

DEMOGRAPHICS INFORMATION – DMQ - SP

BOX 1A

CHECK ITEM DMQ.030:
 IF SP AGE >= 6, CONTINUE.
 OTHERWISE, GO TO DMQ.061.

DMQ.140 What is the **highest** grade or level of school {you have/SP has} **completed** or the **highest degree** {you have/s/he has} **received**?

HAND CARD DMQ1
 READ HAND CARD CATEGORIES IF NECESSARY.
 ENTER HIGHEST LEVEL OF SCHOOL.

| | |
|---|------------|
| NEVER ATTENDED/KINDERGARTEN ONLY..... | 0 (BOX 1B) |
| 1ST GRADE | 1 |
| 2ND GRADE..... | 2 |
| 3RD GRADE..... | 3 |
| 4TH GRADE | 4 |
| 5TH GRADE | 5 |
| 6TH GRADE | 6 |
| 7TH GRADE | 7 |
| 8TH GRADE | 8 |
| 9TH GRADE | 9 |
| 10TH GRADE | 10 |
| 11TH GRADE | 11 |
| 12TH GRADE, NO DIPLOMA..... | 12 |
| HIGH SCHOOL GRADUATE..... | 13 |
| GED OR EQUIVALENT..... | 14 |
| SOME COLLEGE, NO DEGREE..... | 15 |
| ASSOCIATE DEGREE: OCCUPATIONAL, TECHNICAL, OR VOCATIONAL PROGRAM..... | 16 |
| ASSOCIATE DEGREE: ACADEMIC PROGRAM..... | 17 |
| BACHELOR'S DEGREE (EXAMPLE: BA, AB, BS, BBA)..... | 18 |
| MASTER'S DEGREE (EXAMPLE: MA, MS, MEng, MEd, MBA) | 19 |
| PROFESSIONAL SCHOOL DEGREE (EXAMPLE: MD, DDS, DVM, JD)..... | 20 |
| DOCTORAL DEGREE (EXAMPLE: PhD, EdD) | 21 |
| REFUSED | 77 |
| DON'T KNOW | 99 |

BOX 1AA

CHECK ITEM DMQ.035:
 IF SP AGE <= 19, CONTINUE

OTHERWISE, GO TO DMQ.051.

DMQ.037 {Are you/Is SP} now . . .

- going to school, 1
- on vacation from school (between
grades), or 2
- neither?..... 3
- REFUSED 7
- DON'T KNOW 9

BOX 1B

CHECK ITEM DMQ.040:
IF SP AGE >= 17, CONTINUE.
OTHERWISE, GO TO DMQ.061.

DMQ.051 Did {you/SP} **ever** serve in the Armed Forces of the United States?

- YES 1
- NO 2
- REFUSED 7
- DON'T KNOW 9

DMQ.061 {Do you/Does SP} usually go by **another** first name besides {DISPLAY FIRST NAME FROM DMQ.040}?

CAPI INSTRUCTION:
DISPLAY "FIRST NAME:" AND FIRST NAME FROM DMQ.040 AS LEFT HEADER.

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

DMQ.071 What is this **other first** name?

VERIFY SPELLING

-
- ENTER NAME
- REFUSED 7
 - DON'T KNOW 9

BOX 1BB

CHECK ITEM DMQ.073:
IF AGE >= 14 AND SFQ.180 WAS **NOT** ANSWERED/CODED OR WAS CODED AS
DON'T KNOW OR REFUSED IN THE RELATIONSHIP MODULE (SCREENER
MODULE 2 – SFQ), CONTINUE.

OTHERWISE, GO TO BOX 1C.

SFQ.180 {Are you/Is SP} **now** married, widowed, divorced, separated, never married or living with a partner?

- MARRIED 1
- WIDOWED 2
- DIVORCED..... 3
- SEPARATED..... 4
- NEVER MARRIED..... 5 (BOX 1D)
- LIVING WITH PARTNER 6
- REFUSED 7
- DON'T KNOW 9

BOX 1C

CHECK ITEM DMQ.075:
 IF SP IS MALE OR CODED AS 'NEVER MARRIED' IN THE RELATIONSHIP
 MODULE (SCREENER MODULE 2 – SFQ) – QUESTION SFQ.180, GO TO
 BOX 1D.
 OTHERWISE, CONTINUE.

DMQ.080 {Do you/Does SP} have a maiden name?

ASK IF NOT KNOWN

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

DMQ.090 What is {your/SP's} **maiden** name?

VERIFY SPELLING

CAPI INSTRUCTION:
 DISPLAY "LAST NAME:" AND SP'S CURRENT LAST NAME FROM DMQ.060 AS LEFT HEADER.

-
- ENTER MAIDEN NAME
 - or
 - SAME AS CURRENT LAST NAME..... 2
 - REFUSED 7
 - DON'T KNOW 9

BOX 1D

CHECK ITEM DMQ.094:
 IF SP AGE >= 16, CONTINUE.
 OTHERWISE, GO TO DMQ.110.

DMQ.100 What is {your/SP's} **father's** last name?

VERIFY SPELLING

CAPI INSTRUCTION:

DISPLAY "LAST NAME:" AND SP'S CURRENT LAST NAME FROM DMQ.060 AS LEFT HEADER.

IF MAIDEN NAME ENTERED IN DMQ.090, AND MAIDEN NAME IS DIFFERENT FROM CURRENT LAST NAME, ALSO DISPLAY "MAIDEN NAME:" AND MAIDEN NAME FROM DMQ.090 AS LEFT HEADER.

ENTER NAME

or

SAME AS CURRENT LAST NAME..... 2

SAME AS MAIDEN NAME 3

REFUSED 7

DON'T KNOW 9

DMQ.110 In what country {were you/was SP} born?

UNITED STATES 1 (DMQ.130)

MEXICO 2 (DMQ.160)

OTHER..... 3

DMQ.111

ENTER COUNTRY NAME

REFUSED 7

DON'T KNOW 9

CAPI INSTRUCTION:

FOLLOW THE BASIC FORMAT FOR DIETARY SUPPLEMENT LOOKUP. ONLY ALLOW ENTRY OF 1 COUNTRY. COUNTRY LOOKUP IN SP AND FAMILY QUESTIONNAIRES SHOULD WORK EXACTLY THE SAME.

DMQ.115 PRESS BACKSPACE KEY TO START THE LOOKUP.

SELECT COUNTRY FROM LIST.

IF COUNTRY **NOT**
ON LIST - PRESS BS
TO DELETE ENTRY.

TYPE *******

CAPI INSTRUCTION:

DISPLAY FIPS COUNTRY LIST. INTERVIEWER SHOULD BE ABLE TO SELECT 1 COUNTRY FROM THE LIST. INTERVIEWER SHOULD BE ABLE TO USE THE ******* OPTION TO ACCEPT THE COUNTRY THEY ENTERED IN DMQ.110. REFUSED AND DON'T KNOW OPTIONS SHOULD BE AVAILABLE TO THE INTERVIEWER AS THE F6 AND F5 KEYS.

BOX 2

CHECK ITEM DMQ.120:

IF OTHER THAN 'UNITED STATES' IN DMQ.110, GO TO DMQ.160.
OTHERWISE, CONTINUE.

DMQ.130 In what state {were you/was SP} born?

ENTER 2 LETTER STATE ABBREVIATION TO START THE LOOKUP.
SELECT STATE FROM CAPI STATE LIST.
PRESS ENTER TO ACCEPT SELECTION.

CAPI INSTRUCTION:

DISPLAY FIPS STATE LIST. INTERVIEWER ONLY SHOULD BE ABLE TO SELECT 1 STATE FROM LIST. DON'T KNOW AND REFUSED SHOULD BE VALID OPTIONS. THE STATE LOOKUP IN THE SP AND FAMILY QUESTIONNAIRES SHOULD WORK EXACTLY THE SAME.

BOX 3

CHECK ITEM DMQ.150:

GO TO BOX 3A.

DMQ.160 In what month and year did {you/SP} come to the United States to stay?

ENTER MONTH NUMBER

REFUSED 77

DON'T KNOW 99

ENTER 4-DIGIT YEAR

REFUSED 7777

DON'T KNOW 9999

DMQ.170 {Are you/Is SP} a citizen of the United States?

[Information about citizenship is being collected by the U.S. Public Health Service to perform health related research. Providing this information is voluntary and is collected under the authority of the Public Health Service Act. There will be no effect on pending immigration or citizenship petitions.]

HAND CARD DMQ2

- YES, BORN IN UNITED STATES 1
- YES, BORN IN PUERTO RICO, GUAM,
AMERICAN VIRGIN ISLANDS, OR
OTHER U.S. TERRITORY 2
- YES, BORN ABROAD TO AMERICAN
PARENTS 3
- YES, U.S. CITIZEN BY NATURALIZATION.. 4
- NO, NOT A CITIZEN OF THE UNITED
STATES 5
- REFUSED 7
- DON'T KNOW 9

BOX 3A

CHECK ITEM DMQ.180:
 IF SP AGE >= 6 AND DMQ.110 = UNITED STATES, CONTINUE WITH DMQ.190.
 OTHERWISE, GO TO BOX 3B.

DMQ.190 {Have you/Has SP} **ever** traveled outside of the United States or Canada?

- YES 1
- NO 2 (DMQ.240)
- REFUSED 7 (DMQ.240)
- DON'T KNOW 9 (DMQ.240)

DMQ.200 Where {have you/has SP} traveled?

HAND CARD DMQ3
CODE ALL THAT APPLY

- EUROPE OR AUSTRALIA/NEW ZEALAND . 1
- ASIA OR AFRICA OR SOUTH PACIFIC 2
- SOUTH/CENTRAL AMERICA (INCLUDING
MEXICO) 3
- CARIBBEAN..... 4
- MIDDLE EAST..... 5
- OTHER..... 6
- REFUSED 7
- DON'T KNOW 9

BOX 3B

CHECK ITEM DMQ.210:

IF SP AGE >= 6 AND OTHER THAN 'UNITED STATES' IN DMQ.110, CONTINUE.
OTHERWISE, GO TO DMQ.240.

DMQ.220 Other than {your/SP's} move to the United States, {have you/has {he/she}} **ever** traveled outside of {COUNTRY OF BIRTH}?

CAPI INSTRUCTION:

DISPLAY "COUNTRY OF BIRTH:" AND COUNTRY OF BIRTH FROM DMQ.110 AS LEFT HEADER.

YES 1
NO 2 (DMQ.240)
REFUSED 7 (DMQ.240)
DON'T KNOW 9 (DMQ.240)

DMQ.230 Where {have you/has SP} traveled?

HAND CARD DMQ3
CODE ALL THAT APPLY

EUROPE OR AUSTRALIA/NEW ZEALAND . 1
ASIA OR AFRICA OR SOUTH PACIFIC..... 2
SOUTH/CENTRAL AMERICA (INCLUDING
MEXICO) 3
CARIBBEAN..... 4
MIDDLE EAST..... 5
OTHER..... 6
REFUSED 7
DON'T KNOW 9

DMQ.240 {Do you/Does SP} consider {yourself/himself/herself} Hispanic/Latino? [Where did {your/his/her} ancestors come from?]

HAND CARD DMQ4
READ HAND CARD CATEGORIES IF NECESSARY

CAPI INSTRUCTION:

IF DON'T KNOW (CODE 9), DISPLAY SOFT EDIT MESSAGE ONCE "INTERVIEWER: GIVE RESPONDENT **HAND CARD DMQ3** AND READ CATEGORIES."

YES 1
NO 2
REFUSED 7
DON'T KNOW 9

BOX 3C

CHECK ITEM DMQ.243:

IF YES (CODE 1) IN DMQ.240, GO TO DMQ.250.
IF DON'T KNOW (CODE 9) IN DMQ.240, GO TO DMQ.260.
*IF NO (CODE 2) IN DMQ.240, CONTINUE TO BOX 3D.
OTHERWISE, GO TO DMQ.260.

BOX 3D

CHECK ITEM DMQ.245:

IF NOT HISPANIC (CODE 4) OR OTHER HISPANIC OR LATINO (CODE 2) IN SCQ.260 (SAMPLED RACE/ETHNICITY = BLACK OR WHITE/OTHER), GO TO DMQ.260.

IF MEXICAN OR MEXICAN AMERICAN (CODES 1 OR 3) IN SCQ.260 (SAMPLED RACE ETHNICITY = MEXICAN), DISPLAY SOFT EDIT ONCE THEN GO TO BOX 3E. OTHERWISE, GO TO DMQ.260.

CAPI INSTRUCTION:

DISPLAY SOFT EDIT MESSAGE –

"SCREENER ETHNICITY: MEXICAN OR MEXICAN AMERICAN.

INTERVIEWER: GIVE RESPONDENT **HAND CARD DMQ4** AND READ CATEGORIES."

BOX 3E

CHECK ITEM DMQ.247:

IF YES (CODE 1) IN DMQ.240, CONTINUE.

OTHERWISE, GO TO DMQ.260.

DMQ.250 Please give me the number of the group that represents {your/SP's} Hispanic origin or ancestry. Please select 1 or more of these categories.

HAND CARD DMQ4
SELECT 1 OR MORE

| | | |
|----|--|----|
| | PUERTO RICAN | 10 |
| | DOMINICAN (REPUBLIC)..... | 12 |
| | MEXICAN/MEXICANO | 13 |
| | MEXICAN AMERICAN | 14 |
| | CHICANO | 15 |
| | CUBAN | 18 |
| | CUBAN AMERICAN | 19 |
| | CENTRAL OR SOUTH AMERICAN | 20 |
| | OTHER LATIN AMERICAN (SPECIFY COUNTRY) | |
| 40 | OTHER HISPANIC (SPECIFY COUNTRY) | |
| 41 | REFUSED | 77 |
| | DON'T KNOW | 99 |

DMQ.260 What race {do you/does SP} consider {yourself/himself/herself} to be? Please select 1 or more of these categories.

HAND CARD DMQ5
SELECT 1 OR MORE

| | |
|--|----|
| WHITE | 10 |
| BLACK/AFRICAN AMERICAN | 11 |
| INDIAN (AMERICAN) | 12 |
| ALASKA NATIVE..... | 13 |
| NATIVE HAWAIIAN..... | 14 |
| GUAMANIAN..... | 15 |
| SAMOAN | 16 |
| OTHER PACIFIC ISLANDER (SPECIFY) | 17 |
| ASIAN INDIAN..... | 18 |
| CHINESE..... | 19 |
| FILIPINO | 20 |
| JAPANESE..... | 21 |
| KOREAN | 22 |
| VIETNAMESE | 23 |
| OTHER ASIAN (SPECIFY) | 24 |
| SOME OTHER RACE (SPECIFY) | 25 |
| REFUSED | 77 |
| DON'T KNOW | 99 |

BOX 4

CHECK ITEM DMQ.270:
IF MORE THAN 1 ENTRY (CODE 10-25) IN DMQ.260, CONTINUE.
OTHERWISE, GO TO DMQ.280.

DMQ.275 Which one of these groups, that is {DISPLAY RESPONSES CODED IN DMQ.260 WITH CORRESPONDING CODES}, would you say **best** represents {your/SP's} race?

ENTER RACE CODE

| | |
|---------------------------|----|
| CANNOT CHOOSE 1 RACE..... | 66 |
| REFUSED | 77 |
| DON'T KNOW | 99 |

DMQ.280 We also need {your/SP's} Social Security Number. The Department of Health and Human Services will use {your/his/her} Social Security Number to conduct health-related research by linking {your/his/her} survey data with vital statistics and other records, such as health registries. We may also use it if we need to recontact {you/him/her} or {your/his/her} family. Except for these purposes, the Department will not release {your/his/her} SSN to anyone, including any government agency. Providing this information is voluntary and is collected under the authority of the Public Health Service Act. There will be no effect on {your/his/her} benefits if you do not provide it. [Public Health Service Act is title 42, United States Code, section 242k.]

What is {your/SP's} Social Security Number?

CAPI INSTRUCTION:

REQUIRE DOUBLE ENTRY OF SOCIAL SECURITY NUMBER.

| | | | | | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| | | | | | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|--|--|--|--|

ENTER SOCIAL SECURITY NUMBER

or

- DOES NOT HAVE SOCIAL SECURITY NUMBER 2 (END OF SECTION)
- REFUSED 7 (END OF SECTION)
- DON'T KNOW 9 (END OF SECTION)

DMQ.300 INTERVIEWER: SELECT CATEGORY FOR REPORTING OF SOCIAL SECURITY NUMBER

- SELF REPORTED FROM MEMORY 1
- SELF REPORTED FROM RECORDS 2
- PROXY REPORTED FROM MEMORY 3
- PROXY REPORTED FROM RECORDS..... 4