

CHIS 2017 Adolescent Questionnaire Version 2.13 Korean Otcober 3, 2019

(Adolescent Respondents Ages 12-17)

Collaborating Agencies:

- UCLA Center for Health Policy Research
- California Department of Health Care Services
- California Department of Public Health

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TABLE OF CONTENTS

SECTION A: DEMOGRAPHICS PART I AND CIVIC ENGAGEMENT	
AgeGender	
School Attendance	
Name of School	
School Instability	
SECTION N: PERSONAL AND SCHOOL SAFETY	
SECTION B: HEALTH STATUS AND HEALTH CONDITIONS	
General HealthGeneral Health	
Missed School Days	
Asthma	
SECTION C: DIET, NUTRITION, AND FOOD ENVIRONMENT	
Dietary Intake	
Water Consumption	
SECTION D: PHYSICAL ACTIVITY	
Commute from School to Home	
Park Use	
Park and Neighborhood Safety	23
Social Cohesion	23
Sedentary Time	25
Sleep and Technology	25
SECTION E - Cigarette, Alcohol and Drug Use	27
Cigarette Use	27
E-Cigarette Use	27
Alcohol Use/Abuse	28
Marijuana Use	30
SECTION F: MENTAL HEALTH	33
K6 Mental Health Assessment	33
Repeated K6	34
SECTION G: SEXUAL BEHAVIORS	38
Birth Control Use	38
SECTION H: HEALTH CARE UTILIZATION AND ACCESS	42
Usual Source of Care	
Emergency Room Visits	
Visits to Medical Doctor	
Delays in Care	45
Dental Health	47

SECTION J: DEMOGRAPHIC INFORMATION PART II	48
Race/Ethnicity	48
Country of Birth	
Citizenship, Immigration Status, Years in the US	
Language Spoken at Home	56
SECTION K: SUICIDE IDEATION AND ATTEMPTS	
SECTION L: CIVIC ENGAGEMENT AND RESILIENCY	59
School Environment	
Pre-Exposure Prophylaxis	63
HIV Testing	
SECTION M: CLOSING	65
Follow Up and Close	

NOTE: Each question in the CHIS questionnaires (adult, child, and adolescent) has a unique, sequential question number by section that follows the administration of the survey. In addition, the variable name (in the CHIS data file) associated with a question, appears in a box beneath the question number. Please consult the CHIS 2017 Data Dictionaries for additional information on variables, the population universe answering a specific question, and data file content.

-7 REFUSED -8 DON'T KNOW

SECTION A: DEMOGRAPHICS PART I AND CIVIC ENGAGEMENT

'PN_QT2017_A1' [PN_TA1] - PROGRAMMING NOTE TA1 : SET TADATE = CURRENT DATE (YYYYMMDD)			
'QT2017_A1' [TA1] —			
What is your date of birth?			
본인의 생년월일은 무엇입니까?			
'TA1MON' [TA1MON] MONTH O 01 JANUARY O 02 FEBRUARY O 03 MARCH O 04 APRIL O 05 MAY O 06 JUNE O 07 JULY O 08 AUGUST O 09 SEPTEMBER O 10 OCTOBER O 11 NOVEMBER O 12 DECEMBER O -7 REFUSED O -8 DON'T KNOW			
'TA1DAY' [TA1DAY] DAY			
O -7 REFUSED O -8 DON'T KNOW			
'TA1YR' [TA1YR] YEAR			

CHIS 2017 Teen Questionnaire	Version 2.13	October 3, 2019
'PN_QT2017_A2' [PN_TA1A] -		
PROGRAMMING NOTE TA1A: IF TA1 = -7 OR -8 (REF/DK), CONTINUE WELSE GO TO TA3	VITH TA1A ;	
'QT2017_A2' [TA1A] –		
What month and year were you born?		
본인은 몇 년 몇 월에 출생했습니까?		
'TA1AMON' [TA1AMON] MONTH		
 01 JANUARY 02 FEBRUARY 03 MARCH 04 APRIL 05 MAY 06 JUNE 07 JULY 08 AUGUST 09 SEPTEMBER 10 OCTOBER 11 NOVEMBER 12 DECEMBER -7 REFUSED -8 DON'T KNOW 		
'TA1AYR' [TA1AYR] YEAR O -7 REFUSED O -8 DON'T KNOW		
'PN_QT2017_A3' [PN_TA2] - PROGRAMMING NOTE TA2 : IF TA1A = -7 OR -8 (REF/DK), CONTINUE ELSE GO TO TA3	WITH TA2 ;	
'QT2017_A3' [TA2] -		
How old are you?		
나이를(연세)를 말씀해 주시겠습니까?		
YEARS OF AGE [SR: 12-17] O -7 REFUSED O -8 DON'T KNOW		
'TEENAGE' [TEENAGE] - TEENAGE		
'POST_QT2017_A3' [POST_TA2] - POST-NOTE TA2: IF TA1 AND TA2 ARE NOT KNOWN, USE IF TEENAGE is less than 12 OR TEENAGE INELIGIBLE (IT)		ERVIEW AND CODE

'QT2017_A4' [TA3] -

Are you male or female?

이건 어느 분께나 드리게 되어 있는 성별에 관한 질문인데요. 남성분이십니까, 여성분이십니까?

- O 01 MALE
- O 02 FEMALE
- O -7 REFUSED

'QT2017_A5' [TA4] -

Did you attend school last week?

본인은 지난 주에 학교에 출석했습니까?

- O 01 YES
- O 02 NO
- O 03 ON VACATION
- O 04 HOME SCHOOLED
- -7 REFUSED
- O -8 DON'T KNOW

If = 1, goto 'QT2017_A7'

'QT2017_A6' [TA4C] -

Did you attend school during the last school year?

지난 학년도에 학교에 출석했습니까?

- O 01 YES
- O 02 NO
- O 03 HOME SCHOOLED LAST YEAR
- O -7 REFUSED
- O -8 DON'T KNOW

If = 2, -7, -8, goto 'SECTION B - HEALTH STATUS AND HEALTH CONDITIONS'

'QT2017_A7' [TA4B] -

What is the name of the school you go to or last attended?

본인이 현재 다니고 있거나 마지막으로 다녔던 학교의 이름은 무엇입니까?

[IF NEEDED, ASK: "Is that an elementary, middle, junior high, or high school?"]

[IF NEEDED, ASK: "그 학교는 초등학교, 중학교 또는 고등학교입니까?"]

[INTERVIEWER NOTE: RECORD VERBATIM]

'TEXT_NAM_TA4B' [TEXT_NAM_TA4B] - NAME OF SCHOOL_

- -7 RÉFUSED \bigcirc
- O -8 DON'T KNOW

'TA4BTYPE' [TA4BTYPE] -TYPE OF SCHOOL

- 00 TEEN NOT IN SCHOOL \mathbf{O}
- 0 01 ELEMENTARY
- O 02 INTERMEDIATE
- 03 JUNIOR HIGH 0
- 04 MIDDLE SCHOOL 0
- O 05 HIGH SCHOOL
- O 06 SENIOR HIGH SCHOOL
- 0 07 CONTINUATION
- 0 08 CHARTER SCHOOL
- 0 91 OTHER (SPECIFY: _
- -7 REFUSED O
- -8 DON'T KNOW

'QT2017 A8' [TA6] -

In the past 3 years, how many times did you change schools, not counting for graduation?

졸업을 제외하고, 지난 3년 간 본인은 몇 번이나 전학했습니까?

TIMES

-7 REFUSED 0

-8 DON'T KNOW \bigcirc

'PN_QT2017_A9' [PN_TA7] -

PROGRAM NOTE FOR TA7:

IF TA6 = 0, -7, OR -8 (ZERO/REF/DK) GO TO PN TN1;

ELSE CONTINUE WITH TA7

'QT2017_A9' [TA7] -

Why did you change schools?

왜 전학을 했습니까?

[CHECK ALL THAT APPLY]

02 SCHOOL CLOSED

03 DIDN'T LIKE OLD SCHOOL/TO ATTEND BETTER SCHOOL

04 GOT EXPELLED/GOT IN TROUBLE

05 PROBLEMS WITH TEACHER/PEERS

91 OTHER (SPECIFY:

-7 REFUSED

-8 DON'T KNOW

SECTION N: PERSONAL AND SCHOOL SAFETY

'PN_SECTION_N' [PN_SECTION_N] -	
PROGRAMMING NOTE SECTION N:	
IF TA4 = 1 (ATTENDED SCHOOL LAST WEEK) OR TA4C = 1 (ATTENDED SCHOOL LAST YEAR) THEN	
CONTINUE WITH TN1;	
ELSE GO TO TB1	

'QT2017_N1' [TN1] -

The next questions are about your relationships with people around your age.

I'll ask about threats and your safety. In the past 12 months, about how many times did someone about your age threaten to hurt you or threaten to beat you up?

다음 질문들은 비슷한 나이 또래의 사람들과 본인과의 관계에 대한 것입니다. 위협이나 본인의 안전에 관해 질문드리겠습니다.

지난 12개월 동안, 비슷한 나이의 사람들이 본인을 혼내 주겠다고 협박하거나 때리겠다고 협박했던 게 몇번이나 됩니까?

_____ TIMES_[HR: 0-365; SR: 0-20]
O -7 REFUSED
O -8 DON'T KNOW

'QT2017_N2' [TG2] -

In the past 12 months, how many times did YOU threaten to hurt someone or threaten _to beat HIM OR HER up?

지난 12 개월 동안, 본인이 누군가를 혼내 주겠다고 협박하거나 누군가를 때리겠다고 협박했던 게 몇 번이나 됩니까?

_____ TIMES_[HR: 0-365; SR: 0-20]
O -7 REFUSED
O -8 DON'T KNOW

'QT2017_N3' [TN2] -

In the past 12 months, how many times <u>on school grounds</u> have you been afraid of being beaten up? Would you say...

지난 12개월 동안, 학교 운동장에서 맞을까봐 두려워했던 적이 몇 번이나 있었습니까?

- O
 01 Never,

 O
 01 그런 적이 없었습니까

 O
 02 1 Time,

 O
 02 한 번 있었습니까

 O
 03 2 to 3 Times,

 O
 03 두 세번 있었습니까

 O
 04 Or 4 or More Times?
- O 04 아니면 네 번 혹은 그 이상 있었습니까?
- O -7 REFUSED
 O -8 DON'T KNOW

'QT2017_N4' [TN6] -

During the past 30 days, on how many days did you not go to school because you felt unsafe on your way to or from school?

지난 30일 동안, 학교에 가거나 집으로 오는 길에 안전하지 않다고 느꼈기 때문에 학교에 가지 않은 날이 며칠이나 됩니까?

____ DAYS

O -7 REFUSED

O -8 DON'T KNOW

'QT2017_N5' [TN7] -

During the past 30 days, on how many days did you not go to school because you felt unsafe there?

지난 30일 동안, 학교가 안전하지 않다고 느꼈기 때문에 학교에 가지 않은 날이 며칠이나 됩니까?

____ DAYS

• -7 REFUSED

O -8 DON'T KNOW

'QT2017_N6' [TE65] -

Do you feel safe at your school...

자신의 학교가 얼마나 안전한 것 같습니까? 다음 보기 중 선택해 주십시오.

- O 01 All of the time,
- O 01 항상 안전함
- O 02 Most of the time,
- O 02 대부분 안전함
- O 03 Some of the time, or
- O 03 가끔 안전함 혹은
- O 04 None of the time?
- O 04 전혀 안전하지 않음
- O -7 REFUSED
- O -8 DON'T KNOW

SECTION B: HEALTH STATUS AND HEALTH CONDITIONS

'QT2017_B1' [TB1] —
Now I'm going to ask about your health.
지금부터는 본인의 건강에 대해 질문을 드리겠습니다.
In general, would you say your health is excellent, very good, good, fair or poor?
전반적으로 본인의 건강 상태는 굉장히 좋습니까, 상당히 좋습니까, 좋은 편입니까? 그런대로 괜찮습니까, 아니면 좋지 않습니까?
 O 1 EXCELLENT O 2 VERY GOOD O 3 GOOD O 4 FAIR O 5 POOR -7 REFUSED -8 DON'T KNOW
'QT2017_B2' [TB2] –
About how tall are you without shoes?
신발을 벗고 키를 재면 얼마나 됩니까?
[IF NEEDED, SAY: "Your best guess is fine."] [IF NEEDED, SAY: "정확히 모르시면 비슷하게라도 말씀해 주시면 됩니다."]
FEET
INCHES
METERS
CENTIMETERS

'TB2FMT' [TB2FMT] -

- O 01 FEET, INCHES
- O 02 METERS, CENTIMETERS
- O -7 REFUSED
- O -8 DON'T KNOW

'QT2017_B3' [TB3] -

About how much do you weigh without shoes?

신발을 벗고 쟀을 때, 체중이 얼마나 됩니까?

	SAY: "Your best gu SAY: "정확히 모르시	- 말씀해 주시	면 됩니다."]
POUN	NDS [HR:50-450]		
KILO	GRAMS [HR: 20-220] -7 REFUSED -8 DON'T KNOW		

'PN_QT2017_B4' [PN_TB4] PROGRAMMING NOTE TB4 :
IF TA4 = 1 (ATTENDED SCHOOL LAST WEEK) OR 4 (HOME SCHOOLED), CONTINUE WITH TB4 ;
ELSE GO TO TB5

'QT2017_B4' [TB4] -

During the last four school weeks, how many days of school did you miss because of a health problem 지난 4주 동안, 건강 문제로 학교를 결석한 날이 며칠이나 됩니까?

[INTERVIEWER NOTE: INCLUDE HOME SCHOOLERS]

_____ DAYS_[HR: 0-20]

O -7 REFUSED
O -8 DON'T KNOW

'QT2017_B5' [TB5] -

Has a doctor ever told you or your parents that you have asthma?

본인에게 천식이 있다고 의사가 본인이나 부모님께 말한 적이 있습니까?

- O 01 YES
- O 02 NO
- -7 REFUSED
- O -8 DON'T KNOW

If = 2, -7, -8, goto 'QT2017_B21'

'QT2017_B6' [TB17] -

Do you still have asthma?

아직도 천식이 있습니까?

- O 01 YES
- O 02 NO
- -7 REFUSED
- O -8 DON'T KNOW

'QT2017_B7' [TB18] -

During the past 12 months, have you had an episode of asthma or an asthma attack?

지난 12개월 동안, 이따금씩 아니면 한 번이라도 천식 증세가 있었던 적이 있습니까?

- O 01 YES
- O 02 NO
- O -7 REFUSED
- O -8 DON'T KNOW

'PN QT2017 B8' [PN TB7] -

PROGRAMMING NOTE TB7:

IF TB17 = 2, -7, OR -8 (NO, REFUSED, OR DON'T KNOW) AND TB18 = 2, -7, OR -8 (NO, REFUSED, OR DON'T KNOW), GO TO TB6;

ELSE IF SAMPLED COUNTY IS NOT IMPERIAL COUNTY OR SCREENER SELF-REPORT COUNTY (OR ZIP CODE) IS NOT IMPERIAL COUNTY, THEN GO TO TB6;

ELSE CONTINUE WITH TB7

'QT2017_B8' [TB7] -

During the <u>past 12 months</u>, how often have you had asthma symptoms such as coughing, wheezing, shortness of breath, chest tightness, or phlegm? Would you say...

지난 12개월 동안, 기침, 목에서 휘휘 거리는 소리가 나거나, 숨가쁨, 흉부 압박감 및 가래 등의 천식 증상이 얼마나 자주 있었습니까? 다음 중에서 선택해 주십시오.

- O 01 Not at all,_
- O 01아무 증상도 없었습니까,
- O 02 Less than every month,_
- O 02매 달 한 번도 안됐습니까
- O 03 _Every month,_
- O 03 매달
- O 04 _Every week, or_
- O 04 매주, 아니면
- O 05 _Every day?
- O 05 매일 있었습니까?
- O -7_REFUSED
- O -8 _DON'T KNOW_

'QT2017_B9' [TB19] -

During the past 12 months, have you had to visit a hospital emergency room because of your asthma?

지난 12개월 동안, 본인의 천식 때문에 병원 응급실에 가야 했던 때가 있었습니까?

- O 01 YES
- O 02 NO
- O -7 REFUSED
- O -8 DON'T KNOW

If = 2, -7, -8, goto 'QT2017_B11'

'QT2017_B10' [TB31] -

Did you visit a hospital emergency room for your asthma because you were unable to see your doctor?

천식 증세로 본인의 주치의나 전문의를 볼 수 없었기 때문에 병원 응급실에 간 적이 있습니까?

[INTERVIEWER NOTE: ENTER 3 ONLY IF R VOLUNTEERS THAT HE/SHE DOESN'T HAVE A DOCTOR. DO NOT PROBE.]

- O 01 YES
- O 02 NO
- O 03 DOESN'T HAVE A DOCTOR
- -7 REFUSED
- O -8 DON'T KNOW

'PN_QT2017_B11' [PN_TF4A] - PN_TF4A

PROGRAMMING NOTE TF4A:

IF SAMPLED COUNTY IS NOT IMPERIAL COUNTY OR SCREENER SELF-REPORT COUNTY (OR ZIP CODE) IS NOT IMPERIAL COUNTY, THEN GO TO TB6;

'QT2017_B11' [TF4A] -

During the past 12 months, were you admitted to the hospital overnight or longer for your asthma?

지난 12개월 동안, 천식 때문에 하룻밤 이상 병원에 입원한 적이 있습니까?

- O 01 YES
- O 02 NO
- O -7 REFUSED
- O -8 DON'T KNOW

'QT2017_B12' [TB6] -

Are you now taking a daily medication to control your asthma that was prescribed or given to you by a doctor?

천식을 다스리기 위해 의사가 처방하거나 준 약을 현재 매일 복용하고 있습니까?

[IF NEEDED, SAY: "This includes both oral medicine and inhalers. This is different from inhalers used for quick relief."]

[IF NEEDED, SAY: "입으로 복용하는 약과 코로 들이 마시는 약을 둘 다 포함해서 말씀해 주십시오. 하지만, 즉각적인 효과를 보기 위해 사용하는 흡입제와는 다릅니다."]

- O 01 YES
- O 02 NO
- O -7 REFUSED
- O -8 DON'T KNOW

'PN QT2017 B13' [PN TB27] -

PROGRAMMING NOTE TB27:

IF TB17 = 1 (YES, STILL HAVE ASTHMA) OR TB18 = 1 (YES, EPISODE IN PAST 12 MONTHS) GO TO TB24; ELSE IF SAMPLED COUNTY IS NOT IMPERIAL COUNTY OR SCREENER SELF-REPORT COUNTY (OR ZIP CODE) IS NOT IMPERIAL COUNTY, THEN GO TO TB24;

ELSE CONTINUE WITH TB27

'QT2017_B13' [TB27] -

During the past 12 months, how often have you had asthma symptoms such as coughing, wheezing, shortness of breath, chest tightness, or phlegm? Would you say...

지난 12개월 동안, 기침, 씨근거림, 숨가쁨, 가슴 답답함 또는 가래와 같은 천식 증상이 얼마나 자주 발생했습니까? 다음 중 선택해 주십시오.

- O 01 Not at all,
- O 01전혀 발생하지 않았음
- O 02 Less than every month,
- O 02 몇 달에 한 번
- O 03 Every month,
- 03 매달
- O 04 Every week, or
- O 05 매주
- O 05 Every day?
- O 05 매일
- O -7 REFUSED
- O -8 DON'T KNOW

'QT2017 B14' [TB28] -

During the past 12 months, have you had to visit a hospital emergency room because of your asthma?

지난 12개월 동안, 본인의 천식 때문에병원 응급실에 간 적이 있습니까?

- O 01 YES
- O 02 NO
- O -7 REFUSED
- O -8 DON'T KNOW

If = 2, -7, -8, goto 'QT2017 B16'

'QT2017_B15' [TB34] -

Did you visit a hospital emergency room for your asthma because you were unable to see your doctor

천식 증세로 본인의 주치의나 전문의를 볼 수 없었기 때문에 응급실에 간 적이 있습니까?

[INTERVIEWER NOTE: ENTER 3 ONLY IF R VOLUNTEERS THAT HE/SHE DOESN'T HAVE A DOCTOR. DO NOT PROBE.]

- O 01 YES
- O 02 NO
- O 03 DOESN'T HAVE A DOCTOR
- O -7 REFUSED
- O -8 DON'T KNOW

'PN_QT2017_B16' [PN_TB29] - PN_TB29

PROGRAMMING NOTE TB29:

IF SAMPLED COUNTY IS NOT IMPERIAL COUNTY OR SCREENER SELF-REPORT COUNTY (OR ZIP CODE) IS NOT IMPERIAL COUNTY, THEN GO TO TB24;

'QT2017 B16' [TB29] -

During the past 12 months, were you admitted to the hospital overnight or longer for your asthma?

지난 12개월 동안, 천식 때문에 하룻밤 이상 병원에 입원한 적이 있습니까?

- O 01 YES
- O 02 NO
- O -7 REFUSED
- O -8 DON'T KNOW

'QT2017 B17' [TB24] -

During the past 12 months, how many days of school did you miss due to asthma?

지난 12개월 동안, 천식 때문에 학교에 결석한 날은 며칠이나 됩니까?

[INTERVIEWER NOTE: INCLUDE HOME SCHOOLERS]

_____ DAYS_[HR: 0-365]

- O 996 NOT GOING TO SCHOOL
- O -07 REFUSED
- O -08 DON'T KNOW

'QT2017_B18' [TB20] -

Have your doctors or other medical providers worked with you to develop a plan so that you know how to take care of your asthma?

의사나 다른 의료 제공자가 천식 관리 방법을 알려주기 위해 본인과 함께 천식 관리 계획을 세운 적이 있습니까?

- O 01 YES
- O 02 NO
- -7 REFUSED
- O -8 DON'T KNOW

If = 2, -7, -8, goto 'QT2017_B20'

'QT2017_B19' [TB32] -

Do you have a written or printed copy of this plan

이 천식 관리계획 사본을 가지고 있습니까?

[IF NEEDED, SAY: "This can be an electronic or hard copy."] [IF NEEDED, SAY: "컴퓨터 문서나 종이로 된 문서 모두 해당됩니다."]

- O 01 YES
- O 02 NO
- -7 REFUSED
- O -8 DON'T KNOW

'PN_QT2017_B20' [PN_TB33] - PN_TB33

PROGRAMMING NOTE TB33:

IF SAMPLED COUNTY IS NOT IMPERIAL COUNTY OR SCREENER SELF-REPORT COUNTY (OR ZIP CODE) IS NOT IMPERIAL COUNTY, THEN GO TO TB40;

'QT2017_B20' [TB33] -

How confident are you that you can control and manage your asthma? Would you say you are...

천식을 관리하는 데 얼마나 자신이 있습니까?

- O 01 Very confident,
- O 01매우 자신이 있다
- O 02 Somewhat confident,
- O 02 약간 자신이 있다
- O 03 Not too confident, or
- O 03별로 자신이 없다
- O 04 Not at all confident?
- O 04전혀 자신이 없다
- O -7 REFUSED
- O -8 DON'T KNOW

'PN_QT2017_B21' [PN_TB40] - PN_CA58

PROGRAMMING NOTE TB40:

IF TB5 = 1, THEN SKIP TO PN_TB42;

ELSE IF SAMPLED COUNTY IS IMPERIAL COUNTY OR SCREENER SELF-REPORT COUNTY (OR ZIP CODE) IS IMPERIAL COUNTY, THEN CONTINUE;

ELSE SKIP TO PN TB42;

'QT2017_B21' [TB40] -

During the past 12 months, have you had symptoms such as coughing, wheezing, shortness of breath, chest tightness, or phlegm when you DID NOT have a cold or respiratory infection?

지난 12개월 동안, 귀하는 감기에 걸리거나 또는 호흡기 감염이 없었는데도 기침, 쌕쌕거림, 숨가쁨, 가슴 뻐근함, 또는 가래와 같은 증상을 경험한 적이 있습니까?

- O 01 YES
- O 02 NO
- O -7 REFUSED
- O -8 DON'T KNOW

If = 2, -7, -8, goto 'QT2017_B23'

'QT2017_B22' [TB41] -

How often did you have those symptoms? Would you say...

이러한 증상들이 얼마나 자주 나타났습니까? 다음 중에서 선택하십시오.

- O 01 NOT AT ALL
- O 02 Once or twice in the past 12 months
- O 02 지난 12개월 동안 한두 번
- O 03 Every couple of months
- O 03 두 달에 한 번
- O 04 Every month, or
- O 04 매달 한 번
- O 05 Every week?
- O 05 매주 한 번
- O -7 REFUSED
- O -8 DON'T KNOW

'PN QT2017 B23' [PN TB42] - PN CA60

PROGRAMMING NOTE TB42:

IF SAMPLED COUNTY IS IMPERIAL COUNTY OR SCREENER SELF-REPORT COUNTY (OR ZIP CODE) IS IMPERIAL COUNTY, THEN CONTINUE;

ELSE SKIP TO NEXT SECTION;

'QT2017_B23' [TB42] -

During the past 12 months, have you been bothered by sneezing or a runny or blocked nose when you DID NOT have a cold or the flu?

지난 12개월 동안, 귀하는 감기에 걸리거나 호흡기 감염이 없었는데도 재채기, 콧물 또는 코막힘으로 고생한 적이 있습니까?

[IF R MENTIONS ALLERGY, CODED 'YES']

- O 01 YES
- O 02 NO
- O -7 REFUSED
- O -8 DON'T KNOW

If = 2, -7, -8, goto 'QT2017_B25'

'QT2017_B24' [TB43] -

How often did you have those symptoms? Would you say...

이러한 증상들이 얼마나 자주 나타났습니까? 다음 중에서 선택하십시오.

- O 01 NOT AT ALL
- O 02 Once or twice in the past 12 months
- O 02 지난 12개월 동안 한두 번
- O 03 Every couple of months
- O 03 두 달에 한 번
- O 04 Every month, or
- O 04 매달 한 번
- O 05 Every week?
- O 05 대주 한 번
- O -7 REFUSED
- O -8 DON'T KNOW

'QT2017_B25' [TB44] -

During the past 12 months, have you been bothered by watery, itchy, or burning eyes when you DID NOT have a cold or the flu?

지난 12개월 동안, 귀하는 감기에 걸리거나 호흡기 감염이 없었는데도 눈물이 나거나 눈이 가렵거나 매워서 고생한 적이 있습니까?

[IF R MENTIONS ALLERGY, CODED 'YES']

- O 01 YES
- O 02 NO
- O -7 REFUSED
- O -8 DON'T KNOW

If = 2, -7, -8, goto 'QT2017_B27'

'QT2017 B26' [TB45] -

How often did you have those symptoms? Would you say...

이러한 증상들이 얼마나 자주 나타났습니까? 다음 중에서 선택하십시오.

- O 01 NOT AT ALL
- O 02 Once or twice in the past 12 months
- O 02 지난 12개월 동안 한두 번
- O 03 Every couple of months
- O 03 두 달에 한 번
- O 04 Every month, or
- O 04 매달 한 번
- O 05 Every week?
- O 05 매주 한 번
- O -7 REFUSED
- O -8 DON'T KNOW

'QT2017_B27' [TB46] -

How concerned are you with the air quality? Would you say...

대기질에 대해 얼마나 걱정하십니까? 다음 중에서 선택하십시오.

- O 01 It is not a concern
- O 01 걱정하지 않음
- O 02 A moderate concern
- O 02 어느 정도 걱정함
- O 03 A significant concern
- O 03 매우 걱정함
- O -7 REFUSED
- O -8 DON'T KNOW

'QT2017_B28' [TB47] -

Please rate the air quality in your neighborhood? Would you say...

지금 사는 동네의 대기질을 평가해주십시오. 다음 중에서 선택하십시오.

- O 01 Excellent
- O 02 Very good
- O 03 Good
- O 04 Fair, or
- O 05 Poor
- -7 REFUSED
- O -8 DON'T KNOW

'QT2017_B29' [TB48] -

In the past 12 months, have you had an illness or symptoms that you think was caused by pollution in the air outdoors?

지난 12개월 동안, 귀하는 실외 공기 오염으로 야기된 것 같은 질병이나 증상을 경험한 적이 있습니까?

[IF NEEDED, SAY: Things like dust, smog, automobile exhaust, and chemicals can cause outdoor air pollution].

[IF NEEDED, SAY: 먼지, 스모그, 자동차 배기 가스, 화학물질과 같은 것들이 실외 공기 오염을 야기할 수 있습니다]

[NOTE: IF RESPONDENT HAD EXPERIENCE AN ILLNESS OR SYMPTOMS WITHIN THE PAST 12 MONTHS THAT WAS CAUSED BY SOMETHING IN THE AIR HE OR SHE ENCOUNTERED MORE THAN 12 MONTHS AGO, THEN CODE 'YES']

- O 01 YES
- O 02 NO
- O -7 REFUSED
- O -8 DON'T KNOW

'QT2017_B30' [TB49] -

The next questions are about the outdoor air quality and how it affects your activities.

Please think of the past 12 months. How many times did you reduce or change your outdoor activity levels because you thought the air quality was bad or was affecting how well you felt? Would you say...

다음 질문은 실외 공기 오염에 대한 것이며 그것이 귀하의 활동에 어떤 영향을 미치는지에 대해 묻습니다. 지난 12개월을 기준으로 답변해주십시오. 대기질이 나쁘거나 건강 상태에 영향을 미친다고 생각해서 실외 활동 수준을 줄이거나 바꾼 적이 몇 번 있었습니까? 다음 중에서 선택하십시오.

[IF NEEDED: For example, avoiding outdoor exercise or strenuous outdoor activity.] [IF NEEDED: 예를 들어, 실외 운동 또는 격렬한 실외 활동을 피했다.]

- O 01 None
- O 01 없음
- O 02 1 to 3 times,
- O 021-3번
- O 03 4 to 6 times, or
- O 03 4 6번
- O 04 More than 6 times?
- O 04 6번 초과
- -7 REFUSED
- O -8 DON'T KNOW

'QT2017_B31' [TB50] -

Information on air quality that may be distributed to help inform the public about air pollution levels. Have you ever heard or read about the air quality index or air quality alerts where you live?

오염 수준에 대해 대중에게 알리기 위한 하나의 방편으로 대기질에 대한 정보가 배포될 수 있습니다. 지금 사는 곳에서 대기질 지수 또는 대기질 경계경보에 대해 들어보거나 읽어 본 적이 있습니까?

- O 01 YES
- O 02 NO
- -7 REFUSED
- O -8 DON'T KNOW

If = 2, -7, -8, goto NEXT SECTION

'QT2017_B32' [TB51] -

Did you reduce or change your outdoor activity level based on the air quality index or air quality alerts?

대기질 지수 또는 대기질 경계경보에 입각하여 실외 활동 수준을 줄이거나 바꾸셨습니까?

- O 01 YES
- O 02 NO
- -7 REFUSED
- O -8 DON'T KNOW

SECTION C: DIET, NUTRITION, AND FOOD ENVIRONMENT

'QT2	017	C1'	[TE4]	_

Now, I'm going to ask about the foods you ate yesterday, including both meals and snacks.

Yesterday, how many servings of fruit, such as an apple or banana, did you eat?

지금부터는 어제 먹은 음식(주식과 간식을 모두 포함)에 대해 질문을 드리겠습니다.

본인은 어제 사과나 바나나 같은 과일을 몇 인분이나 먹었습니까?

[IF NEEDED, SAY: "A serving is whatever it means to you."] [IF NEEDED, SAY: "1인분의 양은 본인 생각대로 정하시면 됩니디	·."]
SERVINGS [HR: 0-20; SR: 0-9]	

'TE6' [TE6] -

0

[Yesterday,] how many servings of vegetables like green salad, green beans, or potatoes did you have? Do not include fried potatoes.

[어제,] 야채 샐러드, 초록색 깍지콩(그린빈)이나 감자 같은 채소를 몇 인분이나 먹었습니까? 감자 튀김은 포함시키지 마십시오

SERVINGS [HR: 0-20; SR: 0-4]
O -7 REFUSED
O -8 DON'T KNOW

-8 DON'T KNOW

'QT2017_C3' [TC28A] -

[Yesterday,] how many glasses or cans of soda that contain sugar, such as Coke, did you drink? Do not include diet soda.

[어제,] 본인은 콜라 등 설탕이 들어있는 소다, 즉 탄산 음료를 몇 잔 또는 몇 캔이나 마셨습니까? 다이어트 소다는 포함시키지 마십시오.

[IF NEEDED, SAY: "Do not include canned or bottled juices or teas."] [IF NEEDED SAY: "캔 또는 병에 들어 있는 주스나 차는 포함시키지 마십시오."]

____ GLASSES OR CANS
O -7 REFUSED

O -8 DON'T KNOW

[Yesterday,] how many glasses or cans of sweetened fruit drinks, sports, or energy drinks, did you drink?

[어제,] 본인은 가당 과일 음료, 스포츠 또는 에너지 음료를 몇 잔 또는 몇 캔이나 마셨습니까?

[IF NEEDED, SAY: "Such as lemonade, Gatorade, Snapple, or Red Bull."] [IF NEEDED, SAY: "레모네이드, 게토레이드, 스내플 또는 레드불 같은 음료."]

[DO NOT READ. FOR INTERVIEWER INFORMATION ONLY. THIS ALSO INCLUDES DRINKS SUCH AS: FRUIT JUICES OR DRINKS YOU MADE AT HOME AND ADDED SUGAR TO, KOOL-AID, TAMPICO, HAWAIIAN PUNCH, CRANBERRY COCKTAIL, HI-C, SNAPPLE, SUGAR CANE JUICE, AND VITAMIN WATER. DO NOT INCLUDE: 100% FRUIT JUICES OR SODA, YOGURT DRINKS, CARBONATED WATER, OR FRUIT-FLAVORED TEAS.]

 GLA	SSES	OR	CANS
\bigcirc	-7	REE	IISED

O -8 DON'T KNOW

'QT2017_C5' [TC53] -

Yesterday, how many glasses of water did you drink at school, home, and everywhere else? Count one cup as one glass and count one bottle of water as two glasses. Count only a few sips, like from a water fountain, as less than one glass. Your best guess is fine.

어제 하루 동안, 학교나 집, 기타 다른 곳에서 모두 몇 잔의 물을 마셨습니까? 한 컵의 물은 한 잔, 한 병의 물은 두 잔으로 계산해 주십시오. 식수대 등에서 몇 모금 마시는 것은 한 잔 미만으로 계산하십시오. 아주 정확하지 않아도 괜찮습니다.

[IF NEEDED SAY: "Include tap water, like from a sink, faucet, fountain, or pitcher, and bottled water like Aquafina®. Do not include flavored sweetened water.]

[IF NEEDED, SAY: "음료수대에서 나오는 수돗물이나 주전자에 담긴 물, 병물 등과 같은 음용수를 포함하십시오. 그러나 감미료가 첨가된 청량음료는 포함 하지 마십시오."]

____ Glasses

- O 99 LESS THAN 1 GLASS (eg, SIPS FROM A FOUNTAIN)
- O NONE
- O -7 REFUSED
- O -8 DON'T KNOW

SECTION D: PHYSICAL ACTIVITY

'PN QT2017 D1' [PN TD27] -

PROGRAMMING NOTE TD27:

IF TA4 = 4 OR TA4C = 3 (HOME SCHOOLED) OR TA4C = 2 (NO, NOT IN SCHOOL LAST YEAR), GO TO TE62; IF TA4 = 2 (NO, NOT IN SCHOOL LAST WEEK) OR 3 (ON VACATION), CONTINUE WITH TD27 AND DISPLAY "During the school year, on how many days during a typical week do";

ELSE CONTINUE WITH TD27 AND DISPLAY "How many days in the past week did"

'QT2017_D1' [TD27] -

{How many days in the past week did/During the school year, on how many days during a typical week do} you walk home from school?

{지난 주에 본인이 걸어서 학교에서 집으로 온 날이 / 이번 학년도 동안, 본인이 학교에서 집으로 걸어서 온 날이보통 한주에} 며칠이나 됩니까?

[INTERVIEWER NOTE: IF R SAYS CHILD BIKES OR SKATEBOARDS HOME, SAY, "I'll ask about those next."] [IF R SAYS CHILD BIKES OR SKATEBOARDS HOME, SAY, "그것들에 대해서는 다음에 질문 드리겠습니다."] [IF CHILD DOES NOT GO DIRECTLY HOME FROM SCHOOL, INCLUDE # OF DAYS WALKED, ETC. TO CHILDCARE, RELATIVE'S HOME, AFTER-SCHOOL PROGRAM, ETC.]

- O -7 REFUSED
- O -8 DON'T KNOW

'PN QT2017 D2' [PN TD30] -

PROGRAMMING NOTE TD30:

IF TA4 = 2 (NO, NOT IN SCHOOL LAST WEEK) OR 3 (ON VACATION), CONTINUE WITH TD30 AND DISPLAY "During the school year, on how many days during a typical week do";

ELSE CONTINUE WITH TD30 AND DISPLAY "How many days in the past week did"

'QT2017_D2' [TD30] -

{How many days in the past week did/During the school year, on how many days during a typical week do} you bicycle or skateboard home from school?

지난 주에 본인이 자전거 또는 스케이트보드를 타고 학교에서 집으로 온 날이 며칠이나 됩니까?

[INTERVIEWER NOTE: THIS INCLUDES KIDS WHO RIDE ROLLERBLADES, ROLLERSHOES, OR NON-MOTORIZED SCOOTERS HOME FROM SCHOOL.]

____ DAYS

• -7 REFUSED

O -8 DON'T KNOW

'QT2017_D3' [TE62] -

In the past 30 days, did you go to a park, playground, or open space?

지난 30일 동안, 공원이나 놀이터, 또는 공터에 간 적이 있습니까?

- O 01 YES
- O 02 NO
- O -7 REFUSED
- O -8 DON'T KNOW

Is there a park, playground, or open space within 30 minutes walking distance of your home?

집에서 걸어갈 수 있는 거리에 공원이나 놀이터나 공터가 있습니까?

- O 01 YES
- O 02 NO
- O -7 REFUSED
- O -8 DON'T KNOW

'QT2017_D5' [TE63] -

The last time you went to a park, playground or open space, were you physically active while you were there?

가장 최근 공원이나 운동장 또는 공터에 갔을 때, 그 곳에 있는 동안 활발하게 몸을 움직이는 신체 활동을 했습니까?

- O 01 YES
- O 02 NO
- O -7 REFUSED
- O -8 DON'T KNOW

'QT2017_D6' [TC25] -

Do you strongly agree, agree, disagree, or strongly disagree with the following statement?

제가 읽어드릴 문장에 대해, 전적으로 동의함, 동의함, 동의하지 않음, 전혀 동의하지 않음 중에서 하나를 선택해 주십시오.

The park or playground closest to where I live is safe during the day.

우리 집에서 가장 가까운 곳에 있는 공원이나 놀이터는 낮시간에 안전하다.

[IF NEEDED, SAY: "Do you strongly agree, agree, disagree, or strongly disagree?"] [IF NEEDED, SAY: "전적으로 동의, 동의, 동의하지 않음, 전혀 동의하지 않음 중에서 하나를 선택해 주십시오.]

- O 01 STRONGLY AGREE
- O 02 AGREE
- O 03 DISAGREE
- O 04 STRONGLY DISAGREE
- O -7 REFUSED
- O -8 DON'T KNOW

'QT2017_D7' [TC26] -

The park or playground closest to where I live is safe at night.

우리 집에서 가장 가까운 곳에 있는 공원이나 놀이터는 낮시간에 안전하다.제가 읽어드릴 문장에 대해,

[IF NEEDED, SAY: "Do you strongly agree, agree, disagree, or strongly disagree?"] [IF NEEDED, SAY: "전적으로 동의함, 동의함, 동의하지 않음, 전혀 동의하지 않음 중에서 하나를 선택해 주십시오."]

- O 01 STRONGLY AGREE
- O 02 AGREE
- O 03 DISAGREE
- O 04 STRONGLY DISAGREE
- -7 REFUSED
- O -8 DON'T KNOW

'QT2017_D8' [TD34] -

People in my neighborhood are willing to help each other.

우리 동네 사람들은 서로 돕고 지내고 싶어한다

[IF NEEDED, SAY: "Do you strongly agree, agree, disagree, or strongly disagree?"] [IF NEEDED, SAY: "전적으로 동의, 동의, 동의하지 않음, 전혀 동의하지 않음 중에서 하나를 선택해 주십시오.]

- O 01 STRONGLY AGREE
- O 02 AGREE
- O 03 DISAGREE
- O 04 STRONGLY DISAGREE
- O -7 REFUSED
- O -8 DON'T KNOW

'QT2017_D9' [TD45] -

People in this neighborhood generally do NOT get along with each other.

이 동네 사람들은 보통 서로 친하게 지내지 않는다.

[IF NEEDED, SAY: "Do you strongly agree, agree, disagree, or strongly disagree?"] [IF NEEDED, SAY: "전적으로 동의, 동의, 동의하지 않음, 전혀 동의하지 않음 중에서 하나를 선택해 주십시오.] [INTERVIEWER NOTE: DO NOT PROBE A "DON'T KNOW" RESPONSE]

- O 01 STRONGLY AGREE
- O 02 AGREE
- O 03 DISAGREE
- O 04 STRONGLY DISAGREE
- O -7 REFUSED
- O -8 DON'T KNOW

'QT2017_D10' [TD36] -

People in this neighborhood can be trusted.

이 동네 사람들은 믿을 수 있다.

[IF NEEDED, SAY: "Do you strongly agree, agree, disagree, or strongly disagree?"] [IF NEEDED, SAY: "전적으로 동의, 동의, 동의하지 않음, 전혀 동의하지 않음 중에서 하나를 선택해 주십시오.]

- O 01 STRONGLY AGREE
- O 02 AGREE
- O 03 DISAGREE
- O 04 STRONGLY DISAGREE
- -7 REFUSED
- O -8 DON'T KNOW

'QT2017_D11' [TD37] -

You can count on adults in this neighborhood to watch out that children are safe and don't get in trouble.

나는 이 동네 어른들이 아이들이 안전한지, 문제를 당하지 않는지 지켜봐 준다고 믿는다.

[IF NEEDED, SAY: "Do you strongly agree, agree, disagree, or strongly disagree?"] [IF NEEDED, SAY: "전적으로 동의, 동의, 동의하지 않음, 전혀 동의하지 않음 중에서 하나를 선택해 주십시오.]

- O 01 STRONGLY AGREE
- O 02 AGREE
- O 03 DISAGREE
- O 04 STRONGLY DISAGREE
- -7 REFUSED
- O -8 DON'T KNOW

'QT2017_D12' [TE64] -

Do you feel safe in your neighborhood...

귀하의 동네가 얼마나 안전하다고 느끼십니까? 다음중 선택해 주십시오

- O 01 All of the time.
- O 02 Most of the time,
- O 03 Some of the time, or
- O 04 None of the time?
- -7 REFUSED
- O -8 DON'T KNOW

'QT2017_D13' [TD39] -

The next questions are about the time you spend mostly sitting when you are not in school or doing homework.

다음 질문들은 본인이 학교에 있거나 숙제를 할 때를 제외하고, 주로 앉아서 보내는 시간에 대한 것입니다.

During the weekends, about how much time do you spend on a typical or usual weekend day sitting and watching TV, playing computer games, talking with friends or doing other sitting activities?

본인은 주말에 TV 시청. 컴퓨터 게임. 친구들과 이야기. 등을 하면서 앉아서 보내는 시간이 보통 몇시간 정도 됩니까?

HOUR	(S)
MINUT	TE(S)
O	-7 REFUSED
•	-8 DON'T KNOW

'QT2017 D14' [TD38] -

During the week days, about how much time do you spend on a typical or usual week day sitting and watching TV, playing computer games, talking with friends or doing other sitting activities?

본인은 주중에 TV 시청, 컴퓨터 게임, 친구들과 이야기, 등을 하면서 앉아서 보내는 시간이 보통 몇시간 정도 됩니까?

,	- 1 0, 11 1
HOUR	(S)
MINUT	E(S)
O	-7 REFUSED
O	-8 DON'T KNOW

'QT2017_D15' [TD40] -

During the past week,	on nights when v	ou had school the next day	y, what time did	you usually go to bed?

'QT2017_D16' [TD41] -

During the past week, on school days, what time did you usually get up?

지난 한 주 동안 귀하는 수업이 있는 날 아침에 보통 몇 시에 기상했습니까?

_____TIME(HR)
_____TIME(MIN)
_____(AM/PM)
O -7 REFUSED
O -8 DON'T KNOWN

'QT2017_D17' [TD43] -

Do you have rules in your home about when you are supposed to turn off or put away computers, phones or other electronics, such as during meal times or a specific time at night?

귀하의 집에는 예를 들어 식사 시간에 또는 밤에 특정한 시간이 되면 컴퓨터, 휴대폰 또는 기타 전자기기를 끄거나 손에서 내려 놓아야 하는 가정 규칙이 있습니까?

- O 01 YES
- O 02 NO
- -7 REFUSED
- O -8 DON'T KNOW

'QT2017 D18' [TD44] -

Did your doctor talk to you about your on-line technology use, such as social media use, gaming or other internet use?

귀하의 의사가 소셜 미디어 사용, 게임 또는 기타 인터넷 사용과 같은 온라인 기술 사용에 대하여 이야기해주었습니까?

- O 01 YES
- O 02 NO
- -7 REFUSED
- O -8 DON'T KNOW

SECTION E - Cigarette, Alcohol and Drug Use

'QT2017_E1' [TC38] -

Now I'm going to ask about smoking.

지금부터는 흡연에 관해 질문을 드리겠습니다.

Have you ever smoked cigarettes, even 1 or 2 puffs?

담배를 한두 모금이라도 피워 본 적이 있습니까?

- O 01 YES
- O 02 NO
- -7 REFUSED
- O -8 DON'T KNOW

If = 2, -7, -8, goto 'QT2017_E4'

'QT2017_E2' [TE19] -

In the past 30 days, on how many days did you smoke cigarettes?

지난 30일 동안 담배를 피운 날이 며칠이나 됩니까?

- O NONE
- O 01 1 OR 2 DAYS
- O 02 3-5 DAYS
- O 03 6-9 DAYS
- O 04 10-19 DAYS
- O 05 20-29 DAYS
- O 06 30 DAYS
- -7 REFUSED
- O -8 DON'T KNOW

If = 0, goto 'QT2017_E4'

'QT2017_E3' [TE20] -

In the past 30 days, when you smoked, about how many cigarettes did you smoke per day? 지난 30일 동안, 담배를 피운 날에는 하루에 대략 몇 대나 피웠습니까?

[IF NEEDED, SAY: "On average."] [IF NEEDED, SAY: "평균을 말합니다."]

[IF NEEDED, SAY: "On the days you smoked."] [IF NEEDED, SAY: "담배를 피운 날을 말합니다."]

[IF R SAYS "A Pack", CODE THIS AS 20 CIGARETTES]

- NUMBER OF CIGARETTES
 - O -7 REFUSED
 - O -8 DON'T KNOW

'QT2017_E4' [TE66] -

Have you ever smoked electronic cigarettes, also known as e-cigarettes or vaporizer cigarettes?

전자 담배, 그러니까 이(E)-시거렛이나 증기 담배를 한 번이라도 피워 본 적이 있습니까?

[INTERVIEWER NOTE: CODE 'YES' IF R MENTIONS VAPE OR VAPING.]

[IF NEEDED, SAY: "Electronic cigarettes are devices that mimic traditional cigarette smoking, but the battery operated device produces vapor instead of smoke. The solutions used in the device may contain nicotine and are usually flavored.]

[IF NEEDED, SAY: "전자 담배란 기존의 담배 피우는 행위를 흉내낼 수 있도록 만든 기기로, 건전지로 작동되면서 담배 연기 대신 증기가 나오게 하는 기구입니다. 이 기구에 사용되는 액체는 니코틴을 함유하고 있으며, 보통 향이나 맛이 첨가됩니다."]

- O 01 YES
- O 02 NO
- O -7 REFUSED
- O -8 DON'T KNOW

If = 2, -7, -8, goto 'QT2017_E7'

'QT2017_E5' [TE67] -

During the past 30 days, how many days did you use electronic cigarettes?

지난 30일 동안, 본인은 며칠이나 전자 담배를 사용했습니까?

____ NUMBER OF DAYS

If = 0, goto 'QT2017_E7'

- O -7 REFUSED
- O -8 DON'T KNOW

If = -7, -8, goto 'QT2017_E7'

'QT2017_E6' [TE68] -

What are your reasons for using electronic cigarettes?

본인이 전자 담배를 사용하는 이유는 무엇입니까?

[CODE ALL THAT APPLY]

- 01 QUIT SMOKING
 02 REPLACE SMOKING
 03 CUT DOWN OR REDUCE SMOKING
 04 USE IN PLACES WHERE SMOKING NOT IS NOT ALLOWED
- □ 05 CURIOSITY, JUST TRY IT
 □ 91 OTHER (SPECIFY: ______)
- □ -7 REFUSED
- □ -8 DON'T KNOW

```
'PN QT2017 E7' [PN TE22] -
PROGRAMMING NOTE TE22::
IF SC24X = 3 OR 5 (NO QUESTIONS ON DRUGS):
OR IF SC23XXX = 1 SKIP TO TG11
ELSE CONTINUE TO TE22
```

'QT2017 E7' [TE22] -

Did you ever have more than a few sips of any alcoholic drink, like beer, wine, mixed drinks, or liquor?

맥주, 와인, 칵테일이나 양주 같은 술 종류를 몇 모금 이상 마신 적이 한 번이라도 있습니까?

- O **01 YES**
- O 02 NO
- -7 REFUSED \bigcirc
- 0 -8 DON'T KNOW

If = 2, -7, -8, goto 'QT2017_E10'

```
'PN QT2017 E8' [PN TE24A] -
PROGRAMMING NOTE TE24A:
IF TA3 = 1 \text{ (MALE) GO TO TE24};
ELSE CONTINUE WITH TE24A
```

'QT2017_E8' [TE24A] -

How many days in the past 30 days did you have four or more drinks in a row, that is within a couple of hours?

지난 30일 동안 한 번에, 즉 두어 시간 내에 4잔 이상의 술을 마신 날은 며칠이나 됩니까?

- 0 00 NONE
- 01 1 DAY 0
- O 02 2 DAYS
- 0 03 3 - 5 DAYS
- O 04 6 - 9 DAYS
- O 05 10 - 19 DAYS
- \mathbf{O} 06 20 DAYS OR MORE
- -7 REFUSED \mathbf{O}
- -8 DON'T KNOW

'PN QT2017 E9' [PN TE24] -

PROGRAMMING NOTE TE24: IF TA3 = 2 (FEMALE), GO TO TE69;

ELSE CONTINUE WITH TE24

'QT2017_E9' [TE24] -

How many days in the past 30 days did you have five or more drinks in a row, that is within a couple of hours?

지난 30일 동안 한 번에, 즉 두어 시간 내에 5잔 이상의 술을 마신 날은 며칠이나 됩니까?

- 0 00 NONE
- 01 1 DAY 0
- 0 02 2 DAYS
- 0 03 3 - 5 DAYS
- 0 04 6 - 9 DAYS
- 0 05 10 - 19 DAYS
- \mathbf{O} 06 20 DAYS OR MORE
- O -7 REFUSED
- -8 DON'T KNOW

'QT2017_E10' [TE69] -

The next questions are about marijuana also called cannabis or weed, hashish, and other products containing THC. There are many methods for consuming these products, such as smoking, vaporizing, dabbing, eating, or drinking.

Version 2.13

Have you ever, even once, tried marijuana or hashish in any form?

다음 질문은 대마초나 위드, 대마수지로도 불리는 마리화나와, THC를 함유한 기타 제품에 대한 것입니다. 이러한 제품을 소비하는 방법으로는 연기를 피우기, 기화시키기, 바르기, 먹기, 또는 마시기 등 여러 가지가 있습니다. 마리화나나 대마수지를 한 번이라도 사용해보신 적이 있습니까?

[IF NEEDED: THC is the active ingredient in marijuana.]

[IF NEEDED: THC는 마리화나의 유효 성분입니다.]

- O 01 YES
- O 02 NO
- O -7 REFUSED
- O -8 DON'T KNOW

If = 2, -7, -8, goto NEXT SECTION

'QT2017_E11' [TE70] -

During the past 30 days, on how many days did you use marijuana, hashish, or another THC product?

지난 30일 동안, 마리화나, 대마수지, 또는 또 다른 THC 제품을 사용한 날이 며칠이었습니까?

- O 01 0 DAYS
- O 02 1-2 DAYS
- O 03 3-5 DAYS
- O 04 6-9 DAYS
- O 05 10-19 DAYS
- O 06 20-29 DAYS
- O 07 30 DAYS OR MORE
- O -7 REFUSED
- O -8 DON'T KNOW

If = 1, goto NEXT SECTION

'QT2017_E12' [TE71] -

How often have you used tobacco when you have also been using marijuana? Would you say...

담배와 마리화나를 동시에 사용한 적이 얼마나 자주 있었습니까? 다음 중에서 선택하십시오.

- O 01 Usually
- O 02 Sometimes
- O 03 Never
- O -7 REFUSED
- O -8 DON'T KNOW

During the past 30 days, how did you use marijuana? Did you...

Smoke it in a joint, bong, or pipe?

지난 30일 동안, 마리화나를 어떤 식으로 사용했습니까? 마리화나를 조인트, 봉, 또는 파이프로 흡연을 했습니까?

- O 01 YES
- O 02 NO
- O -7 REFUSED
- O -8 DON'T KNOW

'QT2017_E14' [TE78] - During the past 30 days, how did you use marijuana? Did you...

Smoke part or all of a cigar with marijuana in it, which is sometimes called a blunt?

지난 30일 동안, 마리화나를 어떤 식으로 사용했습니까? 시가의 속을 마리화나로 채운 일명 '블런트'를 일부 혹은 전부 흡연했습니까?

- O 01 YES
- O 02 NO
- O -7 REFUSED
- O -8 DON'T KNOW

'QT2017_E15' [TE73] -

[During the past 30 days, how did you use marijuana?] Did you...

Eat it?

[지난 30일 동안, 마리화나를 어떤 식으로 사용했습니까?] 먹었습니까?

[IF NEEDED SAY: For example, in brownies, cakes, cookies or candy] [IF NEEDED SAY: 예를 들어, 브라우니, 케이크, 쿠키 또는 캔디에 넣어 먹었다]

- O 01 YES
- O 02 NO
- O -7 REFUSED
- O -8 DON'T KNOW

'QT2017_E16' [TE74] -

[During the past 30 days, how did you use marijuana?] Did you...

Drink it?

지난 30일 동안, 마리화나를 어떤 식으로 사용했습니까?] 마셨습니까?

[IF NEEDED SAY: For example, in tea, cola, alcohol or other drinks] [IF NEEDED SAY: 예를 들어, 차, 콜라, 알코올 또는 기타 음료에 넣어 마셨다]

- O 01 YES
- O 02 NO
- -7 REFUSED
- O -8 DON'T KNOW

[During the past 30 days, how did you use marijuana?] Did you...

Vaporize it?

[지난 30일 동안, 마리화나를 어떤 식으로 사용했습니까?] 기화시켰습니까?

[IF NEEDED SAY: For example, in an e-cigarette type vaporizer] [IF NEEDED SAY: 예를 들어, 전자담배형 기화기를 이용했다]

- O 01 YES
- O 02 NO
- O -7 REFUSED
- O -8 DON'T KNOW

'QT2017_E18' [TE76] -

[During the past 30 days, how did you use marijuana?] Did you...

Dab it?

[지난 30일 동안, 마리화나를 어떤 식으로 사용했습니까?] 몸에 발랐습니까?

[IF NEEDED SAY: For example, using butane hash oil, wax or concentrates]
[IF NEEDED SAY: 예를 들어, 부탄 해시 오일, 왁스 또는 농축액을 사용해서 발랐다]

- O 01 YES
- O 02 NO
- O -7 REFUSED
- O -8 DON'T KNOW

'QT2017_E19' [TE77] -

[During the past 30 days, how did you use marijuana?] Did you...

Use it some other way?

[지난 30일 동안, 마리화나를 어떤 식으로 사용했습니까?] 다른 방법으로 사용했습니까?

- O 01 YES (SPECIFY____)
- O 02 NO
- O -7 REFUSED
- O -8 DON'T KNOW

SECTION F: MENTAL HEALTH

'QT2017_F1' [TG11] -

The next questions are about how you have been feeling during the past 30 days.

다음의 질문들은 지난 30일 동안 귀하가 가졌던 느낌에 대한 것입니다.

About how often during the past 30 days did you feel nervous—Would you say all of the time, most of the time, some of the time, a little of the time, or none of the time?

다음의 질문들은 지난 30일 동안의 본인의 느낌에 관한 것입니다. 본인은 지난 30일 동안 대략 얼마나 자주 신경이 예민하다고 느꼈습니까? 항상 느꼈음, 대부분 느꼈음, 다소느꼈음, 거의 느끼지 않았음, 전혀 느끼지 않았음 중에서 선택해 주십시오.

- **O** 01 ALL
- O 02 MOST
- O 03 SOME
- O 04 A LITTLE
- O 05 NONE
- O -7 REFUSED
- O -8 DON'T KNOW

'QT2017 F2' [TG12] -

During the past 30 days, about how often did you feel hopeless—all of the time, most of the time, some of the time, a little of the time, or none of the time?

지난 30일 동안 대략 얼마나 자주 절망적이라고 느꼈습니까? 항상 느꼈음, 대부분 느꼈음, 다소 느꼈음, 거의 느끼지 않았음, 전혀 느끼지 않았음 중에서 선택해 주십시오.

- **O** 01 ALL
- O 02 MOST
- O 03 SOME
- O 04 A LITTLE
- O 05 NONE
- O -7 REFUSED
- O -8 DON'T KNOW

'QT2017 F3' [TG13] -

During the past 30 days, about how often did you feel restless or fidgety?

지난 30일 동안 대략 얼마나 자주 불안감이나 조바심을 느꼈습니까?

[IF NEEDED, SAY: "All of the time, most of the time, some of the time, a little of the time, or none of the time?"]

[IF NEEDED, SAY: "항상 느꼈음, 대부분 느꼈음, 다소 느꼈음, 거의 느끼지 않았음, 전혀 느끼지 않았음 중에서 선택하십시오."]

- **O** 01 ALL
- O 02 MOST
- O 03 SOME
- O 04 A LITTLE
- O 05 NONE
- O -7 REFUSED
- O -8 DON'T KNOW

'QT2017_F4' [TG14] -

How often did you feel so depressed that nothing could cheer you up?

그 어떤 것도 기분을 좋게 만들 수 없을 정도의 우울함을 얼마나 자주 느꼈습니까?

[IF NEEDED, SAY: "All of the time, most of the time, some of the time, a little of the time, or none of the time?"]

[IF NEEDED, SAY: "항상 느꼈음, 대부분 느꼈음, 다소 느꼈음, 거의 느끼지 않았음, 전혀 느끼지 않았음 중에서 선택하십시오."]

- O 01 ALL
- O 02 MOST
- O 03 SOME
- O 04 A LITTLE
- O 05 NONE
- -7 REFUSED
- O -8 DON'T KNOW

'QT2017_F5' [TG15] -

During the past 30 days, about how often did you feel that everything was an effort?

지난 30일 동안 대략 얼마나 자주 모든 것이 다 힘들다고 느꼈습니까?

[IF NEEDED, SAY: "All of the time, most of the time, some of the time, a little of the time, or none of the time?"]

[IF NEEDED, SAY: "항상 느꼈음, 대부분 느꼈음, 다소 느꼈음, 거의 느끼지 않았음, 전혀 느끼지 않았음 중에서 선택하십시오."]

- O 01 ALL
- O 02 MOST
- O 03 SOME
- O 04 A LITTLE
- O 05 NONE
- -7 REFUSED
- O -8 DON'T KNOW

'QT2017 F6' [TG16] -

During the past 30 days, about how often did you feel worthless?

지난 30일 동안 자신이 쓸모 없는 사람이라고 대략 얼마나 자주 느꼈습니까?

[IF NEEDED, SAY: "All of the time, most of the time, some of the time, a little of the time, or none of the time?"]

[IF NEEDED, SAY: "항상 느꼈음, 대부분 느꼈음, 다소 느꼈음, 거의 느끼지 않았음, 전혀 느끼지 않았음 중에서 선택하십시오."]

- O 01 ALL
- O 02 MOST
- O 03 SOME
- O 04 A LITTLE
- O 05 NONE
- -7 REFUSED
- O -8 DON'T KNOW

'QT2017_F7' [TF30] -

Was there ever a month in the past 12 months when these feelings occurred more often than they did in the past 30 days?

지난 12개월 동안, 이러한 느낌이 지난 30일간보다 더 자주 발생했던 달이 있었습니까?

- O 01 YES
- O 02 NO
- -7 REFUSED
- O -8 DON'T KNOW

If = 2, -7, -8, goto 'TI11'

'PN_T31' [PN_T31] PROGRAMMING NOTE TF31 :
IF TF30 = 1 THEN CONTINUE WITH T31 ;
ELSE SKIP TO TI11

'QT2017_F8' [TF31] -

The next questions are about the one month in the past 12 months when you were at your worst emotionally.

다음의 질문들은 지난 12개월 동안 정서적으로 최악의 상태였던 한 달 간에 대한 것입니다.

During that same month, how often did you feel nervous- all of the time, most, some, a little, or none of the time?

그 한 달 동안에 얼마나 자주 신경과민을 느꼈습니까? 항상 느꼈음, 대부분 느꼈음, 다소 느꼈음, 거의 느끼지 않았음, 전혀 느끼지 않았음 중에서 선택하십시오.

- O 01 ALL
- O 02 MOST
- O 03 SOME
- O 04 A LITTLE
- O 05 NONE
- O -7 REFUSED
- O -8 DON'T KNOW

'QT2017_F9' [TF32] -

During that same month, how often did you feel hopeless- all of the time, most, some, a little, or none of the time?

그 한 달 동안에 얼마나 자주 절망감을 느꼈습니까? 항상 느꼈음, 대부분 느꼈음, 다소 느꼈음, 거의 느끼지 않았음, 전혀느끼지 않았음 중에서 선택하십시오.

- **O** 01 ALL
- O 02 MOST
- O 03 SOME
- O 04 A LITTLE
- O 05 NONE
- O -7 REFUSED
- O -8 DON'T KNOW

How often did you feel restless or fidgety?

얼마나 자주 불안감 또는 조바심을 느꼈습니까?

[IF NEEDED, SAY: "All of the time, most of the time, some of the time, little of the time, or none of the time?"] [IF NEEDED, SAY: "항상 느꼈음, 대부분 느꼈음, 다소 느꼈음, 거의 느끼지 않았음, 전혀 느끼지 않았음 중에서 선택하십시오."]

- O 01 ALL
- O 02 MOST
- O 03 SOME
- O 04 A LITTLE
- O 05 NONE
- O -7 REFUSED
- O -8 DON'T KNOW

'QT2017_F11' [TF34] -

How often did you feel so depressed that nothing could cheer you up?

얼마나 자주 회복할 수 없을 정도의 우울함을 느꼈습니까?

[IF NEEDED, SAY: "All of the time, most of the time, some of the time, a little of the time, or none of the time?"]

[IF NEEDED, SAY: "항상 느꼈음, 대부분 느꼈음, 다소 느꼈음, 거의 느끼지 않았음, 전혀 느끼지 않았음 중에서 선택하십시오."]

- O 01 ALL
- O 02 MOST
- O 03 SOME
- O 04 A LITTLE
- O 05 NONE
- O -7 REFUSED
- O -8 DON'T KNOW

'QT2017_F12' [TF35] -

How often did you feel that everything was an effort?

얼마나 자주 모든 것이 힘들다고 느꼈습니까?

[IF NEEDED, SAY: "All of the time, most of the time, some of the time, a little of the time, or none of the time?"]

[IF NEEDED, SAY: "항상 느꼈음, 대부분 느꼈음, 다소 느꼈음, 거의 느끼지 않았음, 전혀 느끼지 않았음 중에서 선택하십시오."]

- **O** 01 ALL
- O 02 MOST
- O 03 SOME
- O 04 A LITTLE
- O 05 NONE
- O -7 REFUSED
- O -8 DON'T KNOW

How often did you feel worthless?

지난 30일 동안 자신이 쓸모 없는 사람이라고 대략 얼마나 자주 느꼈습니까?

[IF NEEDED, SAY: "All of the time, most of the time, some of the time, a little of the time, or none of the time?"]

[IF NEEDED, SAY: "항상 느꼈음, 대부분 느꼈음, 다소 느꼈음, 거의 느끼지 않았음, 전혀 느끼지 않았음 중에서 선택하십시오."]

- O 01 ALL
- O 02 MOST
- O 03 SOME
- O 04 A LITTLE
- O 05 NONE
- -7 REFUSED
- O -8 DON'T KNOW

'TI11' [TI11] -

In the past 12 months did you think you needed help for emotional or mental health problems, such as feeling sad, anxious, or nervous?

지난 12개월 동안, 슬픔, 불안, 신경과민 같은 정서 또는 정신건강 문제에 대해 도움을 받을 필요가 있다고 생각한 적이 있습니까?

- O 01 YES
- O 02 NO
- -7 REFUSED
- O -8 DON'T KNOW

'TF11' [TF11] -

In the past 12 months, have you received any psychological or emotional counseling?

지난 12개월 동안 정신이나 심리 문제로 상담을 받은 적이 있습니까?

- O 01 YES
- O 02 NO
- -7 REFUSED
- O -8 DON'T KNOW

'PN_QT2017_F13' [PN_TI13] -

PROGRAMMING NOTE TI13:

IF TE22 = 1 (MORE THAN SIP OF ALCOHOL) OR TE69 =1 (EVER USED MARIJUANA) CONTINUE WITH TI13 ; ELSE GO TO TE32

'QT2017 F13' [TI13] - In the past 12 months, did you receive any professional help for your use of alcohol or drugs?

지난 12개월 동안, 본인은 음주 또는 약물 사용에 대해 전문가의 도움을 받은 적이 있습니까?

- O 01 YES
- O 02 NO
- -7 REFUSED
- O -8 DON'T KNOW

SECTION G: SEXUAL BEHAVIORS

'PN_QT2017_G1' [PN_TE32] -	
PROGRAMMING NOTE TE32:	
IF SC23XXX =2 , GO TO TF1 ;	
ELSE CONTINUE WITH TE32	

'QT2017_G1' [TE32] -

The next section is about sexual behavior. The information will be kept private and you can refuse to answer.

다음은 성적 행동에 대한 질문입니다. 답변 내용은 철저히 비밀로 보호되며, 원하시지 않는 경우 답하지 않으셔도 됩니다.

Have you ever had sexual intercourse?

성경험이 있습니까?

[IF NEEDED, SAY: "By sexual intercourse, we mean sex with a penis in a vagina or an anus or rectum."] [IF NEEDED SAY: "성교란 남성의 성기를 질, 항문 또는 직장에 삽입하는 것을 말합니다."]

- O 01 YES
- O 02 NO
- -7 REFUSED
- O -8 DON'T KNOW

'PN_QT2017_G2' [PN_TG17] PROGRAMMING NOTE TG17:
IF SC23XXX =2 GO TO TF1 ,
IF AGE < 15 YEARS GO TO TF1;
ELSE IF MALE THEN GO TO TG21;
ELSE CONTINUE WITH TG17

'QT2017_G2' [TG17] -

Which of the following statements best describes your pregnancy plans? Would you say...

귀하의 임신 계획을 가장 잘 설명한 문장은 다음 중 어느 것입니까? 다음 중에서 선택하십시오.

- O 01 You do not plan to get pregnant within the next 12 months,
- O 01 향후 12개월 내에 임신할 계획이 없습니다,
- O 02 You are not sexually active
- O 02 성행위를 하지 않습니다
- O 03 You are planning to get pregnant within the next 12 months, or
- O 03 향후 12개월 내에 임신할 계획입니다
- O 04 You are currently pregnant?
- O 04 현재 임신 중입니다
- O -7 REFUSED
- O -8 DON'T KNOW

'PN_QT2017_G3' [PN_TG18] PROGRAMMING NOTE TG18:
IF TE32 = 2 (NOT SEXUALLY ACTIVE) or TG17=2,4, THEN GO TO TG21;
ELSE CONTINUE WITH TG18

'QT2017_G3' [TG18] -

Are you or your male sex partner currently using a birth control method to prevent pregnancy?

본인께서나, 아니면 상대방 남자분께서 임신을 예방하기 위해 피임을하시나요? 여기엔 남성 또는 여성 불임 수술도 포함됩니다.

- O 01 YES
- O 02 NO
- O 03 NO MALE SEXUAL PARTNER
- O -7 REFUSED
- O -8 DON'T KNOW

If = 2, 3, -7, -8, goto 'QT2017 G6'

'QT2017_G4' [TG19] -

Which birth control method or methods are you using?

귀하께서는 어떤 방법으로 피임을 하십니까?

[CODE ALL THAT APPLY] [PROBE: "Any others?"]

[PROBE: "그 밖의 다른 방법은 없으십니까?"]

- O 03 IUD (MIRENA, PARAGARD)
- O 04 IMPLANT (IMPLANON, NEXPLANON)
- O 05 BIRTH CONTROL PILLS
- O 06 OTHER HORMONAL METHODS (INJECTION/DEPO-PROVERA, PATCH, VAGINAL RING/NUVA RING)
- O 07 CONDOMS (MALE)
- O 91 OTHER (SPÈCIFY: _____
- -7 REFUSED
- -8 DON'T KNOW

If = 3, 4, 5, 6, 7, 91, -7, -8, goto 'QT2017_G6'

'QT2017_G5' [TG20] -

What is the MAIN reason you are NOT currently using birth control?

귀하가 현재 피임을 하지 않는 주된 이유는 무엇입니까?

- O 01 TRYING TO GET PREGNANT/WANT A BABY
- O 02 HAVEN'T FOUND A METHOD I LIKE
- O 03 COST
- O 04 HAVEN'T HAD TIME TO GO IN FOR BIRTH CONTROL
- O 05 NO TRANSPORTATION
- O 06 DON'T KNOW WHERE TO GET IT
- O 07 DON'T BELIEVE IN BIRTH CONTROL
- O 08 WORRIED ABOUT SIDE EFFECTS AND/OR HEALTH RISKS
- O 09 PARTNER WON'T LET ME
- O 91 OTHER (SPECIFY: ______
- -7 REFUSED
- O -8 DON'T KNOW

'PN_QT2017_G6' [PN_TG21] PROGRAMMING NOTE TG21:
IF 15≤ AGE ≤ 17, THEN CONTINUE WITH TG21;
ELSE SKIP TO SECTION H;

'QT2017_G6' [TG21] -

During the past 12 months, did you receive counseling or information about male or female birth control from a doctor or medical provider?

지난 12개월 동안, 귀하는 의사나 외료 제공자로부터 남성 또는 여성의 피임에 대한 상담을 받았거나 정보를 얻은 적이 있습니까?

- O 01 YES
- O 02 NO
- -7 REFUSED
- O -8 DON'T KNOW

'PN QT2017 G7' [PN TG22] -

PROGRAMMING NOTE TG22: IF MALE AND 15 \leq AGE \leq 17 AND TE32 = 1 (SEXUALLY ACTIVE) THEN CONTINUE WITH TG22;

ELSE SKIP TO NEXT SECTION

'QT2017_G7' [TG22] -

Are you or your female sex partner currently using a birth control method to prevent pregnancy?

본인께서나, 아니면 상대방 남자분께서임신을 예방하기 위해 피임을 하시나요?

- O 01 YES
- O 02 NO
- O 03 NO FEMALE SEXUAL PARTNER
- O -7 REFUSED
- O -8 DON'T KNOW

If = 2, goto 'QT2017_G9' If = 3, -7, -8, goto SECTION H

'QT2017_G8' [TG23] -

Which birth control method or methods are you using?

귀하께서는 어떤 방법으로 피임을 하십니까?

[CODE ALL THAT APPLY] [PROBE: "Any others?"]

[PROBE: "그 밖의 다른 방법은 없으십니까?"]

- O 03 IUD (MIRENA, PARAGARD)
- O 04 IMPLANT (IMPLANON, NEXPLANON)
- O 05 BIRTH CONTROL PILLS
- O 06 OTHER HORMONAL METHODS (INJECTION/DEPO-PROVERA, PATCH, VAGINAL RING/NUVA RING)
- O 07 CONDOMS (MALE)
- O 91 OTHER (SPECIFY: ______
- -7 REFUSED
- O -8 DON'T KNOW

If = 3, 4, 5, 6, 7, 91, -7, -8, goto SECTION H

What is the MAIN reason you are NOT currently using birth control?

귀하가 현재 피임을 하지 않는 주된 이유는 무엇입니까?

- O 01 TRYING TO GET PREGNANT/WANT A BABY
- \mathbf{O} 02 HAVEN'T FOUND A METHOD I LIKE
- 0 03 COST
- 04 HAVEN'T HAD TIME TO GO IN FOR BIRTH CONTROL O
- 0 05 NO TRANSPORTATION
- 06 DON'T KNOW WHERE TO GET IT \mathbf{O}
- O 07 DON'T BELIEVE IN BIRTH CONTROL
- 0 08 WORRIED ABOUT SIDE EFFECTS AND/OR HEALTH RISKS
- 09 PARTNER WON'T LET ME
- O 91 OTHER (SPECIFY: _
- -7 REFUSED \mathbf{o}
- -8 DON'T KNOW

SECTION H: HEALTH CARE UTILIZATION AND ACCESS

'QT2017_H1' [TF1] -

Now I'm going to ask about health care visits.

지금부터는 의료기관 방문에 관해 질문을 드리겠습니다.

Is there a place that you usually go to when you are sick or need advice about your health?

본인이 아프거나 건강에 관한 조언이 필요할 때 보통 방문하는 곳이 있습니까?

[IF R VOLUNTEERS MORE THAN ONE PLACE, ENTER 5.]

- O 01 YES
- O 02 NO
- O 03 DOCTOR/MY DOCTOR
- O 04 KAISER
- O 05 MORE THAN ONE PLACE
- -7 REFUSED
- O -8 DON'T KNOW

If = 2, -7, -8, goto 'PN_QT2017_H3'

'PN_QT2017_H2' [PN_TF2] PROGRAMMING NOTE TF2: IF TF1 = 4 (KAISER), FILL IN TF2 = 1 AND GO TO TF3;

ELSE IF TF1 = 3 (DOCTOR/MY DOCTOR), DISPLAY "Is your doctor in a private";

ELSE DISPLAY "What kind of place do you go to most often—a medical...".

'QT2017_H2' [TF2] -

{What kind of place do you go to most often -- a medical.../Is your doctor in a private...} doctor's office, a clinic or hospital clinic, an emergency room, or some other place?

{본인이 가장 자주 가는 곳은/본인의 주치의가 있는 곳은} 개인 닥터 오피스, 클리닉이나 종합병원, 응급실, 또는 기타다른 곳 중 어디입니까?

- O 01 DOCTOR'S OFFICE/KAISER/OTHER HMO
- O 02 CLINIC/HEALTH CENTER/HOSPITAL CLINIC
- O 03 EMERGENCY ROOM
- O 91 SOME OTHER PLACE (SPECIFY: ______
- O 94 NO ONE PLACE
- O -7 REFUSED
- O -8 DON'T KNOW

'PN QT2017 H3' [PN TF3] -

PROGRAMMING NOTE TF3:

IF TB19=1 OR TB28=1 (ER VISIT DUE TO ASTHMA-IMPERIAL COUNTY), MARK 'YES=1' ON TF3 AND GO TO TF16;

Version 2.13

ELSE CONTINUE WITH TF3

'QT2017_H3' [TF3] -

During the past 12 months, did you visit a hospital emergency room for your own health?

지난 12개월 동안, 자신의 건강 때문에 응급실에 간 적이 있습니까?

- O 01 YES
- O 02 NO
- -7 REFUSED
- O -8 DON'T KNOW

'QT2017_H4' [TF16] -

During the past 12 months, how many times have you seen a medical doctor?

지난 12개월 동안, 몇 번이나 의사의 진료를 받았습니까?

_____ TIMES [HR: 0-365]

- O -7 REFUSED
- O -8 DON'T KNOW

'QT2017 H5' [TF5] -

When was the last time you saw a doctor for a physical exam or check-up?

가장 최근에 신체 검사 또는 건강 검진을 받기 위해 의사를 만난 것은 언제였습니까?

- O 01 3 MONTHS AGO OR LESS
- O 02 MORE THAN 3 MONTHS UP TO 6 MONTHS AGO
- O 03 MORE THAN 6 MONTHS UP TO 12 MONTHS AGO
- O 04 MORE THAN 12 MONTHS UP TO 2 YEARS AGO
- O 05 MORE THAN 2 YEARS AGO
- O 00 HAVE NEVER HAD A PHYSICAL
- O -7 REFUSED
- O -8 DON'T KNOW

'PN QT2017 H6' [PN TI14] -

PROGRAMMING NOTE TI14:

IF TF1 = 1, 3, 4, OR 5 (YES, DOCTOR, KAISER, OR MORE THAN ONE PLACE FOR USUAL SOURCE OF CARE), CONTINUE WITH Ti14;

ELSE GO TO PN_TH49

'QT2017_H6' [TI14] -

Do you have a personal doctor or medical provider who is your main provider?

본인의 담당 의사 역할을 하는 주치의나 의료 제공자가 있습니까?

[IF NEEDED, SAY: "This can be a general doctor, a specialist doctor, a physician assistant, a nurse or other health provider."]

[IF NEEDED, SAY: "여기에는 일반의, 전문의, 의사 보조원, 간호사, 또는 다른 의료제공자가 포함될 수 있습니다."]

- O 01 YES
- O 02 NO
- O -7 REFUSED
- O -8 DON'T KNOW

'PN_QT2017_H7' [PN_TH49] - PN_TH49

PROGRAMMING NOTE TH49:

IF TEINSURE = 1 OR TF1 = 1, 3, 4, OR 5 (HAS A USUAL SOURCE OF CARE) THEN CONTINUE WITH TH49; ELSE GO TO PROGRAMMING NOTE TI17;

IF TI14 = 1 (HAS A PERSONAL DOCTOR), THEN DISPLAY "your";

ELSE DISPLAY "a":

'QT2017 H7' [TH49] -

In the past 12 months, did you try to get an appointment to see {your/a} doctor or medical provider within two days because you were sick or injured?

지난 12개월 동안, 본인이 아프거나 다쳐서 담당의사 또는 의료 제공자와 이틀 이내에 진료 예약을 잡으려고 시도했던 적이 있었습니까?

[IF NEEDED, SAY: "Do not include urgent care or emergency care visits. I am only asking about appointments".]

[IF NEEDED, SAY: "어전트 케어 (urgent care), 즉 긴급 진료나 응급실에 가게 된 경우는 제외해 주십시오. 이질문에는 진료 예약에만 해당됩니다."]

- O 01 YES
- O 02 NO
- O -7 REFUSED
- O -8 DON'T KNOW

If = 2, -7, or -8 go to 'PN QT2017 H9'

'QT2017_H8' [TH46] -

How often were you able to get an appointment within two days? Would you say...

예약을 이틀 이내에 할 수 있었던 경우가 얼마나 자주 있었습니까?

- O 1 Never
- O 1 전혀 없었음
- 2 Sometimes,
- O 2 가끔
- O 3 Usually, or
- O 3보통
- O 4 Always?
- O 4항상
- O 5 REFUSED
- O 6 DON'T KNOW

'PN_QT2017_H9' [PN_TI17] -

PROGRAMMING NOTE TI17:

IF TB17 = 1 (YES, STILL HAVE ASTHMA) OR TB18 = 1 (YES, ASTHMA EPISODE IN PAST 12 MONTHS) AND IF TF1 = 1, 3, 4, OR 5 (YES, DOCTOR, KAISER, OR MORE THAN ONE PLACE FOR USUAL SOURCE OF CARE) AND IF TI14 = 1 (YES HAS PERSONAL DOCTOR), CONTINUE WITH TI17; ELSE GO TO TI18

'QT2017_H9' [TI17] -

Is there anyone at your doctor's office or clinic who helps coordinate your care with other doctors or services, such as tests or treatments?

본인이 다니는 병원이나 클리닉에는 다른 의사에게 가서 진료를 받거나 검사, 치료 같은 의료서비스를 받을 수 있도록 도와주는 사람이 있습니까?

- O 01 YES
- O 02 NO
- O -7 REFUSED
- O -8 DON'T KNOW

'QT2017_H10' [TI18] -

During the past 12 months, did you delay or not get a medicine that a doctor prescribed for you?

지난 12개월 동안 의사가 처방해준 약을 사는 것을 미루거나 아예 사지 않은 적이 있습니까?

- O 01 YES
- O 02 NO
- O -7 REFUSED
- O -8 DON'T KNOW

If = 2, -7, -8, goto 'QT2017_H12'

'QT2017_H11' [TI21] -

Was cost or lack of insurance a reason why you delayed or did not get the prescription?

비용 문제나 보험이 없던 것이 처방약을 늦게 받거나 받지 못한 이유였습니까?

- O 01 YES
- O 02 NO
- O -7 REFUSED
- O -8 DON'T KNOW

'QT2017_H12' [TF9] -

During the past 12 months, did you delay or not get any other medical care you felt you needed—such as seeing a doctor, a specialist, or other health professional?

지난 12개월 동안 의사, 전문의, 또는 다른 의료 전문가를 찾아가는 것과 같은, 본인이 필요하다고 느낀 진료를 미루거나받지 않은 적이 있습니까?

- O 01 YES
- O 02 NO
- O -7 REFUSED
- O -8 DON'T KNOW

If = 2, -7, -8, goto 'QT2017 H17'

'QT2017 H13' [TH57] -

Did you get the care eventually?

본인은 결국 진료를 받았습니까?

- O 01 YES
- O 02 NO
- O -7 REFUSED
- O -8 DON'T KNOW

'QT2017_H14' [TF22] -

Was cost or lack of insurance a reason why you delayed or did not get the care you felt you needed?

비용 문제나 보험이 없던 것이 필요한 진료를 연기했거나 받지 못한 이유였습니까?

- O 01 YES
- O 02 NO
- O -7 REFUSED
- O -8 DON'T KNOW

If = 2, -7, -8, goto 'QT2017_H16'

'QT2017_H15' [TH58] -

Was that the main reason?

그것이 주된 이유였습니까?

- O 01 YES
- O 02 NO
- O -7 REFUSED
- O -8 DON'T KNOW

If = 1, -7, -8, goto 'QT2017_H17'

'QT2017_H16' [TH59] -

What was the one main reason why you delayed getting the care you felt you needed?

본인이 필요하다고 느낀 진료 받기를 연기한 한 가지 주된 이유는 무엇이었습니까?

- O 01 COULDN'T GET APPOINTMENT
- O 02 MY INSURANCE NOT ACCEPTED
- O 03 INSURANCE DID NOT COVER
- O 04 LANGUAGE PROBLEMS
- O 05 TRANSPORTATION PROBLEMS
- O 06 HOURS NOT CONVENIENT
- O 07 NO CHILD CARE FOR CHILDREN AT HOME
- O 08 FORGOT OR LOST REFERRAL
- O 09 I DIDN'T HAVE TIME
- O 10 COULDN'T AFFORD/COST TOO MUCH
- O 11 NO INSURANCE
- 91 OTHER (SPECIFY: ______)
- -7 REFUSED
- O -8 DON'T KNOW

'QT2017_H17' [TF14] -

This next question is about dental health. About how long has it been since you visited a dentist or dental clinic? Include hygienists and all types of dental specialists.

다음 질문들은 치아 건강에 관한 것입니다.치과 의사나 치과 클리닉을 마지막으로 방문한 지가 얼마나 되셨습니까? 치과 위생관리사와 모든

- O 00 HAVE NEVER VISIT
- O 01 6 MONTHS AGO OR LESS
- O 02 MORE THAN 6 MONTHS UP TO 1 YEAR AGO
- O 03 MORE THAN 1 YEAR UP TO 2 YEARS AGO
- O 04 MORE THAN 2 YEARS UP TO 5 YEARS AGO
- O 05 MORE THAN 5 YEARS AGO
- -7 REDUSED
- O -8 DON'T KNOW

SECTION J: DEMOGRAPHIC INFORMATION PART II

'QT2017_J1' [TI1] -

So we can be sure we have included all races and ethnic groups in California, I need to ask a few questions about your background.

저는 캘리포니아 주의 모든 인종 그룹이 포함되었는지 확인하기 위해 본인의 기본적인 인적 사항에 관한 몇 가지 질문을 드리고 싶습니다.

Are you Latino or Hispanic?

본인은 라티노나 히스패닉계입니까?

[IF NEEDED, SAY: "Such as Mexican, Central or South American?"] [IF NEEDED, SAY: "예를 들면 멕시코계 또는 중남미계입니까?"]

- O 01 YES
- O 02 NO
- O -7 REFUSED
- O -8 DON'T KNOW

If = 2, -7, -8, goto 'PN_QT2017_J3'

'QT2017_J2' [TI1A] -

And what is your Latino or Hispanic ancestry or origin? Such as Mexican, Salvadoran, Cuban, Honduran-- and if you have more than one, tell me all of them.

그러면 어떤 라티노나 히스패닉계에 속하십니까? 예를 들자면 멕시코계, 엘살바도르계, 쿠바계, 온두라스계 등이 있겠는데요. 하나 이상에 해당되는 경우에는 모두 말씀해 주십시오.

[IF NECESSARY, GIVE MORE EXAMPLES] [CODE ALL THAT APPLY]

01 MEXICAN/MEXICAN AMERICAN/CHICANO_
04 _SALVADORAN_
05 _GUATEMALAN_
06 _COSTA RICAN_
07 _HONDURAN_
08 _NICARAGUAN_
09 _PANAMANIAN_
10 _PUERTO RICAN_
11 _CUBAN_
12 _SPANISH-AMERICAN (FROM SPAIN)_
91 OTHER LATINO (SPECIFY:)
-7 _REFUSED_
-8 DON'T KNOW

'Other_TI1A' [Other_TI1A] - OTHER LATINO (SPECIFY: _____)

'PN_QT2017_J3' [PN_Tl2] -	
PROGRAMMING NOTE TI2:	
IF TI1 = 1 (YES), DISPLAY "You said you are Latino or Hispanic. Also,";	
IF MORE THANONE RACE GIVEN, AFTER ENTERING RESPONSES FOR TI2, CONTINUE WITH	
PROGRAMMING NOTE TI2A;	
ELSE GO TO SKIPS AS INDICATED FOR SINGLE RESPONSES	

'QT2017_J3' [TI2] -

{You said you are Latino or Hispanic. Also,} Please tell me which one or more of the following you would use to describe yourself: Would you describe yourself as Native Hawaiian, Other Pacific Islander, American Indian, Alaska Native, Asian, Black, African American, or White?

{본인이 라티노 또는 히스패닉계라고 말씀하셨는데요} 다음 중 본인에게 해당되는 인종을 하나 혹은 그 이상 선택해 주십시오. 본인은 하와이 원주민, 기타 태평양 섬 원주민, 아메리컨 인디언, 알래스카 원주민, 아시아인, 흑인, 아프리카계 미국인 또는 백인 중에서 어느 인종에 속합니까?

[IF R SAYS "NATIVE AMERICAN" CODE AS "4"] [IF R GIVES ANOTHER RESPONSE YOU MUST SPECIFY WHAT IT IS] [CODE ALL THAT APPLY]

	01 WHITE
	02 BLACK OR AFRICAN AMERICAN
	03 ASIAN
	04 AMERICAN INDIAN OR ALASKA NATIVE
	05 OTHER PACIFIC ISLANDER
	06 NATIVE HAWAIIAN
	91 OTHER (SPECIFY:)
	-7 REFUSED
	-8 DON'T KNOW
If = 1;2;6;91;-7	;-8, And Only One Race, goto 'QT2017_J11'
If = 3, And Only	y One Race, goto 'PN_QT2017_J7'
	y One Race, goto 'PN_QT2017_J4'
	y One Race, goto 'PN QT2017 J8'
,	,
Other TI2' [Oth	ner TI2] - OTHER (SPECIFY:

'PN_QT2017_J4' [PN_TI2A] -
PROGRAMMING NOTE TI2A:
IF TI2 = 4 (AMERICAN INDIAN, ALASKA NATIVE) CONTINUE WITH TI2A ;
ELSE GO TO PROGRAMMING NOTE TI2D

'QT2017_J4' [TI2A] -

You said, American Indian or Alaska Native, and what is your tribal heritage? If you have more than one tribe, tell me all of them.

아메리칸 인디언이나 알래스카 원주민이라고 말씀하셨는데요, 어떤 부족에 속하십니까? 하나 이상의 부족에 속하신 경우, 모두 말씀해 주십시오.

[CODE ALL THAT APPLY]

01 APACHE
02 BLACKFOOT/BLACKFEET
03 CHEROKEE
04 CHOCTAW
05 MEXICAN AMERICAN INDIAN
06 NAVAJO
07 POMO
08 PUEBLO
09 SIOUX
10 YAQUI
91 OTHER TRIBE [Ask for spelling] (SPECIFY:
-7 REFUSED
-8 DON'T KNOW

'Other_TI2A' [Other_TI2A] - OTHER TRIBE (SPECIFY: _____)

'QT2017_J5' [TI2B] -

Are you an enrolled member in a federally or state recognized tribe?

본인은 연방정부와 주정부에서 인정하는 부족으로 등록되었습니까?

- O 01 YES
- O 02 NO
- O -7 REFUSED
- O -8 DON'T KNOW

If = 2, -7, -8, goto 'PN_QT2017_J7'

Which tribe are you enrolled in?

어느 부족으로 -	등록했습니까?
	01 APACHE 02 BLACKFEET 03 CHEROKEE 04 CHOCTAW 05 NAVAJO 06 POMO 07 PUEBLO 08 SIOUX 09 YAQUI 10 OTHER
	NPACHE_T] - APACHE_T 1 MESCALERO APACHE, NM 2 _APACHE (NOT SPECIFIED)_ 3 _OTHER APACHE [Ask for spelling] (SPECIFY:)
OTHER_APAC	CHE_T
BLACKFEET_	T' [BLACKFEET_T] - BLACKFEET_T 4 BLACKFOOT/BLACKFEET_
CHEROKEE_TO	T' [CHEROKEE_T] - CHEROKEE_T 5 WESTERN CHEROKEE 6 _CHEROKEE (NOT SPECIFIED)_ 7 _OTHER CHEROKEE [Ask for spelling] (SPECIFY:)
OTHER_CHEF	ROKEE_T
'CHOCTAW_T' O O	[CHOCTAW_T] - CHOCTAW_T 08 CHOCTAW OKLAHOMA 09 _CHOCTAW (NOT SPECIFIED)_ 10 _OTHER CHOCTAW [Ask for spelling] (SPECIFY:)
OTHER_CHO	CTAW_T
N] 'T_OLAVAN' C	AVAJO_T] - NAVAJO_T 11 NAVAJO (NOT SPECIFIED)
'POMO_T' [POI	MO_T] - POMO_T 12 HOPLAND BAND, HOPLAND RANCHERIA_ 13 _SHERWOOD VALLEY RANCHERIA_ 14 _POMO (NOT SPECIFIED)_ 15 _OTHER POMO [Ask for spelling] (SPECIFY:)_
OTHER_POM	O_T
'PUEBLO_T' [P O O O	PUEBLO_T] - PUEBLO_T 16 HOPI_16 17 _YSLETA DEL SUR PUEBLO OF TEXAS_17 18 _PUEBLO (NOT SPECIFIED)_18 19 _OTHER PUEBLO [Ask for spelling] (SPECIFY:)_
OTHER_PUE	BLO_T
'SIOUX_T' [SIC O O	OUX_T] - SIOUX_T 20 OGLALA/PINE RIDGE SIOUX_ 21 _SIOUX (NOT SPECIFIED)_ 22 OTHER SIOUX [Ask for spelling] (SPECIFY:

OTHER_SIOUX_T 'YAQUI_T' [YAQUI_T] - YAQUI_T O 0

23 PASCUA YAQUI TRIBE OF ARIZONA_

24 _YAQUI (NOT SPECIFIED)_

25 _OTHER YAQUI [Ask for spelling] (SPECIFY: _____)_

OTHER_YAQUI_T

OTHER_T

91 OTHER (SPECIFY: _____)_ \mathbf{O}

O

-7 _REFUSED_ -8 _DON'T KNOW_ 0

OTHER_OTHER_T

'PN_QT2017_J7' [PN_TI2D] -**PROGRAMMING NOTE TI2D:** IF TI2 = 3 (ASIAN) CONTINUE WITH TI2D; **ELSE GO TO PROGRAMMING NOTE TI2D1**

'QT2017_J7' [TI2D] -

You said Asian, and what specific ethnic group are you, such as Chinese, Filipino, Vietnamese? If you are more than one, tell me all of them.

아시아인이라고 말씀하셨는데요, 중국계라든지, 필리핀계, 또는 베트남계 등, 구체적으로 어느 민족이십니까? 둘 이상 해당되는 경우, 모두 말씀해 주십시오.

[CODE ALL THAT APPLY]

01 BANGLADESHI	
02 BURMESE	
03 CAMBODIAN	
04 CHINESE	
05 FILIPINO	
06 HMONG	
07 INDIAN (INDIA)	
08 INDONESIAN	
09 JAPANESE	
10 KOREAN	
11 LAOTIAN	
12 MALAYSIAN	
13 PAKISTANI	
14 SRI LANKAN	
15 TAIWANESE	
16 THAI	
17 VIETNAMESE	
91 OTHER ASIAN (SPECIFY:)
-7 REFUSED	
-8 DON'T KNOW	

'PN_QT2017_J8' [PN_TI2D1] -	
PROGRAMMING NOTE TI2D1: IF TI2 = 5 (PACIFIC ISLANDER) CONTINUE WITH TI2D1; ELSE GO TO PROGRAMMING NOTE TI2F	

'QT2017 J8' [TI2D1] -

You said you are Pacific Islander. What specific ethnic group are you, such as Samoan, Tongan, or Guamanian? If you are more than one, tell me all of them.

태평양 섬 원주민이라고 말씀하셨는데요. 사모아족, 통가족, 또는 괌족 등, 구체적으로 어느 민족 이십니까? 둘 이상 해당되는 경우, 모두 말씀해 주십시오.

[CODE ALL THAT APPLY]

01 SAMOAN/AMERICAN SAMOAN
02 GUAMANIAN
03 TONGAN
04 FIJIAN
91 OTHER PACIFIC ISLANDER (SPECIFY:)
-7 REFUSED
-8 DON'T KNOW

'Other_TI2D1' [Other_TI2D1] - OTHER PACIFIC ISLANDER (SPECIFY: _____)

'PN_QT2017_J9' [PN_TI2F] -

PROGRAMMING NOTE TI2F:

IF TI1 = 1 (YES, LATINO) AND [TI2 = 6 (NATIVE HAWAIIAN) OR 5 (OTHER PACIFIC ISLANDER) OR 4 (AMERICAN INDIAN OR ALASKA NATIVE) OR 3 (ASIAN) OR 2 (BLACK OR AFRICAN AMERICAN) OR 1 (WHITE) OR 91 (OTHER (Specify))], CONTINUE WITH TI2F;

ELSE IF MULTIPLE RESPONSES TO TI2 OR TI2D OR TI2D1 [NOT COUNTING -7 OR -8 (REF/DK)], CONTINUE WITH TI2F:

ELSE GO TO TI3:

FOR TI1A RESPONSES, INCLUDE "Specify" RESPONSE FOR 91 (OTHER LATINO); IF TI1 = -7 (REFUSE), INSERT "Latino"

'QT2017 J9' [TI2F] -

You said that you are: [RESPONSES FROM TI1A, TI2, TI2D, TI2D1]. Do you identify with any one race in particular?

본인은 다음에 해당된다고 하셨습니다: : [RESPONSES FROM TI1A, TI2, TI2D, TI2D1] 본인은 한 특정한 인종에 속한다고 말할 수 있습니까?

- O 01 YES
- O 02 NO
- O -7 REFUSED
- O -8 DON'T KNOW

IF TI3 = 2,-7,-8 go to TI3

'QT2017_J10' [TI2E] -

Which do you most identify with?

이 중에서, 본인을 가장 잘 나타내는 것은 무엇입니까?

- 0 01 MEXICAN/MEXICAN AMERICAN/CHICANO 0 04 SALVADORAN 0 05 GUATEMALAN 06 COSTA RICAN 0 07 HONDURAN 0 0 08 NICARAGUAN 0 09 PANAMANIAN 0 10 PUERTO RICAN 0 11 CUBAN 0 12 SPANISH-AMERICAN (FROM SPAIN) 13 LATINO, OTHER SPECIFY
- 0
- 0 14 LATINO
- \mathbf{O} **16 NATIVE HAWAIIAN**
- 0 17 OTHER PACIFIC ISLANDER
- O 18 AMERICAN INDIAN OR ALASKA NATIVE
- 0 19 ASIAN
- 0 20 BLACK OR AFRICAN AMERICAN
- 0 21 WHITE
- O 22 RACE, OTHER SPECIFY
- 0 30 BANGLADESHI 31 BURMESE 0 0 32 CAMBODIAN
- O 33 CHINESE 0 34 FILIPINO
- 0 35 HMONG
- 0 36 INDIAN (INDIA) 0 37 INDONESIAN
- 0 38 JAPANESE 0 39 KOREAN
- 0 **40 LAOTIAN** 0 41 MALAYSIAN 0 **42 PAKISTANI**
- 0 43 SRI LANKAN 0 **44 TAIWANESE**
- 0 45 THAI
- 0 **46 VIETNAMESE**
- 0 49 ASIAN, OTHER SPECIFY
- 0 50 SAMOAN/AMERICAN SAMOAN
- O 51 GUAMANIAN
- 0 52 TONGAN
- 0 53 FIJIAN
- \mathbf{O} 55 PACIFIC ISLANDER, OTHER SPECIFY
- 90 BOTH/ALL/MULTIRACIAL 0
- O 95 NONE OF THESE
- O -7 REFUSED
- -8 DON'T KNOW

In what country were you born?

어느 나라에서 출생하셨습니까?

- 0 01 UNITED STATES 0 02 AMERICAN SAMOA 0 03 CANADA 0 04 CHINA 05 EL SALVADOR 0 0 06 ENGLAND 0 07 FRANCE 0 08 GERMANY 0 09 GUAM 0 10 GUATEMALA 0 11 HUNGARY 0 12 INDIA \mathbf{O} **13 IRAN** 0 14 IRELAND 0 15 ITALY 0 16 JAPAN O 17 KOREA 0 18 MEXICO
- O 23 RUSSIA
 O 24 TAIWAN
 O 25 VIETNAM

20 POLAND

19 PHILIPPINES

21 PORTUGAL

22 PUERTO RICO

- O 26 VIRGIN ISLANDS
 O 91 OTHER (SPECIFY: ______
- O -7 REFUSED
 O -8 DON'T KNOW

'PN_QT2017_J12' [PN_TI4] - PROGRAMMING NOTE TI4 : IF TI3 = 1, 2, 9, 22, OR 26 (BORN IN USA OR US TERRITORY), GO TO TI7 ; ELSE CONTINUE WITH TI4

'QT2017_J12' [TI4] -

 \mathbf{O}

O

0

0

Are you a citizen of the United States?

본인은 미국 시민권자이십니까?

- O 01 YES
- O 02 NO
- O 03 APPLICATION PENDING
- -7 REFUSED
- O -8 DON'T KNOW

If = 1, goto 'QT2017_J14'

Are you a permanent resident with a green card?

영주권자입니까?

[IF NEEDED, SAY: "People usually call this a "Green Card" but the color can also be pink, blue, or white."] [IF NEEDED, SAY: "사람들은 이것을 보통 "그린카드"라고 합니다, 그런데 색깔은 분홍색일수도 있고, 파랑색 아니면 하얀색일수도 있습니다."]

- O 01 YES
- O 02 NO
- O 03 APPLICATION PENDING
- -7 REFUSED
- O -8 DON'T KNOW

'QT2017_J14' [TI6] -

About how many years have you lived in the United States?

본인은 대략 몇 년 동안 미국에 살았습니까?

[FOR LESS THAN A YEAR, ENTER 1 YEAR]

'QT2017 J15' [TI7] -

What languages do you speak at home?

집에서는 어떤 언어를 사용합니까?

[CODE ALL THAT APPLY.] [PROBE: "Any others?"]

[PROBE: "또 다른 다른 건강 상태도 있습니까?"]

- □ 01 ENGLISH □ 02 SPANISH
- □ 03 CANTONESE
- □ 04 VIETNAMESE
- □ 05 TAGALOG
- 06 MANDARIN
- ☐ 07 KOREAN
- ☐ 08 ASIAN INDIAN LANGUAGES
- ☐ 09 RUSSIAN
- □ 91 OTHER 1 (SPECIFY: ______
- 92 OTHER 2 (SPECIFY: _____
- □ -7 REFUSED
- □ -8 DON'T KNOW

'OTHER1_TI7' [OTHER1_TI7] - OTHER1

'OTHER2_TI7' [OTHER2_TI7] - OTHER2

SECTION K: SUICIDE IDEATION AND ATTEMPTS

'QT2017_K1' [TK1] -

The next section is about thoughts of hurting yourself. Again, if any question upsets you, you don't have to answer it.

다음은 자해, 즉 자기 자신을 해치려는 생각들에 대한 것입니다. 앞서 말씀드렸듯이, 불편한 질문에 대해서는 대답하지 않으셔도 됩니다.

Have you ever seriously thought about committing suicide?

한 번이라도 자살에 대해서 심각하게 생각해본 적이 있습니까?

- O 01 YES
- O 02 NO
- -7 REFUSED
- O -8 DON'T KNOW

If = 2, -7, -8, goto 'QT2017_L1'

'QT2017_K2' [TK2] -

Have you seriously thought about committing suicide at any time in the past 12 months?

지난 12개월 동안, 한 순간이라도 자살에 대해서 심각하게 생각해 본 적이 있습니까?

- O 01 YES
- O 02 NO
- -7 REFUSED
- O -8 DON'T KNOW

If = 2, -7, -8, goto 'QT2017_K4'

'QT2017_K3' [TK3] -

Have you seriously thought about committing suicide at any time in the past 2 months?

지난 2개월 동안, 한 순간이라도 자살에 대해서 심각하게 생각해 본 적이 있습니까?

- O 01 YES
- O 02 NO
- O -7 REFUSED
- O -8 DON'T KNOW

'QT2017_K4' [TK4] -

Have you ever attempted suicide?

자살을 기도해본 적이 있습니까?

- O 01 YES
- O 02 NO
- O -7 REFUSED
- O -8 DON'T KNOW

'PN_QT2017_K5' [PN_TK5] PROGRAMMING NOTE TK5:

IF (TK2 = 2, -7, OR -8) AND (TK4 = 2, -7, OR -8), THEN GO TO SUICIDE RESOURCE;

IF (TK3 = 2, -7, OR -8) AND (TK4 = 2, -7, OR -8), THEN GO TO SUICIDE RESOURCE;

IF TK3 = 1 AND (TK4 = 2, -7, OR -8), THEN GO TO SUICIDE RESOURCE;

ELSE CONTINUE WITH TK5

'QT2017 K5' [TK5] -

Have you attempted suicide at any time in the past 12 months?

지난 12개월 동안, 한 번이라도 실제로 자살을 기도했던 적이 있었습니까?

- O 01 YES
- O 02 NO
- O -7 REFUSED
- O -8 DON'T KNOW

'SUICIDE RESOURCE' [SUICIDE RESOURCE] -

SUICIDE RESOURCE:

We have a number you can call if you'd like to talk to someone about suicidal thoughts or attempts. Someone is available 24 hours a day to provide information to help you. Do you have something to write with?

[WAIT UNTIL THEY HAVE SOMETHING TO WRITE DOWN THE NUMBER AND/OR WEBSITE AND THEN CONTINUE WITH THE SCRIPT. SPEAK SLOWLY WHEN GIVING THE HOTLINE NUMBER.]

The number is 1-800-273-TALK (8255).

[IF NEEDED, REPEAT THE NUMBER OR ASK THEM TO READ IT BACK TO YOU.]

자살에 대한 생각이나 자살 기도와 관련해 누군가와 이야기하고 싶다면 통화 가능한 전화번호를 알려드리고 싶습니다. 상담자가 도움을 주기 위해 24시간 대기하고 있습니다. 전화번호는 1-800-273-TALK (8255)입니다.

Or, you can visit a website to find out information about getting help. [SPEAK SLOWLY WHEN GIVING OUT THE WEBSITE ADDRESS.] The website address is www.suicidepreventionlifeline.org. [IFwww.suicidepreventionlifeline.org. [IF NEEDED, REPEAT THE ADDRESS OR ASK THEM TO READ IT BACK TO YOU.]

아니면, 도움이 될 만한 정보가 있는 인터넷 사이트를 방문하실 수도 있습니다. 인터넷 사이트 주소는www.suicidepreventionlifeline.org 입니다.

'POST_SUICIDE RESOURCE1' [POST_SUICIDE RESOURCE1] - POST-NOTE FOR SUICIDE RESOURCE: IF (TK2 = 2, -7, OR -8) AND (TK4 = 2, -7, OR -8), THEN GO TO TH21 (NEXT SECTION); ELSE CONTINUE WITH TK7

'QT2017_K6' [TK7] -

Would you like to discuss your thoughts with this person now or would you like to continue with the survey?

이 곳의 상담원과 이야기를 해 보고 싶으십니까?

- O 01 DISCUSS THOUGHTS WITH PERSON
- O 02 CONTINUE WITH SURVEY
- -7 REFUSED
- O -8 DON'T KNOW

SECTION L: CIVIC ENGAGEMENT AND RESILIENCY

'QT2017_L1' [TH21] -

In the past 12 months, have you done any volunteer work or community service that you have not been paid for?

지난 12개월 동안, 보수를 받지 않고 자원봉사 또는 지역사회 봉사를 한 적이 있습니까?

- O 01 YES
- O 02 NO
- O -7 REFUSED
- O -8 DON'T KNOW

'PN QT2017 L2' [PN TH8] -

PROGRAMMING NOTE TH8:

IF TA4 = 1 OR TA4C = 1 (ATTENDED SCHOOL LAST YEAR) THEN CONTINUE WITH TH8;

ELSE GO TO TL37

'QT2017_L2' [TH8] -

How true do you feel the next statements are about your school and things you might do there:

본인의 학교에서 있을 법한 일들에 대해 질문하겠습니다. 각각의 문장을 들은 후, 본인의 상황에 알맞은 보기를 전혀 맞지 않음, 약간 맞음, 상당히 맞음, 매우 많이 맞음 중에서 선택해 주십시오.

At my school, there is a teacher or some other adult...

[우리 학교에는] 나를 진심으로 염려해 주는 선생님이나 어른이 있다.

Who really cares about me. Would you say this is...

이 말이...

- O 01 Not at all true
- O 01전혀 맞지 않습니까
- O 02 A little true
- O 02조금 맞는 말입니까
- O 03 Pretty much true, or
- O 03상당히 많이 맞는 말입니까, 아니면
- O 04 Very much true?
- O 04아주 맞는 말입니까?
- O -7 REFUSED
- O -8 DON'T KNOW

[At my school, there is a teacher or some other adult...]

[우리 학교에는]

Who notices when I'm not there. Is this...

내가 없으면 그것을 알아차리는 선생님이나 어른이 있다. 이 말이...

- O 01 Not at all true
- O 01전혀 맞지 않습니까
- O 02 A little true
- O 02조금 맞는 말입니까
- O 03 Pretty much true, or
- O 03상당히 많이 맞는 말입니까, 아니면
- O 04 Very much true?
- O 04아주 맞는 말입니까?
- O -7 REFUSED
- O -8 DON'T KNOW

'QT2017 L4' [TH10] -

[At my school, there is a teacher or some other adult...]

[우리 학교에는]

Who listens to me when I have something to say. Is this...

내가 하고 싶은 말이 있을 때 귀담아 들어주는 선생님이나 어른이 있다. 이 말이

- O 01 Not at all true
- O 01전혀 맞지 않습니까
- O 02 A little true
- O 02조금 맞는 말입니까
- O 03 Pretty much true, or
- O 03상당히 많이 맞는 말입니까, 아니면
- O 04 Very much true?
- O 04아주 맞는 말입니까?
- O -7 REFUSED
- O -8 DON'T KNOW

'QT2017_L5' [TH11] -

[At my school, there is a teacher or some other adult...]

[우리 학교에는]

Who tells me when I do a good job.

내가 잘 했을 때 칭찬해 주는 선생님이나 어른이 있다.

[IF NEEDED, READ:]

- O 01 NOT AT ALL TRUE
- O 02 A LITTLE TRUE
- O 03 PRETTY MUCH TRUE, OR
- O 04 VERY MUCH TRUE?
- O -7 REFUSED
- O -8 DON'T KNOW

'QT2017_L6' [TH12] -

[At my school, there is a teacher or some other adult...]

[우리 학교에는]

Who always wants me to do my best.

내가 최선을 다하기를 늘 바라는 선생님이나 어른이 있다.

[IF NEEDED, READ:]

- O 01 NOT AT ALL TRUE
- O 02 A LITTLE TRUE
- O 03 PRETTY MUCH TRUE, OR
- O 04 VERY MUCH TRUE?
- -7 REFUSED
- -8 DON'T KNOW

'QT2017_L7' [TH14] -

How <u>true</u> do you feel the next statements are about your home: [In my home there is a parent or some other adult..] Who cares about my schoolwork. Is this

본인의 집에서 있을 법한 일들에 대해 질문하겠습니다. 각각의 문장을 들은 후, 본인의 상황에 알맞은 보기를 전혀 맞지 않음, 약간 맞음, 매우 많이 맞음 중에서 선택해 주십시오. 우리 집에는 내 학교 공부에 관심을 가져 주는 부모님이나 어른이 있다.

- O 01 NOT AT ALL TRUE
- O 02 A LITTLE TRUE
- O 03 PRETTY MUCH TRUE, OR
- O 04 VERY MUCH TRUE?
- -7 REFUSED
- -8 DON'T KNOW

'QT2017_L8' [TH15] -

[In my home, there is a parent or some other adult...]

[우리 집에는]

Who listens to me when I have something to say. Is this...

내가 하고 싶은 이야기를 할 때 들어 주시는 부모님이나 다른 어떤 어른이 있다.

- O 01 Not at all true
- O 01전혀 맞지 않습니까
- O 02 A little true
- O 02조금 맞는 말입니까
- O 03 Pretty much true, or
- O 03상당히 많이 맞는 말입니까, 아니면
- O 04 Very much true?
- O 04아주 맞는 말입니까?
- -7 REFUSED
- O -8 DON'T KNOW

'QT2017_L9' [TH16] -

[In my home, there is a parent or some other adult...]

[우리 집에는]

Who talks with me about my problems.

내 문제에 대해 같이 이야기를 나누는 부모님이나 어른이 있다

- O 01 NOT AT ALL TRUE
- O 02 A LITTLE TRUE
- O 03 PRETTY MUCH TRUE, OR
- O 04 VERY MUCH TRUE?
- O -7 REFUSED
- O -8 DON'T KNOW

'QT2017_L10' [TH18] -

[In my home, there is a parent or some other adult...]

[우리 집에는]

Who always wants me to do my best.

내가 최선을 다하기를 늘 바라는 부모님이나 어른이 있다.

- O 01 NOT AT ALL TRUE
- O 02 A LITTLE TRUE
- O 03 PRETTY MUCH TRUE, OR
- O 04 VERY MUCH TRUE?
- O -7 REFUSED
- O -8 DON'T KNOW

'QT2017_L11' [TH19] -

[In my home, there is a parent or some other adult...]

[우리 집에는]

Who believes that I will be a success.

내가 성공할 것이라고 믿어 주는 부모님이나 어른이 있다.

- O 01 NOT AT ALL TRUE
- O 02 A LITTLE TRUE
- O 03 PRETTY MUCH TRUE, OR
- O 04 VERY MUCH TRUE?
- -7 REFUSED
- O -8 DON'T KNOW

'QT2017_L12' [TL37] -

A person's appearance, style, dress, or the way they walk or talk may affect how people describe them. How do you think other people at school would describe you?

사람들은 한 사람의 외모나 스타일, 의상, 혹은 걷는 방식이나 말하는 방식 등을 보고 그에 따라 상대방을 묘사합니다. 학교의 사람들이 당신을 어떻게 묘사할 거라고 생각하십니까?

[IF NEEDED, SAY: "Think about the last time you attended school".] [IF NEEDED, SAY: "학교를 마지막으로 다녔을 때를 떠올려 주세요".]

- O 01 Very feminine,
 - 01 매우 여성스러움
- O 02 Mostly feminine,
 - 02 대부분 여성스러움
- O 03 Equally feminine and masculine
 - 03 여성성과 남성성이 비슷함
- O 04 Mostly masculine, or
 - 04 대부분 남성스러움
- O 05 Very masculine?
 - 05 매우 남성스러움
- O -7 REFUSED
- O -8 DON'T KNOW

'PN_QT2017_L13' [PN_TL44] -

PROGRAMMING NOTE TL44;

IF [TA3 = 1 AND TL37 = 1,2 (MALE AND GENDER EXPRESSION IS VERY/MOSTLY FEMININE)] OR [TA3=2 AND TL37 = 4,5 (FEMALE AND GENDER EXPRESSION IS VERY/MOSTLY MASCULINE)] CONTINUE WITH TL44;

ELSE SKIP TO NEXT SECTION;

'QT2017_L13' [TL44] -

People who do not have HIV can take one pill a day to lower their risk of getting HIV. This is called pre-exposure prophylaxis, or PrEP. The pill is also called Truvada®. At any time in the past 30 days, have you taken PrEP or Truvada®?

HIV가 없더라도 HIV 감염 위험을 낮추기 위해 하루에 한 알씩 복용할 수 있습니다. 이것을 노출 전 예방약, 즉 PrEP라고 합니다. 이때 복용하는 알약을 Truvada®라고도 합니다. 지난 30일 동안 언제라도 PrEP 또는 Truvada®를 복용한 적이 있습니까?

- O 01 YES
- O 02 NO
- O -7 REFUSED
- O -8 DON'T KNOW

If = 1, goto 'TH31B'

'QT2017_L14' [TL45] -

In the past 12 months, have you taken any PrEP or Truvada®?

지난 12개월 동안, PrEP 또는 Truvada®를 복용한 적이 있습니까?

- O 01 YES
- O 02 NO
- -7 REFUSED
- O -8 DON'T KNOW

If = 1, goto 'TH31B'

'QT2017_L15' [TL46] -

Have you ever taken any PrEP or Truvada®?

PrEP 또는 Truvada®를 복용한 적이 있습니까?

- O 01 YES
- O 02 NO
- O -7 REFUSED
- O -8 DON'T KNOW

If = 1, goto 'TH31B'

'QT2017_L16' [TL47] -

Before today, have you ever heard of PrEP or Truvada®?

오늘 이전에 PrEP 또는 Truvada®에 대해 들어본 적이 있습니까?

- O 01 YES
- O 02 NO
- O -7 REFUSED
- O -8 DON'T KNOW

'TH31B' [TH31B] -

Have you ever been tested for HIV, the virus that causes AIDS?

AIDS를 일으키는 바이러스인 HIV의 감염여부를 검사 받은 적이 한번이라도 있습니까?

- O 01 YES
- O 02 NO
- O -7 REFUSED
- O -8 DON'T KNOW

If = 2, -7, -8, goto 'QT2017_L19'

'QT2017_L18' [TL48] -

For your most recent HIV test, were you offered the test or did you ask for the test?

가장 최근 받은 HIV 검사는 제안받은 것입니까 아니면 본인이 요청한 것입니까?

- O 01 I WAS OFFERED THE TEST
- O 02 I ASKED FOR THE TEST
- O 03 I DON'T REMEMBER
- O 91 OTHER (SPECIFY:_____
- 7 REFUSED
- O -8 DON'T KNOW

If = 1, 2, 3, 91, -7, -8, goto NEXT SECTION

'QT2017_L19' [TL49] -

Were you ever offered an HIV test?

HIV 검사를 제안받은 적이 있습니까?

- O 01 YES
- O 02 NO
- O -7 REFUSED
- O -8 DON'T KNOW

SECTION M: CLOSING

'QT2017_M1' [TI10] -

Those are my final questions. I appreciate your time and cooperation. Finally, do you think you would be willing to do a follow-up to this survey sometime in the future?

이것으로 모든 질문이 끝났습니다. 시간을 내주시고 협조해 주셔서 감사합니다. 마지막으로, 앞으로 언젠가 이 설문 조사에 대한 후속 조사가 있으면 협조해 주실 수 있습니까?

- O 01 YES
- O 02 MAYBE/PROBABLY YES
- O 03 DEFINITELY NOT
- O -7 REFUSED
- O -8 DON'T KNOW

'PN SUICIDE2' [PN SUICIDE2] -

PROGRAMMING NOTE SUICIDE RESOURCE 2:

IF TK7 = 2, -7, OR -8, CONTINUE WITH SUICIDE RESOURCE 2;

ELSE GO TO CLOSE

'QT2017_M2' [TM4] -

As I mentioned earlier, we have a number you can call if you'd like to talk to someone about suicidal thoughts or attempts. Someone is available 24 hours a day to provide information to help you. Do you have something to write with?

앞서 말씀한 것처럼, 자살에 대한 생각이나 시도에 대해 상담이 필요할 때 통화 가능한 전화 번호를 드리고 싶습니다. 상담자가 도움을 주기 위해 24시간 대기하고 있습니다. 지금 받아적을 수 있으세요?

[WAIT UNTIL THEY HAVE SOMETHING TO WRITE DOWN THE NUMBER AND/OR WEBSITE AND THEN CONTINUE WITH THE SCRIPT. SPEAK SLOWLY WHEN GIVING THE HOTLINE NUMBER.]

The number is 1-800-273-TALK (8255).

무료 전화번호는 1-800- 273-TALK(8255)입니다.

[IF NEEDED, REPEAT THE NUMBER OR ASK THEM TO READ IT BACK TO YOU.]

Or you can visit a website to find out information about getting help. The website address is www.suicidepreventionlifeline.org.

인터넷 사이트 주소는 www.suicidepreventionlifeline.org 입니다.

[SPEAK SLOWLY WHEN GIVING OUT THE WEBSITE ADDRESS.] [IF NEEDED, REPEAT THE ADDRESS OR ASKTHEM TO READ IT BACK TO YOU.]

Would you like to speak with someone now?

지금 이러한 상담을 받고 싶으십니까?

- O 01 YES
- O 02 NO
- O -7 REFUSED
- O -8 DON'T KNOW

Thank you. You have helped with a very important health survey. If you have any questions, you can contact Dr. Ponce, who heads the study. Would you like the number?

감사합니다. 귀하는 매우 중요한 보건 설문 조사에 도움을 주셨습니다. 이 연구에 대해 질문이 있으시면 연구 책임자인 폰스(Ponce) 박사에게 연락을 하시면 됩니다. 전화번호를 알려드릴까요?

[IF YES, SAY: "Dr. Ponce can be reached toll-free at 1-866-275-2447. Goodbye."]

[IF YES, SAY: "Ponce 박사에게 무료전화 1-866-275-2447로 연락하십시오."

[IF NO, SAY: "Goodbye"] [IF NO, SAY: "안녕히 계세요"]

'QT2017_M3' [TI9] -

[INTERVIEWER: DURING THIS INTERVIEW, EVEN FOR PART OF THE TIME, DO YOU THINK...]

- O 01 A PARENT WAS LISTENING ON AN EXTENSION
- O 02 A PARENT WAS IN THE ROOM LISTENING, OR
- O 03 NEITHER
- O -8 DON'T KNOW

'BREAKOFF' [BREAKOFF] - BREAKOFF

'CALLBACK' [CALLBACK] - CALLBACK

- O 1 YES
- O 2 NO

'INELIGIBLE' [INELIGIBLE] - INELIGIBLE

- O 1 Yes
- 2 No