost for (CHILD)'s health plan?

¿Quién más paga por todo o por una parte del costo del plan de salud de (CHILD)?

[CODE ALL THAT APPLY.]

- 1 YOUR CURRENT EMPLOYER
- 2 YOUR FORMER EMPLOYER
- 3 UNION
- 4 SPOUSE'S / PARTNER'S EMPLOYER
- 5 SPOUSE'S/PARTNER'S FORMER EMPLOYER
- 6 PROFESSIONAL/FRATERNAL ORGANIZATION
- 7 MEDICAID/MEDI-CAL ASSISTANCE
- 91 OTHER
- 7 REFUSED
- 8 DON'T KNOW

'POST_QA21_I11' [POST_'QA21_I11'] -

POST-NOTE 'QA21_I11' :

IF 'QA21_I11' = 1 THRU 6, SET CHEMP = 1 AND CHDIRECT = 0;

IF 'QA21_I11' = 7, SET CHMCAL = 1

IF 'QA21_I11' = 10, SET CHHBEX = 1;

PROGRAMMING NOTE 'QA21_I12' :
IF CHINSURE = 1, GO TO PN 'QA21_I18' ;
ELSE CONTINUE WITH 'QA21_I12'

'QA21_I12' [CF6] - Is {he/she} covered by CHAMPUS/CHAMP VA, TRICARE, VA, or some other military health care?

¿Está {él/ella} cubierto(a) por CHAMPUS/CHAMP VA, TRICARE, VA o algún otro plan de salud para militares?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 1, goto 'PN_QA21_I18'

POST-NOTE 'QA21_I12' :

IF 'QA21_I12' = 1, SET CHMILIT = 1 AND CHINSURE = 1

'QA21_I13' [CF7] - Is {he/she} covered by some other government health plan such as AIM, 'Mister MIP', Healthy Kids, or something else?

¿Tiene cobertura {él/ella} de algún otro programa de salud del gobierno tal como AIM, 'Mister MIP', Healthy Kids u otro programa?

[IF NEEDED, SAY: 'AIM means Access for Infants and Mothers, Mister MIP or MRMIP means Major Risk Medical Insurance Program.']

[IF NEEDED, SAY: 'AIM significa Acceso para Niños y Madres; 'Mister MIP' o 'MRMIP' significa Programa de Seguro Médico de Alto Riesgo.']

- 1 AIM
- 2 MRMIP
- 3 HEALTHY KIDS
- 4 NO OTHER PLAN
- 91 SOMETHING ELSE (SPECIFY: _____)
- 7 REFUSED
- 8 DON'T KNOW

If = 1, 2, 3, 91, goto 'PN_QA21_I18'

POST-NOTE 'QA21_I13' :

IF 'QA21_I13' = 1 OR 2 OR 3 OR 91, SET CHOTHGOV = 1 AND CHINSURE = 1

'QA21_I14' [CF8] - Does {he/she} have any health insurance coverage through a plan that I missed?

¿Tiene {él/ella} alguna cobertura de seguro de salud a través de un plan que yo no haya mencionado?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto 'PN_QA21_I17'

'QA21_I15' [CF9] - What type of health insurance does {he/she} have? Does it come through Medi-CAL, an employer or union, or from some other source?

¿Qué tipo de seguro de salud tiene {él/ella}? ¿Es éste a través de Medi-Cal, un empleador o sindicato, o de alguna otra fuente?

[CIRCLE ALL THAT APPLY.]

[PROBE: 'Any others?']

[PROBE: '¿Algún otro?']

- 1 THROUGH CURRENT OR FORMER EMPLOYER/UNION
- 2 THROUGH SCHOOL, PROFESSIONAL ASSOCIATION, TRADE GROUP, OR OTHER ORGANIZATION
- 3 PURCHASED DIRECTLY FROM HEALTH PLAN
- 4 MEDICARE
- 5 MEDI-CAL
- 7 CHAMPUS/CHAMP-VA, TRICARE, VA OR SOME OTHER MILITARY HEALTH CARE
- 8 INDIAN HEALTH SERVICE, TRIBAL HEALTH PROGRAM OR URBAN INDIAN CLINIC
- 10 COVERED CALIFORNIA
- 11 SHOP THROUGH COVERED CALIFORNIA
- 91 OTHER GOVERNMENT HEALTH PLAN
- 92 OTHER NON-GOVERNMENT HEALTH PLAN
- 7 REFUSED
- 8 DON'T KNOW

POST-NOTE 'QA21_I15' :

IF 'QA21_I15' = 1, SET CHEMP = 1 AND CHINSURE = 1

IF 'QA21_I15' = 2, SET CHEMP = 1 AND CHINSURE = 1

IF 'QA21_I15' = 3, SET CHDIRECT = 1 AND CHINSURE = 1

IF 'QA21_I15' = 4, SET CHMCARE = 1 AND CHINSURE = 1

IF 'QA21_I15' = 5, SET CHMCAL = 1 AND CHINSURE = 1

IF 'QA21_I15' = 7, SET CHMILIT = 1 AND CHINSURE = 1

IF 'QA21_I15' = 8, SET CHIHS = 1

IF 'QA21_I15' = 10, SET CHHBEX = 1 AND CHINSURE = 1 AND CHDIRECT = 1;

IF 'QA21_I15' = 11, SET CHHBEX = 1 AND CHINSURE = 1 AND CHEMP = 1;

IF 'QA21_I15' = 91, SET CHOTHGOV = 1 AND CHINSURE = 1

IF 'QA21_I15' = 92, SET CHOTHER = 1 AND CHINSURE = 1

IF 'QA21_I15' = -7 OR -8, SET CHINSURE = 1

PROGRAMMING NOTE 'QA21_I16' :IF 'QA21_I15' = 4 (CHILD HAS MEDICARE), CONTINUE WITH 'QA21_I16' ;ELSE SKIP TO PROGRAMMING NOTE 'QA21_I17'

'QA21_I16' [CF9VER] - Just to verify, you said that (CHILD) gets health insurance through Medicare?

Sólo para verificar, ¿usted dijo que (CHILD) tiene seguro de salud a través de Medicare?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_I17' :
IF CHINSURE ≠ 1 CONTINUE WITH 'QA21_I17' ;
ELSE GO TO 'QA21_I18' ;

'QA21_I17' [CF1A] - What is the one main reason why (CHILD) is not enrolled in the Medi-CAL program?

¿Cuál es LA razón principal por la cual (CHILD) no está inscrito(a) en el programa Medi-Cal?

- 1 PAPERWORK TOO DIFFICULT
- 2 DON'T KNOW IF ELIGIBLE
- 3 INCOME TOO HIGH, NOT ELIGIBLE
- 4 NOT ELIGIBLE DUE TO CITIZENSHIP/IMMIGRATION STATUS
- 6 DON'T BELIEVE IN HEALTH INSURANCE
- 7 DO NOT NEED INSURANCE BECAUSE SHE/HE IS HEALTHY
- 8 ALREADY HAVE INSURANCE
- 9 DIDN'T KNOW ABOUT IT
- 10 DON'T LIKE OR WANT WELFARE
- 91 OTHER (SPECIFY: _____)
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_I18': IF 'QA21_I1'=1 AND ARMCARE=1, THEN CONTINUE WITH 'QA21_I18';
ELSE IF CHINSURE = 1, THEN CONTINUE WITH 'QA21_I18' ;
ELSE GO TO PN 'QA21_I22'

'QA21_I18' [MA3] - Is (CHILD)'s main health plan an HMO, that is, a Health Maintenance Organization?

¿Es el plan de salud principal de (CHILD) un HMO, que significa 'Organización para el Mantenimiento de la Salud'?

[IF NEEDED, SAY: 'HMO stands for Health Maintenance Organization. With an HMO, {he/she} must use the doctors and hospitals belonging to its network. If {he/she} goes outside the network, generally it will not be paid for unless it's an emergency.']

[IF NEEDED, SAY: '*HMO en español quiere decir Organización para el Mantenimiento de la Salud. Con una HMO, {él/ella} tiene que ir a los doctores y hospitales que pertenecen a la red de la HMO. Si {él/ella} va fuera de la red, generalmente el plan no cubre los gastos a menos que se trate de una emergencia médica.*']

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 1, goto 'QA21_I20'

PROGRAMMING NOTE 'QA21_I19' :
IF CHMCAL = 1 (CHILD HAS MEDI-CAL), GO TO 'QA21_I20' ;
ELSE CONTINUE WITH 'QA21_I19' ;

'QA21_I19' [A1115] - Is (CHILD)'s health plan a PPO or EPO?

¿Es el plan de (CHILD) una PPO o una EPO?

[IF NEEDED, SAY: 'EPO stands for Exclusive Provider Organization. With an EPO, you must use the in-network doctors and hospitals. If it's an emergency, you can see doctors and specialists directly without a referral from your primary care provider.']

[IF NEEDED, SAY: 'EPO son las siglas en inglés de Exclusive Provider Organization (Organización de Proveedores Exclusivos). Con una EPO, usted debe ir a los doctores y hospitales dentro de la red, a menos que sea una emergencia. Usted puede tener acceso a médicos y especialistas directamente sin que lo(a) refiera su profesional de cuidado médico principal.']

[IF NEEDED, SAY: 'PPO stands for Preferred Provider Organization. With a PPO, you can use any doctors and hospitals, but you pay less if you use doctors and hospitals that belong to your plan's network. Also, you can see doctors and specialists directly without a referral from your primary care provider.']

[IF NEEDED, SAY: 'PPO son las siglas en inglés de Preferred Provider Organization (Organización de Proveedores Preferidos). Con una PPO, usted puede ir a cualquier doctor y hospital, pero paga menos si va a los médicos y hospitales que pertenecen a la red de su plan. Asimismo, puede tener acceso a médicos y especialistas directamente y sin una remisión de su profesional de cuidado médico principal.']

[IF CHILD HAS MORE THAN ONE HEALTH PLAN, SAY: '{His/Her} MAIN health plan.']

[IF CHILD HAS MORE THAN ONE HEALTH PLAN, SAY: 'El plan de salud principal.']

- 1 PPO
- 2 EPO
- 91 OTHER (SPECIFY: _____)
- 7 REFUSED
- 8 DON'T KNOW

'QA21_I20' [MA2] -What is the name of (CHILD)'s main health plan?

¿Cómo se llama el plan de salud principal de (CHILD)?

[IF R HAS DIFFICULTY RECALLING NAME, THEN PROBE: 'Does (CHILD) have an insurance card or something else with the plan name on it?']

[IF R HAS DIFFICULTY RECALLING NAME, PROBE: '¿Tiene (CHILD) una tarjeta del seguro u otro documento con el nombre del plan?']

- 1 ACCESS SENIOR HEALTHCARE
- 2 AETNA
- 3 AETNA GOLDEN MEDICARE
- 4 AIDS HEALTHCARE FOUNDATION, LA
- 5 ALAMEDA ALLIANCE FOR HEALTH
- 83 ALTAMED HEALTH SERVICES
- 7 ANTHEM BLUE CROSS OF CALIFORNIA
- 8 ASPIRE HEALTH PLAN
- 9 BLUE CROSS CALIFORNIACARE
- 79 BLUE CROSS SENIOR SECURE
- 11 BLUE SHIELD 65 PLUS
- 12 BLUE SHIELD OF CALIFORNIA
- 13 BRAND NEW DAY (UNIVERSAL CARE)
- 14 CALIFORNIA HEALTH AND WELLNESS PLAN
- 15 CALIFORNIAKIDS (CALKIDS)
- 16 CAL OPTIMA (CALOPTIMA ONE CARE)
- 17 CALVIVA HEALTH
- 18 CARE 1ST HEALTH PLAN
- 19 CAREMORE HEALTH PLAN
- 21 CENTER FOR ELDER'S INDEPENDENCE
- 80 CEN CAL HEALTH
- 22 CENTRAL CALIFORNIA ALLIANCE FOR HEALTH
- 23 CENTRAL HEALTH PLAN
- 24 CHINESE COMMUNITY HEALTH PLAN
- 25 CHOICE PHYSICIANS NETWORK
- 26 CIGNA HEALTHCARE
- 27 CITIZENS CHOICE HEALTHPLAN
- 28 COMMUNITY CARE HEALTH PLAN
- 29 COMMUNITY HEALTH GROUP
- 81 CONTRA COSTA HEALTH PLAN
- 31 DAVITA HEALTHCARE PARTNERS PLAN
- 32 EASY CHOICE HEALTH PLAN
- 33 EPIC HEALTH PLAN
- 34 GEM CARE HEALTH PLAN
- 35 GOLD COAST HEALTH PLAN
- 36 GOLDEN STATE MEDICARE HEALTH PLAN
- 38 HEALTH NET
- 39 HEALTH NET SENIORITY PLUS
- 40 HEALTH PLAN OF SAN JOAQUIN
- 41 HEALTH PLAN SAN JP AUTHORITY
- 42 HERITAGE PROVIDER NETWORK
- 43 HUMANA GOLD PLUS
- 44 HUMANA HEALTH PLAN
- 45 IEHP (INLAND EMPIRE HEALTH PLAN)
- 46 INTER VALLEY HEALTH PLAN
- 82 HEALTH ADVANTAGE

- 47 KAISER PERMANENTE
- 48 KAISER PERMANENTE SENIOR ADVANTAGE
- 49 KERN FAMILY HEALTH CARE
- 50 L.A. CARE HEALTH PLAN
- 51 MD CARE
- 54 MOLINA HEALTHCARE OF CALIFORNIA
- 55 MONARCH HEALTH PLAN
- 56 ON LOK SENIOR HEALTH SERVICES
- 57 PARTNERSHIP HEALTHPLAN OF CALIFORNIA
- 58 PIH HEALTH CARE SOLUTIONS
- 59 PREMIER HEALTH PLAN SERVICES
- 60 PRIMECARE MEDICAL NETWORK
- 61 PROVIDENCE HEALTH NETWORK
- 68 SCRIPPS HEALTH PLAN SERVICES
- 69 SEASIDE HEALTH PLAN
- 84 SAN FRANCISCO HEALTH PLAN
- 90 SANTA CLARA FAMILY HEALTH PLAN
- 86 SAN MATEO HEALTH COMMISION
- 88 SANTA BARBARA
- 92 SATELLITE HEALTH PLAN
- 67 SCAN HEALTH PLAN
- 70 SHARP HEALTH PLAN
- 71 SUTTER HEALTH PLAN
- 72 SUTTER SENIOR CARE
- 73 UNITED HEALTHCARE
- 74 UNITED HEALTHCARE SECURE HORIZON
- 75 UNIVERSITY HEALTHCARE ADVANTAGE
- 76 VALLEY HEALTH PLAN
- 77 VENTURA COUNTY HEALTH CARE PLAN
- 78 WESTERN HEALTH ADVANTAGE
- 93 CHAMPUS/CHAMP-VA
- 87 TRICARE/TRICARE FOR LIFE/TRICARE PRIME
- 89 VA HEALTH CARE SERVICES
- 52 MEDI-CAL
- 53 MEDICARE
- 85 OTHER (SPECIFY: _____)
- 7 REFUSED
- 8 DON'T KNOW

POST NOTE 'QA21_I20' :
IF 'QA21_I20' = 93, 87, OR 89 THEN SET CHMILIT=1

'QA21_I21' [CF14] - Is (CHILD) covered for prescription drugs?

¿Tiene (CHILD) cobertura para medicinas recetadas?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE FOR 'QA21_I22' :
IF (ARINSURE ≠ 1 OR 'QA21_I1' ≠ 1) AND (CHEMP = 1 OR CHDIRECT = 1 OR CHOTHER = 1),
THEN
CONTINUE WITH 'QA21_I22' ;
ELSE SKIP TO PROGRAMMING NOTE 'QA21_I25'

'QA21_I22' [AI79] - Does (CHILD)'s health plan have a deductible that is more than \$1,000?

¿Tiene el plan de salud de (CHILD) un deducible de más de \$1,000 dólares?

[IF NEEDED, SAY 'A deductible is the amount you have to pay before your plan begins to pay for your medical care.']

[IF NEEDED, SAY 'El deducible es la cantidad que usted tiene que pagar antes de que su plan empiece a pagar por su atención médica.']

- 1 YES
- 2 NO
- 3 YES, BUT ONLY WHEN WE GO OUT OF NETWORK
- 7 REFUSED
- 8 DON'T KNOW

'QA21_I23' [AI80] - Does (CHILD)'s health plan have a deductible for all covered persons that is more than \$2,000?

¿Tiene el plan de salud de (CHILD) un deducible de más de \$2,000 dólares por todas las personas que tienen cobertura?

[IF NEEDED, SAY: 'A deductible is the amount you have to pay before your plan begins to pay for your medical care.']

[IF NEEDED, SAY: 'El deducible es la cantidad que usted tiene que pagar antes de que su plan empiece a pagar por su atención médica.']

- 1 YES
- 2 NO
- 3 YES, BUT ONLY WHEN WE GO OUT OF NETWORK
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_I24' :
IF ('QA21_I22' = 1 OR 3) OR ('QA21_I23' = 1 OR 3), CONTINUE WITH 'QA21_I24' ;
ELSE SKIP TO PROGRAMMING NOTE 'QA21_I25'

'QA21_I24' [AI81] - Do you have a special account or fund you can use to pay for (CHILD)'s medical expenses?

¿Tiene usted una cuenta o un fondo especial que puede utilizar para pagar gastos médicos?

[IF NEEDED, SAY: 'The accounts are sometimes referred to as Health Savings Accounts (HSAs) or Health Reimbursement Accounts (HRAs). Other similar accounts include- Personal care accounts, Personal medical funds, or Choice funds. Do not include employer-provided Flexible Spending Accounts (FSAs).']

[IF NEEDED, SAY: 'Estas cuentas se conocen a veces como Cuentas de ahorro para la salud (HSA) o Cuentas de reembolsos por salud (HRA). Otras cuentas similares son las Cuentas personales para gastos médicos, Fondos personales para gastos médicos, Fondos de beneficios o Cuentas de gastos flexibles proporcionadas por un empleador.']

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_I25' :
IF CHINSURE = 1, GO TO 'QA21_I30' ;
ELSE CONTINUE WITH 'QA21_I25'

'QA21_I25' [CF18] - What is the one main reason (CHILD) does not have any health insurance?

¿Cuál es la razón principal por la cual (CHILD) no tiene ningún seguro de salud?

- 1 CAN'T AFFORD/TOO EXPENSIVE
- 2 NOT ELIGIBLE DUE TO WORKING STATUS/CHANGED EMPLOYER/LOST JOB
- 3 NOT ELIGIBLE DUE TO HEALTH OR OTHER PROBLEMS
- 4 NOT ELIGIBLE DUE TO CITIZENSHIP/IMMIGRATION STATUS
- 5 FAMILY SITUATION CHANGED
- 6 DON'T BELIEVE IN INSURANCE
- 7 DID NOT HAVE INSURANCE WHILE SWITCHING INSURANCE COMPANIES
- 8 CAN GET HEALTH CARE FOR FREE/PAY FOR OWN CARE
- 91 OTHER (SPECIFY: _____)
- 7 REFUSED
- 8 DON'T KNOW

'QA21_I26' [CF20] - Was (CHILD) covered by health insurance at any time during the past 12 months?

Tuvo (CHILD) cobertura de un seguro de salud en algún momento durante los últimos 12 meses?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 1, goto 'QA21_I28'

'QA21_I27' [CF21] - How long has it been since (CHILD) last had health insurance?

¿Cuánto tiempo hace desde la última vez que (CHILD) tuvo seguro de salud?

- 1 MORE THAN 12 MONTHS, BUT NOT MORE THAN 3 YEARS AGO
- 2 MORE THAN 3 YEARS AGO
- 3 NEVER HAD HEALTH INSURANCE COVERAGE
- 7 REFUSED
- 8 DON'T KNOW

If = 1, 2, 3, -7, -8, goto 'PN_QA21_I36'

'QA21_I28' [CF22] - For how many of the last 12 months did {he/she} have health insurance?

¿Por cuántos meses de los últimos 12 meses tuvo {él/ella} seguro de salud?

[INTERVIEWER NOTE: IF LESS THAN ONE MONTH BUT MORE THAN 0 DAYS, ENTER 1]

_____ MONTHS [HR: 0-12]_

If = 0, goto 'PN_QA21_I36'

- 7 REFUSED
- 8 DON'T KNOW

'QA21_I29' [CF23] - During that time when (CHILD) had health insurance, was {his/her} insurance Medi-CAL, a plan you obtained through an employer, a plan you purchased directly from an insurance company, a plan you purchased through Covered California, or some other plan?

Durante ese tiempo cuando (CHILD) tenía seguro de salud, ¿era su seguro Medi-Cal, un plan que usted obtuvo a través de un empleador, un plan que compró directamente a una compañía de seguros, un plan que compró mediante Covered California o era otro plan?

[CIRCLE ALL THAT APPLY]

[PROBE: 'Any others?']

[PROBE: '¿Algún otro?']

(7 maximum responses)

- 1 MEDI-CAL
- 3 THROUGH CURRENT OR FORMER EMPLOYER/UNION
- 5 PURCHASED DIRECTLY
- 6 COVERED CALIFORNIA
- 91 OTHER HEALTH PLAN
- 7 REFUSED
- 8 DON'T KNOW

If =1, 3, 5, 6, 91, -7, -8, goto 'PN_QA21_I36'

'QA21_I30' [CF24] - Thinking about {his/her} current health insurance, did (CHILD) have this same insurance for ALL of the past 12 months?

Pensando en el seguro de salud que {él/ella} tiene actualmente, ¿tuvo (CHILD) este mismo seguro TODOS los 12 meses en los últimos 12 meses?

- 1 YES
- 2 NO
- 3 HAD SAME INSURANCE SINCE BIRTH (FOR CHILDREN LESS THAN ONE YEAR OLD)
- 7 REFUSED
- 8 DON'T KNOW

If = 1, 3, goto 'PN_QA21_I36'

'QA21_I31' [CF25] - When {he/she} wasn't covered by {his/her} current health insurance, did {he/she/he or she} have any other health insurance?

Cuando {él/ella} no tuvo cobertura de su seguro de salud actual, ¿tuvo {él/ella} algún otro seguro de salud?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto 'QA21_I33'

'QA21_I32' [CF26] - Was this other health insurance Medi-CAL, a plan you obtained from an employer, a plan you purchased directly from an insurance company, a plan you purchased through Covered California, or some other plan?

¿Era este otro seguro de salud Medi-Cal, un plan que usted obtuvo a través de un empleador, un plan que compró directamente a una compañía de seguros, un plan que compró mediante Covered California o era otro plan?

[CODE ALL THAT APPLY.]

[PROBE: 'Any others?']

[PROBE: '¿Algún otro?']

(7 maximum responses)

- 1 MEDI-CAL
- 3 THROUGH CURRENT OR FORMER EMPLOYER/UNION
- 5 PURCHASED DIRECTLY
- 6 COVERED CALIFORNIA
- 91 OTHER HEALTH PLAN
- 7 REFUSED
- 8 DON'T KNOW

'QA21_I33' [CF27] - During the past 12 months, was there any time when {he/she} had no health insurance at all?

Durante los últimos 12 meses, ¿hubo un momento en que {él/ella} no tuvo ningún seguro de salud?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto 'PN_'QA21_I36'

'QA21_I34' [CF28] - For how many of the past 12 months did {he/she} have no health insurance?

¿Por cuántos meses de los últimos 12 meses no tuvo {él/ella} seguro de salud?

[IF < 1 MONTH, ENTER '1']

_____ MONTHS [RANGE: 1-12]

- 7 REFUSED
- 8 DON'T KNOW

'QA21_I35' [CF29] - What is the one main reason (CHILD) did not have any health insurance during the time {he/she} wasn't covered?

¿Cuál fue EL motivo PRINCIPAL por el que (CHILD) no tuvo ningún seguro de salud durante ese tiempo?

[IF R SAYS, 'No need,' PROBE WHY]

- 1 CAN'T AFFORD/TOO EXPENSIVE
- 2 NOT ELIGIBLE DUE TO WORKING STATUS/CHANGED EMPLOYER/LOST JOB
- 3 NOT ELIGIBLE DUE TO HEALTH OR OTHER PROBLEMS
- 4 NOT ELIGIBLE DUE TO CITIZENSHIP/IMMIGRATION STATUS
- 5 FAMILY SITUATION CHANGED
- 6 DON'T BELIEVE IN INSURANCE
- 7 DID NOT HAVE INSURANCE WHILE SWITCHING INSURANCE COMPANIES
- 8 CAN GET HEALTH CARE FOR FREE/PAY FOR OWN CARE
- 91 OTHER (SPECIFY: _____)
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA22_I36' :
IF NO TEEN SELECTED, GO TO PN 'QA22_J1' ;
IF ARINSURE = 1, CONTINUE WITH 'QA22_I36' ;
IF ARINSURE ≠ 1, GO TO PN 'QA22_I37' ;
ELSE CONTINUE WITH 'QA22_I36'
IF TSE=1, DISPLAY “ Does (TEEN) have the same health insurance as you?”
IF TSE=2, DISPLAY “These next questions are about health insurance (TEEN) may have.
Does (TEEN) have the same insurance as you?”

'QA22_I36' [IA10A] - {{ Does (TEEN) have the same health insurance as you?/ These next questions are about health insurance (TEEN) may have.

Does (TEEN) have the same health insurance as you?}}

{{ (¿ Tiene (TEEN) el mismo seguro que tiene {usted/ADULT RESPONSE NAME}?/ Las siguientes preguntas son acerca del seguro de salud que (TEEN) pueda tener. ¿ Tiene (TEEN) el mismo seguro que tiene {usted/ADULT RESPONSE NAME}?}}

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 1, goto 'QA21_I54'

POST-NOTE 'QA21_I36' :

IF 'QA21_I36' = 1 AND ARMCARE = 1, SET TEMCARE = 1 AND SET TEINSURE = 1;

IF 'QA21_I36' = 1 AND ARMCAL = 1, SET TEMCAL = 1 AND SET TEINSURE = 1;

IF 'QA21_I36' = 1 AND AREMPOWN = 1, SET TEEMP = 1 AND SET TEINSURE = 1;

IF 'QA21_I36' = 1 AND AREMPSP = 1, SET TEEMP = 1 AND SET TEINSURE = 1;

IF 'QA21_I36' = 1 AND AREMPPAR = 1, SET TEEMP = 1 AND SET TEINSURE = 1;

IF 'QA21_I36' = 1 AND AREMPOTH = 1, SET TEEMP = 1 AND SET TEINSURE = 1;

IF 'QA21_I36' = 1 AND ARDIRECT = 1, SET TEDIRECT = 1 AND SET TEINSURE = 1;

IF 'QA21_I36' = 1 AND ARMILIT = 1, SET TEMILIT = 1 AND SET TEINSURE = 1;

IF 'QA21_I36' = 1 AND AROTHGOV = 1, SET TEOTHGOV = 1 AND SET TEINSURE = 1;

IF 'QA21_I36' = 1 AND AROTHGOV = 1, SET TEOTHER = 1 AND SET TEINSURE = 1;

IF 'QA21_I36' = 1 AND ARIHS = 1, SET TEIHS = 1

IF 'QA21_I36' = 1 AND ARHBEX = 1, SET TEHBEX = 1 AND SET TEINSURE = 1;

PROGRAMMING NOTE 'QA21_I37' :
IF SPINSURE ≠ 1 THEN SKIP TO 'QA21_I38' ;
ELSE IF 'QA21_I36' = 2 AND ARSAMESP = 1 THEN SKIP TO PROGRAMMING NOTE 'QA21_I38' ;
ELSE CONTINUE WITH 'QA21_I37'

'QA21_I37' [MA5] - Does (TEEN) have the same insurance as your spouse?

¿Tiene (TEEN) el mismo seguro que tiene su esposo(a)?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 1, goto 'QA21_I54'

POST-NOTE 'QA21_I37' :

IF 'QA21_I37' = 1 AND SPMCARE = 1, SET TEMCARE = 1 AND SET TEINSURE = 1;

IF 'QA21_I37' = 1 AND SPMCAL = 1, SET TEMCAL = 1 AND SET TEINSURE = 1;

IF 'QA21_I37' = 1 AND SPEMPOWN = 1, SET TEEMP = 1 AND SET TEINSURE = 1;

IF 'QA21_I37' = 1 AND SPEMPSP = 1, SET TEEMP = 1 AND SET TEINSURE = 1;

IF 'QA21_I37' = 1 AND SPEMPAR = 1, SET TEEMP = 1 AND SET TEINSURE = 1;

IF 'QA21_I37' = 1 AND SPEMPOTH = 1, SET TEEMP = 1 AND SET TEINSURE = 1;

IF 'QA21_I37' = 1 AND SPDIRECT = 1, SET TEDIRECT = 1 AND SET TEINSURE = 1;

IF 'QA21_I37' = 1 AND SPMILIT = 1, SET TEMILIT = 1 AND SET TEINSURE = 1;

IF 'QA21_I37' = 1 AND SPOTHGOV = 1, SET TEOTHGOV = 1 AND SET TEINSURE = 1;

IF 'QA21_I37' = 1 AND SPOTHER = 1, SET TEOTHER = 1 AND SET TEINSURE = 1;

IF 'QA21_I37' = 1 AND SPIHS = 1, SET TEIHS = 1

IF 'QA21_I37' = 1 AND SPHBEX = 1, SET TEHBEX = 1 AND SET TEINSURE = 1;

IF 'QA21_I37' = 1 AND SPARPAR = 1, THEN SET TEOTHER = 1 AND SET TEINSURE = 1 AND

SPSAMETE = 1

PROGRAMMING NOTE 'QA21_I38' :
IF TEINSURE ≠ 1 OR CHINSURE ≠ 1, THEN SKIP TO 'QA21_I39' ;
ELSE IF ('QA21_I36' = 2 AND ARSAMECH = 1) OR ('QA21_I37' = 2 AND SPSAMECH = 1), THEN
SKIP TO 'QA21_I39' ;
ELSE CONTINUE WITH 'QA21_I38' ;

'QA21_I38' [MA6] - Does (TEEN) have the same insurance as (CHILD)?

¿Tiene (TEEN) el mismo seguro que tiene (CHILD)?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 1, goto 'QA21_I66'

POST-NOTE 'QA21_I38' :

IF 'QA21_I38' = 1 AND CHMCARE = 1, SET TEMCARE = 1 AND SET TEINSURE = 1;

IF 'QA21_I38' = 1 AND CHMCAL = 1, SET TEMCAL = 1 AND SET TEINSURE = 1;

IF 'QA21_I38' = 1 AND CHEMP = 1, SET TEEMP = 1 AND SET TEINSURE = 1;

IF 'QA21_I38' = 1 AND CHDIRECT = 1, SET TEDIRECT = 1 AND SET TEINSURE = 1;

IF 'QA21_I38' = 1 AND CHMILIT = 1, SET TEMILIT = 1 AND SET TEINSURE = 1;

IF 'QA21_I38' = 1 AND CHOTHGOV = 1, SET TEOTHGOV = 1 AND SET TEINSURE = 1;

IF 'QA21_I38' = 1 AND CHIHS = 1, SET TEIHS = 1;

IF 'QA21_I38' = 1 AND CHOTHER = 1, SET TEOTHER = 1;

IF 'QA21_I38' = 1 AND CHHBEX = 1, SET TEHBEX = 1

'QA21_I39' [IA1] - Is {he/she} currently covered by Medi-CAL?

¿Tiene {él/ella} cobertura de Medi-CAL?

[IF NEEDED, SAY: " Medi-Cal is a health insurance program for low-income individuals in California "]

[IF NEEDED, SAY: 'Medi-Cal es un programa de seguro de salud para personas de bajos ingresos en California.']

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

POST-NOTE 'QA21_I39' :

IF 'QA21_I39' = 1, SET TEMCAL = 1 AND SET TEINSURE = 1

'QA21_I40' [IA3] - Is (TEEN) covered by a health insurance plan or HMO through your own or someone else's employment or union?

¿Tiene (TEEN) cobertura de un plan de seguro de salud o HMO a través del empleador o sindicato suyo o de otra persona?

[INTERVIEW NOTE: CODE 'YES' IF R MENTIONS 'SHOP' PROGRAM THROUGH COVERED CALIFORNIA]

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto 'QA21_I42'

POST-NOTE 'QA21_I40' :

IF 'QA21_I40' = 1, SET TEEMP = 1 AND SET TEINSURE = 1

'QA21_I41' [AI94] - Is this plan through an employer, through a union, or through Covered California's SHOP program?

¿Es este plan mediante un empleador, mediante un sindicato o mediante el programa SHOP de Covered California?

[IF NEEDED, SAY: 'SHOP is the Small Business Health Options Program administered by Covered California']

[IF NEEDED, SAY: SHOP son las siglas en inglés del programa de Opciones de Salud para los Pequeños Negocios y es administrado por Covered California. ']

- 1 EMPLOYER
- 2 UNION
- 3 SHOP / COVERED CALIFORNIA
- 92 OTHER (SPECIFY: _____)
- 7 REFUSED
- 8 DON'T KNOW

POST-NOTE FOR 'QA21_I41' :

IF 'QA21_I41' = 3, THEN SET TEHBEX = 1

PROGRAMMING NOTE 'QA21_I42' :
IF TEINSURE = 1 THEN GO TO 'QA21_I43' ;
ELSE CONTINUE WITH 'QA21_I42'

'QA21_I42' [IA4] - Is (TEEN) covered by a health insurance plan that you purchased directly from an insurance company or HMO?

¿Tiene (TEEN) cobertura de un plan de seguro de salud que usted compró directamente a una compañía de seguros o HMO, o mediante Covered California?

[IF NEEDED, SAY: 'Do not include a plan that pays only for certain illnesses such as cancer or stroke, or only gives you 'extra cash' if you are in a hospital']

[IF NEEDED, SAY: 'No incluya planes que solamente pagan por ciertas enfermedades como cáncer o derrame cerebral o que solamente le dan 'dinero extra' si está hospitalizado(a).']

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto 'QA21_I48'

POST-NOTE 'QA21_I42' :

IF 'QA21_I42' = 1, SET TEDIRECT = 1 AND SET TEINSURE = 1

PROGRAMMING NOTE 'QA21_I43' :
IF TEDIRECT = 1, THEN CONTINUE WITH 'QA21_I43' ;
ELSE GO TO PROGRAMMING NOTE 'QA21_I44'

'QA21_I43' [AI95] - How did you purchase this health insurance – directly from an insurance company or HMO, or through Covered California?

¿Cómo compró este seguro de salud – directamente a una compañía de seguro de salud o HMO, o mediante Covered California?

- 1 INSURANCE COMPANY OR HMO
- 2 COVERED CALIFORNIA
- 91 OTHER (SPECIFY: _____)
- 7 REFUSED
- 8 DON'T KNOW

POST-NOTE FOR 'QA21_I43' :

IF 'QA21_I43' = 2, THEN SET TEHBEX = 1

PROGRAMMING NOTE 'QA21_I44'
IF 'QA21_I41' = 3, THEN GO TO PN 'QA21_I45' ;
ELSE CONTINUE WITH 'QA21_I44' ;

'QA21_I44' [AI97] - Was there a subsidy or discount on the premium for this plan?

¿Había un subsidio o descuento en la prima de este plan?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_I45' :
IF TEEMP = 1 (EMPLOYER-BASED COVERAGE) OR TEDIRECT = 1 (PURCHASED OWN
COVERAGE), CONTINUE WITH 'QA21_I45' ;
ELSE GO TO PROGRAMMING NOTE 'QA21_I48'

'QA21_I45' [AI55] - Do you pay any or all of the premium or cost for (TEEN)'s health plan? Do not include the cost of any co-pays or deductibles you or your family may have had to pay.

¿Paga usted una parte o toda la prima o el costo del plan de salud de (TEEN)? No incluya el costo de cualquier pago compartido o deducible que usted o su familia tengan que pagar.

[IF NEEDED, SAY: 'Copays are the partial payments you make for your health care each time you see a doctor or use the health care system, while someone else pays for your main health care coverage.']

[IF NEEDED, SAY: 'Los pagos compartidos son los pagos parciales que usted hace por la atención médica que recibe cada vez que va al doctor o usa el sistema de atención médica, mientras alguien más paga por la cobertura principal de su atención médica.']

[IF NEEDED, SAY: 'A deductible is the amount you pay for medical care before your health plan starts paying.']

[IF NEEDED, SAY: 'El deducible es la cantidad que usted paga por la atención médica antes de que su plan de salud empiece a pagar.']

[IF NEEDED, SAY: 'Premium is the monthly charge for the cost of your health insurance plan.']

[IF NEEDED, SAY: 'Prima es el cargo mensual por el costo de su plan de seguro de salud.']

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_I46' [AI52] - Does anyone else, such as an employer, a union, or professional organization pay all or some portion of the premium or cost for (TEEN)'s health plan?

¿Hay alguien más, tal como un empleador, un sindicato o una organización profesional que pague toda o parte de la prima o del costo del plan de salud de (TEEN)?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto 'PN_QA21_I48'

'QA21_I47' [AI53] - Who else pays all or some portion of the cost for (TEEN)'s health plan?

¿Quién más paga todo o una parte del costo del plan de salud de (TEEN)?

[CODE ALL THAT APPLY.]

- 1 YOUR CURRENT EMPLOYER
- 2 YOUR FORMER EMPLOYER
- 3 UNION
- 4 SPOUSE'S / PARTNER'S EMPLOYER
- 5 SPOUSE'S/PARTNER'S FORMER EMPLOYER
- 6 PROFESSIONAL/FRATERNAL ORGANIZATION
- 7 MEDICAID/MEDI-CAL ASSISTANCE
- 91 OTHER
- 7 REFUSED
- 8 DON'T KNOW

POST-NOTE 'QA21_I47' :

IF 'QA21_I47' = 1-6, SET TEEMP = 1 AND TEDIRECT = 0;

IF 'QA21_I47' = 7, SET TEMCAL = 1;

IF 'QA21_I47' = 10, SET TEHBEX = 1;

PROGRAMMING NOTE 'QA21_I48' :

IF TEINSURE = 1, GO TO PROGRAMMING NOTE 'QA21_I53' ;

ELSE CONTINUE WITH 'QA21_I48'

'QA21_I48' [IA6] - Is {he/she} covered by CHAMPUS/CHAMP VA, TRICARE, VA, or some other military health care?

¿Tiene {él/ella} cobertura de CHAMPUS/CHAMP VA, Tricare, VA o algún otro plan de salud para militares?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 1, goto 'PN_QA21_I54'

POST-NOTE 'QA21_I48' :

IF 'QA21_I48' = 1, SET TEMILIT = 1 AND SET TEINSURE = 1

'QA21_I49' [IA7] - Is {he/she} covered by some other government health plan such as AIM, 'Mister MIP', Family PACT, Healthy Kids or something else?

¿Tiene cobertura {él/ella} de algún otro programa de salud del gobierno tal como AIM, 'Mister MIP', Family PACT, Healthy Kids u otro programa?

[IF NEEDED, SAY: 'AIM means Access for Infants and Mothers, Mister MIP or MRMIP means Major Risk Medical Insurance Program; Family PACT is the state program that pays for contraception/reproductive health services for uninsured lower income women and men.']

[IF NEEDED, SAY: 'AIM significa Acceso para Niños y Madres; 'Mister MIP' o MRMIP significa Programa de Seguro de Alto Riesgo, Family PACT el programa estatal que paga por servicios de salud relacionados con la reproducción y anticonceptivos para mujeres y hombres de bajos ingresos que no tienen seguro.']

- 1 AIM
- 2 MRMIP
- 3 HEALTHY KIDS
- 4 NO OTHER PLAN
- 91 SOMETHING ELSE (SPECIFY: _____)
- 7 REFUSED
- 8 DON'T KNOW

If = 1, 2, 3, 4, 91, goto 'PN_QA21_I54'

POST-NOTE 'QA21_I49' :

IF 'QA21_I49' = 1 OR 2 OR 3 OR 4 OR 91, SET TEOTHGOV = 1 AND SET TEINSURE = 1

'QA21_I50' [IA8] - Does {he/she} have any health insurance coverage through a plan that I missed?

¿Tiene {él/ella} alguna cobertura de seguro de salud a través de un plan que yo no haya mencionado?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto 'PN_QA21_I54'

'QA21_I51' [IA9] - What type of health insurance does {he/she} have? Does it come through Medi-CAL, an employer or union, or from some other source?

¿Qué tipo de seguro de salud tiene {él/ella}? ¿Lo recibe a través de Medi-CAL, un empleador o sindicato, o de otra fuente?

[IF R GIVES NAME OF PRIVATE PLAN, THEN PROBE: 'Do you get this plan through a current or former employer/union, through a school, professional association, trade group, or other organization, or directly from the health plan?']

[IF R GIVES NAME OF PRIVATE PLAN, THEN PROBE: '¿Obtiene usted este plan a través de un empleador/sindicato actual o anterior, a través de una escuela, asociación profesional, grupo mercantil, u otra organización, o directamente del plan de salud?']

[CIRCLE ALL THAT APPLY]

[PROBE: 'Any others?']

[PROBE: '¿Algún otro?']

- 1 THROUGH CURRENT OR FORMER EMPLOYER/UNION
- 2 THROUGH SCHOOL, PROFESSIONAL ASSOCIATION, TRADE GROUP, OR OTHER ORGANIZATION
- 3 PURCHASED DIRECTLY FROM HEALTH PLAN
- 4 MEDICARE
- 5 MEDI-CAL
- 7 CHAMPUS/CHAMP-VA, TRICARE, VA OR SOME OTHER MILITARY HEALTH CARE
- 8 INDIAN HEALTH SERVICE, TRIBAL HEALTH PROGRAM OR URBAN INDIAN CLINIC
- 10 COVERED CALIFORNIA
- 11 SHOP THROUGH COVERED CALIFORNIA
- 91 OTHER GOVERNMENT HEALTH PLAN
- 92 OTHER NON-GOVERNMENT HEALTH PLAN
- 7 REFUSED
- 8 DON'T KNOW

POST-NOTE 'QA21_I51' :

IF 'QA21_I51' = 1, SET TEEMP = 1 AND TEINSURE = 1;

IF 'QA21_I51' = 2, SET TEEMP = 1 AND TEINSURE = 1;

IF 'QA21_I51' = 3, SET TEDIRECT = 1 AND TEINSURE = 1;

IF 'QA21_I51' = 4, SET TEMCARE = 1 AND TEINSURE = 1;

IF 'QA21_I51' = 5, SET TEMCAL = 1 AND TEINSURE = 1;

IF 'QA21_I51' = 7, SET TEMILIT = 1 AND TEINSURE = 1;

IF 'QA21_I51' = 8, SET TEIHS = 1;

IF 'QA21_I51' = 10, SET TEHBEX = 1 AND TEINSURE = 1 AND TEDIRECT = 1;

IF 'QA21_I51' = 11, SET TEHBEX = 1 AND TEINSURE = 1 AND TEEMP = 1;

IF 'QA21_I51' = 91, SET TEOTHGOV = 1 AND TEINSURE = 1;

IF 'QA21_I51' = 92, SET TEOTHER = 1 AND TEINSURE = 1;

IF 'QA21_I51' = -7 OR -8, SET TEINSURE = 1

PROGRAMMING NOTE 'QA21_I52' :
IF 'QA21_I51' = 4 (TEEN HAS MEDICARE), CONTINUE WITH 'QA21_I52' ;
ELSE SKIP TO PROGRAMMING NOTE 'QA21_I53'

'QA21_I52' [IA9VER] - Just to verify, you said that (TEEN) gets health insurance through Medicare?

Solo para verificar, ¿usted dijo que (TEEN) tiene seguro de salud a través de Medicare?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_I53' :
IF TEINSURE ≠ 1 CONTINUE WITH 'QA21_I53' ;
ELSE GO TO 'QA21_I54' ;

'QA21_I53' [IA1A] - What is the one main reason why (TEEN) is not enrolled in the Medi-CAL program?

Cuál es LA razón principal por la cual (TEEN) no está inscrito(a) en el Programa Medi-Cal?

- 1 PAPERWORK TOO DIFFICULT
- 2 DON'T KNOW IF ELIGIBLE
- 3 INCOME TOO HIGH, NOT ELIGIBLE
- 4 NOT ELIGIBLE DUE TO CITIZENSHIP/IMMIGRATION STATUS
- 6 DON'T BELIEVE IN HEALTH INSURANCE
- 7 DO NOT NEED INSURANCE BECAUSE SHE/HE IS HEALTHY
- 8 ALREADY HAVE INSURANCE
- 9 DIDN'T KNOW ABOUT IT
- 10 DON'T LIKE OR WANT WELFARE
- 91 OTHER (SPECIFY: _____)
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_I54' :IF 'QA21_I36' = 1 AND ARMCARE ^= 1, THEN 'QA21_I54' = 'QA21_H61' AND 'QA21_I56' = 'QA21_H63' AND 'QA21_I57' = 'QA21_H64' AND GO TO PN 'QA21_I58' ; ELSE IF 'QA21_I38' = 1, THEN 'QA21_I54' = 'QA21_I18' AND 'QA21_I56' = 'QA21_I20' AND 'QA21_I57' = 'QA21_I21' AND GO TO PN 'QA21_I58' ; ELSE IF TEINSURE = 1, THEN CONTINUE WITH 'QA21_I54' ; ELSE GO TO PROGRAMMING NOTE "QA21_I58"

'QA21_I54' [MA8] - Is (TEEN)'s main health plan an HMO, that is, a Health Maintenance Organization?

¿Es el plan de salud principal de (TEEN) un HMO, que quiere decir Organización para el Mantenimiento de la Salud?

[IF NEEDED, SAY: 'HMO stands for Health Maintenance Organization. With an HMO, {he/she} must use the doctors and hospitals belonging to its network. If {he/she} goes outside the network, generally it will not be paid unless it's an emergency.']

[IF NEEDED, SAY: 'HMO en español quiere decir Organización para el Mantenimiento de la Salud. Con un HMO, {él/ella} tiene que ir a los doctores y hospitales que pertenecen a la red de la HMO. Si {él/ella} va fuera de la red, generalmente el plan no cubre los gastos a no ser que se trate de una emergencia médica.']

[IF ADOLESCENT HAS MORE THAN ONE HEALTH PLAN, SAY: '{his/her} MAIN health plan.']

[IF R SAYS 'POS' OR 'POINT OF SERVICE,' CODE AS 'YES.' IF R SAYS 'PPO,' CODE AS 'NO.']

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 1, goto 'QA21_I56'

PROGRAMMING NOTE 'QA21_I55' :
IF TEMCAL = 1 (TEEN HAS MÈDI-CAL), GO TO 'QA21_I56' ;
ELSE CONTINUE WITH 'QA21_I55' ;

'QA21_I55' [A1116] - Is (TEEN)'s health plan a PPO or EPO?

¿Es el plan de (TEEN) una PPO o una EPO?

[IF NEEDED, SAY: 'EPO stands for Exclusive Provider Organization. With an EPO, you must use the in-network doctors and hospitals. If it's an emergency, you can see doctors and specialists directly without a referral from your primary care provider.']

[IF NEEDED, SAY: 'EPO son las siglas en inglés de Exclusive Provider Organization (Organización de Proveedores Exclusivos). Con una EPO, usted debe ir a los médicos y hospitales dentro de la red. Si se trata de una emergencia, usted puede tener acceso a médicos y especialistas directamente sin que $\{lo/la\}$ refiera su proveedor de cuidado médico principal..']

[IF NEEDED, SAY: 'PPO stands for Preferred Provider Organization. With a PPO, you can use any doctors and hospitals, but you pay less if you use doctors and hospitals that belong to your plan's network. Also, you can access doctors and specialists directly without a referral from your primary care provider.']

[IF NEEDED, SAY: 'PPO son las siglas en inglés de Preferred Provider Organization (Organización de Proveedores Preferidos). Con una PPO, usted puede ir a cualquier médico y hospital, pero paga menos si va a los médicos y hospitales que pertenecen a la red de su plan. Asimismo, puede tener acceso a médicos y especialistas directamente sin que $\{lo/la\}$ refiera su proveedor de cuidado médico principal.']

[IF TEEN HAS MORE THAN ONE HEALTH PLAN, SAY: '{His/Her} MAIN health plan.']

[IF TEEN HAS MORE THAN ONE HEALTH PLAN, SAY: 'El plan de salud PRINCIPAL de $\{él/ella\}$.']

- 1 PPO
- 2 EPO
- 91 OTHER (SPECIFY: _____)
- 7 REFUSED
- 8 DON'T KNOW

'QA21_I56' [MA7] - What is the name of (TEEN)'s main health plan?

¿Cómo se llama el plan de salud principal de (TEEN)?

- 1 ACCESS SENIOR HEALTHCARE
- 2 AETNA
- 3 AETNA GOLDEN MEDICARE
- 4 AIDS HEALTHCARE FOUNDATION, LA
- 5 ALAMEDA ALLIANCE FOR HEALTH
- 83 ALTAMED HEALTH SERVICES
- 7 ANTHEM BLUE CROSS OF CALIFORNIA
- 8 ASPIRE HEALTH PLAN
- 9 BLUE CROSS CALIFORNIA CARE
- 79 BLUE CROSS SENIOR SECURE
- 11 BLUE SHIELD 65 PLUS
- 12 BLUE SHIELD OF CALIFORNIA
- 13 BRAND NEW DAY (UNIVERSAL CARE)
- 14 CALIFORNIA HEALTH AND WELLNESS PLAN
- 15 CALIFORNIA KIDS (CAL KIDS)
- 16 CAL OPTIMA (CAL OPTIMA ONE CARE)
- 17 CALVIVA HEALTH
- 18 CARE 1ST HEALTH PLAN
- 19 CAREMORE HEALTH PLAN
- 21 CENTER FOR ELDER'S INDEPENDENCE
- 80 CEN CAL HEALTH
- 22 CENTRAL CALIFORNIA ALLIANCE FOR HEALTH
- 23 CENTRAL HEALTH PLAN
- 24 CHINESE COMMUNITY HEALTH PLAN
- 25 CHOICE PHYSICIANS NETWORK
- 26 CIGNA HEALTHCARE
- 27 CITIZENS CHOICE HEALTH PLAN
- 28 COMMUNITY CARE HEALTH PLAN
- 29 COMMUNITY HEALTH GROUP
- 81 CONTRA COSTA HEALTH PLAN
- 31 DAVITA HEALTHCARE PARTNERS PLAN
- 32 EASY CHOICE HEALTH PLAN
- 33 EPIC HEALTH PLAN
- 34 GEM CARE HEALTH PLAN
- 35 GOLD COAST HEALTH PLAN
- 36 GOLDEN STATE MEDICARE HEALTH PLAN
- 38 HEALTH NET
- 39 HEALTH NET SENIORITY PLUS
- 40 HEALTH PLAN OF SAN JOAQUIN
- 41 HEALTH PLAN SAN JOAQUIN AUTHORITY
- 42 HERITAGE PROVIDER NETWORK
- 43 HUMANA GOLD PLUS
- 44 HUMANA HEALTH PLAN
- 45 IEHP (INLAND EMPIRE HEALTH PLAN)
- 46 INTER VALLEY HEALTH PLAN
- 82 HEALTH ADVANTAGE
- 47 KAISER PERMANENTE
- 48 KAISER PERMANENTE SENIOR ADVANTAGE
- 49 KERN FAMILY HEALTH CARE
- 50 L.A. CARE HEALTH PLAN
- 51 MD CARE

- 54 MOLINA HEALTHCARE OF CALIFORNIA
- 55 MONARCH HEALTH PLAN
- 56 ON LOK SENIOR HEALTH SERVICES
- 57 PARTNERSHIP HEALTHPLAN OF CALIFORNIA
- 58 PIH HEALTH CARE SOLUTIONS
- 59 PREMIER HEALTH PLAN SERVICES
- 60 PRIMECARE MEDICAL NETWORK
- 61 PROVIDENCE HEALTH NETWORK
- 68 SCRIPPS HEALTH PLAN SERVICES
- 69 SEASIDE HEALTH PLAN
- 84 SAN FRANCISCO HEALTH PLAN
- 90 SANTA CLARA FAMILY HEALTH PLAN
- 86 SAN MATEO HEALTH COMMISION
- 88 SANTA BARBARA
- 92 SATELLITE HEALTH PLAN
- 67 SCAN HEALTH PLAN
- 70 SHARP HEALTH PLAN
- 71 SUTTER HEALTH PLAN
- 72 SUTTER SENIOR CARE
- 73 UNITED HEALTHCARE
- 74 UNITED HEALTHCARE SECURE HORIZON
- 75 UNIVERSITY HEALTHCARE ADVANTAGE
- 76 VALLEY HEALTH PLAN
- 77 VENTURA COUNTY HEALTH CARE PLAN
- 78 WESTERN HEALTH ADVANTAGE
- 93 CHAMPUS/CHAMP-VA
- 87 TRICARE/TRICARE FOR LIFE/TRICARE PRIME
- 89 VA HEALTH CARE SERVICES
- 52 MEDI-CAL
- 53 MEDICARE
- 85 OTHER (SPECIFY: _____)
- 7 REFUSED
- 8 DON'T KNOW

POST NOTE 'QA21_I56' :**IF 'QA21_I56' = 93, 87, OR 89 THEN SET TEMILIT=1****'QA21_I57' [IA14] - Is (TEEN) covered for prescription drugs?***¿Tiene (TEEN) cobertura para medicinas recetadas?*

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE FOR 'QA21_I58' :
IF [(ARINSURE ≠ 1 OR 'QA21_I36' ≠ 1) AND (TEEMP = 1 OR TEDIRECT = 1 OR TEOTHER = 1),
THEN CONTINUE WITH 'QA21_I58' ;
ELSE SKIP TO PN 'QA21_I61'

'QA21_I58' [A182] - Does (TEEN)'s health plan have a deductible that is more than \$1,000?

¿Tiene el plan de salud de (TEEN) un deducible de más de \$1,000 dólares?

[IF NEEDED, SAY: 'A deductible is the amount you have to pay before your plan begins to pay for your medical care.']

[IF NEEDED, SAY: 'El deducible es la cantidad que usted tiene que pagar antes de que su plan empiece a pagar por su atención médica.']

- 1 YES
- 2 NO
- 3 YES, BUT ONLY WHEN WE GO OUT OF NETWORK
- 7 REFUSED
- 8 DON'T KNOW

'QA21_I59' [A183] - Does (TEEN)'s health plan have a deductible for all covered persons that is more than \$2,000?

¿Tiene el plan de salud de (TEEN) un deducible de más de \$2,000 dólares por todas las personas que tienen cobertura?

[IF NEEDED, SAY: 'A deductible is the amount you have to pay before your plan begins to pay for your medical care.']

[IF NEEDED, SAY: 'El deducible es la cantidad que usted tiene que pagar antes de que su plan empiece a pagar por su atención médica.']

- 1 YES
- 2 NO
- 3 YES, BUT ONLY WHEN WE GO OUT OF NETWORK
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_I60' :
IF ('QA21_I58' = 1 OR 3) OR ('QA21_I59' = 1 OR 3), CONTINUE WITH 'QA21_I60' ;
ELSE SKIP TO PROGRAMMING NOTE 'QA21_I61'

'QA21_I60' [AI84] - Do you have a special account or fund you can use to pay for (TEEN)'s medical expenses?

¿Tiene usted una cuenta o un fondo especial que pueda utilizar para pagar los gastos médicos de (TEEN)?

[IF NEEDED, SAY: 'The accounts are sometimes referred to as Health Savings Accounts (HSAs) or Health Reimbursement Accounts (HRAs). Other similar accounts include- Personal care accounts, Personal medical funds, or Choice funds. Do not include employer-provided Flexible Spending Accounts (FSAs).']

[IF NEEDED, SAY: 'Estas cuentas se conocen a veces como Cuentas de ahorro para la salud (HSA) o Cuentas de reembolsos por salud (HRA). Otras cuentas similares son las Cuentas personales para gastos médicos, Fondos personales para gastos médicos o Fondos de beneficios. No incluya las Cuentas de gastos flexibles proporcionadas por un empleador.']

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_I61' :
IF TEINSURE = 1, GO TO 'QA21_I66' ;
ELSE CONTINUE WITH 'QA21_I61'

'QA21_I61' [IA18] - What is the one main reason (TEEN) does not have any health insurance?

¿Cuál es el motivo principal por el que <TEEN> no tiene seguro de salud?

- 1 CAN'T AFFORD/TOO EXPENSIVE
- 2 NOT ELIGIBLE DUE TO WORKING STATUS/ CHANGED EMPLOYER/LOST JOB
- 3 NOT ELIGIBLE DUE TO HEALTH OR OTHER PROBLEMS
- 4 NOT ELIGIBLE DUE TO CITIZENSHIP/IMMIGRATION STATUS
- 5 FAMILY SITUATION CHANGED
- 6 DON'T BELIEVE IN INSURANCE
- 7 DID NOT HAVE INSURANCE WHILE SWITCHING INSURANCE COMPANIES
- 8 CAN GET HEALTH CARE FOR FREE/PAY FOR OWN CARE
- 91 OTHER (SPECIFY: _____)
- 7 REFUSED
- 8 DON'T KNOW

Was (TEEN) covered by health insurance at any time during the past 12 months?

¿Tuvo (TEEN) cobertura de un seguro de salud en algún momento durante los últimos 12 meses?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 1, goto 'QA21_I64'

'QA21_I63' [IA21] - How long has it been since (TEEN) last had health insurance?

¿Cuánto tiempo hace desde la última vez que (TEEN) tuvo seguro de salud?

- 1 MORE THAN 12 MONTHS AGO, BUT NOT MORE THAN 3 YEARS
- 2 MORE THAN 3 YEARS
- 3 NEVER HAD HEALTH INSURANCE
- 7 REFUSED
- 8 DON'T KNOW

If = 1, 2, 3, -7, -8, goto 'PN_QA21_J1'

'QA21_I64' [IA22] - For how many of the last 12 months did {he/she} have health insurance?

¿Por cuántos meses de los últimos 12 meses tuvo {él/ella} seguro de salud?

[INTERVIEWER NOTE: IF LESS THAN ONE MONTH BUT MORE THAN 0 DAYS, ENTER 1]

_____ MONTHS [HR: 0-12]
(must be between 0 and 12)

If = 0, goto 'PN_QA21_J1'

- 7 REFUSED
- 8 DON'T KNOW

'QA21_I65' [IA23] - During that time when (TEEN) had health insurance, was {his/her} insurance Medi-CAL, a plan you obtained through an employer, a plan you purchased directly from an insurance company, a plan you purchased through Covered California, or some other plan?

Durante ese tiempo cuando (TEEN) tenía seguro de salud, ¿era su seguro Medi-Cal, un plan que usted obtuvo a través de un empleador, un plan que compró directamente a una compañía de seguros, un plan que compró mediante Covered California o era otro plan?

[CODE ALL THAT APPLY.]

[PROBE: 'Any others?']

[PROBE: '¿Algún otro?']

(7 maximum responses)

- 1 MEDI-CAL
- 3 OBTAINED THROUGH CURRENT OR FORMER EMPLOYER/UNIOIN
- 5 PURCHASED DIRECTLY
- 6 PURCHASED THROUGH COVERED CALIFORNIA
- 91 OTHER HEALTH PLAN
- 7 REFUSED
- 8 DON'T KNOW

If = 1, 3, 5, 6, 91, -7, -8, goto 'PN_QA21_J1'

'QA21_I66' [IA24] - Thinking about {his/her} current health insurance, did (TEEN) have this same insurance for all of the past 12 months?

Pensando en el seguro de salud que {él/ella} tiene actualmente, ¿tuvo (TEEN) este mismo seguro de salud todo el tiempo en los últimos 12 meses?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 1, goto 'PN_QA21_J1'

'QA21_I67' [IA25] - When {he/she} wasn't covered by {his/her} current health insurance, did {he/she} have any other health insurance?

Quando {él/ella} no tenía cobertura de su actual seguro de salud, ¿tuvo {él/ella} algún otro seguro de salud?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto 'QA21_I69'

'QA21_I68' [IA26] - Was this other health insurance Medi-Cal, a plan you obtained from an employer, a plan you purchased directly from an insurance company, a plan you purchased through Covered California, or some other plan?

¿Era este otro seguro de salud Medi-Cal, un plan que usted obtuvo a través de un empleador, un plan que compró directamente a una compañía de seguros, un plan que compró mediante Covered California o era otro plan?

[CODE ALL THAT APPLY.]

[PROBE: 'Any others?']

[PROBE: '¿Algún otro?']

- 1 MEDI-CAL
- 3 OBTAINED THROUGH CURRENT OR FORMER EMPLOYER/UNIOIN
- 5 PURCHASED DIRECTLY
- 6 PURCHASED THROUGH COVERED CALIFORNIA
- 91 OTHER HEALTH PLAN
- 7 REFUSED
- 8 DON'T KNOW

'QA21_I69' [IA27] - During the past 12 months, was there any time when {he/she} had no health insurance at all?

Durante los últimos 12 meses, ¿hubo algún momento en el que {él/ella} no tuvo ningún seguro de salud?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto 'PN_QA21_J1'

'QA21_I70' [IA28] - For how many of the past 12 months did {he/she} have no health insurance?

¿Durante cuántos de los últimos 12 meses no tuvo {él/ella} seguro de salud?

[IF < 1 MONTH, ENTER '1']

_____ MONTHS [RANGE: 1-12]

- 7 REFUSED
- 8 DON'T KNOW

'QA21_I71' [IA29] - What is the one main reason why (TEEN) did not have any health insurance during the time {he/she} wasn't covered?

¿Cuál es la razón principal por la que (TEEN) no tuvo ningún seguro de salud durante el tiempo en que {él/ella} no tuvo cobertura?

[IF R SAYS, 'No need,' PROBE WHY]

- 1 CAN'T AFFORD/TOO EXPENSIVE
- 2 NOT ELIGIBLE DUE TO WORKING STATUS/CHANGED EMPLOYER/LOST JOB
- 3 NOT ELIGIBLE DUE TO HEALTH OR OTHER PROBLEMS
- 4 NOT ELIGIBLE DUE TO CITIZENSHIP/IMMIGRATION STATUS
- 5 FAMILY SITUATION CHANGED
- 6 DON'T BELIEVE IN INSURANCE
- 7 DID NOT HAVE INSURANCE WHILE SWITCHING INSURANCE COMPANIES
- 8 CAN GET HEALTH CARE FOR FREE/PAY FOR OWN CARE
- 91 OTHER (SPECIFY: _____)
- 7 REFUSED
- 8 DON'T KNOW

Section J: Health Care Utilization and Access

PROGRAMMING NOTE 'QA22_J1' :
IF CHILD OR TEEN SELECTED OR SPOUSE IN HH, DISPLAY “Now, I'd like to ask about the health care YOU receive”;
ELSE BEGIN QUESTION WITH “During the past 12 months, how many times have you seen a medical doctor”
IF TSE=1, DISPLAY “ During the past 12 months, how many times have you seen a medical doctor?”
IF TSE=2, DISPLAY “{Now, I'd like to ask about the health care you receive.} During the past 12 months, how many times have you seen a medical doctor?}”

'QA22_J1' [AH5] - {{ During the past 12 months, how many times have you seen a medical doctor?}}
 /{Now, I'd like to ask about the health care you receive.} During the past 12 months, how many times have you seen a medical doctor?}}

{{ Durante los últimos 12 meses, ¿cuántas veces ha visto usted a un doctor?/{Ahora, voy a preguntar acerca de la atención médica que usted recibe.} Durante los últimos 12 meses, ¿cuántas veces ha visto usted a un doctor?}}

_____ TIMES [HR: 0-365]

- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_J2' :
IF 'QA21_J1' = 0, -7, OR -8 (HAS NOT SEEN A DOCTOR IN LAST 12 MONTHS OR REF/DK),
CONTINUE WITH 'QA21_J2' ;
ELSE GO TO PROGRAMMING NOTE 'QA21_J3'

'QA21_J2' [AH6] - About how long has it been since you last saw a doctor about your own health?

Más o menos, ¿hace cuánto tiempo fue la última vez que vio a un doctor para su propia salud?

- 0 ONE YEAR AGO OR LESS
- 1 MORE THAN 1 UP TO 2 YEARS AGO
- 2 MORE THAN 2 UP TO 5 YEARS AGO
- 3 MORE THAN 5 YEARS AGO
- 4 NEVER
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_J3' :
IF 'QA21_J2' = 4 (HAS NEVER SEEN A DOCTOR), SKIPTO 'QA21_J4' ;
ELSE CONTINUE WITH 'QA21_J3'

'QA21_J3' [AJ114] - About how long has it been since you last saw a doctor or medical provider for a routine check-up?

Aproximadamente, ¿hace cuánto tiempo fue la última vez que vio a un doctor o a otro proveedor de atención médica para hacerse un examen físico de rutina?

[IF NEEDED: A routine check-up is a visit not for an illness or problem. This visit may include questions about health behaviors such as smoking.]

[IF NEEDED: *Un examen físico de rutina es una visita que no se debe a una enfermedad o un problema. En esa visita pueden hacerle preguntas acerca de comportamientos de salud tal como el fumar.*]

- 0 ONE YEAR AGO OR LESS
- 1 MORE THAN 1 UP TO 2 YEARS AGO
- 2 MORE THAN 2 UP TO 5 YEARS AGO
- 3 MORE THAN 5 YEARS AGO
- 4 NEVER
- 7 REFUSED
- 8 DON'T KNOW

'QA21_J4' [AJ115] - During the past 12 months, about how many days did you miss work at a job or business because of illness, injury or disability?

Durante los últimos 12 meses, ¿alrededor de cuántos días se ausentó de un empleo o empresa por enfermedad, lesión o discapacidad?

[IF NEEDED: 'Do not include family or maternity/paternity leave']

[IF NEEDED: 'No incluya permisos familiares o de maternidad/paternidad']

_____ DAYS (0 - 365)

- 1 DID NOT HAVE JOB IN PAST 12 MONTHS
- 7 REFUSED
- 8 DON'T KNOW
- Other (specify)

PROGRAMMING NOTE 'QA21_J5' :
IF 'QA21_H1' = 1, 3, 4, OR 5 (HAS A USUAL SOURCE OF CARE), THEN CONTINUE WITH
'QA21_J5' ;
ELSE GO TO PROGRAMMING NOTE 'QA21_J6'

'QA21_J5' [AJ77] - Do you have a personal doctor or medical provider who is your main provider?

¿Tiene usted un doctor de cabecera o un proveedor de atención médica como proveedor principal?

[IF NEEDED, SAY: 'This can be a general doctor, a specialist doctor, a physician assistant, a nurse, or other health provider.']

[IF NEEDED SAY: 'Puede ser un médico general, un médico especialista, un asistente médico, una enfermera u otro proveedor de salud.']

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_J6':
IF ARINSURE =1 OR 'QA21_H1' = 1,3,4, OR 5 (HAS USUAL SOURCE OF CARE), THEN CONTINUE
WITH 'QA21_J6'
ELSE GO TO PROGRAMMING NOTE 'QA21_J8'
IF 'QA21_J5' = 1 (HAS A PERSONAL DOCTOR), THEN DISPLAY 'your';
ELSE DISPLAY 'a';

'QA21_J6' [AJ102] - In the past 12 months, did you try to get an appointment to see {your/a} doctor or medical provider within two days because you were sick or injured?

En los últimos 12 meses, ¿trató de hacer una cita para ver a su doctor o proveedor de atención médica en dos días a más tardar porque usted estaba enfermo(a) o lesionado(a)?

[IF NEEDED, SAY: Do not include urgent care or, emergency care visits. I am only asking about appointments.]

[IF NEEDED, SAY: 'No incluya cuidado de urgencia o idas a la sala de emergencias. Solo estoy preguntando sobre citas.']

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

IF = 2, -7, -8 go to 'PN_QA21_J8'

'QA21_J7' [AJ103] - How often were you able to get an appointment within two days? Would you say...

¿Con qué frecuencia consiguió hacer una cita dentro de los próximos dos días? ¿Diría que...

- 1 NEVER,
- 2 SOMETIMES
- 3 USUALLY
- 4 ALWAYS
- 7 DON'T KNOW
- 8 REFUSED

PROGRAMMING NOTE 'QA21_J8':

IF 'QA21_H1' = 1, 3, 4, OR 5 (HAS A USUAL SOURCE OF CARE) AND 'QA21_J5' = 1 (HAS A PERSONAL DOCTOR/MEDICAL PROVIDER) AND [('QA21_B3' = 1 OR 'QA21_B4' = 1 (HAS ASTHMA)) OR 'QA21_B8' = 1 (HAS DIABETES) OR 'QA21_B18' = 1 (HAS HEART DISEASE)], THEN CONTINUE WITH 'QA21_J8'; ELSE GO TO 'QA21_J9'

S **'QA21_J8'** [AJ80] - Is there anyone at your doctor's office or clinic who helps coordinate your care with other doctors or services such as tests or treatments?

¿Hay alguien en el consultorio o clínica de su doctor que le ayude a coordinar el cuidado de su salud con otros médicos o servicios, como pruebas o tratamientos?

- 1 YES
- 2 NO

'QA21_J9' [AJ202] - During the past 12 months, did you receive care from a doctor or health professional through a video or telephone conversation rather than an office visit?

Durante los últimos 12 meses, ¿recibió atención de un médico o profesional de la salud a través de una conversación telefónica o por video en lugar de una visita al consultorio?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If 2, -7, -8 go to 'PN_QA21_J13'

'QA21_J10' [AJ203] - What was this care for?

¿Para qué fue este cuidado?

- 1 SKIN PROBLEM
- 2 EYE PROBLEM
- 3 MENTAL OR EMOTIONAL HEALTH PROBLEM
- 5 DISEASE CARE AND MANAGEMENT (INCLUDES CANCER CARE)
- 6 FLU, COLD, ALLERGIES, INFECTIONS
- 8 ARTHRITIS, CHRONIC OR GENERAL JOINT, BACK, MUSCLE PROBLEM OR PAIN
- 9 TESTS, RESULTS, FOLLOW UP
- 12 DENTAL HEALTH PROBLEM
- 91 OTHER HEALTH PROBLEM (SPECIFY: _____)
- 7 REFUSED
- 8 DON'T KNOW

'QA21_J11' [AJ204] – How would you rate the overall experience of your most recent video visit compared to an in-person visit. Would you say the video visit was ...

- 1 Much worse
- 1 *Mucho peor*
- 2 Somewhat worse
- 2 *Algo peor*
- 3 About the same
- 3 *Aproximadamente lo mismo*
- 4 Somewhat better
- 4 *Algo mejor*
- 5 Much better
- 5 *Mucho mejor*
- 6 DID NOT HAVE VIDEO VISIT
- 7 REFUSED
- 8 DON'T KNOW

'QA21_J12' [AJ205] - How would you rate the overall experience of your most recent phone visit compared to an in-person visit. Would you say the phone visit was ...

¿Cómo calificaría la experiencia general de su visita telefónica más reciente en comparación con una visita en persona?

- 1 Much worse
- 1 *Mucho peor*
- 2 Somewhat worse
- 2 *Algo peor*
- 3 About the same
- 3 *Aproximadamente lo mismo*
- 4 Somewhat better
- 4 *Algo mejor*
- 5 Much better
- 5 *Mucho mejor*
- 6 DID NOT HAVE PHONE VISIT
- 7 REFUSED
- 8 DON'T KNOW

'QA21_J13' [AJ152B] - During the past 12 months, did you receive care while in a health facility, from a doctor at another location, by use of a video device ?

Durante los últimos 12 meses, ¿recibió atención médica en un centro de salud, por parte de un médico desde otra ubicación mediante el uso de un video?

- 1 YES
- 2 NO

If = 2, -7, -8, goto 'PN_QA21_J15'

'QA21_J14' [AJ153B] - Was the care for a skin or eye problem, mental or emotional health problem, dental health problem or some other health problem?

Recibió esta atención por un problema de la piel o de la vista, un problema de salud mental, un problema odontológico, o algún otro problema de salud?

[CODE ALL THAT APPLY]

[PROBE: 'Any others?']

[PROBE: '¿Algún otro?']

- 1 SKIN PROBLEM
- 2 EYE PROBLEM
- 3 MENTAL OR EMOTIONAL HEALTH PROBLEM
- 12 DENTAL HEALTH PROBLEM
- 91 OTHER HEALTH PROBLEM (SPECIFY: _____)
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_J15' :
IF 'QA21_A22' >=2 (SPEAKS ENGLISH 'WELL', 'NOT WELL', OR 'NOT AT ALL'), CONTINUE WITH AJ8 ;
ELSE GO TO PROGRAMMING NOTE 'QA21_J20'

'QA21_J15' [AJ8B] - The last time you saw a doctor, did you have a hard time understanding the doctor?

La última vez que vio a un doctor, ¿tuvo dificultad para entender lo que el doctor decía?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 1, goto 'QA21_J17'

If = -7, -8, goto 'PN_QA21_J20'

PROGRAMMING NOTE 'QA21_J16' :
IF 'QA21_J15' = 2 (DID NOT HAVE A HARD TIME UNDERSTANDING DOCTOR) AND [INTERVIEW NOT CONDUCTED IN ENGLISH OR 'QA21_A21' > 1 (SPEAKS LANGUAGE OTHER THAN ENGLISH AT HOME)], CONTINUE WITH 'QA21_J16' ; ELSE GO TO PN_'QA21_J20'
SET AJ50ENGL = ENGLSPAN TO STORE INTERVIEW LANGUAGE AT TIME 'QA21_J16' WAS ASKED;

'QA21_J16' [AJ50] - In what language did the doctor speak to you?

¿En qué idioma habló con usted su doctor?

- 1 ENGLISH
- 2 SPANISH
- 3 CANTONESE
- 4 VIETNAMESE
- 5 TAGALOG
- 6 MANDARIN
- 7 KOREAN
- 8 ASIAN INDIAN LANGUAGES (INCLUDING HINDI, PUNJABI, URDU)
- 9 RUSSIAN
- 12 JAPANESE
- 14 FRENCH
- 15 GERMAN
- 18 FARSI
- 19 ARMENIAN
- 20 ARABIC
- 91 OTHER (SPECIFY: _____)
- 7 REFUSED
- 8 DON'T KNOW

If = 1, goto 'QA21_J18'

If = 2, 3, 4, 5, 6, 7, 8, 9, 91, -7, -8, goto 'PN_QA21_J20'

'QA21_J17' [AJ9] - Was this because you and the doctor spoke different languages?

¿Se debió esto a que usted y su doctor hablan diferentes idiomas?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_J18' [AJ10] - Did you need someone to help you understand the doctor?

¿Necesitó ayuda de otra persona para comprender al doctor?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto 'PN_QA21_J20'

'QA21_J19' [AJ11] - Who was this person who helped you understand the doctor?

¿Quién fue esta persona que le ayudó a entender al doctor?

[IF R RESPONDS 'MY CHILD,' PROBE TO SEE IF CHILD IS UNDER AGE 18. IF AGE 18 OR MORE, CODE AS 'ADULT FAMILY MEMBER'.]

- 1 MINOR CHILD (UNDER AGE 18)
- 2 AN ADULT FAMILY MEMBER OR FRIEND OF MINE
- 3 NON-MEDICAL OFFICE STAFF
- 4 MEDICAL STAFF INCLUDING NURSES/DOCTORS
- 5 PROFESSIONAL INTERPRETER (BOTH IN PERSON AND ON THE TELEPHONE)
- 6 OTHER (PATIENTS, SOMEONE ELSE)
- 7 DID NOT HAVE SOMEONE TO HELP
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_J20' :
IF 'QA21_A22' = 3 OR 4 (SPEAKS ENGLISH NOT WELL OR NOT AT ALL), THEN CONTINUE WITH 'QA21_J20' ;ELSE GO TO 'QA21_J21'

'QA21_J20' [AJ105] - In California, you have the right to get help from an interpreter for free during your medical visits. Did you know this before today?

En California, usted tiene derecho a obtener gratis la ayuda de un intérprete durante sus visitas al doctor. ¿Sabía esto antes de hoy?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_J21' [AH16] - During the past 12 months, did you delay or not get a medicine that a doctor prescribed for you?

Durante los últimos 12 meses, ¿tuvo usted que demorar la compra o no comprar algún medicamento que un doctor le recetó?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto 'QA21_J24'

'QA21_J22' [AJ19] - Was cost or lack of insurance a reason why you delayed or did not get the prescription?

¿Fue el costo o el no tener seguro de salud un motivo por el que demoró la compra o quedó sin comprar el medicamento que le habían recetado?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_J23':
IF ARINSURE = 1, THEN CONTINUE WITH 'QA21_J23';
ELSE GO TO 'QA21_J24'

'QA21_J23' [AJ176] - Did you delay or not get a medicine while you had your current insurance plan?

¿Mientras tenía su plan de seguro actual se demoró en tomar un medicamento o no lo tomó?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_J24' [AH22] - During the past 12 months, did you delay or not get any other medical care you felt you needed—such as seeing a doctor, a specialist, or other health professional?

Durante los últimos 12 meses, ¿tardó en recibir, o quedó sin recibir alguna otra atención médica que usted consideraba necesaria, — como ver un doctor, un especialista u otro profesional de la salud?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto 'QA21_J30'

'QA21_J25' [AJ129] - Did you get the care eventually?

¿Recibió los cuidados finalmente?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_J26' [AJ20] - Was cost or lack of insurance a reason why you delayed or did not get the care you felt you needed?

¿Fueron los costos o el no tener seguro de salud una razón por la que se demoró en obtener o no obtuvo la atención que usted creyó que necesitaba?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto 'QA21_J28'

'QA21_J27' [AJ130] - Was that the main reason?

¿Fue esa la razón principal?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 1, -7, -8, goto 'QA21_J29'

'QA21_J28' [AJ131] - What was the one main reason why you delayed getting the care you felt you needed?

¿Cuál fue la razón principal por la que se demoró en obtener el cuidado que usted creyó que necesitaba?

- 1 COULDN'T GET APPOINTMENT
- 2 MY INSURANCE WAS NOT ACCEPTED
- 3 MY INSURANCE DID NOT COVER
- 4 LANGUAGE UNDERSTANDING PROBLEMS
- 5 TRANSPORTATION PROBLEMS
- 6 HOURS WERE NOT CONVENIENT
- 7 THERE WAS NO CHILD CARE FOR CHILDREN AT HOME
- 8 I FORGOT OR LOST REFERRAL
- 9 I DIDN'T HAVE TIME TO GO
- 10 TOO EXPENSIVE
- 11 I HAVE NO INSURANCE
- 91 OTHER (SPECIFY: _____)
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_J29':
IF ARINSURE = 1, THEN CONTINUE WITH 'QA21_J29';
ELSE GO TO 'QA21_J30'

'QA21_J29' [AJ177] - Did you delay or not get other medical care you felt you needed while you had your current insurance plan?

¿Mientras tenía su plan de seguro actual se demoró en recibir o no recibió otra atención médica que consideró que necesitaba?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA22_J30' :
IF TSE=1, DISPLAY " Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and others who specialize in one area of health care.
In the past12 months, did you or a doctor think you needed to see a medical specialist?"
IF TSE=2, DISPLAY "The next questions ask about specialists. Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and others who specialize in one area of health care.
In the past12 months, did you or a doctor think you needed to see a medical specialist?"

'QA22_J30' [AJ136] -{{Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and others who specialize in one area of health care.

In the past12 months, did you or a doctor think you needed to see a medical specialist?/ The next questions ask about specialists. Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and others who specialize in one area of health care.

In the past12 months, did you or a doctor think you needed to see a medical specialist?}}

{{ Los especialistas son doctores como los cirujanos, médicos del corazón, de las alergias, de la piel y otros doctores que se especializan en un área de atención médica. En los últimos 12 meses, ¿pensó usted o un doctor que necesitaba ir a un especialista?/ Las preguntas siguientes se refieren a especialistas. Los especialistas son doctores como los cirujanos, médicos del corazón, de las alergias, de la piel y otros doctores que se especializan en un área de atención médica. En los últimos 12 meses, ¿pensó usted o un doctor que necesitaba ir a un especialista?}}

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_J31' :
IF 'QA21_J30' = 1 (NEEDED A MEDICAL SPECIALIST) CONTINUE WITH 'QA21_J31' ;
ELSE GO TO 'QA21_J34'

'QA21_J31' [AJ137] - During the past 12 months, did you have any trouble finding a medical specialist who would see you?

En los últimos 12 meses, ¿tuvo alguna dificultad para encontrar un doctor especialista que lo(a) viera?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_J32' [AJ138] - During the past 12 months, did a medical specialist's office tell you that they would not take you as a new patient?

Durante los últimos 12 meses, ¿le dijeron en el consultorio de un médico especialista que no lo(a) iban a aceptar como paciente nuevo(a)?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_J33' :
IF ARINSURE = 1 (CURRENTLY INSURED) CONTINUE WITH 'QA21_J33' ;
ELSE SKIP TO 'QA21_J34'

'QA21_J33' [AJ139] - During the past 12 months, did a medical specialist's office tell you that they did not take your main health insurance?

Durante los últimos 12 meses, ¿le dijeron en el consultorio de un médico especialista que no aceptarían su seguro de salud principal?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_J34' [AJ133] - Now think about general doctors. During the past 12 months, did you have any trouble finding a general doctor who would see you?

Ahora piense en los doctores generales. Durante los últimos 12 meses, ¿tuvo alguna dificultad para encontrar un doctor general que lo(a) viera?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_J35' [AJ134] - During the past 12 months, did a doctor's office tell you that they would not take you as a new patient?

Durante los últimos 12 meses, ¿le dijeron en un consultorio médico que no lo(a) iban a aceptar como paciente nuevo(a)?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_J36' :
IF ARINSURE = 1 (CURRENTLY INSURED) CONTINUE WITH 'QA21_J36' ;
ELSE SKIP TO AD13

'QA21_J36' [AJ135] - During the past 12 months, did a doctor's office tell you that they would not take your main health insurance?

Durante los últimos 12 meses, ¿le dijeron en un consultorio médico que no iban a aceptar su principal seguro de salud?

- 1 YES
- 2 NO
- 3 NOT APPLICABLE
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA22_J37' :
IF 'QA22_A5' = 1 (MALE AT BIRTH), THEN GO TO AJ144BB ;
IF AGE > 45, THEN GO TO AJ144BB ;
DISPLAYS;
IF ['QA22_A5' = 2 (FEMALE AT BIRTH) AND AD66 = 2 (IDENTIFIES AS FEMALE)], DISPLAY
"These next questions are about women's health.";
IF ['QA22_A5' = 2 (FEMALE AT BIRTH) AND AD66 = 1, 3, 4, OR -3 (MALE, TRANSGENDER, NONE,
OR SKIPPED)], DISPLAY "These next questions may be relevant to you because you were
assigned female at birth. If not, let me know and we will skip them."
IF TSE=1, DISPLAY " These next questions may be relevant to you because you were assigned female
at birth.}
To your knowledge, are you now pregnant?"
IF TSE=2, DISPLAY "{These next questions are about women's health}. These next questions may be
relevant to you because you were assigned female at birth.
To your knowledge, are you now pregnant?"

'QA22_J37' [AD13] – {{ These next questions may be relevant to you because you were assigned female at birth.}}

To your knowledge, are you now pregnant?/ {These next questions are about women's health.} These next questions may be relevant to you because you were assigned female at birth.

To your knowledge, are you now pregnant? }}

{{ Las siguientes preguntas son sobre la salud de la mujer. Que usted sepa, ¿está embarazada actualmente?/ Las siguientes preguntas son sobre la salud de la mujer. Las siguientes preguntas pueden ser relevantes para usted porque la registraron como mujer al nacer. Si este no es el caso, dígame y no le haré esas preguntas. Que usted sepa, ¿está embarazada actualmente?}}

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

IF=1, goto 'QA22_J39'

IF=3, -7, -8 goto 'QA22_J40'

'QA22_J38' [AJ216]- In the past 12 months, were you pregnant?

En los últimos 12 meses, ¿estuvo embarazada?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA22_J39': IF 'QA22_J37' OR 'QA22_J38'=1, CONTINUE WITH 'QA22_J39'; ELSE SKIP TO 'QA22_J40'

'QA22_J39' [AJ217]- In the past 12 months, have you had a prenatal care visit?

En los últimos 12 meses, ¿tuvo una visita de atención prenatal?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

**PROGRAMMING NOTE 'QA22_J40':
IF AGE > 44 YEARS GO TO 'PN_'QA22_J56';
ELSE IF 'QA22_A5'=1 (MALE AT BIRTH) THEN GO TO 'QA22_J49';
ELSE CONTINUE WITH 'QA22_J40'
IF PROXY=1, GO TO 'PN_'QA22_J56'**

'QA22_J40' [AJ169] - Which of the following statements best describes your pregnancy plans? Would you say...

¿Cuál de las siguientes frases describe mejor sus planes de embarazo? ¿Diría que...?

- 1 I DO NOT PLAN TO GET PREGNANT WITHIN THE NEXT 12 MONTHS
- 2 I AM NOT SEXUALLY ACTIVE
- 3 I AM PLANNING TO GET PREGNANT WITHIN THE NEXT 12 MONTHS
- 4 I AM CURRENTLY PREGNANT
- 5 I AM NOT ABLE TO GET PREGNANT
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA22_J41':
IF AD13 = 1 (PREGNANT), GO TO 'PN_ 'QA22_J56' ';
IF 'QA22_A5' = 2 (FEMALE AT BIRTH) AND 'QA22_D12' = 2 (GAY,LESBIAN, OR HOMOSEXUAL),
GO TO 'PN_ 'QA22_J56' '; **IF 'QA22_J40'= 2, 4, 5 (NOT SEXUALLY ACTIVE OR PREGNANT) THEN**
GO TO 'QA22_J44';
ELSE CONTINUE WITH 'QA22_J41'

'QA22_J41' [AF40B] - Are you or your male sex partner currently using a birth control method to prevent pregnancy? This includes male or female sterilization.

¿Actualmente usa usted o su pareja sexual masculina algún método de control de la natalidad para prevenir el embarazo? Esto incluye la esterilización tanto masculina como femenina.

[IF NEEDED, SAY: 'Sterilization includes having your tubes tied, getting a vasectomy, or having an operation so you cannot have children.']

[IF NEEDED, SAY: 'La esterilización puede ser ligarse las trompas o amarrarse los tubos, hacerse vasectomía o hacerse una operación para no tener hijos.']

- 1 YES
- 2 NO
- 3 NO MALE SEXUAL PARTNER
- 7 REFUSED
- 8 DON'T KNOW

If = 3, -7, -8, goto 'PN_QA21_J42'

If = 2, goto 'PN_QA21_J41'

PROGRAMMING NOTE 'QA22_J42':
IF 'QA22_J41' = 2, , GO TO 'QA22_J43';
IF 'QA22_J41' =3, -7, -8, GO TO 'QA22_J44';
ELSE CONTINUE WITH 'QA22_J42'

'QA22_J42' [AJ154B] - Which birth control method or methods are you using?

¿Qué método o métodos para el control de la natalidad está usando usted?

[CODE ALL THAT APPLY]

[PROBE: 'Any others?']

[PROBE: '¿Algún otro?']

- 1 TUBAL LIGATION (TUBES TIED, CUT)
- 2 VASECTOMY (MALE STERILIZATION)
- 3 IUD (MIRENA®, PARAGARD®, SKYLA®, KYLEENA®, LILETTA®, ETC.)
- 4 IMPLANT (IMPLANON®, NEXPLANON®, ETC.)
- 5 BIRTH CONTROL PILLS
- 6 OTHER HORMONAL METHODS (INJECTION/DEPO-PROVERA, PATCH, VAGINAL RING/NUVARING®)
- 7 CONDOMS (MALE)
- 91 OTHER (SPECIFY: _____)
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA22_J43':
IF 'QA22_J41' =1, GO TO 'QA22_J44',
ELSE CONTINUE WITH 'QA22_J43'

'QA22_J43' [AJ170] - What is the main reason you are not currently using birth control?

¿Cuál es la razón principal por la que actualmente no usa anticonceptivos?

- 1 TRYING TO GET PREGNANT/WANT A BABY
- 2 HAVEN'T FOUND A METHOD I LIKE
- 3 COST
- 4 HAVEN'T HAD TIME TO GO IN FOR BIRTH CONTROL
- 5 NO TRANSPORTATION
- 6 DON'T KNOW WHERE TO GET IT
- 7 DON'T BELIEVE IN BIRTH CONTROL
- 8 WORRIED ABOUT SIDE EFFECTS AND/OR HEALTH RISKS
- 9 PARTNER WON'T LET ME
- 91 OTHER (SPECIFY: _____)
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA22_J43':
IF 'QA22_J42' = 3 (IUD) OR 4 (IMPLANT), GO TO 'QA22_J45';
ELSE CONTINUE WITH 'QA22_J44'

'QA22_J44' [AJ171] - Has a doctor, medical provider, or family planning counselor ever talked to you about an IUD or an implant (that thing in your arm)?

¿Alguna vez un médico, un proveedor de atención médica o un asesor de planificación familiar le habló sobre un DIU o un implante ?

- 1 YES
- 2 NO
- 3 NO MALE SEXUAL PARTNER
- 7 REFUSED
- 8 DON'T KNOW

'QA21_J45' [AJ179] - During the past 12 months, have you received counseling or information about male or female birth control from a doctor or medical provider?

Durante los últimos 12 meses, ¿ha obtenido asistencia o información acerca de anticonceptivos para hombres o para mujeres por parte de un médico o un proveedor de atención médica?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_J46' [AJ180] - During the past 12 months, have you received a birth control method or a prescription for birth control from a doctor, medical provider or a family planning clinic?

Durante los últimos 12 meses, ¿ha recibido usted consejo o información acerca del control de la natalidad de parte de un doctoro de otro proveedor de atención médica?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto 'PN_QA22_J49'

'QA22_J47' [AJ181] - What main birth control method or prescription did you receive?

¿Cuál fue el método o la receta de anticonceptivos principal que recibió?

- 1 TUBAL LIGATION (TUBES TIED, CUT)
- 2 VASECTOMY (MALE STERILIZATION)
- 3 IUD (MIRENA®, PARAGARD®, SKYLA®, KYLEENA®, LILETTA®, ETC.)
- 4 IMPLANT (IMPLANON®, NEXPLANON®, ETC.)
- 5 BIRTH CONTROL PILLS
- 6 OTHER HORMONAL METHODS (INJECTION/DEPO-PROVERA, PATCH, VAGINAL RING/NUVARING®)
- 7 CONDOMS (MALE)
- 91 OTHER (SPECIFY: _____)
- 7 REFUSED
- 8 DON'T KNOW

'QA22_J48' [AJ182] - Where did you receive the main birth control method or prescription?

¿Dónde recibió el método o la receta de anticonceptivos principal?

- 1 PRIVATE DOCTOR'S OFFICE
- 2 HMO FACILITY
- 3 HOSPITAL OR HOSPITAL CLINIC
- 4 PLANNED PARENTHOOD
- 5 COUNTY HEALTH DEPARTMENT, FAMILY PLANNING CLINIC, COMMUNITY CLINIC
- 6 SCHOOL OR SCHOOL-BASED CLINIC
- 7 EMPLOYER OR COMPANY CLINIC
- 8 INDIAN HEALTH SERVICE
- 9 PHARMACY
- 91 SOME OTHER PLACE (SPECIFY : _____)
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA22_J49':
IF 'QA22_A5'=2 (FEMALE AT BIRTH) THEN GO TO 'PN_QA22_J56' ;
ELSE IF 'QA22_A5'=1 (MALE AT BIRTH) AND AAGE <65 CONTINUE WITH 'QA22_J49';

'QA22_J49' [AJ144B] - During the past 12 months, have you received counseling or information about male or female birth control from a doctor or medical provider?

Durante los últimos 12 meses, ¿ha recibido usted consejo o información acerca del control de la natalidad de parte de un doctoro de otro proveedor de atención médica?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA22_J50' [AJ172] - Are you or your female sex partner currently using a birth control method to prevent pregnancy? This includes male or female sterilization.

¿Actualmente usa usted o su pareja sexual femenina algún método de control de la natalidad para prevenir el embarazo? Esto incluye la esterilización tanto masculina como femenina

- 1 YES
- 2 NO
- 3 NO FEMALE SEXUAL PARTNER
- 7 REFUSED
- 8 DON'T KNOW

If = 3, -7, -8, goto 'PN_QA22_J53'

If = 2, goto 'PN_QA22_J52'

'QA22_J51' [AJ174] - Which birth control method or methods are you using?

¿Qué método o métodos para el control de la natalidad está usando usted?

[CODE ALL THAT APPLY]

[PROBE: 'Any others?']

[PROBE: '¿Algún otro?']

- 1 TUBAL LIGATION (TUBES TIED, CUT)
- 2 VASECTOMY (MALE STERILIZATION)
- 3 IUD (MIRENA®, PARAGARD®, SKYLA®, KYLEENA®, LILETTA®, ETC.)
- 4 IMPLANT (IMPLANON®, NEXPLANON®, ETC.)
- 5 BIRTH CONTROL PILLS
- 6 OTHER HORMONAL METHODS (INJECTION/DEPO-PROVERA, PATCH, VAGINAL RING/NUVARING®)
- 7 CONDOMS (MALE)
- 91 OTHER (SPECIFY: _____)
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA22_J52':
IF 'QA22_J50' =1, 3, -7, -8 GO TO 'QA22_J53',
ELSE CONTINUE WITH 'QA22_J52'

'QA22_J52' [AJ175] - What is the main reason you are not currently using birth control?

¿Cuál es la razón PRINCIPAL por la que actualmente NO usa anticonceptivos?

- 1 TRYING TO GET PREGNANT/WANT A BABY
- 2 HAVEN'T FOUND A METHOD I LIKE
- 3 COST
- 4 HAVEN'T HAD TIME TO GO IN FOR BIRTH CONTROL
- 5 NO TRANSPORTATION
- 6 DON'T KNOW WHERE TO GET IT
- 7 DON'T BELIEVE IN BIRTH CONTROL
- 8 WORRIED ABOUT SIDE EFFECTS AND/OR HEALTH RISKS
- 9 PARTNER WON'T LET ME
- 91 OTHER (SPECIFY: _____)
- 7 REFUSED
- 8 DON'T KNOW

'QA22_J53' [AJ183] - During the past 12 months, have you received a birth control method or a prescription for birth control from a doctor, medical provider or a family planning clinic?

Durante los últimos 12 meses, ¿ha recibido usted consejo o información acerca del control de la natalidad de parte de un doctoro de otro proveedor de atención médica?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8 goto PN 'QA22_J56 '

'QA22_J54' [AJ184] - What main birth control method or prescription did you receive?

¿Cuál fue el método o la receta de anticonceptivos principal que recibió?

- 1 TUBAL LIGATION (TUBES TIED, CUT)
- 2 VASECTOMY (MALE STERILIZATION)
- 3 IUD (MIRENA®, PARAGARD®, SKYLA®, KYLEENA®, LILETTA®, ETC.)
- 4 IMPLANT (IMPLANON®, NEXPLANON®, ETC.)
- 5 BIRTH CONTROL PILLS
- 6 OTHER HORMONAL METHODS (INJECTION/DEPO-PROVERA, PATCH, VAGINAL RING/NUVARING®)
- 7 CONDOMS (MALE)
- 91 OTHER (SPECIFY: _____)
- 7 REFUSED
- 8 DON'T KNOW

'QA21_J55' [AJ185] - Where did you receive the main birth control method or prescription?

¿Dónde recibió el método o la receta de anticonceptivos principal?

- 1 PRIVATE DOCTOR'S OFFICE
- 2 HMO FACILITY
- 3 HOSPITAL OR HOSPITAL CLINIC
- 4 PLANNED PARENTHOOD
- 5 COUNTY HEALTH DEPARTMENT, FAMILY PLANNING CLINIC, COMMUNITY CLINIC
- 6 SCHOOL OR SCHOOL-BASED CLINIC
- 7 EMPLOYER OR COMPANY CLINIC
- 8 INDIAN HEALTH SERVICE
- 9 PHARMACY
- 10 SOME OTHER PLACE (SPECIFY: _____)
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA22_J56': IF R LIVES IN LA COUNTY SERVICE PROVIDER AREA (SPA) 1, 2, 4 OR 5, CONTINUE; ELSE GO TO PN_ 'AF22'; ELSE IF QA22_A5=2 AND AAGE 50-74, CONTINUE WITH 'QA22_J55', ELSE SKIP PN_ 'QA22_F40'

(Only administered in Los Angeles Service Planning Areas 1, 2, 4, 5)

'QA22_J56' [AJ206] -During the past 2 years, have you had a mammogram?

Durante los últimos 2 años, ¿se ha realizado una mamografía?

[IF NEEDED, SAY: "A mammogram is an x-ray taken of each breast separately by a machine that flattens or squeezes each breast."]

[IF NEEDED, SAY: " Una mamografía es una radiografía que se toma de cada seno por separado mediante una máquina que aplana o comprime cada seno."]

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

IF= 1, -7, -8 go to PN_ 'QA22_J58'

'QA22_J57' [AJ207] -What is the **one** most important reason why you have not had a mammogram in the past 2 years?

¿Cuál es la razón más importante por la que usted no se ha realizado una mamografía en los últimos 2 años?

- 01 NO REASON/NEVER THOUGHT ABOUT IT
- 02 DIDN'T KNOW I NEEDED THIS TYPE OF TEST
- 03 DOCTOR DIDN'T TELL ME I NEEDED IT
- 04 HAVEN'T HAD ANY PROBLEMS
- 05 PUT IT OFF/LAZINESS
- 06 TOO EXPENSIVE/NO INSURANCE
- 07 TOO PAINFUL, UNPLEASANT, EMBARRASSING
- 08 TOO YOUNG
- 09 DON'T HAVE A DOCTOR
- 10 TRANSPORTATION PROBLEM
- 11 COMPETING PRIORITIES (WORK, CHILDCARE, CAREGIVING)
- 07 REFUSED
- 08 DON'T KNOW

PROGRAMMING NOTE 'QA22_J58'- IF SRAGE >=50 AND <=75, CONTINUE, ELSE SKIP TO PN_ 'QA22_J67'

'QA22_J58' [AF22]- A stool or fecal blood test is done at home to check for colon cancer. You send your stool sample to the doctor's office or lab for testing. Have you ever done a stool or fecal blood test?

Una prueba de sangre en las heces o materia fecal se hace en casa para detectar el cáncer de colon. Usted envía una muestra de las heces al consultorio del doctor o a un laboratorio para que se analicen. ¿Se ha hecho alguna vez una prueba de sangre en las heces o materia fecal?

Do not include over-the-counter test kits from a drugstore or pharmacy

"No incluya las pruebas que se pueden comprar sin receta en una farmacia.

Do not include tests done at the doctor's office

No incluya pruebas hechas en la consulta del doctor.

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

If -2, -7, -8 go to 'QA22_J60'

'QA22_J59' [AF24]- When did you do your most recent blood test using a home kit to check for colon cancer?

¿Cuándo se hizo la prueba más reciente de sangre en el excremento para detectar el cáncer de colon usando un kit en su casa?

- 01 A YEAR AGO OR LESS
- 02 MORE THAN 1 YEAR AGO UP TO 2 YEARS AGO
- 03 MORE THAN 1 YEAR AGO UP TO 2 YEARS AGO
- 04 MORE THAN 2 YEARS AGO UP TO 3 YEARS AGO.
- 05 MORE THAN 3 YEARS AGO UP TO 5 YEARS AGO
- 06 MORE THAN 5 YEARS AGO..
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA22_J60': IF R LIVES IN LA COUNTY SERVICE PROVIDER AREA (SPA) 1, 2, 4 OR 5,) AND [AF22=2 OR (AF22=1 AND AF24>1)], CONTINUE; ELSE GO TO PN_'QA22_J61';

(Only administered in Los Angeles Service Planning Areas 1, 2, 4, 5)

'QA22_J60' [AJ208] -What is the **one** most important reason why you have not had a stool or fecal blood test in the last year ?

¿Cuál es la razón principal por la que usted no se ha hecho una prueba de heces o de sangre fecal en el último año?

- 01 NO REASON/NEVER THOUGHT ABOUT IT
- 02 DIDN'T KNOW I NEEDED THIS TYPE OF TEST
- 03 DOCTOR DIDN'T TELL ME I NEEDED IT
- 04 HAVEN'T HAD ANY PROBLEMS
- 05 PUT IT OFF/LAZINESS
- 06 TOO EXPENSIVE/NO INSURANCE
- 07 TOO PAINFUL, UNPLEASANT, EMBARRASSING
- 08 TOO YOUNG
- 09 DON'T HAVE A DOCTOR
- 10 TRANSPORTATION PROBLEM
- 11 COMPETING PRIORITIES (WORK, CHILDCARE, CAREGIVING)
- 07 REFUSED
- 08 DON'T KNOW

'QA22_J61' [MODAF14]- Have you ever had a sigmoidoscopy, colonoscopy, or a proctoscopy? These are exams in which a health care professional inserts a tube into the rectum to look for signs of cancer or other problems.

¿Alguna vez le hicieron una sigmoidoscopia, colonoscopia o proctoscopia? Estos son exámenes en los que un profesional de la salud inserta un tubo en el recto para buscar signos de cáncer u otros problemas.

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

If -2, -7, -8 go to PN_ 'QA22_J66'

'QA22_J62' [AF16]- How long ago did you have your most recent exam?

¿Hace cuánto tiempo tuvo su examen más reciente?

- 01 A YEAR AGO OR LESS
- 02 MORE THAN 1 YEAR AGO UP TO 2 YEARS AGO
- 03 MORE THAN 2 YEARS AGO UP TO 3 YEARS AGO.
- 04 MORE THAN 3 YEARS AGO UP TO 5 YEARS AGO
- 05 MORE THAN 5 YEARS AGO..
- 7 REFUSED
- 8 DON'T KNOW

'QA22_J63' [AB61]- Sigmoidoscopy, proctoscopy, and colonoscopy are tests that examine the bowel by inserting a tube in the rectum. During a sigmoidoscopy or proctoscopy, you are awake and can drive yourself home after the test; however, during a colonoscopy, you may feel sleepy and you need someone to drive you home. Was your most recent exam a sigmoidoscopy, colonoscopy, or proctoscopy?

Una sigmoidoscopia y una colonoscopia son pruebas que examinan el intestino insertando un tubo en el recto. Durante una sigmoidoscopia, usted está despierto y puede conducir a su casa después de la prueba; sin embargo, durante una colonoscopia, es posible que se sienta somnoliento y necesite que alguien lo lleve a casa. Su examen más reciente fue una sigmoidoscopia, colonoscopia, o proctoscopia?

- 01 SIGMOIDOSCOPY
- 02 COLONOSCOPY
- 03 PROCTOSCOPY
- 7 REFUSED
- 8 DON'T KNOW

'QA21_J64' [AF17]- What was the main reason you had this exam. Was it....

¿Cuál fue la razón principal por la que se sometió a este examen? Fue....

- 01 As part of a routine physical exam or screening test
- 01 *Como parte de un examen físico de rutina o una prueba de detección*
- 02 Because of a specific problem
- 02 *Por un problema específico*
- 03 As a follow-up to an earlier test or screening exam
- 03 *Como seguimiento de una prueba o examen de detección anterior*
- 04 Because of a family history of colorectal cancer?
- 04 *Debido a antecedentes familiares de cáncer colorectal?*
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA22_J65' : IF (R LIVES IN LA COUNTY SERVICE PROVIDER AREA (SPA) 1, 2, 4 OR 5), AND [(AB61= 1 OR 3) OR (AF16=5 AND AB61=2)] CONTINUE TO 'QA22_J65';; ELSE GO TO PN_ AE78MOD;

'QA22_J65' [AJ209] -During the past 10 years, have you had a colonoscopy?

En los últimos 10 años, ¿le han hecho una colonoscopia?

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE: IF (R LIVES IN LA COUNTY SERVICE PROVIDER AREA (SPA) 1, 2, 4 OR 5) AND 'QA22_J65' =2,-7, -8 (NO, REF/DK OR MODAF14 = 2,-7, -8 (NO, REF,DK)), THEN ASK 'QA22_J66';ELSE GO TO 'QA22_J67'

'QA22_J66' [AJ210] -What is the **one** most important reason why you have not had a colonoscopy in the last ten years:?

¿Cuál es la razón más importante por la que usted no se ha realizado una colonoscopia en los últimos diez años?

- 01 NO REASON/NEVER THOUGHT ABOUT IT
- 02 DIDN'T KNOW I NEEDED THIS TYPE OF TEST
- 03 DOCTOR DIDN'T TELL ME I NEEDED IT
- 04 HAVEN'T HAD ANY PROBLEMS
- 05 PUT IT OFF/LAZINESS
- 06 TOO EXPENSIVE/NO INSURANCE
- 07 TOO PAINFUL, UNPLEASANT, EMBARRASSING
- 08 TOO YOUNG
- 09 DON'T HAVE A DOCTOR
- 10 TRANSPORTATION PROBLEM
- 11 COMPETING PRIORITIES (WORK, CHILDCARE, CAREGIVING)
- 07 REFUSED
- 08 DON'T KNOW

PROGRAMMING NOTE 'QA22_J67': IF R LIVES IN LA COUNTY SERVICE PROVIDER AREA (SPA) 1, 2, 4 OR 5, CONTINUE; ELSE GO TO 'QA22_J73';IF AAGE >50, SKIP TO 'QA22_J73'

(Only administered in Los Angeles Service Planning Areas 1, 2, 4, 5)

'QA22_J67' [AE78MOD]- HPV stands for Human Papillomavirus. The vaccine is given to males and females as young as age 9 to prevent sexually transmitted HPV infections that cause certain kinds of cancers.

VPH significa virus del papiloma humano. La vacuna se administra a hombres y mujeres a partir de los 9 años para prevenir las infecciones por VPH de transmisión sexual que causan ciertos tipos de cánceres.

Have you ever received the HPV vaccine?

¿Alguna vez recibió la vacuna contra el VPH?

[INTERVIEWER NOTE: IF RESPONDENT MENTIONS "GARDASIL", THEN CODE YES.]

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

If 2, -7, -8 goto PN_ 'QA22_J69'

'QA22_J68' [AJ211]- How many doses or shots have you received?

¿Cuántas dosis o inyecciones ha recibido?

- 01 1
- 01 1
- 02 2
- 02 2
- 03 3 or more
- 03 3 o más

PROGRAMMING NOTE 'QA22_J69'- IF ONE ELIGIBLE MALE CHILD BETWEEN 9-17 YEARS OF AGE, CONTINUE WITH 'QA22_J69', ELSE GO TO 'PN_QA22_J70'

'QA22_J69' [AJ212]- For your son aged between 9-17 years, has he received at least one dose of the HPV vaccine?

En cuanto a su hijo de entre 9 y 17 años, ¿ha recibido al menos una dosis de la vacuna contra el VPH?

[IF NEEDED: HPV stands for Human Papillomavirus.]

[IF NEEDED: VPH son las siglas del Virus del Papiloma Humano.]

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA22_J71': IF ONE ELIGIBLE FEMALE CHILD BETWEEN 9-17 YEARS OF AGE, CONTINUE WITH 'QA22_J71', ELSE GO TO PN_ 'QA22_J72'

'QA22_J71' [AJ213]- For your {NUMBER OF SONS} sons aged between 9-17 years, how many have received at least one dose of the HPV vaccine?

En cuanto a sus {NUMBER OF SONS} hijos de entre 9 y 17 años, ¿cuántos han recibido al menos una dosis de la vacuna contra el VPH?

HPV stands for Human Papillomavirus

VPH son las siglas del Virus del Papiloma Humano

- 01 _____ Sons
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA22_J72': IF MORE THAN ONE ELIGIBLE FEMALE CHILD BETWEEN 9-17 YEARS OF AGE, CONTINUE WITH 'QA22_J72', ELSE GO TO 'QA22_J73'

'QA22_J72' [AJ214]- For your daughter aged between 9-17 years, has she received at least one dose of the HPV vaccine?

En cuanto a su hija de entre 9 y 17 años, ¿ha recibido al menos una dosis de la vacuna contra el VPH?

HPV stands for Human Papillomavirus

VPH son las siglas del Virus del Papiloma Humano

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA22_J72': IF MORE THAN ONE ELIGIBLE FEMALE CHILD BETWEEN 9-17 YEARS OF AGE, CONTINUE WITH 'QA22_J72', ELSE GO TO 'QA22_J73'

'QA22_J72' [AJ215]- For your {NUMBER OF DAUGHTERS} daughters aged between 9-17 years, how many have received at least one dose of the HPV vaccine?

En cuanto a sus {NUMBER OF DAUGHTERS} hijas de entre 9 y 17 años, ¿cuántas han recibido al menos una dosis de la vacuna contra el VPH?

[IF NEEDED: HPV stands for Human Papillomavirus.]

[IF NEEDED: VPH son las siglas del Virus del Papiloma Humano]

- 01 _____ Daughters
- 7 REFUSED
- 8 DON'T KNOW'

PROGRAMMING NOTE 'QA22_J73': IF R LIVES IN MLKCH SERVICE AREA AND 'QA22_A5'=1 (MALE AT BIRTH), CONTINUE, ELSE GO TO 'PN_QA22_J74'

'QA22_J73' [AF33B]- When did you have your most recent PSA test?

¿Hace cuánto tiempo tuvo su examen PSA más reciente?

[IF NEEDED, SAY: "A PSA test is a blood test to detect prostate cancer. It is also called a prostate-specific antigen test."]

[IF NEEDED, SAY: "La prueba PSA es un examen de sangre para detectar el cáncer de próstata. También se le conoce como prueba de antígeno prostático específico."]

- 01 A YEAR AGO OR LESS
- 02 MORE THAN 1 YEAR AGO UP TO 2 YEARS AGO
- 03 MORE THAN 2 YEARS AGO UP TO 3 YEARS AGO
- 04 MORE THAN 3 YEARS AGO UP TO 5 YEARS AGO
- 05 MORE THAN 5 YEARS AGO
- 06 I HAVE NEVER HAD A PSA TEST
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA22_J74': IF R LIVES IN MLKCH SERVICE AREA AND 'QA22_A5'=2 (FEMALE AT BIRTH), CONTINUE, ELSE GO TO 'PN_QA22_J75'

'QA22_J74' [AD4B]- How long ago did you have your most recent Pap test?

¿Hace cuánto tiempo tuvo su examen más reciente de papanicolaou?

[IF NEEDED, SAY: "A pap smear test is a test to detect cervical cancer."]

[IF NEEDED, SAY: "Una prueba de papanicolaou es un examen para detectar el cáncer cervical."]

- 01 A YEAR AGO OR LESS
- 02 MORE THAN 1 YEAR AGO UP TO 2 YEARS AGO
- 03 MORE THAN 2 YEARS AGO UP TO 3 YEARS AGO
- 04 MORE THAN 3 YEARS AGO UP TO 5 YEARS AGO
- 05 MORE THAN 5 YEARS AGO
- 06 I HAVE NEVER HAD A PAP SMEAR TEST
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA22_J75' :

IF TSE=1, DISPLAY “ About how long has it been since you visited a dentist or dental clinic? Include hygienists and all types of dental specialists?”

IF TSE=2, DISPLAY “These next questions are about dental health. About how long has it been since you visited a dentist or dental clinic? Include hygienists and all types of dental specialists.”

'QA22_J75' [AG1] - {{About how long has it been since you visited a dentist or dental clinic? Include hygienists and all types of dental specialists./These next questions are about dental health. About how long has it been since you visited a dentist or dental clinic? Include hygienists and all types of dental specialists.}}

{{¿Cómo cuánto tiempo ha pasado desde la última vez que usted fue a un dentista o a una clínica dental? Incluya higienistas y todo tipo de especialistas dentales./ Las siguientes preguntas son acerca de la salud dental. ¿Cómo cuánto tiempo ha pasado desde la última vez que usted fue a un dentista o a una clínica dental? Incluya higienistas y todo tipo de especialistas dentales.}}

- 0 HAVE NEVER VISITED
- 1 6 MONTHS AGO OR LESS
- 2 MORE THAN 6 MONTHS, AND UP TO 1 YEAR
- 3 MORE THAN 1 YEAR, AND UP TO 2 YEARS AGO
- 4 MORE THAN 2 YEARS, AND UP TO 5 YEARS AGO
- 5 MORE THAN 5 YEARS AGO
- 7 REFUSED
- 8 DON'T KNOW

If = 0, -7, -8, goto 'QA22_J77'

PROGRAMMING NOTE 'QA22_J76' IF 'QA22_J75'=1-5, THEN CONTINUE WITH 'QA22_J76', ELSE GO TO 'QA22_J77'

'QA22_J76' AJ167] - Was it for a routine checkup or cleaning, or was it for a specific problem?

¿Fue para un examen o limpieza de rutina o fue por un problema específico?

- 1 ROUTINE CHECKUP OR CLEANING
- 2 SPECIFIC PROBLEM
- 3 BOTH
- 7 REFUSED
- 8 DON'T KNOW

'QA21_J77' [AG3] - Do you now have any type of insurance that pays for part or all of your dental care?

¿Tiene usted actualmente algún tipo de seguro que pague por parte o toda la atención dental que usted recibe?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_J78' [AJ168] - How would you describe the condition of your teeth: excellent, very good, good, fair, or poor?

¿Cómo describiría la condición de sus dientes?

- 1 EXCELLENT
- 2 VERY GOOD
- 3 GOOD
- 4 FAIR
- 5 POOR
- 6 HAS NO NATURAL TEETH
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA22_J79' :IF TRANSITION STATEMENT EXPERIMENT SAMPLE (TSE=1), DISPLAY "Thinking about when you are receiving medical care, was there ever a time when you would have gotten better care if you had belonged to a different race or ethnic group?"

ELSE IF TRANSITION STATEMENT CONTROL SAMPLE (TSE=2), DISPLAY "These next questions are about things that have happened to you while receiving medical care. The questions ask about times where you were treated unfairly. Was there ever a time when you would have gotten better medical care if you had belonged to a different race or ethnic group?"

'QA22_J79' [DMC8] – { Thinking about when you are receiving medical care, was there ever a time when you would have gotten better care if you had belonged to a different race or ethnic group?/ "These next questions are about things that have happened to you while receiving medical care. The questions ask about times where you were treated unfairly. Was there ever a time when you would have gotten better medical care if you had belonged to a different race or ethnic group? }

{ Thinking about when you are receiving medical care, ¿Hubo alguna ocasión cuando pudo haber obtenido mejor atención médica si hubiera sido de otra raza o de otro grupo étnico? / "Las siguientes preguntas son acerca de situaciones que le hayan sucedido al recibir atención médica. ¿Hubo alguna ocasión cuando pudo haber obtenido mejor atención médica si hubiera sido de otra raza o de otro grupo étnico?}

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If 2, -7, -8 goto 'QA22_J82'

'QA22_J80' [DMC9] - Think about the last time this happened. How long ago was that?

Piense en la última vez que esto ocurrió. ¿Hace cuánto tiempo sucedió eso?

- 1 A YEAR AGO OR LESS
- 2 MORE THAN 1 UP TO 2 YEARS AGO
- 3 MORE THAN 2 UP TO 3 YEARS AGO
- 4 MORE THAN 3 UP TO 5 YEARS AGO
- 5 MORE THAN 5 UP TO 10 YEARS AGO
- 6 MORE THAN 10 UP TO 20 YEARS AGO
- 7 MORE THAN 20 YEARS AGO
- 7 REFUSED
- 8 DON'T KNOW

IPVINTRO' [IPVINTRO] - The next questions are about relationships with intimate partners and your personal safety. An intimate partner is a husband, wife, boyfriend, girlfriend, or someone you lived with or dated. Some questions ask about being threatened or slapped or hit; others ask about unwanted sexual experiences. If any question upsets you, you don't have to answer it. Your answers will be kept private.

Las siguientes preguntas tratan sobre las relaciones con las parejas íntimas y su seguridad personal. Pareja íntima es un esposo, esposa, novio, novia o alguien con quien vivía o con quien salía. Algunas preguntas se refieren a ser amenazado/a, abofeteado/a o golpeado/a; otras sobre experiencias sexuales no deseadas. Si alguna pregunta le incomoda, no tiene que responderla. Sus respuestas se mantendrán privadas.

'QA21_J82' [AJ57] - After you turned 18, has a current or past intimate partner ever hit, slapped, pushed, kicked, or physically hurt you in any way?

Después de que cumplió 18 años, ¿alguna vez una pareja íntima lo/la golpeó, abofeteó, empujó, pateó o lastimó físicamente de alguna manera?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_J83' [AJ58] - After you turned 18, has a current or past intimate partner ever forced you into unwanted sexual intercourse, oral or anal sex, or sex with an object by using force or threatening to harm you?

[IF NEEDED, SAY: "Unwanted" means you did not consent or agree.]

[IF NEEDED, SAY: "*No deseada*" significa que usted no consentía o no estaba de acuerdo.."]

[ONLY IF RESPONDENT ASKS WHAT "unwanted sex" stands for, SAY: "Unwanted sexual intercourse."]

[ONLY IF RESPONDENT ASKS WHAT "unwanted sex" stands for, SAY: "Unwanted sexual intercourse."]

[ONLY IF FEMALE R ASKS FOR A DEFINITION OF ORAL SEX, SAY: "By oral sex, we mean someone touched your vagina, rectum or buttocks with their mouth or tongue, or a male put his penis in your mouth."]

[ONLY IF FEMALE R ASKS FOR A DEFINITION OF ORAL SEX, SAY: "*Sexo oral quiere decir que alguien le tocó la vagina, el recto o las nalgas con la boca o la lengua, o que un hombre le puso el pene en la boca.*"]

[ONLY IF MALE R ASKS FOR A DEFINITION OF ORAL SEX, SAY: "By oral sex, we mean someone touched your rectum or buttocks with their mouth or tongue or a male put his penis in your mouth."]

[ONLY IF MALE R ASKS FOR A DEFINITION OF ORAL SEX, SAY: "*Sexo oral quiere decir que alguien le tocó el recto o las nalgas con la boca o la lengua, o que un hombre le puso el pene en la boca*"]

[ONLY IF R ASKS FOR A DEFINITION OF ANAL SEX, SAY: "By anal sex, we mean that a male put his penis in your rectum or buttocks."]

[ONLY IF R ASKS FOR A DEFINITION OF ANAL SEX, SAY: "*Sexo anal significa que un hombre le puso el pene en el recto o en las nalgas.*"]

[ONLY IF FEMALE R ASKS FOR A DEFINITION OF SEX WITH AN OBJECT, SAY: "By sex with an object, we mean that someone put fingers or objects in your vagina, rectum or buttocks or touched your breast."]

[ONLY IF FEMALE R ASKS FOR A DEFINITION OF SEX WITH AN OBJECT, SAY: "*Por sexo con un objeto, nos referimos a que alguien pone dedos u objetos en su vagina, recto o glúteos o tocó sus pechos.*"]

[ONLY IF MALE R ASKS FOR A DEFINITION OF SEX WITH AN OBJECT, SAY: "By sex with an object, we mean that someone put fingers or objects in your rectum or buttocks or touched your penis."]

[ONLY IF MALE R ASKS FOR A DEFINITION OF SEX WITH AN OBJECT, SAY: "*Por sexo con un objeto, nos referimos a que alguien pone dedos u objetos en su recto o glúteos.*"]

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA22_J84': IF 'QA22_J82' = 1 (YES TO PHYSICAL VIOLENCE), CONTINUE WITH AJ59; IF 'QA22_J82' = 2, -7, -8 (NO, REFUSED, DON'T KNOW) AND IF 'QA22_J83' = 1 (YES) [I.E. NO PHYSICAL VIOLENCE, YES TO SEXUAL VIOLENCE], GO TO 'QA22_J87'; IF 'QA22_J82' = 2, -7, -8 (NO, REFUSED, DON'T KNOW) AND IF 'QA22_J83' = 2, -7, -8 (NO, REFUSED, DON'T KNOW) [I.E. NO PHYSICAL AND NOSEXUAL VIOLENCE], SKIP TO 'QA22_J95'; IF 18 YEARS OLD, DISPLAY "SINCE YOU TURNED 18" ELSE IF > 18 YEARS OLD, DISPLAY "IN THE PAST 12 MONTHS"

'QA22_J84' [AJ59] - {After you turned 18/In the past 12 months} did any intimate partner do any of the following:

{Después de que cumplió 18 años/ En los últimos 12 meses}¿alguna pareja íntima hizo algo de lo siguiente?

Throw something at you that could hurt you?

¿Arrojarle algo que podría hacerle daño?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_J85' [AJ60] - {After you turned 18/In the past 12 months} did any intimate partner do any of the following:

{Después de que cumplió 18 años/ En los últimos 12 meses}¿alguna pareja íntima hizo algo de lo siguiente?

Push, grab, or slap you?

¿Empujarle, agarrarle o abofetearle?

[IF NEEDED, SAY: {After you turned 18/In the past 12 months}, did any intimate partner push, grab or slap you?]

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_J86' [AJ61] - {After you turned 18/In the past 12 months} did any intimate partner do any of the following:

{Después de que cumplió 18 años/ En los últimos 12 meses}¿alguna pareja íntima hizo algo de lo siguiente?

Kick, bite, hit, choke, or beat you up?

¿Darle patadas, morderle, ahogarle o golpearle?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_J87' [AJ64] - {After you turned 18/In the past 12 months} did any intimate partner do any of the following:

{Después de que cumplió 18 años/ En los últimos 12 meses}¿alguna pareja íntima hizo algo de lo siguiente?

Threaten you with or use a gun, knife, or other weapon on you?

¿Amenazarle con una pistola, un cuchillo u otra arma, o usar alguna de estas cosas contra usted?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_J88' [AJ66] - {After you turned 18/In the past 12 months} did any intimate partner do any of the following:

{Después de que cumplió 18 años/ En los últimos 12 meses}¿alguna pareja íntima hizo algo de lo siguiente?

Physically force you to have unwanted sex?

¿Le forzó físicamente {a tener sexo no deseado/ a tener relaciones sexuales indeseadas}?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA22_J89': IF 'AJ78'- 'QA22_J88'=1, THEN CONTINUE WITH 'QA22_J89', ELSE SKIP TO PN_QA22_J92'
IF 'QA22_J84'- 'QA22_J88'= MORE THAN ONE RESPONSE DISPLAY "ANY OF THESE THINGS"
ELSE IF 'QA22_J84'- 'QA22_J88'= ONE RESPONSE DISPLAY "THIS";
ELSE IF AAGE=18 YEARS, DISPLAY "SINCE YOU TURNED 18";
ELSE IF AAGE>19, DISPLAY "IN THE PAST 12 MONTHS" AND "NUMBER OF TIMES IN THE PAST 12 MONTHS"

'QA22_J89' [AJ67] - {How many times has any intimate partner done {this/any of these things} to you {since you turned 18/in the past 12 months}?

{¿Cuántas veces alguna pareja íntima le ha hecho {esto/alguna de estas cosas} {desde que cumplió 18 años/en los últimos 12 meses}?

- 1 ____ Number of times
- 7 REFUSED
- 8 DON'T KNOW

'QA21_J90' [MODAJ69] - Thinking about the most recent incident, what was this person's relationship to you? {If more than one person was involved, please tell me all of them.}

Pensando en el incidente más reciente, ¿cuál era la relación de esa persona con usted?

[IF R ASKS WHAT AN INCIDENT IS, SAY: "An incident is an event or something that happened."]

[IF R ASKS WHAT AN INCIDENT IS, SAY: "*Un incidente es un evento o algo que sucedió.*"]

[CODE ALL THAT APPLY]

- 1 CURRENT BOYFRIEND/GIRLFRIEND
- 2 FORMER BOYFRIEND/GIRLFRIEND
- 3 FIANCE
- 4 SPOUSE OR LIVE-IN PARTNER
- 5 FORMER SPOUSE OR FORMER LIVE-IN PARTNER
- 6 SOMEONE YOU WERE DATING
- 7 FIRST DATE
- 91 OTHER (SPECIFY:____)
- 7 DON'T KNOW
- 8 REFUSED

PROGRAM NOTE 'QA22_J91': IF 'QA22_J86' =1,2, -7, -8 ONLY (ONLY CURRENT OR FORMER BOYFRIEND OR GIRLFRIEND OR REF/DK), SKIP TO MODJA72; ELSE IF 'QA22_J90' = 4,5,6, 91 (CURRENT OR FORMER SPOUSE OR PARTNER OR DATE OR OTHER), THEN IF 'QA22_D11'= 1 (HETEROSEXUAL, SKIP TO 'QA22_J93' ELSE IF QA22_D11'> 1 (NOT HETEROSEXUAL, CONTINUE WITH 'QA22_J91' AND IF 'QA22_D8= 1 (ONE PARTNER), DISPLAY "WAS"/"PERSON" IN QUESTION AND DO NOT DISPLAY RESPONSE CATEGORY 3 (BOTH); IF QA22_D8> 1 (MORE THAN ONE PARTNER) OR -7 OR -8 (REF/DK), DISPLAY "WERE"/"PEOPLE"

'QA22_J91' [MODAJ70] - Was the person male or female?/ Were the people male or female?

¿La persona era hombre o mujer?/¿Las personas eran hombres o mujeres?

- 1 MALE(S)
- 2 FEMALE(S)
- 3 BOTH
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA22_J92' : IF AD43B > 1 (MORE THAN ONE PARTNER) OR -7 OR -8 (REF/DK), DISPLAY "WERE"/"PEOPLE"

'QA22_J92' [MODAJ72] - When this happened, did the {person/people} who did this to you appear to have been drinking or using drugs?

Quando esto sucedió, ¿{la persona que le hizo esto parecía / las personas que le hicieron esto parecían} haber estado bebiendo o consumiendo drogas?

**[IF NEEDED, SAY: "By drinking, I mean drinking alcohol."]
[IF NEEDED, SAY: "Por beber, me refiero a beber alcohol"]**

[INTERVIEWER NOTE: IF MORE THAN ONE PERSON WAS INVOLVED, AND R SAYS ONLY ONE PERSON APPEARED TO BE DRINKING OR USING DRUGS, CODE "YES".]

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA22_J93': IF 'QA22_J82' THROUGH 'QA22_J89' = 1 (YES TO ADULT EXPERIENCING PAST 12 MONTH PHYSICAL OR SEXUAL VIOLENCE) OR [AGE = 18 YEARS AND ANY OF 'QA22_J86' THROUGH 'QA22_J90' = 1 (YES TO ANY DOMESTIC VIOLENCE EVER), THEN SAY:

'QA22_J93' [AJ76b] - "We have a toll free number if you'd like to talk about these issues. Would you like the toll-free number?"

Tenemos un número gratuito si desea hablar sobre estos temas. Alguien está disponible las 24 horas del día para brindar información. ¿Le gustaría conocer el número de teléfono gratuito?"

[IF R SAYS "YES", SAY: Someone is available 24 hours a day to provide information. GIVE OUT 1-800-799-7233; TTY 1-800-787-3224 TOLL-FREE NUMBER. THIS IS THE NATIONAL DOMESTIC VIOLENCE HOTLINE.]

[IF R SAYS "YES", SAY *Alguien está disponible las 24 horas del día para brindar información.* GIVE OUT 1-800-799-7233; TTY 1-800-787-3224 TOLL-FREE NUMBER. THIS IS THE NATIONAL DOMESTIC VIOLENCE HOTLINE.]

[IF CATI, DISPLAY: Would you like me to repeat this information?]

PROGRAMMING NOTE 'QA22_J94': IF 'QA22_J83' OR 'QA22_J848 = 1 THEN SHOW:

'QA22_J94' [SVRESOURCE] - We realize that this topic may bring up past experiences that some people may wish to talk about. If you or someone you know would like to talk to a trained counselor, please call 1-800-656-HOPE (4673) or please visit this website: www.rainn.org.

Entendemos que este tema puede recordarle experiencias anteriores de las que algunas personas pueden querer hablar un poco más. Si usted o alguien que conoce desea hablar con un consejero capacitado, llame al 1-800-656-HOPE (4673) o visite el sitio web: www.rainn.org.

[IF CATI, DISPLAY: Would you like me to repeat this information?]

PROGRAMMING NOTE 'QA22_J95'_INTRO:IF PROXY=1, GO TO 'QA22_K1'
IF TSE=1, DISPLAY “Some people provide short-term or long-term help to a family member or friend who has a serious or chronic illness or disability. This may include help with things they cannot do for themselves.
 During the past 12 months, did you provide any such help to a family member or friend?}
 This may include help with baths, medicines, household chores, paying bills, driving to doctor’s visits or the grocery store, arranging for medical and support services, or just checking in to see how they are doing”
IF TSE=2, DISPLAY “Now we’d like to ask about care giving. Some people provide short-term or long-term help to a family member or friend who has a serious or chronic illness or disability. This may include help with things they cannot do for themselves.
 During the past 12 months, did you provide any such help to a family member or friend? This may include help with baths, medicines, household chores, paying bills, driving to doctor’s visits or the grocery store, arranging for medical and support services, or just checking in to see how they are doing.”

'QA22_J95' [AJ87] – {{{{Some people provide short-term or long-term help to a family member or friend who has a serious or chronic illness or disability. This may include help with things they cannot do for themselves.

During the past 12 months, did you provide any such help to a family member or friend?/ Now we’d like to ask about care giving. Some people provide short-term or long-term help to a family member or friend who has a serious or chronic illness or disability. This may include help with things they cannot do for themselves. During the past 12 months, did you provide any such help to a family member or friend?}}

{{{ Algunas personas ayudan a familiares o amigos que tienen una discapacidad o enfermedad grave o crónica. Esto puede incluir ayudar con actividades que ya no pueden hacer por sí mismos. Durante los últimos 12 meses, ¿ofreció alguna ayuda de este tipo a un familiar o amigo?/ Ahora nos gustaría preguntarle sobre actividades de cuidado. Algunas personas ayudan a familiares o amigos que tienen una discapacidad o enfermedad grave o crónica. Esto puede incluir ayudar con actividades que ya no pueden hacer por sí mismos. Durante los últimos 12 meses, ¿ofreció alguna ayuda de este tipo a un familiar o amigo?}}

[IF NEEDED, SAY: 'This may include help with baths, medicines, household chores, paying bills, driving to doctor’s visits or the grocery store, arranging for medical and support services, or just checking in to see how they are doing.']

[IF NEEDED, SAY: 'Esto puede incluir ayuda con baños, medicamentos, tareas domésticas, pagar facturas, llevarlos a consultas médicas o al supermercado, coordinar servicios médicos y de asistencia, o simplemente visitarlos para ver cómo están.']

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8 goto 'PN_QA21_K1'

PROGRAMMING NOTE 'QA22_J96' :**IF TSE=1, DISPLAY** “ Please think about the person for whom you provided the most care.

Do you currently provide care for this person?”

IF TSE=2, DISPLAY “For the next set of questions, please think about the person for whom you provided the most care.

Do you currently provide care for this person?”

'QA22_J96' [AJ101B] - {Please think about the person for whom you provided the most care.

Do you currently provide care for this person?/For the next set of questions, please think about the person for whom you provided the most care.

Do you currently provide care for this person?}}

{Piense en la persona a la que cuidó más. Actualmente, ¿brinda cuidado a esta persona?/ En el siguiente grupo de preguntas, piense en la persona a la que más cuidó. Actualmente, ¿brinda cuidado a esta persona?}}

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

Section K: Employment, Income, Poverty Status, Food Security

PROGRAMMING NOTE 'QA22_K1' :
IF 'QA22_G18' = 1 (WORKING AT JOB OR BUSINESS) OR 2 (WITH A JOB OR BUSINESS BUT NOT AT WORK) OR 'QA22_G20' = 1 (R USUALLY WORKS) CONTINUE WITH 'QA22_K1' ;
ELSE GO TO PROGRAMMING NOTE 'QA22_K4'
IF TSE=1, DISPLAY " How many hours per week do you usually work at all jobs or businesses?"
IF TSE=2, DISPLAY "The next questions are about your employment. How many hours per week do you usually work at all jobs or businesses?"

'QA22_K1' [AK3] - {{How many hours per week do you usually work at all jobs or businesses? / The next questions are about your employment.

{{How many hours per week do you usually work at all jobs or businesses? }}

{{¿Cuántas horas a la semana trabaja usted normalmente en todos sus empleos o negocios?/ Las preguntas siguientes se refieren a su empleo. ¿Cuántas horas a la semana trabaja usted normalmente en todos sus empleos o negocios?}}

[IF WORKS > 95 HOURS, ENTER 95. IF DOES NOT WORK, ENTER 0 (ZERO).]

¿Cuántas horas a la semana trabaja usted normalmente en todos sus empleos o negocios?

_____ HOURS [HR: 0-95]

- 7 REFUSED
 -8 DON'T KNOW

'QA21_K2' [AK7] - How long have you worked at your main job?

¿Cuánto tiempo ha trabajado usted en su trabajo principal?

[IF NEEDED, SAY: 'That is, for your current employer.']

[IF NEEDED, SAY: 'Es decir en su empleo actual.']

[INTERVIEWER NOTE: IF LESS THAN 1 MONTH BUT MORE THAN 0 DAYS, ENTER 1 MONTH]

_____ MONTHS [HR: 0-12]
 _____ YEARS [HR: 0-50]

- 7 REFUSED
 -8 DON'T KNOW

PROGRAMMING NOTE 'QA21_K3' :

**IF 'QA21_G18' = 1 (WORKING AT JOB OR BUSINESS) OR 2 (WITH JOB OR BUSINESS BUT NOT AT WORK)] OR 'QA21_G20' = 1 (USUALLY WORKS), CONTINUE WITH 'QA21_K3' ;
ELSE SKIP TO PROGRAMMING NOTE 'QA21_K4'**

'QA21_K3' [AK10] - What is your best estimate of all your earnings last month before taxes and other deductions from all jobs and businesses, including hourly wages, salaries, tips and commissions?

¿Cuál es su mejor cálculo de todas las ganancias tuyas el mes pasado antes de impuestos y de otras deducciones de todos los trabajos y negocios incluyendo sueldos por hora, salarios, propinas y comisiones?

[IF AMOUNT GREATER THAN \$999,995, ENTER '999,995']

\$_____ AMOUNT [HR: 0-999995]

- 7 REFUSED
 -8 DON'T KNOW

PROGRAMMING NOTE 'QA22_K4' ;IF 'QA22_G26' = [1 (SPOUSE/PARTNER WORKING AT JOB OR BUSINESS) OR 2 (SPOUSE/PARTNER WITH JOB OR BUSINESS BUT NOT AT WORK)] OR 'QA22_G27' = 1 (SPOUSE/PARTNER USUALLY WORKS), CONTINUE WITH 'QA22_K4' AND:

IF 'QA22_G18' ≠ 1 OR 2 (R NOT AT A JOB OR BUSINESS LAST WEEK, DID NOT WORK, AND DOES NOT HAVE A JOB) AND 'QA22_G20' ≠ 1 (R DOES NOT USUALLY WORK), AND 'QA22_A23' = 1 (MARRIED), DISPLAY 'The next question is about your spouse's employment.'

ELSE IF 'QA22_G18' ≠ 1 OR 2 (R NOT AT A JOB OR BUSINESS LAST WEEK, DID NOT WORK, AND DOES NOT HAVE A JOB) AND 'QA22_G20' ≠ 1 (R DOES NOT USUALLY WORK), AND

('QA22_D13' = 1 OR 'QA22_D14' = 1), THEN DISPLAY 'The next question is about your partner's employment.' IF 'QA22_A23' = 1 THEN DISPLAY 'spouse';

ELSE IF 'QA22_D13' = 1 OR 'QA22_D14' = 1 THEN DISPLAY 'partner';

ELSE SKIP TO 'QA22_K6'

IF TSE=1, DISPLAY "How many hours per week does your { spouse/partner} usually work at all jobs or businesses?"

IF TSE=2, DISPLAY "{The next question is about your spouse's employment.}

How many hours per week does your { spouse/partner} usually work at all jobs or businesses?"

'QA22_K4' [AK20] - {{How many hours per week does your { spouse/partner} usually work at all jobs or businesses?}{The next question is about your spouse's employment.}}

How many hours per week does your { spouse/partner} usually work at all jobs or businesses?}}

{{¿Cuántas horas a la semana trabaja normalmente su {esposo(a)} en todos los empleos o negocios que tiene?/¿Cuántas horas a la semana trabaja normalmente su {esposo(a)} en todos los empleos o negocios que tiene?}}

_____ HOURS [HR: 0-95]

- 7 REFUSED
 -8 DON'T KNOW

PROGRAMMING NOTE 'QA21_K5' :
IF 'QA21_K4' ≠ 0 CONTINUE WITH 'QA21_K5' ;
IF 'QA21_A23' = 1 (MARRIED), THEN DISPLAY 'spouse's' ;
ELSE IF 'QA21_D13' = 1 OR 'QA21_D14' = 1, THEN DISPLAY 'partner's' ;
ELSE GO TO 'QA21_K6'

'QA21_K5' [AK10A] - What is your best estimate of all your {spouse's/partner's} earnings last month before taxes and other deductions from all jobs and businesses, including hourly wages, salaries, tips, and commissions?

¿Cuánto calcula que ganó su {esposo(a)/pareja} el mes pasado antes de los impuestos y otras deducciones en todos los empleos y negocios que tiene, incluyendo sueldo por horas, salarios, propinas y comisiones?

[IF AMOUNT GREATER THAN \$999,995, ENTER '999,995']

\$_____ AMOUNT

- 7 REFUSED
 -8 DON'T KNOW

'QA21_K6' [AK22] - What is your best estimate of your household's total annual income from all sources before taxes in 2021?

¿Cuánto calcula que fue el ingreso anual total de su hogar proveniente de todas las fuentes antes de impuestos en el 2021?

[IF NEEDED, SAY: 'Include money from jobs, social security, retirement income, unemployment payments, public assistance and so forth. Also include income from interest, dividends, net income from business, farm, or rent and any other money income.']

[IF NEEDED, SAY: 'Incluya dinero de trabajos, seguro social, jubilación, pagos por desempleo, asistencia pública y fuentes similares. También incluya ingresos por intereses, dividendos, ingreso neto de negocios, finca o rancho o alquiler, y cualquier otro ingreso de dinero.']

[IF AMOUNT GREATER THAN \$999,995, ENTER '999,995']

\$_____ AMOUNT [HR: 0-999995]

- 7 REFUSED
 -8 DON'T KNOW

If = -7, -8, goto 'PN_QA21_K8'

'QA21_K7' [AK22A] - PLEASE VERIFY AMOUNT ENTERED:

I have entered that your annual household income is (AMOUNT). Is that correct?

He anotado que los ingresos de su hogar son (AMOUNT). ¿Es esto correcto?

- 1 YES
 2 NO

If = 1, goto 'PN_QA21_K14'

If = 2, Go back to 'QA21_K6'

PROGRAMMING NOTE 'QA21_K8' :
IF 'QA21_K6' = -7 OR -8 CONTINUE WITH 'QA21_K8' ;
ELSE GO TO PROGRAMMING NOTE 'QA21_K14'

'QA21_K8' [AK11] - We don't need to know exactly, but could you tell me if your household's annual income from all sources before taxes is more than \$20,000 per year or is it less?

No necesitamos saber exactamente, ¿pero podría decirme si el ingreso anual de su hogar de todas las fuentes antes de impuestos es...

- 1 MORE
- 2 EQUAL TO \$20K OR LESS
- 7 REFUSED
- 8 DON'T KNOW

If = 1, goto 'QA21_K10'

If = -7, -8, goto 'PN_QA21_K14'

'QA21_K9' [AK12] - Is it ...

¿Es...

- 1 \$5,000 OR LESS,
- 2 \$5,001 TO \$10,000
- 3 \$10,001 TO \$15,000
- 4 \$15,001 TO 20,000
- 7 REFUSED
- 8 DON'T KNOW

If = 1, 2, 3, 4, -7, -8, goto 'PN_QA21_K14'

'QA21_K10' [AK13] - Is it more or less than \$70,000 per year?

¿Es...

- 1 MORE
- 2 EQUAL TO \$70K OR LESS
- 7 REFUSED
- 8 DON'T KNOW

If = 1, goto 'QA21_K12'

If = -7, -8, goto 'PN_QA21_K14'

'QA21_K11' [AK14] - Is it ...

Es...

- 1 \$20,001 TO \$30,000
- 2 \$30,001 TO \$40,000
- 3 \$40,001 TO \$50,000
- 4 \$50,001 TO \$60,000
- 5 \$60,001 to \$70,000
- 7 REFUSED
- 8 DON'T KNOW

If = 1, 2, 3, 4, 5, -7, -8, goto 'PN_QA21_K14'

'QA21_K12' [AK15] - Is it more or less than \$135,000 per year?

Es...

- 1 MORE
- 2 EQUAL TO \$135K OR LESS
- 7 REFUSED
- 8 DON'T KNOW

If = 1, -7, -8, goto 'PN_QA21_K14'

'QA21_K13' [AK16] - Is it ...

Es...

- 1 \$70,001 TO \$80,000
- 2 \$80,001 TO \$90,000
- 3 \$90,001 TO \$100,000
- 4 \$100,001 TO \$135,000
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_K14' :
IF R IS ONLY MEMBER OF HH, GO TO PROGRAMMING NOTE 'QA21_K15' ;
ELSE CONTINUE WITH 'QA21_K14'

'QA21_K14' [AK17] - Including yourself, how many people living in your household are supported by your total household income?

Incluyéndose usted mismo(a), ¿cuántas de las personas que viven en su hogar son mantenidas por el ingreso total de su hogar?

_____ NUMBER OF PEOPLE [HR: 1-20]

- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_K15' :
'QA21_K15' MUST BE LESS THAN 'QA21_K14' ;
IF R IS ONLY MEMBER OF HH, GO TO 'QA21_K16' ;
IF NO CHILDREN UNDER 18 IN HH (AS DETERMINED FROM CHILD ENUMERATION QUESTIONS)
OR TOTAL NUMBER OF PEOPLE LIVING IN HH (AS DETERMINED BY ADULT PLUS CHILD
ENUMERATION) = 'QA21_K14' GO TO PROGRAMMING NOTE 'QA21_K16' ;
ELSE CONTINUE WITH 'QA21_K15'

'QA21_K15' [AK18] - How many of these {INSERT NUMBER FROM AK17} people are children under the age of 18?

¿Cuántas de estas {INSERT NUMBER FROM QA11_K15} personas son niños menores de 18 años de edad?

_____ NUMBER OF CHILDREN (UNDER AGE 18) [HR: 0-20]

- 7 REFUSED
- 8 DON'T KNOW

'QA21_K16' [AK32] - Is there anyone else living in the U.S., but not currently living in your household, that is supported by your household income?

¿Hay alguna persona que viva en los Estados Unidos pero que no vive actualmente en su casa y que dependa de los ingresos de su hogar?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If= 2,-7,-8 go to 'QA21_K18'

'QA21_K17' [AK33] - How many?

¿Cuántas?

_____ NUMBER OF PEOPLE [HR: 1-20]

- 7 REFUSED
- 8 DON'T KNOW

'QA21_K18'[AK136]- A new California law passed in 2020 provides up to 8 weeks of paid family and medical leave for eligible workers at 60-70% of their weekly earnings, up to a maximum of \$1,300 per week? Have you seen or heard anything about this law?

Una nueva ley de California aprobada en 2020 proporciona hasta 8 semanas de licencia familiar y médica paga para trabajadores elegibles al 60-70% de sus ingresos semanales, hasta un máximo de \$1,300 por semana?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_K19'[AK137]- In the past 5 years, have you taken a paid leave longer than two weeks from work because of your own or a family member's serious health condition or for the arrival of a newborn, newly adopted or foster child?

En los últimos 5 años, ¿usted ha tomado una licencia pagada de más de dos semanas del trabajo debido a una condición de salud grave o a la de un familiar o por la llegada de un recién nacido, un niño recién adoptado o de crianza?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_K20': IF 'QA21_K19' =1 (TOOK LEAVE), THEN CONTINUE; ELSE SKIP TO PN_ 'QA21_K21'

'QA21_K20'[AK138]- What were the reasons you took a leave from work?

¿Cuáles fueron las razones por las que se ausentó del trabajo?

Select all that apply

Seleccione todas las opciones que correspondan

- 1 OWN HEALTH
- 2 FAMILY MEMBER'S HEALTH
- 3 ARRIVAL OF NEWBORN, NEWLY ADOPTED CHILD, OR FOSTER CHILD
- 91 OTHER (SPECIFY: _____)
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_K21': IF 'QA21_K19'=2 (DID NOT TAKE LEAVE IN PAST 5 YEARS), THEN CONTINUE; ELSE SKIP TO 'QA21_K22'

'QA21_K21'[AK139]- What were the reasons you didn't take family or medical leave in the past 5 years?

¿Cuáles fueron las razones por las que no se ausentó del trabajo por razones familiares o de salud en los últimos 5 años?

Select all that apply

Seleccione todas las opciones que correspondan

- 1 FEAR OF LOSING JOB
- 2 FEAR OF HURTING CHANGES OF JOB ADVANCEMENT
- 3 COULD NOT AFFORD TO GO ON LEAVE
- 4 EMPLOYER DENIED REQUEST FOR LEAVE
- 5 NOT ELIGIBLE FOR LEAVE
- 6 DIDN'T KNOW ABOUT LEAVE PROGRAM
- 7 PROCESS TO APPLY FOR LEAVE TOO COMPLICATED
- 8 USED OTHER AVAILABLE LEAVE OPTIONS (E.G. VACATION OR SICK LEAVE)
- 9 DID NOT NEED TO TAKE LEAVE
- 7 REFUSED
- 8 DON'T KNOW

**PROGRAMMING NOTE 'QA21_K22' :IF POVERTY < 5 (HH Income ≤ 200% FPL) OR [8 (HH INCOME NOT KNOWN) AND (ARMCAL=1 OR ARINSURE ≠ 1)], CONTINUE WITH 'QA21_K22' ;
 ELSE GO TO 'QA21_L10';
 IF 'QA21_K14' = 1, THEN DISPLAY 'I',
 ELSE IF 'QA21_K14' > 1 DISPLAY 'We'
 IF PROXY=1, GO TO 'QA21_L1'**

'QA21_K22' [AM1] - These next questions are about the food eaten in your household in the last 12 months and whether you were able to afford food.

Las siguientes preguntas son acerca de los alimentos que se han consumido en su hogar en los últimos 12 meses y si a ustedes les alcanzó el dinero para comprar comida.

I'm going to read two statements that people have made about their food situation. For each, please tell me whether the statement describes something that was often true, sometimes true, or never true for you and your household in the last 12 months. The first statement is:

Voy a leer dos comentarios que la gente ha hecho sobre su situación en cuanto a la comida. Para cada una, por favor dígame si lo que yo digo es algo que fue cierto frecuentemente, fue cierto algunas veces o no, nunca fue cierto en su hogar en los últimos 12 meses. El primer comentario es:

'The food that {I/we} bought just didn't last, and {I/we} didn't have money to get more.'

'Los alimentos que {yo/nosotros} compré/compramos no duraron, y {yo/nosotros} no {tenía/teníamos} dinero para comprar más.'

Was that often true, sometimes true, or never true for you and your household in the last 12 months?

¿Fue esto ...

- 1 OFTEN TRUE
- 2 SOMETIMES TRUE
- 3 NEVER TRUE
- 7 REFUSED
- 8 DON'T KNOW

**PROGRAMMING NOTE 'QA21_K23' :
 IF 'QA21_K14' = 1, THEN DISPLAY 'I',
 ELSE IF 'QA21_K14' > 1 DISPLAY 'We'**

'QA21_K23' [AM2] - The second statement is: '{I/We} couldn't afford to eat balanced meals.'

La segunda declaración es: '{Yo/Nosotros} no (pude/pudimos) costear comidas balanceadas'.

Was that often true, sometimes true, or never true for you and your household in the last 12 months?

¿Fue esto ...

- 1 OFTEN TRUE
- 2 SOMETIMES TRUE
- 3 NEVER TRUE
- 7 REFUSED
- 8 DON'T KNOW

'QA21_K24' [AM3] - Please tell me yes or no. In the last 12 months, did you or other adults in your household ever cut the size of your meals or skip meals because there wasn't enough money for food?

Por favor, dígame sí o no. En los últimos 12 meses, ¿usted y otros adultos de su hogar alguna vez redujeron el tamaño de sus comidas o dejaron de comer porque no había suficiente dinero para alimentos?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto 'QA21_K26'

'QA21_K25' [AM3A] - How often did this happen -- almost every month, some months but not every month, or only in 1 or 2 months?

¿Con qué frecuencia pasó esto -- casi todos los meses, algunos meses pero no todos los meses, o sólo 1 o 2 meses?

- 1 ALMOST EVERY MONTH
- 2 SOME MONTHS BUT NOT EVERY MONTH
- 3 ONLY IN 1 OR 2 MONTHS
- 7 REFUSED
- 8 DON'T KNOW

'QA21_K26' [AM4] - In the last 12 months, did you ever eat less than you felt you should because there wasn't enough money to buy food?

En los últimos 12 meses, ¿comió alguna vez menos de lo que sentía que debía comer porque no había suficiente dinero para comprar alimentos?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_K27' [AM5] - In the last 12 months, were you ever hungry but didn't eat because you couldn't afford enough food?

En los últimos 12 meses, ¿tuvo hambre alguna vez pero no comió porque no tenía dinero para comprar suficientes alimentos?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

Section L: Public Program Participation

PROGRAMMING NOTE 'QA21_L1':

IF HOUSEHOLD INCOME IS \leq 200% FPL (POVERTY < 5) OR [IF HOUSEHOLD POVERTY LEVEL CANNOT BE DETERMINED (POVERTY = 8) AND (ARMCAL=1 OR ARINSURE \neq 1)] CONTINUE WITH SECTION L;

ELSE GO TO PN_'QA21_L40'

'QA21_L1' [AL2] - Are you now receiving TANF or CalWORKs?

¿Está usted recibiendo ahora TANF o CalWORKS?

[IF NEEDED, SAY: 'TANF means Temporary Assistance to Needy Families; and CalWORKs means California Work Opportunities and Responsibilities to Kids. Both replaced AFDC, California's old welfare entitlement program.']

[IF NEEDED, SAY: 'TANF quiere decir Asistencia Temporal a Familias Necesitadas; CalWORKS significa Oportunidades de Trabajo y Responsabilidad hacia los Niños de California. Estos programas reemplazaron al AFDC, que era el antiguo programa de bienestar social en California.']

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_L2' :

IF SAMPLED TEEN IN HOUSEHOLD, CONTINUE WITH 'QA21_L2' ;

ELSE GO TO 'QA21_L4' ;

IF PROXY=1, GO TO 'QA21_L4'

'QA21_L2' [IAP1] – Is (TEEN) now receiving TANF or CalWORKs?

¿Está <TEEN> recibiendo actualmente TANF o CalWORKS?

[IF NEEDED, SAY: 'TANF means Temporary Assistance to Needy Families; and CalWORKs means California Work Opportunities and Responsibilities to Kids. Both replaced AFDC, California's old welfare entitlement program.']

[IF NEEDED, SAY: 'TANF quiere decir Asistencia Temporal a Familias Necesitadas; CalWORKS significa Oportunidades de Trabajo y Responsabilidad hacia los Niños de California. Estos programas reemplazaron al AFDC, que era el antiguo programa de bienestar social en California.']

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_L3'
IF SAMPLED CHILD IN HOUSEHOLD, CONTINUE WITH 'QA21_L3' ;ELSE SKIP TO 'QA21_L4'

'QA21_L3' [CE11] - Is (CHILD) now on TANF or CalWORKs?

¿Está (CHILD) actualmente en TANF o CalWORKS?

[IF NEEDED, SAY: 'TANF means 'Temporary Assistance to Needy Families,' and CalWORKs means 'California Work Opportunities and Responsibilities to Kids.' Both replaced AFDC, California's old welfare entitlement program.']

[IF NEEDED, SAY: *TANF quiere decir Asistencia Temporal a Familias Necesitadas; y CalWORKS significa Oportunidades de Trabajo y Responsabilidad hacia los Niños de California. Ambos reemplazaron al AFDC, el antiguo programa de bienestar de California.*]

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_L4' [AL5] - Are you receiving Food Stamp benefits, also known as CalFresh?

¿Recibe usted Food Stamps o Estampillas para Comida, lo que se conoce también como CalFresh?

[IF NEEDED, SAY: 'You receive benefits through an EBT card.' EBT stands for Electronic Benefit Transfer card and is also known as the Golden State Advantage Card.']

[IF NEEDED, SAY: *Usted recibe beneficios a través de una tarjeta EBT. EBT son las iniciales en inglés de Transferencia Electrónica de Beneficios y también se conoce como la tarjeta Golden State Advantage.*']

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_L5' :
IF ELIGIBLE TEEN IN HOUSEHOLD, CONTINUE WITH 'QA21_L5' ;
ELSE GO TO 'QA21_L7'
IF PROXY=1, GO TO 'QA21_L7'

'QA21_L5' [IAP2] - Is (TEEN) receiving Food Stamp benefits, also known as CalFresh?

¿Recibe (TEEN) Food Stamps o Estampillas para Comida, lo que se conoce también como CalFresh?

[IF NEEDED, SAY: 'You may receive benefits as stamps or through an EBT card.' EBT stands for Electronic Benefit Transfer card and is also known as the Golden State Advantage Card.']

[IF NEEDED, SAY: *Usted recibe beneficios a través de una tarjeta EBT. EBT son las iniciales en inglés de Transferencia Electrónica de Beneficios y también se conoce como la tarjeta Golden State Advantage.*']

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_L6'
IF SAMPLED CHILD IN HOUSEHOLD, CONTINUE WITH 'QA21_L6' ;ELSE SKIP TO 'QA21_L7'

'QA21_L6' [CE11A] - Is (CHILD) receiving Food Stamp benefits, also known as CalFresh?

¿Recibe (CHILD) Food Stamps o Estampillas para Comida, lo que se conoce también como CalFresh?

[IF NEEDED, SAY: 'You receive benefits through an EBT card. EBT stands for Electronic Benefit Transfer card and is also known as the Golden State Advantage Card.']

[IF NEEDED, SAY: *Usted recibe beneficios a través de una tarjeta EBT. EBT son las iniciales en inglés de Transferencia Electrónica de Beneficios y también se conoce como la tarjeta Golden State Advantage.*]

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_L7' [AL6] - Are you receiving Supplemental Security Income (SSI)?

¿Recibe usted SSI?

[IF NEEDED, SAY: 'SSI means Supplemental Security Income. This is different from Social Security.']

[IF NEEDED, SAY: '*SSI significa Ingreso Suplementario de Seguridad. Es distinto al Seguro Social.*']

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_L8' :
IF 'QA21_A5' = 2 (FEMALE AT BIRTH) AND [AD13 = 1 (PREGNANT) OR CHILD AGE < 7 (6 YEARS OR YOUNGER)] CONTINUE WITH 'QA21_L8' ;
ELSE GO TO PROGRAMMING NOTE 'QA21_L10'

'QA21_L8' [AL7] - Are you on WIC?

¿Usted está inscrita en el WIC?

[IF NEEDED, SAY: 'WIC is the Supplemental Food Program for Women, Infants and children.']

[IF NEEDED, SAY: 'WIC es el Programa Especial de Nutrición Suplementaria para Mujeres, Infantes y Niños.']

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_L9' : IF (CAGE<7, OR CAGE = 8,9) AND (HOUSEHOLD INCOME IS<=200 FPL or poverty<5) OR [IF HOUSEHOLD POVERTY LEVEL CANNOT BE DETERMINED (POVERTY = 8) AND (ARMCAL=1 OR ARINSURE ≠ 1)], CONTINUE WITH 'QA21_L9'; ELSE GO TO PN_AL9

'QA21_L9' [CE11C] - Is (CHILD) on WIC now?

¿Está (CHILD) actualmente recibiendo WIC?

[IF NEEDED, SAY: 'WIC means 'Supplemental Food Program for Women, Infants and Children.']]

[IF NEEDED, SAY: 'WIC quiere decir 'Programa de Alimentación Suplementaria para Mujeres, Lactantes, y Niños.']]

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_L10' :

IF 'QA21_D5' = 1 (LEGALLY BLIND) OR [(AAGE > 64 OR 'QA21_A4' = 6) AND (POVERTY < 5 (HH INCOME ≤ 200% FPL) OR 8 (HH INCOME NOT KNOWN))], CONTINUE WITH 'QA21_L10' ; ELSE SKIP TO PROGRAMMING NOTE 'QA21_L11' ;

OBTAIN THE PROPERTY LIMIT VALUE FROM THE MEDI-CAL SECTION 1931(B) PROGRAM GENERAL PROPERTY AND INCOME LIMITATIONS USING THE TOTAL HOUSEHOLD SIZE FROM 'QA21_K14' . IF 'QA21_K14' IS MISSING, USE THE TOTAL NUMBER OF ADULTS ENUMERATED IN THE SCREENER (GIVEN BY CATI VARIABLE RADLTCNT).

IF 'QA21_K14' = 1 DISPLAY \$2000;

IF 'QA21_K14' = 2 DISPLAY \$3000;

IF 'QA21_K14' = 3 DISPLAY \$3150;

IF 'QA21_K14' = 4 DISPLAY \$3300;

IF 'QA21_K14' = 5 DISPLAY \$3450;

IF 'QA21_K14' = 6 DISPLAY \$3600;

IF 'QA21_K14' = 7 DISPLAY \$3750;

IF 'QA21_K14' = 8 DISPLAY \$3900;

IF 'QA21_K14' = 9 DISPLAY \$4050;

IF 'QA21_K14' ≥ 10 DISPLAY \$4200;

IF 'QA21_A23' = 1 (MARRIED) OR 'QA21_D13' = 1 OR 'QA21_D14' = 1 (LEGAL SAME-SEX COUPLE), DISPLAY 'your family's';

ELSE DISPLAY 'your'

'QA21_L10' [AL9] - Not counting the value of any house or car you may own, would you say that {your/your family's} assets, that is, all {your/your family's} cash, savings, and investments together are worth more than {PROPERTY LIMIT}?

Sin contar el valor de alguna casa o automóvil que es posible que usted posea, ¿diría usted que {sus bienes/ los bienes de su familia}, es decir, todo su dinero en efectivo, ahorros, inversiones, y muebles juntos valen más de {PROPERTY LIMIT}?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_L11' :

IF 'QA21_A23' = 1 (MARRIED) AND 'QA21_A24' = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY 'you or your spouse';

ELSE IF ['QA21_A23' = 2 (LIVING WITH PARTNER) OR 'QA21_D13' = 1 OR 'QA21_D14' = 1 (LEGAL SAME-SEX COUPLE)] AND 'QA21_A24' = 1 (SPOUSE/PARTNER LIVES IN HH) DISPLAY 'you or your partner';

ELSE DISPLAY 'you'

'QA21_L11' [AL15B] - Did {you or your spouse/you or your partner/you} receive any money last month for child support?

¿Recibió {usted o su esposo(a)/usted o su pareja/usted} algún dinero el mes pasado por pensión alimenticia o manutención infantil?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto 'PN_QA21_L13'

PROGRAMMING NOTE 'QA21_L12' :
IF 'QA21_A23' = 1 (MARRIED) AND 'QA21_A24' = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY 'combined' AND 'and your spouse';
ELSE IF ['QA21_A23' = 2 (LIVING WITH PARTNER) OR 'QA21_D13' = 1 OR AD61 = 1 (LEGAL SAME-SEX COUPLE)] AND 'QA21_A24' = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY 'combined' AND 'and your partner';
ELSE CONTINUE WITHOUT DISPLAYS

'QA21_L12' [AL16B] - What was the {combined} total amount that you {and your spouse/and your partner} received from child support last month {for both you and your spouse/partner}?

¿Cuál fue la cantidad total {combinada} que usted {y su esposo(a)/y su pareja} (recibió/recibieron) el mes pasado por pensión alimenticia o manutención infantil?

[IF AMOUNT GREATER THAN \$999,995, ENTER '999,995']

\$ _____ AMOUNT [HR: 1-999995]

- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_L13' :
IF 'QA21_A23' = 1 (MARRIED) AND 'QA21_A24' = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY 'you or your spouse or both of you';
ELSE IF ['QA21_A23' = 2 (LIVING WITH PARTNER) OR 'QA21_D13' = 1 OR 'QA21_D14' = 1 (LEGAL SAME-SEX COUPLE)] AND 'QA21_A24' = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY 'you or your partner or both of you'
ELSE DISPLAY 'you'

'QA21_L13' [AL17] - Did {you or your partner or both of you/you or your spouse or both of you/you} pay any child support last month?

¿Pagó {usted o su pareja o ustedes dos/usted o su esposo(a) o ustedes dos/usted} alguna pensión alimenticia o manutención infantil el mes pasado?

- 1 YES, RESPONDENT PAID
- 2 YES, SPOUSE/PARTNER PAID
- 3 YES, BOTH PAID
- 4 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 4, -7, -8, goto 'PN_QA21_L15'

PROGRAMMING NOTE 'QA21_L14' :

IF 'QA21_A23' = 1 (MARRIED) AND 'QA21_A24' = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY 'you or your spouse or both of you';
ELSE IF ['QA21_A23' = 2 (LIVING WITH PARTNER) OR 'QA21_D13' = 1 OR 'QA21_D14' = 1 (LEGAL SAME-SEX COUPLE)] AND 'QA21_A24' = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY 'you or your partner or both of you';
ELSE DISPLAY 'you'

'QA21_L14' [AL18] - What was the total amount {you or your spouse or both of you/you or your partner or both of you/you} paid in child support last month?

¿Cuál fue la cantidad total que {usted o su esposo(a) o ustedes dos/usted o su pareja o ustedes dos/usted} pagó/pagaron en pensión alimenticia o manutención infantil el mes pasado?

[IF AMOUNT GREATER THAN \$999,995, ENTER '999,995']

_____ AMOUNT [000001-999995]

- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_L15' :

IF 'QA21_A23' = 1 (MARRIED) AND 'QA21_A24' = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY 'you or your spouse';
ELSE IF ['QA21_A23' = 2 (LIVING WITH PARTNER) OR 'QA21_D13' = 1 OR 'QA21_D14' = 1 (LEGAL SAME-SEX COUPLE)] AND 'QA21_A24' = 1 (SPOUSE/PARTNER LIVES IN HH) DISPLAY 'you or your partner';
ELSE DISPLAY 'you'

'QA21_L15' [AL32] - Did {you or your spouse/you or your partner/you} receive any money last month for workers compensation?

¿Recibió {usted o su esposo(a)/usted o su pareja/usted} algún dinero el mes pasado como compensación por accidentes de trabajo?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto 'PN_QA21_L17'

PROGRAMMING NOTE 'QA21_L16' :
IF 'QA21_A23' = 1 (MARRIED) AND 'QA21_A24' = 1 (SPOUSE/PARTNER LIVES IN HH), THEN
DISPLAY 'combined' AND 'and your spouse';
ELSE IF ['QA21_A23' = 2 (LIVING WITH PARTNER) OR 'QA21_D13' = 1 OR 'QA21_D14' = 1
(LEGAL SAME-SEX COUPLE)] AND 'QA21_A24' = 1 (SPOUSE/PARTNER LIVES IN HH), THEN
DISPLAY 'combined' AND 'and your partner';
ELSE CONTINUE WITHOUT DISPLAYS

'QA21_L16' [AL33] - What was the {combined} total amount that you {and your spouse/and your partner} received from workers compensation last month?

¿Cuál fue la cantidad total {combinada} que recibió usted {y su esposo(a)/y su pareja} como compensación por accidentes de trabajo el mes pasado?

[IF AMOUNT GREATER THAN \$999,995, ENTER '999,995']

\$ _____ AMOUNT [000001-999995]

- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_L17' :
IF [AGE > 50 OR (AGE RANGE IS BETWEEN 50 AND 64)] AND 'QA21_A23' = 1 (MARRIED) AND
'QA21_A24' = 1 (SPOUSE/PARTNER LIVING IN SAME HH) CONTINUE WITH 'QA21_L17' AND
DISPLAY 'you or your spouse';
ELSE IF AGE ≥ 65 AND 'QA21_A24' = 1 (SPOUSE/PARTNER LIVING IN SAME HH), THEN
CONTINUE WITH 'QA21_L17' AND DISPLAY 'you or your partner';
ELSE IF AGE ≥ 65, THEN CONTINUE WITH 'QA21_L17' AND DISPLAY 'you';
ELSE GO TO PROGRAMMING NOTE 'QA21_L19'

'QA21_L17' [AL18A] - Did {you or your spouse/you or your partner/you} receive any Social Security or Pension payments last month?

¿Recibió {usted o su esposo(a)/usted o su pareja/usted} pagos de Seguro Social o de Pensión el mes pasado?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto 'PN_QA21_L19'

PROGRAMMING NOTE 'QA21_L18' :
IF [AGE > 50 OR (AGE RANGE IS BETWEEN 50 AND 64)] AND 'QA21_A23' = 1 (MARRIED) AND 'QA21_A24' = 1 (SPOUSE/PARTNER LIVING IN SAME HH), DISPLAY 'you or your spouse';
ELSE IF AGE ≥ 65 AND 'QA21_A24' = 1 (SPOUSE/PARTNER LIVING IN SAME HH), DISPLAY 'you or your partner';
ELSE IF AGE ≥ 65, DISPLAY 'you';

'QA21_L18' [AL18B] - What was the total amount {you} received last month from Social Security and Pensions {for both you and your spouse/partner}?

¿Cuál fue la cantidad total de dinero que recibió del Seguro Social y Pensiones el mes pasado?

[IF AMOUNT GREATER THAN \$999,995, ENTER '999,995']

_____ AMOUNT [000001-999995]

- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_L19' :
IF ARINSURE ≠ 1 (UNINSURED) CONTINUE WITH 'QA21_L19' ;
ELSE GO TO 'QA21_L20'

'QA21_L19' [AL19] - What is the one main reason why you are not enrolled in the Medi-Cal program?

¿Cuál es el motivo principal por el que no está inscrito(a) en el programa Medi-Cal?

- 1 PAPERWORK TOO DIFFICULT
- 2 DO NOT KNOW IF ELIGIBLE
- 3 INCOME TOO HIGH, NOT ELIGIBLE
- 4 NOT ELIGIBLE DUE TO CITIZENSHIP/IMMIGRATION STATUS
- 6 DO NOT BELIEVE IN HEALTH INSURANCE
- 7 DO NOT NEED INSURANCE BECAUSE I'M HEALTHY
- 8 ALREADY HAVE INSURANCE
- 9 DID NOT KNOW ABOUT IT
- 10 DO NOT LIKE OR WANT WELFARE
- 91 OTHER (SPECIFY: _____)
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_L20':IF ARMCAL = 1 (MEDI-CAL) OR 'QA21_H74'=1, 'QA21_H75'=1 OR 'QA21_H76' =1 (HAD PRIOR MEDI-CAL COVERAGE), CONTINUE WITH 'QA21_L20';
ELSE GO TO 'QA21_L40'

'QA21_L20' [AL40] - You previously said you had Medi-Cal. How long did you have Medi-Cal?

Anteriormente dijo que tenía Medi-Cal. ¿Cuánto tiempo tuvo Medi-Cal?/ Anteriormente dijo que tiene Medi-Cal. ¿Por cuánto tiempo ha tenido Medi-Cal?s

_____ YEARS

_____ MONTHS

- 7 REFUSED
- 8 DON'T KNOW

'QA21_L21' [AL86] - During the past 12 months, when you most recently contacted the County office regarding your Medi-Cal benefits, how long did you have to wait before speaking to a representative?

Durante los últimos 12 meses, la última vez que se comunicó con la oficina del condado con respecto a sus beneficios de Medi-Cal, ¿cuánto tiempo tuvo que esperar para poder hablar con un representante?

- 01 5 MINUTES OR LESS
- 02 MORE THAN 5, UP TO 15 MINUTES
- 03 MORE THAN 15, UP TO 30 MINUTES
- 04 MORE THAN 30 MINUTES
- 05 NEVER CONTACTED THE COUNTY OFFICE
- 7 REFUSED
- 8 DON'T KNOW

If = 5, -7, -8 goto 'QA21_L26'

'QA21_L22' [AL87] - Most recently, how did you contact the County office?

¿Cómo se puso en contacto con la oficina del condado durante la comunicación más reciente?

- 01 VISITED OFFICE IN PERSON
- 02 CALLED OFFICE
- 03 DIRECTLY CONTACTED ELIGIBILITY WORKER
- 04 ONLINE
- 05 MAIL
- 91 OTHER (SPECIFY : _____)
- 7 REFUSED
- 8 DON'T KNOW

'QA21_L23' [AL88] - How long did it take for the County representative to take care of your problem?

¿Cuánto tiempo tardó el representante del condado en resolver su problema?

- 01 A WEEK OR LESS
- 02 MORE THAN 1 WEEK UP TO 2 WEEKS
- 03 MORE THAN 2 WEEKS UP TO A MONTH
- 04 MORE THAN A MONTH
- 7 REFUSED
- 8 DON'T KNOW

'QA21_L24' [AL89] - Tell me if you strongly agree, agree, neither agree nor disagree, disagree, or strongly disagree{s} with the following statements.

Dígame si está totalmente de acuerdo, de acuerdo, en desacuerdo o totalmente en desacuerdo con las siguientes declaraciones:

The County representative was able to answer all of my questions. Do you...

El representante del condado pudo responder todas mis preguntas.

- 01 STRONGLY AGREE
- 02 AGREE
- 03 NEITHER AGREE OR DISAGREE
- 04 DISAGREE
- 05 STRONGLY DISAGREE
- 7 REFUSED
- 8 DON'T KNOW

'QA21_L25' [AL90] - The County representative treated me with dignity and respect. Do you...

El representante del condado me trató con dignidad y respeto.

- 01 STRONGLY AGREE
- 02 AGREE
- 03 NEITHER AGREE OR DISAGREE
- 04 DISAGREE
- 05 STRONGLY DISAGREE
- 7 REFUSED
- 8 DON'T KNOW

'QA21_L26' [AL91] - What areas should the County office consider improving?

¿Qué áreas debería de pensar en mejorar la oficina del condado?

[CHECK ALL THAT APPLY]

- 01 REDUCE WAIT TIMES
- 02 SPEND MORE TIME WITH ME
- 03 EXPLAIN THINGS SO I CAN UNDERSTAND
- 04 TELL ME WHAT THE NEXT STEPS ARE
- 05 NO IMPROVEMENT NEEDED
- 91 OTHER (SPECIFY :_____)
- 7 REFUSED
- 8 DON'T KNOW

'QA21_L27' [AL92] - How satisfied are you with the County office? Would you say...

¿Qué tan {satisfecho/satisfecha} está con la oficina del condado? ¿Diría que está...?

- 01 VERY SATISFIED
- 02 SOMEWHAT SATISFIED
- 03 NEITHER SATISFIED OR DISSATISFIED
- 04 DISSATISFIED
- 05 VERY DISSATISFIED
- 06 NOT APPLICABLE
- 7 REFUSED
- 8 DON'T KNOW

'QA21_L28' [AL93] - Have you renewed your Medi-Cal in the last 12 months?

¿Ha renovado su Medi-Cal durante los últimos 12 meses?

- 1 YES
- 2 NO
- 3 REFUSED
- 4 DON'T KNOW

If = 2, -7, -8 goto 'QA21_L31'

'QA21_L29' [AL94] - When renewing your Medi-Cal, did you have any issues or problems?

Cuando renovó su Medi-Cal, ¿tuvo algún problema?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 1, goto 'QA21_L32'

'QA21_L30' [AL95] - Did you temporarily lose coverage for 1 to 2 months, lost coverage completely, or had to reapply?

¿Perdió la cobertura de manera temporal durante uno o dos meses, la perdió por completo o tuvo que volver a solicitarla?

- 01 YES, LOST COVERAGE FOR 1-2 MONTHS
- 02 YES, LOST COVERAGE
- 03 YES, HAD TO REAPPLY
- 4 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_L31' [AL96] - Before you had Medi-Cal, what health coverage did you have?

Antes de tener la cobertura de Medi-Cal, ¿qué cobertura de salud tenía?

- 01 NO INSURANCE
- 02 EMPLOYER-BASED
- 03 PRIVATE
- 04 COVERED CALIFORNIA
- 05 OTHER
- 7 REFUSED
- 8 DON'T KNOW

If = 1,2,3, -7, -8, goto 'QA21_L34'

'QA21_L32' [AL97] - Did you have a problem changing to Medi-Cal?

¿Tuvo algún problema en cambiar a Medi-Cal?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto 'QA21_L34'

'QA21_L33' [AL98] - What was the problem?

¿Qué tipo de problema?

[CHECK ALL THAT APPLY]

- 01 HAD TO PAY PREMIUMS WHILE WAITING FOR MEDI-CAL DECISION
- 02 RECEIVED CONFLICTING ELIGIBILITY NOTICES
- 03 DELAY IN RECEIVING MEDI-CAL
- 04 COULD NOT SEE MY PROVIDER
- 05 REQUIRED TO PROVIDE A LOT OF PAPERWORK
- 06 HAD TO FILE AN APPEAL
- 7 REFUSED
- 8 DON'T KNOW

'QA21_L34' [AL105]- The Medi-Cal program sends a written Notice of Actions to provide information about eligibility, and changes in status, level of benefits, or Share of Cost.

El programa Medi-Cal envía un Aviso de Acciones por escrito para proporcionar información sobre la elegibilidad y los cambios en el estado, el nivel de beneficios o el costo compartido.

The Notice of Actions I have received in the past are:

Los avisos de acciones que he recibido en el pasado son:

- 01 Easy to read or understand
- 01 *Fáciles de leer o entender*
- 02 Difficult to read or understand
- 02 *Difíciles de leer o entender*
- 03 Contain helpful information
- 03 *Contienen información útil*
- 04 Does not contain helpful information
- 04 *No contienen información útil*
- 05 I never got a Notice of Actions
- 05 *Nunca recibí un aviso de acciones*
- 7 REFUSED
- 8 DON'T KNOW

If 5, -7, -8 goto 'QA21_L36'

'QA21_L35' [AL106]- How can Notice of Actions be improved?

¿Cómo se puede mejorar el aviso de acciones?

- 01 Reduce text
- 01 *Reducir texto*
- 02 Simplify language/Reading level
- 02 *Simplificar el idioma/el nivel de lectura*
- 03 Shorter paragraphs/sentences
- 03 *Párrafos/oraciones más breves*
- 04 Send fewer notices
- 04 *Enviar menos avisos*
- 05 Give me clear steps of what I need to do
- 05 *Dar pasos claros de lo que tengo que hacer*
- 06 No improvement needed
- 06 *No se necesitan mejoras*
- 7 REFUSED
- 8 DON'T KNOW

'QA21_L36' [AL107]- Were you able to update your contact information?

¿Pudo actualizar su información de contacto?

- 01 YES
- 02 NO
- 03 Did not need to update
- 7 REFUSED
- 8 DON'T KNOW

If 1,3,-7, -8 go to PN_ 'QA21_L38'

'QA21_L37' [AL108]- Why not?

¿Por qué no?

- 01 My changes did not update
- 01 *Mis cambios no se actualizaron*
- 02 I don't know how to update my information
- 02 *No sé cómo actualizar mi información*
- 03 Did not need to update
- 03 *No necesita actualización*
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_L38': IF 'QA21_L36'=1, CONTINUE WITH 'QA21_L38', ELSE SKIP TO 'QA21_L40'

'QA21_L38' [AL109]- Please tell us if you strongly agree, agree, neither agree or disagree, disagree, or strongly disagree with the following statement:

Díganos si está totalmente de acuerdo, de acuerdo, ni de acuerdo ni en desacuerdo, en desacuerdo o en total desacuerdo con la siguiente declaración:

Updating my contact information was easy.

Fue fácil actualizar mi información de contacto.

- 01 Strongly agree
- 01 *Completamente de acuerdo*
- 02 Agree
- 02 *De acuerdo*
- 03 Neither agree nor disagree
- 03 *Ni de acuerdo ni en desacuerdo*
- 04 Disagree
- 04 *En desacuerdo*
- 05 Strongly disagree
- 05 *Completamente en desacuerdo*
- 7 REFUSED
- 8 DON'T KNOW

'QA21_L39' [AL110]- How did you update your contact information?

¿Cómo actualizó su información de contacto?

- 01 Visited office in person
- 01 *Visité la oficina en persona*
- 02 Called county office
- 02 *Llamé la oficina del condado*
- 03 Called health plan
- 03 *Llamé al plan de salud*
- 04 Directly contacted eligibility worker
- 04 *Me comuniqué directamente con un trabajador de elegibilidad*
- 05 Online
- 05 *En línea*
- 06 Mail
- 06 *Por correo*
- 07 Portal
- 07 *En el portal*
- 91 Other, specify: _____
- 91 *Otro, especifique _____*
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_L40':

**IF 'QA21_G1' ≠ 1,2, 9, 22 OR 26, CONTINUE WITH 'QA21_L40';
ELSE SKIP TO 'QA21_M1';**

'QA21_L40' [AL99] - Was there ever a time when you decided not to apply for one or more non-cash government benefits, such as Medi-Cal, food stamps, or housing subsidies, because you were worried it would disqualify you or a family member, from obtaining a green card or becoming a U.S. citizen?

¿Alguna vez decidió no solicitar uno o más beneficios gubernamentales no monetarios, como Medi-Cal, cupones alimenticios o subsidios de vivienda, porque le preocupaba que tal acción \{lo/la\} descalificaría a usted, o a un miembro de su familia, para obtener una tarjeta verde o convertirse en ciudadano estadounidense?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If= 2,-7,-8 then goto 'QA21_L42'

'QA21_L41' [AL104] - Did this happen in the last 12 months?

¿Ocurrió esto durante los últimos 12 meses?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_L42' [AL100] - Have you ever been asked to provide your Social Security Number or show proof of your citizenship or legal status when you tried to get medical services?

¿Se le pidió alguna vez que proporcionara su número del Seguro Social o presentar un comprobante de su situación legal o de ciudadanía?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If =2,-7,-8, goto 'QA21_L44'

'QA21_L43' [AL101] - Did this happen in the past 12 months?

¿Ocurrió esto durante los últimos 12 meses?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_L44' [AL102] - Have you ever been asked to provide your Social Security Number or show proof of your citizenship or legal status when you tried to enroll yourself or a child in school?

¿Se le pidió alguna vez que proporcionara su número del Seguro Social o presentara un comprobante de su situación legal o ciudadanía cuando intentó inscribirse usted o a un(a) hijo(a) en la escuela?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If =2,-7,-8, goto 'QA21_M1'

'QA21_L45' [AL103] - Did this happen in the past 12 months?

¿Ocurrió esto durante los últimos 12 meses?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

Section M: Housing and Social Cohesion

PROGRAMMING NOTE 'QA22_M1' ;

IF TSE=1, DISPLAY “ Do you live in a house, a duplex, a building with 3 or more units, or in a mobile home?”

IF TSE=2, DISPLAY “These next questions are about your housing and neighborhood. Do you live in a house, a duplex, a building with 3 or more units, or in a mobile home?”

'QA22_M1' [AK23] - {{Do you live in a house, a duplex, a building with 3 or more units, or in a mobile home?/ These next questions are about your housing and neighborhood.

Do you live in a house, a duplex, a building with 3 or more units, or in a mobile home?}}

{{¿Vive usted en una casa, un dúplex, un edificio con 3 o más unidades, o en una casa móvil?/ Las preguntas siguientes son acerca de su hogar y su vecindario. ¿Vive usted en una casa, un dúplex, un edificio con 3 o más unidades, o en una casa móvil?}}

[IF NEEDED, SAY: 'A duplex is a building with 2 units.']

[IF NEEDED, SAY: 'Un dúplex es un edificio con 2 unidades.']

- 1 HOUSE
- 2 DUPLEX
- 3 BUILDING WITH 3 OR MORE UNITS
- 4 MOBILE HOME
- 7 REFUSED
- 8 DON'T KNOW

'QA21_M2' [AK25] - Do you own or rent your home?

¿Es usted propietario de su casa o la alquila?

- 1 OWN
- 2 RENT
- 3 OTHER
- 7 REFUSED
- 8 DON'T KNOW

'QA21_M3'[AM14]- About how long have you lived at your current address?

¿Más o menos cuánto tiempo ha vivido usted en su dirección actual?

[INTERVIEWER NOTE: IF LESS THAN 1 MONTH BUT MORE THAN 0 DAYS, ENTER 1 MONTH]

- 1 MONTHS
- 2 YEARS
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_M4' : IF 'QA21_M3' ≥ 5 YEARS OR 60 MONTHS, THEN GO TO PROGRAMMING NOTE 'QA21_M5' ; ELSE CONTINUE WITH 'QA21_M4'

'QA21_M4'[AM15]- About how long have you lived in your current neighborhood?

¿Más o menos cuánto tiempo ha vivido en su vecindario actual?

[INTERVIEWER NOTE: IF LESS THAN 1 MONTH BUT MORE THAN 0 DAYS, ENTER 1 MONTH]

- 1 MONTHS
- 2 YEARS
- 7 REFUSED
- 8 DON'T KNOW

'QA21_M5'[AM183]- How do you feel about your current housing situation – do you feel very stable and secure, fairly stable and secure, just somewhat stable and secure, fairly unstable and insecure, or very unstable and insecure?

¿Cómo se siente con respecto a su situación actual de vivienda?

- 1 VERY STABLE
- 2 FAIRLY STABLE
- 3 SOMEWHAT STABLE
- 4 FAIRLY UNSTABLE
- 5 VERY UNSTABLE
- 7 REFUSED
- 8 DON'T KNOW

'QA21_M6'[AM184]- Please tell me how often you personally worry about the following – very often, somewhat often, from time to time, or almost never.

Por favor, dígame con qué frecuencia se preocupa personalmente por lo siguiente: con mucha frecuencia, con algo de frecuencia, de vez en cuando o casi nunca.

Struggling to keep up with your mortgage or rent payments

Tiene dificultades para mantenerse al día con los pagos de su hipoteca o alquiler

- 1 VERY OFTEN
- 2 SOMEWHAT OFTEN
- 3 FROM TIME TO TIME
- 4 ALMOST NEVER
- 7 REFUSED
- 8 DON'T KNOW

'QA21_M7'[AM185]- People sometimes struggle to pay their rent or mortgage. In order to pay your rent or mortgage, have you had to do any of the following in the past three years?

Las personas a veces tienen dificultades para pagar el alquiler o la hipoteca. Para pagar el alquiler o la hipoteca, ¿ha tenido que hacer algo de lo siguiente en los últimos tres años?

Check all that apply

- Take on an additional job or work more at their current job
- Asumir un trabajo adicional o trabajar más en su trabajo actual*
- Stop saving for retirement
- Dejar de ahorrar para la jubilación*
- Accumulate credit card debt
- Acumular deuda de tarjeta de crédito*
- Cut back on health care
- Reducir el cuidado de la salud*
- Cut back on healthy, nutritious food
- Reducir el uso de alimentos saludables y nutritivos*
- Move to a neighborhood that they feel is less safe
- Mudarse a un vecindario que sientan que es menos seguro*
- Move to a place where the schools are not as good
- Mudarse a un lugar donde las escuelas no sean tan buenas*
- None of these/not sure
- Ninguna de las opciones anteriores/no estoy seguro*
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_M8': IF 'QA21_H1' = 1, 3, 4, OR 5 (HAS A USUAL SOURCE OF CARE) AND HOUSEHOLD INCOME IS ≤ 400% FPL, THEN CONTINUE WITH 'QA21_M8' ELSE GO TO 'QA21_M9'

'QA21_M8' [AJ178] - Is there anyone at your doctor's or healthcare provider's office or clinic who helps connect your family with community-based services you might need, such as housing assistance, food support, or social support?

¿Hay alguien en el consultorio o en la clínica de su médico o de su proveedor de atención médica que ayude a su familia a ponerse en contacto con los servicios comunitarios que pueda necesitar, como asistencia para la vivienda, ayuda alimenticia o apoyo social?

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_M9' [AM186] -Difficult life experiences can have harmful effects on a person's physical and mental health, even after those experiences have passed. For example, encounters with the police or the court system.

Las experiencias de vida difíciles pueden tener efectos dañinos en la salud física y mental de una persona, incluso después de que esas experiencias hayan pasado. Por ejemplo, encuentros con la policía o el sistema judicial.

Nowadays, persons are often stopped by the police for many different reasons. In the past three years, how many times have you been stopped by the police?

Hoy en día, la policía suele detener a las personas por muchas razones diferentes. En los últimos tres años, ¿cuántas veces lo ha detenido la policía?

- 01 0
- 02 1
- 03 2
- 04 3
- 05 4
- 06 5 OR MORE
- 7 REFUSED
- 8 DON'T KNOW

'QA21_M10' [AM187] -Not counting minor traffic violations, have you ever been arrested and booked for breaking the law? Being "booked" means that you were taken into custody and processed by the police or by someone connected with the courts, even if you were then released.

Sin contar las infracciones de tránsito menores, ¿alguna vez alguien con quien vivía fue arrestado/a y fichado/a por infringir la ley mientras usted vivía con esa(s) persona(s)? Ser "fichado" significa que fue detenido/a y procesado/a por la policía o por alguien relacionado con los tribunales, incluso si luego fue puesto/a en libertad.

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_M11' [AM188] - Not counting minor traffic violations, has someone you were living with ever been arrested and booked for breaking the law while you were living with them? Being "booked" means taken into custody and processed by the police or by someone connected with the courts, even if they were then released.

Sin contar las infracciones de tránsito menores, ¿alguna vez alguien con quien vivía fue arrestado/a y amonestado/a por infringir la ley mientras usted vivía con esa(s) persona(s)? Ser "fichado" significa que fue detenido y procesado por la policía o por alguien relacionado con los tribunales, incluso si luego fue puesto en libertad.

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

**PROGRAMMING NOTE 'QA21_M12' :IF 'QA21_M12' THROUGH 'QA21_M15' NOT ANSWERED IN CHILD INTERVIEW (CG39, CG40, CG41, CG34, CG42), THEN CONTINUE WITH 'QA21_M12' ;ELSE GO TO 'QA21_M16'
IF PROXY=1, GO TO 'QA21_M16'**

'QA21_M12' [AM19] - Tell me if you strongly agree, agree, disagree, or strongly disagree with the following statements:

Dígame si está totalmente de acuerdo, de acuerdo, en desacuerdo o totalmente en desacuerdo con las siguientes declaraciones:

People in my neighborhood are willing to help each other.

La gente en mi vecindario está dispuesta a ayudarse unos a otros.

[IF NEEDED, SAY: 'Do you strongly agree, agree, disagree, or strongly disagree?']

[IF NEEDED, SAY: 'Está totalmente de acuerdo, de acuerdo, en desacuerdo o totalmente en desacuerdo?']

[DO NOT PROBE A 'DON'T KNOW' RESPONSE.]

- 01 STRONGLY AGREE
- 02 AGREE
- 03 NEITHER AGREE OR DISAGREE
- 04 DISAGREE
- 05 STRONGLY DISAGREE
- 7 REFUSED
- 8 DON'T KNOW

'QA21_M13' [AM20] - People in this neighborhood generally do not get along with each other.

Por lo general, la gente en este vecindario o barrio no se lleva bien.

[IF NEEDED, SAY: 'Do you strongly agree, agree, disagree, or strongly disagree?']

[IF NEEDED, SAY: 'Está totalmente de acuerdo, de acuerdo, en desacuerdo o totalmente en desacuerdo?']

[DO NOT PROBE A 'DON'T KNOW' RESPONSE.]

- 01 STRONGLY AGREE
- 02 AGREE
- 03 NEITHER AGREE OR DISAGREE
- 04 DISAGREE
- 05 STRONGLY DISAGREE
- 7 REFUSED
- 8 DON'T KNOW

'QA21_M14' [AM21] - People in this neighborhood can be trusted.

Uno puede confiar en la gente de este vecindario

[IF NEEDED, SAY: 'Do you strongly agree, agree, disagree, or strongly disagree?']

[IF NEEDED, SAY: 'Está totalmente de acuerdo, de acuerdo, en desacuerdo o totalmente en desacuerdo?']

['DO NOT PROBE A 'DON'T KNOW' RESPONSE.]

- 01 STRONGLY AGREE
- 02 AGREE
- 03 NEITHER AGREE OR DISAGREE
- 04 DISAGREE
- 05 STRONGLY DISAGREE
- 7 REFUSED
- 8 DON'T KNOW

'QA21_M15' [AK28] - Do you feel safe in your neighborhood...

¿Se siente seguro(a) en su vecindario...

- 1 All of the time
- 1 *Siempre*
- 2 Most of the time
- 2 *Casi siempre*
- 3 Some of the time, or
- 3 *A veces, o*
- 4 None of the time?
- 4 *Nunca?*
- 7 REFUSED
- 8 DON'T KNOW

'QA21_M16' [AM39] - In the past 12 months, have you volunteered to organize or lead efforts to help solve problems in your community?

Durante los últimos 12 meses, ¿ha hecho algún trabajo voluntario o servicio a la comunidad por el que no ha recibido ningún pago?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_M17' [AM44] - Imagine that you find out about a problem in your community and you want to do something about it. For example, illegal drugs were being sold near a school, or high levels of lead were found in the local drinking water. Do you think you could express your views in front of a group of people?

Imagine que se entera de un problema en su comunidad y quiere hacer algo al respecto. Por ejemplo, se vendieron drogas ilegales cerca de una escuela o se encontraron niveles elevados de plomo en el agua potable local. ¿Considera que podría expresar sus opiniones al frente de un grupo de personas?

- 1 DEFINITELY COULD NOT
- 2 PROBABLY COULD NOT
- 3 MAYBE COULD
- 4 PROBABLY COULD
- 5 DEFINITELY COULD
- 6 REFUSED
- 7 DON'T KNOW

'QA21_M18' [AM45] - Do you think you could contact an elected official or someone else in government who represents your community?

¿Considera que se podría comunicar con un funcionario electo u otra persona del gobierno que represente a su comunidad?

- 1 DEFINITELY COULD NOT
- 2 PROBABLY COULD NOT
- 3 MAYBE COULD
- 4 PROBABLY COULD
- 5 DEFINITELY COULD
- 6 REFUSED
- 7 DON'T KNOW

'QA21_M19' [AM48] - In the past 12 months, have you been an active member of any group that tries to influence public policy or government, not including a political party?

Durante los últimos 12 meses, ¿ha sido miembro activo de algún grupo que intente influir en el gobierno o las políticas públicas, excepto un partido político?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

Section P: Voter Engagement

PROGRAMMING NOTE 'QA21_P1':

**IF 'QA21_G4'=1 (CITIZEN) OR 'QA21_G1' = 1 (USA)) OR 9 (GUAM) OR 22 (PUERTO RICO) OR 26 (VIRGIN ISLANDS, CONTINUE WITH 'QA21_P1';
ELSE GO TO 'QA21_P3'**

'QA21_P1' [AP73] - How often do you vote in presidential elections?

¿Con qué frecuencia vota usted en las elecciones presidenciales?

- 01 ALWAYS
- 02 SOMETIMES
- 03 NEVER
- 7 REFUSED
- 8 DON'T KNOW

'QA21_P2' [AP74] - How often do you vote in state elections, such as for Governor or state proposition?

¿Con qué frecuencia vota usted en las elecciones estatales, por ejemplo en las elecciones para gobernador o para una propuesta estatal?

- 01 ALWAYS
- 02 SOMETIMES
- 03 NEVER
- 7 REFUSED
- 8 DON'T KNOW

'QA21_P3' [AP75] - How often do you vote in local elections, such as for Mayor or school board?

¿Con qué frecuencia vota usted en las elecciones locales, por ejemplo en las elecciones para alcalde o para la junta escolar?

- 01 ALWAYS
- 02 SOMETIMES
- 03 NEVER
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_P4':**IF 'QA21_P1' or 'QA21_P2' or 'QA21_P3' = 2 OR 3, CONTINUE WITH 'QA21_P4';
ELSE SKIP TO 'QA21_S1';**

'QA21_P4' [AP80] - For the most recent election that you did not vote in, what is the main reason why you did not vote?

Para las elecciones más recientes en las que no votó, ¿cuál es el principal motivo por el que no lo hizo?

- 01 I DISLIKE POLITICS
- 02 VOTING HAS LITTLE TO DO WITH THE WAY REAL DECISIONS ARE MADE
- 03 I DID NOT LIKE ANY OF THE CANDIDATES ON THE BALLOT
- 04 MY ONE VOTE IS NOT GOING TO AFFECT HOW THINGS TURN OUT
- 05 I WAS NOT INFORMED ENOUGH ABOUT THE CANDIDATES OR ISSUES TO MAKE A GOOD DECISION
- 06 I DID NOT SEE A DIFFERENCE BETWEEN THE CANDIDATES OR PARTIES
- 07 I WAS NOT INTERESTED IN WHAT IS HAPPENING IN GOVERNMENT
- 08 I JUST DID NOT THINK ABOUT DOING IT
- 9 I FORGOT
- 10 I HAD TO WORK
- 11 I DID NOT HAVE TRANSPORTATION
- 91 OTHER (SPECIFY : _____)
- 7 REFUSED
- 8 DON'T KNOW

Section Q: Adverse Childhood Experiences

ACEINTRO- The following questions are about events that might have happened during your childhood. This information will allow us to better understand problems that may occur early in life, and may help others in the future. This is a sensitive topic and some people may feel uncomfortable with these questions. Please keep in mind that you can ask me to skip any question you do not want to answer. All questions refer to the time period before you were 18 years of age. Before were 18 years of age..

Las siguientes preguntas son sobre eventos que podrían haber ocurrido durante su niñez. Esta información nos permitirá comprender mejor los problemas que pueden ocurrir temprano en la vida y puede ayudar a otros en el futuro. Éste es un tema delicado y algunas personas pueden sentirse incómodas con éstas preguntas.. Pero al final de la sección, hay un número de teléfono de una organización que puede proporcionar información y hacer referencias para estos problemas.

'QA21_Q1' [AQ1]- Did you live with anyone who was depressed, mentally ill, or suicidal?

¿Vivió con alguien que estaba deprimido/a, era enfermo/a mental o suicida?

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_Q2' [AQ2]- Did you live with anyone who was a problem drinker or alcoholic?

¿Vivió con alguien que era un/a bebedora problemática o era alcohólico/a?

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_Q3' [AQ3]- Did you live with anyone who used illegal street drugs or who abused prescription medications?

¿Vivió con alguien que usaba drogas ilegales o que abusaba de medicamentos recetados?

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_Q4' [AQ4]- Did you live with anyone who served time or was sentenced to serve time in a prison, jail, or other correctional facility?

¿Vivió con alguien que cumplió una condena o fue condenado a cumplir una condena en una prisión, cárcel u otra institución correccional?

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_Q5' [AQ5]- Were your parents separated or divorced?

¿Estaban sus padres separados o divorciados?

- 01 YES
- 02 NO
- 03 PARENTS NOT MARRIED
- 7 REFUSED
- 8 DON'T KNOW

'QA21_Q6' [AQ6]- How often did your parents or adults in your home ever slap, hit, kick, punch or beat each other up?

¿Con qué frecuencia sus padres o los adultos en su hogar se abofetearon, golpearon, patearon, se dieron puñetazos o se golpearon entre sí?

- 01 NEVER
- 02 ONCE
- 03 MORE THAN ONCE
- 7 REFUSED
- 8 DON'T KNOW

'QA21_Q7' [AQ7]- Before age 18, how often did a parent or adult in your home ever hit, beat, kick, or physically hurt you in any way? Do not include spanking.

Antes de los 18 años, ¿con qué frecuencia un padre o un adulto en su hogar lo/la golpeó, pegó, pateó o lastimó físicamente de alguna manera? No incluya nalgadas.

- 01 NEVER
- 02 ONCE
- 03 MORE THAN ONCE
- 7 REFUSED
- 8 DON'T KNOW

'QA21_Q8' [AQ8]- How often did a parent or adult in your home ever swear at you, insult you, or put you down?

¿Alguna vez, y con qué frecuencia, un padre o un adulto en su hogar le insultó, maldijo o menospreció?

- 01 NEVER
- 02 ONCE
- 03 MORE THAN ONCE
- 7 REFUSED
- 8 DON'T KNOW

'QA21_Q9' [AQ9]- How often did anyone at least 5 years older than you or an adult, ever touch you sexually?

¿Con qué frecuencia alguien al menos 5 años mayor que usted o un adulto le tocó sexualmente?

- 01 NEVER
- 02 ONCE
- 03 MORE THAN ONCE
- 7 REFUSED
- 8 DON'T KNOW

'QA21_Q10' [AQ10]- How often did anyone at least 5 years older than you or an adult, try to make you touch them sexually?

¿Con qué frecuencia alguien al menos 5 años mayor que usted o un adulto intentó que le tocara sexualmente?

- 01 NEVER
- 02 ONCE
- 03 MORE THAN ONCE
- 7 REFUSED
- 8 DON'T KNOW

'QA21_Q11' [AQ11]- How often did anyone at least 5 years older than you or an adult, force you to have sex?

¿Con qué frecuencia alguien al menos 5 años mayor que usted o un adulto le obligó a tener relaciones sexuales?

- 01 NEVER
- 02 ONCE
- 03 MORE THAN ONCE
- 7 REFUSED
- 8 DON'T KNOW

'QA21_Q12' [AQ12]- Were you ever the victim of violence or witness any violence in your neighborhood?

¿Alguna vez fue víctima de violencia o fue testigo de violencia en su vecindario?

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_Q13' [AQ13]- Were you ever treated or judged unfairly because of your race or ethnic group?

¿Alguna vez fue tratado/a o juzgado/a injustamente debido a su raza o grupo étnico?

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_Q14' [AQ14]- Did you ever live with a parent or guardian who died?

¿Vivió alguna vez con un padre o tutor que murió?

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_Q15' [AQ15]- How often was it very hard to get by on your family's income, for example, it was hard to cover the basics like food or housing? Would you say very often, somewhat often, not very often, or never?

¿Con qué frecuencia fue muy difícil sobrevivir con los ingresos de su familia, por ejemplo, fue difícil cubrir necesidades básicas como la comida o la vivienda? ¿Diría usted que con mucha frecuencia, con algo de frecuencia, pocas veces o nunca?

- 01 VERY OFTEN
- 02 SOMEWHAT OFTEN
- 03 NOT VERY OFTEN
- 03 NEVER
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA22_Q16' ;

IF TSE=1, DISPLAY “Still, looking back before you were 18 years of age how often did you... feel able to talk to family about feelings? Was it...”

IF TSE=2, DISPLAY “The following questions refer to the time period before you were 18 years of age. Now, looking back before you were 18 years of age how often did you... feel able to talk to family about feelings?”

'QA22_Q16' [AQ16]- {{Still, looking back before you were 18 years of age how often did you...

feel able to talk to family about feelings? Was it.../The following questions refer to the time period before you were 18 years of age. Now, looking back before you were 18 years of age how often did you...

feel able to talk to family about feelings?}}

{{Still, looking back before you were 18 years of age how often did you...Sintió que podía hablar con sus familiares sobre sus sentimientos?/ Las siguientes preguntas se refieren al período de tiempo antes de que cumpliera los 18 años. Ahora, mirando hacia atrás antes de haber cumplido los 18 años de edad, con qué frecuencia... Sintió que podía hablar con sus familiares sobre sus sentimientos?}}

- 1 All of the time
- 1 Siempre
- 2 Most of the time
- 2 La mayor parte del tiempo
- 3 Some of the time
- 3 A veces
- 4 A little of the time
- 4 Muy pocas veces
- 5 None of the time
- 5 Nunca
- 7 REFUSED
- 8 DON'T KNOW

'QA21_Q17' [AQ17]- { How often did you..} Feel family stood by you during difficult times?

{ ¿ Con qué frecuencia usted...} sintió que su familia estuvo a su lado en tiempos difíciles?

- 1 All of the time
- 1 Siempre
- 2 Most of the time
- 2 La mayor parte del tiempo
- 3 Some of the time
- 3 A veces
- 4 A little of the time
- 4 Muy pocas veces
- 5 None of the time
- 5 Nunca
- 7 REFUSED
- 8 DON'T KNOW

'QA21_Q18' [AQ18]- { How often did you..} Feel safe and protected by adult in your home?

{ ¿ Con qué frecuencia usted...} se sintió seguro/a y protegido/a por un adulto en su hogar?

- 1 All of the time
- 1 *Siempre*
- 2 Most of the time
- 2 *La mayor parte del tiempo*
- 3 Some of the time
- 3 *A veces*
- 4 A little of the time
- 4 *Muy pocas veces*
- 5 None of the time
- 5 *Nunca*
- 7 REFUSED
- 8 DON'T KNOW

'QA21_Q19' [AQ19]- { How often did you..} Have at least 2 non-parent adults who took genuine interest?

{ ¿ Con qué frecuencia usted...} tuvo al menos 2 adultos que no eran padres que se interesaron por usted genuinamente?

- 1 All of the time
- 1 *Siempre*
- 2 Most of the time
- 2 *La mayor parte del tiempo*
- 3 Some of the time
- 3 *A veces*
- 4 A little of the time
- 4 *Muy pocas veces*
- 5 None of the time
- 5 *Nunca*
- 7 REFUSED
- 8 DON'T KNOW

'QA21_Q20' [AQ20]- { How often did you..} Feel supported by friends?

{ ¿ Con qué frecuencia usted...} sintió el apoyo de amigos?

- 1 All of the time
- 1 *Siempre*
- 2 Most of the time
- 2 *La mayor parte del tiempo*
- 3 Some of the time
- 3 *A veces*
- 4 A little of the time
- 4 *Muy pocas veces*
- 5 None of the time
- 5 *Nunca*
- 7 REFUSED
- 8 DON'T KNOW

'QA21_Q21' [AQ21]- { How often did you..} Feel a sense of belonging at high school?

{ ¿ Con qué frecuencia usted...} tuvo sentido de pertenencia en la escuela secundaria?

- 1 All of the time
- 1 *Siempre*
- 2 Most of the time
- 2 *La mayor parte del tiempo*
- 3 Some of the time
- 3 *A veces*
- 4 A little of the time
- 4 *Muy pocas veces*
- 5 None of the time
- 5 *Nunca*
- 7 REFUSED
- 8 DON'T KNOW

'QA21_Q22' [AQ22]- { How often did you..} Enjoyed participating in community traditions?

{ ¿ Con qué frecuencia usted...} disfrutó participando en las tradiciones de la comunidad?

- 1 All of the time
- 1 *Siempre*
- 2 Most of the time
- 2 *La mayor parte del tiempo*
- 3 Some of the time
- 3 *A veces*
- 4 A little of the time
- 4 *Muy pocas veces*
- 5 None of the time
- 5 *Nunca*
- 7 REFUSED
- 8 DON'T KNOW

'QA21_Q23' [AQ23]- Adverse Childhood Experiences are stressful or traumatic events experienced from birth through the age of 18 and relate to categories of child abuse, neglect, and/or household challenges, similar to those we previously asked in those categories. Medical professionals, including doctors, nurse practitioners, midwives, psychologists, and others, can perform Adverse Childhood Experiences assessments.

Las experiencias adversas de la infancia son los eventos estresantes o traumáticos que pasan desde el nacimiento hasta los 18 años y se relacionan con categorías de abuso, negligencia y/o retos domésticos de menores, similares a las que preguntamos anteriormente en esas categorías. Los profesionales de la salud, incluidos médicos, enfermeras, parteras, psicólogos y otros, pueden realizar evaluaciones de ACE

Have you ever completed an assessment of your own history of Adverse Childhood Experiences with a medical health or mental health professional?

¿Ha completado alguna vez una Evaluación de su propio historial de Experiencias adversas de la infancia con un profesional médico o de salud mental?

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_Q24': IF SELECTED TEEN, CONTINUE, ELSE SKIP TO PN_ 'QA21_Q25'

'QA21_Q24' [AQ24]- Have you ever completed an assessment of (TEEN's) Adverse Childhood Experiences with a medical health or mental health professional?

¿Ha completado alguna vez una Evaluación de las Experiencias adversas de la infancia de (ADOLESCENTE) con un profesional médico o de salud mental?

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_Q25': IF SELECTED CHILD CONTINUE, ELSE SKIP TO 'QA21_Q26'

'QA21_Q25' [AQ25]- Have you ever completed an assessment of (CHILD's) Adverse Childhood Experiences with a medical health or mental health professional ?

¿Ha completado alguna vez una Evaluación de las Experiencias adversas de la infancia de (NIÑO/A) con un profesional médico o de salud mental?

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_Q26' [AQ26]- How important do you think it is for health care providers to ask their patients about Adverse Childhood Experiences?

¿Qué tan importante cree que es para los proveedores de cuidado de la salud preguntar a sus pacientes sobre las experiencias adversas de la niñez?

- 01 VERY IMPORTANT
- 02 SOMEWHAT IMPORTANT
- 03 NOT AT ALL IMPORTANT
- 7 REFUSED
- 8 DON'T KNOW

'QA21_Q27' [AQ27]- In general, are you satisfied with the efforts of your clinic or health care provider to address the impacts of Adverse Childhood Experiences?

En general, ¿está satisfecho/a con los esfuerzos de su clínica o proveedor de cuidado de la salud al abordar los impactos de las experiencias adversas en la niñez?

- 01 VERY SATISFIED
- 02 SOMEWHAT SATISFIED
- 03 NOT AT ALL SATISFIED
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE ACES RESOURCE: IF [('AQ9' OR 'AQ10' OR 'AQ11')=-3 OR ('AQ9' OR 'AQ10' OR 'AQ11')>1], DISPLAY RAINN RESOURCE AND (IF 'AQ7'=1 OR 'AQ7'=-3) DISPLAY NATIONAL DOMESTIC VIOLENCE RESOURCE, ELSE SKIP TO 'AF86

RAINN Resource: We realize that this topic may bring up past experiences that some people may wish to talk about. If you or someone you know would like to talk to a trained counselor, please call 1-800-656-HOPE (4673) or please visit this website: www.rainn.org.

Sabemos que este tema puede traer experiencias pasadas de las que algunas personas podrían desear hablar. Si usted o alguien que conoce desea hablar con un terapeuta capacitado, llame al 1-800-656-HOPE (4673) o visite este sitio web: www.rainn.org.

National Domestic Violence hotline: "We have a toll free number if you'd like to talk about these issues. Would you like the toll-free number?"

"Tenemos un número de teléfono gratuito si desea hablar sobre estos temas. ¿Le gustaría conocer el número de teléfono gratuito?"

[IF R SAYS "YES", SAY: Someone is available 24 hours a day to provide information. GIVE OUT 1-800-799-7233; TTY 1-800-787-3224 TOLL-FREE NUMBER. THIS IS THE NATIONAL DOMESTIC VIOLENCE HOTLINE.]

[IF CATI, DISPLAY: Would you like me to repeat this information?]

Section S: Suicide Ideation and Attempts

PROGRAMMING NOTE 'QA21_S1':
IF PROXY=1, GO TO PN_AM10B

'QA21_S1' [AF86] - The next section is about thoughts of hurting yourself. Again, if any question upsets you, you don't have to answer it.

La sección siguiente trata de ideas acerca de causarse daño a sí mismo(a). De nuevo, si alguna pregunta le molesta no tiene que responderla.

Have you ever seriously thought about committing suicide?

¿Alguna vez ha pensado seriamente en suicidarse?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto 'PN_AM10B'

'QA21_S2' [AF87] - Have you seriously thought about committing suicide at any time in the past 12 months?

¿En algún momento durante los últimos 12 meses, ha pensado seriamente en suicidarse?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto 'QA21_S4'

'QA21_S3' [AF91] - Have you seriously thought about committing suicide at any time in the past 2 months?

En algún momento en los últimos 2 meses, ¿ha pensado seriamente en suicidarse?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA21_S4' [AF88] - Have you ever attempted suicide?

¿Ha intentado suicidarse alguna vez?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE 'QA21_S5' :
IF 'QA21_S2' = (2, -7, -8) AND 'QA21_S4' = (2, -7, -8) THEN GO TO SUICIDE RESOURCE;
IF 'QA21_S3' = (2, -7, -8) AND 'QA21_S4' = (2, -7, -8) THEN GO TO SUICIDE RESOURCE;
IF 'QA21_S3' = 1 AND 'QA21_S4' = (2, -7, -8) THEN GO TO SUICIDE RESOURCE;
ELSE CONTINUE WITH 'QA21_S5'

'QA21_S5' [AF89] - Have you attempted suicide at any time in the past 12 months?

¿Ha intentado suicidarse alguna vez en los últimos 12 meses?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

'SUICIDE RESOURCE:' [SUICIDE RESOURCE:] - We have a number you can call if you'd like to talk to someone about suicidal thoughts or attempts. Someone is available 24 hours a day to provide information to help you. Do you have something to write with?

Tenemos un número gratis al que puede llamar si desea hablar con alguien acerca de ideas o intentos de suicidio. Hay alguien disponible 24 horas al día para proporcionarle información que puede ayudarle.

[WAIT UNTIL THEY HAVE SOMETHING TO WRITE DOWN THE NUMBER AND/OR WEBSITE AND THEN CONTINUE WITH THE SCRIPT. SPEAK SLOWLY WHEN GIVING THE HOTLINE NUMBER.]

The number is 1-800-273-TALK (8255).

El número es el 1-800-273-TALK (8255).

[IF NEEDED, REPEAT THE NUMBER OR ASK THEM TO READ IT BACK TO YOU.]

The number is 1-800-273-TALK (8255).

El número es el 1-800-273-TALK (8255).

Or, you can visit a website to find out information about getting help.

[SPEAK SLOWLY WHEN GIVING OUT THE WEBSITE ADDRESS.]

The website address is www.suicidepreventionlifeline.org.

Puede ir a un sitio web <http://www.suicidepreventionlifeline.org>

[IF NEEDED, REPEAT THE ADDRESS OR ASK THEM TO READ IT BACK TO YOU.]

POST-NOTE FOR SUICIDE RESOURCE:

IF 'QA21_S2' = (2, -7, -8) AND 'QA21_S4' = (2, -7, -8) THEN SKIP TO PN_AM10B (NEXT SECTION);
ELSE CONTINUE

'QA21_S6' [AF90] - Would you like to discuss your thoughts with this person or would you like to continue with the survey?

¿Desea hablar con esta persona acerca de sus ideas?

- 1 DISCUSS THOUGHTS WITH PERSON
- 2 CONTINUE WITH SURVEY
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto 'PN_AM10B'

Follow-Up Survey Permission

PROGRAMMING NOTE AM10B:

IFAA4=1 (LATINO) AND [(CHILDTEEN>0 (ELIGIBLE CHILD/TEEN>0) AND (CH1=1 OR TEEN=1 (ELGIBLE TEEN>0)) OR ['QA22_A11' 3, 5, OR 6], DISPLAY 'JUST A COUPLE OF FINAL QUESTIONS' ELSE DISPLAY ' JUST A FINAL QUESTION' ;

'AM10B' [AM10B] - Just a {couple of} final question{s} and then we are done. Please provide your name and telephone number so that we may call you if we have additional questions.

Tenemos solo \{una pregunta/ algunas preguntas\} más y, terminaremos. Proporcione su nombre y número de teléfono para que podamos ponernos en contacto en caso de tener más preguntas.

First Name: _____ Last Name: _____

Nombre: _____ Apellido: _____

Phone Number: _____

Número de teléfono: _____

PROGRAMMING NOTE AM10B: 'QA22_A11' ONLY =3, 5, OR 6 OR 'QA22_A20'= 16, 17, 19, 30-55], THEN CONTINUE WITH 'AANHPI RECON1' AND SET AANHPI FOLLOW-UP=1, ELSE SKIP TO PN_LATINO YOUTH FOLLOW-UP

'AANHPI RECON1' [AANHPI RECON1]- Based on your responses, we'd like to ask you a few more questions. This new survey usually takes about 15 minutes and you will be paid \$20.

The purpose of these additional questions is to understand the experiences of Asian-Americans, Native Hawaiians, and Pacific Islanders in California with basic necessities, health services, and acts of discrimination. The results of this survey may help shape policies and programs that can better address the unmet needs of Asian-Americans, Native Hawaiians, and Pacific Islanders of California.

Basándonos en sus respuestas, nos gustaría hacerle algunas preguntas más. Esta nueva encuesta toma aproximadamente 15 minutos y se le pagará \$20. El propósito de estas preguntas adicionales es comprender las experiencias de los asiático-americanos y los nativos de Hawái y de la Polinesia, que viven en California, respecto a necesidades básicas, servicios de salud y actos de discriminación. Los resultados de esta encuesta podrían ayudar a elaborar políticas y programas que sirvan para abordar de una mejor forma las necesidades no satisfechas de los asiático-americanos, y los nativos de Hawái y de la Polinesia que viven en California. Si la completa, se le pagará \$20. ¿Quisiera participar en esta encuesta?

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

IF=1, goto ' PN_LATINO YOUTH/ AANHPI CONTACT'

'AANHPI RECON2'[AANHPI RECON2]- Would you like to participate in this survey at a later date?

¿Quisiera participar en esta encuesta más adelante?

- 01 YES
 02 NO
 -7 REFUSED
 -8 DON'T KNOW

PN_LATINO YOUTH FOLLOW-UP:

IFAA4=1 (LATINO) AND [(CHILDTEEN>0 (ELIGIBLE CHILD/TEEN>0) AND (CH1=1 OR TEEN=1 (ELGIBLE TEEN>0)) AND AANHPI FOLLOW-UP=2,, CONTINUE WITH LATINO YOUTH FOLLOW-UP ELSE GO TO PN_SR2

LATINO YOUTH FOLLOW-UP ' [LATINO YOUTH FOLLOW-UP]- Based on your responses, you may be eligible to participate in another survey conducted by UCLA. It will take place about 2-6 weeks from now and you will be paid \$60 This other survey will take 30 minutes to complete.

De acuerdo con sus respuestas, podría ser elegible para participar en otra encuesta que realice la UCLA. Se realizará este año a finales de la primavera y usted recibirá \$20 como pago. La otra encuesta durará aproximadamente 15 minutos.

May we contact you about this survey?

¿Podemos comunicarnos con usted con relación a esta encuesta?

- 01 YES
 02 NO
 -7 REFUSED
 -8 DON'T KNOW

LATINO YOUTH CONTACT:

PN_LATINO YOUTH/AANHPI CONTACT:IF LATINO YOUTH FOLLOW-UP=1 OR (AANHPI FOLLOW-UP=1 OR 'AANHPI RECON2'=1) AND INFO NOT PROVIDED IN AM10B, CONTINUE; ELSE GO TO PN_SR2

LATINO YOUTH/AANHPI CONTACT' [LATINO YOUTH/AANHPI CONTACT]- Please provide your name and telephone number so that we may call you if we have additional questions.

Proporcione su nombre y número de teléfono para que podamos comunicarnos con usted en caso de tener más preguntas.

First Name: _____ Last Name: _____

Nombre: _____ Apellido: _____

Phone Number: _____

Número de teléfono: _____

PROGRAMMING NOTE SUICIDE RESOURCE 2:**IF 'QA21_S6' = (2, -7, -8),****AND ['QA21_S3' = 1 OR ('QA21_S3' = 2, -7, -8 AND 'QA21_S5' =1)], THEN CONTINUE WITH SUICIDE RESOURCE 2;****ELSE GO TO PROGRAMMING NOTE CLOSE1****IF PROXY=1, GO TO PN_CLOSE1&2**

SUICIDE RESOURCE 2: As I mentioned earlier, if you'd like to talk to someone about suicidal thoughts or attempts, someone is available 24 hours a day to provide information to help you. Do you have something to write with? [WAIT UNTIL THEY HAVE SOMETHING TO WRITE DOWN THE NUMBER AND/OR WEBSITE AND THEN CONTINUE WITH THE SCRIPT. SPEAK SLOWLY WHEN GIVING THE HOTLINE NUMBER.]The toll-free number is 1-800-273-TALK (8255).

Como te lo mencioné antes, tenemos un número al que puedes llamar para hablar con alguien sobre pensamientos de suicidio o intentar suicidarse. Alguien está disponible para hablar las 24 horas del día para dar información de ayuda.

[WAIT UNTIL THEY HAVE SOMETHING TO WRITE DOWN THE NUMBER AND/OR WEBSITE AND THEN CONTINUE WITH THE SCRIPT. SPEAK SLOWLY WHEN GIVING THE HOTLINE NUMBER.]

The number is 1-800-273-TALK (8255).

El número es 1-800-273-TALK (8255)

[IF NEEDED, REPEAT THE NUMBER OR ASK THEM TO READ IT BACK TO YOU.]

Or you can visit a website to find out information about getting help.

O, puede ir a un sitio web para encontrar información de cómo puede obtener ayuda.

[SPEAK SLOWLY WHEN GIVING OUT THE WEBSITE ADDRESS.]

The website address is www.suicidepreventionlifeline.org.

La dirección del sitio web es www.suicidepreventionlifeline.org.

[IF NEEDED, REPEAT THE ADDRESS OR ASK THEM TO READ IT BACK TO YOU.]

'QA21_S7' [AN8] - Would you like to speak with someone now?

¿Quiere hablar con alguien ahora?

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto 'CLOSE1'

**PROGRAMMING NOTE CLOSE1 AND CLOSE2:
IF ALL INTERVIEWS FOR HOUSEHOLD COMPLETE, SKIP TO CLOSE2;
ELSE CONTINUE WITH CLOSE1**

'CLOSE1' [CLOSE1] - Let me check to see if there is anyone else.

Permítame verificar si hay alguien más con quien tengamos que hablar.

If true, goto 'HH_SELECT'

'CLOSE2' [CLOSE2] - Thank you, I really appreciate your time and cooperation. You have helped with a very important health survey. If you have any questions about the study, please contact Dr. Ninez Ponce, the Principal Investigator.

Dr. Ponce can be reached toll-free at 1-866-275-2447. Thank you, and good-bye.

Muchas gracias, le agradezco el tiempo que me ha brindado y su cooperación. Usted ha colaborado en una encuesta muy importante sobre la salud. Si tiene alguna pregunta acerca del estudio, por favor llame a la Dra. Ninez Ponce que es la Investigadora principal.

Puede llamar gratis a la Dra. Ponce al teléfono 1-866-275-2447. Gracias y adiós