## 2003-04 Questionnaire:

# Housing - HOQ\_C

HOQ.011 I'd like to ask you a few questions about your home.

Is your home . . .

VERIFY OR ASK IF NOT OBVIOUS. INCLUDE TOWNHOME AS 'HOUSE', EITHER DETACHED OR ATTACHED.

a mobile home or trailer,	1	(HOQ.040)
a one family house detached from any		
other house,	2	(HOQ.040)
a one family house attached to one or		
more houses,	3	(HOQ.040)
an apartment,	4	
a dormitory, or	6	(HOQ.040)
something else (SPECIFY)?	8	(HOQ.040)
REFUSED	77	(HOQ.040)
DON'T KNOW	99	(HOQ.040)

HOQ.030 How many apartments are in this building? Would you say . . .

1,	1
2,	2
3 or 4,	3
5 to 9,	4
10 to 19,	5
20 to 49, or	6
50 or more?	7
REFUSED	77
DON'T KNOW	99

HOQ.040 When was this {mobile home/house/building} originally built?

READ CATEGORIES IF NECESSARY.

1990 TO PRESENT	1
1978 TO 1989,	2
1960 TO 1977,	3
1950 TO 1959,	4
1940 TO 1949, OR	5
BEFORE 1940	6
REFUSED	7
DON'T KNOW	9

HOQ.050 How many rooms are in this home? Count the kitchen but not the bathroom.

## I\_\_\_\_I ENTER NUMBER OF ROOMS

REFUSED	77
DON'T KNOW	99

HOQ.060 How long {have you/has your family} lived at this address?

|\_\_\_| ENTER NUMBER (OF MONTHS OR YEARS)

LESS THAN ONE MONTH	666
REFUSED	777
DON'T KNOW	999

ENTER UNIT

MONTHS	1
YEARS	2
REFUSED	7
DON'T KNOW	9

HOQ.065 Is this {mobile home/house/apartment} owned, being bought, rented, or occupied by some other arrangement by {you/you or someone else in your family}?

OWNED OR BEING BOUGHT	1
RENTED	2
OTHER ARRANGEMENT	3
REFUSED	7
DON'T KNOW	9

HOQ.070 What is the source of tap water in this home? Is it a private or public water company, a private or public well, or something else?

PRIVATE/PUBLIC WATER COMPANY	1
PRIVATE/PUBLIC WELL	2
SOMETHING ELSE	3
REFUSED	7
DON'T KNOW	9

HOQ.080 Are any of the water treatment devices listed on this card used in your home?

#### HAND CARD HOQ1

YES	1	
NO	2	(BOX 1)
REFUSED	7	(BOX 1)
DON'T KNOW	9	(BOX 1)

HOQ.083 Which of these water treatment devices are now used in your home?

HAND CARD HOQ1 CODE ALL THAT APPLY

#### BRITA OR OTHER PITCHER

WATER FILTER	1
CERAMIC OR CHARCOAL FILTER	2
WATER SOFTENER	3
AERATOR	4
REVERSE OSMOSIS	5
REFUSED	7
DON'T KNOW	9

#### BOX 1

CHECK ITEM HOQ.085: IF FAMILY INCLUDES CHILD WHO IS AN SP AND IS AGE 1-5, CONTINUE. OTHERWISE, GO TO END OF SECTION.

HOQ.140 During the **last 12 months**, were any areas **inside** your home painted, such as walls, trim or ceilings?

YES	1	
NO	2	(HOQ.160)
REFUSED	7	(HOQ.160)
DON'T KNOW	9	(HOQ.160)

HOQ.150 When this painting was done did someone sand or scrape off any of the old paint?

YES	1
NO	2
REFUSED	7
DON'T KNOW	9

HOQ.160 Are there any rooms in your home where you can see paint that is peeling, flaking or chipping off the walls, ceilings, doors, or windows?

YES	1	
NO	2	(HOQ.190)
REFUSED	7	(HOQ.190)
DON'T KNOW	9	(HOQ.190)

HOQ.170 In any of these rooms, can you see at least one total area of peeling, flaking or chipping paint that is larger than one page of a regular newspaper?

YES	1	
NO	2	(HOQ.190)
REFUSED	7	(HOQ.190)
DON'T KNOW	9	(HOQ.190)

HOQ.180 How many rooms have this much peeling, flaking or chipping paint? [Areas that are larger than one page of regular newspaper.]

### |\_\_\_\_|

ENTER NUMBER OF ROOMS

REFUSED	77
DON'T KNOW	99

HOQ.190 Can you see paint that is peeling, flaking or chipping on any **outside area** of your {house/building}?

YES	1	
NO	2	(HOQ.220)
REFUSED	7	(HOQ.220)
DON'T KNOW	9	(HOQ.220)

HOQ.210 Can you see any total area of peeling, flaking or chipping paint on any outside area that is **larger than** a regular door?

YES	1
NO	2
REFUSED	7
DON'T KNOW	9

HOQ.220 The next questions are about work that has been done in your home in the **past 12 months**. In the **past 12 months**, have you or anyone else . . .

RESPONSES: YES = 1, NO = 2, REFUSED = 7, DON'T KNOW = 9.

- a. replaced a window in your home?
- b. replaced a kitchen cabinet?
- c. removed a wall in your home?