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INTRODUCTION

This report describes the 2012 survey implementation of The Attitudes and Behaviors Survey (TABS) conducted on behalf of the University of Colorado, Denver (hereafter, UC). ICF International (hereafter, ICF) conducted 15,005 interviews in the state of Colorado; 10,798 via landline and 4,207 via cell. ICF also collected a nationally representative sample of 3,230 residents; 2,314 via landline and 916 via cell. Data were collected between October 1, 2012 and February 11, 2013.

TABS is an ongoing population-level study of adults providing detailed information about individual, community, and social-environmental factors related to risk factors that affect the health of Coloradans. The purposes of the study are to help identify the most widespread, influential and changeable risk factors; to determine how such factors vary by sociodemographic and other characteristics; and to help evaluate the impact of Colorado’s Amendment 35 funded grant programs.

TABS was first conducted in 2001 (N=13,006) and repeated in 2005 (N=12,257) and 2008 (N=14,156). Previously, the study has provided detailed information regarding adult tobacco use, attitudes towards tobacco-related issues, and how these both have changed over time; it was referred to as CO TABS (Colorado Tobacco Attitudes and Behaviors Survey). The survey has been funded in the past by tobacco litigation settlement proceeds (2001), and a voter-approved tobacco tax increase (2005). TABS has been based on the California Tobacco Survey and the tobacco-related questions of the Behavioral Risk Factor Surveillance System (BRFSS), which is conducted by the Centers for Disease Control and Prevention (CDC). While previous waves focused solely on tobacco, 2012 TABS incorporated additional risk factors and conditions that influence health. The 2012 TABS included question modules related to certain chronic diseases (specifically, high blood pressure, diabetes and high cholesterol), plus modules about policy as well as voting and social trust.

ICF project management staff met regularly with the UC throughout the project, beginning with an initial kick-off meeting in July, 2012 to clarify expectations and discuss project details. Project managers from the UC and ICF met twice weekly before and during fielding and at least once a week thereafter to discuss sampling, programming, fielding, weighting, and other survey-related tasks.

STUDY POPULATION

The TABS survey of adults collects information from people 18 years of age and older who speak English or Spanish and reside in a household with a telephone or possess a cell phone. The 2012 survey targeted completions with 13,000 Colorado residents, age 18 and older and 3,000 completions with 18+ residents in the United States, outside of Colorado. For both Colorado and the national sample, TABS was based on a dual-frame sampling design including:

- A two-stage stratified, list-assisted, random digit dialing (RDD) sample of adults in landline telephone households; and
- A sample of cell phone users selected from a RDD sample of cell phone numbers.
The representation of cell phone users was greater than in 2008 to reflect the growing population of cell-only and cell-mainly respondents. A cell phone supplement is also ideal for reaching current smokers and young adults. Cell and LL was projected to be 30% to 70%. The actual distribution was 28% (cell) to 72% (LL) for both the national and Colorado studies.

**Colorado Sample Design**

Sample sizes were developed by county and by Health Statistic Region (HSR) to reflect the multiple objectives and trade-offs in the survey. Sample allocations deviated from proportional allocation, which would provide the optimum precision for state-level estimates, to ensure that sample sizes were sufficient (a minimum of 400 in each HSR region) for precise estimation even in smaller regions. Also, counties with large African American or Hispanic populations, or high smoking rates, received a disproportionately larger allocation. Within each region and county, the total sample allocation was further broken down into a cell sample and landline sample allocation. Table 1 presents the expected HSR sample allocation used to guide sample selection, and the final number of Colorado interviews.

**Table 1. Planned Sample Allocation and Total Completed Surveys by Region**

<table>
<thead>
<tr>
<th>Region</th>
<th>Total Survey Completes and Partials</th>
<th>Sample Allocation (Expected)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>458</td>
<td>400</td>
</tr>
<tr>
<td>2</td>
<td>581</td>
<td>600</td>
</tr>
<tr>
<td>3</td>
<td>816</td>
<td>500</td>
</tr>
<tr>
<td>4</td>
<td>1,268</td>
<td>1,200</td>
</tr>
<tr>
<td>5</td>
<td>308</td>
<td>400</td>
</tr>
<tr>
<td>6</td>
<td>547</td>
<td>400</td>
</tr>
<tr>
<td>7</td>
<td>724</td>
<td>650</td>
</tr>
<tr>
<td>8</td>
<td>545</td>
<td>400</td>
</tr>
<tr>
<td>9</td>
<td>562</td>
<td>400</td>
</tr>
<tr>
<td>10</td>
<td>528</td>
<td>400</td>
</tr>
<tr>
<td>11</td>
<td>419</td>
<td>400</td>
</tr>
<tr>
<td>12</td>
<td>534</td>
<td>400</td>
</tr>
<tr>
<td>13</td>
<td>491</td>
<td>400</td>
</tr>
<tr>
<td>14</td>
<td>1,350</td>
<td>950</td>
</tr>
<tr>
<td>15</td>
<td>1,120</td>
<td>1,200</td>
</tr>
<tr>
<td>16</td>
<td>863</td>
<td>750</td>
</tr>
<tr>
<td>17</td>
<td>397</td>
<td>400</td>
</tr>
<tr>
<td>18</td>
<td>604</td>
<td>500</td>
</tr>
<tr>
<td>19</td>
<td>424</td>
<td>400</td>
</tr>
<tr>
<td>20</td>
<td>1,150</td>
<td>1,450</td>
</tr>
<tr>
<td>21</td>
<td>1,316</td>
<td>800</td>
</tr>
<tr>
<td>TOTAL</td>
<td>15,005</td>
<td>13,000</td>
</tr>
</tbody>
</table>
Landline Sample
The landline sample is based on a list-assisted, stratified RDD sample of telephone numbers. A list-assisted stratified RDD sample is informed by telephone directories. The listed telephone numbers for the United States are mapped and assigned to a specific geographic location (such as a census block group, a census tract, or a ZIP code). Telephone lines are not restricted by geographic borders, but are generally associated with finite geographic areas. The mapping results in a many-to-many association between telephone exchanges and geographic boundaries (i.e. many exchanges associated with many geographic areas). The association between geographic area and telephone exchanges is quantified by tallying the number of directory-listed households in each geographic area by exchange combination. The geographic area is assigned to the telephone exchange with the most number of listed telephones (the rule of plurality). These exchange characteristics can be used for targeting certain populations to increase sample sizes for certain desired subgroups, such as Hispanics and African Americans, or for allocating sample to specific geographic boundaries, such as counties or regions.

The sample was designed and selected with the Genesys sampling system from Marketing Systems Group, Inc. (MSG). The sampled telephone numbers were purged for known businesses by matching the numbers to business directories. Non-working numbers were removed at the time of fielding by an automated dialing system.

To target completions with minorities (specifically, African Americans and Hispanic/Latinos), ICF disproportionately sampled exchange areas in two counties with relatively high representation of African Americans: Arapahoe and Denver. This process also resulted in oversampling Hispanics to the extent that the two counties also have a larger representation of Hispanic/Latino residents.

In Arapahoe and Denver, the oversampling of African American adults was achieved by stratifying landline exchanges by the density of the African American population, and then disproportionately allocating the sample to higher-density strata. After screening the sample households for the presence of an African American, we subsampled non-African American households to provide equal sampling weights for non-African Americans in the county. To boost response among Hispanic respondents, landline sample was flagged for suspected Hispanic surname status. This sample was initially dialed in English, then later with bilingual Spanish-speaking interviewers.

Adults in the two minority groups were oversampled a second way via the selection of a second adult in households that had minority group members. Specifically, if after random selection of the first adult, a smoker, African American, or Hispanic adult remained, a second random selection occurred, prioritizing selection of the smoker, then the African American, then the Hispanic respondent.

Cell Phone Sample
The cell phone sample is an RDD sample of cell phone numbers from cell phone exchanges and zero-blocks from the mixed-use (cell and landline) exchanges (1+ blocks are included in the landline sample). The cell phone exchanges originate from the Telecordia® TPM™ Data Source. The cell phone exchanges and mixed-use exchanges are identified from exchange type (NXXTYPE). ICF’s sampling statisticians worked with Marketing Systems Group (MSG) to identify and select the cell phone sample. Minority
adults have a higher representation in cell phone samples; thus, we allocated 30% of completions from the cell phone sample to increase the number of African American and Hispanic respondents.

Despite the above measures for landline and cell, completions with self-report African American respondents remained below their estimated proportion in Colorado (4.0% according to US Census 2010) and the 600 completions that prior survey waves were able to obtain. Thus, ICF obtained a cell phone sample based on ZIP codes with a higher representation of African American residents. Using the 2010 United States Census information, a subset of ZIP codes was provided to our sampling vendor, Marketing Systems Group (MSG). MSG then provided ICF with a report reflecting the viable rate centers for the ZIP codes. MSG identified 189,000 cell phone RDD records; however, some of these records were used in the original cell phone frame. Removing these duplicates yielded 176,220 RDD cell phone numbers. Based on estimated productivity rates, ICF requested that MSG draw 87,772 cell records. These records were matched against MSG’s cell phone ZIP-appended database. This process yielded 7,402 records with a ZIP code used in our original sample frame. All of these records were loaded as Wave 4 sample. Please see *Issues with Survey Implementation*, page 23, for additional information.

**National Sample Design**

The national sample included all states except *Colorado* and was a dual frame (70% LL /30% cell) RDD sample selected to yield 3,000 completed surveys. Each sample was a simple random sample—not stratified to oversample any groups. The sample represented regions and states in the proportion that they appear in the general population. The one exception is the state of Colorado as the target population and the frame population for the national sample was the United States minus Colorado. Operationally, the exchanges covering the state of Colorado were deleted from the frame.

The within-household screening and selection procedures mimic those used for the Colorado sample. Specifically, similar to the Colorado sample, the national sample achieved oversampling by selecting a second adult in eligible sample households (e.g. if, after random selection of the first adult, a smoker, African American, or Hispanic adult remains, a second random selection will occur, prioritizing selection of the smoker, then the African American, then Hispanic respondent). This approach is preferred to oversampling exchanges, in part, because the approach impacts the variances of different estimates in differential ways depending on the degree of the intracluster correlation (ICC) within households of the given measure.\(^1\) By contrast, the unequal weighting effects induced by oversampling exchanges affect all survey estimates.

\(^1\) The homogeneity within households, assessed by the rate of homogeneity (RHO) or ICC, may be larger for the subgroup indicators—African Americans, Hispanics and smoking status—than for the outcome measures of interest. The fact that subgroup members tend to co-exist in a same household is exactly what makes the approach cost-effective.
**RESPONDENT NOTIFICATION**

**Advanced Mailing**

Prior to each fielding wave, ICF mailed an advance letter to each landline household in the sample that had been address-matched. Letters were printed on two sides—the front in English and the reverse side in Spanish. ICF developed the letter text in collaboration with the UC, translated the text into Spanish, and coordinated and printed the mailings using our Martinsville, Virginia Operations Center. Respondents were provided with an ICF toll-free number to call to complete the interview, a contact number at the UC if they had further questions, and instructions on how to contact the UC’s IRB (COMIRB). Calls to the local UC number were forwarded to the ICF toll-free number. The ICF toll-free number routed to an Interactive Voice Response (IVR) system which provided several options, including reaching a live staff person.

The first mailing resulted in numerous calls to COMIRB with non-regulatory questions about the project and requests to complete the survey. By request from COMIRB, changes were made to the letter for subsequent mailings, to highlight the contact information for ICF and Dr. Emily Burns, and deemphasize the contact information for COMIRB. Copies of the final advance letters (for Colorado and National, both in English and Spanish) are included as *Appendix A: Prenotification Letters*.

As shown in Table 2, ICF mailed 111,725 prenotification letters over the course of fielding. Each time a mailing was sent, two UC project staff and three ICF project staff also received letters.

**Table 2. Prenotification Letter Schedule**

<table>
<thead>
<tr>
<th>Sample Type</th>
<th>Date</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>October 12, 2012</td>
<td></td>
</tr>
<tr>
<td>Colorado</td>
<td>20,845</td>
<td>93,224</td>
</tr>
<tr>
<td>National</td>
<td>1,663</td>
<td>18,501</td>
</tr>
<tr>
<td>Total</td>
<td>22,508</td>
<td>111,725</td>
</tr>
<tr>
<td></td>
<td>November 9, 2012</td>
<td></td>
</tr>
<tr>
<td>Colorado</td>
<td>15,144</td>
<td></td>
</tr>
<tr>
<td>National</td>
<td>2,504</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>17,648</td>
<td></td>
</tr>
<tr>
<td></td>
<td>December 7, 2012</td>
<td></td>
</tr>
<tr>
<td>Colorado</td>
<td>57,235</td>
<td></td>
</tr>
<tr>
<td>National</td>
<td>14,334</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>71,569</td>
<td></td>
</tr>
</tbody>
</table>
IVR

ICF provided an inbound IVR which offered respondents the following options in English and Spanish:

- Learn more about the study and/or verify its legitimacy,
- Leave a message requesting removal from calling, set up an appointment time, or speak to a survey representative directly, or
- Speak directly to a survey representative either to ask questions or take the survey.

ICF call center supervisory staff triaged inbound calls, fielded questions, set-up call-backs, removed respondents from calling, and returned respondents’ messages throughout the fielding period. Voicemail messages were generally responded to within two hours. A copy of the final IVR script is attached in Appendix B: IVR Script.

QUESTIONNAIRE DESIGN

The 2012 TABS questionnaire was designed based on the 2008 questionnaire instrument. However, the 2012 TABS questionnaire had some new features. The following section describes the landline and cell phone survey instruments. The questionnaire, in its entirety, can be found in Appendix C: The Questionnaire. The TABS questionnaire consisted of several sections about smoking, health conditions, voting, and demographics. The order of the final instrument sections were as follows:

- Current Smoking Status,
- Recent Smoking History,
- Lifetime Smoking History,
- Other Tobacco Use,
- Smoking Restrictions,
- High Blood Pressure,
- High Cholesterol,
- Diabetes,
- Demographics,
- Health Care
- Policy or Voting and Social Trust,\(^2\) and
- Re-contact Information.

\(^2\) To reduce survey length and respondent burden, Colorado residents were randomly assigned to either the Policy Section or the Voting and Social Trust Section.
Second Selected Respondents Selection Process and Instrument Design

A key change from the 2008 questionnaire was a modification made to the landline screener to enable interviewers to start with either selected respondent. The 2008 version required that the first selected respondent complete their interview before the second selected respondent could begin their interview. The following sections describe the process of identifying and selecting a second respondent and how the instrument was designed to accommodate this process.

Second Respondent Selection Process

Households in both the Colorado and National landline sample went through a unique, TABS-specific selection process:

1. Initial household respondents were asked how many adults lived in the household; if more than one adult lived in the household, questions were asked about each adult’s race and smoking status.
2. The first respondent was randomly selected from the pool of all adults in the household, regardless of their race or smoker status. Thus, the person responding to the survey need not be the same as the person who completed the household screener.
3. If, in the remaining pool of adults, there was a smoker, African American, or Hispanic, then a second respondent was chosen. The selection process for the second respondent was as follows:
   a. If one of the adults was a smoker, that respondent was selected;
   b. If there was no smoker, but there was an African American adult, the African American adult was selected;
   c. If there was no smoker and no adult African American, but there was a Hispanic adult, the Hispanic adult was selected.

Instrument Design

The 2008 TABS necessitated that the first selected respondent had to complete the interview before the second selected respondent could start. This created difficulties since the first selected respondent was not often available to complete the survey at the time of first contact. Thus, as stated above, the 2012 instrument design allowed either the first or second selected respondent to complete the survey first; additionally, the first or second selected respondent did not have to complete the interview before the other respondent could be interviewed.

To execute this design, the program was split into three instruments:

- The alpha study was the primary study where respondent selection occurred. Either selected respondent could complete the survey in the alpha study.
- The beta study was a secondary instrument that was used only on the day that two selected respondents were initially selected for interviewing. This instrument did not contain the full screener; it started in the Current Smoking Status module.
The *charlie* study was the third study used the day after two respondents had been selected. This third study was needed to accurately manage the two records after the first day two individuals had been identified. Thus, in overnight processing, records with two selected respondents were moved to the *charlie* study. Since the *charlie* study was not used until after two selected respondents had been chosen, it did not contain screener questions and, like the beta study, started in the Current Smoking Status module.

At question A14a, interviewers told the respondent on the phone who the two selected respondents were and asked if one of them was available. Based on that response, the instrument assigned a unique master ID to each selected respondent. If both selected respondents were available, the interviewer could pull up each record in a separate study and conduct both interviews in one phone call. Conversely, if one respondent was available, but another was not, the interviewer could record a scheduled callback when the other respondent was available.

Three instruments were created so that the first and second selected respondents could be managed separately. This allowed ICF to record separate dispositions for the first and second respondent and to reduce the total number of attempts made on each respondent. As described further in the protocol section, landline households typically followed a 15-attempt protocol. However, when two respondents were selected and the record was split in two unique records, each respondent received only eight attempts; this reduced respondent burden. Interviewer training focused heavily on the design elements of the landline screener. Interviewer training is described further in the section titled *Interviewer Training*, starting on page 19.

**Health Modules**

In Section B (immediately before questions about cigarette smoking), respondents reported if they had ever been told they have one of three health conditions: high cholesterol, high blood pressure, or diabetes. A follow-up question asked respondents if their cholesterol, blood pressure, and/or blood sugar was normal, higher than normal, or lower than normal. Later in the survey (Section L) separate modules for each health condition were presented. *Table 3* shows the number of completed surveys, and average interview length of each module.

The modules were assigned based on certain criteria, including expected incidence in the population. Specifically, if a respondent had:

- Three conditions (high blood pressure, high cholesterol, and diabetes): the respondent was always asked the diabetes module, and then was randomly assigned to *either* the high blood pressure or high cholesterol module;
- Two conditions: the respondent was always asked about both;
- One condition: the respondent completed just that module.
Table 3. Number Completions and Average Length of Health Modules

<table>
<thead>
<tr>
<th>Module</th>
<th>Number of Completes</th>
<th>Average Length</th>
</tr>
</thead>
<tbody>
<tr>
<td>High blood pressure</td>
<td>5,513</td>
<td>4.58 minutes</td>
</tr>
<tr>
<td>High cholesterol</td>
<td>5,175</td>
<td>2.62 minutes</td>
</tr>
<tr>
<td>Diabetes</td>
<td>1,856</td>
<td>5.80 minutes</td>
</tr>
</tbody>
</table>

The high blood pressure module averaged two-and-a-half minutes and was completed by 5,513 respondents. The module contained 23 questions that covered the following topics:

- When the respondent was diagnosed
- Medications taken in the past 12 months
- Current use of medications
- How often they measure their blood pressure at home
- Behaviors to lower their blood pressure (changing eating habits, cutting down on salt, cutting down on alcoholic drinks, and exercising)
- Perceived level of confidence to control their blood pressure
- Participation in an educational class
- A series of questions about their medication to ascertain if they understand their HCP’s instructions, feel confident the medicines will help, have someone in the health field to call with questions, forget or find it inconvenient to take the medicine, worry about the cost, etc.
- A series of questions to ascertain if they’ve skipped or stopped taking the medication because they didn’t think it was working, it made them feel bad, taking more or less than prescribed, or because they were concerned about the cost.

The high cholesterol module averaged four-and-a-half minutes in length and was completed by 5,175 respondents. The module contained 19 questions that covered the following topics:

- Medications taken in the past 12 months
- Current use of medications
- How often they measure their cholesterol at home
- Behaviors to lower their cholesterol (changing eating habits and exercising)
- Perceived level of confidence to control their cholesterol
- Participation in an educational class
- A series of questions about their medication to ascertain if they understand their health care provider’s (HCP) instructions, feel confident the medicines will help, have someone in the health field to call with questions, forget or find it inconvenient to take the medicine, worry about the cost, etc.
- A series of questions to ascertain if they’ve skipped or stopped taking the medication because they didn’t think it was working, it made them feel bad, taking more or less than prescribed, or because they were concerned about the cost.
The diabetes module averaged nearly six minutes and was completed by 1,856 respondents. The module contained 32 questions that covered the following topics:

- When the respondent was diagnosed
- Type of diabetes
- Medications taken in the past 12 months
- Current use of medications
- Exams to monitor diabetes
- Behaviors to manage their diabetes (taking aspirin, meeting with a diabetes educator, changing eating habits, exercising)
- Frequency of checking blood sugar levels
- Knowledge and use of a diabetes case manager
- Perceived level of confidence to control diabetes
- Participation in an educational class
- A series of questions about their medication to ascertain if they understand their HCP’s instructions, feel confident the medicines will help, have someone in the health field to call with questions, forget or find it inconvenient to take the medicine, worry about the cost, etc.
- A series of questions to ascertain if they’ve skipped or stopped taking the medication because they didn’t think it was working, it made them feel bad, taking more or less than prescribed, or because they were concerned about the cost.

Placement of Income Question

At the start of fielding, respondents were randomly assigned to receive the income question in the screener or in the demographics section towards the end of the survey. This was done to test whether respondents were refusing to participate in the survey when asked income in the screener. About a third of the way through fielding, the refusal rates showed no difference between respondents that were asked income in the screener and respondents that were asked income in the demographics section. Therefore, the sampling strategy was revised and all respondents were asked income in the beginning of the survey to ensure this information was captured for all partially completed interviews, and to reduce the potential number of respondents for whom income needed to be imputed during the weighting process.

National Differences

The national survey instrument was slightly different than the instrument used for Colorado residents. National respondents received state-specific QuitLine questions, which were modified to insert their state’s name in the survey question. Additionally, national respondents were not asked:

- Their county of residence;
- Questions in the Voting Module, which contained items only appropriate for Colorado residents;
• To provide re-contact information, as the UC was only interested in including Colorado residents in future studies.

Modifications Made After the Pretest

After the pretest, the UC requested several changes to the instrument. The key change, already discussed, was the need to modify the second selected respondent functionality to ensure that each person could receive a disposition and be tracked individually (described in a previous section). Other changes included text changes, answer option changes for consistency across questions, skip logic updates, and reordered questions or question blocks (e.g., moving the demographic section to earlier in the questionnaire). The table below highlights key changes made after the pretest on October 1, 2012.

Table 4. Summary of Modifications Made after the Pretest

<table>
<thead>
<tr>
<th>Question</th>
<th>Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>WTYR (G19)</td>
<td>Added “show” command to display respondent’s current weight so that when WTYR was asked (what respondent weighed a year ago), interviewers could enter the accurate, current weight of the respondent if the respondent said “same as now” or “about the same as now.”</td>
</tr>
<tr>
<td>WALK (G25)</td>
<td>Changed question text to &quot;Now I’m going to ask about your time walking. Please include any type of walking, whether it is for transportation, fun, relaxation, exercise, or walking a dog. During the past 7 days, how many times did you walk for at least 10 minutes for any of these reasons? &quot;. A follow-up question was added if respondents had walked in the past week to capture the average amount of time each walk took.</td>
</tr>
<tr>
<td>H7e</td>
<td>Fixed a typo on &quot;two-packs&quot;</td>
</tr>
<tr>
<td>SEX (J6)</td>
<td>Moved interviewer note &quot;INTERVIEWER: ASK ONLY IF NECESSARY&quot; to the top of the screen.</td>
</tr>
<tr>
<td>L8 Series - BPMEDA, BPMEDB, BPMEDC, BPMEDD, BPMEDF, BPMEDG, BMEDH, BPMEDI</td>
<td>Embedded &quot;blood pressure medicine&quot; into the text of the question.</td>
</tr>
<tr>
<td>M6 Series - CHMEDA, CHMEDB, CHMEDC, CHMEDD, CHMEDF, CHMEDG, CHMEDH, CHMEDI</td>
<td>Embedded &quot;cholesterol medicine&quot; into the text of the question.</td>
</tr>
<tr>
<td>Question</td>
<td>Change</td>
</tr>
<tr>
<td>-------------------------</td>
<td>------------------------------------------------------------------------</td>
</tr>
<tr>
<td><strong>N15 Series - DIMEDA, DIMEDB, DIMEDC, DIMEDD, DIMEDE, DIMEDF, DIMEDG, DIMEDH, DIMEDI</strong></td>
<td>Embedded &quot;diabetes medication&quot; into the text of the question</td>
</tr>
<tr>
<td><strong>B26a2_01 thru B26a2_09</strong></td>
<td>Likert scales were modified to be consistent with other survey questions. Modified answer options: 1. Strongly Agree 2. Somewhat Agree 3. Neither Agree nor Disagree 4. Somewhat Disagree 5. Strongly Disagree</td>
</tr>
<tr>
<td><strong>B26a3_01 thru B26a3_07</strong></td>
<td>Likert scales were modified to be consistent with other survey questions. Modified answer options: 1. Strongly Agree 2. Somewhat Agree 3. Neither Agree nor Disagree 4. Somewhat Disagree 5. Strongly Disagree</td>
</tr>
<tr>
<td><strong>L8 Series - BPMEDA, BPMEDB, BPMEDC, BPMEDD, BPMEDE, BPMEDF, BPMEDG, BMEDH, BPMEDI</strong></td>
<td>Likert scales were modified to be consistent with other survey questions. Modified answer options: 1. Strongly Agree 2. Somewhat Agree 3. Neither Agree nor Disagree 4. Somewhat Disagree 5. Strongly Disagree</td>
</tr>
<tr>
<td><strong>M6 Series - CHMEDA, CHMEDB, CHMEDC, CHMEDD, CHMEDE, CHMEDF, CHMEDG, CHMEDH, CHMEDI</strong></td>
<td>Likert scales were modified to be consistent with other survey questions. Modified answer options: 1. Strongly Agree 2. Somewhat Agree 3. Neither Agree nor Disagree 4. Somewhat Disagree 5. Strongly Disagree</td>
</tr>
<tr>
<td><strong>N15 Series - DIMEDA, DIMEDB, DIMEDC, DIMEDD, DIMEDE, DIMEDF, DIMEDG, DIMEDH, DIMEDI</strong></td>
<td>Likert scales were modified to be consistent with other survey questions. Modified answer options: 1. Strongly Agree 2. Somewhat Agree 3. Neither Agree nor Disagree 4. Somewhat Disagree 5. Strongly Disagree</td>
</tr>
<tr>
<td><strong>INTRNET (J20)</strong></td>
<td>Removed the phrase &quot;including a wireless Internet connection&quot;</td>
</tr>
</tbody>
</table>
DATA COLLECTION

The following sections describe the Computer-assisted Telephone Interviewing (CATI) methodology that was implemented for TABS data collection. Included in this section is information about the fielding period, including observed holidays, sample loads, and average interview lengths. ICF conducted 15,005 interviews in the state of Colorado; 10,798 via landline and 4,207 via cell. We also collected a nationally representative sample of 3,230 residents; 2,314 via landline and 916 via cell. Data were collected between October 1, 2012 and February 11, 2013.

Fielding Period and Completes

The TABS was fielded in three waves, plus one additional wave of cell phone sample to make up for deficits in the number of surveys completed by African American Colorado residents. At the onset of each wave, fresh sample was loaded. Records in that wave were then dialed to protocol, so that they received a final disposition or were dialed the maximum number of times specified (see the section titled Dialing Protocol on page 15).
Data collection began with a pretest from October 1 through October 3, 2012; 135 interviews were collected during the pretest. After the pretest, the UC requested several changes to the instrument, including modifications to the second selected design. Consequently, data collection did not resume until October 12, 2012 with the cell phone instrument. Work was still being done on the landline instrument, which started fielding again on October 17, 2012.

Data collection was initially set to conclude on December 31, 2012. However, the last wave of landline sample was released on December 2. As discussed in more detail in a later section, each landline record required a maximum of 15 attempts. This attempt protocol is designed to increase response rates by allowing an adequate opportunity for each household to be reached at a convenient time and to honor specific callback appointments. Additionally, spreading the dialing attempts over a longer time allows for a “cooling off” period between soft refusals and minimizes respondent complaints (which can result if too many attempts are made in too short a period of time). Also, it is important in a protocol study that all records are treated identically. Ending data collection earlier than January 31 would have resulted in some records receiving differential treatment compared to records dialed earlier in the study (e.g., a reduced number of days between a soft refusal and a callback). Thus, the UC allowed data collection to continue through January 31, 2013.

On January 16, 2013, a final wave of cell sample to target minority completions was released, resulting in the need to extend data collection again. The UC allowed ICF to use $25,000 of the $119,000 set aside for incentives to collect these data. Cell phone records require only six attempts to reach protocol; thus, data collection was extended for another month and concluded on February 11, 2013.

In total, 18,235 interviews were conducted with Coloradans and a nationally representative sample. Respondents who answered question E1, but did not complete the survey, were considered partial completes. Partial completes accounted for 8% of the overall number of completes. The number of completed (and partial) interviews is presented in Table 5. The TABS survey length varied slightly by mode and sample type. The average interview lengths are shown in Table 6.

### Table 5. Completed and Partial Interviews

<table>
<thead>
<tr>
<th>Sample Type</th>
<th>Landline</th>
<th>Cell</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Completes</td>
<td>Partials</td>
</tr>
<tr>
<td>Colorado</td>
<td>10026</td>
<td>772</td>
</tr>
<tr>
<td>National</td>
<td>2076</td>
<td>238</td>
</tr>
</tbody>
</table>

### Table 6. Average Interview Length in Minutes

<table>
<thead>
<tr>
<th>Sample Group</th>
<th>Interview Length</th>
</tr>
</thead>
<tbody>
<tr>
<td>Colorado Landline</td>
<td>22.90</td>
</tr>
<tr>
<td>Colorado Cell</td>
<td>21.49</td>
</tr>
<tr>
<td>National Landline</td>
<td>22.72</td>
</tr>
<tr>
<td>National Cell</td>
<td>21.15</td>
</tr>
<tr>
<td>Overall</td>
<td>22.47</td>
</tr>
</tbody>
</table>
The following holiday schedule was observed:

- Christmas Eve – Calling ended @ 5pm EST
- Christmas Day – Closed
- New Year’s Eve – Calling ended @ 6pm Respondent Time
- New Year’s Day – Open for normal calling hours

Sample Release

The sample loads are shown in Table 7 (landline) and Table 8 (cell). Landline sample was loaded in two parts. Unlisted sample was dialed on the day the sample was loaded. Listed sample was dialed approximately three to four days after the prenotification letters were sent to respondents.

<table>
<thead>
<tr>
<th>Table 7. Landline Sample Loads</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sample Type</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Colorado</td>
</tr>
<tr>
<td>National</td>
</tr>
<tr>
<td>Total</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Table 8. Cell Phone Sample Loads</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sample Type</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Colorado</td>
</tr>
<tr>
<td>National</td>
</tr>
<tr>
<td>Total</td>
</tr>
</tbody>
</table>

Dialing Protocol

The TABS dialing protocol stipulated that a certain number of attempts had to be made during certain parts of the day (or dayparts). These calling protocols minimize bias (such as only calling people that are available in the evenings) and maximize completeness (the effort designed to reach every eligible respondent).
Landline Dialing Protocol

The landline version followed the standard ATS and BRFSS CDC protocols. Each record in the sample received a terminal disposition or 15 attempts per household. There were three calling occasions: Weekday (9–5), Weekday Evening (5–9), and Weekend (10–9). For household contacts, the 15 attempts per household were called over the following three day parts:

- Monday – Friday: 9:00 a.m. – 5:00 p.m.: three attempts,
- Monday – Friday: 5:00 p.m. – 9:00 p.m.: three attempts,
- Saturday (10:00 a.m. – 9:00 p.m.) & Sunday (10:00 a.m. – 9:00 p.m.): three attempts, and
- Six additional attempts were made during all three dayparts. The remaining attempts were at any time.

If two respondents were selected in a household, the records were moved to the charlie study and received a maximum of 8 attempts over the following three day parts:

- Monday – Friday: 9:00 a.m. – 5:00 p.m.: two attempts,
- Monday – Friday: 5:00 p.m. – 9:00 p.m.: two attempts,
- Saturday (10:00 a.m. – 9:00 p.m.) & Sunday (10:00 a.m. – 9:00 p.m.): two attempts, and
- Two additional attempts were made during all three dayparts.

Cell Phone Dialing Protocol

The cell phone version utilized a modified protocol that has been used in other BRFSS and ATS cell phone studies. This modified approach is used for many cell telephone studies because cell users tend to be more accessible. They often have their cell phones with them the majority of the time, so reaching cell phone users within six attempts is attainable. Adding more attempts does not necessarily mean an increase in the response rate. A final disposition was attained when:

- The respondent completed the interview;
- The telephone number was found to be invalid;
- The record reached six attempts distributed among three different day-parts; or
- The respondent gave a final refusal.

Six attempts per cell phone were made to each respondent over during three different day-parts:

- Monday – Friday: 9:00 a.m. – 5:00 p.m.: two attempts,
- Monday – Friday: 5:00 p.m. – 9:00 p.m.: two attempts, and
- Saturday (10:00 a.m. – 9:00 p.m.) & Sunday (10:00 a.m. – 9:00 p.m.): two attempts.
Contacting Respondents

The following protocols were followed when contacting households and potential respondents.

Answering Machine Messages: Messages were left on the first and fourth attempt resulting in an answering machine disposition. On these attempts, interviewers were prompted to read the following message:

This is {INTERVIEWER'S NAME} and I’m conducting an important health study for the UC of Colorado, Denver. This study will interview /IF COLORADO SAMPLE INSERT “13,000 adults in Colorado” IF NATIONAL SAMPLE INSERT “3,000 adults nationally”/ about their health. Your participation is very important. Please call us toll free at 866-784-7102 to complete a brief interview, or arrange a convenient time for us to contact you. Thank you.

No Answers: If a call to a sampled telephone number was not answered, the number was repeatedly called at different times, during day-time and evening hours (9 a.m. to 9 p.m. Monday through Friday; 10 a.m. to 9 p.m. Saturday and Sundays), on different days of the week, in a pattern designed to maximize the likelihood of contact with a minimum number of calls. At least 15 contact attempts for the landline sample, and six attempts for the cell phone sample, were made to reach a sampled number.

Rings per Attempt: The telephone rang a minimum of five times on each attempt made on a record.

Busy Lines: Busy lines were called back at least twice at 10-minute intervals. If the line was still busy after the third attempt, the number was assigned a “busy” disposition and called during the next shift.

Respondent Selection: Once a household was contacted, an adult was selected for participation in the study. No interview was conducted if:

1) The adult(s) was:
   • Unavailable during the survey period (the entire TABS fielding period),
   • Unable or unwilling to participate, or
   • Did not speak English or Spanish well enough to be interviewed.
2) A randomly sampled number yielded:
   • A business,
   • An institution,
   • Group quarters, or
   • Other strictly non-residential spaces
3) The number was an occupant’s second residence/vacation home (which the respondent did not consider the primary place of residence)

Language of Interviewing: Interviewing was conducted in English and Spanish only. When a record initially received a language barrier disposition by an interviewer, the record was moved to a special study that only Spanish-speaking interviewers could dial. If the record received a second language barrier disposition after being called by a bilingual interviewer, the record was removed from dialing.
Converting Initial Refusals – Landline: Protocol for the 2012 TABS followed a modified Behavioral Risk Factor Surveillance System (BRFSS) refusal protocol. Refusals were not distinguished between a selected respondent refusal versus a non-selected respondent refusal, but rather as “soft” or “hard” refusals, as defined below. Soft refusals were moved to a special refusal conversion study, where they were attempted again; hard refusals were immediately removed from dialing.

Interviewers were trained to disposition a record as a soft refusal if the respondent:

- Hung up after the name of the client had been read;
- Gave a refusal statement such as “no thanks”; or
- Stated it was “not a good time” but when prompted for better time, would not provide one.

A record was considered to be a hard refusal if the respondent:

- Was angry and/or raised his or her voice;
- Persistently repeated statements such as “don’t call me back, don’t call me back;”
- Claimed he or she hated surveys or the government; or
- Threatened to contact state, UC, or federal agencies.

Once a household or individual initially refused participation, specially trained refusal conversion interviewers made a second contact to encourage participation in the survey. These calls were typically not placed until a minimum of 48 hours from the initial refusal had passed.

Because of the contact information for ICF and the UC provided on the prenotification letters, potential respondents could indicate their refusal to participate in the study in advance of being dialed. Calls to ICF were handled through the IVR by supervisory staff. Calls to the UC were tracked by their project manager and then provided in a password protected document emailed to ICF. ICF project managers then removed the record from calling.

Converting Initial Refusals – Cell Phone: The cell phone refusal conversion protocol differed from the landline survey protocol. Interviewers were trained to attempt refusal conversion with soft and hard refusals at the point of contact. If refusal conversion was not successful, the record was removed from calling.

Contacting Cell Phone Respondents: Dialing on cell phone sample required additional interviewer training. Interviewers were trained to ensure that a respondent was in a safe situation to take a call on his or her cell phone. If a respondent was driving or indicated that the call came at an inconvenient time, a call-back was scheduled. Cell phones also pose some challenges for interviewers since some cell phone carriers offer subscribers the option to play music instead of a traditional ring. Interviewers were trained to anticipate these differences when dialing on cell phone sample.
INTERVIEWER TRAINING

The following section describes interviewer training, including ICF basic interviewer training, TABS project-specific training, and TABS training tools.

Training Manual and FAQ Development

ICF project management staff created the TABS training manual and FAQ sheet in collaboration with UC staff for interviewers. The training manual, found in Appendix D: Interviewer Training Materials contains information about the survey’s background, purpose and scope, population, dialing protocols, and other relevant project information. The FAQ sheet contains preemptive refusal aversion statements designed to address respondent concerns, as well as responses to more general respondent questions, such as how phone numbers are selected. The technical training manual contains step-by-step instructions, as well as pictures of the instrument, on how to handle two-respondent-selected households.

Training

Interviewer training included two phases: basic training and TABS-specific training.

Basic Training

TABS interviewers, as is standard for all ICF interviewers, participated in a two-day general interviewer training upon hire, prior to conducting interviews on any survey. Basic interviewer training includes an overview of the following:

- Survey research techniques,
- Telephone surveys,
- The role of the interviewer in survey research,
- Types of samples,
- Types of respondents,
- Determining household and respondent eligibility, and
- An introduction to ICF’s CATI system via practice interviews.

During basic training, interviewers also learn techniques such as: reading questions, entering responses, probing for responses, using appropriate feedback, and avoiding refusals. Interviewers are taught techniques for handling difficult respondents, probing for answers in challenging situations, and converting refusals. At the conclusion of each day of training, new interviewers are given a test before being able to continue with the training.

TABS-Specific Training

TABS interviewers were selected from ICF’s pool of existing interviewers and specifically chosen for their experience on ATS studies (such as the National ATS) and health-related surveys (such as the Behavioral Risk Factor Surveillance Surveys). ICF project management staff conducted an initial interviewer training
on October 1, 2012 on-site in Martinsville, Virginia. Emily Burns and Carol-Ann DeMaio Goheen from the UC, and Shelley Osborn from ICF, attended this all day training.

Training topics included:

- Survey background and context, including survey purpose and scope;
- Overview of survey population, sample, and sample design;
- Dialing protocol, response rates, and achieving high response;
- Review of survey characteristics, such as the expected survey length, methodology, use of caller ID and Interactive Voice Response (IVR) help desk information;
- Extensive review of the instrument and second selected respondent functionality;
- Review of the questionnaires, including topics covered by the survey with a focus on challenging and unique questions, differences between landline and cell phone questionnaire instruments, and the purpose/context of key questions;
- Review of FAQ and how to respond to common respondent questions; and
- Discussion of refusal protocol, and refusal aversion and conversion techniques.

Emily, Carol-Ann, and Shelley all participated in training the agents. There was an extensive question and answer period during this training, as well as an extensive debrief with interviewers after their live calling at the end of the evening.

Prior to dialing on TABS, interviewers conducted mock interviews using the CATI system to gain project-specific experience with questionnaire flow, data entry mechanics, and terminology. Additionally, interviewers took a test to ensure they were knowledgeable of TABS-specific protocols and methodology. The interviewer quiz with answer key is also in Appendix D: Interviewer Training Materials.

Ongoing Training

During fielding, ICF’s quality assurance (QA) staff and project management staff evaluated all interviewers on the project via monitoring sessions. Such monitoring sessions included both past recorded interviews and live interviews in-progress. QA staff and call center supervisors coached interviewers on an individual basis based on feedback from the monitoring sessions. If, after coaching, an interviewer’s performance did not improve, he or she was removed from working on the study.

QUALITY ASSURANCE PROTOCOLS

ICF implements stringent quality assurance protocols to ensure the highest quality data for our clients. This section covers quality assurances for data collection (including monitoring by project managers, QA specialists, and UC staff).
Data Collection Quality Assurance

For the 2012 TABS, ICF followed stringent quality assurance steps to ensure the instrument, interview quality, and data processing meet client expectations. Table 9, shown below, outlines the quality control measures ICF employed in an effort to eliminate errors and standardize procedures.

Table 9. ICF Quality Control Measures

<table>
<thead>
<tr>
<th>TASK</th>
<th>Telephone Data Collection Quality Control Measures</th>
</tr>
</thead>
<tbody>
<tr>
<td>CATI Program Testing</td>
<td>Test each response to each question, and each path through the survey</td>
</tr>
<tr>
<td></td>
<td>Review frequencies from randomly-generated data to ensure that the program is organizing data properly and recording values according to the survey specification</td>
</tr>
<tr>
<td></td>
<td>Develop skip-check program to check data against defined conditions specified in the Microsoft Word version of the questionnaire</td>
</tr>
<tr>
<td></td>
<td>Provide the UC with an electronic test version of the programmed survey</td>
</tr>
<tr>
<td>CATI Pre-test</td>
<td>Pre-test prior to full data collection</td>
</tr>
<tr>
<td>Interviewer Training</td>
<td>Dedicated team of TABS interviewers</td>
</tr>
<tr>
<td></td>
<td>General 12-hour training</td>
</tr>
<tr>
<td></td>
<td>TABS training led by ICF project management and UC staff, subsequent trainings led by Call Center Supervisory staff</td>
</tr>
<tr>
<td>CATI Quality Assurance</td>
<td>Call center monitors at least 10 percent of all interviews (10% sample)</td>
</tr>
<tr>
<td></td>
<td>Professional project staff monitor TABS interviews</td>
</tr>
<tr>
<td></td>
<td>Assign supervisors to manage a team of no more than 10 interviewers</td>
</tr>
<tr>
<td></td>
<td>Review call center shift reports and internal project tracking reports daily</td>
</tr>
<tr>
<td></td>
<td>Review of data alerts indicating something went awry and fixing any issues</td>
</tr>
<tr>
<td>Preparation of Data Files</td>
<td>Clean and back-code open-ended responses as specified by the UC</td>
</tr>
<tr>
<td></td>
<td>Produce frequency tabulations of every question and variable to detect missing data or errors in skip patterns</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>TASK</th>
<th>Weighting</th>
</tr>
</thead>
<tbody>
<tr>
<td>Weighting</td>
<td>Independent review of the weighting code by a second sampling statistician</td>
</tr>
<tr>
<td></td>
<td>Check range and values of adjustments; evaluate selection probabilities</td>
</tr>
<tr>
<td></td>
<td>Independent review of definitions of variables used in weighting</td>
</tr>
</tbody>
</table>

Interviewer Monitoring

ICF monitors interviewer performance through supervisors and quality assurance (QA) assistants, as well as with formal and informal performance evaluations. The quality assurance team for this survey included the project manager, data collection manager, supervisors, and QA assistants. Monitoring was primarily conducted by ICF’s QA assistants. Project managers also monitored live interviews and listened to recordings to assess interviewer performance. QA assistants monitored at least 10 percent of the interviews by tapping into interviewers’ telephone lines and using the CATI system’s monitoring module to follow the course of the interview on a computer screen. Interviewers were scored on several measures of performance designed to reinforce proper interviewing protocol:
• Verbatim response entry;
• Dispositioning calls, leaving messages, and scheduling call-backs;
• Reading scales properly;
• Knowing the mechanics of CfMC and the TABS, including second selected respondent procedures and instrument design;
• Reading multiple response lists;
• Reading the introduction and persuading respondents to complete interviews;
• Pace of reading the survey;
• Clarity and/or tone of voice while interviewing;
• Probing and/or clarifying responses that are not clear;
• Keeping control of the interview;
• Converting refusals on specific questions;
• Overall professionalism;
• Being neutral while interviewing, not leading respondent; and
• Overall dialing habits.

QA staff also assured that interviewers:

• Coded incomplete interviews properly;
• Left useful messages for the next interviewer; and
• Made every attempt to complete an interview on every contact.

After monitoring, staff met with interviewers to review their performance and provide additional coaching. If, after coaching, interviewers did not improve, they were promptly removed from the project.

**Monitoring by UC Staff**

ICF’s monitoring system enabled UC staff to monitor actual interviews in-progress remotely from their offices in Colorado. UC staff monitored regularly over various day-parts throughout fielding, but concentrated most of their monitoring on weekday evening shifts. Through the first half of data collection, UC staff monitored approximately once a week, with the frequency tapering off as fielding wrapped up. Additionally, ICF provided the UC with a variety of recordings so that they could listen to specific scenarios (e.g., refusals, answer machine messages, completes, partial completes, scheduled callbacks, etc.).

UC staff were encouraged to ask questions and provide feedback throughout each monitoring session, and were asked to rate the monitoring at the end of each session. ICF Project Management received reports on each monitoring session from QA staff. Further, ICF Project Management and UC staff met periodically via phone to discuss monitoring sessions, and identify areas for potential interviewer retraining/skill refreshers.
ISSUES WITH SURVEY IMPLEMENTATION

Timeline Delays

The pretest was conducted on-site at the Martinsville, Virginia Operations Center on October 1, 2012. At the pretest, when UC staff were reviewing the functionality of the process for tracking interim and final dispositions for the first and second selected respondent, a limitation was identified wherein the dispositions were assigned to each household rather than to each respondent. Thus the UC requested that ICF change the instrument to allow for either the first (selected randomly) or second respondent (selected based on the presence of a smoker, African-American, or Hispanic/Latino resident) to be interviewed at the time of first contact and for each individual to be tracked independent of the other. Programming changes were made over the next ten days, and all QA/QC procedures were completed. Interviewing began on October 12, 2012 with the cell phone instrument. The landline instrument fielded again on October 17, 2012.

The interim data delivery was delayed until Tuesday, October 30 (scheduled for October 15). For missing this deadline, ICF offered to deliver a second interim dataset with two-week’s notice. The UC agreed to this change, and waited approximately six weeks so that they could obtain an interim weighted dataset instead of receiving another dataset containing only the raw, unweighted data. This also gave the UC an opportunity to request changes in how the data were processed.

A third delay concerns response rates, particularly response rates for second selected and household respondents on the landline study. There was some initial delay in calculating response rates because records had not yet been brought to protocol. Because response rates are calculated based on the probability of a record being an eligible household, any attempt can move a record from unknown to probable, or from probable to definite, etc. The result is that response rate can swing from day-to-day, so it is ideal to wait for records to be completely resolved (brought to protocol) before calculating the responses rates. However, even after records were brought to protocol, there were delays in calculating the rates due in part to the extremely complicated nature of the study design of first selected, second selected, and household respondents. While ICF has other ways of measuring sample efficiency, such as Records per Completed interview (RPC), the delay in producing responses rates was regrettable.

Staff Changes

In September, Beth Tarallo, the project manager, announced that she was leaving ICF. Also that month, the lead statistician, Randy ZuWallack, announced that he was leaving ICF. Per the UC’s request, ICF created a Transition Plan that was written, revised, and then finalized September 26, 2012. The staffing plan identified key staff replacements, outlined the transition plan for reallocated tasks, and listed the level of effort and availability of staff taking on new roles and/or tasks for the 2012 TABS.

To summarize staff changes, Dr. Ronaldo Iachan, already a key team member on TABS, increased his hours to complete tasks originally assigned to Mr. ZuWallack. As initially planned, Dr. Iachan provided
leadership regarding the sampling and weighting design and provided QC oversight on these tasks. New
tasks included tracking sample and progress toward targets throughout fielding. He was also the main
point of contact with the UC related to sampling and weighting matters.

Dr. Shelley Osborn, originally the TABS Project Director, increased her hours to absorb tasks originally
assigned to Ms. Tarallo. To bring Dr. Osborn up to speed on all aspects of the project and impart
historical project knowledge, Dr. Osborn spent two weeks in Vermont with Ms. Tarallo prior to Ms.
Tarallo’s departure. Dr. Osborn also attended and helped lead the TABS interview training with the UC
in Martinsville, VA on October, 1, 2012. This allowed Dr. Osborn and UC staff to meet in person to
discuss project details and monitor the pretest together.

In December, 2012 Dr. Emily Burns left her position with the University of Colorado. She was replaced
by Dr. Kathy James, who had been with the UC for 16 years and has a background in epidemiology.

**Prenotification Letters**

The first set of prenotification letters was sent addressed to [FirstName] and [Lastname]. However, the
UC received a number of phone calls and messages indicating that the person to whom the letter was
addressed no longer lived there, or in some cases, was deceased. For the second mailing, the UC
requested that ICF address the letters to [Lastname] Household. However, a mail center error resulted
in the second mailing begin sent with the same format as the first.

All prenotification letters were sent with English on one side and Spanish on the other (see Appendix A).
However, the final mailing was inadvertently sent with Spanish facing “up,” which meant that recipients
saw the Spanish version of the letter first. This prompted several calls to the UC, and some of these
callers were quite upset. Dr. Osborn debriefed with the mail center to determine the source of the
problem. The previous two mailings were sent printed in English on the front and Spanish on the
reverse, as agreed to by ICF. It was agreed that for all future mailings on all projects, project managers
would specifically indicate which side of the letter was to face front.

**Hours and Completions**

Due to UC concerns about acquiring the number of specified interviews by the project end date, ICF
started tracking daily hours and completions beginning December 11, 2012. The Excel spreadsheet
tracked cumulative hours and cumulative completes/partials for the four studies (LL Colorado, LL
National, Cell Colorado, and Cell National) independently and combined. We also included the number
of completes needed to finish data collection by the project end date (initially by January 6 and later
revised to January 31, 2013 and then February 11, 2013).

**Spanish-Language Dialing**

In our proposal, ICF indicated that we would dial all Hispanic surname flagged landline sample first with
bilingual interviewers. The UC approved a temporary change to allow English-speaking agents to initially
dial the Hispanic/Latino surname sample. In a staffing plan (dated November 13, 2012), we agreed,
starting with that day’s shift, to dial new records flagged as Hispanic-surname with bilingual interviewers. A new process instituted that day was that bi-lingual interviewers began calling all Hispanic-flagged sample that had received an English language refusal to ensure that the refusal did not result from the household’s inability to speak English, or speak English well enough to participate. We continued having bi-lingual interviewers call records that received a language barrier disposition.

To clear up the backlog of potential Spanish-language records, and to help ensure that these types of records did not proliferate too much, the UC gave ICF permission on November 16, 2012 to subcontract with Opinion Search Incorporated (OSI) for Spanish language assistance. Founded in 1988, OSI is a market research firm located in Canada that specializes in data collection.

To ensure OSI agents were trained the same way and with the same attention to detail as the ICF interviewers, ICF call center management staff traveled to OSI’s Montreal location on multiple occasions to conduct technical and project training. OSI staff were remotely managed, assigned, and monitored by ICF supervisory staff; OSI’s supervisory staff provided support and relayed messages. Subsequent refreshers and additional staff training were handled by OSI training staff with ICF staff attending via phone to ensure all training was conducted in accordance with ICF policies and procedures and to answer any questions. Between mid-November and the end of December, 2012, OSI spent 885 dialing hours on TABS, yielding 407 completes as shown in the Table 10.

**Table 10. Completed Interviews Obtained by OSI**

<table>
<thead>
<tr>
<th>Type of Interview</th>
<th>English</th>
<th>Spanish</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>First Selected Complete</td>
<td>178</td>
<td>71</td>
<td>249</td>
</tr>
<tr>
<td>First Selected Partial Complete</td>
<td>22</td>
<td>22</td>
<td>44</td>
</tr>
<tr>
<td>Second Selected Complete</td>
<td>54</td>
<td>35</td>
<td>89</td>
</tr>
<tr>
<td>Second Selected Partial Complete</td>
<td>9</td>
<td>16</td>
<td>25</td>
</tr>
<tr>
<td>Total</td>
<td>263</td>
<td>144</td>
<td>407</td>
</tr>
</tbody>
</table>

**Additional African American Cell Records**

Despite increasing the cell allocation from approximately 11% in 2008 to 30% in 2012, oversampling African American respondents as part of the second selected protocol, and targeting high-density African American regions with landline sample in Colorado, completions were below expectations. Thus, in mid-January, we purchased additional cell sample to meet Arapahoe/Denver targets and increase African American completes in Colorado.

We identified ZIP codes in Denver and Arapahoe that had a greater (relative to other areas) proportion of African American residents. Dr. Iachan chose a threshold of 11% or more, so that the cumulative target population was a little over 30,000 in each county. The cumulative rate was 19% in Denver and 14% in Arapahoe; the coverage was about 60% in each county. To further target our dialing, we used only the sample that was matched to a ZIP code. We confirmed with Dr. Iachan that this did not pose a problem for weighting.
Before dialing this new sample, approximately 2.8% of completions in Colorado were with self-reported African American respondents. Between January 17 and the end of fielding, we increased the number of Colorado African American respondents from 378 to 508 (approximately 3.4% of CO respondents). However, this was below their population in the state (4.0% according to US Census 2010 data) and below the 600 self-identified African American respondents that each previous wave was able to achieve.

**Respondent Callbacks**

In early November, the UC reported that they were receiving complaints that scheduled appointments were being missed—sometimes several appointments for the same individual. The UC requested a report of missed callbacks at the system level to determine how callbacks were being honored. While being mindful that the overall number of calls was low compared to the data collection effort, anecdotal information concerned the UC as to the scope of the problem. While ICF was unable to produce such a report, we provided sufficient information to ensure the UC that the process was running smoothly for the majority of the people.

**DATA CLEANING AND CODING**

Final data processing is comprised of converting the raw telephone data into a user-friendly data file and formatting the data to the University’s specifications, including the review and coding of open-ended responses. This section describes these processes.

Telephone survey data were converted to SAS, per the University’s specifications. For the interim and final data deliveries, PM staff worked with the University to recode and/or rename variables to ensure they matched the 2008 survey data. Examples include:

- Renaming J9 to EDUC and J9OTH to J9_O to match 2008
- Including all refused and don’t know answers in one variable, along with the valid data
- Combining mutually exclusive variables that appeared in different places (such as income and landline/screener questions) into a single variable and using the alphabetical variable name provided by the client (e.g., INC for household income).

The next step was to review responses to open-ended questions. The data processing staff and project managers reviewed all open-ended data and corrected spelling or typographical errors. Additionally, project managers recoded answers that were inadvertently placed in an “other” category although a valid code was available. For example, “Marlboro Lights” in the other response was recoded to code 7=Marlboro on the question that asked what brand the respondent usually smokes. ICF and the University worked together to arrive on a coding scheme for race/ethnicity. This is presented below.
Coding of Race/Ethnicity

In conjunction with the UC, ICF developed a standardized method for coding the open-ended data for race/ethnicity. In general, the method for coding/back-coding was quite conservative. For instance, some terms can be both nationalities and “races” or ethnicities, such as “Indian” and “Spanish.” And Spanish is often used colloquially instead of “Hispanic.” Not knowing in these instances if the respondent meant they were from Spain, spoke Spanish, or were Hispanic, we left the code as “other.” As another example, unless “Indian” was accompanied by a tribe name, or the words “Native” or “American,” we could not determine if they were Native American or South Asian Indian so we left them in “other.” “East/South Asian” was coded as “Asian.” Specific guidelines for coding race/ethnicity are below.

Because race/ethnicity affects the decision to select a second respondent, recoding race/ethnicity may make it appear that ICF should have selected a second respondent and didn’t. At the time of the interview, the race/ethnicity was coded as “other,” which would not have triggered the program to select a second respondent.

We did not use nationality to infer race. So, we left responses like the below in other:

- American
- Caribbean
- Dutch
- Eastern European countries (e.g., Russia, Romanian, etc.)
- European/Euro American
- French
- German/German American
- Greek
- Irish
- Italian
- Jewish
- Middle eastern and countries (Egypt, Pakistan, Israel, etc.)
- Spanish/Spain/Spaniard
- Spanish American
- Spanish and [NATIONALITY]

However, the following countries/regions were back coded to Hispanic/Latino, per the UC’s request:

- Columbian
- Cuban
- Ecuadorian
- Mexican/Mexican American
- Panamanian
- Puerto Rican
These were also kept in other:

- All of the above
- Biracial (all instances of two races—e.g., Asian and White, Black and White, American Indian and White, Pacific Islander and White, etc.)
- Multiracial
- Mixed
- Multi-ethnic
- Multi-national

If someone responded with a race and a nationality, the race was coded, for example:

- Spanish and White
- Black and Japanese
- Native American and German

The above decision to code only the “race” when a race and nationality are reported is again a very conservative approach. Respondents are likely trying to indicate that they are bi- or multi-racial (and would therefore be left as “other”) when they respond they are “White and Chinese,” “Black/Japanese,” “Black/Korean,” “Black/Filipino,” etc. We coded the race in these instances, but not in instances when a respondent reported two races (e.g., “Black and White” or “Black and Asian”).

Because Hispanic/Latino was treated as a racial category for coding on the survey, all responses combining Hispanic/Latino with another race (e.g., Black, White) were also kept as other:

- Caucasian and H/L
- Half White/Half Latino
- Half White/Half Mexican
- Hispanic and AA

**Response Rates**

Response rates provide a measure of interviewing success. There are a number of ways to calculate survey response rates. ICF applied the American Association of Public Opinion Research (AAPOR) response rate formula for TABS. The response rate formula and calculation can be found in *Appendix E: Response Rate Calculations*. Response rates for the landline and cell phone surveys are presented in the tables below.

**Table 11. Landline Household Response Rates**

<table>
<thead>
<tr>
<th>Sample Type</th>
<th>Response Rate</th>
<th>Cooperation Rate</th>
<th>Refusal Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Colorado</td>
<td>59.42%</td>
<td>95.50%</td>
<td>0.55%</td>
</tr>
<tr>
<td>National</td>
<td>55.22%</td>
<td>94.39%</td>
<td>0.41%</td>
</tr>
<tr>
<td>Overall</td>
<td>58.44%</td>
<td>95.30%</td>
<td>0.51%</td>
</tr>
</tbody>
</table>
Table 12. Landline First Selected Response Rates

<table>
<thead>
<tr>
<th>Sample Type</th>
<th>Response Rate</th>
<th>Cooperation Rate</th>
<th>Refusal Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Colorado</td>
<td>56.82%</td>
<td>94.97%</td>
<td>0.57%</td>
</tr>
<tr>
<td>National</td>
<td>51.81%</td>
<td>93.56%</td>
<td>0.43%</td>
</tr>
<tr>
<td>Overall</td>
<td>55.70%</td>
<td>94.72%</td>
<td>0.53%</td>
</tr>
</tbody>
</table>

Table 13. Landline Second Selected Response Rates

<table>
<thead>
<tr>
<th>Sample Type</th>
<th>Response Rate</th>
<th>Cooperation Rate</th>
<th>Refusal Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Colorado</td>
<td>58.05%</td>
<td>98.52%</td>
<td>0.02%</td>
</tr>
<tr>
<td>National</td>
<td>51.26%</td>
<td>98.94%</td>
<td>0.01%</td>
</tr>
<tr>
<td>Overall</td>
<td>56.44%</td>
<td>98.60%</td>
<td>0.02%</td>
</tr>
</tbody>
</table>

Table 14. Cell Phone Response Rates Waves 1 through 4

<table>
<thead>
<tr>
<th>Sample Type</th>
<th>Response Rate</th>
<th>Cooperation Rate</th>
<th>Refusal Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Colorado</td>
<td>25.66%</td>
<td>62.00%</td>
<td>3.35%</td>
</tr>
<tr>
<td>National</td>
<td>19.62%</td>
<td>58.54%</td>
<td>2.54%</td>
</tr>
<tr>
<td>Overall</td>
<td>24.30%</td>
<td>61.36%</td>
<td>3.15%</td>
</tr>
</tbody>
</table>

Table 15. Cell Phone Response Rates Waves 1 through 3

<table>
<thead>
<tr>
<th>Sample Type</th>
<th>Response Rate</th>
<th>Cooperation Rate</th>
<th>Refusal Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Colorado</td>
<td>26.25%</td>
<td>61.77%</td>
<td>3.33%</td>
</tr>
<tr>
<td>National*</td>
<td>19.62%</td>
<td>58.54%</td>
<td>2.54%</td>
</tr>
<tr>
<td>Overall</td>
<td>24.67%</td>
<td>61.12%</td>
<td>3.12%</td>
</tr>
</tbody>
</table>

*Wave 4 did not include national sample, thus the rates are the same for national for waves 1 through 4 and for 1 through 3.

Table 16. Cell Phone Response Rates Wave 4

<table>
<thead>
<tr>
<th>Sample Type</th>
<th>Response Rate</th>
<th>Cooperation Rate</th>
<th>Refusal Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Colorado</td>
<td>15.54%</td>
<td>64.38%</td>
<td>3.55%</td>
</tr>
</tbody>
</table>

Response Rate Calculation Delays

ICF uses a proprietary SAS macro, the Milestone program, to calculate the response rates. The Milestone program combines respondent-provided eligibility data and call outcome dispositions to determine the most accurate disposition category for the record. For example, if a landline respondent gives a hard refusal at the survey introduction before any eligibility questions were answered, the Milestone program assigns a final disposition of 310, “Refused, landline but unknown if eligible,” which maps to the AAPOR category “Unknown Others.”

Due to the complexities of fielding TABS, the response rates took significantly longer to calculate than anticipated. One of the complexities was the number of studies ICF created to manage the sample. ICF managed the TABS sample with 30 CfMC studies for the following reasons:
• Alpha, beta, and charlie studies were used to manage the sample for first and second selected respondents as described in the section titled Questionnaire Design, above;
• Landline sample flagged as Hispanic surname, and sample with an initial language barrier, were put into separate Spanish-dialing studies to assign these records to Spanish-speaking interviewers (including those at OSI);
• Sample in high-density African American counties was put into a separate study so that specialized interviewers could dial on the study and increase the number of African American completes;
• National sample was stored in a different study than the Colorado sample so that ICF could easily target peak calling hours, use appropriate interviewer staff depending on the region, and for estimating purposes; and
• Cell sample was loaded into separate studies than the landline sample as the dialing protocols were different.

It is important to note that managing the sample this way did not affect respondents. However, combining the sample across these 30 studies proved to be difficult and time consuming as records moved between the studies based on dispositions and flags in the data.

The potential for having two selected respondents in one household further complicated calculating the response rates. At the household level, if two respondents were selected, dispositions were assigned by using the best disposition for that household. For example, if two respondents were selected, where one respondent never answered the phone and the second respondent completed, a complete disposition was assigned to the record. Parsing out the respondent-provided data, eligibility considerations, and dispositions in the Milestone program was challenging. Many records had to be reviewed by hand to determine the most appropriate disposition for the household.

### WEIGHTING

#### Overview

Weighting survey data serves at least three important purposes. First, it corrects for unequal probabilities of selection introduced during the sample design—including the dual frame sample of landline and cell users. Weighting also adjusts for differential non-response among elements of the survey population, reducing potential bias associated with non-response. Finally, weighting can correct for differences in demographic characteristics of the sample versus the population, reducing potential biases (coverage and non-response) in substantive estimates that may be associated with those demographics.

TABS is a dual frame survey including a landline (LL) sample and a cell sample. The survey allowed for distinguishing the following five categories of phone usage:

- Cell only
- Landline only
- Cell mostly
- LL mostly
- Dual use
Weighting for a dual frame design must ensure that the frames are combined so that the survey respondents accurately represent the population. The Venn diagram below displays three populations covered by the cell and landline sampling frames. Adults with a landline but no cell phone (A) must be reached through a landline telephone sample. Adults with a cell phone and no landline (C) must be reached through the cell phone sample. Adults with both a landline and a cell phone (B) can be reached through either of the frames. The population with no telephone (D) is not covered by either frame, but is only two percent of the population.

The weighting for the national sample followed the same steps implemented for the Colorado sample, except that trimming was not necessary at the national level. These steps, detailed in the sections that follow are:

- Computation of base weights as the reciprocal of selection probabilities, separately for the cell and landline sample components
- Combining the two samples using NHIS estimates of the shares of the two components
- Post-stratification of the totals (raking and trimming, if used) by counties or regions (CO only) and then gender, age groups, race/ethnicity, and education
  - The categories for each of the above were the same with the exception of age group where, unlike the Colorado sample, the younger categories did not need to be collapsed at the national level.

**Base Weights for the Two Frames**

This section describes how base weights are computed as the inverse of the probability of selecting the phone number. For the landline sample, these weights are adjusted for the within-household probability of selection and for non-response.

**Landline RDD**

For each stratum the probability that a telephone number is selected from the RDD frame is the number of selected telephone numbers (nL) from the RDD frame divided by the number of possible numbers on the frame (NL). The base weight for the telephone number selection is $w_1 = \frac{NL}{nL}$. *Appendix F: Frame Counts for Landline and Cell Frames* provides frame counts for the Landline and Cell phone frames in Colorado.
In Arapahoe and Denver, African American households were oversampled. Oversampling was implemented by constructing a low-density stratum and a high-density stratum. Telephone exchanges were classified as high (or low) density according to the estimated percentage of African American households.

In telephone surveys generally, households are selected with a probability proportional to the number of telephone lines in the household. To adjust for the unequal probabilities in households with more than one telephone line, the probabilities are multiplied by the number of telephone lines as recorded during the survey (Li).

We note at this point that this variable, like many other variables used in the weighting process, can have missing data. To enable the use of weighting variables with complete data, we used the imputation procedures described in Appendix G: Imputations for Weighting. The imputations summarized in that appendix will also apply to demographic variables used in post-stratification.

Within each household, up to two respondents were eligible for selection. In the first selection, any adult was eligible to be selected with probability inversely equal to the number of adults in the household as recorded during the survey (Ai).

In certain conditions, a second respondent was selected. These included:

1) Smokers in the household:
   a. If the household contained one smoker who was not selected in the first respondent selection, they were selected in the second selection.
   b. If the household contained more than one smoker, a smoker was selected with probability inversely equal to the number of smokers not selected in the first selection.

2) African American non-smoker in the household.
   a. If the household contained one African American non-smoker who was not selected in the first respondent selection, they were selected in the second selection.
   b. If the household contains more than one African American non-smoker, one was selected with probability inversely equal to the number of African American non-smokers not selected in the first selection.

3) Hispanic non-smoker in the household.
   a. If the household contained one Hispanic non-smoker who was not selected in the first respondent selection, they were selected in the second selection.
   b. If the household contains more than one Hispanic non-smoker, one was selected with probability inversely equal to the number of Hispanic non-smokers not selected in the first selection.

Please refer to Appendix H: Weighting Formulas for detailed information and formulas for these selection probabilities.
Cell Phone RDD

For each stratum (region) the probability that a cell phone number is selected from the RDD frame is the number of selected cell phone numbers \( (n_c) \) divided by the total number of cell phone numbers on the frame \( (N_c) \).

Cell users were selected with a probability proportionate to the number of cell phones they use. To adjust for the unequal probabilities for cell phone users with more than one cell phone, the probabilities were multiplied by the number of cell phones they use as recorded during the survey \( (C_i) \). The cell sample was supplemented with a targeted sample that oversampled specified ZIP Code areas, and rate centers, with high concentrations of African Americans. The cell sample weights integrated this supplement cell sample. Please refer to Appendix H: Weighting Formulas for detailed information and formulas for these selection probabilities.

Combining Landline and Cell Phone

The cell phone survey asks, “In addition to your cell phone, is there at least one telephone inside your home that is currently working and is not a cell phone? Do not include telephones only used for business or telephones only used for computers or fax machines.” Those who responded ‘yes’ are cell and landline adults, while those who responded ‘no’ are cell-only adults. Similarly, the landline survey asks, “In addition to your residential landline telephone, do you also use one or more cell phone numbers?” Those who answered ‘yes’ are cell and landline, while those who responded ‘no’ are landline only. Based on these questions, we classified respondents as:

- \( a_1 \): Landline respondents without a cell phone
- \( b_1 \): Landline respondents with a cell phone
- \( b_2 \): Cell phone respondents with a landline
- \( c_2 \): Cell phone respondents without a landline

After determining the telephone groups, each was independently weighted to benchmarks for the population they are meant to represent. This is done for two reasons: 1) dual-users are overrepresented since they are eligible in both samples, and 2) differential response rates between dual-users and cell-only respondents in the cell phone sample. The benchmark for the phone groups is the National Health Interview Survey (NHIS). The NHIS is an in-person household survey that collects information about cell phone and landline availability. It provides national estimates of the cell-only population, the landline-only population, and the dual-user population. For the dual-user ratio adjustment, respondents in the overlap were post-stratified into three categories: receive most calls on cell phone \( (b_{11}) \), receive most calls on landline \( (b_{13}) \), and receive calls on both regularly \( (b_{12}) \) using the notation for the landline sample component for simplicity. For the cell sample, these three categories are \( b_{21}, b_{22}, \) and \( b_{23} \), as described in Appendix H.
The NHIS estimates of phone status, shown in Table 17, were based on state level modeling of data collected from 2010-2011.  

**Table 17. NHIS Phone Status Estimates**

<table>
<thead>
<tr>
<th>Cell/Landline Classification</th>
<th>Estimate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cell-only</td>
<td>38.7%</td>
</tr>
<tr>
<td>Cell-mostly</td>
<td>18.5%</td>
</tr>
<tr>
<td>Dual use</td>
<td>21.6%</td>
</tr>
<tr>
<td>Landline mostly</td>
<td>12.0%</td>
</tr>
<tr>
<td>Landline only</td>
<td>7.5%</td>
</tr>
</tbody>
</table>

After weighting to NHIS, we have two independent estimates of the dual-user groups, one from cell and one from landline. To combine the two estimates, we averaged the two sets of weights (both are weighted to the population) with a composite weight based on sample size and estimated design effect. The optimal coefficients are based on the effective sample size, defined as the sample size divided by design effect, to minimize the variance (or mean square error) of the composite weighted estimates (see Iachan et al., 2003, for example).

**Combining All Samples**

After separately weighting each of the phone groups to their respective populations, the final step was combining the separate samples into one. While each separate sample group represents their respective phone population, collectively, the three groups represent the full population displayed in the Venn diagram shown earlier (A+B+C). Thus, the three mutually exclusive samples are added together as the final step.

As a final step in the weighting, we post-stratified the combined sample and calibrated the weighted COTABS data to reflect population distributions based on age group, sex, education, and race/ethnicity for each geographic region. We used iterative adjustments—i.e., raking procedures—so that the sample weighted demographics match the population profile at the region and state levels. Raking methods allow the use of additional post-stratification dimensions without leading to extremely small cell sample sizes (or empty cells).

The population control totals for post-stratification were based on the 2012 population estimates produced by the US Census Bureau (http://www.census.gov/popest/estimates.html). Two sets of population control estimates were obtained from two sources (ACS and cc files). These totals were tabulated first by county, then by gender and age group; each of these categories were then broken down by race/ethnic group and by education category. These totals by county were then aggregated into regional totals for the same cross-classifications.

---

Initial age categories for the control totals (prior to collapsing) were 18-24, 25-34, 35-44, 45-64, and 65+. The first two age categories were collapsed for post-stratification. Note that for the national sample, this collapsing did not need to take place. Education categories were less than high school; high school graduate (or GED); some college; and college graduate. Race/ethnicity categories were Hispanic; African-American (Not Hispanic); White (Not Hispanic); and Other (Not Hispanic).

The cells constructed for the raking-trimming algorithm were defined by: a) Region by education, b) Region by age, c) Region by race/ethnicity, and d) Region by gender. Control totals can be obtained for each county for cells defined in this way, and then aggregated to generate regional totals. In each region, the raking allowed for the use of 4 education categories, 4 age groups, 4 race categories (except for two very small regions where two categories were used), and two genders.

The raking algorithm can be performed simultaneously with trimming (see, for example, Iachan, 2010) using the same trimming cells. Trimming approaches limit the variability in the weights. Following each step (or iteration) of the raking algorithm, we trimmed the adjusted weights using the same cells defined above. With trimming, weights are capped or truncated at a maximum value, and the weight sum is kept constant by re-distributing the excess weight within a trimming cell.

Once the distribution of the weights was computed, trimming was conducted for all weights in excess of median + 5*IQR, where IQR is the interquartile range of the weights in a given cell and the median is the median of the weights in a trimming cell. We used minimal trimming in each cell because the adjusted weights showed small variability as indicated by the coefficient of variation (CV) of the weights. For the final weights, the CV was 136%.

**Summary of Weighting Adjustments**

The survey weight reflected the likelihood of selecting each respondent and compensated for differing patterns of nonresponse. In summary, the weight used for estimation was computed as follows:

\[
\text{FINAL}_\text{WT} = \frac{w_1}{L_i \times \text{Pr}(r_i)} \times \text{NR}_{R2} \times \text{PH} \times C \times \text{PS}
\]

- \(w_1\) = The inverse of the probability of selecting the phone number (base weight)
- \(L_i\) = Number of telephone lines for landline sample or number of cell phone lines for cell sample
- \(\text{Pr}(r_i)\) = Within-household probability of selection (landline-only)
- \(\text{NR}_{R2}\) = A non-response adjustment
- \(\text{PH}\) = Ratio adjustment to the estimated size of the phone groups (landline-only, landline-mostly, dual, cell-mostly, cell-only)
- \(C\) = Dual-frame composite weight calculated by phone group
- \(\text{PS}\) = Post stratification adjustment calculated by region, age, race, gender and education (raking)
REPORTS AND DELIVERABLES

Data and SAS Code

ICF delivered the following datasets in SAS format for the 2012 TABS. Re-contact information collected from Colorado respondents at the end of the instrument was delivered separately, per IRB procedures that require sensitive, personally identifying information not be included with respondent survey responses. Data deliveries included the data and the format file in SAS and Codebook in MS Word.

- Randomly Generated Data dataset on September 14, 2012
- Pretest dataset on October 5, 2012
- Interim dataset on October 30, 2012
- A weighted, interim dataset on February 19, 2013
- An unweighted, final dataset on February 20, 2013
- A revised, weighted, interim dataset which included additional weight variables on February 25, 2013
- The full weighted dataset on April 4, 2013
- The final weighted dataset on May 23, 2013; this deliverable included a Person ID and Household ID

ICF also collected re-contact information for Colorado residents in a separate SAS dataset (referred to as Section K to denote its location in the questionnaire) and delivered the file on the below dates. The IRB approved adding the Master ID (MID) to the second and third deliverable.

- November 2, 2012
- January 9, 2013
- February 20, 2013

In addition to the above data files, ICF also provided SAS code for:

- Calculating BMI
- Weighting the 2012 survey data, including population control totals
- Weighting the 2008 survey data, including population control totals
Portal Reports

Reports were available to UC staff through an ICF portal throughout fielding. These reports contained information on partial and fully completed interviews as well as reports on all sampled records. The reports included the following:

- Race of respondent,
- A report of whether respondents provided their weight,
- A report of whether respondents provided their height,
- The length of time respondents had lived in their current state of residence,
- Language of the interview,
- Gender of the respondent,
- Respondent-reported county for Colorado residents,
- The health district of Colorado respondents,
- Completes by smoking status,
- Respondent-reported income,
- Average interview length,
- Average length of sections,
- Dispositions of all records,
- Number of partial completes that were still active and those that had terminal dispositions and would not be dialed on again,
- Information on how many second selected respondents had been selected and how many of those respondents had completed the survey,
- Two reports about respondents who provided re-contact information:
  - One that broke out respondents with health conditions from respondents without health conditions, and
  - One that broke out which health conditions respondents had.

Methodology Reports

The TABS methodology report was sent to the UC on the following dates:

- Methodology outline on February 14, 2013
- Draft methodology report on March 7, 2013
- Full methodology report on May 3, 2013
- Final methodology report on May 24, 2013
REFERENCES


APPENDICES

Appendices begin on the next page.
Appendix A: Prenotification Letters

This document begins on the next page.
November 8, 2012

Dear Colorado Resident:

We are writing to ask for your help with an important study being conducted by the University of Colorado Denver about health behaviors and opinions. More than 13,000 residents of Colorado will participate. Your household was randomly chosen. A professional interviewer will call and randomly select an adult in your household to complete a telephone interview. The firm conducting the interviews is ICF International.

This interview can be completed when ICF International calls or at a later time. **If you have any questions or if you want to call ICF International to complete the interview, please call (303) 724-7481 or toll-free, 866-784-7102, 7 days a week.**

Your participation is completely voluntary, and you may choose not to answer any question or to end the interview at any time. The interview will take about 25 minutes. If you do not wish to participate, be assured there is no penalty or loss of benefit to which you may otherwise be entitled. If you do participate, your answers to survey questions will be kept private as required by law and will help improve health programs in Colorado. No person or household will be identified in any reports from the study.

We hope you will take a few minutes to help with this important research, which is approved by the Colorado Multiple Institutional Review Board (COMIRB, protocol number 05-0785).

Thank you for your assistance. If I can answer any questions for you about the study, please call me at 303-724-3536.

Sincerely,

Emily Burns, MD, MSPH
Assistant Professor, Department of Epidemiology
Colorado School of Public Health
University of Colorado Anschutz Medical Campus
November 8, 2012

Estimado residente de Colorado:

Le escribimos para solicitar su ayuda con un estudio importante que se está realizando en University of Colorado en Denver sobre conductas y opiniones de salud. Participarán más de 13,000 residentes de Colorado. Su hogar fue elegido al azar. Un entrevistador profesional lo llamará y seleccionará de forma aleatoria a un adulto de su hogar para que responda una entrevista telefónica. La compañía que efectúa las entrevistas es ICF International.

Esta entrevista puede realizarse cuando ICF International llame o en otro momento. Si tiene alguna pregunta o si desea llamar a ICF International para completar la entrevista, llame a (303) 724-7481 o al número gratuito 866-784-7102, los 7 días de la semana.

Su participación es completamente voluntaria y puede decidir no responder a ninguna pregunta o finalizar la entrevista en cualquier momento. La entrevista tomará alrededor de 25 minutos. Si no desea participar, le aseguramos que no existe ninguna sanción ni pérdida de beneficios a los que podría tener derecho. Si participa, sus respuestas a las preguntas de la encuesta se mantendrán en privado según lo exigido por ley y ayudarán a mejorar los programas de salud en Colorado. Ninguna persona ni hogar será identificado en ningún informe del estudio.

Esperamos que se tome algunos minutos para ayudar con esta importante investigación, que fue aprobada por la Junta de Revisión Institucional Múltiple de Colorado (COMIRB, por su sigla en inglés, número de protocolo 05-0785).

Gracias por su ayuda. Si tiene alguna otra pregunta, puede llamarme al 303-724-3536.

Atentamente,

Emily Burns, MD, MSPH
Profesora adjunta, Departamento de epidemiología
Facultad de Salud Pública de Colorado
University of Colorado Anschutz Medical Campus
November 8, 2012

Dear Resident:

We are writing to ask for your help with an important study being conducted by the University of Colorado Denver about health behaviors and opinions. More than 3,000 national respondents will participate and 13,000 in Colorado. Your household was randomly chosen. A professional interviewer will call and randomly select an adult in your household to complete a telephone interview. The firm conducting the interviews is ICF International.

This interview can be completed when ICF International calls or at a later time. **If you have any questions or if you want to call ICF International to complete the interview, please call (303) 724-7481 or toll-free, 866-784-7102, 7 days a week.**

Your participation is completely voluntary, and you may choose not to answer any question or to end the interview at any time. The interview will take about 25 minutes. If you do not wish to participate, be assured there is no penalty or loss of benefit to which you may otherwise be entitled. If you do participate, your answers to survey questions will be kept private as required by law and will help improve health programs in Colorado. No person or household will be identified in any reports from the study.

We hope you will take a few minutes to help with this important research, which is approved by the Colorado Multiple Institutional Review Board (COMIRB, protocol number 05-0785).

Thank you for your assistance. If I can answer any questions for you about the study, please call me at 303-724-3536.

Sincerely,

Emily Burns, MD, MSPH
Assistant Professor, Department of Epidemiology
Colorado School of Public Health
University of Colorado Anschutz Medical Campus
November 8, 2012

Estimado residente:

Le escribimos para solicitar su ayuda con un estudio importante que se está realizando en University of Colorado en Denver sobre conductas y opiniones de salud. Participarán más de 3,000 personas que responderán a nivel nacional y 13,000 en Colorado. Su hogar fue elegido al azar. Un entrevistador profesional lo llamará y seleccionará de forma aleatoria a un adulto de su hogar para que responda una entrevista telefónica. La compañía que realiza las entrevistas es ICF International.

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Gracias por su ayuda. Si tiene alguna otra pregunta, puede llamarme al 303-724-3536.

Atentamente,

Emily Burns, MD, MSPH
Profesora adjunta, Departamento de epidemiología
Facultad de Salud Pública de Colorado
University of Colorado Anschutz Medical Campus
Appendix B: IVR Script

This document begins on the next page.
TABS STUDY IVR

Hello, you have reached the verification line for The Attitudes and Behaviors Survey on Health, conducted by the University of Colorado, Denver. Para espanol marque 4 ahora.

Hola, usted se comunicó con la línea de verificación para la Encuesta de actitudes y conductas de salud, realizada por la University of Colorado en Denver. Para ingles marque 4 ahora.

- Please press ‘1’ to learn more about this study
- Press ‘2’ to leave a message, including your phone number, for a survey representative to call you back.
- Press ‘3’ to be transferred to a call center supervisor for more information or to have your telephone number updated or removed.

- Marque “1” para conocer más sobre este estudio.
- Marque “2” para dejar un mensaje que incluya su número de teléfono, para que un representante de la encuesta lo llame.
- Marque “3” para que se transfiera la llamada a un supervisor del centro de llamadas para obtener más información o para actualizar o eliminar su número de teléfono.

Scripts for the following buttons:

1. The Attitudes and Behaviors Survey on Health, also known as TABS, is an important study about the health of adults throughout the U.S. Study results will help prevent chronic disease, reduce tobacco use, and improve programs for people with chronic disease. The study is being conducted by the University of Colorado Denver with help from ICF International, a health research company. Phone numbers are randomly selected to be called and we need participation from all selected households for the study to be successful. The survey will take about 25 minutes. Participation in the survey is voluntary, and your answers to survey questions are strictly confidential; the names and phone numbers of respondents are not connected with survey responses. The TABS will interview over 16,000 people, including 13,000 in Colorado and 3,000 nationally.

To leave a message to be contacted by a survey representative for more information please press ‘2’. To talk with a supervisor or request that your telephone number be updated or removed press ‘3’.

1. La Encuesta sobre actitudes y conductas de salud, también conocida como TABS, por su sigla en inglés, es un importante estudio sobre la salud de los adultos en todo Estados Unidos. Los resultados del estudio ayudarán a prevenir enfermedades crónicas, a reducir el consumo de tabaco y a mejorar los programas para las personas con enfermedades crónicas. El estudio está siendo realizado por la University of Colorado en Denver con ayuda de ICF International, una
compañía de investigación en salud. Los números de teléfono a los que se llama se seleccionan al azar y necesitamos la participación de todos los hogares seleccionados para que el estudio tenga éxito. La encuesta tomará alrededor de 25 minutos. La participación en la encuesta es voluntaria y sus respuestas a las preguntas de la encuesta son estrictamente confidenciales; los nombres y números de teléfono de los que responden no están conectados con las respuestas de la encuesta. Para la encuesta TABS se entrevistará a más de 16,000 personas, incluidas 13,000 en Colorado y 3,000 a nivel nacional.

Para dejar un mensaje para ser contactado por un representante de la encuesta y obtener más información, marque "2". Para hablar con un supervisor o solicitar que se actualice o elimine su número de teléfono, marque "3".

2. Transfer call to a voice message system.
You’ve reached the confidential voicemail for The Attitudes and Behaviors Survey on Health. If you would like to be contacted by a survey representative from ICF International, or to complete your survey, please leave a brief message, including your name and your phone number and someone will contact you as soon as possible. Your interest in this study is greatly appreciated. Thank you and we look forward to talking with you soon.
Usted está en contacto con el correo de voz confidencial de la Encuesta de actitudes y conductas de salud. Si desea ser contactado por un representante de la encuesta de ICF International o completar su encuesta, deje un breve mensaje con su nombre y número de teléfono y alguien se pondrá en contacto con usted tan pronto como sea posible. Agradecemos mucho su interés en este estudio. Gracias y esperamos hablar pronto con usted.

3. Transfer call to inbound agent.

If an interviewer was available to answer the line, they followed the following procedures.

The interviewer addresses any concerns the respondent has, removes them from calling, or schedules a callback for the respondent. If the respondent would like a callback as soon as possible, the call is scheduled for +10 minutes as that is what CATI will allow. The record is then automatically dialed 10-30 minutes from that time.
Appendix C: The Questionnaire

This document begins on the next page.
The Attitudes and Behaviors Surveys on Health (TABS on Health). 2012 Questionnaire

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PROGRAMMER AND SAMPLING INFORMATION

CALLTYPE:
1 = LANDLINE
2 = CELL

PLEASE PLACE TIMERS AT EVERY QUESTION AND AT THE BEGINNING AND END OF EACH SECTION.

Sample flag = income
Income = 0 gets income in screener Assign to random 50% of sample
Income = 1 gets income at end of survey Assign to random 50% of sample

Sample flag = section [if national sample (samptype=1) then everyone is assigned section = 1]
Section = 0 gets section H Policy Assign to random 50% of sample
Section = 1 gets section I Voting Assign to random 50% of sample

Create flag ‘MODULE’
If b0c1a=01 and b0c1b=01 and b0c1c=01 randomly assign MODULE = 1 or 2
(If respondent has all three conditions, respondent randomly gets high blood pressure or high cholesterol module)
If b0c1a=01 and b0c1b=01 and b0c1c<>01 set MODULE =3
(If respondent has high blood pressure and high cholesterol, but not diabetes, respondent gets high blood pressure
and high cholesterol modules)
If b0c1a=01 and b0c1b<>01 set MODULE =1
(If respondent has high blood pressure but not high cholesterol, respondent gets high blood pressure module)
If b0c1a<>01 and b0c1b=01 set MODULE =2
(If respondent does not have high blood pressure but does have high cholesterol, respondent gets high cholesterol
module)
(All respondents with diabetes will get the diabetes module – logic will be based on B0C1c, not the ‘module’ flag)

Partial complete:
IF E1<> . AND RECORD NOT A COMPLETE, THEN RECORD IS A PARTIAL COMPLETE

Sample flag = samptype
Samptype = 0 is Colorado sample
Samptype = 1 is National sample

Study A (the alpha study) manages sample, dispositions, and the selected respondents
Study B (the beta study) is more of a data-entry instrument – no sample management, dispositioning, or screener

QASTAT = status of the record in the Alpha study
QBSTAT = status of the record in the Beta study
Values:
Blank = unknown
1 = In Progress
2 = Complete
3 = resolved but not complete

For the landline instrument – selected variables are:
SEL1 = first randomly selected individual
SEL2 = second randomly selected individual (only if, after removing the first randomly selected individual (SEL1), there is a
smoker, African American or Hispanic)

DP, please use variable names as opposed to numbers when they are provided for variables in this questionnaire in dataset
deliverables

| CELL: CALLBACK FEATURE |

**IF CALLTYPE=2**

Screen1

Special Block Options:

INTERVIEWER: WAS YOUR CALL DROPPED?

[SELECT 1 TO REDIAL THE NUMBER OR HIT ENTER TO RETURN TO THE INTERVIEW]
1. YES, REDIAL

SCREEN2 IF SCREEN1 = 1

INTERVIEWER: WAS THE CALL CONNECTED?

1. Yes, Person on line
2. Yes, Answering machine
3. NO

IF SCREEN2 = 1

“Hello, my name is (name). We were just in the middle of completing the University of Colorado, Denver’s health survey Survey, and it appears that the call was dropped. May we continue now?”

IF SCREEN2 = 2

“I am calling you back to complete the University of Colorado, Denver’s health survey. Your participation is important to us. Please call us to finish the survey at 866-784-7102. Thank you.”

INTERVIEWER, PRESS ENTER, YOU WILL GO BACK TO THE QUESTION WHERE THE CALL DROPPED. TYPE “SUSPEND” THEN DISPOSITION THE CALL AS AN UNSCHEDULED CALLBACK.

HELP TEXT

1. Who is the sponsor of the study?
2. Why is this survey being conducted? What is the purpose of the study?
3. What is the survey about?
4. How did you get my number?
5. Why are you calling nationally/my state if it’s for Colorado?
6. Will my information be kept private?
7. How long is the survey?
8. Contact Information
9. Who is eligible?

10. My number is unlisted, how did my number get on the call list?
11. My name is on the national do-not-call list. I’m not supposed to get these calls.
12. Why am I getting calls so late at night/calls on the weekend?
13. I said no, why are you calling again?
14. If I decline to participate, will that stop me from being called again?
15. How many people are you talking to?
16. Why are you asking me about voting?
17. Why are you asking me for contact information if this is an anonymous survey?
18. Refusal Conversion Statements
19. Neutral statements if a respondent has an emotional response to any of the questions:
20. Respondent hangs up during Section K/contact information
21. Data Entry for City, State, County, and Provider Lists

EN FLAG RECORD AS ENGLISH

Xx Return to questionnaire

1. ¿Quién es el patrocinador de este estudio?
2. ¿Por qué se está realizando este estudio? ¿Cuál es el propósito de este estudio?
3. ¿De qué se trata esta encuesta?
4. ¿Cómo obtuvo mi número?
5. ¿Por qué están llamando a nivel nacional o estatal si es para Colorado?
6. ¿Mi información se mantendrá en forma confidencial?
7. ¿Cuánto dura la encuesta?
8. Información de contacto
9. ¿Quién califica?
10. Mi número no aparece en la guía telefónica, ¿cómo aparece en la lista de llamadas?
11. Mi nombre está en el listado nacional para no recibir llamadas. Se supone que no debo recibir este tipo de llamadas.
12. ¿Por qué me están llamando tan tarde o durante los fines de semana?
13. Les dije que no me llamaran, ¿por qué me siguen llamando?
14. Si me niego a participar, ¿no me volverán a llamar?
15. ¿Con cuántas personas están hablando?
16. ¿Por qué me están haciendo preguntas sobre votar?
17. ¿Por qué piden mi información de contacto si es una encuesta anónima?
18. Frases de conversión de negación.
19. Frases neutras si el entrevistado tiene una respuesta emocional a alguna de las preguntas:
20. Respondent hangs up during Section K/contact information

21. Data Entry for City, State, County, and Provider Lists

EN FLAG RECORD AS ENGLISH

Xx Return to questionnaire

IF HELPTEXT=1

1. Who is the sponsor of the study?

The Attitudes and Behaviors Survey on Health (TABS on Health, or “study”) is conducted by the University of Colorado Denver. The study is paid for by the Colorado Department of Public Health and Environment. [IF NEEDED: We are calling for the University of Colorado, not from the University]

1. ¿Quién es el patrocinador de este estudio?

La Encuesta sobre actitudes y conductas de salud, (TABS de salud o “estudio”) es llevada a cabo por la Universidad de Colorado en Denver. El estudio lo paga el Departamento de Salud Pública y Medio Ambiente de Colorado. [SI ES NECESARIO: Llamamos por la Universidad de Colorado, no de la Universidad].
2. Why is this survey being conducted? What is the purpose of the study?

The purpose of the study is to support and inform community programs to reduce chronic disease.

3. What is the survey about?

The survey is about your health, including health behaviors, attitudes, and opinions about issues related to health.

4. How did you get my number?

All telephone numbers called in this study are selected at random by a computer.

5. Why are you calling nationally/my state if it’s for Colorado?

The study includes some respondents from Colorado and some from the rest of the country in order to improve the quality of the study. Also, national trends and findings will be studied and shared that may help improve chronic disease programs in other states too.

6. Will my information be kept private?
Yes. Nothing is ever reported in any way that can identify you. The company I work for, ICF International, is required to guard confidentiality. All identifying information, such as your telephone number, is separated from your responses after the data have been collected and compiled.

6. ¿Mi información se mantendrá en forma confidencial?
   SI. No reportamos nada de forma que lo pueda identificar. La compañía para la que trabajo, ICF International, está obligada a mantener la confidencialidad. Toda la información de identificación, como su número de teléfono, se separa de sus respuestas después de que la información es recolectada y compilada.

7. How long is the survey?
   On average the survey takes about 25 minutes.

7. ¿Cuánto dura la encuesta?
   En promedio, la encuesta toma unos 25 minutos.

8. Contact Information
   Survey verification line: You may call our survey verification line at 866-784-7102
   GIVE THIS FIRST: University of Colorado Contact: You may call the principal investigator, Dr. Emily Burns at 303-724-3536.
   [INTERVIEWER: Give this only if the caller asks for a contact other than the principal investigator: You may call the COMIRB (University of Colorado’s Institutional Review Board) to learn more about your rights as a survey participant at (303) 724-1055.

8. Información de contacto
   Línea de verificación de la encuesta: Puede llamar a nuestra línea de verificación de la encuesta al 866-784-7102
   [ENTREVISTADOR: Dé esta información sólo si quien llama solicita otro contacto además del investigador principal: Puede llamar a la COMIRB (Junta de Revisión Institucional de la Universidad de Colorado) para averiguar más sobre sus derechos como participante en una encuesta al (303) 724-1055.

9. Who is eligible?
   Respondents who live in a private household and are 18 years of age or older are eligible to participate in the survey.

9. ¿Quién califica?
   Los entrevistados que vivan en un hogar privado y tengan 18 años de edad o más califican para participar en la encuesta.

10. My number is unlisted, how did my number get on the call list?
    All telephone numbers called in this study are selected at random by a computer. Therefore, all numbers, including unlisted numbers, are selected for dialing purely by chance.
10. Mi número no aparece en la guía telefónica. ¿cómo aparece en la lista de llamadas?
Todos los números de teléfono a los que llamamos en este estudio son seleccionados en forma aleatoria por una computadora. Por lo tanto, todos los números, incluidos los que no figuran en la guía telefónica, son seleccionados para ser marcados en forma aleatoria.

**IF HELPTEXT=11**

11. My name is on the national do-not-call list. I’m not supposed to get these calls.
The national do-not-call list controls telemarketing companies that sell services and products over the phone. This survey is conducted for public health purposes and does not fall under do-not-call list laws. All telephone numbers called in this study are selected at random by a computer.

[IF RESPONDENT WANTS MORE INFORMATION: Information about telephone consumer rights can be obtained from the:

Federal Communications Commission (FCC) at 888-225-5322 or at www.fcc.gov and

Federal Trade Commission (FTC) at 202-382-4357 or at www.ftc.gov]

**IF HELPTEXT=12**

12. Why am I getting calls so late at night/calls on the weekend?
The intention is not to disturb you, so I apologize if that was the case. Calls are made during the evening hours and on weekends because many people are not home or are busy earlier in the day.

If there is a more convenient time to contact you, I can arrange for the call to be made during that time [SCHEDULE CALLBACK, IF PERSON SAYS THERE IS A MORE CONVENIENT TIME]

12. ¿Por qué me están llamando tan tarde o durante los fines de semana?
No es nuestra intención causarle molestias, por favor, acepte nuestras disculpas si le causamos alguna molestia. Las llamadas se hacen por la tarde y los fines de semana porque muchas personas no están en su casa o están ocupadas más temprano.

Si hay una hora en especial más conveniente para llamarlo, puedo programar que lo llamen a esa hora [SI LA PERSONA INDICA UNA HORA MÁS CONVENIENTE, PROGRAME ESA HORA ESPECÍFICA PARA VOLVER A LLAMAR]
13. I said no, why are you calling again?

I apologize; some people want another opportunity to participate when they are less busy or have had time to think about it. Can I answer any questions about the survey that would help you feel more comfortable about participating, as you are very important to the success of the study?

13. Les dije que no me llamaran, ¿por qué me siguen llamando?

Lo siento; algunas personas quieren que les brindemos otra oportunidad para participar cuando estén menos ocupados o hayan tenido tiempo para pensarlo. ¿Podría responderle alguna pregunta sobre la encuesta que lo ayudara a sentirse más cómodo con respecto a su participación? Usted es muy importante para el éxito del estudio.

14. If I decline to participate, will that stop me from being called again?

I can remove your number from dialing for this survey and you will not be called again for this particular survey. However, can I answer any questions about the survey that would help you feel more comfortable about participating as you are very important to the success of the study?

14. Si me niego a participar, ¿no me volverán a llamar?

Puedo quitar su número de la lista de teléfonos para esta encuesta y no lo volverán a llamar para esta encuesta en particular. No obstante, ¿Podría responderle alguna pregunta sobre la encuesta que lo ayudara a sentirse más cómodo con respecto a participar? Usted es muy importante para el éxito del estudio.

15. How many people are you talking to?

We will interview 16,000 people. To interview 16,000 adults, we need to contact many more households (hundreds of thousands).

[IF NEEDED: We will interview 13,000 adults in Colorado and 3,000 across the US.]

15. ¿Con cuántas personas están hablando?

Entrevistaremos a 16.000 personas. Para entrevistar a 16.000 adultos, tenemos que llamar a muchos más hogares (cientos de miles).

[SI FUERA NECESARIO: Entrevistaremos a 13.000 adultos en Colorado y 3.000 en el resto de EE.UU.]

16. Why are you asking me about voting?

Some research suggests a link between people’s health and voting behaviors and beliefs. We are studying this possible connection.

IF NEEDED:
- We are NOT conducting political polling.
- We are NOT asking about specific candidates or issues.
- We do NOT report your answers to any political entity.
- If there are questions that you prefer not to answer, you can let me know and we can move to the next question.
16. ¿Por qué me están haciendo preguntas sobre votar?
Algunas investigaciones sugieren que existe un vínculo entre la salud de las personas y sus comportamientos y creencias en cuanto a votar. Estamos estudiando esta posible conexión.
SI FUERA NECESARIO:
• NO estamos haciendo una encuesta política.
• NO estamos preguntando sobre candidatos o temas en particular.
• NO reportamos sus respuestas a ninguna entidad política.

Si hubiera preguntas que prefiere no responder, puede hacérmelo saber y podemos pasar a la siguiente pregunta.

17. Why are you asking me for contact information if this is an anonymous survey?
We are asking to collect contact information separately from the rest of the survey. Contact information will be stored under high security and stored separately from your responses. Only authorized researchers will be able to access your contact information, and only then to update your contact information or notify eligible people about a specific new study.

17. ¿Por qué piden mi información de contacto si es una encuesta anónima?
Recolectamos la información de contacto por separado del resto de la encuesta. La información de contacto se almacena bajo alta seguridad y por separado de sus respuestas. Únicamente los investigadores autorizados pueden acceder a su información de contacto y únicamente así podrán actualizarla o notificar a las personas que califiquen sobre un nuevo estudio específico.

18. Refusal Conversion Statements
• I realize we have called you already on behalf of the University of Colorado. I’d like to have a chance to give you a little more information about this study and why we’re doing it.
• Can I answer any questions for you about the study so that you could feel more comfortable participating?
• Your input is important as the results of this study will be used by the press, lawmakers, researchers, and health professionals so they may make better decisions in planning community health programs.
• I completely understand that your time is limited. Your input is important in this study. We could start now and if we run out of time you can finish later.
• We cannot replace you with anybody else. We have a limited number of households that we can contact. When someone does not participate, this makes the results less representative. This is your chance to be represented in health program decisions.

18. Frases de conversión de negación.
• Comprendo que ya lo hemos llamado en nombre de la Universidad de Colorado. Me gustaría darle un poco más de información sobre este estudio y sobre por qué lo estamos realizando.
• ¿Tiene alguna pregunta sobre el estudio que yo pueda responder para ayudarle a sentirse más cómodo participando?
• Su aporte es importante y los resultados de este estudio serán utilizados por la prensa, los legisladores, investigadores y profesionales de la salud para tomar mejores decisiones para planificar los programas de salud comunitaria.
• Comprendo perfectamente que tiene poco tiempo. Su aporte es importante para este estudio. Podríamos comenzar ahora y si nos quedamos sin tiempo, terminar después.
• No podemos cambiarlo por nadie más. Contamos con una cantidad limitada de hogares a contactar. Cuando alguien no participa, esto hace que los resultados sean menos representativos. Esta es su oportunidad de ser representado en las decisiones de los programas de salud.

**IF HELPTEXT=19**

19. Neutral statements if a respondent has an emotional response to any of the questions:

• I can hear that this interview is upsetting you. Is it okay to continue?
  o If yes, continue with sensitivity
  o If no, ask “Is there a better time to callback”
  o If no/never call, terminate and disposition as a hard refusal
• Would you like to take a moment to gather your thoughts before we continue?
• Would you like to take a break before we continue?

**IF HELPTEXT=20**

20. Respondent hangs up during Section K/contact information

INTERVIEWER: If a respondent hangs up or adamantly refuses during section K where you collect contact information (name, address, email, etc.), you can 9-fill the rest of the questions, i.e. you can enter refusals for the rest of the survey until it completes.

20. Respondent hangs up during Section K/contact information

• INTERVIEWER: If a respondent hangs up or adamantly refuses during section K where you collect contact information (name, address, email, etc.), you can 9-fill the rest of the questions, i.e. you can enter refusals for the rest of the survey until it completes.

**IF HELPTEXT=21**

21. Data Entry for City, State, County, and Provider Lists

INTERVIEWER: For questions with lengthy lists – specifically the city, state, county, and provider lists – you can simply start typing the name of the city/state/county/provider and the programmer will jump to that portion of the alphabetized list. Additionally, for pieces like refusals, you can use 99/999 options to jump to the end of the list where the don’t know/refused/other options are located.

21. Data Entry for City, State, County, and Provider Lists

INTERVIEWER: For questions with lengthy lists – specifically the city, state, county, and provider lists – you can simply start typing the name of the city/state/county/provider and the programmer will jump to that portion of the alphabetized list. Additionally, for pieces like refusals, you can use 99/999 options to jump to the end of the list where the don’t know/refused/other options are located.
ANSWERING MACHINE AND PRIVACY MANAGER

DISPLAY ANSWERING MACHINE MESSAGE ON 1ST AND 4TH ATTEMPT

READMSG This is {INTERVIEWER'S NAME} and I'm conducting an important health study for the University of Colorado, Denver. This study will interview /IF SAMPTYPE=0 INSERT "13,000 adults in Colorado" IF SAMPTYPE=1 INSERT "3,000 adults nationally"/ about their health. Your participation is very important. Please call us toll free at 866-784-7102 to complete a brief interview, or arrange a convenient time for us to contact you. Thank you.

READMSG Mi nombre es {INTERVIEWER'S NAME} y estoy realizando un importante estudio sobre la salud para la Universidad de Colorado en Denver. Este estudio entrevistará a /IF SAMPTYPE=0 INSERT "13.000 adultos en Colorado" IF SAMPTYPE=1 INSERT "3.000 adultos en todo el país"/ acerca de su salud. Su participación es muy importante. Llámenos gratis al 866-784-7102 para completar una breve entrevista o programar un momento conveniente para que lo llamemos. Gracias.

DISPLAY PRIVACY MANAGER TEXT ON 1ST AND 4TH ATTEMPT

University of Colorado, Denver

SECTION A_LL: LANDLINE SCREENER

The Attitudes and Behaviors Survey on Health (TABS on Health), 2012

SECTION A_LL: LANDLINE SCREENER

IF CALLTYPE=1
RECORD TIME ELAPSED IN ALL OF SECTION A_LL – THE LANDLINE SCREENER
SECAL

IF (SUSPFLAG=1 AND CALLTYPE=1) OR LAST NUMBER OF MID = 2

RINTRO Hello, this is {INTERVIEWER NAME} and I’m calling about an important health study for the University of Colorado Denver.

[IF NECESSARY: Previously [READ LIST] was/were selected to participate in the study. May I speak with [READ LIST]?]

[IF NECESSARY: Is this the [READ LIST]?

01 SEL1
02 SEL2
09 (DO NOT READ) TERM
RINTRO  Hola, mi nombre es [INTERVIEWER NAME] y estoy llamando nuevamente acerca de un importante estudio de salud para la Universidad de Colorado en Denver.

[IF NECESSARY:  Anteriormente [LEER LISTA] fue elegido / fueron elegidos para participar en el estudio. ¿Podría hablar con [LEER LISTA]?]

[IF NECESSARY:  ¿Es este el [LEER LISTA]?] 

01  SEL1
02  SEL2
09  (DO NOT READ) TERM

ASK IF CALLTYPE=1 AND LAST NUMBER OF MID <> 2 
RESIDE  [HELLO, THIS IS {INTERVIEWER NAME} AND I’M CONDUCTING AN IMPORTANT HEALTH STUDY FOR THE UNIVERSITY OF COLORADO DENVER. YOUR TELEPHONE NUMBER HAS BEEN RANDOMLY SELECTED FOR A SHORT INTERVIEW.] I JUST HAVE A FEW QUESTIONS TO SEE IF YOU ARE ELIGIBLE FOR THE STUDY.]
Are you a member of this household and at least 18 years old?
[HOUSEHOLDS EXCLUDE PHONES IN DORMITORIES, NURSING HOMES, AND VACATION HOMES (UNLESS PRIMARY RESIDENCE)]

01  YES.................................................
02 //GO TO A3//  NO............................
03  PROBABILE BUSINESS..................
//IF SAMPTYPE=0 INSERT “04 NOT A COLORADO RESIDENT /TERM ASSIGN DISP 35”/ 09 //GOTO interviewer disposition screen// termination screen

RESIDE  [Hola. Mi nombre es {INTERVIEWER NAME} y estoy realizando un importante estudio sobre la salud para la Universidad de Colorado en Denver. Su número de teléfono ha sido seleccionado aleatoriamente para una entrevista breve. Tengo sólo algunas preguntas para saber si califica para el estudio.]

¿Es usted un miembro de este hogar y tiene al menos 18 años de edad? 
[SE EXCLUYEN DE LA CATEGORÍA DE HOGAR LOS TELÉFONOS EN DORMITORIOS ESTUDIANTILES, RESIDENCIAS PARA ANCIANOS Y CASAS DE VACACIONES (A MENOS QUE SEAN LA RESIDENCIA PRIMARIA)]

01  SÍ..................................................
02//GO TO A3//NO..................................
03PROBABLE NEGOCIO.........................
//IF SAMPTYPE=0 INSERT “04 NO ES RESIDENTE DE COLORADO/TERM ASSIGN DISP 35”/ 09 //IR A pantalla de disposición del entrevistador // pantalla de finalización

IF RESIDE=03
A2b. Is this phone number used for …
(BUSINESS)
[INTERVIEWER, PLEASE PROBE HERE IF SOMEONE ANSWERS “DON’T KNOW OR REFUSE”]

04 //GOTO A5// ...............  Home use only,
05 //GOTO A5// ...............  Home and business use, or
06 //GOTO THANK01// ..  Business use only? /TERM ASSIGN DISP 26/
07 //GOTO THANK01// ..  NON-HOME / NON-BUSINESS (VACATION HOMES)    /TERM ASSIGN DISP 26/

98 //GO TO THANK 01 AND TERMINATE// DON’T KNOW /TERM ASSIGN DISP 27/
99 // GO TO THANK 01 AND TERMINATE// REFUSED /TERM ASSIGN DISP 27/

A2b. ¿Es este número utilizado para...

[ENTREVISTADOR, INTENTE AVERIGUAR SI ALGUIEN RESPONDE “NO SÉ” O SE NIEGA A CONTESTAR]

04 //GOTO A5// ...............  El hogar únicamente,
05 //GOTO A5// ...............  Hogar y negocios o
06 //GOTO THANK01// ..  Negocios exclusivamente?
07 //GOTO THANK01// ..  NO HOGAR / NO NEGOCIO (VIVIENDA DE VACACIONES)

98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

//IF A2B=04,05 GOTO A5//
//IF A2B=06,07 GOTO THANK01//
//IF A2B=98, 99 GO TO THANK 01//

[HOME USE EXCLUDES PHONES IN DORMITORIES, NURSING HOMES, AND VACATION HOMES (UNLESS PRIMARY RESIDENCE)]
[IF ASKED: The study is collecting information and opinions about health so we can improve health programs.]
[INTERVIEWER: PLEASE PROBE HERE IF SOMEONE ANSWERS “DON’T KNOW OR REFUSE”]

IF RESIDE=02

A3. May I speak to a household member who is at least 18 years old?
[HOUSEHOLD (HH) MEMBERS INCLUDE PEOPLE WHO THINK OF THIS HH AS THEIR PRIMARY PLACE OF RESIDENCE, IT INCLUDES PERSONS WHO USUALLY STAY IN THE HH BUT ARE TEMPORARILY AWAY ON BUSINESS, VACATION, IN A HOSPITAL, OR LIVING AT SCHOOL IN A DORM, FRATERNITY, OR SORORITY.]

01  //CONTINUE// .........................  AVAILABLE
02  //SCHEDULE CALL BACK// ......  NOT AVAILABLE
03  //GOTOTHANK02// .......................  THERE ARE NONE /TERM ASSIGN DISP 34/
99  REFUSED ....../TERM SCREEN/

A3. ¿Podría hablar con un miembro del núcleo familiar mayor de 18 años de edad?
[LOS MIEMBROS DEL NÚCLEO FAMILIAR (NF) INCLUYEN A PERSONAS QUE CONSIDERAN ESTE NF SU PRINCIPAL LUGAR DE RESIDENCIA, INCLUYEN A PERSONAS QUE SUELEN QUEDARSE EN EL NF PERO ESTÁN FUERA DE MOMENTO POR VIAJES DE NEGOCIOS,
Hello, this is {INTERVIEWER NAME} and I’m conducting an important health study for the University of Colorado, Denver. Your telephone number has been selected for a short interview. Are you a member of this household and at least 18 years old?

(A4)

01 CONTINUE/ .................. YES
02 GOTO A3/ ..................... NO
99 .............................. REFUSED
98 .....DON'T KNOW/NOT SURE

//IF A4=98, 98 ASSIGN DISP 116 OR 003

A4. Hello, Mi nombre es {INTERVIEWER'S NAME} y estoy realizando un importante estudio sobre la salud para la Universidad de Colorado, Denver. Su número de teléfono ha sido seleccionado para una entrevista breve. ¿Es usted un miembro de este núcleo familiar y tiene al menos 18 años de edad?

01 SÍ
02 NO
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

ASK IF A2B=06,07,98,99

THANK01 Thank you, but we are only interviewing in private residences.

01 CONTINUE

THANK01 Gracias, pero solo estamos entrevistando a personas en domicilios particulares.

01 CONTINUE

IF RESIDE=01 OR A2B=04,05 OR A4=01

A5. This study will interview /IF SAMPTYPE=0 INSERT "13,000 adults in Colorado" IF SAMPTYPE=1 INSERT "3,000 adults nationally"/ about their health. While your participation is voluntary, your cooperation is very important to the success of this study. The survey will take about 25 minutes. Your answers will be kept strictly confidential and will be used only for this research. You may choose not to answer any question or end the interview at any time. This call may be monitored or recorded for quality control purposes.

(A5)
01 CONTINUE

/IF SAMPTYPE=0 INSERT "03 DOES NOT LIVE IN COLORADO /TERM ASSIGN DISP 35/"
99 [/TERMINATE REFUSAL ASSIGN DISP 116 OR 003/] REFUSED

A5. Este estudio entrevistará a /IF SAMPTYPE=0 INSERT “13.000 adultos en Colorado” IF SAMPTYPE=1 INSERT “3.000 adultos en todo el país” acerca de su salud. Si bien su participación es voluntaria, su colaboración es muy importante para el éxito de este estudio. La encuesta tomará aproximadamente 25 minutos. Sus respuestas se mantendrán en forma estrictamente confidencial y se utilizarán únicamente para esta investigación. Usted puede elegir no responder ninguna pregunta o ponerle fin a la entrevista en cualquier momento. Esta llamada puede ser monitoreada o grabada con fines de control de calidad.

01 CONTINUE

/IF SAMPTYPE=0 INSERT "03 DOES NOT LIVE IN COLORADO /TERM ASSIGN DISP 35/"
99 [/TERMINATE REFUSAL ASSIGN DISP 116 OR 003/] REFUSED

ASK IF A3=03 OR RESIDE=04 OR A5=03

THANK02 Thank you very much. Those are all the questions I have at this time.

01 CONTINUE

THANK02 Muchas gracias. Esas son todas las preguntas que tenía de momento.

01 CONTINUE

ASK IF A5=01

A5L. [INTERVIEWER READ TO RESPONDENT IF NEEDED/IF YOU ARE UNSURE ABOUT LANGUAGE IN WHICH INTERVIEW SHOULD BE CONDUCTED]:
This interview is offered in English and Spanish. Which do you prefer?

(ENGLISH)
01 .................................. ENGLISH

02 SPANISH

A5L. [ENTREVISTADOR, LEA AL ENTREVISTADO SI ES NECESARIO O SI NO ESTÁ SEGURO SOBRE EL IDIOMA QUE DEBE UTILIZAR EN LA ENTREVISTA]:
Esta entrevista se puede hacer en inglés o en español. ¿Cuál prefiere?

(INGLÉS)
01 .................................. INGLÉS

02 ESPAÑOL

A5LL - // ASK IF A5L = 02 //
INTERVIEWER: CAN YOU CONDUCT THE INTERVIEW IN SPANISH?

01 YES, CONTINUE

02 NO, SCHEDULE CALLBACK
ENTREVISTADOR: ¿PUDE CONTESTAR LA ENTREVISTA EN ESPAÑOL?

01 SÍ, CONTINUAR
02 NO, PROGRAMAR NUEVA LLAMADA

// ASK IF A5LL = 02 //

A5LLL - Cuando sería un buen momento para que el entrevistador que habla español me llame de nuevo.

01 SCHEDULE CALLBACK - GO TO TERMIN_A

A5LLL - ¿En qué momento sería conveniente que lo llamara un entrevistador que hable español?

01 PROGRAMAR NUEVA LLAMADA – IR A TERMIN_A

ASK IF A5LL=01 OR A5L=01

A6 First, we need to gather some information about each household member, 18 years or older, so the computer can pick someone at random for the interview.

Can you please tell me how many members of your household, including yourself, are 18 years of age or older?

_ _ NUMBER OF ADULTS [RANGE=0-18]
98 DON'T KNOW /THANK AND TERM ASSIGN DISP 28/
99 REFUSED /THANK AND TERM ASSIGN DISP 28/

A6 En primer lugar, necesitamos recabar cierta información sobre cada miembro del hogar de 18 años en adelante, para que la computadora pueda elegir a alguien en forma aleatoria para la entrevista.

¿Podría decirme cuántos integrantes de su familia, incluido/a usted mismo/a, tienen 18 años de edad o más?

_ _ NUMERO [RANGE = 0-18/]
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

IF A6=0

ADULT0 You are saying there are NO adults 18 or over in your household. Is that correct?

1  YES, CORRECT: NO ADULTS 18 OR OVER IN HOUSEHOLD /THANK AND TERM
ASSIGN DISP 36/
2  NO, INCORRECT (RESET TO A6)

ADULTO 0  Me está diciendo que NO hay adultos de 18 años o más en su casa. ¿Esto es correcto?

01 SÍ
02 NO

**ASK IF ADULT 0 = 1**

X3 Thanks very much, but we are only interviewing adults 18 or over.

Thank you for your time.

X3 Muchas gracias, pero solo estamos entrevistando a personas de 18 años o más.

Gracias por su tiempo.

**ASK IF A6 = 1**

A7 Are you the adult?

21 YES AND THE RESPONDENT IS A MALE
22 YES AND THE RESPONDENT IS A FEMALE
03 NO

A7 ¿Es usted el adulto?

21 SÍ Y EL ENTREVISTADO ES HOMBRE
22 SÍ Y LA ENTREVISTADA ES MUJER
03 No

**ASK IF A7 = 03**

A8a May I please speak with the adult?

*** INTERVIEWER: IF RESPONDENT NOT AVAILABLE/REFUSE - TYPE SUSPEND ***

01 YES, TRANSFERRING

A8a ¿Podría hablar con el adulto?

01 SI

**ASK IF A8A = 01**

ASKGENDR. Is that adult a man or a woman?

21 MALE
Hello, this is {INTERVIEWER NAME} and I'm conducting an important health study for the University of Colorado, Denver. Your telephone number has been selected for a short interview. Are you the adult?

*** INTERVIEWER: IF RESPONDENT NOT AVAILABLE/REFUSE - TYPE SUSPEND ***

01 YES

A8b Hola. Mi nombre es {INTERVIEWER'S NAME} y estoy realizando un importante estudio sobre la salud para la Universidad de Colorado, Denver. Su número de teléfono ha sido seleccionado para una entrevista breve. Es usted el adulto?

01 SI

A8c This study will interview /IF SAMPTYPE=0 INSERT “13,000 adults in Colorado” IF SAMPTYPE=1 INSERT “3,000 adults nationally”/ about their health. While your participation is voluntary, your cooperation is very important to the success of this study. The survey will take about 25 minutes. Your answers will be kept strictly confidential and will be used only for this research. You may choose not to answer any question or end the interview at any time.

***INTERVIEWER TYPE SUSPEND TO END INTERVIEW***

01 CONTINUE..../GO TO A13/

A8c Este estudio entrevistará a /IF SAMPTYPE=0 INSERT “13,000 adultos en Colorado” IF SAMPTYPE=1 INSERT “3,000 adultos en todo el país”/ acerca de su salud. Si bien su participación es voluntaria, su colaboración es muy importante para el éxito de este estudio. La encuesta tomará aproximadamente 25 minutos. Sus respuestas se mantendrán en forma estrictamente confidencial y se utilizarán únicamente para esta investigación. Usted puede elegir no responder ninguna pregunta o ponerle fin a la entrevista en cualquier momento.

***INTERVIEWER TYPE SUSPEND TO END INTERVIEW***

01 CONTINUE..../GO TO A13/

ASK IF A6=2-18

WOMEN How many of those adults are women?
ENTER NUMBER /RANGE = 0-9/

MUJERES ¿Cuántos de estos adultos son mujeres?
_ _ NUMERO /RANGE = 0-9/

ASK IF A6=2-18

MEN How many of those adults are men?
ENTER NUMBER /RANGE = 0-9/

HOMBRES ¿Cuántos de estos adultos son hombres?
_ _ NUMERO /RANGE = 0-9/

/ ADULT – SEL1
/ ASSIGN SELECTED VALUE FOR EACH ADULT RECORDED IN A6:
/ 01 OLDEST WOMAN
/ 02 2ND OLDEST WOMAN
/ 03 3RD OLDEST WOMAN
/ 04 4TH OLDEST WOMAN
/ 05 5TH OLDEST WOMAN
/ 06 6TH OLDEST WOMAN
/ 07 7TH OLDEST WOMAN
/ 08 8TH OLDEST WOMAN
/ 09 9TH OLDEST WOMAN
/ 11 OLDEST MAN
/ 12 2ND OLDEST MAN
/ 13 3RD OLDEST MAN
/ 14 4TH OLDEST MAN
/ 15 5TH OLDEST MAN
/ 16 6TH OLDEST MAN
/ 17 7TH OLDEST MAN
/ 18 8TH OLDEST MAN
/ 19 9TH OLDEST MAN
/ 20 NO RESPONDENT SELECTED
/ 21=ONE PERSON HH-MAN
/ 22=ONE PERSON HH-WOMAN

ASK IF A6=2-18
PROGRAMMER – LOOP THROUGH A9-A130TH FOR EACH ADULT RECORDED IN A6
VARIABLES WILL BE AXX_01-AXX_09, AXX_11-AXX_19
<table>
<thead>
<tr>
<th></th>
<th>MUJER DE MÁS EDAD</th>
<th>2ª MUJER DE MÁS EDAD</th>
<th>3ª MUJER DE MÁS EDAD</th>
<th>4ª MUJER DE MÁS EDAD</th>
<th>5ª MUJER DE MÁS EDAD</th>
<th>6ª MUJER DE MÁS EDAD</th>
<th>7ª MUJER DE MÁS EDAD</th>
<th>8ª MUJER DE MÁS EDAD</th>
<th>9ª MUJER DE MÁS EDAD</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>CONTINUE</td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The next set of questions are about the smoking pattern of people in this household.

PREa9 The next set of questions are about the smoking pattern of people in this household.

01 CONTINUE

PREa9 El siguiente grupo de preguntas se refiere al patrón de tabaquismo en las personas de este núcleo familiar.

01 CONTINUE

A9. As far as you know, has the [INSERT ADULT] smoked at least 100 cigarettes during /his/her entire life?

(P?CIGS)

<table>
<thead>
<tr>
<th></th>
<th>YES</th>
<th>NO</th>
<th>REFUSED</th>
<th>DON’T KNOW/NOT SURE</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>..............................</td>
<td>...........................</td>
<td>........................</td>
<td>....................</td>
</tr>
</tbody>
</table>

A9. Hasta donde usted sabe, ¿[usted/ [INSERTAR ADULTO]} fumó al menos 100 cigarrillos durante toda su vida?

<table>
<thead>
<tr>
<th></th>
<th>SÍ</th>
<th>NO</th>
<th>SE NIEGA A CONTESTAR</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>..............................</td>
<td>...........................</td>
<td>........................</td>
</tr>
</tbody>
</table>

98 NO SABE / NO ESTÁ SEGURO/A

99 SE NIEGA A CONTESTAR

//IF A9=1,98,99 CONTINUE; ELSE SKIP TO A13//
A10. As far as you know, does he/she} smoke cigarettes every day, some days, or not at all? (P?DAILY)

01 EVERY DAY ....................
02 SOME DAYS ....................
03 NOT AT ALL ....................
99 REFUSED .......................  
98 DON'T KNOW/NOT SURE ........

A10. Hasta donde usted sabe, ¿Fuma {usted/él/ella} cigarrillos todos los días, algunos días o nunca?

01 TODOS LOS DÍAS
02 ALGUNOS DÍAS
03 NUNCA
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

//IF A10=03,99,98 CONTINUE; ELSE SKIP TO A13//

A11. As far as you know, has he/she smoked cigarettes any time in the past 12 months, that is, since [INSERT DATE OF INTERVIEW]?

(P?MNTH)

01 YES ....................
02 NO ........................
99 REFUSED .......................  
98 DON'T KNOW/NOT SURE ........

A11. Hasta donde usted sabe, ¿{usted/él/ella} ha fumado cigarrillos en los últimos 12 meses, o sea desde [fecha automática 12 meses antes de la fecha actual (de la entrevista)]?

01 SI
02 NO
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

A13. Which one of the following categories best describes { INSERT ADULT }? Is he/she … (P?RACE)

01 Hispanic or Latino, ..................
02 White or caucasian, ..................
03 Black, African American, ...........
04 Asian, ..............................
05 Native Hawaiian, other Pacific Islander, ...
06 American Indian, or Alaska Native? ...

95 OTHER (Specify: ________________).
99 REFUSED ...........................
98 DON'T KNOW/NOT SURE ..........
A13. ¿Cuál de las siguientes categorías describe mejor a { INSERTAR ADULTO }? ¿Es {usted/él/ella} …

01 Hispano/a o Latino/a, ........................................
02 Blanco o caucásico, .................................
03 Negro/a, afroamericano/a, ...........................
04 Asiático/a, ................................................
05 Nativo/a de Hawái u otra isla del Pacífico ........................
06 Indígena americano/a o nativo/a de Alaska .................................

95 OTRO
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

ASK IF A13=95

A13o. ENTER RESPONSE ___________________________________________

ASK IF A6=1

A13. Which one of the following categories best describes you? Are you…. [READ LIST]?

(P?RACE)

01 Hispanic or Latino, .................................
02 White or caucasian, .................................
03 Black, African American, ...........................
04 Asian, .....................................................
05 Native Hawaiian, other Pacific Islander, ........................
06 American Indian, or Alaska Native? ...

95 OTHER (Specify: ______________)..
99 REFUSED ..................................................
98 DON'T KNOW/NOT SURE ................................

A13. (RACEGRP) ¿Cuál de las siguientes categorías lo describe mejor? Es usted…

01 Hispano/a o Latino/a, ........................................
02 Blanco o caucásico, .....................................
03 negro/a, afroamericano/a, ...........................
04 Asiático/a, ................................................
05 Nativo/a de Hawái u otra isla del Pacífico, ........................
06 Indígena americano/a o nativo/a de Alaska 

95 OTRO
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR
ASK IF A13=95

A13o.
ENTER RESPONSE ________________________________

ASK IF SAMTYPE=0 AND CALLTYPE=1 AND LAST DIGIT OF MID<>2

A20. What county do you live in?
(CNTY)

[IF ASKED: We are interested in looking at the study results by geographic area; IF NEEDED: Please ask respondent to verify the name of the county if it is not on the list;]

_ _ _ COUNTY CODE

995 OTHER
999 REFUSED ......................
998 DON'T KNOW/NOT SURE....

A20. ¿En qué condado vive actualmente?
(CNTY)

[SI LE PREGUNTAN: Nos interesa ver los resultados del estudio según el área geográfica; SI FUERA NECESARIO: Pídale al entrevistado que verifique el nombre del condado si no está en la lista].

995 OTRO
998 NO SABE / NO ESTÁ SEGURO/A
999 SE NIEGA A CONTESTAR

CNTY –
3-DIGIT
CODES COUNTY
1 ADAMS
2 ALAMOSA
3 ARAPAHOE
4 ARCHULETA
5 BACA
6 BENT
7 BOULDER
8 CHAFFEE
9 CHEYENNE
10 CLEAR CREEK
11 CONEJOS
12 COSTILLA
13 CROWLEY
14 CUSTER
15 DELTA
16 DENVER
17 DOLORES
18 DOUGLAS
19 EAGLE
20 ELBERT
21 EL PASO
<table>
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<td>39</td>
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<tr>
<td>40</td>
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</tr>
<tr>
<td>41</td>
<td>MOFFAT</td>
</tr>
<tr>
<td>42</td>
<td>MONTEZUMA</td>
</tr>
<tr>
<td>43</td>
<td>MONTROSE</td>
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<tr>
<td>44</td>
<td>MORGAN</td>
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<td>45</td>
<td>OTERO</td>
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<td>46</td>
<td>OURAY</td>
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<td>47</td>
<td>PARK</td>
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<td>48</td>
<td>PHILLIPS</td>
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<td>49</td>
<td>PITKIN</td>
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<td>50</td>
<td>PROWERS</td>
</tr>
<tr>
<td>51</td>
<td>PUEBLO</td>
</tr>
<tr>
<td>52</td>
<td>RIO BLANCO</td>
</tr>
<tr>
<td>53</td>
<td>RIO GRANDE</td>
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<tr>
<td>54</td>
<td>ROUTT</td>
</tr>
<tr>
<td>55</td>
<td>SAGUACHE</td>
</tr>
<tr>
<td>56</td>
<td>SAN JUAN</td>
</tr>
<tr>
<td>57</td>
<td>SAN MIGUEL</td>
</tr>
<tr>
<td>58</td>
<td>SEDGWICK</td>
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<tr>
<td>59</td>
<td>SUMMIT</td>
</tr>
<tr>
<td>60</td>
<td>TELLER</td>
</tr>
<tr>
<td>61</td>
<td>WASHINGTON</td>
</tr>
<tr>
<td>62</td>
<td>WELD</td>
</tr>
<tr>
<td>63</td>
<td>YUMA</td>
</tr>
<tr>
<td>64</td>
<td>BROOMFIELD</td>
</tr>
</tbody>
</table>

*ASK IF A20=995*

A20OTH ENTER RESPONSE
ASK IF LAST NUMBER OF MID = 2

CONSENT2
This study will interview /IF SAMPTYPE=0 INSERT “13,000 adults in Colorado” IF SAMPTYPE=1 INSERT “3,000 adults nationally”/ about their health. While your participation is voluntary, your cooperation is very important to the success of this study. The survey will take about 25 minutes. Your answers will be kept strictly confidential and will be used only for this research. You may choose not to answer any question or end the interview at any time. This call may be recorded for quality control purposes. May I continue with the study? [IF RESPONDENT WANTS TO SPEAK WITH SOMEONE AT CU, YOU CAN GIVE THE FOLLOWING NUMBER: Emily Burns at 303-724-3536.]

01 YES, CONTINUE

CONSENT2
Este estudio entrevistará /IF SAMPTYPE=0 INSERT “13,000 adultos en Colorado” IF SAMPTYPE=1 INSERT “3,000 adultos en todo el país”/ acerca de su salud. Si bien su participación es voluntaria, su colaboración es muy importante para el éxito de este estudio. La encuesta tomará aproximadamente 25 minutos. Sus respuestas se mantendrán en forma estrictamente confidencial y se utilizarán únicamente para esta investigación. Usted puede elegir no responder ninguna pregunta o ponerle fin a la entrevista en cualquier momento. Esta llamada puede ser grabada con fines de control de calidad. ¿Puedo continuar con el estudio? [SI EL ENTREVISTADO DESEA HABLAR CON ALGUIEN EN CU, PUEDE DARLE EL SIGUIENTE NÚMERO: Emily Burns al 303-724-3536.]

01 SÍ, CONTINUAR

ASK IF CALLTYPE=1 AND SAMPTYPE=1
A13b. In what state do you currently live? (NATSTATE)
A13b. ¿En qué estado vive actualmente?

001 ALABAMA (AL) ......................
002 ALASKA (AK) ........................
003 ARIZONA............................
004 ARKANSAS .........................
005 CALIFORNIA ....................... 
006 COLORADO ........................./TERM ASSIGN DISP 29/
007 CONNECTICUT .....................
008 DELAWARE ....................... 
009 FLORIDA .........................
010 GEORGIA .........................
011 HAWAII .........................
012 IDAHO .........................
013 ILLINOIS .........................
014 INDIANA .........................
015 IOWA ..........................
016 KANSAS .........................
017 KENTUCKY .....................
ASK IF A13B=006
THANK03 Thank you very much. Those are all the questions I have at this time.
01 CONTINUE

ASK IF INCOME=0 AND CALLTYPE=1 AND LAST DIGIT OF MID<>2
Data Processing please code/deliver as one categorical response variable based on responses to this series
A14. During the past 12 months, was the total combined income of all members of this household ... (INCA-INCH) [IF NECESSARY PROBE: Include income from all sources such as: salaries and wages; social security and public assistance; dividends, interest or rent; unemployment and worker's compensation; pensions.]

<table>
<thead>
<tr>
<th>(INCA)</th>
<th>a. less than $25,000? .........................................</th>
<th>01</th>
<th>02 [SKIP TO A15]</th>
</tr>
</thead>
<tbody>
<tr>
<td>(INCB)</td>
<td>b. less than $20,000? .........................................</td>
<td>01</td>
<td>02 [SKIP TO selection]</td>
</tr>
<tr>
<td>(INCC)</td>
<td>c. less than $15,000? .........................................</td>
<td>01</td>
<td>02 [SKIP TO selection]</td>
</tr>
</tbody>
</table>
The Attitudes and Behaviors Surveys on Health (TABS on Health) , 2012

A15. //For A15, once the person answers 01, ’YES’ they should get skipped to selection//

<table>
<thead>
<tr>
<th></th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>(INCE)</td>
<td>e. less than $35,000?</td>
<td>01</td>
</tr>
<tr>
<td>(INCF)</td>
<td>f. less than $50,000?</td>
<td>01</td>
</tr>
<tr>
<td>(INCG)</td>
<td>g. less than $75,000?</td>
<td>01</td>
</tr>
<tr>
<td>(INCH)</td>
<td>h. less than $90,000?</td>
<td>01</td>
</tr>
</tbody>
</table>

99 REFUSED
98 DON’T KNOW/NOT SURE

A14. Durante los últimos 12 meses, ¿el ingreso total sumado de todos los miembros de este núcleo familiar…

(INCA-INCH) [SI ES NECESARIO, CONSULTE: Incluir ingresos de todas las fuentes, como por ejemplo: salarios y sueldos, seguro social y asistencia pública, dividendos, intereses o rentas, compensación por desempleo y por trabajo, pensiones.]

A14.

<table>
<thead>
<tr>
<th></th>
<th>SÍ</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>(INCA)</td>
<td>a. menos de $25,000?</td>
<td>01</td>
</tr>
<tr>
<td>(INCB)</td>
<td>b. menos de $20,000?</td>
<td>01</td>
</tr>
<tr>
<td>(INCC)</td>
<td>c. menos de $15,000?</td>
<td>01</td>
</tr>
<tr>
<td>(INCD)</td>
<td>d. menos de $10,000?</td>
<td>01</td>
</tr>
</tbody>
</table>

A15.

<table>
<thead>
<tr>
<th></th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>(INCE)</td>
<td>e. menos de $35,000?</td>
<td>01</td>
</tr>
<tr>
<td>(INCF)</td>
<td>f. menos de $50,000?</td>
<td>01</td>
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<tr>
<td>(INCG)</td>
<td>g. menos de $75,000?</td>
<td>01</td>
</tr>
<tr>
<td>(INCH)</td>
<td>h. menos de $90,000?</td>
<td>01</td>
</tr>
</tbody>
</table>

98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

IF A14_A THRU A15_G <>98,99 AND LAST DIGIT OF MID<>2 AND INCOME=0 AND CALLTYPE=1

A14_V Your Annual Household Income is
[IF A15_H<>02 enter range from code in INC/]
[IF A15_H=02 ENTER “$90,000 or more”/]
Is This Correct?
1 No, re-ask question [GO TO A14_a]
2 Yes, correct as is. [CONTINUE]

A14_V Ingresos anuales del hogar son
[IF A15_H<>02 enter range from code in INC/]
[IF A15_H=02 ENTER “$90,000 or more”/]
ES ESTO CORRECTO?
1 No, re-ask question [GO TO A14_a]
2 Yes, correct as is. [CONTINUE]
IF A15_H=02
NOT ASKED IN PROGRAM
DP – IN POST-PROCESSING POPULATE INCI/A15_I = 01 IF A15_H=02

(INCI) i. $90,000 or more? .........................
(INCI) i. $90,000 or more? ......................... 01 02

ASK IF A6=2-18

[How selection process works:
2 Max stage selection process
1st stage randomly selects any 1 adult (18 or older) in HH.
2nd stage only kicks in if 1 or more ADULT current smoker is left who hasn’t been selected in stage 1 OR IF 1 or more ADULT Has p13/(P?RACE)=03, Black/African American or if 1 or more adult has p13/(P?RACE)=01 Hispanic/Latino
Stage 2 randomly selects 1 smoker from current smokers left or randomly selects African American if any African Americans left.
If at the second stage there is still a smoker and an African American or a Hispanic/Latino left, take the smoker 1st, the African American Second and the Hispanic third
Definition of “current smoker” for selection process:
Anybody who has smoked at least 100 cigs in their life AND currently smokes or who has smoked in the past 12 months: A9=01 AND (A10=1,2 OR A11=1)
**SELECTION FOR SECOND PERSON:**

IF THERE IS A SMOKER, SELECT THE SMOKER
IF THERE IS NO SMOKER BUT THERE IS AN AFRICAN AMERICAN, SELECT THE AFRICAN AMERICAN RESPONDENT
IF THERE IS NO SMOKER OR AFRICAN AMERICAN, BUT THERE IS A HISPANIC, SELECT THE HISPANIC RESPONDENT
IF THERE ARE NO SMOKERS OR AFRICAN AMERICANS OR HISPANICS, NO SECOND SURVEY

/SEL2
RANDOMLY SELECT ADULT; ASSIGN SELECTED VALUE:
/ 01 OLDEST WOMAN
/ 02 2ND OLDEST WOMAN
/ 03 3RD OLDEST WOMAN
/ 04 4TH OLDEST WOMAN
/ 05 5TH OLDEST WOMAN
/ 06 6TH OLDEST WOMAN
/ 07 7TH OLDEST WOMAN
/ 08 8TH OLDEST WOMAN
/ 09 9TH OLDEST WOMAN
/ 11 OLDEST MAN
/ 12 2ND OLDEST MAN
/ 13 3RD OLDEST MAN
/ 14 4TH OLDEST MAN
/ 15 5TH OLDEST MAN
/ 16 6TH OLDEST MAN
/ 17 7TH OLDEST MAN
/ 18 8TH OLDEST MAN
/ 19 9TH OLDEST MAN
/ 20 NO RESPONDENT SELECTED

**ASK IF A6=2-18**

A14a The computer has randomly selected

/INSERT SEL1

/INSERT SEL2/

Are you /IF ONE ADULT WAS SELECTED INSERT “this person?” IF TWO ADULTS WERE SELECTED INSERT “one of these people?”/

[INTERVIEWER: IF RESPONDENT HANGS UP SELECT OPTION 03, GO TO NEXT QUESTION AND SUSPEND] 01 /INSERT SEL1

02 /INSERT SEL2/

03 No

04 REDO SELECTION PROCESS [PASSWORD REQUIRED]
A14a La computadora ha elegido aleatoriamente

¿Es usted /SI SE ELIGIÓ UN ADULTO, INSERTAR “esta persona”? SI SE ELIGIERON DOS ADULTOS, INSERTAR “una de estas personas”? /

[INTERVIEWER TYPE SUSPEND TO END CALL]

01 /INSERT SEL1
02 /INSERT SEL2/

**ASK IF A14A=03**

A14B May I speak to one of those respondents?

[INTERVIEWER TYPE SUSPEND TO END CALL]

01 YES
A14B ¿Podría hablar con uno de ellos?

[INTERVIEWER TYPE SUSPEND TO END CALL]

01 SI

**ASK IF A14B=01**

A14c Hello, this is {INTERVIEWER NAME} and I'm conducting an important health study for the University of Colorado, Denver. Your telephone number has been selected for a short interview. Are you the

[INTERVIEWER TYPE SUSPEND TO END THE CALL]

01 /INSERT SEL1
02 /INSERT SEL2/

A14c Hola. Mi nombre es {INTERVIEWER'S NAME} y estoy realizando un importante estudio sobre la salud para la Universidad de Colorado, Denver. Su número de teléfono ha sido seleccionado para una entrevista breve. Es usted el

[INTERVIEWER TYPE SUSPEND TO END THE CALL]

01 /INSERT SEL1
02 /INSERT SEL2/
ASK IF A14C=01,02
A14d This study will interview /IF SAMPTYPE=0 INSERT “13,000 adults in Colorado” IF SAMPTYPE=1 INSERT “3,000 adults nationally” about their health. While your participation is voluntary, your cooperation is very important to the success of this study. The survey will take about 25 minutes. Your answers will be kept strictly confidential and will be used only for this research. You may choose not to answer any question or end the interview at any time. This call may be monitored or recorded for quality control purposes.

***INTERVIEWER TYPE SUSPEND TO END INTERVIEW***

01 CONTINUE........................

A14d Este estudio entrevistará a /IF SAMPTYPE=0 INSERT “13,000 adultos en Colorado” IF SAMPTYPE=1 INSERT “3,000 adultos en todo el país” acerca de su salud. Si bien su participación es voluntaria, su colaboración es muy importante para el éxito de este estudio. La encuesta tomará aproximadamente 25 minutos. Sus respuestas se mantendrán en forma estrictamente confidencial y se utilizarán únicamente para esta investigación. Usted puede elegir no responder ninguna pregunta o ponerle fin a la entrevista en cualquier momento. Esta llamada puede ser monitoreada o grabada con fines de control de calidad.

01 CONTINUE.........................
SECTION A_CELL: CELL PHONE SCREENER

**IF CALLTYPE=2**
**RECORD TIME ELAPSED IN ALL OF SECTION A_CELL – THE LANDLINE SCREENER**

SECAC

**IF SUSPFLAG=1 AND CALLTYPE=2**
CRINTRO Hello, this is {INTERVIEWER NAME} and I'm calling back about an important health study for the University of Colorado that was started. Is now a good time to continue with the survey?
01 continue
02 terminate

**IF CALLTYPE=2**
INTRO_C
Hello, this is {INTERVIEWER NAME} and I’m conducting an important health study for the University of Colorado, Denver. Your telephone number has been randomly selected for a short interview. I just have a few questions to see if you are eligible for the study.
01 Continue ......................
02 Terminate ......................

INTRO_C Hola. Mi nombre es {INTERVIEWER’S NAME} y estoy realizando un importante estudio sobre la salud para la Universidad de Colorado, Denver. Su número de teléfono ha sido seleccionado aleatoriamente para una entrevista breve. Tengo sólo algunas preguntas para saber si califica para el estudio.
01 Continue ......................
02 Terminate ......................

**IF INTRO_C=01**
CA30b Your safety is important. Are you driving in a car, walking down the street, in a public place or other location where talking on the phone might distract you or jeopardize your safety or confidentiality?
01 .................................................. YES
02 //GO TO CA28a// ..................... NO
99 // GO TO TERM BLOCK//...........REFUSED

CA30b. Su seguridad es importante. ¿Se encuentra usted conduciendo un vehículo, caminando por la calle, en un lugar público u otro lugar donde hablar por teléfono podría distraerlo o poner en peligro su seguridad o confidencialidad?
01 SÍ
02 NO
99 SE NIEGA A CONTESTAR

**IF CA30B=01**
CA30a I would like to call you at a more convenient time. What day and time would be best? [INTERVIEWER: set up call-back].
01 .................................................. Schedule callback
99 //TERMINATE ASSIGN DISP 002// REFUSED
CA30a. Preferiría llamarlo en un momento más conveniente. ¿Qué día y hora le quedarían mejor? [ENTREVISTADOR: programar llamada].
   01 .................................................. Llamar
   02 .................................................. No
   99 SE NIEGA A CONTESTAR

 IF CA30B=02

CA28a. /IF SAMPTYPE=0 INSERT "Are you at least 18 years old and a Colorado resident?"
/IF SAMPTYPE=1 INSERT "Are you at least 18 years old and a resident of the United States?"

   01 //GO TO CA28C// ................................. YES
   02 //GO TO CA28C// ................................. NO
   99 //GO TO CTHANK01 ASSIGN DISP 32//REFUSED ................................................
   98 // CTHANK01 ASSIGN DISP 32// DON'T KNOW/NOT SURE

CA28a. /IF SAMPTYPE=0 INSERT "¿Tiene usted al menos 18 años de edad y es residente de Colorado?"
/IF SAMPTYPE=1 INSERT "¿Tiene usted al menos 18 años de edad y es residente de los Estados Unidos?"

   01 SÍ
   02 NO
   98 NO SABE / NO ESTÁ SEGURO/A
   99 SE NIEGA A CONTESTAR

 IF CA28A=01,02

CA28c. Does anyone else receive calls on this cell phone?

   01 YES
   02 //GO TO CA4B// NO

CA28c. ¿Alguien más recibe llamadas en este teléfono?

   01 SÍ
   02 NO

//IF CA28A=2 "NO" AND CA28C=01 "YES" GO TO CA28B. IF CA28A=01 AND CA28C=01, GO TO CA4B. IF CA28A=02 AND CA28C=02, THEN TERMINATE ASSIGN DISP 33//.

//IF CA28A=2 "NO" AND CA28C=01 "YES"

CA28b. May I speak to someone who is 18 years or older who receives calls on this cell phone?

   01 //SKIP back to beginning of script// ............. AVAILABLE ......................................
   02 //schedule callback// .................................... NOT AVAILABLE ............................
   03 //CTHANK01// .............................................. THERE ARE NONE ......................... /TERM ASSIGN DISP 33/

CA28b. ¿Podría hablar con alguien que tenga al menos 18 años de edad y que reciba llamadas en este teléfono celular?

   01 DISPONIBLE
   02 NO DISPONIBLE
03 NO HAY NINGUNO

ASK IF CA28A=98,99 OR CA28B=03 OR (CA28A=02 AND CA28C=02)

CTHANK01 Thank you very much. Those are all the questions I have at this time.
01 CONTINUE

CTHANK01 Muchas gracias. Esas son todas las preguntas que tenía de momento.
01 CONTINUE

IF CA28A=01
CA4b. Is this cell phone number used for...
(CA4b)

04 ........................................................ Home use,
05 ......................................................... Home and business use, or
06 //GO TO CTHANK02// .................... Business use only? /TERM ASSIGN DISP 30/

98 DONT KNOW //GO TO CTHANK02// /TERM ASSIGN DISP 31/
99 REFUSE //GO TO CTHANK02//..... /TERM ASSIGN DISP 31/

CA4b. ¿Es este número utilizado para...

04 /................................. El hogar únicamente,
05 // ................................. Hogar y negocios o
06 / ................................. Negocios exclusivamente?
07 // NO HOGAR / NO NEGOCIO (VIVIENDA DE VACACIONES)

98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

IF CA4B=06,98,99

CTHANK02 Thank you, but we are only interviewing personal phones.
01 CONTINUE

CTHANK02 Gracias, pero solo estamos entrevistando a personas en sus teléfonos personales.
01 CONTINUE

IF CA4B=04,05

CA5. This study will interview /IF SAMPTYPE=0 INSERT “13,000 adults in Colorado” IF SAMPTYPE=1 INSERT “3,000 adults nationally”/ about their health. While your participation is voluntary, your cooperation is very important to the success of this study. The survey will take about 25 minutes. Your answers will be kept strictly confidential and will be used only for this research. You may choose not to answer any question or end the interview at any time. This call may be monitored or recorded for quality control
CA5. Este estudio entrevistará a /IF SAMPTYPE=0 INSERT “13.000 adultos en Colorado” IF SAMPTYPE=1 INSERT “3.000 adultos en todo el país”/ acerca de su salud. Si bien su participación es voluntaria, su colaboración es muy importante para el éxito de este estudio. La encuesta tomará aproximadamente 25 minutos. Sus respuestas se mantendrán en forma estrictamente confidencial y se utilizarán únicamente para esta investigación. Usted puede elegir no responder ninguna pregunta o ponerle fin a la entrevista en cualquier momento. Esta llamada puede ser monitoreada o grabada con fines de control de calidad.

IF CA5=01
CA5L. [INTERVIEWER READ TO RESPONDENT IF NEEDED/IF YOU ARE UNSURE ABOUT LANGUAGE IN WHICH INTERVIEW SHOULD BE CONDUCTED] :
This interview is offered in English and Spanish. Which do you prefer?
(ENGLISH)

01 .................................. ENGLISH
02 //GO TO CA5M //          SPANISH

CA5L. [ENTREVISTADOR, LEA AL ENTREVISTADO SI ES NECESARIO O SI NO ESTÁ SEGURO SOBRE EL IDIOMA QUE DEBE UTILIZAR EN LA ENTREVISTA] :
Esta entrevista se puede hacer en inglés o en español. ¿Cuál prefiere?
(INGLÉS)

01 .................................. INGLÉS
02 ESPAÑOL

CA5LL - // ASK IF CA5L = 02 //
INTERVIEWER: CAN YOU CONDUCT THE INTERVIEW IN SPANISH?

01 YES, CONTINUE
02 NO, SCHEDULE CALLBACK

CA5L ENTREVISTADOR: ¿PUEDE CONTESTAR LA ENTREVISTA EN ESPAÑOL?

01 SÍ, CONTINUAR
02 NO, PROGRAMAR NUEVA LLAMADA
ASK IF CA5LL = 02

CA5LLL - When would be a good time to have a Spanish speaking interviewer call you back?

01 SCHEDULE CALLBACK - GO TO TERMIN_A

CA5LLL - ¿En qué momento sería conveniente que lo llamara un entrevistador que hable español?

01 PROGRAMAR NUEVA LLAMADA – IR A TERMIN_A

ASK IF CA5L=1 OR CA5LL=1

CA13. Which one of the following categories best describes you:

(P?RACE)

01 Hispanic or Latino, .................................
02 White or caucasian, .................................
03 Black, African American, ...........................
04 Asian, ..................................................
05 Native Hawaiian, other Pacific Islander, ....
06 American Indian, or Alaska Native?............
95 OTHER (Specify: ____________________________)
99 REFUSED.............................................
98 DON'T KNOW/NOT SURE..........................

¿Cuál de las siguientes categorías lo describe mejor? Es usted…

(RACEGRP)

01 Hispano/a o Latino/a, ..................................
02 Blanco o caucásico, .................................
03 negro/a, afroamericano/a, ..........................
04 Asiático/a, ............................................
05 Nativo/a de Hawái u otra isla del Pacífico, .
06 Indígena americano/a o nativo/a de Alaska
95 OTRO
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

ASK IF CA13=95

CA13oth.

ENTER RESPONSE __________________________________________

ASK IF SAMPTYPE=0 AND CALLTYPE=2

CA20. What county do you live in?

(CNTY)

[IF ASKED: We are interested in looking at the study results by geographic area; IF NEEDED: Please ask respondent to verify the name of the county if it is not on the list; .

_ _ _ COUNTY CODE

995 OTHER
cA20. ¿En qué condado vive actualmente?

(CNTY)

[SI LE PREGUNTAN: Nos interesa ver los resultados del estudio según el área geográfica; SI FUERA NECESARIO: Pídale al entrevistado que verifique el nombre del condado si no está en la lista].

995 OTRO

998 NO SABE / NO ESTÁ SEGURO/A

999 SE NIEGA A CONTESTAR

CNTY – 3-DIGIT CODES
COUNTY
1 ADAMS
2 ALAMOSA
3 ARAPAHOE
4 ARCHULETA
5 BACA
6 BENT
7 BOULDER
8 CHAFFEE
9 CHEYENNE
10 CLEAR CREEK
11 CONEJOS
12 COSTILLA
13 CROWLEY
14 CUSTER
15 DELTA
16 DENVER
17 DOLORES
18 DOUGLAS
19 EAGLE
20 ELBERT
21 EL PASO
22 FREMONT
23 GARFIELD
24 GILPIN
25 GRAND
26 GUNNISON
27 HINSDALE
28 HUERFANO
29 JACKSON
30 JEFFERSON
31 KIOWA
32 KIT CARSON
33 LAKE
LA PLATA
LARIMER
LAS ANIMAS
LINCOLN
LOGAN
MESA
MINERAL
MOFFAT
MONTEZUMA
MONTROSE
MORGAN
OTERO
OURAY
PARK
PHILLIPS
PITKIN
PROWERS
PUEBLO
RIO BLANCO
RIO GRANDE
ROUTT
SAGUACHE
SAN JUAN
SAN MIGUEL
SEDGwick
SUMMIT
TELLER
WASHINGTON
WELD
YUMA
BROOMFIELD

ASK IF CA20=995
CA20OTH ENTER RESPONSE

ASK IF (CA5L=1 OR CA5LL=1) AND SAMPTYPE=1

CA13b. In what state do you currently live?

(NATSTATE)

001 ALABAMA (AL) ....................
002 ALASKA (AK) .....................
003 ARIZONA ........................
004 ARKANSAS ........................
005 CALIFORNIA ....................
006 COLORADO ....................../TERM ASSIGN DISP 29/
007 CONNECTICUT .................
008 DELAWARE ....................
009 FLORIDA ........................
010 GEORGIA
011 HAWAII
012 IDAHO
013 ILLINOIS
014 INDIANA
015 IOWA
016 KANSAS
017 KENTUCKY
018 LOUISIANA
019 MAINE
020 MARYLAND
021 MASSACHUSETTS
022 MICHIGAN
023 MINNESOTA
024 MISSISSIPPI
025 MISSOURI
026 MONTANA
027 NEBRASKA
028 NEVADA
029 NEW HAMPSHIRE
030 NEW JERSEY
031 NEW MEXICO
032 NEW YORK
033 NORTH CAROLINA
034 NORTH DAKOTA
035 OHIO
036 OKLAHOMA
037 OREGON
038 PENNSYLVANIA
039 RHODE ISLAND
040 SOUTH CAROLINA
041 SOUTH DAKOTA
042 TENNESSEE
043 TEXAS
044 UTAH
045 VERMONT
046 VIRGINIA
047 WASHINGTON
048 WEST VIRGINIA
049 WISCONSIN
050 WYOMING
051 DISTRICT OF COLUMBIA
052 GENERIC USA
98 DON'T KNOW
99 REFUSED

ask if ca13b=006

CTHANK03 Thank you very much. Those are all the questions I have at this time.
01 CONTINUE

CTHANK03 Muchas gracias. Esas son todas las preguntas que tenía de momento.
01 CONTINUE
ASK IF INCOME=0 AND CALLTYPE=2
Data Processing please code/deliver as one categorical response variable based on responses to this series

CA14. During the past 12 months, was the total combined income of all members of this household …
   (CINCA-CINCH)
   [IF NECESSARY PROBE: Include income from all sources such as: salaries and wages; social security and public assistance; dividends, interest or rent; unemployment and worker's compensation; pensions.]

   YES                      NO
   (CINCA)  a. less than $25,000? .............................................. 01 02 ➔ [SKIP TO A15]
   (CINCB)  b. less than $20,000? .............................................. 01 02 ➔ [SKIP TO selection]
   (CINCC)  c. less than $15,000? .............................................. 01 02 ➔ [SKIP TO selection]
   (CINCD)  d. less than $10,000? .............................................. 01 02

   //For A15, once the person answers 01, ‘YES’ they should get skipped to selection//

A15.

   YES                      NO
   (CINCE)  e. less than $35,000? .............................................. 01 02
   (CINCF)  f. less than $50,000? .............................................. 01 02
   (CINCG)  g. less than $75,000? .............................................. 01 02
   (CINCH)  h. less than $90,000? .............................................. 01 02

99 REFUSED ..............................................
98 DON’T KNOW/NOT SURE ......

A14. Durante los últimos 12 meses, ¿el ingreso total sumado de todos los miembros de este núcleo familiar…
   (INCA-INCH)
   [SI ES NECESARIO; CONSULTE: Incluir ingresos de todas las fuentes, como por ejemplo: salarios y sueldos, seguro social y asistencia pública, dividendos, intereses o rentas, compensación por desempleo y por trabajo, pensiones.]

A14.

   SÍ                      NO
   (INCA)  a. menos de $25.000? .............................................. 01 02 ➔ [PASE A A15]
   (INCB)  b. menos de $20.000? .............................................. 01 02 ➔ [PASE A selección]
   (INCC)  c. menos de $15.000? .............................................. 01 02 ➔ [PASE A selección]
   (INCD)  d. menos de $10.000? .............................................. 01 02

A15.

   YES                      NO
   (INCE)  e. menos de $35,000? .............................................. 01 02
   (INCF)  f. menos de $50,000? .............................................. 01 02
   (INCG)  g. menos de $75,000? .............................................. 01 02
   (INCH)  h. menos de $90,000? .............................................. 01 02

98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

IF CA14A THRU CA15G <>98,99 AND CALLTYPE=2 AND INCOME=0
cA14V  Your Annual Household Income is
[IF cA15H<>02 enter range from code in INC/]
[IF cA15H=02 ENTER “$90,000 or more”/]
Is This Correct?
   1 No, re-ask question [GO TO cA14a]
   2 Yes, correct as is. [CONTINUE]

\[A14V\] Ingresos anuales del hogar son
[IF cA15H<>02 enter range from code in INC/]
[IF cA15H=02 ENTER “$90,000 or more”/]
ES ESTO CORRECTO?
   1 No, re-ask question [GO TO cA14a]
   2 Yes, correct as is. [CONTINUE]

\[IF CA15H=02\]
\[NOT ASKED IN PROGRAM\]
\[DP – IN POST-PROCESSING POPULATE INCI/A15I = 01 IF A15H=02\]

\[INCI\]
   i. $90,000 or more? .........................
\[INCI\]
   i. $90,000 or more?......................... 01  02

//GO TO SECTION B//
### SECTION B: CURRENT SMOKING STATUS

#### SMOKING STATUS DEFINITION BOX

<table>
<thead>
<tr>
<th>Questions</th>
<th>Responses</th>
<th></th>
<th>DK/REF to both B1 and B2</th>
</tr>
</thead>
<tbody>
<tr>
<td>B1. Smoke 100 cigs in life?</td>
<td>yes (by B1 or B2)</td>
<td>no</td>
<td></td>
</tr>
<tr>
<td>B7. Smoke every day, some days, or not at all?</td>
<td>every day, some days, or not at all</td>
<td></td>
<td></td>
</tr>
<tr>
<td>B9. Smoke any cigs in last 30 days?</td>
<td>yes, no, or DK or REF.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>B28 first, then B28a if no answer to B28, to define: How long since smoked?</td>
<td>less than 1 year OR IF UNABLE TO COMPUTE how long since last smoked (IF DK/REF to B28a or B28=0)</td>
<td>1 year or longer</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>SMOKING STATUS</th>
<th>Daily</th>
<th>Nondaily</th>
<th>Recent Former</th>
<th>Established Former</th>
<th>Nonsmoker</th>
<th>Unknown</th>
</tr>
</thead>
</table>

**ASK ALL**

**RECORD TIME ELAPSED IN ALL OF SECTION B**

SEC B

**ASK ALL**

PREB0A First, I have a few general health questions for you.

01 CONTINUE

PREB0A En primer lugar, le haré algunas preguntas generales sobre su salud.

01 CONTINUE

**ASK ALL**

**B0a.** How much do you weigh without shoes?

(WTNOW)

01 Pounds
02 Kilograms
98 Don’t know
99 Refused

**B0a.** ¿Cuánto pesa sin zapatos?

01 Libras
How much do you weigh without shoes?

Round fractions up

¿Cuánto pesa sin zapatos?

CREATE VARIABLE BOAP5 = 5% OF RESPONDENT'S WEIGHT (TO THE NEAREST POUND)

How much do you weigh without shoes?

Round fractions up

¿Cuánto pesa sin zapatos?

CREATE VARIABLE BOAK5 = 5% OF RESPONDENT'S WEIGHT (TO THE NEAREST POUND)

How much do you weigh without shoes?

Round fractions up

¿Cuánto pesa sin zapatos?
IS THIS CORRECT?
1. Yes
2. No [go back to B0aK]

B0aKV Sólo para confirmar, indicó \B0aK: kilogramos como su peso.
01 SÍ
02 NO

**CREATE VARIABLE BOAK5 = 5% OF RESPONDENT'S WEIGHT (TO THE NEAREST KG)**

**ASK ALL**
B0b. How tall are you without shoes?
(HEIGHT)

01 FEET
02 CENTIMETERS
98 DON'T KNOW
99 REFUSED

B0b. ¿Cuánto mide sin zapatos?
01 PIES
02 METROS
98 NO SABE
99 SE NEGÓ A CONTESTAR

**ASK IF B0B=01**
B0BF How tall are you without shoes?

**NOTE:** If respondent answers in metrics, put “9” in column 121.

Round fractions down
[Enter height in Feet and Inches]
[Ex: 5 feet 9 inches would be entered as 509]

---
_ _ / _ _    Height[Range 300-311, 400-411, 500-511, 600-611, 700-711]

¿Cuánto mide sin zapatos?
---
_ _ / _ _    Height[Range 300-311, 400-411, 500-511, 600-611, 700-711]

**ASK IF B0BF=300-407 OR 609-711**
B0BFV Just to double check, you indicated you are /enter feet from B0BF/ FEET /enter inches from B0BF/ INCHES TALL.

IS THIS CORRECT?
1. Yes
2. No, go back to B0BF

B0BFV Sólo para confirmar, indicó que mide /ingresar pies de B0BF/ FEET /ingresar pulgadas de B0BF/ PULGADAS DE ALTURA.
The Attitudes and Behaviors Survey (TABS) on adult health topics, 2012

ASK IF B0B=02
B0BM How tall are you without shoes?
NOTE: If respondent answers in metrics, put “9” in column 126.

Round fractions down
[Enter height in centimeters]
[Ex: 2 meters 5 centimeters would be entered as 205]

--- Height [Range 90-254]

ASK IF B0BM=90-254
B0BMV Just to double check, you indicated you are //B0BM// centimeters tall.

IS THIS CORRECT?
1. Yes
2 No [go back to B0BM]

B0BMV Sólo para confirmar, indicó que mide //ingresar pies de B0BM// FEET //ingresar pulgadas de B0BM// PULGADAS DE ALTURA.

01 SÍ
02 NO

CALCULATE BMI USING ANSWERS FROM B0A AND B0B FOR DOWNSTREAM ALGORITHMS.
CONVERT KG TO POUNDS USING 2.2
CONVERT CM TO INCHES USING 2.54 (THE CONVERSION IS 1 INCH = 2.54 CM)
BMI=703*(WEIGHT IN POUNDS/SQUARED HEIGHT IN INCHES) \

ASK ALL
B0C. Has a doctor or other health care provider ever told you that you have...
1a. high blood pressure? (BPSCREEN)
1b. high cholesterol? (CHOLSCREEN)
1c. diabetes? (DIABSCREEN)

01 YES...........................................
02 NO ..........................................
99 REFUSED...............................
98 DON’T KNOW/UNSURE ........

B0C. ¿Algún médico u otro proveedor de atención médica le ha dicho alguna vez que tiene...
1a. presión arterial alta? (BPSCREEN)
1b. colesterol alto? (CHOLSCREEN)
1c. diabetes? (DIABSCREEN)
01 SÍ
02 NO
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

CREATE FLAG ‘MODULE’
IF B0C1A=01 AND B0C1B=01 AND B0C1C=01 RANDOMLY ASSIGN MODULE = 1 OR 2
(IF RESPONDENT HAS ALL THREE CONDITIONS, RESPONDENT RANDOMLY GETS HIGH BLOOD PRESSURE OR HIGH CHOLESTEROL MODULE)
IF B0C1A=01 AND B0C1B=01 AND B0C1C<>01 SET MODULE=3
(IF RESPONDENT HAS HIGH BLOOD PRESSURE AND HIGH CHOLESTEROL, BUT NOT DIABETES, RESPONDENT GETS HIGH BLOOD PRESSURE AND HIGH CHOLESTEROL MODULES)
IF B0C1A=01 AND B0C1B<>01 SET MODULE=1
(IF RESPONDENT HAS HIGH BLOOD PRESSURE BUT NOT HIGH CHOLESTEROL, RESPONDENT GETS HIGH BLOOD PRESSURE MODULE)
IF B0C1A<>01 AND B0C1B=01 SET MODULE=2
(IF RESPONDENT DOES NOT HAVE HIGH BLOOD PRESSURE BUT DOES HAVE HIGH CHOLESTEROL, RESPONDENT GETS HIGH CHOLESTEROL MODULE)
(ALLE RESPONDENTS WITH DIABETES WILL GET THE DIABETES MODULE – LOGIC WILL BE BASED ON BOC_1C, NOT THE ‘MODULE’ FLAG)

\FOR EACH B0C, 1A-C = 01 (YES), ASK CORRESPONDING B0D, 1A-1C, AND FOR EACH B0C, 1A-C≠ 01, SKIP CORRESPONDING B0D, 1A-1C\n
B0D. To the best of your knowledge, is your...<insert 1a, then 1b, then 1c > now normal, higher than normal, or lower than normal?
1a. blood pressure (BPNL)
1b. cholesterol (CHOLNL)
1c. blood sugar (DIABNL)
01 NORMAL,
02 HIGHER THAN NORMAL
03 LOWER THAN NORMAL
99 REFUSED
98 DON’T KNOW/UNSURE

B0D. Hasta donde usted sabe, ¿es su...<insertar 1a, después 1b, después 1c > actualmente normal, por encima de lo normal o por debajo de lo normal?
1a. presión arterial (BPNL)
1b. colesterol (CHOLNL)
1c. glucosa en sangre (DIABNL)
01 NORMAL,
02 POR ENCIMA DE LO NORMAL
03 POR DEBAJO DE LO NORMAL
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

**ASK ALL**
PREB1 Now I'm going to ask you some questions about cigarette smoking.

01 CONTINUE

Ahora voy a hacerle algunas preguntas sobre el consumo de cigarrillos.

01 CONTINUE

**ASK IF CALLTYPE=2 OR (CALLTYPE=1 AND A14A=03,99) OR LAST NUMBER OF MID = 2 OR IF A6=1**

B1. Have you smoked at least 100 cigarettes in your entire life?
(CIGS100)

01 //SKIP TO B7// .................... YES
02 ........................................... NO
03 //DP – IN POST PROCESSING AUTOCODE FROM B2 WHERE IF B2=100, B1=03. GO TO B7/ YES BECAUSE B2=100
99 REFUSED............................
98 DON'T KNOW/NOT SURE.....

//IF B1=01 OR 03 SKIP TO B7; ELSE CONTINUE//

B1. ¿Ha fumado al menos 100 cigarrillos en toda su vida?
01 SÍ
02 NO

03 //DP – IN POST PROCESSING AUTOCODE FROM B2 WHERE IF B2=100, B1=03. GO TO B7/ YES BECAUSE B2=100

98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

// REFERENCES TO A9/A10=A9/A10 OF THE SELECTED PERSON (IF THEY ARE THE PERSON WHO COMPLETED THE SCREENER //

IF B1=02,98,99 OR (A14A=01,02 AND A9=02,98,99)

B2. What would you say is the total number of cigarettes that you have ever smoked?
(TOTLEVER)

[IF NECESSARY: Your best guess is fine]

[100 = 100 OR MORE CIGARETTES]
//Range = 001-100// ......................
NUMBER OF CIGARETTES........
|____|
B2. ¿Qué cantidad de cigarrillos diría usted que ha fumado en total en su vida?  
[100 = 100 OR MORE CIGARETTES]  
//Range = 001-100// ......................  
NUMBER OF CIGARETTES.......  
\[\_\_\_\_\] →  
//SKIP TO D3 IF <100//.................

000  //SKIP TO PREE1//       NONE  
999  REFUSED  .........................  
998  DON'T KNOW/NOT SURE...

ASK IF B1=01 OR B2=100 OR IF (B1=98,99 AND B2=998,999)  

B7. Do you now smoke cigarettes every day, some days or not at all?  
(DAILY)

01  //GO TO B18// ..... EVERY DAY  
02  //GO TO B10//  .. SOME DAYS  
03  .........................  NOT AT ALL  
99  REFUSED  
98  DON'T KNOW/NOT SURE  

ASK IF B7=01 OR B7=02 OR (B7=98,99)  

B9. Did you smoke any cigarettes during the past 30 days?  
(PAST30)  

[IF NEEDED: When people say they now smoke “not at all,” I’m still  
supposed to ask whether they smoked any cigarettes during the past 30  
days.]  
01  .........................YES  
02  //SKIP TO B28// ..............NO  
99  //SKIP TO B28//.....REFUSED  
98  //SKIP TO B28// DON'T KNOW/NOT SURE............................  

B9. ¿Ha fumado algún cigarrillo durante los últimos 30 días?
On how many of the past 30 days did you smoke cigarettes?

(NumDys)  //Range=00-30//

<table>
<thead>
<tr>
<th>Number of Days</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>99</td>
<td>REFUSED</td>
</tr>
<tr>
<td>98</td>
<td>DON'T KNOW/NOT SURE</td>
</tr>
</tbody>
</table>

On which days do you usually smoke? Would you say...

(Sd_Days)

01 weekdays (Monday through Thursday),
02 weekends (Friday-Sunday); or
03 either a weekday or weekend about equally;
99 REFUSED
98 DON’T KNOW/NOT SURE

B11a. ¿Qué días de la semana fuma generalmente? Diría que… (SD_DAYS)

01 Entre semana (lunes a jueves),
02 Fines de semana (viernes a domingo) o
03 De igual forma entre semana y los fines de semana.

98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

ASK IF B7=02 OR B9=01 OR (A14A=01,02 AND A10=02)

B16. Have you ever smoked daily for 6 months or more? (SMOK6MOS)

01 ........................................................................YES
02 //SKIP TO B19//.............................................NO
99 //SKIP TO B19//..........................REFUSED..................................................
98 //SKIP TO B19//..........................DON’T KNOW/NOT SURE .......................

B16. ¿Alguna vez fumó todos los días durante 6 meses o más? 
01 SÍ
02 NO

98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

//IF B16=01 CONTINUE. ELSE SKIP TO B19//

B17. How long has it been since you smoked on a daily basis? (LASTDLY) (LASTUNI1)

..........................................................................................
01 DAYS..........................
02 WEEKS......................
03 MONTHS....................
04 YEARS .....................
99 REFUSED......................
98 DON’T KNOW/NOT SURE.....

//IF RESPONSE TO B17 IS PRESENT, SKIP TO B19//

B17. ¿Cuánto tiempo ha pasado desde que fumaba a diario?
01 DIAS
02 SEMANA
03 MESES
04 ANOS

98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR
**ASK IF B17=01**

B17D ENTER DAYS [RANGE=0-999]

**ASK IF B17=02**

B17W ENTER WEEKS [RANGE=0-999]

**ASK IF B17=03**

B17M ENTER MONTHS [RANGE=0-999]

**ASK IF B17=04**

B17Y ENTER YEARS [RANGE=0-999]

//IF B7=01 OR (A14A=01,02 AND A10=01) ASK B18 AND B19//

**B18.** How many cigarettes on average do you smoke per day?

(SMKPERDY) [IF NEEDED, 20 cigarettes are usually in a pack]

- [100 = 100 OR MORE CIGARETTES]
  - //RANGE=000-100//
  - _ _ _ NUMBER OF CIGARETTES |
  - 999 REFUSED..............................
  - 998 DON'T KNOW/NOT SURE...

**B18.** ¿Cuántos cigarrillos fuma en promedio por día?

**ASK IF B7=01 OR (A14A=01,02 AND A10=01)**

**B19.** How soon after you awake in the morning do you usually smoke your first cigarette?

(MORNNUM) (MORNUNIT) (IF NEEDED: How many minutes or hours before you smoke your first cigarette?)

- 00 IMMEDIATELY
- 01 MINUTES
- 02 HOURS
- 99 REFUSED..............................
- 98 DON'T KNOW/NOT SURE.....

**B19.** ¿Qué tan pronto después de que se despierta en la mañana suele fumar su primer cigarrillo?

(MORNNUM) (MORNUNIT) (SI FUERA NECESARIO: ¿Cuántos minutos o cuántas horas pasan antes de que fume su primer cigarrillo?)

- 00 INMEDIATAMENTE
- 01 MINUTOS
- 02 HORAS
- 98 NO SABE / NO ESTÁ SEGURO/A
- 99 SE NIEGA A CONTESTAR
ASK IF B19=01

B19M ENTER MINUTES [RANGE=1-120]

ASK IF B19=02

B19H ENTER HOURS [RANGE=1-24]

ASK IF B7=01,02 OR B9=01 OR (A14A=01,02 AND A10=01,02)

B20a. Does the price of cigarettes influence …

(MUCHSMK) a. How much you smoke?..........................
(WHERBUY) b. Where you buy cigarettes?..................
(BRNDBUY) c. The brand you smoke?......................
(DESRQUIT) d. Your desire to quit?......................

01 YES.................................
02 NO ..................................
99 REFUSED..........................
98 DON'T KNOW/NOT SURE....

B20a. ¿El precio de los cigarrillos influye sobre…

a. Cuánto fuma?..........................
b. Dónde compra cigarrillos?..................
c. La marca que fuma?..................
d. Sus deseos de dejarlo?..............

01 SÍ
02 NO
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

ASK IF B7=01,02 OR B9=01 OR (A14A=01,02 AND A10=01,02)

B21b. Do you usually buy cigarettes by the carton or by the pack, or do you roll your own?
(CIGCARTN)

[IF NEEDED: There are 10 packs in one carton]

01 //GO TO B21c// .................CARTON
02 //GO TO B21d// ..................PACK
03 //GO TO B21// ..................ROLL OWN
04 //GO TO B21// ..................DON'T BUY THEM / BUM
FROM OTHERS
05 ................................PACK AND CARTON EQUALLY
B21b. ¿Generalmente compra cigarrillos por cajetilla, paquete o los lía sus propios cigarrillos?
[SI FUERA NECESARIO: Hay 10 paquetes en un cartón]
01 CAJETILLA
02 PAQUETE
03 LOS LÍO
04 NO LOS COMPRE/SE LOS PIDO A OTROS
05 PAQUETES Y CAJETILLAS POR IGUAL
06 PAQUETES/CAJETILLAS/LOS LÍO
95 OTROS
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

ASK IF B21B=95
B21b oth.
ENTER RESPONSE ________________________________

//IF B21B=01, 05, 06, 95, 98, 99 CONTINUE
//IF B21B=02 SKIP TO B21D/
//IF B21B=03, 04 SKIP TO B21/

// IF B21B=01, 05, 06, 95, 98, 99 CONTINUE
preB21c. How much do you usually pay for a carton of cigarettes?
(PAYCARTN)
001 GAVE RESPONSE
999 REFUSED ____________________ [SKIP TO B21e]
998 DON'T KNOW/NOT SURE...

PREB21C. ¿Cuánto paga generalmente por cada cajetilla de cigarrillos?
   _ _ _ NUMBER OF CIGARETTES | | | //RANGE=000-100/

998 NO SABE / NO ESTÁ SEGURO/A
999 SE NIEGA A CONTESTAR

IF PREB21C=001
B21C ENTER AMOUNT /RANGE=1.00-999.99/
IF PREB21C=001

B21CV INTERVIEWER PLEASE VERIFY:
$/INSERT B21C/ for a carton of cigarettes. Is that correct?
   01 CORRECT, CONTINUE
   02 INCORRECT, RE-ENTER PRICE /RESET TO B21C/

B21CV ENTREVISTADOR, VERIFIQUE:
$/INSERT B21C/ por cartón de cigarrillos. ¿Esto es correcto?
   01 CORRECTO, CONTINUAR
   02 INCORRECTO, REINGRESAR PRECIO/VOLVER A B21C/

//IF B21B=05,06, 95, 98, 99 CONTINUE, IF B21B=03, 04, SKIP TO B21E//

IF B21B=02, 05, 06, 95, 98, 99

preB21d. How much do you usually pay for a pack of cigarettes?
   (PAYPACK)
   001 GAVE RESPONSE
   999 REFUSED ...................................
   998 DON'T KNOW/NOT SURE...
preB21d. ¿Cuánto paga generalmente por cada paquete de cigarrillos?

IF PREB21D=001

B21D ENTER AMOUNT /RANGE=1.00-99.99/

IF PREB21D=001

B21DV INTERVIEWER PLEASE VERIFY:
$/INSERT B21D/ for a pack of cigarettes. Is that correct?
   01 CORRECT, CONTINUE
   02 INCORRECT, RE-ENTER PRICE /RESET TO B21D/

B21DV ENTREVISTADOR, VERIFIQUE:
$/ / por paquete de cigarrillos. ¿Esto es correcto?
   01 CORRECTO, CONTINUAR
   02 INCORRECTO, REINGRESAR PRECIO/VOLVER A B21D/
**ASK IF B21B=01,02,05,06,95,98,99**

**B21e.** Do you usually buy your cigarettes in /IF SAMPTYPE=0 INSERT “Colorado” IF SAMPTYPE=1 INSERT A13B/CA13B IF A13B/CA13B=52,98,99 INSERT “the state in which you live”/, in a store out of state, or over the Internet?

(BUYCOLO)

01 IN /IF SAMPTYPE=0 INSERT “Colorado” IF SAMPTYPE=1 INSERT A13B/CA13B IF A13B/CA13B=52,98,99 INSERT “the state in which you live”/
02 IN A STORE OUT OF STATE..............................
03 OVER THE INTERNET........................................

99 REFUSED.....................................................
98 DON’T KNOW/NOT SURE....................................

**B21e.** ¿Generalmente compra cigarrillos en /IF SAMPTYPE=0 INSERT “Colorado” IF SAMPTYPE=1 INSERT A13B/CA13B IF A13B/CA13B=52,98,99 INSERT “the state in which you live”/, en una tienda fuera del estado o por Internet?

(BUYCOLO)

01 EN COLORADO..............................................
02 EN UNA TIENDA FUERA DEL ESTADO............
03 POR INTERNET................................................

98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

**ASK IF B21B=01,02,05,06,95,98,99**

**B30.** When you purchase cigarettes, about how often do you take advantage of coupons, rebates, buy 1 get 1 free, 2 for 1, or any other special promotions? Would you say…

(SEEOFFER)

01 once a week, ......................
02 once a month,.....................
03 once every several months,....
04 twice a year, ......................
05 once a year or .....................
06 Never

[Don’t Read]
99 REFUSED..............................
98 DON’T KNOW/NOT SURE.....

**B30.** Cuando compra cigarrillos, ¿con qué frecuencia aprovecha los cupones, descuentos, compre 1 llévese uno gratis, 2 por 1 o cualquier otra promoción especial? Diría que…

(SEEOFFER)

01 una vez por semana,............
02 una vez por mes,................
03 una vez cada varios meses,...
04 dos veces por año, ..............
05 una vez por año o .............
06 nunca.

98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR
**ASK IF B7=01,02 OR B9=01 OR (A14A=01,02 AND A10=01,02)**

**B21. What brand do you usually smoke?**

* (SMKBRAND)  

<table>
<thead>
<tr>
<th>Brand</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>BENSON &amp; HEDGES</td>
<td>01</td>
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<td>REFUSED</td>
<td>99</td>
</tr>
<tr>
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**B21. ¿Qué marca suele fumar?**

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<td>VANTAGE</td>
<td>13</td>
</tr>
<tr>
<td>VIRGINIA SLIMS</td>
<td>14</td>
</tr>
</tbody>
</table>

01 //SKIP TO B27//Never expect to quit
02 Might quit in the future, but not in the next 6 months, .......
03 Will quit in the next 6 months, or ....................................
04 Will quit in the next month? ................................................

[DO NOT READ]
05 //SKIP TO B28// .......................................................... ALREADY QUIT

99 .................................................................................. REFERED
98 .................................................................................. DON'T KNOW/NOT SURE

//IF B26A=01 SKIP TO B27.IF B26A=05 SKIP TO B28. ELSE CONTINUE//

B26a. ¿Cuál de los siguientes describe mejor sus intenciones con respecto a dejar de fumar? Diría usted que . . .

01 No espera dejar nunca
02 Tal vez deje en el futuro, pero no en los próximos 6 meses
03 Dejará en los próximos 6 meses o .........................
04 Dejará en el próximo mes? .............................................
05 YA DEJÓ
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

**ASK IF (B7=01,02 OR B9=01 OR (A14A=01,02 AND A10=01,02)) AND B26A<>01,05**

B26a1. The next time you decide to quit smoking, what method do you think you'll try?  
[IF NECESSARY, READ RESPONSES:] [Allow multiple answers; probe for 'Anything else'…]

01 COLD TURKEY, WILL POWER
02 NICOTINE SUBSTITUTE [patch, gum, inhaler, spray, nicotine lozenges]
03 ZYBAN [Wellbutrin, bupropion, anti-depressant]
04 HYPNOSIS
05 QUITLINE OR TELEPHONE COUNSELING
06 GRADUALLY REDUCE NUMBER OF CIGS
07 ALTERNATE THERAPIES
08 CLASS OR PROGRAM
09 CHANTIX [Varenicline]
10 E-CIGARETTES
11 DIFFERENT TOBACCO PRODUCT (CHEWING TOBACCO, SNUFF, SNUS DISSOLVABLE TOBACCO PRODUCT SUCH AS TOBACCO STRIPS, STICKS, or ORBS) IF NEEDED: THESE ARE PRODUCTS THAT ARE MADE BY A TOBACCO COMPANY)

95 OTHER (Specify) __________________
99 REFUSED......................................................
98 DON'T KNOW / NOT SURE......................................

B26a1. La próxima vez que decida dejar de fumar, ¿qué método piensa probar?  
[SI ES NECESARIO, LEA LAS RESPUESTAS:] [Permita respuestas múltiples; consulte si hay "algo más"…]

01 DEJARLO EN SECO, CON EL PODER DE MI VOLUNTAD
02 SUSTITUTO DE LA NICOTINA [parche, chicles, inhaladores, spray, pastillas de nicotina]
03 ZYBAN [Wellbutrin, bupropion, antidepresivo]
04 HIPNOSIS
05 LÍNEA PARA DEJAR DE FUMAR O ASESORÍA TELEFÓNICA
06 REDUCIR GRADUALMENTE LA CANTIDAD DE CIGARRILLOS
07 TERAPIAS ALTERNATIVAS
08 CLASE O PROGRAMA
09 CHANTIX [Varenicline]
10 CIGARRILLOS ELECTRÓNICOS
11 CAMBIAR DE PRODUCTO DE TABACO (MASTICAR TABACO, RAPÉ (SNUFF), SNUS, PRODUCTO DE TABACO SOLUBLE COMO TIRAS O BARRITAS DE TABACO U ORBS) SI FUERA NECESARIO: ESTOS SON PRODUCTOS FABRICADOS POR UNA TABACALERA.

95 OTROS

98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

**ASK IF B26A1=95**

B26a1 oth.  
ENTER RESPONSE ___________________________________________
ASK IF (B7=01,02 OR B9=01 OR (A14A=01,02 AND A10=01,02)) AND B26A<>05

B27. How sure are you that you could stop smoking and stay off cigarettes for at least one month? Would you say . . . ? (QUITSURE)

01 Very sure, ............................
02 Somewhat sure, ........................
03 Somewhat unsure, or ............... 
04 Very unsure? ...........................

99 REFUSED .............................
98 DON'T KNOW/NOT SURE .......

B27. ¿Qué tan seguro está de que podría dejar de fumar y no tocar un cigarrillo durante al menos un mes? Diría que: . . .

01 Muy seguro, ............................
02 Algo seguro, ...........................
03 Poco seguro, o ....................... 
04 Muy poco seguro?

98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

ASK IF (B7=01,02 OR B9=01 OR (A14A=01,02 AND A10=01,02)) AND B26A<>05

B26a2. I'm going to read a list of things that could keep a person from quitting smoking even when they want to quit. For each statement, please tell me whether you strongly agree, somewhat agree, neither agree nor disagree, somewhat disagree, or strongly disagree with the statement.

01 CONTINUE

B26a2. Le leeré una lista de cosas que podrían hacer que una persona no dejara de fumar incluso queriendo hacerlo. Para cada frase, dígame si está muy de acuerdo, algo de acuerdo, no está de acuerdo ni en desacuerdo, está algo en desacuerdo o muy en desacuerdo con la frase.

01 CONTINUE

B26a2 [READ IF NECESSARY: I'm going to read a list of things that could keep a person from quitting smoking even when they want to quit. For each statement, please tell me whether you strongly agree, somewhat agree, neither agree nor disagree, somewhat disagree, or strongly disagree with the statement.]

B26a2_01 I enjoy smoking too much to quit.
B26a2_02 I wouldn’t be able to resist the cravings for a cigarette.
B26a2_03 I wouldn’t have any other way to cope with the stress in my life.
B26a2_04 I just don’t have the willpower to quit.
B26a2_05 I would gain too much weight if I quit.
B26a2_06 I would not succeed, then I would feel like a failure.
B26a2_07 I can’t afford the products, medicines, or help I need to quit.
B26a2_08 I just don’t believe I can ever quit.
B26a2_09 Quitting would interfere too much with my social life.

01 STRONGLY AGREE
02 SOMEWHAT AGREE
03 NEITHER AGREE NOR DISAGREE
04 SOMEWHAT DISAGREE
05 STRONGLY DISAGREE
98 DON’T KNOW
99 REFUSED

B26a2_01 Disfruto demasiado de fumar como para dejarlo.
B26a2_02 No podría resistir el ansia por fumar un cigarrillo.
B26a2_03 No tendría otra forma de lidiar con el estrés en mi vida.
B26a2_04 Simplemente no tengo la fuerza de voluntad como para dejar.
B26a2_05 Engordaría demasiado si lo dejara.
B26a2_06 No tendría éxito y me sentiría un fracaso.
B26a2_07 No puedo costearme los productos, medicamentos o ayuda que necesito para dejar.
B26a2_08 Simplemente no creo que pueda dejar nunca.
B26a2_09 Dejar interferiría demasiado con mi vida social.

01 MUY DE ACUERDO
02 ALGO DE ACUERDO
03 NI DE ACUERDO NI EN DESACUERDO
04 ALGO EN DESACUERDO
05 MUY EN DESACUERDO
98 NO SABE
99 SE NEGÓ A CONTESTAR

ASK IF (B7=01,02 OR B9=01 OR (A14A=01,02 AND A10=01,02)) AND B26A<>05

B26A2_95 Is there any other reasons that could keep a person from quitting smoking even when they want to quit?
01 YES
02 NO
98 DON’T KNOW
99 REFUSED

B26A2_95 ¿Hay algún otro motivo que podría impedir que una persona dejara de fumar aun cuando desee dejar de fumar?

01 SÍ
02 NO
98 NO SABE / NO ESTÁ SEGURO/A
B26a2. Now I’ll read a short list of statements and ask you to say whether you strongly agree, somewhat agree, neither agree nor disagree, somewhat disagree, or strongly disagree with the statement.

1 CONTINUE

B26a3. Ahora le leeré una lista breve de frases y le pediré que comente si está muy de acuerdo, algo de acuerdo, no está de acuerdo ni en desacuerdo, está algo en desacuerdo o muy en desacuerdo con la frase.

1 CONTINUE

//IF B26A2_04=01,02
//RANDOMIZE READ ORDER STORE IN RB26A3_A THRU_G (VALUES 1 TO 7)

B26a3. Willpower is one of those things: you either have it or you don’t have it.
B26a3. Nicotine in cigarettes is stronger than a person’s willpower.
B26a3. There are things I could do to increase my willpower.
B26a3. Some days I have lots of willpower to quit, other days I have hardly any.
B26a3. Quit-smoking products like nicotine patches are crutches for people who lack willpower.
B26a3. I don’t think anyone can change how much willpower they have.
B26a3. If cigarettes had zero nicotine, I would have enough willpower to quit.

1 STRONGLY AGREE
2 SOMEWHAT AGREE
3 NEITHER AGREE NOR DISAGREE
4 SOMEWHAT DISAGREE
5 STRONGLY DISAGREE
98 DON’T KNOW
99 REFUSED

//IF RESPONSE TO B26a3 EXISTS, SKIP TO C1//

B26a3. La fuerza de voluntad es una de esas cosas: la tienes o no la tienes.
B26a3. La nicotina de los cigarrillos es más fuerte que la voluntad de una persona.
B26a3. Hay cosas que podría hacer para tener más fuerza de voluntad.
B26a3. Algunos días tengo mucha fuerza de voluntad para dejar y otros casi no la tengo.
**B26a3_05** Los productos para dejar de fumar como los parches de nicotina son muletas para las personas que no tienen fuerza de voluntad.

**B26a3_06** No creo que las personas puedan cambiar la fuerza de voluntad que tienen.

**B26a3_07** Si los cigarrillos no tuvieran nicotina, tendría suficiente fuerza de voluntad como para dejarlos.

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<tr>
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<tr>
<td>02</td>
<td>ALGO DE ACUERDO</td>
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<td>03</td>
<td>NI DE ACUERDO NI EN DESACUERDO</td>
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<td>NO SABE</td>
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<tr>
<td>99</td>
<td>SE NEGÓ A CONTESTAR</td>
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</table>

*ASK IF B9=02,98,99*

**B28.** How long has it been since you last smoked regularly?

(LASTUNI2) (LASTSMO)

*IF NEEDED: Regularly is at least a few cigarettes every few days.*

*IF ASKED: A few is 4 or 5.*

[NEVER SMOKED REGULARLY = 0]

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<tr>
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</tr>
<tr>
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<td>REFUSED--------------------</td>
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*ASK IF B28=01*

**B28D.** ENTER DAYS [RANGE=0-999]
ASK IF B28=02

B28W ENTER WEEKS [RANGE=0-999]

ASK IF B28=03

B28M ENTER MONTHS [RANGE=0-999]

ASK IF B28=04

B28Y ENTER YEARS [RANGE=0-999]

//IF B28=99, OR 98 CONTINUE. ELSE SKIP TO B29//

B28a. Was the last time you smoked regularly more than 12 months ago, that is, before [autodate today minus 365]? (LSTMRYR)

01 YES .....................................................
02 NO .....................................................

99 REFUSED ...........................................
98 DON'T KNOW/NOT SURE .................

B28a. ¿Cuándo fue la última vez que fumó regularmente hace más de 12 meses, o sea, antes de [fecha automática de hoy menos 365]?

01 SÍ
02 NO

98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

IF B9=02,98,99

B29. How long has it been since you smoked any cigarettes at all, even one puff on a cigarette? (LASTPUF) (LASTUNI3)

................................................................................
01 DAYS
02 WEEKS
03 MONTHS
04 YEARS

99 REFUSED..........................................
98 DON'T KNOW/NOT SURE.....

B29. ¿Cuánto tiempo ha transcurrido desde la última vez que fumó un cigarrillo, siquiera una pitada? (LASTPUF) (LASTUNI3)

01 DIAS
02 SEMANA
03 MESES
04 ANOS
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

ASK IF B29=01
B29D ENTER DAYS [RANGE=0-999]

ASK IF B29=02
B29W ENTER WEEKS [RANGE=0-999]

ASK IF B29=03
B29M ENTER MONTHS [RANGE=0-999]

ASK IF B29=04
B29Y ENTER YEARS [RANGE=0-999]

......................................................
SECTION C: RECENT SMOKING HISTORY

[PROGRAMMER: ESTABLISHED FORMER SMOKERS SKIP TO SECTION D]

ASK IF B7=01,02 OR (A14A=01,02 AND A10=01,02) OR B9=01 OR B28D=(0-364) OR B28W=(0-51)
OR B28M=(0-11) OR B28A=02,98,99 OR IF B28=0
RECENT FORMER SMOKER
RECORD TIME ELAPSED IN ALL OF SECTION C

SECC

ASK IF B7=01,02 OR (A14A=01,02 AND A10=01,02) OR B9=01 OR B28D=(0-364) OR B28W=(0-51)
OR B28M=(0-11) OR B28A=02,98,99 OR IF B28=0
RECENT FORMER SMOKER

C1. During the past 12 months, did you quit smoking for one day or longer because you were trying to quit smoking?

(QUITONE)

01 YES
02 NO
99 REFUSED
98 DON'T KNOW/NOT SURE

C1. Durante los últimos 12 meses, ¿dejó de fumar durante un día o más porque estaba intentando dejar de fumar?

01 SÍ
02 NO
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

//IF C1=01 CONTINUE. ELSE SKIP TO C1E//

C1b. During the past 12 months, how many times did you stop smoking for one day or longer because you were trying to quit smoking?

(QUITNUM12)

_ _ NUMBER /RANGE=1-95/
00 NONE
99 REFUSED
98 DON'T KNOW/NOT SURE

//ALL RESPONSES FROM C1b CONTINUE TO C1e//

C1b. Durante los últimos 12 meses, ¿cuántas veces dejó de fumar durante un día o más porque estaba intentando dejar de fumar?

_ _ Numero /RANGE= 1-95
00 NUNCA
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR
ASK IF B7=01,02 OR (A14A=01,02 AND A10=01,02) OR B9=01 OR B28D=(0-364) OR B28W=(0-51) OR B28M=(0-11) OR B28A=02,98,99

RECENT FORMER SMOKER (EXCEPT FOR IF B28=0)

C1e. Since you first started smoking regularly, what is the longest time you have ever gone without smoking a cigarette?

(NOSMKNUM) (NOSMK UNI)

[IF LESS THAN 1 HOUR, CODE AS 1 HOUR; IF NEVER, ENTER 000]

[INTERVIEWER, READ IF NEEDED: WOULD THAT BE IN …?]

00 HOURS
01 DAYS
02 WEEKS
03 MONTHS
04 YEARS
99 REFUSED..............................
98 DON’T KNOW/NOT SURE .... -

C1e. Desde que comenzó a fumar regularmente, ¿cuánto tiempo ha sido el máximo que pasó sin fumar un cigarrillo?

[ENTREVISTADOR, LEA SI ES NECESARIO: ESO SERÍA EN …?]

00 HORAS
01 DÍAS
02 SEMANAS
03 MESES
04 AÑOS
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

ASK IF C1E=00

C1E H ENTER HOURS [RANGE=0-999]

ASK IF C1E=01

C1E D ENTER DAYS [RANGE=0-999]

ASK IF C1E=02

C1E W ENTER WEEKS [RANGE=0-999]

ASK IF C1E=03

C1E M ENTER MONTHS [RANGE=0-999]
ASK IF C1E=04

C1EY ENTER YEARS [RANGE=0-999]

ASK IF C1=01 AND (B7=01,02 OR B9=01 OR (A14A=01,02 AND A10=01,02)) (DAILY OR NON-DAILY SMOKER)

C2. During the past 12 months how long ago was the start of your most recent attempt to quit smoking that lasted for one day or longer? (LASTQUIT) (LASTUNI4)
......................................................
[INTERVIEWER, READ IF NEEDED: WOULD THAT BE IN…?]
01   DAYS
02   WEEKS
03  MONTHS
98  DON'T KNOW/NOT SURE
99  REFUSED...............................

ASK IF C2=01

C2D ENTER DAYS [RANGE=0-999]

ASK IF C2=02

C2W ENTER WEEKS [RANGE=0-999]

ASK IF C2=03

C2M ENTER MONTHS [RANGE=0-999]

ASK IF C1=01 AND (B7=01,02 OR B9=01 OR (A14A=01,02 AND A10=01,02)) (DAILY OR NON-DAILY SMOKER)

C14. How long did you stay off cigarettes during the most recent attempt to quit smoking? (QUITOFF) (QUITOFFU)
[INTERVIEWER, READ IF NEEDED: WOULD THAT BE IN …?]
01   DAYS
02   WEEKS
03 MONTHS
99 ...........................................REFUSED
98 .....DON'T KNOW/NOT SURE

C14. ¿Cuánto tiempo dejó de fumar durante su intento más reciente por dejarlo?
01 DIAS
02 SEMANA
03 MESES

98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

ASK IF C14=01
C14D ENTER DAYS [RANGE=0-999]

ASK IF C14=02
C14W ENTER WEEKS [RANGE=0-999]

ASK IF C14=03
C14M ENTER MONTHS [RANGE=0-999]

ASK IF C1=01
C3. For this most recent attempt, did you use any of the following to adjust to life without cigarettes:

Did you use...
01 continue

C3. Para este ultimo intento, ¿utilizó alguno de los siguientes para adaptarse a la vida sin cigarrillos:

Utilizó...
01 continue

[READ IF NECESSARY: For this most recent attempt, did you use any of the following to adjust to life without cigarettes:

Did you use...

(Helpgrp) C4a. Group counseling?
(HELPONE) C4b. One-on-one counseling?
(HELPINET) C4e. a site on the internet?
(HELPMOB) C4f. a mobile phone app or text messaging?

//USE THE FOLLOWING RESPONSE OPTIONS FOR C4a-C4f//
01 YES ............................................
02 NO .............................................
The Attitudes and Behaviors Survey (TABS) on adult health topics, 2012

C3. [READ IF NECESSARY: Para este ultimo intento, ¿utilizó alguno de los siguientes para adaptarse a la vida sin cigarrillos:

Utilizó...]

(HELPGRP) C4a. Terapia grupal?
(HELPONE) C4b. Terapia personalizada?
(HELPINET) C4e. Un sitio de Internet?
(HELPMOB) C4f. Una aplicación móvil o mensajes de texto?

01 SÍ
02 NO
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

ASK IF C1=01

C5. For this most recent attempt to quit smoking, did you use a nicotine substitute such as . . .

01 CONTINUE

C5. En este intento más reciente de dejar de fumar, utilizó un sustituto de la nicotina como... . .

01 CONTINUE

[READ IF NECESSARY: For this most recent attempt to quit smoking, did you use a nicotine substitute such as . . .]

(NICPATCH) C5a. Nicotine patches
(NICGUM) C5b. Nicotine gum?
(NICINHA) C5c. A Nicotine inhaler or spray?
(NICLOZ) C5d. Nicotine lozenges?

//USE THE FOLLOWING RESPONSE OPTIONS FOR C5a-C5d//

01 YES ...............................................
02 NO ............................................... 

99 REFUSED ........................................
98 DON'T KNOW/NOT SURE............

C5. [READ IF NECESSARY: En este intento más reciente de dejar de fumar, utilizó un sustituto de la nicotina como... . .]

(NICPATCH) C5a. Parches de nicotina
(NICGUM) C5b. Chicles de nicotina?
(NICINHA) C5c. Un inhalador o aerosol de nicotina?
(NICLOZ) C5d. Pastillas de nicotina?

01 SÍ
02 NO
C6. How long did you use the nicotine substitute(s) for this most recent attempt to quit smoking? (NICNUM) (NICUNIT)
   [TOTAL TIME USING ONE OR MORE NICOTINE SUBSTITUTES]
   [INTERVIEWER, IF NEEDED: WOULD THAT BE IN…?]
   01 DAYS
   02 WEEKS
   03 MONTHS
   04 YEARS
   99 REFUSED
   98 DON'T KNOW/NOT SURE

ASK IF C6=01
C6D ENTER DAYS [RANGE=0-999]

ASK IF C6=02
C6W ENTER WEEKS [RANGE=0-999]

ASK IF C6=03
C6M ENTER MONTHS [RANGE=0-999]

ASK IF C6=04
C6Y ENTER YEARS [RANGE=0-999]

IF C5A=1 OR C5B=1 OR C5C=1 OR C5D=1
C8. Who paid for your nicotine substitute? Was it…
01 You completely,
02 You partially, and partially paid by health insurance or medical benefits, [IF NEEDED: this does not include health spending accounts.]
03 Completely paid by health insurance or medical benefits, or
04 Provided free by the /IF SAMPTYPE=0 INSERT “Colorado QuitLine” IF SAMPTYPE=1 INSERT NAME OF QUITLINE BY A13B/CA13B”?

[DO NOT READ]:
05 FREE FROM A RELATIVE OR FRIEND
06 FREE FROM EMPLOYER
95 OTHER (Specify:___________________)

99 REFUSED
98 DON’T KNOW/NOT SURE

C8. ¿Quién pagó por su sustituto de nicotina? ¿Fue...
01 Usted enteramente,
02 Usted en parte, y en parte su seguro médico o beneficios médicos, [SI FUERA NECESARIO: esto no incluye las cuentas de gastos médicos.]
03 Pago completamente por el seguro médico o los beneficios médicos, o
04 Proporcionado gratis por la /IF SAMPTYPE=0 INSERT “Colorado QuitLine” IF SAMPTYPE=1 INSERT QUITLINE ASSOCIATED WITH A13B/CA13B QUITLINE/?

[NO LEER]:
05 GRATIS DE UN PARIENTE O AMIGO
06 GRATIS DEL EMPLEADOR

95 OTRO

98 NO SABE / NO ESTÁ SEGURO/A

99 SE NIEGA A CONTESTAR

ASK IF C8=95

C8 oth.
ENTER RESPONSE ________________________________

ASK IF C1=01

C9. For this last attempt to quit smoking, did you use a prescription medication called:
01 CONTINUE

C9. En este último intento por dejar de fumar, utilizó un medicamento recetado llamado:
01 CONTINUE

[READ IF NECESSARY: For this last attempt to quit smoking, did you use a prescription medication called:]

(ZYBAN) C9a. Zyban (or Wellbutrin or bupropion)?
(CHANTIX) C9b. Chantix (or varenicline)
(OTHERAD) C9c. Any other medication to help you quit smoking besides nicotine?(Specify:_____)

ASK IF C1=01
C9. [READ IF NECESSARY: En este último intento por dejar de fumar, utilizó un medicamento recetado llamado:] 

(ZYBAN) C9a. Zyban (o Wellbutrin o bupropion)?
(CHANTIX) C9b. Chantix (o vareniclina)
(OTHERAD) C9c. Cualquier otro medicamento para ayudarle a dejar de fumar sin ser nicotina? (Especificar: _____)

01 SÍ
02 NO
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

ASK IF C9C=01
C9c oth.
ENTER RESPONSE ____________________________

//IF C9A=1 OR C9B=1 OR C9C=1 CONTINUE; ELSE SKIP TO C15//

C10. How long did you use the prescription medication for this most recent attempt to quit smoking?

(ANTNUM) (ANTIUNIT)

[INTERVIEWER, READ IF NEEDED: WOULD THAT BE IN …]

01 DAYS
02 WEEKS
03 MONTHS
04 YEARS
99 REFUSED.............................
98 DON’T KNOW/NOT SURE......

If c10=01
If c10=02
If c10=03

C10. ¿Durante cuánto tiempo utilizó los medicamentos recetados en el intento más reciente por dejar de fumar?

[ENTREVISTADOR, LEA SI ES NECESARIO: ESO SERÍA EN …]

01 DIAS
02 SEMANAS
03 MESES
04 ANOS

98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR
ASK IF C10=01
C10D ENTER DAYS [RANGE=0-999]

ASK IF C10=02
C10W ENTER WEEKS [RANGE=0-999]

ASK IF C10=03
C10M ENTER MONTHS [RANGE=0-999]

ASK IF C10=04
C10Y ENTER YEARS [RANGE=0-999]

IF C9A=1 OR C9B=1 OR C9C=1
C12. Who paid for your prescription? Was it: (PAYANTI)

READ LIST
01 You completely,
02 You partially, and partially paid by health insurance or medical benefits [IF NEEDED: this does not include health spending accounts.], or
03 Completely paid by health insurance or medical benefits?

DO NOT READ:
04 FREE SAMPLES
05 FREE FROM EMPLOYER
95 OTHER (Specify:___________________)

99 REFUSED
98 DON'T KNOW/NOT SURE

C12. ¿Quién pagó por sus recetas? ¿Fue:

LEER LISTA
01 Usted enteramente,
02 Usted en parte, y en parte su seguro médico o beneficios médicos, [SI FUERA NECESARIO: esto no incluye las cuentas de gastos médicos.], o
03 Pago completamente por el seguro médico o los beneficios médicos?

NO LEER:
04 MUESTRAS GRATIS
05 GRATIS DEL EMPLEADOR

98 NO SABE / NO ESTÁ SEGURO/A

99 SE NIEGA A CONTESTAR
ASK IF C12=95

C12 other.
ENTER RESPONSE ___________________________________________

ASK IF B7=01,02 OR (A14A=01,02 AND A10=01,02) OR B9=01 B28D=(0-364) OR B28W=(0-51) OR B28M=(0-11) OR B28A=02,98,99 OR IF B28=0
DAILY OR NON-DAILY SMOKER OR RECENT FORMER SMOKER

C15. Have you heard of the /IF SAMPTYPE=0 INSERT “Colorado QuitLine” IF SAMPTYPE=1 INSERT QUITLINE ASSOCIATED WITH A13B/CA13B QUITLINE/?

(QUITLINE)
[IF ASKED: It’s a free telephone counseling service to help people quit smoking.]
[IF ASKED: The number is 1-800-QUIT-NOW.]
01 YES
02 NO
99 REFUSED
98 DON’T KNOW/NOT SURE

C15. ¿Ha oído hablar de la /IF SAMPTYPE=0 INSERT “Colorado QuitLine” IF SAMPTYPE=1 INSERT QUITLINE ASSOCIATED WITH A13B/CA13B QUITLINE/?

[SI LE PREGUNTAN: Es un servicio de orientación telefónica para ayudar a las personas a dejar de fumar.]
[SI LE PREGUNTAN: El número es 1-800-QUIT-NOW.]
01 SÍ
02 NO
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

//IF C15=01 CONTINUE; ELSE SKIP TO C17//

C15b. Have you ever called the /IF SAMPTYPE=0 INSERT “Colorado QuitLine” IF SAMPTYPE=1 INSERT QUITLINE ASSOCIATED WITH A13B/CA13B QUITLINE/?

(CALLQUIT)
01 YES
02 NO
99 REFUSED
98 DON’T KNOW/NOT SURE

C15b. ¿Ha llamado alguna vez a la Colorado QuitLine?
01 SÍ
02 NO
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR
C15bb. Have you called the "Colorado QuitLine" in the past 12 months?

- **01** YES
- **02** NO
- **99** REFUSED
- **98** DON’T KNOW/NOT SURE

**IF C15BB=02, 99, 98**

C15c. In the past 12 months, have you called a telephone helpline other than the "Colorado QuitLine"?

- **01** YES
- **02** NO
- **99** REFUSED
- **98** DON’T KNOW/NOT SURE

**IF C15=01, 99, 98**

C15d. What best describes your intentions regarding calling the "QuitLine" in the future? Would you say you...

- **01** Never expect to call the "QuitLine".
- **02** Might call the "QuitLine" in the future, but not in the next 6 months.
- **03** Will call the "QuitLine" in the next 6 months, or
- **04** Will call the "QuitLine" in the next month?
- **99** REFUSED
98 DON'T KNOW/NOT SURE

C15d. ¿Cuál de los siguientes describiría mejor sus intenciones acerca de llamar a la /IF SAMPTYPE=0 INSERT "QuitLine" IF SAMPTYPE=1 INSERT QUITLINE ASSOCIATED WITH A13B/CA13B QUITLINE/en el futuro? Diría usted que…. [LEER RESPUESTAS]

(QLIENTENT)

01 No espera llamar nunca a la QL,
02 Tal vez llame a la QL en el futuro, pero no en los próximos 6 meses,
03 Llamará a la QL en los próximos 6 meses o
04 Llamará a la QL en el próximo mes?

98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

ASK IF B7=01,02 OR (A14A=01,02 AND A10=01,02) OR B9=01 OR B28D=(0-364) OR B28W=(0-51) OR B28M=(0-11) OR B28A=02,98,99 OR IF B28=0 DAILY, NON-DAILY SMOKER OR RECENT FORMER SMOKER

C17. Have you ever used a smokeless tobacco product such as chew, dip, snuff, snus, e-cigarettes, or dissolvable tobacco products because you were in a situation in which you could not smoke?

(SMKLESS)

01 YES
02 NO
99 REFUSED
98 DON'T KNOW/NOT SURE

//RECENT FORMER SMOKERS SKIP TO D3//

//ASK C18 of CURRENT SMOKERS AND NONDAILY SMOKERS//

C17. ¿Alguna vez ha utilizado un producto de tabaco sin humo como chicles, dip, rapé (snuff), snus, cigarrillos electrónicos productos de tabaco soluble porque atravesó una situación en la que no podía fumar?

01 SÍ
02 NO

98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

ASK IF B7=01,02 OR (A14A=01,02 AND A10=01,02) OR B9=01

C18. Would you replace your cigarettes with a smokeless tobacco product if you thought it had fewer health consequences? Would you say. . .

(REPLACE)

[READ LIST]

01 Definitely yes,,
02 Probably yes,
03 Probably not, or
04 Definitely not?
C18. ¿Cambiaría sus cigarrillos por un producto de tabaco sin humo si creyera que tienen menos consecuencias para su salud? Diría... . .

01 Definitivamente sí
02 Probablemente sí,
03 Probablemente no, o
04 Definitivamente no

98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR
SECTION D: LIFETIME SMOKING HISTORY

(B1=01 OR 03)/ OR (B2=100) OR (A14A=01,02 AND A9=01,03)/RECORD TIME ELAPSED IN ALL OF SECTION D

SECD

//SECTION D ASKED OF ALL EVER-SMOKERS.EVER SMOKERS: (B1=01 OR 03)/ OR (B2=100) OR (A14A=01,02 AND A9=01,03)/

D3. How old were you when you first began to smoke cigarettes regularly?
(SMKAGE) //USE “97” for 97 AND OLDER//

[IF ASKED: Regularly is at least a few cigarettes every few days.]  
[IF ASKED: A few means at least every 4 or 5 days.]

|_[_]_| YEARS OLD /RANGE=5-97/  
00 NEVER SMOKED REGULARLY →// SKIP TO E1//

99 REFUSED  
98 DON’T KNOW/NOT SURE

//IF D3=000, SKIP TO E1//  
//IF B2= 1-99, SKIP TO E1//  
//ESTABLISHED FORMER SMOKERS SKIP TO E1//

D3. ¿A qué edad comenzó a fumar cigarrillos en forma regular?  
[SI LE PREGUNTAN: En forma regular es al menos algunos cigarrillos cada pocos días.]  
[SI LE PREGUNTAN: Cada pocos días es al menos cada 4 ó 5 días.]

|_[_]_| ANOS /RANGE = 5-97/  
00 NUNCA

98 NO SABE / NO ESTÁ SEGURO/A  
99 SE NIEGA A CONTESTAR

ASK IF B7=01,02 OR (A14A=01,02 AND A10=01,02) OR B9=01 OR B28D=(0-364) OR B28W=(0-51) OR B28M=(0-11) OR B28A=02,98,99 OR IF B28=0  
DAILY, NON-DAILY OR RECENT FORMER SMOKER

D6. Twelve months ago, did you smoke every day, some days, or not at all?
(DAILY12)

01 EVERY DAY  
02 SOME DAYS  
03 NOT AT ALL

99 REFUSED  
98 DON’T KNOW/NOT SURE

//IF D6=01 SKIP TO D9//  
//IF D6=03 SKIP TO E1//

D6. ¿Hace 12 meses, fumaba cigarrillos todos los días, algunos días o nunca?
01 TODOS LOS DÍAS
02 ALGUNOS DÍAS
03 NUNCA
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

ASK IF D6=02,98,99
D7. And, 12 months ago, about how many days a month did you smoke?
(NUMDYS12)
__--NUMBER OF DAYS [RANGE=1-30]
99 REFUSED.............................
98 DON'T KNOW/NOT SURE..... -

D7. Y hace 12 meses, ¿aproximadamente cuántos días por mes fumaba?
_ _ NUMERO /RANGE = 1-30/
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

ASK IF D6=02,98,99
D8. And, still 12 months ago, on days that you did smoke, about how many cigarettes per day did you smoke?
(PERDAY12)
[100 = 100 OR MORE CIGARETTES]
_ _ _ NUMBER OF CIGARETTES /RANGE=1-100/
999 REFUSED
998 DON'T KNOW/NOT SURE

//IF A RESPONSE EXISTS TO D8, SKIP TO E1//

D8. Y, siguiendo con hace 12 meses, los días que fumaba, ¿aproximadamente cuántos cigarillos fumaba por día?
_ _ _ NUMERO /RANGE = 1-100/
998 NO SABE / NO ESTÁ SEGURO/A
999 SE NIEGA A CONTESTAR

ASK IF D6=01
D9. And, 12 months ago, how many cigarettes per day did you smoke on average?
(SMKPERDY12)[100 = 100 OR MORE CIGARETTES]
___|___ NUMBER OF CIGARETTES /RANGE=1-100/
999 REFUSED
998 DON'T KNOW/NOT SURE
D9. Y hace 12 meses, ¿cuántos cigarrillos por día fumaba en promedio?

_ _ _ NUMERO /RANGE = 1-100/
998 NO SABE / NO ESTÁ SEGURO/A
999 SE NIEGA A CONTESTAR
SECTION E: OTHER TOBACCO USE

ASK ALL
RECORD TIME ELAPSED IN ALL OF SECTION E
SECE

ASK ALL
PREE1 Now I would like to ask about other kinds of tobacco.
01 CONTINUE
PREE1 Ahora quisiera preguntarle sobre otros tipos de tabaco.
01 CONTINUE

ASK ALL
E1. Have you ever used any tobacco products other than cigarettes, such as chewing tobacco, snuff, snus, cigars, e-cigarettes, or dissolvable strips, sticks, or orbs?
(TOBPROD)
01 YES
02 NO
99 REFUSED
98 DON'T KNOW/NOT SURE

ASK ALL
LANG DO NOT READ: INTERVIEWER, WHAT LANGUAGE WAS THIS INTERVIEW CONDUCTED IN?
1 ENGLISH
2 SPANISH

//IF E1=02 SKIP TO F1//

IF E1=01,98,99
E4. Have you ever smoked cigars, cigarillos, or little cigars?
(SMKCIGAR)
01 YES.................................
02 NO .................................
99 REFUSED...........................
98 DON'T KNOW/NOT SURE......

E4. ¿Alguna vez fumó puros (habanos) o puritos (también llamados cigarrillos)?
01 SÍ
02 NO
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR
E5. Have you smoked at least 50 cigars in your entire life?
\[\text{(CIGAR50)}\]
\begin{align*}
01 & \text{YES} \\
02 & \text{NO} \\
99 & \text{REFUSED} \\
98 & \text{DON'T KNOW/NOT SURE}
\end{align*}

E6. Do you now smoke cigars every day, some days or not at all?
\[\text{(CIGARDAY)}\]
\begin{align*}
01 & \text{EVERY DAY} \\
02 & \text{SOME DAYS} \\
03 & \text{NOT AT ALL} \\
99 & \text{REFUSED} \\
98 & \text{DON'T KNOW/NOT SURE}
\end{align*}

E7. Have you ever used chewing tobacco or snuff?
\[\text{(TOBUSE)}\]
\begin{align*}
01 & \text{YES} \\
02 & \text{NO} \\
99 & \text{REFUSED} \\
98 & \text{DON'T KNOW/NOT SURE}
\end{align*}

\[\text{IF E1=01,98,99}\]

E7. ¿Alguna vez utilizó tabaco de mascar o rapé (snuff)?
\[\text{SI FUERA NECESARIO: Marcas como Copenhagen, Skoal, Grizzly Bear, Kodiak}\]
\begin{align*}
01 & \text{SÍ} \\
02 & \text{NO}
\end{align*}
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

//IF E7 =01 CONTINUE; ELSE SKIP TO E10//

E8. Have you used chewing tobacco or snuff at least 20 times in your entire life?
(TOB20)
01 YES.................................
02 NO .................................
99 REFUSED..........................
98 DON'T KNOW/NOT SURE.....

E8. ¿Ha utilizado tabaco de mascar o rapé (snuff) al menos 20 veces en toda su vida?
01 SÍ
02 NO
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

IF E7 =01

E9. Do you now use chewing tobacco or snuff every day, some days, or not at all?
(TOBNOW)
01 EVERY DAY ......................
02 SOME DAYS .....................
03 NOT AT ALL .....................
99 REFUSED..........................
98 DON'T KNOW/NOT SURE.....

E9. ¿Actualmente usa tabaco de mascar o rapé (snuff) todos los días, algunos días o nunca?
01 TODOS LOS DÍAS
02 ALGUNOS DÍAS
03 NUNCA
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

IF E1=01,98,99

E10. Have you ever smoked a Hookah pipe?
[IF NEEDED: “ALSO KNOWN AS A WATERPIPE OR HUBBLY-BUBBLY”]
[HOOKAH IS PRONOUNCED “WHO-KAH”]
(HOOKAH)
01 YES.................................
02 NO .................................
99 REFUSED..........................
98 DON'T KNOW/NOT SURE.....

**E10. ¿Alguna vez fumó una pipa hookah?**
[SÍ FUERA NECESARIO: “TAMBIÉN CONOCIDAS COMO PIPAS DE AGUA O HUBBLY-BUBBLY”]
[HOOKAH SE PRONUNCIARÍA “HUCA” O “JUCA”]
  01 SÍ
  02 NO
  98 NO SABE / NO ESTÁ SEGURO/A
  99 SE NIEGA A CONTESTAR

**E11. Have you ever used snus? (IF NEEDED: Snus is powdered tobacco in a small pouch, like a teabag only smaller.)**
  01 YES.................................
  02 NO .................................
  99 REFUSED...........................
  98 DON'T KNOW/NOT SURE.....

**E11. ¿Alguna vez usó snus? (SI FUERA NECESARIO: Snus es tabaco en polvo en un pequeño bolsito, como un saquito de té, pero más pequeño.)**
  01 SÍ
  02 NO
  98 NO SABE / NO ESTÁ SEGURO/A
  99 SE NIEGA A CONTESTAR

**E12. Have you ever used an electronic cigarette, also called an e-cigarette?**
  01 YES.................................
  02 NO .................................
  99 REFUSED...........................
  98 DON'T KNOW/NOT SURE.....

**E12. ¿Alguna vez ha utilizado un cigarrillo electrónico, conocido también como e-cigarette?**
  01 SÍ
  02 NO
  98 NO SABE / NO ESTÁ SEGURO/A
  99 SE NIEGA A CONTESTAR

**E12. ¿Alguna vez ha utilizado un cigarrillo electrónico, conocido también como e-cigarette?**
  01 SÍ
  02 NO
  98 NO SABE / NO ESTÁ SEGURO/A
  99 SE NIEGA A CONTESTAR
E13. Have you ever used a dissolvable tobacco product, such as strips, sticks or orbs? (IF NEEDED: These are products made by a tobacco company that have tobacco in them.)

01 YES..........................................
02 NO ..........................................
99 REFUSED................................
98 DON’T KNOW/NOT SURE.....

E13. ¿Alguna vez utilizó un producto de tabaco soluble como tiras, barritas u orbs? (SI FUERA NECESARIO: Estos son productos que contienen tabaco fabricados por una compañía tabacalera.)

01 SÍ
02 NO
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR
ASK ALL

SECTION F: SMOKING RESTRICTIONS

RECORD TIME ELAPSED IN ALL OF SECTION F

[PROGRAMMER: ASK OF ALL RESPONDENTS.]

PREF1 Now I’d like to ask about smoking in your home and your workplace.

01 CONTINUE

PREF1 Ahora me gustaría preguntarle sobre fumar en su casa y en su lugar de trabajo.

01 CONTINUE

ASK ALL

F1. Which statement best describes the rules about smoking inside your home? Would you say that smoking inside your home…[READ RESPONSES]

(HOMERULE)

01 is not allowed anywhere,
02 is allowed in some places,
03 is allowed sometimes or for some people, or
04 is allowed everywhere?
05 NO RULES

95 OTHER (Specify):________________________

99 REFUSED..................................................................................................

98 DON’T KNOW/NOT SURE........................................................................

IF F1=95

F1 oth.

ENTER RESPONSE ________________________________
**ASK ALL**

**F4.** In the past 30 days, has anyone, including yourself, smoked cigarettes, cigars or pipes anywhere inside your home?

(SMOKHOME)

01 YES ........................................
02 NO ..........................................

99 REFUSED ..............................
98 DON’T KNOW/NOT SURE ....

**F4.** En los últimos 30 días, ¿alguien, incluyéndolo a usted mismo, ha fumado cigarrillos, puros (habanos) o pipas en cualquier lugar dentro de su casa?

01 SÍ
02 NO

98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

**ASK ALL**

**F5.** Which statement best describes the rules about smoking in your personal vehicle? Would you say that smoking in your personal vehicle… [READ RESPONSES]

(AUTORULE)

01 is never allowed, ...................................................................
02 is allowed sometimes, ..........................................................
03 is allowed with the windows open, or ...................................
04 there are no rules about smoking inside your vehicle? ........
05 DON'T HAVE A VEHICLE ..................................................

95 OTHER (Specify):________________________ ................

99 REFUSED ............................................................................
98 DON’T KNOW/NOT SURE .................................................

**F5.** ¿Qué frase describe mejor las reglas acerca de fumar en el interior de su vehículo personal? ¿Diría usted que fumar dentro de su vehículo personal … [LEER RESPUESTAS]

01 no está permitido nunca, .................................
02 está permitido a veces, .................................
03 está permitido con las ventanas abiertas, o ..........
04 no hay reglas sobre fumar dentro de su vehículo? ......
05 NO TENGO UN VEHÍCULO ..........................

98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

**ASK IF F5=95**

F5 oth.

ENTER RESPONSE _______________________________________________
**ASK ALL**

**F6.** In the last 12 months, have you ever asked someone not to smoke around you or your family?

*(NOTSMOK-P2NOTSMOK)*

01 YES
02 NO
99 REFUSED
98 DON’T KNOW/NOT SURE

**F6.** En los últimos 12 meses, ¿alguna vez le pidió a alguien que no fumara cerca suyo o de su familia?

01 SÍ
02 NO
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

**ASK ALL**

**F7a.** While working at your job, do you drive a taxi, truck or other vehicle more than half the time that you are working?

*(WRKDRV)*

01 YES
02 NO → [SKIP TO F7]
03 DON’T WORK → [SKIP TO F13]
99 REFUSED → [SKIP TO F7]
98 DON’T KNOW/NOT SURE → [SKIP TO F7]

//IF F7A=03 SKIP TO F13//
//IF F7A=01 CONTINUE//
//ELSE SKIP TO F7//

**F7a.** En su trabajo, ¿conduce un taxi, camión u otro vehículo más de la mitad del tiempo mientras trabaja?

01 SÍ
02 NO
03 NO FUNCIONA
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

**IF F7A=01**

**F7b.** Which of the following best describes the official policy about smoking in the vehicle? Would you say smoking is …

*(DRVPLCY)*

01 not allowed at all, .................................................................
02 not allowed for you but allowed for your passengers, or ....
03 allowed for anyone? .............................................................
04 NO POLICY ........................................................................
¿Cuál de los siguientes describe mejor la política oficial acerca de fumar dentro del vehículo? ¿Diría usted que fumar... [LEER RESPUESTAS]

**F7b.**

<table>
<thead>
<tr>
<th>Código</th>
<th>Descripción</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>no está permitido en absoluto</td>
</tr>
<tr>
<td>02</td>
<td>no está permitido para usted pero sí para sus pasajeros, o</td>
</tr>
<tr>
<td>03</td>
<td>está permitido para todos?</td>
</tr>
<tr>
<td>04</td>
<td>NO POLITICA</td>
</tr>
</tbody>
</table>

98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

---

**F7.** Mientras está haciendo su trabajo, ¿está usted en el interior la mayoría del tiempo?

<table>
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<tr>
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<tbody>
<tr>
<td>01</td>
<td>SÍ</td>
</tr>
<tr>
<td>02</td>
<td>NO</td>
</tr>
</tbody>
</table>

98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

---

**F10.** En los últimos 30 días, ¿alguien, incluyéndolo a usted mismo, ha fumado cigarrillos, puros (habanos) o pipas en algún lugar dentro de su lugar de trabajo?

<table>
<thead>
<tr>
<th>Código</th>
<th>Descripción</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>SÍ</td>
</tr>
<tr>
<td>02</td>
<td>NO</td>
</tr>
</tbody>
</table>

98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR
ASK ALL

F13. In /*IF SAMPTYPE=0 INSERT “Colorado” IF SAMPTYPE=1 INSERT A13B/CA13B IF A13B/CA13B=52,98,99 INSERT “the state in which you live”*/, in the past 6 months, have you had to experience someone smoking near you at any other place besides your home or your workplace? (COSMK)

  01  ................................................ YES
  02  // SKIP TO F16// .............................. NO

  99  // SKIP TO F16// ......................... REFUSED
  98  // SKIP TO F16// .............................. DON’T KNOW/NOT SURE .....................

F13. En /*IF SAMPTYPE=0 INSERT “Colorado” IF SAMPTYPE=1 INSERT A13B/CA13B IF A13B/CA13B=52,98,99 INSERT “el estado en el que vive”*/, en los últimos 6 meses, ¿ha tenido le ha pasado que alguien fume cerca de usted en cualquier otro lugar aparte de su casa o su lugar de trabajo? (COSMK)

      01 SÍ
      02 NO

      98 NO SABE / NO ESTÁ SEGURO/A
      99 SE NIEGA A CONTESTAR

//IF F13=01 CONTINUE; ELSE SKIP TO F16//

F14. In /*IF SAMPTYPE=0 INSERT “Colorado” IF SAMPTYPE=1 INSERT A13B/CA13B IF A13B/CA13B=52,98,99 INSERT “the state in which you live”*/, the last time this happened, what kind of place were you in? (COWHERE)

  01  .................................................................. RESTAURANT
  02  .................................................................. RESTAURANT BAR
  03  .................................................................. BAR OR TAVERN
  04  // SKIP TO F16// ...................................... POOL HALL
  05  // SKIP TO F16// ...................................... SHOPPING MALL
  06  // SKIP TO F16// ...................................... PUBLIC PARK/OUTDOORS
  07  // SKIP TO F16// ...................................... COMMUNITY EVENT
  08  // SKIP TO F16// ...................................... SPORTS EVENT
  09  // SKIP TO F16// ...................................... OTHER PERSON’S HOME
  10  // SKIP TO F16// ...................................... OTHER PERSON’S AUTOMOBILE
  11  // SKIP TO F16// ...................................... GAME ROOM/CASINO/BINGO HALL

      95  // SKIP TO F15// .................................. OTHER(Specify)_________________

      99  // SKIP TO F15// .................................. REFUSED
  98  // SKIP TO F15// .............................. DON’T KNOW/NOT SURE

F14. En /*IF SAMPTYPE=0 INSERT “Colorado” IF SAMPTYPE=1 INSERT A13B/CA13B IF A13B/CA13B=52,98,99 INSERT “el estado en el que vive”*/, la última vez que esto pasó, ¿en qué tipo de lugar se encontraba usted?

      01  .................................................................. RESTAURANTE
      02  .................................................................. BAR DEL RESTAURANTE
      03  .................................................................. BAR O TABERNA
      04  ......................................................... SALA DE POOL
      05  ......................................................... CENTRO COMERCIAL
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06 .......................................................... PARQUE PÚBLICO / EXTERIOR
07 .......................................................... EVENTO COMUNITARIO
08 .......................................................... EVENTO DEPORTIVO
09 .......................................................... HOGAR DE OTRA PERSONA
10 .......................................................... AUTOMÓVIL DE OTRA PERSONA
11 .......................................................... SALA DE JUEGOS / CASINO / SALA DE

BINGO

95 OTROS
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

 IF F14=95
F14 oth. //SKIP TO F16//

ENTER RESPONSE __________________________________________

 //IF F14=01-03 CONTINUE; ELSE SKIP TO F16//

F14b. Was this an indoor or outdoor part of the restaurant or bar? (COINOUT)

01 INDOOR.................................
02 OUTDOOR.............................

99 REFUSED............................... 98 DON'T KNOW/NOT SURE ....

F14b. ¿Sucedió esto en el interior o exterior del restaurante o bar?

01 INTERIOR
02 EXTERIOR
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

ASK ALL

F16. About what percent of /IF SAMPTYPE=0 INSERT “Colorado” IF SAMPTYPE=1 INSERT A13B/CA13B IF A13B/CA13B=52,98,99 INSERT “the state in which you live”/adults do you think smoke cigarettes? If you aren’t sure, please tell me your best guess. (SMKPCTAD)

|   |   | % {enter number in whole percent RANGE=0-100}
999 ........................................................... REFUSED
998 ........................................................... DON'T KNOW/NOT SURE
**F16.** ¿Qué porcentaje de adultos de /IF SAMPTYPE=0 INSERT “Colorado” IF SAMPTYPE=1 INSERT A13B/CA13B IF A13B/CA13B=52,98,99 INSERT “the state in which you live”/diría usted que fuma cigarrillos? Si no está seguro, haga una estimación.

{ingresar cantidad en porcentaje entero RANGO=0-100}

_ _ NUMERO /RANGE = 0-100/

998 NO SABE / NO ESTÁ SEGURO/A
999 SE NIEGA A CONTESTAR

**ASK ALL**

**F17.** About what percent of /IF SAMPTYPE=0 INSERT “Colorado” IF SAMPTYPE=1 INSERT A13B/CA13B IF A13B/CA13B=52,98,99 INSERT “the state in which you live”/youth under age 18 do you think smoke cigarettes? If you don't know, please tell me your best guess.

(SMKPCTYO)

|___| % {enter number in whole percent RANGE=0-100}

999 ______________________________............. REFUSED
998 ____________________________ DON'T KNOW/NOT SURE

**F17.** ¿Qué porcentaje aproximado de jóvenes de /IF SAMPTYPE=0 INSERT “Colorado” IF SAMPTYPE=1 INSERT A13B/CA13B IF A13B/CA13B=52,98,99 INSERT “the state in which you live”/menores de 18 años diría usted que fuma cigarrillos? Si no lo sabe, haga una estimación.

_ _ NUMERO /RANGE = 0-100/

998 NO SABE / NO ESTÁ SEGURO/A
999 SE NIEGA A CONTESTAR

**ASK ALL**

**F18.** How many of your close friends and relatives smoke? Would you say… [READ RESPONSES]

(SMKFRNDS)

00 ______________________________............. none,
01 ______________________________............. a few,
02 ______________________________............. less than half,
03 ______________________________............. about half,
04 ______________________________............. or most?

99 ______________________________............. REFUSED
98 ______________________________ DON'T KNOW/NOT SURE

**F18.** ¿Cuántos de sus amigos y parientes cercanos fuman? ¿Diría usted que… [LEER RESPUESTAS]

00 ______________________________............. ninguno,
01 ______________________________............. algunos,
02 ______________________________............. menos de la mitad
03 ______________________________............. aproximadamente la mitad,
04 ______________________________ o la mayoría?

98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR
SECTION L: HIGH BLOOD PRESSURE

**ASK IF MODULE=1,3**

**RECORD TIME ELAPSED IN ALL OF SECTION L**

SECL

PREL1 Now I have a few more questions about your high blood pressure.

01 CONTINUE

Ahora tengo algunas preguntas más acerca de su presión arterial alta.

01 CONTINUE

**ASK IF MODULE=1,3**

L1. How old were you when a health care provider first told you that you had high blood pressure? (BPOLD)

|__|__| YEARS OLD [RANGE=5-97]

99 REFUSED

98 DON'T KNOW/UNSURE

L1. ¿Qué edad tenía cuando un proveedor de atención médica le dijo por primera vez que tenía presión arterial alta?

|__|__| ANOS /RANGE = 5-97

98 NO SABE / NO ESTÁ SEGURO/A

99 SE NIEGA A CONTESTAR

**ASK IF MODULE=1,3**

L2. During the last 12 months, have you been told to take prescription medicine because of your high blood pressure? (BPSCRIBE)

01 YES

02 NO

99 REFUSED

98 DON'T KNOW/UNSURE

L2. Durante los últimos 12 meses, ¿le han indicado que tome medicamentos recetados para su presión arterial alta?

01 SÍ

02 NO

98 NO SABE / NO ESTÁ SEGURO/A

99 SE NIEGA A CONTESTAR
**ASK IF MODULE=1,3**

L3. Are you currently taking any prescription medications to control your high blood pressure? (BPMED)

01 YES .................................
02 NO .................................
99 REFUSED ..........................
98 DON’T KNOW/UNSURE...........

**ASK IF MODULE=1,3**

L3. ¿Está tomando algún medicamento recetado actualmente para controlar su presión arterial alta? 01 SÍ
02 NO
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

**ASK IF MODULE=1,3**

L4. On average, how often did you measure your blood pressure at home during the last 12 months? (BPTAKE)

PER DAY ....................................................... 01
PER WEEK .................................................... 02
PER MONTH ................................................. 03
PER YEAR .................................................... 04
NEVER ................................................. 05
98 DON’T KNOW
99 REFUSED

L4. En promedio, ¿con qué frecuencia midió su presión arterial en casa en los últimos 12 meses?

01 DIAS
02 SEMANA
03 MESES
04 ANOS
05 NUNCA

98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

**ASK IF L4=01**

L4D ENTER DAYS [RANGE=0-999]

**ASK IF L4=02**

L4W ENTER WEEKS [RANGE=0-999]

**ASK IF L4=03**

L4M ENTER MONTHS [RANGE=0-999]
ASK IF L4=04

L4 Y ENTER YEARS [RANGE=0-999]

ASK IF MODULE=1,3

L5. Are you currently doing any of the following things to help lower or control your blood pressure? Are you …
01 CONTINUE

L5. ¿Está usted haciendo alguna de las siguientes cosas actualmente para ayudar a controlar su presión arterial? Está usted…
01 CONTINUE

[READ IF NECESSARY: Are you currently doing any of the following things to help lower or control your blood pressure? Are you …]

L5a. changing your eating habits? (IF NEEDED: to help lower or control your blood pressure) (BPEAT)
L5b. cutting down on salt in the food you eat? (IF NEEDED: to help lower or control your blood pressure) (BPSALT)
L5c. cutting down on alcoholic drinks? (IF NEEDED: to help lower or control your blood pressure) (BPETOH)
L5d. exercising? (IF NEEDED: to help lower or control your blood pressure) (BPEXER)

[PROGRAMMER: USE ANSWER CHOICES BELOW FOR for L5a-L5d]:
01 YES
02 NO
99 REFUSED
98 DON’T KNOW/UNSURE

L5. [READ IF NECESSARY: ¿Está usted haciendo alguna de las siguientes cosas actualmente para ayudar a controlar su presión arterial? Está usted…]

L5a. cambiando sus hábitos alimenticios? (SI FUERA NECESARIO: para ayudar a bajar o controlar su presión arterial) (BPEAT)
L5b. bajando el consumo de sal en lo que come? (SI FUERA NECESARIO: para ayudar a bajar o controlar su presión arterial) (BPSALT)
L5c. bajando su consumo de bebidas alcohólicas? (SI FUERA NECESARIO: para ayudar a bajar o controlar su presión arterial) (BPETOH)
L5d. haciendo ejercicio? (SI FUERA NECESARIO: para ayudar a bajar o controlar su presión arterial) (BPEXER)

01 SÍ
02 NO
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

ASK IF MODULE=1,3

L6. How sure are you that you can control your blood pressure? Would you say… [READ LIST] (BPSURE)
The Attitudes and Behaviors Survey (TABS) on adult health topics, 2012

01 Very sure,
02 Somewhat sure,
03 Somewhat unsure, or
04 Very unsure?

99 REFUSED
98 DON'T KNOW/UNSURE

L6. ¿Qué tan seguro está de poder controlar su presión arterial? Diría usted que… .
01 Muy seguro, .........................
02 Algo seguro, .........................
03 Poco seguro, o .....................
04 Muy poco seguro?

98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

ASK IF MODULE=1,3

L7. Have you ever taken an educational course or class to teach you how to control your blood pressure? (BPCLASS)
01 YES ........................................
02 NO ..........................................
99 REFUSED..............................
98 DON'T KNOW/UNSURE...........

L7. ¿Alguna vez tomó un curso educativo o clase para aprender a controlar su presión arterial?
01 SÍ
02 NO

98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

\IF L3=YES, then ask L8a-L8i.

\IF L3=YES, THEN ASK L8A-L8I.
STORE RANDOMIZATION IN ROTL8_A TO ROTL8_I (VALUES 1 TO 9)

L8. Now I'll read some statements about the medicines that your health care provider has prescribed for your high blood pressure. For each statement, please tell me whether you strongly agree, somewhat agree, neither agree nor disagree, somewhat disagree, or strongly disagree.

01 CONTINUE

L8. Ahora le leeré algunas frases sobre los medicamentos que su proveedor de atención médica le recetó para la presión arterial alta. Para cada frase, digame si está muy de acuerdo, algo de acuerdo, no está de acuerdo ni en desacuerdo, está algo en desacuerdo o muy en desacuerdo.

01 CONTINUE

\programmer, randomize read order\ …
[READ ONLY IF NECESSARY: Now I'll read some statements about the medicines that your health care provider has prescribed for your high blood pressure. For each statement, please tell me whether you strongly agree, somewhat agree, neither agree nor disagree, somewhat disagree, or strongly disagree.]
L8a. I understand my doctor’s/nurse’s instructions about the blood pressure medicines I take. (BPMEDA)
L8b. I feel confident that each one of my blood pressure medicines will help me. (BPMEDB)
L8c. I have someone in the health field I can call with questions about my blood pressure medicines. (BPMEDC)
L8d. I have to take too many blood pressure medicines each day. (BPMEDD)
L8e. I worry about how the blood pressure medicines I am supposed to take will affect my health. (BPMEDE)
L8f. I just forget to take my blood pressure medicines some of the time. (BPMEDF)
L8g. I sometimes run out of a blood pressure medicine because I don’t get refills on time. (BPMEDG)
L8h. Taking blood pressure medicines more than once a day is inconvenient. (BPMEDH)
L8i. Sometimes I worry about the cost of my blood pressure medicines. (BPMEDI)

\ ANSWER CHOICES for L8a-L8i \\
01 STRONGLY AGREE ..............
02 SOMEWHAT AGREE ............
03 NEITHER AGREE NOR DISAGREE
04 SOMEWHAT DISAGREE
05 STRONGLY DISAGREE

99 REFUSED .........................
98 DON’T KNOW/UNSURE ....

L8. Ahora le leeré algunas frases sobre los medicamentos que su proveedor de atención médica le recetó para la presión arterial alta. Para cada frase, digame si está muy de acuerdo, algo de acuerdo, no está de acuerdo ni en desacuerdo, está algo en desacuerdo o muy en desacuerdo.

01 CONTINUE
L8a. Comprendo las instrucciones de mi médico o enfermero sobre los medicamentos que tomo para la presión arterial. (BPMEDA)
L8b. Confío en que cada uno de mis medicamentos para la presión arterial me hará bien. (BPMEDB)
L8c. Tengo a alguien en el campo de la salud a quien puedo llamar si tengo preguntas acerca de mis medicamentos para la presión arterial. (BPMEDC)
L8d. Tengo que tomar demasiados medicamentos para la presión arterial todos los días. (BPMEDD)
L8e. Me preocupa cómo afectarán mi salud los medicamentos para la presión arterial que se supone que debo tomar. (BPMEDE)
L8f. Simplemente me olvido de tomar los medicamentos para la presión arterial algunas veces. (BPMEDF)
L8g. Algunas veces se me acaban los medicamentos para la presión arterial porque no me encargo de reponerlos a tiempo. (BPMEDG)
L8h. Tomar medicamentos para la presión arterial más de una vez al día es molesto. (BPMEDH)
L8i. A veces me preocupa el costo de mis medicamentos para la presión arterial. (BPMEDI)

01 MUY DE ACUERDO
02 ALGO DE ACUERDO
03 NI DE ACUERDO NI EN DESACUERDO
04 ALGO EN DESACUERDO
05 MUY EN DESACUERDO
98 NO SABE
99 SE NEGÓ A CONTESTAR
**IF L3=01**

**L9.** Still thinking about the medicines your health care provider has prescribed for your high blood pressure, please tell me if each of the following things happened very often, fairly often, not very often, or never during the past year.

01 CONTINUE

**L9.** Pensando aún en los medicamentos que le ha recetado su proveedor de atención médica para la presión arterial alta, dígame si cada una de las siguientes cosas ha sucedido con mucha frecuencia, con bastante frecuencia, con poca frecuencia o nunca en el último año.

01 CONTINUE

[READ IF NECESSARY: Still thinking about the medicines your health care provider has prescribed for your high blood pressure, please tell me if each of the following things happened very often, fairly often, not very often, or never during the past year.]

| L9a. skipping or stopping a medicine because you didn’t think it was working (BPSKIPA) |
| L9b. skipping or stopping a medicine because it made you feel bad (BPSKIPB) |
| L9c. taking a medicine more or less often than prescribed (BPSKIPC) |
| L9d. skipping, stopping, not refilling, or taking less medicine because of the cost. (BPSKIPD) |

\ ANSWER CHOICES FOR for L9a-L9d\|

01 VERY OFTEN
02 FAIRLY OFTEN
03 NOT VERY OFTEN
04 NEVER

99 REFUSED ..............................
98 DON’T KNOW/UNSURE ........

[READ ONLY IF NECESSARY; Pensando aún en los medicamentos que le ha recetado su proveedor de atención médica para la presión arterial alta, dígame si cada una de las siguientes cosas ha sucedido con mucha frecuencia, con bastante frecuencia, con poca frecuencia o nunca en el último año.]

L9a. saltarse o dejar de tomar un medicamento porque no le parecía que estuviera funcionando (BPSKIPA)
L9b. saltarse o dejar de tomar un medicamento porque lo hacía sentir mal (BPSKIPB)
L9c. tomar un medicamento con mayor o menor frecuencia que lo recetado (BPSKIPC)
L9d. saltarse, detener, no reponer o tomar menos medicamento debido al costo. (BPSKIPD)

01 MUY SEGUIDO
02 CON CIERTA FRECUENCIA
03 NO MUY SEGUIDO
04 NUNCA

98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR
SECTION M: HIGH CHOLESTEROL

ASK IF MODULE=2,3
RECORD TIME ELAPSED IN ALL OF SECTION M

SECM

PREM1 Now I have a few more questions about your high cholesterol.

01 CONTINUE

Ahora tengo algunas preguntas más acerca de su colesterol alto.

01 CONTINUE

ASK IF MODULE=2,3

M1. During the last 12 months, have you been told to take prescription medicine because of your high cholesterol?

(CHSCRIBE)

01 YES.................................
02 NO.................................
99 REFUSED..........................
98 DON'T KNOW/UNSURE........

M1. Durante los últimos 12 meses, ¿le han indicado que tome medicamentos recetados para su colesterol alto?

01 SÍ
02 NO

98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

ASK IF MODULE=2,3

M2. Are you currently taking any prescription medications to control your high cholesterol?

(CHMED)

01 YES.................................
02 NO.................................
99 REFUSED..........................
98 DON'T KNOW/UNSURE........

M2. ¿Está usted tomando algún medicamento recetado actualmente para controlar su colesterol alto?

01 SÍ
02 NO

98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR
**ASK IF M2=01**

M3. Are you currently doing any of the following to help lower or control your high cholesterol?
   M3a. changing your eating habits? (IF NEEDED: to help lower or control your high cholesterol) (CHEAT)
   M3b. exercising? (IF NEEDED: to help lower or control your high cholesterol) (CHEXER)

\ANSWER CHOICES FOR for M3a-M3b\n
   01 YES ........................................
   02 NO ..........................................
   99 REFUSED ..............................
   98 DON’T KNOW/UNSURE...........

M3. ¿Está actualmente haciendo alguna de las siguientes cosas para ayudar a controlar o bajar su colesterol alto?
   M3a. cambiando sus hábitos alimenticios? (SI FUERA NECESARIO: para ayudar a bajar o controlar su colesterol alto) (CHEAT)
   M3b. haciendo ejercicio? (SI FUERA NECESARIO: para ayudar a bajar o controlar su colesterol alto) (CHEXER)
   01 SÍ
   02 NO
   98 NO SABE / NO ESTÁ SEGURO/A
   99 SE NIEGA A CONTESTAR

**ASK IF MODULE=2,3**

M4. How sure are you that you can control your cholesterol level? (CHSURE)

   01 Very sure,.............................
   02 Somewhat sure, .....................
   03 Somewhat unsure, or............... 
   04 Very unsure?..........................
   99 REFUSED .............................
   98 DON’T KNOW/UNSURE

M4. ¿Qué tan seguro está de poder controlar su nivel de colesterol?

   01 Muy seguro, .........................
   02 Algo seguro, ........................
   03 Poco seguro, o .....................
   04 MUY POCO SEGURO?
   98 NO SABE / NO ESTÁ SEGURO/A
   99 SE NIEGA A CONTESTAR

**ASK IF MODULE=2,3**

M5. Have you ever taken an educational course or class to teach you how to control your high cholesterol? (CHCLASS)

   01 YES...........................................
02 NO .............................
99 REFUSED ..........................
98 DON'T KNOW/UNSURE........

\IF M2=01 ("YES") ask M6a-M6i,

**M5. ¿Alguna vez tomó un curso educativo o clase para aprender a controlar su colesterol alto?**

01 SÍ

02 NO

98 NO SABE / NO ESTÁ SEGURO/A

99 SE NIEGA A CONTESTAR

**M6. Now I'll read some statements about the medicines that your health care provider has prescribed for your high cholesterol. For each statement, please tell me whether you strongly agree, somewhat agree, neither agree nor disagree, somewhat disagree, or strongly disagree.**

01 CONTINUE

**M6. Ahora le leeré algunas frases sobre los medicamentos que su proveedor de atención médica le recetó para el colesterol alto. Para cada frase, dígame si está muy de acuerdo, algo de acuerdo, no está de acuerdo ni en desacuerdo, está algo en desacuerdo o muy en desacuerdo.**

01 CONTINUE

\programmer, randomize read order\**

[READ ONLY IF NECESSARY Now I'll read some statements about the medicines that your health care provider has prescribed for your high cholesterol. For each statement, please tell me whether you strongly agree, somewhat agree, neither agree nor disagree, somewhat disagree, or strongly disagree.]

M6a. I understand my doctor's/nurse's instructions about the cholesterol medicines I take. (CHMEDA)

M6b. I feel confident that each one of my cholesterol medicines will help me. (CHMEDB)

M6c. I have someone in the health field I can call with questions about my cholesterol medicines. (CHMEDC)

M6d. I have to take too many cholesterol medicines each day. (CHMEDD)

M6e. I worry about how the cholesterol medicines I am supposed to take will affect my health. (CHMEDE)

M6f. I just forget to take my cholesterol medicines some of the time. (CHMEDF)

M6g. I sometimes run out of a cholesterol medicine because I don’t get refills on time. (CHMEDG)

M6h. Taking cholesterol medicines more than once a day is inconvenient. (CHMEDH)

M6i. Sometimes I worry about the cost of my cholesterol medicines. (CHMEDI)

\ANSWER CHOICES FOR for M6a-M6i\**
M6. [READ IF NECESSARY: Ahora le leeré algunas frases sobre los medicamentos que su proveedor de atención médica le recetó para el colesterol alto. Para cada frase, digame si está muy de acuerdo, algo de acuerdo, no está de acuerdo ni en desacuerdo, está algo en desacuerdo o muy en desacuerdo.]

M6a. Comprendo las instrucciones de mi médico o enfermero sobre los medicamentos para el colesterol que tomo. (CHMEDA)
M6b. Confío en que cada uno de mis medicamentos para el colesterol me hará bien. (CHMEDB)
M6c. Tengo a alguien en el campo de la salud a quien puedo llamar si tengo preguntas acerca de mis medicamentos para el colesterol. (CHMEDC)
M6d. Tengo que tomar demasiados medicamentos para el colesterol todos los días. (CHMEDD)
M6e. Me preocupa cómo afectarán mi salud los medicamentos para el colesterol que se supone que debo tomar. (CHMEDE)
M6f. Simplemente me olvido de tomar los medicamentos para el colesterol algunas veces. (CHMEDF)
M6g. Algunas veces se me acaban los medicamentos para el colesterol porque no me encargo de reponerlos a tiempo. (CHMEDG)
M6h. Tomar medicamentos para el colesterol más de una vez al día es molesto. (CHMEDH)
M6i. A veces me preocupa el costo de mis medicamentos para el colesterol. (CHMEDI)

\ANSWER CHOICES for M6a-M6i\n
01 MUY DE ACUERDO
02 ALGO DE ACUERDO
03 NI DE ACUERDO NI EN DESACUERDO
04 ALGO EN DESACUERDO
05 MUY EN DESACUERDO
98 NO SABE
99 SE NEGÓ A CONTESTAR

IF M2=01

M7. Still thinking about the medicines your health care provider has prescribed for your high cholesterol, please tell me whether the following items happened very often, fairly often, not very often, or never during the past year.

01 CONTINUE

M7. Pensando aún en los medicamentos que le ha recetado su proveedor de atención médica para su colesterol alto, digame si cada una de las siguientes cosas ha sucedido con mucha frecuencia, con bastante frecuencia, con poca frecuencia o nunca en el último año.

01 CONTINUE

[READ ONLY IF NECESSARY: Still thinking about the medicines your health care provider has prescribed for your high cholesterol, please tell me whether the following items happened very often, fairly often, not very often, or never during the past year.]

M7a. skipping or stopping a medicine because you didn’t think it was working (CHSKIPA)
M7b. skipping or stopping a medicine because it made you feel bad (CHSKIPB)
M7c. taking a medicine more or less often than prescribed (CHSKIPC)
M7d. skipping, stopping, not refilling, or taking less medicine because of the cost. (CHSKIPD)

\ANSWER CHOICES for M7a-M7d\n
01 VERY OFTEN
02 FAIRLY OFTEN
[READ ONLY IF NECESSARY: Pensando aún en los medicamentos que le ha recetado su proveedor de atención médica para su colesterol alto, déjame si cada una de las siguientes cosas ha sucedido con mucha frecuencia, con bastante frecuencia, con poca frecuencia o nunca en el último año.]

M7a. Saltarse o dejar de tomar el medicamento porque no le parecía que estuviera funcionando
(CHSKIPA)
M7b. saltarse o dejar de tomar un medicamento porque lo hacía sentir mal (CHSKIPB)
M7c. tomar un medicamento con mayor o menor frecuencia que lo recetado (CHSKIPC)
M7d. saltarse, detener, no reponer o tomar menos medicamento debido al costo. (CHSKIPD)

01 MUY SEGUIDO
02 CON CIERTA FRECUENCIA
03 NO MUY SEGUIDO
04 NUNCA

98 NO SABE / NO ESTÁ SEGURO/A

99 SE NIEGA A CONTESTAR
SECTION N: DIABETES

ASK IF B0C1C=01
RECORD TIME ELAPSED IN ALL OF SECTION N

SECN

PREN1 Now I have a few more questions about your diabetes.

01 CONTINUE

Ahora tengo algunas preguntas más acerca de su diabetes.

01 CONTINUE

ASK IF B0C1C=01

N1. How old were you when a health care provider first told you that you have diabetes? (DIOLD)

|   | YEARS OLD /RANGE=0-97/
|---|---------------------|
| _ | 99 REFUSED
| _ | 98 DON’T KNOW/UNSURE

¿Qué edad tenía cuando un proveedor de atención médica le dijo por primera vez que tenía diabetes?

_ _ ANOS /RANGE = 0-97/

98 NO SABE / NO ESTÁ SEGURO/A

99 SE NIEGA A CONTESTAR

ASK IF B0C1C=01

N2. Were you told that you had Type 1 or Type 2 diabetes? (DITYPE)

|   | Type 1 ....................................
|---|-------------------------------------|
| 01 | Type 2 ....................................
| 02 | 99 REFUSED ................................|
| 03 | 98 DON’T KNOW/UNSURE..............

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

01 Tipo 1 .................................

02 TIPO 2

98 NO SABE / NO ESTÁ SEGURO/A

99 SE NIEGA A CONTESTAR
ASK IF B0C1C=01

N3. During the last 12 months, have you been told to take any prescription medicine because of your diabetes?
(DISCRIBE)

01 YES ........................................
02 NO ..........................................
99 REFUSED ..............................
98 DON'T KNOW/UNSURE ........

N3. Durante los últimos 12 meses, ¿le han indicado que tome medicamentos recetados para su diabetes?
   01 SÍ
   02 NO
   98 NO SABE / NO ESTÁ SEGURO/A
   99 SE NIEGA A CONTESTAR

ASK IF B0C1C=01

N4. Are you currently taking any prescription medications to control your diabetes?
(DIMEDES)

01 YES ........................................
02 NO ..........................................
99 REFUSED ..............................
98 DON'T KNOW/UNSURE ........

N4. ¿Está usted tomando algún medicamento recetado actualmente para controlar su diabetes?
   (DIMEDES)
   01 SÍ
   02 NO
   98 NO SABE / NO ESTÁ SEGURO/A
   99 SE NIEGA A CONTESTAR

IF N4=01

N5. Are you now taking insulin?
(DIINS)

01 YES ........................................
02 NO ..........................................
99 REFUSED ..............................
98 DON'T KNOW/UNSURE ........

N5. ¿Está usted tomando insulina actualmente?
   01 SÍ
   02 NO
   98 NO SABE / NO ESTÁ SEGURO/A
The Attitudes and Behaviors Survey (TABS) on adult health topics, 2012

IF N4=01

N6. Other than insulin, are you now taking any other diabetes pills or injection medicine? (DIPILLS)

01 YES ........................................
02 NO ..........................................
99 REFUSED ..............................
98 DON’T KNOW/UNSURE...........

N6. Aparte de insulina, ¿está usted tomando ahora algún otro medicamento en píldoras o inyectable para la diabetes?

01 SÍ
02 NO
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

ASK IF B0C1C=01

N7. Now I’ll read a list of things that health care providers recommend for people who have diabetes. 01 CONTINUE

N7. Ahora leeré una lista de cosas que los proveedores de atención médica recomiendan para las personas con diabetes.

01 CONTINUE

[READ IF NECESSARY: Now I’ll read a list of things that health care providers recommend for people who have diabetes. ]

N7a. Have you had a foot exam in the last year? (DIFOOT)

N7b. Have you had an eye exam in the last year? (DIEYE)

N7c. Have you had your ‘A one C’ test for blood sugar in the last year? (DIA1C)

[INTERVIEWER: If the respondent does not know what this test is, code as ‘03’]

N7d. Do you take an aspirin every day? (DIASA)

N7e. Have you met with a diabetes educator at least once since you were told you had diabetes? (DIEDUC)

\ANSWER CHOICES FOR for N7a-N7e\\
01 YES ........................................
02 NO ..........................................
03 DOES NOT KNOW WHAT THIS TEST IS
99 REFUSED ..............................
98 DON’T KNOW/UNSURE...........

\IF ANY N7A-N7E=02 ASK N8\\

N7. [READ IF NECESSARY: Ahora leeré una lista de cosas que los proveedores de atención médica recomiendan para las personas con diabetes. ]

N7a. ¿Le han realizado un examen de los pies en el último año? (DIFOOT)
N7b. ¿Le han realizado un examen de los ojos en el último año? (DIEYE)
N7c. ¿Le han hecho un análisis “A uno C” de glucosa en sangre en el último año? (DIA1C)
[ENTREVISTADOR: Si el entrevistado no sabe lo que es este análisis, codifique como ‘03’]
N7d. ¿Toma aspirina todos los días? (DIASA)
N7e. ¿Se ha reunido con un educador en diabetes al menos una vez desde que le dijeron que tenía diabetes?
  01 SÍ
  02 NO
  03 NO SABE QUÉ ES ESTA PRUEBA
  98 NO SABE / NO ESTÁ SEGURO/A
  99 SE NIEGA A CONTESTAR

IF ANY OF N7A-N7E=02 ASK N8

N8. What are the 2 or 3 most important reasons why you don’t always do these things? (DIREASON)
[IF NEEDED: /DISPLAY "NO" RESPONSE CATEGORY FROM N7/]

[DO NOT READ RESPONSES. Accept up to 3 responses. After first and second responses, probe: ‘Anything else?’]
  01 NEED TO LEARN MORE ABOUT THESE ITEMS/EDUCATION
  02 COST ...........................................................................
  03 TIME ...........................................................................
  04 MY HEALTH CARE PROVIDER DID NOT TELL ME TO...
  05 I DIDN’T THINK IT WAS IMPORTANT ..........................
  06 I WASN’T HAVING ANY PROBLEMS ..........................
  95 OTHER(specify): ..........................................................
  99 REFUSED ....................................................
  98 DON’T KNOW/UNSURE .......

N8. ¿Cuáles son las 2 ó 3 razones más importantes por las que no siempre hace las siguientes cosas?

[NO LEA LAS RESPUESTAS. Acepte hasta 3 respuestas. Después de la primera y la segunda respuesta, pregunte: ‘algo más?’]
  01 DEBO APRENDER MÁS ACERCA DE ESTOS ARTÍCULOS/EDUCACIÓN
  02 COSTO ..........................................................................
  03 TIEMPO ........................................................................
  04 MI PROVEEDOR DE ATENCIÓN MÉDICA NO ME DIJO .
  05 NO CREÍ QUE FUERA IMPORTANTE ..........................
  06 NO ESTABA TENIENDO PROBLEMAS ..........................
  95 OTRO (especifique): ..................................................
  98 NO SABE / NO ESTÁ SEGURO/A
  99 SE NIEGA A CONTESTAR

ASK IF N8=95
N8OTH ENTER RESPONSE
ASK IF B0C1C=01

N9. Are you currently doing any of the following to help control your diabetes?
   N9a. changing your eating habits (IF NEEDED: to help control your diabetes) (DIEAT)
   N9b. exercising (IF NEEDED: to help control your diabetes) (DIEXER)

\ANSWER CHOICES for N9a-N9b\\
   01 YES ........................................
   02 NO ..........................................
   99 REFUSED ..............................
   98 DON’T KNOW/UNSURE...........

N9. ¿Está actualmente haciendo alguna de las siguientes cosas para ayudar a controlar diabetes?
   N9a. cambiar sus hábitos alimenticios (SI ES NECESARIO: para ayudar a controlar su diabetes) (DIEAT)
   N9b. hacer ejercicio (SI FUERA NECESARIO: para ayudar a controlar su diabetes) (DIEXER)

   01 SÍ
   02 NO
   98 NO SABE / NO ESTÁ SEGURO/A
   99 SE NIEGA A CONTESTAR

ASK IF B0C1C=01

N10. In the past 12 months, about how often do you or a family member or a friend check your blood sugar?

(DICHECK)

(IF NEEDED: DO NOT COUNT TIMES THAT YOUR BLOOD SUGAR WAS CHECKED BY A HEALTH CARE PROVIDER.)

PER DAY....................................................... 01
PER WEEK.................................................... 02
PER MONTH................................................. 03
PER YEAR .................................................... 04
NEVER ..................................................... 05
99 REFUSED ..............................
98 DON’T KNOW/UNSURE

N10. En los últimos 12 meses, ¿con qué frecuencia controlaron su glucosa en sangre usted o un miembro de su familia o amigo?

(SI FUERA NECESARIO: NO CUENTE LAS VECES QUE UN PROVEEDOR DE ATENCIÓN MÉDICA CONTROLÓ SU GLUCOSA EN SANGRE.)

   01 DIAS
   02 SEMANA
   03 MESES
   04 ANOS
   05 NUNCA

   98 NO SABE / NO ESTÁ SEGURO/A
   99 SE NIEGA A CONTESTAR
\textbf{N10.} Have you ever heard of a helper for diabetes patients? They are sometimes called case managers, care coordinators, or navigators.

\textbf{(DINAV)}

\begin{tabular}{llll}
   01 & YES \\
   02 & NO \\
   99 & REFUSED \\
   98 & DON'T KNOW/UNSURE \\
\end{tabular}

\textbf{N11.} ¿Ha oído hablar de un ayudante para pacientes con diabetes? A veces se los conoce como administradores de casos, coordinadores de atención o navegadores.

\begin{tabular}{llll}
   01 & SÍ \\
   02 & NO \\
   98 & NO SABE / NO ESTÁ SEGURO/A \\
   99 & SE NIEGA A CONTESTAR \\
\end{tabular}

\textbf{N12.} Do you have a helper like this who you can call or visit when you need help with your diabetes?

\textbf{(DINAVUSE)}

\begin{tabular}{llll}
   01 & YES................................. \\
   02 & NO................................. \\
   99 & REFUSED.............................. \\
   98 & DON'T KNOW/UNSURE.......... \\
\end{tabular}

\textbf{N12.} ¿Tiene algún ayudante de este tipo a quien pueda llamar o visitar cuando necesita ayuda con su diabetes?

\begin{tabular}{llll}
   01 & SÍ \\
   02 & NO \\
   98 & NO SABE / NO ESTÁ SEGURO/A \\
   99 & SE NIEGA A CONTESTAR \\
\end{tabular}
ASK IF B0C1C=01

N13. How sure are you that you can control your diabetes?
(DISURE)

01  Very sure,.........................
02  Somewhat sure,...................
03  Somewhat unsure, or............
04  Very unsure?......................

99  REFUSED.........................
98  DON'T KNOW/UNSURE..............

ASK IF B0C1C=01

N13. ¿Qué tan seguro está de que puede controlar su diabetes?

01  Muy seguro,....................... 
02  Algo seguro,....................... 
03  Poco seguro, o..................... 

04  Muy poco seguro?

98  NO SABE / NO ESTÁ SEGURO/A 
99  SE NIEGA A CONTESTAR 

ASK IF B0C1C=01

N14. Have you ever taken an educational course or class to teach you how to control your diabetes?
(DICLASS)

01  YES..............................
02  NO...............................
99  REFUSED..........................
98  DON'T KNOW/UNSURE.........

N14. ¿Alguna vez tomó un curso educativo o clase para aprender a controlar su diabetes?

01  SÍ
02  NO

98  NO SABE / NO ESTÁ SEGURO/A 
99  SE NIEGA A CONTESTAR 

\IF N4=01 ("YES"). ASK N15.

STORE RANDOMIZATION VARIABLES IN ROTN15_A-ROTN15_I (VALUES 1-9)

N15. Now I'll read some statements about the medicines that your health care provider has prescribed for your diabetes. For each statement, please tell me whether you strongly agree, somewhat agree, neither agree nor disagree, somewhat disagree, or strongly disagree.

01  CONTINUE

N15. Ahora le leeré algunas frases sobre los medicamentos que su proveedor de atención médica le recetó para su diabetes. Para cada frase, dígame si está muy de acuerdo, algo de acuerdo, no está de acuerdo ni en desacuerdo, está algo en desacuerdo o muy en desacuerdo.

01  CONTINUE

\programmer, randomize read order\
[READ ONLY IF NECESSARY: Now I'll read some statements about the medicines that your health care provider has prescribed for your diabetes. For each statement, please tell me whether you strongly agree, somewhat agree, neither agree nor disagree, somewhat disagree, or strongly disagree.]

N15a. I understand my doctor's/nurse's instructions about the diabetes medicines I take. (DIMEDA)
N15b. I feel confident that each one of my diabetes medicines will help me. (DIMEDB)
N15c. I have someone in the health field whom I can call with questions about my diabetes medicines. (DIMEDC)
N15d. I have to take too many diabetes medicines a day. (DIMEDD)
N15e. I worry about how the diabetes medicines I am supposed to take will affect my health. (DIMEDE)
N15f. I just forget to take my diabetes medicines some of the time. (DIMEDF)
N15g. I sometimes run out of my diabetes medicine because I don't get refills on time. (DIMEDG)
N15h. Taking diabetes medicines more than once a day is inconvenient. (DIMEDH)
N15i. Sometimes I worry about the cost of my diabetes medicines. (DIMEDI)

\ANSWER CHOICES for N15a-N15i\\
  01  STRONGLY AGREE..............
  02  SOMewhat AGREE ............
  03  NEITHER AGREE NOR DISAGREE
  04  SOMewhat DISAGREE
  05  STRONGLY DISAGREE

99  REFUSED ..............................
98  DON'T KNOW/UNSURE ........

N15. Ahora le leeré algunas frases sobre los medicamentos que su proveedor de atención médica le recetó para su diabetes. Para cada frase, dígame si está muy de acuerdo, algo de acuerdo, no está de acuerdo ni en desacuerdo, está algo en desacuerdo o muy en desacuerdo.

01 CONTINUE

N15a. Comprendo las instrucciones de mi médico o enfermero sobre los medicamentos para la diabetes que tomo. (DIMEDA)
N15b. Confío en que cada uno de mis medicamentos para la diabetes me hará bien. (DIMEDB)
N15c. Tengo a alguien en el campo de la salud a quien puedo llamar si tengo preguntas acerca de mis medicamentos para la diabetes. (DIMEDC)
N15d. Tengo que tomar demasiados medicamentos para la diabetes todos los días. (DIMEDD)
N15e. Me preocupa cómo afectarán mi salud los medicamentos para la diabetes que se supone que debo tomar. (DIMEDE)
N15f. Simplemente me olvido de tomar los medicamentos para la diabetes algunas veces. (DIMEDF)
N15g. Algunas veces se me acaban los medicamentos para la diabetes porque no me encargo de reponerlos a tiempo. (DIMEDG)
N15h. Tomar medicamentos para la diabetes más de una vez al día es molesto. (DIMEDH)
N15i. A veces me preocupa el costo de mis medicamentos para la diabetes. (DIMEDI)

  01  MUY DE ACUERDO
  02  ALGO DE ACUERDO
  03  NI DE ACUERDO NI EN DESACUERDO
  04  ALGO EN DESACUERDO
  05  MUY EN DESACUERDO
98 NO SABE
99 SE NEGÓ A CONTESTAR

IF N4=01

N16. Still thinking about the medicines your health care provider has prescribed for your diabetes, please
tell me whether the following items happened very often, fairly often, not very often or never during
the past year.
01 CONTINUE

N16. Pensando aún en los medicamentos que le ha recetado su proveedor de atención médica para su
diabetes, dígame si cada una de las siguientes cosas ha sucedido con mucha frecuencia, con
frecuencia, con poca frecuencia o nunca en el último año.
01 CONTINUE

[READ ONLY IF NECESSARY: Still thinking about the medicines your health care provider has
prescribed for your diabetes, please tell me whether the following items happened very often, fairly
often, not very often or never during the past year.]

N16a. skipping or stopping a medicine because you didn’t think it was working (DISKIPA)
N16b. skipping or stopping a medicine because it made you feel bad (DISKIPB)
N16c. skipping, stopping, not refilling, or taking less medicine because of the cost. (DISKIPC)
N16d. Taking a medicine differently than it was prescribed for any other reason (DISKIPD)

\ANSWER CHOICES for N16a-N16d\n
01 VERY OFTEN
02 FAIRLY OFTEN
03 NOT VERY OFTEN
04 NEVER
99 REFUSED
98 DON’T KNOW/UNSURE

N16. Pensando aún en los medicamentos que le ha recetado su proveedor de atención médica para su
diabetes, dígame si cada una de las siguientes cosas ha sucedido con mucha frecuencia, con
frecuencia, con poca frecuencia o nunca en el último año.

N16a. Saltarse o dejar de tomar el medicamento porque no le parecía que estuviera funcionando
(DISKIPA)
N16b. saltarse o dejar de tomar un medicamento porque lo hacía sentir mal (DISKIPB)
N16c. saltarse, detener, no reponer o tomar menos medicamento debido al costo. (DISKIPC)
N16d. Tomar un medicamento en forma diferente a lo recetado por algún otro motivo (DISKIPD)

01 MUY SEGUIDO
02 CON CIERTA FRECUENCIA
03 NO MUY SEGUIDO
04 NUNCA

98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

IF N16D=01,02,03

N16doth. If 01-03 for N16d, then ask, “What reason?”_____________ (DISKIPOTH)
N16doth. Sí 01-03 para N16d, preguntar “¿Qué motivo?” __________ (DISKIPOTH)
SECTION J: VERIFY, ETHNICITY, EDUCATION

ASK ALL
RECORD TIME ELAPSED IN ALL OF SECTION J
SECJ

//ASK OF ALL RESPONDENTS//

PREJ1 I have some background questions.
Research has found that some health characteristics and behaviors differ by things like age, race, sexual orientation and so on. One purpose of this study is to help learn more about these factors.

I want to reassure you that all your answers are completely confidential. If we come to any question you’d prefer not to answer, just let me know and we’ll go on.

01 CONTINUE

PREJ1 Tengo algunas preguntas acerca de su origen.
Las investigaciones han detectado que algunas características y comportamientos de salud son diferentes por edad, raza, orientación sexual, etc. Uno de los propósitos de este estudio es aprender más acerca de estos factores.
Quiero reiterarle que todas sus respuestas son absolutamente confidenciales. Si llegáramos a alguna pregunta que preferiría no responder, simplemente dígamelo y continuaremos.

01 CONTINUE

//ASK OF ALL RESPONDENTS//

J1. How long have you lived in /IF_SAMPTYPE=0 INSERT “Colorado” IF_SAMPTYPE=1 INSERT A13B/CA13B IF A13B/CA13B=52,98,99 INSERT “the state in which you live”/? (LIVEDCOL) RECORD 1 WEEK FOR LESS THAN ONE WEEK
NUMBER...................................... |   |   |  UNIT............................................. |
01 WEEKS
02 MONTHS
03 YEARS
///DATA PROCESSING PLEASE BACKCODE RESPONSE 04 TO 99//

04 //SKIP TO A23//...................... ALL MY LIFE
05 /IF_SAMPTYPE=0 INSERT “/SKIP TO A4/ DOES NOT LIVE IN COLORADO”
999 ............................................. REFUSED
998 .............................................. DON’T KNOW/NOT SURE

J1. ¿Cuánto tiempo hace que vive en /IF_SAMPTYPE=0 INSERT “Colorado” IF_SAMPTYPE=1 INSERT A13B/CA13B IF A13B/CA13B=52,98,99 INSERT “the state in which you live”/?
01 SEMANA
02 MESES
03 ANOS
04 //PASAR A A23// ............................................TODA MI VIDA
05 //IF SAMPTYPE=0 INSERT “//PASAR A A4/ NO VIVE EN COLORADO”

98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

ASK IF J1=01
J1W ENTER WEEKS [RANGE=0-999]

ASK IF J1=02
J1M ENTER MONTHS [RANGE=0-999]

ASK IF J1=03
J1Y ENTER YEARS [RANGE=0-999]

ASK IF J1<>04,05 AND SAMPTYPE=0
J2. Where did you last live before you began living in Colorado? (LSTLIVE)

[IF NEEDED, PROBE FOR STATE OR COUNTRY]

.......................................................... [IF MORE THAN ONE RESPONSE, PROBE FOR MOST RECENT]
[INTERVIEWER – IF RESPONDENT SAYS ‘USA’ PROBE FOR STATE, IF NO OTHER RESPONSE GIVEN, CODE AS 052 GENERIC USA]

001 ALABAMA (AL) ....................
002 ALASKA (AK) ........................
003 ARIZONA ..............................
004 ARKANSAS ...........................
005 CALIFORNIA .........................
006 COLORADO ..........................
007 CONNECTICUT ....................
008 DELAWARE ..........................
009 FLORIDA ...............................
010 GEORGIA ...........................
011 HAWAII ............................
012 IDAHO ............................... 
013 ILLINOIS ............................
014 INDIANA ...........................
015 IOWA .............................. 
016 KANSAS ............................. 
017 KENTUCKY ...........................
018 LOUISIANA ...........................
019 MAINE .............................
020 MARYLAND ..........................
021 MASSACHUSETTS ....................
022 MICHIGAN ..........................
023 MINNESOTA .........................
024 MISSISSIPPI
025 MISSOURI
026 MONTANA
027 NEBRASKA
028 NEVADA
029 NEW HAMPSHIRE
030 NEW JERSEY
031 NEW MEXICO
032 NEW YORK
033 NORTH CAROLINA
034 NORTH DAKOTA
035 OHIO
036 OKLAHOMA
037 OREGON
038 PENNSYLVANIA
039 RHODE ISLAND
040 SOUTH CAROLINA
041 SOUTH DAKOTA
042 TENNESSEE
043 TEXAS
044 UTAH
045 VERMONT
046 VIRGINIA
047 WASHINGTON
048 WEST VIRGINIA
049 WISCONSIN
050 WYOMING
051 DISTRICT OF COLUMBIA
052 GENERIC USA

055 MEXICO

995 OTHER/SPECIFY [ALSO FOR OUTSIDE US] _________
998 DON'T KNOW/NOT SURE
999 REFUSE

J2. ¿Dónde vivió antes de comenzar a vivir en Colorado?
001 ALABAMA (AL) ..........................................
002 ALASKA (AK) ..........................................
003 ARIZONA ............................................
004 ARKANSAS ...........................................
005 CALIFORNIA ...........................................
006 COLORADO ............................................
007 CONNECTICUT ...........................
008 DELAWARE ..........................................
009 FLORIDA ............................................
010 GEORGIA ............................................
011 HAWAII ..............................................
012 IDAHO .................................................
013 ILLINOIS ............................................
014 INDIANA .............................................
015 IOWA .................................................
016 KANSAS .............................................
017 KENTUCKY ..........................................}
018 LOUISIANA ..........................................
020 MARYLAND
021 MASSACHUSETTS
022 MICHIGAN
023 MINNESOTA
024 MISSISSIPPI
025 MISSOURI
026 MONTANA
027 NEBRASKA
028 NEVADA
029 NEW HAMPSHIRE
030 NEW JERSEY
031 NEW MEXICO
032 NEW YORK
033 NORTH CAROLINA
034 NORTH DAKOTA
035 OHIO
036 OKLAHOMA
037 OREGON
038 PENNSYLVANIA
039 RHODE ISLAND
040 SOUTH CAROLINA
041 SOUTH DAKOTA
042 TENNESSEE
043 TEXAS
044 UTAH
045 VERMONT
046 VIRGINIA
047 WASHINGTON
048 WEST VIRGINIA
049 WISCONSIN
050 WYOMING
051 DISTRICT OF COLUMBIA
052 GENERIC USA

055 MEXICO

95 OTRO
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

//ASK IF J2=995//
J2oth ENTER OTHER SPECIFY

//FOR DATA PROCESSING USE THIS LIST FOR BACKCODING OTHER/SPECIFIES
and DK/REF RESPONSES//
REFUSED ............................. 97
DON'T KNOW .......................... 98
GREECE ............................... 99
GUATEMALA ......................... 100
VIETNAM ............................. 101
HONDURAS ........................... 102
J3. What city do you live in now?  

(CTYLST)  

[IF ASKED: We are interested in looking at the study results by geographic area].

¿En qué ciudad vive actualmente?  

[SÍ LE PREGUNTAN: Nos interesa ver los resultados del estudio según el área geográfica].

no vivo en una ciudad / no dentro de los límites de una ciudad.

900 NO INCORPORADO O NO VIVO EN UNA CIUDAD O NO VIVO DENTRO DE LOS LÍMITES DE UNA CIUDAD.

995 OTRO

998 NO SABE / NO ESTÁ SEGURO/A

999 SE NIEGA A CONTESTAR

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<td>Sugar City</td>
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<td>Two Buttes</td>
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<td>Walsenburg</td>
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Walsh 282
Ward 283
Wellington 284
Westcliffe 285
Westminster 286
Weston 287
Wheat Ridge 288
Wiggins 289
Wiley 290
Williamsburg 291
Windsor 292
Winter Park 293
Woodland Park 294
Wray 295
Yampa 296
Yuma 297
Unincorporated/do not live in city/not w/in city limit 900
995 OTHER..............................................
.............................................. (SPECIFY:

)
900 DON'T LIVE IN A CITY
999 REFUSED ..........................................
998 DON'T KNOW/NOT SURE....

//ASK IF J3-995//

J3 oth.
ENTER RESPONSE

ASK IF A14A=03,99 OR LAST NUMBER OF MID = 2

J4. Which one of the following categories best describes you? Are you…
(RACEGRP)

01 Hispanic or Latino, ....................................
02 white or caucasian, ...................................
03 black, African American, ...........................
04 Asian, ....................................................
05 Native Hawaiian, other Pacific Islander, ... 
06 American Indian, or Alaska Native?...........
05 OTHER [SPECIFY] ________________)....
95 OTHER [SPECIFY] __________________)....
99 REFUSED .............................................
98 DON'T KNOW/NOT SURE .......................

J4. ¿Cuál de las siguientes categorías lo describe mejor? Es usted…
(RACEGRP)

01 Hispano/a o Latino/a, .................................
02 Blanco o caucásico,
03 negro/a, afroamericano/a,
04 Asiático/a,
05 Nativo/a de Hawái u otra isla del Pacífico,
06 Indígena americano/a o nativo/a de Alaska

95 OTRO
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

**ASK IF J4=95**

J4oth.
ENTER RESPONSE

**ASK ALL**

**J5.** What language do you usually speak at home? 
(LANGHOME)

<p>| | |</p>
<table>
<thead>
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<th></th>
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<tbody>
<tr>
<td>01</td>
<td>ENGLISH ...............................</td>
</tr>
<tr>
<td>02</td>
<td>SPANISH .................................</td>
</tr>
<tr>
<td>03</td>
<td>BOTH ENGLISH AND SPANISH ...............</td>
</tr>
</tbody>
</table>
| 04 | FRENCH...................................
| 05 | GERMAN ................................... |
| 06 | CHINESE ................................ |
| 07 | KOREAN .................................. |
| 08 | CANTONESE............................... |

95 OTHER (SPECIFY)________

97 REFUSED ...........................
98 DON'T KNOW ......................

**J5.** ¿Qué idioma habla habitualmente en casa? (LANGHOME)

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<tbody>
<tr>
<td>01</td>
<td>INGLÉS.................................</td>
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<tr>
<td>02</td>
<td>ESPAÑOL ................................</td>
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<tr>
<td>03</td>
<td>INGLÉS Y ESPAÑOL ....................</td>
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<tr>
<td>04</td>
<td>FRANCÉS ................................</td>
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<tr>
<td>05</td>
<td>ALEMÁN ................................</td>
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<tr>
<td>06</td>
<td>CHINO..................................</td>
</tr>
<tr>
<td>07</td>
<td>COREANO...............................</td>
</tr>
<tr>
<td>08</td>
<td>CANTONÉS..............................</td>
</tr>
</tbody>
</table>

95 OTRO
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR
**ASK IF J5=95**

J5 oth.

ENTER RESPONSE ________________________________

**ASK ALL**

**J6. [INTERVIEWER: ASK ONLY IF NECESSARY]**

“I just need to verify…….Are you male or female? (SEX)

01 MALE
02 FEMALE
99 REFUSE
98 DON’T KNOW

**J6. [ENTREVISTADOR: PREGUNTE SÓLO SI ES NECESARIO]**

Simplemente tengo que verificar… ¿es usted un hombre o una mujer?

01 MALE
02 FEMENINO
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

**ASK ALL**

**J7. What is your age?**

(AGE)

[RANGE=18-97].

[USE 97 for AGE 97 and OLDER]

98 DON’T KNOW
99 NOT SURE

**J7. ¿Qué edad tiene?**

_ _ NUMERO /RANGE = 18-97/

98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

**ASK IF J7=98,99**

**J7a. Are you between the ages of…**

[READ LIST]

(AGEGROUP)

04 18-24 years, ......................
05 25-29 years, ......................
06 30-44 years, ......................
07 45-54 years, ......................
08 55-64 years, ......................
09 65 years or older? ..............
99 REFUSED ..........................
98 DON’T KNOW/NOT SURE .....
J7a. Se encuentra entre las edades de...

[LEER LISTA]

(AGEGROUP)

04 18-24 años, .........................
05 25-29 años, .........................
06 30-44 años, .........................
07 45-54 años, .........................
08 55-64 años, .........................
09 65 años o más........................

98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

ASK ALL

J8. Do you consider yourself to be: Heterosexual, that is, straight; Homosexual, that is gay or lesbian; Bisexual, or something else?

(GLB2)

01 Heterosexual, that is, straight......
02 Homosexual, that is gay or lesbian
03 bisexual ..................................

95 OTHER (Specify) .....................
99 REFUSED ..............................
98 DON'T KNOW ..........................

J8. Se considera: Heterosexual, homosexual (gay o lesbiana); (GLB2) bisexual o algo más?

01 Heterosexual .........................
02 Homosexual, o sea gay o lesbiana
03 bisexual ..............................

95 OTRO
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

ASK IF J8=95

J8 oth.

ENTER RESPONSE ___________________________________________

ASK ALL

J9. What is the highest grade or year of regular school or college that you completed?

(EDUC)

01 //GO TO J10// GRADE 1 ......................
02 //GO TO J10 // GRADE 2
03 //GO TO J10 // GRADE 3
04 //GO TO J10 // GRADE 4
05 //GO TO J10 // GRADE 5
06 //GO TO J10 // GRADE 6
07 //GO TO J10 // GRADE 7
08 //GO TO J10 // GRADE 8
09 //GO TO J10 // GRADE 9
10 //GO TO J10 // GRADE 10
11 //GO TO J10 // GRADE 11
12 //CONTINUE TO J9a// GRADE 12
13 //GO TO J10 // POST SECONDARY SCHOOL
14 //GO TO J10 // SOME COLLEGE............
15 //GO TO J10 // BA/BS-LEVEL DEGREE ....
16 BA/BS-LEVEL DEGREE + SOME GRADUATE SCHOOL
17 //GO TO J10 // MA/MS, PHD OR HIGHER..
18 //GO TO J10 // NO FORMAL SCHOOLING

95 //GO TO J10 // OTHER (SPECIFY) ______

99 //GO TO J10 // REFUSED
98 //GO TO J10 // DON'T KNOW

J9. ¿Cuál es el máximo nivel o grado de escuela o universidad que terminó?
(EDUC)

01 GRADO 1 ....................................................
02 GRADO 2
03 GRADO 3
04 GRADO 4
05 GRADO 5
06 GRADO 6
07 GRADO 7
08 GRADO 8
09 GRADO 9
10 GRADO 10
11 GRADO 11
12 GRADO 12
13 ESTUDIOS POSTERIORES A LA ESCUELA SECUNDARIA (HIGH SCHOOL)

14 ESTUDIOS PRE-UNIVERSITARIOS INCOMPLETOS
15 TÍTULO DE GRADO UNIVERSITARIO (BS/BA)
16 GRADO DE NIVEL BA/BS + ALGO DE POSGRADO
17 //IR A J10 // MA/MS, PHD O SUPERIOR
18 NO TENGO EDUCACIÓN FORMAL

95 OTRO
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

ASK IF J9=95
J9 oth.
ENTER RESPONSE ___________________________________________

//IF GRADE=12, ASK J9a. OTHERWISE, SKIP TO J10/]
**ASK IF J9=12**

J9a. Did you graduate from high school, or did you earn a GED (also called a general education diploma)?

(VERGED)

01 GRADUATED FROM HIGH SCHOOL
02 GED, GENERAL EDUCATION DIPLOMA
03 NEITHER, DID NOT GRADUATE

99 REFUSED
98 DON'T KNOW/NOT SURE

J9a. ¿Terminó la escuela secundaria (high school) u obtuvo un diploma de educación general GED (general education diploma)?

(VERGED)

01 GRADUADO DE LA ESCUELA SECUNDARIA (HIGH SCHOOL)
02 GED, DIPLOMA DE EDUCACIÓN GENERAL
03 NINGUNO, NO ME GRADUÉ

98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

**ASK ALL**

J10. Are you currently . . .

(CURRWORK)

01 Working for money, ..............
02 //SKIP TO J17// not working outside the house,
03 Self-employed,......................
04 //SKIP TO J14 // A student, .....  
05 //[AUTOCODE J15=1, SKIP TO J14]// A student and working for money
06 //SKIP TO J17// Retired, ...........
07 //CONTINUE TO J10A// Unemployed, or
09 //SKIP TO J16// Unable to work/DISABLED?

99 REFUSED
98 DON'T KNOW/UNSURE

//IF J10=01,03 CONTINUE to J11//
//IF J10=04,05 SKIP TO J14//
//IF J10=09 SKIP TO J16//
//ELSE SKIP TO J14A//

J10. Actualmente usted . . .

(CURRWORK)

01 trabaja por dinero,......................
02 //PASE A J17// no trabaja fuera de su casa,
03 Trabaja por su cuenta,................
04 //PASE A J14 // Está estudiando,
05 //[AUTOCODE J15=1, PASE A J14]// Está estudiando y trabajando por dinero,
06 //PASE A J17// Está retirado, ...
07 //CONTINUÉ CON J10A// Está desempleado o ...............
09 //PASE A J16// está incapacitado para trabajar/DISCAPACITADO

98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

//IF J10=07 THEN ASK://

J10a. (UNEMPLOY)
For about how long have you been unemployed? (IF NECESSARY, ‘this time’)

01 WEEKS
02 MONTHS
03 YEARS
99 REFUSED.............................
98 DON'T KNOW/UNSURE ...........

J10a. ¿Cuánto tiempo hace que está desempleado? (SI FUERA NECESARIO, ‘esta vez’)

01 SEMANA
02 MESES
03 ANOS

98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

ASK IF J10A=01

J10AW ENTER WEEKS [RANGE=0-999]

ASK IF J10A=02

J10AM ENTER MONTHS [RANGE=0-999]

ASK IF J10A=03

J10AY ENTER YEARS [RANGE=0-999]

//IF J10=01,03,07 CONTINUE TO J11//

J11. What kind of business or industry are you working in?
If J10=07 then What kind of business or industry did you work in the last time you were employed?
(INDUSTRY)

01 SPECIFY ______________________

99 REFUSED.............................  7
98 DON'T KNOW/NOT SURE ....  8

J11. ¿En qué tipo de negocio o industria trabaja?
¿En qué tipo de negocio o industria trabajaba la última vez que tuvo un empleo?
01 ESPECIFICAR
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

IF J11=01
J11 oth.
ENTER RESPONSE ___________________________________________

IF J10=01,03,07

J12. What kind of work are you doing? (For example: sales clerk, computer specialist, farming)?
If J10=07 then What kind of work were you doing the last time you were employed?
(TYPEWORK)

01 SPECIFY ______________________

99 REFUSED ..............................
98 DON’T KNOW/NOT SURE ....

J12. ¿Qué tipo de trabajo está haciendo? (Por ejemplo: empleado de ventas, especialista en
computación, granjero)

01 ESPECIFICAR

98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

IF J12=01
J12 oth.
ENTER RESPONSE ___________________________________________

IF J10=01,03

J13. On average, how many hours per week do you work at your job? (HOURS)

01 35 or more hours per week
02 20-34 hours per week
03 Less than 20 hours per week

99 REFUSED ..............................
98 DON’T KNOW/NOT SURE ....

//IF RESPONSE TO J13 EXISTS SKIP TO J17//

J13. En promedio, ¿cuántas horas por semana trabaja en su empleo?

01 35 o más horas por semana
02 20-34 horas por semana
03 menos de 20 horas por semana
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

**IF J10=04,05**

J14. Are you a full time student or a part time student? (STUDENT)

01 FULL TIME............................
02 PART TIME............................
99 REFUSED..............................
98 DON’T KNOW/NOT SURE ....

J14. ¿Es estudiante de tiempo completo o de tiempo parcial?

01 TIEMPO COMPLETO ............
02 TIEMPO PARCIAL ..............
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

**IF J10=04,05**

IF J10=05 AUTOPUNCH J15=01, DO NOT ASK

J15. Are you also working at a job for money? (STUDWORK)

01 ..................................... YES
02 // SKIP TO J17// .............. NO

99 // SKIP TO J17// REFUSED
98 // SKIP TO J17// DON’T KNOW/UNSURE

J15. ¿También trabaja para ganar dinero?

01 SÍ
02 NO

98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

///IF J15 = 01 CONTINUE; ELSE SKIP TO J17///

J11a. What kind of business or industry are you working in? (STUDIND)

01 SPECIFY ______________________
99 REFUSED .............................. 7
98 DON’T KNOW/NOT SURE .... 8
J11a. ¿En qué tipo de negocio o industria trabaja?
01 ESPECIFICAR
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

IF J11A=01
J11a oth.
ENTER RESPONSE ___________________________________________

IF J15=01
J12a. ¿Qué tipo de trabajo está haciendo? (Por ejemplo: empleado de ventas, especialista en computación)
01 ESPECIFICAR
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

IF J12A=01
J12a oth.
ENTER RESPONSE ___________________________________________

IF J15=01
J13a. On average, how many hours per week do you work at your job?
(STUDHOURS)
01 35 or more hours per week
02 20-34 hours per week
03 Less than 20 hours per week
99 REFUSED .........................
98 DON’T KNOW/NOT SURE ....

J13a. En promedio, ¿cuántas horas por semana trabaja en su empleo?
(STUDHOURS)
01 35 o más horas por semana
02 20 a 34 horas por semana
03 menos de 20 horas por semana
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

//ASK J16 IF J10=09 “UNABLE TO WORK/DISABLED” //

J16. We are studying the relationship between health and inability to work or disability. Can you please tell me the month and year you first became unable to work or disabled.

(DISMONTH DISYEAR)

[INTERVIEWER PROBE FOR MONTH AND YEAR]

01 Enter month and year
DISMONTH ______ [RANGE=1-12]
DISYEAR ______ [RANGE=1915=2012]

99 REFUSED
98 DON'T KNOW

J16. Estamos estudiando la relación entre la salud y la incapacidad para trabajar o discapacidad. Podría decirme el mes y el año en que quedó incapacitado para trabajar o discapacitado

01 ESCRIBA EL MES Y EL ANO
DISMONTH ______ [RANGE=1-12]
DISYEAR ______ [RANGE=1915=2012]

98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

ASK IF INCOME=1

J17. During the past 12 months, was the total combined income of all members of this household …

(INCA-INCH) [IF NECESSARY PROBE: Include income from all sources such as: salaries and wages; social security and public assistance; dividends, interest or rent; unemployment and worker’s compensation; pensions.]

YES NO

(INCA) a. less than $25,000? ........................................ 01 02 ➔ [SKIP TO J18]
(INCB) b. less than $20,000? ........................................ 01 02
(INCC) c. less than $15,000? ........................................ 01 02 [SKIP TO J19]
(INCD) d. less than $10,000? ........................................ 01 02

//For J18, once the person answers 01, ‘YES’ they should get skipped to J19//

J18

YES NO

(INCE) e. less than $35,000? ................................. 01 02
(INCF) f. less than $50,000? ................................. 01 02
(INCG) g. less than $75,000? ................................. 01 02
(INCH) h. less than $90,000? ................................. 01 02

99 REFUSED
98 DON'T KNOW/NOT SURE ....
J17. Durante los últimos 12 meses, ¿el ingreso total sumado de todos los miembros de este núcleo familiar…

(SI ES NECESARIO, INDAGUE: Incluir ingresos de todas las fuentes, como: salarios y sueldos, seguro social y asistencia pública, dividendos, intereses o rentas, compensación por desempleo y por trabajo, pensiones.)

  SÍ    NO
  
  (INCA) a. ¿menos de $25.000? ................................. 01 02 \[PASE A A15\]
  (INCB) b. ¿menos de $20.000? ................................. 01 02
  (INCD) c. ¿menos de $15.000? ................................. 01 02 \[PASE A selección\]
  (INCE) d. ¿menos de $10.000? ................................. 01 02

  YES    NO
  
  (INCF) e. menos de $35,000? ................................. 01 02
  (INCG) f. menos de $50,000? ................................. 01 02
  (INCH) g. menos de $75,000? ................................. 01 02
  
  98 NO SABE / NO ESTÁ SEGURO/A
  99 SE NIEGA A CONTESTAR

\[IF J17A THRU J17H <>98,99 AND INCOME=1\]

j17v  Tu Ingresos anuales del hogar son

[IF j17H<>02 enter range from code in INC]
[IF j17H=02 ENTER "$90,000 or more"/
Is This Correct?
  1 No, re-ask question [GO TO j17a]
  2 Yes, correct as is. [CONTINUE]

\[IF J17H=02\]

NOT ASKED IN PROGRAM
DP – IN POST-PROCESSING POPULATE INCI/A15I = 01 IF A15H=02

(INCI) i. $90,000 or more? .................................

\[ASK ALL\]

J19. Are you …[READ RESPONSES UNTIL RESPONDENT IDENTIFIES.]

(COUPLE)
  01 Married, .................................
  02 Divorced, .................................
  03 Widowed, .................................
  04 Separated, .................................
  05 Never been married, or .................................
06 A member of an unmarried
Couple/living as married? ............

99 REFUSED ............................
98 DON'T KNOW/NOT SURE ....

**J19.** Está usted …[LEER RESPUESTAS HASTA QUE EL ENTREVISTADO SE IDENTIFIQUE.]
01 Casado/a, .........................
02 Divorciado/a, ......................
03 Viudo/a, ...........................
04 Separado/a, ........................
05 Nunca estuvo casado/a o ......
06 Es parte de una pareja no casada /conviviendo como si estuvieran casados

98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

**ASK ALL**

J20. Do you have a computer in your home that is connected to the Internet? (INTRNET)
01 YES .................................
02 NO ...................................

99 REFUSED ............................
98 DON'T KNOW/UNSURE........

**J20.** ¿Tiene una computadora en casa conectada a Internet?
01 SÍ
02 NO

98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

**ASK IF J6=02 AND (J7A=04,05,06 OR J7=18-44)**

J21. To your knowledge, are you now pregnant? (PREGNOW)
01 YES .................................
02 NO .................................

99 REFUSED ............................
98 DON'T KNOW/UNSURE........

**J21.** Hasta donde usted sabe, ¿está embarazada actualmente?
01 SÍ
02 NO

98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

ASK IF CALLTYPE=2 CELL

PRECA35 The next set of questions are about people who live in your household. [IF NECESSARY, HOUSEHOLD (HH) INCLUDES PERSONS WHO USUALLY STAY IN THE HH BUT ARE TEMPORARILY AWAY ON BUSINESS, VACATION, IN A HOSPITAL, OR LIVING AT SCHOOL IN A DORM, FRATERNITY, OR SORORITY]

01 CONTINUE

PRECA35 Las siguientes preguntas son acerca de personas que viven en su hogar. [SI ES NECESARIO, HOGAR (HH) INCLUYE A PERSONAS QUE GENERALMENTE SE QUEDAN EN EL HOGAR PERO QUE TEMPORALMENTE NO SE ENCUENTRAN ALLÍ POR NEGOCIOS, VACACIONES, INTERNACIÓN EN UN HOSPITAL O POR ESTAR VIVIENDO EN LA UNIVERSIDAD EN DORMITORIOS, FRATERNIDADES O HERMANDADES]

01 CONTINÚE

ASK IF PRECA35=01 AND CALLTYPE=2 CELL

CA35. Not including yourself, how many other adults age 18 and older live in your household?
//USE “97” TO CODE 97 OR MORE ADULTS//
NUMBER OF ADULTS ..................... [RANGE=0-97] | | | → IF ‘0’ SKIP TO CA38
99 REFUSED ............................ [skip to CA38]
98 DON’T KNOW/NOT SURE ............ [skip to CA38]

CA35. Sin contarse usted mismo, ¿cuántos adultos mayores de 18 años de edad viven en su hogar?
//USE “97” PARA CODIFICAR 97 O MÁS ADULTOS//
CANTIDAD DE ADULTOS ................... [RANGO=0-97] | | | → SI ‘0’ PASE A CA38
99 SE NEGÓ A CONTESTAR .............. [pase a CA38]
98 NO SABE/NO ESTÁ SEGURO .......... [pase a CA38]

ASK IF CA35=1-97 AND CALLTYPE=2 CELL

CA36. As far as you know, how many of the [insert answer from CA35] other adults who live in your household have ever smoked at least 100 cigarettes during their entire life? [IF NECESSARY, ‘NOT INCLUDING YOURSELF’]
//USE “97” TO CODE 97 OR MORE ADULTS//
NUMBER OF ADULTS ..................... [RANGE=0-CA35 VALUE] /IF ‘0’ SKIP TO CA38/
99 REFUSED ............................ [skip to CA38]
98 DON’T KNOW/NOT SURE ............

CA36. Hasta donde usted sabe, ¿cuántos de los [insertar respuesta de CA35] otros adultos que viven en su hogar han fumado al menos 100 cigarrillos en toda su vida? [SI ES NECESARIO, ‘SIN CONTARLO A USTED’]
CANTIDAD DE ADULTOS ................... [RANGO=0-97] | | | → SI ‘0’ PASE A CA38
99 SE NEGÓ A CONTESTAR .............. [pase a CA38]
98 NO SABE/NO ESTÁ SEGURO .......... [pase a CA38]
ASK IF CA36=1-97 AND CALLTYPE=2 CELL

CA37. As far as you know, how many of the [insert answer from CA36] adults in your household who have smoked at least 100 cigarettes in their lifetime smoke cigarettes every day or some days? [IF NECESSARY, ‘NOT INCLUDING YOURSELF’] //USE “97” TO CODE 97 OR MORE ADULTS///

NUMBER who smoke every day or some days ........................................ [RANGE = 0-CA36 VALUE]
99 REFUSED ........................................
98 DON’T KNOW/NOT SURE ................................

CA37. Hasta donde usted sabe, ¿cuántos de los [insertar respuesta de CA36] adultos en su hogar que han fumado al menos 100 cigarrillos en su vida fuman cigarrillo todos los días o algunos días? [SI ES NECESARIO, ‘SIN CONTARLO A USTED’] //USE “97” PARA CODIFICAR 97 O MÁS ADULTOS///

CANTIDAD de personas que fuman todos los días o algunos días........................................ [RANGO = 0-CA36 VALOR]
99 SE NEGÓ A CONTESTAR ................................
98 NO SABE/NO ESTÁ SEGURO ......................................

ASK ALL

A38. How many children less than 18 years of age live in your household?

ENTER NUMBER OF CHILDREN RANGE=0-18
99 REFUSED ........................................
98 DON’T KNOW/NOT SURE .................

A38. ¿Cuántos niños menores de 18 años viven en su núcleo familiar?

_ _ NUMERO /RANGE = 0-18/
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

ASK IF A38A=01-18

A38a. How many of these children are age 12 to 17 years old?

ENTER NUMBER OF CHILDREN RANGE=0-A38 VALUE

99 REFUSED ........................................
98 DON’T KNOW/NOT SURE .................

A38a. ¿Cuántos de estos niños tienen entre 12 y 17 años de edad?

_ _ NUMERO /RANGE = 0-18/
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR
**ASK ALL**

PRECA27c My next few questions are about your telephone use.

01 CONTINUE

PRECA27c Mis próximas preguntas son acerca de su uso del teléfono.

01 CONTINÚE

**ASK IF CALLTYPE=2**

CA27c. How many cell phones do you use? Do not include cell phones that are used only for business.

6=6 OR MORE

NUMBER OF PHONES___________

99 REFUSED ..............................

98 DON'T KNOW/NOT SURE...........

CA27c. ¿Cuántos teléfonos celulares usa? No incluya los teléfonos celulares que use sólo para negocios.

_ _ NUMERO /RANGE = 0-6/

98 NO SABE / NO ESTÁ SEGURO/A

99 SE NIEGA A CONTESTAR

**ASK IF CALLTYPE=2**

CA31. In addition to your cell phone, does your home have at least one telephone that is currently working and is not a cell phone? Do not include telephones that are used only by a computer or fax machine.

[DO NOT READ]

01 YES (DUAL USER)...........

02 NO (CELL ONLY)

99 REFUSED (UNCLASSIFIED) 7

98 DON'T KNOW (CELL ONLY) 8

CA31. Además de su teléfono celular, ¿hay en su casa al menos otro teléfono que funcione actualmente y que no sea un teléfono celular? No incluya teléfonos utilizados únicamente por una computadora o un fax.

01 Sí

02 NO

98 NO SABE / NO ESTÁ SEGURO/A

99 SE NIEGA A CONTESTAR
ASK IF CA31=01

CA32. Of all the telephone calls that you receive, would you say... 
all or almost all calls are received on a cell phone;..................      01 
some are received on a cell phone and some on a regular   
landline phone; or..................................................... 02 
very few or none are received on a cell phone?..................... 03 
DON'T HAVE A REGULAR LANDLINE PHONE (CELL ONLY) 04 
REFUSED............................................................................ 99 
DON'T KNOW/NOT SURE.................................................. 98 

CA32. De todas las llamadas telefónicas que recibe, diría usted que... 
recibe todas o casi todas en un teléfono celular... 01 
recibe algunas en un teléfono celular y algunas en un     
teléfono fijo o.... 02 
recibe muy pocas o ninguna en un teléfono celular.............. 03 
NO TIENE TELÉFONO FIJO (SÓLO CELULAR) 04 

98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

ASK IF CALLTYPE=1

A25. Do you have more than one telephone number in your household? Do not include cell phones or numbers that are used only by a computer or fax machine. 
(ADDPHON)

01 YES.............................................
02 NO............................................
97 REFUSED...........................................
98 DON'T KNOW/NOT SURE.

A25. ¿Tiene más de un número telefónico en su casa? No incluya los celulares o números utilizados únicamente por una computadora o un fax.

01 SI
02 NO

98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

//IF A25=01 CONTINUE; ELSE SKIP TO A27B//

A26. How many of these are residential numbers?

[6=6 OR MORE]
NUMBER OF NUMBERS___________(range=1-6)

99 ....................................... REFUSED
98 ....................................... DON'T KNOW/NOT SURE

A26. ¿Cuántos son números residenciales?
_ _ NUMERO /RANGE = 0-6/
A27b. In addition to your residential landline telephone, do you also use one or more cell phone numbers? Do not include cell phones that are used only for business.

01 ....................................... YES (DUAL USER)
02 ....................................... NO (LL ONLY)

99 ....................................... REFUSED
98 ....................................... DON’T KNOW/NOT SURE

ASK IF CALLTYPE=1

A27b. Además de su teléfono fijo residencial, ¿utiliza uno o más teléfonos celulares? No incluya los que use sólo para negocios.

01 SÍ
02 NO

98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

ASK IF A27B=01

A27d. Of all the telephone calls that you receive, are …

[READ LIST]
01 All or almost all calls received on a cell phone? Or…
02 Some received on a cell phone and some on a regular landline phone? Or..
03 Very few or none received on a cell phone?

[DO NOT READ]
87 Don’t have a regular landline phone (CELL ONLY)
88 Don’t have a cell phone (LANDLINE ONLY)

98 DON’T KNOW
99 REFUSED

A27d. De todas las llamadas telefónicas, recebe…

01 ¿todas o casi todas en un teléfono celular? O...
02 ¿algunas en un teléfono celular y otras en un teléfono fijo? O...
03 ¿muy pocas o ninguna en un teléfono celular?
87 No tiene teléfono fijo (SÓLO CELULAR)

88 No tiene teléfono celular (SÓLO FIJO)

98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR
PREG1 Now I'd like to ask you a few questions about your health, your health insurance and your health care.

01 CONTINUE

PREG1 Ahora quisiera hacerle algunas preguntas sobre su salud, su seguro médico y su atención médica.

01 CONTINUE

**ASK ALL**

**G1.** What health insurance do you have?  
**(INSTYPE)** [IF MORE THAN ONE, ASK FOR THE PRIMARY HEALTH INSURANCE.]

42 AARP  
11 ACCESS / COLORADO ACCESS  
04 AETNA  
57 AFLAC  
22 ALLIANCE  
53 AMERIBEN  
52 AMERICAN FAMILY  
51 AMERICAN REPUBLIC  
03 ANTHEM/ BLUE CROSS & BLUE SHIELD / HMO COLORADO  
37 ASSURANT  
44 BANNER  
39 CELTIC  
06 CIGNA HEALTHCARE OF COLORADO  
56 COBRA  
62 COLORADO INDIGENT CARE PROGRAM (‘CICP’)  
20 COMMUNITY HEALTH PLAN OF THE ROCKIES  
41 DEFINITY  
12 DENVER HEALTH OR ‘DENVER HEALTH MEDICAL PLAN’  
58 EMPIRE  
45 FARMERS  
23 FIRST HEALTH  
21 FORTIS
47 GEHA
24 GOLDEN RULE
32 GREAT-WEST HEALTHCARE OF COLORADO OR ‘GREAT WEST’
46 GUARDIAN
40 HARTFORD
08 HUMANA
31 INTERCARE
05 KAINER
60 LUMENOS
38 MAIL HANDLER
16 MEDICAID
15 MEDICARE
59 MEGA LIFE
25 METLIFE
36 MIDWEST
43 MOUNTAIN MEDICAL
26 MUTUAL OF OMAHA
01 NO HEALTH INSURANCE
54 NRECA
10 ONE HEALTH PLAN OF CO
33 OTHER HMO
30 PACIFIC LIFE
02 PACIFICARE
49 PERA
50 PHCS
27 PRESENTIAL
48 PRINCIPLE
09 ROCKY MOUNTAIN HMO
34 SAN LUIS VALLEY HMO
17 SECURE HORIZON
61 SELF-INSURED
18 SLOANS LAKE
19 STATE FARMS
14 TRI-CARE/CHAMPUS
28 UNICARE
07 UNITED HEALTHCARE
13 VA OR MILITARY
35 WAUSAU
55 WORLD

95 OTHER (SPECIFY)__________________________________________

99 REFUSED ............................................................................
98 DON'T KNOW/NOT SURE .................................................................

G1. ¿Qué seguro médico tiene?
(INSTYPE) [SI TIENE MÁS DE UNO, PREGUNTAR CUÁL ES EL PRIMARIO.]

42 AARP
11 ACCESS / COLORADO ACCESS
04 AETNA
57 AFLAC
22 ALLIANCE
53 AMERIBEN
52 AMERICAN FAMILY
51 AMERICAN REPUBLIC
03 ANTHEM/ BLUE CROSS & BLUE SHIELD / HMO COLORADO
37 ASSURANT
44 BANNER
39 CELTIC
06 CIGNA HEALTHCARE OF COLORADO
56 COBRA
62 COLORADO INDIGENT CARE PROGRAM (‘CICP’)
20 COMMUNITY HEALTH PLAN OF THE ROCKIES
41 DEFINITY
12 DENVER HEALTH OR ‘DENVER HEALTH MEDICAL PLAN’
58 EMPIRE
45 FARMERS
23 FIRST HEALTH
21 FORTIS
47 GEHA
24 GOLDEN RULE
32 GREAT-WEST HEALTHCARE OF COLORADO OR ‘GREAT WEST’
46 GUARDIAN
40 HARTFORD
08 HUMANA
31 INTERCARE
05 KAISER
60 LUMENOS
38 MAIL HANDLER
16 MEDICAID
15 MEDICARE
59 MEGA LIFE
25 METLIFE
36 MIDWEST
43 MOUNTAIN MEDICAL
26 MUTUAL OF OMAHA
01 NO HEALTH INSURANCE
54 NRECA
10 ONE HEALTH PLAN OF CO
33 OTHER HMO
30 PACIFIC LIFE
02 PACIFICARE
49 PERA
50 PHCS
27 PREDENTIAL
48 PRINCIPLE
09 ROCKY MOUNTAIN HMO
34 SAN LUIS VALLEY HMO
17 SECURE HORIZON
61 SELF-INSURED
18 SLOANS LAKE
19 STATE FARMS
14 TRI-CARE/CHAMPUS
28 UNICARE
07 UNITED HEALTHCARE
13 VA OR MILITARY
35 WAUSAU
55 WORLD
95 OTRO

98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

IF G1=95
G1 oth.
ENTER RESPONSE ___________________________________________

ASK ALL
G2. Would you say your health is . . .
(GOODHLTH)

01 Excellent,
02 Very good,
03 Good,
04 Fair, or
05 Poor?

99 REFUSED ............................
98 DON'T KNOW/NOT SURE ....

G2. Diría usted que su salud es . . .
(GOODHLTH)
G14. During the last 2 weeks, how many days have you had little interest or pleasure in doing things? (MHDEP1)

//RANGE:01-14// [INTERVIEWER NOTE: can code 1 week=7 days and 2 weeks=14 days]

____ NUMBER OF DAYS .............. |||
00 NONE..............................................
99 REFUSED...........................................
98 DON'T KNOW/NOT SURE ....

G15. During the last 2 weeks, how many days have you felt down, depressed or hopeless? (MHDEP2)

//RANGE:01-14// // [INTERVIEWER NOTE: can code 1 week=7 days and 2 weeks=14 days]

____ NUMBER OF DAYS .............. |||
00 NONE..............................................
99 REFUSED...........................................
98 DON'T KNOW/NOT SURE ....
G16. Has a doctor or healthcare provider ever told you that you have a mental health condition or mental illness?

(MHMENTAL)

01 ........................................ YES
02 //SKIP TO G17// .......................... NO
99 //SKIP TO G17// ....................... REFUSED
98 //SKIP TO G17// ....................... DON’T KNOW/NOT SURE

G16. ¿Alguna vez un médico o proveedor de atención médica le dijo que tiene una afección de salud mental o enfermedad mental?

01 SÍ
02 NO
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

//IF G16=01 CONTINUE; ELSE SKIP TO G17//

G16b. Please tell me what the condition or illness is called.

(MHCONDITION)

[INTERVIEWER, ALLOW MULTIPLE RESPONSES]

01 DEPRESSION .........................
02 ANXIETY .........................
03 BIPOLAR DISORDER ............
04 SCHIZOPHRENIA ............
95 OTHER (Specify)__________
99 REFUSED .........................
98 DON’T KNOW/NOT SURE ....

ASK IF G16B=95

G16b oth.

ENTER RESPONSE ___________________________________________

ASK ALL

G17. Are you limited in any way in any activities because of mental or emotional conditions?
(MHLIMIT)
  01 YES ........................................
  02 NO ........................................
  99 REFUSED ..............................
  98 DON’T KNOW/NOT SURE ....

G17. ¿Está usted limitado de forma alguna en alguna actividad debido a sus problemas mentales o emocionales?
  01 SÍ
  02 NO
  98 NO SABE / NO ESTÁ SEGURO/A
  99 SE NIEGA A CONTESTAR

[PROGRAMMER: ASK of CURRENT DAILY AND NONDAILY SMOKERS; all others skip to G18]

  IF G17=01 AND (B7=01,02 OR B9=01 OR (A14A=01,02 AND A10=01,02))

G17a. Do you believe that these mental or emotional conditions may interfere with your ability to quit smoking?
(MHINTERFERE)
  01 YES ........................................
  02 NO ........................................
  99 REFUSED ..............................
  98 DON’T KNOW/NOT SURE ....

G17a. ¿Cree usted que estas afecciones mentales o emocionales podrían interferir con su capacidad para dejar de fumar?
  01 SÍ
  02 NO
  98 NO SABE / NO ESTÁ SEGURO/A
  99 SE NIEGA A CONTESTAR

ASK ALL

G18. Are you limited in any way in any activities because of physical problems?
(PHYLIMIT)
  01 YES ........................................
  02 NO ........................................
  99 REFUSED ..............................
  98 DON’T KNOW/NOT SURE ....

G18. ¿Está usted limitado de forma alguna en alguna actividad debido a problemas físicos?
  01 SÍ
  02 NO
ASK ALL

G19. How much did you weigh without shoes a year ago? (IF NEEDED: If you were pregnant a year ago, how much did you weigh before your pregnancy?)

(WTYR)  
[INTERVIEWER: IF RESPONDENT SAYS “THE SAME” ENTER: /INSERT B0AP/B0AK]  
[IF RESPONDENT ANSWERS IN METRICS, PUT “9” IN FIRST COLUMN.]  
01 Pounds  
02 Kilograms  
98 Don’t know  
99 Refused

G19. ¿Cuánto pesaba hace un año sin zapatos? (SI FUERA NECESARIO: Si estaba embarazada hace un año, ¿cuánto pesaba antes de su embarazo?)

[ENTREVISTADOR: SI EL ENTREVISTADO RESponde “IGUAL” INGRESE: /INSERT B0AP/B0AK]  
01 Libras  
02 Kilogramos  
98 No sabe  
99 Se negó a contestar

IF G19=01

G19P How much did you weigh without shoes?

Round fractions up

Weight (pounds) [Range 50-776,]

G19P ¿Cuánto pesa sin zapatos?

Redondee las fracciones hacia arriba

Peso (libras) [Rango 50-776,]

ASK IF G19P=50-79 OR 351-776

G19PV Just to double-check, you indicated \G19P: pounds as your weight.

1. Yes
2. No [go back to G19P]

**G19PV** Sólo para confirmar, indicó \:G19P:libras como su peso.

¿Esto es correcto?
1. Sí
2. No [volver a G19P]

**IF G19=02**

G19K How much did you weigh without shoes?

Round fractions up

\[
\begin{array}{ll}
\text{Weight} & \text{Weight (kilograms)} \\
\hline
\end{array}
\]

**G19K** ¿Cuánto pesaba sin zapatos?

Redondee las fracciones hacia arriba

\[
\begin{array}{ll}
\text{Peso} & \text{Peso (kilogramos)} \\
\hline
\end{array}
\]

**ASK IF G19K=23-352**

G19KV Just to double-check, you indicated \:G19K: kilograms as your weight.

IS THIS CORRECT?
1. Yes
2. No [go back to G19K]

**G19KV** Sólo para confirmar, indicó \:G19K:kilogramos como su peso.

¿Esto es correcto?
1. Sí
2. No [volver a G19K]

\[Ask G20 if G19 < B0a If G19 ≥ B0a, skip to G21\]

**IF G19 > B0A**

G20. What is the main thing you did to help you lose weight during the past year? (DO NOT READ RESPONSES; ONE ANSWER CHOICE ALLOWED)

[Interviewer: IF RESPONDENT SAYS THEY DID NOT LOSE WEIGHT SAY: We ask about any weight loss, and you reported your weight today as /INSERT B0AK/B0AP:/]

[IF RESPONDENT MAINTAINS THEY HAVE NOT LOST WEIGHT, SELECT OPTION 18: NOTHING] (WTLOSS)
01 EAT LESS, FEWER CALORIES
02 EXERCISE MORE
03 EAT LESS/FEWER CALORIES AND EXERCISE MORE
04 DECREASE PORTION SIZES, EAT SMALLER HELPINGS
05 SELF-OBSERVATION (LOGS)
06 TOOK MEDICATION PRESCRIBED BY HEALTH PROVIDER
07 TOOK OVER-THE-COUNTER DIETARY SUPPLEMENTS, VITAMINS, OR WEIGHT LOSS DRUGS (NOT PRESCRIBED)
08 LAXATIVES, PURGING
09 WEIGHT WATCHERS, JENNY CRAIG, OVEREATERS ANONYMOUS, ETC.
10 LIQUID DIET
11 SMOKE CIGARETTS
12 MEDICAL PROCEDURE (LIPOSUCTION, STOMACH STAPLE, GASTRIC BYPASS, ETC.)
13 DECREASE TV TIME
14 ATKIN'S DIET/LOW CARBOHYDRATE DIET
15 EAT MORE FRUITS AND VEGETABLES
16 DRINK MORE WATER
17 IMPROVE HEALTHY EATING HABITS
18 NOTHING
19 DID NOT EAT AFTER A CERTAIN TIME OF DAY/NIGHT
20 LOST WEIGHT BECAUSE OF HEALTH ISSUES
21 DRINK LESS ALCOHOL
22 FASTED/DID NOT EAT
23 MEAL REPLACEMENT DIET (SLIM-FAST, MEDIFAST, MEAL REPLACEMENT BARS OR SHAKES)
24 PREGNANT A YEAR AGO
95 OTHER
(specify)____________________________________________________
99 REFUSED
98 DON'T KNOW/UNSURE

95 OTHER
(specify)____________________________________________________

G20. ¿Qué fue lo que más hizo para ayudarse a perder peso en el último año? (NO LEER RESPUESTAS, UNA SOLA RESPUESTA Permitida)
[ENTREVISTADOR: SI EL ENTREVISTADO DICE QUE NO BAJÓ DE PESO, DIGA: Preguntamos sobre pérdida de peso y nos informó que su peso actual es /INSERT B00/AB/.
[SI EL ENTREVISTADO MANTIENE NO HABER PERDIDO PESO, SELECCIONE LA OPCIÓN 18:NADA]

(WTLOSS)
01 COMER MENOS, MENOS CALORÍAS
02 HACER MÁS EJERCICIO
03 COMER MENOS/MENOS CALORÍAS Y HACER MÁS EJERCICIO
04 DISMINUIR EL TAMAÑO DE LAS PORCIONES, COMER PORCIONES MÁS PEQUEÑAS
05 AUTO OBSERVACIÓN (REGISTROS)
06 TOMAR MEDICAMENTOS RECETADOS POR UN PROVEEDOR DE ATENCIÓN MÉDICA
07 TOMAR COMPLEMENTOS PARA DIETA, VITAMINAS O FÁRMACOS PARA PERDER PESO DE VENTA LIBRE (NO RECETADOS)
08 LAXANTES, PURGANTES
09 WEIGHT WATCHERS, JENNY CRAIG, OVEREATERS ANONYMOUS, ETC.
10 DIETA LÍQUIDA
11 FUMAR CIGARRILLOS
12 PROCEDIMIENTO MÉDICO (LIPOSUCCIÓN, ENGRAMPE ESTOMACAL, BYPASS GÁSTRICO, ETC.)
13 MENOS TIEMPO FRENTE A LA TV
14 DIETA DE ATKIN / BAJA EN CARBOHIDRATOS
15 COMER MÁS FRUTAS Y VERDURAS
16 BEBER MÁS AGUA
17 MEJORAR MIS HÁBITOS DE ALIMENTACIÓN SALUDABLE
18 NADA
19 NO COMER DESPUÉS DE CIERTA HORA DEL DÍA / DE LA NOCHE
20 PERDÍ PESO POR PROBLEMAS DE SALUD
21 BEBER MENOS ALCOHOL
22 AYUNO / NO COMER
23 DIETA DE REEMPLAZO DE ALIMENTOS (SLIM-FAST, MEDIFAST, BARRAS O BATIDOS DE REEMPLAZO DE ALIMENTOS)
24 EMBARAZADA HACE UN AÑO
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

**DIETA DE REEMPLAZO DE ALIMENTOS (SLIM-FAST)**

**ASK IF G20=95**

G20Oth ENTER RESPONSE

**IF CALCULATED BMI≥25, ASK G21. ELSE, SKIP TO G24.**

G21. In the past month, have you been actively trying to lose weight, trying to keep from gaining weight, or neither one of these?

(WTMONTH)

01 LOSE WEIGHT
02 KEEP FROM GAINING WEIGHT
03 NEITHER
99 REFUSED
98 DON'T KNOW/UNSURE

G21. En el último mes, ¿ha intentado activamente perder peso, no subir de peso o ninguna de estas?

(WTMONTH)

01 PERDER PESO
02 NO SUBIR DE PESO
03 NINGUNA

**IF CALCULATED BMI≥25**

G22. Are you seriously considering trying to lose weight in the next six months?

(WTSIX)

01 YES
02 NO
99 REFUSED
98 DON'T KNOW/UNSURE
**G22.** ¿Está pensando seriamente en intentar bajar de peso en los próximos seis meses?

01 SÍ
02 NO
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

**G23.** How sure are you that you could lose \INSERT BOAP5 OR BOAK5\ pounds, and then keep it off for at least one month? Are you …

(WTSURE)

01 very sure,
02 somewhat sure,
03 somewhat unsure, or
04 very unsure?
99 REFUSED
98 DON'T KNOW/UNSURE

**G23.** ¿Qué tan seguro está de que podría bajar \INSERT BOAP5 OR BOAK5\ libras, y no recuperarlas durante al menos un mes? Es usted…

01 Muy seguro, ………………..
02 Algo seguro, ………………..
03 Poco seguro, o ……………..
04 Muy poco seguro?

98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

**ASK ALL**
**RANDOMIZE ORDER SAVE IN**
**ROTG24_A THRU _H (VALUES 1 TO 8)**

**G24.** Now I'll read a list of common health conditions. For each condition, please tell me your opinion about how likely or unlikely it is to damage a person’s health, by saying it is very unlikely, somewhat unlikely, somewhat likely or very likely.

01 CONTINUE

**G24.** Ahora leeré una lista de afecciones de salud comunes. Para cada afección, dígame su opinión sobre cuán probable es que dañe la salud de una persona, diciendo si es muy poco probable, poco probable, algo probable o muy probable.

01 CONTINUE

[READ IF NECESSARY: Now I'll read a list of common health conditions. For each condition, please tell me your opinion about how likely or unlikely it is to damage a person’s health, by saying it is very unlikely, somewhat unlikely, somewhat likely or very likely.]

The first one is …\INSERT A-H RANDOMLY\ … ,how likely or unlikely do you think it is to damage a person's health?
a. heart disease (RISK_HEART)
b. diabetes (RISK_DIAB)
c. overweight (RISK_OVER)
d. colon cancer (RISK_COLON)
e. breast cancer (RISK_BREAST)
f. smoking (RISK_SMOK)
g. high blood pressure (RISK_BP)
h. high cholesterol (RISK_CHOL)

01 VERY LIKELY ............
02 SOMEWHAT LIKELY
03 SOMEWHAT UNLIKELY
04 VERY UNLIKELY
99 REFUSED .................
98 DON’T KNOW/UNSURE

G24. [READ IF NECESSARY: Ahora leeré una lista de afecciones de salud comunes. Para cada
afección, dígame su opinión sobre cuán probable es que dañe la salud de una persona, diciendo si es
muy poco probable, poco probable, algo probable o muy probable.]

La primera pregunta es...\programador, lea en desorden al azar \...
¿qué tan probable cree usted que
dañe la salud de una persona?]

a. enfermedad cardíaca (RISK_HEART)
b. diabetes (RISK_DIAB)
c. sobrepeso (RISK_OVER)
d. cáncer de colon (RISK_COLON)
e. cáncer de seno (RISK_BREAST)
f. tabaquismo (RISK_SMOK)
g. presión arterial alta (RISK_BP)
h. colesterol alto (RISK_CHOL)

01 MUY POSIBLEMENTE.
02 POSIBLEMENTE..........
03 ALGO IMPROBABLE
04 MUY IMPROBABLE
99 SE NEGÓ A CONTESTAR........... ........................
98 NO SABE/NO ESTÁ SEGURO.....

ASK ALL

G25. Now I’m going to ask about your time walking. Please include any type of walking, whether it is for
transportation, fun, relaxation, exercise, or walking a dog. During the past 7 days, how many times
did you walk for at least 10 minutes for any of these reasons?

(WALK)

_ _ NUMBER / RANGE = 1-30/
00 NONE
99 REFUSED
98 DON’T KNOW / UNSURE
**G25.** Ahora voy a hacerle algunas preguntas acerca del tiempo que pasa caminando. Incluya cualquier tipo de caminata, ya sea para dirigirse a un transporte, por diversión, relajación, ejercicio o pasear a un perro. **Durante los últimos 7 días, ¿cuántas veces caminó al menos 10 minutos por alguna de estas razones?**

_ _ NUMERO /RANGE=1-30/
00 NUNCA

98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

**IF G25=1-30**

G25b: On average, how long did those walks take?

01 MINUTES
02 HOURS
03 ANSWERED IN BOTH MINUTES AND HOURS
99 REFUSED
98 DON'T KNOW / UNSURE

G25b: En promedio, ¿cuánto duraron estas caminatas?

01 MINUTOS
02 HORAS
03 RESPONDÍÓ EN MINUTOS Y HORAS
99 SE NEGÓ A CONTESTAR
98 NO SABE O NO ESTÁ SEGURO

**ASK IF G25B=01,03**

G25M ENTER MINUTES [RANGE=1-60]

**ASK IF G25B=02,03**

G25H ENTER HOURS [RANGE=1-48]

**ASK ALL**

**G6.** What kind of place do you USUALLY go to when you need routine preventive care, such as a physical examination or a check-up? *(WELKIND2)*

01 clinic or health center, ............
02 doctor’s office or HMO, ..........
03 hospital emergency room,.......  
04 hospital outpatient department, or
95 //GO TO G6 OTH//or some other place/other specify? ..........................
06 NO PLACE ............................

99 REFUSED ............................
98 DON'T KNOW/NOT SURE ....
¿A qué tipo de lugar va GENERALMENTE cuando necesita atención preventiva de rutina, como un examen físico o chequeo?

01 clínica o centro de salud
02 consultorio del médico o HMO
03 sala de emergencias del hospital
04 departamento ambulatorio del hospital o... 
05 algún otro lugar / otro (especificar)?
06 A NINGÚN LADO ......... 

98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

ASK IF G6=95
G6oth _________ Enter Other Specify

//ALL RESPONDENTS//

G7. Durante los últimos 12 meses, ¿cuántas veces ha consultado con un médico u otro profesional médico con respecto a su propia salud? No cuente las veces que haya pasado la noche en un hospital, emergencias, visitas de salud en su hogar o llamadas telefónicas a un médico u otro profesional médico.

[100 = 100 OR MORE VISITS]
(SEEDOCTR) _ _ _ TIMES ................. 0-100

999 REFUSED ....................... 
998 DON'T KNOW/NOT SURE ..

G7b. How long has it been since you last visited a dentist or a dental clinic for any reason?

(DENTIST)

[DO NOT READ]
01 Within the past year (less than 12 months ago).
02 Within the past 2 years (1 year but less than 2 years ago)....................... 
03 Within the past 5 years (2 years but less than 5 years ago)....................... 
04 5 or more years ago ........................................
05 Never..........................................................
06 A NINGÚN LADO ............ 

99 REFUSED .................................................
98 DON'T KNOW .................................................................

G7b. ¿Cuánto tiempo ha transcurrido desde que consultó con un dentista o fue a una clínica dental por cualquier motivo?

[NO LEER]
01 En el último año (hace menos de 12 meses)......
02 En los últimos 2 años (ha pasado 1 año, pero menos de 2).......................
03 En los últimos 5 años (han pasado 2 años, pero menos de 5).......................
04 Hace 5 años o más ......................................................
05 Nunca .....................................................................

98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

ASK ALL

G8. In the last 12 months, was there any time that you did (INSERT OPTION FROM LIST a. – e. BELOW) because of cost?

G8a. (COSTMED) Not fill a prescription for medicine that you needed
G8b. (COSTDR) Not get doctor care that you needed
G8c. (COSTSPEC) Not get specialist care that you needed
G8d. (COSTDENT) Not get dental care that you needed
G8e. (COSTMH) Not get mental health care that you needed

01 Yes
02 No
99 Refused
98 Don't know

[PROGRAMMER: NONSMokers AND ESTABLISHED FORMer SMokers SKIP TO SECTION H]
//IF B28 > 1 year OR B28b=01 OR B1=02 SKIP TO H1//

G8. En los últimos 12 meses, ¿hubo algún momento en el que (INSERTE LAS OPCIONES DE LA SIGUIENTE LISTA a. – e.) debido al costo?

G8a. (COSTMED) No renovara una receta para un medicamento que necesita
G8b. (COSTDR) No recibiera la atención de un médico que necesitaba
G8c. (COSTSPEC) No recibiera la atención de un especialista que necesitaba
G8d. (COSTDENT) No recibiera la atención odontológica que necesitaba
G8e. (COSTMH) No recibiera la atención de salud mental que necesitaba

01 SÍ
02 NO

98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR
ASK IF (B7=01,02 OR B9=01 OR (A14A=01,02 AND A10=01,02) OR D6=01,02 OR B28D=(0-364) OR B28W=(0-51) OR B28M=(0-11) OR B28A=02,98,99 OR IF B28=0) AND (G7>0 AND <998)

G9. /IF B28^[NB] INSERT “In the 12 months before you quit” IF B7=01,02 or B9=1 or (A14A=01,02 and A10=01,02) INSERT “In the last 12 months”/ did a doctor or other healthcare provider advise you to stop smoking?

(DRADVISE)

01  ........................................ YES
02  //SKIP TO G12//  ................... NO
99  //SKIP TO G12//  ................... REFUSED
98  //SKIP TO G12//  ................... DON’T KNOW / NOT SURE

G9. {En los últimos 12 meses/En los 12 meses antes de dejar de fumar}, ¿algún médico u otro proveedor de atención médica le recomendó que dejara de fumar?

01 SÍ
02 NO
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

//IF G9=01 CONTINUE; ELSE SKIP TO G10//

G10. {In the last 12 months/In the 12 months before you quit}, did a doctor or other healthcare provider refer you to, or give you information about a smoking cessation program?

(DRREFER)

01  ................................. YES
02  //SKIP TO G12//  ................. NO
99  //SKIP TO G12//  ................... REFUSED
98  //SKIP TO G12//  ................... DON’T KNOW / NOT SURE

G10. {En los últimos 12 meses/En los 12 meses antes de dejar de fumar}, ¿algún médico u otro proveedor de atención médica le recomendó dejar de fumar, y ¿lo hizo con información sobre un programa de cesación de fumar?

01 SÍ
02 NO
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR
G10. {En los últimos 12 meses/En los 12 meses antes de dejar de fumar}, ¿algún médico u otro proveedor de atención médica lo derivó o le dio información acerca de un programa para dejar de fumar?

01 SÍ
02 NO
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

//IF G10=01 CONTINUE; ELSE SKIP TO G12//

G10a. ¿Qué programa para dejar de fumar era?

01 /IF SAMPTYPE=0 INSERT "Colorado QuitLine" IF SAMPTYPE=1 INSERT QUITLINE ASSOCIATED WITH A13B/CA13B QUITLINE/............................................
02 INTERNET PROGRAM ........
03 A CLASS OR A GROUP .......
04 PRESCRIPTIONS.............
05 OVER THE COUNTER PRODUCTS LIKE THE PATCH .........................
06 PROGRAM thru INSURANCE
07 VA, HOSPITAL, CLINIC PROGRAM

95 OTHER (Specify) _________________
99 REFUSED .........................
98 DON'T KNOW / NOT SURE ..

ASK IF G10A=95

G10a oth.
ENTER RESPONSE ____________________________

[PROGRAMMER: IF RESPONDENT HAS NO HEALTH INSURANCE (G1=1), SKIP TO SECTION H.]
G12. Does your health insurance pay for help to quit smoking, such as counseling, prescriptions, or nicotine substitutes like gum or patches?

(HLTHPAY)

01 YES
02 NO
99 REFUSED
98 DON'T KNOW/NOT SURE

G 12. ¿Su seguro médico paga para ayudarle a dejar de fumar, tal como orientación, medicamentos recetados o sustitutos de la nicotina como los chicles o los parches?

01 Sí
02 NO
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR
ASK IF SECTION=0  
(NATIONAL SAMPLE WILL NOT BE ASKED THIS SECTION)  
RECORD TIME ELAPSED IN ALL OF SECTION H  
SECH  

//ASK SECTION H IF SECTION = 0  

PREH1 Now I would like your opinions on public policies and smoking.]  
01 CONTINUE  

PREH1 Ahora me gustaría preguntarle acerca de sus opiniones sobre de las políticas públicas y el tabaquismo.  
01 CONTINUE  

ASK IF SECTION = 0  
(PROGRAMMER: RANDOMIZE INTERVIEW ORDER OF QUESTIONS H1 AND H2/2A, ADD A FIELD THAT RECORDS THE QUESTION NUMBER ASKED FIRST)  

store order in H1ORD will contain a 1 if H1 asked first, otherwise will contain 2  

H1. Under Colorado law, you must be at least 18 years old to buy cigarettes or other tobacco products. Do you think the law is adequately enforced or is not adequately enforced?  
(MINORS)  
01 ........................... YES, ENFORCEMENT ADEQUATE  
02 .......................... NO, ENFORCEMENT NOT ADEQUATE  
99 ................................................................. REFUSED  
98 ................................................................. DON’T KNOW/NOT SURE  

H1. Según la ley de Colorado, una persona debe tener al menos 18 años de edad para comprar cigarrillos u otros productos con tabaco. ¿Cree que la ley está bien impuesta o que no se impone adecuadamente?  
(MENORES)  
01 ........................... SÍ, IMPOSICIÓN ADECUADA  
02 ........................... NO, IMPOSICIÓN NO ADECUADA  

98 NO SABE / NO ESTÁ SEGURO/A  
99 SE NIEGA A CONTESTAR  

ASK IF SECTION = 0  

H2. Stores in Colorado do not need a license to sell cigarettes and other tobacco products. Do you think the law should be changed to require a tobacco sales license, or do you think the law should stay the way it is without a tobacco sales license?  
(IF NEEDED: A tobacco license is similar to a license to sell alcoholic beverages.)  
(LICENSE)
Las tiendas de Colorado no necesitan una licencia para vender cigarrillos y otros productos de tabaco. ¿Cree usted que debería cambiarse la ley de forma que requiera una licencia para vender tabaco, o cree que la ley debería mantenerse tal como está sin una licencia para vender tabaco? [SI FUERA NECESARIO: Una licencia para vender tabaco es similar a una licencia para vender bebidas alcohólicas.]

(LICENCIA)

01 ........................................ CHANGE, REQUIRE LICENSE ➔ ask H2a
02 .............. NO CHANGE, STAY THE SAME, NO LICENSE ➔ skip to H3/H4
99 ......................................................................... REFUSED ➔ skip to H3/H4
98 ............................................... DON’T KNOW/NOT SURE ➔ skip to H3/H4

ASK IF H2=01

H2a. Colorado might someday require a tobacco sales license to sell cigarettes and other tobacco products, like a liquor license for selling alcoholic beverages. If Colorado starts requiring tobacco sales licenses, do you think a store that sells cigarettes to minors should have its tobacco license suspended?

(LICESUSP)

01 ................................................................................... YES ➔ preguntar H2a
02 ..................................................................................... NO ➔ pasar a H3/H4
98 ......................................................................... REFUSED ➔ skip to H3/H4
99 ............................................... DON’T KNOW/NOT SURE ➔ skip to H3/H4

ASK IF SECTION = 0
[PROGRAMMER: RANDOMIZE INTERVIEW ORDER OF QUESTIONS H3 AND H4 STORE IN H3ORD WILL CONTAIN A 1 IF H3 ASKED FIRST, OTHERWISE WILL CONTAIN 2, ADD A FIELD THAT RECORDS THE QUESTION NUMBER ASKED FIRST]

H3. Since 2006, Colorado has had a clean indoor air law that prohibits smoking in most workplaces including bars and restaurants. Speaking for yourself personally, has the clean indoor air law made your daily life a lot better, a little better, no different, a little worse, or a lot worse?
H3. Desde 2006 en Colorado existe la ley de aire limpio en interiores que prohíbe fumar en la mayoría de los lugares de trabajo, incluidos los bares y restaurantes. Hablando por usted mismo, ¿la ley de aire limpio en interiores ha hecho su vida diaria mucho mejor, un poco mejor, no hay diferencia, un poco peor o mucho peor?

01 ................................................................ MUCHO MEJOR
02 ..................................................................... UN POCO MEJOR
03 .................................................................. NO HAY DIFERENCIA
04 .................................................................. UN POCO PEOR
05 ................................................................... MUCHO PEOR

98 NO SABE / NO ESTÁ SEGURO/A

99 SE NIEGA A CONTESTAR

ASK IF SECTION = 0

H4. For each of the following locations, do you think the law should allow smoking or prohibit smoking?...

01 CONTINUE

H4. Para cada una de las siguientes ubicaciones, ¿cree usted que la ley debería permitir o prohibir fumar?

01 CONTINUE

[READ ONLY IF NECESSARY: For each of the following locations, do you think the law should allow smoking or prohibit smoking?...]

H4a. In outdoor public places such as parks, golf courses, zoos, sports stadiums? (OUTDOOR)
H4b. In outdoor restaurant dining patios? (PATIO)
H4c. Inside cars when children are traveling in them? (CARS)
H4d. In multi-unit rental housing such as apartment buildings and duplexes? (MULTUNIT)

01 .............................................................................. ALLOW
02 .......................................................................... PROHIBIT
03 ......................................................................... NONE OF THE LAW’S BUSINESS

99 ......................................................................... REFUSED
98 ................................................... DON’T KNOW/NOT SURE

H4. [READ ONLY IF NECESSARY: Para cada una de las siguientes ubicaciones, ¿cree usted que la ley debería permitir o prohibir fumar?]

H4a. ¿En lugares públicos al aire libre como parques, campos de golf, zoológicos, estadios? (EXTERIOR)
H4b. ¿En áreas de comedor en terrazas exteriores de restaurantes? .......................................................... (PATIO)
H4c. ¿Dentro de los automóviles cuando viajan niños en ellos? ................................................................. (AUTOMÓVILES)
H4d. ¿En viviendas alquiladas de unidades múltiples como edificios de apartamentos y dúplex? ........... (UNIDADES MÚLTIPLES)

01 ........................................................................ PERMITIR
02 ........................................................................ PROHIBIR
03 ........................................................................ NO ES UN PROBLEMA DE LA LEY

98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

ASK IF SECTION = 0
REPEAT PREH7 TEXT WITH [IF NECESSARY] FOR H7A-H7E

PREH7. Cigarette companies use different methods to increase the sale of their products. I will describe several of these methods. For each one, please tell me whether you think the law should allow or prohibit this method.

01 CONTINUE

[READ ONLY IF NECESSARY: Cigarette companies use different methods to increase the sale of their products. I will describe several of these methods. For each one, please tell me whether you think the law should allow or prohibit this method.]

H7a. Actors or actresses smoking in movies? ......................... (MOVIES)
H7b. Outdoor signs advertising tobacco at stores and gas stations? (SIGNS)
H7c. Sponsorship of sporting or cultural events by tobacco companies? (EVENTS)
H7d. Coupons to obtain free cigarettes by mail? ..................... (COUPONS)
H7e. Promotional offers such as “dollar-off” or “two-packs-for-the-price-of-one”? (DOLLAROFF)

01 ALLOW ...................................
02 PROHIBIT
03 NONE OF THE LAW’S BUSINESS

99 REFUSED ..............................
98 DON’T KNOW/NOT SURE ....

H7. Las compañías de cigarrillos utilizan diferentes métodos para aumentar la venta de sus productos. Describiré varios de esos métodos. En cada caso, dígame si cree que la ley debería permitir o prohibir este método.

01 CONTINUE

[READ ONLY IF NECESSARY: Las compañías de cigarrillos utilizan diferentes métodos para aumentar la venta de sus productos. Describiré varios de esos métodos. En cada caso, dígame si cree que la ley debería permitir o prohibir este método.]

H7a. ¿Actores o actrices que fuman en películas? ....................... (PELÍCULAS)
H7b. ¿Carteles exteriores promocionando tabaco en tiendas y estaciones de servicio? (CARTELES)
H7c. ¿Patrocinio de eventos deportivos o culturales por parte de compañías de tabaco? (EVENTOS)
H7d. ¿Cupones para obtener cigarrillos gratis por correo? .... (CUPONES)
H7e. ¿Ofertas promocionales como “un dólar de descuento” o “dos paquetes por el precio de uno”?

..........................................................................
01 .............................................................................. PERMITIR
02 .............................................................................. PROHIBIR
03 .................................. NO ES UN PROBLEMA DE LA LEY

98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

ASK IF SECTION = 0

PREH8. Next I would like your opinions on public policies and certain food items.

01 CONTINUE

PREH8. A continuación me gustaría saber su opinión sobre las políticas públicas y ciertos artículos alimenticios.

01 CONTINÚE

ASK IF SECTION = 0

H8a. Would you support or oppose a tax increase on candy in Colorado?

(...)

01 ................................................................. Support
02 ................................................................. Oppose

98 ........................................ DON’T KNOW/NOT SURE
99 ................................................................. REFUSED

H8a. ¿Apoyaría o estaría en contra de subir los impuestos a los dulces en Colorado?

(...)

01 ................................................................. Apoyo
02 ................................................................. En contra

98 ........................................ NO SABE/NO ESTÁ SEGURO
99 ................................................................. SE NEGÓ A CONTESTAR

ASK IF SECTION = 0

H8b. Would you support or oppose a tax increase in Colorado on soda pop, sports drinks, and other beverages that have sugar added?

[IF NEEDED: Diet sodas and other drinks without sugar would be excluded from such a tax increase. Soda pop means things like Coke, Pepsi, 7-Up or Sprite. Sports drinks means things like Gatorade. Other beverages that have sugar added include sweetened energy drinks.]

(...)

01 ................................................................. Support
02 ................................................................. Oppose
98 ............................................. DON’T KNOW/NOT SURE
99 ................................................................. REFUSED

**H8b.** ¿Apoyaría o estaría en contra de un aumento en los impuestos en Colorado a las gaseosas, bebidas deportivas y otras bebidas que tengan azúcar agregado?

[SI FUERA NECESARIO: Las gaseosas de dieta y otras bebidas sin azúcar estarían exentas de dicho aumento de impuestos. Gaseosa significa cosas como Coca Cola, Pepsi, 7-Up o Sprite. Las bebidas deportivas son aquellas como Gatorade. Otras bebidas con azúcar agregado incluyen bebidas energizantes endulzadas.]

01 .................................................................................... Apoyo
02 .......................................................................................... En contra

98 ............................................. NO SABE/NO ESTÁ SEGURO
99 ................................................................. SE NEGÓ A CONTESTAR

**ASK IF SECTION = 0**

**H8c.** Do you think restaurants in Colorado should be required to list the number of calories in the food items on their menu?

01 .................................................................................... Yes
02 ................................................................................................. No

98 ............................................. DON’T KNOW/NOT SURE
99 ................................................................. REFUSED

**H8c.** ¿Cree que debería exigirse que los restaurantes de Colorado incluyan la cantidad de calorías de los alimentos en su menú?

01 .................................................................................... Sí
02 ................................................................................................. No

98 ............................................. NO SABE/NO ESTÁ SEGURO
99 ................................................................. SE NEGÓ A CONTESTAR

**ASK IF SECTION = 0**

**H8d.** Do you think trans-fats should be banned from restaurants in Colorado?

01 .................................................................................... Yes
02 ................................................................................................. No

98 ............................................. DON’T KNOW/NOT SURE
99 ................................................................. REFUSED

**H8d.** ¿Cree que deberían prohibirse las grasas trans en los restaurantes en Colorado?

01 .................................................................................... Sí
02 ................................................................................................. No
ASK IF SECTION = 0

H8e. Do you think employers should be allowed to offer reduced health insurance premiums and lower copays to employees who maintain a healthy weight?

(...)

01 ........................................................................................................ Yes
02 ........................................................................................................ No

98 .................................................. DON'T KNOW/NOT SURE
99 ......................................................... SE NEGÓ A CONTESTAR

H8e. ¿Cree que los empleadores deberían poder ofrecer primas reducidas en los seguros de salud y copagos más bajos para los empleados que mantengan un peso saludable?

(...)

01 ........................................................................................................ Sí
02 ........................................................................................................ No

98 ....................................................... NO SABE/NO ESTÁ SEGURO
99 .............................................................. SE NEGÓ A CONTESTAR
ASK IF SECTION=1
RECORD TIME ELAPSED IN ALL OF SECTION I
SECI

ASK IF SECTION = 1
PRE I1 I would like to ask your opinion about laws and policies…
01 CONTINUE

PRE I1 Quisiera preguntarle sobre su opinión con respecto a leyes y políticas…
01 CONTINUE

ASK IF SECTION = 1
I1. These days, many people are so busy they can't find time to register to vote, or move around so often they don't get a chance to re-register. Are you NOW registered to vote in your precinct or election district or haven't you been able to register so far?

(REGIST)
01 .................................................. YES, REGISTERED
02 .................................................. NO, NOT REGISTERED, UNABLE TO REGISTER
95 .................................................. REGISTERED IN ANOTHER LOCATION
98 .................................................. DON'T KNOW/NOT SURE
99 .................................................. REFUSED

I1. Actualmente, muchas personas están tan ocupadas que no encuentran el momento para registrarse para votar o se mudan con tanta frecuencia que no tienen la oportunidad de volver a registrarse. ¿Está registrado AHORA para votar en su delegación o distrito electoral o no ha podido registrarse hasta ahora?

(REGIST)
01 .................................................. SÍ, REGISTRADO
02 .................................................. NO, NO REGISTRADO, NO SE HA PODIDO REGISTRAR
95 .................................................. REGISTRADO EN OTRO LUGAR
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

//ASK I2 IF I1 = 2, ELSE SKIP TO I3.

I2. What would you say is the main reason you’re not registered to vote?
[DO NOT READ; ACCEPT UP TO THREE RESPONSES; PROBE if needed with, “OK. Is there any other reason?”]
<table>
<thead>
<tr>
<th>#</th>
<th>Reason</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>NO TIME/JUST HAVEN'T DONE IT</td>
</tr>
<tr>
<td>02</td>
<td>HAVE RECENTLY MOVED/DON'T MEET RESIDENCY REQUIREMENTS</td>
</tr>
<tr>
<td>03</td>
<td>DON'T CARE ABOUT POLITICS/NOT INTERESTED IN THE ELECTION OR POLITICS</td>
</tr>
<tr>
<td>04</td>
<td>NO CONFIDENCE IN GOVERNMENT, POLITICS OR POLITICIANS</td>
</tr>
<tr>
<td>05</td>
<td>/SKIP TO I6/ NOT A U.S. CITIZEN</td>
</tr>
<tr>
<td>06</td>
<td>ILLNESS/DISABILITY</td>
</tr>
<tr>
<td>07</td>
<td>JUST TURNED 18</td>
</tr>
<tr>
<td>08</td>
<td>NO POINT IN VOTING/MY VOTE MAKES NO DIFFERENCE</td>
</tr>
<tr>
<td>09</td>
<td>RELIGIOUS REASONS</td>
</tr>
<tr>
<td>10</td>
<td>LAZY</td>
</tr>
<tr>
<td>11</td>
<td>DON'T UNDERSTAND POLITICS/I'M NOT KNOWLEDGEABLE</td>
</tr>
<tr>
<td>12</td>
<td>/SKIP TO I6/ FELON/ON PROBATION</td>
</tr>
<tr>
<td>13</td>
<td>/SKIP TO I6/ NOT ELIGIBLE</td>
</tr>
<tr>
<td>14</td>
<td>DON'T WANT TO GET MY NAME ON THE LIST FOR JURY DUTY</td>
</tr>
<tr>
<td>15</td>
<td>PLACE WHERE HAVE TO GO TO REGISTER IS INCONVENIENT/ FAR FROM HOME</td>
</tr>
<tr>
<td>16</td>
<td>DON'T KNOW WHERE/HOW TO REGISTER</td>
</tr>
<tr>
<td>17</td>
<td>WORK DURING VOTER REGISTRATION HOURS</td>
</tr>
<tr>
<td>18</td>
<td>DIFFICULTY WITH ENGLISH</td>
</tr>
<tr>
<td>95</td>
<td>OTHER (SPECIFY)</td>
</tr>
<tr>
<td>98</td>
<td>DON'T KNOW/NOT SURE</td>
</tr>
<tr>
<td>99</td>
<td>REFUSED</td>
</tr>
</tbody>
</table>

**II.** ¿Cuál diría usted que es el principal motivo por el que no está registrado para votar?

*NO LEER; ACEPTAR HASTA TRES RESPUESTAS PERO NO BUSCAR MÁS DE UNA*

<table>
<thead>
<tr>
<th>#</th>
<th>Reason</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>FALTA DE TIEMPO/ SIMPLEMENTE NO LO HE HECHO</td>
</tr>
<tr>
<td>02</td>
<td>HACE POCO QUE ME MUDÉ / NO CUMPLE CON LOS REQUISITOS DE RESIDENCIA</td>
</tr>
<tr>
<td>03</td>
<td>NO ME INTERESA LA POLÍTICA / NO ME INTERESAN LAS ELECCIONES NI LA POLÍTICA</td>
</tr>
<tr>
<td>04</td>
<td>NO CONFÍO EN EL GOBIERNO, LA POLÍTICA NI LOS POLÍTICOS</td>
</tr>
<tr>
<td>05</td>
<td>NO SOY CIUDADANO ESTADOUNIDENSE</td>
</tr>
<tr>
<td>06</td>
<td>ENFERMEDAD / DISCAPACIDAD</td>
</tr>
<tr>
<td>07</td>
<td>ACABO DE CUMPLIR 18</td>
</tr>
<tr>
<td>08</td>
<td>NO TIENE SENTIDO VOTAR / MI VOTO NO HACE LA DIFERENCIA</td>
</tr>
<tr>
<td>09</td>
<td>RAZONES RELIGIOSAS</td>
</tr>
<tr>
<td>10</td>
<td>PEREZA</td>
</tr>
<tr>
<td>11</td>
<td>NO COMPRENDO LA POLÍTICA / NO TENGO CONOCIMIENTO</td>
</tr>
<tr>
<td>12</td>
<td>DELINCUENTE / EN LIBERTAD CONDICIONAL</td>
</tr>
<tr>
<td>13</td>
<td>NO CALIFICO</td>
</tr>
<tr>
<td>14</td>
<td>NO QUIERO QUE MI NOMBRE FIGURE EN LA LISTA COMO CANDIDATO POSIBLE A JURADO</td>
</tr>
<tr>
<td>15</td>
<td>EL LUGAR AL QUE TENGO QUE IR A REGISTRARME ES POCO CONVENIENTE / LEJOS DE CASA</td>
</tr>
<tr>
<td>16</td>
<td>NO SÉ DÓNDE / CÓMO REGISTRARME</td>
</tr>
<tr>
<td>17</td>
<td>TRABAJO DURANTE EL HORARIO DE REGISTRO DE VOTANTES</td>
</tr>
<tr>
<td>18</td>
<td>PROBLEMAS CON EL INGLÉS</td>
</tr>
<tr>
<td>95</td>
<td>OTRO</td>
</tr>
<tr>
<td>98</td>
<td>NO SABE / NO ESTÁ SEGURO/A</td>
</tr>
<tr>
<td>99</td>
<td>SE NIEGA A CONTESTAR</td>
</tr>
</tbody>
</table>
IF I2=95

I2oth ENTER RESPONSE

ASk IF SECTION = 1 AND I2<>05,12,13
// RANDOMIZE READ ORDER STORE IN ROTI3_A THRU _H (VALUES 1 TO 8)
I3. Now I am going to read you some statements. For each, please tell me whether you strongly agree, somewhat agree, neither agree nor disagree, somewhat disagree, or strongly disagree with the statement. The first one is...
01 continue

I3. Ahora le voy a leer algunas frases. Para cada frase, dígame si está muy de acuerdo, algo de acuerdo, no está de acuerdo ni en desacuerdo, está algo en desacuerdo o muy en desacuerdo con la frase. La primera es...
01 continue

[READ ONLY IF NECESSARY: Now I am going to read you some statements. For each, please tell me whether you strongly agree, somewhat agree, neither agree nor disagree, somewhat disagree, or strongly disagree with the statement. The first one is...]

I3a. I sometimes feel I don't know enough about the candidates to vote
I3b. It matters more than usual who gets elected this year
I3c. I'm sometimes too busy to vote
I3e. Voting doesn't really change things
I3f. I feel it's my duty as a citizen to always vote
I3g. My vote doesn't really matter
I3h. I would feel guilty if I didn't get a chance to vote

01 STRONGLY AGREE
02 SOMEWHAT AGREE
03 NEITHER AGREE NOR DISAGREE
04 SOMEWHAT DISAGREE
05 STRONGLY DISAGREE
98 DON'T KNOW/NOT SURE
99 REFUSED

[READ ONLY IF NECESSARY: Ahora le voy a leer algunas frases. Para cada frase, dígame si está muy de acuerdo, algo de acuerdo, no está de acuerdo ni en desacuerdo, está algo en desacuerdo o muy en desacuerdo con la frase. La primera es...]

I3a. A veces siento que no sé lo suficiente sobre los candidatos como para votar
I3b. Me importa más de lo normal quién sale electo este año
I3c. A veces estoy demasiado ocupado como para votar
I3e. Votar realmente no cambia nada
I3f. Siento que es mi deber como ciudadano votar siempre
I3g. Mi voto no importa realmente
I3h. Me sentiría culpable si no votara

01 MUY DE ACUERDO
02 ALGO DE ACUERDO
03 NI DE ACUERDO NI EN DESACUERDO
04 ALGO EN DESACUERDO
05 MUY EN DESACUERDO
98 NO SABE
99 SE NEGÓ A CONTESTAR

//ON OR BEFORE NOVEMBER 6, ASK I4 AND I5. AFTER NOVEMBER 6, ASK I4b and I5b//

ASK IF SECTION = 1 AND I2<>05,12,13

I4. In the upcoming presidential election between Barack Obama and Mitt Romney, do you plan to vote, have you already voted, or do you not plan to vote?
01 .................................................. YES, PLAN TO VOTE
02 .................................................. ALREADY VOTED
03 .................................................. NO, DON'T PLAN TO VOTE
98 ................................................ DON'T KNOW/NOT SURE
99 .................................................. REFUSED

I4. En las próximas elecciones presidenciales entre Barack Obama y Mitt Romney, ¿piensa votar, ya ha votado o no piensa votar?
01 .................................................. SÍ, PIENSO VOTAR
02 .................................................. YA VOTÉ
03 .................................................. NO, NO PIENSO VOTAR
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

//IF I4= 03 (“NO, DON’T PLAN TO VOTE”), ASK I5//

I5. What is it that will keep you from voting?
[DO NOT READ; ACCEPT MULTIPLE RESPONSES; probe if needed with, “OK. Is there any other reason?”]
01 NOT REGISTERED
02 DON'T LIKE THE CANDIDATES
03 NOT INTERESTED IN POLITICS
04 NO PARTICULAR REASON
05 NOT A CITIZEN
06 WORKING
07 ILLNESS / DISABILITY
08 WEATHER
09 TRAVELING
10 BUSY
11 NO POINT IN VOTING/MY VOTE MAKES NO DIFFERENCE
12 FELON
13 NO CONFIDENCE IN GOV’T, POLITICS OR POLITICIANS
14 RELIGIOUS REASONS
I5. ¿Qué es lo que le impediría votar?
[NO LEA; ACEPTE RESPUESTAS MÚLTIPLES; de ser necesario, indague con “Ok, ¿Hay algún otro motivo?”]

01 NO REGISTRADO
02 NO ME GUSTAN LOS CANDIDATOS
03 NO ME INTERESA LA POLÍTICA
04 NO TENGO UNA RAZÓN EN PARTICULAR
05 NO SOY CIUDADANO
06 TRABAJO
07 ENFERMEDAD / DISCAPACIDAD
08 CLIMA
09 VIAJES
10 OCUPADO
11 NO TIENE SENTIDO VOTAR / MI VOTO NO HACE LA DIFERENCIA
12 DELINCUENTE
13 NO CONFÍO EN EL GOBIERNO, LA POLÍTICA NI LOS POLÍTICOS
14 RAZONES RELIGIOSAS
15 NO TENGO FORMA DE LLEGAR A LOS LUGARES DE VOTACIÓN / PROBLEMAS DE TRANSPORTE

95 OTRO
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

ASK IF I5=95

I5oth ENTER RESPONSE

ASK IF SECTION = 1 AND I2<>05,12,13
//ASK I4B AND I5B ONLY AFTER NOVEMBER 6//

I4b. In the recent presidential election between Barack Obama and Mitt Romney, did things come up that kept you from voting, or did you happen to vote?

01 .................................................. YES, VOTED
02 .................................................. NO, DIDN'T VOTE
98 .................................................. DON'T KNOW/NOT SURE
99 REFUSED

I4b. En las recientes elecciones presidenciales entre Barack Obama y Mitt Romney, ¿hubo cosas que le impidieran votar o votó?

01 .................................................. SÍ, VOTÉ
02 .................................................. NO, NO VOTÉ

98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR
What was it that kept you from voting?
[DO NOT READ; ACCEPT MULTIPLE RESPONSES; PROBE IF NEEDED, “OK. Is there any other reason?”]

01 NOT OLD ENOUGH
02 NOT REGISTERED
03 DIDN’T LIKE THE CANDIDATES
04 NOT INTERESTED IN POLITICS
05 NO PARTICULAR REASON
06 NOT A CITIZEN
07 WORKING
08 ILLNESS / DISABILITY
09 WEATHER
10 TRAVELING
11 BUSY
12 NO POINT IN VOTING/MY VOTE MAKES NO DIFFERENCE
13 FELON
14 NO CONFIDENCE IN GOV’T, POLITICS OR POLITICIANS
15 RELIGIOUS REASONS
16 NO WAY TO GET TO THE POLLS / TRANSPORTATION PROBLEMS
95 OTHER [SPECIFY]
98 DON’T KNOW/NOT SURE
99 REFUSED

¿Qué le impidió votar?
[NO LEER; ACEPTAR RESPUESTAS MÚLTIPLES, PERO NO BUSCAR ADICIONALES]

01 EDAD INSUFICIENTE
02 NO REGISTRADO
03 NO ME GUSTAN LOS CANDIDATOS
04 NO ME INTERESA LA POLÍTICA
05 NO TENGO UNA RAZÓN EN PARTICULAR
06 NO SOY CIUDADANO
07 TRABAJO
08 ENFERMEDAD / DISCAPACIDAD
09 CLIMA
10 VIAJES
11 OCUPADO
12 NO TIENE SENTIDO VOTAR / MI VOTO NO HACE LA DIFERENCIA
13 DELINCUENTE
14 NO CONFÍO EN EL GOBIERNO, LA POLÍTICA NI LOS POLÍTICOS
15 RAZONES RELIGIOSAS
16 NO TENGO FORMA DE LLEGAR A LOS LUGARES DE VOTACIÓN / PROBLEMAS DE TRANSPORTE

95 OTRO
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

IF I5B=95

I5both ENTER RESPONSE
ASK IF SECTION = 1
PRE16 On a completely different subject…
01 CONTINUE

PRE16 Cambiando totalmente de tema...
01 CONTINUE

ASK IF SECTION = 1
I6. Generally speaking, would you say that most people can be trusted or that you can’t be too careful in dealing with people?
01 MOST PEOPLE CAN BE TRUSTED
02 CAN’T BE TOO CAREFUL
03 OTHER/DEPENDS
98 DON’T KNOW/NOT SURE
99 REFUSED

I6. En general, ¿diría usted que se puede confiar en la mayoría de la gente o que nunca se es lo suficientemente cuidadoso al tratar con personas?
01 SE PUEDE CONFIAR EN LA MAYORÍA DE LAS PERSONAS
02 NO SE PUEDE SER LO SUFICIENTEMENTE CUIDADOSO
03 OTRO / DEPENDE

98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

ASK IF SECTION = 1
//RANDOMIZE READ ORDER STORE IN ROTI7_A THRU_P (VALUES 1 TO 16)

I7. I’m going to read you a list of institutions in American society. For each one, please tell me whether you have a great deal of trust, a fair amount of trust, not very much trust, or no trust at all.
01 CONTINUE

I7. Le voy a leer una lista de instituciones de la sociedad estadounidense. Para cada una, digame si le tiene mucha confianza, suficiente confianza, no mucha confianza o nada de confianza.
01 CONTINUE

[READ IF NECESSARY: I’m going to read you a list of institutions in American society. For each one, please tell me whether you have a great deal of trust, a fair amount of trust, not very much trust, or no trust at all.]

I7a The military
I7b Small businesses
I7c The police
I7d The church or organized religion
I7e Doctors
I7f The healthcare system
I7g The government
I7h News reporting
I7i Public schools
I7j Colleges and universities
I7k The criminal justice system
I7l Banks and financial institutions
I7m Labor unions
I7n Major corporations and major companies
I7o Wall Street
I7p Lawyers

01 GREAT DEAL OF TRUST
02 FAIR AMOUNT OF TRUST
03 NOT VERY MUCH TRUST
04 NO TRUST AT ALL
98 DON'T KNOW/NOT SURE
99 REFUSED

17. [READ IF NECESSARY: Le voy a leer una lista de instituciones de la sociedad estadounidense. Para cada una, dígame si le tiene mucha confianza, suficiente confianza, no mucha confianza o nada de confianza.]

I7a El ejército
I7b Pequeñas empresas
I7c La policía
I7d La iglesia o religiones organizadas
I7e Médicos
I7f El sistema de atención médica
I7g El gobierno
I7h Los noticieros
I7i Escuelas públicas
I7j Universidades
I7k El sistema de justicia penal
I7l Los bancos e instituciones financieras
I7m Sindicatos
I7n Grandes corporaciones y grandes empresas
I7o Wall Street
I7p Abogados

01 MUCHA CONFIANZA
02 SUFICIENTE CONFIANZA
03 NO MUCHA CONFIANZA
04 NADA DE CONFIANZA

98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR
SECTION K: OBTAIN NAME AND ADDRESS FOR FUTURE CONTACTS

// CREATE FLAG GOT2K FOR ALL RESPONDENTS WHO REACH THIS POINT //

ASK IF SAMPTYPE=0
RECORD TIME ELAPSED IN ALL OF SECTION K

//ASK IF SAMPTYPE=0//
PREK1 Finally, in the near future we will ask some people to complete a new survey about changes in health and details of some health conditions. Because you might be chosen for this future survey, I would like to collect your contact information. Would that be OK?

[IF ASKED: We will choose a variety of people in order to study different kinds of health needs.]
[IF ASKED: You are only agreeing to be contacted again. If we do contact you for the next survey, you may still decline to complete it at that time.]
[IF ASKED: The future survey might be ready as soon as a few months from now or as long as a year or two years from now.]
[IF ASKED: Your contact information will be securely stored, and only the researchers will have access to it.]

01 YES
02 NO

PREK1 Finalmente, en el futuro próximo les pediremos a algunas personas que completen una nueva encuesta sobre cambios en la salud y detalles de algunas afecciones de salud. Como tal vez lo elijan para esta futura encuesta, quisiera recolectar su información de contacto. ¿Está bien?

[SI LE PREGUNTAN: Elegiremos a una variedad de personas para estudiar diferentes tipos de necesidades de salud.]
[SI LE PREGUNTAN: Únicamente está acordando que lo vuelvan a llamar. Si lo llamamos para la próxima encuesta, aún puede decidir no participar en ese momento.]
[SI LE PREGUNTAN: La futura encuesta podría estar lista en unos pocos meses o en uno o dos años.]
[SI LE PREGUNTAN: Su información de contacto será almacenada en forma segura y únicamente los investigadores tendrán acceso a ella.]

01 SÍ
02 NO

ASK IF PREK1=01
K1. May I have your full name, please?
[ENTNAME]

01 YES........................................
02 NO........................................

99 REFUSED..............................
98 DON'T KNOW/UNSURE...........

K1. ¿Me puede decir su nombre completo?
01 SÍ
02 NO
98 NO SABE / NO ESTÁ SEGURO/A
99 SE NIEGA A CONTESTAR

//IF K1=01 CONTINUE; ELSE SKIP TO CLOSE//

[IF RESPONDENT REFUSES TO GIVE LAST NAME, CODE SHIFT 6.]

FIRST NAME  ______________________________________
(SPFNAM)
MIDDLE INITIAL  _______________________ /ALLOW BLANKS/
(SPMINT)

IF K1=01

SPLNAM1 What is your last name?
   01 GAVE RESPONSE
   02 REFUSED

SPLNAM1 ¿Cuál es su apellido?
   01 GAVE RESPONSE
   02 REFUSED

IF SPLNAM1=01

LAST NAME  ______________________________________
(SPLNAM)

IF SPLNAM1=01

PreK1b. May I have an alternate phone number other than the one I called you on today, which was [insert phone number here]?

01 RECORD RESPONSE
02 NO OTHER NUMBER
99 REFUSED

K1b. ¿Podría darme otro número de teléfono distinto al que llamé hoy, o sea el [insertar número de teléfono aquí]?

01 REGISTRAR RESPUESTA
02 NO HAY OTRO NÚMERO
99 SE NEGÓ A CONTESTAR
IF PREK1B=01
MIN/MAX 10 DIGITS

K1b ENTER PHONE NUMBER

IF SPLNAM1=01
AND K1B<>.

K1c. Which type of phone line is that?
01 land line
02 cell phone
03 other
(specify)_________________________________
98 DON'T KNOW/UNSURE
99 REFUSED

K1c. ¿Qué tipo de línea telefónica es?
01 Línea fija
02 Teléfono celular
03 Otro
(specifique)__________________________
98 NO SABE/NO ESTÁ SEGURO
99 SE NEGÓ A CONTESTAR

IF K1C=03

K1COTH ENTER OTHER MENTION

IF SPLNAM1=01

K2. May I have your mailing address?
01 RECORD RESPONSE
99 REFUSED

K2. ¿Podría darme su dirección postal?
01 RECORD RESPONSE
99 REFUSED

ASK ADDRESS IF K2=1
[PROBE FOR APARTMENT NUMBER]

STREET ____________________________________________
(RESPADDR)
CITY ____________________________________________
(RESPCITY)
ZIP ____________________________
(RESPZIP)

_IF SPLNAM1=01

PREK4. May I have your email address?
01 GAVE EMAIL
99 REFUSED

PREK4. ¿Podría darme su dirección de correo electrónico?
01DIO EL CORREO ELECTRÓNICO
99 SE NEGÓ A CONTESTAR

_IF PREK4=01

[Programming note: allow [anycharacter]@[anycharacter].[anycharacter]
K4 ENTER EMAIL ADDRESS
[Nota de programación: permitir [anycharacter]@[anycharacter].[anycharacter]
K4 INGRESAR CORREO ELECTRÓNICO

_IF PREK4=1

K4a. Let me read that back to you to make sure I have that right.
[INTERVIEWER READ BACK THE ADDRESS SPELLING OUT NAMES AND PUNCTUATION]
/INSERT K4 VALUE/
01 CORRECT
02 INCORRECT /RESET TO K4/

K4a. Permítame leerle su respuesta para asegurarme de tener la información correcta.
[ENTREVISTADOR: LEA LA DIRECCIÓN DELETREANDO NOMBRES Y PUNTUACIÓN]
/INSERTAR VALOR K4/
01 CORRECTO
02 INCORRECTO /VOLVER A K4/

_IF SPLNAM1=01

K3. In case you move, would you please give me the name and phone number of someone who does not live with you who would know your current telephone number? I will also need the town and state in which he/she lives.

01 RECORD RESPONSE
02 REFUSED

K3. Por si se muda, ¿podría darme el nombre y teléfono de alguien que no viva con usted que podría saber su número telefónico actual? También necesitaré la ciudad y estado en donde vive esa persona.

01 RECORD RESPONSE
02 REFUSED

**IF K3=01**

CONTACT PERSON:

<table>
<thead>
<tr>
<th>FIRST</th>
<th>LAST</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(CON1FNAM)</td>
</tr>
<tr>
<td></td>
<td>(CON1LNAM)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>PHONE</th>
<th>(CON1PHN)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(         ) - (         ) - (         )</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CITY</th>
<th>STATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>(CON1CITY)</td>
<td>(CON1STAT)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>ZIP</th>
</tr>
</thead>
<tbody>
<tr>
<td>(CON1ZIP)</td>
</tr>
</tbody>
</table>

**ASK IF CALLTYPE=1 AND (SEL2=. OR QBSTAT=2,3 OR SECOND LETTER OF SELF IS A 'C')**

ENDLL Thank you very much for your cooperation. Your assistance has been very helpful.

01 CONTINUE

ENDLL Muchas gracias por su colaboración. Su asistencia ha sido de mucha ayuda.

01 CONTINÚE

//LANDLINE SEGUE TEXT FOR 2nd HH INTERVIEW//

**ASK IF CALLTYPE=1 AND SEL2<=, AND QBSTAT<>2,3 AND SECOND LETTER OF “SELF” IS AN “A”**

OTHERGUY Thank you very much for your cooperation. Your assistance has been very helpful. May I now please speak to /INSERT SELECTED PERSON/ who has also been selected to answer more questions about health?

01 AVAILABLE/COMING TO THE PHONE
02 NOT AVAILABLE

OTHERGUY Muchas gracias por su colaboración. Su asistencia ha sido de mucha ayuda. ¿Podría hablar ahora con /INSERTAR PERSONA SELECCIONADA/ que también ha sido seleccionada para responder más preguntas sobre la salud?

01 DISPONIBLE/VIENE AL TELÉFONO
02 NO DISPONIBLE
IF OTHERGUY=02

BESTNUM Is there a better number to call to reach the /INSERT OTHER SELECTED RESPONDENT/?

01 YES
02 NO
03 REFUSED

BESTNUM ¿Hay un mejor número para llamar a /INSERTAR OTRO ENTREVISTADO SELECCIONADO/?

01 Sí
02 NO
03 SE NEGÓ A CONTESTAR

IF BESTNUM=01

NUM What is their phone number?

01 GAVE NUMBER
02 REFUSED

NUM ¿Cuál es su número de teléfono?

01 DIO EL NÚMERO
02 SE NEGÓ A CONTESTAR

IF NUM=01

MIN/MAX 10 DIGITS

NUM2 ENTER NUMBER

[INTERVIEWER READ BACK AND CONFIRM CORRECT]

NUM2 INGRESAR NÚMERO

[ENTREVISTADOR VOLVER A LEER Y CONFIRMAR QUE SEA CORRECTO]
**IF OTHERGUY=02**

NAME May I also have their name?
  01 YES
  02 NO

NAME ¿Podría darme su nombre también?
  01 Sí
  02 NO

**IF NAME=01**

NAME2 RECORD NAME

NAME2 REGISTRAR NOMBRE

**ASK IF OTHERGUY=02**

THNX Thank you very much for your cooperation. Your assistance has been very helpful.
  01 CONTINUE

THNX Muchas gracias por su colaboración. Su asistencia ha sido de mucha ayuda.
  01 CONTINÚE
//CELL PHONE CLOSING //

ENDCELL Those are all the questions I have for you. I want to thank you very much for your time and participation.

01 CONTINUE

ENDCELL Estas son todas las preguntas que tengo para usted. Quiero agradecerle mucho por su tiempo y su participación.

01 CONTINUE

---

**Appendix State Quitlines**

<table>
<thead>
<tr>
<th>State Name and Code</th>
<th>QuitLine Name with State Name</th>
<th>Number (if different from 1-800-QUIT-NOW)</th>
<th>QL short text</th>
</tr>
</thead>
<tbody>
<tr>
<td>001 ALABAMA (AL)</td>
<td>Alabama QuitLine</td>
<td></td>
<td>QuitLine</td>
</tr>
<tr>
<td>002 ALASKA (AK)</td>
<td>Alaska Tobacco QuitLine</td>
<td></td>
<td>QuitLine</td>
</tr>
<tr>
<td>003 ARIZONA</td>
<td>Arizona Smokers' Helpline</td>
<td>(800) 556-6222</td>
<td>QuitLine</td>
</tr>
<tr>
<td>004 ARKANSAS</td>
<td>Arkansas Tobacco QuitLine</td>
<td></td>
<td>QuitLine</td>
</tr>
<tr>
<td>005 CALIFORNIA</td>
<td>Helpline</td>
<td>(800) NO-BUTTS</td>
<td>QuitLine</td>
</tr>
<tr>
<td>006 COLORADO</td>
<td>Colorado QuitLine</td>
<td></td>
<td>QuitLine</td>
</tr>
<tr>
<td>007 CONNECTICUT</td>
<td>Connecticut QuitLine</td>
<td></td>
<td>QuitLine</td>
</tr>
<tr>
<td>008 DELAWARE</td>
<td>Delaware QuitLine</td>
<td>(866) 409-1858</td>
<td>QuitLine</td>
</tr>
<tr>
<td>009 FLORIDA</td>
<td>Florida QuitLine</td>
<td>(877) U-CAN-NOW or (877) 270-STOP</td>
<td>QuitLine</td>
</tr>
<tr>
<td>010 GEORGIA</td>
<td>Georgia Tobacco QuitLine</td>
<td>(877) 270-STOP</td>
<td>QuitLine</td>
</tr>
<tr>
<td>011 HAWAII</td>
<td>Hawaii Tobacco QuitLine</td>
<td></td>
<td>QuitLine</td>
</tr>
<tr>
<td>012 IDAHO</td>
<td>Idaho QuitLine</td>
<td></td>
<td>QuitLine</td>
</tr>
<tr>
<td>013 ILLINOIS</td>
<td>Illinois Tobacco QuitLine</td>
<td>(866) QUIT-YES</td>
<td>QuitLine</td>
</tr>
<tr>
<td>014 INDIANA</td>
<td>Indiana QuitLine</td>
<td></td>
<td>QuitLine</td>
</tr>
<tr>
<td>015 IOWA</td>
<td>Iowa QuitLine</td>
<td></td>
<td>QuitLine</td>
</tr>
<tr>
<td>016 KANSAS</td>
<td>Kansas Tobacco QuitLine</td>
<td></td>
<td>QuitLine</td>
</tr>
<tr>
<td>017 KENTUCKY</td>
<td>Kentucky Tobacco QuitLine</td>
<td></td>
<td>QuitLine</td>
</tr>
<tr>
<td>018 LOUISIANA</td>
<td>QuitLine</td>
<td>(800) NEW-CHOICE or (800) 207-1230</td>
<td>QuitLine</td>
</tr>
<tr>
<td>019 MAINE</td>
<td>Maine Tobacco HelpLine</td>
<td>(800) 207-1230</td>
<td>Helpline/ línea de ayuda</td>
</tr>
<tr>
<td>020 MARYLAND</td>
<td>Maryland QuitLine</td>
<td></td>
<td>QuitLine</td>
</tr>
<tr>
<td>021 MASSACHUSETTS</td>
<td>Massachusetts Smokers' Helpline</td>
<td></td>
<td>Helpline/ línea de ayuda</td>
</tr>
<tr>
<td>022 MICHIGAN</td>
<td>Michigan Tobacco QuitLine</td>
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<td>QuitLine</td>
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<tr>
<td>State</td>
<td>Quitline Name</td>
<td>Phone Number</td>
<td>Language</td>
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<td>-----------------------------------------------------------------</td>
<td>--------------------------------</td>
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</tr>
<tr>
<td>Minnesota</td>
<td>Minnesota QUITPLAN Helpline</td>
<td>(888) 354-PLAN (7526)</td>
<td>Helpline/ línea de ayuda</td>
</tr>
<tr>
<td>Mississippi</td>
<td>Mississippi Tobacco QuitLine</td>
<td></td>
<td>QuitLine</td>
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99 REFUSED

QuitLine

QuitLine
Appendix D: Interviewer Training Materials

This document begins on the next page.
2012 THE ATTITUDES AND BEHAIORS SURVEY on Health (TABS)
Interviewer Training Manual

Prepared by
ICF International
126 College Street
Burlington, VT 05401
October 12, 2012
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Overview

The Attitudes and Behaviors Survey on Health (TABS on Health) is an ongoing population-level study of adults providing detailed information about individual, community, and social-environmental factors related to risk factors that affect the health of Coloradans. While previous waves focused solely on tobacco, 2012 TABS incorporates additional risk factors and conditions that influence health. These risk factors include adult tobacco use, high blood pressure, high cholesterol, and diabetes.

The purposes of the study are to help identify the most widespread, influential and changeable risk factors; to determine how such factors vary by sociodemographic and other characteristics; and to help evaluate the impact of Colorado’s Amendment 35 funded grant programs.

Adult TABS was first conducted in 2001 and repeated in 2005 and 2008 (during these prior iterations it was called the Colorado Tobacco Attitudes and Behaviors Survey, or CO TABS). The survey has been funded in the past by tobacco litigation settlement proceeds (2001), and a voter-approved tobacco tax increase (2005). Historically, the TABS adult questionnaire has been based on the California Tobacco Survey and the tobacco-related questions of the Behavioral Risk Factor Surveillance System (BRFSS), which is conducted by the Centers for Disease Control and Prevention (CDC). Additional questions are developed before each survey wave to ensure that interviews address all major issues of current interest. The 2012 TABS includes additional question modules related to certain chronic diseases (e.g. high blood pressure, diabetes and high cholesterol), plus modules about policy as well as voting and social trust.

The TABS survey of adults collects information from people 18 years of age and older who speak English or Spanish and reside in a household with a telephone. In 2008 the sample was designed to include extra interviews within households with smokers and former smokers, African American and Hispanic adults, and adults living in certain parts of the state. This "oversampling" allowed for more accurate analysis of these groups, and this is included in the sampling plan for the 2012 wave. The total number of interviews was 13,006 in 2001; 12,257 in 2005; and 14,156 in 2008.

The 2012 wave will also include a national sample to enable comparisons on items that are not asked by other surveys at the national level. TABS interview targets are:

- 13,000 interviews among Colorado adults (9,100 via landline and 3,900 via cell)
- 3,000 interviews among adults throughout the remaining US states (2,100 via landline and 900 via cell).
The 2012 Attitudes and Behaviors Survey on Health (TABS on Health)

The 2012 TABS is designed to gather information on attitudes, use, and exposure to tobacco products, as well as awareness of tobacco control media campaigns. As mentioned, however, tobacco is not the sole focus. The questionnaire covers the following topics:

- Current Smoking Status
- Recent Smoking History
- Lifetime Smoking History
- Other Tobacco Use
- Smoking Restrictions
- High Blood Pressure
- High Cholesterol
- Diabetes
- Demographics
- Health Care
- Policy
- Voting and Social Trust
- Follow up/locator questions

Landline and Cell

For 2012, we will be implementing a landline version, as well as a cell phone version. The cell phone version is similar to the landline version. The primary differences are in the screener section of the survey and the possibility of conducting two interviews with landline respondents if there is a smoker, an African American, or a Hispanic residing in the landline household.

*The cell phone study will not do a random selection process,* but will screen for adult status. Further, the cell phone questionnaire will only select one person (the user) for interview, and never select another adult. The 2012 TABS has also increased the number of cell phone completes (consisting of 30% of the sample). The increase in cell phone interviews is to account for the increased number of respondents who either predominantly or only use a cell phone.

Modules

The 2012 administration of TABS has three new modules regarding specific health conditions (High Blood Pressure, High Cholesterol, and Diabetes). These modules have been included in an
Effort to understand how individuals with these conditions perceive the effects of these health risk factors and the relationship between them and health behavior.

A registry will be created of 2012 TABS respondents who have any of the three targeted risk conditions, or who are overweight/obese. A sample of respondents with none of these four risk factors will be included in the registry to enable comparisons. This registry will be used to conduct a future module that plans to explore adult overweight/obesity factors for public health targeting, as well as additional future modules as yet to be determined that will inform decisions about public health program directions in Colorado.

**Purpose of the 2012 TABS**

Tobacco control programs are designed to help reduce disease, disability and death related to tobacco use. To determine the effectiveness of these programs, we must document and measure their implementation processes and their effects. Evaluation is a tool used to assess the implementation and outcomes of programs, increase program efficiencies and impacts over time, and demonstrate accountability.

Evaluation encourages us to examine program operations, including the activities that take place, the fidelity of the implementation to existing protocols, who conducts the activities, and who is reached as a result. Through program evaluation, we can make sure activities are implemented as planned, determine if awareness of the problem increases and behaviors and attitudes change, and identify program strengths and areas for improvement. Our goal is to collect data and evaluate tobacco and selected chronic disease prevention and control efforts in order to examine the relationship between what we have (resources), what we do with it (interventions), and what happens as a result (outcomes).

**The Importance of Conducting High Quality Interviews**

In making important decisions that will affect the health of Colorado residents, lawmakers and policymakers rely on the data collected in the TABS. They rely on the validity of the data collected. The TABS is a critical link between the actual lives and habits of Colorado residents, and the decisions that are made by people in decision-making positions.

The most important factor in obtaining valid, reliable data is the TABS interviewer. After the interviews are completed, the only records left are the answers that the interviewers have recorded. Answers that are not recorded cannot be analyzed, and those that are recorded incorrectly cannot be analyzed correctly. It is important to be consistent in conducting the survey, and to obtain answers that are as accurate and complete as possible on every interview.
Interviewing technique affects data quality, and data quality influences important decisions. You are an important part of a team not only at ICF International, but for Colorado statewide.

Interviewers must be qualified to dial on this project; specifically, interviewers must successfully accomplish the following:

1. Practice for a minimum of two hours:
   - Reading silently
   - Reading aloud in pairs, including practicing (taking turns being the interviewer and a respondent)
2. Pass a quiz on the FAQs with a score of 80% or better
3. Pass a quiz on the protocols for using the alpha, beta, and Charlie studies, including refusal protocol scenarios with a score of 100%.

Fielding Methodology

The methodology behind fielding the TABS is important to ensure reliability and to prevent bias in the data. Ideally, in order to collect data that reflects the health habits of the population of interest, data would be collected from all Colorado residents. Of course, this is impossible. A statistical survey such as the TABS gathers information from a pre-determined number of people—a sample of adult Colorado residents (as well as a comparison sample of residents in the remaining US states). Researchers then formulate conclusions for the general adult population of Colorado using statistical techniques.

The TABS survey protocols are designed to ensure that the data are representative, reliable, and complete. These protocols were developed by the CDC for the specific purpose of conducting general population state adult tobacco telephone surveys.

Sample

The TABS will use RDD sample to conduct the interviews. We will be interviewing both land line and cell phone records. The important thing to know about the sample is that it is limited. We have a certain number of records from which we need to get a target number of completed interviews. It is imperative that you try your best to make every record a complete.
Representing the Entire Population

To prevent bias and ensure that the sample is representative of the entire adult population of Colorado, the telephone numbers in the TABS are selected at random. The computer is provided with the area code and a three-digit prefix in order to select the region for calling. The computer then randomly selects the last four digits of the telephone number. Therefore, all possible numbers within a region have an equal probability of being selected for calling. Selection is not based on whether or not a phone number is listed or assigned. Any number within the area code may be called. Sample will be released as necessary to achieve the targeted number of completes; however, every number released must be dialed until protocol is fulfilled.

As summarized in the text box above, after a household is randomly selected a few more steps in the selection process need to take place to ensure that data are representative of the adult population. Within each eligible household, the interviewer (with the help of the computer) conducts a random selection of adults in the household. The goal of this selection process is to ensure that the demographics of the people who are surveyed in a given state match the demographics of the population in that state. The random selection process selects by smoking status. You will ask the first adult, 18 years of age or older, who answer the phone a series of questions about the members of the household to randomly select a person to be interviewed. Some questions include:

- First, we need to gather some information about each household member, 18 years or older, so the computer can pick someone at random for the interview. Can you please tell me how many members of your household, including yourself, are 18 years of age or older? How many of those adults are women? How many adults are men?
- As far as you know, {have you/has the [INSERT ADULT]} smoked at least 100 cigarettes during {your/his/her} entire life?
- As far as you know, {do you/does he/she} smoke cigarettes every day, some days, or not at all?
- As far as you know, {have you/has he/she} smoked any time in the past 12 months, that is, since [INSERT DATE OF INTERVIEW]?

There are additional demographic questions asked of this initial respondent before we ask to speak with the selected person.
Details of how the selection process works

The TABS landline screener has a maximum of 2 “rounds” of selection. First, the computer will randomly select 1 adult 18+ from the household residents, regardless of smoking status. If, after the 1st “round” of selection, one or more adults currently smokes, or an African American adult or a Hispanic adult remains in the household, then a second round of selection is activated. The second round of selection randomly selects 1 adult current smoker, African American or Hispanic respondent from those remaining (prioritizing the selection in that order). In some households, only 1 adult will be selected for an interview, in other households, a maximum of 2 adults will be selected for an interview.

After the household is rostered, you will be prompted by your CATI screen to read the selected household members(s). The interview starts with the first selected respondent. At the end of the interview, the computer will prompt you with some text to ask for the second selected household member (if applicable).

Thus, with the TABS study, there is an exception to the random sample (after the first person is selected) to increase response among smokers, African American, and Hispanic respondents. Of the 11,200 expected landline interviews, some of these will be household interviews with a randomly selected adult, and some will be with a second person interview, if after the first person is randomly selected, a smoker, an African American respondent or a Hispanic respondent remains in the same household. That means that for some records, after completing the initial interview, we will ask for the other selected respondent. In some cases we will need to re-contact the household to interview the other selected member of the household.

For the cell phone portion of the study, the sample is generated in the same format using a computer. The computer is provided with the area code and a three-digit prefix of all known cell phones in the Colorado area for the Colorado study, and for the remaining states for the comparison study. The computer randomly selects the last four digits of the telephone number.

For cell phone, there is no random respondent selection. The person who has the cell phone is the selected respondent provided that they live in Colorado (for the Colorado study) and that they are 18 years of age or older.
Interview Targets

- ICF International is required to conduct 16,000 interviews for the 2012 TABS.
- Of the 16,000 interviews:
  - 4,800 will be cell phone interviews (30% of the sample)
  - 11,200 will be Land Line interviews (70% of the sample)

As discussed, for the landline study, we will go through a selection process at the beginning of the survey where we will ask questions regarding the number of adults in the household and the number of adult men and women. The computer will then randomly select one or two (if the second round of selection is triggered) adult(s) from the household for inclusion in the study. It is critical that we interview the person(s) selected by the computer. No other household member can be interviewed. **Proxy respondents are NOT allowed.**

For the cell phone study, the person on the cell phone is the selected respondent. There are screener questions to verify that it is a cell phone and that they are 18 years of age or older.

Number of Attempts

**Landline**

The landline version will follow the standard ATS and BRFSS CDC protocols. Each record in the sample must receive a terminal disposition or 15 attempts per household. There are three calling occasions: Weekday (9–5), Weekday Evening (5–9), and Weekend (10–9). The 15 attempts per household will be called over the following three day parts:

For household contacts:
- Monday – Friday: 9:00 a.m. – 5:00 p.m.  3 attempts
- Monday – Friday: 5:00 p.m. – 9:00 p.m.  3 attempts
- Saturday (10:00 a.m. – 9:00 p.m.) & Sunday (10:00 a.m. – 9:00 p.m.)  3 attempts

We will make 6 additional attempts to the above spread out across the 3 day parts.

These calling protocols minimize bias (such as only calling people that are available in the evenings) and maximize completeness (the effort designed to reach every eligible respondent).
**Cell**

The cell phone version uses a modified protocol that has been used in other ATS and BRFSS Cell phone studies. Specifically

- 6 attempts per household during 3 different day parts.

For cell phone contacts:

- Monday – Friday: 9:00 a.m. – 5:00 p.m. 2 attempts
- Monday – Friday: 5:00 p.m. – 9:00 p.m. 2 attempts
- Saturday (10:00 a.m. – 9:00 p.m.) & Sunday (10:00 a.m. – 9:00 p.m.) 2 attempts

**Special Interviewers**

In addition to experienced interviewers, there will be a special interviewer responsible for dialing Spanish language interviews (Comma Five Interviewers), as these records will need to be dialed by bilingual team members. The Spanish language version should be available October 17th. More information about Spanish-language interviews is presented later on page 36.

**Response Rates**

The response rate measures the extent to which interviews were completed from among the telephone numbers selected for the sample. The higher the response rate, the lower the potential bias in the data. We have a limited number of records from which to get completed interviews.

In recent years, response rates have been declining. This may be due, in part, to new technologies such as privacy managers and caller ID. We all need to work harder to maintain a high response rate.

Interviewers are the primary people responsible for achieving high response rates. You can help achieve high response rates by using your best calling skills on every interview, becoming successful in dealing with resistance and refusals, knowing and using the strict protocols for dispositions, and making callbacks to reach respondents.

**Interviewers - Achieving High response**

This is where you come in. Conducting the interview is the most important part of the process of collecting the TABS data. When you conduct each interview professionally, without bias, and record the responses accurately, you ensure that the data ICF International produces for the University is valid and of the highest quality.
ABCs of Telephone Interviewing

There are four elements to an interview: the survey questionnaire; the protocols; the respondent; and the interviewer. The questionnaire and the protocols are fixed and unchanging. Respondents are the biggest variable; they represent the whole range of human behavior and experience. Every respondent presents a different degree or kind of challenge. Interviewers can learn to follow protocols and at the same time successfully handle any challenge a respondent might present.

There are many key elements to successfully conducting a telephone interview. Below are the key elements of proper telephone interviewing that should form part of your approach to telephone interviewing. Take the time to review each one of them and remember: practice makes perfect!

Elements of Proper Telephone Interviewing

Read every question verbatim

- Read every question exactly as written as it comes up on your screen.
- Data collected in a survey is reliable and valid ONLY if every question is read verbatim.

Maintain a professional approach

- Being professional means being prepared, reading verbatim, understanding the survey, building your skills as an interviewer, and giving every call your best effort.

Use your best voice and phone manner

- Be courteous and friendly, pleasant, and professional
- Approach introductions with confidence, and be patient and polite at all times.
- You can build rapport with a respondent by maintaining a pleasant voice quality, reading the questions in a natural, conversational manner, reading with expression and sounding interested.

Focus on respondents and listen carefully

- Pay close attention to what respondents are saying and how they are saying it.
- Adjust pace according to respondents’ needs

Be respectful and sensitive at all times

- Remember that any question may be sensitive to a particular respondent.
- Remain focused and professional when asking sensitive questions or encountering emotional responses.
Make an effort to reassure hesitant respondents

- Remain polite, respectful, professional, and informative. This is the best way to reassure a respondent who is hesitant and obtain cooperation from a respondent who expresses objections.

Stay in control of the interview

- Your task is to read every question verbatim and obtain valid and accurate answers.
- Be prepared with strategies to maintain control and deal with problem situations.

Maintain neutrality

- The questionnaire is designed to elicit a free flow of ideas and opinions. Respondents need the freedom to say what they think and feel without being influenced by anything an interviewer might say.
- The interviewer must make every effort not to influence the respondent’s opinions, suggest answers, or lead the respondent to a specific answer. Interviewers should be nonjudgmental, noncommittal, and objective.

Avoid leading

- You want answers to come from the respondent, and not from anything you have suggested or influenced.
- If the respondent is having trouble answering the question within the choices given, re-read the question and the answers.
- Use neutral probes, if necessary.

Dealing with Refusals

The TABS protocol specifies that with the exception of verbally abusive respondents, respondents who initially refuse to be interviewed will be contacted again (one more time for selected respondents and potentially two more times for non-selected respondents) to give them the opportunity to complete the interview. It is best for this contact to be made by a supervisor or a special Refusal or “Comma Four” Interviewer.

Here are a few things to keep in mind about refusals and your approach to them:

- Respondents are sometimes rude and hostile for reasons that have nothing to do with your skill as an interviewer or you as a person. Don’t take these reactions personally.
- Rather than reacting to a respondent’s anger or resistance, remain calm and listen. Use what you are hearing to address the respondent’s objection.
• Refusal conversion skills get better with practice. Make the effort at refusal conversion every time you encounter resistance.

• Listen to other interviewers who are successful at refusal conversion. Notice what they do. For one thing, often their voices become even more pleasant, conversational, and gentle. For another, they don’t say the same line every time. They adapt their approach to the particular respondent.

• Do not be afraid to be assertive with hesitant respondents; use all of your powers of persuasion to get the interview. Now is better than later. Research has shown that the highest completion rates occur at the initial contact and decline with each successive call. Unless it is clearly a bad time, the interviewer should always try to convince the respondent to do the interview at that time.

• Project a confident and reassuring manner while conveying a genuine interest in the respondent. For example, if the respondent is in the middle of cooking dinner, apologize for calling at an inconvenient time, and offer to call back later. This will convey the interviewer’s willingness to accommodate the respondent and an understanding of the importance of the respondent’s time.

• It is very important to document the reason for the initial refusal because this information may help convert a refused interview into a completed interview on a later call.

• Use the information in the message field (from the initial refusal) to prepare specific responses and approaches on the present call.

• Distinguish between a refusal and an appointment. “I don’t have time to talk right now,” may indeed mean that the person is busy. In this case, try to set an appointment for a callback time.

• If a respondent seems willing to participate, but is concerned about the survey’s legitimacy, explain the purpose of the survey. Offer the supervisor 1-800 number at your call station. If a respondent specifically requests to speak with someone from the University of Colorado you may offer the contact person and the phone number that is located on the FAQ Sheet.
  o For general questions call Emily Burns at CU Denver: 303-724-3536.
  o For questions related to being a research subject/IRB, etc. please call The Institutional Review Board at (303) 724-1055. Reference COIRMB protocol number 05-0785.

The percentage of refusals based on the total number of records called in a given interviewing period is an indicator of both interviewer performance and the degree of potential bias in the survey data.
Dealing with Problem Situations

Experienced interviewers build up a repertoire of phrases to use in difficult situations that arise during an interview. Here are some suggestions for dealing with difficult situations. Other approaches may also work. Keep track of these in your notes.

- **The rushed respondent**: “We have only about two minutes (give an honest estimate) left until the end. We can do this quickly if we both focus on the questions.” Or, “It is possible to suspend this interview and complete it at another time. We can arrange a time at your convenience. Would you prefer to do that?”

- **The chatty respondent**: “You are making some good points. We’ll be getting to some of those questions in a little while. If there is anything we haven’t covered by the end of the survey, you can tell me then.” Then re-read the question and the choices provided.

- **The confused respondent**: When the respondent is not able to decide on an answer or does not seem to understand the question, the entire question should be repeated. Repeat the question more slowly, making sure you are speaking directly into the mouthpiece. Repeat the answer choices if necessary. The respondent may not have heard the question fully the first time, or might have missed the question’s emphasis.

- **The distracted respondent**: Re-read the question and the choices. Try to move the survey along, bringing the respondent back to the next question. Offer to suspend if the respondent is distracted by something else going on in the house. (Offering to suspend sometimes helps a person to focus better!) Listen carefully and try to analyze what’s going on. In these situations, you need to use good judgment and deal with the situation accordingly.

- **The argumentative respondent**: Once you get into the survey questions, it is rare to have a respondent become argumentative on this study. You can say, “These are the questions the University of Colorado, Denver considers to be important.” “You can refuse to answer any question you don’t want to answer. Remember, all your answers are confidential.”

- **The abrupt respondent**: If a respondent has answered a question previously and cuts you off, say, “I have to read every question as it comes up on my screen.”

- **The forward respondent**: One way to deal with a respondent who answers the question before you have read the whole question is to go ahead and read the whole question every time or say, “I have to read every question in full.” Respondents then get the idea that they will have to listen to the whole question before giving an answer.

- **The emotional respondent**: Above all, maintain focus, and listen. Adjust your pace and tone of voice, if necessary. If the respondent is upset, make a judgment as to whether to offer to suspend. In general, as long as the respondent is able to focus, and can understand and answer the questions, continue the interview.
All of these strategies help interviewers stay in control of the interview. Done smoothly and confidently, with a pleasant voice and manner, these techniques can also help you to build rapport with the respondent.

Note: After a difficult interview, take a deep breath and count to five to clear your mind before beginning the next interview. Promise yourself to take extra good care of yourself on the next break.

Probing and Clarifying

Probing and clarifying, or using words to obtain more information or more precise information, is one of the most challenging and important aspects of interviewing. Probes are used when an answer is inadequate and requires the interviewer to seek more information. Probes are also used when a respondent is unsure of an answer and is having trouble making a choice.

Here are some general ideas about probing and clarifying to keep in mind:

- Effective probing requires that the interviewer understand a question’s rationale. Different questions ask for different kinds of information. Learn the intent of the question. Different kinds of questions require different kinds of probes or clarifying techniques.

- Use neutral questions or statements to clarify a response or elaborate on an inadequate response:
  
  - Can you explain that?
  - I can only enter one answer. Which would you like me to record?
  - What does the question mean to you?
  - Which choice would you like me to use?
  - What would your best estimate of the average number of times?
  - Would you like me to enter “yes” or “no” for that?
  - So, on a scale of “not at all concerned, slightly concerned, moderately concerned, very concerned, and extremely concerned what would you like me to put?”

- Avoid leading when probing. You want the answer to come from the respondent, and not from anything you have suggested or influenced. Some forms of leading an interviewer must NEVER say include:
  
  - “So you said you started smoking when you were 14 or 15 years old. Is that more like 14?”
  - “I don’t suppose you have tried to quit smoking in the past 12 months.”

- Use bounded recall to probe on questions involving a date. Don’t accept “don’t know” without first trying to arrive at the respondent’s best recall.
  
  - Do you remember what season that was?
Okay, in the winter, do you think that would have been December, January, or February?

Last summer would have been summer of 2011. Was it 2011 or a year before that?

- Some questions ask for multiple responses. Ask “Anything else” until the respondent says, “no” or until you have entered the number of answers allowed.
- When the respondent is unable to decide on an answer, does not understand the question, or misinterprets the question, the entire question and the choices should be repeated.
- The silent probe is also useful. Pausing or hesitating indicates that more or better information is needed.
- Respondents often dodge a question with “I don’t know.” An initial “I don’t know” should be probed. Sometimes the respondent just needs a little time to think over the answer. If the respondent really does not know the answer, record “Don’t know.” (Occasionally “Don’t know” is a legitimate choice, as in a question of knowledge. In this instance, no probe is needed.)
- The best verbal probes are skillful and quick. This can be learned with practice. You want to be able to probe and still keep the interview moving right along.
- It is especially important to probe on questions that are part of a skip pattern. Future questions depend on the answer to these questions. Make a note of where skip patterns occur in the survey.
- You can verify that you have recorded the correct answer by repeating the answer back to the respondent.

While you are conducting an interview, keep in mind the objectives of the 2012 TABS. Remember that this is an important study that has the potential to affect the health of Colorado residents. Remember that the client is relying on you and is counting on your best effort on this and every interview. Be prepared; know the survey; use your best voice quality; read verbatim; probe when necessary; record all answers accurately. Strive to meet productivity standards without sacrificing quality.

**TABS Survey Protocols**

The following procedures must be followed to ensure that the data collected by ICF International is valid and reliable. ICF International’s contract with the client specifies that these protocols will be followed. It is your responsibility as an interviewer to understand and implement these protocols. The TABS will follow the 2012 BRFSS/ATS protocols.
Reading Verbatim

Much work has gone into the writing and testing of the TABS questions. Every question should be read to the respondent exactly as written. Methodological studies have shown that even slight wording changes, such as substituting “should” for “could” drastically influence the respondent’s perception of what is being asked and their responses to the question.

- The questionnaire should be thought of as a script, and the questions should be read exactly as they appear.
- Questions must be read in the exact order in which they appear.
- Read all questions in full. Never accept an answer if you are interrupted and have not read the entire question.
- Interviewers must ask every question. In answering one question, a respondent may sometimes answer another question that appears later. If that happens, the interviewer must still ask the question.

The questions that appear on the screen are part of the contract agreement between ICF International and the client. These are the questions the client wants interviewers to read. ICF International, in signing the contract, is guaranteeing that interviewers are reading verbatim. Quality assurance assistants and supervisors monitor interviewers to verify that interviewers read verbatim. University staff will also remote monitor calls.

Proxy Respondents

A proxy respondent is when one person answers for another. Proxy respondents are NOT allowed on the TABS. There are some reasons for this. First, the proxy may not have the correct information. Second, many questions are personal, and the respondent may not be willing to give honest answers to the proxy.

If the person on the phone says that the selected respondent cannot hear well enough to do the interview or is too ill to come to the phone, make an attempt to speak to the selected respondent to determine for yourself whether or not the interview can be conducted with that person. If it is not possible, the record should be given an appropriate disposition such as “unable to complete due to impairment” or “language barrier.”

Respondent Selection

Proper administration of the selection process is extremely important. None of the survey questions can be asked until an eligible respondent has been selected. Give this process enough time and attention. The selection process ensures that we are interviewing all types of people. If this is done correctly, the data gathered is valid. This process has a number of steps.
**Eligible phone number:** Verify the phone number on the introduction screen. Only residential phone numbers are eligible. Non-eligible numbers include businesses, cell phones (if you’re calling on the landline study), computer and fax lines, pay phones, etc. Non-residential phone numbers should be assigned an appropriate disposition.

**Eligible Household:** An eligible household is a housing unit that has a separate entrance; where occupants eat separately from other persons on the property; and is occupied by its members as their principal or secondary place of residence. Non-eligible households include the following:

- Vacation homes occupied by household members. *NOTE:* for TABS, Vacation homes are dwellings that are not considered the primary place of residence.
- Group homes (sororities and fraternities, halfway houses, shelters, etc.).
- Institutions (nursing homes, college dormitories, etc.).

**Selection Process:** Interviewers will ask how many adults over 18 are residents of the household. You will ask for some basic demographic information of each of these adult household members (e.g. gender, ethnicity, and race). Further, you will also ask some limited smoking history questions in the screener. Once the information is entered, the computer randomly selects up to two adults in the household to be interviewed.

**Eligible Residents:** Eligible household members include all related adults (aged 18 years or older), unrelated adults, roomers, and domestic workers who consider the household their home. Household members do not include adult family members who are living elsewhere.

As you go through the selection process, remember the following:

- Everyone 18 or older should be counted among the adults living in the household. High school students who are 18 years old or older should be included, as should adult children living at home. College students who are living away from home ARE included if they live in campus housing such as a dorm, sorority/fraternity/campus theme housing, etc. College students living “off-campus” (in an apartment or house that is not part of the campus) are NOT Included.
- When you are asked to confirm ages, names/initials, and/or gender of adults in the household, be sure to read this back to the respondent and get confirmation that this is correct.

**Rostering the Household**

A series of questions in the screener, A6 through A14, ask the person on the phone for the number of adult females/males in the household, ethnicity, race, etc. There are options to refuse at each of these levels. It’s likely that by the second or third person, you will have a pretty good assessment of the cooperation level of the respondent. If the respondent will not
allow you to work within the options we present for identifying other household members, you can type TERM or TERMINATE and give the record a callback disposition.

**Verifying the selected respondent:** To proceed into the survey, the selected respondent, and no other person, must be on the phone. If at any time you begin to question whether you have the correct respondent on the phone, verify with whom you are speaking. You may have to ask the correct person to come to the phone, and then back up and repeat questions with that person. You may have to end the call and put in a callback to reach the correct person at another time. Both of these are better options than completing the interview with the wrong person.

**Rectifying errors in the selection process:** Once a respondent has been selected, there is an option to redo the selection process at A14a. This option requires a supervisor password, so you should raise your hand and explain the situation to the supervisor.

**If you suspect another party is on the line/someone is listening in:** Having another person listen in on a respondent’s interview could compromise the validity of the data—some respondents may not provide fully accurate/truthful responses if they know their spouse, brother, sister, or parent (for instances) is listening.

If you suspect that another person other than the selected respondent is listening in on the call do the following:

- Politely ask the respondent is this is still a good time to conduct the interview, you can say “Is this still a good time to talk? I can schedule another time to call you back to finish the survey.”
- If the respondent says yes, schedule a callback. If they want to complete now, continue the interview, write down the Masterid and alert your supervisor immediately at the end of the call.
- Project Management and University will make a decision as to whether to keep this interview data.

If you know for sure than someone else is listening in (for example they speak over or try to answer for the selected respondent, or they just ask to listen in), it’s ok to say “I’m sorry, for confidentiality reasons I’m only allowed to conduct the interview with one person. Is it ok to continue with just the person selected for interview, or can I schedule a better time to call back?”

If the other respondent still listens in, continue the interview, write down the Masterid and alert your supervisor immediately at the end of the call. The data is likely compromised and we may not keep it—Project Management and University staff will make this decision.
Reselecting a Respondent

Occasionally something goes wrong in the selection process, such as the residence is confirmed as eligible, but there is no person fitting the description of the selected respondent. This could occur because the selected respondent has moved out (or is now deceased); or the selected respondent is actually at the residence so infrequently as to be a non-resident (i.e. stays with friends, picks up the mail at the house). The interviewer should follow these steps:

- Verify that the selected respondent does not live there.
- Explain the situation to the resident with whom you are speaking.
- Go through the selection process with the respondent, and complete the interview or schedule a callback.

If the respondent is no longer on the phone, schedule a callback.

Unique Situations in the Household Selection Process

Interviewers must make a determination as to whether the telephone number reaches a household, and determine the correct disposition.

- What are the criteria for a private residence?
  - The person answering the phone does NOT say that the number is a business, institution, group home, pager, fax machine, cell phone, or modem.

- If a respondent states they reside at this number for less than 30 days a year, should the interview continue?
  - The interview should be terminated and coded “Not a residence” under the Ineligible dispositions in the termination block. If a respondent’s states he or she lives at the residence 30 days or more, then continue the interview.

- How are timeshares handled?
  - If the respondent indicates the residence reached is a timeshare, and they do not live there for 30 or more days a year, code as “Not a residence” under the Ineligible dispositions in the termination block.

- What is the proper disposition for a cell phone in the land line study?
  - Code cell phone numbers as “Not a land line” under Ineligible dispositions in the termination block.

- What is the proper disposition for dedicated faxes and modems?
  - Code faxes and modems identified as such on the first call attempt as a “Fax/Modem” under Technical Barriers in the termination block.
• What is EFAX and how should it be coded?
  o EFAX is a service that permits voice messages and faxes to be sent to an e-mail account. When a number is called, a message identifies this number as an “EFAX subscriber.” These numbers will never ring into a residence and should receive a disposition as a “Fax/Modem” under Technical Barriers in the termination block.

**Hang-up Protocol**

Hang-ups will be considered and coded as such only when the respondent hangs up the phone before the interviewer has finished reading the name of the client. You should only disposition a call as a hang-up when a respondent hangs up the phone at any point BEFORE you have completed reading the following:

**INTRO:**

Hello, my name is [INTERVIEWER NAME], and I'm conducting an important health study for the University of Colorado Denver.

Hang-ups AFTER the name of the client has been read will be coded as refusals.

That is,

- Hang-up before name of client has been read  code as a hang-up
- Hang-up after name of client has been read  code as a refusal

**Refusal Protocol**

TABS protocol specifies that selected respondents who initially refuse to be interviewed will be contacted one additional time to give them the opportunity to complete the interview. Non-selected respondents who initially refuse to participate will be contacted two additional times to give them the opportunity to complete the interview. It is best for these contacts to be made by a supervisor or a special refusal conversion interviewer. There are separate codes for selected and non-selected respondent refusals.

**Refusal Dispositions**

If the record has not gone through the selection process, anyone in the household is a non-selected respondent. If the record has gone through the selection process, anyone other than the selected respondent is a non-selected respondent. When a respondent listens to an entire introduction and verbally refuses, use these dispositions:
• Swearing code as a hard refusal  
• Threatening Lawsuit: code as a hard refusal  
• “Take my number off your list” code as a refusal  

**Refusal Protocol Modification**  
Interviewers should inform a supervisor about a number being removed from active calling only under all the following conditions:  

- A non-selected respondent of a household has refused to transfer the call to the selected respondent and states that he or she will never allow the call to be passed on to the selected respondent;  
- The interviewer has no indication of an appropriate call back time to reach the selected respondent; and  
- Future calls are unlikely to result in a completed interview based on the judgment of the interviewer.

The number of selected respondent records that will be removed from active calling under this refusal protocol will be relatively small. However, these records will be tracked closely. Project managers may decide to return selected records to active calling on a case-by-case basis, if the possibility of obtaining completes on these records might improve the response rate.

**Dealing with Specific Refusal Situations**  
If you see this CfMC message “11/23 sel fem ref x1 not interested 999B” (or a similar message) try some of these approaches:  

- Can I answer any questions for you about the study so that you feel more comfortable participating?  
- I realize we have called you already on behalf of the University of Colorado Denver. I’d like to have a chance to give you a little more information about this study and why we’re doing it.  
- I understand that your time is limited. It is just that your input is so important in this study. We could start and if we run out of time you can finish later.  
- Your input is important. The results of this study will be used by the press, lawmakers, researchers, and health care professionals so they may make better decisions in planning health programs for Colorado residents.  
- We cannot replace you with anybody else. We have a limited number of households that we can contact. When someone does not participate, this makes the results less representative. This is your chance to be represented in policy-making decisions.
• We want to give everyone who was selected a chance to participate.

• As we all know, resources are limited. The information collected in this survey helps determine funding levels and public policy for health programs nationwide. One of the purposes of this study is to assess where the needs are greatest.

• Nothing is ever reported in any way that can identify you. The company I work for, ICF International, is very strict about guarding confidentiality. The computer drops all information that can identify you from the report. Results are only reported in group form only.

• This is not a political group or business. Nobody will try to sell you anything as a result of your participation.

• Most people find the survey interesting. We could begin, and if you don’t have time to finish it now, we can call later at your convenience.

Handling a contact when you need to interview a selected respondent

• Read the introduction again and explain: “We are conducting a study in which we need an equal number of men and women to participate. It is important that we speak to your husband or wife (or other appropriate designation, if known). I will be asking some questions about tobacco use. This information is important to improve health programs in the state of Colorado.”

• Don’t accept the following: “He wouldn’t be interested in that” or “He hates telephone surveys.” Explain that it is very important to speak directly with the person who is selected for the study. Sometimes the spouse/partner can become an ally in enlisting the cooperation of the selected respondent. Encourage him or her to explain the purpose of the study and the importance of participating. Try to make an appointment for a more convenient time. If the selected respondent comes to the phone, read the introduction and ask the first question.

How did you get my phone number? It’s unlisted.

• The computer dials telephone numbers at random. The computer has the area codes and prefixes for the areas covered by the study. The computer then dials the last four digits at random. We get all kinds of numbers: fire stations, real estate offices, pay phones, etc. The computer can dial an unlisted number as a matter of pure chance. The study is confidential, and nothing can ever be traced back to you.

I don’t know anything about that.

• This isn’t a test. We only want to ask about health and health practices that affect your health. Many people find the survey to be interesting.
Why should I participate?

- This data will be used to improve health programs and prevent diseases. Participating is one way for you to be represented at the state and federal level. The information is used for planning purposes at all levels of government to develop more effective health programs.
- For one thing, this has to do with how lawmakers spend taxpayer dollars, and putting resources into programs that benefit the most people and do the most good.
- The more people we have participating the more accurate the results will be. When you don’t participate, it leaves a “hole” in the data.

Why do you need to know how many adults live in the household?

- Our survey protocols require that we select one adult from your household. We ask for the number of men and the number of women, and then the computer randomly selects one person. That way we can be sure that the study represents all adults in your state: men, women, young, old, healthy, in poor health, etc.

I don’t do surveys over the phone. Put it in the mail.

- We can only conduct this survey over the phone. After years of experience conducting these surveys, the University of Colorado believes that this is the most efficient, representative, and thorough method of gathering this information. Many people like you have participated in this survey, and many find it interesting. You can refuse to answer specific questions.

I don’t have anything to do with public programs. I get my health care from my private doctor/HMO/military.

- All health care providers, public or private, can use the information to improve services, give better advice, and plan better programs.

I just moved to this state; I don’t qualify as a resident yet.

- If you are now living in this state and you plan to live here, the University of Colorado considers you a resident.

Answering Machines

For the landline and cell phone study, we will be leaving messages on answering machines only on the 1st and 4th attempts. The computer keeps track of these attempts so only leave a message when you reach an answering machine and the computer prompts you to leave a message.
The following text appears on the screen when you need to leave a message. Read this message with as much animation as you can! You only have a minute, so do your best to always sound engaging.

This is {INTERVIEWER’S NAME} and I’m conducting an important health study for the University of Colorado, Denver. This study will interview adults in Colorado about their health. Your participation is very important. Please call us toll free at 866-784-7102 to complete a brief interview, or arrange a convenient time for us to contact you. Thank you.

Privacy Managers

We will be going through privacy managers on some occasions. If you reach a privacy manager, identify yourself using the following script:

[INTERVIEWER LEAVE THE FOLLOWING MESSAGE]

University of Colorado, Denver.

01 Person picked up

02 Call not accepted

- If the person picks up the phone, type in 01 and continue with the introduction.
- If the person does not pick up the phone, type in 02 and the call will be terminated.

Scheduling Callbacks

Properly scheduling callbacks is essential to maximizing the response rate, achieving target completes, and meeting the TABS protocol. For these reasons, guidelines have been established for scheduling callbacks:

- On fresh records (records that have no attempts), use a system scheduled callback. This allows all records in the fresh sample to receive one attempt. However, if a respondent offers a specific time to be reached, use a scheduled callback.
- In general, use a scheduled callback when you have specific information on when to reach an eligible respondent, or when you are setting an appointment. Use an unscheduled callback when there is no specific information on when the eligible respondent can be reached.
- Always leave a message for the next interviewer with any kind of callback!
Knowing How to Suspend and Resume

Suspending an interview allows all of the information collected up to that point in the survey to be saved. The interview can be resumed at the next question without having to go back to the beginning. (In the event of a break-off, typing “term” in the middle of an interview erases the information collected to that point.)

To suspend: Type “suspend” at the arrow prompt: → suspend. A screen will appear with instructions. Below the screen is a space to leave a message for the next interviewer. Leave a very specific message stating why the interview was suspended, whether or when the respondent requested a callback, etc.

11/14 SSPND sf’s baby woke up; req C/B 11/15 6:00PM 999b
06/05 SSPND sm refused on smoking status question & HU! 999b
03/20 SSPND ¾ done, in St-added?’ s; C/B 3/23 10:00AM 999b

On the next screen, an instruction will appear to enter a time to call back. Enter a time.

To resume: The call history screen gives the first indication that a record has previously been suspended. A new line appears saying, “Message typed when interview suspended:” A message from the interviewer who suspended the record appears below that line. While you are still on the intro screen, and before you resume the interview, be sure that you are speaking with the selected respondent! After the introduction screen, the next screen to come up could be the first survey question. You might have to ask two questions before arriving at the question that resumes the survey. Ask for patience reading the first few questions again. Say,“ We can go ahead and continue the survey now,” and then ask the first question.

If something happens and you must suspend again, you must ask one question or enter “refused” to one question before suspending again. If you just suspend without doing this, the record will result in a “blown case” and all the information will be lost. This record will have to be started all over again, right from the selection process. The interviewer who has to deal with this situation will have to be very persuasive, apologetic, and patient.

An Overview of the TABS

Frequently Asked Questions (FAQs)

Before you log in and begin calling, have the FAQ you have received at your station. You will have passed a test on the FAQs to dial on TABS. However, passing the test is not enough.

***You have to always use the FAQ answers, and only these answers, for this study***
An Overview of the TABS Questionnaire format

Understand the nature and content of the questions. Be prepared to answer any questions that come up in the course of the survey. Be prepared with specific probes on certain questions. Know the length of the survey and be able to estimate the number of minutes left to complete.

As you go through practice, try to anticipate the kinds of challenges posed by different questions. Below are a series of questions that you should pay particular attention to.

Questions with Special Vocabulary

Several questions in this study include special tobacco-related vocabulary you may not be familiar with. Take the time to familiarize yourself with these words and the questions they appear in. Make sure you know what each term refers to, understand their meaning, and know how to pronounce them. Practice these words, and the entire question, several times to make sure you’re comfortable pronouncing them. Use the glossary presented at the end of this document to clarify any questions you may have.

Response Categories

Dollar Amounts

There are several questions in the TABS that require you to enter a dollar amount, such as the one below. Practice these questions so that you know exactly how it should be entered. For this question, you do not have to enter leading zeroes, but you must enter an ending zero and the decimal place. So for a price of “$4.50,” you would enter “four, period, five, zero.”

[CURRENT SMOKERS:] How much do you usually . . .
[RECENT QUITTERS:] How much did you usually . . . pay for a pack of cigarettes?

$ __ __. __ __ [ENTER AMOUNT IN DOLLARS AND CENTS]
7777 DON’T KNOW
9999 REFUSED

Number of Days, Weeks, Months, or Years

Other questions require you to first enter whether the person responded in the number of days, weeks, months, or years. For example, in B29 below, if the respondent said it has been 3 days, you would enter “1” as the number (to choose that the respondent answered in days), and “3” when the follow up question (B29D in this example) appears.
B29. How long has it been since you smoked any cigarettes at all, even one puff on a cigarette?

(LASTPUF) (LASTUNI3)
1   DAYS
2   WEEKS
3   MONTHS
4   YEARS
REFUSED   99
DON'T KNOW/NOT SURE 98

B29D ENTER DAYS [RANGE=0-999]

City and County

For A20 and J3, you can type the first few letters of the city/county, and the CATI program will go to that place on the list. Or you can use your arrows to move up or down. Then, when you’ve found/confirmed the city or county, you press enter. County is presented below.

A20. What county do you live in?
(CNTY)

[IF ASKED: We are interested in looking at the study results by geographic area].

_ _ _ COUNTY CODE

995    OTHER (SPECIFY: ____________________ )
999    REFUSED
99    DON'T KNOW/NOT SURE

A20oth.

ENTER RESPONSE ______________________________________________________

ENTER RESPONSE ______________________________________________________
**Common Stem and Identical Response Options**

There are many series of questions with a common introductory statement and identical answer options. The introduction for these series is set off as a single question, such as:

I3. Now I am going to read you some statements. For each, please tell me whether you strongly agree, somewhat agree, neither agree nor disagree, somewhat disagree, or strongly disagree with the statement. The first one is...

01 continue

The subsequent series of questions will have this introductory text with a “READ ONLY IF NECESSARY” as an interviewer note. The introductory text should only be reread to the respondent if the respondent is having difficulty answering the question or does not seem to understand the question.

**All response options on a scale from “strongly agree” to “strongly disagree” have been standardized so that they appear and are read/coded:**

01 STRONGLY AGREE
02 SOMEWHAT AGREE
03 NEITHER AGREE NOR DISAGREE
04 SOMEWHAT DISAGREE
05 STRONGLY DISAGREE
98 DON'T KNOW
99 REFUSED

**Verification Screens**

There are multiple verification screens. Verification screens are used to improve the accuracy of the data collected. The verification screens are intended to help you confirm, reconcile or clarify responses given about times and frequencies, age at start of regular cigarette smoking, prices, media exposure, and annual income. Below are examples of the main verification screens included in the TABS that you should become familiar with:

- **Number of Cigarettes Smoked Daily.** The verification screen below will appear to confirm the number of cigarettes the respondent smokes daily ONLY if the respondent reported smoking 61 (over three packs) or more cigarettes a day. If the respondent does not smoke the number of cigarettes initially recorded, you will be sent back to the original question. Ask the question once again and record the correct number of cigarettes.
I just want to make sure that I recorded this information correctly. You indicated you smoke [insert number] cigarettes a day. Is this correct?

01 YES, CORRECT
02 INCORRECT

- **Price checks.** The verification screen below will appear after questions that ask respondents how much they usually pay for a pack or a carton of cigarettes.

  Just to have this right, you said [insert price], is that correct?

  01 YES
  02 NO

- **Annual income.** The verification screen on the next page will appear after the income questions in the closing demographic section. Notice the response categories in the verification screen are inverted: 1=No and 2=Yes. If the annual household income is not correct, then you will be sent back to the income questions. Ask the questions once again and record the proper income range.

  Interviewer: Annual household income is ____ to less than _____. Is this correct?

  No, re-ask question
  Yes, correct as is

*The Importance of Smoking Status*

You will notice important differences in the flow of each interview due to the skip patterns in place. The main differences are based primarily on the respondent’s smoking status: Daily, Nondaily, Recent Former, Established Former Smoker, or Nonsmoker. In addition, a few more complex skip patterns exist based on quitting status and employment status (employed for wages, self-employed, or not employed).
Interviewer Notes

Pay close attention to any and all instructions. These appear in bold or in brackets on the screen. They include:

[DO NOT READ]

[CODE ALL THAT APPLY]

[READ ONLY IF NECESSARY]

as well as prompts that are specific to certain questions, such as:

[Interviewer: 1 pack=20 cigarettes]

and keystroke instructions, such as:

[Press <esc> to continue...]

A look at the TABS Questionnaire Sections

Section A: Screener

For questions A2b through A15, you will be collecting screener information (conducting a roster of the household) from the adult that answered the telephone. Practice all different scenarios of combinations of household members, and also how to exit the survey at different points. You will spend considerable time practicing this during your training.

Section B: Current Smoking Status

Section B asks questions of the selected respondent to determine whether they are a Daily, Nondaily, Recent Former, Established Former Smoker, or if they are a Nonsmoker. How they answer these questions will determine the types of questions asked later on. It is VERY important that this section is completely and accurately entered. This section also asks general health question to establish qualification for later sections.

Section C: Recent Smoking History

Section C asks respondents to recall any recent quit attempts, and whether they used certain cessation aids in their quit attempts. Established Former smokers and Nonsmokers skip to section D.
**Section D: Lifetime Smoking History**

The questions in this section ask about smoking habits throughout the respondent’s entire life. The questions ask respondents to refer to time periods 12 months ago or prior. They also ask respondents to recall how old they were when they had their first tobacco experiences.

**Section E: Other Tobacco Use**

In this section, respondents are asked if they have ever used various non-cigarette tobacco products. “Hooka” should be pronounced “who-ka”

**Section F: Smoking Restrictions**

This section asks about the rules regarding smoking in the respondent’s home, who created the rules, and why the rules were created. There are also questions on rules about smoking in the respondent’s vehicle, and their workplace environments.

**Section L: High Blood Pressure**

Respondents in Section B that indicate they have High Blood Pressure will receive this section. These questions ask about the respondent’s High Blood Pressure and their management of the condition.

**Section M: High Cholesterol**

Respondents in Section B that indicate they have High Cholesterol will receive this section. These questions ask about the respondent’s High Cholesterol and their management of the condition.

**Section N: Diabetes**

Respondents in Section B that indicate they have Diabetes will receive this section. These questions ask about the respondent’s Diabetes and their management of the condition.

**Section J: Verify, Ethnicity, Education**

These questions are asked of everyone, and some respondents may consider them to be sensitive or personal. Be aware and remain neutral and explain to respondents who question the reason we ask these questions—that it is for statistical purposes only and to make sure that we reach a wide variety of people.
Section G: Health Care

These questions ask respondents about their physical and mental health, and also about their interactions with their health care professionals and advice they may have received about quitting smoking.

Section H: Policy:

This section asks about opinions on laws regarding the advertisement and sale of tobacco, and also on tobacco use in public areas. Remember, we are only looking for the respondent’s opinion; there are no right or wrong answers. National sample will not be asked these questions, as the policies are specific to Colorado. Only 50% (determined by random assignment) of Colorado respondents will be asked these questions.

Section I: Voting and Social Trust:

These questions ask the respondent to discuss their voting behavior and trust in people as well as different types of organizations. Respondents will be randomly assigned so that 50% will get this section and 50% will not. Refer to the FAQs if someone asks why we’re asking these questions in a survey “about health.”

Section K: Obtain Name and Address for Future Contacts

University of Colorado, Denver may wish to contact some respondents in the future for additional surveys about smoking or health. Therefore, we will ask Colorado only respondents to give their name and address at the end of the survey. This information is voluntary, they can refuse. There is a short informed consent at the beginning of section K, which informs the respondent why we are collecting contact information. You can reassure the respondent that the information is only used to inform them about future health studies. They would have the opportunity, at the time of the health study, to decide whether or not they would like to participate. Refer to the FAQs if someone asks why we’re asking for contact information.

Questions of Note

Alpha, Beta and Charlie Surveys

There is an “alpha”, a “beta”, and a “charlie” study for TABS. The Technical Manual provides further information and screen shots that show the interface between the three studies. We will practice many, many times so that you know how to negotiate the CATI System for all studies for this project.
**Income**

For the first part of the survey, we are testing response rate on the income scale to see if it is different when we ask in the screener versus at the end of the survey in the general demographics section. So you will notice that this question will sometimes show up in the screener and sometimes near the end of the survey.

**Quit Line or Help Line**

The National survey will have slightly different wording for a few of the items (state name will be inserted instead of Colorado or the name of the “quitline” or “helpline” service will be different).

**Spanish Language Interviews**

We expect the Spanish language survey to be available October 17th. Until that time, you’ll read the following:

A5L. [INTERVIEWER READ TO RESPONDENT IF needed/IF YOU ARE UNSURE ABOUT LANGUAGE IN WHICH INTERVIEW SHOULD BE CONDUCTED] :

This interview is offered in English and Spanish. Which do you prefer?

01 ENGLISH

01 SPANISH

A5LL - // ASK IF A5L = 02 //

INTERVIEWER: CAN YOU CONDUCT THE INTERVIEW IN SPANISH?

01 YES, CONTINUE

02 NO, SCHEDULE CALLBACK

// ASK IF A5LL = 01,02 //

A5LLL - A Spanish speaking interviewer will be able to call you back although it may not be this week or next. When would be a good time to have a Spanish speaking interviewer call you back after next week?

After Spanish is available, the program logic will be changed so that if an interview can conduct the survey in Spanish, he or she will be able to do so.
Determining Smoking Status

Determining smoking status is a key element of this research! We will walk through the process of how Questions B1 through B17 result in assigning a smoking status, including pre-populated responses from section A. *It is important to obtain complete answers to the questions in the box below for the entire rest of the survey.*

### SMOKING STATUS DEFINITION BOX

<table>
<thead>
<tr>
<th>Questions</th>
<th>Responses</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>B1. Smoke 100 cigs in life?</td>
<td>yes (by B1 or B2)</td>
<td>no</td>
<td>DK/REF to both B1 and B2</td>
<td></td>
</tr>
<tr>
<td>B7. Smoke every day, some days, or not at all?</td>
<td>every day</td>
<td>some days</td>
<td>not at all</td>
<td>DK/REF to both B7 and B9</td>
</tr>
<tr>
<td>B9. Smoke any cigs in last 30 days?</td>
<td>yes</td>
<td>no, OR DK OR REF.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>B28 first, then B28a if no answer to B28, to define: How long since smoked?</td>
<td>less than 1 year OR IF UNABLE TO COMPUTE how long since last smoked (IF DK/REF to B28a or B28=0)</td>
<td>1 year or longer</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**SMOKING STATUS**

- Daily
- Nondaily
- Recent Former
- Established Former
- Nonsmoker
- Unknown

*Cigarette Alternatives*

There are several alternatives to cigarettes, presented in question C17, which you should be familiar with. Again, practice these names several times aloud, and during your paired practicing, so that you can *smoothly read these to respondents.*
C17. Have you ever used a smokeless tobacco product such as chew, dip, snuff, snus, e-cigarettes, or dissolvable tobacco products because you were in a situation in which you could not smoke? (SMKLESS)

Diabetes

Type 1 or type 2

There are two types of diabetes—type I and type 2. Respondents will likely know which one they have been diagnosed with, but if they don’t, code it as such “don’t know.”

N2. Were you told that you had Type 1 or Type 2 diabetes? (DITYPE)

A1C or “A one C”

People are asked to do a variety of things if they have diabetes. One of these things is to have an “A one C” or A1C test. This is a blood test that provides information about a person’s average levels of blood glucose, also called blood sugar, over the past 3 months.

If a respondent does not know what the test is, code as “03.” That option is only applicable for N7c, so should only be used for that question—not any of the others in this series.

N7. Now I’ll read a list of things that health care providers recommend for people who have diabetes.

N7a. Have you had a foot exam in the last year? (DIFOOT)
N7b. Have you had an eye exam in the last year? (DIEYE)
N7c. Have you had your ‘A one C’ test for blood sugar in the last year? (DIA1C)
[INTERVIEWER: If the respondent does not know what this test is, code as ‘03’]
N7d. Do you take an aspirin every day? (DIASA)
N7e. Have you met with a diabetes educator at least once since you were told you had diabetes? (DIEDUC)

\ANSWER CHOICES FOR for N7a-N7e\n
01 YES
02 NO
03 DOES NOT KNOW WHAT THIS TEST IS
Testing at Home

In addition to the A1C test, people with diabetes can test at home. This involves pricking the finger and using a strip of paper in a small machine to test the blood sugar. This is done at home and is different than having blood drawn in a lab, doctor’s office, or other medical facility.

Although we’re providing this information, as you know, *it is not your job to explain this to the respondent!* We want you to be familiar with the questionnaire so that you know the difference between this test and another type of test.

N10. In the past 12 months, about how often do you or a family member or a friend check your blood sugar?

(DICHECK)

(IF NEEDED: DO NOT COUNT TIMES THAT YOUR BLOOD SUGAR WAS CHECKED BY A HEALTH CARE PROVIDER.)

Mental Health

As you know, some questions can be sensitive—difficult to ask and difficult for respondents to answer. TABS has several questions about mental health, which can be difficult.

Read these slowly and carefully and remain alert for any “red flags” that tell you that the respondent is experiencing difficulties.

G16. Has a doctor or healthcare provider ever told you that you have a mental health condition or mental illness?

(MHMENTAL)

G16b. Please tell me what the condition or illness is called.

If a respondent displays emotional agitation – they may begin to cry, they may become quiet or hesitant to answer questions – ask one or more of the following, approved statements. These statements are also included in the FAQ.

18. Neutral statements if a respondent has an emotional response to any of the questions:
   - I can hear that this interview is upsetting you. Is it okay to continue?
     - If yes, continue with sensitivity
     - If no, ask “Is there a better time to callback”
     - If no/never call, terminate and disposition as a hard refusal
   - Would you like to take a moment to gather your thoughts before we continue?
   - Would you like to take a break before we continue?
**Weight and Losing Weight**

Weight, and attempts to lose weight, are sensitive topics for people. As with questions on mental health, read these slowly and carefully and be sensitive to respondents that may be experiencing difficulties.

In Section B, respondents provide their height and weight.

In section G, we ask how much they weighed a year ago. You’ll see on the screen their current weight, so that if the respondent says “the same” or “about the same,” you can re-enter their weight.

If their current weight is less than it was a year ago, we ask G20 to determine what they did to lose weight. Since any weight loss (even 1 lb.) triggers this questions, we have provided an option for “nothing”—meaning the individual did nothing to try to lose weight.

Practice these questions with different options so that you are familiar with what the screens look like and what is coming next in the survey.

G19. How much did you weigh without shoes a year ago? (IF NEEDED: If you were pregnant a year ago, how much did you weigh before your pregnancy?)
[INTERVIEWER: IF RESPONDENT SAYS “THE SAME” ENTER: /INSERT: RESPONDENT’S ANSWER TO CURRENT WEIGHT/]
(WTYR)

G20. What is the main thing you did to help you lose weight during the past year? (DO NOT READ RESPONSES; ONE ANSWER CHOICE ALLOWED)

[INTERVIEWER: IF RESPONDENT SAYS THEY DID NOT LOSE WEIGHT SAY: We ask about any weight loss, and you reported your weight today as / INSERT: RESPONDENT’S ANSWER TO CURRENT WEIGHT ./]

[IF RESPONDENT MAINTAINS THEY HAVE NOT LOST WEIGHT, SELECT OPTION 18: NOTHING] (WTLOSS)

**Voting and Social Trust**

There are several questions about voting. Please refer to your FAQs and have the answer ready when someone asks, “Why are you asking about this?” The answer is: “Some research suggests a link between people’s health and voting behaviors and beliefs. We are studying this possible connection.”
I3. Now I am going to read you some statements. For each, please tell me whether you strongly
agree, somewhat agree, neither agree nor disagree, somewhat disagree, or strongly disagree
with the statement. The first one is...

I3a. I sometimes feel I don’t know enough about the candidates to vote
I3b. It matters more than usual who gets elected this year
I3c. I’m sometimes too busy to vote
I3e. Voting doesn’t really change things
I3f. I feel it’s my duty as a citizen to always vote
I3g. My vote doesn’t really matter
I3h. I would feel guilty if I didn’t get a chance to vote

***Since the pretest, 13d has been deleted and 13h has been changed***

One other question in this section deserves special attention. Many people are not registered
to vote—and their reasons for not registering vary considerably. Non US citizens cannot
register to vote. Neither can convicted felons or individuals on probation. People may
volunteer this information, or, as you can imagine, they may not wish to do so. If someone
provides this information, record it as such using response options 5 or 12. If someone is not
specific, but says they are ineligible, code as “13.” If they specify a reason, code that reason
(e.g., 05 if not a US citizen).

I2. What would you say is the main reason you’re not registered to vote?

[DO NOT READ; ACCEPT UP TO THREE RESPONSES; PROBE if needed with, “OK. Is there any
other reason?”]

01 NO TIME/JUST HAVEN’T DONE IT
02 HAVE RECENTLY MOVED/DON’T MEET RESIDENCY REQUIREMENTS
03 DON’T CARE ABOUT POLITICS/NOT INTERESTED IN THE ELECTION OR
POLITICS
04 NO CONFIDENCE IN GOVERNMENT, POLITICS OR POLITICIANS
05 NOT A U.S. CITIZEN
06 ILLNESS/DISABILITY
07 JUST TURNED 18
08 NO POINT IN VOTING/MY VOTE MAKES NO DIFFERENCE
09 RELIGIOUS REASONS
10 LAZY
11 DON’T UNDERSTAND POLITICS/I’M NOT KNOWLEDGEABLE
12 FELON/ON PROBATION
13 NOT ELIGIBLE
14 DON’T WANT TO GET MY NAME ON THE LIST FOR JURY DUTY
15 PLACE WHERE HAVE TO GO TO REGISTER IS INCONVENIENT/ FAR FROM HOME
16 DON’T KNOW WHERE/HOW TO REGISTER
17 WORK DURING VOTER REGISTRATION HOURS
18 DIFFICULTY WITH ENGLISH
95 OTHER (SPECIFY)
98 DON’T KNOW/NOT SURE
99 REFUSED

Individuals who are ineligible to vote skip over several questions related to voting. Again, it is very important that you are familiar with the various skip patterns so that you are not surprised by these patterns!
Glossary

**Cessation**: to quit [smoking]

**Cigarettes**: a small paper tube filled with cut pieces of tobacco, which people smoke.

**Nicotine gum**: A type of Nicotine Replacement Therapy. Nicotine Polacrilex, or "gum" is a nicotine-containing compound that is designed to slowly release nicotine into the mouth when chewed and placed between the cheek and gums.

**Nicotine inhaler**: A type of Nicotine Replacement Therapy. The nicotine inhaler, also nicknamed "the puffer" is a thin, plastic cartridge that contains a porous nicotine plug in its base. By puffing on the cartridge, nicotine vapor is extracted and absorbed through the lining of the mouth. Each cartridge delivers up to 400 puffs of nicotine vapor. It takes at least 80 puffs to obtain the equivalent amount of nicotine delivered by one cigarette.

**Nicotine nasal spray**: A type of Nicotine Replacement Therapy. The nicotine nasal spray is aerosolized nicotine contained in a spray pump. The nicotine is delivered to the user by spraying it into the nostrils, and is rapidly absorbed by the nasal membranes inside the nose. The spray device is similar to over-the-counter decongestant sprays. Because it is rapidly absorbed, nasal spray delivers the nicotine "hit" much more quickly than other nicotine replacement therapies.

**Nicotine patch**: A type of Nicotine Replacement Therapy. The patch is a self-adhesive, nicotine-containing circle that looks like an oversized band-aid. The outer ring sticks to the skin, while the inner portion presses against the skin and slowly releases nicotine into the outer layer of the skin. This method allows the user to achieve a near constant level of nicotine in their system. The patch must be worn all day, and cannot be put on and removed as a substitute for a cigarette.

**Telephone quit lines**: Phone services set up specifically to address questions on and help people quit smoking.

**Wellbutrin**: A prescription medication used to help people quit smoking.

**Zyban**: The brand name of a bupropion hydrochloride (amfebutamone, Wellbutrin) sustained release tablet. The drug is sold to help people stop smoking tobacco by reducing the severity of withdrawal symptoms. It can be used in combination with nicotine replacement therapies.
Appendix A

Refusal Conversion Interviewers

The computer automatically assigns records given certain dispositions to special interviewer types, such as those set aside for refusal conversion.

- Records with a language barrier will be set to a type 5
- Records with a language barrier and a refusal will be set to a type 2
- Records with a refusal disposition will be set to a type 4 after the cool down period

Interviewers who are assigned as refusal conversion interviewers are chosen for their excellent interviewing skills, their excellent refusal conversion skills, and their level of effort and determination in getting completes.

**Refusal Conversions**: These are records that have received an initial refusal and/or hang-ups. The records should show an appropriate call history and message. You should have some idea about who refused and why. Your job is to make a final effort to get a complete on these records.

Why are we calling these records again?

- It’s possible that previous interviewers were less skilled or motivated in attempting refusal conversions. We’re giving our best interviewers a chance to persuade the respondents to participate.
- The rate of refusal is a measure of both interviewer performance and the degree of potential bias in the survey. A lower refusal rate increases the reliability of the data. A lower refusal rate is an indicator that the participants are representative of the entire population.
- Finally, studies have shown that the characteristics of people interviewed in the first third of the fielding period differ markedly from those people interviewed in the final third. In other words, by failing to enlist the cooperation of these respondents, the data is potentially skewed in certain ways. (This point is something to keep in mind to motivate you; this is not something you would mention to a respondent.)

Is it possible to get a complete when a record has been refused? Yes, absolutely. Try these approaches:

- You can ask, “Has anyone explained to you what this study is about?” It is possible that in the previous call, no one has done this.
• Sell yourself on the study. Use the information in this guide to explain in your own words why participating in the study is important.

• Listen attentively to what the person is saying, and try to pick up cues from the voice.

• Apologize. “I am very sorry if any previous caller was rude to you: (or gave you incorrect information, etc.).

• “I’d like to get started and see how far we get. You can refuse to answer any specific question you don’t want to answer.”

• If the person hangs up on you, you may call back and apologize for getting disconnected.

• If it works for you, approach refusal conversion as a challenge and a game. This is the approach of many interviewers who are excellent at dealing with refusals.

• Stay on your toes. Listen hard. Think fast.

• Share what you learn with other interviewers.

• **Supervisors:** If a person calls the 1-800 line on order to say they are refusing, it is possible for you to convert this refusal into a complete. Give this your best effort.
# The Attitudes and Behaviors Surveys on Health (TABS on Health)
## 2012 Technical Training Manual

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TABS Protocol

Landline

Number of attempts

The landline version will follow the standard ATS and BRFSS CDC protocols. Each record in the sample must receive a terminal disposition or 15 attempts per household. There are three calling occasions: Weekday (9–5), Weekday Evening (5–9), and Weekend (10–9). The 15 attempts per household will be called over the following three day parts:

For household contacts:
- Monday – Friday: 9:00 a.m. – 5:00 p.m.  3 attempts
- Monday – Friday: 5:00 p.m. – 9:00 p.m.  3 attempts
- Saturday (10:00 a.m. – 9:00 p.m.) & Sunday (10:00 a.m. – 9:00 p.m.)  3 attempts

We will make 6 additional attempts to the above spread out across the 3 day parts.

These calling protocols minimize bias (such as only calling people that are available in the evenings) and maximize completeness (the effort designed to reach every eligible respondent).

If two respondents are selected in a household, the records will move to the charlie study and receive a maximum of 8 attempts over the following three day parts:
- Monday – Friday: 9:00 a.m. – 5:00 p.m.  2 attempts
- Monday – Friday: 5:00 p.m. – 9:00 p.m.  2 attempts
- Saturday (10:00 a.m. – 9:00 p.m.) & Sunday (10:00 a.m. – 9:00 p.m.)  2 attempts

We will make 2 additional attempts to the above spread out across the 2 day parts.

Hang-up Protocol

Hang-ups will be considered and coded as such only when the respondent hangs up the phone before the interviewer has finished reading the name of the client. You should only disposition a call as a hang-up when a respondent hangs up the phone at any point BEFORE you have completed reading the following:

INTRO:

Hello, my name is [INTERVIEWER NAME], and I’m conducting an important health study for the University of Colorado Denver.

Hang-ups AFTER the name of the client has been read will be coded as refusals.

That is,
- Hang-up before name of client has been read code as a hang-up
- Hang-up after name of client has been read code as a refusal
Refusal Protocol

If a respondent refuses, the record will be set to a type 4 in overnight processing. Any additional refusals or hang-ups on the record will remove it from dialing.

If two respondents are selected in a household, they will each have their own refusal protocol, so if you call a household and the respondent refuses, the refusal will apply to only that record.

Hard refusals: If a respondent openly swears at you, threatens to make a complaint to the client, the FCC, or any other organization, disposition the record as a hard refusal. Additionally, if there are two records associated with the household, disposition BOTH records as a hard refusal.

Cell

Number of attempts

The cell phone version uses a modified protocol that has been used in other ATS and BRFSS Cell phone studies. Specifically

- 6 attempts per household during 3 different day parts.

For cell phone contacts:

- Monday – Friday: 9:00 a.m. – 5:00 p.m.  2 attempts
- Monday – Friday: 5:00 p.m. – 9:00 p.m.  2 attempts
- Saturday (10:00 a.m. – 9:00 p.m.) & Sunday (10:00 a.m. – 9:00 p.m.)  2 attempts

Hang-up Protocol

Hang-ups will be considered and coded as such only when the respondent hangs up the phone before the interviewer has finished reading the name of the client. You should only disposition a call as a hang-up when a respondent hangs up the phone at any point BEFORE you have completed reading the following:

INTRO:

Hello, my name is [INTERVIEWER NAME], and I’m conducting an important health study for the University of Colorado Denver.

Hang-ups AFTER the name of the client has been read will be coded as refusals.

That is,

- Hang-up before name of client has been read code as a hang-up
- Hang-up after name of client has been read code as a refusal

Refusal Protocol

If a respondent refuses, the record will be removed from dialing.
**TABS Landline Design**

We will potentially interview two respondents in a landline household if, after randomly selecting the first respondent, another respondent remains who is a smoker, a household member identifying as African American, or a household member identifying as Hispanic. In order to make the interviews flexible so that we can interview either selected respondent who is available, the instrument has **three** CfMC components:

1. **Initial Alpha and Beta studies that will be dialed on until the household has been rostered:**
   a. Study A (the alpha study) is the main study – fresh records will be in the alpha study
   b. Study B (the beta study) – if two respondents are selected while the ‘parent’ record is in the alpha study, a ‘sister’ record can be retrieved in the beta study

2. **Charlie study for dialing after two respondents have been selected in a household:**
   a. Study C – once a household has been rostered and two respondents have been selected, the records (one from the alpha study and one from the beta study) will move to the charlie study and dialed on independently.

Several things have been done to make the instrument easy to navigate for you:

1. **Real time flags have been setup that communicate the status of the records between the three studies** – this way we won't need overnight processing or interviewer information to know the status of the records and can therefore make callbacks for the same day;
2. **Programmed it so you will never need to know which study a person started in** – the studies will know who has been selected and will provide you with the necessary information to conduct the interviews in the correct study;
3. **Programmed a question after the suspend block in the alpha and charlie studies,** so that if the other respondent is available, you can access their Master ID quickly and do the interview.
Navigating the Three Studies

General notes

Master IDs (MIDs): The MIDs of the two selected respondents are linked. The respondent in the alpha study has a generic MID; the corresponding record in the beta study has the exact same MID, except it ends in a two.

Example: alpha MID = 00002789B; beta MID = 000027892

Dialing on the beta study: the beta study can be dialed on when in master ID retrieval mode.

***Same-day callbacks for beta respondents should be monitored closely so that we don't miss callbacks***

Dispositions: Each record will get its own disposition. Records retrieved in the beta study should be dispositioned appropriately.

***The only time both records should receive the same disposition resulting from one conversation is if a respondent gives a hard refusal (they openly swear at you or threaten to log a complaint). If you encounter a hard refusal, retrieve both records and give both records a hard refusal disposition***

Status: The status of the sister record is shown at the top of the screen when retrieving a record and in the suspend block. The possible statuses are:

1. Unknown – the interview has not been started
2. In progress – the interview has been started but has not completed
3. Complete – the interview was completed
4. Resolved but not complete – the interview was not completed, but the record has received a terminal disposition and has been removed from dialing (examples, hard refusals, impairment, language barrier (other than Spanish))

Switching between studies: whenever you switch between studies, make sure that you:

1. First disposition the current record,
2. Then, leave up the suspend block information with the other selected respondent’s information,
3. Third, return to the study where you retrieved the first record to end the call.
Starting the two interviews

If two respondents are selected to be interviewed, question A14a in the alpha study will ask if the respondent who answered the screener questions is one of the two selected respondents:

Regardless of which respondent is selected, the first interview will take place in the alpha study.
Switching to the other selected respondent in the alpha study

Scenario 1 – the alpha respondent does not complete the survey: If the first person who starts the interview in the alpha study is unable to complete, but the other selected respondent is available, type “suspend;” in the suspend block you will be presented with the information to conduct the second interview after you disposition the first record:

```
INTERVIEWER: OTHER SELECTED RESPONDENT DISPOSITION: Unknown

May I please speak to the Oldest Woman, who has also been selected to answer more questions about health?

IF Oldest Woman IS AVAILABLE, BRING RECORD UP IN THE BETA STUDY.

THE MASTERID TO BRING UP IS 000028562

LEAVE THIS SCREEN UP UNTIL YOU HAVE FINISHED WITH THE OTHER RESPONDENT

01 CONTINUE
```
Scenario 2 – the alpha respondent completes the survey: If the respondent in the alpha study completes the survey, you will be presented with OTHERGUY at the end of the survey.

If the other respondent is available, you will again be provided with the master ID of the other respondent and should then retrieve the record in the beta study.

If the other respondent is not available, you will be prompted to ask for the best number and name of the second respondent. You will then be sent to the suspend block, where you should disposition the record appropriately.

For both scenarios: Once the computer has provided you with the information for the beta respondent, copy the master ID (highlight the text of the MID with your mouse, then left-click once to save the MID). To ensure you do not make a mistake, copy and paste MIDs—do not manually type in the ID number. Then transition to the beta study, and retrieve the record by pasting the MID (right-click on your mouse) at the MID retrieval prompt, and retrieve the record. You will then be able to interview the second person in the beta study.

- If the beta respondent is unable to complete their survey, type suspend and disposition the record appropriately. Then return to the alpha study and hit “01” through the screen above to end the call.
- If the beta respondent completes the survey, that record (in the beta study) will be assigned a complete disposition. After that point, return to the alpha study and hit “01” through the screen above to end the call.
Resuming records the day the two respondents have been identified (alpha/beta studies)

There are two ways that a record can be resumed the day the household is rostered depending on the status of the records:

- **Scenario 1 – neither respondent begins the survey:** If neither of the selected respondents started the survey, you will be presented with the screen below. Regardless of which selected respondent is on the phone, that person will be interviewed in the alpha study.

```
PHONr NUMBER: 970.000.5107   MASTERID: 0005407C Adden:

Hello, this is ___ and I'm calling back about an important health study for the University of Colorado Denver. Previously [READ LIST] was/were selected to participate in the study.

May I speak with [READ LIST]?

01 Oldest Female
02 Oldest Male
09 (DO NOT READ) TERM
```
• Scenario 2 – at least one respondent begins the survey: If one of the respondents started their interview, the record will need to be retrieved in the corresponding study. For example:
  o The alpha respondent suspends their survey and requests a callback for another day, and the beta respondent requests a same day callback.
    ▪ **The beta respondent record should be retrieved in the beta study.**
    ▪ The introductory screen will show who the selected respondent is in the beta study:

```
PHONE NUMBER: 970.001.0453    MASTERID: 00010453B
INTERVIEWER: OTHER SELECTED RESPONDENT DISPOSITION: Unknown

Hello, this is _____ and I'm calling back about an important health study for the University of Colorado Denver. Previously [READ LIST] was/were selected to participate in the study.

May I speak with [READ LIST]?
02 Oldest Woman
09 (DO NOT READ) TERM

(RINR0)
```

***Callback reports will need to be monitored closely so that same day callbacks in the beta study are honored***
Retrieving records after two respondents have been selected (charlie study)

If a household has two selected respondents, the corresponding alpha and beta records will be moved to the charlie study in overnight processing. Each record will receive a maximum of 8 attempts from that point forward.

When a record is retrieved, the introduction will ask for only the selected person associated with MID that has been retrieved as shown on the screen below:

```
PHONE NUMBER: 970.001.0453  MASTERID: 00010453B
INTERVIEWER: OTHER SELECTED RESPONDENT DISPOSITION: Unknown

Hello, this is _____ and I’m calling back about an important health study for the University of Colorado Denver. Previously [READ LIST] was/were selected to participate in the study.

May I speak with [READ LIST]?

  02 Oldest Woman
  09 (DO NOT READ) TERM

--> [READ LIST]
```
If the other respondent’s record is still active you will be presented with their information after you disposition the record, just as is done in the alpha study when a beta record can be retrieved:
Cell Phone Feature: Dropped Calls

It is imperative that you distinguish between an intentional hang-up and a dropped call. If someone hangs up in the middle of the survey, it is considered a refusal. However, listen carefully, did the line drop while the respondent was in the middle of a sentence or answering a question? Was there static right before the line dropped? Was there a “click”? If so, treat it as a dropped call.

If you suspect it was a dropped call, type “special.” You will be sent to the special block where you will be presented with the question:

**INTERVIEWER: WAS YOUR CALL DROPPED?**

1. **YES, REDIAL**

Enter “1” and the system will automatically call back the respondent. You will still be in the special block, and you will then see these options:

**INTERVIEWER: WAS THE CALL CONNECTED?**

1. Yes, Person on line
2. Yes, Answering machine
3. **NO**

Option 1 provides introduction text for re-establishing the interview; option 2 provides answering machine text; option 3 will send you back to the question where the call was dropped, at that point you should suspend the interview and disposition the call as an unscheduled callback.

### Dropped Call v. Hang-up/Refusal

<table>
<thead>
<tr>
<th>Dropped Call</th>
<th>Hang-up – all mid-survey hang-ups should be dispositioned as a <em>REFUSAL</em></th>
</tr>
</thead>
<tbody>
<tr>
<td>• You hear a “click”</td>
<td>• SR gives indication that they are not interested in the survey</td>
</tr>
<tr>
<td>• The respondent states that they are entering into an elevator, building,</td>
<td>• Any verbal queues that the SR is going to hang up</td>
</tr>
<tr>
<td>mine etc. and the call might be lost</td>
<td></td>
</tr>
<tr>
<td>• Quality of call gradually diminishes</td>
<td></td>
</tr>
<tr>
<td>• SR is engaged in the survey and the call drops suddenly</td>
<td></td>
</tr>
<tr>
<td>What to do with a dropped call</td>
<td></td>
</tr>
<tr>
<td>-------------------------------</td>
<td></td>
</tr>
<tr>
<td><strong>Type “special”</strong></td>
<td>Choose option 1, redial</td>
</tr>
<tr>
<td><strong>If call is connected</strong></td>
<td>Choose option 1, resume the interview</td>
</tr>
<tr>
<td><strong>If sent to VM</strong></td>
<td>Choose option 2, leave the appropriate VM message</td>
</tr>
<tr>
<td><strong>If call is not connected</strong></td>
<td>Choose option 3, go back to the question where the dropped call occurred, type suspend and disposition the call as an unscheduled callback.</td>
</tr>
</tbody>
</table>
1. Who is the sponsor of the study?
The Attitudes and Behaviors Survey on Health (TABS on Health, or “study”) is conducted by the University of Colorado Denver. The study is paid for by the Colorado Department of Public Health and Environment.

[IF NEEDED: We are calling for the University of Colorado, not from the University]

2. Why is this survey being conducted? What is the purpose of the study?
The purpose of the study is to support and inform community programs to reduce chronic disease.

[IF NEEDED: These are community health programs.]

3. What is the survey about?
The survey is about your health, including health behaviors, attitudes, and opinions about issues related to health.

4. How did you get my number?
All telephone numbers called in this study are selected at random by a computer.

[IF NEEDED: The computer is provided the area code and three-digit prefix to select the region for calling. The computer then randomly selects the last four digits of the number.

Cell phone numbers are generated in the same random fashion.]

5. Why are you calling nationally/my state if it’s for Colorado?
The study includes some respondents from Colorado and some from the rest of the country in order to improve the quality of the study. Also, national trends and findings will be studied and shared that may help improve chronic disease programs in other states too.

[IF NECESSARY: These are community health programs.]

6. Will my information be kept private?
Yes. Nothing is ever reported in any way that can identify you. The company I work for, ICF International, is required to guard confidentiality. All identifying information, such as your telephone number, is separated from your responses after the data have been collected and compiled.

7. How long is the survey?
On average the survey takes about 25 minutes.

8. Contact Information
Survey verification line: You may call our survey verification line at 866-784-7102

GIVE THIS FIRST: University of Colorado Contact: You may call the principal investigator, Dr. Emily Burns at 303-724-3536.

[INTERVIEWER: Give this only if the caller asks for a contact other than the principal investigator: You may call the COMIRB (University of Colorado’s Institutional Review Board) to learn more about your rights as a survey participant at (303) 724-1055.]

9. Who is eligible?
Respondents who live in a private household and are 18 years of age or older are eligible to participate in the survey.
10. My number is unlisted, how did my number get on the call list?
   All telephone numbers called in this study are selected at random by a computer. Therefore, all numbers, including unlisted numbers, are selected for dialing purely by chance.

11. My name is on the national do-not-call list. I’m not supposed to get these calls.
   The national do-not-call list controls telemarketing companies that sell services and products over the phone. This survey is conducted for public health purposes and does not fall under do-not-call list laws. All telephone numbers called in this study are selected at random by a computer.

   [IF RESPONDENT WANTS MORE INFORMATION: Information about telephone consumer rights can be obtained from the:

   Federal Communications Commission (FCC) at 888-225-5322 or at www.fcc.gov and

   Federal Trade Commission (FTC) at 202-382-4357 or at www.ftc.gov]

12. Why am I getting calls so late at night/calls on the weekend?
   The intention is not to disturb you, so I apologize if that was the case. Calls are made during the evening hours and on weekends because many people are not home or are busy earlier in the day.

   If there is a more convenient time to contact you, I can arrange for the call to be made during that time
   [SCHEDULE CALLBACK, IF PERSON SAYS THERE IS A MORE CONVENIENT TIME]

13. I said no, why are you calling again?
   I apologize; some people want another opportunity to participate when they are less busy or have had time to think about it. Can I answer any questions about the survey that would help you feel more comfortable about participating, as you are very important to the success of the study?

14. If I decline to participate, will that stop me from being called again?
   I can remove your number from dialing for this survey and you will not be called again for this particular survey. However, can I answer any questions about the survey that would help you feel more comfortable about participating as you are very important to the success of the study?

15. How many people are you talking to?
   We will interview 16,000 people. To interview 16,000 adults, we need to contact many more households (hundreds of thousands).

   [IF NEEDED: We will interview 13,000 adults in Colorado and 3,000 across the US]

16. Why are you asking me about voting?
   Some research suggests a link between people’s health and voting behaviors and beliefs. We are studying this possible connection.

   [IF NEEDED:

   • We are NOT conducting political polling.
   • We are NOT asking about specific candidates or issues.
   • We do NOT report your answers to any political entity.
   • If there are questions that you prefer not to answer, you can let me know and we can move to the next question.]
18. **Why are you asking me for contact information if this is an anonymous survey?**

We are asking to collect contact information separately from the rest of the survey. Contact information will be stored under high security and stored separately from your responses. Only authorized researchers will be able to access your contact information, and only then to update your contact information or notify eligible people about a specific new study.

17. **Refusal Conversion Statements**

- I realize we have called you already on behalf of the University of Colorado. I’d like to have a chance to give you a little more information about this study and why we’re doing it.
- Can I answer any questions for you about the study so that you could feel more comfortable participating?
- Your input is important as the results of this study will be used by the press, lawmakers, researchers, and health professionals so they may make better decisions in planning community health programs.
- I completely understand that your time is limited. Your input is important in this study. We could start now and if we run out of time you can finish later.
- We cannot replace you with anybody else. We have a limited number of households that we can contact. When someone does not participate, this makes the results less representative. This is your chance to be represented in health program decisions.

18. **Neutral statements if a respondent has an emotional response to any of the questions:**

- I can hear that this interview is upsetting you. Is it okay to continue?
  - If yes, continue with sensitivity
  - If no, ask “Is there a better time to callback”
  - If no/never call, terminate and disposition as a hard refusal
- Would you like to take a moment to gather your thoughts before we continue?
- Would you like to take a break before we continue?

19. **Respondent hangs up during Section K/contact information**

INTERVIEWER: If a respondent hangs up or adamantly refuses during section K where you collect contact information (name, address, email, etc.), you can 9-fill the rest of the questions, i.e. you can enter refusals for the rest of the survey until it completes.

20. **Data Entry for City, State, County, and Provider Lists**

INTERVIEWER: For questions with lengthy lists – specifically the city, state, county, and provider lists – you can simply start typing the name of the city/state/county/provider and the programmer will jump to that portion of the alphabetized list.

Additionally, for pieces like refusals, you can use 99/999 options to jump to the end of the list where the don’t know/refused/other options are located.
1. ¿Quién es el patrocinador de este estudio?

La Encuesta sobre actitudes y conductas de salud, (TABS de salud o “estudio”) es llevada a cabo por la Universidad de Colorado en Denver. El estudio lo paga el Departamento de Salud Pública y Medio Ambiente de Colorado.

[SI ES NECESARIO: Llamamos por la Universidad de Colorado, no de la Universidad].

2. ¿Por qué se está realizando este estudio? ¿Cuál es el propósito de este estudio?

El propósito del estudio es apoyar e informar sobre los programas de la comunidad para reducir las enfermedades crónicas.

[SI FUERA NECESARIO: Estos son programas de salud comunitaria].

3. ¿De qué se trata esta encuesta?

Esta encuesta es sobre su salud, incluidas sus conductas y actitudes de salud y sus opiniones sobre temas relacionados con la salud.

4. ¿Cómo obtuvo mi número?

Todos los números de teléfono a los que llamamos en este estudio son seleccionados en forma aleatoria por una computadora.

[SI FUERA NECESARIO: La computadora recibe el código de área y el prefijo de tres dígitos para seleccionar la región de llamada. La computadora selecciona luego los últimos cuatro dígitos del número en forma aleatoria.

Los números de teléfonos celulares se generan de la misma forma aleatoria].

5. ¿Por qué están llamando a nivel nacional o estatal si es para Colorado?

Con el fin de mejorar la calidad del estudio, éste incluye a algunos entrevistados en Colorado y a algunos del resto del país. Además, las tendencias y hallazgos nacionales serán estudiados y compartidos, lo que podría ayudar a mejorar también los programas para enfermedades crónicas en otros estados.

[SI ES NECESARIO: Estos son programas de salud comunitaria].

6. ¿Mi información se mantendrá en forma confidencial?

Sí. No reportamos nada de forma que lo pueda identificar. La compañía para la que trabajo, ICF International, está obligada a mantener la confidencialidad. Toda la información de identificación, como su número de teléfono, se separa de sus respuestas después de que la información es recolectada y compilada.

7. ¿Cuánto dura la encuesta?

En promedio, la encuesta toma unos 25 minutos.

8. Información de contacto

Línea de verificación de la encuesta: Puede llamar a nuestra línea de verificación de la encuesta al 866-784-7102

[ENTREVISTADOR: Dé esta información sólo si quien llama solicita otro contacto además del investigador principal: Puede llamar a la COMIRB (Junta de Revisión Institucional de la Universidad de Colorado) para averiguar más sobre sus derechos como participante en una encuesta al (303) 724-1055.

9. ¿Quién califica?
Los entrevistados que vivan en un hogar privado y tengan 18 años de edad o más califican para participar en la encuesta.

10. Mi número no aparece en la guía telefónica, ¿cómo aparece en la lista de llamadas?
Todos los números de teléfono a los que llamamos en este estudio son seleccionados en forma aleatoria por una computadora. Por lo tanto, todos los números, incluidos los que no figuran en la guía telefónica, son seleccionados para ser marcados en forma aleatoria.

11. Mi nombre está en el listado nacional para no recibir llamadas. Se supone que no debo recibir este tipo de llamadas.
El listado nacional para no recibir llamadas controla a las compañías de telemarketing que venden servicios y productos por teléfono. Esta encuesta se lleva a cabo con fines de salud pública y no está contemplada por las leyes del listado para no recibir llamadas. Todos los números de teléfono a los que llamamos en este estudio son seleccionados en forma aleatoria por una computadora.

[SI EL ENTREVISTADO DESEA MÁS INFORMACIÓN: Puede obtener información sobre los derechos del consumidor telefónico en:

La Comisión Federal de Comunicaciones (FCC), llamando al 888-225-5322 o visitando www.ftc.gov
La Comisión Federal de Comercio (FTC), llamando al 202-382-4357 o visitando www.ftc.gov

12. ¿Por qué me están llamando tan tarde o durante los fines de semana?
No es nuestra intención causarle molestias, por favor, acepte nuestras disculpas si le causamos alguna molestia. Las llamadas se hacen por la tarde y los fines de semana porque muchas personas no están en su casa o están ocupadas más temprano.

Si hay una hora en especial más conveniente para llamarlo, puedo programar que lo llamen a esa hora [SI LA PERSONA INDICA UNA HORA MÁS CONVENIENTE, PROGRAME ESA HORA ESPECÍFICA PARA VOLVER A LLAMAR]

13. Les dije que no me llamaran, ¿por qué me siguen llamando?
Lo siento; algunas personas quieren que les brindemos otra oportunidad para participar cuando estén menos ocupados o hayan tenido tiempo para pensarlo. ¿Podría responderle alguna pregunta sobre la encuesta que lo ayudara a sentirse más cómodo con respecto a su participación? Usted es muy importante para el éxito del estudio.

14. Si me niego a participar, ¿no me volverán a llamar?
Puedo quitar su número de la lista de teléfonos para esta encuesta y no lo volverán a llamar para esta encuesta en particular. No obstante, ¿Podría responderle alguna pregunta sobre la encuesta que lo ayudara a sentirse más cómodo con respecto a participar? Usted es muy importante para el éxito del estudio.
15. ¿Con cuántas personas están hablando?
Entrevistaremos a 16.000 personas. Para entrevistar a 16.000 adultos, tenemos que llamar a muchos más hogares (cientos de miles).

[SI FUERA NECESARIO: Entrevistaremos a 13.000 adultos en Colorado y 3.000 en el resto de EE.UU.]

16. ¿Por qué me están haciendo preguntas sobre votar?
Algunas investigaciones sugieren que existe un vínculo entre la salud de las personas y sus comportamientos y creencias en cuanto a votar. Estamos estudiando esta posible conexión.

SI FUERA NECESARIO:
• NO estamos haciendo una encuesta política.
• NO estamos preguntando sobre candidatos o temas en particular.
• NO reportamos sus respuestas a ninguna entidad política.

Si hubiera preguntas que prefiere no responder, puede hacérmelo saber y podemos pasar a la siguiente pregunta.

17. ¿Por qué piden mi información de contacto si es una encuesta anónima?
Recolectamos la información de contacto por separado del resto de la encuesta. La información de contacto se almacena bajo alta seguridad y por separado de sus respuestas. Únicamente los investigadores autorizados pueden acceder a su información de contacto y únicamente así podrán actualizarla o notificar a las personas que califiquen sobre un nuevo estudio específico.

18. Frases de conversión de negación.
• Comprendo que ya lo hemos llamado en nombre de la Universidad de Colorado. Me gustaría darle un poco más de información sobre este estudio y sobre por qué lo estamos realizando.
• ¿Tiene alguna pregunta sobre el estudio que yo pueda responder para ayudarle a sentirse más cómodo participando?
• Su aporte es importante y los resultados de este estudio serán utilizados por la prensa, los legisladores, investigadores y profesionales de la salud para tomar mejores decisiones para planificar los programas de salud comunitaria.
• Comprendo perfectamente que tiene poco tiempo. Su aporte es importante para este estudio. Podríamos comenzar ahora y si nos quedamos sin tiempo, terminar después.

No podemos cambiarlo por nadie más. Contamos con una cantidad limitada de hogares a contactar. Cuando alguien no participa, esto hace que los resultados sean menos representativos. Esta es su oportunidad de ser representado en las decisiones de los programas de salud.

18. Frases neutras si el entrevistado tiene una respuesta emocional a alguna de las preguntas:
• Siento que la entrevista lo está molestando. ¿Está bien si continuamos?
  o Si responde “sí”, continúe con tacto
  o Si responde “no”, pregunte “¿Podría llamarlo en algún otro momento?”
  o Si responde “no” o “no llamen más”, cancele y marque como negativa rotunda
• ¿Desea tomarse un momento para pensar antes de continuar?
• ¿Desea hacer una pausa antes de continuar?
19. Respondent hangs up during Section K/contact information

- INTERVIEWER: If a respondent hangs up or adamantly refuses during section K where you collect contact information (name, address, email, etc.), you can 9-fill the rest of the questions, i.e. you can enter refusals for the rest of the survey until it completes.

20. Data Entry for City, State, County, and Provider Lists

INTERVIEWER: For questions with lengthy lists – specifically the city, state, county, and provider lists – you can simply start typing the name of the city/state/county/provider and the programmer will jump to that portion of the alphabetized list.

Additionally, for pieces like refusals, you can use 99/999 options to jump to the end of the list where the don’t know/refused/other options are located.
CO TABS Interviewer Quiz

Please choose the BEST response to each question as outlined on the CO TABS FAQ document.

1. “Who is the sponsor of the study?“
   a. Conducted and paid for by the Centers for Disease Control and Prevention (CDC).
   b. Conducted by the University of Colorado Denver, and paid for by the CDC.
   c. Conducted by the University of Colorado Denver, and paid for by the Colorado Department of Public Health and Environment.
   d. Conducted by the Colorado Department of Public Health and Environment, and paid for by the CDC.

2. “What is the purpose of the study?”
   a. To support and inform community programs to reduce chronic disease.
   b. To determine how the number of smokers and non-smokers in Colorado compare to the rest of the country.
   c. To determine how to best help Colorado residents quit smoking.
   d. To improve the health of Colorado residents.

3. “How long is the survey?“
   a. It takes about 15 minutes.
   b. It can take from 15-25 minutes.
   c. It takes about 25 minutes.
   d. It really depends on how fast I can get through the survey.

4. “Why are you calling me, I’m on the Do Not Call List?“
   a. All numbers are randomly chosen by a computer system and do not reference the Do Not Call List.
   b. We are not telemarketers so we can call you.
   c. We call everyone it doesn’t matter whether or not you are on a Do Not Call List.
   d. The national do not call list controls telemarketing firms that sell products and services over the phone. This survey is for public health purposes and we do not fall under the do-not call laws.

5. “How do I know if I’m eligible to do the survey?“
   a. You are an adult over the age of 18.
   b. You live in a private residence and are 18 years of age or older.
   c. You answered the phone so you are the person who is eligible.
   d. You live in a retirement home, dormitory, or private residence and are over the age of 18.
6. “I told you no, why are you calling me again?”
   a. I apologize; some people want another opportunity to participate when they are less busy or have had time to think about it.
   b. Our refusal protocol requires that you refuse at least twice before being removed from our calling list.
   c. We were trying to reach another adult who lives in your household to see if they might like to participate.
   d. I’m sorry, the last agent must have dispositioned your record incorrectly, thank you for your time.

7. “I don’t like giving out personal/private information over the phone.”
   a. We will not ask you for any personally identifying information, and your responses are confidential.
   b. Nothing is ever reported in any way that can identify you. The company I work for, ICF International, is required to guard confidentiality.
   c. Your individual answers will only be seen by the survey sponsors.
   d. We will protect your identity and answers to the extent allowable by law.

8. “Why are you calling so late on a Sunday?”
   a. Our dialing protocols require us to make calls late at night and on weekends.
   b. Researchers have determined that late evenings are the best time to reach people at home.
   c. Calls are made during the evening hours and on the weekends because many people are not home during the day.
   d. Any of the above are acceptable.

9. “Why are you asking for my contact information if this is an anonymous survey?”
   a. We are asking for your information only in case we need to contact you again in the future for verification purposes.
   b. We may contact you again in the future to participate in another survey.
   c. Only authorized researchers will be able to access your contact information, and only then to update your contact information or notify eligible people about a specific new study.
   d. Your contact information will only be shared with authorized researchers should they need to verify any of your responses or correct any possible errors in data entry.

10. “Why are you calling me for the second time?”
    a. We cannot replace you with anybody else. We have a limited number of households that we can contact.
    b. You input is important as the results of this study will be used by the press, lawmakers, researchers and health professionals so they can make better decisions in planning community health programs.
    c. This is your chance to be represented in health program decisions.
    d. All of the above.
Appendix E: Response Rate Calculations

The CO TABS response rates were calculated using the American Association for Public Opinion Research (AAPOR) response rate formulas. Since partial completes were included in the final data delivery, the AAPOR Response Rate 4 (RR4) formula was used:

\[
RR4 = \frac{(I + P)}{(I + P) + (MT + R + NC + O) + e(UH + UO)}
\]

Where:
- I is a completed interview
- P is a partial interview
- MT is a mid-terminate
- R is a refusal
- NC represents non-contacts (i.e., answering machines, fax machines, call-backs, etc.)
- O represents “other” (i.e., language barrier, no eligible proxy, etc.)
- e represents the proportion of unknown-eligibility respondents estimated to be eligible
- UH represents working telephone number, but unknown if an eligible respondent is located there (i.e., no opportunity to screen for eligibility)
- UO represents unknown others (i.e., no answer, and no previous contact, busy, and no previous contact, hang-ups, etc.)

AAPOR’s RR4 is adjusted to estimate what proportion of cases of unknown eligibility thought to be eligible. This was calculated by applying the rate of known eligibility (e) to the records with unknown eligibility, where e is the proportion of eligible respondents to the number of eligible and ineligible respondents:

\[
e = \frac{(I+P) + (MT + R + NC + O)}{(I+P) + (MT + R + NC + O) + (XO + XH)}
\]

Where:
- XO represents ineligible others (i.e., ineligible household, no eligible members, etc.)
- XH represents non-working telephone number

AAPOR codes were also mapped to BRFSS codes, shown in the crosswalk below:

<table>
<thead>
<tr>
<th>AAPOR code</th>
<th>BRFSS code</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td>110: Complete</td>
</tr>
<tr>
<td>P</td>
<td>120: Partial Complete</td>
</tr>
<tr>
<td>MT</td>
<td>210: Mid-terminate</td>
</tr>
<tr>
<td>R</td>
<td>220: Refused</td>
</tr>
<tr>
<td>NC</td>
<td>230: Eligible - Not Interviewed</td>
</tr>
<tr>
<td>NC</td>
<td>240: Eligible unavailable in time period</td>
</tr>
<tr>
<td>O</td>
<td>250: Eligible has Language Barrier</td>
</tr>
<tr>
<td>Code</td>
<td>Description</td>
</tr>
<tr>
<td>------</td>
<td>------------------------------------------</td>
</tr>
<tr>
<td>I</td>
<td>110: Complete</td>
</tr>
<tr>
<td>MT</td>
<td>210: Midterminate</td>
</tr>
<tr>
<td>NC</td>
<td>230: Eligible - Not Interviewed</td>
</tr>
<tr>
<td>NC</td>
<td>240: Eligible unavailable in time period</td>
</tr>
<tr>
<td>O1</td>
<td>250: Eligible has Language Barrier</td>
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**Landline Household Dispositions**

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<tr>
<th>AAPOR</th>
<th>BRFSS</th>
<th>Frequency</th>
<th>Percent</th>
<th>Cumulative Frequency</th>
<th>Cumulative Percent</th>
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<tr>
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<td>260: Eligible has Impairment</td>
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<tr>
<td>O</td>
<td>270: Refused, Landline but unknown if eligible</td>
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<td>O</td>
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<td>305: Individual unavailable in time period</td>
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<tr>
<td>UO</td>
<td>310: Refused, Landline but unknown if eligible</td>
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<tr>
<td>UO</td>
<td>315: Postponed, Landline but unknown if eligible</td>
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<tr>
<td>UO</td>
<td>320: Language Barrier with unknown eligibility</td>
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<tr>
<td>UO</td>
<td>325: Impairment with unknown eligibility</td>
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<td>330: Refused, indefinite if Landline phone</td>
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<tr>
<td>UO</td>
<td>340: Block device definite Landline phone</td>
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<tr>
<td>UH</td>
<td>345: Answering machine, indefinite if Landline phone</td>
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</tr>
<tr>
<td>UH</td>
<td>360: No answer</td>
<td></td>
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<tr>
<td>UH</td>
<td>365: Busy</td>
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<tr>
<td>XH</td>
<td>370: On Never Call list</td>
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<tr>
<td>XO</td>
<td>401: No person of interest identified in screener</td>
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<td>XO</td>
<td>405: Reached wrong geographic location</td>
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<tr>
<td>XO</td>
<td>410: No adults, or teen/child line</td>
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</tr>
<tr>
<td>XH</td>
<td>420: Unknown if Landline phone</td>
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</tr>
<tr>
<td>XH</td>
<td>422: Business only Landline phone</td>
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<tr>
<td>XH</td>
<td>430: Dedicated fax/data/modem line</td>
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</tr>
<tr>
<td>XH</td>
<td>435: Not a Landline phone</td>
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</tr>
<tr>
<td>XH</td>
<td>450: Nonworking</td>
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<tr>
<td>O1</td>
<td>260: Eligible has Impairment</td>
<td>14</td>
<td>0%</td>
<td>14873</td>
<td>3.42%</td>
</tr>
<tr>
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<td>---</td>
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</tr>
<tr>
<td>P</td>
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<td>R</td>
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<td>0.14%</td>
<td>16484</td>
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<tr>
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<tr>
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<td>0.81%</td>
<td>42384</td>
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</tr>
<tr>
<td>UO</td>
<td>305: Individual unavailable in time period</td>
<td>1583</td>
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</tr>
<tr>
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<td>13.45%</td>
<td>102496</td>
<td>23.55%</td>
</tr>
<tr>
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<td>315: Postponed, Landline but unknown if eligible</td>
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</tr>
<tr>
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<td>109399</td>
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</tr>
<tr>
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<td>109555</td>
<td>25.17%</td>
</tr>
<tr>
<td>UO</td>
<td>335: Answering machine, definite Landline phone</td>
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<td>123681</td>
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</tr>
<tr>
<td>UO</td>
<td>340: Block device definite Landline phone</td>
<td>82</td>
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<td>123763</td>
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</tr>
<tr>
<td>XH</td>
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<td>5213</td>
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<td>128976</td>
<td>29.63%</td>
</tr>
<tr>
<td>XH</td>
<td>370: On Never Call list</td>
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<td>29.66%</td>
</tr>
<tr>
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<td>420: Unknown if Landline phone</td>
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<td>152613</td>
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</tr>
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<td>432933</td>
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</tr>
<tr>
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<tr>
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<td>1721</td>
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<td>435242</td>
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### Colorado Sample Dispositions

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<thead>
<tr>
<th>AAPOR</th>
<th>BRFSS</th>
<th>Frequency</th>
<th>Percent</th>
<th>Cumulative Frequency</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td>110: Complete</td>
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<td>2.97%</td>
<td>9764</td>
<td>2.97%</td>
</tr>
<tr>
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<td>261</td>
<td>0.08%</td>
<td>10025</td>
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</tr>
<tr>
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<td>230: Eligible - Not Interviewed</td>
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<td>12252</td>
<td>3.73%</td>
</tr>
<tr>
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<td>240: Eligible unavailable in time period</td>
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<td>0%</td>
<td>12264</td>
<td>3.73%</td>
</tr>
<tr>
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<td>11</td>
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<td>12275</td>
<td>3.74%</td>
</tr>
<tr>
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<td>0.23%</td>
<td>13024</td>
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</tr>
<tr>
<td>R</td>
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<td>0.15%</td>
<td>13519</td>
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</tr>
<tr>
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<td>29512</td>
<td>8.98%</td>
</tr>
<tr>
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</tr>
<tr>
<td>UO</td>
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<td>0.35%</td>
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</tr>
<tr>
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<tr>
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<tr>
<td>UO</td>
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</tr>
<tr>
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<td>3.15%</td>
<td>90985</td>
<td>27.68%</td>
</tr>
<tr>
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<td>91055</td>
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<tr>
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<td>1.16%</td>
<td>94883</td>
<td>28.87%</td>
</tr>
<tr>
<td>XH</td>
<td>370: On Never Call list</td>
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<td>0.03%</td>
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<tr>
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<tr>
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<td>34.5%</td>
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<tr>
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<tr>
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### National Sample Dispositions

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<th>Percent</th>
<th>Cumulative Frequency</th>
<th>Cumulative Percent</th>
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<td>1.91%</td>
<td>2039</td>
<td>1.91%</td>
</tr>
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<td>MT</td>
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<td>2102</td>
<td>1.97%</td>
</tr>
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<td>490</td>
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<td>2592</td>
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<td>Interviewed</td>
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</tr>
<tr>
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<td>240: Eligible unavailable in time period</td>
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<td>0%</td>
<td>2593 2.43%</td>
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<td>2830 2.65%</td>
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<td>135</td>
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<td>2965 2.78%</td>
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<tr>
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<tr>
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<td>28938 27.15%</td>
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<tr>
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<td>3758</td>
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<td>32696 30.67%</td>
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<tr>
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<tr>
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<td>13</td>
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<td>34106 32%</td>
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<td>39884 37.42%</td>
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<td>106166 99.6%</td>
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<tr>
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<td>Percent</td>
<td>Cumulative Frequency</td>
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<td>----------------------</td>
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<tr>
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<td>10909</td>
<td>2.51%</td>
<td>10909</td>
<td>2.51%</td>
</tr>
<tr>
<td>MT</td>
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<td>11288</td>
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<td>3.29%</td>
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<tr>
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<td>Cumulative Percent</td>
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### Colorado Sample Dispositions

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<td>9072</td>
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<tr>
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<tr>
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<tr>
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</tr>
<tr>
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</tr>
<tr>
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### National Sample Dispositions

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<th>Cumulative Frequency</th>
<th>Cumulative Percent</th>
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<td>1837</td>
<td>1.72%</td>
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<tr>
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**AAPOR & BRFSS Second Selected Landline Dispositions**

Combined Colorado & National Sample Dispositions

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**Colorado Sample Dispositions**

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<tr>
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<td>Refused, Landline but unknown if eligible</td>
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<td>63626</td>
<td>20.06%</td>
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<td>Postponed, Landline but unknown if eligible</td>
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<td>68681</td>
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</tr>
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<td>UO 320</td>
<td>Language Barrier with unknown eligibility</td>
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</tr>
<tr>
<td>UO 325</td>
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<td>79514</td>
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<td>Cumulative Percent</td>
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<th>Percent</th>
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<th>Cumulative Percent</th>
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<tbody>
<tr>
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<td>239</td>
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<tr>
<td>MT</td>
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<td>28</td>
<td>0.03%</td>
<td>267</td>
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<tr>
<td>NC</td>
<td>230: Eligible - Not Interviewed</td>
<td>77</td>
<td>0.07%</td>
<td>344</td>
<td>0.33%</td>
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</table>
| NC    | 240: Eligible unavailable in time period | 1  | 0% | 345  | 0.33% |}

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<th>Frequency</th>
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<th>Cumulative Frequency</th>
<th>Cumulative Percent</th>
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<tbody>
<tr>
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<td>120: Partial Complete</td>
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<tr>
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<td>0%</td>
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<tr>
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<td>6807</td>
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</tr>
<tr>
<td>UH</td>
<td>365: Busy</td>
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<td>8143</td>
<td>7.82%</td>
</tr>
<tr>
<td>UO</td>
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</tr>
<tr>
<td>UO</td>
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</tr>
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</tr>
<tr>
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</tr>
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</tr>
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**Cell Phone Dispositions:**

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<th>Cumulative Percent</th>
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<td>4500</td>
<td>2.68%</td>
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<tr>
<td>MT</td>
<td>210: Midterminate</td>
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<td>0.14%</td>
<td>4729</td>
<td>2.82%</td>
</tr>
<tr>
<td>NC</td>
<td>230: Eligible - Not Interviewed</td>
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<td>5464</td>
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**National Sample Dispositions**
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<th>Cumulative Percent</th>
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<td>MT</td>
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<td>229</td>
<td>0.14%</td>
<td>4729</td>
<td>2.82%</td>
</tr>
<tr>
<td>NC</td>
<td>230: Eligible - Not Interviewed</td>
<td>735</td>
<td>0.44%</td>
<td>5464</td>
<td>3.25%</td>
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<tr>
<td>NC</td>
<td>240: Eligible unavailable in time period</td>
<td>16</td>
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<td>5480</td>
<td>3.26%</td>
</tr>
<tr>
<td>O1</td>
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<td>120: Partial Complete</td>
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<td>6170</td>
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<tr>
<td>R</td>
<td>220: Refused</td>
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<td>9380</td>
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<td>330: Refused, indefinite if cell phone</td>
<td>400</td>
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<td>9780</td>
<td>5.82%</td>
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**Cell Phone Sample Dispositions**

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<th>Percent</th>
<th>Cumulative Frequency</th>
<th>Cumulative Percent</th>
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<tr>
<td>UO</td>
<td>305: Individual unavailable in time period</td>
<td>86</td>
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<td>3814</td>
<td>9.97%</td>
</tr>
<tr>
<td>UO</td>
<td>310: Refused, cell but unknown if eligible</td>
<td>12395</td>
<td>32.41%</td>
<td>16209</td>
<td>42.38%</td>
</tr>
<tr>
<td>UO</td>
<td>315: Postponed, cell but unknown if eligible</td>
<td>3836</td>
<td>10.03%</td>
<td>20045</td>
<td>52.41%</td>
</tr>
<tr>
<td>UO</td>
<td>320: Language Barrier with unknown eligibility</td>
<td>253</td>
<td>0.66%</td>
<td>20298</td>
<td>53.07%</td>
</tr>
<tr>
<td>UO</td>
<td>325: Impairment with unknown eligibility</td>
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<td>0.01%</td>
<td>20300</td>
<td>53.07%</td>
</tr>
<tr>
<td>UO</td>
<td>335: Answering machine, definite cell phone</td>
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<td>13.25%</td>
<td>25369</td>
<td>66.33%</td>
</tr>
<tr>
<td>UO</td>
<td>340: Block device definite cell phone</td>
<td>14</td>
<td>0.04%</td>
<td>25383</td>
<td>66.36%</td>
</tr>
<tr>
<td>XH</td>
<td>355: Maybe cell but now Nonworking</td>
<td>2743</td>
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<td>28126</td>
<td>73.54%</td>
</tr>
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</tr>
<tr>
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<td>38248</td>
<td>100%</td>
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<tr>
<td>Code</td>
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<td>Percent</td>
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<td>Cumulative Percent</td>
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<tr>
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<td>19954</td>
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<td>82548</td>
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</tr>
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</tr>
<tr>
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<td>102166</td>
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</tr>
<tr>
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</tr>
<tr>
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<td>112170</td>
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</tr>
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### Colorado Sample Dispositions

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<th>Frequency</th>
<th>Percent</th>
<th>Cumulative Frequency</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td>110: Complete</td>
<td>3719</td>
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<td>3719</td>
<td>2.87%</td>
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<td>4478</td>
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</tr>
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<td>987</td>
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**National Sample Dispositions**

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<td>781</td>
<td>2.04%</td>
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<td>158</td>
<td>0.41%</td>
<td>986</td>
<td>2.58%</td>
</tr>
<tr>
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<td>NC</td>
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<td>0%</td>
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<tr>
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</tr>
<tr>
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<td>253</td>
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<td>53.07%</td>
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<tr>
<td>UO</td>
<td>325: Impairment with unknown eligibility</td>
<td>2</td>
<td>0.01%</td>
<td>20300</td>
<td>53.07%</td>
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<tr>
<td>UO</td>
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<td>5069</td>
<td>13.25%</td>
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<td>66.33%</td>
</tr>
<tr>
<td>UO</td>
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<td>14</td>
<td>0.04%</td>
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<td>66.36%</td>
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<tr>
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<td>2743</td>
<td>7.17%</td>
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<td>73.54%</td>
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</table>

AAPOR & BRFSS Cell Phone Dispositions Waves 1 thru 3
Combined Colorado & National Sample Dispositions

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<th>Percent</th>
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<th>Cumulative Percent</th>
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<td>4168</td>
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<tr>
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<td>105784</td>
<td>65.9%</td>
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<tr>
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<td>160514</td>
<td>100%</td>
</tr>
<tr>
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<td>1</td>
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<td>160515</td>
<td>100%</td>
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**Colorado Sample Dispositions**

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<th>Cumulative Percent</th>
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<td>2.77%</td>
</tr>
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<td>Percent</td>
<td>Cumulative Frequency</td>
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<td>-----------</td>
<td>---------</td>
<td>----------------------</td>
<td>-------------------</td>
</tr>
<tr>
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<td>210: Midterminate</td>
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<td>3546</td>
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</tr>
<tr>
<td>NC</td>
<td>230: Eligible - Not Interviewed</td>
<td>520</td>
<td>0.43%</td>
<td>4066</td>
<td>3.33%</td>
</tr>
<tr>
<td>NC</td>
<td>240: Eligible unavailable in time period</td>
<td>13</td>
<td>0.01%</td>
<td>4079</td>
<td>3.34%</td>
</tr>
<tr>
<td>O1</td>
<td>250: Eligible has Language Barrier</td>
<td>63</td>
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<td>4142</td>
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</tr>
<tr>
<td>O1</td>
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<td>4147</td>
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</tr>
<tr>
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<td>120: Partial Complete</td>
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</tr>
<tr>
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<td>220: Refused</td>
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<td>6918</td>
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</tr>
<tr>
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<td>7219</td>
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<tr>
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<td>12888</td>
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<tr>
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<td>350: Block device, indefinite if cell phone</td>
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<td>12913</td>
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<tr>
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<td>360: No answer</td>
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<td>14092</td>
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<tr>
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<td>365: Busy</td>
<td>909</td>
<td>0.74%</td>
<td>15001</td>
<td>12.27%</td>
</tr>
<tr>
<td>UO</td>
<td>305: Individual unavailable in time period</td>
<td>576</td>
<td>0.47%</td>
<td>15577</td>
<td>12.74%</td>
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<tr>
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<td>310: Refused, cell but unknown if eligible</td>
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<td>57735</td>
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<tr>
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</tr>
<tr>
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<tr>
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</tr>
<tr>
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<td>340: Block device definite cell phone</td>
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<td>70809</td>
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</tr>
<tr>
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<tr>
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<td>430: Dedicated fax/data/modem line</td>
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<tr>
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<th>Frequency</th>
<th>Percent</th>
<th>Cumulative Frequency</th>
<th>Cumulative Percent</th>
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</table>

National Sample Dispositions*

ICF International  2012 TABS Methodology Report
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<th>Count</th>
<th>Percentage</th>
<th>Total</th>
<th>Percentage</th>
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<td>2.04%</td>
<td>781</td>
<td>2.04%</td>
</tr>
<tr>
<td>MT</td>
<td>210: Midterminate</td>
<td>47</td>
<td>0.12%</td>
<td>828</td>
<td>2.16%</td>
</tr>
<tr>
<td>NC</td>
<td>230: Eligible - Not Interviewed</td>
<td>158</td>
<td>0.41%</td>
<td>986</td>
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<tr>
<td>NC</td>
<td>240: Eligible unavailable in time period</td>
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<td>987</td>
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<tr>
<td>O1</td>
<td>250: Eligible has Language Barrier</td>
<td>13</td>
<td>0.03%</td>
<td>1000</td>
<td>2.61%</td>
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<tr>
<td>O1</td>
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<td>0%</td>
<td>1001</td>
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<tr>
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</tr>
<tr>
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<td>220: Refused</td>
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<td>1.68%</td>
<td>1771</td>
<td>4.63%</td>
</tr>
<tr>
<td>UH</td>
<td>330: Refused, indefinite if cell phone</td>
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<td>1850</td>
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</tr>
<tr>
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</tr>
<tr>
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<tr>
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<tr>
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<tr>
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<td>20300</td>
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</tr>
<tr>
<td>UO</td>
<td>335: Answering machine, definite cell phone</td>
<td>5069</td>
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</tr>
<tr>
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</tr>
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</tr>
<tr>
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<tr>
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<td>38248</td>
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*Wave 4 did not include national sample, thus the dispositions are the same for national sample for waves 1 through 4 and for 1 through 3.*
<table>
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<th>AAPOR</th>
<th>BRFSS</th>
<th>Frequency</th>
<th>Percent</th>
<th>Cumulative Frequency</th>
<th>Cumulative Percent</th>
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<td>332</td>
<td>4.49%</td>
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<td>0.31%</td>
<td>355</td>
<td>4.8%</td>
</tr>
<tr>
<td>NC</td>
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<td>412</td>
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<td>691</td>
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</tr>
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</tr>
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<tr>
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Appendix F: Frame Counts for Landline and Cell Frames

This document begins on the next page.
Appendix F

Frame counts for Landline (LL) and Cell Frames

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Appendix G: Imputations for Weighting

This document begins on the next page.
Appendix G

**Imputations for weighting**

Some variables needed for weighting may exhibit missing data and therefore need to be imputed. We will apply a hot-deck imputation algorithm to impute for item nonresponse to the following weighting variables: region, age, sex, race, number of telephone lines, and number of cell phones. Hot-deck imputation involves the substitution of a missing value with a non-missing value from a respondent (or donor) with similar characteristics. The imputation will be done separately for the cell phone survey and the landline survey.

For the respondents who do not provide responses, we will impute in the following sequence:

1) When necessary, a respondent’s sex is imputed from the observed distribution of respondents;
2) When necessary, each respondent’s age group, race and education levels are imputed from the observed distribution of respondents. Imputation is done separately for males and females;
3) If the landline respondent is missing the number of telephones in the household, they are assigned a value of one;
4) If the cell phone respondent is missing the number of cell phones, they are assigned a value of one;
5) The region associated with a respondent’s telephone number is used as a substitute when a respondent does not provide their county of residence.
**Respondent Selection**

Household weights were adjusted for the respondent’s overall probability of selection into the study. Since each household selects up to two adults to participate in the study, a respondent’s overall selection probability is the sum of the probability of first selection and the probability of second selection.

\[ P(x) = P(x_1) + P(x_2) \]

**First Selection**

The first person was selected among all adults in the household with equal probability. Thus, respondent \( x \)'s probability of being selected first was one divided by the number of adults (\( N \)).

\[ P(x_1) = \frac{1}{N} \]

**Second Selection**

The second selection probability for a respondent \( x \) varies depending on which household member was selected first. The total probability of second selection is the sum of conditional selection probabilities if each other adult was selected first.

\[ P(x_2) = \frac{1}{N} \sum_{i=1, i \neq x}^{N} P(x|i) \]

To determine the conditional selection probabilities we must know whether each adult in the household is a current smoker (\( S_i \)), African American (\( A_i \)), or Hispanic (\( H_i \)). Each of these variables takes on a value of 1 if the \( i \)th household member has the characteristic (i.e. is a smoker, is African American, is Hispanic), and 0 if they do not.

The second selection process proceeded in stages, following the selection of the first selected respondent, adult \( j \), as reflected in the probabilities below.

If there was at least one smoker in the household after adult \( j \) was selected, then we selected a second adult from among smokers in the household. Therefore, adult \( x \)'s conditional probability is one divided by the number of remaining smokers if adult \( x \) is a smoker, and zero if adult \( x \) is a non-smoker:

\[ P_s(x|j) = \frac{S_x}{(\sum_{i=1}^{N} S_i) - S_j} \]

If, after adult \( j \) was selected, there were no remaining smokers but at least one African American in the household, a second selection was made from among all African American adults in the household.
Adult $x$'s conditional probability is one divided by the number of remaining African-Americans if adult $x$ is African-American; if adult $x$ is not African-American then this weight is zero.

$$P_A(x|j) = \frac{A_x}{\left(\sum_{i=1}^{N} A_i\right) - A_j}$$

Finally, if, after adult $j$ is selected, there are no remaining smokers or African Americans, but at least one Hispanic in the household, then a second adult is selected from among all Hispanics. Adult $x$'s conditional probability is one divided by the number of remaining Hispanics if adult $x$ is Hispanic, and zero if adult $x$ is not Hispanic:

$$P_H(x|j) = \frac{H_x}{\left(\sum_{i=1}^{N} H_i\right) - H_j}$$

Putting these together we have:

$$P(x|h) = \begin{cases} P_S(x|j) & \text{if } (S_j - S_i) \geq 1 \\ P_A(x|j) & \text{if } ((S_j - S_i) = 0) \text{ and } ((A_j - A_i) \geq 0) \\ P_H(x|j) & \text{if } ((S_j - S_i) = 0) \text{ and } ((A_j - A_i) = 0) \text{ and } ((H_j - H_i) \geq 0) \\ 0 & \text{otherwise} \end{cases}$$

The notation here is $S_i = \sum_{i=1}^{N} S_i$, and similarly for the other sums.

We adjusted for non-response by adjusting the sum of the respondent selection weights for the completed interviews up to the sum of the weights over all selections in the weighting cell. We used regions as non-response adjustment cells.

The nonresponse adjustment were applied to the respondent selection weight for each respondent, $w_3 = w_2 \times NR_{i2}$.

**Cell Phone RDD**

For individual $i$, the probability of being selected for the cell phone sample is

$$\Pr_i(C) = \frac{n}{N_C} \times C_i.$$  

The base weight is the inverse of the selection probability, $w_j = Pr_i(C)^{-1}$.

Also for the cell sample component, we adjusted for non-response by adjusting the sum of the respondent selection weights for the completed interviews up to the sum of the weights over all selections in the weighting cell. We used regions as non-response adjustment cells.
Combining Landline and Cell Phone

After weighting to NHIS, we have two independent estimates of the dual-user groups, one from cell and one from landline. To combine the two estimates, we averaged the two sets of weights (both are weighted to the population) with a composite weight based on sample size and estimated design effect. The optimal coefficients are based on the effective sample size, defined as the sample size divided by design effect, to minimize the variance (or mean square error) of the composite weighted estimates (see Iachan et al., 2003, for example). Specifically,

\[
f_j = \frac{b_{ij} / \text{deff}_{ij}}{b_{ij} / \text{deff}_{ij} + b_2 / \text{deff}_{2j}},
\]

where

\[
\text{deff}_{ij} = b_{ij} \sum_{h_{ij}} w_{hj}^2 \times \left( \sum_{h_{ij}} w_{hj} \right)^{-2}
\]

is the design effect for the landline sample (1) and \( \text{deff}_{2j} \) is the design effect for the cell sample (2). These calculations are summarized in Table 1.

**Table 1. Calculations for Combining Landline/Address with Cell Phone**

<table>
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<tr>
<th></th>
<th>Design-weighted Sample Total</th>
<th>Composite weight</th>
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<tbody>
<tr>
<td>Landline respondents with no cell phone</td>
<td>( a_1 )</td>
<td>1</td>
</tr>
<tr>
<td>Landline respondents with a cell phone</td>
<td>( b_1 )</td>
<td></td>
</tr>
<tr>
<td>Cell-mostly</td>
<td>( b_{11} )</td>
<td>( f_1 )</td>
</tr>
<tr>
<td>Both</td>
<td>( b_{12} )</td>
<td>( f_2 )</td>
</tr>
<tr>
<td>Landline-mostly</td>
<td>( b_{13} )</td>
<td>( f_3 )</td>
</tr>
<tr>
<td>Cell phone respondents with a landline</td>
<td>( b_2 )</td>
<td></td>
</tr>
<tr>
<td>Cell-mostly</td>
<td>( b_{21} )</td>
<td>1-( f_1 )</td>
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<tr>
<td>Both</td>
<td>( b_{22} )</td>
<td>1-( f_2 )</td>
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<tr>
<td>Landline-mostly</td>
<td>( b_{23} )</td>
<td>1-( f_3 )</td>
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<tr>
<td>Cell phone respondents without a landline</td>
<td>( c_2 )</td>
<td>1</td>
</tr>
</tbody>
</table>