

The Final Report on the
2009 Behavioral Risk Factor Surveillance System
Commonwealth of the Northern Mariana Islands

Conducted by
The Central Statistics Division
The CNMI Department of Commerce

For
The CNMI Department of Public Health

June 14, 2010

Foreword

This final report completes the 2009 Behavioral Risk Factor Surveillance System (BRFSS) Survey conducted in the Commonwealth of the Northern Mariana Islands (CNMI) during the period of October-December 2009 by the CNMI Department of Commerce, Central Statistics Division, for the CNMI Department of Public Health. The differences between this final report and the version released earlier in May 2010 are the inclusion of a brief introduction of the Survey, a description of the Survey methodology, and a brief description of the Survey results. The summary statistics under the Survey Results section in this final report are the same as the ones in the previously released report with the exception of the following updates and inclusions:

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June 15, 2010

Wil Maui

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The Final Report on the 2009 BRFSS Commonwealth of the Northern Mariana Islands

I. INTRODUCTION

THE PURPOSE OF THE SURVEY

The purpose of the 2009 Behavioral Risk Factor Surveillance System (BRFSS) Survey was to profile the status of various health-related topics in the different communities in the Commonwealth of the Northern Mariana Islands and to provide for baseline data on Public Health's various community-based prevention programs.

THE HEALTH TOPICS COVERED IN THE SURVEY

The general topic areas covered in the CNMI 2009 BRFSS included:

1. General Health Status
2. Health-Related Quality of Life
3. Health Care Access
4. Sleep
5. Exercise
6. Diabetes
7. Hypertension Awareness
8. Cholesterol Awareness
9. Cardiovascular Disease
10. Asthma
11. Tobacco Use
12. Demographics
13. Caregiver Status
14. Disability
15. Alcohol Consumption
16. Immunization
17. Arthritis
18. Fruits and Vegetables Consumption
19. Physical Activity
20. HIV/AIDS
21. Emotional Support and Life Satisfaction
22. Cancer Survivors
23. Women's Health
24. Men's Health
25. Hearing Impairment

THE TARGET POPULATION OF THE SURVEY

The 2009 BRFSS targeted the population of 18 years and older persons in the CNMI. In addition, the BRFSS also collected data on age, gender, height, and weight of all persons living in households that were included in the 2009 BRFS Sample.

The demographics of the CNMI's total population has gone through significant changes in the past 10 years and especially since 2005. From the mid-1980s to about 2005, persons from Asian countries, particularly from China, the Philippines, Korea, Japan, Thailand, and Bangladesh, migrated into the CNMI as temporary contract workers. It was made clear in the prior CNMI censuses, that the majority of these contract workers lived not in what the Census Office considers as normal household dwelling type; but instead lived in what the Census Office refers to as group quarter (GQ) dwelling type, provided for by employers. Since 2005, the closure of many companies, and the subsequent repatriation of the contract workers who lived in company provided GQs, has changed the distributions of age, gender, ethnic, and other demographic variables of the CNMI's total population. It is important to note that the 2009 BRFSS Sample only included persons who lived in regular housing units and did not include persons in GQs. In 2009 the number of GQs (and persons living in these dwellings) had declined drastically to a few compared to the high number in 2000. It is important to point out that persons living in regular households are mostly permanent while those in GQs are mostly temporary residents in the CNMI.

THE GEOGRAPHIC COVERAGE OF THE SURVEY

The 2009 BRFSS covered the most populated islands of the CNMI: Saipan, Tinian, and Rota. In addition, the Survey also aimed to profile the differences and or similarities among village groups within each of the three islands. For details on the geography used in the Survey, please see Appendix A: The CNMI Sampling Universe.

THE SURVEY DATA COLLECTION PERIOD

The data collection for the 2009 BRFSS was conducted between October 1st and December 31, 2009.

THE SURVEY FUNDING SOURCE AND IMPLEMENTATION

The 2009 BRFSS Survey in the CNMI was commissioned and funded by the CNMI Department of Public Health. The Survey was conducted by the Central Statistics Division (CSD), Department of Commerce, for the Department of Public Health, CNMI. The CSD in turn contracted the services of Wil Maui, dba, DataTalks, to plan, conduct, and process the Survey with CSD.

II. THE SURVEY METHODOLOGY**STRATIFIED RANDOM SAMPLING FOR THE 2009 BRFSS HOUSEHOLDS**

The sample of households selected for the 2009 BRFSS was done in a way that would produce the best estimates of the health related topics for the entire population in the CNMI and also by Island and by Village Group, given the resources available.

To select the sample of households for 2009 BRFSS to meet the stated desired outcome for the Survey, the CNMI sampling universe (please see the description of the CNMI Sampling Universe in Appendix A for detail) was first separated into two groups: 1) household housing units (HHUs) type and 2) group quarter (GQs) units type. For this Survey, GQ type units were excluded. The household housing units group was further separated into occupied and vacant units. From all occupied HHUs, a two-stage stratified random sampling technique was used in selecting a sample from all occupied HHUs for the

2009 CNMI BRFSS Survey. Island was the first strata and Village Group was the second strata for selecting households for the Sample.

A total of 1,413 housing units were selected from Saipan. In addition, five additional housing units were randomly selected from each of the AAs in the BRFSS Sample and used as substitutes for situations where a housing unit was no longer occupied, demolished, converted into a business establishment, a householder refused to complete the survey, or for other reasons. This substitution was done to ensure that enough household data from throughout Saipan was collected to adequately describe the population of Saipan's health characteristics.

Table 1. The Total Number of Household Housing Units in the CNMI in 2005, the Number of Households Selected for the 2009 BRFSS Sample, and the Number of Households Actually Survey

Island and Village Group	Total Number of Occupied Household Housing Units in the CNMI in 2005	Household Housing Units Selected for the 2009 BRFSS		The Actual Number of Households Surveyed		Actual Sample as a Percentage of Total Occupied Household Units
		Total Number of Units	Percentage of Total Occupied Households	Number of Units (or Forms) Completed	Response Rate (Percent Completed)	
Saipan	14,709	1,413	9.6%	1,179	83.4%	8.0%
As Matuis & Surrounding Areas	220	44	20.0%	32	72.7%	14.5%
San Roque Area	223	43	19.3%	31	72.1%	13.9%
Tanapag & Surrounding Areas	416	54	13.0%	45	83.3%	10.8%
Navy Hill & Puerto Rico	735	73	9.9%	62	84.9%	8.4%
Garapan & Surrounding Areas	2,867	186	6.5%	175	94.1%	6.1%
Chalan Kiya Area	891	88	9.9%	70	79.5%	7.9%
Susupe & Chalan Kanoa	1,687	151	9.0%	145	96.0%	8.6%
San Antonio Area	1,513	136	9.0%	91	66.9%	6.0%
Koblerville & Surrounding Areas	967	96	9.9%	76	79.2%	7.9%
Dandan & Surrounding Areas	824	82	10.0%	66	80.5%	8.0%
As Lito & Surrounding Areas	1,254	112	8.9%	102	91.1%	8.1%
San Vicente & Surrounding Areas	1,080	96	8.9%	84	87.5%	7.8%
Papago & Surrounding Areas	155	38	24.5%	31	81.6%	20.0%
Kagman & Surrounding Areas	1,104	99	9.0%	84	84.8%	7.6%
As Teo & Surrounding Areas	233	46	19.7%	38	82.6%	16.3%
Capitol Hill & Surrounding Areas	540	69	12.8%	47	68.1%	8.7%
Tinian	675	150	22.2%	132	88.0%	19.6%
Northern Tinian	2	2	100.0%	0	0.0%	0.0%
Marpo	165	30	18.2%	34	113.3%	20.6%
Carolinas	93	30	32.3%	23	76.7%	24.7%
San Jose	415	88	21.2%	75	85.2%	18.1%
Rota	703	150	21.3%	118	78.7%	16.8%
Sinapalo Surrounding Areas	41	30	73.2%	17	56.7%	41.5%
Songsong Surrounding Areas	8	8	100.0%	5	62.5%	62.5%
Songsong - Teneto	305	55	18.0%	47	85.5%	15.4%
Sinapalo	349	57	16.3%	49	86.0%	14.0%
CNMI Total	16,087	1,713	10.6%	1,429	83.4%	8.9%

Similarly for Tinian and Rota, stratification was done on the Village Group level. A total of 150 HHUs were randomly selected from occupied housing units from each of these two islands. See Table 1 for details.

[Technical Note: To perform the sampling, all occupied HHUs from the three islands were selected from the MS Access database Housing Register and exported into SPSS where random sampling was

performed. The records were sorted by Island, by Village Group, AA, Block, MS number; and then a random sample of units was drawn using the Island as the first strata and the Village Group as the second strata. In addition, five additional housing units were randomly drawn from each of the AAs in the BRFSS Sample and used as substitutes for situations where a selected housing unit in an AA could not be completed for reasons stated earlier. The sampled HHUs were exported back to MS Access where an application was developed to track the progress of the Survey's field work. The database application produced, on a daily basis, the number of questionnaires completed by enumerators, by AA, by Village Group, as well as other reports that made it possible and easier for the field supervisor to effectively manage the data collection effort. The field supervisor constantly looked at the flow of completed questionnaires from the field and assign/reassign field workers to make sure that adequate number of BRFSS questionnaire forms were completed from each of the strata when the field work ended.]

RANDOM SELECTION OF THE BRFSS RESPONDENTS

Within each household in the Sample, one person was randomly selected and became the BRFSS respondent. It was required that a BRFSS respondent be 18 years old or older. To be sure the respondent was selected at random and met the age requirement, the Survey enumerators listed all household members by age from oldest to the youngest on the inside cover of the questionnaire form. The enumerator then lined through the list to separate those who were 18 and above from those household members below 18 years of age. From the 18 and above, the enumerator used a table of random numbers to randomly select one person and interviewed that person for the BRFSS.

NUMBER OF HOUSEHOLDS SELECTED AND THE NUMBER OF RESPONDENTS INTERVIEWED

Of the 1,713 households selected for the 2009 BRFSS, 1,429 of them were completed, i.e., a BRFSS questionnaire form was completed for 1,429 households. This number includes those that were substituted. Because one person was randomly selected from each household to answer the BRFSS, the number of individual respondents is the same as the number of households in the Survey. For details on the number of households selected versus the actual number households interviewed in the BRFSS, see Table 1.

THE DATA COLLECTION

The Means of Respondents Contacts

The primary means of collecting the data from each of the selected households in the BRFSS Sample was through a personal visit and interview of members of the selected households. Survey enumerators were hired and trained to locate each of the randomly selected housing units, conduct a personal interview, and complete a BRFSS questionnaire. In cases where follow-up was necessary, the telephone was also used to complete the questionnaires to minimize the cost and speed-up the follow-up process to complete the forms. In all cases the first contact with each household was a personal visit; most questionnaires were completed this way, but telephone follow-up was also commonly used to complete or verify pieces of information. In situations where an HHU had become vacant, converted into a business, or demolished since the universe was updated in 2005, another HHU was used as a substitute. The substitute HHU was randomly selected from the AAs in the Sample, as described above. Substitution was also done when a householder refused to answer the survey or was off-island and did not return in time for the survey enumerator to complete a form for that particular HHU.

The 2009 BRFSS is the most recent of the many similar surveys conducted by the Central Statistics Office since the 1990s. Hence, over time, the CSD has institutionalized the process of collecting field data for surveys of this type and has references on training, data collection, coding, and keying survey data for

processing available in-house. Many of these procedures were developed with assistance from the US Census Bureau or from materials and references from the Bureau.

Field Work Supervision

One person was responsible for overseeing the Survey field work and the office work of the 2009 BRFSS Survey. He was assisted by two office assistants. One office assistant, a permanent staff at CSD, was primarily responsible for entering, updating data into the tracking system in MS Access, and producing reports to track the field work. He also assisted in making sure the forms were in their proper order at the various stages--from the field to the office to coding to keying--until the completion of the project. One temporary-hired person, a college student on a semester break, was hired to work closely with the CSD staff on office related work supporting the field data collection effort. Initially, she worked with the CSD staff and eventually took over the day to day duties and responsibilities of supporting the data collection efforts, data entry efforts, validating, and cleaning up the keyed Survey data. Two persons were hired and trained to code and enter the Survey data into a database in MS Access.

To complete the data collection, the CSD hired 30 temporary field enumerators for the 2009 BRFSS field work. Wil Maui, assisted by CSD staff, trained the field workers in Saipan on how to complete the questionnaire and how to use the Housing Register and Housing Maps to find the randomly selected HHUs and complete a Survey forms. For Tinian and Rota, the CSD staff conducted the field enumerators training with the same training method and materials used in Saipan.

Each enumerator was paid according to the number of completed questionnaires. One completed questionnaire was paid at the rate of \$15.00 per completed form. To be considered for payment, a questionnaire must pass a review process. Three persons, the supervisor and the two assistants were responsible for reviewing questionnaires coming from the field for completeness and approval for pay. The survey enumerators were paid every two-week period.

During the first day of the field work, each enumerator was sent out to his/her assignment area (AA) and completed only one questionnaire from one HHU and brought it back to the CSD Office for review. In instances where an enumerator was having difficulty finding the randomly selected housing unit, using the Register and the Maps, a field assistant person took that worker out, assisted, and showed the worker how to find the right HHU. In addition to CSD staff, two of the long-time enumerators who helped created the Housing Register and Maps were available to assist in this task during the first week of the Survey period. During the first week of the Survey, the field supervisor and the review staff closely reviewed each enumerator's forms to catch errors. Forms with errors were tagged appropriately and rejected back to the field enumerator who had to correct his/her own errors. The enumerator had to revisit the house, make a telephone call, or do whatever was necessary to correct and completed all errors. During the first week of the field enumeration, field work was deliberately slowed down to be sure that forms were being completed properly and completely. After the first week, the good enumerators were encouraged to increase their production, while the ones that had problematic forms were assisted again on how to complete the Survey form properly. During the first few weeks, some of the field enumerators quit their jobs or became inactive. The strategy that CSD employed—which it has learned over the years—was to quickly identify those good field workers and encourage them to produce, assisted those that needed help to become better, and let go of those who chose to become inactive.

The above approach was to make sure that the forms coming from the field were accurate and complete, as much as possible. Once the good field enumerators were known, the field supervisor

assigned them to AAs that have not been visited and also assigned them to complete the AAs that were initially started by an enumerator who was released or became inactive. The objective was to get enough sampled HHUs completed from each stratum, during the survey period, and stay within the Survey budget. Two field enumerators from Saipan were sent to both Tinian and Rota to help speed-up and complete the field work in these two islands.

DATA PROCESSING

Each completed Survey questionnaire was reviewed by CSD office staff for completeness before approval for pay. Each completed form was coded properly and then keyed into the computer by trained office staff. The data was keyed into a Microsoft Access database. After all forms were entered into the database, the keyed data were validated against the original Survey forms. To validate the keyed data, frequencies and descriptive statistics were produced for each of the variables in the survey; then, each value that did not match to the domain of a variable defined in the data dictionary was verified against the original questionnaire form and the appropriate corrections were done. Similarly, outliers were check, validated, and corrected appropriately. The resulting clean dataset for the Survey was exported from MS Access into SPSS (Statistical Package for the Social Sciences) where summary statistics for each variable was produced which are shown in the many tables under the Survey Results of this report.

III. THE SURVEY RESULTS

SUMMARY STATISTICS

This section of the report shows the summary statistics on each of the variables in the CNMI 2009 BRFSS. The summary statistics consist of frequencies or descriptive statistics or, in some cases, both for each of the variables. Some of the variables were transformed into class intervals, from their original forms, before frequencies were produced. The summary statistics for each of the variables are for the CNMI as a whole. No further analysis was conducted. Further analysis is left to the appropriate health experts to pursue.

ORGANIZATION OF THE SUMMARY STATISTICS

The order in which the variables appear in this section of the report follows the order in which the variables appear in the Survey Questionnaire. Also, the summary for each of the health-related variables is given a table number and a title description that's almost, if not, identical to the associated question number and wording in the Survey form. The reason for this parallel is for ease in cross referencing between the questionnaire and the summary items. The summary statistics are grouped into two parts. Part I shows the summary statistics on the household level while Part II shows the summary statistics on the individual respondent level.

Survey Results: Part I

Summary Statistics for the Survey Households

This part of the Survey Results contains the summary statistics for variables that describe the households selected for the 2009 BRFSS Survey. For details on each of the variables in this part, please refer to the outside and the inside of the Survey questionnaire cover page.

Table HH.1 Sample Household Persons by Island

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Saipan	4034	82.9	82.9	82.9
	Tinian	431	8.9	8.9	91.7
	Rota	402	8.3	8.3	100.0
	Total	4867	100.0	100.0	

Table HH.2 Sample Household Persons by Election Districts

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	ED 1 Saipan	1240	25.5	25.5	25.5
	ED 2 Saipan	545	11.2	11.2	36.7
	ED 3 Saipan	1069	22.0	22.0	58.6
	ED 4 Saipan	562	11.5	11.5	70.2
	ED 5 Saipan	604	12.4	12.4	82.6
	ED 6 Tinian	439	9.0	9.0	91.6
	ED 7 Rota	408	8.4	8.4	100.0
	Total	4867	100.0	100.0	

Table HH.3a Sample Household Persons by Village Group

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid As Matus & Surrounding Areas	119	2.4	2.4	2.4
San Roque Area	115	2.4	2.4	4.8
Tanapag & Surrounding Areas	183	3.8	3.8	8.6
Navy Hill & Puerto Rico	187	3.8	3.8	12.4
Garapan & Surrounding Areas	517	10.6	10.6	23.0
Chalan Kiya Area	262	5.4	5.4	28.4
Susupe & Chalan Kanoa	472	9.7	9.7	38.1
San Antonio Area	300	6.2	6.2	44.3
Koblerville & Surrounding Areas	289	5.9	5.9	50.2
Dandan & Surrounding Areas	307	6.3	6.3	56.5
As Lito & Surrounding Areas	339	7.0	7.0	63.5
San Vicente & Surrounding Areas	271	5.6	5.6	69.1
Papago & Surrounding Areas	78	1.6	1.6	70.7
Kagman & Surrounding Areas	326	6.7	6.7	77.4
As Teo & Surrounding Areas	126	2.6	2.6	79.9
Capitol Hill & Surrounding Areas	143	2.9	2.9	82.9
Tinian Island	431	8.9	8.9	91.7
Rota Island	402	8.3	8.3	100.0
Total	4867	100.0	100.0	

Table HH.3b Sample Household Persons by Individual Village

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Achugao	4	.1	.1	.1
	Afetnas	88	1.8	1.8	1.9
	Agingan	18	.4	.4	2.3
	As Akina	4	.1	.1	2.3
	As Falipe	6	.1	.1	2.5
	As Gonna	8	.2	.2	2.6
	As Lito	94	1.9	1.9	4.6
	As Mahetog	23	.5	.5	5.0
	As Matuis	99	2.0	2.0	7.1
	As Palacios	33	.7	.7	7.7
	As Perdido	7	.1	.1	7.9
	As Rapagau	71	1.5	1.5	9.3
	As Teo	75	1.5	1.5	10.9
	As Terlaje	15	.3	.3	11.2
	Capitol Hill	96	2.0	2.0	13.2
	Chacha	3	.1	.1	13.2
	Chalan Galaide	34	.7	.7	13.9
	Chalan Kanoa 1	92	1.9	1.9	15.8
	Chalan Kanoa 2	70	1.4	1.4	17.3
	Chalan Kanoa 3	76	1.6	1.6	18.8
	Chalan Kanoa 4	51	1.0	1.0	19.9
	Chalan Kiya	70	1.4	1.4	21.3
	Chalan Laulau	100	2.1	2.1	23.4
	Chalan Piao	111	2.3	2.3	25.6
	Chalan Rueda	36	.7	.7	26.4
	China Town	80	1.6	1.6	28.0
	Dagu	64	1.3	1.3	29.3
	Dandan	307	6.3	6.3	35.6

Table HH.3b Sample Household Persons by Individual Village (Continued)

Finasisu	181	3.7	3.7	39.4
Garapan	216	4.4	4.4	43.8
Gualo Rai	92	1.9	1.9	45.7
I Akgak	43	.9	.9	46.6
I Denni	24	.5	.5	47.1
I Liyang	60	1.2	1.2	48.3
I Pitot	4	.1	.1	48.4
Kagman I	33	.7	.7	49.1
Kagman II	54	1.1	1.1	50.2
Kagman III	192	3.9	3.9	54.1
Kagman IV	26	.5	.5	54.7
Kannat Tabla	63	1.3	1.3	55.9
Koblerville	224	4.6	4.6	60.6
Laulau Bay	11	.2	.2	60.8
Marpi	10	.2	.2	61.0
Matansa	3	.1	.1	61.0
Maturana Hill	12	.2	.2	61.3
Navy Hill	35	.7	.7	62.0
Papago	85	1.7	1.7	63.8
Sabaneta	32	.7	.7	64.4
Sadog Tasi	10	.2	.2	64.6
San Antonio	90	1.8	1.8	66.5
San Jose	90	1.8	1.8	68.3
San Roque	115	2.4	2.4	70.7
San Vicente	188	3.9	3.9	74.5
Susupe	172	3.5	3.5	78.1
Talafofo	2	.0	.0	78.1
Tanapag	128	2.6	2.6	80.7

Table HH.3b Sample Household Persons by Individual Village (continued)

Tapochao	25	.5	.5	81.3
Fananganan	47	1.0	1.0	82.2
Kagman	8	.2	.2	82.4
Nanasu	7	.1	.1	82.5
Tottotville	21	.4	.4	83.0
Marpo Heights	103	2.1	2.1	85.1
San Jose	222	4.6	4.6	89.6
Marpo Valley	16	.3	.3	90.0
Carolina Heights	85	1.7	1.7	91.7
Carolinas	5	.1	.1	91.8
Songsong	71	1.5	1.5	93.3
Sinapalo	185	3.8	3.8	97.1
Tatachok	2	.0	.0	97.1
Tenetu	40	.8	.8	97.9
Annex F	5	.1	.1	98.0
Tatgua	7	.1	.1	98.2
As Niebes	1	.0	.0	98.2
I Chenchon	20	.4	.4	98.6
Ginalangan	26	.5	.5	99.2
Taimama	10	.2	.2	99.4
Matpo	25	.5	.5	99.9
Lempanai	5	.1	.1	100.0
Gagani	1	.0	.0	100.0
Total	4867	100.0	100.0	

Table HH.4 Sample Household Persons by Age Group

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	5 yrs or younger	512	10.5	10.6	10.6
	6 to 10 years old	476	9.8	9.8	20.4
	11 to 15 years old	466	9.6	9.6	30.1
	16 to 20 years old	413	8.5	8.5	38.6
	21 to 25 years old	234	4.8	4.8	43.4
	26 to 30 years old	273	5.6	5.6	49.1
	31 to 35 years old	329	6.8	6.8	55.9
	36 to 40 years old	445	9.1	9.2	65.1
	40 to 45 years old	451	9.3	9.3	74.4
	46 to 50 years old	419	8.6	8.7	83.1
	51 to 55 years old	334	6.9	6.9	90.0
	56 to 60 years old	208	4.3	4.3	94.3
	61 to 65 years old	156	3.2	3.2	97.5
	66 to 70 years old	75	1.5	1.6	99.0
	70 to 75 years old	47	1.0	1.0	100.0
	Total	4838	99.4	100.0	
Missing	Refused	29	.6		
Total		4867	100.0		

Age Descriptive Statistics

	N	Minimum	Maximum	Mean	Std. Deviation
Age	4838	0	94	30.51	19.509

Table HH.5 Sample Household Persons by Gender

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Male	2503	51.4	51.4	51.4
	Female	2364	48.6	48.6	100.0
	Total	4867	100.0	100.0	

Table HH.6 Sample Household Persons by Weight Group

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	25 lbs or less	166	3.4	3.5	3.5
	26 to 50 lbs	378	7.8	7.9	11.4
	50 to 75 lbs	250	5.1	5.2	16.7
	76 to 100 lbs	381	7.8	8.0	24.7
	101 to 125 lbs	791	16.3	16.6	41.3
	126 to 150 lbs	1123	23.1	23.6	64.9
	151 to 175 lbs	684	14.1	14.4	79.2
	176 to 200 lbs	604	12.4	12.7	91.9
	201 to 250 lbs	309	6.3	6.5	98.4
	251 to 300 lbs	64	1.3	1.3	99.7
	Over 300 lbs	13	.3	.3	100.0
	Total	4763	97.9	100.0	
Missing	Don't know/Not sure	91	1.9		
	Refused	13	.3		
	Total	104	2.1		
Total		4867	100.0		

Weight Descriptive Statistics

	N	Minimum	Maximum	Mean	Std. Deviation
Weight	4763	7	420	132.82	55.533

Survey Results: Part II

Summary Statistics for the Survey Respondents

This part of the Survey Results contains the summary statistics for variables that describe the individual respondents randomly selected for the 2009 BRFSS Survey. For detail on each of these variables, please refer to the Survey questionnaire attached as an Appendix B.

Table R.1 Respondents by Island

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Saipan	1179	82.5	82.5	82.5
	Tinian	132	9.2	9.2	91.7
	Rota	118	8.3	8.3	100.0
	Total	1429	100.0	100.0	

Table R.2 Respondent Election District

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	ED 1 Saipan	332	23.2	23.2	23.2
	ED 2 Saipan	163	11.4	11.4	34.6
	ED 3 Saipan	346	24.2	24.2	58.9
	ED 4 Saipan	159	11.1	11.1	70.0
	ED 5 Saipan	174	12.2	12.2	82.2
	ED 6 Tinian	135	9.4	9.4	91.6
	ED 7 Rota	120	8.4	8.4	100.0
	Total	1429	100.0	100.0	

Table R.3a Respondents by Village Group

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid As Matus & Surrounding Areas	32	2.2	2.2	2.2
San Roque Area	31	2.2	2.2	4.4
Tanapag & Surrounding Areas	45	3.1	3.1	7.6
Navy Hill & Puerto Rico	62	4.3	4.3	11.9
Garapan & Surrounding Areas	175	12.2	12.2	24.1
Chalan Kiya Area	70	4.9	4.9	29.0
Susupe & Chalan Kanoa	145	10.1	10.1	39.2
San Antonio Area	91	6.4	6.4	45.6
Koblerville & Surrounding Areas	68	4.8	4.8	50.3
Dandan & Surrounding Areas	66	4.6	4.6	54.9
As Lito & Surrounding Areas	102	7.1	7.1	62.1
San Vicente & Surrounding Areas	84	5.9	5.9	67.9
Papago & Surrounding Areas	26	1.8	1.8	69.8
Kagman & Surrounding Areas	84	5.9	5.9	75.6
As Teo & Surrounding Areas	43	3.0	3.0	78.7
Capitol Hill & Surrounding Areas	55	3.8	3.8	82.5
Tinian Island	132	9.2	9.2	91.7
Rota Island	118	8.3	8.3	100.0
Total	1429	100.0	100.0	

Table R.3b Respondent by Individual Village

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Achugao	1	.1	.1	.1
	Afetnas	27	1.9	1.9	2.0
	Agingan	6	.4	.4	2.4
	As Akina	1	.1	.1	2.4
	As Falipe	2	.1	.1	2.6
	As Gonna	2	.1	.1	2.7
	As Lito	24	1.7	1.7	4.4
	As Mahetog	6	.4	.4	4.8
	As Matuis	23	1.6	1.6	6.4
	As Palacios	12	.8	.8	7.3
	As Perdido	2	.1	.1	7.4
	As Rapagau	25	1.7	1.7	9.2
	As Teo	24	1.7	1.7	10.8
	As Terlaje	5	.3	.3	11.2
	Capitol Hill	41	2.9	2.9	14.1
	Chacha	1	.1	.1	14.1
	Chalan Galaide	8	.6	.6	14.7
	Chalan Kanoa 1	28	2.0	2.0	16.7
	Chalan Kanoa 2	20	1.4	1.4	18.1
	Chalan Kanoa 3	25	1.7	1.7	19.8
	Chalan Kanoa 4	14	1.0	1.0	20.8
	Chalan Kiya	19	1.3	1.3	22.1
	Chalan Laulau	22	1.5	1.5	23.7
	Chalan Piao	33	2.3	2.3	26.0
	Chalan Rueda	9	.6	.6	26.6
	China Town	26	1.8	1.8	28.4
	Dagu	25	1.7	1.7	30.2
	Dandan	66	4.6	4.6	34.8

Table R.3b Respondent by Individual Village (continue)				
	Frequency	Percent	Valid Percent	Cumulative Percent
Finasisu	53	3.7	3.7	38.5
Garapan	83	5.8	5.8	44.3
Gualo Rai	29	2.0	2.0	46.3
I Akgak	16	1.1	1.1	47.4
I Denni	7	.5	.5	47.9
I Liyang	18	1.3	1.3	49.2
I Pitot	3	.2	.2	49.4
Kagman I	8	.6	.6	50.0
Kagman II	13	.9	.9	50.9
Kagman III	50	3.5	3.5	54.4
Kagman IV	6	.4	.4	54.8
Kannat Tabla	14	1.0	1.0	55.8
Koblerville	49	3.4	3.4	59.2
Laulau Bay	4	.3	.3	59.5
Marpi	3	.2	.2	59.7
Matansa	3	.2	.2	59.9
Maturana Hill	4	.3	.3	60.2
Navy Hill	11	.8	.8	61.0
Papago	27	1.9	1.9	62.8
Sabaneta	9	.6	.6	63.5
Sadog Tasi	3	.2	.2	63.7
San Antonio	30	2.1	2.1	65.8
San Jose	29	2.0	2.0	67.8
San Roque	31	2.2	2.2	70.0
San Vicente	63	4.4	4.4	74.4
Susupe	55	3.8	3.8	78.2

Table R.3b Respondent by Individual Village (continue)

	Frequency	Percent	Valid Percent	Cumulative Percent
Talafofo	1	.1	.1	78.3
Tanapag	30	2.1	2.1	80.4
Tapochao	8	.6	.6	81.0
Fananganan	12	.8	.8	81.8
Kagman	4	.3	.3	82.1
Nanasu	3	.2	.2	82.3
Tottotville	4	.3	.3	82.6
Marpo Heights	33	2.3	2.3	84.9
San Jose	71	5.0	5.0	89.9
Marpo Valley	5	.3	.3	90.2
Carolina Heights	21	1.5	1.5	91.7
Carolinas	2	.1	.1	91.8
Songsong	26	1.8	1.8	93.6
Sinapalo	49	3.4	3.4	97.1
Tatachok	1	.1	.1	97.1
Tenetu	12	.8	.8	98.0
Annex F	1	.1	.1	98.0
Tatgua	3	.2	.2	98.3
As Niebes	1	.1	.1	98.3
I Chenchon	4	.3	.3	98.6
Ginalangan	8	.6	.6	99.2
Taimama	3	.2	.2	99.4
Matpo	6	.4	.4	99.8
Lempanai	2	.1	.1	99.9
Gagani	1	.1	.1	100.0
Total	1429	100.0	100.0	

Table R.4 Respondent Household Population

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid 1	264	18.5	18.5	18.5
2	300	21.0	21.0	39.5
3	259	18.1	18.1	57.6
4	250	17.5	17.5	75.1
5	164	11.5	11.5	86.6
6	80	5.6	5.6	92.2
7	52	3.6	3.6	95.8
8	24	1.7	1.7	97.5
9	12	.8	.8	98.3
10	12	.8	.8	99.2
11	6	.4	.4	99.6
12	4	.3	.3	99.9
13	1	.1	.1	99.9
15	1	.1	.1	100.0
Total	1429	100.0	100.0	

Descriptive Statistics

	N	Minimum	Maximum	Mean	Std. Deviation
Household Population	1429	1	15	3.41	2.075

Sec 1.1 Would you say that in general your health is

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Excellent	198	13.9	13.9	13.9
Very good	336	23.5	23.6	37.5
Good	667	46.7	46.8	84.3
Fair	184	12.9	12.9	97.2
Poor	40	2.8	2.8	100.0
Total	1425	99.7	100.0	
Missing Don't know/Not sure	4	.3		
Total	1429	100.0		

Sec 2.1 How many days during the past 30 days was your physical health not good?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1	11	.8	.8	.8
	2	38	2.7	2.7	3.5
	3	25	1.7	1.8	5.3
	4	13	.9	.9	6.2
	5	11	.8	.8	7.0
	6	3	.2	.2	7.2
	7	31	2.2	2.2	9.5
	8	1	.1	.1	9.5
	10	4	.3	.3	9.8
	11	1	.1	.1	9.9
	12	3	.2	.2	10.1
	13	1	.1	.1	10.2
	14	19	1.3	1.4	11.5
	15	5	.3	.4	11.9
	20	1	.1	.1	12.0
	21	3	.2	.2	12.2
	23	1	.1	.1	12.2
	27	1	.1	.1	12.3
	30	38	2.7	2.7	15.0
	None	1186	83.0	85.0	100.0
	Total	1396	97.7	100.0	
Missing	Don't know/Not sure	30	2.1		
	Refused	3	.2		
	Total	33	2.3		
Total		1429	100.0		

Descriptive Statistics

	N	Minimum	Maximum	Mean	Std. Deviation
Sec 2.1 How many days during the past 30 days was your physical health not good?	210	1	30	10.60	10.287

Sec 2.2 How many days during the past 30 days was your mental health not good?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1	14	1.0	1.0	1.0
	2	27	1.9	1.9	3.0
	3	14	1.0	1.0	4.0
	4	4	.3	.3	4.3
	5	17	1.2	1.2	5.5
	6	2	.1	.1	5.6
	7	27	1.9	1.9	7.6
	8	1	.1	.1	7.7
	9	2	.1	.1	7.8
	10	16	1.1	1.2	9.0
	12	1	.1	.1	9.0
	14	7	.5	.5	9.5
	15	7	.5	.5	10.0
	16	1	.1	.1	10.1
	18	1	.1	.1	10.2
	20	2	.1	.1	10.3
	21	1	.1	.1	10.4
	25	2	.1	.1	10.5
	30	31	2.2	2.2	12.8
	None	1208	84.5	87.2	100.0
	Total	1385	96.9	100.0	
Missing	Don't know/not sure	39	2.7		
	Refused	5	.3		
	Total	44	3.1		
Total		1429	100.0		

Descriptive Statistics

	N	Minimum	Maximum	Mean	Std. Deviation
Sec 2.2 How many days during the past 30 days was your mental health not good?	177	1	30	10.67	10.080

Sec 2.3 How many days did poor physical or mental health keep you from doing your usual activities, such as self-care, work, or recreation?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1	15	1.0	4.6	4.6
	2	15	1.0	4.6	9.1
	3	13	.9	4.0	13.1
	4	5	.3	1.5	14.6
	5	9	.6	2.7	17.4
	6	1	.1	.3	17.7
	7	17	1.2	5.2	22.9
	8	3	.2	.9	23.8
	9	1	.1	.3	24.1
	10	4	.3	1.2	25.3
	14	5	.3	1.5	26.8
	15	3	.2	.9	27.7
	17	1	.1	.3	28.0
	20	2	.1	.6	28.7
	21	2	.1	.6	29.3
	25	1	.1	.3	29.6
	30	25	1.7	7.6	37.2
	None	206	14.4	62.8	100.0
	Total	328	23.0	100.0	
Missing	Don't know/Not sure	20	1.4		
	Refused	1	.1		
	System	1080	75.6		
	Total	1101	77.0		
Total		1429	100.0		

Descriptive Statistics

	N	Minimum	Maximum	Mean	Std. Deviation
Sec 2.3 How many days did poor physical or mental health keep you from doing your usual activities, such as self-care, work, or recreation?	122	1	30	10.95	10.818

Sec 3.1 Do you have any kind of health care coverage, including health insurance, prepaid plans such as HMOs, or government plans such as Medicare?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	860	60.2	61.1	61.1
	No	547	38.3	38.9	100.0
	Total	1407	98.5	100.0	
Missing	Don't know/Not sure	19	1.3		
	Refused	3	.2		
	Total	22	1.5		
Total		1429	100.0		

Sec 3.2 Do you have one person you think of as your personal doctor or health care provider?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes, only one	328	23.0	23.3	23.3
	More than one	208	14.6	14.8	38.1
	No	872	61.0	61.9	100.0
	Total	1408	98.5	100.0	
Missing	Don't know/Not sure	17	1.2		
	Refused	4	.3		
	Total	21	1.5		
Total		1429	100.0		

Sec 3.3 Was there a time in the past 12 months when you needed to see a doctor but could not because of cost?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	244	17.1	17.2	17.2
	No	1174	82.2	82.8	100.0
	Total	1418	99.2	100.0	
Missing	Don't know/Not sure	8	.6		
	Refused	3	.2		
	Total	11	.8		
Total		1429	100.0		

Sec 3.4 About how long has it been since you last visited a doctor for a routine checkup?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Within the past year	821	57.5	59.5	59.5
	Within the past two years	229	16.0	16.6	76.1
	Within the past 5 years	117	8.2	8.5	84.6
	5 or more years ago	124	8.7	9.0	93.6
	Never	88	6.2	6.4	100.0
	Total	1379	96.5	100.0	
Missing	Don't know/Not sure	47	3.3		
	Refused	3	.2		
	Total	50	3.5		
Total		1429	100.0		

Sec 4.1 During the past 30 days, for about how many days have you felt you did not get enough rest?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1	19	1.3	1.4	1.4
	2	76	5.3	5.5	6.9
	3	35	2.4	2.6	9.5
	4	24	1.7	1.7	11.2
	5	25	1.7	1.8	13.0
	6	6	.4	.4	13.5
	7	23	1.6	1.7	15.2
	8	13	.9	.9	16.1
	9	1	.1	.1	16.2
	10	20	1.4	1.5	17.6
	11	1	.1	.1	17.7
	12	5	.3	.4	18.1
	14	14	1.0	1.0	19.1
	15	14	1.0	1.0	20.1
	16	1	.1	.1	20.2
	20	14	1.0	1.0	21.2
	21	3	.2	.2	21.4
	22	1	.1	.1	21.5
	25	3	.2	.2	21.7
	26	2	.1	.1	21.9
	29	1	.1	.1	21.9
	30	72	5.0	5.2	27.2
	None	999	69.9	72.8	100.0
	Total	1372	96.0	100.0	
Missing	Don't know/Not sure	54	3.8		
	Refused	3	.2		
	Total	57	4.0		
Total		1429	100.0		

Descriptive Statistics

	N	Minimum	Maximum	Mean	Std. Deviation
Sec 4.1 During the past 30 days, for about how many days have you felt you did not get enough rest?	373	1	30	11.21	10.664

Sec 5.1 During the past month, other than your regular job, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise?

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Yes	1002	70.1	70.6	70.6
No	417	29.2	29.4	100.0
Total	1419	99.3	100.0	
Missing Don't know/Not sure	7	.5		
Refused	1	.1		
System	2	.1		
Total	10	.7		
Total	1429	100.0		

Sec 6.1 Have you ever been told by a doctor that you have diabetes?

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Yes	140	9.8	9.9	9.9
Yes, but female told only during pregnancy	25	1.7	1.8	11.6
No	1243	87.0	87.6	99.2
No, pre diabetes or borderline diabetes	11	.8	.8	100.0
Total	1419	99.3	100.0	
Missing Don't know/Not Sure	8	.6		
Refused	2	.1		
Total	10	.7		
Total	1429	100.0		

Mod 1.1 Have you had a test for high blood sugar or diabetes within the past three years?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	586	41.0	45.8	45.8
	No	693	48.5	54.2	100.0
	Total	1279	89.5	100.0	
Missing	Don't know/Not sure	8	.6		
	Refused	2	.1		
	System	140	9.8		
	Total	150	10.5		
Total		1429	100.0		

Mod 1.2 Have you ever been told by a doctor or other health professional that you have pre-diabetes or borderline diabetes?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	23	1.6	1.8	1.8
	Yes during pregnancy	33	2.3	2.5	4.3
	No	1242	86.9	95.7	100.0
	Total	1298	90.8	100.0	
Missing	Don't know/Not sure	9	.6		
	Refused	2	.1		
	System	120	8.4		
	Total	131	9.2		
Total		1429	100.0		

Mod 2.1 How old were you when you were told you have diabetes? (Transformed into 5-year age group)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	5 yrs or younger	1	.1	.8	.8
	11 to 15 years old	2	.1	1.5	2.3
	16 to 20 years old	6	.4	4.5	6.8
	21 to 25 years old	12	.8	9.1	15.9
	26 to 30 years old	4	.3	3.0	18.9
	31 to 35 years old	6	.4	4.5	23.5
	36 to 40 years old	22	1.5	16.7	40.2
	40 to 45 years old	19	1.3	14.4	54.5
	46 to 50 years old	16	1.1	12.1	66.7
	51 to 55 years old	21	1.5	15.9	82.6
	56 to 60 years old	12	.8	9.1	91.7
	61 to 65 years old	6	.4	4.5	96.2
	66 to 70 years old	4	.3	3.0	99.2
	70 to 75 years old	1	.1	.8	100.0
	Total	132	9.2	100.0	
Missing	Don't know/Not sure	8	.6		
	System	1289	90.2		
	Total	1297	90.8		
Total		1429	100.0		

Descriptive Statistics

	N	Minimum	Maximum	Mean	Std. Deviation
Mod 2.1 How old were you when you were told you have diabetes?	132	3	75	43.30	13.922

Mod 2.2 Are you now taking insulin?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	31	2.2	22.3	22.3
	No	108	7.6	77.7	100.0
	Total	139	9.7	100.0	
Missing	Refused	1	.1		
	System	1289	90.2		
	Total	1290	90.3		
Total		1429	100.0		

Mod 2.3 About how often do you check blood for glucose or sugar?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 time per day	14	1.0	10.8	10.8
	2 times per day	12	.8	9.2	20.0
	3 times per day	4	.3	3.1	23.1
	1 time per week	16	1.1	12.3	35.4
	2 times per week	7	.5	5.4	40.8
	3 times per week	9	.6	6.9	47.7
	1 time per month	18	1.3	13.8	61.5
	2 times per month	6	.4	4.6	66.2
	3 times per month	6	.4	4.6	70.8
	1 time per year	2	.1	1.5	72.3
	2 times per year	5	.3	3.8	76.2
	3 times per year	2	.1	1.5	77.7
	4 times per year	1	.1	.8	78.5
	10 times per year	1	.1	.8	79.2
	Never	27	1.9	20.8	100.0
	Total	130	9.1	100.0	
Missing	Don't know/not sure	8	.6		
	Refused	2	.1		
	System	1289	90.2		
	Total	1299	90.9		
Total		1429	100.0		

Mod 2.4 About how often do you check your feet for any sores or irritations?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 time per day	40	2.8	30.3	30.3
	2 times per day	8	.6	6.1	36.4
	3 times per day	6	.4	4.5	40.9
	5 times per day	1	.1	.8	41.7
	7 times per day	8	.6	6.1	47.7
	1 time per week	10	.7	7.6	55.3
	2 times per week	2	.1	1.5	56.8
	3 times per week	3	.2	2.3	59.1
	7 times per week	4	.3	3.0	62.1
	1 time per month	8	.6	6.1	68.2
	2 times per month	3	.2	2.3	70.5
	1 time per year	1	.1	.8	71.2
	Never	38	2.7	28.8	100.0
	Total	132	9.2	100.0	
Missing	Don't know/not sure	6	.4		
	Refused	2	.1		
	System	1289	90.2		
	Total	1297	90.8		
Total		1429	100.0		

Mod 2.5 About how many times in the past 12 months have you seen a doctor, nurse, or other health professional for your diabetes?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1	25	1.7	19.4	19.4
	2	20	1.4	15.5	34.9
	3	17	1.2	13.2	48.1
	4	15	1.0	11.6	59.7
	5	4	.3	3.1	62.8
	6	3	.2	2.3	65.1
	7	1	.1	.8	65.9
	8	2	.1	1.6	67.4
	10	2	.1	1.6	69.0
	12	6	.4	4.7	73.6
	13	1	.1	.8	74.4
	16	1	.1	.8	75.2
	24	2	.1	1.6	76.7
	40	1	.1	.8	77.5
	42	1	.1	.8	78.3
	50	1	.1	.8	79.1
	60	1	.1	.8	79.8
	62	1	.1	.8	80.6
	76	1	.1	.8	81.4
	None	24	1.7	18.6	100.0
	Total	129	9.0	100.0	
Missing	Don't know/not sure	9	.6		
	Refused	2	.1		
	System	1289	90.2		
	Total	1300	91.0		
Total		1429	100.0		

Descriptive Statistics

	N	Minimum	Maximum	Mean	Std. Deviation
Mod 2.5 About how many times in the past 12 months have you seen a doctor, nurse, or other health professional for your diabetes?	105	1	76	7.01	12.953

Mod 2.6 About how many time in the past 12 months has a doctor, nurse, or other health professional checked you for "A one C"?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1	21	1.5	18.9	18.9
	2	10	.7	9.0	27.9
	3	7	.5	6.3	34.2
	4	8	.6	7.2	41.4
	12	1	.1	.9	42.3
	16	1	.1	.9	43.2
	20	1	.1	.9	44.1
	24	1	.1	.9	45.0
	25	1	.1	.9	45.9
	40	1	.1	.9	46.8
	45	1	.1	.9	47.7
	68	1	.1	.9	48.6
	None	31	2.2	27.9	76.6
	Never heard of "A one C"	26	1.8	23.4	100.0
	Total	111	7.8	100.0	
Missing	Don't know/not sure	26	1.8		
	Refused	3	.2		
	System	1289	90.2		
	Total	1318	92.2		
Total		1429	100.0		

Descriptive Statistics

	N	Minimum	Maximum	Mean	Std. Deviation
Mod 2.6 About how many time in the past 12 months has a doctor, nurse, or other health professional checked you for "A one C"?	54	1	68	6.37	12.522

Mod 2.7 About how many times in the past 12 months has a health professional checked your feet for any sores or irritation?

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid 1	49	3.4	47.6	47.6
2	13	.9	12.6	60.2
3	33	2.3	32.0	92.2
4	4	.3	3.9	96.1
5	1	.1	1.0	97.1
12	1	.1	1.0	98.1
24	2	.1	1.9	100.0
Total	103	7.2	100.0	
Missing Don't know/not sure	7	.5		
None	29	2.0		
System	1290	90.3		
Total	1326	92.8		
Total	1429	100.0		

Descriptive Statistics

	N	Minimum	Maximum	Mean	Std. Deviation
Mod 2.7 About how many time in the past 12 months has a health professional checked your feet for any sores or irritation?	103	1	24	2.48	3.360

Mod 2.8 When was the last time you had an eye exam in which the pupils were dilated?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Within the past month	34	2.4	25.2	25.2
	Within the past year	48	3.4	35.6	60.7
	Within the past two years	11	.8	8.1	68.9
	2 or more years ago	21	1.5	15.6	84.4
	Never	21	1.5	15.6	100.0
	Total	135	9.4	100.0	
Missing	Don't know/Not sure	3	.2		
	Refused	2	.1		
	System	1289	90.2		
	Total	1294	90.6		
Total		1429	100.0		

Mod 2.9 Has a doctor ever told you that diabetes has affected your eyes or that you had retinopathy?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	78	5.5	56.5	56.5
	No	60	4.2	43.5	100.0
	Total	138	9.7	100.0	
Missing	Don't know/not sure	1	.1		
	System	1290	90.3		
	Total	1291	90.3		
Total		1429	100.0		

Mod 2.10 Have you ever taken a course or class in how to manage your diabetes yourself?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	32	2.2	23.0	23.0
	No	107	7.5	77.0	100.0
	Total	139	9.7	100.0	
Missing	Don't know/Not sure	1	.1		
	Refused	1	.1		
	System	1288	90.1		
	Total	1290	90.3		
Total		1429	100.0		

Sec 7.1 Have you ever been told by a doctor, nurse, or other health professional that you have high blood pressure?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	274	19.2	19.4	19.4
	Yes, but female told only during pregnancy	20	1.4	1.4	20.8
	No	1092	76.4	77.2	98.0
	No, pre diabetes or borderline diabetes	28	2.0	2.0	100.0
	Total	1414	99.0	100.0	
Missing	Don't know/Not Sure	13	.9		
	Refused	2	.1		
	Total	15	1.0		
Total		1429	100.0		

Sec 7.2 Are you currently taking medicine for your high blood pressure?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	171	12.0	63.1	63.1
	No	100	7.0	36.9	100.0
	Total	271	19.0	100.0	
Missing	System	1158	81.0		
Total		1429	100.0		

Mod 7.1 Are you changing you eating habits (to help lower or control you high blood pressure?)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	225	15.7	82.4	82.4
	No	48	3.4	17.6	100.0
	Total	273	19.1	100.0	
Missing	Don't know/Not sure	1	.1		
	System	1155	80.8		
	Total	1156	80.9		
Total		1429	100.0		

Mod 7.2 Are you cutting down on salt (to help lower or control you high blood pressure?)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	231	16.2	85.2	85.2
	No	31	2.2	11.4	96.7
	Do not use salt	9	.6	3.3	100.0
	Total	271	19.0	100.0	
Missing	Don't know/Not sure	3	.2		
	System	1155	80.8		
	Total	1158	81.0		
Total		1429	100.0		

Mod 7.3 Are you reducing alcohol use (to help lower or control you high blood pressure?)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	115	8.0	42.3	42.3
	No	31	2.2	11.4	53.7
	Do not drink	126	8.8	46.3	100.0
	Total	272	19.0	100.0	
Missing	Don't know/Not sure	2	.1		
	System	1155	80.8		
	Total	1157	81.0		
Total		1429	100.0		

Mod 7.4 Are you exercising (to help lower or control you high blood pressure?)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	227	15.9	83.5	83.5
	No	45	3.1	16.5	100.0
	Total	272	19.0	100.0	
Missing	Don't know/Not sure	1	.1		
	System	1156	80.9		
	Total	1157	81.0		
Total		1429	100.0		

Mod 7.5 Ever advised to change your eating habits (to help lower or control you high blood pressure?)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	226	15.8	83.4	83.4
	No	45	3.1	16.6	100.0
	Total	271	19.0	100.0	
Missing	Don't know/Not sure	2	.1		
	System	1156	80.9		
	Total	1158	81.0		
Total		1429	100.0		

Mod 7.6 Ever been advised to cut down on salt to help lower or control you high blood pressure?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	222	15.5	81.6	81.6
	No	46	3.2	16.9	98.5
	Do not use salt	4	.3	1.5	100.0
	Total	272	19.0	100.0	
Missing	Don't know/Not sure	1	.1		
	System	1156	80.9		
	Total	1157	81.0		
Total		1429	100.0		

Mod 7.7 Ever been advised to reduce alcohol use to help lower or control your high blood pressure?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	267	18.7	99.3	99.3
	No	1	.1	.4	99.6
	Do not drink	1	.1	.4	100.0
	Total	269	18.8	100.0	
Missing	System	1160	81.2		
Total		1429	100.0		

Mod 7.8 Ever been advised to exercise to help lower or control you high blood pressure?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	236	16.5	86.8	86.8
	No	36	2.5	13.2	100.0
	Total	272	19.0	100.0	
Missing	Don't know/Not sure	1	.1		
	System	1156	80.9		
	Total	1157	81.0		
Total		1429	100.0		

Mod 7.9 Ever been advised take medication to help lower or control you high blood pressure?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	208	14.6	76.5	76.5
	No	64	4.5	23.5	100.0
	Total	272	19.0	100.0	
Missing	Don't know/Not sure	1	.1		
	System	1156	80.9		
	Total	1157	81.0		
Total		1429	100.0		

Mod 7.10 Were you told on two or more different visits to a doctor or a health professional that you had high blood pressure?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	65	4.5	87.8	87.8
	No	9	.6	12.2	100.0
	Total	74	5.2	100.0	
Missing	Don't know/Not sure	3	.2		
	System	1352	94.6		
	Total	1355	94.8		
Total		1429	100.0		

Sec 8.1 Blood cholesterol is a fatty substance found in the blood. Have you EVER had your blood cholesterol checked?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	613	42.9	44.3	44.3
	No	771	54.0	55.7	100.0
	Total	1384	96.9	100.0	
Missing	Don't know/Not sure	43	3.0		
	Refused	2	.1		
	Total	45	3.1		
Total		1429	100.0		

Sec 8.2 About how long has it been since you last had your blood cholesterol checked?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Within the past year	444	31.1	73.9	73.9
	Within the past 2 years	92	6.4	15.3	89.2
	Within the past 5 years	41	2.9	6.8	96.0
	5 or more years ago	24	1.7	4.0	100.0
	Total	601	42.1	100.0	
Missing	Don't know/Not sure	9	.6		
	System	819	57.3		
	Total	828	57.9		
Total		1429	100.0		

Sec 8.3 Have you EVER been told by a doctor, nurse or other health professional that your blood cholesterol is high?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	178	12.5	29.0	29.0
	No	436	30.5	71.0	100.0
	Total	614	43.0	100.0	
Missing	Don't know/Not sure	10	.7		
	System	805	56.3		
	Total	815	57.0		
Total		1429	100.0		

Mod 8.1 Do you think pain or discomfort in the jaw, neck, or back are symptoms of a heart attack?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	586	41.0	51.8	51.8
	No	546	38.2	48.2	100.0
	Total	1132	79.2	100.0	
Missing	Don't know/Not sure	291	20.4		
	Refused	6	.4		
	Total	297	20.8		
Total		1429	100.0		

Mod 8.2 Do you think feeling weak, lightheaded, or faint are symptoms of a heart attack?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	645	45.1	56.1	56.1
	No	504	35.3	43.9	100.0
	Total	1149	80.4	100.0	
Missing	Don't know/Not sure	275	19.2		
	Refused	5	.3		
	Total	280	19.6		
Total		1429	100.0		

Mod 8.3 Do you think chest pain or discomfort are symptoms of a heart attack?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	848	59.3	67.7	67.7
	No	404	28.3	32.3	100.0
	Total	1252	87.6	100.0	
Missing	Don't know/Not sure	172	12.0		
	Refused	5	.3		
	Total	177	12.4		
Total		1429	100.0		

Mod 8.4 (Do you think) sudden trouble seeing in one or both eyes (is a symptom of a heart attack?)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	502	35.1	45.5	45.5
	No	602	42.1	54.5	100.0
	Total	1104	77.3	100.0	
Missing	Don't know/Not sure	320	22.4		
	Refused	5	.3		
	Total	325	22.7		
Total		1429	100.0		

Mod 8.5 (Do you think) pain or discomfort in the arms or shoulder (are symptoms of a heart attack?)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	651	45.6	55.1	55.1
	No	531	37.2	44.9	100.0
	Total	1182	82.7	100.0	
Missing	Don't know/Not sure	241	16.9		
	Refused	6	.4		
	Total	247	17.3		
Total		1429	100.0		

Mod 8.6 (Do you think) shortness of breath (is a symptom of a heart attack?)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	831	58.2	67.9	67.9
	No	393	27.5	32.1	100.0
	Total	1224	85.7	100.0	
Missing	Don't know/Not sure	198	13.9		
	Refused	7	.5		
	Total	205	14.3		
Total		1429	100.0		

Mod 8.7 (Do you think) sudden confusion or trouble speaking (are symptoms of a stroke?)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	833	58.3	69.2	69.2
	No	371	26.0	30.8	100.0
	Total	1204	84.3	100.0	
Missing	Don't know/Not sure	220	15.4		
	Refused	5	.3		
	Total	225	15.7		
Total		1429	100.0		

Mod 8.8 (Do you think) sudden numbness or weakness of face, arm, or leg, especially on one side, (are symptoms of a stroke?)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	961	67.2	75.7	75.7
	No	309	21.6	24.3	100.0
	Total	1270	88.9	100.0	
Missing	Don't know/Not sure	154	10.8		
	Refused	5	.3		
	Total	159	11.1		
Total		1429	100.0		

Mod 8.9 (Do you think) sudden trouble seeing in one or both eyes (is a symptom of a stroke?)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	632	44.2	55.9	55.9
	No	499	34.9	44.1	100.0
	Total	1131	79.1	100.0	
Missing	Don't know/Not sure	293	20.5		
	Refused	5	.3		
	Total	298	20.9		
Total		1429	100.0		

Mod 8.10 (Do you think) sudden chest pain or discomfort (are symptoms of a stroke?)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	769	53.8	65.6	65.6
	No	403	28.2	34.4	100.0
	Total	1172	82.0	100.0	
Missing	Don't know/Not sure	252	17.6		
	Refused	5	.3		
	Total	257	18.0		
Total		1429	100.0		

Mod 8.11 (Do you think) sudden trouble walking, dizziness, or loss of balance (are symptoms of a stroke?)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	836	58.5	69.4	69.4
	No	369	25.8	30.6	100.0
	Total	1205	84.3	100.0	
Missing	Don't know/Not sure	219	15.3		
	Refused	5	.3		
	Total	224	15.7		
Total		1429	100.0		

Mod 8.12 (Do you think) severe headache with no known cause (is a symptom of a stroke?)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	640	44.8	57.6	57.6
	No	471	33.0	42.4	100.0
	Total	1111	77.7	100.0	
Missing	Don't know/Not sure	313	21.9		
	Refused	5	.3		
	Total	318	22.3		
Total		1429	100.0		

Mod 8.13 If you thought someone was having a heart attack or a stroke, what is the first thing you would do?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Take them to the hospital	243	17.0	17.2	17.2
	Tell them to call their doctor	25	1.7	1.8	19.0
	Call 911	1076	75.3	76.1	95.0
	Call their spouse or a family member	26	1.8	1.8	96.9
	Do something else	44	3.1	3.1	100.0
	Total	1414	99.0	100.0	
Missing	Don't know/Not sure	12	.8		
	Refused	3	.2		
	Total	15	1.0		
Total		1429	100.0		

Sec 9.1 (Ever told) you had a heart attack, also called a myocardial infarction?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	29	2.0	2.1	2.1
	No	1378	96.4	97.9	100.0
	Total	1407	98.5	100.0	
Missing	Don't know/Not sure	20	1.4		
	Refused	2	.1		
	Total	22	1.5		
Total		1429	100.0		

Sec 9.2 (Ever told) you had angina or coronary heart disease?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	25	1.7	1.8	1.8
	No	1379	96.5	98.2	100.0
	Total	1404	98.3	100.0	
Missing	Don't know/Not sure	23	1.6		
	Refused	2	.1		
	Total	25	1.7		
Total		1429	100.0		

Sec 9.3 (Ever told) you had a stroke?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	32	2.2	2.3	2.3
	No	1383	96.8	97.7	100.0
	Total	1415	99.0	100.0	
Missing	Don't know/Not sure	12	.8		
	Refused	2	.1		
	Total	14	1.0		
Total		1429	100.0		

Sec 10.1 Have you ever been told by a doctor, nurse, or other health professional that you had asthma?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	136	9.5	9.6	9.6
	No	1286	90.0	90.4	100.0
	Total	1422	99.5	100.0	
Missing	Don't know/Not sure	5	.3		
	Refused	2	.1		
	Total	7	.5		
Total		1429	100.0		

Sec 10.2 Do you still have asthma?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	58	4.1	42.6	42.6
	No	78	5.5	57.4	100.0
	Total	136	9.5	100.0	
Missing	Don't know/Not sure	3	.2		
	System	1290	90.3		
	Total	1293	90.5		
Total		1429	100.0		

Sec 11.1 Have you smoked at least 100 cigarettes in your entire life?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	533	37.3	37.5	37.5
	No	890	62.3	62.5	100.0
	Total	1423	99.6	100.0	
Missing	Don't know/Not sure	5	.3		
	Refused	1	.1		
	Total	6	.4		
Total		1429	100.0		

Sec 11.2 Do you now smoke cigarettes every day, some days, or not at all?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Every day	286	20.0	53.4	53.4
	Some days	116	8.1	21.6	75.0
	Not at all	134	9.4	25.0	100.0
	Total	536	37.5	100.0	
Missing	Refused	1	.1		
	System	892	62.4		
	Total	893	62.5		
Total		1429	100.0		

Sec 11.3 During the past 12 months, have you stopped smoking for one day or longer because you were trying to quit smoking?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	257	18.0	62.4	62.4
	No	155	10.8	37.6	100.0
	Total	412	28.8	100.0	
Missing	Don't know/Not sure	4	.3		
	System	1013	70.9		
	Total	1017	71.2		
Total		1429	100.0		

Sec 11.4 How long has it been since you last smoked cigarettes regularly?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Within the past month (less than 1 month ago)	29	2.0	18.0	18.0
	Within the past 3 months (1 month but less than 3 months ago)	15	1.0	9.3	27.3
	Within the past 6 months (3 months but less than 6 months ago)	4	.3	2.5	29.8
	Within the past year (6 months but less than 1 year ago)	8	.6	5.0	34.8
	Within the past 5 years (1 year but less than 5 years ago)	33	2.3	20.5	55.3
	Within the past 10 years (5 years but less than 10 years ago)	22	1.5	13.7	68.9
	10 years or more	38	2.7	23.6	92.5
	Never smoked regularly	12	.8	7.5	100.0
	Total	161	11.3	100.0	
Missing	Don't know / Not sure	6	.4		
	Refused	1	.1		
	System	1261	88.2		
	Total	1268	88.7		
Total		1429	100.0		

Sec 11.5 Do you currently use chewing tobacco, or snuff every day, some days, or not at all?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Every day	135	9.4	9.5	9.5
	Some days	72	5.0	5.0	14.5
	Not at all	1221	85.4	85.5	100.0
	Total	1428	99.9	100.0	
Missing	Refused	1	.1		
Total		1429	100.0		

Sec 11.6 Do you chew betel nut? (With or without Leaf.)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	341	23.9	23.9	23.9
	No	1087	76.1	76.1	100.0
	Total	1428	99.9	100.0	
Missing	Refused	1	.1		
Total		1429	100.0		

Sec 11.7 Do you chew betel nut with lime and tobacco?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes, Lime only	85	5.9	24.1	24.1
	Yes, Tobacco only	13	.9	3.7	27.8
	Yes, both	228	16.0	64.6	92.4
	No	27	1.9	7.6	100.0
	Total	353	24.7	100.0	
Missing	Refused	1	.1		
	System	1075	75.2		
	Total	1076	75.3		
Total		1429	100.0		

Sec 12.1 What is your age? (Transformed into 5-year age group)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	18 to 20	58	4.1	4.1	4.1
	21 to 25	78	5.5	5.5	9.5
	26 to 30	125	8.7	8.8	18.3
	31 to 35	140	9.8	9.8	28.1
	36 to 40	205	14.3	14.4	42.5
	41 to 45	229	16.0	16.1	58.6
	46 to 50	182	12.7	12.8	71.4
	51 to 55	175	12.2	12.3	83.6
	56 to 60	106	7.4	7.4	91.1
	61 to 65	61	4.3	4.3	95.4
	66 to 70	34	2.4	2.4	97.8
	71 to 75	14	1.0	1.0	98.7
	76 to 80	14	1.0	1.0	99.7
	81 to 85	2	.1	.1	99.9
	86 to 90	2	.1	.1	100.0
	Total	1425	99.7	100.0	
Missing	Refused	4	.3		
Total		1429	100.0		

Descriptive Statistics

	N	Minimum	Maximum	Mean	Std. Deviation
Sec 12.1 What is your age?	1425	18.0	90.0	43.129	12.9469

Sec 12.2 What is your ethnic origin or race?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Chamorro	466	32.6	32.7	32.7
	Carolinian	70	4.9	4.9	37.6
	Guamanian	3	.2	.2	37.8
	White	63	4.4	4.4	42.2
	Hispanic	2	.1	.1	42.4
	Black	2	.1	.1	42.5
	Micronesian (other)	3	.2	.2	42.7
	Chuukese	27	1.9	1.9	44.6
	Pohnpeian	12	.8	.8	45.4
	Kosraean	2	.1	.1	45.6
	Yapese	8	.6	.6	46.1
	Palauan	34	2.4	2.4	48.5
	Marshallese	1	.1	.1	48.6
	Other Pacific Islander	5	.3	.4	48.9
	Asian Other	6	.4	.4	49.4
	Bangladeshi	11	.8	.8	50.1
	Chinese	85	5.9	6.0	56.1
	Indian	3	.2	.2	56.3
	Japanese	40	2.8	2.8	59.1
	Korean	54	3.8	3.8	62.9
	Filipino	513	35.9	36.0	98.9
	Sri Lankan	2	.1	.1	99.0
	Thai	6	.4	.4	99.4

Sec 12.2 What is your ethnic origin or race? (continued)

	Vietnamese	1	.1	.1	99.5
	Other	2	.1	.1	99.6
	Russian	2	.1	.1	99.8
	Nepalese	1	.1	.1	99.9
	Other	2	.1	.1	100.0
	Total	1426	99.8	100.0	
Missing	Don't know/not sure	1	.1		
	Refused	2	.1		
	Total	3	.2		
Total		1429	100.0		

Sec 12.4 Which one of these groups would you say best represents your race? (Circle Only One.)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	White	65	4.5	4.5	4.5
	Black and Hispanic	4	.3	.3	4.8
	Asian	724	50.7	50.7	55.5
	Pacific Islander	631	44.2	44.2	99.7
	Other	5	.3	.3	100.0
	Total	1429	100.0	100.0	

Sec 12.5 Have you ever served on active duty in the United States Armed Forces, either in the regular military or in a National Guard or military reserve unit?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes, now on active duty	4	.3	.3	.3
	Yes, on active duty during the last 12 month, but not now	5	.3	.4	.6
	Yes, on active duty in the past, but not during the last 12 months	49	3.4	3.4	4.1
	No, training for Reserves or National Guard only	17	1.2	1.2	5.3
	No, never served in the military	1347	94.3	94.7	100.0
	Total	1422	99.5	100.0	
Missing	Don't know/Not sure	2	.1		
	Refused	5	.3		
	Total	7	.5		
Total		1429	100.0		

Sec 12.6 What is your Marital Status?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Married	805	56.3	56.7	56.7
	Divorced	45	3.1	3.2	59.9
	Widowed	69	4.8	4.9	64.8
	Separated	37	2.6	2.6	67.4
	Never married	314	22.0	22.1	89.5
	A member of unmarried couple	149	10.4	10.5	100.0
	Total	1419	99.3	100.0	
Missing	Refused	10	.7		
Total		1429	100.0		

Sec 12.7 How many children less than 18 years of age live in your household?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1	297	20.8	20.8	20.8
	2	213	14.9	14.9	35.7
	3	140	9.8	9.8	45.5
	4	63	4.4	4.4	49.9
	5	21	1.5	1.5	51.4
	6	11	.8	.8	52.2
	7	7	.5	.5	52.7
	8	6	.4	.4	53.1
	9	1	.1	.1	53.2
	None	669	46.8	46.8	100.0
	Total	1428	99.9	100.0	
Missing	Refused	1	.1		
Total		1429	100.0		

Descriptive Statistics

	N	Minimum	Maximum	Mean	Std. Deviation
Sec 12.7 How many children less than 18 years of age live in your household?	759	1	9	2.20	1.389

Sec 12.8 What is the highest grade or year of school you completed?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Never attended school or only attended kindergarten	5	.3	.4	.4
	Grade 1 through 8 (Elementary)	103	7.2	7.2	7.6
	Grades 9 through 11 (some high school)	136	9.5	9.5	17.1
	Grade 12 or GED (High school graduates)	550	38.5	38.6	55.7
	College 1 year to 3 years (Some college or technical school)	335	23.4	23.5	79.2
	College 4 years or more (College graduates)	296	20.7	20.8	100.0
	Total	1425	99.7	100.0	
Missing	Refused	4	.3		
Total		1429	100.0		

Sec 12.9 Are you currently...?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Employed for wages	830	58.1	58.3	58.3
	Self-employed	87	6.1	6.1	64.4
	Out of work for more than 1 year	109	7.6	7.7	72.1
	Out of work for less than 1 year	75	5.2	5.3	77.3
	Homemaker	132	9.2	9.3	86.6
	A student	38	2.7	2.7	89.3
	Retired	107	7.5	7.5	96.8
	Unable to work	46	3.2	3.2	100.0
	Total	1424	99.7	100.0	
Missing	Refused	5	.3		
Total		1429	100.0		

Sec12.10 What is your annual household income? (Transformed into Income Group)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	\$5,000 or less	360	25.2	25.3	25.3
	Between \$5,001 and \$10,000	257	18.0	18.1	43.4
	Between \$10,001 and \$15,000	161	11.3	11.3	54.8
	Between \$15,001 and \$20,000	153	10.7	10.8	65.5
	Between \$20,001 and \$25,000	94	6.6	6.6	72.1
	Between \$25,001 and \$30,000	94	6.6	6.6	78.7
	Between \$30,001 and \$35,000	51	3.6	3.6	82.3
	Between \$35,001 and \$40,000	60	4.2	4.2	86.6
	Between \$40,001 and \$45,000	28	2.0	2.0	88.5
	Between \$45,001 and \$50,000	39	2.7	2.7	91.3
	Between \$50,001 and \$60,000	35	2.4	2.5	93.7
	Between \$60,001 and \$75,000	35	2.4	2.5	96.2
	Between \$75,001 and \$100,000	37	2.6	2.6	98.8
	Between \$100,001 and \$150,000	10	.7	.7	99.5
	Greater than \$150,000	7	.5	.5	100.0
	Total	1421	99.4	100.0	
Missing	System	8	.6		
Total		1429	100.0		

Descriptive Statistics

	N	Minimum	Maximum	Mean	Std. Deviation
Sec 12.10 What is your annual household income? (Include all sources)	1230	.00	350000.00	24055.0049	27678.71954

Sec 12.11 About how much do you weigh without shoes? (Transformed into weight class)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	100 lbs or less	35	2.4	2.5	2.5
	Between 101 and 125 lbs	257	18.0	18.0	20.5
	Between 126 and 150 lbs	433	30.3	30.3	50.8
	Between 151 and 175 lbs	298	20.9	20.9	71.7
	Between 176 and 200 lbs	236	16.5	16.5	88.2
	Between 201 and 250 lbs	136	9.5	9.5	97.8
	Between 251 and 300 lbs	25	1.7	1.8	99.5
	Over 300 lbs	7	.5	.5	100.0
	Total	1427	99.9	100.0	
Missing	System	2	.1		
Total		1429	100.0		

Descriptive Statistics

	N	Minimum	Maximum	Mean	Std. Deviation
Sec 12.11 About how much do you weigh without shoes?	1427	66	420	158.31	39.244

Sec 12.12 About how tall are you without shoes? (Height in Inches)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	50	1	.1	.1	.1
	52	1	.1	.1	.1
	53	1	.1	.1	.2
	56	4	.3	.3	.5
	57	12	.8	.8	1.3
	58	8	.6	.6	1.9
	59	42	2.9	2.9	4.8
	60	111	7.8	7.8	12.6
	61	88	6.2	6.2	18.8
	62	171	12.0	12.0	30.7
	63	150	10.5	10.5	41.2
	64	178	12.5	12.5	53.7
	65	167	11.7	11.7	65.4
	66	159	11.1	11.1	76.5
	67	106	7.4	7.4	83.9
	68	69	4.8	4.8	88.7
	69	47	3.3	3.3	92.0
	70	35	2.4	2.4	94.5
	71	29	2.0	2.0	96.5
	72	25	1.7	1.7	98.3
	73	8	.6	.6	98.8
	74	6	.4	.4	99.2
	75	4	.3	.3	99.5
	76	4	.3	.3	99.8
	77	1	.1	.1	99.9
	79	1	.1	.1	99.9
	117	1	.1	.1	100.0
Total		1429	100.0	100.0	

Descriptive Statistics

	N	Minimum	Maximum	Mean	Std. Deviation
Sec 12.12 About how tall are you without shoes? (Height in Inches)	1429	50.00	117.00	64.4346	3.70509

Sec 12.13 How much did you weigh a year ago? (Transformed into weight class)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	100 lbs or less	42	2.9	3.0	3.0
	Between 101 and 125 lbs	273	19.1	19.7	22.7
	Between 126 and 150 lbs	398	27.9	28.7	51.4
	Between 151 and 175 lbs	280	19.6	20.2	71.6
	Between 176 and 200 lbs	221	15.5	15.9	87.6
	Between 201 and 250 lbs	132	9.2	9.5	97.1
	Between 251 and 300 lbs	33	2.3	2.4	99.5
	Over 300 lbs	7	.5	.5	100.0
	Total	1386	97.0	100.0	
Missing	Don't know/not sure	40	2.8		
	Refused	3	.2		
	Total	43	3.0		
Total		1429	100.0		

Sec 12.14 Was the change between your current weight and your weight a year ago intentional?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	193	13.5	30.8	30.8
	No	434	30.4	69.2	100.0
	Total	627	43.9	100.0	
Missing	Don't know/Not sure	24	1.7		
	Refused	2	.1		
	System	776	54.3		
	Total	802	56.1		
Total		1429	100.0		

Sec 12.15 Does this household get water from ---

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	A Public system	1126	78.8	79.5	79.5
	A public system or cistern	234	16.4	16.5	96.0
	A cistern, tanks, or drums only	41	2.9	2.9	98.9
	A public standpipe	3	.2	.2	99.1
	Individual well or spring or other	13	.9	.9	100.0
	Total	1417	99.2	100.0	
Missing	Don't know/Not sure	12	.8		
Total		1429	100.0		

Sec 12.15a Is this public system 24 hours?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	1095	76.6	80.3	80.3
	No	269	18.8	19.7	100.0
	Total	1364	95.5	100.0	
Missing	Don't know/Not sure	17	1.2		
	System	48	3.4		
	Total	65	4.5		
Total		1429	100.0		

Sec 12.16 Do you purchase drinking water?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	1295	90.6	90.6	90.6
	No	134	9.4	9.4	100.0
	Total	1429	100.0	100.0	

Sec 12.17 Does this household have electric power?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	1387	97.1	97.1	97.1
	No	42	2.9	2.9	100.0
	Total	1429	100.0	100.0	

Sec 12.19 Does this household have a telephone?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	993	69.5	69.8	69.8
	No	430	30.1	30.2	100.0
	Total	1423	99.6	100.0	
Missing	Refused	6	.4		
Total		1429	100.0		

Sec 12.19a Is this a residential line?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	850	59.5	84.5	84.5
	No	156	10.9	15.5	100.0
	Total	1006	70.4	100.0	
Missing	Don't know/Not sure	1	.1		
	Refused	3	.2		
	System	419	29.3		
	Total	423	29.6		
Total		1429	100.0		

Sec 12.20 Indicate sex of respondent

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Male	700	49.0	49.0	49.0
	Female	729	51.0	51.0	100.0
	Total	1429	100.0	100.0	

Sec 12.21 To your knowledge, are you now pregnant?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	28	2.0	4.3	4.3
	No	623	43.6	95.7	100.0
	Total	651	45.6	100.0	
Missing	Don't know/Not sure	1	.1		
	Refused	2	.1		
	System	775	54.2		
	Total	778	54.4		
Total		1429	100.0		

Sec 13.1 During the past month, did you provide any such care or assistance to a friend or family member?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	133	9.3	9.3	9.3
	No	1295	90.6	90.7	100.0
	Total	1428	99.9	100.0	
Missing	Refused	1	.1		
Total		1429	100.0		

Mod 18.1 What age is the person to whom you are giving care? (Transformed into age group)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	5 yrs or younger	3	.2	2.4	2.4
	6 to 10 years old	6	.4	4.9	7.3
	11 to 15 years old	5	.3	4.1	11.4
	16 to 20 years old	5	.3	4.1	15.4
	21 to 25 years old	5	.3	4.1	19.5
	26 to 30 years old	6	.4	4.9	24.4
	31 to 35 years old	2	.1	1.6	26.0
	36 to 40 years old	4	.3	3.3	29.3
	40 to 45 years old	7	.5	5.7	35.0
	46 to 50 years old	6	.4	4.9	39.8
	51 to 55 years old	10	.7	8.1	48.0
	56 to 60 years old	13	.9	10.6	58.5
	61 to 50 years old	14	1.0	11.4	69.9
	66 to 70 years old	7	.5	5.7	75.6
	70 to 75 years old	8	.6	6.5	82.1
	76 to 80 years old	11	.8	8.9	91.1
	81 to 85 years old	6	.4	4.9	95.9
	86 to 90 years old	5	.3	4.1	100.0
	Total	123	8.6	100.0	
Missing	System	1306	91.4		
Total		1429	100.0		

Descriptive Statistics

	N	Minimum	Maximum	Mean	Std. Deviation
Mod 18.1 What age is the person to whom you are giving care?	125	2	94	52.42	24.241

Mod 18.2 Is this person male or female?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Male	67	4.7	50.8	50.8
	Female	65	4.5	49.2	100.0
	Total	132	9.2	100.0	
Missing	System	1297	90.8		
Total		1429	100.0		

Mod 18.3 What is his/her relationship to you?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Parent	45	3.1	34.4	34.4
	Parent-in-law	5	.3	3.8	38.2
	Child	21	1.5	16.0	54.2
	Spouse	16	1.1	12.2	66.4
	Sibling	9	.6	6.9	73.3
	Grandparent	6	.4	4.6	77.9
	Grandchild	2	.1	1.5	79.4
	Other-relative	5	.3	3.8	83.2
	Non-relative	22	1.5	16.8	100.0
	Total	131	9.2	100.0	
Missing	Don't know / Not sure	1	.1		
	System	1297	90.8		
	Total	1298	90.8		
Total		1429	100.0		

Mod 18.4 For how long have you provided care for?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 time per day	1	.1	.8	.8
	2 times per day	6	.4	5.0	5.9
	3 times per day	2	.1	1.7	7.6
	4 times per day	5	.3	4.2	11.8
	7 times per day	3	.2	2.5	14.3
	8 times per day	1	.1	.8	15.1
	1 time per week	4	.3	3.4	18.5
	2 times per week	6	.4	5.0	23.5
	3 times per week	3	.2	2.5	26.1
	4 times per week	1	.1	.8	26.9
	7 times per week	1	.1	.8	27.7
	1 time per month	5	.3	4.2	31.9
	2 times per month	4	.3	3.4	35.3
	3 times per month	4	.3	3.4	38.7
	6 times per month	2	.1	1.7	40.3
	27 times per month	1	.1	.8	41.2
	1 time per year	10	.7	8.4	49.6
	2 times per year	7	.5	5.9	55.5
	3 times per year	5	.3	4.2	59.7
	4 times per year	7	.5	5.9	65.5
	5 times per year	5	.3	4.2	69.7
	6 times per year	2	.1	1.7	71.4
	8 times per year	3	.2	2.5	73.9
	10 times per year	5	.3	4.2	78.2
	11 times per year	1	.1	.8	79.0
	12 times per year	5	.3	4.2	83.2
	13 times per year	1	.1	.8	84.0

Mod 18.4 For how long have you provided care for? (continued)

14 times per year	2	.1	1.7	85.7
15 times per year	2	.1	1.7	87.4
18 times per year	2	.1	1.7	89.1
19 times per year	1	.1	.8	89.9
20 times per year	2	.1	1.7	91.6
21 times per year	1	.1	.8	92.4
22 times per year	1	.1	.8	93.3
23 times per year	1	.1	.8	94.1
25 times per year	2	.1	1.7	95.8
27 times per year	1	.1	.8	96.6
34 time per year	1	.1	.8	97.5
38 times per year	1	.1	.8	98.3
39 times per year	1	.1	.8	99.2
40 times per year	1	.1	.8	100.0
Total	119	8.3	100.0	
Missing Don't know/not sure	13	.9		
System	1297	90.8		
Total	1310	91.7		
Total	1429	100.0		

Mod 18.5 What has a doctor said is the major health problem, long-term illness, or disability that the person you care for has?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Arthritis/Rheumatism	3	.2	2.5	2.5
	Asthma	4	.3	3.3	5.8
	Cancer	14	1.0	11.7	17.5
	Diabetes	19	1.3	15.8	33.3
	Heart Disease	10	.7	8.3	41.7
	Hypertension/High Blood Pressure	10	.7	8.3	50.0
	Lung Disease/Emphysema	2	.1	1.7	51.7
	Stroke	6	.4	5.0	56.7
	Eye/Vision Problem (blindness)	1	.1	.8	57.5
	Hearing Problems (deafness)	3	.2	2.5	60.0
	Spinal Cord Injury	2	.1	1.7	61.7
	Alzheimer's Disease or Dementia	1	.1	.8	62.5
	Learning Disabilities (LD)	1	.1	.8	63.3
	Cerebral Palsy (CP)	3	.2	2.5	65.8
	Down's Syndrome	4	.3	3.3	69.2
	Other developmental disability	4	.3	3.3	72.5
	Other	33	2.3	27.5	100.0
	Total	120	8.4	100.0	
Missing	Don't know / Not sure	4	.3		
	Refused	2	.1		
	System	1303	91.2		
	Total	1309	91.6		
Total		1429	100.0		

Mod 18.6 In which of the following areas does the person you care for most need your help?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Taking care of himself/herself, such as eating, dressing, or bathing	53	3.7	40.5	40.5
	Taking care of his/her residence or personal living spaces, such as cleaning, managing money, or preparing meals	40	2.8	30.5	71.0
	Communicating with others	6	.4	4.6	75.6
	Learning or remembering	2	.1	1.5	77.1
	Seeing or hearing	2	.1	1.5	78.6
	Moving around within the home	14	1.0	10.7	89.3
	Transportation outside of the home	8	.6	6.1	95.4
	Getting along with people	2	.1	1.5	96.9
	Relieving/decreasing anxiety or depression	4	.3	3.1	100.0
	Total	131	9.2	100.0	
Missing	Refused	1	.1		
	System	1297	90.8		
	Total	1298	90.8		
Total		1429	100.0		

Mod 18.7 In an average week, how many hours do you provide care for (Transformed into hour group)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	5 or less hours	24	1.7	23.8	23.8
	Between 6 and 10 hours	17	1.2	16.8	40.6
	Between 11 and 20 hours	15	1.0	14.9	55.4
	Between 21 and 40 hours	23	1.6	22.8	78.2
	Over 40 hours	22	1.5	21.8	100.0
	Total	101	7.1	100.0	
Missing	Don't know/Not sure	27	1.9		
	Refused	3	.2		
	System	1298	90.8		
	Total	1328	92.9		
Total		1429	100.0		

Descriptive Statistics

	N	Minimum	Maximum	Mean	Std. Deviation
Mod 18.7 In an average week, how many hours do you provide care for	101	1	500	41.90	72.741

Mod 18.8 I am going to read a list of difficulties you may have faced as a caregiver. Please indicate which one of the following is the greatest difficulty you have faced as a caregiver.

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Creates a financial burden	8	.6	6.3	6.3
	Doesn't leave enough time for yourself	9	.6	7.1	13.4
	Doesn't leave enough time for your family	3	.2	2.4	15.7
	Interferes with your work	5	.3	3.9	19.7
	Creates stress	17	1.2	13.4	33.1
	Creates or aggravates health problems	1	.1	.8	33.9
	Affects family relationships	1	.1	.8	34.6
	Other difficulty	8	.6	6.3	40.9
	No difficulty	75	5.2	59.1	100.0
	Total	127	8.9	100.0	
Missing	Don't know / Not sure	3	.2		
	Refused	2	.1		
	System	1297	90.8		
	Total	1302	91.1		
Total		1429	100.0		

Mod 18.9 During the past year, has the person you care for experienced changes in thinking or remembering?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	39	2.7	31.5	31.5
	No	85	5.9	68.5	100.0
	Total	124	8.7	100.0	
Missing	Don't know/Not sure	5	.3		
	Refused	1	.1		
	System	1299	90.9		
	Total	1305	91.3		
Total		1429	100.0		

Sec 14.1 Are you limited in any way in any activities because of physical, mental, or emotional problems?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	105	7.3	7.4	7.4
	No	1321	92.4	92.6	100.0
	Total	1426	99.8	100.0	
Missing	Refused	3	.2		
Total		1429	100.0		

Sec 14.2 Do you now have any health problem that requires you to use special equipment, such as a cane, a wheelchair, a special bed, or a special telephone?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	44	3.1	3.1	3.1
	No	1383	96.8	96.9	100.0
	Total	1427	99.9	100.0	
Missing	Refused	2	.1		
Total		1429	100.0		

Sec 15.1 During the past 30 days, have you had at least one drink of any alcoholic beverage such as beer, wine, a malt beverage or liquor?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	618	43.2	43.4	43.4
	No	806	56.4	56.6	100.0
	Total	1424	99.7	100.0	
Missing	Don't know/Not sure	2	.1		
	Refused	3	.2		
	Total	5	.3		
Total		1429	100.0		

Sec 15.2 During the past 30 days, how many days per week or per month did you have at least one drink of any alcoholic beverage?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 day per week	133	9.3	22.2	22.2
	2 days per week	87	6.1	14.5	36.7
	3 days per week	41	2.9	6.8	43.5
	4 days per week	16	1.1	2.7	46.2
	5 days per week	15	1.0	2.5	48.7
	6 days per week	3	.2	.5	49.2
	7 days per week	24	1.7	4.0	53.2
	8 days per week	1	.1	.2	53.3
	1 day in the past 30 days	78	5.5	13.0	66.3
	2 days in the past 30 days	72	5.0	12.0	78.3
	3 days in the past 30 days	23	1.6	3.8	82.2
	4 days in the past 30 days	31	2.2	5.2	87.3
	5 days in the past 30 days	10	.7	1.7	89.0
	6 days in the past 30 days	9	.6	1.5	90.5
	7 days in the past 30 days	7	.5	1.2	91.7
	8 days in the past 30 days	15	1.0	2.5	94.2
	10 days in the past 30 days	3	.2	.5	94.7
	12 days in the past 30 days	4	.3	.7	95.3
	13 days in the past 30 days	1	.1	.2	95.5
	14 days in the past 30 days	3	.2	.5	96.0
	15 days in the past 30 days	2	.1	.3	96.3

Sec 15.2 During the past 30 days, how many days per week or per month did you have at least one drink of any alcoholic beverage? Continued)

	16 days in the past 30 days	1	.1	.2	96.5
	20 days in the past 30 days	8	.6	1.3	97.8
	24 days in the past 30 days	1	.1	.2	98.0
	30 days in the past 30 days	9	.6	1.5	99.5
	Never	3	.2	.5	100.0
	Total	600	42.0	100.0	
Missing	Don't know/not sure	18	1.3		
	Refused	3	.2		
	Svstem	808	56.5		
	Total	829	58.0		
Total		1429	100.0		

Sec 15.3 During the past 30 days, on the days when you drank, about how many drinks did you drink on the average?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1	87	6.1	15.0	15.0
	2	99	6.9	17.1	32.1
	3	71	5.0	12.2	44.3
	4	70	4.9	12.1	56.4
	5	41	2.9	7.1	63.4
	6	115	8.0	19.8	83.3
	7	9	.6	1.6	84.8
	8	26	1.8	4.5	89.3
	9	2	.1	.3	89.7
	10	13	.9	2.2	91.9
	12	32	2.2	5.5	97.4
	14	1	.1	.2	97.6
	15	3	.2	.5	98.1
	16	1	.1	.2	98.3
	18	2	.1	.3	98.6
	24	5	.3	.9	99.5
	30	2	.1	.3	99.8
	70	1	.1	.2	100.0
	Total	580	40.6	100.0	
Missing	Don't know / Not sure	38	2.7		
	Refused	2	.1		
	System	809	56.6		
	Total	849	59.4		
Total		1429	100.0		

Descriptive Statistics

	N	Minimum	Maximum	Mean	Std. Deviation
Sec 15.3 During the past 30 days, on the days when you drank, about how many drinks did you drink on the average?	580	1	70	4.89	4.749

Sec 15.4 Considering all types of alcoholic beverages, how many times during the past 30 days did you have X
[Note: X = 5 for men, X = 4 for women] or more drinks on an occasion?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1	102	7.1	18.8	18.8
	2	79	5.5	14.6	33.4
	3	35	2.4	6.5	39.9
	4	50	3.5	9.2	49.1
	5	31	2.2	5.7	54.8
	6	18	1.3	3.3	58.1
	7	8	.6	1.5	59.6
	8	7	.5	1.3	60.9
	9	1	.1	.2	61.1
	10	12	.8	2.2	63.3
	12	5	.3	.9	64.2
	15	1	.1	.2	64.4
	16	3	.2	.6	64.9
	18	2	.1	.4	65.3
	20	3	.2	.6	65.9
	24	2	.1	.4	66.2
	30	6	.4	1.1	67.3
	80	1	.1	.2	67.5
	None	176	12.3	32.5	100.0
	Total	542	37.9	100.0	
Missing	Don't know / Not sure	75	5.2		
	Refused	1	.1		
	System	811	56.8		
	Total	887	62.1		
Total		1429	100.0		

Descriptive Statistics

	N	Minimum	Maximum	Mean	Std. Deviation
Sec 15.4 Considering all types of alcoholic beverages, how many times during the past 30 days did you have X [Note: X = 5 for men, X = 4 for women] or more drinks on an occasion?	366	1	80	4.36	6.331

Sec 15.5 During the past 30 days, what is the largest number of drinks you had on any occasion?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1	47	3.3	8.4	8.4
	2	64	4.5	11.4	19.8
	3	58	4.1	10.3	30.1
	4	55	3.8	9.8	39.9
	5	46	3.2	8.2	48.1
	6	88	6.2	15.7	63.8
	7	21	1.5	3.7	67.6
	8	50	3.5	8.9	76.5
	9	2	.1	.4	76.8
	10	38	2.7	6.8	83.6
	12	43	3.0	7.7	91.3
	13	1	.1	.2	91.4
	14	3	.2	.5	92.0
	15	4	.3	.7	92.7
	16	6	.4	1.1	93.8
	18	10	.7	1.8	95.5
	20	1	.1	.2	95.7
	22	1	.1	.2	95.9
	23	1	.1	.2	96.1
	24	13	.9	2.3	98.4
	26	1	.1	.2	98.6
	30	1	.1	.2	98.8
	70	1	.1	.2	98.9
	None	6	.4	1.1	100.0
	Total	561	39.3	100.0	
Missing	Don't know / Not sure	56	3.9		
	Refused	1	.1		
	System	811	56.8		
	Total	868	60.7		
Total		1429	100.0		

Descriptive Statistics

	N	Minimum	Maximum	Mean	Std. Deviation
Sec 15.5 During the past 30 days, what is the largest number of drinks you had on any occasion?	555	1	70	6.63	5.667

Sec 16.1 A flu shot is an influenza vaccine injected into your arm. During the past 12 months, have you had a flu shot?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	448	31.4	31.8	31.8
	No	960	67.2	68.2	100.0
	Total	1408	98.5	100.0	
Missing	Don't know/Not sure	19	1.3		
	Refused	2	.1		
	Total	21	1.5		
Total		1429	100.0		

Sec 16.2Mo During what month and year did you receive your most recent flu shot? (Month)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1	21	1.5	7.8	7.8
	2	17	1.2	6.3	14.1
	3	29	2.0	10.8	24.9
	4	22	1.5	8.2	33.1
	5	17	1.2	6.3	39.4
	6	22	1.5	8.2	47.6
	7	26	1.8	9.7	57.2
	8	21	1.5	7.8	65.1
	9	23	1.6	8.6	73.6
	10	30	2.1	11.2	84.8
	11	29	2.0	10.8	95.5
	12	12	.8	4.5	100.0
	Total	269	18.8	100.0	
Missing	Don't know / Not sure	171	12.0		
	System	989	69.2		
	Total	1160	81.2		
Total		1429	100.0		

Sec 16.2Yr During what month and year did you receive your most recent flu shot? (Year)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1998	1	.1	.3	.3
	1999	2	.1	.5	.8
	2001	2	.1	.5	1.3
	2002	2	.1	.5	1.8
	2003	1	.1	.3	2.1
	2004	2	.1	.5	2.6
	2005	3	.2	.8	3.4
	2006	6	.4	1.6	4.9
	2007	30	2.1	7.8	12.8
	2008	143	10.0	37.2	50.0
	2009	192	13.4	50.0	100.0
	Total	384	26.9	100.0	
Missing	Don't know / Not sure	56	3.9		
	System	989	69.2		
	Total	1045	73.1		
Total		1429	100.0		

Sec 16.5 pneumonia shot or pneumococcal vaccine is usually given only once or twice in a person's lifetime and is different from the flu shot. Have you ever had a pneumonia shot?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	132	9.2	9.8	9.8
	No	1214	85.0	90.2	100.0
	Total	1346	94.2	100.0	
Missing	Don't know/Not sure	76	5.3		
	Refused	2	.1		
	System	5	.3		
	Total	83	5.8		
Total		1429	100.0		

Sec 17.1 Have you EVER been told by a doctor or other health professional that you have some form of arthritis, rheumatoid arthritis, gout, lupus, or fibromyalgia?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	89	6.2	6.3	6.3
	No	1324	92.7	93.7	100.0
	Total	1413	98.9	100.0	
Missing	Don't know/Not sure	14	1.0		
	Refused	2	.1		
	Total	16	1.1		
Total		1429	100.0		

Sec 17.2 Are you now limited in any way in any of your usual activities because of arthritis or joint symptoms?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	44	3.1	51.8	51.8
	No	41	2.9	48.2	100.0
	Total	85	5.9	100.0	
Missing	Don't know/Not sure	1	.1		
	System	1343	94.0		
	Total	1344	94.1		
Total		1429	100.0		

Sec 17.3 In this next question, we are referring to work for pay. Do arthritis or joint symptoms now affect whether you work, the type of work you do, or the amount of work you do?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	33	2.3	40.2	40.2
	No	49	3.4	59.8	100.0
	Total	82	5.7	100.0	
Missing	Don't know/Not sure	3	.2		
	System	1344	94.1		
	Total	1347	94.3		
Total		1429	100.0		

Sec 17.4 During the past 30 days, to what extent has your arthritis or joint symptoms interfered with your normal social activities, such as going shopping, to the movies, or to religious or social gatherings?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	A lot	10	.7	11.8	11.8
	A little	34	2.4	40.0	51.8
	Not at all	41	2.9	48.2	100.0
	Total	85	5.9	100.0	
Missing	System	1344	94.1		
Total		1429	100.0		

Sec 17.5 Please think about the past 30 days, keeping in mind all of your joint pain or aching and whether or not you have taken medication. DURING THE PAST 30 DAYS, how bad was your joint pain ON AVERAGE? Please answer on a scale of 0 to 10 where 0 is no pain or aching and 10 is pain or aching as bad as it can be.

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0	11	.8	15.3	15.3
	1	10	.7	13.9	29.2
	2	5	.3	6.9	36.1
	3	3	.2	4.2	40.3
	4	10	.7	13.9	54.2
	5	17	1.2	23.6	77.8
	6	2	.1	2.8	80.6
	7	1	.1	1.4	81.9
	8	7	.5	9.7	91.7
	10	6	.4	8.3	100.0
	Total	72	5.0	100.0	
Missing	Don't know / Not sure	12	.8		
	System	1345	94.1		
	Total	1357	95.0		
Total		1429	100.0		

Descriptive Statistics

	N	Minimum	Maximum	Mean	Std. Deviation
Sec 17.5 Please think about the past 30 days, keeping in mind all of your joint pain or aching and whether or not you have taken medication. DURING THE PAST 30 DAYS, how bad was your joint pain ON AVERAGE? Please answer on a scale of 0 to 10 where 0 is no pain or aching and 10 is pain or aching as bad as it can be.	72	0	10	4.01	3.028

Sec 18.1 How often do you drink fruit juices such as orange, grapefruit, or tomato?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 time per day	350	24.5	25.1	25.1
	2 times per day	83	5.8	6.0	31.1
	3 times per day	28	2.0	2.0	33.1
	4 times per day	4	.3	.3	33.4
	5 times per day	7	.5	.5	33.9
	7 times per day	38	2.7	2.7	36.6
	10 times per day	1	.1	.1	36.7
	1 time per week	193	13.5	13.9	50.5
	2 times per week	192	13.4	13.8	64.3
	3 times per week	152	10.6	10.9	75.2
	4 times per week	48	3.4	3.4	78.7
	5 times per week	22	1.5	1.6	80.3
	6 times per week	5	.3	.4	80.6
	7 times per week	19	1.3	1.4	82.0
	1 time per month	77	5.4	5.5	87.5
	2 times per month	57	4.0	4.1	91.6
	3 times per month	21	1.5	1.5	93.1
	4 times per month	4	.3	.3	93.4
	5 times per month	4	.3	.3	93.7
	6 times per month	3	.2	.2	93.9
	7 times per month	1	.1	.1	94.0
	10 times per month	2	.1	.1	94.1
	20 times per month	1	.1	.1	94.2
	30 times per month	1	.1	.1	94.3

Sec 18.1 How often do you drink fruit juices such as orange, grapefruit, or tomato? (continued)

	1 time per year	4	.3	.3	94.5
	2 times per year	5	.3	.4	94.9
	4 times per year	1	.1	.1	95.0
	10 times per year	2	.1	.1	95.1
	Never	68	4.8	4.9	100.0
	Total	1393	97.5	100.0	
Missing	Don't know/not sure	35	2.4		
	Refused	1	.1		
	Total	36	2.5		
Total		1429	100.0		

Sec 18.2 Not counting juice, how often do you eat fruit?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 time per day	356	24.9	25.5	25.5
	2 times per day	101	7.1	7.2	32.7
	3 times per day	40	2.8	2.9	35.6
	4 times per day	7	.5	.5	36.1
	5 times per day	5	.3	.4	36.5
	6 times per day	1	.1	.1	36.5
	7 times per day	36	2.5	2.6	39.1
	10 times per day	1	.1	.1	39.2
	1 time per week	177	12.4	12.7	51.9
	2 times per week	207	14.5	14.8	66.7
	3 times per week	176	12.3	12.6	79.3
	4 times per week	51	3.6	3.7	83.0
	5 times per week	33	2.3	2.4	85.3
	6 times per week	10	.7	.7	86.0
	7 times per week	25	1.7	1.8	87.8
	12 times per week	1	.1	.1	87.9
	1 time per month	55	3.8	3.9	91.8
	2 times per month	46	3.2	3.3	95.1
	3 times per month	17	1.2	1.2	96.3
	4 times per month	10	.7	.7	97.1
	5 times per month	6	.4	.4	97.5
	6 times per month	2	.1	.1	97.6
	7 times per month	3	.2	.2	97.9
	8 times per month	1	.1	.1	97.9
	13 times per month	1	.1	.1	98.0
	15 times per month	1	.1	.1	98.1
	20 times per month	1	.1	.1	98.1
	30 times per month	2	.1	.1	98.3

Sec 18.2 Not counting juice, how often do you eat fruit? (Continued)

	1 time per year	2	.1	.1	98.4
	5 times per year	1	.1	.1	98.5
	12 times per year	1	.1	.1	98.6
	20 times per year	1	.1	.1	98.6
	Never	19	1.3	1.4	100.0
	Total	1396	97.7	100.0	
Missing	Don't know/not sure	32	2.2		
	Refused	1	.1		
	Total	33	2.3		
Total		1429	100.0		

Sec 18.3 How often do you eat green salad?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 time per day	245	17.1	17.7	17.7
	2 times per day	46	3.2	3.3	21.0
	3 times per day	32	2.2	2.3	23.4
	4 times per day	3	.2	.2	23.6
	5 times per day	4	.3	.3	23.9
	7 times per day	36	2.5	2.6	26.5
	10 times per day	1	.1	.1	26.5
	1 time per week	220	15.4	15.9	42.4
	2 times per week	200	14.0	14.5	56.9
	3 times per week	123	8.6	8.9	65.8
	4 times per week	44	3.1	3.2	69.0
	5 times per week	17	1.2	1.2	70.2
	6 times per week	4	.3	.3	70.5
	7 times per week	19	1.3	1.4	71.9
	1 time per month	141	9.9	10.2	82.1
	2 times per month	70	4.9	5.1	87.1
	3 times per month	26	1.8	1.9	89.0
	4 times per month	20	1.4	1.4	90.5
	5 times per month	3	.2	.2	90.7
	6 times per month	3	.2	.2	90.9
	15 times per month	1	.1	.1	91.0
	22 times per month	1	.1	.1	91.0
	30 times per month	1	.1	.1	91.1

Sec 18.3 How often do you eat green salad? (continued)

1 time per year	8	.6	.6	91.7
2 times per year	4	.3	.3	92.0
3 times per year	2	.1	.1	92.1
4 times per year	3	.2	.2	92.3
5 times per year	3	.2	.2	92.6
6 times per year	1	.1	.1	92.6
10 times per year	1	.1	.1	92.7
Never	101	7.1	7.3	100.0
Total	1383	96.8	100.0	
Missing Don't know/not sure	45	3.1		
Refused	1	.1		
Total	46	3.2		
Total	1429	100.0		

Sec 18.4 How often do you eat potatoes not including French fries, fried potatoes, or potato chips?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 time per day	103	7.2	7.5	7.5
	2 times per day	9	.6	.7	8.2
	3 times per day	6	.4	.4	8.6
	5 times per day	1	.1	.1	8.7
	6 times per day	1	.1	.1	8.7
	7 times per day	7	.5	.5	9.3
	1 time per week	305	21.3	22.2	31.5
	2 times per week	210	14.7	15.3	46.8
	3 times per week	102	7.1	7.4	54.2
	4 times per week	35	2.4	2.6	56.8
	5 times per week	16	1.1	1.2	57.9
	6 times per week	4	.3	.3	58.2
	7 times per week	6	.4	.4	58.7
	1 time per month	200	14.0	14.6	73.3
	2 times per month	120	8.4	8.7	82.0
	3 times per month	40	2.8	2.9	84.9
	4 times per month	23	1.6	1.7	86.6
	5 times per month	5	.3	.4	87.0
	6 times per month	5	.3	.4	87.3
	10 times per month	4	.3	.3	87.6

Sec 18.4 How often do you eat potatoes not including French fries, fried potatoes, or potato chips? (continued)

	1 time per year	12	.8	.9	88.5
	2 times per year	5	.3	.4	88.8
	3 times per year	2	.1	.1	89.0
	4 times per year	6	.4	.4	89.4
	6 times per year	2	.1	.1	89.6
	Never	143	10.0	10.4	100.0
	Total	1372	96.0	100.0	
Missing	Don't know/not sure	56	3.9		
	Refused	1	.1		
	Total	57	4.0		
Total		1429	100.0		

Sec 18.5 How often do you eat carrots?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 time per day	170	11.9	12.4	12.4
	2 times per day	23	1.6	1.7	14.0
	3 times per day	12	.8	.9	14.9
	4 times per day	3	.2	.2	15.1
	5 times per day	3	.2	.2	15.3
	7 times per day	24	1.7	1.7	17.1
	10 times per day	1	.1	.1	17.2
	1 time per week	287	20.1	20.9	38.0
	2 times per week	250	17.5	18.2	56.2
	3 times per week	124	8.7	9.0	65.2
	4 times per week	43	3.0	3.1	68.3
	5 times per week	22	1.5	1.6	69.9
	6 times per week	2	.1	.1	70.1
	7 times per week	9	.6	.7	70.7
	8 times per week	1	.1	.1	70.8
	1 time per month	142	9.9	10.3	81.1
	2 times per month	80	5.6	5.8	86.9
	3 times per month	39	2.7	2.8	89.8
	4 times per month	26	1.8	1.9	91.6
	5 times per month	6	.4	.4	92.1
	6 times per month	5	.3	.4	92.4
	8 times per month	1	.1	.1	92.5
	10 times per month	5	.3	.4	92.9

Sec 18.5 How often do you eat carrots? (continued)

1 time per year	3	.2	.2	93.1
2 times per year	6	.4	.4	93.5
3 times per year	2	.1	.1	93.7
4 times per year	1	.1	.1	93.8
10 times per year	3	.2	.2	94.0
15 times per year	1	.1	.1	94.0
Never	82	5.7	6.0	100.0
Total	1376	96.3	100.0	
Missing Don't know/not sure	52	3.6		
Refused	1	.1		
Total	53	3.7		
Total	1429	100.0		

Sec 18.6 Not counting carrots, potatoes, or salad, how many servings of vegetables do you usually eat?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 time per day	419	29.3	30.1	30.1
	2 times per day	327	22.9	23.5	53.5
	3 times per day	93	6.5	6.7	60.2
	4 times per day	4	.3	.3	60.5
	5 times per day	2	.1	.1	60.6
	6 times per day	1	.1	.1	60.7
	7 times per day	18	1.3	1.3	62.0
	10 times per day	1	.1	.1	62.1
	1 time per week	63	4.4	4.5	66.6
	2 times per week	111	7.8	8.0	74.5
	3 times per week	110	7.7	7.9	82.4
	4 times per week	73	5.1	5.2	87.7
	5 times per week	43	3.0	3.1	90.7
	6 times per week	12	.8	.9	91.6
	7 times per week	30	2.1	2.2	93.8
	8 times per week	2	.1	.1	93.9
	10 times per week	2	.1	.1	94.0
	14 times per week	1	.1	.1	94.1
	1 time per month	17	1.2	1.2	95.3
	2 times per month	15	1.0	1.1	96.4
	3 times per month	11	.8	.8	97.2
	4 times per month	5	.3	.4	97.6
	5 times per month	5	.3	.4	97.9
	6 times per month	1	.1	.1	98.0
	30 times per month	4	.3	.3	98.3

**Sec 18.6 Not counting carrots, potatoes, or salad, how many servings of vegetables
do you usually eat? (continued)**

	2 times per year	2	.1	.1	98.4
	3 times per year	1	.1	.1	98.5
	Never	21	1.5	1.5	100.0
	Total	1394	97.6	100.0	
Missing	Don't know/not sure	34	2.4		
	Refused	1	.1		
	Total	35	2.4		
Total		1429	100.0		

Sec 18.7 How many times do you eat rice on a normal day?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Never or none	31	2.2	2.2	2.2
	Once	190	13.3	13.4	15.6
	Twice	535	37.4	37.7	53.2
	Three	630	44.1	44.4	97.6
	Four or more	34	2.4	2.4	100.0
	Total	1420	99.4	100.0	
Missing	Don't know / Not sure	8	.6		
	Refused	1	.1		
	Total	9	.6		
Total		1429	100.0		

Sec 19.1 When you are at work, which of the following best describes what you do? Would you say—

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Mostly sitting or standing	437	30.6	53.6	53.6
	Mostly walking	233	16.3	28.6	82.1
	Mostly heavy labor or physically demanding work	142	9.9	17.4	99.5
	Don't know / Not sure	2	.1	.2	99.8
	Refused	2	.1	.2	100.0
	Total	816	57.1	100.0	
Missing	System	613	42.9		
Total		1429	100.0		

Sec 19.2 Now, thinking about the moderate activities you do in a usual week, do you do moderate activities for at least 10 minutes at a time, such as brisk walking, bicycling, vacuuming, gardening, or anything else that causes some increase in breathing or heart rate?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	1052	73.6	74.3	74.3
	No	364	25.5	25.7	100.0
	Total	1416	99.1	100.0	
Missing	Don't know/Not sure	11	.8		
	Refused	2	.1		
	Total	13	.9		
Total		1429	100.0		

Sec 19.3 How many days per week do you do these moderate activities for at least 10 minutes at a time?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1	102	7.1	9.5	9.5
	2	112	7.8	10.5	20.0
	3	177	12.4	16.5	36.5
	4	68	4.8	6.4	42.9
	5	159	11.1	14.9	57.8
	6	52	3.6	4.9	62.6
	7	373	26.1	34.9	97.5
	Don't know / Not sure	19	1.3	1.8	99.3
	Do not do any moderate physical activity for at least 10 minutes at a time.	8	.6	.7	100.0
	Total	1070	74.9	100.0	
Missing	System	359	25.1		
Total		1429	100.0		

Descriptive Statistics

	N	Minimum	Maximum	Mean	Std. Deviation
Sec 19.3 How many days per week do you do these moderate activities for at least 10 minutes at a time?	1043	1	7	4.65	2.153

Sec 19.4Hr On days when you do moderate activities for at least 10 minutes at a time, how much total time per day do you spend doing these activities? (Hours)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0	399	27.9	39.5	39.5
	1	295	20.6	29.2	68.8
	2	133	9.3	13.2	82.0
	3	64	4.5	6.3	88.3
	4	38	2.7	3.8	92.1
	5	18	1.3	1.8	93.9
	6	14	1.0	1.4	95.2
	7	34	2.4	3.4	98.6
	8	14	1.0	1.4	100.0
	Total	1009	70.6	100.0	
Missing	System	420	29.4		
Total		1429	100.0		

Sec 19.4Min On days when you do moderate activities for at least 10 minutes at a time, how much total time per day do you spend doing these activities? (Minutes)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0	518	36.2	51.3	51.3
	10	46	3.2	4.6	55.9
	15	48	3.4	4.8	60.7
	20	59	4.1	5.8	66.5
	25	1	.1	.1	66.6
	30	288	20.2	28.5	95.1
	35	1	.1	.1	95.2
	40	20	1.4	2.0	97.2
	45	26	1.8	2.6	99.8
	50	2	.1	.2	100.0
	Total	1009	70.6	100.0	
Missing	Don't know / Not sure	30	2.1		
	System	390	27.3		
	Total	420	29.4		
Total		1429	100.0		

Sec 19.5 Now, thinking about the vigorous activities you do in a usual week, do you do vigorous activities for at least 10 minutes at a time, such as running, aerobics, heavy yard work, or anything else that causes large increases in breathing or heart rate?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	544	38.1	38.5	38.5
	No	868	60.7	61.5	100.0
	Total	1412	98.8	100.0	
Missing	Don't know/Not sure	16	1.1		
	Refused	1	.1		
	Total	17	1.2		
Total		1429	100.0		

Sec 19.6 How many days per week do you do these vigorous activities for at least 10 minutes at a time?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1	96	6.7	17.8	17.8
	2	100	7.0	18.5	36.3
	3	112	7.8	20.7	57.0
	4	49	3.4	9.1	66.1
	5	73	5.1	13.5	79.6
	6	23	1.6	4.3	83.9
	7	87	6.1	16.1	100.0
	Total	540	37.8	100.0	
Missing	Don't know / Not sure	9	.6		
	Do not do any vigorous physical activity for at least 10 minutes at a time	6	.4		
	System	874	61.2		
	Total	889	62.2		
Total		1429	100.0		

Descriptive Statistics

	N	Minimum	Maximum	Mean	Std. Deviation
Sec 19.6 How many days per week do you do these vigorous activities for at least 10 minutes at a time?	540	1	7	3.59	2.036

Sec 19.7 Hr On days when you do vigorous activities for at least 10 minutes at a time, how much total time per day do you spend doing these activities? (Hours)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0	175	12.2	33.0	33.0
	1	174	12.2	32.8	65.8
	2	82	5.7	15.5	81.3
	3	38	2.7	7.2	88.5
	4	19	1.3	3.6	92.1
	5	7	.5	1.3	93.4
	6	8	.6	1.5	94.9
	7	17	1.2	3.2	98.1
	8	9	.6	1.7	99.8
	9	1	.1	.2	100.0
	Total	530	37.1	100.0	
Missing	Don't know / Not sure	1	.1		
	System	898	62.8		
	Total	899	62.9		
Total		1429	100.0		

Sec 19.7 Min On days when you do vigorous activities for at least 10 minutes at a time, how much total time per day do you spend doing these activities? (Minutes)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0	294	20.6	56.0	56.0
	1	1	.1	.2	56.2
	5	3	.2	.6	56.8
	10	11	.8	2.1	58.9
	15	6	.4	1.1	60.0
	18	1	.1	.2	60.2
	20	23	1.6	4.4	64.6
	25	1	.1	.2	64.8
	30	154	10.8	29.3	94.1
	35	2	.1	.4	94.5
	40	10	.7	1.9	96.4
	45	18	1.3	3.4	99.8
	50	1	.1	.2	100.0
	Total	525	36.7	100.0	
Missing	Don't know / Not sure	17	1.2		
	System	887	62.1		
	Total	904	63.3		
Total		1429	100.0		

Sec 20.1 Have you ever been tested for HIV? Do not count tests you may have had as part of a blood donation. Include testing fluid from your mouth.

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	482	33.7	36.5	36.5
	No	840	58.8	63.5	100.0
	Total	1322	92.5	100.0	
Missing	Don't know/Not sure	33	2.3		
	Refused	4	.3		
	System	70	4.9		
	Total	107	7.5		
Total		1429	100.0		

Sec 20.2 Mo Not including blood donations, in what month and year was your last HIV test?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1	18	1.3	6.2	6.2
	2	15	1.0	5.2	11.5
	3	38	2.7	13.2	24.7
	4	34	2.4	11.8	36.5
	5	29	2.0	10.1	46.5
	6	24	1.7	8.3	54.9
	7	34	2.4	11.8	66.7
	8	31	2.2	10.8	77.4
	9	18	1.3	6.2	83.7
	10	18	1.3	6.2	89.9
	11	12	.8	4.2	94.1
	12	17	1.2	5.9	100.0
	Total	288	20.2	100.0	
Missing	Don't know / Not sure	197	13.8		
	Refused	2	.1		
	System	942	65.9		
	Total	1141	79.8		
Total		1429	100.0		

Sec 20.2Yr Not including blood donations, in what month and year was your last HIV test?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1983	1	.1	.2	.2
	1990	2	.1	.5	.7
	1991	4	.3	1.0	1.7
	1992	3	.2	.7	2.5
	1993	4	.3	1.0	3.4
	1994	4	.3	1.0	4.4
	1996	2	.1	.5	4.9
	1997	4	.3	1.0	5.9
	1998	7	.5	1.7	7.6
	1999	8	.6	2.0	9.6
	2000	9	.6	2.2	11.8
	2001	5	.3	1.2	13.0
	2002	10	.7	2.5	15.5
	2003	11	.8	2.7	18.2
	2004	14	1.0	3.4	21.6
	2005	15	1.0	3.7	25.3
	2006	21	1.5	5.2	30.5
	2007	47	3.3	11.5	42.0
	2008	87	6.1	21.4	63.4
	2009	149	10.4	36.6	100.0
	Total	407	28.5	100.0	
Missing	Don't know / Not sure	78	5.5		
	Refused	2	.1		
	System	942	65.9		
	Total	1022	71.5		
Total		1429	100.0		

Sec 20.3 Where did you have your last HIV test — at a private doctor or HMO office, at a counseling and testing site, at a hospital, at a clinic, in a jail or prison, at a drug treatment facility, at home, or somewhere else?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Private doctor or HMO office	33	2.3	6.8	6.8
	Counseling and testing site	7	.5	1.4	8.2
	Hospital	214	15.0	44.0	52.3
	Clinic	215	15.0	44.2	96.5
	Jail or prison (or other correctional facility)	3	.2	.6	97.1
	Somewhere else	14	1.0	2.9	100.0
	Total	486	34.0	100.0	
Missing	Refused	1	.1		
	System	942	65.9		
	Total	943	66.0		
Total		1429	100.0		

Sec 20.4 Was it a rapid test where you could get your results within a couple of hours?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	54	3.8	12.5	12.5
	No	379	26.5	87.5	100.0
	Total	433	30.3	100.0	
Missing	Don't know/Not sure	18	1.3		
	Refused	1	.1		
	System	977	68.4		
	Total	996	69.7		
Total		1429	100.0		

Sec 20.5 You have used intravenous drugs in the past year. You have been treated for a sexually transmitted or venereal disease in the past year. You have given or received money or drugs in exchange for sex in the past year. You had anal sex without a condom in the past year. Do any of these situations apply to you?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	56	3.9	4.2	4.2
	No	1284	89.9	95.8	100.0
	Total	1340	93.8	100.0	
Missing	Don't know/Not sure	5	.3		
	Refused	7	.5		
	System	77	5.4		
	Total	89	6.2		
Total		1429	100.0		

Sec 21.1 How often do you get the social and emotional support you need?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Always	458	32.1	32.9	32.9
	Usually	238	16.7	17.1	50.0
	Sometimes	462	32.3	33.2	83.1
	Rarely	106	7.4	7.6	90.7
	Never	129	9.0	9.3	100.0
	Total	1393	97.5	100.0	
Missing	Don't know / Not sure	29	2.0		
	Refused	3	.2		
	System	4	.3		
	Total	36	2.5		
Total		1429	100.0		

Sec 21.2 In general, how satisfied are you with your life?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Very Satisfied	438	30.7	31.2	31.2
	Satisfied	889	62.2	63.2	94.4
	Dissatisfied	67	4.7	4.8	99.1
	Very dissatisfied	12	.8	.9	100.0
	Total	1406	98.4	100.0	
Missing	Don't know / Not sure	15	1.0		
	Refused	3	.2		
	System	5	.3		
	Total	23	1.6		
Total		1429	100.0		

Sec 22.1 Have you EVER been told by a doctor, nurse, or other health professional that you had cancer?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	21	1.5	1.5	1.5
	No	1393	97.5	98.5	100.0
	Total	1414	99.0	100.0	
Missing	Don't know/Not sure	2	.1		
	Refused	3	.2		
	System	10	.7		
	Total	15	1.0		
Total		1429	100.0		

Sec 22.2 How many different types of cancer have you had?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Only one	19	1.3	90.5	90.5
	Two	2	.1	9.5	100.0
	Total	21	1.5	100.0	
Missing	System	1408	98.5		
Total		1429	100.0		

Sec 22.3 At what age were you told that you had cancer?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	8	1	.1	4.8	4.8
	24	1	.1	4.8	9.5
	29	1	.1	4.8	14.3
	30	1	.1	4.8	19.0
	31	1	.1	4.8	23.8
	33	1	.1	4.8	28.6
	34	1	.1	4.8	33.3
	37	3	.2	14.3	47.6
	40	1	.1	4.8	52.4
	41	1	.1	4.8	57.1
	47	1	.1	4.8	61.9
	49	1	.1	4.8	66.7
	50	1	.1	4.8	71.4
	53	1	.1	4.8	76.2
	54	1	.1	4.8	81.0
	58	1	.1	4.8	85.7
	59	1	.1	4.8	90.5
	65	1	.1	4.8	95.2
	77	1	.1	4.8	100.0
	Total	21	1.5	100.0	
Missing	System	1408	98.5		
Total		1429	100.0		

Descriptive Statistics

	N	Minimum	Maximum	Mean	Std. Deviation
Sec 22.3 At what age were you told that you had cancer?	21	8	77	42.52	15.549

Sec 22.4 What type of cancer was it?

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1408	98.5	98.5	98.5
Breast cancer	7	.5	.5	99.0
Cervical cancer (cancer of the cervix)	2	.1	.1	99.2
Endometrial cancer (cancer of the uterus)	2	.1	.1	99.3
Ovarian cancer (cancer of the ovary)	1	.1	.1	99.4
Oral cancer	1	.1	.1	99.4
Liver cancer	2	.1	.1	99.6
Hodgkin's Lymphoma (Hodgkin's disease)	1	.1	.1	99.7
Prostate cancer	3	.2	.2	99.9
Other skin cancer	1	.1	.1	99.9
Other	1	.1	.1	100.0
Total	1429	100.0	100.0	

Mod 9.1 A mammogram is an x-ray of each breast to look for breast cancer. Have you ever had a mammogram?

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Yes	295	20.6	41.0	41.0
No	424	29.7	59.0	100.0
Total	719	50.3	100.0	
Missing Don't know/Not sure	3	.2		
Refused	3	.2		
System	704	49.3		
Total	710	49.7		
Total	1429	100.0		

Mod 9.2 How long has it been since you had your last mammogram?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Within the past year (anytime less than 12 months ago)	131	9.2	44.7	44.7
	Within the past 2 years (1 year but less than 2 years ago)	64	4.5	21.8	66.6
	Within the past 3 years (2 years but less than 3 years ago)	32	2.2	10.9	77.5
	Within the past 5 years (3 years but less than 5 years ago)	18	1.3	6.1	83.6
	5 or more years ago	48	3.4	16.4	100.0
	Total	293	20.5	100.0	
Missing	Don't know/Not sure	3	.2		
	System	1133	79.3		
	Total	1136	79.5		
Total		1429	100.0		

Mod 9.3 A clinical breast exam is when a doctor, nurse, or other health professional feels the breasts for lumps. Have you ever had a clinical breast exam?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	385	26.9	53.8	53.8
	No	331	23.2	46.2	100.0
	Total	716	50.1	100.0	
Missing	Don't know/Not sure	6	.4		
	Refused	3	.2		
	System	704	49.3		
	Total	713	49.9		
Total		1429	100.0		

Mod 9.4 How long has it been since your last breast exam?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Within the past year (anytime less than 12 months ago)	222	15.5	57.5	57.5
	Within the past 2 years (1 year but less than 2 years ago)	66	4.6	17.1	74.6
	Within the past 3 years (2 years but less than 3 years ago)	42	2.9	10.9	85.5
	Within the past 5 years (3 years but less than 5 years ago)	14	1.0	3.6	89.1
	5 or more years ago	42	2.9	10.9	100.0
	Total	386	27.0	100.0	
Missing	System	1043	73.0		
Total		1429	100.0		

Mod 9.5 A Pap test is a test for cancer of the cervix. Have you ever had a Pap test?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	526	36.8	73.4	73.4
	No	191	13.4	26.6	100.0
	Total	717	50.2	100.0	
Missing	Don't know/Not sure	5	.3		
	Refused	3	.2		
	System	704	49.3		
	Total	712	49.8		
Total		1429	100.0		

Mod 9.6 How long has it been since you had your last Pap test?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Within the past year (anytime less than 12 months ago)	278	19.5	53.2	53.2
	Within the past 2 years (1 year but less than 2 years ago)	96	6.7	18.4	71.5
	Within the past 3 years (2 years but less than 3 years ago)	58	4.1	11.1	82.6
	Within the past 5 years (3 years but less than 5 years ago)	32	2.2	6.1	88.7
	5 or more years ago	59	4.1	11.3	100.0
	Total	523	36.6	100.0	
Missing	Don't know/Not sure	6	.4		
	Refused	1	.1		
	System	899	62.9		
	Total	906	63.4		
Total		1429	100.0		

Mod 9.7 Have you had a hysterectomy?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	64	4.5	9.0	9.0
	No	645	45.1	91.0	100.0
	Total	709	49.6	100.0	
Missing	Refused	3	.2		
	System	717	50.2		
	Total	720	50.4		
Total		1429	100.0		

Mod 10.1 A Prostate-Specific Antigen test, also called a PSA test, is a blood test used to check men for prostate cancer. Have you ever had a PSA test?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	101	7.1	16.7	16.7
	No	503	35.2	83.3	100.0
	Total	604	42.3	100.0	
Missing	Don't know/Not sure	13	.9		
	Refused	1	.1		
	System	811	56.8		
	Total	825	57.7		
Total		1429	100.0		

Mod 10.2 How long has it been since you had your last PSA test?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Within the past year (anytime less than 12 months ago)	51	3.6	51.0	51.0
	Within the past 2 years (1 year but less than 2 years ago)	25	1.7	25.0	76.0
	Within the past 3 years (2 years but less than 3 years ago)	6	.4	6.0	82.0
	Within the past 5 years (3 years but less than 5 years ago)	8	.6	8.0	90.0
	5 or more years ago	10	.7	10.0	100.0
	Total	100	7.0	100.0	
Missing	Don't know/Not sure	2	.1		
	System	1327	92.9		
	Total	1329	93.0		
Total		1429	100.0		

Mod 10.3 A digital rectal exam is an exam in which a doctor, nurse, or other health professional places a gloved finger into the rectum to feel the size, shape, and hardness of the prostate gland. Have you ever had a digital rectal exam?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	95	6.6	15.5	15.5
	No	517	36.2	84.5	100.0
	Total	612	42.8	100.0	
Missing	Don't know/Not sure	1	.1		
	Refused	2	.1		
	System	814	57.0		
	Total	817	57.2		
Total		1429	100.0		

Mod 10.4 How long has it been since your last digital rectal exam?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Within the past year (anytime less than 12 months ago)	29	2.0	30.5	30.5
	Within the past 2 years (1 year but less than 2 years ago)	21	1.5	22.1	52.6
	Within the past 3 years (2 years but less than 3 years ago)	7	.5	7.4	60.0
	Within the past 5 years (3 years but less than 5 years ago)	9	.6	9.5	69.5
	5 or more years ago	29	2.0	30.5	100.0
	Total	95	6.6	100.0	
Missing	Don't know/Not sure	2	.1		
	System	1332	93.2		
	Total	1334	93.4		
Total		1429	100.0		

Mod 10.5 Have you ever been told by a doctor, nurse, or other health professional that you had prostate cancer?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	5	.3	.8	.8
	No	595	41.6	99.2	100.0
	Total	600	42.0	100.0	
Missing	Don't know/Not sure	3	.2		
	Refused	1	.1		
	System	825	57.7		
	Total	829	58.0		
Total		1429	100.0		

StateMod 1.1 Do you have deafness or trouble hearing in one or both ears?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	141	9.9	9.9	9.9
	No	1279	89.5	90.1	100.0
	Total	1420	99.4	100.0	
Missing	Don't know/Not sure	8	.6		
	Refused	1	.1		
	Total	9	.6		
Total		1429	100.0		

StateMod 1.2 Do you now use a hearing aid?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	10	.7	7.6	7.6
	No	121	8.5	92.4	100.0
	Total	131	9.2	100.0	
Missing	Don't know/Not sure	1	.1		
	System	1297	90.8		
	Total	1298	90.8		
Total		1429	100.0		

StateMod 1.3 When was the last time you had your hearing tested?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Within the past month (anytime less than 1 mo.)	74	5.2	5.7	5.7
	Within the past year (1mo. but less than 12 months ago)	105	7.3	8.0	13.7
	1 or more years ago	476	33.3	36.4	50.0
	Never	654	45.8	50.0	100.0
	Total	1309	91.6	100.0	
Missing	Don't know/Not sure	114	8.0		
	Refused	2	.1		
	System	4	.3		
	Total	120	8.4		
Total		1429	100.0		

StateMod 1.4 Are you aware that CHC now screens all newborn babies for hearing loss before leaving the hospital?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	910	63.7	68.1	68.1
	No	427	29.9	31.9	100.0
	Total	1337	93.6	100.0	
Missing	Don't know/Not sure	89	6.2		
	Refused	3	.2		
	Total	92	6.4		
Total		1429	100.0		

APPENDIX A
THE CNMI SAMPLING UNIVERSE
AT THE CENTRAL STATISTICS DIVISION

THE CNMI SAMPLING UNIVERSE AT THE CENTRAL STATISTICS DIVISION

The Central Statistics Division (CSD), Department of Commerce, first developed a sampling universe for the CNMI from the 1995 Census of Housing and Population. This paper-based universe was used in the various labor force and household surveys in the Commonwealth in the late 1990s. In the early 2000s, the CSD began creating a comprehensive database housing unit register for the CNMI with a GIS mapping component and began using this new sampling universe for labor force and household surveys in 2003. This universe was last updated in the summer of 2005. The sampling universe is described below.

THE CNMI HOUSING REGISTER

All housing units that existed in the CNMI—Saipan, Tinian, and Rota—in 2005 are listed in a register, hereon referred to as the Housing Register or just Register, which is tracked in a Microsoft Access database. The fields in the Housing Register includes island, Assignment Area (AA), Block, Map Spot (MS) number, Village name, Building type, Unit type, Occupancy status, Householder name, Ethnicity of the household head, and Phone number. Island, AA, Block, MS, and Village name allow for CSD to group housing units by geography; Building type and Unit type allow CSD to classify the type of living arrangements; and Occupancy status allows for CSD to determine occupancy/vacancy status of a housing unit. The last 3 fields—Householder name, Ethnicity, and Phone number—assist in locating the households during field work and were considered optional when CSD collected data to build the Register; all of the other fields were required when the Register was initially created and when updated in 2005. From this Housing Register and Housing Maps, described below, CSD is able to categorize housing units by geography type, by household type, by building type, and by occupancy status.

THE CNMI HOUSING MAPS

The location of all existing housing units in the CNMI in 2005 are digitized and tracked in Arcview 3.2 (an older version of ArcGIS). The shape files and tables in Arcview include the same geography fields in the CNMI Housing Register: Island, AA, Block, MS number, and Village name. There is a one-to-one relationship between these fields in Arcview and the same ones in the Housing Register.

To be able to uniquely identify and track each of the housing units in the CNMI, to be able to assign a group of housing units (in a manageable size) to a survey field worker, and to report the results of the surveys in a meaningful way, the three most populated islands in the CNMI are divided geographically into blocks, assignment areas, villages, village group, and election districts, described below.

Block Map

Each of the islands is divided into small geographic units; each of these small units is referred to as a Block. The size and boundary of each block was determined based on existing roads, mountains, cliff lines, streams, and prominent landmarks. Population concentration was also an important consideration for delineating block boundaries. As much as possible, where appropriate, the boundaries followed and were drawn consistent

with boundaries used in previous census block boundaries in prior years. The block maps for each of the islands represent these geographic blocks.

Assignment Area Map

In each of the islands, geographic blocks are combined to form Assignment Area (AAs). Similar to the formation of a block, the size and boundary of each AA was determined based on existing roads, mountains, cliff lines, and prominent landmarks. The number of houses in the area was an important factor in determining the size of the AAs. An important consideration was to keep the number of housing units in each AA manageable for field work. The AA maps represent these geographic assignment areas. See page 11 of this Appendix for an example of an AA geography map for Tinian.

Each AA is assigned a unique 4 digit number. AAs for Saipan are numbered using 1001 to 1999. Tinian AAs use 2001 to 2999, and Rota AAs use 3001 to 3999. Saipan has a total of 259 AAs, Tinian has 38, and Rota has 48.

A geographic block is assigned a 3 digit number. Each AA uses the same numbering series for its blocks; for example, blocks for AA 1027 are numbered 901, 902, and 903, up to 908. The combination of AA and Block numbers identify uniquely each of the blocks in the CNMI. See page 15 of this Appendix for an illustration of AA 1027 and its blocks, in Tanapag, Saipan.

Housing Unit Map Spot Number

Each of the buildings located within a block is mapped and each of the housing units within a block is assigned a unique number, referred to as the housing unit Map Spot number. The numbering of the housing units in a block always starts with one (1) and continues sequentially to however many is needed to account for all housing units in a particular block. A number is issued only once and never repeats within a particular block. The map spot number is 4 digits. See page 15 of this Appendix for an illustration of AA 1027, its blocks, and housing units map spot numbers within one of its blocks, Block 901.

Unique Housing Unit Identification Number (or Address)

Using the above scheme, each of the housing unit in the CNMI is given a unique identification number (or address) based on a combination of Island, AA, Block, and the housing units Map Spot number. For example, the 4th housing unit in Block 901, in AA 1027, in Tanapag, Saipan is given the housing identification (ID) number: 1-1027-901-0004. See page 15 for illustration. This unique housing ID is used to identify and track each of the housing units in the Housing Register in MS Access and in the Housing Maps tables and shape files in Arcview. It is also used in identifying and tracking a housing unit survey form, when doing field work, and is used to track the same housing unit record in the computer data files for data processing.

VILLAGE AND VILLAGE GROUP MAPS

Each of the three islands is divided into villages. The village boundaries were determined using old village maps for Saipan, Tinian and Rota and also from consulting with individuals familiar with what are commonly considered as village boundaries in the three islands. The village maps represent these geographic villages for Saipan, Tinian, and Rota. It must be noted--and it is an important note--that there are no formal village boundaries in existence in the CNMI yet. Hence, it is not uncommon for each of the various CNMI agencies and working groups to have their own

village boundaries that are different from one another when doing geography work in the Commonwealth. The village boundaries defined here are what the CSD considers as statistical boundaries which are used to report statistical summaries in the CNMI. In addition to individual village geography, individual contiguous villages are also grouped together to form larger geographic areas called Village Groups which are represented by the Village Group maps, See pages 4 through 14 which illustrate Village maps and Village Group maps for Saipan, Tinian, and Rota.

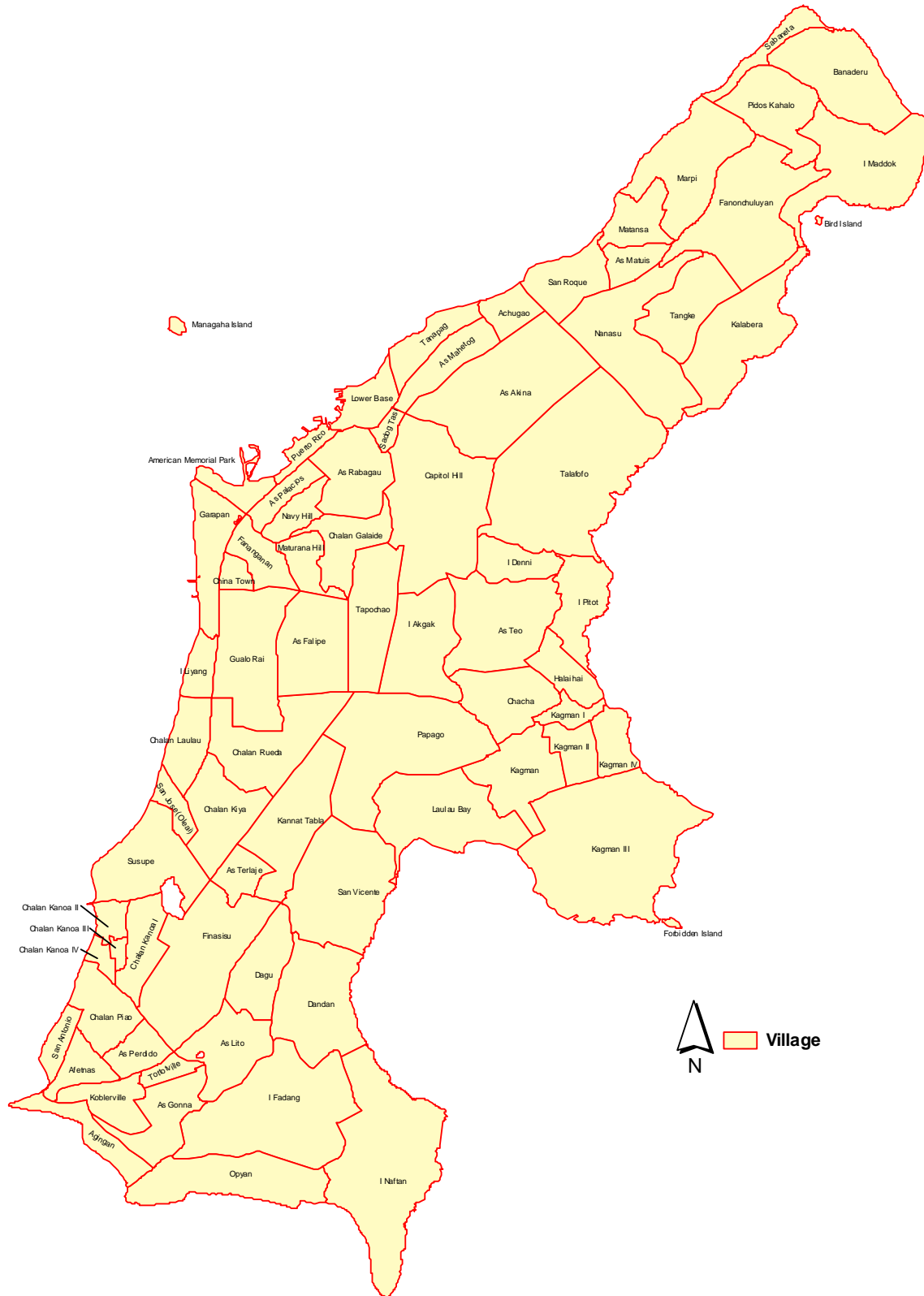
For statistical summary reporting purposes, the CSD produces reports by Island, by Village Group, and by individual villages when appropriate.

ELECTION DISTRICT MAP

The CSD also now can also report statistical summaries by election districts (ED) in the CNMI. The EDs are represented by the Election District maps. See page 6 for a map of EDs within Saipan. The island of Tinian is considered a single election district, ED 6, and so is the island of Rota which is ED 7.

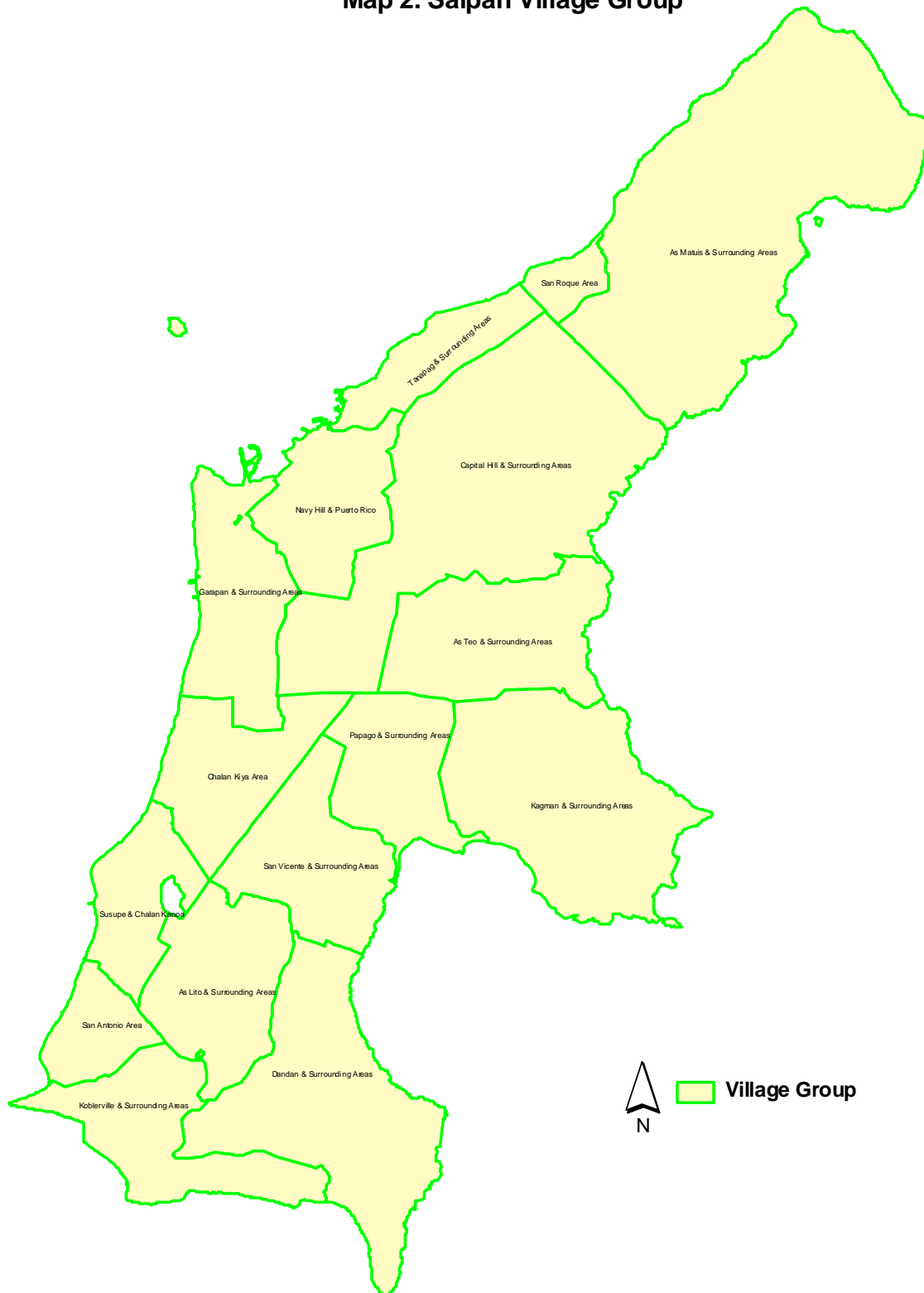
The CNMI Housing Register in MS Access was first completed in 2002. The Housing Maps in Arcview was completed for Saipan in 2003. The new sampling frame for Saipan was first used in conducting a survey in Saipan in 2003. In 2005, the sampling frame was expanded to include both Tinian and Rota.

Map 1. Saipan Village



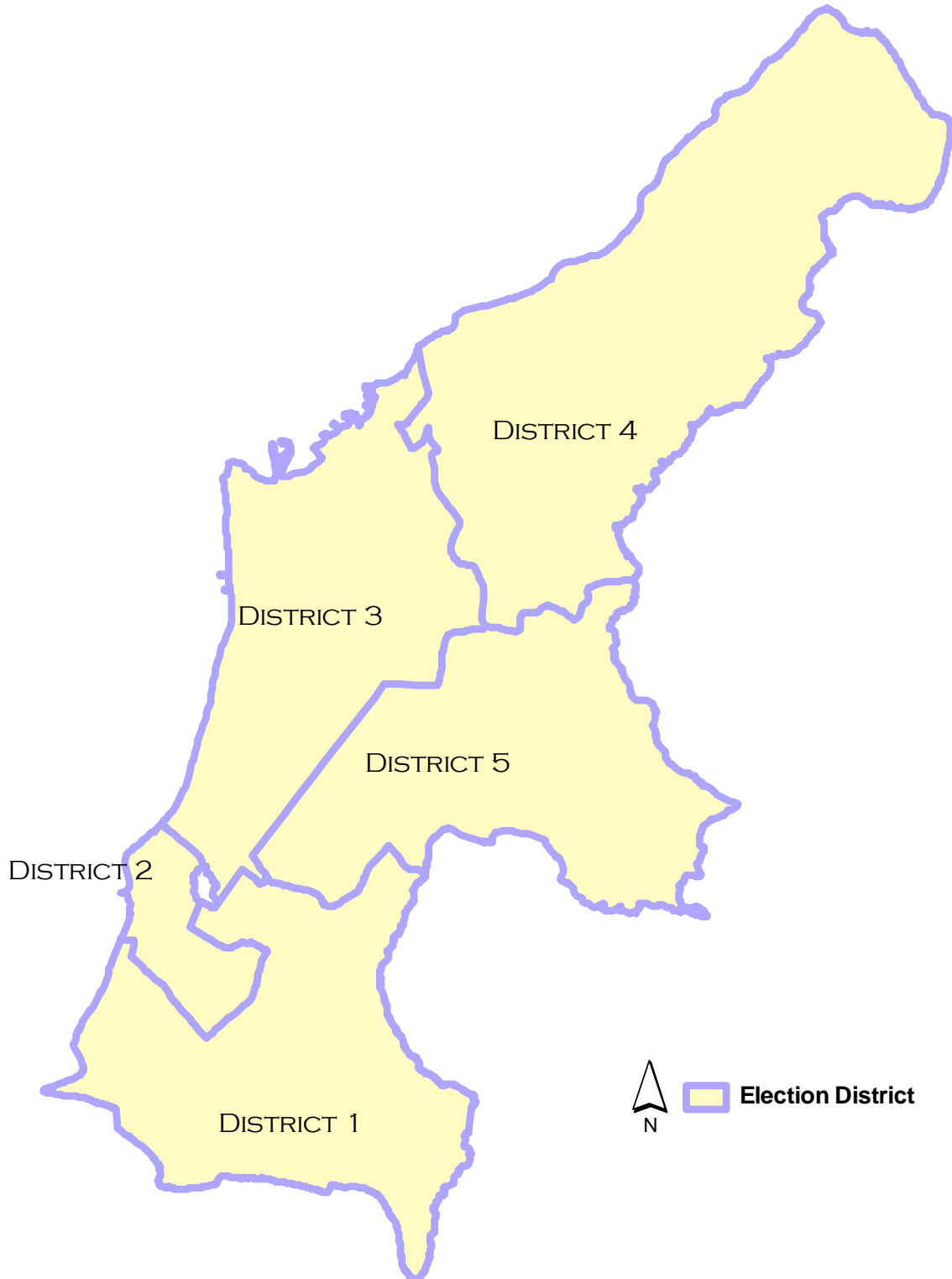
Source: Central Statistics Division
April 1, 2008

Map 2. Saipan Village Group



Source: Central Statistics Division
April 1, 2008

Map 3. Saipan Election District



Source: Central Statistics Division
April 1, 2008

The map displays the five election districts of Palau, each containing several villages. The districts are labeled as follows:

- DISTRICT 1** (South): Includes villages such as Opyan, I Nalran, I Fadang, As Gorma, As Lito, Dandan, Dagu, San Vicente, and Torokile.
- DISTRICT 2** (West): Includes villages such as Chalan Kanoa I, Chalan Kanoa II, Chalan Kanoa III, Chalan Kanoa IV, Chalan Piao, Koblerville, Meinas, Agatnan, and San Antonio.
- DISTRICT 3** (Central West): Includes villages such as Gaspan, American Memorial Park, Pulo 100, Lower Base, As Rabagsau, Navy Hill, Chalan Galaide, Tapodhiao, As Falipe, Gualo Rai, Iuyang, Chalan Lauau, Chalan Ruidei, Chalan Kiya, Kannat Tabla, As Terlaje, Finasitu, and Susupe.
- DISTRICT 4** (Central East): Includes villages such as As Akna, Capitol Hill, Talatolo, I Danni, I Plet, As Teo, I Aigak, Chacha, Kagman I, Kagman II, Kagman III, Kagman IV, Lauau Bay, Pspago, and Halahai.
- DISTRICT 5** (East): Includes villages such as As Mabelog, Tawaping, Achugao, San Roque, Nanasu, Tangle, Kalabera, Marpi, Pidos Kahalo, Banaderu, I Maddok, Fanondrukuyan, Metansa, As Makis, Bird Island, and Fobidden Island.

Other geographical features include Minagaha Island to the northwest and various smaller islands and reefs like I Nalran, I Nalran, and I Nalran.

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Map 5. Tinian Village



Source: Central Statistics Division
April 1, 2008

Map 6. Tinian Village Group



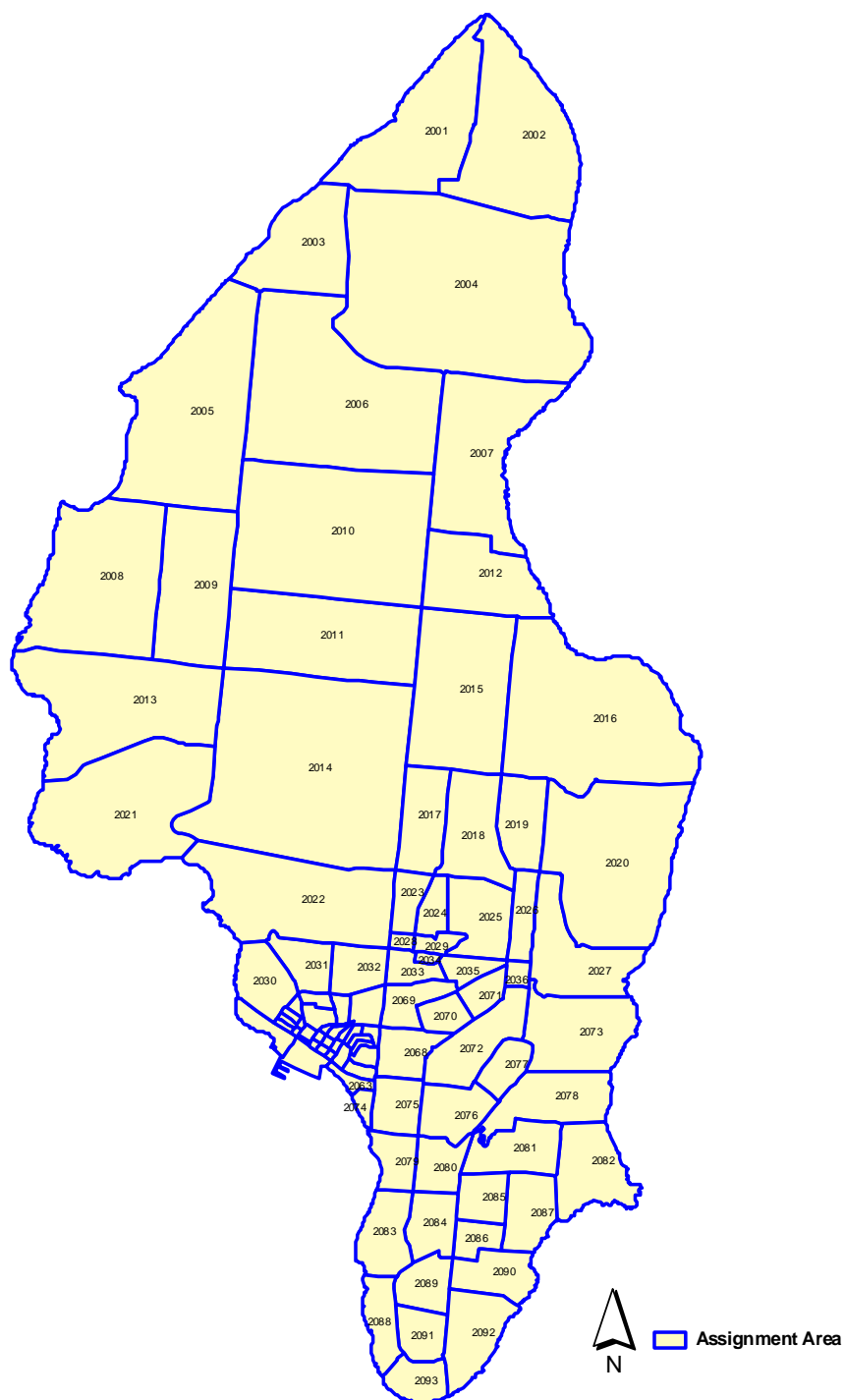
Source: Central Statistics Division
April 1, 2008

Map 7. Tinian Village & Village Group



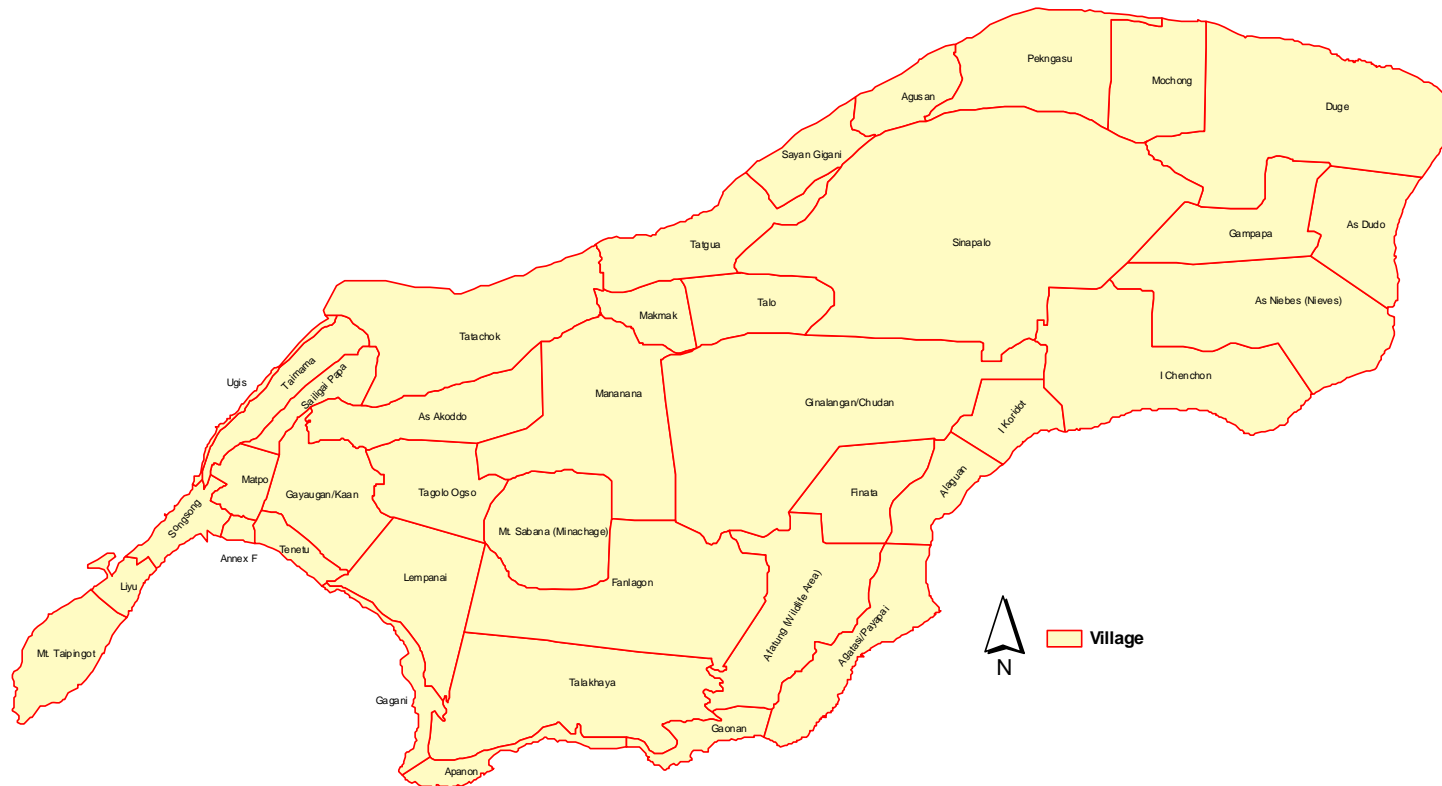
Source: Central Statistics Division
April 1, 2008

Map 8. Tinian Village



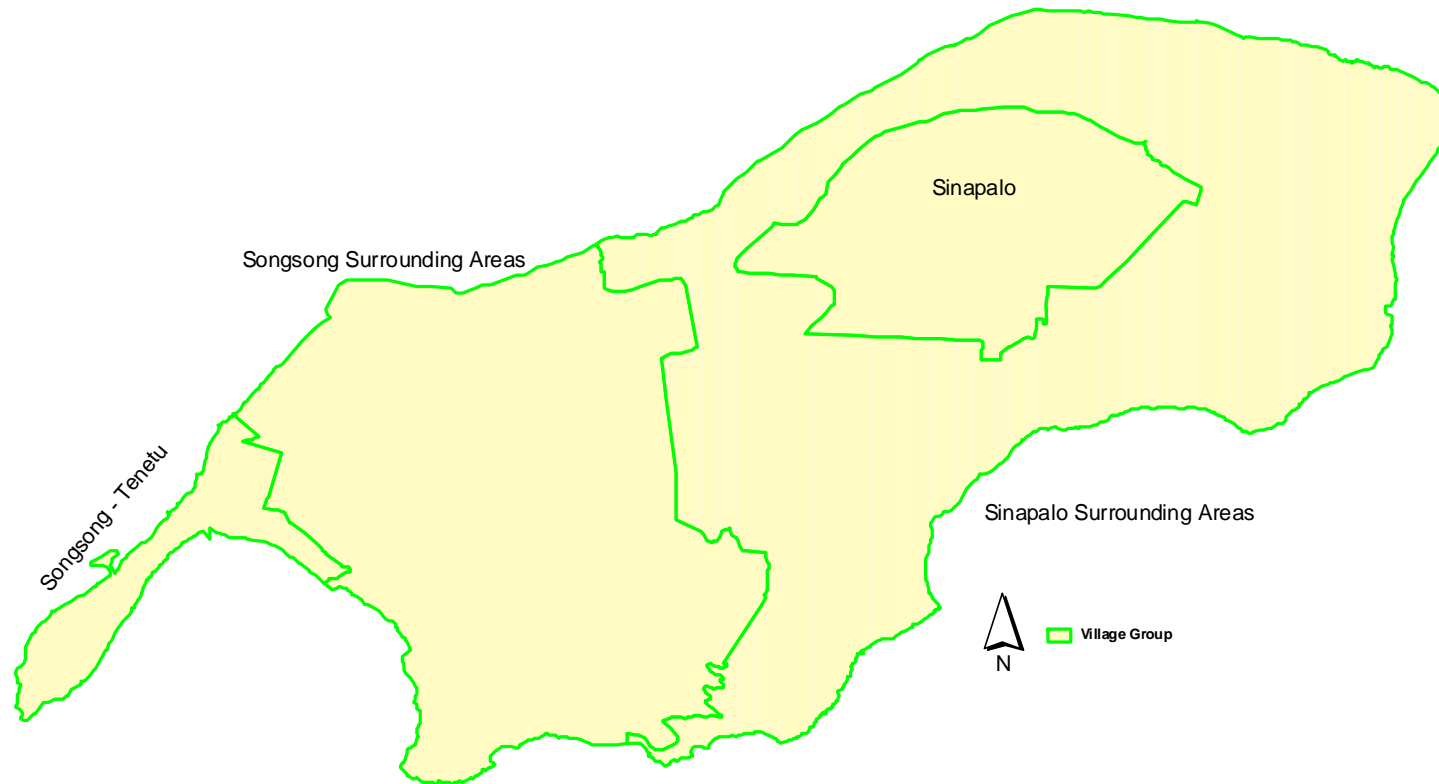
Source: Central Statistics Division
April 1, 2008

Map 9. Rota Village



Source: Central Statistics Division
April 1, 2005

Map 10. Rota Village Group

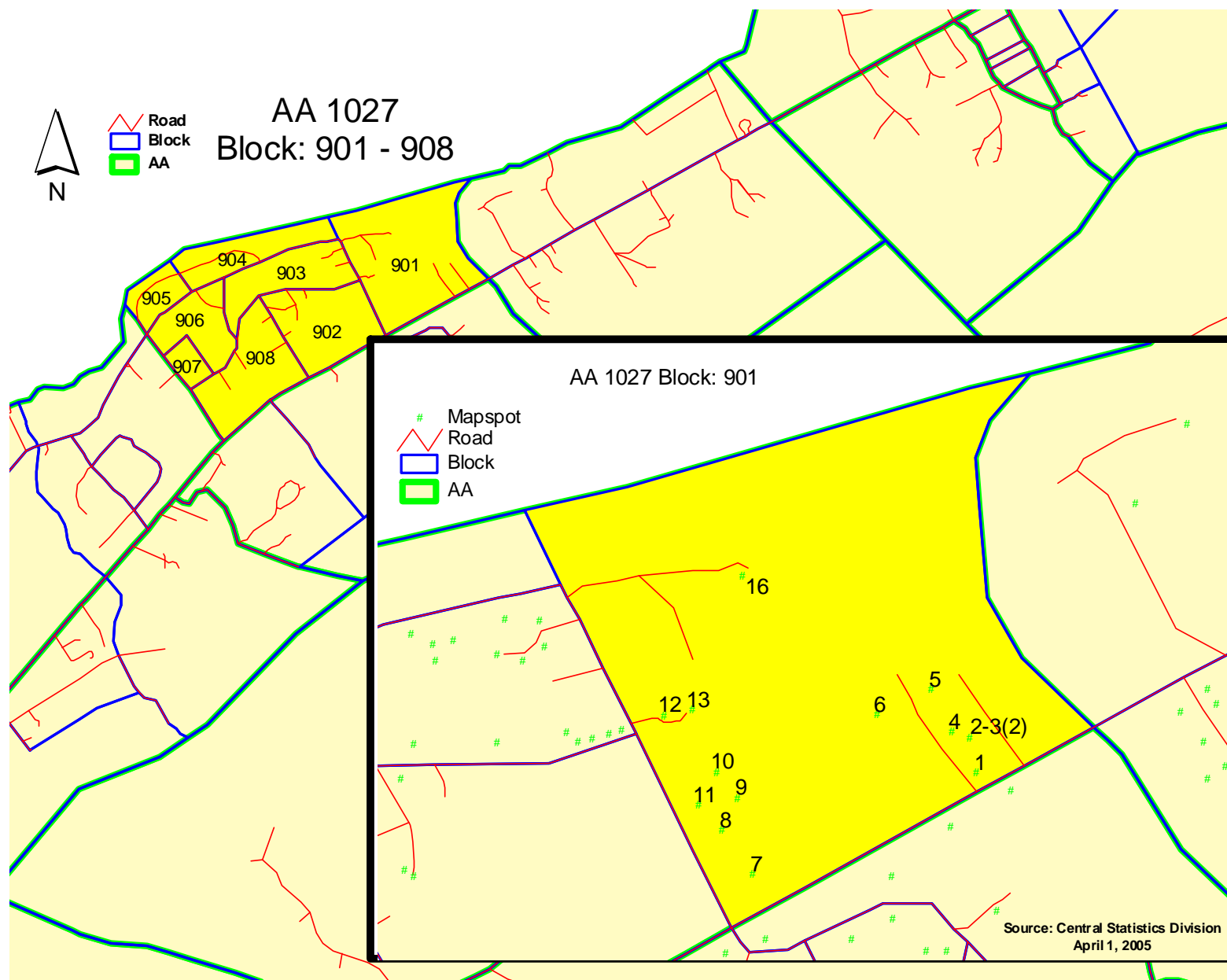


Source: Central Statistics Division
April 1, 2005

**Map 11. Rota Village
& Village Group**



Source: Central Statistics Division
April 1, 2005



APPENDIX B

THE 2009 BRFSS QUESTIONNAIRE FORM
COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS



2009 BEHAVIORAL RISK FACTOR SURVEILLANCE SYSTEM (BRFSS) SURVEY

COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS

Callback Documentation

1st Visit

--

2nd Visit

--

3rd Visit

--

Remarks

--

ENUMERATOR'S USE

A. AA

--	--	--	--

B. Block

--	--	--	--

C. Map Spot

--	--	--	--

D. ISLAND:

1. Saipan

2. Tinian

3. Rota

--

E. Precinct:

--

F. Village

--

G. Location description

--

H. Respondent's name:

--

I. Respondent's phone number:

--

J. HU Status

1. Occupied

2. Vacant

--

K. Population

--

--

L. Household Form Status

1. Completed
2. Last Resort
3. On vacation/off-island
4. No longer exist
5. Converted to business
6. Refusal

--

M. Enumerator (print name and sign):

Date:

--

--

Code

--

Office Use

Initial

Date

Reviewing

--

--

Coding 1

--

--

Coding 2

--

--

Coding 3

--

--

Keying

--

--

HOUSEHOLD ROSTER

NOTE: For residence Rules, See BACK of Questionnaire

Please give me the name of each person living here on August 1, 2009, including all persons staying here who have no other home. If EVERYONE is staying here temporarily and usually lives somewhere else, give me the name of each person. Begin with the household member in whose name the home is owned, being bought, or rented. If there is no such person, start with any adult household member. *Print last name, first name, middle initial, age, gender, height, and body weight for each person.*

	Last Name	First Name	Middle Initial	Age	Gender	Height (ft/inches)	Body Weight (lbs.)
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
16							
17							
18							
19							
20							

Section 1: Health Status

1.1 Would you say that in general your health is—

Please read:

1 Excellent 2 Very good 3 Good 4 Fair **Or** 5 Poor

Do not read:

77 Don't know / Not sure 99 Refused

— —

Section 2: Healthy Days — Health-Related Quality of Life

2.1 Now thinking about your physical health, which includes physical illness and injury, for how many days during the past 30 days was your physical health not good?

__ Number of days 88 None 77 Don't know / Not sure 99 Refused

— —

2.2 Now thinking about your mental health, which includes stress, depression, and problems with emotions, for how many days during the past 30 days was your mental health not good?

__ Number of days

88 None [If Q2.1 and Q2.2 = 88 (None), go to Section 3]

77 Don't know / Not sure

99 Refused

— —

2.3 During the past 30 days, for about how many days did poor physical or mental health keep you from doing your usual activities, such as self-care, work, or recreation?

__ Number of days 88 None 77 Don't know / Not sure 99 Refused

— —

Section 3: Health Care Access

3.1 Do you have any kind of health care coverage, including health insurance, prepaid plans such as HMOs, or government plans such as Medicare?

1 Yes 2 No 7 Don't know / Not sure 9 Refused

—

3.2 Do you have one person you think of as your personal doctor or health care provider?

If “No,” ask: “Is there more than one, or is there no person who you think of as your personal doctor or health care provider?”

1 Yes, only one

7 Don't know / Not sure

2 More than one

9 Refused

3 No

—

3.3 Was there a time in the past 12 months when you needed to see a doctor but could not because of cost?

1 Yes

7 Don't know / Not sure

2 No

9 Refused

—

3.4 About how long has it been since you last visited a doctor for a routine checkup? A routine checkup is a general physical exam, not an exam for a specific injury, illness, or condition.

1 Within past year (anytime less than 12 months ago)

2 Within past 2 years (1 year but less than 2 years ago)

3 Within past 5 years (2 years but less than 5 years ago)

4 5 or more years ago

7 Don't know / Not sure

8 Never

9 Refused

—

Section 4: Sleep

The next question is about getting enough rest or sleep.

- 4.1 During the past 30 days, for about how many days have you felt you did not get enough rest or sleep? __ __

__ Number of days 88 None 77 Don't know / Not sure 99 Refused

Section 5: Exercise

- 5.1 During the past month, other than your regular job, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise?

1 Yes 7 Don't know / Not sure
2 No 9 Refused __

Section 6: Diabetes

- 6.1 Have you ever been told by a doctor that you have diabetes?

If **"Yes"** and respondent is **female**, ask: **"Was this only when you were pregnant?"**

If respondent says pre-diabetes or borderline diabetes, use response code 4.

- 1 Yes **[Go to Module 2]**
2 Yes, but female told only during pregnancy **[Go to Module 1]** __
3 No **[Go to Module 1]**
4 No, pre-diabetes or borderline diabetes **[Go to Module 1]**
7 Don't know / Not sure **[Go to Module 1]** 9 Refused **[Go to Module 1]**

Module 1: Pre-Diabetes

NOTE: Only asked of those not responding "Yes" (code = 1) to Core Q6.1 (Diabetes awareness question).

1. Have you had a test for high blood sugar or diabetes within the past three years?

1 Yes 7 Don't know / Not sure
2 No 9 Refused __

NOTE: If Core Q6.1 = 4 (No, pre-diabetes or borderline diabetes); answer Q2 "Yes" (code = 1).

2. Have you ever been told by a doctor or other health professional that you have pre-diabetes or borderline diabetes?

If **"Yes"** and respondent is **female**, ask: **"Was this only when you were pregnant?"**

- 1 Yes 7 Don't know / Not sure [Go to Section 7]
2 Yes, during pregnancy 9 Refused [Go to Section 7] __
3 No [Go to Section 7]

Module 2: Diabetes

To be asked following Core Q6.1; if response is "Yes" (code = 1)

1. How old were you when you were told you have diabetes?

__ Code age in years **[97 = 97 and older]** 98 Don't know / Not sure 99 Refused __ __

			Code
2. Are you now taking insulin?			
1 Yes	2 No	9 Refused	___
3. About how often do you check your blood for glucose or sugar? Include times when checked by a family member or friend, but do NOT include times when checked by a health professional.			
1 __ Times per day		888 Never	
2 __ Times per week		777 Don't know / Not sure	___
3 __ Times per month		999 Refused	
4 __ Times per year			
4. About how often do you check your feet for any sores or irritations? Include times when checked by a family member or friend, but do NOT include times when checked by a health professional.			
1 __ Times per day		555 No feet	
2 __ Times per week		888 Never	___
3 __ Times per month		777 Don't know / Not sure	
4 __ Times per year		999 Refused	
5. About how many times in the past 12 months have you seen a doctor, nurse, or other health professional for your diabetes?			
__ Number of times [76 = 76 or more]		77 Don't know / Not sure	
88 None		99 Refused	___
6. A test for "A one C" measures the average level of blood sugar over the past three months. About how many times in the past 12 months has a doctor, nurse, or other health professional checked you for "A one C"?			
__ Number of times [76 = 76 or more]		77 Don't know / Not sure	
88 None		99 Refused	
98 Never heard of "A one C" test			___
NOTE: If Q4 = 555 (No feet), go to Q8.			
7. About how many times in the past 12 months has a health professional checked your feet for any sores or irritations?			
__ Number of times [76 = 76 or more]		77 Don't know / Not sure	
88 None		99 Refused	___
8. When was the last time you had an eye exam in which the pupils were dilated? This would have made you temporarily sensitive to bright light.			
Read only if necessary:		Do not read:	
1 Within the past month (anytime less than 1 month ago)		7 Don't know / Not sure	
2 Within the past year (1 month but less than 12 months ago)		8 Never	
3 Within the past 2 years (1 year but less than 2 years ago)		9 Refused	___
4 2 or more years ago			

		Code
9.	Has a doctor ever told you that diabetes has affected your eyes or that you had retinopathy? <i>Retinopathy is a general term that refers to some form of non-inflammatory damage to the retina of the eye.</i>	_____
1	Yes	
2	No	
7	Don't know / Not sure	
9	Refused	
10.	Have you ever taken a course or class in how to manage your diabetes yourself?	_____
1	Yes	
2	No	
7	Don't know / Not sure	
9	Refused	

Section 7: Hypertension Awareness

NOTE: If Core Q7.1 = 1 (Yes); continue. Otherwise, go to Section 8.

7.1	Have you EVER been told by a doctor, nurse, or other health professional that you have high blood pressure?	_____
	If "Yes" and respondent is female, ask: "Was this only when you were pregnant?"	
1	Yes [Go to Q 7.2]	
2	Yes, but female told only during pregnancy [Go to Section 8]	
3	No [Go to Section 8]	
4	Told borderline high or pre-hypertensive [Go to Section 8]	
7	Don't know / Not sure [Go to Section 8]	
9	Refused [Go to Section 8]	
7.2	Are you currently taking medicine for your high blood pressure?	_____
1	Yes	
2	No	
7	Don't know / Not sure	
9	Refused	

Module 7: Actions to Control High Blood Pressure

Are you now doing any of the following to help lower or control your high blood pressure?

1.	(Are you) changing your eating habits (to help lower or control your high blood pressure)?	_____
1	Yes	
2	No	
7	Don't know / Not sure	
9	Refused	
2.	(Are you) cutting down on salt (to help lower or control your high blood pressure)?	_____
1	Yes	
2	No	
3	Do not use salt	
7	Don't know / Not sure	
9	Refused	
3.	(Are you) reducing alcohol use (to help lower or control your high blood pressure)?	_____
1	Yes	
2	No	
3	Do not drink	
7	Don't know / Not sure	
9	Refused	

		Code
4.	(Are you) exercising (to help lower or control your high blood pressure)?	
1	Yes	
2	No	
7	Don't know / Not sure	
9	Refused	
Has a doctor or other health professional ever advised you to do any of the following to help lower or control your high blood pressure?		
5.	(Ever advised you to) change your eating habits (to help lower or control your high blood pressure)?	
1	Yes	
2	No	
7	Don't know / Not sure	
9	Refused	
6.	(Ever advised you to) cut down on salt (to help lower or control your high blood pressure)?	
1	Yes	
2	No	
3	Do not use salt	
7	Don't know / Not sure	
9	Refused	
7.	(Ever advised you to) reduce alcohol use (to help lower or control your high blood pressure)?	
1	Yes	
2	No	
3	Do not drink	
7	Don't know / Not sure	
9	Refused	
8.	(Ever advised you to) exercise (to help lower or control your high blood pressure)?	
1	Yes	
2	No	
7	Don't know / Not sure	
9	Refused	
9.	(Ever advised you to) take medication (to help lower or control your high blood pressure)?	
1	Yes	
2	No	
7	Don't know / Not sure	
9	Refused	
10.	Were you told on two or more different visits to a doctor or other health professional that you had high blood pressure?	
If " <u>Yes</u> " AND respondent is <u>female</u> , ask: " <i>Was this only when you were pregnant?</i> "		
1	Yes	
2	Yes, but female told only during pregnancy	
3	No	
4	Told borderline or pre-hypertensive	
7	Don't know / Not sure	
9	Refused	
Section 8: Cholesterol Awareness		
8.1	Blood cholesterol is a fatty substance found in the blood. Have you EVER had your blood cholesterol checked?	
1	Yes	
2	No [Go to Module 8]	
7	Don't know / Not sure [Go to Module 8]	
9	Refused [Go to Module 8]	

8.2 About how long has it been since you last had your blood cholesterol checked?	Code
<p>Read only if necessary:</p> <p>1 Within the past year (anytime less than 12 months ago)</p> <p>2 Within the past 2 years (1 year but less than 2 years ago)</p> <p>3 Within the past 5 years (2 years but less than 5 years ago)</p> <p>4 5 or more years ago</p>	<p>Do not read:</p> <p>7 Don't know / Not sure</p> <p>9 Refused</p> <p>_____</p>
<p>8.3 Have you EVER been told by a doctor, nurse or other health professional that your blood cholesterol is high?</p> <p>1 Yes</p> <p>2 No</p>	<p>7 Don't know / Not sure</p> <p>9 Refused</p> <p>_____</p>

Module 8: Heart Attack and Stroke

Now I would like to ask you about your knowledge of the signs and symptoms of a heart attack and stroke. Which of the following do you think is a symptom of a heart attack? For each, tell me "yes," "no," or you're "not sure."

<p>1. (Do you think) pain or discomfort in the jaw, neck, or back (are symptoms of a heart attack?)</p> <p>1 Yes</p> <p>2 No</p>	<p>7 Don't know / Not sure</p> <p>9 Refused</p> <p>_____</p>
<p>2. (Do you think) feeling weak, lightheaded, or faint (are symptoms of a heart attack?)</p> <p>1 Yes</p> <p>2 No</p>	<p>7 Don't know / Not sure</p> <p>9 Refused</p> <p>_____</p>
<p>3. (Do you think) chest pain or discomfort (are symptoms of a heart attack?)</p> <p>1 Yes</p> <p>2 No</p>	<p>7 Don't know / Not sure</p> <p>9 Refused</p> <p>_____</p>
<p>4. (Do you think) sudden trouble seeing in one or both eyes (is a symptom of a heart attack?)</p> <p>1 Yes</p> <p>2 No</p>	<p>7 Don't know / Not sure</p> <p>9 Refused</p> <p>_____</p>
<p>5. (Do you think) pain or discomfort in the arms or shoulder (are symptoms of a heart attack?)</p> <p>1 Yes</p> <p>2 No</p>	<p>7 Don't know / Not sure</p> <p>9 Refused</p> <p>_____</p>
<p>6. (Do you think) shortness of breath (is a symptom of a heart attack?)</p> <p>1 Yes</p> <p>2 No</p>	<p>7 Don't know / Not sure</p> <p>9 Refused</p> <p>_____</p>

Which of the following do you think is a symptom of a stroke? For each, tell me “yes,” “no,” or you’re “not sure.”		Code
7. (Do you think) sudden confusion or trouble speaking (are symptoms of a stroke?) <div> <div>1 Yes</div> <div>7 Don't know / Not sure</div> </div> <div> <div>2 No</div> <div>9 Refused</div> </div>		_____
8. (Do you think) sudden numbness or weakness of face, arm, or leg, especially on one side, (are symptoms of a stroke?) <div> <div>1 Yes</div> <div>7 Don't know / Not sure</div> </div> <div> <div>2 No</div> <div>9 Refused</div> </div>		_____
9. (Do you think) sudden trouble seeing in one or both eyes (is a symptom of a stroke?) <div> <div>1 Yes</div> <div>7 Don't know / Not sure</div> </div> <div> <div>2 No</div> <div>9 Refused</div> </div>		_____
10. (Do you think) sudden chest pain or discomfort (are symptoms of a stroke?) <div> <div>1 Yes</div> <div>7 Don't know / Not sure</div> </div> <div> <div>2 No</div> <div>9 Refused</div> </div>		_____
11. (Do you think) sudden trouble walking, dizziness, or loss of balance (are symptoms of a stroke?) <div> <div>1 Yes</div> <div>7 Don't know / Not sure</div> </div> <div> <div>2 No</div> <div>9 Refused</div> </div>		_____
12. (Do you think) severe headache with no known cause (is a symptom of a stroke?) <div> <div>1 Yes</div> <div>7 Don't know / Not sure</div> </div> <div> <div>2 No</div> <div>9 Refused</div> </div>		_____
13. If you thought someone was having a heart attack or a stroke, what is the first thing you would do? <div> <div> Please read: <div> <div>1 Take them to the hospital</div> <div>2 Tell them to call their doctor</div> <div>3 Call 911</div> <div>4 Call their spouse or a family member</div> </div> <div> Or <div>5 Do something else</div> </div> </div> <div> Do not read: <div> <div>7 Don't know / Not sure</div> <div>9 Refused</div> </div> </div> </div>		_____

Section 9: Cardiovascular Disease Prevalence

Now I would like to ask you some questions about cardiovascular disease.

Has a doctor, nurse, or other health professional EVER told you that you had any of the following? For each, tell me “Yes,” “No,” or you’re “Not sure.”

9.1 (Ever told) you had a heart attack, also called a myocardial infraction?

1 Yes

7 Don’t know / Not sure

2 No

9 Refused

9.2 (Ever told) you had angina or coronary heart disease?

1 Yes

7 Don’t know / Not sure

2 No

9 Refused

9.3 (Ever told) you had a stroke?

1 Yes

7 Don’t know / Not sure

2 No

9 Refused

Section 10: Asthma

10.1 Have you ever been told by a doctor, nurse, or other health professional that you had asthma?

1 Yes

7 Don’t know / Not sure **[Go to Section 11]**

2 No **[Go to Section 11]**

9 Refused **[Go to Section 11]**

10.2 Do you still have asthma?

1 Yes

7 Don’t know / Not sure

2 No

9 Refused

Section 11: Tobacco Use

11.1 Have you smoked at least 100 cigarettes in your entire life?

NOTE: 5 pack = 100 cigarettes

1 Yes

7 Don’t know / Not sure **[Go to Q11.5]**

2 No **[Go to Q11.5]**

9 Refused **[Go to Q11.5]**

11.2 Do you now smoke cigarettes every day, some days, or not at all?

1 Every day

7 Don’t know / Not sure **[Go to Q11.5]**

2 Some days

9 Refused **[Go to Q11.5]**

3 Not at all **[Go to Q11.4]**

NOTE: If Q11.2 = 3 (Not at all); continue. Otherwise, go to Q11.5.

11.3 During the past 12 months, have you stopped smoking for one day or longer because you were trying to quit smoking?

1 Yes **[Go to Q11.5]**

7 Don’t know / Not sure **[Go to Q11.5]**

2 No **[Go to Q11.5]**

9 Refused **[Go to Q11.5]**

		Code
11.4	<p>How long has it been since you last smoked cigarettes regularly?</p> <p>01 Within the past month (less than 1 month ago)</p> <p>02 Within the past 3 months (1 month but less than 3 months ago)</p> <p>03 Within the past 6 months (3 months but less than 6 months ago)</p> <p>04 Within the past year (6 months but less than 1 year ago)</p> <p>05 Within the past 5 years (1 year but less than 5 years ago)</p> <p>06 Within the past 10 years (5 years but less than 10 years ago)</p> <p>07 10 years or more</p> <p>08 Never smoked regularly</p> <p>77 Don't know / Not sure</p>	<p>99 Refused</p>
11.5	<p>Do you currently use chewing tobacco, or snuff every day, some days, or not at all?</p> <p>Please Read:</p> <p>1 Every day</p> <p>2 Some days</p> <p>3 Not at all</p>	<p>Do not read:</p> <p>7 Don't know / Not sure</p> <p>9 Refused</p>
11.6	<p>Do you chew betel nut? (With or without Leaf.)</p> <p>1 Yes</p> <p>2 No [Go to Section 12]</p>	<p>9 Refused [Go to Section 12]</p>
11.7	<p>Do you chew betel nut with lime and tobacco?</p> <p>Please Read:</p> <p>1 Yes, Lime Only</p> <p>2 Yes, Tobacco Only</p> <p>3 Yes, Both</p>	<p>Do Not Read:</p> <p>4 No</p> <p>9 Refused</p>

Section 12: Demographics

12.1	What is your age?			
	__ Code age in years	07 Don't know / Not sure	09 Refused	— —
12.2	What is your ethnic origin or race?			
	Ethnicity 1: _____	7 Don't know / Not sure		
	Ethnicity 2: _____	9 Refused		
	Ethnicity 3: _____			
	Ethnicity 4: _____			

			Code
12.3	<p>Which one or more of the following would you say is your race?</p> <p><i>Check all that apply.</i></p> <p>Please read:</p> <div> <input type="checkbox"/> 1 White <input type="checkbox"/> 2 Black or African American <input type="checkbox"/> 3 Asian <input type="checkbox"/> 4 Native Hawaiian or Other Pacific Islander <input type="checkbox"/> 5 American Indian or Alaska Native </div> <p>Do not read:</p> <div> <input type="checkbox"/> 7 Don't know / Not sure <input type="checkbox"/> 8 No additional choices <input type="checkbox"/> 9 Refused </div> <p>Or</p> <input type="checkbox"/> 6 Other [specify]_____		<p>_____</p>
<p>NOTE: If more than one response to Q12.3, continue. Otherwise, Go to Q12.5.</p>			
12.4	<p>Which one of these groups would you say best represents your race? (Circle Only One.)</p> <p>Please read:</p> <div> 1 White 2 Black or African American 3 Asian 4 Native Hawaiian or Other Pacific Islander 5 American Indian or Alaska Native 6 Other [specify]_____ </div> <p>Do not read:</p> <div> 7 Don't know / Not sure 8 No additional choices 9 Refused </div>		<p>_____</p>
12.5	<p>Have you ever served on active duty in the United States Armed Forces, either in the regular military or in a National Guard or military reserve unit? Active duty does not include training for the Reserves or National Guard, but DOES include activation, for example, for the Persian Gulf War. Would you say...?</p> <div> 1 Yes, now on active duty 2 Yes, on active duty during the last 12 months, but not now 3 Yes, on active duty in the past, but not during the last 12 months 4 No, training for Reserves or National Guard only 5 No, never served in the military 7 Don't know / Not sure 9 Refused </div>		<p>_____</p>
12.6	<p>What is your Marital Status?</p> <p>Please read:</p> <div> 1 Married 2 Divorced 3 Widowed 4 Separated 5 Never married </div> <p>Do not read:</p> <div> 9 Refused </div> <p>Or</p> <div> 6 A member of an unmarried couple </div>		<p>_____</p>
12.7	<p>How many children less than 18 years of age live in your household?</p> <div> __ Number of children 88 None 99 Refused </div>		<p>__ __</p>

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

Code

Read only if necessary:

Do not read:

- 1 Never attended school or only attended kindergarten
- 2 Grades 1 through 8 (Elementary)
- 3 Grades 9 through 11 (Some high school)
- 4 Grade 12 or GED (High school graduate)
- 5 College 1 year to 3 years (Some college or technical school)
- 6 College 4 years or more (College graduate)

- 9 Refused

12.9 Are you currently...?

Please read:

- 1 Employed for wages
- 2 Self-employed
- 3 Out of work for more than 1 year
- 4 Out of work for less than 1 year

- 5 Homemaker
- 6 A Student
- 7 Retired
- 8 Unable to work

Do not read:

- 9 Refused

12.10 What is your annual household income? (Include all sources)

*Interviewer Note: Only include Employed Household Members and those that receive income. If respondent refuses to **ANY**, code '99' (Refused).*

Total Annual Income: _____

Person __ : _____

77 Don't know / Not sure

Person __ : _____

99 Refused

Person __ : _____

00 No Income

Person __ : _____

Person __ : _____

Person __ : _____

Person __ : _____

Person __ : _____

Person __ : _____

Person __ : _____

Person __ : _____

Person __ : _____

Person __ : _____

12.11 About how much do you weigh without shoes?

Round fractions up. Cross (X) the Appropriate Unit of Measurement.

---- ☐ [Pounds] ☐ [Kilograms]

7777 Don't know / Not sure

9999 Refused

NOTE: If Q12.11 = 7777 (Don't Know/Not sure) or 9999 (Refused), skip Q12.13 and Q12.14.

		Code
12.12	<p>About how tall are you without shoes?</p> <p>Round fractions down. Cross (X) the Appropriate Unit of Measurement.</p> <p>__ / __ <input type="radio"/> [Feet / inches] <input type="radio"/> [Meters / Centimeters]</p> <p>77/ 77 Don't know / Not sure 99/ 99 Refused</p>	__ / __
12.13	<p>How much did you weigh a year ago? [If you were pregnant a year ago, how much did you weigh before your pregnancy?] <i>NOTE: If female respondent and age <46.</i></p> <p>Round fractions up. Cross (X) the Appropriate Unit of Measurement.</p> <p>---- <input type="radio"/> [Pounds] <input type="radio"/> [Kilograms]</p> <p>7777 Don't know / Not sure [Go to Q12.15] 9999 Refused [Go to Q12.15]</p> <p><i>NOTE: Subtract weight one year ago from current weight. If weight is same, skip Q12.14.</i></p>	----
12.14	<p>Was the change between your current weight and your weight a year ago intentional?</p> <p>1 Yes 7 Don't know / Not sure</p> <p>2 No 9 Refused</p>	—
12.15	<p>Does this household get water from ---</p> <p>Please Read:</p> <p>1 A Public System? 4 A Public Standpipe?</p> <p>2 A Public System and Cistern? 5 Individual Well or Spring or Other?</p> <p>3 A Cistern, Tanks, or Drums only?</p> <p>Do Not Read:</p> <p>7 Don't know / Not Sure 9 Refused</p> <p><i>INTERVIEWER NOTE: Only ask 12.15a if Core Q 12.15 = 1 or 2. Otherwise Go to Q 12.16.</i></p>	—
12.15a	<p>Is this public system 24 hours?</p> <p>1 Yes 7 Don't know / Not sure</p> <p>2 No 9 Refused</p>	—
12.16	<p>Do you purchase drinking water?</p> <p>1 Yes 7 Don't know / Not sure</p> <p>2 No 9 Refused</p>	—
12.17	<p>Does this household have electric power?</p> <p>1 Yes 7 Don't know / Not sure</p> <p>2 No 9 Refused</p>	—
12.19	<p>Does this household have a telephone?</p> <p>1 Yes [Go to Q 12.19a] 7 Don't know / Not sure [Go to Q 12.20]</p> <p>2 No [Go to Q 12.20] 9 Refused [Go to Q 12.20]</p>	—
12.19a	<p>Is this a residential line?</p> <p>1 Yes 7 Don't know / Not sure</p> <p>2 No 9 Refused</p>	—

INTERVIEWER NOTE: Ask only if necessary.		Code
12.20	Indicate sex of respondent.	
1	Male [Go to next Section 13]	___
2	Female [If respondent is 45 years old or older , go to Section 13. Otherwise go to Q12.21]	
INTERVIEWER NOTE: Ask only if respondent is Female & <u>44 years or younger</u> .		
12.21	To your knowledge, are you now pregnant?	
1	Yes	
2	No	
7	Don't know / Not sure	___
9	Refused	
<div>Section 13: Caregiver Status</div>		
People may provide regular care or assistance to a friend or family member who has a health problem, long-term illness, or disability.		
13.1	During the past month, did you provide any such care or assistance to a friend or family member?	
1	Yes	
2	No [Go to Section 14]	
7	Don't know / Not sure [Go to Section 14]	
9	Refused [Go to Section 14]	___
Module 18: Caregiver		
NOTE: If Core13.1 = 1 (Yes), continue. Otherwise, go to next module.		
Previously, you said that you provide care to a friend or family member.		
1.	What age is the person to whom you are giving care?	
INTERVIEWER NOTE: If more than one person, ask "What is the age of the person to whom you are giving the most care?"		
___ Code age in years [0-115]		___
777	Don't know / Not sure	
999	Refused	
The remainder of these questions will be about the person to whom you are giving the most care.		
2.	Is this person male or female?	
1	Male	
2	Female	
9	Refused	___
3.	What is his/her relationship to you? For example is he/she your (mother/daughter or father/son)?	
Do not read:		
01	Parent	
02	Parent-in-law	
03	Child	
04	Spouse	
05	Sibling	
06	Grandparent	
07	Grandchild	
09	Non-relative	
77	Don't know / Not sure	___
99	Refused	

4. For how long have you provided care for [NOTE: code from Q3]. If Q3 = 77 (Don't know/not sure) or 99 (Refused); say "that person." NOTE: Code using respondent's unit of time.

1 _ _ Days

4 _ _ Years

2 _ _ Weeks

777 Don't know / Not sure

3 _ _ Months

999 Refused

Code

5. What has a doctor said is the major health problem, long-term illness, or disability that the person you care for has?

Cross (X) only one condition.

Do not read:

Physical Health Condition/Disease

☐ 01 Arthritis/Rheumatism

☐ 06 Hypertension/High Blood Pressure

☐ 02 Asthma

☐ 07 Lung Disease/Emphysema

☐ 03 Cancer

☐ 08 Osteoporosis

☐ 04 Diabetes

☐ 09 Parkinson's Disease

☐ 05 Heart Disease

☐ 10 Stroke

Disability

☐ 11 Eye/Vision Problem (blindness)

☐ 14 Spinal Cord Injury

☐ 12 Hearing Problems (deafness)

☐ 15 Traumatic Brain Injury (TBI)

☐ 13 Multiple Sclerosis (MS)

Learning/Cognition

☐ 16 Alzheimer's Disease or Dementia

☐ 17 Attention-Deficit Hyperactivity Disorder (ADHD)

☐ 18 Learning Disabilities (LD)

Developmental Disability

☐ 19 Cerebral Palsy (CP)

☐ 21 Other developmental disability

☐ 20 Down's Syndrome

(e.g., spinal bifida, muscular dystrophy)

Mental Health

☐ 22 Anxiety

☐ 24 Other

☐ 23 Depression

☐ 77 Don't know / Not sure

☐ 99 Refused

6. In which of the following areas does the person you care for most need your help?

Code

Cross (X) only one.

Please read:

- ☐ 01 Taking care of himself/herself, such as eating, dressing, or bathing
- ☐ 02 Taking care of his/her residence or personal living spaces, such as cleaning, managing money, or preparing meals
- ☐ 03 Communicating with others
- ☐ 04 Learning or remembering
- ☐ 05 Seeing or hearing
- ☐ 06 Moving around within the home
- ☐ 07 Transportation outside of the home
- ☐ 08 Getting along with people
- ☐ 09 Relieving/decreasing anxiety or depression

Do not read:

- ☐ 77 Don't know / Not sure
- ☐ 99 Refused

7. In an average week, how many hours do you provide care for [NOTE: code from Q3]. If Q3 = 77 (Don't know/not sure) or 99 (Refused); say "that person" because of his/her health problem, long-term illness, or disability?

Note: Round up to the next whole number of hours.

Do not read:

___ Hours per week 777 Don't know / Not sure 999 Refused

8. I am going to read a list of difficulties you may have faced as a caregiver. Please indicate which one of the following is the greatest difficulty you have faced as a caregiver.

Cross (X) only one.

Please read:

- ☐ 01 Creates a financial burden
- ☐ 02 Doesn't leave enough time for yourself
- ☐ 03 Doesn't leave enough time for your family
- ☐ 04 Interferes with your work
- ☐ 05 Creates stress
- ☐ 06 Creates or aggravates health problems
- ☐ 07 Affects family relationships
- ☐ 08 Other difficulty
- ☐ 88 No difficulty

Do not read:

- ☐ 77 Don't know / Not sure
- ☐ 99 Refused

9. During the past year, has the person you care for experienced changes in thinking or remembering?

Read only if necessary: "Had more difficulty remembering people, places, or things, or understanding or making decisions as easily as they once did."

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

Section 14: Disability

The following questions are about health problems or impairments you may have.

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

1 Yes

7 Don't know / Not Sure

2 No

9 Refused

14.2 Do you now have any health problem that requires you to use special equipment, such as a cane, a wheelchair, a special bed, or a special telephone?

Include occasional use or use in certain circumstances.

1 Yes

7 Don't know / Not Sure

2 No

9 Refused

Section 15: Alcohol Consumption

15.1 During the past 30 days, have you had at least one drink of any alcoholic beverage such as beer, wine, a malt beverage or liquor?

1 Yes

7 Don't know / Not sure **[Go to Section 16]**

2 No **[Go to Section 16]**

9 Refused **[Go to Section 16]**

15.2 During the past 30 days, how many days per week or per month did you have at least one drink of any alcoholic beverage?

1 __ Days per week

2 __ Days in past 30 days

888 No drinks in past 30 days **[Go to next section]**

777 Don't know / Not sure

999 Refused

INTERVIEWER NOTE: A 40 ounce beer would count as 3 drinks, or a cocktail drink with 2 shots would count as 2 drinks.

15.3 During the past 30 days, on the days when you drank, about how many drinks did you drink on the average?

Please Read: One drink is equivalent to a 12-ounce beer, a 5-ounce glass of wine, or a drink with one shot of liquor.

__ Number of drinks

77 Don't know / Not sure

99 Refused

15.4 Considering all types of alcoholic beverages, how many times during the past 30 days did you have **X** [Note: X = 5 for men, X = 4 for women] or more drinks on an occasion?

__ Number of times

77 Don't know / Not sure

88 None

99 Refused

15.5 During the past 30 days, what is the largest number of drinks you had on any occasion?

__ Number of drinks

77 Don't know / Not sure

99 Refused

Section 16: Immunization

16.1 A flu shot is an influenza vaccine injected into your arm. During the past 12 months, have you had a flu shot?

1 Yes

7 Don't know / Not sure **[Go to Q16.5]**

2 No **[Go to Q16.5]**

9 Refused **[Go to Q16.5]**

		Code
16.2	During what month and year did you receive your most recent flu shot? ___ / ___ ___ Month / Year 77 / 7777 Don't know / Not sure 99 / 9999 Refused	___ ___ ___ ___
16.5	A pneumonia shot or pneumococcal vaccine is usually given only once or twice in a person's lifetime and is different from the flu shot. Have you ever had a pneumonia shot? 1 Yes 7 Don't know / Not sure 2 No 9 Refused	___

Section 17: Arthritis Burden

Next I will ask you about arthritis.

17.1	Have you EVER been told by a doctor or other health professional that you have some form of arthritis, rheumatoid arthritis, gout, lupus, or fibromyalgia? 1 Yes 7 Don't know / Not sure [Go to Section 18] 2 No [Go to Section 18] 9 Refused [Go to Section 18]	___
------	--	-----

INTERVIEWER NOTE: Arthritis diagnoses include:

- **rheumatism, polymyalgia rheumatica**
- **osteoarthritis (not osteoporosis)**
- **tendonitis, bursitis, bunion, tennis elbow**
- **carpal tunnel syndrome, tarsal tunnel syndrome**
- **joint infection, Reiter's syndrome**
- **ankylosing spondylitis; spondylosis**
- **rotator cuff syndrome**
- **connective tissue disease, scleroderma, polymyositis, Raynaud's syndrome**
- **vasculitis (giant cell arteritis, Henoch-Schonlein purpura, Wegener's granulomatosis, polyarteritis nodosa)**

Arthritis can cause symptoms like pain, aching, or stiffness in or around the joint.

17.2	Are you now limited in any way in any of your usual activities because of arthritis or joint symptoms? 1 Yes 7 Don't know / Not sure 2 No 9 Refused	___
------	---	-----

INTERVIEWER INSTRUCTION: If a question arises about medications or treatment, then the interviewer should say: "Please answer the question based on your current experience, regardless of whether you are taking any medication or treatment."

INTERVIEWER NOTE: Q17.3 should be asked of all respondents regardless of employment status.

17.3	In this next question, we are referring to work for pay. Do arthritis or joint symptoms now affect whether you work, the type of work you do, or the amount of work you do? 1 Yes 7 Don't know / Not sure 2 No 9 Refused	___
------	--	-----

INTERVIEWER INSTRUCTION: If respondent gives an answer to each issue (whether works, type work, or amount of work), then if any issue is "yes" mark the overall response as "yes." If a question arises about medications or treatment, then the interviewer should say: "Please answer the question based on your current experience, regardless of whether you are taking any medication or treatment."

17.4 During the past 30 days, to what extent has your arthritis or joint symptoms interfered with your normal social activities, such as going shopping, to the movies, or to religious or social gatherings?	Code
<p>Please read [1-3]:</p> <p>1 A lot</p> <p>2 A little</p> <p>3 Not at all</p> <p>Do not read:</p> <p>7 Don't know / Not sure</p> <p>9 Refused</p> <p><i>INTERVIEWER INSTRUCTION: If a question arises about medications or treatment, then the interviewer should say: "Please answer the question based on your current experience, regardless of whether you are taking any medication or treatment."</i></p>	—
<p>17.5 Please think about the past 30 days, keeping in mind all of your joint pain or aching and whether or not you have taken medication. DURING THE PAST 30 DAYS, how bad was your joint pain ON AVERAGE? Please answer on a scale of 0 to 10 where 0 is no pain or aching and 10 is pain or aching as bad as it can be.</p> <p>__ Enter number [00-10] 77 Don't know / Not sure 99 Refused</p>	— —

Section 18: Fruits and Vegetables

These next questions are about the foods you usually eat or drink. Please tell me how often you eat or drink each one, for example, twice a week, three times a month, and so forth. Remember, I am only interested in the foods **you** eat. Include all foods *you* eat, both at home and away from home.

<p>18.1 How often do you drink fruit juices such as orange, grapefruit, or tomato?</p> <p>1 __ Per day</p> <p>2 __ Per week</p> <p>3 __ Per month</p> <p>4 __ Per year</p>	<p>555 Never</p> <p>777 Don't know / Not sure</p> <p>999 Refused</p>
<p>18.2 Not counting juice, how often do you eat fruit?</p> <p>1 __ Per day</p> <p>2 __ Per week</p> <p>3 __ Per month</p> <p>4 __ Per year</p>	<p>555 Never</p> <p>777 Don't know / Not sure</p> <p>999 Refused</p>
<p>18.3 How often do you eat green salad?</p> <p>1 __ Per day</p> <p>2 __ Per week</p> <p>3 __ Per month</p> <p>4 __ Per year</p>	<p>555 Never</p> <p>777 Don't know / Not sure</p> <p>999 Refused</p>
<p>18.4 How often do you eat potatoes not including French fries, fried potatoes, or potato chips?</p> <p>1 __ Per day</p> <p>2 __ Per week</p> <p>3 __ Per month</p> <p>4 __ Per year</p>	<p>555 Never</p> <p>777 Don't know / Not sure</p> <p>999 Refused</p>

			Code
18.5	How often do you eat carrots?		
	1 __ Per day	555 Never	
	2 __ Per week	777 Don't know / Not sure	
	3 __ Per month	999 Refused	— — —
	4 __ Per year		
18.6	Not counting carrots, potatoes, or salad, how many servings of vegetables do you usually eat? (Example: A serving of vegetables at both lunch and dinner would be two servings.)		
	1 __ Per day	555 Never	
	2 __ Per week	777 Don't know / Not sure	— — —
	3 __ Per month	999 Refused	
	4 __ Per year		
18.7	How many times do you eat rice on a normal day?		
	1 Never or None	4 Three	7 Don't know / Not sure
	2 Once	5 Four or more	9 Refused
	3 Twice		—

Section 19: Physical Activity

NOTE: If Core Q12.9 = 1 (Employed for wages) or 2 (Self-employed); continue. Otherwise, go to Q19.2.

19.1	When you are at work, which of the following best describes what you do? Would you say— <i>If respondent has multiple jobs, include all jobs.</i>		
	Please read:	Do not read:	
	1 Mostly sitting or standing	7 Don't know / Not sure	
	2 Mostly walking	9 Refused	
	3 Mostly heavy labor or physically demanding work		
	INTERVIEWER NOTE: The Following Applies to Q 19.2 - Q 19.4.		
	Please Read:		
	We are interested in two types of physical activity - <u>vigorous</u> and <u>moderate</u> . Vigorous activities cause large increases in breathing or heart rate while moderate activities cause small increases in breathing or heart rate.		
19.2	Now, thinking about the moderate activities you do in a usual week, do you do moderate activities for at least 10 minutes at a time, such as brisk walking, bicycling, vacuuming, gardening, or anything else that causes some increase in breathing or heart rate?		
	Do Not include activities done at or during work.		
	1 Yes	7 Don't know / Not sure [Go to Q19.5]	
	2 No [Go to Q19.5]	9 Refused [Go to Q19.5]	
19.3	How many days per week do you do these moderate activities for at least 10 minutes at a time?		
	__ Days per week		— —
	88 Do not do any moderate physical activity for at least 10 minutes at a time? [Go to Q19.5]		
	77 Don't know / Not sure [Go to Q19.5]	99 Refused [Go to Q19.5]	

		Code
19.4	On days when you do moderate activities for at least 10 minutes at a time, how much total time per day do you spend doing these activities? __: __ Hours and minutes per day 777 Don't know / Not sure 999 Refused	__ : __ __
19.5	Now, thinking about the vigorous activities you do in a usual week, do you do vigorous activities for at least 10 minutes at a time, such as running, aerobics, heavy yard work, or anything else that causes large increases in breathing or heart rate? Do Not include activities done at or during work. 1 Yes 7 Don't know / Not sure [Go to Section 20] 2 No [Go to Section 20] 9 Refused [Go to Section 20]	__
19.6	How many days per week do you do these vigorous activities for at least 10 minutes at a time? __ Days per week 88 Do not do any vigorous physical activity for at least 10 minutes at a time [Go to Section 20] 77 Don't know / Not sure [Go to Section 20] 99 Refused [Go to Section 20]	__
19.7	On days when you do vigorous activities for at least 10 minutes at a time, how much total time per day do you spend doing these activities? __: __ Hours and minutes per day 777 Don't know / Not sure 999 Refused	__ : __ __

Section 20: HIV/AIDS

NOTE: If respondent is 65 years old or older, go to Section 21.

The next few questions are about the national health problem of HIV, the virus that causes AIDS. Please remember that your answers are strictly confidential and that you don't have to answer every question if you do not want to. Although we will ask you about testing, we will not ask you about the results of any test you may have had.

20.1	Have you ever been tested for HIV? Do not count tests you may have had as part of a blood donation. Include testing fluid from your mouth. 1 Yes 7 Don't know / Not sure [Go to Q20.5] 2 No [Go to Q20.5] 9 Refused [Go to Q20.5]	__
20.2	Not including blood donations, in what month and year was your last HIV test? <i>NOTE: If response is before January 1985, code "Don't know."</i> <i>NOTE: If the respondent remembers the year, but cannot remember the month, code the first two digits 77 and the last four digits for the year.</i> __ / __ __ __ Code month and year 77/ 7777 Don't know / Not sure 99/ 9999 Refused	__ __ __ __ __ __
20.3	Where did you have your last HIV test — at a private doctor or HMO office, at a counseling and testing site, at a hospital, at a clinic, in a jail or prison, at a drug treatment facility, at home, or somewhere else? 01 Private doctor or HMO office 06 Drug treatment facility 02 Counseling and testing site 07 At home 03 Hospital 08 Somewhere else 04 Clinic 77 Don't know / Not sure 05 Jail or prison (or other correctional facility) 99 Refused	__ __

NOTE: Only ask Q20.4; if response to Q20.2 is within last 12 months. Otherwise, go to Q20.5.		Code
20.4	Was it a rapid test where you could get your results within a couple of hours? 1 Yes 2 No 7 Don't know / Not sure 9 Refused	—
20.5	I'm going to read you a list. When I'm done, please tell me if any of the situations apply to you. You do not need to tell me which one. You have used intravenous drugs in the past year. You have been treated for a sexually transmitted or venereal disease in the past year. You have given or received money or drugs in exchange for sex in the past year. You had anal sex without a condom in the past year. Do any of these situations apply to you? 1 Yes 2 No 7 Don't know / Not sure 9 Refused	—

Section 21: Emotional Support and Life Satisfaction

The next two questions are about emotional support and your satisfaction with life.

21.1	How often do you get the social and emotional support you need? <i>INTERVIEWER NOTE: If asked, say "please include support from any source."</i> Please read: 1 Always 2 Usually 3 Sometimes 4 Rarely 5 Never Do not read: 7 Don't know / Not sure 9 Refused	—
21.2	In general, how satisfied are you with your life? Please read: 1 Very satisfied 2 Satisfied 3 Dissatisfied 4 Very dissatisfied Do not read: 7 Don't know / Not sure 9 Refused	—

Section 22: Cancer Survivors

Now I am going to ask you about cancer.

22.1	Have you EVER been told by a doctor, nurse, or other health professional that you had cancer? Read only if necessary: By "other health professional" we mean a nurse practitioner, a physician's assistant, social worker, or some other licensed professional. 1 Yes [Go to Q22.2] <i>INTERVIEWER NOTE: For the Following Responses (2, 7, or 9): If the respondent is <u>Female</u>, go to Module 9. If the respondent is <u>Male</u>, go to Module 10.</i> 2 No 7 Don't know / Not sure 9 Refused	—
------	---	---

		Code
22.2	How many different types of cancer have you had?	
	1 Only one	
	2 Two	
	3 Three or more	
	INTERVIEWER NOTE: For the Following Responses (7, or 9): If the respondent is <u>Female</u>, go to Module 9. If the respondent is <u>Male</u>, go to Module 10.	
	7 Don't know / Not sure	
	9 Refused	
22.3	At what age were you told that you had cancer?	
	__ Code age in years [97 = 97 and older]	
	98 Don't know / Not sure	
	99 Refused	
	<i>NOTE: If response to Q22.2 = 2 (Two) or 3 (Three or more), ask: "At what age was your first diagnosis of cancer?"</i>	
	<i>INTERVIEWER NOTE: This question refers to the first time they were told about their first cancer.</i>	
22.4	What type of cancer was it?	
	<i>If Q22.2 = 2 (Two) or 3 (Three or more), ask: "With your most recent diagnoses of cancer, what type of cancer was it?"</i>	
	<i>INTERVIEWER NOTE: Please read list only if respondent needs prompting for cancer type (i.e., name of cancer) [1-28]:</i>	
	<i>Circle Only One Condition.</i>	
	Breast	
	01 Breast cancer	
	Female reproductive (Gynecologic)	
	02 Cervical cancer (cancer of the cervix)	
	04 Ovarian cancer (cancer of the ovary)	
	03 Endometrial cancer (cancer of the uterus)	
	Head/Neck	
	05 Head and neck cancer	
	07 Pharyngeal (throat) cancer	
	06 Oral cancer	
	08 Thyroid	
	Gastrointestinal	
	09 Colon (intestine) cancer	
	12 Pancreatic (pancreas) cancer	
	10 Esophageal (esophagus)	
	13 Rectal (rectum) cancer	
	11 Liver cancer	
	14 Stomach	
	Leukemia/Lymphoma (lymph nodes and bone marrow)	
	15 Hodgkin's Lymphoma (Hodgkin's disease)	
	17 Non-Hodgkin's Lymphoma	
	16 Leukemia (blood) cancer	
	Male reproductive	
	18 Prostate cancer	
	19 Testicular cancer	
	Skin	
	20 Melanoma	
	21 Other skin cancer	
	Thoracic	
	22 Heart	
	23 Lung	
	Urinary cancer	
	24 Bladder cancer	
	25 Renal (kidney) cancer	
	Others	
	26 Bone	
	28 Neuroblastoma	
	27 Brain	
	29 Other	
	Do not read:	
	77 Don't know / Not sure	
	99 Refused	

NOTE: If respondent is male, go to Module 10.

The next questions are about breast and cervical cancer.

1. A mammogram is an x-ray of each breast to look for breast cancer. Have you ever had a mammogram?

- | | | |
|-----------------|------------------------------------|-------|
| 1 Yes | 7 Don't know / Not sure [Go to Q3] | _____ |
| 2 No [Go to Q3] | 9 Refused [Go to Q3] | |

2. How long has it been since you had your last mammogram?

Read only if necessary:

- | | | |
|---|--|-------|
| 1 Within the past year (anytime less than 12 months ago) | | |
| 2 Within the past 2 years (1 year but less than 2 years ago) | | |
| 3 Within the past 3 years (2 years but less than 3 years ago) | | |
| 4 Within the past 5 years (3 years but less than 5 years ago) | | _____ |
| 5 5 or more years ago | | |

Do not Read:

- | | | |
|-------------------------|-----------|--|
| 7 Don't know / Not sure | 9 Refused | |
|-------------------------|-----------|--|

3. A clinical breast exam is when a doctor, nurse, or other health professional feels the breasts for lumps. Have you ever had a clinical breast exam?

- | | | |
|-----------------|------------------------------------|-------|
| 1 Yes | 7 Don't know / Not sure [Go to Q5] | _____ |
| 2 No [Go to Q5] | 9 Refused [Go to Q5] | |

4. How long has it been since your last breast exam?

Read only if necessary:

- | | | |
|---|--|-------|
| 1 Within the past year (anytime less than 12 months ago) | | |
| 2 Within the past 2 years (1 year but less than 2 years ago) | | _____ |
| 3 Within the past 3 years (2 years but less than 3 years ago) | | |
| 4 Within the past 5 years (3 years but less than 5 years ago) | | |
| 5 5 or more years ago | | |

5. A Pap test is a test for cancer of the cervix. Have you ever had a Pap test?

- | | | |
|-----------------|------------------------------------|-------|
| 1 Yes | 7 Don't know / Not sure [Go to Q7] | _____ |
| 2 No [Go to Q7] | 9 Refused [Go to Q7] | |

6. How long has it been since you had your last Pap test?

Read only if necessary:

- 1 Within the past year (anytime less than 12 months ago)
- 2 Within the past 2 years (1 year but less than 2 years ago)
- 3 Within the past 3 years (2 years but less than 3 years ago)
- 4 Within the past 5 years (3 years but less than 5 years ago)
- 5 5 or more years ago

Do not read:

- 7 Don't know / Not sure
- 9 Refused

NOTE: If response to Core Q12.21 = 1 (is pregnant); then go to State Module 1.

7. Have you had a hysterectomy?

Read only if necessary: A hysterectomy is an operation to remove the uterus (womb).

- 1 Yes
- 2 No [Go to State Module 1]
- 7 Don't know / Not sure [Go to State Module 1]
- 9 Refused [Go to State Module 1]

Module 10: Men's Health

NOTE: If respondent is less than 39 years of age, or is female, go to State Module 1.

Now, I will ask you some questions about prostate cancer screening.

1. A Prostate-Specific Antigen test, also called a PSA test, is a blood test used to check men for prostate cancer. Have you ever had a PSA test?

- 1 Yes
- 2 No [Go to Q3]
- 7 Don't Know / Not sure [Go to Q3]
- 9 Refused [Go to Q3]

2. How long has it been since you had your last PSA test?

Read only if necessary:

- 1 Within the past year (anytime less than 12 months ago)
- 2 Within the past 2 years (1 year but less than 2 years)
- 3 Within the past 3 years (2 years but less than 3 years)
- 4 Within the past 5 years (3 years but less than 5 years)
- 5 5 or more years ago

Do not read:

- 7 Don't know / Not sure
- 9 Refused

3. A digital rectal exam is an exam in which a doctor, nurse, or other health professional places a gloved finger into the rectum to feel the size, shape, and hardness of the prostate gland. Have you ever had a digital rectal exam?

- 1 Yes
 - 2 No [Go to Q5]
 - 7 Don't know / Not sure [Go to Q5]
 - 9 Refused [Go to Q5]
-

4. How long has it been since your last digital rectal exam?

Read only if necessary:

- 1 Within the past year (anytime less than 12 months ago)
- 2 Within the past 2 years (1 year but less than 2 years)
- 3 Within the past 3 years (2 years but less than 3 years)
- 4 Within the past 5 years (3 years but less than 5 years)
- 5 5 or more years ago

Do not read:

- 7 Don't know / Not Sure
 - 9 Refused
-

5. Have you ever been told by a doctor, nurse, or other health professional that you had prostate cancer?

- | | |
|-------|-------------------------|
| 1 Yes | 7 Don't know / Not sure |
| 2 No | 9 Refused |
-

State Module 1: Hearing Impairment

Now I would like to ask you questions about your hearing.

1. Do you have deafness or trouble hearing in one or both ears?

- | | |
|--------------------------------|-------------------------|
| 1 Yes | 3 Don't Know / Not sure |
| 2 No [Go to Question 3] | 4 Refused |
-

2. Do you now use a hearing aid?

- | | |
|-------|-------------------------|
| 1 Yes | 3 Don't Know / Not sure |
| 2 No | 4 Refused |
-

3. When was the last time you had your hearing tested?

- | | |
|---|-------------------------|
| 1 Within the past month (anytime less than 1 mo.) | |
| 2 Within the past year (1mo. but less than 12 months ago) | |
| 3 1 or more years ago | 5 Don't know / Not sure |
| 4 Never | 6 Refused |
-

4. Are you aware that CHC now screens all newborn babies for hearing loss before leaving the hospital?

- | | |
|-------|-------------------------|
| 1 Yes | 3 Don't Know / Not sure |
| 2 No | 4 Refused |
-

Closing Statement

Closing statement

Please read:

That was my last question. All answers will be kept confidential. The results of this survey will give us information about the health practices of people in the Commonwealth of the Northern Mariana Islands (CNMI). Thank you very much for your time and cooperation.

This image shows a full page of blank handwriting practice paper. It features 20 evenly spaced, light gray horizontal lines extending across the entire width of the page. The lines are designed to help guide letter height and placement for cursive or other handwriting styles. There are no margins, text, or other markings on the page.

WHO TO INCLUDE AND WHO NOT TO INCLUDE

The 2009 CNMI Behavioral Risk Factor Surveillance System (BRFSS) Survey records each person at his or her "usual residence", and an interview is conducted with a resident randomly picked. The usual residence is the place where the person lives and sleeps most of the time.

Include

- ◆ Everyone who usually lives here such as family members, house mates
- ◆ and roommates, foster children, roomers, boarders, and live-in employees
- ◆ Persons who are temporarily away on a business trip, on vacation,
- ◆ or in a general hospital
- ◆ College students who stay here while attending college
- ◆ Persons in the Armed Forces who live here, including local reservists temporarily deployed
- ◆ Newborn babies still in the hospital
- ◆ Children in boarding schools below the college level
- ◆ Persons who stay here most of the week while working even if they have a home somewhere else
- ◆ Persons with no other home who were staying here on August 1st

Do NOT include

- Persons who usually live somewhere else
- Persons who are away in an institution such as a prison, mental hospital, or a nursing home
- College students who live somewhere else while attending college
- Persons in the Armed Forces who live somewhere else
- Persons who stay somewhere else most of the week while working

INTERVIEWER REMINDERS:

Be sure **you** have recorded —

1. Geographic information on the front cover of the questionnaire
2. The respondent's name and the respondent's telephone number (if any) in the appropriate boxes on the front cover.
3. **Your** signature (name) and the date in the boxes below on this page.

Also, be sure you have —

4. Completed as many of the questions as possible.
5. Entered the required information on the address listing page in the address register **and** on the map.
6. Written all entries legibly.

CERTIFICATION — I certify the entries I have made on this questionnaire are true and correct to my knowledge.

Enumerator's signature:

Date

Comments: