

**1999 Work and Health Survey  
 (Baseline Quex)**

**RESPONDENT SELECTION/LANGUAGE PREFERENCE QUESTIONS HERE**

We would like to start by asking some questions about your employment situation.

- |    |  |  |                              |        |
|----|--|--|------------------------------|--------|
| 1. | What were you doing <u>most</u> of last week? Were you working, were you not at work but had a job, were you looking for work, keeping house, going to school, unable to work, retired, or what?<br><b>(ACCEPT ONLY <u>ONE</u> RESPONSE)</b> | WORKING..... 1 (SKIP TO Q3)<br>NOT AT WORK, BUT HAVE A JOB ..... 2<br>LOOKING FOR WORK ..... 3<br>KEEPING HOUSE ..... 4<br>GOING TO SCHOOL ..... 5<br>UNABLE TO WORK..... 6 (SKIP TO Q22)<br>RETIRED ..... 7<br>OTHER ( <i>SPECIFY</i> ) ..... 0<br>DON'T KNOW ..... 9 | } (GO TO Q2)<br>} (GO TO Q2) | WORK99 |
|----|--|--|------------------------------|--------|

**IF NOT WORKING BUT ABLE TO WORK FROM Q1, ASK:**

- |    |   |   |              |          |
|----|---|---|--------------|----------|
| 2. | Did you do any work at all last week for pay or profit? (Do not count work around the house, but include unpaid work in a family farm or business.) | YES ..... 1 (GO TO Q3)<br>NO..... 2<br>DON'T KNOW ..... 9 | } (GO TO Q8) | ANYWRK99 |
|----|---|---|--------------|----------|
- (IF NO OR REFUSED FROM Q.2 AND RETIRED, ASK Q.22, THEN SKIP TO Q.138A)**

**IF WORKING FROM Q1 OR EMPLOYED FOR PAY/PROFIT FROM Q2, ASK:**

- |    |  |   |              |          |
|----|--|---|--------------|----------|
| 3. | Did you have only one paying job or more than one job (including part-time evening or weekend work)? | ONLY ONE JOB..... 1 (SKIP TO Q5)<br>MULTIPLE JOBS ..... 2<br>DON'T KNOW ..... 9 | } (GO TO Q4) | ONEJOB99 |
|----|--|---|--------------|----------|

**IF MULTIPLE FROM Q3, ASK:**

- |    |  |   |          |
|----|--|---|----------|
| 4. | Altogether, how many paying jobs did you have last week? | _____ JOBS<br>DON'T KNOW ..... 99   | MANYJ99  |
| 5. | How many hours did you work last week (at all jobs)?     | _____ HOURS (IF 35 HOURS<br>A WEEK OR MORE, SKIP TO Q.27)<br>DON'T KNOW..... 999 (SKIP TO Q8) | HOURSC99 |

**IF LESS THAN 35 HOURS FROM Q5, ASK:**

- |    |   |  |          |
|----|---|--|----------|
| 6. | Do you usually work 35 hours or more a week at (this job) (these jobs)? | YES ..... 1<br>NO..... 2<br>DON'T KNOW ..... 9 | MOHRS199 |
|----|---|--|----------|

7a. Some people work part-time because they cannot find full-time work or for other business reasons. Other people work part-time because they have other responsibilities or for personal reasons. What about you? What was (is) the main reason you (worked less than 35 hours last week) (usually work less than 35 hours)?

REASO199

- |  |                                     |
|--|-------------------------------------|
| 1. Slack work/business conditions            | 10. Job started/ended during week   |
| 2. Could only find PT work                   | 11. Own illness                     |
| 3. Seasonal work                             | 12. On vacation                     |
| 4. Childcare problems                        | 13. Holiday (legal/religious)       |
| 5. Other family/personal obligations         | 14. Does not want to work full-time |
| 6. Health/medical limitations                | 15. Other                           |
| 7. School/training                           | .R No answer                        |
| 8. Retired/social security limit on earnings |                                     |
| 9. Full-time work week is less than 35 hours |                                     |

7b. Would you prefer to work more than 35 hours a week? YES ..... 1  
NO ..... 2  
DON'T KNOW ..... 9

PREFER99

(SKIP TO Q27)

**IF NOT EMPLOYED FOR PAY/PROFIT/NOT RETIRED FROM Q2, ASK:**

8. Did you have a job or business from which you were temporarily absent or on lay-off last week? YES ..... 1 (GO TO Q9)  
NO ..... 2 } (SKIP TO Q12)  
DON'T KNOW ..... 9

ABSENT99

**IF TEMPORARILY ABSENT/ON LAYOFF FROM Q8, ASK:**

9. What was the main reason why you were absent or on lay-off last week? Was it because of...(READ LIST)?  
ILLNESS ..... 1 } (SKIP TO Q11)  
VACATION ..... 2 }  
BAD WEATHER ..... 3 }  
A LABOR DISPUTE ..... 4 }  
A TEMPORARY LAY-OFF ..... 5 } (SKIP TO Q16)  
AN INDEFINITE LAY-OFF ..... 6 }  
WERE YOU ABOUT TO START A NEW JOB WITHIN THE NEXT 30 DAYS ..... 7 (SKIP TO Q15)  
OR SOME OTHER REASON ..... 8 } (GO TO Q11)  
DON'T KNOW ..... 9 }

REASO99

THERE IS NO QUESTION 10

**IF ILLNESS, VACATION, WEATHER, LABOR DISPUTE OR OTHER FROM Q9, ASK:**

11. Do you usually work 35 hours or more a week at this job? YES ..... 1  
NO ..... 2  
DON'T KNOW ..... 9

MOHRS299

(SKIP TO Q27)

**NOTE: IF Q9=1,2,3, OR 4, CONSIDER THEM AS 'WORKING' AND SKIP TO Q.27**

**IF NOT TEMPORARILY ABSENT OR ON LAYOFF FROM Q8, ASK:**

12. Have you been looking for work during the past four weeks? YES ..... 1 (GO TO Q13)  
NO ..... 2 } (SKIP TO Q22)  
DON'T KNOW ..... 9 }

LKING99

**IF LOOKING FOR WORK FROM Q12, ASK:**

13. Have you done anything in the past four weeks to find work, like checking with an employment agency, contacting an employer, answering a want ad, or checking with friends or relatives about a job?	NO ..... 1 (SKIP TO Q22)	LOOKNO99
	YES, CHECKED W/EMPLOYMENT AGENCY .. 1	LAGEN99
	YES, CONTACTED EMPLOYER(S) ..... 1	LKEMP99
	YES, ANSWERED WANT AD ..... 1	LKAD99
	YES, CHECKED W/FRIENDS..... 1	LKFRND99
	YES, OTHER ..... 1	LKOTHE99
	DON'T KNOW ..... 1 (SKIP TO Q22)	

} (GO TO Q15)

**(ANSWER MAY BE MULTIPLE YES)**

**THERE IS NO QUESTION 14**

**IF ANY YES FROM Q13, ASK:**

15. At the time you started looking for work, was it because you lost or quit a job or was there some other reason?	LOST JOB ..... 1 (GO TO Q16)	LOSTJC99
	QUIT JOB..... 2	
	OTHER ..... 3	
	DON'T KNOW ..... 9	

} (SKIP TO Q17)

**IF LOST JOB FROM Q15 OR Q9=5 OR 6, ASK:**

16. How many weeks ago were you laid off?	_____ WEEKS	LAI DOF99
	DON'T KNOW ..... 999	

**IF Q9=5 OR 6, SKIP TO Q19**

17. How many weeks have you been looking for work?	_____ WEEKS	WKSLOK99
	DON'T KNOW ..... 999	

**THERE IS NO QUESTION 18**

19. Could you have taken a job last week if one had been offered?	YES ..... 1	TAKJOB99
	NO..... 2	
	DON'T KNOW ..... 9	

} (GO TO Q22)

22. How many years has it been since you last worked at a regular job or business, either part-time or full-time? (READ CATEGORIES IF NECESSARY)	1 YEAR AGO OR LESS ..... 1	LSTWK299
	MORE THAN 1 YEAR TO 2 YEARS..... 2	
	MORE THAN 2 YEARS TO 3 YEARS ..... 3	
	MORE THAN 3 YEARS TO 5 YEARS..... 4	
	5 YEARS OR MORE ..... 5	
	NEVER WORKED..... 6	
	DON'T KNOW ..... 9	

} (GO TO Q24; IF RETIRED SKIP TO Q.138A)

**IF NOT LOOKING FOR WORK FROM Q12 OR UNABLE TO WORK FROM Q1, ASK:**

**THERE IS NO QUESTION 23**

24. *(If you could work, would) (Do) you want a regular job now, either full or part-time? *If disabled	YES ..... 1	FULPRT99
	NO..... 2	
	DON'T KNOW ..... 9	

**THERE IS NO QUESTION 25**

26. Do you intend to look for work of any kind in the next 12 months?	YES ..... 1	LOOK299
	NO..... 2	
	DON'T KNOW ..... 9	

**IF WORKING FROM Q1 OR EMPLOYED FOR PAY/PROFIT FROM Q2, OR Q9=1,2,3 OR 4, OR WORKED WITHIN PAST YEAR FROM Q22, ASK:**

27. During the last 12 months, how many weeks were you working for pay even if only for a few hours? (Include paid vacation and sick leave as work) **(IF ALL, ENTER "52")** \_\_\_\_\_ WEEKS WEKWRK99  
 DON'T KNOW ..... 99
28. During the past 12 months, how many hours a week did you usually work (when you were working)? \_\_\_\_\_ HOURS HRSWK99  
 DON'T KNOW ..... 99

• **IF NOT WORKING FROM Q1 OR NOT WORKING FOR PAY/PROFIT FROM Q2, OR Q9 DOES NOT EQUAL 1,2,3, OR 4, SKIP TO Q138A**

Now I have some questions about the (main) job (at which you worked) (from which you were absent) last week.

33. (At this main job,) are you self-employed or do you work for someone else? SELFEM99
- |                                |   |                |  |
|--------------------------------|---|----------------|--|
| SELF-EMPLOYED .....            | 1 | (GO TO Q34A)   |  |
| WORKING FOR SOMEONE ELSE ..... | 2 | (SKIP TO Q34C) |  |
| DON'T KNOW .....               | 9 | (SKIP TO Q36)  |  |

**IF SELF-EMPLOYED FROM Q33, ASK:**

- 34a. Are you self-employed as an independent contractor, independent consultant, free-lance worker, or something else? CONTRC99  
*(IF NECESSARY: such as a shop or restaurant owner)*
- |  |   |                 |  |
|--|---|-----------------|--|
| INDEPENDENT CONTRACTOR/<br>CONSULTANT/FREELANCER ..... | 1 | (SKIP TO 35)    |  |
| SOMETHING ELSE .....                                   | 2 | } (SKIP TO Q36) |  |
| DON'T KNOW .....                                       | 9 |                 |  |

**IF WORKING FOR SOMEONE ELSE FROM Q33, ASK:**

**THERE IS NO QUESTION 34B**

- 34c. Do you work as an independent contractor, independent consultant, or free-lance worker on this job? CONSLT99
- |                 |   |               |  |
|-----------------|---|---------------|--|
| YES .....       | 1 | (SKIP TO 35)  |  |
| NO .....        | 2 | } (GO TO Q36) |  |
| DON'T KNOW .... | 9 |               |  |

**IF Q34A=1 OR 34C=1, ASK:**

35. Do you work exclusively for one company or customer, or do you work for more than one company or customer? ONE99
- |                     |   |  |  |
|---------------------|---|--|--|
| ONLY ONE .....      | 1 |  |  |
| MORE THAN ONE ..... | 2 |  |  |
| DON'T KNOW .....    | 9 |  |  |

36. What kind of business or industry do you work in? **(IF NECESSARY:)** What do they make or do at this business? INDUST99

- |  |    |   |    |
|--|----|---|----|
| ACCOUNTING .....   | 01 | INSURANCE .....                         | 16 |
| ADVERTISING/ PUBLIC RELATIONS .....                        | 02 | LEGAL .....                             | 17 |
| AGRICULTURE/ MINING .....                                  | 03 | MANUFACTURING .....                     | 18 |
| ARCHITECTURE/ DESIGN/ LANDSCAPING .....                    | 04 | MEDICAL/ DENTAL/ HEALTH CARE/ PHARM.... | 19 |
| BANKING/ FINANCE .....                                     | 05 | OIL/ GAS .....                          | 20 |
| BUSINESS CONSULTANT .....                                  | 06 | PUBLIC UTILITIES .....                  | 21 |
| BUSINESS SERVICES .....                                    | 07 | PUBLISHING/ PRINTING/ COPY .....        | 22 |
| COMMUNICATIONS/ TV/ RADIO/ MEDIA .....                     | 08 | REAL ESTATE.....                        | 23 |
| COMPUTER MANUFACTURER/ ELECTRONICS ....                    | 09 | RETAIL TRADE .....                      | 24 |
| INTERNET SERVICE/ COMPUTER CONSULTANT/<br>ELECTRONICS..... | 10 | TRANSPORTATION .....                    | 25 |
| CONSTRUCTION .....   | 11 | WHOLESALE TRADE.....                    | 26 |
| EDUCATION/ DAY CARE PROVIDER.....                          | 12 | ENTERTAINMENT/ RECREATION.....          | 29 |
| ENGINEERING/ SCIENTIFIC/ R&D.....                          | 13 | HOUSEKEEPING/ JANITORIAL .....          | 30 |
| GOVERNMENT.....  | 14 | NON-PROFIT ORG.....                     | 31 |
| GRAPHICS .....   | 15 |   |    |

**THERE IS NO QUESTION 37**

38. How long have you worked there? How many years? (IF LESS THAN THREE YEARS, ENTER "0" AND ASK:) How many months? \_\_\_\_\_ YEARS WORKED99  
 \_\_\_\_\_ MONTHS (ONLY IF <3 YRS.)  
 DON'T KNOW ..... 99

**IF 1 YEAR OR MORE FROM Q38, ASK:**

39. During the past 12 months, have you received a promotion?	YES ..... 1	PROMO99
	NO..... 2	
	DON'T KNOW ..... 9	

**IF LESS THAN 1 YEAR FROM Q38, ASK:**

40. Did your current job represent an improvement in pay or status from a previous job?	YES ..... 1	CHANGE99
	NO..... 2	
	DON'T KNOW ..... 9	

41. What kind of work do you do; that is, what is your occupation? OCCUPATION \_\_\_\_\_ OCC199  
 DON'T KNOW ..... 9

42. What are your usual activities or duties?

- |  |  |
|--|--|
| <ol style="list-style-type: none"> <li>1. Professional           <ol style="list-style-type: none"> <li>11. Scientific and Engineering</li> <li>12. Medical</li> <li>13. Education</li> <li>14. Social Science</li> <li>15. Law</li> <li>16. Arts and Athletics</li> </ol> </li> <li>2. Managerial           <ol style="list-style-type: none"> <li>21. Executive, Corporate, and Military Officer, Owner</li> <li>22. Public Officials and Administrators (City, County, State, Federal)</li> <li>23. Other Managers and Buyers</li> <li>24. Proprietors, Consultants, Contractors</li> </ol> </li> <li>3. Technical, Sales, and Administrative Support           <ol style="list-style-type: none"> <li>31. Technicians and Related Support</li> <li>32. Sales</li> <li>33. Administrative Support, including Clerical</li> </ol> </li> <li>4. Services           <ol style="list-style-type: none"> <li>41. Private Household</li> <li>42. Protective</li> <li>43. Other Service Occupations</li> </ol> </li> </ol> | <ol style="list-style-type: none"> <li>5. Farming, Forestry, and Fishing           <ol style="list-style-type: none"> <li>51. Farm Operators and Managers</li> <li>52. Agriculture and Related Occupations</li> <li>53. Forestry and Logging Occupations</li> <li>54. Fishers, Hunters, and Trappers</li> </ol> </li> <li>6. Precision Production, Crafts, Repairs           <ol style="list-style-type: none"> <li>61. Mechanics and Repairers</li> <li>62. Construction Trades</li> <li>63. Precision Production</li> <li>64. Armed Forces Personnel (Non-Officer)</li> </ol> </li> <li>7. OPERATORS, FABRICATORS, LABORERS           <ol style="list-style-type: none"> <li>71. MACHINE OPERATORS AND TENDERS (EXCEPT PRECISION)</li> <li>72. TRANSPORTATION AND MATERIAL MOVING</li> <li>73. EQUIPMENT CLEANERS, HELPERS, AND LABORERS</li> </ol> </li> </ol> <p>.R Don't Know/Refused/No Answer</p> |
|--|--|

43. Altogether, how long have you worked in your present occupation? How many years? (IF LESS THAN ONE YEAR, ENTER "0" AND ASK:) How many months? \_\_\_\_\_ YEARS PRESOC99  
 \_\_\_\_\_ MONTHS  
 DON'T KNOW ..... 99

44. Counting all locations where (your employer) (you) operate(s), what is the total number of persons who work for (this employer) (you)? LESS THAN 10 ..... 1 WORKER99  
 10-49..... 2  
 50-99..... 3  
 100-499..... 4  
 500-999..... 5  
 1000-9999..... 6  
 10,000 OR MORE ..... 7  
 DON'T KNOW ..... 9

29. In your main job, do you usually work during the daytime, during the evening, during the nighttime, or do you work a rotating shift? DAYTIME ..... 1 SHIFT99  
 EVENING..... 2  
 NIGHTTIME..... 3  
 ROTATING/NOT FIXED..... 4  
 DON'T KNOW ..... 9

31. Do you have flexible hours that allow you to vary or make changes in the time you begin and end work? YES, FLEXIBLE ..... 1 FLXHRS99  
 NO, NOT FLEXIBLE ..... 2  
 DON'T KNOW ..... 9

32. As part of your regular hours on this job, do you work at home all of the time, some of the time, or none of the time? ALL OF THE TIME..... 1 WHOME99  
 SOME OF THE TIME ..... 2  
 NONE OF THE TIME ..... 3  
 DON'T KNOW ..... 9  
**Do NOT include times when you bring extra work home.**

45. I am going to read some characteristics of jobs and for each, please tell me if you agree strongly, agree somewhat, disagree somewhat or disagree strongly that it applies to your job. (READ ITEMS IN RANDOM ORDER) Do you agree strongly, agree somewhat, disagree somewhat or disagree strongly that it applies to your job?

	AGREE STRONGLY	AGREE SOMEWHAT	DISAGREE SOMEWHAT	DISAGREE STRONGLY	DON'T KNOW	
[ ] a. My job requires that I learn new things.....	1	2	3	4	9	NEW99
[ ] b. On my job, I have very little freedom to decide how I do my work.....	1	2	3	4	9	FREDOM99
[ ] c. My job allows me to make a lot of decisions on my own .....	1	2	3	4	9	OWN99
[ ] d. I have enough time to get the job done .....	1	2	3	4	9	TIME99
[ ] e. My job requires working very fast without having breaks .....	1	2	3	4	9	FAST99

46. At your (main) job, do you supervise the work of others or tell other employees what work to do? YES..... 1 SUPER99  
 NO ..... 2  
 DON'T KNOW ..... 9

THERE IS NO QUESTION 47

48. Thinking about where you go to work or the area where your workplace is, how much of a problem is each of the following. (READ ITEMS IN RANDOM ORDER) Is this a very serious problem, a somewhat serious problem, a minor problem, or not really a problem?

	VERY SERIOUS	SOMEWHAT SERIOUS	MINOR PROBLEM	NOT REALLY A PROBLEM	DON'T KNOW	
[ ] a. crime in the area .....	1	2	3	4	9	CRIME99
[ ] b. excessive noise .....	1	2	3	4	9	NOISE99
[ ] c. trash and litter .....	1	2	3	4	9	TRASH99
[ ] d. lighting at night.....	1	2	3	4	9	LIGHT99
[ ] e. accessibility to public transportation.....	1	2	3	4	9	ACCESS99
[ ] f. the variety of nearby shops and stores .....	1	2	3	4	9	SHOPS99

49. How much of the following things do you have to do as part of the duties of your job. Do you have to (ITEM) a lot, sometimes, or not at all as part of the duties of your job? (READ ITEMS IN ORDER)

	A LOT	SOMETIMES	NOT AT ALL	DON'T KNOW	
a. walk.....	1	2	3	9	WALK99
b. use stairs or inclines .....	1	2	3	9	STAIR99
c. sit for long periods .....	1	2	3	9	SIT99
d. stoop, crouch or kneel .....	1	2	3	9	STOOP99
e. lift or carry weights as heavy as 50 pounds .....	1	2	3	9	LIFT99

**IF NOT "A LOT" FROM Q49E, ASK:**

f. lift or carry weights as heavy as 10 pounds .....	1	2	3	9	CARRY99
g. repeat the same hand motion at least 30 times per hour.....	1	2	3	9	HAND99

		A LOT	SOMETIMES	NOT AT ALL	DON'T KNOW	
h.	bend over or twist around .....	1	2	3	9	BEND99
i.	use hand tools .....	1	2	3	9	TOOLS99
50.	Provided the economy does not change and your job performance is adequate, can you continue to work for your current employer as long as you wish?	YES .....	1	(SKIP TO Q53)		PERJOB99
		NO.....	2	(GO TO Q51)		
		DON'T KNOW .....	9	(SKIP TO Q53)		
<b>IF NO FROM Q50, ASK:</b>						
51.	Are you working only until a specific project is completed?	YES .....	1			PROJEC99
		NO.....	2			
		DON'T KNOW .....	9			
53.	Are you paid by a temporary employment agency? (IF NECESSARY:) A temporary help agency supplies workers to other companies on an as needed basis.	YES .....	1			TEMPAY99
		NO.....	2			
		DON'T KNOW .....	9			
56.	On your (main) job, are you a member of a labor union or other employee association similar to a union?	YES .....	1			UNIMEM99
		NO.....	2			
		DON'T KNOW .....	9			
57.	On your (main) job, are you covered by a union or employee association contract?	YES .....	1			UNICOV99
		NO.....	2			
		DON'T KNOW .....	9			

138a. What is your age? \_\_\_\_\_ AGE99

**IF REFUSED, ASK:**

138b.	We don't need to know exactly, but which of the following age categories are you? (READ CATEGORIES)	18-20 .....	01			AGECAT99
		21-24 .....	02			
		25-29 .....	03			
		30-39 .....	04			
		40-44 .....	05			
		45-49 .....	06			
		50-59 .....	07			
		60-70 .....	08			
		-OR- OVER 70.....	09			
		<b>DON'T READ →</b> DON'T KNOW .....	99			

142.	Are you married, separated or divorced, widowed, never been married or are you a member of an unmarried couple?	MARRIED .....	1			MARIED99
		SEPARATED/DIVORCED .....	2			
		WIDOWED .....	3			
		NEVER MARRIED .....	4			
		UNMARRIED COUPLE .....	5			
		DON'T KNOW .....	9			

**IF AGE 45-70 AND EVER WORKED FROM Q22, ASK:**

A1.	Do you consider yourself partially retired, completely retired, or not retired?	PARTIALLY RETIRED .....	1			RETIRE99
		COMPLETELY RETIRED .....	2			
		NOT RETIRED .....	3			
		DK.....	9			

**IF NOT RETIRED, ASK:**

A2.	At what age do you think you will retire?	_____	AGE OF RETIREMENT			RETAGE99
		DK.....	99			
A3.	After you retire, do you expect to receive any income from the following sources? (READ ITEMS?)	YES	NO	DON'T KNOW		
<u>A4</u> 01	a. from part-time work or a business? .....	1	2	9		PART99

		<u>YES</u>	<u>NO</u>	<u>DON'T KNOW</u>	
02	b. from family members (other than your spouse)? .....	1.....	2.....	9	FAM99
03	c. from your own Social Security?.....	1.....	2.....	9	SOCSEC99
04	d. (IF MARRIED FROM Q142:) from your spouse's earnings?.....	1.....	2.....	9	SPOUSE99
05	e. (IF MARRIED/WIDOWED/DIVORCED/SEPARATED FROM Q142:) from your (former) spouse's Social Security? .....	1.....	2.....	9	SSOC99
06	f. from Supplemental Security Income, a program for blind, disabled, or low-income elderly?.....	1.....	2.....	9	SSI99
08	h. from your own (or your spouse's) pensions or annuities? (IF NECESSARY:) Do not include Social Security benefits.....	1.....	2.....	9	PEN99
09	i. from savings, interest, or dividends including automatic reinvestment? .....	1.....	2.....	9	SAV99
10	j. from the sale of a home, or other assets?.....	1.....	2.....	9	ASSET99
99	= Don't know				

**IF MORE THAN ONE 'YES' TO A3, ASK:**

A4. Which of these income sources do you expect will provide you with the most money for your retirement?	<b>(LIST ALL "YES" ITEMS FROM A3)</b>	MOST99
---	---------------------------------------	--------

**IF PARTIALLY OR COMPLETELY RETIRED, ASK:**

A5. At what age did you (retire) (become partially retired)?	_____ AGE OF RETIREMENT	AGERET99
--	-------------------------	----------

		<u>YES</u>	<u>NO</u>	<u>DON'T KNOW</u>	
A6.	Which of the following were reasons for your retirement? Did you retire because ... (READ ITEMS)?				
<u>AZ</u>					
01	a. of your health?.....	1.....	2.....	9	HLTH99
02	b. of your age?.....	1.....	2.....	9	RAGE99
03	c. of the health of a family member?.....	1.....	2.....	9	FAMHLY99
04	d. of other things you wanted to do?.....	1.....	2.....	9	OTHACT99
05	e. you didn't like your job.....	1.....	2.....	9	JOB99
06	f. you were going to lose your job?.....	1.....	2.....	9	LOSJOB99
07	g. your skills were no longer required at your job? .....	1.....	2.....	9	NOSKIL99
08	h. (IF MARRIED/WIDOWED/DIVORCED/SEPARATED FROM Q142) your (former) spouse was retiring? .....	1.....	2.....	9	SPORIT99
09	i. other.....	1.....	2.....	9	
99	= Don't know				

**IF MORE THAN ONE YES TO A6A-H, ASK:**

A7. Of these, which would you say is the <u>main</u> reason you retired? (READ BACK ALL ITEMS IF ANSWERED 'YES'; INCLUDE 'OTHER' AMONG ANSWER CATEGORIES)	MAIRET99
--	----------

**IF COMPLETELY RETIRED, ASK:**

A8. Approximately how long were you employed at your last job? How many years? (IF LESS THAN ONE YEAR, ENTER "0")	_____ YEARS DK..... 99	LONGEM99
--	---------------------------	----------

THERE IS NO QUESTION A9 OR A9A

A10. Now that you are (retired) (partially retired), would you say you are now financially better off, worse off, or about the same as you expected to be before you (retired) (partially retired)?	BETTER OFF..... 1 WORSE OFF..... 2 ABOUT THE SAME..... 3 DON'T KNOW..... 9	FINBET99
--	---	----------

58. Do you currently have any kind of health care coverage? This would include health insurance, prepaid plans, such as H-M-O's – health maintenance organizations -- or any government sponsored plans, such as Medi-care or Medi-Cal? YES ..... 1 (GO TO Q58B) HLTINS99  
 NO..... 2 (GO TO Q58A)  
 DON'T KNOW ..... 9 (SEE BELOW)

**IF Q58=NO, ASK:**

58a. Did you have health care coverage at any point during the past 12 months? YES ..... 1 } (SEE BELOW) INS12M99  
 NO..... 2 }  
 DON'T KNOW ..... 9 }

**IF Q58=INSURED, ASK:**

58b. Was there any point during the past 12 months when you went without health insurance? YES ..... 1 NOINS99  
 NO..... 2  
 DON'T KNOW ..... 9

59. Which of the following best describes how you receive your health insurance. Do you receive it through... (READ CATEGORIES)? (IF MULTIPLE) Which type do you use to pay for most of your medical care?

- YOUR OWN EMPLOYER, LABOR UNION OR TRADE ASSOCIATION ..... 1 INSTYC99
- ANOTHER FAMILY MEMBER'S EMPLOYER, LABOR UNION OR TRADE ASSN..... 2
- MEDICARE, THE GOVERNMENT'S HEALTH INSURANCE PROGRAM FOR ELDERLY AND DISABLED PEOPLE ..... 3
- MEDI-CAL, THE STATE HEALTH INSURANCE PROGRAM FOR PEOPLE ON PUBLIC ASSISTANCE AND OTHER LOW INCOME INDIVIDUALS ..... 4
- A HEALTH INSURANCE PLAN THAT YOU OR SOME OTHER FAMILY MEMBER BOUGHT DIRECTLY FOR YOU ..... 5
- A PREVIOUS EMPLOYER..... 6
- OR- SOME OTHER SOURCE ..... 7
- DON'T KNOW ..... 9

**IF INSURED THROUGH OWN EMPLOYER OR OWN LABOR UNION/TRADE ASSN. FROM Q59, ASK:**

59a. Does your (employer or labor union) (temporary agency) pay for all, part or none of the insurance premium? ALL ..... 1 PREMI99  
 PART ..... 2  
 NONE ..... 3  
 DON'T KNOW ..... 9

**IF Q59=MEDICARE, ASK:**

A11. Do you have a Medigap policy, that is, a private insurance policy to supplement your Medicare? YES ..... 1 MGAP99  
 NO..... 2  
 DON'T KNOW ..... 9

**IFA11=YES AND A1=PARTIALLY OR COMPLETELY RETIRED, ASK:**

A12. Does your former employer pay for all, part or none of the costs of this Medigap policy? ALL ..... 1 GAPPAY99  
 PART ..... 2  
 NONE..... 3  
 DON'T KNOW ..... 9

- (IF NOT INSURED OR REFUSED FROM Q58) **AND** (WORKING FROM Q1 OR EMPLOYED FOR PAY/PROFIT FROM Q2, OR Q9=1,2,3 OR 4) GOTO Q61
  - (IF NOT INSURED OR REFUSED FROM Q58) **AND** (UNABLE TO WORK FROM Q1 OR NOT WORKING FOR PAY/PROFIT FROM Q2 OR Q9 IS NOT 1,2,3, OR 4 AND LAST WORKED LESS THAN 3 YEARS AGO FROM Q22) SKIP TO Q65\*
  - (IF NOT INSURED OR REFUSED FROM Q58) **AND** (UNABLE TO WORK FROM Q1 OR NOT WORKING FOR PAY/PROFIT FROM Q2 OR Q9 IS NOT 1,2,3, OR 4 AND LAST WORKED MORE THAN 3 YEARS AGO FROM Q22) SKIP TO Q78A
- \* (IF AGE 45-70 ASK A13 BEFORE SKIPPING TO Q65/78A/80)

**IF INSURED FROM Q58, ASK:**

60.	Is your health plan an HMO, or health maintenance organization, where you must generally receive care from the HMO's doctors or else the expense is not covered?	YES, HMO..... 1	HMO99
		NO, NOT AN HMO ..... 2	
		DON'T KNOW ..... 9	

Some health insurance plans require patients to sign up with a certain doctor or group of doctors or a certain clinic in which patients must go for all of their routine care.

60a.	Are you required to use only a certain group of doctors, or can you go to any doctor you choose?	ONLY CERTAIN MD'S..... 1 (SKIP TO Q60c)	GRPDOW99
		ANY MD'S ..... 2 } (GO TO Q60b)	
		DON'T KNOW ..... 9	

**IF ANY MD'S OR DON'T KNOW FROM Q60A, ASK:**

60b.	Under your current health plan, do you pay less if you use a certain group of doctors?	YES ..... 1	EXTRBW99
		NO..... 2	
		DON'T KNOW ..... 9	

60c.	Will your health plan pay for any of the costs of visits to doctors who are not associated with your health plan?	YES ..... 1	PAYPAR99
		NO..... 2	
		DON'T KNOW ..... 9	

60d.	Have you changed insurance plans in the past year?	YES ..... 1	INSHG99
		NO..... 2	
		DON'T KNOW ..... 9	

**THERE IS NO QUESTION 60E**

**IF WORKING FROM Q1 OR EMPLOYED FOR PAY/PROFIT FROM Q2 , OR Q9 EQUALS 1,2,3 OR 4, AND NOT INSURED OR REFUSED FROM Q58, ASK:**

61.	Does your (employer) (temporary agency) offer health insurance to any of its (temporary) employees?	YES..... 1	TMPHLT99
		NO ..... 2	
		DON'T KNOW ..... 9	

**IF YES FROM Q61, ASK:**

62.	Could you be on this plan if you wanted to?	YES..... 1	ANYPLN99
		NO ..... 2	
		DON'T KNOW ..... 9	

**IF AGE 45-70, ASK:**

A13.	Do you have a separate, long-term care insurance policy; insurance that would cover nursing home care or home health care?	YES..... 1	LTERM99
		NO..... 2	
		DON'T KNOW ..... 9	

**THERE IS NO QUESTION A14**

**IF WORKING FROM Q1 OR EMPLOYED FOR PAY/PROFIT FROM Q2 , OR Q9 EQUALS 1,2,3 OR 4, ASK:**

63.	Are you included in any pension plan, retirement plan, or tax-deferred savings plan through your (main) job, whether sponsored by your employer or union?	YES..... 1	PENPLN99
		NO ..... 2 } (SEE BELOW)	
		DON'T KNOW..... 9	

**IF YES TO Q63 AND AGE 45-70, GO TO Q64. IF NOT AGE 45-70, SKIP TO Q.65**

**IF NO OR DK FROM Q63 AND AGE 45-70, ASK:**

63a.	Does your employer or union offer any such plans to its employees or members?	YES..... 1 (ASK Q63B)	EMPLAN99
		NO..... 2 (GO TO Q65)	
		DON'T KNOW..... 9 (GO TO Q65)	

**IF YES FROM Q63A AND AGE 45-70, ASK:**

63b.	Are you eligible to be included in any of these plans?	YES..... 1 (GO TO Q65)	ELIPLN99
		NO..... 2 (SKIP TO Q63D)	
		ELIGIBLE IF WORKED FULL-TIME..... 3 (SKIP TO Q65)	
		DON'T KNOW ..... 9.. (SKIP TO Q65)	

THERE IS NO QUESTION 63C

**IF NO TO Q63B, ASK:**

63d. Will you be eligible for these plans if you continue to work for this employer?	YES..... 1 NO..... 2 DEPENDS..... 3 DON'T KNOW..... 9	}	(GO TO Q65)	ELICON99
--	--	---	-------------	----------

THERE IS NO QUESTION 63E

**IF YES TO Q63 AND AGE 45-70, ASK:**

64. In some retirement plans, benefits are based on a formula involving age, years of service, and salary. In other plans, money is accumulated in an account for you like a 401K (FOUR-OH-ONE-KAY) plan. Which of these two plans best describes the type of pension plan you have? (READ CATEGORIES)	FORMULA..... 1 MONEY ACCUMULATED..... 2 BOTH TYPES..... 3 DON'T KNOW..... 9	PENTYP99
--	--	----------

**IF WORKING FROM Q1 OR EMPLOYED FOR PAY/PROFIT FROM Q2, OR Q9 EQUALS 1,2,3 OR 4, OR WORKED WITHIN PAST 3 YEARS FROM Q22, ASK:**

65. In the past three years, did you ever lose a job?	YES, LOST A JOB..... 1 NO, DID NOT..... 2 DON'T KNOW..... 9	LOSEJO99
66. In the past three years, did you leave a job specifically because you expected to be laid off?	YES, EXPECTED TO BE LAID OFF..... 1 NO, DID NOT..... 2 DON'T KNOW..... 9	LEAVJB99

**IF YES FROM EITHER Q65 OR Q66, ASK:**

Thinking about the last time you lost or left a job...		
67. Did this occur within the past 12 months?	PAST 12 MONTHS..... 1 BEFORE THIS..... 2 DON'T KNOW..... 9	LASTYR99
68. How long had you been employed by this employer? How many years?	_____ YEARS DON'T KNOW..... 99	HOWLG299
69. Were you employed by government, by a private company, a non-profit organization, or were you self-employed or working in a family business?	GOVERNMENT..... 1 PRIVATE COMPANY..... 2 NON-PROFIT ORG..... 3 SELF-EMPLOYED..... 4 FAMILY BUSINESS..... 5 DON'T KNOW..... 9	TYPEMP99
72. What kind of work did you do; that is, what was your occupation? <b>SEE CODES FOLLOWING Q. 42 (ABOVE)</b>	OCCUPATION: DON'T KNOW..... 9	OCC299

**ALSO ASK ONLY IF Q22=1,2 OR 3:**

73. Have you worked for pay since that job ended?	YES..... 1 NO..... 2 DON'T KNOW..... 9	PAYEND99
---	--	----------

THERE ARE NO QUESTIONS 74-76

**IF WORKING FROM Q1 OR EMPLOYED FOR PAY/PROFIT FROM Q2 , OR Q9=1,2,3 OR 4,, ASK:**

77.	Earlier you told me that you'd worked at your present job for [(q38)years/months]. Have you been at any previous job longer than your current one?	YES ..... 1 (GO TO 77A) NO..... 2 (SKIP TO 80) DON'T KNOW ..... 9 (SKIP TO 80)	LONGER99
-----	--	--	----------

**IF YES TO Q77, ASK:**

77a.	Thinking about the job where you worked the longest, what kind of business or industry was it? (IF NECESSARY:) What do they make or do at this business?	INDUSTRY DON'T KNOW .....9	INDUL199
------	--	-------------------------------	----------

**SEE CODES FOLLOWING Q. 36 (ABOVE)**

77b	What kind of work did you do; that is, what was your occupation?	OCCUPATION: DON'T KNOW .....9	OCCL199
-----	--	----------------------------------	---------

**SEE CODES FOLLOWING Q. 42 (ABOVE)**

77c.	How long had you been employed by this employer? How many years?	_____ YEARS DON'T KNOW ..... 99	HOWLN199
------	--	------------------------------------	----------

**IF NOT WORKING OR EMPLOYED FROM Q1 OR Q2 AND Q9 IS NOT 1,2,3 OR 4, BUT HAVE WORKED FROM Q22, ASK:**

Now I'd like to ask you about the job you worked at for the longest amount of time.

78a.	At your longest job, what kind of business or industry was it? (IF NECESSARY:) What do they make or do at this business?	INDUSTRY DON'T KNOW .....9	INDUL299
------	--	-------------------------------	----------

**SEE CODES FOLLOWING Q. 36 (ABOVE)**

78b.	What kind of work did you do; that is, what was your occupation?	OCCUPATION: DON'T KNOW .....9	OCCL299
------	--	----------------------------------	---------

**SEE CODES FOLLOWING Q. 42 (ABOVE)**

78c.	How long were you employed by this employer? How many years?	_____ YEARS DON'T KNOW ..... 99	HOWLN299
------	--	------------------------------------	----------

Now some questions about your health...

80.	In general, would you say your health is excellent, very good, good, fair or poor?	EXCELLENT..... 1 VERY GOOD ..... 2 GOOD..... 3 FAIR..... 4 POOR ..... 5 DON'T KNOW ..... 9	HEALTH99
-----	--	---	----------

96. Has your doctor ever told you that you had (ITEM)?  
(READ IN RANDOM ORDER)

	<u>YES</u>	<u>NO</u>	<u>DON'T KNOW</u>	
[ ] a.	1	2	9	HBP99
[ ] b.	1	2	9	HEART99
[ ] c.	1	2	9	DIABET99
[ ] d.	1	2	9	CANCER99
[ ] e.	1	2	9	ASTHMA99
[ ] f.	1	2	9	MIGRAI99



100.	Does any long-term physical or mental impairment or medical condition <u>now</u> keep you from working at a job or business?	YES ..... 1 NO.....2 DON'T KNOW ..... 9	LIMWRK99
------	--	---	----------

101.	Are you limited in the kind <u>or</u> amount of work you can do because of any long-term impairment or health problem?	YES ..... 1 NO.....2 DON'T KNOW ..... 9	LIMWR299
------	--	---	----------

**IF KEEPING HOUSE FROM Q1 AND YES FROM Q104, ASK:**

102.	Does any long-term impairment or health problem <u>now</u> keep you from doing any housework at all?	YES ..... 1 NO.....2 DON'T KNOW ..... 9	LIMHOU99
------	--	---	----------

**IF NO OR REFUSED FROM Q102, ASK:**

103.	Are you limited in the kind <u>or</u> amount of housework you can do because of any long-term impairment or health problem?	YES ..... 1 NO.....2 DON'T KNOW ..... 9	LIMHO299
------	---	---	----------

**IF AGE 45-70, ASK:**

THERE ARE NO QUESTIONS A15 OR A16

A17.	<i>Are you able to perform personal care needs such as eating, bathing, going to the bathroom or dressing yourself without difficulty?</i>	YES ..... 1 NO.....2 DON'T KNOW ..... 9	CARE99
------	--	---	--------

**IF NO, ASK:**

A18.	<i>Do you need assistance from another person for these personal care needs?</i>	YES ..... 1 NO.....2 DON'T KNOW ..... 9	ASSIST99
------	--	---	----------

THERE ARE NO QUESTIONS 106 OR 107

108.	During the past month, how would you rate your sleep quality overall – excellent, very good, good, fair or poor?	EXCELLENT ..... 1 VERY GOOD ..... 2 GOOD ..... 3 FAIR ..... 4 POOR ..... 5 DON'T KNOW ..... 9	SLEEP99
------	--	--	---------

THERE ARE NO QUESTIONS 109 – 111

81.	Have you smoked at least 100 cigarettes in your entire life?	YES ..... 1 (GO TO Q82) NO.....2 } (SKIP TO DON'T KNOW ..... 9 } Q87 OR 91)	SMOKE99
-----	--	---	---------

**IF YES FROM Q81, ASK:**

82.	How old were you when you first started smoking cigarettes?	_____ YEARS OLD DON'T KNOW ..... 99	SMAGE99
-----	---	--	---------

83.	Do you now smoke cigarettes every day, some days, or not at all?	EVERY DAY..... 1 } (GO TO Q84) SOME DAYS..... 2 } NOT AT ALL..... 3 (SKIP TO Q.86) DON'T KNOW ..... 9 (SKIP TO Q.87/91)	SMDAY99
-----	--	--	---------

**IF EVERY DAY OR SOME DAYS FROM Q83, ASK:**

84a.	On average, how many cigarettes do you now smoke a day?	_____ CIGARETTES DON'T KNOW ..... 999	CIGAV199
84b.	On how many of the past 30 days did you smoke cigarettes?	_____ DAYS DON'T KNOW ..... 99	SMPAST99
85.	During the past 12 months, did you smoke at (ITEM)?		
		<b>YES</b> <b>NO</b> <b>DK</b>	
b.	Bars, taverns or nightclubs, or right outside a bar	..... 1..... 2..... 9	SMBAR99
c.	Restaurants, or right outside a restaurant	..... 1..... 2..... 9	SMREST99
<b>IF (Q.1/Q.2=1) OR (Q.9=1,2,3 OR 4) OR (Q.22=1), ASK:</b>			
d.	Work, or right outside the building	..... 1..... 2..... 9	SMWORK99
<b>IF ANY Q85B-D=YES, IMMEDIATELY ASK:</b>			
Compared to 12 months ago, are you doing <u>more</u> or <u>less</u> of your smoking at (ITEM)?			
		<b>MORE</b> <b>LESS</b> <b>SAME</b> <b>DK</b>	
85bb.	Bars, taverns or nightclubs, or right outside a bar	..... 1 ..... 2 ..... 3 ..... 9	MBAR99
85cc.	Restaurants, or right outside a restaurant	..... 1 ..... 2 ..... 3 ..... 9	MREST99
85dd.	Work, or right outside the building	..... 1 ..... 2 ..... 3 ..... 9	MWORK99
85x.	Compared to 12 months ago, are you doing more or less of your smoking at <u>home</u> ?	MORE ..... 1 LESS ..... 2 SAME ..... 3 DON'T KNOW ..... 9	SMMORE99
<b>IF Q.83 =3 (FORMER SMOKER), ASK:</b>			
86.	On the average, when you smoked, about how many cigarettes did you smoke a day?	_____ CIGARETTES DON'T KNOW ..... 999	CIGAV299
86x.	For how many years did you smoke?	_____ YEARS DON'T KNOW ..... 99	SMYRS99

**IF AGE 21 OR OVER, ASK:**

87.	During the past month, have you had at least one drink of any alcoholic beverage, such as beer, wine, or liquor?	YES ..... 1 (GO TO Q88) NO ..... 2 } (GO TO Q91) DON'T KNOW ..... 9	ALCOHO99
-----	--	---	----------

**IF YES FROM Q87, ASK:**

88.	During the past month, how many days per week or month did you drink any alcoholic beverages, on the average?	_____ DAYS PER WEEK _____ DAYS PER MONTH DON'T KNOW ..... 999	ALCWEK99 ALCMTH99
89a.	If a drink is considered one can or bottle of beer, one glass of wine, one cocktail or one shot of liquor, on the days when you drank, about how many drinks did you drink on the average?	_____ DRINKS PER OCCASION DON'T KNOW ..... 99	ALCDNK99
89b.	Considering all types of alcoholic beverages, how many times during the past month did you have five or more drinks on an occasion?	_____ TIMES DON'T KNOW ..... 99	ALCFIV99
90.	During the past 12 months, did you drink at (ITEM)?	<b>YES</b> <b>NO</b> <b>DK</b>	

- b. Bars, taverns or nightclubs ..... 1 ..... 2 ..... 9 BARDNK99  
 c. Restaurants ..... 1 ..... 2 ..... 9 RESTDK99

IF (Q.1/Q.2=1) OR (Q.9=1,2,3 OR 4) OR (Q.22=1), ASK:

- d. Work, or right outside the building ..... 1 ..... 2 ..... 9 WKDNK99

IF ANY Q90B-D=YES, IMMEDIATELY ASK:

Compared to 12 months ago, are you doing more or less of your drinking at (ITEM)?

- |   | <u>MORE</u> | <u>LESS</u> | <u>SAME</u> | <u>DK</u> |          |
|---|-------------|-------------|-------------|-----------|----------|
| 90bb. Bars, taverns or nightclubs         | 1           | 2           | 3           | 9         | MBAR299  |
| 90cc. Restaurants                         | 1           | 2           | 3           | 9         | MREST299 |
| 90dd. Work, or right outside the building | 1           | 2           | 3           | 9         | MWORK299 |

- 90x. Compared to 12 months ago, are you doing more or less of your drinking at home?
- |            |   |          |
|------------|---|----------|
| MORE       | 1 | MDRINK99 |
| LESS       | 2 |          |
| SAME       | 3 |          |
| DON'T KNOW | 9 |          |

The next few questions are about exercise, recreation, or physical activities (other than your regular job duties).

91. During the past month, did you participate in any physical activities or exercises such as running, calisthenics (cal-is-then-ics), golf, gardening, or walking for exercise?
- |            |   |                  |          |
|------------|---|------------------|----------|
| YES        | 1 | (GO TO Q92)      | EXERCI99 |
| NO         | 2 | } (SKIP TO Q112) |          |
| DON'T KNOW | 9 |                  |          |

IF YES FROM Q91, ASK:

92. What type of physical activity or exercise did you spend the most time doing during the past month? (DO NOT READ CATEGORIES) (RECORD ONLY ONE RESPONSE) EXTYP99

- |                       |    |                              |    |
|-----------------------|----|------------------------------|----|
| AEROBICS              | 1  | SKATING/INLINE               | 15 |
| BASEBALL/SOFTBALL     | 2  | SKIING/SNOWBOARDING          | 16 |
| BASKETBALL            | 3  | SOCCER                       | 17 |
| BICYCLING             | 4  | STAIRSTEPPING DEVICES/CARDIO | 18 |
| BOWLING               | 5  | SURFING                      | 19 |
| CALISTHENICS          | 6  | SWIMMING                     | 20 |
| DANCE                 | 7  | TENNIS                       | 21 |
| GARDENING/MOWING LAWN | 8  | VOLLEYBALL                   | 22 |
| GOLF                  | 9  | WALKING FOR EXERCISE         | 23 |
| HIKING/CLIMBING       | 10 | WEIGHT LIFTING               | 24 |
| HORSEBACK RIDING      | 11 | YOGA/T'AI CHI                | 25 |
| MARTIAL ARTS          | 12 | OTHER(SPECIFY)               |    |
| ROWING                | 13 |                              | 97 |
| RUNNING/JOGGING       | 14 | DON'T KNOW                   | 99 |

IF RUNNING, JOGGING, WALKING OR SWIMMING FROM Q92, ASK:

94. How many times per week did you take part in this activity during the past month? ..... TIMES EXMTH99  
 DON'T KNOW ..... 99
95. And when you took part in this activity, for how many minutes or hours did you usually keep at it? \_\_\_\_\_ MINUTES EXTIME99  
 \_\_\_\_\_ HOURS  
 DON'T KNOW ..... 99

Now some questions about your relationship with friends (and coworkers).

112. In total, how many close friends do you have? (People that you feel at ease with, can talk to about private matters and can call on for help.) \_\_\_\_\_ FRIENDS FRIENW99  
 DON'T KNOW ..... 99 (SKIP TO Q127)

**IF WORKING OR HAVE JOB/NOT AT WORK FROM Q1 OR WORKING FOR PAY/PROFIT FROM Q2 OR Q9=1,2,3 OR 4, ASK:**

113.	How many of these close friends are coworkers at your (main) job?	_____ FRIENDS AT WORK DON'T KNOW .....99	FRIEJW99
114.	How many relatives do you have that you feel close to?	_____ CLOSE RELATIVES DON'T KNOW .....99 (SKIP TO Q127)	RELCLS99
115.	How many of these friends or relatives do you see at least once a month?	_____ DON'T KNOW .....99 (SKIP TO Q127)	RELVIS99
116.	How many of these friends or relatives do you talk to on the telephone at least once a week?	_____ DON'T KNOW ..... 99	RELPHC99

**127. The next questions are about how you've been feeling over the past week. (READ ITEMS IN RANDOM ORDER)**

		<u>YES</u>	<u>NO</u>	<u>DON'T KNOW</u>	
[ ]	a. Are you basically satisfied with your life? .....	1	2	9	LIFSAT99
[ ]	b. Have you dropped many of your activities and interests? .....	1	2	9	DROPAC99
[ ]	c. Do you feel that your life is empty? .....	1	2	9	LIFEMP99
[ ]	d. Do you often get bored? .....	1	2	9	BORED99
[ ]	e. Are you in good spirits most of the time?.....	1	2	9	SPIRIT99
[ ]	f. Are you afraid that something bad is going to happen to you? .....	1	2	9	BAD99
[ ]	g. Do you feel happy most of the time? .....	1	2	9	HAPPY99
[ ]	h. Do you often feel helpless?.....	1	2	9	HLPLSS99
[ ]	i. Do you prefer to stay at home, rather than going out and doing new things?.....	1	2	9	ATHOME99
[ ]	j. Do you feel you have more problems with memory than most people? .....	1	2	9	PROBLE99
[ ]	k. Do you think it is wonderful to be alive now?.....	1	2	9	WONDER99
[ ]	l. Do you feel pretty worthless the way you are now? .....	1	2	9	WORTH99
[ ]	m. Do you feel full of energy? .....	1	2	9	ENERGY99
[ ]	n. Do you feel that your situation is hopeless? .....	1	2	9	HOPLES99
[ ]	o. Do you think that most people are better off than you are?.....	1	2	9	BETTER99

**129. The next questions ask about your feelings and thoughts during the past month. In each case, please indicate how often you felt or thought this way (READ ITEMS IN RANDOM ORDER, ASKING) In the past month, how often have you felt or thought this way -- almost never, sometimes, often or very often?**

		<u>ALMOST NEVER</u>	<u>SOME-TIMES</u>	<u>OFTEN</u>	<u>VERY OFTEN</u>	<u>DON'T KNOW</u>	
[ ]	a. You felt that you were unable to control the important things in your life .....	1	2	3	4	9	CONTRL99
[ ]	b. You felt confident about your ability to handle your personal problems .....	1	2	3	4	9	PERSON99
[ ]	c. You felt that things were going your way .....	1	2	3	4	9	YOURWA99
[ ]	d. You felt difficulties were piling up so high that you could not overcome them.....	1	2	3	4	9	OVERCO99

**IF WORKING OR HAVE JOB/NOT AT WORK FROM Q1, OR WORKING FOR PAY/PROFIT FROM Q2, OR Q9=1,2,3, OR 4, OR NOT RETIRED FROM Q1 AND EVER WORKED FROM Q22, ASK:**

130.	Have you ever been fired, not been hired, or not been promoted because of your age, sex, skin color or race, ethnic background, or because of a handicap or illness? (ANSWER CAN BE MULTIPLE)	YES, FIRED..... 1	FIRED99
		YES, NOT HIRED..... 1	NOTHIR99
		YES, NOT PROMOTED..... 1	NOTPRO99
		NO..... 1	NONEG99
		DON'T KNOW ..... 1	

IF YES FROM Q130, ASK:

131. Which of the following was a reason why you were fired, not hired, or not promoted? (READ CATEGORIES) (ANSWER CAN BE MULTIPLE)	AGE.....	1	DISAGE99
	GENDER.....	1	DISSEX99
	SKIN COLOR/RACE.....	1	DISRAC99
	ETHNIC BACKGROUND.....	1	DISETH99
	HANDICAP/ILLNESS.....	1	DISHAN99
	DON'T KNOW.....	1	

134. Have you ever been fired, not been hired, or not been promoted because of your sexual orientation? (ANSWER CAN BE MULTIPLE)	YES, FIRED.....	1	ORIFIR99
	YES, NOT HIRED.....	1	ORIHIR99
	YES, NOT PROMOTED.....	1	ORIPRO99
	NO.....	1	ORINO99
	DON'T KNOW.....	1	

Finally, some questions about yourself for background purposes...

139. What is the highest level of school you have completed or the highest degree you have received?

4 <sup>TH</sup> GRADE OR LESS.....	1	COLLEGE GRADUATE/ BACHELOR'S DEGREE.....	7	EDUC99
5 <sup>TH</sup> -8 <sup>TH</sup> GRADE.....	2	MASTER'S DEGREE.....	8	
9-12 (NO HIGH SCHOOL DIPLOMA).....	3	PROFESSIONAL SCHOOL DEGREE.....	9	
HIGH SCHOOL GRADUATE.....	4	DOCTORATE.....	10	
SOME COLLEGE/NO DEGREE.....	5	DON'T KNOW.....	99	
ASSOCIATE DEGREE/TRADE OR VOCATIONAL SCHOOL.....	6			

**THERE ARE NO QUESTIONS 140 – 141**

**IF MARRIED OR MEMBER OF UNMARRIED COUPLE FROM Q142, ASK:**

143. What is the highest level of school your spouse or partner has completed or the highest degree he or she has received?	4 <sup>TH</sup> GRADE OR LESS.....	1	COLLEGE GRADUATE/ BACHELOR'S DEGREE.....	7	PARTED99
	5 <sup>TH</sup> -8 <sup>TH</sup> GRADE.....	2	MASTER'S DEGREE.....	8	
	9-12 (NO HIGH SCHOOL DIPLOMA).....	3	PROFESSIONAL SCHOOL DEGREE.....	9	
	HIGH SCHOOL GRADUATE.....	4	DOCTORATE.....	10	
	SOME COLLEGE/NO DEGREE.....	5	DON'T KNOW.....	99	
	ASSOCIATE DEGREE/TRADE OR VOCATIONAL SCHOOL.....	6			

143a. Are you the parent or legal guardian of a child under age 18?	YES.....	1	PARENT99
	NO.....	2	
	DON'T KNOW.....	9	

**IF YES, ASK:**

143b. How many of your children under age 18 live in this household?	RECORD NUMBER.....		NCHILD99
	DON'T KNOW.....	99	

144. For classification purposes, are you Latino or of Hispanic origin or descent?	YES.....	1 (GO TO Q145)	HISPANIC
	NO.....	2	
	DON'T KNOW.....	9 } (SKIP TO Q146)	

**IF YES FROM Q144, ASK:**

145. Which of the following best describes your national origin or descent? (READ CATEGORIES)	MEXICAN-AMERICAN OR CHICANO.....	1	ORIG199
	PUERTO RICAN.....	1	ORIG299
	CUBAN-AMERICAN.....	1	ORIG399
	CENTRAL AMERICAN.....	1	ORIG499
	SOUTH AMERICAN.....	1	ORIG599
	SPANISH-AMERICAN.....	1	ORIG699
	-OR-OTHER (SPECIFY).....	1	ORIG799
	DON'T READ → DON'T KNOW.....	1	ORIG899
			RACE

146. For classification purposes, what is your racial background? Are you white, black or African-American, Asian or Pacific Islander, or are you a member of another race? (ANSWER CAN BE MULTIPLE)

WHITE.....	1	WHITE
BLACK/AFRICAN-AMERICAN .....	1	BLACK
ASIAN/PACIFIC ISLANDER.....	1	ASIAN
-OR-OTHER (SPECIFY) _____	.1	RACE_OTH
DON'T KNOW .....	1	RACE_DK

147. About how tall are you without shoes?

_____ FEET	
_____ INCHES	TALL
DON'T KNOW _____	99

148. About how much do you weigh without shoes? (IF VOLUNTEERS THAT SHE IS PREGNANT:) What was your pre-pregnancy weight?

_____ POUNDS	WEIGHT99
DON'T KNOW .....	999

149. In what country were you born?

		BORN	
UNITED STATES .....	1	IRELAND .....	13
AUSTRALIA .....	2	ITALY .....	14
BRAZIL .....	3	JAPAN.....	15
CANADA .....	4	KOREA.....	16
CHINA/TAIWAN.....	5	LAOS .....	17
COLUMBIA .....	6	MEXICO .....	18
FRANCE .....	7	NICARAGUA.....	19
GERMANY.....	8	PAKISTAN.....	20
GREAT BRITAIN .....	9	RUSSIA .....	21
GUATEMALA .....	10	OTHER (SPECIFY) _____	.97
INDIA.....	11	DON'T KNOW .....	99
IRAN .....	12		

**IF ANY COUNTRY OTHER THAN U.S. FROM Q149, ASK:**

150. How old were you when you first came to live in the U.S.?	_____ AGE WHEN ARRIVED	USAGE
	DON'T KNOW .....	99

151. What language do you speak most often at home? (ACCEPT ONLY ONE RESPONSE)

ENGLISH .....	1	LANGHOME
SPANISH .....	2	
CANTONESE/MANDARIN .....	3	
KOREAN.....	4	
VIETNAMESE .....	5	
TAGALOG .....	6	
JAPANESE.....	7	
OTHER (SPECIFY) _____	.0	
DON'T KNOW .....	9	

**IF WORKING OR HAVE JOB/NOT AT WORK FROM Q1 OR WORKING FOR PAY/PROFIT FROM Q2 OR Q9=1,2,3 OR 4, ASK:**

152. What language do you speak <u>most</u> often at work? (ACCEPT ONLY <u>ONE</u> RESPONSE)	ENGLISH .....	1	LANGWK99
	SPANISH .....	2	
	CANTONESE/MANDARIN .....	3	
	KOREAN.....	4	
	VIETNAMESE .....	5	
	TAGALOG .....	6	
	JAPANESE.....	7	
	OTHER (SPECIFY) _____	.0	
	DON'T KNOW .....	9	

153. Including yourself, how many people live in your household?

_____ TOTAL HH	HOUSEH99
DON'T KNOW .....	99

**IF MORE THAN ONE FROM Q153, ASK:**

154. Including yourself, how many are adults age 18 or older?	_____	AGE1899
	DON'T KNOW .....	99

**IF Q153 GREATER THAN Q154, ASK:**

THERE IS NO QUESTION 155

DON'T KNOW

156. How many are children age 5 through 17? \_\_\_\_\_ 99 AG51799
157. How many are under age 5? \_\_\_\_\_ 99 AGLES599

**IF ANY CHILDREN IN HOUSEHOLD UNDER AGE 5 FROM Q157, ASK:**

158. About how many hours in a typical day do you spend taking care of the physical needs of the children who are under age 5 in your household, things like feeding, bathing, dressing \_\_\_\_\_ HOURS and putting them to bed? Just your best estimate. DON'T KNOW ..... 99 CARHRS99

**IF WORKING FROM Q1 OR EMPLOYED FOR PAY/PROFIT FROM Q2 OR Q9=1,2,3 OR 4, ASK:**

159. For how many hours were the children under age five in paid child care last week? (IF MULTIPLE CHILDREN, ENTER HOURS APPLICABLE TO CHILD WITH MOST HOURS) \_\_\_\_\_ HOURS DON'T KNOW ..... 999 PDAYCA99

THERE IS NO QUESTION 160

**IF AGE 45-70, ASK:**

A19. Thinking about your *neighborhood*, how much of a problem is each of the following (READ ITEMS IN RANDOM ORDER)? Is this a very serious problem, a somewhat serious problem, a minor problem or not really a problem in your neighborhood?

		<u>VERY SERIOUS</u>	<u>SOMEWHAT SERIOUS</u>	<u>MINOR PROBLEM</u>	<u>NOT REALLY A PROBLEM</u>	<u>DON'T KNOW</u>	
[ ]	a. crime in the area .....	1	2	3	4	9	CRIM299
[ ]	b. excessive noise.....	1	2	3	4	9	NOIS299
[ ]	c. trash and litter.....	1	2	3	4	9	TRAS299
[ ]	d. lighting at night.....	1	2	3	4	9	LIGH299
[ ]	e. access to public transportation.....	1	2	3	4	9	ACCES299
[ ]	f. the variety of nearby shops and stores.....	1	2	3	4	9	SHOP299

161. Now, we don't need to know exactly, but just roughly could you tell me if your annual household income from all sources before taxes in 1998 was less than \$20,000, \$20,000 through \$40,000, \$40,000 through \$60,000, \$60,000 through \$80,000 or more than \$80,000? LESS THAN \$20,000.... 1 } (GO TO Q162)  
 \$20,000 - \$40,000 .... 2 }  
 \$40,000 - \$60,000 .... 3 }  
 \$60,000 - \$80,000 .... 4 } (GO TO Q165)  
 MORE THAN \$80,000... 5 }  
 REFUSED ..... 8 (GO TO Q162) HOSINC99

**IF LESS THAN \$40,000 FROM Q161, ASK:**

162. Was your total annual income before taxes, less than or more than \_\_\_\_\_ LESS THAN..... 1 HINC399  
 MORE THAN..... 2  
 (READ APPROPRIATE INCOME FOR HOUSEHOLD SIZE)? REFUSED ..... 8

**IF LESS THAN \$20,000 FROM Q161, INSERT APPLICABLE DOLLAR AMOUNT INTO Q162**

IF Q153=1 ..... INSERT \$10,300 IF Q153=3 ..... INSERT \$17,400  
 IF Q153=2 ..... INSERT \$13,800

**\$20,000 – \$40,000 FROM Q161, INSERT APPLICABLE DOLLAR AMOUNT INTO Q162**

IF Q153=4.....	INSERT \$20,900	IF Q153=7.....	INSERT \$31,500
IF Q153=5.....	INSERT \$24,400	IF Q153=8.....	INSERT \$35,000
IF Q153=6.....	INSERT \$27,900	IF Q153=9.....	INSERT \$38,500

163 . Not counting Social Security, Medicare, or unemployment insurance, at any time during the past twelve months, did you receive any government payments, such as public assistance or welfare?

YES .....	1	(ASK Q164)	<i>WELFAR99</i>
NO.....	2		
REFUSED .....	8		

**IF YES FROM Q163, ASK::**

164.	From which of the following government programs did you receive aid – (READ IN ORDER)?				
		YES	NO	DON'T KNOW	
a.	AFDC or the Aid to Families with Dependent Children program.....	1.....	2.....	9	AFDC99
b.	Food Stamps.....	1.....	2.....	9	FODSTP99
c.	ADC or the Aid to Dependent Children program.....	1.....	2.....	9	ADC99
d.	TANF or the Temporary Assistance for Needy Families program.....	1.....	2.....	9	TANF99

**IF CHILDREN UNDER AGE 5 IN HOUSEHOLD FROM Q157, ASK:**

165.	At any time during the past twelve months did your household receive aid under <u>WIC</u> (wick), the Women, Infants and Children Food Program?	YES.....	1	WIC99
		NO.....	2	
		DON'T KNOW.....	9	

**IF AGE 45-70, ASK:**

A21.	In the past year, have you received any income from (ITEM)?				
<u>A22.</u>		YES	NO	DK	
01	a. (IF Q.1=1 OR Q.2=1 OR Q.9=1,2,3 OR 4, OR Q.22=1) a job or business.....	1.....	2.....	9	JOBINC99
02	b. (IF MARRIED) a spouse's earnings.....	1.....	2.....	9	SPOUS299
03	c. family members (other than a spouse).....	1.....	2.....	9	FAM299
04	d. your own Social Security.....	1.....	2.....	9	SOCSE299
05	e. (IF MARRIED) a spouse's Social Security.....	1.....	2.....	9	SSOC299
06	f. Supplemental Security Income program or <u>SSI</u> , the federal assistance program for blind, disabled, or low-income elderly people?.....	1.....	2.....	9	SSI299
08	h. (yours or a spouse's) pensions or annuities.....	1.....	2.....	9	PEN299
09	i. savings, interest or dividends from investments.....	1.....	2.....	9	SAV299
10	j. the sale of a home or other assets.....	1.....	2.....	9	ASSET299
99	= Don't know				

**IF MORE THAN ONE 'YES' TO QA21, ASK:**

A22.	Of all your income sources, which <u>one</u> provides you with the most income? (LIST "YES" ITEMS FROM A21)	MOST299
------	---	---------

**IF A21D = YES, ASK:**

A23a.	At what age did you first start receiving Social Security income?	_____ AGE	AGESOC99
		DON'T KNOW.....	99

**IF A21E = YES, ASK:**

A23b.	At what age did your spouse first start receiving Social Security income?	_____ AGE	SPOSOC99
		DON'T KNOW.....	99

**IF RETIRED AND A21H = YES, ASK:**

A24.	In some retirement plans, benefits are based on a formula involving age, years of service, and salary. In other plans, money is accumulated in an account for you like a 401k (Four-Oh-One-Kay) plan. Which of these two plans best describe the type of pension plan you have? (READ CATEGORIES)	FORMULA.....	1	PENTY299
		MONEY ACCUMULATED.....	2	
		BOTH TYPES.....	3	
		DON'T KNOW.....	9	

**IF FORMULA, ASK:**

A25.	Are the benefits ever adjusted for the cost of living?	YES.....	1	PENADJ99
		NO.....	2	
		DON'T KNOW.....	9	

**IF WORKING FROM Q1 OR WORKING FOR PAY/PROFIT FROM Q2 OR Q9=1,2,3 OR 4, ASK:**

166a. Thinking now about only your own individual <u>earnings from wages, salaries and tips</u> in 1998... which of the following categories best describes the amount you made -- less than \$20,000, \$20,000 through \$40,000, \$40,000 through \$60,000, \$60,000 through \$80,000 or more than \$80,000?	LESS THAN \$20,000..... 1 \$20,000 - \$40,000 ..... 2 \$40,000 - \$60,000 ..... 3 \$60,000 - \$80,000 ..... 4 MORE THAN \$80,000..... 5 REFUSED ..... 8	INDINC99
166b. Are you earning more, less, or about the same as you were one year ago?	MORE ..... 1 LESS ..... 2 ABOUT THE SAME ..... 3 DK..... 9	LSTYR99
166c. Do you own or rent your home?	OWN..... 1 RENT ..... 2 DK..... 9	RENT99
167. How difficult is it for you to live on your total household income right now -- not at all difficult, somewhat difficult, difficult, very difficult or extremely difficult?	NOT AT ALL DIFFICULT ..... 1 SOMEWHAT DIFFICULT ..... 2 DIFFICULT ..... 3 VERY DIFFICULT ..... 4 EXTREMELY DIFFICULT ..... 5 DON'T KNOW ..... 9	SUFINC99
168. In the next two months, how likely is it that you and your family will experience actual hardships, such as inadequate housing, food, or medical attention -- very likely, somewhat likely, not too likely or not at all likely?	VERY LIKELY ..... 1 SOMEWHAT LIKELY ..... 2 NOT TOO LIKELY ..... 3 NOT AT ALL LIKELY ..... 4 DON'T KNOW ..... 9	HRDSHP99
169. In the next two months, how likely is it that you and your family will have to reduce your standard of living to the bare necessities in life -- very likely, somewhat likely, not too likely or not at all likely?	VERY LIKELY ..... 1 SOMEWHAT LIKELY ..... 2 NOT TOO LIKELY ..... 3 NOT AT ALL LIKELY ..... 4 DON'T KNOW ..... 9	REDUC99

**IF MORE THAN 1 ADULT FROM Q154, ASK:**

170. How many adults age 18 or older (besides yourself) in your household worked for pay in the past week?	ENTER # _____ (IF 1, GO TO Q171; IF >1, SKIP TO Q172) NONE ..... 0 } (SKIP TO Q180a) DON'T KNOW ..... 99	WORK1899
--	---	----------

**IF 1 OTHER ADULT WORKS FROM Q170, ASK:**

171. Did this person work during the daytime, during the evening, during the night time, or a rotating shift?	DAYTIME ..... 1 EVENING ..... 2 NIGHT TIME ..... 3 ROTATING/NOT FIXED ..... 4 DON'T KNOW ..... 9	} (SKIP TO Q180A) WORKT199
---	--	-------------------------------

**IF MORE THAN 1 ADULT WORKS FROM Q170, ASK:**

172. Of these (NUMBER FROM Q170) working adults, how many usually work (ITEM)?	ENTER#      DK	
a. during the day.....	_____	99      WORKD99
b. during the evening.....	_____	99      WORKE99
c. during the night.....	_____	99      WORKN99
d. rotating shifts.....	_____	99      WORKS99

180a. In what county do you live?

ALAMEDA .....	1	MADERA.....	11	SAN LUIS OBISPO .....	24	COUNTY99
ALPINE .....	36	MARIN .....	12	SAN MATEO .....	25	
AMADOR .....	36	MARIPOSA.....	36	SANTA BARBARA .....	26	
BUTTE .....	2	MENDOCINO .....	36	SANTA CLARA .....	27	
CALAVARES.....	36	MERCED .....	13	SANTA CRUZ.....	28	
COLUSA .....	36	MODOC.....	36	SHASTA .....	29	
CONTRA COSTA .....	3	MONO.....	36	SIERRA .....	36	
DEL NORTE .....	36	MONTEREY.....	14	SISKIYOU .....	36	
EL DORADO .....	4	NAPA.....	15	SOLANO .....	30	
		NEVADA.....	36	SONOMA .....	31	
FRESNO.....	5			STANISLAUS .....	32	
GLENN.....	36	ORANGE .....	16	SUTTER .....	36	
HUMBOLDT.....	6	PLACER .....	17	TEHAMA .....	36	
IMPERIAL .....	7	PLUMAS .....	36	TRINITY.....	36	
INYO.....	36	RIVERSIDE .....	18	TULARE.....	33	
KERN.....	8	SACRAMENTO.....	19	TUOLUMNE.....	36	
KINGS.....	9	SAN BENITO.....	36	VENTURA .....	34	
LAKE .....	36	SAN BERNARDINO .....	20	YOLO.....	35	
LASSEN .....	36	SAN DIEGO .....	21	YUBA .....	36	
LOS ANGELES.....	10	SAN FRANCISCO.....	22			
		SAN JOAQUIN.....	23	DON'T KNOW .....	99	(GO TO Q180b)

**IF DON'T KNOW OR REFUSED FROM Q169A, ASK:**

180b. In what city or town do you live?	(SPECIFY) _____
	DON'T KNOW ..... 99

181. We may want to call you back next year at about this time to learn your views about some of these same issues. Would it be all right if we called you back at that time?

<b>(IF NECESSARY)</b> Be assured that all answers are confidential and are for research purposes only.	YES, NOT HESITANT .....	1 (GO TO Q182)	} (SKIP TO END)	CALBAK99
	YES, BUT HESITANT .....	2		
	NO.....	3		

**IF YES FROM Q181, ASK:**

182. What is your name? <b>(IF REFUSE, SKIP TO Q186)</b> <b>(IF REFUSES)</b> We need this information, so we know who to ask to speak to when we call next year. <b>(IF REFUSES)</b> If you prefer, just your first name will do. <b>(ALLOW "FIRST NAME" TO CONTINUE)</b>
_____
(FIRST NAME) REFUSED..... 888
_____
(LAST NAME) REFUSED..... 888
183. What is your street address including apartment number?
a. STREET _____
REFUSED..... 888
b. APARTMENT NUMBER _____
DON'T KNOW ..... 999 (SKIP TO Q186)

184. In what city do you live?

CITY \_\_\_\_\_

REFUSED.....888

185. What is your zip code? **(ALL ZIP CODES MUST BEGIN WITH "9")**

ZIP CODE \_\_\_\_\_

DK/REFUSED.....99999

186. Just to confirm your telephone number. YES ..... 1  
**(READ BACK PHONE #)** Is this correct? NO ..... 2  
DON'T KNOW ..... 99

TELEPHONE NUMBER \_\_\_\_\_ — \_\_\_\_\_

187. Are there any other alternative phone numbers YES ..... 1  
where you can be reached next year? NO..... 2

**IF YES FROM Q187, ASK:**

188. What is this number, area code first?

TELEPHONE NUMBER \_\_\_\_\_ — \_\_\_\_\_

These are all the questions I have. Thank you very much for your cooperation.