2000 Work and Health Survey
(Baseline)

RESPONDENT SELECTION/LANGUAGE PREFERENCE QUESTIONS HERE

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

1. What were you doing most 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? (ACCEPT ONLY ONE RESPONSE)

   WORKING................................. 1 (SKIP TO Q3)
   NOT AT WORK, BUT HAVE A JOB...... 2
   LOOKING FOR WORK.................... 3 (GO TO Q2)
   KEEPING HOUSE ....................... 4
   GOING TO SCHOOL .................... 5
   UNABLE TO WORK ..................... 6 (SKIP TO Q22)
   RETIRED ............................... 7
   OTHER (SPECIFY) ________________ 8
   DON'T KNOW .......................... DK

   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)
      NO ....................................... 2 (GO TO Q22)
      DON'T KNOW ........................... DK

      IF NO OR DON'T KNOW FROM Q.2 AND RETIRED, ASK Q.22, THEN SKIP TO Q.58

   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)
      MULTIPLE JOBS ........................... 2
      DON'T KNOW ............................ DK (GO TO Q4)

      IF MULTIPLE FROM Q3, ASK:

   4. Altogether, how many paying jobs did you have last week?

      ___________________________ JOBS

      DON'T KNOW ........................... DK

   5. How many hours did you work last week (at all jobs)?

      __________ HOURS

      (IF 35 HOURS A WEEK OR MORE, SKIP TO Q.27)

      DON'T KNOW ........................... DK

   IF LESS THAN 35 HOURS OR DK FROM Q5, ASK:

   6. Do you usually work 35 hours or more a week at (this job) (these jobs)?

      YES ..................................... 1
      NO ...................................... 2
      DON'T KNOW .......................... DK

   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)?

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

YES ................................................ 1
NO ................................................. 2
DON'T KNOW ................................. DK

(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
DON'T KNOW........................................ DK

(SKIP TO Q12)

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
VACATION.............................................. 2
BAD WEATHER ....................................... 3
A LABOR DISPUTE................................. 4
A TEMPORARY LAY-OFF.......................... 5
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
DON'T KNOW........................................ DK

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

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

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
DON'T KNOW ............. DK

(SKIP TO Q22)

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? (ANSWER MAY BE MULTIPLE YES)
NO……………………………………… 1 (SKIP TO Q22)
YES, CHECKED W/EMPLOYMENT AGENCY ... 2
YES, CONTACTED EMPLOYER(S)............. 3
YES, ANSWERED WANT AD .................... 4
YES, CHECKED W/FRIENDS ....................... 5
YES, OTHER................................. 6
DON'T KNOW........................................ DK

(SKIP TO Q22)

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)
QUIT JOB ............................ 2
OTHER................................. 3
DON'T KNOW ........................... DK

(Skip to Q17)

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

16. How many weeks ago were you laid off?

_______________________ WEEKS

DON'T KNOW ................. DK

IF Q9=5 OR 6, SKIP TO Q19
17. How many weeks have you been looking for work? ________________ WEEKS

18. Could you have taken a job last week if one had been offered? YES __________ 1

19. Could you have taken a job last week if one had been offered? NO __________ 2

20. How many years has it been since you last worked at a regular job or business, either part-time or full-time? 1 YEAR AGO OR LESS ............ 1

21. How many years has it been since you last worked at a regular job or business, either part-time or full-time? MORE THAN 1 YEAR TO 2 YEARS ........ 2

22. How many years has it been since you last worked at a regular job or business, either part-time or full-time? MORE THAN 2 YEARS TO 3 YEARS .......... 3

23. How many years has it been since you last worked at a regular job or business, either part-time or full-time? MORE THAN 3 YEARS TO 5 YEARS .......... 4

24. How many years has it been since you last worked at a regular job or business, either part-time or full-time? 5 YEARS OR MORE .............. 5

25. How many years has it been since you last worked at a regular job or business, either part-time or full-time? NEVER WORKED ......... 6

26. How many years has it been since you last worked at a regular job or business, either part-time or full-time? DON’T KNOW ............. DK

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) ________________ WEEKS

28. During the past 12 months, how many hours a week did you usually work (when you were working)? ________________ HOURS

29. *(If you could work, would) (Do) you want a regular job now, either full or part-time? YES _______________ 1

30. *(If you could work, would) (Do) you want a regular job now, either full or part-time? NO _________________ 2

31. *(If you could work, would) (Do) you want a regular job now, either full or part-time? DON’T KNOW .. DK

32. Do you intend to look for work of any kind in the next 12 months? YES _______________ 1

33. Do you intend to look for work of any kind in the next 12 months? NO _________________ 2

34. Do you intend to look for work of any kind in the next 12 months? DON’T KNOW .. DK

35. *(If you could work, would) (Do) you want a regular job now, either full or part-time? YES _______________ 1

36. *(If you could work, would) (Do) you want a regular job now, either full or part-time? NO _________________ 2

37. *(If you could work, would) (Do) you want a regular job now, either full or part-time? DON’T KNOW .. DK

38. *(If you could work, would) (Do) you want a regular job now, either full or part-time? YES _______________ 1

39. *(If you could work, would) (Do) you want a regular job now, either full or part-time? NO _________________ 2

40. *(If you could work, would) (Do) you want a regular job now, either full or part-time? DON’T KNOW .. DK

41. *(If you could work, would) (Do) you want a regular job now, either full or part-time? YES _______________ 1

42. *(If you could work, would) (Do) you want a regular job now, either full or part-time? NO _________________ 2

43. *(If you could work, would) (Do) you want a regular job now, either full or part-time? DON’T KNOW .. DK
IF WORKING FOR SOMEONE ELSE FROM Q33, ASK:

34c. Do you work as an independent contractor, independent consultant, or free-lance worker on this job? That is, someone who obtains customers on their own to provide a product or service.  
Yes .................. 1 (Skip to 35)  
No .................. 2  
Don’t know ........ DK  

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?  
Only one .................. 1  
More than one ............ 2  
Don’t know ............... DK  

36. What kind of business or industry do you work in? (If necessary:) What do they make or do at this business?  
ACCOUNTING .................................................. 01  
ADVERTISING/ PUBLIC RELATIONS .................... 02  
AGRICULTURE/ MINING .................................... 03  
ARCHITECTURE/ DESIGN/ LANDSCAPING ........... 04  
ARCHITECTURE/ DESIGN/ LANDSCAPING ........... 04  
BANKING/ FINANCE .......................................... 05  
BUSINESS CONSULTANT .................................. 06  
BANKING/ FINANCE .......................................... 05  
BUSINESS SERVICES ....................................... 07  
COMMUNICATIONS/ TV/ RADIO/ MEDIA ............... 08  
COMPUTER MANUFACTURER/ ELECTRONICS ....... 09  
INTERNET SERVICE/ COMPUTER CONSULTANT/  
ELECTRONICS ................................................. 10  
CONSTRUCTION .............................................. 11  
EDUCATION/ DAY CARE PROVIDER.................... 12  
ENGINEERING/ SCIENTIFIC/ R&D ....................... 13  
GOVERNMENT ................................................ 14  
GRAPHICS ...................................................... 15  
INSURANCE .................................................. 16  
LEGAL ....................................................... 17  
MANUFACTURING .......................................... 18  
MEDICAL/ DENTAL/ HEALTH CARE/ PHARM .... 19  
OIL/ GAS .................................................... 20  
PUBLIC UTILITIES ......................................... 21  
PUBLISHING/ PRINTING/ COPY .......................... 22  
REAL ESTATE ............................................... 23  
RETAIL TRADE ............................................. 24  
TRANSPORTATION ......................................... 25  
WHOLESALE TRADE ........................................ 26  
ENTERTAINMENT/ RECREATION ...................... 29  
HOUSEKEEPING/ JANITORIAL ......................... 30  
NON-PROFIT ORG ....................................... 31  
38. How long have you worked there? How many years? (If less than three years, ask:) How many months?  
Years .......................... WORKED00  
Don’t know ............... DK  
39. During the past 12 months, have you received a promotion?  
Yes .......................... 1  
No .......................... 2  
Don’t know ............... DK  
40. Did your current job represent an improvement in pay or status from a previous job?  
Yes .......................... 1  
No .......................... 2  
Don’t know ............... DK  
41. What kind of work do you do; that is, what is your occupation?  
Occupation ......................... OCC100  
Don’t know ............... DK  
42. What are your usual activities or duties?  

GO TO Q36
1. **Professional**
   11. Scientific and Engineering
   12. Medical
   13. Education
   14. Social Science
   15. Law
   16. Arts and Athletics

2. **Managerial**
   21. Executive, Corporate, and Military Officer, Owner
   22. Public Officials and Administrators (City, County, State, Federal)
   23. Other Managers and Buyers
   24. Proprietors, Consultants, Contractors

3. **Technical, Sales, and Administrative Support**
   31. Technicians and Related Support
   32. Sales
   33. Administrative Support, including Clerical

4. **Services**
   41. Private Household
   42. Protective
   43. Other Service Occupations

5. **Farming, Forestry, and Fishing**
   51. Farm Operators and Managers
   52. Agriculture and Related Occupations
   53. Forestry and Logging Occupations
   54. Fishers, Hunters, and Trappers

6. **Precision Production, Crafts, Repairs**
   61. Mechanics and Repairers
   62. Construction Trades
   63. Precision Production
   64. Armed Forces Personnel (Non-Officer)

7. **OPERATORS, FABRICATORS, LABORERS**
   71. MACHINE OPERATORS AND TENDERS (EXCEPT)

8. **MACHINERY OPERATORS AND R
don’t Know/Refused/No Answer

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
______________________MONTHS

DON’T KNOW

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
10-49 ....................................... 2
50-99 ....................................... 3
100-499 ................................... 4
500-999 ................................... 5
1000-9999 ............................... 6
10,000 OR MORE ...................... 7

DON’T KNOW

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
EVENING .................................... 2
NIGHTTIME .................................. 3
ROTATING/NOT FIXED ................... 4

DON’T KNOW

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
NO, NOT FLEXIBLE ....................... 2
DON’T KNOW .............................. 4

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? (DO NOT INCLUDE TIMES WHEN YOU BRING EXTRA WORK HOME.)

ALL OF THE TIME ..................... 1
SOME OF THE TIME .................... 2
NONE OF THE TIME .................... 3
DON’T KNOW ............................ 4

32x. How long does it usually take you round-trip to get to and from work? (IF ALWAYS WORK AT HOME, ENTER 0)

_______________________ # MINUTES

32y. On this (main) job, how many days of sick leave are you allowed each year, without losing pay?

#DAYS
NO SET NUMBER .................. 98
DON’T KNOW ....................... DK

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?
<table>
<thead>
<tr>
<th></th>
<th>AGREE STRONGLY</th>
<th>AGREE SOMEWHAT</th>
<th>DISAGREE SOMEWHAT</th>
<th>DISAGREE STRONGLY</th>
<th>DON’T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td>[ ] a. My job requires that I learn new things</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>DK</td>
</tr>
<tr>
<td>[ ] b. On my job, I have very little freedom to decide how I do my work</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>DK</td>
</tr>
<tr>
<td>[ ] c. My job allows me to make a lot of decisions on my own</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>DK</td>
</tr>
<tr>
<td>[ ] d. I have enough time to get the job done</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>DK</td>
</tr>
<tr>
<td>[ ] e. My job requires working very fast without having breaks</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>DK</td>
</tr>
<tr>
<td>46. At your (main) job, do you supervise the work of others or tell other employees what work to do?</td>
<td>YES</td>
<td>1</td>
<td>NO</td>
<td>2</td>
<td>DON’T KNOW</td>
</tr>
<tr>
<td>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?</td>
<td>VERY SERIOUS</td>
<td>1</td>
<td>SOMEWHAT SERIOUS</td>
<td>2</td>
<td>MINOR PROBLEM</td>
</tr>
<tr>
<td>[ ] a. crime in the area</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>DK</td>
</tr>
<tr>
<td>[ ] b. excessive noise</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>DK</td>
</tr>
<tr>
<td>[ ] c. trash and litter</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>DK</td>
</tr>
<tr>
<td>[ ] d. lighting at night</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>DK</td>
</tr>
<tr>
<td>[ ] e. accessibility to public transportation</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>DK</td>
</tr>
<tr>
<td>[ ] f. the variety of nearby shops and stores</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>DK</td>
</tr>
</tbody>
</table>
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)

<table>
<thead>
<tr>
<th>A LOT</th>
<th>SOMETIMES</th>
<th>NOT AT ALL</th>
<th>DON'T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td>walk</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>use stairs or inclines</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>sit for long periods</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>stoop, crouch or kneel</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>lift or carry weights as heavy as 50 pounds</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>

IF NOT "A LOT" FROM Q49E, ASK:

| lift or carry weights as heavy as 10 pounds | 1 | 2 | 3 | DK |
| repeat the same hand motion at least 30 times per hour | 1 | 2 | 3 | DK |
| bend over or twist around | 1 | 2 | 3 | DK |
| use hand tools | 1 | 2 | 3 | DK |
| concentrate for long periods | 1 | 2 | 3 | DK |
| interact with other people | 1 | 2 | 3 | DK |
| use computers | 1 | 2 | 3 | DK |

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) |
| NO | 2 (GO TO Q51) |
| DON'T KNOW | DK (SKIP TO Q53) |

IF NO FROM Q50, ASK:

| Are you working only until a specific project is completed? | YES | 1 |
| NO | 2 |
| DON'T KNOW | DK |

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 |
| NO | 2 |
| DON'T KNOW | DK |

56. On your (main) job, are you a member of a labor union or other employee association similar to a union?

| YES | 1 |
| NO | 2 |
| DON'T KNOW | DK |

57. On your (main) job, are you covered by a union or employee association contract?

| YES | 1 |
| NO | 2 |
| DON'T KNOW | DK |

57x. What level of schooling or degree would you say is needed to do your job reasonably well - less than a high school degree, a high school degree, an associate degree from a two year college, a trade school degree, a bachelor's degree from college, a masters degree, a professional school degree, or a doctorate?

| LESS THAN HIGH SCHOOL | 1 |
| HIGH SCHOOL DEGREE | 2 |
| AA/2-YEAR COLLEGE | 3 |
| TRADE SCHOOL DEGREE | 4 |
| BACHELORS DEGREE/COLLEGE | 5 |
| MASTERS DEGREE | 6 |
| PROFESSIONAL SCHOOL | 7 |
| DOCTORATE | 8 |
| DON'T KNOW | DK |
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)  
NO ..............................................2 (GO TO Q58a)  
DON'T KNOW ......................DK (SEE BELOW)  

IF Q58=NO, ASK:

58a. Did you have health care coverage at any point during the past 12 months?

YES..............................................1  
NO ..............................................2  
DON'T KNOW ......................DK (SEE BELOW)  

IF Q58=INSURED, ASK:

58b. Was there any point during the past 12 months when you went without health insurance?

YES..............................................1  
NO ..............................................2  
DON'T KNOW ......................DK  

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  
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 ......................DK  

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  
PART..............................................2  
NONE..............................................3  
DON’T KNOW ......................DK  

• (IF NOT INSURED OR DON’T KNOW FROM Q58) AND (WORKING FROM Q1 OR EMPLOYED FOR PAY/PROFIT FROM Q2, OR Q9=1,2,3 OR 4) GO TO Q61  

• (IF NOT INSURED OR DON’T KNOW 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 DON’T KNOW 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 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  
NO, NOT AN HMO ......................2  
DON’T KNOW ......................DK  

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)  
ANY MD’S ..............................................2  
DON’T KNOW ......................DK (GO TO Q60b)  

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?

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>DON'T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>DK</td>
</tr>
</tbody>
</table>

60c. Will your health plan pay for any of the costs of visits to doctors who are not associated with your health plan?

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>DON'T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>DK</td>
</tr>
</tbody>
</table>

60d. Have you changed insurance plans in the past year?

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>DON'T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>DK</td>
</tr>
</tbody>
</table>

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 OR Q 59 DOES NOT EQUAL 1, ASK:

61. Does your (employer) (temporary agency) offer health insurance to any of its (temporary) employees?

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>DON'T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>DK</td>
</tr>
</tbody>
</table>

IF YES FROM Q61, ASK:

62. Could you be on this plan if you wanted to?

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>DON'T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>DK</td>
</tr>
</tbody>
</table>

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?

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>DON'T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>DK</td>
</tr>
</tbody>
</table>

IF YES TO Q63, 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)

<table>
<thead>
<tr>
<th>FORMULA</th>
<th>MONEY ACCUMULATED</th>
<th>BOTH TYPES</th>
<th>DON'T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>DK</td>
</tr>
</tbody>
</table>

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?

<table>
<thead>
<tr>
<th>YES, LOST A JOB</th>
<th>NO, DID NOT</th>
<th>DON'T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>DK</td>
</tr>
</tbody>
</table>

66. In the past three years, did you leave a job specifically because you expected to be laid off?

<table>
<thead>
<tr>
<th>YES, EXPECTED TO BE LAID OFF</th>
<th>NO, DID NOT</th>
<th>DON'T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>DK</td>
</tr>
</tbody>
</table>

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?

<table>
<thead>
<tr>
<th>PAST 12 MONTHS</th>
<th>BEFORE THIS</th>
<th>DON'T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>DK</td>
</tr>
</tbody>
</table>

68. How long had you been employed by this employer? How many years?

<table>
<thead>
<tr>
<th>YEARS</th>
<th>DON'T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>DK</td>
</tr>
</tbody>
</table>

69. What kind of business or industry were you employed in? (IF NECESSARY) What do they make or do at this business?

<table>
<thead>
<tr>
<th>INDUSTRY</th>
<th>DON'T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>DK</td>
</tr>
</tbody>
</table>
### Questionnaire on Work History

**72.** What kind of work did you do; that is, what was your occupation?

<table>
<thead>
<tr>
<th>OCCUPATION</th>
<th>DON'T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>DK</td>
</tr>
</tbody>
</table>

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

**73.** Have you worked for pay since that job ended?

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>DON'T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>DK</td>
</tr>
</tbody>
</table>

**IF YEARS IN Q68>Q38 OR IF Q38 NOT ASKED, ASK:**

**73x.** Have you worked in any job longer than this former job?

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>DON'T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>

**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?

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>DON'T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>INDUSTRY</th>
<th>DON'T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>DK</td>
</tr>
</tbody>
</table>

**78b.** What kind of work did you do; that is, what was your occupation?

<table>
<thead>
<tr>
<th>OCCUPATION</th>
<th>DON'T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>DK</td>
</tr>
</tbody>
</table>

**78c.** How long were you employed by this employer? How many years?

<table>
<thead>
<tr>
<th># OF YEARS</th>
<th>DON'T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>DK</td>
</tr>
</tbody>
</table>

**IF WORKING FROM Q1 OR EMPLOYED FOR PAY/PROFIT FROM Q2 OR EVER WORKED FROM Q22, ASK:**

**79a.** At what age did you first work six or more months in a row at a job or business?

<table>
<thead>
<tr>
<th>AGE</th>
<th>NEVER WORKED 6 MONTHS AT A TIME</th>
<th>DON'T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>99 (SKIP TO Q80)</td>
<td>DK</td>
</tr>
</tbody>
</table>

**79b.** Since you first started working at age (FROM Q79A), have you always worked at least six months of the year?

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>DON'T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>

**IF NO, OR DON'T KNOW, FROM Q79B, ASK:**

**79c.** Since you first started working at age (FROM Q79A), how many years in total have you worked at least six months during the year?

<table>
<thead>
<tr>
<th># OF YEARS</th>
<th>DON'T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>DK</td>
</tr>
</tbody>
</table>

**79d.** When was the last time that you went 6 months or longer without working at a job or business? During what year was that?

<table>
<thead>
<tr>
<th>YEAR</th>
<th>DON'T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>DK</td>
</tr>
</tbody>
</table>

**79e.** Thinking about the last time that you went 6 months or longer without working at a job or business, what was the main reason you did not work? Was it because of family responsibilities, your own illness or disability, because you could not find work, because you were attending school, you retired or some other reason?

<table>
<thead>
<tr>
<th>FAMILY RESPONSIBILITY/PREGANCY</th>
<th>OWN ILLNESS/DISABILITY</th>
<th>COULD NOT FIND WORK</th>
<th>GOING TO SCHOOL</th>
<th>RETIRED</th>
<th>OTHER REASON</th>
<th>DON'T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>DK</td>
</tr>
</tbody>
</table>
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 ........................................DK

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

<table>
<thead>
<tr>
<th>Q96</th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>YES</td>
<td>NO</td>
<td>DON'T</td>
<td>KNOW</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a.</td>
<td>high blood pressure or hypertension</td>
<td>1</td>
<td>2</td>
<td>DK</td>
<td>HBP00</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b.</td>
<td>heart disease, including angina (an-gih-na), congestive heart failure, heart attack or other heart problems</td>
<td>1</td>
<td>2</td>
<td>DK</td>
<td>HEART00</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c.</td>
<td>diabetes (di-a-be-tes) or sugar in the blood</td>
<td>1</td>
<td>2</td>
<td>DK</td>
<td>DIABET00</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d.</td>
<td>any form of cancer</td>
<td>1</td>
<td>2</td>
<td>DK</td>
<td>CANCER00</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e.</td>
<td>asthma</td>
<td>1</td>
<td>2</td>
<td>DK</td>
<td>ASTHMA00</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f.</td>
<td>migraine headaches</td>
<td>1</td>
<td>2</td>
<td>DK</td>
<td>MIGRAI00</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g.</td>
<td>a chronic lung disease, like emphysema (em-fah-zee-ma), or chronic bronchitis (bron-ki-tis)</td>
<td>1</td>
<td>2</td>
<td>DK</td>
<td>LUNG00</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>h.</td>
<td>an ulcer</td>
<td>1</td>
<td>2</td>
<td>DK</td>
<td>ULCER00</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>i.</td>
<td>kidney or bladder problems</td>
<td>1</td>
<td>2</td>
<td>DK</td>
<td>KIDNEY00</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>j.</td>
<td>back problems</td>
<td>1</td>
<td>2</td>
<td>DK</td>
<td>BACK00</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>k.</td>
<td>repetitive strain injury or carpal tunnel syndrome</td>
<td>1</td>
<td>2</td>
<td>DK</td>
<td>CARPAL00</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>l.</td>
<td>arthritis</td>
<td>1</td>
<td>2</td>
<td>DK</td>
<td>ARTHRIO0</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>m.</td>
<td>an uncorrectable or severe visual impairment or blindness</td>
<td>1</td>
<td>2</td>
<td>DK</td>
<td>VISION00</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>n.</td>
<td>a hearing impairment or significant hearing loss</td>
<td>1</td>
<td>2</td>
<td>DK</td>
<td>HEAR00</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

96x. In the past 12 months, have you had any on-the-job injuries that required medical attention other than simple first aid?

   YES .........................1
   NO .........................2
   DON'T KNOW ................DK | JOBINJ00

96x. I am going to read a list of some physical ailments or symptoms that some people have. For each, please tell me if you have experienced these in the past 12months. In the past 12 months... (READ ITEMS IN RANDOM ORDER)?

<p>| | | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>a.</td>
<td>Have you had pains in your back or spine</td>
<td>1</td>
<td>2</td>
<td>DK</td>
</tr>
<tr>
<td>b.</td>
<td>Have you had stiffness, swelling, or aching in any joint or muscle</td>
<td>1</td>
<td>2</td>
<td>DK</td>
</tr>
<tr>
<td>c.</td>
<td>Have you had trouble breathing or shortness of breath</td>
<td>1</td>
<td>2</td>
<td>DK</td>
</tr>
<tr>
<td>d.</td>
<td>Have you found yourself getting very tired in a short time</td>
<td>1</td>
<td>2</td>
<td>DK</td>
</tr>
<tr>
<td>e.</td>
<td>Have you had problems with your feet that cause pain or limit your ability to walk</td>
<td>1</td>
<td>2</td>
<td>DK</td>
</tr>
</tbody>
</table>

97. In the past 12 months, how many times, have you been an overnight patient in a hospital for at least one day or longer?

   TIMES
   DON'T KNOW ................DK | HOSP00
98. During the past 12 months how many times have you seen or talked to a medical doctor about your health, including emergency room or clinic visits?

_______________________ TIMES

DON’T KNOW..............................DK

98a. About how long has it been since you saw or talked to a doctor or other health care professional? (READ CATEGORIES IF NECESSARY)

6 MONTHS OR LESS..................... 1
MORE THAN 6 MONTHS TO 1 YEAR.... 2
MORE THAN 1 YEAR TO 3 YEARS ...... 3
MORE THAN 3 YEARS.................... 4
NEVER................................... 5 (GO TO Q98E OR Q99) (READ CATEGORIES IF NECESSARY)

DO NOT READ → DON’T KNOW..............................DK

98b. When you are sick or need advice about your health, is there one particular place or health provider to whom you go most often?

YES..............................1 (GO TO Q.98C) MEDREG00
NO ..............................2 } (SKIP TO Q99)
DON’T KNOW.............DK

98c. What kind of place do you go most often — a doctor’s office, a clinic, an emergency room, or some other place?

DOCTOR’S OFFICE...................... 1 MEDOFC00
CLINIC..................................... 2
EMERGENCY ROOM.................... 3
OTHER..................................... 4
DON’T KNOW..........................DK

98d. About how long has it been since you last visited a doctor for a routine checkup? (READ CATEGORIES IF NECESSARY)

WITHIN THE PAST YEAR............. 1 CHEKUP00
1-2 YEARS AGO.......................... 2
3-4 YEARS AGO......................... 3
5 OR MORE YEARS AGO............. 4
NEVER................................... 5
DON’T KNOW..........................DK

98e. Over the past 4 weeks, how many days did you miss more than half a day of work because of illness or injury?

_______________________ DAYS

DON’T KNOW..........................DK

99. During the past 12 months how many days did you stay in bed more than half the day because of illness or injury? (Including those days in the past 4 weeks)

_______________________ TIMES

DON’T KNOW..........................DK

104. Are you limited in any way in any activities because of a long-term physical or mental impairment or medical condition? (IF NECESSARY:) A long-term condition is one which has already lasted three months, or if it began less than three months ago, can be expected to last that long. (DO NOT COUNT RETIREMENT AS A LONG-TERM HEALTH PROBLEM)

IF YES FROM Q.104, ASK:

100. Does any long-term physical or mental impairment or medical condition now keep you from working at a job or business?

YES........................................1 LIMWRK00
NO ......................................... 2
DON’T KNOW............................DK

IF Q100=NO OR DK, ASK:

101. Are you limited in the kind or amount of work you can do because of any long-term impairment or health problem?

YES........................................1 LIMWR200
NO ......................................... 2
DON’T KNOW............................DK

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

102. Does any long-term impairment or health problem now keep you from doing any housework at all?

YES........................................1 LIMHOU00
NO ......................................... 2
DON’T KNOW............................DK

IF NO OR REFUSED FROM Q102, ASK:
103. Are you limited in the kind or amount of housework you can do because of any long-term impairment or health problem?  
YES.........................................1  
NO............................................2  
DON’T KNOW ..................................DK

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 ...................................DK

138a. What is your age? _________________  

IF REFUSED, ASK:  

138b. We don’t need to know exactly, but which of the following age categories are you?  
(READ CATEGORIES)  
18-20............................................................1  
21-24............................................................2  
25-29............................................................3  
30-39............................................................4  
40-44............................................................5  
45-49............................................................6  
50-59............................................................7  
60-70............................................................8  
-OR- OVER 70.................................................9  
DON’T KNOW ..................................................DK

81. Have you smoked at least 100 cigarettes in your entire life?  
YES ........................................ 1 (GO TO Q82)  
NO.............................................. 2  
DON’T KNOW ............. DK  

IF YES FROM Q81, ASK:  

82 How old were you when you first started smoking cigarettes?  
EVERY DAY ................. 1  
SOME DAYS................. 2  
NOT AT ALL ................. 3  
DON’T KNOW ............. DK  

IF EVERY DAY OR SOME DAYS FROM Q83, ASK:  

84a. On average, how many cigarettes do you now smoke a day?  
84b. On how many of the past 30 days did you smoke cigarettes?  

IF Q.83 =3 OR DK (FORMER SMOKER), ASK:  

86 On the average, when you smoked, about how many cigarettes did you smoke a day?  
86x. For how many years did you smoke?  

IF AGE 21 OR OVER, OR DK, 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  
DON’T KNOW ............. DK  

H:\467018\QUEX\Queex-2000-baseline.doc 13
### 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?

<table>
<thead>
<tr>
<th>DAYS PER WEEK</th>
<th>DAYS PER MONTH</th>
<th>DON'T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td>______________</td>
<td>______________</td>
<td>DK</td>
</tr>
</tbody>
</table>

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?

<table>
<thead>
<tr>
<th>DRINKS PER OCCASION</th>
<th>DON'T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td>__________________</td>
<td>DK</td>
</tr>
</tbody>
</table>

89b. Considering all types of alcoholic beverages, how many times during the past month did you have five or more drinks on an occasion?

<table>
<thead>
<tr>
<th>TIMES</th>
<th>DON'T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td>____</td>
<td>DK</td>
</tr>
</tbody>
</table>

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?

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>DON'T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>DK</td>
</tr>
</tbody>
</table>

### 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)*

<table>
<thead>
<tr>
<th>AEROBICS</th>
<th>SKATING/INLINE</th>
<th>BASEBALL/SOFTBALL</th>
<th>SOCCER</th>
<th>BASKETBALL</th>
<th>STAIRSTEPPING DEVICES/CARDIO</th>
<th>BOWLING</th>
<th>SURFING</th>
<th>CALISTHENICS</th>
<th>SWIMMING</th>
<th>DANCE</th>
<th>TENNIS</th>
<th>GARDENING/MOWING LAWN</th>
<th>VOLLEYBALL</th>
<th>GOLF</th>
<th>WALKING FOR EXERCISE</th>
<th>HIKING/CLIMBING</th>
<th>HORSEBACK RIDING</th>
<th>MARTIAL ARTS</th>
<th>ROWING</th>
<th>RUNNING/JOGGING</th>
<th>WALKING FOR EXERCISE</th>
<th>WEIGHT LIFTING</th>
<th>MARTIAL ARTS</th>
<th>OTHER(SPECIFY)</th>
<th>YOGA/T’AI CHI</th>
<th>SKATING/INLINE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>15</td>
<td>2</td>
<td>17</td>
<td>4</td>
<td>18</td>
<td>19</td>
<td>20</td>
<td>21</td>
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<td>34</td>
<td>35</td>
<td>36</td>
<td>37</td>
<td>38</td>
</tr>
</tbody>
</table>

### 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?

<table>
<thead>
<tr>
<th>TIMES</th>
<th>DON'T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td>____</td>
<td>DK</td>
</tr>
</tbody>
</table>

95. And when you took part in this activity, for how many minutes did you usually keep at it?

<table>
<thead>
<tr>
<th>MINUTES</th>
<th>DON'T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td>________</td>
<td>DK</td>
</tr>
</tbody>
</table>

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.)*

<table>
<thead>
<tr>
<th>FRIENDS</th>
<th>DON'T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td>________</td>
<td>DK</td>
</tr>
</tbody>
</table>

### 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:

| ALCWEK00 | ALCMTH00 | ALCDNK00 | ALCFIV00 | EXERCI00 | EXTYPT00 | EXMTH00 | EXTIME00 | FRIENW00 |
113. How many of these close friends are coworkers at your (main) job?    FRIENDS AT WORK
DON'T KNOW .............. DK
FRIEW00

114. How many relatives do you have that you feel close to?    CLOSE RELATIVES
DON'T KNOW .............. DK (SKIP TO Q127)
RELCLS00

115. How many of these friends or relatives do you see at least once a month?    DON'T KNOW .............. DK (SKIP TO Q127)
RELVIS00

116. How many of these friends or relatives do you talk to on the telephone at least once a week?    DON'T KNOW .............. DK
RELPHC00

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

[ ] a. Are you basically satisfied with your life? .................................................. 1 ...... 2 ...... DK  LIFSA00
[ ] b. Have you dropped many of your activities and interests? ...................... 1 ...... 2 ...... DK  DROPC00
[ ] c. Do you feel that your life is empty?.......................................................... 1 ...... 2 ...... DK  LIFEMP00
[ ] d. Do you often get bored? ........................................................................ 1 ...... 2 ...... DK  BORED00
[ ] e. Are you in good spirits most of the time? ............................................. 1 ...... 2 ...... DK  SPIRIT00
[ ] f. Are you afraid that something bad is going to happen to you? .......... 1 ...... 2 ...... DK  BAD00
[ ] g. Do you feel happy most of the time? ..................................................... 1 ...... 2 ...... DK  HAPPY00
[ ] h. Do you often feel helpless? ................................................................. 1 ...... 2 ...... DK  HLPLSS00
[ ] i. Do you prefer to stay at home, rather than going out and doing new things? .......................................................... 1 ...... 2 ...... DK  ATHON00
[ ] j. Do you feel you have more problems with memory than most people?.. 1 ...... 2 ...... DK  PROBLE00
[ ] k. Do you think it is wonderful to be alive now? ..................................... 1 ...... 2 ...... DK  WONDER00
[ ] l. Do you feel pretty worthless the way you are now? ............................ 1 ...... 2 ...... DK  WORTH00
[ ] m. Do you feel full of energy? .................................................................... 1 ...... 2 ...... DK  ENERGY00
[ ] n. Do you feel that your situation is hopeless? ...................................... 1 ...... 2 ...... DK  HOPLES00
[ ] o. Do you think that most people are better off than you are?............. 1 ...... 2 ...... DK  BETTER00

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 you have felt or thought this way – almost never, sometimes, often or very often?

[ ] a. You felt that you were unable to control the important things in your life .......................................................... 1 ...... 2 ...... 3 ...... 4 ...... DK  CONTRO00
[ ] b. You felt confident about your ability to handle your personal problems .......................................................... 1 ...... 2 ...... 3 ...... 4 ...... DK  PERSON00
[ ] c. You felt that things were going your way ............................................. 1 ...... 2 ...... 3 ...... 4 ...... DK  YOURWA00
[ ] d. You felt difficulties were piling up so high that you could not overcome them .......................................................... 1 ...... 2 ...... 3 ...... 4 ...... DK  OVERCO00

IF WORKING FROM Q1, OR WORKING FOR PAY/PROFIT FROM Q2, OR Q9=1,2,3,4, OR 4, OR 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  FIRED00
YES, NOT HIRED ...................... 2  NOTHIR00
YES, NOT PROMOTED ...................... 3  NOTPROM00
NO ............................................. 4  NONEG00
DON'T KNOW ...................... DK  DISAGE00
DISSEX00
DISRAC00
DISETH00
DISHAN00

IF YES FROM Q130, ASK:
<table>
<thead>
<tr>
<th>Question</th>
<th>Choices</th>
</tr>
</thead>
</table>
| 131. Which of the following was a reason why you were (fired) (not hired) (not promoted)? (READ CATEGORIES; ANSWER CAN BE MULTIPLE) | AGE ................................................... 1  
GENDER .................................................. 2  
SKIN COLOR/RACE ................................. 3  
ETHNIC BACKGROUND .............................. 4  
HANDICAP/ILLNESS ............................... 5  
DON'T KNOW ........................................... DK |
| 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  
YES, NOT HIRED .................................. 2  
YES, NOT PROMOTED ............................. 3  
NO ..................................................... 4  
DON'T KNOW ........................................... DK |
| IF ANY YES FROM Q130 OR Q134, ASK: | IF ANY YES FROM Q130 OR Q134, ASK: |
| 135. In the past 3 years, have you been (unfairly fired) (not been hired) (not been promoted) for any of these reasons? | YES .................................................... 1  
NO .................................................... 2  
DON'T KNOW ........................................... DK |
| 136. Did these experiences have a lot, a little, or no impact on your present employment situation? | A LOT ................................................. 1  
A LITTLE ............................................. 2  
NO IMPACT ............................................. 3  
DON'T KNOW ........................................... DK |

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

<table>
<thead>
<tr>
<th>Question</th>
<th>Choices</th>
</tr>
</thead>
</table>
| 137. RECORD GENDER OF RESPONDENT: | MALE ................................................. 1  
FEMALE .............................................. 2 |
| 139. What is the highest level of school you have completed or the highest degree you have received? | 4TH GRADE OR LESS ............................... 1  
5TH–8TH GRADE ..................................... 2  
9-12 (NO HIGH SCHOOL DIPLOMA) ............ 3  
HIGH SCHOOL GRADUATE ...................... 4  
SOME COLLEGE/NO DEGREE .................... 5  
ASSOCIATE DEGREE/TRADE OR VOCATIONAL SCHOOL ............................ 6  
COLLEGE GRADUATE/ BACHELOR’S DEGREE .......... 7  
MASTER’S DEGREE ............................... 8  
PROFESSIONAL SCHOOL DEGREE .......... 9  
DOCTORATE ...................................... 10  
DON’T KNOW ........................................... DK |
| 142. Are you married, separated or divorced, widowed, never been married or are you a member of an unmarried couple? | MARRIED ............................................... 1  
SEPARATED/DIVORCED ............................. 2  
WIDOWED ............................................. 3  
NEVER MARRIED ..................................... 4  
UNMARRIED COUPLE .............................. 5  
DON’T KNOW ........................................... DK |
| IF MARRIED OR MEMBER OF UNMARRIED COUPLE FROM Q142, ASK: | 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? | 4TH GRADE OR LESS ............................... 1  
5TH–8TH GRADE ..................................... 2  
9-12 (NO HIGH SCHOOL DIPLOMA) ............ 3  
HIGH SCHOOL GRADUATE ...................... 4  
SOME COLLEGE/NO DEGREE .................... 5  
ASSOCIATE DEGREE/TRADE OR VOCATIONAL SCHOOL ............................ 6  
COLLEGE GRADUATE/ BACHELOR’S DEGREE .......... 7  
MASTER’S DEGREE ............................... 8  
PROFESSIONAL SCHOOL DEGREE .......... 9  
DOCTORATE ...................................... 10  
DON’T KNOW ........................................... DK |
| 143a. Are you the parent or legal guardian of a child under age 18? | YES .................................................. 1  
NO ..................................................... 2  
DON’T KNOW ........................................... DK |
### IF YES, ASK:

<table>
<thead>
<tr>
<th>Question</th>
<th>Record Number</th>
<th>Don't Know</th>
</tr>
</thead>
<tbody>
<tr>
<td>143b. How many of your children under age 18 live in this household?</td>
<td>RECORD NUMBER</td>
<td>DON'T KNOW</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
144. Are you Latino or of Hispanic origin or descent?

YES........................................... 1 (GO TO Q145) HISPANIC
NO .............................................. 2} (SKIP TO Q146)
DON’T KNOW............................. DK

IF YES FROM Q144, ASK:

145. Which of the following best describes your national origin or descent? (READ CATEGORIES)

MEXICAN-AMERICAN OR CHICANO........... 1
Puerto Rican................................ 2
Cuban-American.......................... 3
Central American......................... 4
South American.......................... 5
Spanish-American....................... 6
-OR-OTHER(SPECIFY) .................... 7
DON’T KNOW............................. DK

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
BLACK/AFRICAN-AMERICAN ............... 2
ASIAN/PACIFIC ISLANDER .................. 3
-OR-OTHER(SPECIFY) ..................... 4
DON’T KNOW............................. DK

147. About how tall are you without shoes?

____________________ FEET
____________________ INCHES
DON’T KNOW............................. DK

148. About how much do you weigh without shoes? (IF VOLUNTEERS THAT SHE IS PREGNANT:)

____________________ POUNDS
DON’T KNOW............................. DK

149. In what country were you born?

UNITED STATES .......................... 1
AUSTRALIA .................................. 2
BRAZIL ........................................ 3
CANADA ................................ ...... 4
CHINA/TAIWAN ............................. 5
COLUMBIA .................................... 6
FRANCE ...................................... 7
GERMANY ..................................... 8
GREAT BRITAIN ............................. 9
GUATEMALA ................................. 10
INDIA ......................................... 11
IRAN ......................................... 12
IRELAND ..................................... 13
ITALY ......................................... 14
JAPAN ................................ ....... 15
KOREA ................................ ....... 16
LAOS ................................ ......... 17
MEXICO ................................ ..... 18
NICARAGUA ................................ 19
PAKISTAN .................................... 20
RUSSIA ................................ ...... 21
OTHER (SPECIFY) ......................... 22
DON’T KNOW............................. DK

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

150. How old were you when you first came to live in the U.S.?

____________________ AGE WHEN ARRIVED
DON’T KNOW............................. DK

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

ENGLISH ..................................... 1
SPANISH ................................ ...... 2
CANTONESE/MANDARIN .................... 3
KOREAN ................................ ...... 4
VIETNAMESE .................................. 5
TAGALOG ...................................... 6
JAPANESE .................................... 7
OTHER (SPECIFY) ......................... 8
DON’T KNOW............................. DK
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 most often at work? (ACCEPT ONLY ONE RESPONSE)

- ENGLISH ........................................... 1
- SPANISH ........................................... 2
- CANTONESE/MANDARIN ..................... 3
- KOREAN ........................................... 4
- VIETNAMESE ..................................... 5
- TAGALOG.......................................... 6
- JAPANESE......................................... 7
- OTHER (SPECIFY) ______________. 8
- DON'T KNOW ................................. DK

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

_____________________ TOTAL HH
- DON'T KNOW ................................. DK

IF MORE THAN ONE FROM Q153, ASK:

154. Including yourself, how many are adults age 18 or older?

- DON'T KNOW ................................. DK

IF Q153 GREATER THAN Q154, ASK:

156. How many are children age 5 through 17?

- DK

157. How many are under age 5?

- DK

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 and putting them to bed? Just your best estimate.

_____________________ HOURS
- DON'T KNOW ................................. DK

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?

- DON'T KNOW ................................. DK

IF APPLICABLE, ASK:

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 1997 was less than $20,000, $20,000 through $40,000, $40,000 through $60,000, $60,000 through $80,000, $80,000 through $100,000 or $100,000 or more?

- LESS THAN $20,000 ........1
- $20,000 - $39,999 .........2
- $40,000 - $59,999 .........3
- $60,000 - $79,999 .........4
- $80,000 - $99,999 ........5
- $100,000 OR MORE ........6
- REFUSED .....................REF

HOSINC00

GO TO Q162
(O R Q163)

GO TO Q163

GO TO Q166A OR 166C

GO TO Q162

HINC300

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

IF Q153=1...........INSERT $10,400
IF Q153=2...........INSERT $13,300

$20,000 - $39,999 FROM Q161, INSERT APPLICABLE DOLLAR AMOUNT INTO Q162

IF Q153=5...........INSERT $24,600
IF Q153=6...........INSERT $27,800
IF Q153=7...........INSERT $31,600

$40,000-$59,999 FROM Q161 AND Q153=9

IF Q159=9...........INSERT $41,700
**IF LESS THAN $80,000 FROM Q161, ASK:**

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?

**IF YES FROM Q163, ASK:**

164. From which of the following government programs did you receive aid – *(READ IN ORDER)*?

<table>
<thead>
<tr>
<th></th>
<th>YES</th>
<th>NO</th>
<th>DON'T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. AFDC or the Aid to Families with Dependent Children program</td>
<td>1</td>
<td>2</td>
<td>DK</td>
</tr>
<tr>
<td>b. Food Stamps</td>
<td>1</td>
<td>2</td>
<td>DK</td>
</tr>
<tr>
<td>c. ADC or the Aid to Dependent Children program</td>
<td>1</td>
<td>2</td>
<td>DK</td>
</tr>
<tr>
<td>d. TANF <em>(Tan-if)</em> or the Temporary Assistance for Needy Families program <em>(also known as Calworks)</em></td>
<td>1</td>
<td>2</td>
<td>DK</td>
</tr>
</tbody>
</table>

**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 WIC *(wick)*, the Women, Infants and Children Food Program?

<table>
<thead>
<tr>
<th></th>
<th>YES</th>
<th>NO</th>
<th>DON'T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1</td>
<td>2</td>
<td>DK</td>
</tr>
</tbody>
</table>

**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 earnings from wages, salaries and tips in 1999... 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, $80,000 through $100,000, or $100,000 or more?

- LESS THAN $20,000 ......................... 1
- $20,000 - $39,999 .......................... 2
- $40,000 - $59,999 .......................... 3
- $60,000 - $79,999 .......................... 4
- $80,000 - $99,999 .......................... 5
- $100,000 OR MORE........................... 6
- REFUSED ...................................... REF

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 .................................................. DK

166c. Do you own or rent your home?

- OWN ................................................. 1
- RENT ................................................ 2
- DK .................................................. DK

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 .............................. 6

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 .................................. 5

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 .................................. 5
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  
DON'T KNOW .......... DK  
{SKIP TO Q180a}

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 ............... DK  
{SKIP TO Q180a}

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 .....................................................  
DK WORKD00  
b. during the evening.............................................  
DK WORKE00  
c. during the night ...............................................  
DK WORKN00  
d. rotating shifts ..................................................  
DK WORKS00  

180a. In what county do you live?  
ALAMEDA .................. 01  
ALPINE ...................... 02  
AMADOR ..................... 03  
BUTTE ....................... 04  
CALAVARES ................. 05  
COLUSA ..................... 06  
CONTRA COSTA ............. 07  
DEL NORTE .................. 08  
EL DORADO .................. 09  
FRESNO ..................... 10  
GLENN ...................... 11  
HUMBOLDT ................... 12  
IMPERIAL ................... 13  
INYO ....................... 14  
KERN ....................... 15  
KINGS ...................... 16  
LAKE ....................... 17  
LASSEN ..................... 18  
LOS ANGELES ............... 19  
MADERA .................... 20  
MARIN ..................... 21  
MENDOCINO ................. 23  
MERCEDE .................. 24  
MODOC ..................... 25  
MONO ...................... 26  
MONTEREY ................. 27  
NAPA ...................... 28  
NEVADA .................... 29  
ORANGE .................... 30  
PLACER .................... 31  
PLUMAS .................... 32  
RIVERSIDE ................. 33  
SACRAMENTO .......... 34  
SAN BENITO ............... 35  
SAN BERNARDINO ......... 36  
SAN DIEGO .................. 37  
SAN FRANCISCO .......... 38  
SAN JOAQUIN ............ 39  
SAN LUIS OBISPO ....... 40  
SAN MATEO ............... 41  
SANTA BARBARA .......... 42  
SANTA CLARA ............ 43  
SANTA CRUZ ................ 44  
SHASTA .................... 45  
SIERRA .................... 46  
SISKIYOU ................. 47  
SOLANO .................... 48  
SONOMA .................... 49  
STANISLAUS .............. 50  
TEHAMA .................... 51  
TRINITY ................... 53  
TULARE .................... 54  
TUOLUMNE ................. 55  
VENTURA .................. 56  
YOLO ...................... 57  
YUBA ....................... 58  
DON'T KNOW ............ DK  
REFUSED ................. REF  
{GO TO Q180b}

IF DON'T KNOW OR REFUSED FROM Q180A, ASK:

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

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?  

(If necessary) Be assured that all answers are confidential and are for research purposes only.  Yes..........................1 (Go to Q182)  

No ..............................2 (Skip to end)  

If yes from Q181, ask:  

182. What is your name? (If refuse, skip to Q186)  

(If refuses) We need this information, so we know who to ask to speak to when we call next year.  

(If refuses) If you prefer, just your first name will do. (Allow “First name” to continue)  

______________________  ___________________  

(First name)  (Last name)  

183. What is your street address including apartment number?  

a. STREET _______________________________________________________

b. APARTMENT NUMBER _____________________________________________

Refused........................................................................................Ref (skip to Q186)  

184. In what city do you live?  

CITY ____________________________________________  

185. What is your zip code? (All zip codes must begin with “9”)  

ZIP CODE ___________________________________________  

186. Just to confirm your telephone number. (Read back phone #) Is this correct?  

TELEPHONE NUMBER ____________________________________________  

187. Are there any other alternative phone numbers where you can be reached next year?  

Yes.................................................. 1  

No ................................................... 2  

If yes from Q187, ask:  

188. What is this number, area code first?  

ALTERNATIVE TELEPHONE NUMBER _______________________________  

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