

PHYSICAL ACTIVITY and TRANSIT QUESTIONNAIRE

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**INTRODUCTION / SCREENER**

**INTRODUCTION**

Hello, my name is \_\_\_\_\_, and I am calling on behalf of the New York City Department of Health from Abt-SRBI. We're conducting an important telephone survey with New Yorkers to better understand their health, physical activity, commuting, and neighborhoods. Your household has been randomly chosen to represent your neighborhood. All answers you give will be confidential, and we will send you \$10 to thank you for your time.

[IF NEEDED] You don't have to give me any personal identifying information such as your full name or address.

**REASONS TO CALL-BACK**

- 01 No answer
- 02 Busy
- 03 Call-back
- 04 Answering machine
- 05 Spanish interviewer needed
- 06 Other language needed
- 07 END OF SHIFT/NUMBER NEVER TRIED

**REASONS NOT TO CALL-BACK**

- 11 Refused
- 12 Non-working/disconnected number
- 13 Non-residential number
- 14 Number-change
- 15 Fax machine
- 16 Beeper/Cell phone
- 17 Other phone problem
- 18 Physically/mentally unable

**Q BORO** In which borough of New York City do you live?

**READ IF NEEDED:**

- 1 The Bronx
- 2 Brooklyn
- 3 Manhattan
- 4 Queens, or
- 5 Staten Island ?
- 6 DO NOT LIVE IN NYC [TERMINATE]
- 7 DON'T KNOW/NOT SURE [TERMINATE]
- 9 REFUSED [TERMINATE]

**Q ZIP** To make sure that your neighborhood is correctly identified, could I please have your five-digit zip code?

RECORD 77777 FOR DK  
RECORD 99999 FOR REFUSED

IF Q ZIP DOES NOT FALL IN PREDEFINED CATI ZIP CODE LIST

**Q** Confirm. Just to confirm, is your zip code\_\_\_\_\_?

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

**[IF ZIP IS CONFIRMED AND NOT ON LIST OF NYC ZIPS, TERMINATE AND READ:]**

Thank you, but we are not interviewing residents of this zip code right now.

**Q HH** Now I need to randomly select one adult who lives in your household to be interviewed. How many members of your household, INCLUDING YOURSELF, are 18 years of age or older?

READ IF NEEDED: Household members are those who spend a majority of their time living in the household.

RECORD 88 FOR NOT A PRIVATE RESIDENCE  
RECORD 99 FOR REFUSED/DK

\_\_\_\_\_ Number of adults [RANGE 1-20]

**IF NO ADULTS (HH=0) OR NOT A PRIVATE RESIDENCE (HH=88) OR REFUSED/DK (HH=99):**  
Those are all the questions I have for you. Thank you for your time. **TERMINATE.**

**IF ONLY 1 ADULT (HH=1) ASK HHa, ELSE IF MORE THAN ONE ADULT (HH>1) ASK HHb.**

HHa Are you the adult?

- 1 Yes
- 2 No
- 9 Refused

**IF HHa=1, THEN READ S6A, ELSE SKIP TO S6B.**

**s6a** Then you are the person I need to speak with. Let me start by saying your contact information such as your phone number will not be shared with the Health Department or anyone else. Participation is voluntary: you can stop the interview at any time or decide not to answer any question. The interview takes about 25 minutes or less. If you have any questions I can't answer, I'll give you a telephone number for more information. **[GO TO QWHICH]**

**IF HHa=2 (NOT THE ADULT)**

**s6b** May I speak with the adult?

- 1 Yes - available (SKIP TO WHICH)
- 2 No - not available - [GO TO s6b1]
- 9 Refused

**IF MORE THAN ONE ADULT (HH>1) ASK HHb.**

**HHb.** NUMADULT How many of these adults are men and how many are women?

- \_\_\_ MEN
- \_\_\_ WOMEN
- 99 REFUSED

[IF NUMMEN or IF NUMWOMEN = 99 then Thank and terminate]  
[IF NUMMEN + NUMWOMEN <> Q HH, then obtain correct NUMMEN and NUMWOMEN]

**Q PICK** Could I please speak with \_\_\_\_\_? [RANDOMLY PICKED]

- 1 Yes - available (SKIP TO WHICH)
- 2 No - not available - [GO TO S6b1]
- 9 Refused

**IF PICKED PERSON IS NOT AVAILABLE:**

**S6b1** (If s6b = 2) May I please have this person's nickname or initials so we can ask for them when we call back?/(If q pick = 2) May I please have the (PICKED PERSON'S) nickname or initials so that we can speak with [them] when we call back?

- 1 Gave response - (ENTER RESPONSE)
- 7 (VOL) Don't know - (THANK. SCHEDULE AUTOMATIC CALL-BACK)
- 9 (VOL) Refused - (THANK. SCHEDULE AUTOMATIC CALL-BACK)

**Q WHICH** INTERVIEWER: SELECT LANGUAGE

- 1 ENGLISH
- 2 SPANISH
- 3 RUSSIAN
- 4 CHINESE

IF HHa = 1 GO TO QMOBILITY, ELSE GO TO Q HELLO  
Q HELLO

Hello, my name is \_\_\_\_\_, and I am calling on behalf of the New York City Department of Health from Abt-SRBI. We're conducting an important telephone survey with New Yorkers to better understand their health, physical activity, commuting, and neighborhoods. Your household has been randomly chosen to represent your neighborhood. All answers you give will be confidential, and we will send you \$10 to thank you for your time.

Your contact information such as your phone number will not be shared with the Health Department or anyone else. Participation is voluntary: you can stop the interview at any time or decide not to answer any question. The interview takes about 25 minutes or less. If you have any questions I can't answer, I'll give you a telephone number for more information.

**SCREENER FOR CURRENT PHYSICAL MOBILITY**

First, I have some questions about you and your physical activity.

**ASK ALL**

**Q MOBILITY** Are you currently able to walk for more than 10 feet?

INTERVIEWER: IF RESPONDENT HAS BEEN ADVISED TO \_NOT WALK\_ BY DR OR HEALTH PROFESSIONAL, RECORD ANSWER AS "NO".

- 1 YES -- GO TO Q1.1
- 2 NO [GO TO QMOBILITY2]
- 7 DON'T KNOW/NOT SURE[TERMINATE]
- 9 REFUSED [TERMINATE]

**SHORT SCREENER IMMOBILE RESPONDENTS - ASK BEFORE TERMINATING**

**Q MOBILITY2** Are you currently unable to walk for more than 10 feet because of a: [READ LIST]

- 1 Permanent condition or disability
- 2 Temporary condition or disability
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**READ:** Several questions in this survey are about walking in the past seven days, so I will skip over those questions. However, I do have some other important questions to ask you for statistical purposes. Then I can send you \$10 to thank you for helping us with this survey.

**Q1.1** Would you say that in general your health is excellent, very good, good, fair or poor?

- 1 EXCELLENT
- 2 VERY GOOD
- 3 GOOD
- 4 FAIR
- 5 POOR
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**Q10.1** What is your age?

- \_\_\_ AGE IN YEARS [RANGE 18-98]
- 07 DON'T KNOW/NOT SURE
- 09 REFUSED

**ASK IF Q10.1 = 07 OR 09, ELSE SKIP TO Q10.3**

**Q10.2** We are only asking this information to make sure that we have talked to enough people in each age group. Can you just tell me if you are...?

READ ANSWER CHOICES:

- 1 65 or older
- 2 45-64
- 3 25-44, or
- 4 18-24
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**Q10.3** Because it is sometimes difficult to determine over the phone, I am asked to confirm with everyone . . . Are you male or female?

- 1 MALE
- 2 FEMALE
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**Q10.4** Are you Hispanic or Latino?

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

**Q10.6** (READ IF Q10.4=1: Some people, aside from being Hispanic, also consider themselves to be a member of a racial group.) Which one or more of the following would you say is your race?

READ ANSWER CHOICES, MULTIPLE RESPONSE:

- 01 White
- 02 Black or African American
- 03 Asian
- 04 Native Hawaiian or Other Pacific Islander
- 05 American Indian, Alaska Native, or
- 08 Something else (SPECIFY) \_\_\_\_\_
- 77 DON'T KNOW/NOT SURE
- 99 REFUSED

**ASK IF MORE THAN ONE ANSWER TO Q10.6**

**Q10.7** Which one of these groups would you say best represents your race?

**CATI: FILL RACES FROM Q10.6**

READ MENTIONED RACES:

- 1 White
- 2 Black or African American
- 3 Asian
- 4 Native Hawaiian or Other Pacific Islander
- 5 American Indian, Alaska Native
- 8 Other named in Q10.6
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

Q10.11 Are you. . .

READ ANSWER CHOICES:

- 1 Married
- 2 Divorced
- 3 Widowed
- 4 Separated
- 5 Never married, or
- 6 A member of an unmarried couple living together
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

Q10.13 What is the highest grade or year of school you completed?

READ IF NEEDED:

- 1 Never attended school or only attended kindergarten
- 2 Grades 1 through 8 (ELEMENTARY)
- 3 Grades 9 through 11 (SOME HIGH SCHOOL)
- 4 Grade 12 or GED (HIGH SCHOOL GRADUATE)
- 5 College 1 year to 3 years (SOME COLLEGE OR TECHNICAL SCHOOL)
- 6 College 4 years (COLLEGE GRADUATE), or a
- 7 Graduate or professional degree?
- 77 DON'T KNOW/NOT SURE
- 99 REFUSED

Q10.15 Are you currently. . .

- 01 Employed for wages or salary

IF R DOES NOT PICK #1, READ ALL OF THE REMAINING ANSWER CHOICES

- 02 Self-employed
- 03 A Homemaker
- 04 A Student
- 05 Retired
- 06 Unable to work
- 07 Unemployed for 1 year or more, or
- 08 Unemployed for less than 1 year ?
- 77 DON'T KNOW/NOT SURE
- 99 REFUSED

**CATI Note: Only one choice can be entered. Entries must be zero filled**

**READ:** And now, I have a few questions about your telephone usage. These questions are only asked for statistical purposes.

Q12.1 Do you have more than one telephone number in your household? Do NOT include cell phones or numbers that are only used by a computer or fax machine.

INTERVIEWER NOTE: Cordless telephones should be counted as landline telephones.

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

Q12.2 During the past 12 months, has your household been without telephone service for 1 week or more? Do NOT include interruptions of telephone service because of weather or natural disasters.

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

**ASK ALL**

**Q12.3** Do you have a cell phone for personal use? Please include cell phones if they are used for any personal use.

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

**ASK IF Q12.3 = 2**

**Q12.4** Do you share a cell phone for personal use with other adults?

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

**[ASK IF Q12.3=1 OR Q12.4=1]**

**12.3b** Of all of the phone calls that you receive, are...(Read List)

- 1 all or almost all calls received on cell phones,
- 2 some received on cell phones and some received on land lines, or
- 3 very few or none on cell phones.
- 777 DON'T KNOW
- 999 REFUSED

Thank you for your time. As I mentioned at the beginning of this survey, in appreciation for the time you have spent answering our questions, we would like to provide you with ten dollars in compensation.

So that we know where to send the check, could you please give me your name and mailing address? The information you provide will only be used to send you the payment. It will not be used for any other purposes, nor will it be available to the Department of Health.

[COLLECT NAME/ADDRESS INFORMATION FOR CHECK - THEN TERMINATE]

**HEALTH STATUS**

**READ:** I would like to begin with some questions about your health.

**ASK ALL**

**Q1.1** Would you say that in general your health is excellent, very good, good, fair or poor?

- 1 EXCELLENT
- 2 VERY GOOD
- 3 GOOD
- 4 FAIR
- 5 POOR
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**ASK ALL**

**Q1.2** Now thinking about your physical health, which includes physical illness and injury, for how many days during the past 30 days was your physical health not good?

- \_\_\_\_\_ NUMBER OF DAYS [RANGE 0 - 30]
- 77 DON'T KNOW/NOT SURE
- 99 REFUSED



**ASK ALL**

**Q1.3** Now thinking about your mental health, which includes stress, depression, and problems with emotions, for how many days during the past 30 days was your mental health not good?

\_\_\_\_\_ NUMBER OF DAYS [RANGE 0 - 30]  
77 DON'T KNOW/NOT SURE  
99 REFUSED

**Q1.4** DELETED 8/19  
**Q1.6** DELETED 8/19  
**Q1.7** DELETED 8/19

**ASK ALL**

**Q1.8** During the past 30 days, for about how many days did you not get enough rest or sleep?

\_\_\_\_\_ NUMBER OF DAYS [RANGE 0 - 30]  
77 DON'T KNOW/NOT SURE  
99 REFUSED

**ASK ALL**

**Q1.9** During the past 30 days, for about how many days have you felt healthy and full of energy?

\_\_\_\_\_ NUMBER OF DAYS [RANGE 0 - 30]  
77 DON'T KNOW/NOT SURE  
99 REFUSED

**ASK ALL**

**Q1.5** Are you limited in any way in any activities because of any major impairment or health problems?

1 YES  
2 NO  
7 DON'T KNOW/NOT SURE  
9 REFUSED

**CHRONIC DISEASE**

**Cardiovascular Health**

---

**READ:** I have a few questions about health conditions that may have been diagnosed by a doctor or other health professional. Tell me if you currently have the condition, whether or not it is controlled by medication.

**ASK ALL**

**Q2.1** Do you currently have hypertension - that is, high blood pressure -- that was diagnosed by a doctor, nurse, or other health professional?

**READ IF NEEDED:** Tell me if you currently have the condition whether or not it is controlled by medication.

1 YES  
2 NO  
7 DON'T KNOW/NOT SURE  
9 REFUSED

**ASK ALL**

**Q2.2** Was your blood cholesterol high the last time it was checked?

READ IF NEEDED: Tell me if your blood cholesterol was high the last time it was checked, whether or not it is controlled by medication.

- 1 YES
- 2 NO
- 3 [VOL: NEVER CHECKED]
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**Diabetes**

---

**ASK ALL**

**Q2.3** Do you currently have diabetes that was diagnosed by a doctor, nurse, or other health professional?

READ IF NEEDED: Tell me if you currently have the condition whether or not it is controlled by medication.

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

**Asthma**

---

**ASK ALL**

**Q2.4** In the last 12 months, have you had an episode of asthma or an asthma attack?

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

**Arthritis**

---

**ASK ALL**

**Q2.5** Do you currently have arthritis that was diagnosed by a doctor or other health professional?

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

**Depression**

---

**Q2.6** Have you ever been told by a doctor, nurse or other health professional that you have depression?

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

**BMI**

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**ASK ALL**

**Q2.7** About how tall are you without shoes?

READ IF NEEDED: You can answer in either feet and inches OR in centimeters.

**NOTE: If respondent answers in metrics put "9" in first column  
ROUND FRACTIONS DOWN**

\_\_ / \_\_ HEIGHT  
(feet/inches or meters/centimeters)  
[RANGES FEET=3-9/INCHES= 0-11 || METERS=0-3/CENTIMETERS=0-275]  
7777 DON'T KNOW  
9999 REFUSED

YOU MUST ENTER EITHER BOTH FEET AND INCHES OR CENTIMETERS - NOT BOTH. IF 0 (ZERO) INCHES, PLEASE ENTER ZERO. DO NOT LEAVE BLANK.

**CATI note: Require both feet and inches or centimeters. Do not allow entry of both. If 0 (zero) inches, must enter zero. Cannot have missing inches and not missing feet, or missing feet and not missing inches.**

**ASK ALL**

**Q2.8** - About how much do you weigh without shoes?

READ IF NEEDED: You can answer in either pounds OR kilograms.

**NOTE: If respondent answers in metrics put "9" in first column  
ROUND FRACTIONS UP**

\_\_\_ WEIGHT  
(pounds or kilograms)  
[RANGES POUNDS=50-600 || KILOGRAMS= 20-275]  
7777 DON'T KNOW  
9999 REFUSED

YOU MUST ENTER EITHER POUNDS OR KILOGRAMS - NOT BOTH.

**BMI FOLLOW-UPS - REVISED FOR W2**

**IF Q2.8 (WEIGHT) = 9999 OR 7777 AND Q2.7 (HEIGHT) ≠ 9999 OR 7777 (IS NOT MISSING), THEN PUT HEIGHT INTO BMI CALCULATOR AND ASK Q2.9a, Q2.9b, Q2.9c, Q2.9d (OR ASK Q2.9e, Q2.9f, Q2.9g, Q2.9h FOR METRIC).**

**IF Q2.7 (HEIGHT) = 9999 OR 7777 AND Q2.8 (WEIGHT) ≠ 9999 OR 7777 (IS NOT MISSING), THEN PUT WEIGHT INTO BMI CALCULATOR AND ASK Q2.10a, Q2.10b, Q2.10c, Q2.10d (OR ASK Q2.10e, Q2.10f, Q2.10g, Q2.10h FOR METRIC).**

BMI = 703 \* LBS / inches SQ

CRITICAL WEIGHT FOR ENGLISH VERY OBESE: =  
.049 \* (Q2.7 height IN) \* (Q2.7 height IN)

CRITICAL WEIGHT FOR ENGLISH OBESE: =  
.0427 \* (Q2.7 height IN) \* (Q2.7 height IN)

CRITICAL WEIGHT FOR ENGLISH OVERWEIGHT: =  
.0356\*(Q2.7 height IN)\*(Q2.7 height IN)

CRITICAL WEIGHT FOR ENGLISH UNDERWEIGHT: =  
.0263\*(Q2.7 height IN)\*(Q2.7 height IN)

ASK IF Q2.8 = 9999 OR 7777 AND Q2.7 ≠ 9999 OR 7777, ELSE SKIP TO Q11.1  
Q2.9a - Do you weigh less than [critical weight for **OBESE**]?

- 1 YES, WEIGH LESS [SKIP TO Q2.9c]
- 2 NO, DON'T WEIGH LESS [SKIP TO Q2.9b]
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK IF Q2.9a = 2, ELSE SKIP TO Q2.9C

Q2.9b - Do you weigh less than [critical weight for **VERY OBESE**]?

- 1 YES, WEIGH LESS
- 2 NO, DON'T WEIGHT LESS
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK IF Q2.9a = 1, ELSE SKIP TO Q11.1

Q2.9c - Do you weigh less than [critical weight for **OVERWEIGHT**]?

- 1 YES, WEIGH LESS [SKIP TO Q2.9d]
- 2 NO, DON'T WEIGHT LESS
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

ASK IF Q2.9c = 1, ELSE SKIP TO Q11.1

Q2.9d - Do you weigh less than [critical weight for **UNDERWEIGHT**]?

- 1 YES, WEIGH LESS
- 2 NO, DON'T WEIGHT LESS
- 7 DON'T KNOW/NOT SURE

CRITICAL WEIGHT FOR METRIC VERY OBESE =  
.0035 \* (Q2.7 height CM)\*(Q2.7 height CM)

CRITICAL WEIGHT FOR METRIC OBESE  
= .003 \* (Q2.7 height CM)\*(Q2.7 height CM)

CRITICAL WEIGHT FOR METRIC OVERWEIGHT  
= .0025\* (Q2.7 height CM)\*(Q2.7 height CM)

CRITICAL WEIGHT FOR METRIC UNDERWEIGHT  
= .00185\* (Q2.7 height CM)\*(Q2.7 height CM)

ASK IF Q2.8 = 9999 OR 7777 AND Q2.7 ≠ 9999 OR 7777, ELSE SKIP TO Q11.1

Q2.9e - Do you weigh less than [critical weight for **METRIC OBESE**]?

- 1 YES, WEIGH LESS [SKIP TO Q2.9G]
- 2 NO, DON'T WEIGH LESS [SKIP TO Q2.9f]
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**ASK IF Q2.9e = 2, ELSE SKIP TO Q2.9g**

**Q2.9f** - Do you weigh less than [critical weight for **METRIC VERY OBESE**]?

- 1 YES, WEIGH LESS
- 2 NO, DON'T WEIGHT LESS
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**ASK IF Q2.9e = 1, ELSE SKIP TO Q11.1**

**Q2.9g** - Do you weigh less than [critical weight for **METRIC OVERWEIGHT**]?

- 1 YES, WEIGH LESS [**SKIP TO Q2.9h**]
- 2 NO, DON'T WEIGHT LESS
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**ASK IF Q2.9g = 1, ELSE SKIP TO Q11.1**

**Q2.9h** - Do you weigh less than [critical weight for **METRIC UNDERWEIGHT**]?

- 1 YES, WEIGH LESS
- 2 NO, DON'T WEIGHT LESS
- 7 DON'T KNOW/NOT SURE

CRITICAL HEIGHT IN INCHES FOR VERY OBESE =  
SQUARE ROOT OF (20.09 \* Q2.8 weight LB)

CRITICAL HEIGHT IN INCHES FOR OBESE:  
= SQUARE ROOT OF (23.43 \* Q2.8 weight LB)

CRITICAL HEIGHT IN INCHES FOR OVERWEIGHT:  
= SQUARE ROOT OF (28.12 \* Q2.8 weight LB)

CRITICAL HEIGHT IN INCHES FOR UNDERWEIGHT:  
= SQUARE ROOT OF (38 \* Q2.8 weight LB)

THEN CONVERT TO FEET, INCHES

**ASK IF Q2.7 = 9999 OR 7777 AND Q2.8 ≠ 9999 OR 7777, ELSE SKIP TO Q11.1**

**Q2.10a** - Is your height less than [critical height for **OBESE**]?

- 1 YES, LESS [**SKIP TO Q2.10b**]
- 2 NO, NOT LESS [**SKIP TO Q2.10c**]
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**ASK IF Q2.10a = 1, ELSE SKIP TO Q2.10c**

**Q2.10b** - Is your height less than [critical height for **VERY OBESE**]?

- 1 YES, LESS
- 2 NO, NOT LESS
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**ASK IF Q2.10a = 2, ELSE SKIP TO Q11.1**

**Q2.10c** - Is your height less than [critical height for **OVERWEIGHT**]?

- 1 YES, LESS
- 2 NO, NOT LESS [**SKIP TO Q2.10d**]
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**ASK IF Q2.10c = 2, ELSE SKIP TO Q11.1**

**Q2.10d** - Is your height less than [critical height for **UNDERWEIGHT**]?

- 1 YES, LESS
- 2 NO, NOT LESS
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

CALCULATE CRITICAL HEIGHT FOR METRIC VERY OBESE =  
= SQUARE ROOT OF (286 \* Q2.8 weight KILOS)

CALCULATE CRITICAL HEIGHT FOR METRIC OBESE  
= SQUARE ROOT OF (333 \* Q2.8 weight KILOS)

CALCULATE CRITICAL HEIGHT FOR METRIC OVERWEIGHT  
= SQUARE ROOT OF (400 \* Q2.8 weight KILOS)

CALCULATE CRITICAL HEIGHT FOR METRIC UNDERWEIGHT  
= SQUARE ROOT OF (540.5 \* Q2.8 weight KILOS)

**ASK IF Q2.7 = 9999 OR 7777 AND Q2.8 ≠ 9999 OR 7777, ELSE SKIP TO Q11.1**

**Q2.10e** - Is your height less than [critical height for **METRIC OBESE**]?

- 1 YES, LESS [**SKIP TO Q2.10f**]
- 2 NO, NOT LESS [**SKIP TO Q2.10g**]
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**ASK IF Q2.10e = 1, ELSE SKIP TO Q2.10g**

**Q2.10f** - Is your height less than [critical height for **METRIC VERY OBESE**]?

- 1 YES, LESS
- 2 NO, NOT LESS
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**ASK IF Q2.10e = 2, ELSE SKIP TO Q11.1**

**Q2.10g** - Is your height less than [critical height for **METRIC OVERWEIGHT**]?

- 1 YES, LESS
- 2 NO, NOT LESS [**SKIP TO Q2.10h**]
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**ASK IF Q2.10g = 2, ELSE SKIP TO Q11.1**

**Q2.10h** - Is your height less than [critical height for **METRIC UNDERWEIGHT**]?

- 1 YES, LESS
- 2 NO, NOT LESS
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**TOBACCO and ALCOHOL (MOVED)**

**READ:** I would like to ask you a couple of questions about smoking and about drinking alcohol.

**Tobacco**

---

**ASK ALL**

**Q11.1** - Do you usually smoke 3 or more cigarettes on most days, some days, or never?

- 1 MOST DAYS (OR ALL DAYS)
- 2 SOME DAYS
- 3 NEVER
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**Alcohol**

---

**ASK ALL**

**Q11.2** Do you usually have more than 2 drinks of alcohol on most days, some days, or never?

**READ IF NECESSARY:** A drink of alcohol is 1 can or bottle of beer, 1 glass of wine, 1 can or bottle of wine cooler, 1 cocktail, or 1 shot of liquor.

- 1 MOST DAYS (OR ALL DAYS)
- 2 SOME DAYS
- 3 NEVER
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**Q11.3a** DELETED 8/19

**Q11.3b** DELETED 8/19

**NYC GPAQ**

**Q10.15** Are you currently. . .

- 01 Employed for wages or salary

IF R DOES NOT PICK #1, READ ALL OF THE REMAINING ANSWER CHOICES

- 02 Self-employed
- 03 A Homemaker
- 04 A Student
- 05 Retired
- 06 Unable to work
- 07 Unemployed for 1 year or more, or
- 08 Unemployed for less than 1 year
- 77 DON'T KNOW/NOT SURE
- 99 REFUSED

**CATI Note:** Only one choice can be entered. Entries must be zero filled.

Next I am going to ask you about the time you spent in the last 7 days doing different types of physical activity (read if 10.15 = 01 or 02: "when you were at work,") when you were at home, engaged in recreation, and going from place to place.

I will ask you about physical activities that caused increases in your breathing or heart rate and that lasted for **at least 10 minutes at a time**. Do **not** include light levels of activity that did not increase your breathing or heart rate.

**Ask only if Q10.15 is 01 or 02 ELSE SKIP TO INTRO BEFORE Q3.5**

**3.1** Think first about the time you spent **working** in the last 7 days.

Did your work involve any physical activity that caused an increase in your breathing or heart rate such as from carrying light loads, lifting heavy loads, or digging or construction work?

- YES ..... 1
- NO ..... 2 (SKIP TO Intro BEFORE 3.5)
- DON'T KNOW ..... 7 (SKIP TO Intro BEFORE 3.5)
- REFUSED ..... 9 (SKIP TO Intro BEFORE 3.5)

**3.2** During the last 7 days, on how many days did your work activities cause increases in your breathing or heart rate?

HARD EDIT: 1-7.

|\_\_|\_\_|  
ENTER NUMBER OF DAYS [RANGE: 1-7]

- DON'T KNOW ..... 77 (SKIP TO Intro BEFORE 3.5)
- REFUSED ..... 99 (SKIP TO Intro BEFORE 3.5)

**3.3** On an average day during the last 7 days, how many hours or minutes did you spend at work doing those activities that increased your breathing or heart rate?

PROBE IF DIFFICULTY: Think about the last day at work when you did activities that made your heart rate or breathing increase.

SOFT EDIT: >4 HOURS. SOFT EDIT WORDING: INTERVIEWER, YOU HAVE RECORDED THAT THE RESPONDENT SPENDS MORE THAN 4 HOURS DOING ACTIVITIES AT WORK ON A TYPICAL DAY. PLEASE CONFIRM WITH RESPONDENT THAT OVER 4 HOURS IS CORRECT.

SOFT EDIT: >4 HOURS.  
HARD EDIT: >24 HOURS.  
HARD EDIT: <10 MINUTES.

|\_\_|\_\_|\_\_|  
ENTER NUMBER IN MINUTES [RANGE 0 - 59] AND HOURS [RANGE=0-24]

- DON'T KNOW ..... 777
- REFUSED ..... 999 (SKIP TO INTRO BEFORE 3.5)

**If 3.3 = 777**

**3.3a** Would you say that it was less than 30 minutes, 30 to 60 minutes, or more than 60 minutes?

- LESS THAN 30 MINUTES... 1 (SKIP TO Intro BEFORE 3.5)
- 30 - 60 MINUTES..... 2 (SKIP TO Intro BEFORE 3.5)
- MORE THAN 60 MINUTES... 3 (SKIP TO Intro BEFORE 3.5)
- DON'T KNOW ..... 7 (SKIP TO Intro BEFORE 3.5)
- REFUSED ..... 9 (SKIP TO Intro BEFORE 3.5)



3.4 How many, if any, of those (fill hours or minutes from above) were **vigorous** activity that caused a **large** increase in your breathing or heart rate?  
 [CATI: RESTRICT ANSWER TO LESS THAN OR EQUAL TO TOTAL MINUTES]

\_\_\_\_\_ HOURS  
 \_\_\_\_\_ MINUTES  
 888 None  
 777 DON'T KNOW/NOT SURE  
 999 REFUSED

Now think about the physical activities you have done in the last 7 days in and around your home, like housework, yard work, and caring for your family. Exclude light activities that do **not** increase your breathing and heart rate.

3.5 In the last 7 days, did you do work around the house for at least 10 minutes at a time that caused an increase in your breathing or heart rate? Some examples would be yard work, sweeping, washing windows, or lifting children.

YES ..... 1  
 NO ..... 2 (SKIP TO Intro BEFORE 3.8)  
 DON'T KNOW ..... 7 (SKIP TO Intro BEFORE 3.8)  
 REFUSED ..... 9 (SKIP TO Intro BEFORE 3.8)

3.6 During the last 7 days, how many days did you do activities around the home that caused an increase in your breathing or heart rate?

HARD EDIT: 1-7.

|\_\_|\_\_|  
 ENTER NUMBER OF DAYS [RANGE: 1-7]

DON'T KNOW ..... 77 (SKIP TO Intro BEFORE 3.8)  
 REFUSED ..... 99 (SKIP TO Intro BEFORE 3.8)

3.7 On an average day during the last 7 days, how many hours or minutes did you spend doing these activities

SOFT EDIT: >4 HOURS. SOFT EDIT WORDING: INTERVIEWER, YOU HAVE RECORDED THAT THE RESPONDENT SPENDS MORE THAN 4 HOURS DOING ACTIVITIES AT WORK ON A TYPICAL DAY. PLEASE CONFIRM WITH RESPONDENT THAT OVER 4 HOURS IS CORRECT.

SOFT EDIT: >4 HOURS.  
 HARD EDIT: >24 HOURS.  
 HARD EDIT: <10 MINUTES.

|\_\_|\_\_|\_\_|  
 ENTER NUMBER IN MINUTES [RANGE 0-59] AND HOURS [RANGE 0-24]

DON'T KNOW ..... 777  
 REFUSED ..... 999

If 3.7 = 777

3.7a Would you say that it was less than 30 minutes, 30 to 60 minutes, or more than 60 minutes?

LESS THAN 30 MINUTES... 1  
 30 - 60 MINUTES ..... 2  
 MORE THAN 60 MINUTES... 3  
 DON'T KNOW ..... 7  
 REFUSED ..... 9

Now I would like to ask you about the usual way you travel to and from places such as work, shopping, or school.

**3.8** During the last 7 days, did you walk for at least 10 minutes at a time to get to and from places such as work, shopping, or other activities?

READ IF NECESSARY: This refers to walking **outside** of your home.

YES .....	1
NO .....	2 (SKIP TO 3.11)
DON'T KNOW .....	7 (SKIP TO 3.11)
REFUSED .....	9 (SKIP TO 3.11)

**3.9** During the last 7 days, on how many days did you walk to get to and from places?

HARD EDIT: 1-7.

|\_\_|\_\_|  
ENTER NUMBER OF DAYS [RANGE: 1-7]

DON'T KNOW .....	77 (SKIP TO 3.11)
REFUSED .....	99 (SKIP TO 3.11)

**3.10** How many hours or minutes did you spend walking to get from place to place on an average day during the last 7 days?

READ IF NEEDED: Think about yesterday if an average day is too difficult to determine.

SOFT EDIT: >4 HOURS. SOFT EDIT WORDING: INTERVIEWER, YOU HAVE RECORDED THAT THE RESPONDENT SPENDS MORE THAN 4 HOURS WALKING TO GET TO AND FROM PLACES ON A TYPICAL DAY. PLEASE CONFIRM WITH RESPONDENT THAT OVER 4 HOURS IS CORRECT.

SOFT EDIT: >4 HOURS.  
HARD EDIT: >24 HOURS.  
HARD EDIT: <10 MINUTES.

|\_\_|\_\_|\_\_|  
ENTER NUMBER IN MINUTES [RANGE 0-59] AND HOURS [RANGE 0-24]

DON'T KNOW .....	777
REFUSED .....	999

**If 3.10 = 777**

**3.10a** Would you say that it was less than 30 minutes, 30 to 60 minutes, or more than 60 minutes?

LESS THAN 30 MINUTES ...	1
30 - 60 MINUTES .....	2
MORE THAN 60 MINUTES ...	3
DON'T KNOW .....	7
REFUSED .....	9

**3.11** During the last 7 days, did you use a bicycle to get to and from places?

YES .....	1
NO .....	2 (SKIP TO Intro BEFORE 3.14)
DON'T KNOW .....	7 (SKIP TO Intro BEFORE 3.14)
REFUSED .....	9 (SKIP TO Intro BEFORE 3.14)

3.12 During the last 7 days, on how many days did you bicycle to get to and from places?

CLARIFICATION: This question asks about travel to and from places such as work, shopping, or other activities.

HARD EDIT: 1-7.

|\_\_|\_\_|  
ENTER NUMBER OF DAYS [RANGE: 1-7]

DON'T KNOW ..... 77 (SKIP TO Intro BEFORE 3.14)  
REFUSED ..... 99 (SKIP TO Intro BEFORE 3.14)

3.13 How many hours or minutes did you spend bicycling to get from place to place on an average day during the last 7 days?

PROBE IF DIFFICULTY: Think about the last day when you used your bicycle to go from one place to another.

SOFT EDIT: >4 HOURS. SOFT EDIT WORDING: INTERVIEWER, YOU HAVE RECORDED THAT THE RESPONDENT SPENDS MORE THAN 4 HOURS BICYCLING TO GET TO AND FROM PLACES ON A TYPICAL DAY. PLEASE CONFIRM WITH RESPONDENT THAT OVER 4 HOURS IS CORRECT.

SOFT EDIT: >4 HOURS.  
HARD EDIT: >24 HOURS.  
HARD EDIT: <10 MINUTES.

|\_\_|\_\_|\_\_|  
ENTER NUMBER IN MINUTES [RANGE 0-59] AND HOURS [RANGE 0-24]

DON'T KNOW ..... 777  
REFUSED ..... 999

If 3.13 = 777

3.13a Would you say that it was less than 30 minutes, 30 to 60 minutes, or more than 60 minutes?

LESS THAN 30 MINUTES... 1  
30 - 60 MINUTES..... 2  
MORE THAN 60 MINUTES... 3  
DON'T KNOW..... 7  
REFUSED..... 9

Now I would like to ask you about sports, fitness and recreational activities. Exclude the activities you have told me about and focus on sports, fitness and recreation.

3.14 During the last 7 days, did you do any sports, fitness, or recreational activities that caused an increase in your breathing or heart rate? Examples would be swimming, working out, or jogging.

CLARIFICATION: This includes brisk walking and fast biking that are for exercise (and not for getting from place to place).

YES ..... 1  
NO ..... 2 (SKIP TO Intro BEFORE 3.18)  
DON'T KNOW ..... 7 (SKIP TO Intro BEFORE 3.18)  
REFUSED ..... 9 (SKIP TO Intro BEFORE 3.18)

3.15 During the last 7 days, on how many days did you do sports, fitness or recreational activities that increased your breathing or heart rate?

HARD EDIT: 1-7.

|\_\_|\_\_|  
ENTER NUMBER OF DAYS [RANGE: 1-7]

DON'T KNOW ..... 77 (SKIP TO Intro BEFORE 3.18)  
REFUSED ..... 99 (SKIP TO Intro BEFORE 3.18)

3.16 On an average day during the last 7 days, how many hours or minutes did you spend doing these sports, fitness or recreational activities?

SOFT EDIT: >4 HOURS. SOFT EDIT WORDING: INTERVIEWER, YOU HAVE RECORDED THAT THE RESPONDENT SPENDS MORE THAN 4 HOURS DOING RECREATIONAL ACTIVITIES ON A TYPICAL DAY. PLEASE CONFIRM WITH RESPONDENT THAT OVER 4 HOURS IS CORRECT.

SOFT EDIT: >4 HOURS.  
HARD EDIT: >24 HOURS.  
HARD EDIT: <10 MINUTES.

|\_\_|\_\_|\_\_|  
ENTER NUMBER IN MINUTES [RANGE 0-59] AND HOURS [RANGE 0-24]

DON'T KNOW ..... 777  
REFUSED ..... 999 (SKIP TO INTRO BEFORE 3.18)

If 3.16 = 777

3.16a Would you say that it was less than 30 minutes, 30 to 60 minutes, or more than 60 minutes?

LESS THAN 30 MINUTES... 1 (SKIP TO Intro BEFORE 3.18)  
30 - 60 MINUTES ..... 2 (SKIP TO Intro BEFORE 3.18)  
MORE THAN 60 MINUTES... 3 (SKIP TO Intro BEFORE 3.18)  
DON'T KNOW ..... 7 (SKIP TO Intro BEFORE 3.18)  
REFUSED ..... 9 (SKIP TO Intro BEFORE 3.18)

3.17 How many, if any, of those (fill hours or minutes from above) doing sports, fitness, or recreational activities were **vigorous** activity that caused a **large** increase in your breathing or heart rate?

[CATI: RESTRICT ANSWER TO LESS THAN OR EQUAL TO TOTAL MINUTES]

\_\_\_\_\_ HOURS  
\_\_\_\_\_ MINUTES  
888 NONE  
777 DON'T KNOW/NOT SURE  
999 REFUSED

Now I am going to ask you about how much time you spent in the last 7 days sitting at work, at home, in a car, or on the subway.

3.18 On an average day during the last 7 days, from the time you woke up to around 5 o'clock in the evening, how many hours or minutes did you spend sitting?

READ IF DIFFICULTY: Think about yesterday if needed.

HARD EDIT: >12 HOURS.

|\_\_|\_\_|\_\_|  
ENTER NUMBER IN MINUTES [RANGE 0-59] AND HOURS [RANGE 0-12]

DON'T KNOW ..... 777  
REFUSED ..... 999

If 3.18 = 777

3.18a Would you say that it was less than 30 minutes, 30 to 60 minutes, or more than 60 minutes?

- LESS THAN 30 MINUTES... 1
- 30 - 60 MINUTES..... 2
- MORE THAN 60 MINUTES... 3
- DON'T KNOW..... 7
- REFUSED..... 9

3.19 And from 5 o'clock in the evening to the time you went to bed on an average day during the last 7 days, how many hours or minutes did you spend sitting?

READ IF DIFFICULTY: Think about yesterday if needed.

HARD EDIT: >12 HOURS.

|\_\_|\_\_|\_\_|  
ENTER NUMBER IN MINUTES [RANGE 0-59] AND HOURS [RANGE 0-12]

- DON'T KNOW..... 777
- REFUSED..... 999

If 3.19 = 777

3.19a Would you say that it was less than 30 minutes, 30 to 60 minutes, or more than 60 minutes?

- LESS THAN 30 MINUTES... 1
- 30 - 60 MINUTES..... 2
- MORE THAN 60 MINUTES... 3
- DON'T KNOW..... 7
- REFUSED..... 9

**ADDENDUM TO NYC GPAQ**

---

**ASK ALL**

Q3.28 On an average day from Monday to Friday, how many hours per day do you watch television or use a computer at home for recreation? Exclude time when the T.V. is on, but you are not watching it.

\_\_\_\_\_ : \_\_\_\_\_

HOURS (RANGE 00-12) : MINUTES (RANGE 00, 30)

- 00 NEVER
- 88 LESS THAN A HALF HOUR
- 77 DON'T KNOW/NOT SURE
- 99 REFUSED

ENTER THE NUMBER OF HOURS.

IF THE RESPONDENT GIVES A NUMBER OF MINUTES, ROUND TO THE HALF-HOUR.

IF THE RESPONDENT SAYS NO TIME IS SPENT WATCHING TV, ENTER 00. ENTER 88 FOR LESS THAN A HALF HOUR.

**ASK ALL**

**Q3.29** On an average weekend day, Saturday or Sunday, how many hours per day do you watch television or use a computer at home for recreation? Exclude time when the T.V. is on, but you are not watching it.

\_\_\_\_\_ : \_\_\_\_\_

HOURS (RANGE 00-12) : MINUTES (RANGE 00, 30)

- 00 NEVER
- 88 LESS THAN A HALF HOUR
- 77 DON'T KNOW/NOT SURE
- 99 REFUSED

ENTER THE NUMBER OF HOURS.

IF THE RESPONDENT GIVES A NUMBER OF MINUTES, ROUND TO THE HALF-HOUR.

IF THE RESPONDENT SAYS NO TIME IS SPENT WATCHING TV, ENTER 00. ENTER 88 FOR LESS THAN A HALF HOUR.

**ASK IF Q3.1, 3.5, or 3.14=1**

**Q3.30** Think about all the activities you have told me about that cause an increase in your breathing or heart rate. Do you usually participate in these: [READ LIST; MULTIPLE RECORD]

- 1 Alone
- 2 With another person
- 3 As part of a group
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**[ASK IF MORE THAN 1 ANSWER GIVEN IN Q3.30]:**

**Q3.31a** Which do you do most often? Participate in activities: [READ LIST; SINGLE RECORD]

- 1 Alone
- 2 With another person
- 3 As part of a group
- 4 [VOL] No usual pattern / all equal
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**[ASK IF Q3.30= PART OF A GROUP]**

**Q3.31b** When you participate in group activities, are they usually activities with a leader or without a leader?

- 1 With a leader
- 2 Without a leader
- 3 [VOL] No usual pattern
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**Q3.32** Thinking about an average day in the last 7 days, how many minutes of walking that you did on this typical day were fast or brisk walking that caused your heart rate or breathing to increase?

\_\_\_\_\_ HOURS PER DAY [RANGE: 0 - 16]  
\_\_\_\_\_ MINUTES PER DAY [RANGE: 0 - 960]  
7777 DON'T KNOW/NOT SURE  
9999 REFUSED

**Q3.33** During the past 12 months, did you do less activity because you thought or were informed that the air quality was bad?

- 1 Yes
- 2 No
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**TRANSPORTATION and COMMUTING**

**READ:** Now I am going to ask you some questions about transportation around New York City.

**[ASK IF Q10.15=1 OR 2 ELSE go to Q7.11]**

**Q7.0** Earlier you said that you worked. For your job, do you usually work outside of your home, or do you work from home?

- 1 WORK OUTSIDE THE HOME
- 2 WORK FROM HOME
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**ASK IF Q7.0 = 1, ELSE GO TO Q7.11**

**Q7.1a** When you go to work, is this on weekdays, weekends or both?

- 1 WEEK DAYS
- 2 WEEKENDS
- 3 BOTH WEEKDAYS AND WEEKENDS
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**Q7.1b DELETED 8/19**

**Q7.2** How do you usually get to work?

**INTERVIEWER NOTE:** IF RESPONDENT SAYS 'TRAIN' PROBE TO SEE IF IT IS A SUBWAY OR COMMUTER TRAIN

**READ IF NECESSARY:** With Select Bus Service, the buses make fewer stops along their route and require passengers to pay outside the bus. It is not an Express Bus.

**ACCEPT ALL THAT APPLY**

- 1 Subway
- 2 City bus
- 3 Express bus
- 4 Select Bus Service (SBS)
- 5 Bicycle
- 6 Walking
- 7 Personal Car
- 8 Taxi / Car Service
- 9 Commuter train (such as LIRR, PATH, Metro North)
- 10 Ferry
- 11 Some other way
- 77 Don't know/Not sure
- 99 Refused

[ASK IF MORE THAN ONE METHOD TO GET TO WORK]

Q7.2a What type of transportation do you use for most of the trip? [SELECT ONE]

- 1 Subway
- 2 City bus
- 3 Express bus
- 4 Select Bus Service (SBS)
- 5 Bicycle
- 6 Walking
- 7 Personal Car
- 8 Taxi / Car Service
- 9 Commuter train (such as LIRR, PATH, Metro North)
- 10 Ferry
- 11 Some other way
- 12 No one way most of the trip
- 77 Don't know/Not sure
- 99 Refused

Q7.2b How long is your one-way commute from home to work on a typical day? Include any walking to and from transportation.

\_\_\_\_\_ HOURS PER DAY [RANGE: 0 - 4]  
\_\_\_\_\_ MINUTES PER DAY [RANGE: 0 - 240]  
7777 DON'T KNOW/NOT SURE  
9999 REFUSED

(Skip if 7.2 = 6 ONLY; that is, the person only walks)

Q7.2c/d On a typical day, how many minutes of your total commute are spent:

c. walking from your home to the transportation you take to go to work?

\_\_\_\_\_ HOURS PER DAY [RANGE: 0 - 4]  
\_\_\_\_\_ MINUTES PER DAY [RANGE: 0 - 240]  
7777 DON'T KNOW/NOT SURE  
9999 REFUSED

d. walking from transportation to the place where you work?

\_\_\_\_\_ HOURS PER DAY [RANGE: 0 - 4]  
\_\_\_\_\_ MINUTES PER DAY [RANGE: 0 - 240]  
7777 DON'T KNOW/NOT SURE  
9999 REFUSED

**CATI: CALCULATE TOTAL HOURS IN 7.2c+7.2d. IF VALUE IS > Q7.2b, SHOW SCREEN:**

You mentioned that your ENTIRE one-way commute from home to work takes [+Q7.2b+] (minutes/hours), but that you spend more than [Q7.2b] (minutes/hours) just walking to and from transportation. Let me re-ask those questions to make sure I recorded them correctly.

**CATI: PROBE ONCE WITH THIS SCREEN; IF ANSWER STILL DOESN'T MAKE SENSE, CONTINUE.**

Q7.3 Overall, how satisfied are you with your commute? Would you say you are very satisfied, somewhat satisfied, somewhat dissatisfied, or very dissatisfied?

- 1 VERY SATISFIED
- 2 SOMEWHAT SATISFIED
- 3 SOMEWHAT DISSATISFIED
- 4 VERY DISSATISFIED
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED



**Q7.4** How often would you say that you like your commute? Would you say often, sometimes, rarely, or never.

- 1 OFTEN
- 2 SOMETIMES
- 3 RARELY
- 3 NEVER
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**Q7.5** Which borough do you work in?

**READ IF NEEDED:**

- 1 The Bronx
- 2 Brooklyn
- 3 Manhattan
- 4 Queens, or
- 5 Staten Island?
- 6 NOT IN NEW YORK CITY
- 8 NO ONE BOROUGH MOST
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**Q7.6** Can you tell me the Zip code of the place where you work?

- \_ \_ \_ \_ \_ [ZIP CODE]
- 00000 NO ONE ZIP CODE MOST
- 77777 DON'T KNOW/NOT SURE
- 99999 REFUSED

**SKIP Q7.7 IF Q7.6=00000**

**Q7.7** Can you tell me the nearest intersection or the cross streets of the place where you work?

READ IF NEEDED: This is only for purposes of better understanding the neighborhood where you work.

\_\_\_\_\_ STREET/AVE

\_\_\_\_\_ STREET/AVE

- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**Q7.8 DELETED 8/19**

**Q7.9 DELETED 8/19**

**Q7.10 DELETED 8/19**

**ASK ALL**

**Q7.11** What is the intersection or the cross streets nearest to your home?

READ IF NEEDED: This is only for purposes of better understanding your neighborhood.

\_\_\_\_\_ STREET/AVE

\_\_\_\_\_ STREET/AVE

- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**ASK ALL**

**Q7.12** Do you or does someone in your household own or lease a car that you drive regularly in New York City?

READ IF NEEDED: Exclude Zip Cars or any other rental cars.

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

**ASK ALL**

**Q7.13** Some buses make fewer stops along their route and require passengers to pay outside the bus. These buses are known as "Select Bus Service." Have you heard of Select Bus Service?

READ IF NEEDED: This does not refer to an Express Bus.

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

**ASK IF Q7.13 = 1**

**Q7.14** Please tell me if you take Select Bus Service for work, school, errands, or other reasons. [MULTIPLE-RECORD]

READ IF NEEDED: This does not refer to an Express Bus.

- 1 WORK
- 2 SCHOOL
- 3 ERRANDS
- 4 OTHER REASON(S)
- 5 [VOL.] I DON'T TAKE SBS
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**BIKING and taking the STAIRS**

**Bicycle Riding**

---

**READ:** These next questions are about riding a bike in New York City.

**Q4.1a** In the past 12 months, how often have you ridden a bicycle in one of the five boroughs of New York City? Would you say several times a month, at least once a month, a few times a year, or never?

IF ASKED: This does not include a stationary bike.

- 1 SEVERAL TIMES A MONTH
- 2 AT LEAST ONCE A MONTH
- 3 A FEW TIMES A YEAR
- 4 NEVER Go to Q4.8
- 7 DON'T KNOW/NOT SURE Go to Q4.8
- 9 REFUSED Go to Q4.8

**ASK IF Q4.1a=1, 2, or 3, ELSE GO TO Q4.8**

**READ:** In regard to the lanes or paths that you have used when you ride a bicycle in the city..

**Q4.2** In the past 12 months, how often did you ride on streets without a bike lane? Would you say none of the time? Some of the time? Most of the time? Or all of the time?

- 1 NONE OF THE TIME
- 2 SOME OF THE TIME
- 3 MOST OF THE TIME
- 4 ALL OF THE TIME
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**Q4.3** In the past 12 months, how often did you ride on streets with a bike lane? This includes protected on-street bike lanes. Would you say none of the time? Some of the time? Most of the time? Or all of the time?

- 1 NONE OF THE TIME
- 2 SOME OF THE TIME
- 3 MOST OF THE TIME
- 4 ALL OF THE TIME
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**Q4.4** In the past 12 months, how often did you ride on a bike path in an area closed to motor vehicle traffic, such as a park? Would you say none of the time? Some of the time? Most of the time? Or all of the time?

- 1 NONE OF THE TIME
- 2 SOME OF THE TIME
- 3 MOST OF THE TIME
- 4 ALL OF THE TIME
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**ASK ALL**

**Q4.8** What kind of building do you live in? Is it an apartment building or a single-family house?

- 1 APARTMENT BUILDING OR MULTI-FAMILY HOUSE/BUILDING
- 2 SINGLE-FAMILY HOUSE
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**ASK IF 4.8 = 1 & Q4.1A=1,2,3, ELSE GO TO Q4.6A**

**Q4.5** Are there secure places to park a bike inside or outside your building other than your apartment?

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

**ASK IF Q7.0 = 1 & Q4.1A=1,2,3 (WORK), ELSE GO TO INTRO BEFORE Q4.7**

**Q4.6a** Are there secure places to park a bike inside or outside the building where you work other than in your personal work area?

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

**Q4.6b DELETED 8/19**

## Stairs

---

**READ:** Next, I am going to ask you some questions about using the stairs.

### ASK ALL

**Q4.7** Are you physically able to use the stairs?

- 1 YES
- 2 NO [SKIP TO INTRO BEFORE Q5.1]
- 7 DON'T KNOW/NOT SURE [SKIP TO INTRO BEFORE Q5.1]
- 9 REFUSED [SKIP TO INTRO BEFORE Q5.1]

**[ASK IF Q4.8 = 1 and 4.7 EQ 1 Else go to Q4.11]**

**Q4.9** What floor do you live on?

- \_\_\_\_\_ FLOOR [RANGE 0-76, BASEMENT = 0]
- 77 DON'T KNOW/NOT SURE
- 99 REFUSED

**ASK IF Q4.8 EQ 1, ELSE SKIP TO Q4.11**

**Q4.10** Does the building where you live have an elevator or escalator?

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

**ASK IF Q4.10 EQ 1, ELSE SKIP TO Q4.11**

**Q4.10a** Have you seen a sign at the elevator or escalator encouraging you to regularly take the stairs in the building where you live?

READ IF NECESSARY: This does not include signs about taking the stairs in case of emergency or fire.

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

**ASK IF Q7.0 = 1 and 4.7 EQ 1 & Q7.5<>6 Else GO TO INTRO BEFORE Q4.14**

**Q4.11** What floor do you go to for work?

- \_\_\_\_\_ FLOOR [RANGE 0-76, GROUND FLOOR = 0]
- 88 NO ONE FLOOR/PLACE MOST OF THE TIME
- 77 DON'T KNOW/NOT SURE
- 99 REFUSED

**Q4.12** Does the building where you work have an elevator or escalator?

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

**ASK IF Q4.12 EQ 1**

**Q4.13** Have you seen a sign at the elevator or escalator encouraging you to regularly take the stairs where you work?

READ IF NECESSARY: This does not include signs about taking the stairs in case of emergency or fire.

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

[ASK IF Q4.7=1, ELSE SKIP TO INTRO BEFORE Q5.1]

**READ:** I'm going to ask you separate questions about walking down and walking up the stairs.

**Q4.14** How many total floors of stairs do you walk **down** on a typical weekday at home [READ IF Q10.15=1 OR 2: and work, combined]? Do not count stairs in the subway. [READ LIST]

- 1 0 FLOORS PER WEEKDAY
- 2 1-2 FLOORS PER WEEKDAY
- 3 3-5 FLOORS PER WEEKDAY
- 4 6 FLOORS OR MORE PER WEEKDAY
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**Q4.15** How many total floors of stairs do you walk **up** on a typical weekday at home [READ IF Q10.15=1 OR 2: and work, combined]? Do not count stairs in the subway. [READ LIST]

- 1 0 FLOORS PER WEEKDAY
- 2 1-2 FLOORS PER WEEKDAY
- 3 3-5 FLOORS PER WEEKDAY
- 4 6 FLOORS OR MORE PER WEEKDAY
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

[IF Q4.8=2 & Q7.0=2, 7, OR 9, SKIP TO INTRO BEFORE Q5.1]

**Q4.16** During the past 30 days, did any of the following reasons prevent you from using the stairs at home [READ IF Q10.15=1 OR 2: or work], or make you use them less often? [RANDOMIZE ITEMS; INSERT]

- c. The stair entrance or exit is locked.
- e. The stairs feel unsafe in terms of possible crimes.
- f. The stairs have an unpleasant environment.
- h. There are too many floors to walk up or down.

- 1 YES
- 2 NO
- 3 (VOL) NO STAIRS AT HOME/WORK     **Go to intro before Q5.1**
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

#### PHYSICAL ACTIVITY HABITS & SELF-RATINGS

**READ:** Now I will ask some general questions about physical activity in your life and routines.

**ASK ALL**

**Q5.1** Do you have a daily or weekly exercise routine? For example, do you participate in classes, team sports, or do some other exercise regularly?

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

**ASK ALL**

**Q5.2** In the past 12 months, have you been a member of a gym or recreation facility?

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

**IF Q5.1 = 1; Else go to Q5.4**

**Q5.3** What type of physical activity or exercise did you do **regularly** during the last 12 months? Please tell me up to three specific activities that you did most often.

[INTERVIEWER: IF MORE THAN THREE ACTIVITIES REPORTED, ASK FOR THE THREE THAT ARE DONE MOST OFTEN]

[INTERVIEW: IF 'GO TO THE GYM', PROBE FOR SPECIFIC ACTIVITIES]

**LIST OF ACTIVITIES IS IN APPENDIX A**

- \_\_\_\_\_ Activity 1
- \_\_\_\_\_ Activity 2
- \_\_\_\_\_ Activity 3
- 99 Refused

**ASK ALL**

**Q5.4** During the past 7 days, did you do any physical activities specifically designed to strengthen your muscles such as lifting weights, doing push-ups, or sit-ups?

- 1 YES
- 2 NO
- 4 UNABLE TO DO THESE PHYSICAL ACTIVITIES
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**IF Q5.4=1; ELSE GO TO Q5.5**

**Q5.4a** Did you do these activities on 2 or more of the past 7 days?

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

**ASK ALL**

**Q5.5** In general, how physically active are you? Would you say very active, somewhat active, not very active or not active at all?

- 1 VERY ACTIVE
- 2 SOMEWHAT ACTIVE
- 3 NOT VERY ACTIVE
- 4 NOT ACTIVE AT ALL
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**ASK ALL**

**Q5.6** In general, how physically fit are you? Would you say very fit, somewhat fit, not very fit, or not fit at all?

- 1 VERY FIT
- 2 SOMEWHAT FIT
- 3 NOT VERY FIT
- 4 NOT FIT AT ALL
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

[NEW Q FOR W2 ONLY]

**Q5.7** - In general, how healthy is your overall diet? Would you say excellent, very good, good, fair or poor?

- 1 EXCELLENT
- 2 VERY GOOD
- 3 GOOD
- 4 FAIR
- 5 POOR
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**SOCIAL NORMS**

**ASK ALL**

**Q6.1** Do any of your **friends** exercise, play sports, or do other physical activities?

- 1 YES
- 2 NO
- 3 [VOL: DON'T HAVE FRIENDS]
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**ASK ALL**

**Q6.2** Do any of your **adult family members** exercise, play sports, or do other physical activities?

READ IF NEEDED: Do adult family members that you have regular contact with exercise, play sports, or do other physical activities?

- 1 YES
- 2 NO
- 3 [VOL: DON'T HAVE FAMILY MEMBERS]
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**ASK ALL**

**Q6.3** Do any of your neighbors exercise, play sports, or do other physical activities?

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

**ASK ALL**

**Q6.4** Does anyone you admire exercise, play sports, or do other physical activities?

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

**BUILT ENVIRONMENT**

**Neighborhood Characteristics, Access, and Safety**

---

**ASK ALL**

**Q8.1** Next, I am going to read several statements that can be made about neighborhoods. For each one, please say "Yes" if you think this is true of your neighborhood, or say "No" if you think it is not true. [INSERT; RANDOMIZE ITEMS]

- a. There are on-street bike lanes or bike paths near where I live.
- b. I can easily walk to many stores, markets or other places from my home.
- c. There is so much traffic near where I live that it makes it unpleasant to walk.
- d. The cars go too fast on the streets in my neighborhood.
- e. My streets are well-lit at night.
- f. Because of crime, I feel unsafe going on walks during the day.
- g. REMOVED 8/18/10
- h. REMOVED 8/19/10

- 1 YES (TRUE OF NEIGHBORHOOD)
- 2 NO (NOT TRUE OF NEIGHBORHOOD)
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**Recreation Facilities**

---

**READ:** Now I have some questions about parks that are available to you in New York City.

**ASK ALL**

**Q8.2** Thinking about the **park** that is closest to your home, how many minutes would it take to enter the park if you were to walk there from home?

Would you say it takes...

**READ:**

- 1 Less than 5 minutes
- 2 5 to 10 minutes
- 3 More than 10 but less than 30 minutes
- 4 30 or more minutes
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**ASK ALL**

**Q8.9** How often do you use the park closest to your home for sports, exercise, or other physical activity? Would you say often, sometimes, rarely, or never?

- 1 OFTEN
- 2 SOMETIMES
- 3 RARELY
- 4 NEVER
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**ASK ALL**

**Q8.12** Are you concerned about crime during daylight in the park that is closest to your home?

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



**ASK ALL**

**Q8.14** Are you concerned that the park closest to your home is often unclean?

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

**ASK IF Q8.2=3 OR 4**

**Q8.14a** Is there an outdoor plaza where people can sit and rest within 10 minutes of your home?

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

**ASK ALL**

**Q10.14** How many children younger than 18 live in your household?

READ IF NEEDED: Include all children who live in your household the majority of a typical week.

- \_\_\_ NUMBER OF CHILDREN [RANGE 0-25]
- 77 DON'T KNOW/NOT SURE
- 99 REFUSED

**ASK Q8.3-Q8.5 IF Q10.14=1 TO 25**

**Q8.3** Is there play space indoors at the building where you live, where children can run around, play sports, or do other active games?

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

**Q8.4** Is there a play space outdoors at the building or house where you live?

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

**Q8.5** When you go outside your building or your house, how many minutes does it take to walk to the closest playground?

Would you say it takes...

READ:

- 1 Less than 5 minutes
- 2 5 to 10 minutes
- 3 More than 10 but less than 30 minutes
- 4 30 or more minutes
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**Q8.8 REMOVED 8/19/10**

**ASK ALL**

**Q8.10** Do you or does anyone else in the household have a dog?

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

**ASK IF Q8.10 = 1**

**Q8.11** How often do you take your dog to a park with a dog run? Would you say often, sometimes, rarely, or never?

- 1 OFTEN
- 2 SOMETIMES
- 3 RARELY
- 4 NEVER
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**Q8.12a** REMOVED 8/19/10

**Q8.13** REMOVED 8/19/10

**8.13a** REMOVED 8/19/10

**Q8.14a** REMOVED 8/19/10

**Access to Food**

---

**READ:** Now I have some questions about stores in your neighborhood where you buy food.

**ASK ALL**

**Q8.15a** Thinking about the store closest to your home that has a variety of fresh fruits and vegetables...how many minutes would it take if you were to walk there from your home?

[INTERVIEWER NOTE: THIS DOES NOT INCLUDE STREET VENDORS OR GREEN CARTS.]

Would you say it takes...

**READ:**

- 1 Less than 5 minutes
- 2 5 to 10 minutes
- 3 More than 10 but less than 30 minutes
- 4 30 or more minutes
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**ASK IF 8.15a = 1,2,3,4; Else go to Q8.16**

**Q8.15b** Is this store a supermarket?

- 1 Yes
- 2 No
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**ASK IF Q8.15b = 2 (No)**

**Q8.15** Thinking about the **supermarket** closest to you, how many minutes would it take if you were to walk there from your home?

Would you say it takes..

READ:

- 1 Less than 5 minutes
- 2 5 to 10 minutes
- 3 More than 10 but less than 30 minutes
- 4 30 or more minutes
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

INTERVIEWER: This question does not refer to bodegas or small convenience stores such as the 7-11.

**ASK ALL**

**Q8.16** How often do you travel outside of your neighborhood to go to a supermarket? Would you say often, sometimes, rarely, or never?

- 1 OFTEN
- 2 SOMETIMES
- 3 RARELY
- 4 NEVER
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**Q8.19 & Q8.20 REMOVED 8/16/10**

**ASK ALL**

**Q8.17** How would you rate the overall quality of fresh fruits and vegetables available in the stores in your neighborhood? Would you say the quality is excellent, good, fair, or poor?

- 1 EXCELLENT
- 2 GOOD
- 3 FAIR
- 4 POOR
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**ASK ALL**

**Q8.21** How would you rate the cost of fresh fruits and vegetables in your neighborhood? Would you say they are very expensive, somewhat expensive, just about right, or inexpensive?

- 1 Very expensive
- 2 Somewhat expensive
- 3 Just about right
- 4 Inexpensive
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**ASK ALL**

**Q8.18** When Farmer's Markets are available, how often do you shop at one? Would you say often, sometimes, rarely, or never?

- 1 OFTEN
- 2 SOMETIMES
- 3 RARELY
- 4 NEVER
- 5 [Volunteer: No Farmer's Market available]
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**INJURY**

**READ:** Now I would like to ask you some questions about injuries.

**Pedestrian Injuries**

---

**ASK ALL**

**Q9.1** In the last year (12 months), have you been injured by a motor vehicle or bicyclist while you were walking in New York City?

- 1 YES BY A MOTORIST
- 2 YES, BY A BICYCLIST
- 3 YES, BY BOTH
- 4 NO
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

[If Q9.1 = 1, 2, or 3; Else go to Q9.3]

**Q9.2** Where did you go to receive treatment, if anywhere, because of this injury?  
[READ LIST IF NECESSARY; MULTIPLE RESPONSE]

- 1 EMERGENCY ROOM
- 2 DOCTOR
- 3 OVERNIGHT STAY IN A HOSPITAL
- 4 (VOL) NONE OF THE ABOVE
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**Cyclist-Related Injuries and Safety**

---

[Ask only If Q4.1a=1/2/3. Otherwise, go to NEXT SECTION]

**Q9.3** As a bicyclist in New York City, have you been involved in a bicycle crash in the last 12 months?

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

If Q9.3 = 1; Else, go to Q10.1]

**Q9.4** Did your crash involve a motor vehicle, a pedestrian, another bicyclist, or a fall off your bike? [MULTIPLE-RECORD]

- 1 MOTOR VEHICLE
- 2 PEDESTRIAN
- 3 ANOTHER BICYCLIST
- 4 FALL OFF YOUR BIKE
- 5 [VOL: OTHER]
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**Q9.5** Where did you go to receive treatment, if anywhere, for an injury resulting from this crash? [READ LIST IF NECESSARY; MULTIPLE RESPONSE]

- 1 EMERGENCY ROOM
- 2 DOCTOR
- 3 OVERNIGHT STAY IN A HOSPITAL
- 4 (VOL) NONE OF THE ABOVE / NOT INJURED
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

DEMOGRAPHIC QUESTIONS

Demographics

**SCREEN:** Now I'd like to ask you some questions about yourself and your household. The answers are used only for statistical purposes.

**ASK ALL**

**Q10.1** What is your age?

- \_\_\_ AGE IN YEARS [RANGE 18-98]
- 07 DON'T KNOW/NOT SURE
- 09 REFUSED

**ASK IF Q10.1 = 07 OR 09, ELSE SKIP TO Q10.3**

**Q10.2** We are only asking this information to make sure that we have talked to enough people in each age group. Can you just tell me if you are...?

READ ANSWER CHOICES:

- 1 65 or older
- 2 45-64
- 3 25-44, or
- 4 18-24
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**ASK ALL**

**Q10.3** Because it is sometimes difficult to determine over the phone, I am asked to confirm with everyone . . . Are you male or female?

- 1 MALE
- 2 FEMALE
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**ASK ALL**

**Q10.4** Are you Hispanic or Latino?

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

**ASK IF Q10.4 = 1, ELSE SKIP TO Q10.6**

**Q10.5** Please tell me which group best represents your Hispanic or Latino origin or ancestry:

READ ANSWER CHOICES, ACCEPT FIRST RESPONSE [CATI: RANDMONIZE: 01-04]

- 01 Puerto Rican
- 02 Cuban/Cuban-American
- 03 Dominican/Dominican-American
- 04 Mexican/Mexican-American
- 05 Central or South American
- 06 Other Latin American, or
- 07 Other Hispanic/Latino ?
- 09 [VOL] SPANISH
- 77 DON'T KNOW/NOT SURE
- 99 REFUSED

**ASK ALL**

**Q10.6** (READ IF Q10.4=1: Some people, aside from being Hispanic, also consider themselves to be a member of a racial group.) Which one or more of the following would you say is your race?

READ ANSWER CHOICES, MULTIPLE RESPONSE:

- 01 White
- 02 Black or African American
- 03 Asian
- 04 Native Hawaiian or Other Pacific Islander
- 05 American Indian, Alaska Native, or
- 08 Something else (SPECIFY) \_\_\_\_\_
- 77 DON'T KNOW/NOT SURE
- 99 REFUSED

**ASK IF MORE THAN ONE ANSWER TO Q10.6, ELSE SKIP TO Q10.8**

**Q10.7** Which one of these groups would you say best represents your race?

**CATI: FILL RACES FROM Q10.6**

READ MENTIONED RACES:

- 1 White
- 2 Black or African American
- 3 Asian
- 4 Native Hawaiian or Other Pacific Islander
- 5 American Indian, Alaska Native
- 8 Other named in Q10.6
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**ASK ALL**

**Q10.8** Were you born in the United States or in another country?

- 1 USA
- 2 OUTSIDE USA
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**ASK IF Q10.8 = 2, ELSE SKIP TO Q10.10**

**Q10.9** How long have you lived in this country?

- \_\_\_\_\_ YEARS [RANGE 0 - 50, ENTIRE LIFE = 50]
- 88 LESS THAN ONE YEAR
  - 777 DON'T KNOW/NOT SURE
  - 999 REFUSED

**ASK ALL**

**Q10.10** What language do you speak most often at home?

- 1 ENGLISH
- 2 SPANISH
- 3 RUSSIAN
- 4 CHINESE (INCLUDES MANDARIN & CANTONESE)
- 6 SOME OTHER LANGUAGE
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**ASK ALL**

**Q10.11** Are you. . .

READ ANSWER CHOICES:

- 1 Married
- 2 Divorced
- 3 Widowed
- 4 Separated
- 5 Never married, or
- 6 A member of an unmarried couple living together
- 7 DON'T KNOW/NOT SURE
- 9 REFUSED

**Q10.12 REMOVED 8/18**

**ASK ALL**

**Q10.13** What is the highest grade or year of school you completed?

READ IF NEEDED:

- 1 Never attended school or only attended kindergarten
- 2 Grades 1 through 8 (ELEMENTARY)
- 3 Grades 9 through 11 (SOME HIGH SCHOOL)
- 4 Grade 12 or GED (HIGH SCHOOL GRADUATE)
- 5 College 1 year to 3 years (SOME COLLEGE OR TECHNICAL SCHOOL)
- 6 College 4 years (COLLEGE GRADUATE), or a
- 7 Graduate or professional degree?
- 77 DON'T KNOW/NOT SURE
- 99 REFUSED

**Income**

Create new field NHOUSE = QHH (Number of adults) + Q10.14 (Number of Children)  
We will use NHOUSE to create a field (PVTYLV) to populate the fill for Q10.16  
PVTYLV = 7070 + (NHOUSE \* 3820) [UPDATED TO 2011 VALUES FOR WAVE 2]  
CATI: CREATE DUMMY VARIABLES FOR PVTY\*1 - PVTY\*6 IN DATA TO SHOW READ-INS USED

**ASK IF Q10.14 <> 77/99**

**READ SCREEN:** The next question is about your combined household income. [READ IF NHOUSE>1: By household income we mean the combined income from everyone living in the household including even roommates or those on disability income.]

**Q10.16** Is your household's annual income from all sources:

- 02 Less than \$ (PVTYLV\*2) IF "NO," ASK 05; IF "YES," ASK 01
- 01 Less than .  
IF "NO," CODE 02 (100-199%); IF "YES," CODE 01 (< 100%)
- 05 Less than \$ (PVTYLV\*5) IF "NO," ASK 06 (500-599%); IF "YES," ASK 04 (300-399%)
- 06 Less than \$ (PVTYLV\*6) IF "NO," CODE 07 (>600%); IF "YES," CODE 06 (500-599%)
- 04 Less than \$ (PVTYLV\*4) IF "NO," CODE 05; IF "YES," ASK 03 (200-299%)
- 07 \$ (PVTYLV\*6)
- 03 Less than \$ (PVTYLV\*3) IF "NO," CODE 04; IF "YES," CODE 03
- 77 DON'T KNOW/NOT SURE
- 99 REFUSED

**ASK IF Q10.16\_02 = 77 OR 99**

**Q10.16a** - Can you just tell me if your annual household income is less than \$ PVTYLV?

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

**TELEPHONE QUESTIONS (for weighting)**

**READ:** And now, because this is a telephone survey I need to ask you a few more questions about your telephone usage. These questions are only asked for statistical purposes.

**ASK ALL**

**Q12.1** Do you have more than one telephone number in your household? Do NOT include cell phones or numbers that are only used by a computer or fax machine.

INTERVIEWER NOTE: Cordless telephones should be counted as landline telephones.

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

**ASK ALL**

**Q12.2** During the past 12 months, has your household been without telephone service for 1 week or more? Do NOT include interruptions of telephone service because of weather or natural disasters.

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

**ASK ALL**

**Q12.3** Do you have a cell phone for personal use? Please include cell phones if they are used for any personal use.

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

**ASK IF Q12.3 = 2**

**Q12.4** Do you share a cell phone for personal use with other adults?

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

**ASK IF Q12.3=1 OR Q12.4=1**

**12.3b** Of all of the phone calls that you receive, are...(Read List)

- 1 all or almost all calls received on cell phones,
- 2 some received on cell phones and some received on land lines, or
- 3 very few or none on cell phones.
- 7 DON'T KNOW
- 9 REFUSED

**CLOSING**



Thank you for participating in this important research. I can provide you with phone numbers if you have questions about this survey or your rights in this study, want survey results, or if you want information about where to get help with a health problem.

Would you like any of these phone numbers?

- 1 YES
- 2 NO

**IF YES:** Which number would you like?

1 MORE INFORMATION ABOUT THE SURVEY OR SURVEY RESULTS-  
READ: You can call the principal investigator at 347-396-2807.

2 INFORMATION ABOUT PARTICIPANTS RIGHTS  
READ: You can call the Institutional Review Board Chairperson at 347-396-6051.

3 INFORMATION ABOUT A HEALTH PROBLEM NOT RELATED TO THE SURVEY  
READ: You can call the Health Department helpline at 311.

As I mentioned before, we would like to send ten dollars in appreciation for the time you have spent answering our questions.

So that we know where to send the check, could you please give me your name and mailing address? The information you provide will only be used to send you the payment. It will not be used for any other purposes, nor will it be available to the Department of Health.

COLLECT NAME AND ADDRESS

- QC.4a NAME (What is your name?) ENTER NAME
- QC.4b ADDRESS (What is your street address?) ENTER STREET ADDRESS
- QC.4c APPT (What is your apartment number?) ENTER APT # OR MORE ADDRESS
- QC.4d CITY (What is the city?) ENTER CITY
- QC.4e ZIP (What is your zip code?) ENTER ZIP CODE

Thank you again for completing the survey.

[INSERT DEVICE STUDY RECRUITMENT SCRIPT HERE.]

**CATI NOTE: FOR ANY COMPLETED PAT SURVEYS WHERE APPLICABLE CROSS-STREETS ARE DK/REF (7.7/7.11), WE WILL NEED TO RE-ASK THOSE FOR ANYONE WHO WANTS TO PARTICIPATE IN THE DEVICE STUDY. THIS WILL BE INSERTED INTO THE RECRUITMENT SCRIPT.**

## APPENDIX A

### Activity List for Common Leisure Activities

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#### Code Description (Physical Activity, Question 5.3)

1	Active Gaming Devices (Wii Fit, Dance Dance Revolution)	52	Table tennis / ping-pong
2	Aerobics	53	Tai Chi
3	Backpacking	54	Tennis
4	Badminton	55	Treadmill
5	Baseball	56	Volleyball
6	Basketball	57	Walking
7	Bicycling	58	Water aerobics
8	Boating (canoeing, rowing, sailing, kayaking, rafting)	59	Waterskiing
9	Bowling	60	Weight lifting
10	Boxing	61	Yoga
11	Calisthenics	62	Other (SPECIFY:_____)
12	Carpentry		
13	Dancing - ballet, modern, ethnic		
14	Elliptical/EFX		
15	Fishing		
16	Football		
17	Gardening (spading, weeding, digging, filling)		
18	Golf		
19	Gymnastics		
20	Handball		
21	Hiking		
22	Horseback riding		
23	Hockey (ice/field)		
24	Hunting		
25	Jogging		
26	Martial Arts (Judo/karate/Tae Kwon Do/Jujitsu)		
27	Mountain climbing		
28	Muscle Strengthening		
29	Paddleball		
30	Pilates		
31	Racquetball		
32	Rock Climbing		
33	Rope skipping		
63	Routine stretches/exercises		
34	Rowing machine exercise		
35	Rugby		
36	Running		
37	Scuba diving		
38	Skating - ice or roller		
39	Skate boarding		
40	Skiing, snow		
41	Sledding, tobogganing		
42	Snorkeling		
43	Snowshoeing		
44	Soccer		
45	Softball		
46	Spinning		
47	Squash		
48	Stair climbing/Stair master		
49	Stationary bike exercise		
50	Surfing		
51	Swimming		