



CHIS 2003 Adolescent Questionnaire

(Adolescent Respondents Age 12-17)

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Collaborating Agencies:

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- California Department of Health Services
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Section A – Demographics

PROGRAMMING NOTE QT03_1:
SET TADATE = CURRENT DATE (YYYYMMDD)

QT03_1 What is your date of birth?
 ¿Cuál es su fecha de nacimiento?

[TA1] ____ MONTH ____ DAY ____ YEAR **[GO TO QT03_4]**
 [HR: 1-12] [HR: 1-31] [SR: 1985-1991]

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

- | | |
|-------------|--------------|
| 1. JANUARY | 7. JULY |
| 2. FEBRUARY | 8. AUGUST |
| 3. MARCH | 9. SEPTEMBER |
| 4. APRIL | 10. OCTOBER |
| 5. MAY | 11. NOVEMBER |
| 6. JUNE | 12. DECEMBER |

PROGRAMMING NOTE QT03_2:
IF QT03_1 = -7 OR -8 (REF/DK), CONTINUE WITH QT03_2;
ELSE GO TO QT03_3

QT03_2 What month and year were you born?
 ¿En qué mes y año nació?

[TA1A] MONTH ____ YEAR ____ **[GO TO QT03_3]**
 [RANGE: 1-12] [RANGE: 1985-1991]

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

- | | |
|-------------|--------------|
| 1. JANUARY | 7. JULY |
| 2. FEBRUARY | 8. AUGUST |
| 3. MARCH | 9. SEPTEMBER |
| 4. APRIL | 10. OCTOBER |
| 5. MAY | 11. NOVEMBER |
| 6. JUNE | 12. DECEMBER |

QT03_3 How old are you?
 ¿Me podría decir su edad, por favor?

[TA2] _____ [SR: 12-17]

REFUSED-7
 DON'T KNOW-8

PROGRAMMING NOTE QT03_4:
CALCULATE VALUE OF TEENAGE BASED ON QT03_1, QT03_2, OR QT03_3;
IF QT03_1 AND QT03_3 ARE NOT KNOWN, USE CHILD ROSTER AGE (ENUM.AGE);
IF TEENAGE <> BETWEEN 12 AND 17, THEN TERMINATE INTERVIEW AND CODE INELIGIBLE (IT)

QT03_4 Are you male or female?
 ¿Es usted del sexo femenino o masculino?

[TA3] MALE..... 1
 FEMALE 2
 REFUSED-7
 DON'T KNOW-8

**[END INTERVIEW AND
 CODE INELIGIBLE.]**

QT03_5 Do you go to school now?
¿Actualmente está asistiendo a la escuela?

- [TA4] YES 1
- NO 2
- REFUSED-7
- DON'T KNOW-8

QT03_6 Not including any allowance you may get, have you worked for pay in the past 12 months?
[IF NEEDED, SAY: "An allowance is money that parents give you for doing household chores or for personal spending money."]

- [TA5] YES 1
- NO 2 **[GO TO QT03_8]**
- REFUSED-7 **[GO TO QT03_8]**
- DON'T KNOW-8 **[GO TO QT03_8]**

QT03_7 How many hours do you spend working for pay in a typical week during the school year?

[IF NEEDED, SAY: "A typical week is a usual week. Pick the most recent school year."]

- [TA5A] _____ NUMBER OF HOURS [HR: 0-60]
- REFUSED-7
- DON'T KNOW-8

Section B – General Health and Health Conditions

QT03_8 Now, I am going to ask about your health. Ahora le voy a preguntar sobre su salud.
 In general, would you say your health is excellent, very good, good, fair or poor? En general, ¿diría que su salud es excelente, muy buena, buena, regular, o mala?

- [TB1] EXCELLENT 1
 VERY GOOD 2
 GOOD 3
 FAIR 4
 POOR 5
 REFUSED -7
 DON'T KNOW -8

PROGRAMMING NOTE QT03_9:
 IF QT03_5 = 1 or 2 (YES, CURRENTLY IN SCHOOL), CONTINUE WITH QT03_9;
 ELSE GO TO QT03_10. INCLUDE HOME SCHOOLERS.

QT03_9 During the last four school weeks, how many days of school did you miss because of a health problem?

- [TB4] _____ DAYS [HR: 0-20]
 REFUSED -7
 DON'T KNOW -8

QT03_10 Has a doctor ever told you or your parents that you have asthma?
 ¿Le ha dicho alguna vez un médico a usted o a sus padres que usted tenía asma?

- [TB5] YES 1
 NO 2
 REFUSED -7
 DON'T KNOW -8
- [GO TO QT03_18]
 [GO TO QT03_18]
 [GO TO QT03_18]

QT03_11 How old were you when you or your parents were first told by a doctor that you had asthma?
 ¿Qué edad tenía la primera vez que un médico le dijo a usted o a sus padres que tenía asma?

[IF NEEDED, SAY: “Your best guess is fine.”]
[IF NEEDED, SAY: “Está bien si me da una edad aproximada.”]

- _____ AGE IN YEARS
 [TB16] REFUSED -7
 DON'T KNOW -8

QT03_12 Do you still have asthma? ¿Usted todavía tiene asma?

- [TB17] YES 1
 NO 2
 REFUSED -7
 DON'T KNOW -8

QT03_13 During the past 12 months, have you had an episode of asthma or an asthma attack?
 Durante los últimos 12 meses, ¿ha tenido un episodio de asma o un ataque de asma?

- [TB18] YES 1
 NO 2
 REFUSED -7
 DON'T KNOW -8

PROGRAMMING NOTE TB7:
 IF QT03_12=2, -7, or -8 (NO, REFUSED, DON'T KNOW) AND QT03_13=2, -7, or -8 (NO, REFUSED, DON'T KNOW), GO TO
 QT03_17; ELSE CONTINUE WITH QT03_14.

QT03_14 During the past 12 months, how often have you had asthma symptoms such as coughing, wheezing, shortness of breath, tightness or phlegm? Would you say..
 En los últimos 12 meses, ¿con qué frecuencia ha tenido síntomas de asma tales como tos, resuello, dificultad para respirar, opresión en el pecho o flemas? Diría que...

- [TB7] Not at all 1
- Nunca..... 1
- Less than every month..... 2
- Menos de una vez al mes 2
- Every month..... 3
- Todos los meses 3
- Every week, or 4
- Todas las semanas, o 4
- Every day? 5
- Todos los día?..... 5
- REFUSED.....-7
- DON'T KNOW-8

QT03_15 During the past 12 months, have you had to visit a hospital emergency room or urgent care clinic because of your asthma?
 Durante los últimos 12 meses, ¿ha tenido que ir a la sala de emergencias de un hospital debido a su asma?

- [TB19] YES..... 1
- NO..... 2
- REFUSED.....-7
- DON'T KNOW-8

QT03_16 Are you now taking a daily medication to control your asthma that was prescribed or given to you by a doctor?
 ¿Está tomando ahora algún medicamento diario para controlar el asma que le haya sido dado o recetado por un médico?

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

[IF NEEDED, SAY: “Esto incluye medicamentos orales o que tienen que ser inhalados. Este medicamento es diferente a los inhaladores que se usan para alivio rápido.”]

- [TB6] YES..... 1
- NO..... 2
- REFUSED.....-7
- DON'T KNOW-8

QT03_17 Has a doctor or other health professional ever given you an asthma management plan?
 ¿Han trabajado con usted sus médicos u otros proveedores de cuidados de la salud en la preparación de un plan para que usted sepa cómo controlar su asma?

[IF NEEDED, SAY: An asthma management plan is a printed form that tells you when to change the amount or type of medicine, when to call the doctor for advice, and when to go to the emergency room.]

- [TB20] YES..... 1 **[GO TO QT03_20]**
- NO..... 2 **[GO TO QT03_20]**
- REFUSED.....-7 **[GO TO QT03_20]**
- DON'T KNOW-8 **[GO TO QT03_20]**

QT03_18 During the past 12 months, have you had a wheezing or whistling sound in your chest?
 Durante los últimos 12 meses, ¿ha tenido alguna vez resuello o silbido en el pecho?

- [TB21] YES..... 1 **[GO TO QT03_20]**
- NO..... 2 **[GO TO QT03_20]**
- REFUSED.....-7 **[GO TO QT03_20]**
- DON'T KNOW-8 **[GO TO QT03_20]**

QT03_19 During the past 12 months, how many times have you sought any medical help for this breathing problem?
 Durante los últimos 12 meses, ¿cuántas veces ha buscado algún tipo de asistencia médica para este problema de respiración?

- [TB22] NEVER..... 0
 _____ 1-365 times
 REFUSED-7
 DON'T KNOW-8

QT03_20 Has a doctor ever told you or your parents that you have diabetes or sugar diabetes?
 ¿Le ha dicho un médico alguna vez que tenía diabetes o diabetes de azúcar?

- [TB10] YES..... 1
 NO.....2
 REFUSED-7
 DON'T KNOW-8

QT03_21 Do you need special equipment or someone to help you with eating, dressing, bathing, getting out of chairs, moving around the house, or using the toilet because of a health problem or condition?
 ¿Necesita usted equipo especial o que alguien le ayude para comer, vestirse, bañarse, pararse después de haber estado sentado(a) en una silla, ir de un lado a otro dentro de la casa, o usar el baño, (o excusado) debido a algún problema de salud o enfermedad?

- [TB23] YES..... 1
 NO.....2
 REFUSED-7
 DON'T KNOW-8

Section C – Health Behaviors

QT03_22 During the past 12 months were you injured seriously enough that you got medical advice or treatment from a doctor?
 Durante los últimos 12 meses, ¿tuvo alguna herida lo suficientemente grave como para consultar al médico o recibir tratamiento?

- | | | | |
|-------|-----------------|----|-----------------|
| [TC1] | YES..... | 1 | |
| | NO..... | 2 | [GO TO QT03_25] |
| | REFUSED..... | -7 | [GO TO QT03_25] |
| | DON'T KNOW..... | 8 | [GO TO QT03_25] |

QT03_23 How many times was that?
[IF NEEDED, SAY: “Times that you were injured in the past 12 months.”]

- | | | | |
|-------|-----------------|----------------------|--|
| [TC2] | _____ TIMES | [HR: 0-52; SR: 1-12] | |
| | REFUSED..... | -7 | |
| | DON'T KNOW..... | -8 | |

PROGRAMMING NOTE QT03_24:
IF MORE THAN ONE SERIOUS INJURY, CATI DISPLAY THE {most recent, serious} INJURY.

QT03_24 What was the cause of the {most recent, serious} injury?
 ¿Cuál fue la causa de la lesión {más grave}?

- | | | |
|-------|----------------------------------------------|----|
| [TC3] | MOTOR VEHICLE-OCCUPANT | 1 |
| | MOTOR VEHICLE-PEDESTRIAN | 2 |
| | BICYCLE -RELATED..... | 3 |
| | ACCIDENTAL FALL..... | 4 |
| | HIT OR CUT BY FLYING OBJECT..... | 5 |
| | SWIMMING, BOATING, OTHER NEAR DROWNING | 6 |
| | FIRE/BURN/SCALD..... | 7 |
| | ACCIDENTAL POISONING | 8 |
| | SPORTS-RELATED..... | 9 |
| | OTHER | 91 |
| | REFUSED..... | -7 |
| | DON'T KNOW..... | -8 |

QT03_25 About how often do you wear a helmet when riding a bicycle? Would you say...
 ¿Con qué frecuencia usa casco cuando usted anda en bicicleta? ¿Diría usted...

- | | | |
|-------|--------------------------|----|
| [TC6] | Always..... | 1 |
| | Simpre..... | 1 |
| | Usually, | 2 |
| | Usualmente..... | 2 |
| | Sometimes, or..... | 3 |
| | Algunas veces, o..... | 3 |
| | Never? | 4 |
| | Nunca?..... | 4 |
| | DOESN'T RIDE BIKES | 5 |
| | REFUSED..... | -7 |
| | DON'T KNOW..... | -8 |

PROGRAMMING NOTE QT03_26:
IF TEENAGE > 15, CATI DISPLAY {“or driving”}; ELSE IF TEENAGE 15 OR <15, DO NOT DISPLAY “or driving.”

QT03_26 How often do you use a seatbelt when riding (or driving) in a car? Would you say

- [TC6A] Always..... 1
- Usually, 2
- Sometimes, or 3
- Never? 4
- DOESN'T RIDE IN/ CAR..... 5
- REFUSED-7
- DON'T KNOW-8

QT03_27 Have you ever ridden in a car or other vehicle with a driver who has been drinking alcohol?

- [TC7] YES..... 1
- NO..... 2
- REFUSED-7
- DON'T KNOW-8

QT03_28 Thinking about your neighborhood, is there a park, playground, or open space within walking distance of your home?
¿Hay algún parque, patio de recreo, o espacio abierto adonde usted pueda llegar caminando desde su casa?

- [TC42] YES..... 1
- NO..... 2 **[GO TO QT03_31]**
- REFUSED-7 **[GO TO QT03_31]**
- DON'T KNOW-8 **[GO TO QT03_31]**

QT03_29 Do you strongly agree, agree, disagree or strongly disagree with the following statements:
Dígame si está totalmente de acuerdo, de acuerdo, en desacuerdo o totalmente en desacuerdo con las siguientes declaraciones.

The park or playground closest to where I live is safe during the day.
El parque o patio de recreo más cercano a donde yo vivo es seguro durante el día.

[IF NEEDED, SAY: “Do you strongly agree, agree, disagree or strongly disagree?”]
[IF NEEDED, SAY: “¿Está totalmente de acuerdo, de acuerdo, en desacuerdo, o totalmente en desacuerdo?”]

- [TC25] STRONGLY AGREE..... 1
- AGREE 2
- DISAGREE 3
- STRONGLY DISAGREE 4
- REFUSED-7
- DON'T KNOW-8

QT03_30 The park or playground closest to where I live is safe at night.
El parque o patio de recreo más cercano a donde yo vivo es seguro durante la noche.

[IF NEEDED, SAY: “Do you strongly agree, agree, disagree or strongly disagree?”]
[IF NEEDED, SAY: “¿Está totalmente de acuerdo, de acuerdo, en desacuerdo, o totalmente en desacuerdo?”]

- [TC26] STRONGLY AGREE..... 1
- AGREE 2
- DISAGREE 3
- STRONGLY DISAGREE 4
- REFUSED-7
- DON'T KNOW-8

QT03_31 Tell me how likely it is that your neighbors would do something about a kid spray-painting graffiti on a building in your neighborhood. Would you say ...

[IF NEEDED, SAY: "A "kid" is a child or adolescent. 'Do something' means they would stop or report the person."]

- [TC27] Very likely, 1
- Likely, 2
- Unlikely, or 3
- Very Unlikely? 4
- REFUSED -7
- DON'T KNOW -8

I'm now going to ask about the foods you ate yesterday.
 Ahora voy a hacer unas pocas preguntas sobre los alimentos que comió el día de ayer.

QT03_32 Yesterday, how many servings of fruit, such as an apple or banana did you eat?
 El día de ayer, ¿cuántas porciones de fruta, tal como manzanas o plátanos comió usted?

[IF NEEDED, SAY: "A serving is whatever it means to you."]
[IF NEEDED, SAY: "Una porción es lo que usted considera una porción."]

- [TE4] _____ SERVINGS [HR: 0-20; SR: 0-9]
- REFUSED -7
- DON'T KNOW -8

QT03_33 Yesterday, how many servings of vegetables, like corn, green beans, green salad, or other vegetables did you have?
 El día de ayer, ¿cuántas porciones de verduras tal como maíz, frijoles o ejotes verdes, ensalada de verduras, u otros vegetales comió?

- [TE6] _____ SERVINGS [HR: 0-20; SR: 0-4]
- REFUSED -7
- DON'T KNOW -8

QT03_34 Yesterday, how many glasses or cans of soda (such as Coke) or other sweetened drinks (such as fruit punch or Sunny Delight) did you drink? Do not count diet and sugar-free drinks.
 Ayer, ¿cuántos vasos o latas de soda con azúcar, como Coca Cola, bebió su hijo/a? No incluya la soda de dieta.

- [TC28] _____ GLASSES, CANS OR BOTTLES
- REFUSED -7
- DON'T KNOW -8

QT03_35 Does your school have sodas in vending machines for sale?

- [TC29] YES 1
- NO 2
- REFUSED -7
- DON'T KNOW -8

QT03_36 Yesterday, how many times did you eat fast food? Include fast food meals eaten at school, at home, or at fast-food restaurants, carryout or drive thru.
 Ayer, ¿cuántas veces comió comida rápida o "fast food"? Incluya comidas rápidas que comió en la escuela o en casa, en el restaurante de comida rápida compradas listas para llevar a casa o en el "drive thru".

[IF NEEDED, SAY: "Such as food you get at McDonald's, Burger King, or Taco Bell."]
[IF NEEDED, SAY: "Esta comida es como la que compra en el McDonald's, Burger King o Taco Bell."]

- [TC30] _____ TIMES [HR: 0-20; SR: 0-4]
- REFUSED -7
- DON'T KNOW -8

QT03_37 These next questions are about physical activity or exercise.
Las preguntas siguientes son acerca de actividad física.

In the past 7 days, did you do any physical activity for at least 20 minutes that made you sweat and breathe hard?
Durante los últimos 7 días, ¿hizo alguna actividad física por los menos 20 minutos que lo(a) hizo sudar ligeramente y aumentó su ritmo de respiración y corazón moderadamente?

[IF NEEDED, SAY: “Such as basketball, soccer, running, swimming laps, fast bicycling, fast dancing or similar aerobic activities. This includes school PE.”]

- [TE8] YES..... 1
- NO..... 2 [GO TO QT03_39]
- REFUSED.....-7 [GO TO QT03_39]
- DON'T KNOW.....-8 [GO TO QT03_39]

QT03_38 On how many of the past 7 days did you do this?
¿Cuántos de los 7 días hizo usted esto?

[IF NEEDED, SAY: “Do physical activity that made you sweat or breathe hard.”]

- [TE8A] _____ DAYS [HR: 0-7]
- REFUSED.....-7
- DON'T KNOW.....-8

QT03_39 Did you do any physical activity for at least half an hour that did not make you sweat or breath hard?

[IF NEEDED, SAY: “Such as walking, slow bicycling, skating, pushing a lawn mower or mopping floors. This is in the past 7 days.”]

- [TE9] YES..... 1
- NO..... 2 [GO TO QT03_41]
- REFUSED.....-7 [GO TO QT03_41]
- DON'T KNOW.....-8 [GO TO QT03_41]

QT03_40 On how many of the past 7 days did you do this?

[IF NEEDED, SAY: “Do physical activity for at least 30 minutes that did not make you sweat or breathe hard.”]

- [TE9A] _____ DAYS [HR: 0-7]
- REFUSED.....-7
- DON'T KNOW.....-8

QT03_41 In the past 7 days did you do exercises to strengthen or tone your muscles, such as push-ups, sit-ups, or weight lifting?

- [TE10] YES..... 1
- NO..... 2 [GO TO QT03_43]
- REFUSED.....-7 [GO TO QT03_43]
- DON'T KNOW.....-8 [GO TO QT03_43]

QT03_42 On how many of the past 7 days did you do this?

[IF NEEDED, SAY: “Do exercises to strengthen your muscles.”]

- [TE10A] _____ DAYS [HR: 0-7]
- REFUSED.....-7
- DON'T KNOW.....-8

PROGRAMMING NOTE QT03_43:
IF QT03_5B = 1 (YES, HOME SCHOOLING), SKIP TO TC03_45 (TC32); ELSE ASK QT03_43.

QT03_43 Does your school offer physical education or PE during the school day?

- [TC31] YES..... 1
- NO..... 2 [GO TO QT03_45]
- REFUSED.....-7 [GO TO QT03_45]
- DON'T KNOW.....-8 [GO TO QT03_45]

PROGRAMMING NOTE QT03_44:

IF IT IS SUMMER AND R IS NOT CURRENTLY IN SCHOOL, SAY: "If you don't know for this coming school year, tell me if you had to take PE last year."

QT03_44 Are you required to take PE?
 [TC32] YES..... 1
 NO..... 2
 REFUSED.....-7
 DON'T KNOW.....-8

QT03_45 About how tall are you without shoes?
 ¿Cuánto mide usted sin zapatos?

**[IF NEEDED, SAY: "Your best guess is fine."
 [IF NEEDED, SAY: "¿Más o menos cuánto mide?"]**

[TB2] _____ FEET _____ INCHES [FT HR: 3-7, IN HR: 0-11]
 _____ METERS _____ CENTIMETERS [M HR: 1-2, CM HR: 0-99]
 REFUSED.....-7
 DON'T KNOW.....-8

QT03_46 About how much do you weigh without shoes?
 ¿Y cuánto pesa sin zapatos?

[IF NEEDED, SAY: "Your best guess is fine."]

[TB3] _____ POUNDS [HR: 50-450]
 _____ KILOGRAMS [HR: 20-220]
 REFUSED.....-7
 DON'T KNOW.....-8

QT03_47 Would you say you are very underweight, slightly underweight, about the right weight, slightly overweight, or very overweight?
 ¿Diría que está muy bajo de peso, ligeramente bajo de peso, que su peso está bien, que tiene un poco de sobrepeso, o mucho sobrepeso?

**[IF NEEDED, SAY: "Compared to what you would like to be", AND REPEAT THE QUESTION.]
 [IF NEEDED, SAY: "¿Comparándome con quién?" SAY: "No dicen con quién," AND REPEAT THE QUESTION.]**

[TC33] VERY UNDERWEIGHT 1
 SLIGHTLY UNDERWEIGHT..... 2
 ABOUT THE RIGHT WEIGHT 3
 SLIGHTLY OVERWEIGHT 4
 VERY OVERWEIGHT 5
 REFUSED.....-7
 DON'T KNOW.....-8

PROGRAMMING NOTE TC27:

**IF QT03_47 NE 1, AND NE -7 (REFUSED) OR -8 (DON'T KNOW), DISPLAY "lose weight";
 IF QT03_47 NE 5, AND NE -7 (REFUSED) OR -8 (DON'T KNOW), DISPLAY "gain weight."**

QT03_48 Are you currently trying to {lose weight}, stay the same weight, {gain weight} or not do anything about your weight?
 Actualmente, ¿está tratando de bajar de peso, subir de peso, o no está haciendo nada respecto a su peso?

- [TC34] LOSE WEIGHT 1
- STAY THE SAME WEIGHT 2
- GAIN WEIGHT 3 [GO TO QT03_53]
- NOT DO ANYTHING 4 [GO TO QT03_53]
- REFUSED -7 [GO TO QT03_53]
- DON'T KNOW -8 [GO TO QT03_53]

PROGRAMMING NOTE QT03_49:
 IF QT03_48=1 (LOSE WEIGHT), DISPLAY “lose weight”. IF QT03_48=2 (STAY THE SAME WEIGHT), DISPLAY “keep from gaining weight”.

QT03_49 In the past 7 days, did you diet?
 En los últimos 7 días, ¿se puso a dieta para bajar de peso o evitar subir de peso?

[IF NEEDED, SAY “to {lose weight} {keep from gaining weight}?”

- [TC35] YES 1
- NO 2
- REFUSED -7
- DON'T KNOW -8

QT03_50 Did you exercise?
 ¿Hizo ejercicio?

[IF NEEDED, SAY: In the past 7 days to {lose weight} {keep from gaining weight}].
[IF NEEDED, SAY: En los últimos 7 días para bajar de peso o evitar subir de peso].

- [TC36] YES 1
- NO 2
- REFUSED -7
- DON'T KNOW -8

QT03_51 Did you do anything else?
 ¿Hizo alguna otra cosa?

[IF NEEDED, SAY: In the past 7 days to {lose weight} {keep from gaining weight}].
[IF NEEDED, SAY: En los últimos 7 días para bajar de peso o evitar subir de peso].

- [TC37] YES 1
- NO 2 [SKIP TO QT03_53]
- REFUSED -7 [SKIP TO QT03_53]
- DON'T KNOW -8 [SKIP TO QT03_53]

QT03_52 What else did you do?
 ¿Qué hizo?

[IF NEEDED, SAY: In the past 7 days to {lose weight} {keep from gaining weight}

[TC37A] **SPECIFY:** _____.

QT03_53 The next questions are about smoking and drinking.
 Have you ever smoked cigarettes, even 1 or 2 puffs?

- [TC38] YES 1
- NO 2 [GO TO QT03_58]
- REFUSED -7 [GO TO QT03_58]
- DON'T KNOW -8 [GO TO QT03_58]

QT03_54 How old were you when you smoked your first cigarette?

- [TE18] _____ AGE [HR: 1-17; SR: 6-17]
- REFUSED -7
- DON'T KNOW -8

QT03_55 Have you ever smoked cigarettes regularly, that is, at least 1 cigarette every day for 30 days?

- [TE17] YES..... 1
 NO.....2
 REFUSED.....-7
 DON'T KNOW.....-8

QT03_56 In the past 30 days, on how many days did you smoke cigarettes?

- [TE19] NONE..... 0 [GO TO QT03_58]
 1 OR 2 DAYS..... 1
 3-5 DAYS.....2
 6-9 DAYS.....3
 10-19 DAYS.....4
 20-29 DAYS.....5
 30 DAYS.....6
 REFUSED.....-7
 DON'T KNOW.....-8

QT03_57 In the past 30 days, when you smoked, about how many cigarettes did you smoke per day?
 En los últimos 30 días, ¿cuántos cigarrillos fumó al día?

[IF NEEDED, SAY: "On the days you smoked?"]
 [IF NEEDED, SAY: "En los días que sí fumó."]
 [IF NEEDED, SAY: "On average"]

- [TE20] _____NUMBER OF CIGARETTES
 REFUSED.....-7
 DON'T KNOW.....-8

QT03_58 Did you ever have more than a few sips of any alcoholic drink, like beer, wine, mixed drinks, or liquor?

- [TE22] YES..... 1
 NO.....2 [GO TO QT03_63]
 REFUSED.....-7 [GO TO QT03_63]
 DON'T KNOW.....-8 [GO TO QT03_63]

QT03_59 If we consider one drink to be a can or bottle of beer, a glass of wine, a shot of liquor, or one mixed drink, on how many days in the past 30 days did you have at least one drink of alcohol?
 Durante los últimos 30 días, ¿ha tomado por lo menos una copa de alguna bebida alcohólica tal como cerveza, vino, refrescos de vino ('wine coolers'), o licor?

- [TE23] NONE..... 0 [GO TO QT03_61]
 1 OR 2 DAYS..... 1
 3 - 5 DAYS.....2
 6 - 9 DAYS.....3
 10 - 19 DAYS.....4
 20 - 29 DAYS.....5
 30 DAYS.....6
 REFUSED.....-7 [GO TO QT03_61]
 DON'T KNOW.....-8 [GO TO QT03_61]

QT03_60 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?
 Tomando en cuenta todos los tipos de bebidas alcohólicas, durante los últimos 30 días, ¿más o menos cuántas veces tomó 5 o más copas en una ocasión?

- [TE24] NONE..... 0
- 1 DAY..... 1
- 2 DAYS..... 2
- 3 - 5 DAYS..... 3
- 6 - 9 DAYS..... 4
- 10 - 19 DAYS..... 5
- 20 DAYS OR MORE..... 6
- REFUSED.....-7
- DON'T KNOW.....-8

QT03_61 When you drink alcohol, about how many drinks do you usually have?
 En los días en los que usted tomó bebidas alcohólicas, ¿cuántas bebidas tomó en promedio?

- [TE25] LESS THAN ONE 1
- 1 - 2 DRINKS 2
- 3 - 4 DRINKS 3
- 5 OR MORE DRINKS 4
- REFUSED.....-7
- DON'T KNOW.....-8

PROGRAMMING NOTE TC40:
IF TEENAGE < 16, GO TO QT03_63;
ELSE CONTINUE WITH QT03_62.

QT03_62 Have you ever driven a car after you've been drinking?

- [TE26] YES..... 1
- NO..... 2
- REFUSED.....-7
- DON'T KNOW.....-8

QT03_63 Have you ever tried marijuana, cocaine, sniffing glue or any other drugs?

- [TE28] YES..... 1
- NO..... 2 [GO TO QT03_67]
- REFUSED.....-7 [GO TO QT03_67]
- DON'T KNOW.....-8 [GO TO QT03_67]

QT03_64 In the past 12 months have you used marijuana?

- [TC39] YES..... 1
- NO..... 2 [GO TO QT03_66]
- REFUSED.....-7 [GO TO QT03_66]
- DON'T KNOW.....-8 [GO TO QT03_66]

QT03_65 In the past 30 days, on how many days did you use marijuana?

- [TE29] NONE..... 0
- 1 DAY..... 1
- 2 DAYS..... 2
- 3-5 DAYS..... 3
- 6-9 DAYS..... 4
- 10-19 DAYS..... 5
- 20 DAYS OR MORE..... 6
- REFUSED.....-7
- DON'T KNOW.....-8

QT03_66 In the past 30 days, on how many days did you use drugs other than marijuana to get high?

[TC40]	NONE.....	0
	1 DAY.....	1
	2 DAYS.....	2
	3-5 DAYS.....	3
	6-9 DAYS.....	4
	10-19 DAYS.....	5
	20 DAYS OR MORE.....	6
	REFUSED.....	-7
	DON'T KNOW.....	-8

QT03_67 Have you ever used steroids in order to build muscle?

[TC41]	YES.....	1
	NO.....	2 [GO TO QT03_69]
	REFUSED.....	-7 [GO TO QT03_69]
	DON'T KNOW.....	-8 [GO TO QT03_69]

Section D – Emotional Functioning

QT03_69

The next questions are about your feelings.

In the past 7 days, were the following things true for you: “none of the time, sometimes, a lot of the time, or most of the time”? You enjoyed life.

- [TD6]
- NEVER..... 1
 - SOMETIMES 2
 - A LOT OF THE TIME 3
 - MOST OF THE TIME 4
 - REFUSED.....-7
 - DON'T KNOW-8

QT03_70

[In the past 7 days,] You felt that you could not shake off feeling sad and unhappy, even with help from your family and your friends?

[IF NEEDED, SAY: “Shake off feeling sad and unhappy’ is the same as stop feeling sad and unhappy.’ In the past 7 days, was that never, sometimes, a lot of the time or most of the time true for you?”]

- [TD7]
- NEVER..... 1
 - SOMETIMES.....2
 - A LOT OF THE TIME3
 - MOST OF THE TIME4
 - REFUSED.....-7
 - DON'T KNOW-8

QT03_71

[In the past 7 days] You felt depressed?

[IF NEEDED, SAY: “Never, sometimes, a lot of the time or most of the time true?”]

- [TD8]
- NEVER..... 1
 - SOMETIMES 2
 - A LOT OF THE TIME 3
 - MOST OF THE TIME 4
 - REFUSED.....-7
 - DON'T KNOW-8

QT03_72

[In the past 7 days] You were happy.

- [TD9]
- NEVER..... 1
 - SOMETIMES 2
 - A LOT OF THE TIME 3
 - MOST OF THE TIME 4
 - REFUSED.....-7
 - DON'T KNOW-8

QT03_73

[In the past 7 days] You felt lonely.

- [TD10]
- NEVER..... 1
 - SOMETIMES 2
 - A LOT OF THE TIME 3
 - MOST OF THE TIME 4
 - REFUSED.....-7
 - DON'T KNOW-8

QT03_74

[In the past 7 days] You felt your life was a failure.

- [TD11]
- NEVER..... 1
 - SOMETIMES 2
 - A LOT OF THE TIME 3
 - MOST OF THE TIME 4
 - REFUSED.....-7
 - DON'T KNOW-8

QT03_75

[In the past 7 days] You felt sad.

[TD12]	NEVER.....	1
	SOMETIMES	2
	A LOT OF THE TIME	3
	MOST OF THE TIME	4
	REFUSED.....	-7
	DON'T KNOW	-8

QT03_76

[In the past 7 days] You did not want to do the things you usually do.

[TD13]	NEVER.....	1
	SOMETIMES	2
	A LOT OF THE TIME	3
	MOST OF THE TIME	4
	REFUSED.....	-7
	DON'T KNOW	-8

Section E – Sexual Behaviors

**PROGRAMMING NOTE SECTION E:
IF PARENT/GUARDIAN DID NOT ALLOW RESPONDENT TO ANSWER SEXUAL BEHAVIOR QUESTIONS,
GO TO [QT03_91](#); ELSE CONTINUE WITH [QT03_77](#).**

The next section is about sexual behaviors. All answers will be kept private and you can refuse to answer any question. We are asking everyone these questions.

Estamos hacienda algunas preguntas sobre las experiencias sexuales de las personas. Todas las respuestas se mantendrán privadas.

QT03_77 Have you ever had sexual intercourse?
¿Ha tenido relaciones sexuales?

[TE32] YES..... 1
NO..... 2
REFUSED.....-7
DON'T KNOW.....-8

**PROGRAMMING NOTE SECTION QT03_78:
IF QT03_77=2, -7, -8 AND RESPONDENT IS MALE OR FEMALE LESS THAN 14 YEARS OF AGE, THEN SKIP TO QT03_91;
IF QT03_77=2, -7, -8 AND RESPONDENT IS FEMALE AND 14 OR OLDER, THEN SKIP TO QT03_87**

QT03_78 How old were you when you had sexual intercourse for the first time?
¿Cuántos años tenía usted cuando tuvo relaciones sexuales por la primera vez?

[TE33] _____ YEARS OLD [HR: 1-17; SR: 10-17]
REFUSED.....-7
DON'T KNOW.....-8

QT03_79 The first time you had sexual intercourse did you or your partner use a method to prevent pregnancy or disease?

[TE34] YES..... 1
NO..... 2 [GO TO QT03_81]
REFUSED.....-7 [GO TO QT03_81]
DON'T KNOW.....-8 [GO TO QT03_81]

QT03_80 What method did you use? You can tell me, or I can read from a list and you can just answer yes or no.
Do you want to tell me or shall I read from my list?

[TE35] A CONDOM OR RUBBER..... 1
LUNELLE/DEPO PROVERA OR THE SHOT..... 2
NORPLANT..... 3
THE PILL..... 4
RHYTHM METHOD..... 5
SUPPOSITORY OR AN INSERT..... 6
WITHDRAWAL OR PULLING OUT..... 7
SOME OTHER METHOD..... 91
REFUSED.....-7
DON'T KNOW.....-8

QT03_81 In the past 3 months, with how many different people did you have sexual intercourse?
En los últimos 3 meses, ¿con cuántas diferentes personas tuvo relaciones sexuales usted?

[TE36] _____ PERSON/PEOPLE [HR: 0-90; SR: 0-10]
REFUSED.....-7
DON'T KNOW.....-8

QT03_82 The last time you had sexual intercourse, did you or your partner use a method to prevent pregnancy or disease?

- [TE37] YES..... 1
- NO..... 2 **[GO TO QT03_84]**
- REFUSED.....-7 **[GO TO QT03_84]**
- DON'T KNOW.....-8 **[GO TO QT03_84]**

QT03_83 What method did you use? Do you want to tell me or shall I read from my list?

- [TE38] A CONDOM OR RUBBER 1
- LUNELLE/DEPO PROVERA OR THE SHOT 2
- NORPLANT 3
- THE PILL 4
- RHYTHM METHOD 5
- SUPPOSITORY OR AN INSERT..... 6
- WITHDRAWAL OR PULLING OUT 7
- SOME OTHER METHOD 91
- REFUSED.....-7
- DON'T KNOW-8

PROGRAMMING NOTE QT03_84:
IF TA3 = 1 (MALE), DISPLAY "Have you ever gotten someone";
ELSE IF TA3 = 2 (FEMALE), DISPLAY "Have you ever been"

QT03_84 {Have you ever gotten someone}{Have you ever been} pregnant?

- [TE39] YES..... 1
- NO 2
- REFUSED.....-7
- DON'T KNOW.....-8

QT03_85 In the past year have you received birth control counseling or services?

- [TE42] YES..... 1
- NO..... 2
- REFUSED.....-7
- DON'T KNOW.....-8

QT03_86 In the past year have you been tested for a sexually transmitted disease or AIDS?

- [TE43] YES..... 1
- NO..... 2
- REFUSED.....-7
- DON'T KNOW.....-8

PROGRAMMING NOTE QT03_87:
IF QT03_4 = 1 (MALE), GO TO QT03_91;
ELSE IF QT03_4 = 2 (FEMALE), CONTINUE WITH QT03_87.

QT03_87 Have you heard of RU486, also known as the "abortion pill"?
 ¿Ha oído hablar alguna vez de la RU486, conocida también como la "píldora para abortar"?

- [TE45] YES..... 1
- NO..... 2
- REFUSED.....-7
- DON'T KNOW.....-8

QT03_88 Have you heard of emergency contraception or the “morning after pill?”
 ¿Ha oído hablar alguna vez del anticonceptivo de emergencia o la “píldora de la mañana siguiente”? También conocida en inglés como la “morning after pill.”

- [TE46] YES..... 1
 NO.....2 [GO TO QT03_91]
 REFUSED.....-7 [GO TO QT03_91]
 DON'T KNOW-8 [GO TO QT03_91]

QT03_89 Is the following statement true or false?
 ¿Es la siguiente declaración verdadera o falsa?

Women and teens in California can get emergency contraception pills by going to a pharmacist in a drug store without phoning or seeing a doctor first.
 ¿Cree usted que puede obtener el anticonceptivo de emergencia, llamado también la “píldora de la mañana siguiente,” sin receta en una farmacia, sin necesidad de telefonar o visitar a un doctor?

- [TE47] TRUE 1
 FALSE..... 2
 REFUSED.....-7
 DON'T KNOW-8

PROGRAMMING NOTE QT03_90:
IF QT03_77 = 1 (NEVER HAD SEXUAL INTERCOURSE), SKIP TO QT03_91

QT03_90 In the past 12 months, have you used emergency contraception pills or the “morning after pill”?
 En los últimos 12 meses, ¿ha usado la píldora anticonceptiva de emergencia o “píldora de la mañana siguiente” también conocida en inglés como la “morning after pill”?

[IF NEEDED, SAY: “Emergency contraception, also known as the “morning after pill”, contains the same medication of regular birth control pills and can prevent pregnancy if taken within 72 hours of unprotected sex or contraceptive failure. It is not RU486, also known as the “abortion pill.”]
[IF NEEDED, SAY: “El anticonceptivo de emergencia, conocido también como “píldora de la mañana siguiente,” contiene el mismo medicamento que las píldoras anticonceptivas y puede prevenir el embarazo si se toma dentro de 72 horas después de haber tenido relaciones sexuales sin protección o de haber fallado el sistema anticonceptivo. No es la RU486, conocida también como píldora para abortar.”]

- [TE48] YES..... 1
 NO.....2
 REFUSED.....-7
 DON'T KNOW-8

Section F – Health Care Utilization and Access, Dental Health

These next questions are about your health care.

Las siguientes preguntas están relacionadas con el seguro de salud y el cuidado de la salud.

QT03_91 Is there a place you usually go to when you are sick or need advice about your health?
 ¿Hay algún lugar al que usted va normalmente cuando está enfermo/a o necesita consejos sobre su salud?

- [TF1] YES..... 1
- NO 2 [GO TO QT03_93]
- DOCTOR/MY DOCTOR..... 3
- KAISER..... 4
- MORE THAN ONE PLACE 5
- REFUSED.....-7 [GO TO QT03_93]
- DON'T KNOW-8 [GO TO QT03_93]

PROGRAMMING NOTE TF2:
IF QT03_91 = 4 (KAISER), FILL QT03_92 = 1 AND GO TO QT03_93;
ELSE IF QT03_91 = 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".

QT03_92 {Is your doctor in a private/What kind of place do you go to most often -- a medical} doctor's office, a clinic or hospital clinic, a hospital emergency room, or some other place?

¿A qué tipo de lugar va usted con más frecuencia-al consultorio de un médico, una clínica o clínica de un hospital, una sala de emergencias o algún otro lugar?

- [TF2] DOCTOR'S OFFICE/KAISER/OTHER HMO 1
- CLINIC/HEALTH CENTER/HOSPITAL CLINIC 2
- EMERGENCY ROOM..... 3
- SOME OTHER PLACE (SPECIFY): _____ 91
- NO ONE PLACE 94
- REFUSED.....-7
- DON'T KNOW-8

QT03_93 During the past 12 months, did you visit a hospital emergency room for your own health?
 Durante los últimos 12 meses, ¿cuántas veces fue a la sala de emergencias de un hospital debido a su propia salud?

- [TF3] YES..... 1
- NO 2
- REFUSED.....-7
- DON'T KNOW-8

QT03_94 During the past 12 months, how many times have you seen a medical doctor?
 Durante los últimos 12 meses, ¿cuántas veces ha visto a un médico?

- [TF16] _____ TIMES [RANGE: 0-365]
- REFUSED.....-7
- DON'T KNOW-8

QT03_95 When was the last time you saw a doctor for a physical exam or check-up?

- [TF5] LESS THAN 3 MONTHS AGO..... 1
- 3 MONTHS UP TO 6 MONTHS AGO 2
- 6 MONTHS UP TO 12 MONTHS AGO 3
- 12 MONTHS UP TO 2 YEARS AGO 4
- 2 OR MORE YEARS AGO 5 [GO TO QT03_111]
- HAVE NEVER HAD A PHYSICAL 0 [GO TO QT03_111]
- REFUSED.....-7 [GO TO QT03_111]
- DON'T KNOW-8 [GO TO QT03_111]

- QT03_96** Was this visit at Kaiser?
- [TF17] YES..... 1
 NO..... 2
 REFUSED..... -7
 DON'T KNOW..... -8
- QT03_97** The last time you saw a doctor, could you clearly understand your doctor's instructions?
- [TF18] YES..... 1 [GO TO QT03_101]
 NO..... 2
 REFUSED..... -7 [GO TO QT03_101]
 DON'T KNOW..... -8 [GO TO QT03_101]
- QT03_98** Was this because you and the doctor spoke different languages?
- [TF19] YES..... 1
 NO..... 2
 REFUSED..... -7
 DON'T KNOW..... -8
- QT03_99** Did you need someone else to help you understand the doctor?
- [TF20] YES..... 1
 NO..... 2 [GO TO QT03_101]
 REFUSED..... -7 [GO TO QT03_101]
 DON'T KNOW..... -8 [GO TO QT03_101]
- QT03_100** Who was this person who helped you understand the doctor?
- [TF21] MINOR CHILD (UNDER AGE 18)..... 1
 AN ADULT FAMILY MEMBER OR FRIEND OF MINE 2
 NON-MEDICAL OFFICE STAFF..... 3
 MEDICAL STAFF INCLUDING NURSES/DOCTORS 4
 PROFESSIONAL INTERPRETER (BOTH IN PERSON AND ON THE TELEPHONE) 5
 OTHER (PATIENTS, SOMEONE ELSE) 6
 DID NOT HAVE SOMEONE TO HELP 7
 REFUSED..... -7
 DON'T KNOW..... -8

PROGRAMMING NOTE QT03_101:
IF QT03_95=0, 5, -7, -8, GO TO QT03_111;
ELSE CONTINUE WITH QT03_101.

- QT03_101** When you had your last routine physical exam, did you and a doctor or other health care provider talk about cigarettes or smoking?
- [TF8] YES..... 1
 NO..... 2
 REFUSED..... -7
 DON'T KNOW..... -8
- QT03_102** ...about alcohol use?
- [TF8A] YES..... 1
 NO..... 2
 REFUSED..... -7
 DON'T KNOW..... -8

PROGRAMMING NOTE QT03_103:
IF PARENT/GUARDIAN DID NOT ALLOW RESPONDENT TO ANSWER DRUG USE QUESTIONS,
GO TO QT03_104;
ELSE CONTINUE WITH QT03_103.

QT03_103 ...about drug use?
 [TF8B] YES..... 1
 NO..... 2
 REFUSED.....-7
 DON'T KNOW.....-8

QT03_104 ...about seatbelt use?
 [TF8C] YES..... 1
 NO..... 2
 REFUSED.....-7
 DON'T KNOW.....-8

QT03_105 ...about helmet use?
 [TF8D] YES..... 1
 NO..... 2
 REFUSED.....-7
 DON'T KNOW.....-8

PROGRAMMING NOTE QT03_106:
IF PARENT/GUARDIAN DID NOT ALLOW RESPONDENT TO ANSWER SEXUAL HEALTH QUESTIONS,
GO TO QT03_107;
ELSE CONTINUE WITH QT03_106.

QT03_106 ...about sexually transmitted diseases or STDs, such as gonorrhea or chlamydia?
 [TF8E] YES..... 1
 NO..... 2
 REFUSED.....-7
 DON'T KNOW.....-8

QT03_107 ...about your emotions or moods?
 [TF8F] YES..... 1
 NO..... 2
 REFUSED.....-7
 DON'T KNOW.....-8

QT03_108 ...about violence or violence prevention?
 [TF8G] YES..... 1
 NO..... 2
 REFUSED.....-7
 DON'T KNOW.....-8

QT03_109 ...about exercise or physical activity?
 [TF8H] YES..... 1
 NO..... 2
 REFUSED.....-7
 DON'T KNOW.....-8

QT03_110 ...and finally, about nutrition or healthy eating?
 [TF8I] YES..... 1
 NO..... 2
 REFUSED.....-7
 DON'T KNOW.....-8

QT03_111 In the past 12 months, did you delay or not get any medical care you felt you needed?
[IF NEEDED, SAY: “Such as seeing a doctor, a specialist or other health professional?”]

[TF9] YES..... 1
 NO..... 2 **[GO TO QT03_113]**
 REFUSED.....-7 **[GO TO QT03_113]**
 DON'T KNOW-8 **[GO TO QT03_113]**

QT03_112 Was cost or lack of insurance a reason why you delayed or did not get the care you felt you needed?

[TF22] YES..... 1
 NO..... 2
 REFUSED.....-7
 DON'T KNOW-8

QT03_113 In the past 12 months, have you received any psychological or emotional counseling?

[TF11] YES..... 1
 NO..... 2
 REFUSED.....-7
 DON'T KNOW-8

PROGRAMMING NOTE QT03_114:
IF AGE ≤ 13, SKIP TO QT03_118

QT03_114 About how sure are you that you can make an appointment for your own health care without your family knowing. Would you say?

[IF NEEDED, SAY: “If you needed to make a confidential appointment on your own.”]

[TF23] Not at all sure..... 1
 Somewhat sure, or 2
 Very sure?..... 3
 REFUSED.....-7
 DON'T KNOW-8

QT03_115 About how sure are you that you can contact your doctor if you have questions or concerns about your health or safety. Would you say?

[TF12] Not all sure 1
 Somewhat sure, or 2
 Very sure? 3
 REFUSED.....-7
 DON'T KNOW-8

PROGRAMMING NOTE QT03_116:
IF QT03_77 = 1 (HAD SEXUAL INTERCOURSE), DO NOT DISPLAY “or if you are thinking about starting to have sex”; ELSE IF QT03_77 NE 1 THEN CATI DISPLAY ENTIRE QUESTION.

QT03_116 And ... talk to your doctor about sex {or if you are thinking about starting to have sex}. Would you say

[TF24] Not at all sure..... 1
 Somewhat sure, or 2
 Very sure? 3
 REFUSED.....-7
 DON'T KNOW-8

QT03_117 Do you know of a place, other than at the school nurse’s, where young people like you can go to see a doctor or other health provider without their parents knowing about it?

[TF13] YES..... 1
 NO..... 2
 REFUSED.....-7
 DON'T KNOW-8

QT03_118 About how long has it been since you last visited a dentist or a dental clinic? Include dental hygienists and all types of dental specialists.

- [TF14]
- LESS THAN 6 MONTHS AGO..... 1
 - 6 MONTHS UP TO 1 YEAR AGO..... 2
 - 1 YEAR UP TO 2 YEARS AGO 3
 - 2 YEARS UP TO 5 YEARS AGO..... 4
 - MORE THAN 5 YEARS AGO 5 [GO TO QT03_120]
 - HAVE NEVER VISITED 0 [GO TO QT03_120]
 - REFUSED.....-7
 - DON'T KNOW.....-8

QT03_119 Is there a particular dentist or place you usually go to for dental care?

- [TF25]
- YES..... 1
 - NO..... 2
 - REFUSED.....-7
 - DON'T KNOW.....-8

QT03_120 During the past 12 months, was there any time you needed dental care, but your family could not afford it?

- [TF26]
- YES 1
 - NO 2 [GO TO QT03_122]
 - REFUSED.....-7 [GO TO QT03_122]
 - DON'T KNOW-8 [GO TO QT03_122]

QT03_121 Did you need a check-up, or did you have a dental problem? ¿Necesitaba un chequeo, o tenía un problema dental?

- [TF27]
- CHECK-UP 1
 - PROBLEM 2
 - BOTH 3
 - REFUSED.....-7
 - DON'T KNOW-8

QT03_122 During the past 12 months, did you miss any school because of a dental problem? Do not count time missed for cleaning or a check-up.
 Durante los últimos 12 meses, ¿faltó algún día a la escuela debido a un problema dental? No cuente el tiempo que faltó para hacerse una limpieza o examen regular.

- [TF28]
- YES—TIME LOST FROM SCHOOL..... 1
 - NO 2 [GO TO QT03_124]
 - REFUSED.....-7 [GO TO QT03_124]
 - DON'T KNOW.....-8 [GO TO QT03_124]

QT03_123 How many days of school did you miss?
 ¿Cuántos días de escuela faltó?

- [TF29]
- _____ LESS THAN A DAY
 - _____ DAYS
 - REFUSED.....-7
 - DON'T KNOW.....-8

Section G – Interpersonal Violence

These next questions are about violence among young people.

QT03_124 In the past 12 months, about how many times did someone about your age threaten to hurt you or threaten to beat you up?

[TG1] _____ TIMES [HR: 0-365; SR: 0-20]
 REFUSED.....-7
 DON'T KNOW.....-8

QT03_125 In the past 12 months, how many times did you threaten to hurt someone or threaten to beat him or her up?

[TG2] _____ TIMES [HR: 0-365; SR: 0-20]
 REFUSED.....-7
 DON'T KNOW.....-8

QT03_126 In the past 12 months, about how many times were you actually in a physical fight with a guy or girl, or a group of people around your age?

[TG3] _____ TIMES [HR: 0-365; SR: 0-20]
 REFUSED.....-7
 DON'T KNOW.....-8

PROGRAMMING NOTE QT03_127:
IF QT03_126=0 (ZERO), GO TO QT03_129;
ELSE CONTINUE WITH QT03_127.

QT03_127 In the past 12 months, how many times did you start a physical fight with a guy or girl, or with people around your age?

[TG8] _____ TIMES [HR: 0-365; SR: 0-20]
 REFUSED.....-7
 DON'T KNOW.....-8

QT03_128 In the past 12 months, how many times were you in a physical fight with a guy or girl, or with people around your age, that someone else started?

[TG9] _____ TIMES [HR: 0-365; SR: 0-20]
 REFUSED.....-7
 DON'T KNOW.....-8

PROGRAMMING NOTE QT03_129:
IF TEENAGE > 13, CONTINUE WITH QT03_129;
ELSE GO TO QT03_132.

QT03_129 Have you ever been slapped, kicked or physically hurt by a boyfriend or girlfriend, someone you are romantically involved with, not just a friend?

[TG6] YES..... 1
 NO 2 [GO TO QT03_132]
 REFUSED.....-7 [GO TO QT03_132]
 DON'T KNOW.....-8 [GO TO QT03_132]

QT03_130 Has this happened at all in the past 12 months?

[TG7] YES..... 1
 NO..... 2 [GO TO QT03_132]
 REFUSED.....-7 [GO TO QT03_132]
 DON'T KNOW.....-8 [GO TO QT03_132]

QT03_131

Did you talk to anyone about what happened?

[TG10]

YES.....	1
NO.....	2
REFUSED.....	-7
DON'T KNOW.....	-8

Section H – Adult Supervision, Resiliency, and Role Models

These next questions are about your parents.

QT03_132 Are your parents

[TH1]	Married to each other,	1	
	Divorced from each other,	2	[GO TO QT03_134]
	Separated from each other,	3	[GO TO QT03_134]
	Not married, but living with each other, or	4	
	Not married, and not living with each other?	5	[GO TO QT03_134]
	ONE PARENT DECEASED	6	[GO TO QT03_134]
	BOTH PARENTS DECEASED	7	[GO TO QT03_134]
	OTHER	91	
	REFUSED	-7	
	DON'T KNOW	-8	

QT03_133 Do you live with both your parents in the same house or apartment?

[TH2]	YES	1
	NO	2
	REFUSED	-7
	DON'T KNOW	-8

QT03_134 About how often is there an adult around during your after-school hours? Would you say

[TH5]	Always,	1
	Most of the time,	2
	Some of the time,	3
	Almost never, or	4
	Never?	5
	REFUSED	-7
	DON'T KNOW	-8

PROGRAMMING NOTE FOR QT03_135:
IF QT03_132=7, CATI DISPLAY SHOULD HIGHLIGHT “guardians” AND NOT HIGHLIGHT “parents”; ELSE CATI SHOULD ONLY DISPLAY “parents”.

QT03_135 About how much do your parents {guardians} really know about where you go when you go out at night? Would you say, they know a lot, know a little or know nothing?

[TH6A]	KNOW A LOT	1
	KNOW A LITTLE	2
	KNOW NOTHING	3
	DOESN'T GO OUT AT NIGHT	4
	REFUSED	-7
	DON'T KNOW	-8

QT03_136 About how much do they know about what you do with your free time? Would you say, they know a lot, a little or nothing?

[TH6B]	KNOW A LOT	1
	KNOW A LITTLE	2
	KNOW NOTHING	3
	REFUSED	-7
	DON'T KNOW	-8

PROGRAMMING NOTE QT03_137:
IF QT03_5 = 1 or 2 (ATTENDING SCHOOL OR HOME SCHOOL), ADD {"after school"} TO CATI DISPLAY.

QT03_137 And ... how about where you are most afternoons {after school}? Would you say, they know a lot, a little or nothing?
 [TH6C] KNOW A LOT 1
 KNOW A LITTLE..... 2
 KNOW NOTHING 3
 REFUSED-7
 DON'T KNOW-8

How true do you feel the next statements are about your school and things you might do there: At my school, there is a teacher or some other adult...

QT03_138 Who really cares about me. Would you say this is
 [TH8] Not at all true..... 1
 A little true 2
 Pretty much true, or..... 3
 Very much true?..... 4
 REFUSED-7
 DON'T KNOW-8

QT03_139 Who notices when I'm not there. Is this
 [TH9] Not at all true..... 1
 A little true 2
 Pretty much true, or..... 3
 Very much true?..... 4
 REFUSED-7
 DON'T KNOW-8

QT03_140 Who listens to me when I have something to say. Is this...
 [TH10] Not at all true..... 1
 A little true 2
 Pretty much true, or..... 3
 Very much true?..... 4
 REFUSED-7
 DON'T KNOW-8

QT03_141 Who tells me when I do a good job. **[IF NEEDED, READ:]**
 [TH11] Not at all true..... 1
 A little true 2
 Pretty much true, or..... 3
 Very much true?..... 4
 REFUSED-7
 DON'T KNOW-8

QT03_142 Who always wants me to do my best. **[IF NEEDED, READ:]**
 [TH12] Not at all true..... 1
 A little true 2
 Pretty much true, or..... 3
 Very much true?..... 4
 REFUSED-7
 DON'T KNOW-8

QT03_143 Who notices when I'm in a bad mood. **[IF NEEDED, READ:]**

[TH13]	Not at all true.....	1
	A little true	2
	Pretty much true, or.....	3
	Very much true?.....	4
	REFUSED.....	-7
	DON'T KNOW	-8

How true are these statements about your home or the adults with whom you live?

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

QT03_144 Who cares about my schoolwork. Is this

[TH14]	Not at all true.....	1
	A little true	2
	Pretty much true, or.....	3
	Very much true?.....	4
	REFUSED.....	-7
	DON'T KNOW	-8

QT03_145 Who listens to me when I have something to say

[TH15]	Not at all true.....	1
	A little true	2
	Pretty much true, or.....	3
	Very much true?.....	4
	REFUSED.....	-7
	DON'T KNOW	-8

QT03_146 Who talks with me about my problems. **[IF NEEDED, READ:]**

[TH16]	Not at all true.....	1
	A little true	2
	Pretty much true, or.....	3
	Very much true?.....	4
	REFUSED.....	-7
	DON'T KNOW	-8

QT03_147 Who notices when I'm in a bad mood. **[IF NEEDED, READ:]**

[TH17]	Not at all true.....	1
	A little true	2
	Pretty much true, or.....	3
	Very much true?.....	4
	REFUSED.....	-7
	DON'T KNOW	-8

QT03_148 Who always wants me to do my best. **[IF NEEDED, READ:]**

[TH18]	Not at all true.....	1
	A little true	2
	Pretty much true, or.....	3
	Very much true?.....	4
	REFUSED.....	-7
	DON'T KNOW	-8

QT03_149 Who believes that I will be a success. **[IF NEEDED, READ:]**

[TH19]	Not at all true.....	1
	A little true	2
	Pretty much true, or.....	3
	Very much true?.....	4
	REFUSED.....	-7
	DON'T KNOW	-8

QT03_150 Who expects me to follow the rules. **[IF NEEDED, READ:]**

[TH20]	Not at all true.....	1
	A little true.....	2
	Pretty much true, or.....	3
	Very much true?.....	4
	REFUSED.....	-7
	DON'T KNOW.....	-8

QT03_151 In the past 12 months, have you done any volunteer work or community service?

[TH21]	YES.....	1
	NO.....	2
	REFUSED.....	-7
	DON'T KNOW.....	-8

QT03_152 Is there a person you know or have read about that you admire and would want to be like?

[TH22]	YES.....	1	
	NO.....	2	[GO TO QT03_156]
	REFUSED.....	-7	[GO TO QT03_156]
	DON'T KNOW.....	-8	[GO TO QT03_156]

QT03_153 Is this person a family member, an athlete, an entertainer, a teacher, a friend your own age, or someone else?

[TH23]	FAMILY MEMBER.....	1
	ATHLETE.....	2
	ENTERTAINER.....	3
	TEACHER.....	4
	FRIEND.....	5
	OTHER (SPECIFY:).....	91
	REFUSED.....	-7
	DON'T KNOW.....	-8

QT03_154 Is this person a male or female?

[TH24]	MALE.....	1
	FEMALE.....	2
	REFUSED.....	-7
	DON'T KNOW.....	-8

PROGRAMMING NOTE FOR TH24:
IF QT03_154=1 (MALE); CATI DISPLAY SHOULD HIGHLIGHT {"his"}; ELSE IF QT03_154=2 (FEMALE), CATI SHOULD DISPLAY {"her"}.

QT03_155 What is {his}/{her} race or ethnicity?

[TH25]	WHITE.....	1
	AFRICAN AMERICAN.....	2
	HISPANIC/LATINO.....	3
	ASIAN/ASIAN-AMERICAN.....	4
	PACIFIC ISLANDER.....	5
	AMERICAN INDIAN/ ALASKA NATIVE/NATIVEAMERICAN.....	6
	NATIVE HAWAIIAN.....	7
	OTHER /MULTI-ETHNIC (SPECIFY).....	91
	REFUSED.....	-7
	DON'T KNOW.....	-8

Section I –Demographic Information Part II, Future Plans

QT03_156

So we can be sure we have included all races and ethnic groups in California, I need to ask a few final questions about you. Are you Latino or Hispanic?

Para poder estar seguros de que hemos incluido todas las razas y grupos étnicos en California, necesito hacerle unas pocas preguntas finales acerca de su ascendencia. ¿Es usted de origen Latino o Hispano?

[IF NEEDED, SAY: "Such as Mexican or Central or South American?"]

[IF NEEDED, SAY: "Tal como Mexicano, Centroamericano/a, o Sudamericano/a."]

[TI1]

- YES..... 1
- NO..... 2 [GO TO QT03_158]
- REFUSED.....-7 [GO TO QT03_158]
- DON'T KNOW.....-8 [GO TO QT03_158]

QT03_157

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.

¿Y cuál es su ascendencia u origen Latino o Hispano? Por ejemplo, Mexicano, Salvadoreño, Cubano, Hondureño-y si tiene más de uno, dígamelos todos.

[TI1A]

- MEXICAN/MEXICANO..... 1
- MEXICAN AMERICAN..... 2
- CHICANO 3
- SALVADORAN 4
- GUATEMALAN 5
- COSTA RICAN 6
- HONDURAN 7
- NICARAGUAN 8
- PANAMANIAN 9
- PUERTO RICAN..... 10
- CUBAN 11
- SPANISH-AMERICAN (FROM SPAIN)..... 12
- OTHER LATINO (SPECIFY): _____ 91
- REFUSED.....-7
- DON'T KNOW.....-8

PROGRAMMING NOTE QT03_158:

IF QT03_156=1 (YES), CATI DISPLAY "You said you are Latino or Hispanic. Also..."

IF MORE THAN ONE RACE GIVEN, AFTER ENTERING RESPONSES FOR QT03_158, CONTINUE WITH PROGRAMMING NOTE QT03_160; ELSE GO TO SKIPS AS INDICATED FOR SINGLE RESPONSES.

QT03_158

{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?

Además, por favor dígame cuál o cuáles de los siguientes usaría usted para describirse a sí mismo(a). Se describiría como nativo(a) de Hawái o de otra isla del Pacífico, indígena Americano, nativo de Alaska, asiático(a), negro(a), africano americano, o blanco(a)?

[TI2]

- WHITE 1 [GO TO QT03_166 IF ONLY ONE RACE]
- BLACK OR AFRICAN AMERICAN 2 [GO TO QT03_166 IF ONLY ONE RACE]
- ASIAN 3 [GO TO QT03_163 IF ONLY ONE RACE]
- AMERICAN INDIAN, ALASKA NATIVE 4 [GO TO QT03_160 IF ONLY ONE RACE]
- OTHER PACIFIC ISLANDER..... 5 [GO TO QT03_164 IF ONLY ONE RACE]
- NATIVE HAWAIIAN 6 [GO TO QT03_166 IF ONLY ONE RACE]
- OTHER (SPECIFY): _____ 91 [GO TO QT03_166 IF ONLY ONE RACE]
- REFUSED.....-7 [GO TO QT03_166]
- DON'T KNOW.....-8 [GO TO QT03_166]

PROGRAMMING NOTE QT03_160:
IF QT03_158= 4 (AMERICAN INDIAN, ALASKA NATIVE), CONTINUE WITH QT03_160;
ELSE GO TO PROGRAMMING NOTE QT03_164.

QT03_160 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.
 Usted dijo indígena Americano(a) o nativo(a) de Alaska. ¿De qué tribu es descendiente? Si es de más de una tribu, dígamelas todas.

[TI2A]

- APACHE 1
- BLACKFEET 2
- CHEROKEE 3
- CHOCTAW 4
- NAVAJO..... 5
- POMO 6
- PUEBLO 7
- SIOUX..... 8
- YAQUI..... 9
- OTHER TRIBE [Ask for spelling] (SPECIFY):..... 91
- REFUSED-7
- DON'T KNOW-8

QT03_161 Are you an enrolled member in a federally or state recognized tribe?
 ¿Es usted miembro inscrito en una tribu reconocida por el estado o el gobierno federal?

[TI2B]

- YES..... 1
- NO..... 2 [GO TO PN QT03_164]
- REFUSED-7 [GO TO PN QT03_164]
- DON'T KNOW-8 [GO TO PN QT03_164]

QT03_162 Which tribe are you enrolled in? ¿En qué tribu está inscrito(a) usted?

[TI2C]

APACHE	
MESCALERO APACHE, NM	1
APACHE (NOT SPECIFIED)	2
OTHER APACHE [Ask for spelling] (SPECIFY):.....	3
BLACKFEET	
BLACKFEET	4
CHEROKEE	
WESTERN CHEROKEE	5
CHEROKEE (NOT SPECIFIED)	6
OTHER CHEROKEE [Ask for spelling] (SPECIFY)	7
CHOCTAW	
CHOCTAW OKLAHOMA	6
CHOCTAW (NOT SPECIFIED).....	7
OTHER CHOCTAW [Ask for spelling] (SPECIFY):	8
NAVAJO	
NAVAJO (NOT SPECIFIED).....	9
POMO	
HOPLAND BAND, HOPLAND RANCHERIA	10
SHERWOOD VALLEY RANCHERIA	11
POMO (NOT SPECIFIED)	12
OTHER POMO [Ask for spelling] (SPECIFY):.....	13
PUEBLO	
HOPI	14
YSLETA DEL SUR PUEBLO OF TEXAS.....	15
PUEBLO (NOT SPECIFIED).....	16
OTHER PUEBLO [Ask for spelling] (SPECIFY):	17
SIOUX	
OGLALA/PINE RIDGE SIOUX.....	18
SIOUX (NOT SPECIFIED)	19
OTHER SIOUX [Ask for spelling] (SPECIFY):	20
YAQUI	
PASCUA YAQUI TRIBE OF ARIZONA.....	21
YAQUI (NOT SPECIFIED)	22
OTHER YAQUI [Ask for spelling] (SPECIFY):	23
OTHER	
OTHER [Ask for spelling] (SPECIFY):	91
REFUSED.....	-7
DON'T KNOW	-8

PROGRAMMING NOTE QT03_163:
IF QT03_158 = 3 (ASIAN), CONTINUE WITH QT03_163;
ELSE GO TO PROGRAMMING NOTE QT03_164.

QT03_163 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.
 Usted dijo asiático(a), ¿y de qué grupo étnico específico es usted, tal como chino, filipino, o vietnamita? Si usted es más de un grupo, dígame los todos.

[TI2D]	BANGLADESHI	1
	BURMESE	2
	CAMBODIAN	3
	CHINESE	4
	FILIPINO	5
	HMONG	6
	INDIAN (INDIA)	7
	INDONESIAN	8
	JAPANESE	9
	KOREAN	10
	LAOTIAN	11
	MALAYSIAN	12
	PAKISTANI	13
	SRI LANKAN	14
	TAIWANESE	15
	THAI	16
	VIETNAMESE	17
	OTHER ASIAN (SPECIFY): _____	91
	REFUSED	-7
	DON'T KNOW	-8

PROGRAMMING NOTE QT03_164:
IF QT03_158 = 5 (PACIFIC ISLANDER), CONTINUE WITH QT03_164;
ELSE GO TO PROGRAMMING NOTE QT03_165.

QT03_164 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.
 Usted dijo que es de una isla del Pacífico. ¿De qué grupo étnico específico es usted, tal como samoano, tongano, o guamaniano? Si usted es de más de un grupo, dígame los todos.

[TI2D1]	SAMOAN/AMERICAN SAMOAN	1
	GUAMANIAN	2
	TONGAN	3
	FIJIAN	4
	OTHER PACIFIC ISLANDER (SPECIFY):	91

	REFUSED	-7
	DON'T KNOW	-8

PROGRAMMING NOTE QT03_165:

IF QT03_156 = 1 (YES, LATINO) AND [QT03_158= 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 QT03_165;

ELSE IF MULTIPLE RESPONSES TO QT03_158 OR QT03_163 OR QT03_164 [NOT COUNTING -7 OR -8 (REF/DK)], CONTINUE WITH QT03_165; ELSE GO TO QT03_166.

FOR QT03_157 RESPONSES, INCLUDE "Specify" RESPONSE FOR 91 (OTHER LATINO); IF QT03_156 = -7 (REFUSE), INSERT "Latino".

QT03_165 You said that you are {DISPLAY RESPONSES FROM TI2, TI3, TI7, TI8}. Of these, which do you most identify with?

[TI2E]	MEXICAN/MEXICANO.....	1
	MEXICAN AMERICAN.....	2
	CHICANO	3
	SALVADORAN	4
	GUATEMALAN	5
	COSTA RICAN	6
	HONDURAN	7
	NICARAGUAN.....	8
	PANAMANIAN	9
	PUERTO RICAN.....	10
	CUBAN	11
	SPANISH-AMERICAN (FROM SPAIN).....	12
	LATINO, OTHER SPECIFY	13
	LATINO.....	14
	NATIVE HAWAIIAN	16
	OTHER PACIFIC ISLANDER	17
	AMERICAN INDIAN OR ALASKA NATIVE	18
	ASIAN	19
	BLACK OR AFRICAN AMERICAN	20
	WHITE	21
	RACE, OTHER SPECIFY	22
	BANGLADESHI	30
	BURMESE	31
	CAMBODIAN	32
	CHINESE	33
	FILIPINO.....	34
	HMONG	35
	INDIAN (INDIA).....	36
	INDONESIAN.....	37
	JAPANESE	38
	KOREAN.....	39
	LAOTIAN.....	40
	MALAYSIAN	41
	PAKISTANI	42
	SRI LANKAN.....	43
	TAIWANESE.....	44
	THAI.....	45
	VIETNAMESE.....	46
	ASIAN, OTHER SPECIFY	49
	SAMOAN/AMERICAN SAMOAN	50
	GUAMANIAN	51
	TONGAN.....	52
	FIJIAN	53
	PACIFIC ISLANDER, OTHER SPECIFY	55
	BOTH/ALL/MULTIRACIAL	90
	NONE OF THESE.....	95
	REFUSED.....	-7
	DON'T KNOW	-8

QT03_166 In what country were you born?

[TI3]	UNITED STATES.....	1
	AMERICAN SAMOA.....	2
	CANADA.....	3
	CHINA.....	4
	EL SALVADOR.....	5
	ENGLAND.....	6
	FRANCE.....	7
	GERMANY.....	8
	GUAM.....	9
	GUATEMALA.....	10
	HUNGARY.....	11
	INDIA.....	12
	IRAN.....	13
	IRELAND.....	14
	ITALY.....	15
	JAPAN.....	16
	KOREA.....	17
	MEXICO.....	18
	PHILIPPINES.....	19
	POLAND.....	20
	PORTUGAL.....	21
	PUERTO RICO.....	22
	RUSSIA.....	23
	TAIWAN.....	24
	VIETNAM.....	25
	VIRGIN ISLANDS.....	26
	OTHER (SPECIFY):.....	91
	REFUSED.....	-7
	DON'T KNOW.....	-8

PROGRAMMING NOTE QT03_167:
IF QT03_166= 1, 2, 9, 22, or 26 (BORN IN USA or US TERRITORY), GO TO QT03_170;
ELSE, CONTINUE WITH QT03_167:

QT03_167 The next two questions are about citizenship and immigration status. Your answers are confidential and will not be reported to the INS. Are you a citizen of the United States?
 Las siguientes preguntas son acerca de la ciudadanía e inmigración. Sus respuestas son confidenciales y no se darán a conocer al Servicio de Inmigración y Naturalización o INS. ¿Es usted ciudadano(a) de los Estados Unidos?

[TI4]	YES.....	1	[GO TO QT03_169]
	NO.....	2	
	APPLICATION PENDING.....	3	
	REFUSED.....	-7	
	DON'T KNOW.....	-8	

QT03_168 Are you a permanent resident with a green card?
 ¿Es usted residente permanente con una tarjeta verde?

[TI5]	YES.....	1
	NO.....	2
	APPLICATION PENDING.....	3
	REFUSED.....	-7
	DON'T KNOW.....	-8

QT03_169 About how many years have you lived in the United States?
 Aproximadamente, ¿cuántos años ha vivido usted en Estados Unidos?

- [TI6] _____ NUMBER OF YEARS [HR: 0-17]
 {OR}
 _____ YEAR FIRST CAME TO LIVE IN U.S. HR: 1982-2000]
 REFUSED -7
 DON'T KNOW -8

QT03_170 What languages do you speak at home?
 ¿Qué idiomas habla usted en su hogar?

- [TI7] ENGLISH 1
 SPANISH 2
 CANTONESE..... 3
 VIETNAMESE 4
 TAGALOG 5
 MANDARIN..... 6
 KOREAN..... 7
 ASIAN INDIAN LANGUAGES 8
 RUSSIAN 9
 OTHER1 (SPECIFY): 91
 OTHER2 (SPECIFY): 92
 REFUSED -7
 DON'T KNOW -8

PROGRAMMING NOTE QT03_171:
 IF QT03_5 = 1, -7, OR -8 (CURRENTLY ATTENDING SCHOOL OR HOME SCHOOL OR WILL ATTEND SCHOOL IN THE FALL, OR REF/DK), CONTINUE WITH QT03_171; ELSE SKIP TO QT03_172.

QT03_171 And one last question, can you tell me what you plan to do after high school?

- [TI8] GO TO COLLEGE/UNIVERSITY 1
 GO TO JUNIOR COLLEGE/TECHNICAL SCHOOL 2
 GET A JOB 3
 GO IN MILITARY 4
 GET MARRIED 5
 HAVE BABIES 6
 OTHER PLAN 91
 REFUSED -7
 DON'T KNOW -8

QT03_172 Those are my final questions. I appreciate your patience. Finally, do you think you would be willing to do a follow-up to this survey sometime in the future?
 Esas son mis últimas preguntas. Le agradezco su paciencia. Finalmente, ¿estaría dispuesto/a a hacer una entrevista de seguimiento a esta encuesta en algún momento en el futuro?

- [TI10] YES..... 1
 MAYBE/PROBABLY YES 2
 DEFINITELY NOT 3
 REFUSED -7
 DON'T KNOW -8

CLOSE Thank you. I appreciate your time and cooperation. You have helped with a very important health survey. Thank you and goodbye.

Gracias, esas eran mis últimas preguntas. Le agradezco enormemente el tiempo que me ha brindado y su cooperación. Usted ha colaborado en una encuesta muy importante sobre la salud. Gracias y hasta luego.

[TI9]

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

- A PARENT WAS LISTENING ON AN EXTENSION 1
 A PARENT WAS IN THE ROOM LISTENING 2
 OR NEITHER 3
 DON'T KNOW 8

[END]