

CHIS 2003 Adult Questionnaire (Chinese)

(Respondents Age 18 and Older)

Version 11.2 December 20, 2012

Collaborating Agencies:

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

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CHIS 2003 Adult Survey

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 2005 Data Dictionaries for additional information on variables, the population universe answering a specific question, and data file content.

Section A - Demographic Information, Part I

PROGRAMMIN	NG NOTE QA05_A1:		
SET AADATE	= CURRENT DATE (YY'	YYMMDD)	
Age		,	
	Martin con data of him	11-0	
QA05_A1	What is your date of bir	tn?	
	你的出生日期是?		
AA1			
AAI	14011711	DAY	
	MONTH	DAY YEAR [GO TO QA05_A5] [RANGE: 1-31] [RANGE: 1898-1985]	
	[RANGE: 1-12]	[RANGE: 1-31] [RANGE: 1898-1985]	
	REFUSED	7	
		8	
		7. JULY	
		8. AUGUST	
		9. SEPTEMBER	
	4. APRIL	10. OCTOBER	
	5. MAY	11. NOVEMBER	
		12. DECEMBER	
	o. oo	i. begember	
DDOCDAMMU	IC NOTE OAGE AG		
	NG NOTE QA05_A2:		
		NTINUE WITH QA05_A2;	
ELSE GO TO	QA05_A5		
QA05_A2	What month and year w	vere vou born?	
_	您在哪年哪月出生?	7	
AA1A			
	MONTH	YEAR [GO TO QA05_A5] [RANGE: 1898-1985]	
	[RANGE: 1-12]	[RANGE: 1898-1985]	
		7	
		8	
		7. JULY	
	1. 5ANOAN1	0 ALICHOT	
	2. FEDRUARI	8. AUGUST	
	3. MARCH	9. SEPTEMBER	
	4. APRIL	10. OCTOBER	
	5. MAY	11. NOVEMBER	
	6. JUNE	12. DECEMBER	
DROGRAMMIN	NG NOTE QA05 A3:		
		N CONTINUE WITH QA05_A3;	
		N CONTINUE WITH QAUS_AS,	
ELSE GO TO	AAna_Aa		
QA05_A3	What is your age, pleas	se?	
	請告訴我您的年齡		
A A 2			
AA2			
	YEARS (OF AGE [GO TO QA05_A5]	
	() 歲		
	REFUSED	7	
		-8	
	DOINT MINOW.		

	NG NOTE QA05_A4: 7 OR -8 (REF/DK) THEN CONTINUE WITH QA05_A4; QA05_A5
QA05_A4	Are you between 18 and 29, between 30 and 39, between 40 and 44, between 45 and 49, between 50 and 64, or 65 or older? 您的年齡是在 18 到 29 歲、 30 到 39 歲、 40 到 44 歲、 45 到 49 歲、 50 到 64 歲之間,還是在 65 歲或 65 歲以上?
AA2A	BETWEEN 18 AND 29 1 BETWEEN 30 AND 39 2 BETWEEN 40 AND 44 3 BETWEEN 45 AND 49 4 BETWEEN 50 AND 64 5 65 OR OLDER 6 REFUSED -7 DON'T KNOW -8
CALCULATE RELATED QU	QA05_A2, OR QA05_A3 = -7 OR -8 (REF/DK), THEN USE QA05_A4;
Gender QA05_A5	Are you male or female? 您是男性還是女性?
Ethnicity QA05_A6	MALE 1 FEMALE 2 REFUSED -7 DON'T KNOW -8 Are you Latino or Hispanic? 您是拉丁裔或西裔嗎?
AA4	YES

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QA05_A7

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.

您的拉丁裔或西裔祖先的來源地是什麼?例如墨西哥人、薩爾瓦多人、古巴人、 洪都拉斯人。如果有一個以上來源,請告訴我所有的來源。

AA5

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

MEXICAN/MEXICANO	
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 QA05_A8:

IF QA05_A6 = 1 (YES, LATINO/HISPANIC), DISPLAY "You said you are Latino or Hispanic. Also..." IF MORE THAN ONE RACE GIVEN, AFTER ENTERING RESPONSES FOR QA05_A8, CONTINUE WITH PROGRAMMING NOTE QA05_A9;

ELSE FOLLOW SKIPS AS INDICATED FOR SINGLE RESPONSES

Race

QA05_A8

{You said you are Latino or Hispanic. Also} please tell me which one <u>or more</u> 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?

另外,請告訴我您會使用以下哪一項#或幾項\來描述您自己。您認 為您是夏威夷土著人、其他太平洋群島人、美國印地安人、阿 拉斯加土著人、亞洲人、黑人、非裔美國人還是白人?

AA5A

[IF R GIVES ANOTHER RESPONSE YOU MUST SPECIFY WHAT IT IS]

[CODE ALL THAT APPLY]

WHITE	1	
BLACK OR AFRICAN AMERICAN	2	
ASIAN	3	[GO TO PN QA05_A14
AMERICAN INDIAN OR ALASKA NATIVE	4	IF ONLY ONE RACE
OTHER PACIFIC ISLANDER	5	_
NATIVE HAWAIIAN	6	
OTHER (SPECIFY):	91	
REFUSED		[GO TO QA05_A14]
DON'T KNOW		

PROGRAMMING NOTE QA05_A9:

IF QA05_A8 = 4 (AMERICAN INDIAN OR ALASKA NATIVE), CONTINUE WITH QA05_A9; ELSE GO TO PROGRAMMING NOTE QA05_A12

QA05 A9

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.

您說您是美洲印地安人或阿拉斯加原住民,您屬於哪一個部落?如果屬於一個以上部落,請告訴我所有這些部落。

AA5B

[CODE ALL THAT APPLY]

APACHE	1	
BLACKFOOT/BLACKFEET		
CHEROKEE	3	
CHOCTAW	4	
MEXICAN AMERICAN INDIAN	5	
NAVAJO	6	
POMO	7	
PUEBLO		
SIOUX	9	
YAQUI	10	
OTHER TRIBE [Ask for spelling] (SPECIFY):		91
REFUSED	7	
DON'T KNOW	8	

QA05_A10 Are you an enrolled member in a federally or state recognized tribe?

您是不是聯邦或州政府認可的部落的一名註冊成員?

AA5C

YES	1	
NO	2	
REFUSED	7 GO TO PN QA05_A	1121
DON'T KNOW	_l -	•

Which tribe are you enrolled in? 您在哪一個部落註冊? QA05_A11

AA5D

APACHE	
MESCALERO APACHE, NM	1
APACHE (NOT SPECIFIED)	
OTHER APACHE [Ask for spelling] (SPECIFY):	
BLACKFEET	•
BLACKFOOT/BLACKFEET	3
CHEROKEE	-
WESTERN CHEROKEE	4
CHEROKEE (NOT SPECIFIED)	
OTHER CHEROKEE [Ask for spelling] (SPECIFY)	
CHOCTAW	
CHOCTAW OKLAHOMA	.6
CHOCTAW (NOT SPECIFIED)	7
OTHER CHOCTAW [Ask for spelling] (SPECIFY):	93
NAVAJO	
NAVAJO (NOT SPECIFIED)	8.
POMO	
HOPLAND BAND, HOPLAND RANCHERIA	
SHERWOOD VALLEY RANCHERIA	10
POMO (NOT SPECIFIED)	11
OTHER POMO [Ask for spelling] (SPECIFY):	94
PUEBLO	
HOPI	
YSLETA DEL SUR PUEBLO OF TEXAS	
PUEBLO (NOT SPECIFIED)	
OTHER PUEBLO [Ask for spelling] (SPECIFY):	95
SIOUX	
OGLALA/PINE RIDGE SIOUX	
SIOUX (NOT SPECIFIED)	16
OTHER SIOUX [Ask for spelling] (SPECIFY):	96
YAQUI	
PASCUA YAQUI TRIBE OF ARIZONA	
YAQUI (NOT SPECIFIED)	18
OTHER YAQUI [Ask for spelling] (SPECIFY):	97
OTHER	
OTHER Made for an allie of (ODECLEV).	^^
OTHER [Ask for spelling] (SPECIFY):	
REFUSED	
DON'T KNOW	-ŏ

PROGRAMMING NOTE QA05_A12: IF QA05_A8= 3 (ASIAN) CONTINUE WITH QA05_A12; ELSE GO TO PROGRAMMING NOTE QA05_A13

QA05_A12 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.

您選擇了亞裔,您指的是哪一個具體族裔,例如華裔、菲律賓裔、越南裔? 如果您有一種以上族裔的血統,請全部告訴我。

AA5E

[CODE ALL THAT APPLY]

BANGLADESHI	1
BURMESE	2
CAMBODIAN	3
CHINESE	4
FILIPINO	5
HMONG	6
INDIAN (INDIA)	7
INDONESIAN	8
JAPANESE	
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 QA05 A13:

IF QA05_A8= 5 (OTHER PACIFIC ISLANDER), CONTINUE WITH QA05_A13; ELSE GO TO PROGRAMMING NOTE QA05_A14

QA05_A13 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.

您說您是太平洋群島人。您具體屬於哪一個種族團體,例如薩摩亞人、湯加人或關島人?如果您屬於一個以上種族團體,請告訴我所有的種族團體。

AA5E1

[CODE ALL THAT APPLY]

SAMOAN/AMERICAN SAMOAN	1
GUAMANIAN	2
TONGAN	3
FIJIAN	4
OTHER PACIFIC ISLANDER (SPECIFY):	91
REFUSED	
DON'T KNOW	_8

PROGRAMMING NOTE QA05 A14:

IF QA05_A6 = 1 (LATINO) AND [QA05_A8= 6 (NATIVE HAWAIIAN) OR QA05_A8= 5 (OTHER PACIFIC ISLANDER) OR QA05_A8= 4 (AMERICAN INDIAN OR ALASKA NATIVE) OR QA05_A8= 3 (ASIAN) OR QA05_A8= 2 (BLACK/AFRICAN AMERICAN) OR QA05_A8= 1 (WHITE) OR QA05_A8 = 91 (OTHER)], CONTINUE WITH QA05_A14;

ELSE IF MULTIPLE RESPONSES TO QA05_A8, QA05_A12, OR QA05_A13 [NOT COUNTING -7 OR -8 (REF/DK)] CONTINUE WITH QA05_A14;

ELSE GO TO QA05_A15

[NOTE: FOR QA05_A14 RESPONSES, INCLUDE "Specify" RESPONSE FOR 91 (OTHER LATINO); IF QA05_A7 = -7 (REFUSE), INSERT "Latino"]

IF QA05_A6 = 1 (YES, LATINO) AND ANY OF QA05_A7 = 1 THRU 12, DO NOT DISPLAY QA05_A14 = 14 (LATINO).

IF QA05_A8 = 5 (OTHER PACIFIC ISLANDER) AND QA05_A13 = 1 THRU 4, DO NOT DISPLAY QA05_A14 = 17 (OTHER PACIFIC ISLANDER).

IF QA05_A8= 3 (ASIAN) AND ANY OF QA05_A12 = 1 THRU 17, DO NOT SAY QA05_A14 = 19 (ASIAN)

QA05_A14 You said that you are: [INSERT MULTIPLE RESPONSES FROM AA5, AA5A, AA5E AND AA5E1]. Of these, which do you most identify with?

您選擇了: { } 在所有這些族裔中,您最認同的是哪一個族裔?

AA5F

[IF R UNABLE TO CHOOSE ONE, OFFER OPTION "BOTH/ALL/MULTIRACIAL"]

MEXICAN/MEXICANO	1
MEXICAN AMERICAN	2
CHICANO	
SALVADORAN	4
GUATEMALAN	
COSTA RICAN	6
HONDURAN	
NICARAGUAN	8
Panamanian	
PUERTO RICAN	10
CUBAN	
SPANISH-AMERICAN (FROM SPAIN)	
LATINO, OTHER SPECIFY	
LATINO	
NATIVE HAWAIIAN	
OTHER PACIFIC ISLANDER	
AMERICAN INDIAN OR ALASKA NATIVE	
ASIAN	19
BLACK OR AFRICAN AMERICAN	
WHITE	
RACE, OTHER SPECIFY	
BANGLADESHI	
BURMESE	
CAMBODIAN	
CHINESE	
FILIPINO	
HMONG	
INDIAN (INDIA)	
INDONESIAN	37

QA05_A14 CONTINUED...

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

Marital Status

QA05_A15

Are you now married, living with a partner in a marriage-like relationship, widowed, divorced, separated, or never married?

您現在是已婚、與伴侶像婚煙關係一樣同居、喪偶、離婚、分居還是從未結婚?

AH43

[IF R MENTIONS MORE THAN ONE, CODE THE LOWEST NUMBER THAT APPLIES]

MARRIED	1
LIVING WITH PARTNER	
WIDOWED	
DIVORCED	
SEPARATED	
NEVER MARRIED	6
REFUSED	7
DON'T KNOW	

Section B –Health Conditions

QA05_B1	These next questions are about your health.		
	Would you say that in general your health is excellent,		
	以下是有關您的健康的幾個問題。總體而言,您認為您	的健康制	弋況是極好、
	很好、較好、一般還是很差?		
AB1			
	EXCELLENT	1	
	VERY GOOD		
	GOOD	3	
	FAIR	4	
	POOR		
	REFUSED		
	DON'T KNOW	8-	
Asthma			
QA05_B2	Has a doctor ever told you that you have asthma?		
QA00_DZ	有沒有醫生告訴過您患有哮喘病?		
	万久万酉上口叭旭心心万字"叭"		
AB17			
	YES		
	NO	2	[GO TO QA05_B12]
	REFUSED		[GO TO QA05_B12]
	DON'T KNOW	8	[GO TO QA05_B12]
QA05_B3	Do you still have asthma?		
	您是否依然患有哮喘病?		
AB40			
	YES	1	
	NO		
	REFUSED	7	
	DON'T KNOW	8-	
QA05_B4	During the past 12 months, have you had an episode of	f asthma	or an asthma attack?
	在過去十二個月中,您是否曾經有過哮喘發作?		
AB41			
	YES	1	
	NO		
	REFUSED		
	DON'T KNOW		

IF QA05_B3= KNOW), GO 1	ING NOTE QA05_B5: = 2, -7, or –8 (NO, REFUSED, DON'T KNOW) <u>A</u> TO QA05_B7; NUE WITH QA05_B5	ND QA05_B4= 2, -7, or –8 (NO, REFUSED, DON'T
QA05_B5	During the <u>past 12 months</u> , how often have you wheezing, shortness of breath, chest tightness 在過去十二個月中,您每隔多久會出現哮喘動閥或粘痰?您認為是	s or phlegm? Would you say
AB19	Not at all根本沒有	
QA05_B6	DON'T KNOW During the <u>past 12 months</u> , have you had to verify because of <u>your</u> asthma? 在過去十二個月中,您是否曾經因哮喘前往醫	visit a hospital emergency room or urgent care clinic
AH13A	YES NOREFUSEDDON'T KNOW	2 7
QA05_B7	Are you now taking a <u>daily</u> medication to cont by a doctor? 您目前是否每天服用醫生開給您的或是醫生提	trol your asthma that was prescribed or given to you 供給您的控制哮喘的藥物?
AB18	used for quick relief."]	2 7

IF QA05_B3 = PROGRAMMI	ING NOTE QA05_B10 NUE WITH QA05_B8	QA05_B4 = 1 (YES, EPISODE IN LAST 12 MOS), GO TO
QA05_B8		
AB66	Not at all從未 Less than every month 每月不到一次 Every month 每月 每週,還是 Every day? 每天? REFUSED	
QA05_B9 AB67	During the past 12 months, have you because of your asthma? 在過去 12 個月中,您是否曾經由於意理診所就診? YES	
IF AAGE > 69	ING NOTE QA05_B10;) GO TO QA05_B11 NUE WITH QA05_B10	
QA05_B10		ny days of work did you miss due to asthma? 多少天沒有工作?
A D 40		

AB42

0-365 DAYS	
NOT WORKING	6
REFUSED	7
DON'T KNOW	_8

QA05_B11	Has a doctor or other health professional <u>ever given</u> you an asthma management plan? 是否曾經有醫生或其他健康專業人員為您制定過一項哮喘管理計劃?
AB43	[IF NEEDED, SAY: "An asthma management plan is a printed form that tells when to change the amount or type of medicine, when to call the doctor for advice, and when to go to the emergency room"] [IF NEEDED, SAY: "哮喘管理計劃是一份列印的表格,告訴您何時改變藥量或藥物類型、何時打電話向醫生洽詢、以 何時前往急診室就診。 [INCLUDE NURSES AND ASTHMA EDUCATORS]
	YES
QA05_B12	Has a doctor ever told you that you have a lung disease other than asthma, such as emphysema or COPD? 是否有醫生曾經告訴您,說您患有哮喘之外的肺病,例如肺氣腫或 COPD?
AB62	[IF NEEDED, SAY: "COPD means Chronic Obstructive Pulmonary Disease and is also known as Chronic Lower Respiratory Disease. Do not include Tuberculosis (TB)."] [IF NEEDED, SAY:"COPD 指慢性阻塞性肺病,亦稱為「慢性下呼吸道 疾病」。請勿包括結核病(TB)。"
	YES
IF QA05_A5 =	NG NOTE QA05_B13 2 (FEMALE), DISPLAY "Other than during pregnancy, has"; DISPLAY WITH "Has"
Diabetes QA05_B13	{Other than during pregnancy, has/Has} a doctor <u>ever</u> told you that you have diabetes or sugar diabetes? 是否有醫生曾經告訴您患有糖尿病?
AB22	YES
QA05_B14	How old were you when a doctor first told you that you have diabetes? 當醫生第一次告訴您患有糖尿病時,您的年齡多大?
AB23	AGE IN YEARS [HR: 1 THRU AAGE (OR 105 IF AAGE = -7)] REFUSED7 DON'T KNOW

QA05_B15	Were you told that you had Type 1 or Type 2 diabetes? 您是否被告知患有一類或二類糖尿病?
AB51	[IF NEEDED, SAY: "Type 1 diabetes results from the body's failure to produce insulin and is usually diagnosed in children and young adults. Type 2 diabetes results from insulin resistance and is the most common form of diabetes."] [IF NEEDED, SAY: "一類糖尿病是由於體內未產生足夠的胰島素而引起,常見於兒童和年輕人。二類糖尿病是由於抗胰島素作用而引起,是最常見的糖尿病類型。
	TYPE 1
QA05_B16	Are you now taking insulin? 您目前在使用胰島素嗎?
AB24	YES
QA05_B17	Do you now take diabetic pills to lower your blood sugar? 您目前在服用降血糖的糖尿病藥物嗎?
AB25	[IF NEEDED, SAY: "These are sometimes called oral agents or oral hypoglycemic agents."] [IF NEEDED, SAY: "有時稱作口服藥劑或口服降血糖藥劑。"]
	YES
QA05_B18	About how many times per day, per week, or per month do you or a family member or friend chec your blood for glucose or sugar? 您本人、您的家庭成員或朋友 每天、每週或每月大約幾次檢查您的血糖?
AB26	[FILL IN TIME FRAME ANSWERED]
	TIMES PER DAY

QA05_B19	About how many times in the last 12 months has a doctor checked you for hemoglobin "A one C"? 在過去 12 個月中,醫生約檢查過幾次您的血紅蛋白「A one C」?	
AB27	[IF R NEVER HEARD OF IT, ENTER 995.]	
	NUMBER OF TIMES [HR: 0-52, 995; SR: 0-25, 995] REFUSED	
QA05_B20	About how many times in the last 12 months has a doctor checked your feet for any sores or irritations? 在過去 12 個月中,醫生約檢查過幾次您的腳部是否有任何瘡或發炎?	
AB28	NUMBER OF TIMES [HR: 0-52; SR: 0-25] REFUSED7 DON'T KNOW8	
QA05_B21	When was the last time you had an eye exam in which the pupils were dilated? This would have made your eyes sensitive to bright light for a short time. 你最近一次接受瞳孔放大眼科檢查是什麼時間? 瞳孔放大會使您的眼睛 在短時間內對亮光敏感。	
AB63 High blood pre	WITHIN THE PAST MONTH	
QA05_B22	Has a doctor ever told you that you have high blood pressure? 有沒有醫生告訴過您患有高血壓?	
AB29	YES	
QA05_B23	Are you now taking any medications to control your high blood pressure? 您目前是否在服用任何控制高血壓的藥物?	
AB30	YES	

Cholesterol QA05_B24	About how long ago did you have your blood cholesterol checked? 您大約多久以前曾經接受血液膽固醇測試?	
AB35	[IF NEEDED, SAY: "Blood cholesterol is a fatty substance found in [IF NEEDED, SAY: ""血液膽固醇是血液中的脂肪物質。"]	the blood."]
	1 TO 12 MONTHS AGO	TO QA05_B26]
QA05_B25	The last time your cholesterol was checked, did a doctor tell you yo 您上一次接受膽固醇檢 查時,醫生是否告訴您膽固醇高?	ur blood cholesterol was high?
AB36	YES	
Heart Disease QA05_B26		
AB34	YES	GO TO PN QA05_B28]
QA05_B27	Has a doctor <u>ever</u> told you that you have heart failure or congestive 是否有醫生曾經告訴您患有心力衰竭或充血性心力衰竭?	heart failure?
AB52	YES	
Stroke QA05_B28	Has a doctor <u>ever</u> told you that you had a stroke? 是否曾經有醫生告訴過您患有中風?	
AC6	YES	

QAO5_B29	fibromyalgia?
	是否曾經有醫生告訴您,說您患有某種類型的關節炎、痛風、狼瘡或纖維肌痛?
AB64	YES1 NO2
	REFUSED7 DON'T KNOW8
Epilepsy QA05_B30	Has a doctor ever told you that you have seizure disorder or epilepsy? 是否有醫生曾經告訴您患有癲癇發作或癲癇病?
AB53	YES
QA05_B31	Are you now taking any medicine to control your seizure disorder or epilepsy? 您目前是否在服用任何控制癲癇發作或癲癇病的藥物?
AB54	YES
QA05_B32	How many seizures of any type have you had in the last three months? 在過去三個月中,您曾經有過幾次各類癲癇發作?
AB55	[IF R NORMALLY COUNTS "AURAS" AS SEIZURES, ACCEPT THE RESPONSE]
response. If a	N TO INTERVIEWER: If the respondent mentions and counts "auras" as seizures, accept the respondent indicates that he/she has had nothing more than an aura and is unsure about counting NOT count auras as seizures.] NO SEIZURES
	NO LONGER HAVE EPILEPSY/SD

QA05_B33	In the past 12 months, have you seen a neurologist or epilepsy specialist for your epilepsy or seizure disorder?
	在過去 12 個月中,您是否曾經因癲癇或癲癇發作去看過神經科或癲癇病 專科醫生?
AB65	YES1
	NO
QA05_B34	During the <u>past month</u> , to what extent has your epilepsy or its treatment interfered with normal activities like working, school, or getting together with family or friends? Would you say 在上個月中,您的癲癇病或其治療在何種程度上影響了您的正常活動 如工作、上學或與家人或朋友相聚? 您認為是
AB56	
Flu obot	Not at all 1 根本沒有影響 1 Slightly 2 略微有影響 2 Moderately 3 有些影響 3 Quite a bit or 4 影響較大, 還是 4 Extremely? 5 影響極大? 5 REFUSED -7 DON'T KNOW -8
Flu shot QA05_B35	During the past 12 months, have you had a flu shot? 在過去 12 個月中,您是否打過流感防疫針?
AE30	YES

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Section C - Health Behaviors

Walking for	r transportati	on and leisure
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QA05_C1 The next questions are about walking for transportation. Please only include walks that involved an errand or to get some place. I will ask you separately about walking for relaxation or exercise. 以下是有關以步代車的問題。請僅包括因辦事或去某個地方步行 的情況。我會另外向您提出有關因休閑或運動步行的問題。

During the past seven days, did you walk for at least ten minutes at a time to get some place such as work, school, a store, or restaurant?

在#過去七天\內,您是否一次#至少\步行#10分鐘\去某個地方,例如工作、學校、商店或餐館?

Δ	D37

YES1	
NO2	[GO TO QA05 C4]
UNABLE TO WALK3	
REFUSED7	[GO TO QA05 C4]
DON'T KNOW8	

QA05_C2 On how many days did you do this? 在過去七天內. 您曾經幾次這樣做?

AD38

DAYS PER WEEK	[IF 0, GO TO QA05_	C5]
REFUSED		[GO TO QA05_C4]
DON'T KNOW	8	[GO TO QA05 C4]

PROGRAMMING NOTE QA05 C3

IF QA05 C2 = 1 DO NOT DISPLAY "usually" and display "that day"

IF QA05_C2 > 1 OR QA05_C2= -7 OR -8 DISPLAY "usually" and "one of those days"

QA05_C3 How much time did you {usually} spend walking on {one of those days/that day}? 在那些日子裡,您通常每天步行多長時間?

AD39

HOURS F	PER DAY	
MINUTES	S PER DAY	
REFUSED		-7
ONIT KNOW		Q

PROGRAMMING NOTE QA05 C4

IF QA05_C1 = 1 [WALK FOR TRANS, DISPLAY "Please do not include any walking that you already told me about"

QA05_C4 Sometimes you may walk for fun, relaxation, exercise, or to walk the dog. During the past seven days did you walk for at least ten minutes at a time for any of these reasons? Please do not include any walking that you already told me about.

有時,您會為了娛樂、休閒、運動或溜狗而步行。在過去七天內,**您是 否曾經因任何此類原因一次至少**步行 **10** 分鐘?請勿包括您已經告訴 **我的**步行。

AD40

YES	1
	2 [GO TO QA05_C7]
	7 [GO TO QA05_C7]
DON'T KNOW	8 [GO TO QA05_C7]

QA05_C5	On how many days did you do this? 在過去七天內,您曾經幾次這樣做?	
AD41	DAYS PER WEEK [IF 0, GO TO QA05_C7]	
	REFUSED	
IF QA05_C5 = 1	NG NOTE QA05_C6 1 DO NOT DISPLAY "usually" and display "that day" 1 OR QA05_C5 = -7 OR -8 DISPLAY "usually" and "one of those days"	
QA05_C6	How much time did you (usually) spend walking on (one of those days/on that day)? 在那些日子裡,您通常每天步行多長時間?	
AD42	[IF NEEDED SAY: "For fun, relaxation, exercise or to walk the dog?"] [IF NEEDED SAY: "為了娛樂、休閒、運動或溜狗目的? "]	
Moderate and QA05_C7	—— HOURS PER DAY —— MINUTES PER DAY REFUSED	
AE26	During the last 7 days, did you do any moderate physical activities in your free time for at least minutes, other than walking? 在過去七天內,您是否在休息時間從事每次至少延續 10 分鐘的中等活動量的身體活動? 請勿包括步行。 [IF NEEDED SAY: "Moderate physical activities make you breathe somewhat harder than norm [IF NEEDED SAY: "中等活動量的身體活動使您的呼吸速度比正常情况 略快。"] [IF NEEDED SAY: "Think about only those physical activities that you did for at least 10 minutes a time."] [IF NEEDED SAY: "請僅考慮每次至少延續 10 分鐘的身體活動。"]	al."]
	YES	

QA05_C8	On how many days did you do this? 您有幾天這樣做?
AE27	DAYS PER WEEK [IF 0, GO TO QA05_C10] REFUSED7 [GO TO QA05_C10]
	DON'T KNOW8 [GO TO QA05_C10]
IF QA05_C8 =	NG NOTE QA05_C9 1 DO NOT DISPLAY "usually" AND DISPLAY "that day" 1 DISPLAY "usually" and "one of those days"
QA05_C9	How much time did you {usually} spend on {one of those days/that day} doing moderate physical activities in your free time? 在那些日子裡,您通常每天花多少時間在休息時間從事中等活動量的身體活動?
AE27A	[IF NEEDED SAY: "Think about only those physical activities that you did for at least 10 minutes at a time."] [IF NEEDED SAY: "請僅考慮每次至少延續 10 分鐘的身體活動。"]
	HOURS PER DAY MINUTES PER DAY
	REFUSED7 DON'T KNOW8
QA05_C10	Now think about <i>vigorous</i> activities you did in your free time that take hard physical effort, such as aerobics, running, soccer, fast bicycling, or fast swimming. Again, do not include walking. 現在,請想一想#您在休息時間從事的劇烈身體活動\,例如增氧健身操、跑步、英式足球、快速騎自行車或快速游泳。請勿包括步行。
	During the last 7 days, did you do any vigorous physical activities in your free time? 在過去七天內,您是否在休息時間從事過任何劇烈的身體活動?
AE24	[IF NEEDED SAY: "Vigorous activities make you breathe much harder than normal."] [IF NEEDED SAY: "劇烈的身體活動使您的呼吸速度比正常情況快得多。"]
	[IF NEEDED SAY: "Think about only those vigorous physical activities that you did for at least 10 minutes at a time."] [IF NEEDED SAY: "請僅考慮每次至少延續 10 分鐘的劇烈身體活動。"]
	YES

PROGRAMMING NOTE QA05 C12

IF QA05_C11 = 1 DO NOT DISPLAY "usually" and display "that day" IF QA05_C11 > 1 DISPLAY "usually" and "one of those days"

QA05_C12 How much time did you {usually} spend on {one of those days/on that day} doing vigorous physical activities in your free time?

在那些日子裡, 您通常每天花費多少時間在休息時間從事劇烈的身體活動?

AE25A

[IF NEEDED SAY: "Think about only those physical activities that you did for at least 10 minutes at a time."]

DON'T KNOW......-8 [GO TO QA05_C13]

[IF NEEDED SAY: "請僅考慮每次至少延續 10 分鐘的劇烈身體活動。"]

HOURS PER DAY MINUTES PER DAY	
REFUSED	7
DON'T KNOW	3-

QA05_C13 Now think about activities specifically designed to STRENGTHEN your muscles, such as lifting weights or other strength-building exercises. Include all such activities even if you have mentioned them before.

現在,請想一想專門設計用於#增強\肌肉的活動,例如舉重或其他增強力量的運動。請包括所有此類活動,即使您在前面已經提及亦請包括在內。

During the last 7 days, on how many days did you do activities to strengthen your muscles? 在過去七天內. 您有幾天做了增強肌肉的活動?

AC20

DAYS PER WEEK

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

Dietary Intake QA05_C14	Now think about <u>all</u> the foods you ate or drank during the past month, that is, the past 30 days, including meals and snacks. 現在,請想一想上個月,即過去的 30 天,您的所有食物或飲料,包括 正餐及點心。 During the past month, how many times per day, week or month did you eat fruit? Do not count juices. 在過去一個月中,您每天、每週或每個月吃幾次水果?請勿包括果汁。
	[IF NEEDED, SAY: "Your best guess is fine." "Include fruit mixed with other food, such as cereal or yogurt" [IF NEEDED, SAY: "大概估計的次數就可以。包括與其他食物,例如麥片或酸奶,混合在一起的水果。"]
	[IF R GIVES A NUMBER WITHOUT A TIME FRAME, ASK: "Was that per day, week or month?"] [IF R GIVES A NUMBER WITHOUT A TIME FRAME, ASK: "這是每天、每週還是每個月?"]
	PER DAY PER WEEK PER MONTH REFUSED7
	DON'T KNOW8
QA05_C15	During the past month, how many times per day, week or month did you eat green leafy or lettuce salad? 在過去一個月中,您每天、每週或每個月吃幾次綠葉菜或生菜沙拉?
AE6	[IF NEEDED, SAY: "Include spinach salads. Your best guess is fine."] [IF NEEDED, SAY: "請包括菠菜沙拉。大概估計的次數就可以。"]
	[IF R GIVES A NUMBER WITHOUT A TIME FRAME, ASK: "Was that per day, week or month?"] [IF R GIVES A NUMBER WITHOUT A TIME FRAME, ASK: ""這是每天、每週還是每個月? "]
	PER DAY PER WEEK PER MONTH
	REFUSED7 DON'T KNOW8

QA05_C16	During the past month, how many times did you eat French fries, home fries or hash browns? 在過去一個月中,您吃過幾次炸薯條或炸薯餅?
AE3	[IF NEEDED, SAY: "Exclude potato chips."] [IF NEEDED, SAY: "請勿包括炸薯片。"]
	[IF R GIVES A NUMBER WITHOUT A TIME FRAME, ASK: "Was that per day, week or month?" [IF R GIVES A NUMBER WITHOUT A TIME FRAME, ASK: "這是每天、每週還是每個月?"]
	PER DAY PER WEEK PER MONTH
	REFUSED7 DON'T KNOW8
QA05_C17	During the past month, how many times did you eat <i>other</i> white potatoes? 在過去一個月中,您吃過幾次#其他種類的\白馬鈴薯?
AE4	[IF NEEDED, SAY: "Do not include yams or sweet potatoes. Include red, yellow, purple, or brown-skinned potatoes."] [IF NEEDED, SAY: "請勿包括山芋或紅薯。請包括紅皮、黃皮、紫色皮 或棕色皮馬鈴薯。"]
	[DO NOT READ. FOR INTERVIEWER INFORMATION ONLY: THIS INCLUDES POTATOES PREPARED IN ANY FASHION SUCH AS MASHED, BAKED, OR BOILED. IT INCLUDES POTATOES PREPARED IN OTHER DISHES, SUCH AS POTATO SALAD. IT INCLUDES DIFFERENT COLORED POTATOES AS LONG AS THE INSIDE OF THE POTATO IS WHITE.]
	PER DAY PER WEEK PER MONTH
	REFUSED7 DON'T KNOW8
QA05_C18	During the past month, how many times did you eat cooked dried beans, such as refried beans, baked beans, or bean soup? Do not include green beans. 在過去一個月中,您吃過幾次煮干豆,例如炸豆蓉、烤豆或豆湯?請勿包括四季豆。
AE5	[IF NEEDED, SAY: "Include red, black, white, pinto, or soy beans or lentils cooked in the same way."] [IF NEEDED, SAY: "請包括以相同方式烹調的紅豆、黑豆、白豆、斑豆、黄豆或小扁豆。"]
	PER DAY PER WEEK PER MONTH
	REFUSED7 DON'T KNOW8

QA05_C19	During the past month, how many times did you eat any vegetables other than the foods you already told me about. 在過去一個月中,您吃過幾次其他蔬菜?請不要包括您已經告訴我的 食物。
AE7	[IF NEEDED, SAY: "Such as tomatoes, carrots, onions, bell peppers, zucchini, or broccoli."] [IF NEEDED, SAY: "例如番茄、胡蘿蔔、洋蔥、柿子椒、西葫蘆或綠花 椰菜。"]
	[IF STRONGLY NEEDED, SAY: "Rice is not a vegetable."] [IF STRONGLY NEEDED, SAY: "米飯不是蔬菜。"]
	PER DAY PER WEEK PER MONTH
	REFUSED7 DON'T KNOW8
QA05_C20	During the past month, how many times did you drink soda such as coke or 7-up? Do not include diet soda. 在過去一個月中,您喝過幾次可樂或七喜之類的汽水?請勿包括減肥 汽水。
AC11	[IF NEEDED, SAY: "Do not include canned or bottled juices or teas. Your best guess is fine."] [IF NEEDED, SAY: "請勿包括罐裝或瓶裝果汁或茶。給出最佳估計數字 即可。"]
	PER DAY PER WEEK PER MONTH
	REFUSED7 DON'T KNOW8
QA05_C21	During the past month, how many times did you drink 100% fruit juice such as orange or apple juice? 在過去一個月中,您喝過幾次純果汁,例如橙汁或蘋果汁?
AE1	[IF NEEDED, SAY: "Only include 100% fruit juices. Your best guess is fine."] "請僅包括純果汁。大概估計的次數就可以。"
	PER DAY PER WEEK PER MONTH
	REFUSED7 DON'T KNOW8

QA05_C22	During the past month, how many times did you drink fruit-flavored drinks such as lemonade, Sunny Delight, or Kool-aid? Do not include diet drinks.
	在過去一個月中,您曾經幾次喝果味飲料?例如檸檬汽水、Sunny Delight 或 Kool-aid?請勿包括減肥飲料。
AC12	[IF NEEDED, SAY: "Do not include yogurt drinks or mineral water."] [IF NEEDED, SAY: "請勿包括酸奶飲料或礦泉水。"]
	[DO NOT READ. FOR INTERVIEWER INFORMATION ONLY. THIS ALSO INCLUDES DRINKS SUCH AS: TAMPICO, HAWAIIAN PUNCH, CRANBERRY COCKTAIL, HI-C, SNAPPLE, , SUGAR CANE JUICE, GATORADE AND OTHER SPORTS DRINKS WITH ADDED SUGAR.]
	PER DAY PER WEEK PER MONTH
	REFUSED7 DON'T KNOW8
QA05_C23	During the past month, how many times did you eat cake, pie, brownies or cookies? Include low-fat kinds. 在過去一個月中,您曾經幾次吃蛋糕、甜餡餅、巧克力餅或甜餅?包括 低脂甜點。
AC13	[IF NEEDED, SAY: "Include ANY sweet pastries." "Do not include sugar-free kinds"] [IF NEEDED, SAY: "包括#任何\甜點。請勿包括無糖點心。"]
	PER DAY PER WEEK PER MONTH
	REFUSED7 DON'T KNOW8
QA05_C24	During the past month, how many times did you eat ice cream or other frozen desserts? Include low-fat kinds. 在過去一個月中,您曾經幾次吃冰淇淋或其他冷凍甜點?包括低脂冷凍 甜點。
AC14	[IF NEEDED, SAY: "Do not include sugar-free kinds. Your best guess is fine."] [IF NEEDED, SAY: "請勿包括無糖冷凍甜點。給出您的最佳估計數字 即可。"]
	[IF STRONGLY NEEDED, SAY: "Other examples are frozen yogurt and popsicles."] [IF STRONGLY NEEDED, SAY: ""其他例子包括冷凍酸奶及冰棒。"]
	PER DAY PER WEEK PER MONTH
	REFUSED7 DON'T KNOW8

QA05_C25INT	RO CONTRACTOR CONTRACT
-	Do you now take any of the following types of medications regularly, that is, at least 3 times a week?
	您目前是否定期服用以下任何一種藥物,即 每週至少服用三次?
AC15	
QA05_C25	Aspirin, Bayer, Bufferin, or Excedrin? 您目前是否定期服用以下任何一種藥物,即每週至少服用三次?
AC15A	[NOTE TO INTERVIEWER: DO NOT INCLUDE TYLENOL]
	YES
QA05_C26	Advil, Ibuprofen, Motrin, or Nuprin. 您目前是否定期服用以下任何一種藥物,即每週至少服用三次?
AC15B	[NOTE TO INTERVIEWER: DO NOT INCLUDE TYLENOL]
	[NOTE TO INTERVIEWER. DO NOT INCLODE TTEENOL]
	YES1
	NO2
	REFUSED
	DON'T KNOW8
QA05_C27	Aleve, Naprosyn, Naproxen, or Celebrex? 您目前是否定期服用以下任何一種藥物,即每週至少服用三次?
AC15C	
7.0.100	[NOTE TO INTERVIEWER: DO NOT INCLUDE TYLENOL]
	YES1
	NO2
	REFUSED
	DON'T KNOW8
	NG NOTE QA05_C28 = 1 OR QA05_C26 = 1 OR QA05_C27 =1) CONTINUE WITH QA05_C28; QA05_C29
QA05_C28	Have you taken any of these kinds of medications regularly for the last 3 months? 您在過去三個月中是否定期服用任何此類藥物?
AC16	
	YES1
	NO2
	REFUSED7
	DON'T KNOW8

Tobacco use, QA05_C29	second hand smoke Now, I am going to ask about various health behaviors.		
QA00_025	現在,我想就各種不同的健康行為問題提問。		
	Altogether, have you smoked at least 100 or more cigarettes 在您的一生中,您抽煙的總量是否至少有 100 枝或 100 枝以 」		
AE15	YES	[GO TO QA05_C33]	
QA05_C30	Do you now smoke cigarettes every day, some days, or not a 您現在是每天、某些天抽煙還是完全不抽煙?	t all?	
AE15A	EVERY DAY 1 SOME DAYS 2 NOT AT ALL 3 REFUSED -7 DON'T KNOW -8	[GO TO QA05_C33] [GO TO QA05_C33]	
QA05_C31	On the average, how many cigarettes do you now smoke a da 您目前平均每天抽多少枝煙?	ay?	
AD32	[IF R SAYS, A "PACK", CODE AS 20 CIGARETTES]		
	NUMBER OF CIGARETTES [GO TO QA05_C33]		
	REFUSED7 DON'T KNOW8	<u> </u>	
QA05_C32	In the past 30 days, when you smoked, how many cigarettes you smoked)? 在過去三十天中,當您抽煙時 [在您抽煙的日子裡],您每天抽完		
AE16	[IF NEEDED, SAY: "On the days you smoked".]		
	[IF R SAYS, A "PACK", CODE THIS AS 20 CIGARETTES]		
	NUMBER OF CIGARETTES [HR: 0 – 120]		
	REFUSED7 DON'T KNOW8		

QA05_C33	Is smoking ever allowed inside your home? 你們家中是否允許抽煙?
AC17	YES
QA05_C34	On average, about how many days per week is there smoking inside your home? 一週平均大約有幾天有人在您家中的任何地方抽煙?
AD34	RARELY OR LESS THAN 1 DAY PER WEEK1DAYS (1-7)2
	REFUSED7 DON'T KNOW8
Alcohol use QA05_C35	During the past 30 days, have you had at least one drink of any alcoholic beverage such as beer, wine, wine coolers, or liquor? 在過去三十天中,您是否曾經至少飲用過一份含酒精飲料,例如啤酒、葡萄酒、葡萄涼酒或烈酒?
AE11	YES1
	NO
QA05_C36	During the past 30 days, how many days per week or per month did you drink any alcoholic beverages, on the average? 在過去三十天中,您每週或每月平均有多少天飲用任何含酒精飲料?
AE12	DAYS PER WEEK DAYS PER MONTH
	REFUSED7 DON'T KNOW8
QA05_C37	On the days when you drank, about how many drinks did you drink on the average? 在喝酒的天數裡,您平均會喝多少份酒?一份酒指一罐或一瓶啤酒、一杯葡萄酒、一罐或一瓶涼酒、一杯雞尾酒或一劑烈酒。
AE13	[IF NEEDED, SAY: A drink is 1 can or bottle of beer, 1 glass of wine, 1 can or bottle of wine cooler, 1 cocktail, or 1 shot of liquor.]
	NUMBER OF DRINKS
	REFUSED7

	NG NOTE QA05_C38 1 (MALE) CONTINUE WITH QA05_C38; QA05_C39
QA05_C38	Considering all types of alcoholic beverages, during the past 30 days about how many times did you have 5 or more drinks on an occasion? 請計入在過去三十天中飲用的各類含酒精飲料,您大約有多少次一次飲用四份或四份以上飲料?
AE14	NUMBER OF TIMES NONE
QA05_C39	Considering all types of alcoholic beverages, during the past 30 days about how many times did you have 4 or more drinks on an occasion? 在過去三十天內,您大約幾次同時飲用四份或以上的酒?請包括所有類型的含酒精飲料。
AE14A	NUMBER OF TIMES
	NONE

Section D - General Health, Disability, and Sexual Health

General health QA05_D1	Now, I am going to ask about your health over the <u>past 30 days.</u> 現在、我想提出幾個有關您在過去三十天的健康狀況的問題。
AE31	Thinking about your physical health, which includes physical illness and injury, for how many days during the past 30 days was your physical health <u>not good?</u> 請想一想您的身體健康狀況,包括身體疾病和受傷,在過去三十天中,您有多少天健康狀況不佳? [IF NEEDED, SAY: "On how many days was your physical health <u>not good?</u> "] [IF NEEDED, SAY: "您有多少天身體健康狀況不佳?"]
	NUMBER OF DAYS NONE
QA05_D2	Now thinking about your mental health, which includes stress, depression, and problems with emotions, for how many days during the past 30 days was your mental health <u>not good?</u> 現在,請想一想您的精神健康狀況,包括壓力、憂鬱及情緒問題,在過去三十天中,您有多少天精神健康狀況不佳?
AE32	[IF NEEDED, SAY: "Mental health includes stress, feeling sad or not feeling like yourself. On how many days was your mental health not good?] [IF NEEDED, SAY: "精神健康包括壓力、悲傷或感覺異常。您有多少天精神健康狀況不佳?"]
	NUMBER OF DAYS NONE
QA05_D3	During the past 30 days, for about how many days did poor physical <u>or</u> mental health keep you from doing your usual activities, such as self-care, work, or recreation? 在過去三十天中,您大約有多少天因為身體或精神健康狀況不佳而無法從事日常活動,例如自我照護、工作或娛樂?
AE33	[IF NEEDED, SAY: "On how many days did poor health keep you from doing your usual things, such as taking care of yourself, working, and having fun?"] [IF NEEDED, SAY: "您有多少天因為健康狀況不佳而無法從事日常活動,例如照料自己、工作和娛樂?"]
	NUMBER OF DAYS
	NONE

Height and We QA05_D4	e ight These next questions are about your height and weight. 以下是幾個有關您的身高和體重的問題。
	How tall are you without shoes? 您不穿鞋時身高是多少?
AE17	[IF NEEDED, SAY: "About how tall"] [IF NEEDED, SAY: "大約有多高?"
	FEET INCHES [FT HR: 3-7, IN HR: 0-11] METERS CENTIMETERS [M HR: 1-2, CM HR: 0-99]
	REFUSED7 DON'T KNOW8
	IG NOTE QA05_D5: (FEMALE) and AAGE<50, DISPLAY "When not pregnant, how"; ′ "How"
QA05_D5	{When not pregnant, how/How} much do you weigh without shoes? 您不穿鞋時體重是多少?
AE18	[IF NEEDED, SAY: "About how much"] [IF NEEDED, SAY: "大約有多重?"]
	POUNDS [HR: 50-450] KILOGRAMS [HR: 20-220]
	REFUSED
	IG NOTE QA05_D6: GO TO QA05_D7;
QA05_D6	How much did you weigh at age 18? 您在 18 歲時體重有多少?
AE19	[IF NEEDED, SAY: "About how much".] [IF NEEDED, SAY: "大約有多重?"]
	POUNDS [HR: 50-450] KILOGRAMS [HR: 20-220]
	REFUSED

QA05_D11 Any difficulty dressing, bathing, or getting around inside the home? 穿衣、洗澡或在家中走動時有任何困難?

AD52

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

QA05_D12	Any difficulty going outside the home alone to shop or visit a doctor's office? 單獨外出購物或前往醫生診所就診時有任何困難?
AD53	YES
	IG NOTE QA05_D13: GO TO PN QA05_D15;
QA05_D13	Any difficulty working at a job or business? 工作或從事業務方面遇到任何困難?
AD54	YES
QA05_D14	Do you have a physical or mental condition that has kept you from working for at least a year? 您有沒有身體或精神障礙,導致您至少一年無法工作?
AL8A	[IF NEEDED, SAY "Current condition"]
	YES
IF AAGE > 70 (PROGRAMMIN	IG NOTE QA05_D15: DR QA05_A4 = 6 (65 OR OLDER) OR ENUM.AGE > 70 OR IF AGE IS UNKNOWN, GO TO IG NOTE QA05_E1; JE WITH QA05_D15 rs, orientation We are asking a few questions about people's sexual experiences. All answers will be kept private 我們會提出幾個有關性經歷的問題。所有的答案都會予以保密。
AD43	In the <u>past 12 months</u> , how many sexual partners have you had? 在過去十二個月中,您有過幾位性伴侶?
	NUMBER OF SEXUAL PARTNERS

QA05_D16	Can you give me your best guess?
	您能不能儘量估計有幾個人?

AD44

[IF R PROVIDES EXACT NUMBER, ENTER AS GIVEN. OTHERWISE CODE INTO CATEGORIES PROVIDED]

NUMBER OF PARTNERS	
1 PARTNER	1
2-3 PARTNERS	2
4-5 PARTNERS	3
6-10 PARTNERS	4
MORE THAN 10 PARTNERS	5
REFUSED	7
DON'T KNOW	-8

PROGRAMMING NOTE QA05_D17:

IF QA05_D15 = 0 (NO SEXUAL PARTNERS IN LAST 12 MONTHS), GO TO PROGRAMMING NOTE QA05_D18; ELSE CONTINUE WITH QA05_D17

IF QA05_D15 OR QA05_D16 = 1 (ONE PARTNER IN LAST 12 MONTHS), DISPLAY "Is that partner male or female?"

QA05_D17 {Is that partner male or female?} In the past 12 months, have your sexual partners been male, female, or both male and female?

在過去十二個月中, 您的性伴侶是男性、女性還是既有男性又有女性?

AD45

MALE	
FEMALE	2
BOTH MALE AND FEMALE	
REFUSED	7
DON'T KNOW	-8

PROGR	AMMING	NOTE	QA05	D18:
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IF QA05 A5 = 1 (MALE), DISPLAY "Gay" in guestion and "Gay" in Help Screen,

ELSE IF QA05 A5 =2 (FEMALE), DISPLAY "Gay, Lesbian" in question and "Gay and Lesbian" in Help Screen

QA05 D18

{The next question is about sexual orientation. All answers will be kept private.} Do you think of yourself as straight or heterosexual, as gay {, lesbian} or homosexual, or bisexual? 您認為自己是異性戀、男同性戀、女同性戀、同性戀還是雙性戀?

AD46

[IF NEEDED, SAY: "Straight or Heterosexual people have sex with, or are primarily attracted to people of the opposite sex, Gay {and Lesbian} people have sex with or are primarily attracted to people of the same sex, and Bisexuals have sex with or are attracted to people of both sexes".] IIF NEEDED, SAY: "異性戀者主要受異性吸引並與異性發生性關係;

男同性戀者和女同性戀者主要受同性吸引並與同性發生性關係;雙性戀者受兩種性別的人吸引並與兩種性別的人發生性關係。"]

STRAIGHT OR HETEROSEXUAL	1
GAY, LESBIAN, OR HOMOSEXUAL	2
BISEXUAL	3
NOT SEXUAL/ CELIBATE/ NONE	4
OTHER (SPECIFY):	5
REFUSED	
DON'T KNOW	8

HIV testing, testing for other sexually transmitted diseases

QA05_D19 Have you ever been tested for HIV, the virus that causes AIDS? 您是否曾經接受過艾茲病病毒 HIV 測試?

AD55

YES	1
NO	
REFUSED	7
DON'T KNOW	-8

PROGRAMMING NOTE QA05 D20:

IF QA05_D15 =0 OR QA05_D16=0 (NO SEXUAL PARTNERS LAST 12 MONTHS) GO TO PROGRAMMING NOTE QA05_E1;

ELSE CONTINUE WITH QA05 D20

QA05_D20 Now thinking about other sexually transmitted diseases besides HIV—In the past 12 months, have you been tested for a sexually transmitted disease?

現在,請想一想除 HIV 之外的其他性病。在過去 12 個月中,您是否曾經接受性病測試?

AD47

YES	
NO	
REFUSED	
DON'T KNOW	8-

Section E – Women's Health

IF QA05_A5	IING NOTE SECTION E: = 1 (MALE), GO NEXT SECTION; NUE QAO5_E1	
QA05_E1	These next questions are about women's health. 以下是有關婦女健康的問題。	
	How old were you when your periods or menstrual cycles star 您幾 歲開始來月經?	ted?
AD1		
	AGE [HR: 6-27]	
	NEVER STARTED MENSTRUAL CYCLE96 REFUSED96	
	DON'T KNOW/REMEMBER8	
QA05_E2	Have you ever given birth to a live infant? 您是否曾經生育存活的嬰兒?	
AD2		
	YES1	[CO TO DN OAGE FE
	NO	[GO TO PN QA05_E5] [GO TO PN QA05_E5] [GO TO PN QA05_E5]
QA05_E3	How old were you when your first child was born? 生第一個孩子時您多大年齡?	
AD3		
	YEARS OLD1	[GO TO PN QA05_E5]
	REFUSED7	[GO TO PN QA05_E5]
	DON'T KNOW8	
QA05_E4	In what year was your first child born? 您的第一個孩子是在哪一年出生的?	
AE55		
	YEAR	
	REFUSED7 DON'T KNOW8	

IF AGE<30 GC	NG NOTE QA05_E5 D TO PROGRAMMING NOTE QA05_E7 NUE WITH QA05_E5
QA05_E5	Have you had a hysterectomy? 你過去有沒有做過子宮切除手術?
AD12	[IF NEEDED, SAY: "A hysterectomy is when the uterus or womb is removed, not just having your tubes tied to prevent pregnancy."] [IF NEEDED, SAY: ""子宮切除手術是把子宮切掉,而不是只把你的輸卵管扎起來以防止懷孕。"]
	YES 1 NO 2 [GO TO PN QA05_E7] REFUSED -7 [GO TO PN QA05_E7] DON'T KNOW -8 [GO TO PN QA05_E7]
QA05_E6	Were your ovaries removed? 你有沒有做過手術把卵巢切除?
AD12A	YES
	NG NOTE QA05_E7: O TO QA05_E8
Pregnancy an QA05_E7	rid births To your knowledge, are you <u>now</u> pregnant? 據您所知,您現在懷孕了嗎?
AD13	YES

Pap smear tes	st
QA05_E8	Have you ever had a Pap smear test to check for cervical cancer? 您是否曾經接受巴氏宮頸塗片測試,檢查是否患子宮頸癌?
AD4	[IF NEEDED, SAY: "A pap smear is a routine cancer test for women in which the doctor examines the cervix during a gynecological exam, and takes a cell sample from the cervix with a small stick or brush and sends it to the lab. This is not a test for detecting sexually transmitted diseases."] [IF NEEDED, SAY: "巴氏宮頸塗片測試是一項婦女常規癌症測試,醫生在 婦科檢查的過程中對子宮頸進行檢查,並用一根小棒子或小刷子從子 宮頸內取出細胞樣品,送去化驗。這不是檢測性病的測試。"]
	YES
QA05_E9	How many Pap smear tests have you had in the last 6 years? 在過去六年中,您接受了幾次巴氏宮頸塗片測試?
AD5	PAP SMEARS [HR: 0-99] [IF 0 GO TO PN QA05_E11] NONE
QA05_E10	How long ago did you have your most recent Pap smear test? 您最近一次做巴氏塗片測試是在多久前?
AD6	A YEAR AGO OR LESS
QA05_E11	In the past 12 months, has a doctor recommended that you have a Pap smear?
AD11	在過去 12 個月中,是否有醫生建議您接受巴氏宮頸塗片測試?

PROGRAMMING NOTE QA05 E12:

IF QA05_E11 = 1 (DOCTOR REC PAP SMEAR) AND ((QA05_E10 > 3 (NO PAP SMEAR WITHIN LAST 3 YEARS) OR QA05_E9=0 (NO PAP SMEARS IN LAST 6 YEARS) OR QA05_E8=2 (NEVER HAD PAP SMEAR)) CONTINUE WITH QA05_E12

IF QA05_E8 = 2 (NO, PAP SMEAR EVER), DISPLAY "Never had a Pap smear";
IF QA05_E10 = 4, 5 (MORE THAN 3 YEARS AGO) DISPLAY "NOT had a Pap smear in the last 3 years":

ELSE GO TO PROGRAMMING NOTE QA05 E13

QA05_E12 What is the ONE most important reason why you have {NEVER had a Pap smear/NOT had a Pap smear in the last 3 years}?

您在過去三年中#沒有\接受巴氏宮頸塗片測試的#一個\最主要原因是什麼?

AD10

NO REASON/NEVER THOUGHT ABOUT IT	1
DIDN'T KNOW I NEEDED THIS TYPE OF TEST.	2
DOCTOR DIDN'T TELL ME I NEEDED IT	3
HAVEN'T HAD ANY PROBLEMS	4
PUT IT OFF/LAZINESS	5
TOO EXPENSIVE/NO INSURANCE/COST	6
TOO PAINFUL, UNPLEASANT,	
OR EMBARRASSING	7
HYSTERECTOMY	8
DON'T HAVE A DOCTOR	9
OTHER	91
REFUSED	
DON'T KNOW	

PROGRAMMING NOTE QA05 E13:

IF AAGE < 30 OR QA05_A4 = 1 (BETWEEN 18 AND 29) OR ENUM.AGE < 30, GO TO QAO5_F1; ELSE CONTINUE WITH QA05_E13 (INCLUDE WOMEN WITH AGE UNKNOWN)

Mammography

QA05_E13

In the past 12 months, has a doctor examined your breasts for lumps? 在過去十二個月中,是否有醫生為您作乳房腫塊檢查?

AF37

[IF NEEDED, SAY: "This is when a doctor touches your breasts to check for bumps, cysts, or abnormal growth."]

[IF NEEDED, SAY: "這是指醫生用手觸摸乳房,檢查是否有腫塊、囊腫或不正常的生長物。"]

YES	
NO	2
REFUSED	7
DON'T KNOW	-8

QA05_E14	Have you <u>ever</u> had a mammogram? 您是否曾經作過乳房 X 光照射?	
AD14	[IF NEEDED, SAY: "A mammogram is an x-ray tak by a machine that flattens or squeezes each breas [IF NEEDED, SAY: "乳房 X 光照射是用機器將每隻乳房壓扁或擠壓並	t."]
	YES NO[READ DEFINITION, IF STILL NO, GO TO P	2
	REFUSEDDON'T KNOW	
QA05_E15	How many mammograms have you had in the last 6 y 在過去六年中,您做過幾次乳房 X 光照片? 大概估計的	
AD16	MAMMOGRAMS [HR: 0-99] NONEREFUSED	7
QA05_E16	DON'T KNOW How long ago did you have your most recent mammo 您最後一次作乳房 X 光照射是在多久以前?	
AD17	A YEAR AGO OR LESS	

QA05_E17	Tell me the <u>main</u> reason you had a mammogram. Was it 請告訴我您做乳房 X 光照片的主要原因,是	
AD18	[IF NEEDED, SAY: "The main reason is the most important [IF NEEDED, SAY: "主要原因是指最重要的原因。"	reason."]
	Part of a routine exam	1 2 2 3 3 .4 4
QA05_E18	Have you ever had a mammogram where the results were g您是否曾經有#不\正常的乳房 X 光照片結果?	not normal?
AD19	YES NOREFUSEDDON'T KNOW	.2 -7 [GO TO PN QA05_E24]
QA05_E19	Have you ever had an operation to remove a lump from you 您是否曾經接受移除乳房腫塊的手術?	ır breast?
AD20	YES NOREFUSEDDON'T KNOW	2 [GO TO PN QA05_E22] 7 [GO TO PN QA05_E22]
QA05_E20	Did the lump turn out to be cancer? 該乳房腫塊是不是癌症?	
AD21	YES NOREFUSEDDON'T KNOW	.2 -7

[NOTE: THE CONCERN IS WITH LUMPS THAT ARE	E NOT CANCEROUS.]
REFUSED	-7
NOREFUSED	2 [GO TO PN QA05_E24] -7 [GO TO PN QA05_E24]
What additional tests and/or surgery did you have? 您還接受了哪些其他測試及/或手術?	
[CODE ALL THAT APPLY. CTRL-P TO EXIT.]	
[PROBE: "Any other?"] [PROBE: "還有任何其他測試及/或	手術嗎? "]
MASTECTOMY (SURGERY TO	
LUMPECTOMY (SÜRGERY TO REMOVE LUMP) NEEDLE BIOPSY	3 4
ANOTHER MAMMOGRAMCLINICAL BREAST EXAM	. 6 . 7
2 OR QA05_E15 =0 OR QA05_16 > 2 (NO MAMMOGRAM	IN PAST 2 YEARS) CONTINUE WITH
In the past 12 months has a doctor recommended that you 在過去 12 個月中,是否有醫生建議過您做乳房 X 光照片?	have a mammogram?
NOREFUSED	2 -7
	您還接受了哪些其他測試及/或手術? [CODE ALL THAT APPLY. CTRL-P TO EXIT.] [PROBE: "Any other?"] [PROBE: "還有任何其他測試及/或 NO TESTS/NO SURGERY

PROGRAMMING NOTE QA05_E25:

IF QA05_E24 = 1 (YES, DOCTOR RECOMMENDED MAMMOGRAM) AND ((QA05_E16 > 2 (NO MAMMOGRAM IN PAST 2 YEARS) OR QA05_E14 = 2 (NEVER HAD A MAMMOGRAM) OR QA05_E15=0 (NO MAMMOGRAMS IN PAST 6 YEARS))

CONTINUE WITH QA05 E25

IF QA05_E16 = $\overline{3}$, 4, 5, -8 (MOST RECENT MAMMOGRAM MORE THAN 2 YEARS AGO OR DK) DISPLAY "NOT had a mammogram in the past 2 years";

IF QA05_E14 = 2 (NEVER HAD MAMMOGRAM), DISPLAY "NEVER had a mammogram"

ELSE GO TO PROGRAMMING NOTE QA05 E26

QA05_E25 What is the ONE most important reason why you have {NEVER had a mammogram/NOT had a mammogram in the past 2 years}?

過去兩年中您#沒有\做過乳房 X 光照片的#一個\最重要的原因是什麼?

AD25

NO REASON/NEVER THOUGHT ABOUT IT	1
DIDN'T KNOW I NEEDED THIS TYPE OF T	EST2
DOCTOR DIDN'T TELL ME I NEEDED IT	3
HAVEN'T HAD ANY PROBLEMS	4
PUT IT OFF/LAZINESS	5
TOO EXPENSIVE/NO INSURANCE/COST	6
TOO PAINFUL, UNPLEASANT, EMBARRAS	SSING.7
TOO YOUNG	8
DON'T HAVE A DOCTOR	9
OTHER	91
REFUSED	7
DON'T KNOW	8-

IF QA05_E16	NG NOTE QA05_E26 =1 OR 2 (MOST RECENT MAMMOGRAM WITHIN LAST 2 YEARS) CONTINUE WITH QA05_E26; PROGRAMMING NOTE QA05E_27
QA05_E26	Was your most recent mammogram recommended by a doctor? 您最近一次做的乳房 X 光照片是否由醫生建議?
AE50	YES
IF AGE<34 G	NG NOTE QA05_E27_INTRO D TO PROGRAMMING NOTE QA05_F1 NUE WITH QA05_E27
QA05_E27_IN	ITRO Are you currently taking any of the following medications? 您目前是否在服用以下任何一種藥物?
	NG NOTE QA05_E27 DNTINUE WITH QA05_E27 QA05_E28
QA05_E27	Hormone replacement therapy? 您目前是否因更年期在服用荷爾蒙補充藥物或 HRT?
AD28	YES
QA05_E28	Tamoxifen or Molvadex? Tamoxifen 或 Molvadex?
AE51	YES

[
PROGRAMMI	NG NOTE QA05_E29
IF AGE>44 CO	ONTINUE WITH QA05 E29
ELSE GO TO	
LLGL GG TG	QA00_E30
QA05_E29	Raloxifen or Evista?
	Raloxifen 或 Evista?
	Naioxiieii 或 Evisia :
AE52	
ALUZ	VEO.
	YES1
	NO2
	REFUSED
	DON'T KNOW8
	DON I KNOWo
PROGRAMMI	NG NOTE QA05_E30
	ONTINUE WITH QA05_E30
ELSE GO TO	QAU5_F1
QA05_E30	Birth control pills, the patch, or birth control shots?
4.000	避孕藥、避孕貼片或避孕針?
	姓子荣、姓子 <u>即万以</u> 姓子可?
AE53	
ALUU	VEO.
	YES1
	NO2
	REFUSED7
	DON'T KNOW8

Section F – Cancer History and Prevention

PROGRAMMING NOTE QA05_F1

IF QA05_E20 =1 (BREAST CANCER) DISPLAY "Besides the breast cancer you told me about"

Cancer history

QA05_F1

{Besides the breast cancer you told me about,} Has a doctor <u>ever</u> told you that you had a cancer of any kind?

您的醫生是否曾經告訴您患有任何類型的癌症?

AF1

YES		
NO	2	
REFUSED	7	[GO TO PN QA05_F7]
DON'T KNOW	8	

QA05_F2 What kind of cancer was it? 是哪一種癌症?

AF2

[CODE ALL THAT APPLY, ACCEPT ONLY FIRST 6 RESPONSES]

[PROBE: "Any others?"]

[PROBE: "還有任何其他癌症嗎?"]

BLADDER	1
BLOOD	2
BONE	3
BRAIN	4
BREAST	5
CERVIX	
COLON	7
ESOPHAGUS	8
GALLBLADDER	9
KIDNEY	10
LARYNX-WINDPIPE	11
LEUKEMIA	
LIVER	13
LUNG	14
LYMPHOMA	15
MOUTH/TONGUE/LIP	16
OVARY	
PANCREAS	18
PROSTATE	19
RECTUM	
SKIN	21
SOFT TISSUE (MUSCLE OR FAT)	24
STOMACH	25
TESTIS	
THROAT-PHARYNX	27
THYROID	
UTERUS	29
OTHER	
REFUSED	
DON'T KNOW	8

PROGRAMMING NOTE QA05_F3:

IF QA05_F2 = 5 (BREAST CANCER) OR QA05_E20 = 1 (BREAST CANCER), CONTINUE WITH QA05_F3; ELSE GO TO PROGRAMMING NOTE QA05_F5

QA05_F3 Tell me how you <u>first</u> found out about your breast cancer. Was it by... 請告訴我,您最初是如何發現自己患有乳癌(乳腺癌/乳房癌)的。是......

AB60

Finding it yourself by accident	
自己偶然發現的	1
Finding it yourself during a self breast examination	12
自己在一次乳房自檢過程中發現的	2
Your husband or partner finding it	3
您的丈夫或伴侶發現的	
Your doctor finding it during a routine breast exam	4
您的醫生在一次例行乳房檢查中發現的	4
Finding it by a mammogram	5
透過乳房 X 線照片發現的,還是	
Or Some other way? (IF OTHER, SPECIFY):	_91
用其他方法發現的?	. 91
REFUSED	7
DON'T KNOW	

QA05_F4 Was your breast cancer diagnosed at an early or late stage? **您的乳癌是在早期還是在**晚期診斷出來的?

AF52

EARLY STAGE (STAGE 1 OR 2)	1
LATE STAGE (STAGE 3 OR 4)	2
REFUSED	7
DON'T KNOW	8-

PROGRAMMING NOTE QA05_F5:

ELSE GO TO	: = 21 (SKIN CANCER), CONTINUE WITH QA05_F5; O QA05_F6
QA05_F5	Was the skin cancer you mentioned non-melanoma, melanoma, or an unknown type? 您提到的皮膚癌是黑班瘤、非黑班瘤還是不明種類的癌症?
AF2A	
	[CODE ALL THAT APPLY.]
	[PROBE: "Any others?"] [PROBE: "還有其他的嗎?"]
	[IF NEEDED, SAY "Melanoma is a serious form of skin cancer that usually begins as skin moles. Non-melanoma skin cancers are a more common but less serious form of skin cancer
	NON-MELANOMA1
	MELANOMA
	UNKNOWN TYPE
	DON'T KNOW8
QA05_F6	How old were you when cancer was first diagnosed? 第一次診斷出你有癌症時,你幾歲?
AF3	[IF MORE THAN ONE CANCER, ASK FOR AGE WHEN EARLIEST CANCER WAS
	DIAGNOSED]
	AGE IN YEARS [HR: 1 THRU AAGE OR (105) IF AAGE = -7)]
	REFUSED7 DON'T KNOW8

IF AGE > 64 SI	NG NOTE QA05_F7 KIP TO PROGRAMMING NOTE QA05_FB1; IUE WITH QA05_F7;
Family History	of Cancer
QA05_F7	These next questions ask about your family history of cancer. By family we mean only your blood relatives, including half brothers and sisters.以下是關於您的癌症家族史的問題。家族僅指與您有血緣關係的親屬,包括同母異父及同父異母兄弟及姐妹。
AP7	First, have any of your grandparents ever had cancer of any kind? 首先,您的祖父、外祖父、祖母或外祖母是否曾經患過任何類型的癌症?
AL /	[IF NEEDED, SAY: "We want you to include information about both living and deceased blood relatives. Do not include family members related through marriage such as a stepfather or stepsister, or family members who were adopted."] [IF NEEDED, SAY: "我們希望您包括有關在世及已去世有血緣關係親屬 的信息。請勿包括因婚姻關係構成的家庭成員(例如繼父或異父異母姐 妹)或領養的家庭成員。"]
	YES
QA05_F8	Have any of your <u>parents'</u> brothers or sisters, that is, your uncles or aunts, ever had cancer of any kind 您的父母的兄弟或姐妹(即您的伯伯、叔叔、舅舅或姑媽、姨媽)中 是否有任何人曾經患過任何類型的癌症?
AP8	
	YES1
	NO2
	REFUSED7 DON'T KNOW8
IF QA05_E2 =	NG NOTE QA05_F9 2 (FEMALE R, NEVER GIVEN BIRTH), DISPLAY "brothers or sisters" / "brothers, sisters, sons, or daughters"
QA05_F9	Has your father or mother, or have any of your {brothers or sisters/brothers, sisters, sons, or daughters ever had cancer of any kind? 您的父親或母親或者您的任何{兄弟或姐妹/兄弟或姐妹、兒子或女兒} 是否曾經患過任何類型的 癌症?
AP9	

PROGRAMMING NOTE QA05 F10:

IF QA05_F7 AND QA05_F8 AND QA05_F9 NE 1 (NO RELATIVE DIAGNOSED WITH CANCER), GO TO PN QA05_FB1:

IF QA05 F7 = 1 AND QA05 F8 = 2 AND QA05 F9 = 2, GO TO QA05 F11A

IF QA05 F7 = 2 AND QA05 F8 = 1 AND QA05 F9 = 2, GO TO QA05 F11B

ELSE CONTINUE WITH QA05 F10

ALSO, IF QA05_F9 = 2, DISPLAY "grandmothers and aunts."

ELSE IF QA05_F7 NE 2, DISPLAY "grandmothers"

ELSE IF QA05 F8 NE 2, DISPLAY "aunts"

AND IF QA05 E2 = 2 (FEMALE R, NEVER GIVEN BIRTH), DISPLAY "and sisters."

ELSE DISPLAY "sisters, and daughters." **QA05_F10**. Now, please think about your female relatives who have had cancer. By female relatives, I mean mother, grandmothers, aunts, {and} sisters, {and daughters}.

現在,請想一想您的曾經患癌症的女性親屬。女性親屬指{祖母/姑媽、外祖母、姨媽}、母親、{姐姐/妹妹及女兒}。

Have any of your female relatives been diagnosed with cancer of the breast, ovary, uterus, colon, or rectum?

您的這些女性親屬中是否有人曾經被診斷患有乳癌、卵巢癌、子宮癌、結腸癌或直腸癌?

AP10

YES	.1	
NO		[GO TO QA05 F40]
REFUSED		
DON'T KNOW	-8	[GO TO QA05_F40]

PROGRAMMING NOTE QA05_F11:

IF QA05_F7 NE 2, DISPLAY "grandmother"

IF QA05_F8 NE 2, DISPLAY "aunt"

IF QA05 F9 NE 2, DISPLAY "mother and sister"

IF QA05 F9 NE 2 AND AD2 NE 2, DISPLAY "daughter"

QA05 F11

Which female relatives have been diagnosed with cancer of the breast, ovary, uterus, colon, or rectum? Was it your...

哪幾位女性親屬曾經被診斷患有乳房癌、卵巢癌、子宮癌、結腸癌或 直腸癌? 是您的......

AP11

[CODE ALL THAT APPLY. CTRL-P TO EXIT.]

[PROBE: "Any others?"]

[PROBE: "還有任何其他癌症嗎?"]

Grandmother(s)	1
祖母(外祖母)?	1
Aunt(s)	2
姑媽 (姨媽)?	2
Mother	
母親?	3
Sister(s)	4
姐妹?	
Daughter(s)	5
女兒?	5
REFUSED	7
DON'T KNOW	8

	NG NOTE QA05_F12: 1 (GRANDMOTHER), CONTINUE WITH QA05_F12; PN QA05_F19
QA05_F12	Is the grandmother on your mother's or father's side, or both? 是您的祖母、外祖母還是二者都是?
AP12	MOTHER'S MOTHER
	NG NOTE QA05_F13 = 3 DISPLAY "First tell me about your mother's mother."
QA05_F13	{First tell me about your mother's mother.} Did she have cancer of the breast, ovary, uterus, colon, or rectum? 她是否曾經患乳癌、卵巢癌、子宮癌、結腸癌或者直腸癌?
AP13	[CODE ALL THAT APPLY. CTRL-P TO EXI [PROBE: "Any others?"] [PROBE: "還有任何其他癌症嗎?"]
	BREAST 1 OVARIAN 2 UTERINE OR ENDOMETRIAL 3 COLON OR RECTAL 4 "FEMALE PROBLEMS" 5 NONE OF THESE CANCER TYPES 6 [GO TO PN QA05_F16] REFUSED -7 [GO TO PN QA05_F16] DON'T KNOW -8 [GO TO PN QA05_F16]
	NG NOTE QA05_F14 NONE CANCER REPORTED IN QA05_F13 DISPLAY "Were any of these diagnoses before age 50?"
QA05_F14	{Were any of these diagnoses before age 50?} Was her diagnosis before age 50? 她是否在 50 歲之前被診斷患有癌症?
AP14	YES

IF QA05_F14 :	NG NOTE QA05_F15 =1 AND MORE THAN ONE CANCER REPORTED IN QA05_F13 CONTINUE WITH QA05_F15 PROGRAMMING NOTE QA05_F16
QA05_F15	Which of these cancers were diagnosed before age 50? 其中哪一些癌症是在 50 歲之前診斷出來的?
AP15	BREAST
IF QA05_F12 :	NG NOTE QA05_F16 = 3 (both grandmothers), CONTINUE WITH QA05_F16 PROGRAMMING NOTE QA05_F19
QA05_F16	Now, tell me about your father's mother. Did she have cancer of the breast, ovary, uterus, colon, or rectum? 現在,請告訴我您的祖母的情況。她是否曾經患乳癌、卵巢癌、子宮癌、結腸癌或者直腸癌? [CODE ALL THAT APPLY. CTRL-P TO EXIT] [PROBE: "Any others?"] [PROBE: "還有任何其他癌症嗎?"] BREAST
	NG NOTE QA05_F17 N ONE CANCER REPORTED IN QA05_F16 DISPLAY "Were any of these diagnoses before age 50?"
QA05_F17	{Were any of these diagnoses before age 50?} Was her diagnosis before age 50? 她是否在 50 歲之前被診斷患有癌症?
AP17	YES1

PROGRAMMIN	IG NOTE QA05_F18
IF QA05_F17 =	1 AND MORE THAN ONE CANCER REPORTED IN QA05_16 CONTINUE WITH QA05_F18
ELSE GO TO P	PROGRAMMING NOTE QA05_F19
QA05_F18	Which of these cancers were diagnosed before age 50?
	其中哪一些癌症是在 50 歲之前診斷出來的?
AP18	
711 10	BREAST1
	OVARIAN2
	UTERINE OR ENDOMETRIAL
	COLON OR RECTAL4
	"FEMALE PROBLEMS"5
	REFUSED7
	DON'T KNOW8
	DOIN I KNOW
DDOCDAMMIN	IC NOTE OAGE 540.
	IG NOTE QA05_F19:
	2, (AUNT/S DIAGNOSED WITH CANCER) CONTINUE WITH QA05_F19; ELSE GO TO PN
QA05_F24	
0405 540	
QA05_F19	Is the aunt or aunts you mentioned on your mother's side, your father's side, or on both sides?
	您提及的姑媽 (姨媽)是您的母親的姐妹、父親的姐妹,還是兩者都有?
AP19	
	MOTHER'S SIDE1
	FATHER'S SIDE2
	BOTH SIDES3
	REFUSED7
	DON'T KNOW8
	501(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)
PROGRAMMIN	IG NOTE QA05_F20:
	1 (MOTHER'S SIDE) OR QA05_19 = 3 (BOTH SIDES), CONTINUE WITH QA05_F20;
ELSE GO TO P	
LLOL GO TOT	14 Q/100_1 24
QA05_F20	How many of your mother's sisters had cancer of the breast, ovary, uterus, colon, or rectum?
QA05_F20	
	您的母親的姐妹中有幾人曾經患乳癌、卵 巢癌、子宮癌、結腸癌或 直腸癌 ?
AP20	
	NUMBER OF AUNTS
	REFUSED7
	DON'T KNOW8

PROGRAMMING NOTE QA05 F21:

IF QA05 F20 = 1 DISPLAY "Did she have cancer of the breast, ovary, uterus, colon, or rectum?";

IF QA05_F20>1 DISPLAY "Thinking about the (youngest/next youngest) of your mother's sisters who had cancer, did she have cancer of the breast, ovary, uterus, colon, or rectum?" OR QA05_F19 = 3 (BOTH SIDES), CONTINUE WITH QA05_F21; ELSE GO TO PN QA05_F24

QA05 F21

{Did she have cancer of the breast, ovary, uterus, colon, or rectum?} Thinking about the (youngest/next youngest) of your mother's sisters who had cancer, did she have cancer of the breast, ovary, uterus, colon, or rectum?

她是否曾經患乳癌、卵巢癌、子宮癌、結腸癌或者直腸癌?

AP21

[CODE ALL THAT APPLY. CTRL-P TO EXIT.]

[PROBE: "Any others?"]

[PROBE: "還有任何其他癌症嗎?"]

BREAST	1	
OVARIAN	2	
UTERINE OR ENDOMETRIAL	3	
COLON OR RECTAL	4	
"FEMALE PROBLEMS"	5	
NONE OF THESE CANCER TYPES		
REFUSED	7	[GO TO PN_X1]
DON'T KNOW	8	[GO TO PN_X1]

PROGRAMMING NOTE QA05 F22

IF MORE THAN ONE CANCER REPORTED IN QA05 F21 DISPLAY "Were any of these diagnoses before age 50?"

QA05_F22 {Were any of these diagnoses before age 50?} Was her diagnosis before age 50? 她是否在 50 歲之前被診斷患有癌症?

YES	1
NO	2
REFUSED	7
DON'T KNOW	o

PROGRAMMING NOTE QA05_F23
IF QA05_F22 = 1 AND MORE THAN ONE CANCER REPORTED IN QA05_F21 CONTINUE WITH QA05_F23 ELSE GO TO PROGRAMMING NOTE QA05_F24
OARE FOR AMbigle of the consequence discussed by fore and FOR
QA05_F23 Which of these cancers were diagnosed before age 50? 其中哪一些癌症是在 50 歲之前診斷出來的?
AP23
BREAST
UTERINE OR ENDOMETRIAL
COLON OR RECTAL4
"FEMALE PROBLEMS"5
REFUSED
PROGRAMMING NOTE X1
IF QA05_F20>1, REPEAT SERIES QA05_F21 THRU QA05_F23 FOR EACH MOTHER'S SISTER DIAGNOSED
WITH SPECIFIED CANCER/S (MAX = 3)
ELSE GO TO PROGRAMMING NOTE QA05_F24
PROGRAMMING NOTE QA05_F24
IF QA05_F19 = 2 or QA05_F19 = 3 CONTINUE WITH QA05_F20
ELSE GO TO PROGRAMMING NOTE QA05_F24
QA05_F24 How many of your father's sisters had cancer of the breast, ovary, uterus, colon, or rectum?
您的父親的姐妹中有幾人曾經患乳癌、卵 巢癌、子宮癌、結腸癌或 直腸癌 ?
AP24
NUMBER OF AUNTS
REFUSED
DON'T KNOW8

PROGRAMMING	NOTE QA	405 F25:
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IF QA05 F24 = 1 DISPLAY "Did she have cancer of the breast, ovary, uterus, colon, or rectum?";

IF QA05_F24 > 1 DISPLAY "Thinking about the (youngest/next youngest) of your father's sisters who had cancer, did she have cancer of the breast, ovary, uterus, colon, or rectum?" OR QA05_F19 = 3 (BOTH SIDES), CONTINUE WITH QA05_F25;

ELSE GO TO PN QA05 F28

QA05_F25

{Did she have cancer of the breast, ovary, uterus, colon, or rectum?} Thinking about the (youngest/next youngest) of your father's sisters who had cancer, did she have cancer of the breast, ovary, uterus, colon, or rectum?

她是否曾經患乳癌、卵巢癌、子宮癌、結腸癌或者直腸癌?

AP25

BREAST	1	
OVARIAN	2	
UTERINE OR ENDOMETRIAL	3	
COLON OR RECTAL	4	
"FEMALE PROBLEMS"	5	
NONE OF THESE CANCER TYPES	6	[GO TO PN X2]
REFUSED		
DON'T KNOW	8	[GO TO PN X2]

PROGRAMMING NOTE QA05 F26

IF MORE THAN ONE CANCER REPORTED IN QA05_F25 DISPLAY "Were any of these diagnoses before age 50?"

QA05_F26 {Were any of these diagnoses before age 50?} Was her diagnosis before age 50? 她是否在 50 歲之前被診斷患有癌症?

AP26

YES	1
NO	
REFUSED	7
DON'T KNOW	-8

PROGRAMMING NOTE QA05 F27

IF QA05_F26 = 1 AND MORE THAN ONE CANCER REPORTED IN QA05_F25 CONTINUE WITH QA05_F27 ELSE GO TO PROGRAMMING NOTE QA05_F28

QA05_F27 Which of these cancers were diagnosed before age 50? 其中哪一些癌症是在 50 歲之前診斷出來的?

BREAST	
OVARIAN	2
UTERINE OR ENDOMETRIAL	3
COLON OR RECTAL	
"FEMALE PROBLEMS"	
REFUSED	7
DON'T KNOW	

PROGRAMMING NOTE X2

IF QA05_F24 > 1, REPEAT SERIES QA05_F25 THRU QA05_F27 FOR EACH FATHER'S SISTER DIAGNOSED WITH SPECIFIED CANCER/S (MAX = 3)

ELSE GO TO PROGRAMMING NOTE QA05 F28

PROGRAMMING NOTE QA05_F28

IF QA05_F11 = 3 (MOTHER) CONTINUE WITH QA05_28 ELSE GO TO PROGRAMMING NOTE QA05_F31

QA05_F28 Did your mother have cancer of the breast, ovary, uterus, colon, or rectum? **您的母親是否曾經患乳癌、卵**巢癌、子宫癌、結腸癌或者直腸癌?

AP28

[CODE ALL THAT APPLY. CTRL-P TO EXIT.]

[PROBE: "Any others?"]

[PROBE: "還有任何其他癌症嗎?"]

BREAST	1	
OVARIAN	2	
UTERINE OR ENDOMETRIAL	3	
COLON OR RECTAL	4	
"FEMALE PROBLEMS"	5	
NONE OF THESE CANCER TYPES	6	[GO TO PN QA05_F31]
REFUSED	7	[GO TO PN QA05 F31]
DON'T KNOW	8	[GO TO PN QA05_F31]

PROGRAMMING NOTE QA05 F29

IF MORE THAN ONE CANCER REPORTED IN QA05_F28 DISPLAY "Were any of these diagnoses before age 50?"

QA05_F29 {Were any of these diagnoses before age 50?} Was her diagnosis before age 50? 她是否在 50 歲之前被診斷患有癌症?

AP29

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

PROGRAMMING NOTE QA05 F30

IF QA05_F29=1 AND MORE THAN ONE CANCER REPORTED IN QA05_F28 CONTINUE WITH QA05_F30 ELSE GO TO PROGRAMMING NOTE QA05_F31

QA05_F30 Which of these cancers were diagnosed before age 50? 其中哪一些癌症是在 50 歲之前診斷出來的?

BREAST	1
OVARIAN	2
UTERINE OR ENDOMETRIAL	3
COLON OR RECTAL	4
"FEMALE PROBLEMS"	5
REFUSED	7
DON'T KNOW	8

IF QA05_F11 =	IG NOTE QA05_F31 - 4 (SISTER) CONTINUE WITH QA05_F31; PROGRAMMING NOTE QA05_F36		
QA05_F31	How many of your sisters had cancer of the brea 您的姐妹中有幾人曾經患乳癌、卵巢癌、子宮癌、		
AP31	NUMBER OF SISTERS		
	REFUSEDDON'T KNOW		
IF QA05_F31 = IF QA05_31 > cancer of the b	IG NOTE QA05_F32: 1 DISPLAY "Did she have cancer of the breast, of DISPLAY "Thinking about the (youngest/next yourgest, ovary, uterus, colon, or rectum?" PROGRAMMING NOTE QA05_F36		
QA05_F32	{Did she have cancer of the breast, ovary, uterus (youngest/next youngest) of your sisters who ha uterus, colon, or rectum? 她是否曾經患乳癌、卵巢癌、子宫癌、結腸癌或	id cancer, did sl	
AP32	BREASTOVARIANUTERINE OR ENDOMETRIAL	2	
	COLON OR RECTAL "FEMALE PROBLEMS" NONE OF THESE CANCER TYPES REFUSED DON'T KNOW	5 6 7	[GO TO X3] [GO TO X3] [GO TO X3]
	IG NOTE QA05_F33 NONE CANCER REPORTED IN QA05_F32 DISI		-
QA05_F33	{Were any of these diagnoses before age 50?} \ 她是否在 50 歲之前被診斷患有癌症?	Nas her diagno	sis before age 50?
AP33	YES NOREFUSEDDON'T KNOW	2 7	

PROGRAMMING NOTE	E QA05	F34
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IF QA05_F33 = 1 AND MORE THAN ONE CANCER REPORTED IN QA05_F32 CONTINUE WITH QA05_F34 ELSE GO TO PROGRAMMING NOTE QA05_F36

QA05_F34 Which of these cancers were diagnosed before age 50? 其中哪一些癌症是在 50 歲之前診斷出來的?

AP34

BREAST	1
OVARIAN	2
UTERINE OR ENDOMETRIAL	3
COLON OR RECTAL	4
"FEMALE PROBLEMS"	5
REFUSED	7
DON'T KNOW	

PROGRAMMING NOTE QA05 F35

ASK QA05_F35 A SINGLE TIME FOR EACH SISTER, DISPLAYING THE QUESTION AFTER SERIES QA05_F34 THRU QA05_F34 IS COMPETED FOR THE SISTER.

QA05_F35 Was this sister a full sister, a half-sister on your father's side, or a half-sister on your mother's side? 您的這個姐妹是同父同母姐妹、同父異母姐妹、還是同母異父姐妹?

FULL	
HALF ON FATHER'S SIDE	
HALF ON MOTHER'S SIDE	3
REFUSED	7
DON'T KNOW	-8

P	RC	GI	Δ	MM	ING	NO	TE X3	
г	\sim	, GI	\mathbf{n}	IALIAL	III	\mathbf{I}	$I \perp AJ$	

IF QA05_F31 > 1, REPEAT SERIES QA05_32 THRU QA05_F35 FOR EACH SISTER DIAGNOSED WITH SPECIFIED CANCER/S (MAX = 3) ELSE GO TO PROGRAMMING NOTE QA05_F36

PROGRAMMING NOTE QA05 F36

IF QA05_F11 = 5 (DAUGHTER) CONTINUE WITH QA05_F36;

ELSE GO TO QA05_F40

QA05_F36 How many of your daughters had cancer of the breast, ovary, uterus, colon, or rectum? 您的女兒中有幾人曾經患過乳癌、卵巢癌、子宮癌、結腸癌或直腸癌?

AP36

____ NUMBER OF DAUGHTERS
REFUSED.....-7
DON'T KNOW....-8

PROGRAMMING NOTE QA05_F37:

IF QA05_F36 = 1 DISPLAY "Did she have cancer of the breast, ovary, uterus, colon, or rectum?";

IF QA05_F36 > 1 DISPLAY "Thinking about the (youngest/next youngest) of your daughters who had cancer, did she have cancer of the breast, ovary, uterus, colon, or rectum?"

ELSE GO TO PROGRAMMING NOTE QA05 F40

QA05_F37

{Did she have cancer of the breast, ovary, uterus, colon, or rectum?} Thinking about the (youngest/next youngest) of your daughters who had cancer, did she have cancer of the breast, ovary, uterus, colon, or rectum?

她是否曾經患乳房癌、卵巢癌、子宮癌、結腸癌或者直腸癌?

AP37

BREAST1	
OVARIAN2	
UTERINE OR ENDOMETRIAL3	
COLON OR RECTAL4	
"FEMALE PROBLEMS"5	
NONE OF THESE CANCER TYPES6	[GO TO PN X4]
REFUSED7	[GO TO PN X4]
DON'T KNOW8	[GO TO PN X4]

PROGRAMMING NOTE QA05 F38

IF MORE THAN ONE CANCER REPORTED IN QA05_F32 DISPLAY "Were any of these diagnoses before age 50?"

QA05_F38 {Were any of these diagnoses before age 50?} Was her diagnosis before age 50? 她是否在 50 歲之前被診斷患有癌症?

YES	
NO	
REFUSED	7
DON'T KNOW	_2

PROGRAMMING NOTE QA05 F39

IF QA05_F38 = 1 AND MORE THAN ONE CANCER REPORTED IN QA05_F37 CONTINUE WITH QA05_F39 ELSE GO TO PROGRAMMING NOTE QA05_F40

QA05_F39 Which of these cancers were diagnosed before age 50? 其中哪一些癌症是在 50 歲之前診斷出來的?

AP39

BREAST	
OVARIAN	2
UTERINE OR ENDOMETRIAL	
COLON OR RECTAL	4
"FEMALE PROBLEMS"	5
REFUSED	7
DON'T KNOW	

PROGRAMMING NOTE QA05 F40:

IF QA05_F7 AND QA05_F8 AND QA05_F9 NE 1 (NO RELATIVE DIAGNOSED WITH CANCER), GO TO PN QA05_FB1;

IF QA05_F7 = 1 AND QA05_F8 = 2 AND QA05_F9 = 2, GO TO QA05_F41A

IF QA05_F7 = 2 AND QA05_F8 = 1 AND QA05_F9 = 2, GO TO QA05_F41B

ELSE CONTINUE WITH QA05_F40

ALSO, IF QA05_F9 = 2, DISPLAY "grandfathers and uncles."

ELSE IF QA05 F7 NE 2, DISPLAY "grandfathers"

ELSE IF QA05 F8 NE 2, DISPLAY "uncles"

AND IF QA05_E2 = 2 (FEMALE R, NEVER GIVEN BIRTH), DISPLAY "and brothers."

ELSE DISPLAY "brothers, and sons."

QA05_F40 Now, I'll ask about your male relatives. By male relatives, I mean father, grandfathers, uncles, {and} brothers, {and sons}.

現在,我想詢問有關您的男性親屬的情況。男性親屬指{祖父、叔叔、伯伯、/外祖父、舅舅}、父親、{哥哥/弟弟及兒子}。

Have any of your male relatives been diagnosed with cancer of the prostate, colon, rectum, or breast? 您的男性親屬中是否有人曾經被診斷患有前列腺癌、結腸癌、直腸癌或 乳癌?

YES	1	
NO	2 [GO TO QA05 _	FB1]
REFUSED		-
DON'T KNOW	-8 IGO TO QA05	-

P	R	OG	RA	M	MIN	G N	OTE	QA05	F11:
---	---	----	----	---	-----	-----	-----	------	------

IF QA05_F7 NE 2, DISPLAY "grandfather"

IF QA05 F8 NE 2, DISPLAY "uncle"

IF QA05 F9 NE 2, DISPLAY "father and brother"

IF QA05 F9 NE 2 AND AD2 NE 2, DISPLAY son"

QA05_F41

Which male relatives have been diagnosed with cancer of the prostate, colon, rectum, or breast? Was it your...

哪一些男性親屬曾經被診斷患有前列腺癌、結腸癌、直腸癌或乳癌?是您的.....

AP41

[CODE ALL THAT APPLY. CTRL-P TO EXIT.]

[PROBE: "Any others?"]

[PROBE: "還有任何其他癌症嗎?"]

Grandfather(s)	1
祖父(外祖父)?	1
Uncle(s)	2
伯伯(叔叔、舅舅)?	2
Father	3
父親?	
Brother(s)	4
兄弟?	4
Son(s)	5
兒子? [`]	5
REFUSED	7
DON'T KNOW	

PROGRAMMING NOTE QA05_F42:

IF QA05_F41 =1 (GRANDFATHER), CONTINUE WITH QA05_F42; ELSE GO TO PROGRAMMING NOTE QA05_F47

QA05_F42 Is the grandfather on your mother's or father's side, or both? 是您的祖父、外祖父還是二者都是?

MOTHER'S FATHER	1
FATHER'S FATHER	2
BOTH GRANDFATHERS	3
REFUSED	7
DON'T KNOW	-8

	NG NOTE QA05_F43 = 3 DISPLAY "First tell me about your mother's father."
11 07100_1 42	o blot Extr. That tell the about your mother a father.
QA05_F43	{First tell me about your mother's father.} Did he have cancer of the prostate, colon, rectum, or breast? 他是否曾經患前列腺癌、結腸癌、直腸癌或者乳癌?
AP43	
AF43	[CODE ALL THAT APPLY. CTRL-P TO EXIT.]
	[PROBE: "Any others?"] [PROBE: "還有任何其他癌症嗎? "]
	PROSTATE 1 COLON OR RECTAL 2 BREAST 3 NONE OF THESE CANCER TYPES 4 [GO TO PN QA05_F46] REFUSED -7 DON'T KNOW -8
	NG NOTE QA05_F44 N ONE CANCER REPORTED IN QA05_F43 DISPLAY "Were any of these diagnoses before age 50?"
QA05_F44	{Were any of these diagnoses before age 50?} Was his diagnosis before age 50? 他是否在 50 歲之前被診斷患有癌症?
AP44	YES
IF QA05_F44	NG NOTE QA05_F45 = 1 AND MORE THAN ONE CANCER REPORTED IN QA05_F43 CONTINUE WITH QA05_F45 PROGRAMMING NOTE QA05_F46
QA05_F45	Which of these cancers were diagnosed before age 50? 其中哪一些癌症是在 50 歲之前診斷出來的?
AP45	PROSTATE 1 COLON OR RECTAL 2 BREAST 3 REFUSED -7 DON'T KNOW -8

IF QA05_F43 =	NG NOTE QA05_F46 = 3 (BOTH GRANDFATHERS), CONTINUE WITH QA05_F46 PROGRAMMING NOTE QA05_F48
QA05_F46	Now tell me about your father's father. Did he have cancer of the prostate, colon, rectum, or breast? 現在,請告訴我您的祖父的情況。他是否曾經患前列腺癌、結腸癌、直腸癌或者乳癌?
AP46	[CODE ALL THAT APPLY. CTRL-P TO EXIT.]
	[PROBE: "Any others?"] [PROBE: "還有任何其他癌症嗎? "
	PROSTATE 1 COLON OR RECTAL 2 BREAST 3 NONE OF THESE CANCER TYPES 4 [GO TO PN QA05_F49] REFUSED -7 [GO TO PN QA05_F49] DON'T KNOW -8 [GO TO PN QA05_F49]
	NG NOTE QA05_F47 N ONE CANCER REPORTED IN QA05_F46 DISPLAY "Were any of these diagnoses before age 50?"
QA05_F47	{Were any of these diagnoses before age 50?} Was his diagnosis before age 50? 他是否在 50 歲之前被診斷患有癌症?
AP47	YES
IF QA05_F47 =	NG NOTE QA05_F48 = 1 AND MORE THAN ONE CANCER REPORTED IN QA05_F46 CONTINUE WITH QA05_F48 PROGRAMMING NOTE QA05_F49
QA05_F48	Which of these cancers were diagnosed before age 50? 其中哪一些癌症是在 50 歲之前診斷出來的?
AP48	PROSTATE1

 COLON OR RECTAL
 2

 BREAST
 3

 REFUSED
 -7

 DON'T KNOW
 -8

IF QA05_F41 =	IG NOTE QA05_F49 2 2, (UNCLE/S DIAGNOSED WITH CANCER) CONTINUE WITH QA05_F49; PROGRAMMING NOTE QA05_F54
QA05_F49	ls the uncle or uncles you mentioned on your mother's side, your father's side, or on both sides? 您提及的伯伯(叔叔、舅舅)是您的母親的兄弟、您的父親的兄弟還是 二者都是?
AP49	MOTHER'S SIDE
IF QA05_F49 =	IG NOTE QA05_F50 : 1 (MOTHER'S SIDE) OR QA05_F49 = 3 (BOTH SIDES), CONTINUE WITH QA05_F50; PROGRAMMING NOTE QA05_F54
QA05_F50	How many of your mother's brothers had cancer of the prostate, colon, rectum, or breast? 您母親的兄弟中有幾人曾經患前列腺癌、結腸癌、直腸癌或乳癌?
AP50	NUMBER OF UNCLES REFUSED7 DON'T KNOW8
IF QA05_F50 = IF QA05_F50 > did he have car QA05_F51;	IG NOTE QA05_F51 1 DISPLAY "Did he have cancer of the prostate, colon, rectum, or breast?"; 1 DISPLAY "Thinking about the (youngest/next youngest) of your mother's brothers who had cancer, neer of the prostate, colon, rectum, or breast?" OR QA05_F42 = 3 (BOTH SIDES), CONTINUE WITH PROGRAMMING NOTE QA05_F54
QA05_F51	{Did he have cancer of the prostate, colon, rectum, or breast?} Thinking about the (youngest/next youngest) of your mother's brothers who had cancer, did he have cancer of the prostate, colon, rectum or breast? 他是否曾經患前列腺癌、結腸癌、直腸癌或者乳癌?
AP51	PROSTATE 1 COLON OR RECTAL 2 BREAST 3 NONE OF THESE CANCER TYPES 4 [GO TO PN X5] REFUSED -7 [GO TO PN X5] DON'T KNOW -8 [GO TO PN X5]

	ING NOTE QA05_F52 IAN ONE CANCER REPORTED IN QA05_F51 DISPLAY "Were any of these diagnoses before age 50?"
QA05_F52	{Were any of these diagnoses before age 50?} Was his diagnosis before age 50? 他是否在 50 歲之前被診斷患有癌症?
AP52	YES
IF QA05_F52	/IING NOTE QA05_F53 2 = 1 AND MORE THAN ONE CANCER REPORTED IN QA05_F51 CONTINUE WITH QA05_F53 D PROGRAMMING NOTE QA05_F54
QA05_F53	Which of these cancers were diagnosed before age 50? 其中哪一些癌症是在 50 歲之前診斷出來的?
AP53	PROSTATE
IF QA05_F50 WITH SPEC	ING NOTE X5 O > 1, REPEAT SERIES QA05_F51 THRU QA05_F53 FOR EACH MOTHER'S BROTHER DIAGNOSED IFIED CANCER/S (MAX = 3) O PROGRAMMING NOTE QA05_F54
IF QA05_F49	MING NOTE QA05_F54 9 = 2 (FATHER'S SIDE) or QA05_F49 = 3 (BOTH SIDES) CONTINUE WITH QA05_F54 D PROGRAMMING NOTE QA05_F58
QA05_F54	How many of your father's brothers had cancer of the prostate, colon, rectum, or breast? 您父親的兄弟中有幾人曾經患前列腺癌、結腸癌、直腸癌或乳癌?
AP54	NUMBER OF UNCLES
	REFUSED7 DON'T KNOW8

IF QA05 F54 = 1 DISPLAY "Did he have cancer of the prostate, colon, rectum, or breast?";

IF QA05_F54 > 1 DISPLAY "Thinking about the (youngest/next youngest) of your father's brothers who had cancer, did he have cancer of the prostate, colon, rectum, or breast?";

ELSE GO TO PROGRAMMING NOTE QA05 F58

QA05 F55

{Did he have cancer of the prostate, colon, rectum, or breast?} Thinking about the (youngest/next youngest) of your father's brothers who had cancer, did he have cancer of the prostate, colon, rectum, or breast?

他是否曾經患前列腺癌、結腸癌、直腸癌或者乳癌?

Λ.	DEE
-	200

PROSTATE	1	
COLON OR RECTAL	2	
BREAST	3	
NONE OF THESE CANCER TYPES	4	[GO TO PN X6]
REFUSED	7	[GO TO PN X6]
DON'T KNOW	8	GO TO PN X6

PROGRAMMING NOTE QA05 F56

IF MORE THAN ONE CANCER REPORTED IN QA05_F55 DISPLAY "Were any of these diagnoses before age 50?"

QA05_F56 {Were any of these diagnoses before age 50?} Was his diagnosis before age 50? 他是否在 50 歲之前被診斷患有癌症?

AP56

YES	
NO	
REFUSED	7
DON'T KNOW	

PROGRAMMING NOTE QA05 F57

IF QA05_F56 = 1 AND MORE THAN ONE CANCER REPORTED IN QA05_F55 CONTINUE WITH QA05_F57 ELSE GO TO PROGRAMMING NOTE QA05_F58

QA05_F57 Which of these cancers were diagnosed before age 50? 其中哪一些癌症是在 50 歲之前診斷出來的?

PROSTATE	1
COLON OR RECTAL	
BREAST	3
REFUSED	7
DON'T KNOW	_8

PROGRAMMING NOTE X6

IF QA05_F54 > 1, REPEAT SERIES QA05_F55 THRU QA05_F57 FOR EACH FATHER'S BROTHER DIAGNOSED WITH SPECIFIED CANCER/S (MAX = 3) ELSE GO TO PROGRAMMING NOTE QA05_F58

PROGRAMMING NOTE QA05 F58

IF QA05_F42 = 3 (FATHER) CONTINUE WITH QA05_F58 ELSE GO TO QA05_F61

QA05 F58

Did your father have cancer of the prostate, colon, rectum, or breast? 您父親曾經患過前列腺癌、結腸癌、直腸癌或乳癌嗎?

AP58

[CODE ALL THAT APPLY. CTRL-P TO EXIT.]

[PROBE: "Any others?"]

DDOCTATE

[PROBE: "還有任何其他癌症嗎? "]

PRUSTATE	I	
COLON OR RECTAL	2	
BREAST	3	
NONE OF THESE CANCER TYPES	4	[GO TO PN QA05_F61]
REFUSED	7	[GO TO PN QA05 F61]
DON'T KNOW	8	[GO TO PN QA05_F61]

PROGRAMMING NOTE QA05 F59

IF MORE THAN ONE CANCER REPORTED IN QA05_F58 DISPLAY "Were any of these diagnoses before age 50?"

QA05_F59 {Were any of these diagnoses before age 50?} Was his diagnosis before age 50? 他是否在 50 歲之前被診斷患有癌症?

AP59

YES	
NO	2
REFUSED	7
DON'T KNOW	8-

PROGRAMMING NOTE QA05 F60

IF QA05_F59 = 1 AND MORE THAN ONE CANCER REPORTED IN QA05_F58 CONTINUE WITH QA05_F60 ELSE GO TO PROGRAMMING NOTE QA05_F61

QA05_F60 Which of these cancers were diagnosed before age 50? 其中哪一些癌症是在 50 歲之前診斷出來的?

PROSTATE	1
COLON OR RECTAL	
BREAST	3
REFUSED	7
DON'T KNOW	-8

	NG NOTE QA05_F61 = 4 (BROTHER/S DIAGNOSED) CONTINUE WITH QA05_F61; QA05_F66	
QA05_F61	How many of your brothers had cancer of the prostate, colon, r 您的兄弟中有幾人曾經患前列腺癌、結腸癌、直腸癌或乳癌?	rectum, or breast?
AP61	NUMBER OF BROTHERS	
	REFUSED7 DON'T KNOW8	
IF QA05_F61: IF QA05_F61: have cancer of	NG NOTE QA05_F62: = 1 DISPLAY "Did he have cancer of the prostate, colon, rectum, > 1 DISPLAY "Thinking about the (youngest/next youngest) of yof the prostate, colon, rectum, or breast?" PROGRAMMING NOTE QA05_F66	
QA05_F62	{Did he have cancer of the prostate, colon, rectum, or breast?} youngest) of your brothers who had cancer, did he have cance breast? 他是否曾經患前列腺癌、結腸癌、直腸癌或者乳癌?	
AP62	PROSTATE 1 COLON OR RECTAL 2 BREAST 3 NONE OF THESE CANCER TYPES 4 REFUSED -7 DON'T KNOW -8	[GO TO PN X7] [GO TO PN X7] [GO TO PN X7]
	NG NOTE QA05_F63 N ONE CANCER REPORTED IN QA05_F62 DISPLAY "Were al	ny of these diagnoses before age 50?"
QA05_F63	{Were any of these diagnoses before age 50?} Was his diagnomed 他是否在 50 歲之前被診斷患有癌症?	sis before age 50?
AP63	YES	

IF QA05_F63	PROGRAMMING NOTE QA05_F64 IF QA05_F63 = 1 AND MORE THAN ONE CANCER REPORTED IN QA05_F62 CONTINUE WITH QA05_F64 ELSE GO TO PROGRAMMING NOTE QA05_F65	
QA05_F64	Which of these cancers were diagnosed before age 50? 其中哪一些癌症是在 50 歲之前診斷出來的?	
AP64	PROSTATE1	
	COLON OR RECTAL2	
	BREAST	
	DON'T KNOW8	
ASK QA05_F6	ING NOTE QA05_F65 65 A SINGLE TIME FOR EACH BROTHER, DISPLAYING THE QUESTION AFTER SERIES QA05_F62 F64 IS COMPETED FOR THE BROTHER.	
QA05_F65	Was this brother a full brother, a half-brother on your father's side, or a half-brother on your mother's side?	
	您的這個兄弟是同父同母兄弟、同父異母兄弟還是同母異父兄弟?	
AP65		
7.1. 00	FULL1	
	HALF ON FATHER'S SIDE2 HALF ON MOTHER'S SIDE3	
	REFUSED	
	DON'T KNOW8	
SPECIFIED C	ING NOTE X7 > 1, REPEAT SERIES QA05_F55 THRU QA05_F57 FOR EACH BROTHER DIAGNOSED WITH ANCER/S (MAX = 3) PROGRAMMING NOTE QA05 F66	
	ING NOTE QA05_F66 = 5 (SON/S DIAGNOSED) CONTINUE WITH QA05_F66; QA05_FB1	
QA05_F66	How many of your sons had cancer of the prostate, colon, rectum, or breast? 您有幾個兒子曾經患過前列腺癌、結腸癌、直腸癌或乳癌?	
AP66	NUMBER OF SONS	
	REFUSED7	
	DON'T KNOW8	

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PROGRAMMING NO	OTE QA05	F67
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IF QA05 F66 = 1 DISPLAY "Did he have cancer of the prostate, colon, rectum, or breast?";

IF QA05_F66 > 1 DISPLAY "Thinking about the (youngest/next youngest) of your sons who had cancer, did he have cancer of the prostate, colon, rectum, or breast?"

QA05 F67

{Did he have cancer of the prostate, colon, rectum, or breast?} Thinking about the (youngest/next youngest) of your sons who had cancer, did he have cancer of the prostate, colon, rectum, or breast? 他是否曾經患前列腺癌、結腸癌、直腸癌或乳癌?

AP67

PROSTATE	1	
COLON OR RECTAL		
BREAST	3	
NONE OF THESE CANCER TYPES	4	[GO TO X8]
REFUSED	7	[GO TO X8]
DON'T KNOW	8	[GO TO X8]

PROGRAMMING NOTE QA05_F68

IF MORE THAN ONE CANCER REPORTED IN QA05_F67 DISPLAY "Were any of these diagnoses before age 50?"

QA05_F68 {Were any of these diagnoses before age 50?} Was his diagnosis before age 50? 他是否在 50 歲之前被診斷患有癌症?

AP68

YES	
NO	2
REFUSED	7
DON'T KNOW	

PROGRAMMING NOTE QA05 F69

IF QA05_F68 = 1 AND MORE THAN ONE CANCER REPORTED IN QA05_F67 CONTINUE WITH QA05_F69 ELSE GO TO QA05_FB1

QA05_F69 Which of these cancers were diagnosed before age 50?

其中哪一些癌症是在 50 歲之前診斷出來的?

AP69

PROSTATE	1
COLON OR RECTAL	
BREAST	3
REFUSED	
DON'T KNOW	

PROGRAMMING NOTE X8

IF QA05_F66 > 1, REPEAT SERIES QA05_F67 THRU QA05_F69 FOR EACH BROTHER DIAGNOSED WITH SPECIFIED CANCER/S (MAX = 3) ELSE GO TO QA05_FB1

PROGRAMMING NOTE QA05_FB1:

IF AAGE < 40 OR [AA2A = 1 (BETWEEN 18 AND 29) OR 2 (BETWEEN 30 AND 39)] OR ENUM.AGE < 40 OR AGE IS UNKNOWN, GO TO PROGRAMMING NOTE QA05_FB9;

ELSE CONTINUE WITH QA05_FB1

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Colon	cancer	screening	าต

QA05 FB1

Have you <u>ever</u> had a Sigmoidoscopy or Colonoscopy? These are exams in which a health care professional inserts a tube into the rectum to look for signs of cancer or other problems.

您是否曾經接受乙狀結腸鏡檢查、結腸鏡檢查或直腸鏡檢查?在此類檢查中,健康護理專業人員將一根 管子插入 腸,查找癌症 其他問題的跡象。

AF14

[IF NEEDED, SAY: "For a <u>Sigmoidoscopy</u> a flexible tube is inserted into the rectum to look for problems. A Colonoscopy is <u>similar</u>, but uses a longer tube, and you are usually given medication through a needle in your arm to make you sleepy and told to have someone else drive you home. "] [IF NEEDED, SAY:"乙狀結腸鏡檢查是將一根軟管插入直腸進行檢查。

結腸鏡檢查與乙狀結腸鏡檢查相似,但使用的管子更長,通常會通過插入手臂的針頭向您體內注射藥物,讓您入睡,並要求有人駕車載您回家。直腸鏡檢查是一種老式的檢查,使用一根硬管。"]

YES1	
NO2	[GO TO PN QA05_FB4]
REFUSED7	[GO TO PN QA05_FB6]
DON'T KNOW8	[GO TO PN QA05_FB6]

QA05_FB2

How long ago did you have your most recent exam? 您最近接受的一次檢查是在什麼時間?

AF16

A YEAR AGO OR LESS	1	
MORE THAN 1 UP TO 2 YEARS AGO	2	
MORE THAN 2 UP TO 3 YEARS AGO	3	
MORE THAN 3 UP TO 5 YEARS AGO	4	
MORE THAN 5 UP TO 10 YEARS AGO	5	
MORE THAN 10 YEARS AGO	6	[0
REFUSED	7	-
DON'T KNOW	Q	

[GO TO PN QA05_FB4]

QA05 FB3

Was your <u>most recent</u> exam a sigmoidoscopy a colonoscopy or something else? **您#最近一次\接受的檢**查是乙狀結腸鏡、結腸鏡還是其他檢查?

AF61

[IF NEEDED, SAY: "For a Sigmoidoscopy, a flexible tube is inserted into the rectum to look for problems. A <u>Colonoscopy</u> is <u>similar</u> but uses a longer tube, and you are usually given medication through a needle in your arm to make you sleepy, and told to have someone else drive you home."] [IF NEEDED, SAY: "在做乙狀結腸鏡檢查時,會將一根軟管插入直腸檢查。結腸鏡檢查與之類似,但會使用較長的管子,通常會通過插入手臂的針頭 給藥,讓您入睡,並要求由他人駕車將您送回家。"]

SIGMOIDOSCOPY	1
COLONOSCOPY	2
SOMETHING ELSE	4
REFUSED	7
DON'T KNOW	-8

PROGRAMMING NOTE QA05_FB4

IF QA05_FB1 = 2 (NEVER HAD) OR QA05_FB2 = 6 (NO EXAM IN LAST 10 YEARS, CONTINUE WITH QA05_FB4 ELSE GO TO QA05_FB5

QA05_FB4

During the past 12 months has a doctor recommended that you have a sigmoidoscopy or colonoscopy?

在過去 12 個月中,是否有醫生或其他健康專業人員建議您接受乙狀 結腸鏡或結腸鏡檢查?

AF21

YES	1	
NO	2	[GO TO QA05_FB6]
DID NOT GO TO DOCTOR IN		
PAST 12 MONTHS	92	[GO TO QA05_FB6]
REFUSED	7	[GO TO QA05_FB6]
DON'T KNOW	8	[GO TO QA05_FB6]

PROGRAMMING NOTE QA05_FB:

IF QA05_FB1 = 2 (NEVER HAD SIGMOIDOSCOPY OR COLONOSCOPY), DISPLAY "NEVER had"; IF QA05_FB2 = 6 (NO EXAM LAST 10 YEARS), DISPLAY "NOT had"

QA05_FB5

What is the ONE most important reason why you have {NEVER had/NOT had} one of these exams {in the last 10 years}?

在過去十年中,您未接受其中一項檢查的#一個\最重要的原因是什麼?

NO REASON/NEVER THOUGHT ABOUT IT
DOCTOR DIDN'T TELL ME I NEEDED IT3
HAVEN'T HAD ANY PROBLEMS4
PUT IT OFF/LAZINESS5
TOO EXPENSIVE/NO INSURANCE/COST 6
TOO PAINFUL, UNPLEASANT, OR
EMBARRASSING7
HAD ANOTHER TYPE OF COLORECTAL EXAM8
DON'T HAVE A DOCTOR9
OTHER91
REFUSED7
DON'T KNOW8

QA05_FB6

The following questions are about the blood stool or occult blood test, a test to determine whether you have blood in your stool or bowel movement. The blood stool test can be done at home using a kit. You smear a small amount of stool on cards at home and send the cards back to the doctor or lab.

以下是有關血便或潛血測試的問題,此項測試是為了確定您的大便或排便中是否帶血。可使用測試工具在家中作血便測試。您在家中將少量大便塗在卡片上,將卡片送回給醫生或實驗室。

Have you ever done a blood stool test, using a HOME test kit? 您是否曾經使用家中測試工具做過血便測試?

AF22

YES	1	
NO	2	[GO TO QA05 FB8]
REFUSED		
DON'T KNOW		

QA05 FB7

How long ago did you do your most recent HOME blood stool test? 您最近一次做家中血便測試是多久以前?

AF24

A YEAR AGO OR LESS	1	[GO TO QA05_FB10]
MORE THAN 1 YEAR AGO UP TO		
2 YEARS AGO	2	
MORE THAN 2 YEARS AGO UP TO		
3 YEARS AGO	3	
MORE THAN 3 YEARS AGO UP TO		
5 YEARS AGO	4	
MORE THAN 5 YEARS AGO	5	
REFUSED	7	[GO TO QA05_FB10]
DON'T KNOW	8	[GO TO QA05_FB10]

PROGRAMMING NOTE QA05 FB8

IF QA05_FB6 = 2 (NEVER HAD) OR QA05_FB7 > 1 (NO EXAM IN LAST YEAR), CONTINUE WITH QA05_FB8 ELSE GO TO PROGRAMMING NOTE QA05_FB10

QA05_FB8 In the past 12 months, has a doctor recommended that you have a home blood stool test? 在過去 12 個月中,是否有醫生建議您做家中血便測試?

YES	1	
NO	2	[GO TO QA05 FB10]
DID NOT GO TO DOCTOR		
IN PAST 12 MONTHS	92	[GO TO QA05_FB10]
REFUSED	7	[GO TO QA05_FB10]
DON'T KNOW	8-	[GO TO QA05_FB10]

PROGRAMMING NOTE QA05 FB9:

IF QA05_FB6 = 2 (NEVER HAD HOME STOOL TEST), CONTINUE WITH QA05_FB9 AND DISPLAY "NEVER had"; ELSE IF QA05_FB7 > 1 (NONE IN PAST 12 months), CONTINUE WITH QA05_FB9 AND DISPLAY "NOT had" and "in the past 12 months";

ELSE GO TO QA05 FB10

QA05_FB9

What is the most important reason you have {NEVER had /NOT had} a HOME blood stool test {in the past 12 months }?

您#從未\做過#家中\血便測試的最主要原因是什麼?

AF28

NO REASON/NEVER THOUGHT ABOUT IT	1
DIDN'T NEED/DIDN'T KNOW I NEEDED	
THIS TYPE OF TEST	2
DOCTOR DIDN'T TELL ME I NEEDED IT	3
HAVEN'T HAD ANY PROBLEMS	4
PUT IT OFF/LAZINESS	5
TOO EXPENSIVE/NO INSURANCE/COST	6
TOO PAINFUL, UNPLEASANT, EMBARRASSIN	NG.7
HAD ANOTHER TYPE OF COLORECTAL EXAM	8M
DON'T HAVE A DOCTOR	9
OTHER	91
REFUSED	7
DON'T KNOW	8

PROGRAMMING NOTE QA05_FB10:

IF FEMALE, GO TO QA05 G1;

IF MALE AND [AGE < 40 $\overline{\text{OR}}$ BETWEEN 18 AND 29 OR BETWEEN 30 AND 39 OR ENUM.AGE < 45 OR IF AGE IS UNKNOWN], GO TO QA05 G1;

ELSE CONTINUE WITH QA05_FB10

Prostate cancer screening

QA05 FB10

Have you ever HEARD OF a PSA or "prostate-specific antigen" test to detect prostate cancer? A PSA test is a blood test to detect prostate cancer.

您是否曾經#聽說過\用於檢測前列腺癌的 PSA 或「前列腺特異性抗原」

測試? PSA 測試是一項檢測前列腺癌的血液測試。

AF30

YES	1
	2 [GO TO QA05_G1]
	7 [GO TO QA05_G1]
	-8 iGO TO QA05 G1 1

QA05 FB11

Have you ever HAD a PSA test? 您有沒有做過 PSA 測試?

YES	1
NO	
REFUSED	
DON'T KNOW	8 [GO TO QA05 G1]

QA05_FB12

How long ago did you have your most recent PSA test? 您最近一次做 PSA 測試是多久以前?

YEAR AGO OR LESS	1
MORE THAN 1 YEAR AGO UP TO	
2 YEARS AGO	2
MORE THAN 2 YEARS AGO UP TO	
3 YEARS AGO	3
MORE THAN 3 YEARS AGO UP TO	
5 YEARS AGO	4
MORE THAN 5 YEARS AGO	5
REFUSED	7
DON'T KNOW	8

Section G - Demographic Information, Part II

Country of birth (self, parents)

QA05_G1 Now a few more questions about you.

現在,我想再問幾個有關您本人的問題。

In what country were you born? 您是在哪一個國家出生的?

AH33

[SELECT FROM MOST LIKELY COUNTRIES]

UNITED STATES	
AMERICAN SAMOA	2
CANADA	3
CHINA	
EL SALVADOR	5
ENGLAND	
FRANCE	
GERMANY	8
GUAM	
GUATEMALA	10
HUNGARY	11
INDIA	
IRAN	13
IRELAND	14
ITALY	
JAPAN	
KOREA	17
MEXICO	
PHILIPPINES	
POLAND	
PORTUGAL	
PUERTO RICO	
RUSSIA	
TAIWAN	
VIETNAM	
VIRGIN ISLANDS	
OTHER (SPECIFY):	91
REFUSED	7
DON'T KNOW	-8

PROGRAMMING NOTE QA05_G2:

IF QA05_G1 NE 1 (NOT BORN IN US), GO TO QA05_G4 ELSE IF QA05_G1 = 1 (BORN IN US) CONTINUE WITH QA05_G2

QA05_G2 In what country was your mother born? 您的母親是在哪一個國家出生的?

AH34

[SELECT FROM MOST LIKELY COUNTRIES]

[FOR RESPONDENTS WHO WERE ADOPTED, QUESTION REFERS TO ADOPTIVE PARENTS]

JNITED STATES	
AMERICAN SAMOA	2
CANADA	3
CHINA	
EL SALVADOR	5
ENGLAND	6
FRANCE	7
GERMANY	3
GUAM	9
GUATEMALA	10
HUNGARY	11
NDIA	12
RAN	13
RELAND	14
TALY	15
JAPAN	
KOREA	17
MEXICO	
PHILIPPINES	19
POLAND	20
PORTUGAL	
PUERTO RICO	22
RUSSIA	23
TAIWAN	24
√IETNAM	25
VIRGIN ISLANDS	
OTHER (SPECIFY):	91
REFUSED	7
DON'T KNOW	_2

QA05_G3 In w

In what country was your father born? 您的父親是在哪一個國家出生的?

AH35

[SELECT FROM MOST LIKELY COUNTRIES] [FOR RESPONDENTS WHO WERE ADOPTED, QUESTION REFERS TO ADOPTIVE PARENTS]

JNITED STATES	
AMERICAN SAMOA	2
CANADA	3
CHINA	4
EL SALVADOR	5
ENGLAND	6
FRANCE	7
GERMANY	8
GUAM	
GUATEMALA	10
HUNGARY	11
NDIA	· · · · · · · · · · · · · · · · · · ·
RAN	13
RELAND	14
TALY	15
JAPAN	16
(OREA	
MEXICO	
PHILIPPINES	19
POLAND	
PORTUGAL	
PUERTO RICO	
RUSSIA	23
ΓΑΙWAN	24
/IETNAM	
/IRGIN ISLANDS	
OTHER (SPECIFY):	
REFUSED	
DON'T KNOW	8

Racial/ethnic discrimination (general)

QA05_G4 Thinking about your race or ethnicity, how often have you felt treated badly or unfairly because of your race or ethnicity? Would you say ...

請想一想您的種族,您由於自己的種族感到受到不良對待或不公平對待的頻率有多高?您認為是......

AG4

Never	1
從來沒有	
Rarely	2
極少	2
Sometimes	3
有時	3
Often	4
經常, 還是	4
Or all the time?	
所有時間?	5
REFUSED	7
DON'T KNOW	8

Languages spoken at home, citizenship, immigration status

QA05_G5 What languages do you speak at home? 您在家中用什麼語言交談?

AH36

[CODE ALL THAT APPLY.]

[PROBE: "Any others?"]

[PROBE: "還有任何其他癌症嗎? "]

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	QA05	G6:
-------------	------	-------------	-----

IF INTERVIEW NOT CONDUCTED IN ENGLISH, CONTINUE WITH QA05 G6

IF INTERVIEW CONDUCTED IN ENGLISH AND QA05_G5 >1 (SPEAKS LANGUAGE OTHER THAN ENGLISH AT HOME), CONTINUE WITH QA05_G6 AND DISPLAY: "Since you speak a language other than English at home, we are interested in your own opinion of how well you speak English..." AND DROP RESPONSE CATEGORY "NOT AT ALL":

ELSE IF QA05_G5 = 1 ONLY (ENGLISH IS ONLY LANGUAGE SPOKEN AT HOME), GO TO PN QA05_G7

QA05_G6

{Since you speak a language other than English at home, we are interested in your own opinion of how well you speak English} Would you say you speak English 與您在家中說的其他幾種語言相比,您認為您的英語講得.....

AH37

Very well	
很好	
Well	2
較好, 還是	2
Not well or	3
不好?	3
Not at all?	4
REFUSED	7
DON'T KNOW	8-

PROGRAMMING NOTE QA05_G7:

IF QA05_G1 = 1 (USA) OR 2 (\overline{A} MERICAN SAMOA) OR 9 (GUAM) OR 22 (PUERTO RICO) OR 26 (VIRGIN ISLANDS), GO TO PN QA05_G10;

ELSE CONTINUE WITH QA05_G7

Citizenship and immigration

QA05_G7

The next questions are about citizenship and immigration.

以下是有關公民身份及移民的幾個問題。您的回答會予以保密,絕對不會向移民局報告。

Are you a citizen of the United States? 您是美國公民嗎?

AH39

YES	1	[GO TO QA05_G9]
NO	2	
APPLICATION PENDING	3	
REFUSED	7	
DON'T KNOW	8	

QA05_G8

Are you a permanent resident with a green card? Your answers are confidential and will not be reported to Immigration Services.

您是擁有綠卡的永久居民嗎?

AH40

IF NEEDED, SAY: "People usually call this a 'Green Card' but the color can also be pink, blue, or white."

YES	
NO	
APPLICATION PENDING	3
REFUSED	-7

 YES
 1

 NO
 2

 REFUSED
 -7

 DON'T KNOW
 -8

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AG5

IF QA05_A15 = IF A15 = 2 (LIV	NG NOTE QA05_G11: -1 (MARRIED) CONTINUE WITH QA05_G11 ING WITH PARTNER, GO TO G12) PROGRAMMING NOTE QA05_G13
QA05_G11	Is your spouse also living in your household? 您的 {太太或丈夫} 是不是也住在 您的家中?
AH44	YES
QA05_G12	May I have your {spouse/partner}'s first name and age? 你是否能夠告訴我你的{同居者}的名字和年齡?
SC11A	[ENTER SPOUSE'S/PARTNER'S NAME, AGE, AND SEX] SPOUSE/PARTNER NAME SPOUSE/PARTNER AGE SPOUSE/PARTNER SEX
IF AAGE<30 O IN HH) AND 3 O IF AAGE<30 O ADULTS LIVIN IF AAGE<30 O	NG NOTE QA05_G13: R QA05_A4 = 1 (AGE 18-29) AND QA05_A15 = 1 (MARRIED) AND QA05_G11 =1 (SPOUSE LIVING OR MORE ADULTS LIVE IN HH, CONTINUE WITH QA05_G13; R QA05_A4 =1 (AGE 18-29) AND QA05_A15 =2 (LIVING WITH PARTNER) AND 3 OR MORE G IN HH, CONTINUE WITH QA05_G13; R QA05_A4 =1 (AGE 18-29) AND QA05_A15 = 3, 4, 5, 6, OR -7, -8 (WIDOWED, DIVORCED, NEVER MARRIED, REF, DK) AND 2 OR MORE ADULTS LIVING IN HH, CONTINUE WITH
QA05_G13 AH43A Child and teen QA05_G14	Are you now living with either of your parents? 您目前有沒有與您的父母之中一人住在一起? YES
SC12	YES

QA05_G15	Please tell me only the first names and ages of all the children under 18, including babies, who
	normally live in your household.

請給我通常住在你家裡、年齡在 18 歲以下,包括嬰兒在內的每個小孩的名字和年齡。

SC13A

[PROBE: "Is there anyone else?"] [PROBE: "還有其他的人嗎?"]

[ENTER AGE OF 0 (ZERO), IF LESS THAN 1 YEAR OLD]

CHILD	FIRST NAME	AGE	M/F
1			
2			
3			
4			
5			

QA05_G16 Is (CHILD) ...

{CHILD NAME/AGE/SEX}是...

SC15A

. 1	[CODE AS CHILD]
	_
2	[CODE AS TEEN]
	-
	[CODE AS TEEN]
	[CODE AS TEEN]
	1 2 2 -7

QA05_G17 I have recorded {number} {child/children} under 18 in the household. Have I missed any children under 18 who usually live here but are temporarily away?

我的記錄顯示這個家中沒有 18 歲以下的兒童。你是不是漏掉了任何通常住在這裡但臨時外出的 18 歲以下的兒童?

SC13

NO ONE MISSED -- ROSTER IS CORRECT...... 1
RETURN TO ROSTER...... 2 [GO BACK TO QA05 G15]

PROGRAMMING NOTE QA05_G18:

IF ANY PEOPLE IN HH UNDER AGE 18, ASK QA05_G18A ABOUT EACH PERSON UNDER 18

QA05_G18 Are you the parent or legal guardian of {PERSON NAME/AGE/SEX}? 你是不是{PERSON NAME/AGE/SEX}的父親/母親或法定監護人?

SC14A

YES	1
NO	
REFUSED	
DON'T KNOW	-8

	ING NOTE QA05_G18A:
	LE IN HH UNDER AGE 18 AND [AH44=1 OR AH43=2], ASK QA05_G18A ABOUT THE RTNER AND EACH PERSON UNDER 18
QA05_G18A	Is (NAME/AGE/SEX) the parent or legal guardian of (PERSON NAME/AGE/SEX)?
	{NAME/AGE/SEX }是不是{PERSON NAME/AGE/SEX}的父母或法定監護人?
SC14B	
331.12	YES1
	NO2
	REFUSED7
	DON'T KNOW8
	ING NOTE QA05_G19:
	= 1 (YES, CHILDREN UNDER 18 IN HH) AND ANY CHILDREN IN QA05_G14 ARE AGE 13 OR LESS
CONTINUE W	/ITH QA05_G19;ELSE GO TO QA05_G21) IN ROSTER QA05_G13 < 14 AND >= 14 display "for any children under age 13"
IF QA05 A15	= 1 (MARRIED) AN D QA05_G10 =1 (SPOUSE LIVING IN HH), DISPLAY "you or your spouse",
	= 2 (LIVING WITH PARTNER), DISPLAY "you or your partner", ELSE DISPLAY "you".
Paid child ca	
QA05_G19	In the past month, did you use any paid childcare (for any children under age 13) while (you or your
	spouse/partner/ you} worked, were in school, or looked for work?
	在過去一個月中,您是否當 { } 在工作、上學或尋找工作時讓 { } 接受付費幼兒看護服務?
AH44A	
АП44А	[IF NEEDED, SAY: "This includes Head Start, day care centers, before- or
	after-school care programs, and any baby-sitting arrangements."]
	[IF NEEDED, SAY: "這包括學前起步計畫(HeadStart)
	、日託所、上學前和放學後的看護計畫以及任何臨時嬰兒照看安。"]
	YES1
	NO2
	REFUSED7 -7 [GO TO QA05_G21] DON'T KNOW8
	DON'T KNOW8
QA05_G20	In the past month, how much did you pay for all child care arrangements and programs?
	在上個月中,您為所有的幼兒看護安排及計畫支付了多少費用?
AH44B	FIE NEEDED CAV. Wife it is against far you can tall may what you maid in a timical weak look month.
	[IF NEEDED, SAY: "If it is easier for you, you can tell me what you paid in a typical week last month.' [IF NEEDED, SAY:
	"如果這樣比較容易,您可以告訴我您在上個月最有代表性的一週中支付了多少費用。"]
	"You or any other adult in your household."
	4 AMOLINIT LASA MONTH, THE O O COOL
	\$ AMOUNT LAST MONTH [HR: 0-8,000] \$ AMOUNT IN TYPICAL WEEK [HR: 0-3,000]

Educational attainment

QA05_G21

What is the highest grade of education you have completed and received credit for? 您完成的最高教育和獲得學分的最高年級是什麼?

AH47		
	NO FORMAL EDUCATION	
	GRADE SCHOOL	
	1ST GRADE1	
	2ND GRADE2	
	3RD GRADE3	
	4TH GRADE4	
	5TH GRADE5	
	6TH GRADE6	(Primaria)
	7TH GRADE7	,
	8TH GRADE8	
	HIGH SCHOOL OR EQUIVALENT	
	9TH GRADE9	(Secundaria)
	10TH GRADE10	,
	11TH GRADE11	
	12TH GRAD12	(Preparatoria)
	4-YEAR COLLEGE OR UNIVERSITY	,
	1ST YEAR (FRESHMAN)13	
	2ND YEAR (SOPHOMORE)14	
	3RD YEAR (JUNIOR)15	
	4TH YEAR (SENIOR) (BA/BS)16	
	5TH YEAR17	
	GRADUATE OR PROFESSIONAL SCHOOL	
	1ST YEAR GRAD OR PROF SCHOOL18	
	2ND YEAR GRAD OR PROF SCHOOL (MA/MS)19	
	3RD YEAR GRAD OR PROF SCHOOL20	
	MORE THAN 3 YEARS GRAD OR	
	PROF SCHOOL (PhD)21	
	2-YEAR JUNIOR OR COMMUNITY COLLEGE	
	1ST YEAR22	
	2ND YEAR (AA/AS)23	
	VOCATIONAL, BUSINESS, OR TRADE SCHOOL	
	1ST YEAR24	
	2ND YEAR25	
	MORE THAN 2 YEARS26	
	REFUSED7	
	DON'T KNOW (OUT OF RANGE)8	
	ent status, spouse's employment status	
QA05_G2		
	您上週曾經從事以下哪些工作?	
AK1		
	Working at a job or business1	[GO TO QA05_G26]
	從事工作或業務1	
	With a job or business but not at work2	
	有工作或業務,但不在工作2	
	Looking for work or	
	在找工作,還是3	
	Not working at a job or business?	
	沒有從事工作或業務? 4	
	REFUSED7	
	DON'T KNOW8	

What is the main reason you did not work last week?

QA05_G23

	您上週不工作的主要原因是什麼?	
AK2		
	[IF NEEDED, SAY: "Main reason is the most important reason."] [IF NEEDED, SAY: "主要原因是指最重要的原因。"]	
	TAKING CARE OF HOUSE OR FAMILY. 1 ON PLANNED VACATION. 2 COULDN'T FIND A JOB. 3 GOING TO SCHOOL/STUDENT. 4 RETIRED. 5 DISABLED. 6 UNABLE TO WORK TEMPORARILY. 7 ON LAYOFF OR STRIKE. 8 ON FAMILY OR MATERNITY LEAVE. 9 OFF SEASON. 10 OTHER. 91 REFUSED. -7 DON'T KNOW. -8	[GO TO PN QA05_G25] [GO TO PN QA05_G25]
QA05_G24	Do you usually work? 您通常工作嗎?	
AG10	YES	

PR	OGR	AMMING	NOTE	QA05	G25:
----	-----	--------	------	------	------

IF AAGE = -7 OR -8 OR AAGE < 65 AND QA05_G24 = 2 (NO) CONTINUE WITH QA05_G25 OR IF AAGE = -7 OR -8 or AAGE<65 AND QA05_G23 = 5 (RETIRED) or 6 (DISABLED) CONTINUE WITH QA05_G25;

ELSE GO TO PROGRAMMING NOTE QA05 G26

QA05_G25 Are you receiving Social Security Disability Insurance or SSDI? 您是否在領取安全殘障保險補助金或 SSDI?

AL22

YES	1 `	
NO	2	GO TO PN QA05_G28
REFUSED	7	ſ .
DON'T KNOW	-8	J

PROGRAMMING NOTE QA05_G26: (FOR PROXY VERSION, GO TO QA05_G29)

ELSE IF (QA05_G22 = 1, 2, -7, -8) OR (QA05_G24 = 1) THEN CONTINUE WITH QA05_G26; ELSE GO TO PROGRAMMING NOTE QA05_G27

QA05_G26 On your <u>main</u> job, are you employed by a private company, the government, <u>or</u> are you self-employed, or are you working without pay in a family business or farm?

您從事的主要工作的僱主是:私人公司、政府部門、還是自行經營者(個體經營者)或者從事家庭企或農場內不付 水的工作?

AK4

[IF NEEDED, SAY: "Where did you work most hours?"] [IF NEEDED, SAY: "您在哪裡工作的時間最長?"]

PROGRAMMING NOTE QA05 G27

IF QA05_G22 =1 or 2 OR QA05_G24 =1 (R WORKS/USUALLY WORKS) CONTINUE WITH QA05_G27; ELSE GO TO QA05_G28

QA05_G27 Thinking about what you normally do at work, not counting your free time, would you say that that you sit most of the day, stand most of the day, or walk around a lot?

請想一想您在工作中通常做的事情,請勿包括休息時間。您認為您是 一天大多數時間坐著工作、大多數時間站著工作、還是大多數時間四 處走動?

AE22

SIT1	
STAND	
WALK AROUND3	[GO TO PN QA05_G29
DOES NOT WORK4	_
SIT/STAND EQUALLY5	(
SIT/WALK EQUALLY6	
STAND/WALK EQUALLY7	
REFUSED7	
DON'T KNOW8	·)

SIT	QA05_G28	Thinking about what you normally do during a typic you say that you sit most of the day, stand most of 請想一想您在普通一天中所做的事情,以下哪一項從事的活動:您認為您是一天大多數時間坐著工作工作、還是大多數時間四處走動?	f the day, or w 最適當地描述	valk around a lot? 您所
STAND	AOAL11			
WALK AROUND				
LIE DOWN				
SIT/STAND EQUALLY				
SIT/WALK EQUALLY				
STAND/WALK EQUALLY				
REFUSED				
DON'T KNOW				
F QA05_ A15 = 1 (MARRIED), CONTINUE WITH QA05_G29; ELSE GO TO QA05_H1				
您的配偶上週曾經從事以下哪些工作? AG8	IF QA05_ A15	= 1 (MARRIED), CONTINUE WITH QA05_G29;		
Working at a job/ business	QA05_G29		week?	
Working at a job/ business	AG8			
後事工作或業務	AGO	Working at a job/ business	1	IGO TO QA05 G311
With a job/business but not at work		從事工作或業務	1	[66.16 @/100_66.1
有工作或業務,但不在工作				IGO TO QA05 G311
Looking for work, or				[00.10.00.00]
在找工作,還是				
沒有從事工作或業務?				
REFUSED		Not working at a job/business?	4	
DON'T KNOW8 QA05_G30 Does your spouse usually work? 您的配偶通常工作嗎? AG11 YES		沒有從事工作或業務?	4	
QA05_G30 Does your spouse usually work? 您的配偶通常工作嗎? AG11 YES				
您的配偶通常工作嗎? AG11 YES		DON'T KNOW	8	
YES	QA05_G30			
YES	AG11			
NO2		YES	1.	
LOOKING FOR WORK		NO	2	
		LOOKING FOR WORK		[GO TO QA05_H1]
REFUSED				

QA05_G31

On your spouse's \underline{main} job, is he/she employed by a private company, the government, \underline{or} is he/she self-employed, \underline{or} is he/she working without pay in a family business or farm? **您的配偶從事的主要工作的僱主是**: 私人公司、政府部門、還是自行經營者(個體經營者)或者從事家庭企業或農場內不付薪水的工作?

AG9

[IF NEEDED, SAY: "Where did he/she work MOST hours?"] [IF NEEDED, SAY: "他/她在哪裡工作的時間最長?"]

Section H - Health Insurance

Usual source of care

QA05 H1 The r

The next topics are about health insurance and health care.

以下是有關健康保險和健康護理的幾個問題。

Is there a place that you USUALLY go to when you are sick or need advice about your health? 當您生病或需要接受健康諮詢時,您是否有一個通常可以去的地方?

AH1

[NOTE: CIRCLE "3" OR "4" ONLY IF VOLUNTEERED. DO NOT PROBE.]

YES	1 [GO TO PN QA05_H3]
NO	2
DOCTOR/MY DOCTOR	3
KAISER	4
KAISER MORE THAN ONE PLACE	5 [GO TO PN QA05_H3]
REFUSED	
DON'T KNOW	8)

QA05_H2 What is the ONE main reason you do not have a usual source of health care? 您沒有通常的健康護理提供者的一個主要原因是什麼?

AH2

OR INSURANCE PROBLEM	TO QA05_H4]
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PROGRAMMING NOTE QA05 H3:

IF QA05_H1 = 1 (YES) OR 5 (MORE THAN ONE PLACE) OR -7 (REF) OR -8 (DK), SAY "What kind of place do you go to most often--a medical";

ELSE IF QA05_H1 = 3 (DOCTOR/MY DOCTOR), SAY "Is your doctor in a private";

ELSE IF QA05 H1 = 4 (KAISER) CIRCLE "1" FOR QA05 H3 AND GO TO QA05 H5

QA05_H3

{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?

您最常去什麼樣的地方一醫生辦公室、診所或醫院診所、急診室或其他地方?

AH3

DOCTOR'S OFFICE/KAISER/OTHER HMO1	[GO TO QA05_H5]
CLINIC/HEALTH CENTER/HOSPITAL CLINIC 2	
EMERGENCY ROOM3	[GO TO QA05_H5]
SOME OTHER PLACE (SPECIFY):91	[GO TO QA05_H5]
NO ONE PLACE94	[GO TO QA05_H5]
REFUSED7	[GO TO QA05_H5]
DON'T KNOW8	[GO TO QA05_H5]

Medicare coverage, Medicare supplemental plan

QA05 H4

MediCARE is a health insurance program for people 65 years and older or persons with certain disabilities. At this time, are you covered by MediCARE?

以下是有關您可能享有的健康保險類型的幾個問題。

Medicare (醫療保障計劃)是為年滿 65 歲或患有某種殘障的人士提供的健康保險計劃。

您目前是否享受 Medicare 保賠?

Al1

[NOTE: Include Medicare managed care plans as well as the original Medicare plan.]

[NOTE: "包括 Medicare 管理護理計劃以及原來的 Medicare 計劃。"]

YES	1	[GO TO QA05_H7]
NO	2	
REFUSED		[GO TO QA05 H14]
DON'T KNOW		

IF QA05 H4 = 1, SET ARMCARE = 1 AND SET ARINSURE = 1

PROGRAMMING NOTE QA05 H5:

IF [AAGE > 64 OR QA05_A4 = 6 (65 OR OLDER) OR ENUM.AGE > 64] AND [QA05_H4= 2, OR -8 (NO, NOT COVERED BY MEDICARE OR DK)], CONTINUE WITH QA05_H5;

ELSE GO TO PROGRAMMING NOTE QA05 H7

QA05_H5

Is it correct that you are NOT covered by MediCARE even though you told me earlier that you are 65 or older?

雖然您剛才告訴過我您的年齡在 65 歲或 65 歲以上,但您沒有享受聯邦醫療護理保險,對不對?

Al2

IF QA05_H5 =2, SET ARMCARE = 1 AND SET ARINSURE = 1

PROGRAMMING NOTE QA05_H6: AIDATE

SET AIDATE = CURRENT DATE (YYYYMMDD);

SET AAGE = QA05 H6;

IF AAGE < 18, CODE AS IA AND TERMINATE

QA05_H6 What is your age, please? 請告訴我您的年齡多大。

AI3

PROGRAMMING NOTE QA05_H7:

IF ARMCARE = 1, CONTINUE WITH QA05_H7;

ELSE GO TO QA05_H14

QA05_H7

Is your MediCARE coverage provided through an HMO? 您的 MediCARE 保賠是通過 HMO 提供的嗎?

AH49

[IF NEEDED, SAY: "With an HMO, you must generally receive care from HMO doctors or the expense is not covered, unless there was a medical emergency."]

[IF NEEDED, SAY: "HMO 計劃通常要求您必須從 HMO 醫生處接受護理,

否則就不提供醫療費保賠,除非是醫療急診。"]

[NOTE: IF R MENTIONS A HEALTH PLAN SUCH AS "Kaiser" OR "Blue Cross," CODE "1" (YES).]

YES	1	
NO		[GO TO QA05 H9]
REFUSED		
DON'T KNOW	8	[GO TO QA05 H9]

IF QA05_H7 = 1, SET ARMHMO = 1

QA05_H8 What is the name of your MediCARE HMO plan? 您的 MediCARE HMO 計劃名稱是什麼?

AH50

KAISER	1
BLUE CROSS/CALIFORNIACARE	2
PACIFICARE	3
BLUE SHIELD/CAREAMERICA	4
HEALTH NET	5
AETNA/US HEALTHCARE/PRUDENTIAL	6
CIGNA HEALTHCARE	7
MEDICARE	8
MEDI-CAL OR MEDICAID	9
(NAME OF COUNTY MEDI-CAL PLAN)	10
OTHER	91
REFUSED	7
DON'T KNOW	8-

[GO TO PN QA05_H10]

QA	05_	_H9
----	-----	-----

Some people who are eligible for MediCARE also have private insurance that is sometimes called Medigap or Medicare Supplement. Do you have this type of health insurance? 有些有資格享受 MediCARE 的人另外還有私人保險,有時稱為 Medigap 或 Medicare 補充保險。您有此類健康保險嗎?

Al4

[IF NEEDED, SAY: "These are policies that cover health care costs not covered by MediCARE alone"] [IF NEEDED, SAY: "這些是為 Medicare 不提供保賠的健康護理費用提供 保賠的保險。"]

YES1	
NO2	[GO TO QA05 H14]
REFUSED7	
DON'T KNOW8	[GO TO QA05 H14]

IF QA05_H9 = 1, SET ARSUPP = 1.

PROGRAMMING NOTE QA05 H10:

IF QA05_H7 = 1 (MEDICARE HMO) CONTINUE WITH QA05_H11 AND DISPLAY "MediCARE HMO" IF QA05_H9 = 1 (HAS SUPPLEMENT) CONTINUE WITH QA05_H11 AND DISPLAY "MediCARE Supplement plan" ELSE GO TO QA05_H14

QA05_H10

For the {MediCARE HMO/MediCARE Supplement plan}, did you sign up directly, or did you get this insurance through a current employer, a former employer, a union, a family business, AARP, or some other way?

有關{MediCARE Supplement plan}, 您是直接註冊參加還是通過目前的 雇主、以前的雇主、工會、家庭企業、AARP 還是以其他方式獲得該保險?

AH52

[IF NEEDED, SAY "AARP stands for the American Association of Retired Persons"] [IF NEEDED, SAY "AARP 代表「美國退休人協會。"]

DIRECTLY	1
CURRENT EMPLOYER	2
FORMER EMPLOYER	3
UNION	4
FAMILY BUSINESS	5
AARP	6
SPOUSE'S EMPLOYER	7
SPOUSE'S UNION	8
PROFESSIONAL/FRATERNAL ORGANIZATION	
OTHER	91
REFUSED	
DON'T KNOW	8

QA05	H11
------	-----

Do you pay any or all of the premium or cost for this health plan? Do not include the cost of any copays or deductibles you or your family may have had to pay.

您是否為該項保健計劃支付任何或全部保費或費用?請勿包括您或

您的家庭可能必須支付的任何共付款或自付額費用?

AH53

[IF NEEDED, SAY: "Copays are the partial payments you make for your health care each time you see a doctor or use the health care system, while someone else pays for your main health care coverage."

[IF NEEDED, SAY: "共付款是您每次看病或使用健康護理系統服務時支付的部份健康護理費用,而由其他人支付您的主要健康護理保賠費用。"

"A deductible is the amount you pay for medical care before your health plan starts paying."

YES	1
NO	
REFUSED	
DON'T KNOW	

QA05_H12

Does anyone else, such as an employer, a union, or professional organization pay all or some portion of the premium or cost for this health plan?

是否有任何其他人 (例如雇主、工會或專業機構) 支付該項保健計劃的 全部或部份保費或費用?

AH54

YES	1
NO	2
REFUSED	7 [GO TO PN QA05_H14
DON'T KNOW	, <u>-</u>

[&]quot;自付額是您的保健計劃開始付款之前您支付的醫療護理費用。"

[&]quot;Premium is the monthly charge for the cost of your health insurance plan."]

[&]quot;保費是您的健康保險計劃的每月收費。"

QA05_	_H13	Who	is	that?

是誰?

AH55

[IF NEEDED, SAY "WHO BESIDES YOURSELF PAYS ANY PORTION OF THAT COST FOR THAT PLAN, SUCH AS YOUR EMPLOYER, A UNION, OR PROFESSIONAL ORGANIZATION?] [IF NEEDED, SAY "除了您本人,還有誰支付該項計劃的任何費用?

例如,您的雇主、工會或專業機構。"]

CURRENT EMPLOYER	1
FORMER EMPLOYER	2
UNION	3
SPOUSE'S CURRENT EMPLOYER	4
SPOUSE'S FORMER EMPLOYER	5
PROFESSIONAL/FRATERNAL ORGANIZATION	N 6
MEDICAID/MEDI-CAL ASSISTANCE	7
HEALTHY FAMILIES	8
HEALTHY KIDS	9
OTHER	91
REFUSED	7
DON'T KNOW	8

IF QA05_H13 = 7, SET ARMCAL = 1 IF QA05_H13 = 8, SET ARHFAM = 1

PROGRAMMING NOTE QA05_H14:

IF ARMCAL = 1, DISPLAY "Is it correct that you are";

ELSE DISPLAY "Are you"

Medi-Cal coverage

QA05_H14

{Is it correct that you are/Are you} covered by Medi-CAL?

您有沒有享受加州醫療輔助計劃(Medi-CAL)?

Al6

[IF NEEDED, SAY: "A plan for certain low-income children and their families, pregnant women, and disabled or elderly people."]

[IF NEEDED, SAY: "加州醫療輔助計劃是為某些低收入兒童及其家庭、孕婦、

殘障人士或年長者提供的醫療計劃。"]

[NOTE: Include HMO or managed care plans, as well as the traditional Medi-CAL]

[NOTE: "請包括管理式保健組織(HMO)或管理式護理計劃,以及傳統的加州醫療 輔助計劃。"]

YES	1 [GO 10 QA05_	_H16]
NO	2	
REFUSED	7	
DON'T KNOW		

IF QA05_H14 = 1, SET ARMCAL = 1 AND SET ARINSURE = 1 IF ARMCAL = 1 AND QA05_H15 = 2, SET ARMCAL = 0

PROGRAMMING NOTE QA05 H15:

IF AAGE > 18 OR [QA05_4 <> -7 OR -8 (REF/DK)] OR ENUM.AGE > 18 OR IF AGE IS UNKNOWN, GO TO QA05_H16;

ELSE IF [AAGE = 18 OR QA05_A4 = 1 (BETWEEN 18 AND 29) OR ENUM.AGE = 18] AND ARHFAM = 1, CONTINUE WITH QA05 H15 AND DISPLAY: "Is it correct, then, that you are";

ELSE IF [AAGE = 18 OR QA05_A4 = 1 (BETWEEN 18 AND 29) OR ENUM.AGE = 18], CONTINUE WITH QA05_H15 AND DISPLAY: "Are you"

Healthy Families coverage

QA05_H15

{Is it correct, then, that you are/Are you} covered by the Healthy Families Program? 您是否享受健康家庭計劃(Healthy Families)?

AI7

[IF NEEDED, SAY: "Healthy Families is a state program that pays for health insurance for children up to age 19."]

[IF NEEDED, SAY: "健康家庭計劃是一項州立計劃,為年齡在19歲以下的孩子支付醫療保險費用。"]

YES	
NO	2
REFUSED	
DON'T KNOW	8-

IF QA05_H15 = 1, SET ARHFAM = 1 AND SET ARINSURE = 1 IF ARHFAM = 1 AND QA05_H15 = 2, SET ARHFAM = 0

PROGRAMMING NOTE QA05 H16

IF ARSUPP = 1, DISPLAY "Besides the Medicare supplemental plan you told me about" and "any other" IF ARMHMO = 1, DISPLAY "Besides the Medicare HMO plan you told me about"

Employer-based coverage

QA05 H16

{Besides the Medicare supplemental plan you told me about,} Are you covered by {any other / a} health insurance plan or HMO through a current or former employer or union? 您有沒有享受目前或以前的雇主或工會提供的醫療保險計劃或 HMO?

AI8

[IF NEEDED, SAY: "...either through your own or someone else's employment?"] [IF NEEDED, SAY: "...可以是通過您本人或其他人的工作?"]

YES	1
NO	2 [GO TO QA05_H19
REFUSED	<u>-</u>
DON'T KNOW	-8 GO TO QA05 H19

QA05_H17

Was this plan obtained in your own name or in the name of someone else? 這項計劃是用您的姓名申請還是用其他人的姓名申請的?......

AI9

[PROBE: "Even someone who does not live in this household?"]

DON'T KNOW.....-8

[PROBE: "這人可能甚至不是住在您的家中?"]

IN OWN NAME...... 1 [GO TO QA05_H20] IN SOMEONE ELSE'S NAME......2 REFUSED......-7 [GO TO QA05_H20] [GO TO QA05_H20]

IF QA05_H17 = 1, AREMPOWN = 1 AND SET ARINSURE = 1 IF QA05 H17 = [2, -7, -8], AREMPOTH = 1 AND SET ARINSURE = 1

PROGRAMMING NOTE QA05 H18:

**IF QA05 A15 = 1 (R HAS SPOUSE) OR IF QA05_G12 = 1 (LIVING WITH PARENTS), CONTINUE WITH QA05 H18;

ELSE GO TO QA05 H20:

IF QA05 A15 = 1 AND R IS MALE, DISPLAY "wife's;

IF QA05_A15 = 1 AND R IS FEMALE, DISPLAY "husband's;

IF QA05 G12 = 1, DISPLAY "parent's"; IF QA05 A15 = 1 AND QA05 G12 = 1, DISPLAY "or"

QA05 H18

Is the plan in your (husband's/wife's) (or) (parent's) name?

是否以您的 { } 名義參加該項計劃?

AI9A

IN husband's/wife's NAME1	[GO TO QA05_H20]
IN PARENT'S NAME2	[GO TO QA05_H20]
IN SOMEONE ELSE'S NAME3	[GO TO QA05_H20]
REFUSED7	[GO TO QA05 H20]
DON'T KNOW8	[GO TO QA05 H20]

IF QA05 H18 = 1, SET AREMPSP = 1 AND SET AREMPOTH = 0 IF QA05_H18 = 2, SET AREMPPAR = 1 AND SET AREMPOTH = 0

PROGRAMMING NOTE QA05 H19:

IF ARINSURE NE 1 (NO COVERAGE FROM MEDICARE, MEDI-CAL, HEALTHY FAMILIES AND EMPLOYER), CONTINUE WITH QA05_H19; ELSE GO TO QA05 H22

Private coverage

QA05_H19

Are you covered by a health insurance plan that you purchased directly from an insurance company or HMO?

您有沒有享受您直接從保險公司或 HMO 購買的醫療保險計劃?

不要包括只支付某些疾病如癌症或中風費用、或只在您住院時才給您 「額外現金」的計劃。

Al11

IF NEEDED SAY "Don't include a plan that pays only for certain illnesses such as cancer or stroke, or only gives you "extra cash" if you are in a hospital."

[INTERVIEWER NOTE: IF NEEDED SAY "不要包括只支付某些疾病如癌症或中風費用、或只在您住院時才給您額外現金」的計劃。"]

YES	1
NO	
REFUSED	7
DON'T KNOW	8

IF QA05_H19 = 1, SET ARDIRECT = 1 AND SET ARINSURE = 1

PROGRAMMING NOTE QA05_H20:

IF QA05_H16 = 1 (YES, EMPLOYER-BASED COVERAGE) OR QA05_H19 = 1 (YES, PURCHASED OWN COVERAGE), CONTINUE WITH QA05_H20; ELSE GO TO QA05_H22

QA05_H20

Do you pay any or all of the premium or cost for this health plan? Do not include the cost of any copays or deductibles you or your family may have had to pay.

您是否為該項保健計劃支付任何或全部保費或費用?請勿包括您或您的 家庭可能需要支付的任何共付款或自付額。

AH57

[IF NEEDED, SAY: "Copays are the partial payments you make for your health care each time you see a doctor or use the health care system, while a health plan pays for your main health care coverage."

"共付款是您每次看病或使用健康護理系統服務時 支付的部份健康護理費用,由其他人支付您的主要健康護理保賠費用。"

"A deductible is the amount you pay for medical care before your health plan starts paying." "自付額是您的保健計劃開始付款之前您支付的醫療護理費用。"

"Premium is the monthly charge for the cost of your health insurance plan."]

"保費是您的健康保險計劃的每月收費。"]

YES	
NO	
REFUSED	7
DON'T KNOW	-8

QA05_H21	Does anyone else, such as an employer, a union, or professional organization pay all or some portion of the premium or cost for this health plan? 是否有任何其他人(例如雇主、工會或專業機構)支付該項保健計劃的 全部或部份保費或費用?				
	YES NO REFUSED DON'T KNOW	2	[GO TO PN QA05_H23]		
QA05_H22	Who is that? 是誰?				
AH56	[IF NEEDED, SAY "WHO BESIDES YOURSELF PAYS AN PLAN, SUCH AS YOUR EMPLOYER, A UNION, OR PRO [IF NEEDED, SAY "除了您本人,還有誰支付該項計劃的任例如,您的雇主、工會或專業機構。"]	FES	SIONAL ORGANIZATION?]		
	CURRENT EMPLOYER	2 3 4 5 6 7 8 9 9			
IF QA05_H22= IF QA05_H22 = IF QA05_H22 =	= 1, SET AREMPOWN = 1 = 4, SET AREMPSP = 1 = 9, SET ARMCARE = 1 AND SET ARDIRECT = 0 = 7, SET ARMCAL = 1 AND SET ARDIRECT = 0 = 8, SET, ARHFAM = 1 AND SET ARDIRECT = 0				
IF [QA05_G22 CONTINUE WI	NG NOTE QA05_H23: =1 (R WORKED LAST WEEK) OR QA05_G23 =1 (R USUA ITH QA05_H23; PROGRAMMING NOTE QA05_H27	ALLY	WORKS)] AND AREMPOWN NE 1,		
Employer offer of health insurance QA05_H23 Does your employer offer health insurance to any of its employees? 您的雇主有沒有提供醫療保險給任何員工?					
Al13	YES NOREFUSEDDON'T KNOW	2 7	[GO TO PN QA05_H27] [GO TO PN QA05_H27] [GO TO PN QA05_H27]		

QA05_H24	Are you eligible to be in this plan? 您是否有資格參加該項計劃?	
Al14	YES	[GO TO QA05_H26] [GO TO PN QA05_H27]
	DON'T KNOW8	[00 10 1 11 QA05_1127]
QA05_H25	What is the one main reason why you aren't in this plan? 您沒有參加該項計劃的一個主要原因是什麼?	
Al15		
	COVERED BY ANOTHER PLAN	[GO TO PN QA05_H27] [GO TO PN QA05_H27] [GO TO PN QA05_H27]
	HEALTH INSURANCE 4 OTHER (SPECIFY): 91 REFUSED -7	[GO TO PN QA05_H27] [GO TO PN QA05_H27] [GO TO PN QA05_H27]
	DON'T KNOW8	[GO TO PN QA05_H27]
QA05_H26	What is the ONE main reason why you are not eligible for this 您沒有資格參加該項計劃的一個主要原因是什麽?	plan?
Al15A		
	HAVEN'T YET WORKED FOR THIS EMPLOYER LONG ENOUGH TO BE COVERED . 1	
	CONTRACT OR TEMPORARY EMPLOYEES	
	NOT ALLOWED IN PLAN2	
	DON'T WORK ENOUGH HOURS PER WEEK OR WEEKS PER YEAR3	
	OTHER (SPECIFY):	
	REFUSED7	
	DON'T KNOW8	
PROGRAMMI	NG NOTE QA05_H27:	
IF ARINSURE	E NE 1, (NO COVERAGE FROM MEDICARE, MEDI-CAL, HEA	LTHY FAMILIES, EMPLOYER, OR
	AN), CONTINUE WITH QA05_H27;	
	PROGRAMMING NOTE QA05_H28	
	HAMP-VA, TRICARE, VA coverage Are you covered by CHAMPUS/CHAMP-VA, TRICARE, VA or	some other military health care?
QA05_H27	您是否享受 CHAMPUS/CHAMP VA、Tricare、或其他軍隊醫	
Al16		
	YES1	
	NO	
	REFUSED7 DON'T KNOW8	
	DON 1 KNOW8	
IF QA05_H27	= 1, SET ARMILIT = 1 AND SET ARINSURE = 1	

PROGRAMMING NOTE QA05_H28:

IF ARINSURE NE 1 (NO COVERAGE FROM MEDICARE, MEDI-CAL, HEALTHY FAMILIES, EMPLOYER, PRIVATE PLAN, OR MILITARY PLAN), CONTINUE WITH QA05_H28;

ELSE GO TO PROGRAMMING NOTE QA05_H34

AIM, MRMIP, Family PACT, other coverage

QA05 H28

Are you covered by some other government health plan, such as AIM, "Mister MIP," the Family PACT program, or something else?

您是否享受其他政府醫療計劃,如 AIM、「Mister MIP」 、家庭同盟計劃 (Family Pact) 或其他計劃?

AI17

[IF NEEDED, SAY: "AIM means Access for Infants and Mothers; 'Mister MIP' or MRMIP means Major Risk Medical Insurance Program; and Family PACT is the state program that pays for contraception/reproductive health services for uninsured lower income women and men."]

[IF NEEDED, SAY: "*AIM 表示「母嬰營養計劃」、「Mister MIP」 或 MRMIP 表示「主要風險醫療保險計劃」,而「家庭同盟計劃」是州立計劃, 為沒有保險的低收入男女的避孕和生育醫療服務支付費用。"]

YES	1	
NO	2	[GO TO PN QA05 H30]
REFUSED		
DON'T KNOW	8	[GO TO PN QA05_H30]

IF QA05_H28= 1, SET AROTHGOV = 1 AND SET ARINSURE = 1

QA05_H29 ASK IF NECESSARY: "What is the name of this plan?" ASK IF NECESSARY: 保險計劃的名稱是什麽?

Al17A

AIM	1	[GO TO QA05_H34]
MRMIP ("Mister Mip")	2	[GO TO QA05_H34]
FAMILY PACT		[GO TO QA05_H34]
OTHER (SPECIFY):	91	[GO TO QA05_H34]
REFUSED	7	[GO TO QA05_H34]
DON'T KNOW	8	[GO TO QA05 H34]

PROGRAMMING NOTE QA05_H30:

IF ARINSURE NE 1 (NO COVERAGE FROM MEDICARE, MEDI-CAL, HEALTHY FAMILIES, EMPLOYER, PRIVATE PLAN, MILITARY PLAN, AND OTHER GOVERNMENT PLAN), CONTINUE WITH QA05_H30; ELSE GO TO PROGRAMMING NOTE QA05_H34

Al18

YES1	
NO2	[GO TO PN QA05 H34]
REFUSED7	
DON'T KNOW8	

QA05_H31 What type of health insurance do you have? 您的醫療保險屬於哪一種類型?

Al19

[CODE ALL THAT APPLY. CTRL-P TO EXIT.]

[PROBE: "Any others?"]

[PROBE: "還有任何其他保險嗎?"

[NOTE: IF R GIVES NAME OF PRIVATE PLAN, THEN PROBE: "Do you get this plan through a current or former employer/union, through a school, professional association, trade group, or other organization, or directly from the health plan?

[NOTE: IF R GIVES NAME OF PRIVATE PLAN, THEN PROBE: "您是 通過目前或以前的雇主/工會、

學校、專業協會、同業團體、其他機構 還是直接向保健計劃獲得這項計劃的?"

> THROUGH CURRENT OR FORMER EMPLOYER/UNION.....1 THROUGH SCHOOL, PROFESSIONAL ASSOCIATION, TRADE GROUP, OR OTHER ORGANIZATION.....2 PURCHASED DIRECTLY FROM HEALTH PLAN (BY R OR ANYONE ELSE)......3 MEDICARE 4 MEDI-CAL.....5 HEALTHY FAMILIES......6 CHAMPUS/CHAMP-VA, TRICARE, VA OR SOME OTHER MILITARY HEALTH CARE.....7 INDIAN HEALTH SERVICE, TRIBAL HEALTH PROGRAM OR URBAN INDIAN CLINIC......8 HEALTHY KIDS......9 OTHER GOVERNMENT HEALTH PLAN......91 OTHER NON-GOVERNMENT HEALTH PLAN...... 92 REFUSED.....--7 DON'T KNOW.....-8

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IF QA05_H31= 1, SET AREMPOTH = 1 AND SET ARINSURE = 1
IF QA05_H31 = 2, SET AROTHER = 1 AND SET ARINSURE = 1
IF QA05_H31 = 3, SET ARDIRECT = 1 AND SET ARINSURE = 1
IF QA05_H31 = 4, SET ARMCARE = 1 AND SET ARINSURE = 1
IF QA05_H31 = 5, SET ARMCAL = 1 AND SET ARINSURE = 1
IF QA05_H31 = 6, SET ARHFAM = 1 AND SET ARINSURE = 1
IF QA05_H31 = 7, SET ARMILIT = 1 AND SET ARINSURE = 1
IF QA05_H31 = 8, SET ARIHS = 1
IF QA05_H31 = 91, SET AROTHGOV = 1 AND SET ARINSURE = 1
IF QA05_H31 = 92 OR QA05_H29 = [-7,-8], SET AROTHER = 1 AND SET ARINSURE = 1
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Indian H

PROGRAMMING NOTE QA05 H32

IF QA05_H31 = 1 CONTINUE WITH QA05_H32;

ELSE GO TO PROGRAMMING NOTE QA05_H34

Health Service participationQA05_H32.....Was this plan obtained in your own name or in the name of someone else? 該項計劃是以您自己的名義還是以其他人的名義獲得?

AH59

[PROBE: "Even someone who does not live in this household?"]

[PROBE: "甚至包括不住在您家中的人。"]

IF QA05_H32 = 1, AREMPOWN = 1 AND SET ARINSURE = 1 IF QA05_H32 = [2, -7, -8], AREMPOTH = 1 AND SET ARINSURE = 1

PROGRAMMING NOTE QA05 H33:

**IF QA05_A15 = 1 (R HAS SPOUSE) OR IF QA05_G12 = 1 (LIVING WITH PARENTS), CONTINUE WITH QA05_H33:

ELSE GO TO PROGRAMMING NOTE QA05 H34;

IF QA05 A15 = 1 AND R IS MALE, DISPLAY "wife's;

IF QA05 A15 = 1 AND R IS FEMALE, DISPLAY "husband's;

IF QA05 G12 = 1, DISPLAY "parent's"; IF QA05 A15 = 1 AND QA05 G12 = 1, DISPLAY "or"

QA05_H33 Is the plan in your (husband's/wife's) (or) (parent's) name?

該項計劃是以您的{ spouse's/parent's/spouse's, parent's, or someone else's} 名義獲得的嗎?

AH60

IN husband's/wife's NAME	1
IN PARENT'S NAME	2
IN SOMEONE ELSE'S NAME	3
REFUSED	7
DON'T KNOW	8

IF QA05_H33 = 1, SET AREMPSP = 1 AND SET AREMPOTH = 0
IF QA05_H33 = 2, SET AREMPPAR = 1 AND SET AREMPOTH = 0

PROGRAMMING NOTE QA05 H34:

IF ARIHS = 0 AND QA05_A8 = 4 (AMERCAN INDIAN OR ALASKA NATIVE), CONTINUE WITH QA05_H34; ELSE GO TO PROGRAMMING NOTE QA05_H35

QA05_H34	Are you covered by the Indian Health Service, Tribal Health Program or Urban Indian Clinic? 您有沒有享受印地安人醫療服務、部落醫療計劃或都市印地安人診所計劃?
Al20	
71120	YES1
	NO2
	REFUSED7
	DON'T KNOW8
IF QA05 H34 :	= 1, SET ARIHS = 1
	NG NOTE QA05_H35_INTRO
	= 1 (MARRIED) CONTINUE WITH QA05_H35_INTRO;
	PROGRAMMING NOTE QA05_H55
	th insurance, spouse's employer offers insurance TRO These next questions are about the type of health insurance your spouse may have.
QAOO_NOO_N	These flext questions are about the type of fleath insurance your spouse may have.
Al37intro	
	NG NOTE QA05_H35:
	= 1 (MARRIED) AND ARMCARE = 1 AND/OR SPOUSE AGE 65 OR OLDER, CONTINUE WITH
QA05_H35 AN	D DISPLAY "You said that you are covered by Medicare." And "also";
CAGE HSE AN	5_A15 = 1 (MARRIED) AND ARMCARE = 0 AND SPOUSE AGE 65 OR OLDER, CONTINUE WITH D DISPLAY "Is {SPOUSE NAME} covered by Medicare?"
	= 1 (MARRIED) AND ARMCARE = 0 AND/OR SPOUSE LESS THAN AGE 65, GO TO QA05 H38
(Q, 100_7110	1 (11) 11 11 12 12 11 11 11 11 11 11 11 11 11
QA05_H35	You said that you are covered by Medicare. Is {SPOUSE NAME} (also) covered by Medicare? {} 能享受Medicare保賠嗎?
_	
QA05_H35	{} 能享受Medicare保賠嗎?
_	{} 能享受Medicare保賠嗎? YES
Al37	{} 能享受Medicare保賠嗎? YES
Al37 IF QA05_H35 =	{} 能享受Medicare保賠嗎? YES
AI37 IF QA05_H35 =	{} 能享受Medicare保賠嗎? YES
AI37 IF QA05_H35 = PROGRAMMIN IF QA05_H35 =	YES
AI37 IF QA05_H35 = PROGRAMMINIF QA05_H35 = IF AR GENDE	YES
AI37 IF QA05_H35 = PROGRAMMINIF QA05_H35 = IF AR GENDE IF QA05_A5 =	YES
AI37 IF QA05_H35 = PROGRAMMINIF QA05_H35 = IF AR GENDE IF QA05_A5 =	YES
AI37 IF QA05_H35 = PROGRAMMIN IF QA05_H35 = IF AR GENDE IF QA05_A5 = ELSE GO TO F	YES
AI37 IF QA05_H35 = PROGRAMMINIF QA05_H35 = IF AR GENDE IF QA05_A5 =	YES
AI37 IF QA05_H35 = PROGRAMMIN IF QA05_H35 = IF AR GENDE IF QA05_A5 = ELSE GO TO F	YES
PROGRAMMIN IF QA05_H35 = IF AR GENDE IF QA05_A5 = ELSE GO TO F QA05_H36	YES
AI37 IF QA05_H35 = PROGRAMMIN IF QA05_H35 = IF AR GENDE IF QA05_A5 = ELSE GO TO F	YES
PROGRAMMIN IF QA05_H35 = IF AR GENDE IF QA05_A5 = ELSE GO TO F QA05_H36	YES
PROGRAMMIN IF QA05_H35 = IF AR GENDE IF QA05_A5 = ELSE GO TO F QA05_H36	YES

IF AR GENDE	NG NOTE H37 = 1 AND ARMSUPP = 1 CONTINUE WITH QA05_H37; ER AND SPOUSE GENDER ARE BOTH KNOW AND AR GENDER NE SP GENDER THE 1 (MALE) DISPLAY "wife"; IF QA05_A5 = 2 (FEMALE) DISPLAY "husband"; ELSE DISPLAY "spouse"; PROGRAMMING NOTE QA05_H38
QA05_H37	You said that you have a Medicare Supplement plan. Does your {husband/wife/spouse} [also} have a Medicare supplemental policy? 您說您可以享受 Medicare 保賠。{} 是否也能享受 Medicare 保賠?
A137A	YES
IF ARMCAL = 1 ELSE GO TO F	NG NOTE QA05_H38: I , CONTINUE WITH QA05_H38; PROGRAMMING NOTE QA05_H39. = 1, THEN DISPLAY "also".
QA05_H38	You said you {also} have Medi-Cal. Is {SPOUSE NAME} also covered by Medi-Cal? 您說您 {} 可以享受Medi-Cal(加州醫療保健計劃)。{} 是否也能享受Medi-Cal保賠?
Al38	YES
IF QA05_H38 =	= 1, SET SPMCAL = 1 AND SET SPINSURE = 1
IF ARHFAM = 1 ELSE GO TO F	NG NOTE QA05_H39: 1 AND SPOUSE AGE ≤ 18, CONTINUE WITH QA05_H39; PROGRAMMING NOTE QA05_H40. = 1 OR ARMCAL = 1, DISPLAY "also".
QA05_H39	You said you {also} have Healthy Families. Is {SPOUSE NAME} also covered by Healthy Families? 您說您 {} 可以享受Healthy Families(健康家庭計劃)。 {} 是否也能享受Healthy Families計劃保賠?
AI39	YES
IF QA05_H39 =	= 1, SET SPHFAM = 1 AND SET SPINSURE = 1

IF AREMPOWI	NG NOTE QA05_H40: N =1, CONTINUE WITH QA05_H40; E = 1 OR AMRCAL = 1 OR ARHFAM = 1, THEN DISPLAY "also" PROGRAMMING NOTE QA05_H41
QA05_H40	You said you have insurance from YOUR current or former employer or union. Is {SPOUSE NAME} also covered by the insurance from YOUR employer? 您說您 {} 享受您目前或以前僱主或工會提供的保險。{} 是否也能享受您的僱主所提供的保險的保賠?
A140	YES
IF QA05_H40 :	= 1, SET SPEMPSP = 1 AND SET SPINSURE = 1
222224444	NO NOTE CASE 1144
IF QA05_G29: QAI IF QA05_H IF SPINSUF IF AR GENI IF QA0 IF QA0 ELSE DISP	NG NOTE QA05_H41: =1 OR 2 (SPOUSE EMPLOYED) OR QA05_G30 = 1 (USUALLY WORKS), CONTINUE WITH 05_H41; 18 = 1, DISPLAY "You said you have insurance from your {XXX}'s employer or union."; RE = 1, THEN DISPLAY "also"; DER AND SPOUSE GENDER ARE BOTH KNOWN AND AR GENDER NE SP GENDER THEN 05_A5 = 1(MALE), DISPLAY "wife," "she" and "her"; 05_A5 = 2 (FEMALE), DISPLAY "husband" "he" and "his" LAY "spouse," "he or she" and "his or her"; PROGRAMMING NOTE QA05_H42
QA05_H41	{You said you have insurance from your spouse's employer or union.} Does {SPOUSE NAME} (also) have coverage through {his/her} OWN employer? {} {} 是否能夠透過 {} 自己的僱主獲得保賠?
Al40A	YES

IF QA05_H41 = 1, SET SPEMPOWN = 1 AND SET SPINSURE = 1

PROGRAMMING NOTE QA05 H42	P	RC)GR	ammin	ig no	TE Q	A05	H42:
---------------------------	---	----	-----	-------	-------	------	-----	------

IF ARDIRECT = 1, CONTINUE WITH QA05 H42;

ELSE GO TO PROGRAMMING NOTE QA05 H43.

IF QA05_H4 = 1 (MEDICARE) OR QA05_H14 = 1 (MEDI-CAL) OR QA05_H15 = 1 (HEALTHY FAMILIES) OR QA05_H16 = 1 (EMPLOYER BASED), DISPLAY "also."

QA05_H42 You said you {also} have a plan you purchased directly from the insurer. Is {SPOUSE NAME} also covered by this plan?

您說您 {} 有一項直接從保險公司購買的計劃。{} 是否也能享受該項計劃的保賠?

Δ	141	

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

IF QA05 H42 = 1, SET SPDIRECT = 1 AND SET SPINSURE = 1

PROGRAMMING NOTE QA05 H43:

IF ARMILIT = 1, CONTINUE WITH QA05 H43;

ELSE, GO TO PROGRAMMING NOTE QA05 H44.

IF ARMCARE = 1 OR ARMCAL = 1 OR ARHFAM = 1 OR ARDIRECT = 1 OR AREMPOWN = 1, DISPLAY "also".

QA05 H43

You said you {also} have health insurance through CHAMPUS/CHAMPUS-VA, VA, TRICARE, or some other military healthcare. Is {SPOUSE NAME} also covered by this plan? 您說您是透過 {} CHAMPUS/CHAMPUS VA、TRICARE、VA或其他某種軍隊健康護理計劃享受健康保險。{} 是否也能享受該項計劃的保賠?

Al42

YES	1
NO	2
REFUSED	7
DON'T KNOW	8

IF QA05 H43 = 1, SET SPMILIT = 1 AND SET SPINSURE = 1

PROGRAMMING NOTE QA05_H44:

IF AROTHGOV = 1, CONTINUE WITH QA05 H44;

ELSE, GO TO PROGRAMMING NOTE QA05_H45.

IF ARMCARE = 1 OR ARMCAL = 1 OR ARHFAM = 1 OR ARDIRECT = 1 OR AREMPOWN = 1 OR ARMILIT = 1, DISPLAY "also".

QA05_H44

You said you {also} have health insurance through some government health plan like AIM or Mister MIP. Is {SPOUSE NAME} also covered by this plan?

您說您 {} 透過某種類似AIM或Mister MIP的政府健康計劃享受健康保險。{} 是否也能享受此項計劃的保 賠?

Al42A

YES	
NO	
REFUSED	
DON'T KNOW	

IF QA05_H44 = 1, SET SPDOTHGOV = 1 AND SET SPINSURE = 1

P	R	0	GR	ΑN	ΙМΙ	NG	NOTE	QA05	H45:
---	---	---	----	----	-----	----	------	-------------	------

IF SPINSURE NE 1, DISPLAY "any."
ELSE DISPLAY "through any other source."

Does {SPOUSE NAME} have {any} health insurance coverage {through any other source}? QA05_H45 {} 是否有任何健康保險?

Al46

YES	1	
NO		[GO TO QA05 H47]
REFUSED		
DON'T KNOW	8	[GO TO QA05_H51]

QA05_H46

What type of health insurance does {he/she} have? \$\foatie{\sigma} \geq \partial \p

TUDOUCU CUDDENT OD FODMED

AI47

[CODE ALL THAT APPLY. CTRL-P TO EXIT.]

[PROBE: "Any others?"]

[PROBE: "還有任何其他保險嗎?"]

[IF NEEDED, SAY: "Such as from a current or former employer, or that they purchased directly from a

health plan."]

[IF NEEDED, SAY: "例如目前或以前的雇主提供的保險,或者他們直接向保健計劃購買的保險。"]

[NOTE: IF R GIVES NAME OF PRIVATE PLAN, THEN PROBE: "Did {he/she} get this plan through a current or former employer/union, through a school, professional association, trade group, or other organization, or directly from the health plan?]

[NOTE: IF R GIVES NAME OF PRIVATE PLAN, THEN PROBE: "{he}是 通過目前或以前的雇主/工會、學校、專業協會、同業團體、其他機構 還是直接向保健計劃獲得這項計劃的?"]

THROUGH CURRENT OR FORMER		
EMPLOYER/UNION	1	[GO TO QA05_H49]
THROUGH SCHOOL, PROFESSIONAL		
ASSOCIATION, TRADE GROUP OR		
OTHER ORGANIZATION	2	
PURCHASED DIRECTLY FROM HEALTH PLA	N	
(BY R OR ANYONE ELSE)	3	
MEDICARE	4	
MEDI-CAL	5	
HEALTHY FAMILIES	6	
CHAMPUS/CHAMP-VA, TRICARE, VA OR		
SOME OTHER MILITARY HEALTH CARE	7	
INDIAN HEALTH SERVICE, TRIBAL HEALTH		
PROGRAM OR URBAN INDIAN CLINIC	8	
HEALTHY KIDS	9	
OTHER GOVERNMENT HEALTH PLAN	91	
OTHER NON-GOVERNMENT HEALTH PLAN	92	
REFUSED	7	
DON'T KNOW		

```
IF QA05_H46 = 1, SET SPEMPOTH = 1 AND SET SPINSURE = 1
IF QA05_H46 = 2, SET SPOTHER = 1 AND SET SPINSURE = 1
IF QA05_H46 = 3, SET SPDIRECT = 1 AND SET SPINSURE = 1
IF QA05_H46 = 4, SET SPMCARE = 1 AND SET SPINSURE = 1
IF QA05_H46 = 5, SET SPMCAL = 1 AND SET SPINSURE = 1
IF QA05_H46 = 6, SET SPHFAM = 1 AND SET SPINSURE = 1
IF QA05_H46 = 7, SET SPMILIT = 1 AND SET SPINSURE = 1
IF QA05_H46 = 8, SET SPIHS = 1
IF QA05_H46 = 91, SET SPOTHGOV = 1 AND SET SPINSURE = 1
IF QA05_H46 = 92, SET SPOTHER = 1 AND SET SPINSURE = 1
IF QA05_H46 = [-7, -8], SET SPINSURE = 1
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PROGRAMMING NOTE QA05_H47

IF SPINSURE NE 1, CONTINUE WITH QA05_H47 ELSE GO TO PROGRAMMING NOTE QA05_H51

QA05_H47

You said that {SPOUSE NAME} has NO health insurance from any source. Is this correct? 您說 {} 沒有來自任何來源的健康保險,對不對?

Al48

YES1	[GO TO PN QA05_H51]
NO2	
REFUSED7	[GO TO PN QA05_H51]
DON'T KNOW8	[GO TO PN QA05_H51]

QA05_H48

What type of health insurance does {he/she} have? \$\foatie{1}\$ 享受哪一種類型的健康保險?

AI49

[CODE ALL THAT APPLY. CTRL-P TO EXIT.]

[PROBE: "Any others?"]

[PROBE: "還有任何其他保險嗎?"]

[NOTE: IF R GIVES NAME OF PRIVATE PLAN, THEN PROBE: "Did {he/she} get this plan through a current or former employer/union, through a school, professional association, trade group, or other organization, or directly from the health plan?]

[NOTE: IF R GIVES NAME OF PRIVATE PLAN, THEN PROBE: "{he}是 通過目前或以前的雇主/工

會、學校、專業協會、同業團體、其他機構 還是直接向保健計劃獲得這項計劃的? "]

> THROUGH CURRENT OR FORMER EMPLOYER/UNION.....1 THROUGH SCHOOL, PROFESSIONAL ASSOCIATION, TRADE GROUP OR OTHER ORGANIZATION......2 PURCHASED DIRECTLY FROM HEALTH PLAN MEDICARE.....4 MEDI-CAL.....5 HEALTHY FAMILIES......6 CHAMPUS/CHAMP-VA, TRICARE, VA OR SOME OTHER MILITARY HEALTH CARE......7 INDIAN HEALTH SERVICE. TRIBAL HEALTH PROGRAM OR URBAN INDIAN CLINIC.....8 HEALTHY KIDS......9 OTHER GOVERNMENT HEALTH PLAN......91 OTHER NON-GOVERNMENT HEALTH PLAN...... 92 REFUSED......7 DON'T KNOW...... 8

IF QA05_H48 = 1, SET SPEMPOTH = 1 AND SET SPINSURE = 1
IF QA05_H48 = 2, SET SPOTHER = 1 AND SET SPINSURE = 1
IF QA05_H48 = 3, SET SPDIRECT = 1 AND SET SPINSURE = 1
IF QA05_H48 = 4, SET SPMCARE = 1 AND SET SPINSURE = 1
IF QA05_H48 = 5, SET SPMCAL = 1 AND SET SPINSURE = 1
IF QA05_H48 = 6, SET SPHFAM = 1 AND SET SPINSURE = 1
IF QA05_H48 = 7, SET SPMILIT = 1 AND SET SPINSURE = 1
IF QA05_H48 = 8, SET SPIHS = 1
IF QA05_H48 = 91, SET SPOTHGOV = 1 AND SET SPINSURE = 1
IF QA05_H48 = 92, SET SPOTHER = 1 AND SET SPINSURE = 1
IF QA05_H48 = 92, SET SPOTHER = 1 AND SET SPINSURE = 1
IF QA05_H48 = [-7, -8], SET SPINSURE = 1

QA05_H49	Was this plan obtained in your spouse's name or in the name o 該項計劃是以您的配偶的名義還是以其他人的名義獲得?	f someone else?
AH62	[PROBE: "Even someone who does not live in this household?" [PROBE: "甚至包括不住在您家中的人。"]	1
	IN SPOUSE'S NAME	[GO TO PN QA05_H51] [GO TO PN QA05_H51] [GO TO PN QA05_H51]
	= 1, AREMPOWN = 1 AND SET ARINSURE = 1 = [2, -7, -8], AREMPOTH = 1 AND SET ARINSURE = 1	
**IF QA05_A1 QA05_H50; ELSE GO TO IF QA05_A15 IF QA05_A15	ING NOTE QA05_H50: 5 = 1 (R HAS SPOUSE) OR IF QA05_G12 = 1 (LIVING WITH PAPER PROGRAMMING NOTE QA05_H51; = 1 AND R IS MALE, DISPLAY "wife's; = 1 AND R IS FEMALE, DISPLAY "husband's; = 1, DISPLAY "parent's"; IF QA05_A15 = 1 AND QA05_G12 = 1	
QA05_H50	Is the plan in your or your parent's name or someone else's nar 該項計劃是以您本人、您的父母還是以其他人的名義獲得?	me?
AH63	IN ADULT RESPONDENT'S NAME	
	= 1, SET AREMPSP = 1 AND SET AREMPOTH = 0 = 2, SET AREMPPAR = 1 AND SET AREMPOTH = 0	
IF SPEMPOWI	NG NOTE QA05_H51: N = 1 (HAS EMPLOYER BASED COVERAGE IN OWN NAME), (_G29 = 1 or 2 (SPOUSE EMPLOYED) OR QA05_G30 = 1 (USU QA05_H55	
QA05_H51	Does your spouse's employer offer health insurance to any of it 您的配偶的僱主是否向其僱員提供健康保險?	s employees?
Al43	YES	[GO TO PN QA05_H55] [GO TO PN QA05_H55] [GO TO PN QA05_H55]

QA05_H52	Is {she/he} eligible to be in this plan? {} 是否有資格參加該項計劃?		
Al44	YES	2 7	[GO TO QA05_H54] [GO TO PN QA05_H55] [GO TO PN QA05_H55]
QA05_H53	What is the ONE main reason why {she/he} isn't in this pl {} 未參加該項計劃的一個主要原因是什麼?	an?	
Al45	COVERED BY ANOTHER PLAN	2 3 4 91 7	[GO TO PN QA05_H55] [GO TO PN QA05_H55]
QA05_H54	What is the ONE main reason why {she/he} is not eligible {} 沒有資格參加該項計劃的一個主要原因是什麼?	for th	iis plan?
AI45A	HASN'T YET WORKED FOR THIS EMPLOYER LONG ENOUGH TO BE COVERED	2 (3 91 7	

PROGRAMMING NOTE QA05 H55:

IF ARINSURE = 1 (R HAS ANY COVERAGE), CONTINUE WITH QA05_H55;

IF QA05 H7=1 (R HAS MEDICARE HMO), GO TO QA05 H57;

ELSE GO TO PROGRAMMING NOTE QA05 H65

IF QA05 A15 = 1 (MARRIED), DISPLAY "Next, I have some questions about your own main health plan."

Managed care plan characteristics

QA05 H55

{Next, I have some questions about your own main health plan.}

What is the name of your main health plan?

您的主要健康保險計劃的名稱是什麼?

Al22A

[NOTE: IF R HAS DIFFICULTY RECALLING NAME, PROBE: "Do you have an insurance card or something else with the plan name on it?"]

[NOTE: IF R HAS DIFFICULTY RECALLING NAME, PROBE: "您是否有印有保險計畫名稱的保險卡或其他材料?"]

KAISER	1
BLUE CROSS/CALIFORNIACARE	2
PACIFICARE	3
BLUE SHIELD/CAREAMERICA	4
HEALTH NET	5
AETNA/ US HEALTHCARE	6
CIGNA HEALTHCARE	7
MEDICARE	8
MEDI-CAL OR MEDICAID	9
(NAME OF COUNTY MEDI-CAL PLAN)	10
OTHER	
REFUSED	7
DON'T KNOW	

QA05_H56

Is your {QA05_H55 CODE/ main health} plan an HMO (Health Maintenance Organization)?

AI22C

[NOTE: IF R ASKS WHAT AN HMO IS, SAY: "With an HMO, you must generally receive care from HMO doctors or the expense is not covered, unless there was a medical emergency."]
[NOTE: IF R ASKS WHAT AN HMO IS, SAY: "在HMO計劃中,您通常必須接受HMO醫生的醫療護理,除非經HMO轉介或遇到急診,否則醫療費用不予保賠。"]

[IF R SAYS "POS" OR "POINT OF SERVICE", CODE AS "YES." IF R SAYS PPO, CODE "NO]

YES	
NO	
REFUSED	
DON'T KNOW	

	ING NOTE QA05_H57 :1 (R HAS MEDI-CAREHMO) DISPLAY "Ne	xt I have some question	ons about your own main health plan"
QA05_H57	{Next, I have some questions about your 您參加該項計劃已有多長時間?	own main health plan	.} How long have you been on this plan
Al22D	MONTHS		
	OR YEARS		
QA05_H58	Are you covered for your prescription dru 您享受處方藥物保賠嗎?也就是說,是否		
Al25	YES	1	
	NO REFUSED DON'T KNOW	7	
IF QA05_H57	ING NOTE QA05_H59 ' < 12 MONTHS, GO TO QA05_H60; INUE WITH QA05_H59		
Coverage ov QA05_H59	er past 12 months Thinking about your current health insura 12 months? 請想一想您目前的醫療保險,您在過去 12	•	·
Al31	YES	1	[GO TO PN QA05_I1]
	NOREFUSEDDON'T KNOW	7	[GO TO QA05_H62]
QA05_H60	During the past 12 months, when you we any other health insurance? 在過去十二個月中,當您沒有享受當前的		-
Al32	YES NOREFUSEDDON'T KNOW	2 7	[GO TO QA05_H63] [GO TO QA05_H62] [GO TO QA05_H62]

QA05_H61	Was your other health insurance Medi-CAL, Healthy Families, a plan you obtained through an employer, or some other plan?
	其他的醫療保險是加州醫療輔助計劃、健康家庭計劃、通過雇主獲得的保險計劃,還是其他計劃?
Al33	[CODE ALL THAT APPLY. CTRL-P TO EXIT.] [PROBE: "Any others?"]
	[PROBE: "還有其他的嗎? "]
	MEDI-CAL 1 HEALTHY FAMILIES 2 THROUGH CURRENT OR 3 FORMER EMPLOYER/UNION 3 HEALTHY KIDS 4 OTHER HEALTH PLAN 91 REFUSED -7 DON'T KNOW -8
QA05_H62	During the past 12 months, was there any time when you had no health insurance at all? 在過去 12 個月中,您有沒有任何時間完全沒有醫療保險?
Al34	YES
QA05_H63	For how many months of the past 12 months did you have no health insurance at all? 在過去 12 個月中,您有多少個月完全沒有醫療保險?
Al35	NUMBER OF MONTHS [HR: 0-11]
	REFUSED

Reasons for lack of coverage

QA05_H64 What is the ONE MAIN reason why you did not have any health insurance during those months? 在這些月份中,您沒有任何健康保險的一個主要原因是什麼?

AI36

CHANGED EMPLOYER/LOST JOB1	١
EMPLOYER DID NOT OFFER2	I
NOT ELIGIBLE DUE TO WORKING STATUS3	l
NOT ELIGIBLE DUE TO HEALTH OR	l
OTHER PROBLEMS4	I
NOT ELIGIBLE DUE TO CITIZENSHIP/	l
IMMIGRATION STATUS5	l
COULDN'T AFFORD/TOO EXPENSIVE6	l
FAMILY SITUATION CHANGED7	١
LOST PUBLIC PROGRAM COVERAGE	
(MEDI-CAL, ETC)8	
DON'T BELIEVE IN INSURANCE9	I
HEALTHY NO NEED10	l
PAID FOR OWN CARE NO NEED11	l
GOT HEALTH CARE FREE NO NEED12	l
HAD INSURANCE ALL 12 MONTHS, JUST LOST13	l
DENIED COVERAGE, NOT SPECIFIED/	l
DOESN'T QUALIFY NOT SPECIFIED14	l
DO HAVE COVERAGE BUT DON'T KNOW TYPE15	l
SWITCHED INSURANCE COMPANIES,	l
DELAY BETWEEN16	l
DIDN'T LIKE INSURANCED OFFERED/	l
DIDN'T WANT IT17	l
OTHER (SPECIFY)91	
REFUSED7	l
DON'T KNOW8	

[GO TO PN QA05_I1]

QA05_H65 What is the ONE MAIN reason why you do not have any health insurance? 您沒有任何健康保險的一個主要原因是什麼?

Al24

[IF R SAYS NO NEED, PROBE WHY]

CHANGED EMPLOYER/LOST JOBEMPLOYER DID NOT OFFER	2
NOT ELIGIBLE DUE TO WORKING STATUS NOT ELIGIBLE DUE TO HEALTH OR	33
OTHER PROBLEMS	4
NOT ELIGIBLE DUE TO CITIZENSHIP/	-
IMMIGRATION STATUSCOULDN'T AFFORD/TOO EXPENSIVE	5
FAMILY SITUATION CHANGED	
LOST PUBLIC PROGRAM COVERAGE	
(MEDI-CAL, ETC)	8
DON'T BELIEVE IN INSURANCE	9
HEALTHY NO NEED	
PAID FOR OWN CARE NO NEED	
GOT HEALTH CARE FREE NO NEED	12
HAD INSURANCE ALL 12 MONTHS,	
JUST NOW LOST	13
DENIED COVERAGE, NOT SPECIFIED/	
DOESN'T QUALIFY NOT	14
SPECIFIED	
DO HAVE COVERAGE BUT DON'T KNOW 1	YPE15
SWITCHED INSURANCE COMPANIES,	4.0
DELAY BETWEEN	16
DIDN'T LIKE INSURANCED OFFERED/	47
DIDN'T WANT IT	
OTHER (SPECIFY)	
DON'T KNOW	

QA05_H66 Were you covered by health insurance at any time during the past 12 months? 您在過去 12 個月中的任何時間內有沒有享受過醫療保險?

AI27

YES	1	[GO TO QA05_H68]
NO	2	
REFUSED		
DON'T KNOW	-8	

QA05_H67	How long has it been since you last had health insurance? 您上一次有醫療保險到現在已經有多長時間?
Al28	MORE THAN 12 MONTHS AGO, BUT NOT MORE THAN 3 YEARS AGO
QA05_H68	For how many months out of the last 12 months did you have health insurance? 在過去 12 個月中,有多少個月份您有醫療保險?
Al29	[IF LESS THAN ONE MONTH, ENTER 0 (ZERO)] MONTHS [HR: 0-12]
	REFUSED7 DON'T KNOW8
QA05_H69	During those months when you had health insurance, was your insurance Medi-CAL, Healthy Families a plan you obtained from an employer, or some other plan? 在您有醫療保險的月份裡,您的保險是加州醫療輔助計劃、健康家庭計劃、通過雇主獲得的保險計劃還是其他計劃? [CODE ALL THAT APPLY. CTRL-P TO EXIT.] [PROBE: "Any others?"] [PROBE: "還有其他的嗎?"]
	MEDI-CAL 1 HEALTHY FAMILIES 2 THROUGH CURRENT OR FORMER 2 EMPLOYER OR UNION 3 HEALTHY KIDS 4 OTHER HEALTH PLAN 91 REFUSED -7 DON'T KNOW -8

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Section I – Child and Adolescent Health Insurance

Child

PROGRAMMING NOTE QA05 11 IF NO SELECTED CHILD, GO TO PN QA05 130 TO ASK ABOUT SELECTED ADOLESCENT; IF ARINSURE = 0. GO TO PN QA05 12 ELSE CONTINUE WITH QA05 11 Child's health insurance **QA05 I1** These next questions are about health insurance (CHILD) may have. Does (CHILD) have the same insurance as {you/ADULT RESPONDENT NAME}? 以下是關於{}可能有的健康保險的問題。 CF10A YES......1 [GO TO QA05 124] REFUSED.....--7 DON'T KNOW -8 IF QA05_I1 = 1 AND ARMCARE = 1, SET CHMCARE = 1 AND SET CHINSURE = 1 IF QA05_I1 = 1 AND ARMCAL= 1, SET CHMCAL = 1 AND SET CHINSURE = 1 IF QA05 I1 = 1 AND ARHFAM = 1, SET CHHFAM = 1 AND SET CHINSURE = 1 IF QA05 I1 = 1 AND AREMPOWN= 1, SET CHEMP = 1 AND SET CHINSURE = 1 IF QA05 I1 = 1 AND AREMPSP= 1, SET CHEMP = 1 AND SET CHINSURE = 1 IF QA05 I1 = 1 AND AREMPPAR= 1. SET CHEMP = 1 AND SET CHINSURE = 1 IF QA05 I1 = 1 AND AREMPOTH= 1, SET CHEMP = 1 AND SET CHINSURE = 1 IF QA05 I1 = 1 AND ARDIRECT = 1, SET CHDIRECT = 1 AND SET CHINSURE = 1 IF QA05 I1 = 1 AND ARMILIT = 1, SET CHMILIT = 1 AND SET CHINSURE = 1 IF QA05 I1 = 1 AND AROTHGOV= 1, SET CHOTHGOV = 1 AND SET CHINSURE = 1 IF QA05 I1 = 1 AND AROTHER = 1, SET CHOTHER =1 AND SET CHINSURE = 1 IF QA05 I1 = 1 AND ARIHS= 1, SET CHIHS = 1 PROGRAMMING NOTE QA05 12 IF QA05 A15 = 1 (MARRIED) AND SPINSURE = 1, CONTINUE WITH QA05 I2 ELSE GO TO QA05 13 **QA05 12** Does (CHILD) have the same insurance as {your spouse/your partner/SPOUSE NAME/ PARTNER NAME}? {}的保險是否與您的保險相同? MA1 YES......1 [GO TO QA05_I16] NO 2 REFUSED.....-7 DON'T KNOW.....-8 IF QA05 I2 = 1 AND SPMCARE = 1, SET CHMCARE = 1 AND SET CHINSURE = 1 IF QA05_I2 = 1 AND SPMCAL= 1, SET CHMCAL = 1 AND SET CHINSURE = 1 IF QA05 I2 = 1 AND SPHFAM = 1, SET CHHFAM = 1 AND SET CHINSURE = 1 IF QA05 I2 = 1 AND SPEMPOWN= 1, SET CHEMP = 1 AND SET CHINSURE = 1 IF QA05 I2 = 1 AND SPEMPSP= 1, SET CHEMP = 1 AND SET CHINSURE = 1

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IF QA05 I2 = 1 AND SPDIRECT = 1, SET CHDIRECT = 1 AND SET CHINSURE = 1
IF QA05_I2 = 1 AND SPMILIT= 1, SET CHMILIT = 1 AND SET CHINSURE = 1
IF QA05_I2 = 1 AND SPOTHER = 1, SET CHOTHER = 1 AND SET CHINSURE = 1
IF QA05_I2 = 1 AND SPOTHGOV= 1, SET CHOTHGOV = 1 AND SET CHINSURE = 1
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QA05_I3	Is {he/she/he or she} currently covered by Medi-CAL?
	{}目前是否享受Medi-CAL(加州醫療保健計劃)的保賠?

CF1

[IF NEEDED, SAY: "Medi-CAL is a plan for certain low income children and their families, pregnant women, and disabled or elderly people."]

[IF NEEDED, SAY: "Medi-CAL是為某些低收入家庭的兒童及其家人、

孕婦、殘障人士或年長者提供的一項計劃。"]

YES	1 [GO TO QA05 17]
NO	2 ⁻	
REFUSED	7	GO TO QA05_I5]
DON'T KNOW	8	GO TO QA05_I5]

IF QA05_I3 = 1, SET CHMCAL = 1 AND SET CHINSURE = 1

QA05_I4 What is the ONE main reason why (CHILD) is not enrolled in the Medi-CAL program? {孩子名字/年齡/性別} 沒有加入加州醫療輔助計劃(Medi-CAL)的一個主要原因是什麼?

CF1A

PAPERWORK TOO DIFFICULT DIDN'T KNOW IF ELIGIBLE INCOME TOO HIGH, NOT ELIGIBLE NOT ELIGIBLE DUE TO CITIZENSHIP/ IMMIGRATION STATUS OTHER NOT ELIGIBLE. DON'T BELIEVE IN HEALTH INSURANCE DON'T NEED IT BECAUSE HEALTHY ALREADY HAVE INSURANCE DIDN'T KNOW IT EXISTED DON'T LIKE / WANT WELFARE.	2 3 4 5 6 7 8 9
DON'T LIKE / WANT WELFARE	
OTHER	
REFUSED	
DON'T KNOW	8

QA05_I5 Is (CHILD) covered by the Healthy Families Program? {孩子的名字/年齡/性別} 有沒有享受健康家庭計劃 (Healthy Families)?

CF2

[IF NEEDED, SAY: "Healthy Families is a state program that pays for health insurance for children up to age 19."]

[IF NEEDED, SAY: "健康家庭計劃是一項州立計劃,為年齡在19 歲以下的孩子 支付醫療保險費用。"]

YES	
REFUSED	
DON'T KNOW	[GO TO QA05_17]

IF QA05_I5, SET CHHFAM = 1 AND SET CHINSURE = 1

QA05_I6 What is the ONE main reason why (CHILD) is not enrolled in the Healthy Families program? {孩子的名字/年齡/性別} 沒有加入健康家庭計劃的一個主要原因是什麼?

CF2A

PAPERWORK TOO DIFFICULT	1
DIDN'T KNOW IF ELIGIBLE	2
INCOME TOO HIGH, NOT ELIGIBLE	3
NOT ELIGIBLE DUE TO CITIZENSHIP/	
IMMIGRATION STATUS	4
OTHER NOT ELIGIBLE	5
DON'T BELIEVE IN HEALTH INSURANCE	6
DON'T NEED IT BECAUSE HEALTHY	7
ALREADY HAVE INSURANCE	8
DIDN'T KNOW IT EXISTED	9
DON'T LIKE / WANT WELFARE	10
OTHER	91
REFUSED	7
DON'T KNOW	-8

QA05_I7	Is (CHILD) covered by a health insurance plan or HMO through your own or someone else's
	employment or union?

{孩子的名字/年齡/性別} 是否通過您或其他人的工作或工會享受醫療保險或管理式保健組織 (HMO)計劃?

CF3

YES	1 [GO TO QA05_I	91
NO		•
REFUSED	7	
DON'T KNOW		

IF QA05 I7 = 1, SET CHEMP = 1 AND CHINSURE = 1

QA05_I8 Is (CHILD) covered by a health insurance plan that you purchased directly from an insurance company or HMO? Do not include a plan that pays only for certain illnesses, such as cancer or stroke, or only gives you "extra cash" if you are in a hospital?

{}是否享受您直接從保險公司或HMO購買的健康保險計劃的保賠?請不要包括僅支付某些疾病(例如癌症或中風)的計劃或當您住院時僅向您支付「額外現金」的計劃。

CF4

YES1	
NO2	
REFUSED	├ [GO TO PN QA05_I12]
DON'T KNOW8	

IF QA05_I8 = 1, SET CHDIRECT = 1 AND CHINSURE = 1

QA05_I9 Do you pay any or all of the premium or cost for (CHILD's) health plan? Do not include the cost of any co-pays or deductibles you or your family may have had to pay.

您是否支付{CHILD NAME/AGE/SEX}的保健計劃的任何或全部保費 或費用?請勿包括您或您的家庭可能需要支付的任何共付款或自付額。

AI54

[IF NEEDED, SAY: "Copays are the partial payments you make for your health care each time you see a doctor or use the health care system, while someone else pays for your main health care coverage."

[IF NEEDED, SAY: "共付款是您每次看病或使用健康護理系統服務時支付的部份健康護理費用,而由其他人支付您的主要健康護理保賠費用。"

"A deductible is the amount you pay for medical care before your health plan starts paying."

"Premium is the monthly charge for the cost of your health insurance plan."]

"保費是您的健康保險計劃的每月收費。"]

YES	
NO	2
REFUSED	
DON'T KNOW	8-

[&]quot;自付額是您的保健計劃開始付款之前您支付的醫療護理費用。"

QA05_I10	Does anyone else, such as an employer, a union, or professional organization pay all or some portion of the premium or cost for (CHILD's) health plan?
	是 否有任何其他人 ,例如雇主、工會或專業機構,支付 {CHILD
	NAME/AGE/SEX} 的保健計劃的全部或部份保費或費用?
AI50	
7 0	YES1
	NO2
	REFUSED7 -7 [GO TO PN QA05_I12]
	DON'T KNOW8
QA05_I11	Who else pays all or some portion of the cost for (CHILD's) health plan? 是誰?
AIE4	
AI51	CURRENT EMPLOYER1
	FORMER EMPLOYER
	UNION
	SPOUSE'S CURRENT EMPLOYER4
	SPOUSE'S FORMER EMPLOYER5
	PROFESSIONAL/FRATERNAL ORGANIZATION 6
	MEDICAID/MEDI-CAL ASSISTANCE7
	HEALTHY FAMILIES8
	HEALTHY KIDS9
	OTHER91
	REFUSED7
	DON'T KNOW8
IF OA05 111	= 1 THRU 6, SET CHEMP = 1 AND CHDIRECT = 0
	= 8, SET CHHFAM = 1
	= 7, SET CHMCAL = 1
PROGRAM	MING NOTE QA05_I12
IF CHINSUR	RE = 1, GO TO PN QA05_I16;
ELSE CONT	INUE WITH QA05_I12
QA05_I12	Is {he/she/he or she} covered by CHAMPUS/CHAMP VA, TRICARE, VA, or some other military health care?
	{他/她} 是否享受 CHAMPUS/CHAMP VA、Tricare 或其他軍隊醫療護理計劃?
050	
CF6	VEC 4 100 TO BN 0405 1401
	YES
	REFUSED7
	DON'T KNOW8
	DOI: 1 101011
IF QA05_I12	? = 1, SET CHMILIT = 1 AND CHINSURE = 1

QA05_I13	QA05_I13 Is {he/she/he or she} covered by some other government health plan such as AIM, "Mister MIP", or something else?			
	{他/她} 是否享受其他政府醫療計劃,如 AIM、	「Mister MIP」或其他計劃?		
CF7				
	[IF NEEDED, SAY: "AIM means Access for Major Risk Medical Insurance Program"]	r Infants and Mothers, 'Mister MIP' or MRMIP means		
		「Mister MIP」或 MRMIP 的意思是主要風險醫療保險		
	AIM	1 [GO TO PN QA05_I16]		
	"MISTER MIP"/MRMIP NO OTHER PLAN			
	SOMETHING ELSE (SPECIFY):	91 [GO TO PN QA05_I16]		
	REFUSED DON'T KNOW			
	DON I KNOW			
IF QA05_I13 =	1 OR 2 OR 91, SET CHOTHGOV = 1 AND CH	IINSURE = 1		
QA05_I14	Does {he/she/he or she} have any health insu {他/她} 有沒有通過我漏掉的計劃享受任何醫療	- · · · · · · · · · · · · · · · · · · ·		
CF8				
	YES NO			
	DON'T KNOW			

QA05_I15

What type of health insurance does {he/she/he or she} have? Does it come through Medi-CAL, Healthy Families, an employer or union, or from some other source?

{他/她}的醫療保險屬於哪一類型?是來自加州醫療輔助計劃、健康家庭計劃、雇主或工會、還是來自其他來源?

CF9

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

[PROBE: " "還有其他來源嗎? "]

THROUGH CURRENT OR FORMER EMPLOYER/UNION	1
THROUGH SCHOOL, PROFESSIONAL	
ASSOCIATION, TRADE GROUP	
OR OTHER ORGANIZATION	2
PURCHASED DIRECTLY FROM A HEALTH	
PLAN (BY R OR ANYONE ELSE)	3
MEDICARE	4
MEDI-CAL	5
HEALTHY FAMILIES	6
CHAMPUS/CHAMP-VA, TRICARE, VA, OR	
SOME OTHER MILITARY HEALTH CARE	7
INDIAN HEALTH SERVICE, TRIBAL HEALTH	
PROGRAM, URBAN INDIAN CLINIC	8
HEALTHY KIDS	9
OTHER GOVERNMENT HEALTH PLAN	
OTHER NON-GOVERNMENT HEALTH PLAN	92
REFUSED	7
DON'T KNOW	8

IF QA05_I15 = 1, SET CHEMP = 1 AND CHINSURE = 1
IF QA05_I15 = 2, SET CHEMP = 1 AND CHINSURE = 1
IF QA05_I15 = 3, SET CHDIRECT = 1 AND CHINSURE = 1
IF QA05_I15 = 4, SET CHMCARE = 1 AND CHINSURE = 1
IF QA05_I15 = 5, SET CHMCAL = 1 AND CHINSURE = 1
IF QA05_I15 = 6, SET CHHFAM = 1 AND CHINSURE = 1
IF QA05_I15 = 7, SET CHMILIT = 1 AND CHINSURE = 1
IF QA05_I15 = 8, SET CHIHS = 1
IF QA05_I15 = 91, SET CHOTHGOV = 1 AND CHINSURE = 1
IF QA05_I15 = 92, SET CHINSURE = 1 AND CHOTHER = 1
IF QA05_I15 = -7 OR -8, SET CHINSURE = 1

PROGRAMMIN	G NOT	'E QA	D5 116
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IF CHINSURE = 1 (CHILD HAS ANY COVERAGE), CONTINUE WITH QA05_I16, ELSE GO TO PN QA05_I19

Child's managed care plan characteristics

QA05 I16

What is the name of (CHILD)'s main health plan?

{}參加的主要健康計劃的名稱是什麼?

MA2

[NOTE: IF R HAS DIFFICULTY RECALLING NAME, THEN PROBE: "Does (CHILD) have an insurance card or something else with the plan name on it?"]

[NOTE: IF R HAS DIFFICULTY RECALLING NAME, PROBE: 「{}是否有保險卡或註明計劃名稱的其他文件?」]

KAISER	1
BLUE CROSS/CALIFORNIACARE	
PACIFICARE	3
BLUE SHIELD/CAREAMERICA	4
HEALTH NET	5
MEDICARE	6
MEDI-CAL OR MEDICAID	7
(NAME OF COUNTY MEDI-CAL PLAN)	8
OTHER	91
REFUSED	7
DON'T KNOW	8

PROGRAMMING NOTE QA05 117

IF QA05 I16 = 1 (KAISER), CODE QA05 I17 =1 (YES) AND GO TO QA05 I18.

QA05_I17 Is (CHILD)'s main health plan an HMO, that is, a Health Maintenance Organization? {{}參加的主要健康計畫是不是HMO,即健康維護機構計劃?

MA₃

[NOTE: IF R SAYS WHAT AN HMO IS, THEN SAY: "With an HMO, {he/she} must generally receive care from HMO doctors or the expense is not covered, unless {he/she} was referred by the HMO or there was a medical emergency."]

[NOTE: IF R SAYS WHAT AN HMO IS, THEN SAY: "參加HMO計劃後,{}通常必須在HMO醫生處接受醫療護理服務,除非{}經HMO轉介或需要接受急診服務,否則費用不會得到保賠。"]

ĭ ⊑⊙	I
NO	2
REFUSED	
DON'T KNOW	8-

QA05_I18 Is (CHILD) covered for prescription drugs?

VEC

計劃是否支付 {孩子的名字/年齡/性別} 的處方藥品?

CF14

YES	
NO	
REFUSED	7
DON'T KNOW	8-

PROGRAMMING NOTE QA05_I19 IF CHINSURE = 1, GO TO QA05_I24; ELSE CONTINUE WITH QA05_I19.

Child—reasons for non-coverage

QA05_I19 What is the <u>one main</u> reason (CHILD) does not have any health insurance? {孩子的名字/年齡/性別} 沒有醫療保險的一個主要原因是什麼?

CF18

CHANGED EMPLOYER/LOST JOB	1
EMPLOYER DOES NOT OFFER	2
NOT ELIGIBLE DUE TO WORKING STATUS	3
NOT ELIGIBLE DUE TO HEALTH OR	
OTHER PROBLEMS	4
NOT ELIGIBLE DUE TO CITIZENSHIP/	
IMMIGRATION STATUS	5
CAN'T AFFORD/TOO EXPENSIVE	
FAMILY SITUATION CHANGED	7
LOST PUBLIC PROGRAM COVERAGE	
(MEDI-CAL, ETC.)	8
DON'T BELIEVE IN INSURANCE	9
HEALTHY NO NEED	
PAYS FOR OWN CARE NO NEED	11
GETS HEALTH CARE FREE NO NEED	12
OTHER (SPECIFY)	91
REFUSED	7
DON'T KNOW	8

Child's coverage over past 12 months

QA05_I20 Was (CHILD) covered by health insurance at any time during the past 12 months? {孩子的名字/年齡/性別} 是否在過去 12 個月中的任何時間均享受醫療保險?

CF20

YES	1	[GO TO QA05 122]
NO		
REFUSED	7	
DON'T KNOW	8	

QA05_I21	How long has it been since (CHILD) last had health insurance? {孩子的名字/年齡/性別} 上一次有醫療保險到現在已經有多長時間?
CF21	MORE THAN 12 MONTHS, BUT NOT MORE THAN 3 YEARS AGO
QA05_I22	For how many of the last 12 months did {he/she/he or she} have health insurance? 在過去 12 個月中,有多少個月份 {他/她} 有醫療保險?
CF22	[NOTE: IF LESS THAN ONE MONTH, ENTER 1] MONTHS [RANGE: 0-12] REFUSED7 DON'T KNOW8
QA05_I23	During those months when (CHILD) had health insurance, was {his/her/his or her} insurance Medi-CAL, Healthy Families, a plan you obtained through an employer, or some other plan? 在 {孩子的名字/年齡/性別} 有醫療保險的月份中, {他/她} 的保險是加州醫療輔助計劃、健康家庭計劃、雇主為您提供的保險,還是其他計劃? [CIRCLE ALL THAT APPLY.] [PROBE: "Any others?"] [PROBE: "還有其他計劃嗎?"]
	MEDI-CAL

QA05_I24	Thinking about {his/her/his or her} current health insurance, did (CHILD) have this same insurance for ALL of the past 12 months?		
	請想一想 {孩子的名字/年齡/性別} 目前的醫療保險, {他/她} 在過去 12 個月中,		
CF24	是不是都是享受的同一種保險?		
0.2.	YES1 [GO TO PN QA05_I30]		
	NO2 REFUSED7		
	DON'T KNOW8		
QA05_I25	When {he/she/he or she} wasn't covered by {his/her/his or her} current health insurance, did {he/she/he or she} have any other health insurance? 當 {他/她} 沒有享受目前的醫療保險時,{他/她} 有沒有其他任 何醫療保險?		
CF25			
0.20	YES1		
	NO		
	REFUSED7 [GO TO QA05_I27] DON'T KNOW8		
QA05_I26	Was this other health insurance Medi-CAL, Healthy Families, a plan you obtained from an employer, or some other plan?		
	其他醫療保險是加州醫療輔助計劃、 健康家庭計劃、雇主為您提供的保險, 還是 其他計劃?		
CF26	[CIRCLE ALL THAT APPLY.]		
	[PROBE: "Any others?"] [PROBE: "還有其他計劃嗎?"]		
	MEDI-CAL1 HEALTHY FAMILIES2		
	THROUGH CURRENT OR FORMER		
	EMPLOYER/UNION		
	OTHER HEALTH PLAN91		
	REFUSED7 DON'T KNOW8		
QA05_I27	During the past 12 months, was there any time when {he/she/he or she} had no health insurance at all?		
QA03_121	在過去 12 個月中,{他/她} 有沒有任何時間完全沒有醫療保險?		
CF27			
<u> </u>	YES1_		
	NO2 REFUSED7 [GO TO PN QA05_I30]		
	DON'T KNOW		
	-		

QA05_I28	For how many of the past 12 months did {he/she/he or she} have no health insurance? 在過去 12 個月中,{他/她} 有多少個月完全沒有醫療保險?
CF28	MONTHS [IF < 1 MONTH, ENTER "1"] [RANGE: 1-12]
	REFUSED7 DON'T KNOW8
QA05_I29	What is the ONE MAIN reason (CHILD) did not have any health insurance during the time {he/she/he or she} wasn't covered? 在{孩子的名字/年齡/性別} 沒有保險的日子裡, {他/她} 沒有醫療保險的一個主要原因是什麼?
CF29	[IF R SAYS, "No need," PROBE WHY]
	CHANGED EMPLOYER/LOST JOB

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Teen

Teen's health insurance

PROGRAMMING NOTE QA05_I30

IF NO TEEN SELECTED, GO TO QA05_J1;

IF ARINSURE = 1, CONTINUE WITH QA05 130

IF ARINSURE = 0, GO TO PN QA05_I31

ELSE CONTINUE WITH QA05 130

QA05 I30 These next guestions are about health insurance (TEEN) may have.

Does (TEEN) have the same insurance as {you/ADULT RESPONDENT NAME}?

{}的保險是否與您的保險相同?

IA10A

YES	1 [GO TO QA 0)5_ [54]
NO	2	
REFUSED		
DON'T KNOW	-8	

IF QA05_I30 = 1 AND ARMCARE = 1, SET TEMCARE = 1 AND SET TEINSURE = 1
IF QA05_I30 = 1 AND ARMCAL= 1, SET TEMCAL = 1 AND SET TEINSURE = 1
IF QA05_I30 = 1 AND ARHFAM = 1, SET TEHFAM = 1 AND SET TEINSURE = 1
IF QA05_I30 = 1 AND AREMPOWN= 1, SET TEEMP = 1 AND SET TEINSURE = 1
IF QA05_I30 = 1 AND AREMPSP= 1, SET TEEMP = 1 AND SET TEINSURE = 1
IF QA05_I30 = 1 AND AREMPPAR= 1, SET TEEMP = 1 AND SET TEINSURE = 1
IF QA05_I30 = 1 AND AREMPOTH= 1, SET TEEMP = 1 AND SET TEINSURE = 1
IF QA05_I30 = 1 AND ARMILIT= 1, SET TEMPECT = 1 AND SET TEINSURE = 1
IF QA05_I30 = 1 AND ARMILIT= 1, SET TEMILIT = 1 AND SET TEINSURE = 1
IF QA05_I30 = 1 AND AROTHGOV= 1, SET TEOTHGOV = 1 AND SET TEINSURE = 1
IF QA05_I30 = 1 AND ARIHS= 1, SET TEIHS = 1

PROGRAMMING NOTE QA05_I31

IF QA05_A15 = 1 (MARRIED) AND SPINSURE = 1, CONTINUE WITH QA05_I31 ELSE GO TO PN QA05_I32

QA05_I31 Does (TEEN) have the same insurance as your spouse? {}的保險是否與您的{}的保險相同?

MA5

YES	1 [GO TO QA05_I46]	
NO	2	
REFUSED	7	
DON'T KNOW	-8	

```
IF QA05_I31 = 1 AND SPMCARE = 1, SET TEMCARE = 1 AND SET TEINSURE = 1
IF QA05_I31 = 1 AND SPMCAL= 1, SET TEMCAL = 1 AND SET TEINSURE = 1
IF QA05_I31 = 1 AND SPHFAM = 1, SET TEHFAM = 1 AND SET TEINSURE = 1
IF QA05_I31 = 1 AND SPEMPOWN= 1, SET TEEMP = 1 AND SET TEINSURE = 1
IF QA05_I31 = 1 AND SPEMPSP= 1, SET TEEMP = 1 AND SET TEINSURE = 1
IF QA05_I31 = 1 AND SPDIRECT= 1, SET TEDIRECT = 1 AND SET TEINSURE = 1
IF QA05_I31 = 1 AND SPMILIT= 1, SET TEMILIT = 1 AND SET TEINSURE = 1
IF QA05_I31 = 1 AND SPOTHGOV= 1, SET TEOTHGOV = 1 AND SET TEINSURE = 1
```

PROGRAMMING NOTE QA05 132

IF CHINSURE = 1, CONTINUE WITH QA05_I32

ELSE GO TO QA05 133

QA05_I32 Does (TEEN) have the same insurance as (CHILD)?

{}的保險是否與{}的保險相同?

MA6

IF QA05_I32 = 1 AND CHMCARE = 1, SET TEMCARE = 1 AND SET TEINSURE = 1
IF QA05_I32 = 1 AND CHMCAL= 1, SET TEMCAL = 1 AND SET TEINSURE = 1
IF QA05_I32 = 1 AND CHHFAM = 1, SET TEHFAM = 1 AND SET TEINSURE = 1
IF QA05_I32 = 1 AND CHEMP = 1, SET TEEMP = 1 AND SET TEINSURE = 1
IF QA05_I32 = 1 AND CHDIRECT= 1, SET TEDIRECT = 1 AND SET TEINSURE = 1
IF QA05_I32 = 1 AND CHMILIT= 1, SET TEMILIT = 1 AND SET TEINSURE = 1
IF QA05_I32 = 1 AND CHOTHGOV= 1, SET TEOTHGOV = 1 AND SET TEINSURE = 1
IF QA05_I32 = 1 AND CHIHS= 1, SET TEIHS = 1

QA05_I33 Is {he/she/he or she} currently covered by Medi-CAL?

{}是否享受Medi-CAL(加州醫療保健計劃)的保賠?

IA1

[IF NEEDED, SAY: "Medi-CAL is a plan for certain low income children and their families, pregnant women, and disabled or elderly people."]

[IF NEEDED, SAY: "Medi-CAL 是為某些低收入家庭的兒童及其家人、孕婦、殘障人士或年長者提供的一項計畫。"]

 YES
 1
 [GO TO QA05_I37]

 NO
 2

 REFUSED
 -7
 [GO TO QA05_I35]

 DON'T KNOW
 -8
 [GO TO QA05_I35]

IF QA05_I33 = 1, SET TEMCAL = 1 AND SET TEINSURE = 1

QA05_I34	What is the ONE main reason why (TEEN) is not enrolled in the Medi-CAL program? {孩子的名字/年齡/性別} 沒有加入加州醫療輔助計劃 (Medi-CAL)的一個主要原因是什麼?		
IA1A	FAPERWORK TOO DIFFICULT	13	-) 的一個主要原因是什麽?
	REFUSEDDON'T KNOW		
QA05_I35	Is (TEEN) covered by the Healthy Families Program? {孩子的名字/年齡/性別} 有沒有享受健康家庭計劃 (Hea	lthy Fami	lies)?
IA2	[IF NEEDED, SAY: "Healthy Families is a state progra for children up to age 19."] [IF NEEDED, SAY: "*健康家庭計劃是一項州立計劃,為	•	•
	YES NO		[GO TO QA05_I37]
	REFUSEDDON'T KNOW	7	[GO TO QA05_I37] [GO TO QA05_I37]
IF QA05_I35 =	= 1, SET TEHFAM = 1 AND SET TEINSURE = 1		
QA05_I36	What is the ONE main reason why (TEEN) is not enrol {孩子的名字/年齡/性別} 沒有加入健康家庭計劃的一個宣		
IA2A			

 DON'T LIKE / WANT WELFARE
 10

 OTHER
 91

 REFUSED
 -7

 DON'T KNOW
 -8

QA05_I37	Is (TEEN) covered by a health insurar employment or union? {孩子的名字/年齡/性別} 有沒有享受通: 織計劃 (HMO)?	,	•
IA3	V/F0		100 TO 0405 1001
	YES	1	[GO TO QA05_I39]
	NO	2	
	REFUSED	7	
	DON'T KNOW	8	

IF QA05_I37 = 1, SET TEEMP = 1 AND SET TEINSURE = 1

QA05_I38	Is (TEEN) covered by a health insurance plan that you purchased directly from an insurance company or HMO? Do not include a plan that pays only for certain illnesses, such as cancer or stroke, or only gives you "extra cash" if you are in a hospital?
	{}是否享受您直接從保險公司或HMO購買的健康保險計劃的保賠?請不要包括僅支付某些疾病(例如癌
	症或中風)的計劃或當您住院時僅向您支付「額外現金」的計劃。

IA4

YES	1	
NO	2 ~)
REFUSED	7	- [GO TO PN QA05 142]
DON'T KNOW	_	·

IF QA05_I38 = 1, SET TEDIRECT = 1 AND SET TEINSURE = 1

QA05_I39

Do you pay any or all of the premium or cost for (TEEN's) health plan? Do not include the cost of any co-pays or deductibles you or your family may have had to pay.

您是否支付{ ADOLESCENT /AGE/SEX }的保健計劃的任何或全部保費

或費用?請勿包括您或您的家庭可能需要支付的任何共付款或自付額。

AI55

[IF NEEDED, SAY: "Copays are the partial payments you make for your health care each time you see a doctor or use the health care system, while someone else pays for your main health care coverage."

[IF NEEDED, SAY: "共付款是您每次看病或使用健康護理系統服務時支付的部份健康護理費用,由其他人支付您的主要健康護理保賠費用。"

"A deductible is the amount you pay for medical care before your health plan starts paying." "自付額是您的保健計劃開始付款之前您支付的醫療護理費用。"

"Premium is the monthly charge for the cost of your health insurance plan."]

"保費是您的健康保險計劃的每月收費。"]

YES	
NO	
REFUSED	7
DON'T KNOW	-8

QA05_I40 Does anyone else, such as an employer, a union, or professional organization pay all or some portion of the premium or cost for (TEEN's) health plan?

是否有任何其他人, 例如雇主、工會或專業機構, 支付

{ ADOLESCENT /AGE/SEX}的保健計劃的全部或部份保費或費用?

AI52

YES	1
NO	2
REFUSED	
DON'T KNOW	

QA05_I41	Who else pays all or some portion of the cost for (TEEN'S) health plan? 是誰?
AI53	
7 00	CURRENT EMPLOYER1
	FORMER EMPLOYER
	UNION
	SPOUSE'S CURRENT EMPLOYER4
	SPOUSE'S FORMER EMPLOYER5
	PROFESSIONAL/FRATERNAL ORGANIZATION 6
	MEDICAID/MEDI-CAL ASSISTANCE7
	HEALTHY FAMILIES8
	HEALTHY KIDS9
	OTHER91
	REFUSED7
	DON'T KNOW8
IF QA05_I41 =	= 1-6, SET TEEMP = 1 = 7, SET TEMCAL = 1
IF QA05_I41 =	=8, SET TEHFAM = 1
PROGRAMMI	ING NOTE QA05_I42
	= 1, GO TO PROGRAMMING NOTE QA05_I46; ELSE CONTINUE WITH QA05_I42
QA05_I42	Is {he/she/he or she} covered by CHAMPUS/CHAMP VA, TRICARE, VA, or some other military health care? {}是否享受CHAMPUS/CHAMP VA、Tricare、VA或某些其他軍隊健康護理計劃的保賠?
IA6	
	YES
IF QA05_I42 =	= 1, SET TEMILIT = 1 AND SET TEINSURE = 1
QA05_I43	
_	Is {he/she/he or she} covered by some other government health plan such as AIM, "Mister MIP", or
	something else?
	{}是否享受某些其他政府健康計劃的保賠,例如AIM、Mister MIP或其他計劃?
IA7	
	[IF NEEDED, SAY: "AIM means Access for Infants and Mothers, 'Mister MIP' or MRMIP
	means Major Risk Medical Insurance Program"]
	[IF NEEDED, SAY: "「AIM指「母嬰服務計畫」; Mister MIP或MRMIP指「重大風險醫療保險計
	劃」。"]
	AIM
	"MISTER MIP"/MRMIP
	NO OTHER PLAN
	SOMETHING ELSE (SPECIFY):91 [GO TO PN QA05_I46]
	REFUSED
	DON'T KNOW8
IF OA05 143 :	= 1 OR 2 OR 91. SET TEOTHGOV = 1 AND SET TEINSURE = 1

QA05_I44 Does {he/she/he or she} have any health insurance coverage through a plan that I missed? {他/她} 有沒有享受任何我漏掉的其他醫療保險計劃?

IA8

QA05_I45 What type of health insurance does {he/she/he or she} have? Does it come through Medi-CAL, Healthy Families, an employer or union, or from some other source?

{}享受哪種類型的健康保險?該健康保險是透過Medi-CAL (加州醫療保健計劃)、Healthy Families (健康家庭計劃)、僱主或工會獲得的、還是從某些其他來源獲得的?

IA9

[CIRCLE ALL THAT APPLY.]

[PROBE: "Any others?"]

[PROBE: "還有任何其他計畫嗎?"]

THROUGH CURRENT OR FORMER EMPLOYER/UNION......1 THROUGH SCHOOL, PROFESSIONAL ASSOCIATION, TRADE GROUP OR OTHER ORGANIZATION......2 PURCHASED DIRECTLY FROM A HEALTH PLAN (BY R OR ANYONE ELSE)......3 MEDICARE......4 (VERIFY) MEDI-CAL.....5 HEALTHY FAMILIES......6 CHAMPUS/CHAMP-VA. TRICARE. VA. OR SOME OTHER MILITARY HEALTH CARE.....7 INDIAN HEALTH SERVICE, TRIBAL HEALTH PROGRAM, URBAN INDIAN CLINIC......8 HEALTHY KIDS......9 OTHER GOVERNMENT HEALTH PLAN......91 OTHER NON-GOVERNMENT HEALTH PLAN...... 92 REFUSED.....-7 DON'T KNOW.....-8

```
IF QA05_I45 = 1, SET TEEMP = 1 AND TEINSURE = 1
IF QA05_I45 = 2, SET TEEMP = 1 AND TEINSURE = 1
IF QA05_I45 = 3, SET TEDIRECT = 1 AND TEINSURE = 1
IF QA05_I45 = 4, SET TEMCARE = 1 AND TEINSURE = 1
IF QA05_I45 = 5, SET TEMCAL = 1 AND TEINSURE = 1
IF QA05_I45 = 6, SET TEHFAM = 1 AND TEINSURE = 1
IF QA05_I45 = 7, SET TEMILIT = 1 AND TEINSURE = 1
IF QA05_I45 = 8, SET TEIHS = 1
IF QA05_I45 = 91, SET TEOTHGOV = 1 AND TEINSURE = 1
IF QA05_I45 = 92, SET TEINSURE = 1 AND TEOTHER = 1
IF QA05_I45 = 7 OR -8, SET TEINSURE = 1
```

PROGRAMMING NOTE QA05 146

IF TEINSURE = 1 (TEEN HAS ANY COVERAGE), CONTINUE WITH QA05_I46, ELSE GO TO PN QA05_I49

Teen's managed care plan characteristics

QA05 I46

What is the name of (TEEN)'s main health plan?

{}參加的主要健康計劃的名稱是什麼?

MA7

[NOTE: IF R HAS DIFFICULTY RECALLING NAME, THEN PROBE: "Does (TEEN) have an insurance card or something else with the plan name on it?"]

[NOTE: IF R HAS DIFFICULTY RECALLING NAME, THEN PROBE: "{}是否有保險卡或印有計劃 名稱的其他文件?"]

KAISER	1
BLUE CROSS/CALIFORNIACARE	2
PACIFICARE	3
BLUE SHIELD/CAREAMERICA	4
HEALTH NET	5
MEDICARE	6
MEDI-CAL OR MEDICAID	7
(NAME OF COUNTY MEDI-CAL PLAN)	8
OTHER	91
REFUSED	7
DON'T KNOW	8-

PROGRAMMING NOTE QA05 147:

IF QA05 I46 = 1 (KAISER), CODE QA05 I47 = 1 (YES) AND GO TO QA05 I48

QA05_I47 Is (TEEN)'s main health plan an HMO, that is, a Health Maintenance Organization? {{}參加的主要健康計劃是不是HMO,即健康維護機構計劃?

MA8

[NOTE: IF R ASKS WHAT AN HMO IS, THEN SAY: "With an HMO, {he/she} must generally receive care from HMO doctors or the expense is not covered, unless {he/she} was referred by the HMO or there was a medical emergency."]

[NOTE: IF R ASKS WHAT AN HMO IS, THEN SAY: "參加HMO計劃後,{}通常必須在HMO醫生處接受醫療護理服務,除非{}經HMO轉介或需要接受急診服務,否則費用不會得到保賠。"]

YES	
NO	
REFUSED	
DON'T KNOW	-8

QA05_I48 Is (TEEN) covered for prescription drugs?

{孩子的名字/年齡/性別}的計劃是否支付處方藥品?

IA14

YES	1
NO	2
REFUSED	7
DON'T KNOW	8

	NG NOTE QA05_I49:	
	= 1, GO TO QA05_I54;	
	NUE WITH QA05_I49.	
QA05 I49	ns for non-coverage What is the ONE MAIN reason (TEEN) does not have any health insurance?	
QA03_143	{}沒有任何健康保險的一個主要原因是什麼?	
	()及自己问题冰体风的 固工女体固定门签:	
1840		
IA18	CHANGED EMPLOYER/LOST JOB1	
	EMPLOYER DID NOT OFFER	
	NOT ELIGIBLE DUE TO WORKING STATUS3	
	NOT ELIGIBLE DUE TO HEALTH OR OTHER	
	PROBLEMS4	
	NOT ELIGIBLE DUE TO CITIZENSHIP/	
	IMMIGRATION STATUS5	
	COULDN'T AFFORD/TOO EXPENSIVE6	
	FAMILY SITUATION CHANGED7	
	LOST PUBLIC PROGRAM COVERAGE	
	(MEDI-CAL, ETC.) 8	
	DIDN'T BELIEVE IN INSURANCE9	
	HEALTHY NO NEED10	
	PAID FOR OWN CARE NO NEED11	
	GOT HEALTH CARE FREE NO NEED12	
	OTHER (SPECIFY)91	
	REFUSED7	
	DON'T KNOW8	
QA05_I50	Was (TEEN) covered by health insurance at any time during the past 12 months?	
Q, 100_100	{孩子的名字/年齡/性別} 在過去 12 個月中的任何時間是否享受醫療保險?	
	[[5] [1] [1] [1] [1] [1] [1] [1] [1] [1] [1	
IA20		
IALU	YES1 [GO TO QA05_I5	21
	NO2	-,
	REFUSED -7	
	DON'T KNOW8	
QA05_I51	How long has it been since (TEEN) last had health insurance?	
	{孩子的名字/年齡/性別} 從上一次有醫療保險到現在已有多長時間?	
IA21		
	MORE THAN 12 MONTHS, BUT NOT	
	MORE THAN 3 YEARS AGO1	
	MORE THAN 3 YEARS AGO2	
	NEVER HAD HEALTH INSURANCE COVERAGE 3 > [GO TO QA05_I6	0]
	REFUSED7	
	DON'T KNOW/NOT SURE8	

QA05_I52	For how many of the last 12 months did {he/she/he or she} have health insurance? 在過去十二個月中,{}有幾個月享有健康保險?
IA22	[NOTE: IF LESS THAN ONE MONTH, ENTER 1]
	MONTHS [RANGE: 0-12]
QA05_I53	REFUSED7 DON'T KNOW8
_	During those months when (TEEN) had health insurance, was {his/her/his or her} insurance Medi-CAl Healthy Families, a plan you obtained through an employer, or some other plan? 在 {孩子的名字/年齡/性別} 有醫療保險的月份裡,{他/她} 的保險是加州醫療輔助計劃、健康家庭計劃、雇主為您提供的保險、還是其他計劃?
IA23	[CIRCLE ALL THAT APPLY.]
	[PROBE: "Any others?"] [PROBE: "*還有其他計劃嗎?"]
	MEDI-CAL 1 HEALTHY FAMILIES 2 THROUGH CURRENT OR FORMER EMPLOYER/UNION 3 HEALTHY KIDS 4 OTHER HEALTH PLAN 91 REFUSED -7 DON'T KNOW -8
Teen's covera QA05_I54	ge over past 12 months Thinking about {his/her/his or her} current health insurance, did (TEEN) have this same insurance for ALL of the past 12 months? 請想一想{}目前參加的健康保險,{}是否在過去十二個月中一直參加這個相同的健康保險計劃?
IA24	YES
QA05_I55	When {he/she/he or she} wasn't covered by {his/her/his or her} current health insurance, did {he/she/he or she} have any other health insurance? 當 {他/她} 沒有享受目前的醫療保險計劃時,{他/她} 有沒有其他任何醫療保險?
IA25	YES

QA05_I56	was this other health insurance Medi-CAL, Healthy Families, a plan you obtained from an employer, or some other plan?
	{他/她} 其他的醫療保險是加州醫療輔助計劃、健康家庭計劃、雇主為您提供的保險、還是其他計劃?
IA26	[CIRCLE ALL THAT APPLY.]
	[PROBE: "Any others?"] [PROBE: "*還有其他計劃嗎? "]
	MEDI-CAL1
	HEALTHY FAMILIES2
	THROUGH CURRENT OR FORMER
	EMPLOYER/UNION
	OTHER HEALTH PLAN
	REFUSED7
	DON'T KNOW8
QA05_I57	During the past 12 months, was there any time when {he/she/he or she} had no health insurance at all? 在過去 12 個月中,{他/她} 有沒有任何時間完全沒有醫療保險?
IA27	
17-12-1	YES1
	NO2
	REFUSED
	DON'T KNOW8
QA05_I58	For how many of the past 12 months did {he/she/he or she} have no health insurance?
	在過去十二個月中,{}有幾個月完全沒有健康保險?
IA28	
IAZO	MONTHS [IF < 1 MONTH, ENTER "1"] [RANGE: 1-12]
	REFUSED7
	DON'T KNOW8
QA05_I59	What is the ONE MAIN reason (TEEN) did not have any health insurance during the time {he/she/he
	or she} wasn't covered?
	在{}不享有保險的期間,{}沒有任何健康保險的一個主要原因是什麼?
IA29	
IAZS	[IF R SAYS, "No need," PROBE WHY]
	CHANGED EMPLOYER/LOST JOB1 EMPLOYER DID NOT OFFER
	NOT ELIGIBLE DUE TO WORKING STATUS3
	NOT ELIGIBLE DUE TO HEALTH OR OTHER
	PROBLEMS4
	NOT ELIGIBLE DUE TO CITIZENSHIP/ IMMIGRATION STATUS5
	COULDN'T AFFORD/TOO EXPENSIVE6
	FAMILY SITUATION CHANGED7
	LOST PUBLIC PROGRAM COVERAGE
	(MEDI-CAL, ETC.) 8

DIDN'T BELIEVE IN INSURANCE	9
HEALTHY NO NEED	10
PAID FOR OWN CARE NO NEED	11
GOT HEALTH CARE FREE NO NEED	12
OTHER (SPECIFY)	91
REFUSED	
DON'T KNOW	8

QA05_I60 Do you now have any type of insurance that pays for part or all of (TEEN) dental care? 您目前是否有任何類型的保險可以支付{}的部份或全部牙科護理費用?

MA10

YES	
NO	2
REFUSED	
DON'T KNOW.	

PROGRAMMING NOTE QA05 161:

IF QA05_A5 = 1 (R IS MALE), DISPLAY "mother"; IF QA05_A5 = 2 (R IS FEMALE), DISPLAY "father";

QA05_I61 In what country was {TEEN'S} {mother/father} born? {ADOLESCENT /AGE/SEX }的母親是在哪個國家出生的?

AI56

UNITED STATES...... 1 AMERICAN SAMOA......2 CAMBODIA......3 CANADA......4 EL SALVADOR......7 ENGLAND.....8 GERMANY......9 GUAM......10 GUATEMALA......11 HONG KONG......12 JAPAN......15 KOREA......16 NICARAGUA......18 PAKISTAN......19 PERU......20 PHILIPPINES......21 TAIWAN 23 VIETNAM......24 VIRGIN ISLANDS......25OTHER (SPECIFY): 91 REFUSED.....-7 DON'T KNOW.....-8 [GO TO QA05_J1]

PROGRAMMING NOTE QA05_I62:	
IF QA05_A5 = 1 (R IS MALE), DISPLAY "mother";	
IF QA05_A5 = 2 (R IS FEMALE), DISPLAY "father";	

QA05_I62 Does {TEEN'S} {mother/father} now live in the U.S.? {ADOLESCENT /AGE/SEX }的母親目前住在美國嗎?

YES	1	
NO	2 [GO TO QA05_J	11
REFUSED	-	•
DON'T KNOW		

PROGRAMMI	NG NOTE QA05 163:
	: 1 (R IS MALE), DISPLAY "mother";
IF QAUS_AS =	2 (R IS FEMALE), DISPLAY "father";
QA05_I63	Is {TEEN'S} {mother/father} a citizen of the United States?
	{ADOLESCENT /AGE/SEX}的母親是美國公民嗎?
	(ADOLESCENT /AGE/SEA)的母税定关图公式稿:
AI58	
Alou	VEO
	YES1 [GO TO PN QA05_I65]
	NO2
	APPLICATION PENDING3
	REFUSED7
	· · · · · · · · · · · · · · · · · · ·
	DON'T KNOW8
DD00D4MM	NO NOTE CASE IS
	NG NOTE QA05_I64:
	· 1 (R IS MALE), DISPLAY "mother";
IF QA05 A5 =	2 (R IS FEMALE), DISPLAY "father";
QA05_I64	Is {TEEN'S} {mother/father} a permanent resident with a green card?
	{ADOLESCENT /AGE/SEX} 的母親是持有綠卡的永久居民嗎?
	(= ,
AI59	
	YES1
	NO2
	APPLICATION PENDING3
	REFUSED
	DON'T KNOW8
	DON'T INCOME.
PROGRAMM	NG NOTE QA05_I65:
IF QA05 A5 =	· 1 (R IS MALE), DISPLAY "mother";
	2 (R IS FEMALE), DISPLAY "father";
11 QA00_A0 -	22 (KIOT EMALE), DIOI EAT TAINET,
QA05_I65	About how many years has {TEEN'S} {mother/father} lived in the United States?
_	{ADOLESCENT /AGE/SEX}的母親在美國已居住大約多少年?
	(NOCECOCK) MODICE AND THE CONTROL OF
AI60	
	NUMBER OF YEARS [IF < 1 YEAR, ENTER "1"]
	NOWDER OF TEARS [IF > I TEAR, ENTER]
	OR YEAR TO FIRST COME AND LIVE IN U.S.
	MOTHER/FATHER DECEASED
	REFUSED7
	DON'T KNOW8

Section J – Health	Care Utilization	and Access	, Mental Health
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Visits	to me	dical	dod	cto
QA05	_J1	No	οw,	ľd

Now, I'd like to ask about the health care you receive.

現在,我想提出幾個有關您所接受的健康護理的問題。

During the past 12 months, how many times have you seen a medical doctor? 在過去十二個月中,您曾經幾次去看醫生?

AH5

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

PROGRAMMING NOTE QA05_J2:

IF QA05_J1 = 0, -7, OR -8 (HAS NOT SEEN A DOCTOR IN LAST 12 MONTHS OR REF/DK), CONTINUE WITH QA05_J2;

ELSE GO TO PROGRAMMING NOTE QA05 J3

QA05_J2 About how long has it been since you last saw a doctor about your own health? 自從您上次就自身的健康狀況去看醫生以來到現在已經有多長時間?

AH6

ONE YEAR AGO OR LESS	0	
MORE THAN 1 UP TO 2 YEARS AGO	1	
MORE THAN 2 UP TO 5 YEARS AGO	2	[GO TO QA05_J7]
MORE THAN 5 YEARS AGO	3	[GO TO QA05_J7]
NEVER	4	[GO TO QA05_J7]
REFUSED	-7	[GO TO QA05_J9]
DON'T KNOW	8	[GO TO QA05_J9]

PROGRAMMING NOTE QA05_J3:

IF QA05_J1 > 0 OR QA05_J2 = 0 or 1 (SEEN A DOCTOR IN LAST 12 MONTHS OR 1-2 YEARS AGO), CONTINUE WITH QA05_J3;

ELSE GO TO QA05 J7

Communication with doctor

AJ8

YES	1	
NO	2	
REFUSED	7	QA05 J7
DON'T KNOW	۔ ا	

QA05_J4 Was this because you and the doctor spoke different languages? 這是不是因為您和醫生講的是不同的語言?

AJ9

YES	1
NO	2
REFUSED	7 [GO TO QA05_J7]
DON'T KNOW	- 1

QA05_J5	Did you need <u>someone else</u> to help you understand the doctor? 您是否需要其他人的幫助才能聽懂醫生的話?
AJ10	YES
QA05_J6	Who was this person who helped you understand the doctor? 是誰幫助您聽懂醫生說的話?
AJ11	
	[IF R RESPONDS "MY CHILD", PROBE TO SEE IF CHILD IS UNDER AGE 18. IF AGE 18+, CODE AS ADULT FAMILY MEMBER]
	MINOR CHILD (UNDER AGE 18)
Doctor QA05_J7	Was there ever a time when you would have gotten better medical care if you had belonged to a different race or ethnic group? 是否曾經有過這樣的情形一如果您屬於另一個種族或種族團體就會獲得更好的醫療護理服務?
AJ17	
	YES
QA05_J8	Think about the last time this happened. How long ago was that? 請回想一下上次出現此種情形的時間,那是在多久以前?
AJ18	A YEAR AGO OR LESS

Emergency	room	visits
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PROGRAMMING NOTE QA05 J9

IF QA05_B6 = 1 (YES, R VISITED ER FOR ASTHMA) CODE QA05_J9 = 1 AND GO TO QA05_J10; ELSE, CONTINUE WITH QA05_J9

QA05_J9	During the past 12 months, did you visit a hospital emergency room for your own health?
	在過去 12 個月中,您有沒有因為自身的健康去過醫院急診室?

AH12

YES	1
NO	
REFUSED	7
DON'T KNOW	8-

Mental health

QA05_J10

The next questions are about how you have been feeling during the past 30 days. 以下是關於在過去 30 天內您的感覺的問題。

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?

在過去 30 天內,您大約每隔多久會感到緊張不安 — 您認為是始終、 大多數時間、有時、很少還是從

不?

AJ29

ALL	1
MOST	2
SOME	
A LITTLE	
NONE	5
REFUSED	7
DON'T KNOW	8

QA05_J11 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?

在過去 30 天內,您大約每隔多久會感到毫無希望 — 始終、大多數時間、

有時、很少還是從不?

AJ30

ALL	
MOST	
SOME	
A LITTLE	4
NONE	5
REFUSED	
DON'T KNOW	

QA05_J12	During the past 30 days, about how often did you feel restless or fidgety? 在過去 30 天內,您大約每隔多久會感到焦慮或煩躁?
AJ31	[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: "始終、大多數時間、有時、很少還是從不?"]
	ALL 1 MOST 2 SOME 3 A LITTLE 4 NONE 5 REFUSED -7 DON'T KNOW -8
QA05_J13	How often did you feel so depressed that nothing could cheer you up? 您每隔多久會感到極為憂鬱,任何事也無法使您高興起來?
AJ32	[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: "始終、大多數時間、有時、很少還是從不?"]
	ALL
QA05_J14	During the past 30 days, about how often did you feel that everything was an effort? 在過去 30 天內,您大約每隔多久會感到每件事做起來都很費力?
AJ33	[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: "始終、大多數時間、有時、很少還是從不?"]

 ALL
 1

 MOST
 2

 SOME
 3

 A LITTLE
 4

 NONE
 5

 REFUSED
 -7

 DON'T KNOW
 -8

QA05_J15	During the past 30 days, about how often did you feel worthless? 在過去 30 天內,您大約每隔多久會感到自己毫無用處?
AJ34	[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: "始終、大多數時間、有時、很少還是從不?"]
	ALL 1 MOST 2 SOME 3 A LITTLE 4 NONE 5 REFUSED -7 DON'T KNOW -8
QA05_J16	During the past 12 months, did you think you needed help for emotional or mental health problems, such as feeling sad, anxious or nervous? 在過去 12 個月裡,你有沒有覺得自己可能需要情緒或精神保健問題方面的幫助,比如你感到難過、沮喪、焦慮或緊張?
AJ2	YES
QA05_J17	Not counting overnight stays, emergency room visits, or visits for drug or alcohol problems, in the past 12 months, have you seen a psychiatrist, psychologist, social worker, or counselor for emotional or mental health problems? 在過去 12 個月中,您是否曾經因情感或精神健康問題與精神病學家、心理學家、社會工作者或諮詢員約診?請勿包括住院、急診室就診或
AJ3	吸毒或酗酒門診。 YES

PROGRAMMI	NG NOTE QA05_J18:		
(IF QA05 J16 = 1 OR QA05 J17=1) AND ARINSURE = 1, CONTINUE WITH QA05 J18;			
	= 1 OR QA05_J17 = 1) AND ARINSUF	RE NE 1, GO TO QA05_J19;	
ELSE GO TO			
Mental health			
QA05_J18	Does your insurance cover treatment	t for mental health problems, such as visits to a psychologist or	
	psychiatrist?		
	您的保險是否為精神健康疾病 ,例如 [。]	心理學家或精神病學家門診,	
	治療提供保賠?		
AJ1			
7101	YES	1	
	NO		
	REFUSED		
	DON'T KNOW		
	2011 1410 11		
QA05_J19	During the past 12 months, did you to	ake any prescription medications, such as an antidepressant or	
<u></u>		or more, for an emotional or personal problem?	
	在過去 12 個月中,您是否曾經因情愿		
	每天服用任何處方藥物, 例如抗憂鬱		
	6 人加川 I 19 处力 未 10, 17 知 10 支 10 5	たみ 峡 nf Ai .	
A 15			
AJ5	\/F0	•	
	YES		
	NO		
	REFUSED		
	DON'T KNOW	8	
	5		
QA05_J20		ave difficulties or delays in getting mental health treatment?	
	在過去 12 個月中,您在獲得精神健康	!冶漿万面是 省遇到困難或延誤?	
AJ6			
	YES	1	
	NO	2	
	REFUSED	7	
	DON'T KNOW	8	
PROGRAMMI	NG NOTE QA05_J21;		
	2 (NO ER VISIT PAST 12 MONTHS, G	O TO PN QA05_J22	
ELSE, CONTII	NUE WITH QA05_J21	_	
QA05_J21	In the past 12 months, did you receive	e care in an emergency room for emotional or mental health	
· -	problems?	3 ,	
	· 在過去 12 個月中,您是否曾經因情愿	感或精神健康問題在急診室接受護理?	
AJ7			
A0 1	YES	1	
	NO		
	REFUSED		
	DON'T KNOW		

Discussed diet and exercise

PROGRAMMING NOTE QA05 J23

IF QA05_J1 > 0 OR QA05_J2 = 0 (R HAS SEEN DOCTOR IN LAST 12 MONTHS) CONTINUE WITH QA05_J23 ELSE GO TO QA05_K1

QA05_J22 Doctors, nurses, or other health providers sometimes talk with patients about low-fat, low-salt, or reduced calorie diets.

醫生、護士或其他健康服務提供者有時與病人討論低脂、低鹽或低卡路里 的飲食問題。

In the last 12 months, did your health provider talk with you or give you information about how much or what kinds of <u>food you eat</u>?

在過去 12 個月中,您的健康服務提供者是否與您討論過您的飲食數量或 類型或向您提供這方面的信息?

AJ27

YES	1
NO	
REFUSED	7
DON'T KNOW	8

QA05_J23 In the last 12 months, did your health provider talk with you or give you information about how much <u>or</u> what kind of exercise you get?

在過去 12 個月中,您的健康服務提供者是否與您討論過您的運動量或類型或向您提供這方面的信息?

AJ28

YES	1
NO	
REFUSED	
DON'T KNOW	

Section K – Employment, Income, Poverty Status

IF QA05_G22 =	IG NOTE QA05_K1: : 1 (R WORKED LAST WEEK) OR QA05_G24 = 1 (R USUALLY WORKS) CONTINUE WITH
QA05_K1; ELSE GO TO P	PROGRAMMING NOTE QA05_K7
Hours worked	-
QA05_K1	This is about the work you do. How many hours per week do you <u>usually</u> work at <u>all</u> jobs or businesses?
	我現在想再提出幾個有關您的工作的問題。
AK3	您在從事的所有的工作或業務中每週通常工作多少小時?
Aito	[IF WORKS > 95 HOURS, ENTER 95. IF DOES NOT WORK, ENTER 0 (ZERO).]
	HOURS [HR: 0-95]
	REFUSED7 DON'T KNOW8
PPOGPAMMIN	IG NOTE QA05_K2
ELSE CONTINU	O (NO HOURS WORKED), GO TO PROGRAMMING NOTE QA05_K7; JE WITH QA05_K2 AND A (RRI) (ATE COMPANIC), BIORI AX "constant the society access."
	: 1 (PRIVATE COMPANY), DISPLAY "employed by a private company", : 2 (GOVERNMENT), CODE QA05 K2 AS "GOVERNMENT" AND GO TO QA05 K3
	: 3 (SELF-EMPLOYED), DISPLAY "self-employed",
IF QA05_G26 =	4 (FAMILY BUSINESS OR FARM), DISPLAY "working without pay in a family business or farm".
Occupation/ind	
QA05_K2	Earlier, you told me that on your <u>main</u> job, you are {employed by a private company/ / self-employed/working without pay in a family business or farm}. What kind of business or industry is this? 早些時候您曾經告訴我您的主要工作是在私人公司任職。 這家公司從事的是哪一種業務或屬於哪一個行業?
AK5	
AITO	[IF NEEDED, SAY: "What do they make or do at this business?"] [IF NEEDED, SAY: "製造什麼產品或從事什麼業務?"]
	[INTERVIEWER: ENTER DESCRIPTION]
	(BUSINESS OR INDUSTRY)
	REFUSED7 DON'T KNOW8
QA05_K3	What is the <u>main</u> kind of work <u>you</u> do? 您主要從事何種類型的工作?
AK6	[MAIN JOB = WHERE WORKS MOST HOURS.]
	[INTERVIEWER: ENTER DESCRIPTION]
	(OCCUPATION)
	REFUSED7
	DON'T KNOW8

QA05_K4	How long have you worked at your <u>main</u> job? 您從事主要工作多久了?
AK7	[IF NEEDED, SAY: "That is, for your <u>current</u> employer?"]
	MONTHS [HR: 0-12] YEARS [HR: 0-50]
	REFUSED7 DON'T KNOW8
IF QA05_G26	NG NOTE QA05_K5: = 2 (GOVERNMENT EMPLOYEE), CODE QA05_K5 = 5 AND GO TO QA05_K7; = 3 (SELF-EMPLOYED), CONTINUE WITH QA05_K5 AND DISPLAY "Including yourself, about"; IUE WITH QA05_K5 AND DISPLAY "About"
QA05_K5	{Including yourself, about / About} how many people are employed by {your employer/you} at all locations? 您的僱主在各處總共大約聘用了多少名僱員?
AK8	[IF NEEDED SAY: "Your best guess is fine."] [IF NEEDED SAY: "請盡量估計人數。"]
	FEWER THAN 10
Income, last n QA05_K6	
AK10	[IF AMOUNT GREATER THAN \$999,995, ENTER "999,995"]
	\$AMOUNT
	REFUSED

	ING NOTE QA05_K7 = 1 or 2 (SPOUSE WORKS) OR QA05_G30 = 1 (SPOUSE USUALLY WORKS), CONTINUE WITH QA05_K9
QA05_K7	How many hours per week does your { <u>husband/wife/spouse</u> } <u>usually</u> work at <u>all j</u> obs or businesses? 您的配偶在從事的所有的工作或業務中 每週通常工作多少小時?
AK20	[IF WORKS > 95 HOURS, ENTER 95. IF DOES NOT WORK, ENTER 0 (ZERO).]
	HOURS
	REFUSED7 DON'T KNOW8
	NG NOTE QA05_K8 · 0 CONTINUE WITH QA05_K8; QA05_K9
QA05_K8	What is your best estimate of all your spouse's earnings <u>last month</u> before taxes and other deductions from all jobs and businesses, including hourly wages, salaries, tips and commissions? 據您估計,您的配偶上個月從事所有的工作和業務的收入有多少 ?這是指在沒有扣除各項稅款和其他扣除額之前的收 ,請包括小時工資、薪資、小費和佣金。
AK10A	[IF AMOUNT GREATER THAN \$999,995, ENTER "999,995"]
	\$ AMOUNT
Annual house	REFUSED7 DON'T KNOW8
QA05_K9	What is your best estimate of your <u>household's total annual</u> income from all sources <u>before taxes</u> in 2004? 據您估計,您的家庭 2004 年來自所有來源的扣稅前的全年總收入是多少?
AK22	[IF NEEDED SAY, "Include money from jobs, social security, retirement income, unemployment payments, public assistance and so forth. Also include income from interest, dividends, net income from business, farm, or rent and any other money income."] [IF NEEDED SAY, "請包括工作、社會安全、退休收入、失業補助金、公共援助等收入。另外還請包括利息、紅利、業務、農場或租金淨收入以及任何其他資金收入。"]
	[IF AMOUNT GREATER THAN \$999,995, ENTER "999,995"]
	\$ AMOUNT
	REFUSED7 7 DON'T KNOW8 J [GO TO PN QA05 K11]

QA05_K10	I have entered that your annual household income is (AMOUNT). Is that correct? 據您估計,您的家庭 2002 年來自所有來源的扣稅前的全年總收入是多少?			
AK22A	YES	[GO TO PN QA05_K17] [GO BACK TO QA05_K9] [GO TO PN QA05_K17] [GO TO PN QA05_K17]		
IF QA05_K9 =	S NOTE QA05_K11: -7 or -8 CONTINUE WITH QA05_K11; PROGRAMMING NOTE QA05_K17			
QA05_K11	We don't need to know exactly, but could you tell me if your <u>hou</u> sources <u>before taxes</u> is more than \$20,000 per year or is it less 我們不需要知道詳細的數字,但您可不可以告訴我,你們家庭所的稅前年收入是否超過還是不足 20,000 美元 ?	?		
AK11	MORE1	[GO TO QA05_K13]		
	EQUAL TO \$20K OR LESS	[GO TO QA05_K17] [GO TO PN QA05_K17] [GO TO PN QA05_K17]		
QA05_K12	ls it … [家庭年收入] 是			
AK12 QA05_K13	\$5,000 or less, or	[GO TO PN QA05_K17]		
AK13	MORE1	[GO TO QA05_K15]		
	EQUAL TO \$70K OR LESS	[GO TO PN QA05_K17] [GO TO PN QA05_K17]		

IF R IS ONLY MEMBER OF HH, GO TO PROGRAMMING NOTE QA05_K18; ELSE CONTINUE WITH QA05_K17

Number of persons supported

QA05_K17 Including yourself, how many people living in your household are supported by your total household income?

包括您自己在內。住在您家裡的多少人需要依靠您的家庭總收入生活?

AK17

_____ NUMBER OF PEOPLE [HR: 1-20]

REFUSED......-7

DON'T KNOW....-8

CHIS 2003 Adult Survey Version 11.2 (Chinese) December 20, 2012

PROGRAMMING NOTE QA05 K18:

QA05 K18 MUST BE LESS THAN QA05 K17

IF NO CHILDREN UNDER 18 IN HH (AS DETERMINED FROM CHILD ENUMERATION QUESTIONS) OR TOTAL NUMBER OF PEOPLE LIVING IN HH (AS DETERMINED BY ADULT PLUS CHILD ENUMERATION) = QA05_K20, GO TO PROGRAMMING NOTE QA05_K19;

ELSE CONTINUE WITH QA05_K18

QA05_K18 How many of these {INSERT NUMBER FROM QA05_K17} people are children under the age of 18? 在這{插入 K17 的答案} 口人中,有多少是 18 歲以下的孩子?

NUMBER OF	CHILDREN	(UNDER A	AGE 18)
		•	,

REFUSED	<i>1</i>	•
DON'T KNOW	8	3

Poverty level test

PROGRAMMING NOTE QA05_K19: [BASE.POVRT100, BASE.POVRT130, BASEPOVRT200]
OBTAIN THE FEDERAL POVERTY 100%, 200%, AND 300% LEVEL CUTOFF POINTS FROM THE 2005 FEDERAL POVERTY GUIDELINE USING THE TOTAL HOUSEHOLD SIZE AND NUMBER OF CHILDREN FROM QA05_K17 AND QA05_K18 RESPECTIVELY.

SCRN.RADLTCNT

SCRN.KIDCNT

(THE 200% AND 300% VALUES WERE DERIVED BY MULTIPLYING THE CENSUS POVERTY 2002 THRESHOLD "SIZE OF FAMILY UNIT" BY "RELATED CHILDREN UNDER 18 YEARS" TABLE AMOUNTS BY 2 AND 3, RESPECTIVELY, THEN ROUNDING TO THE NEAREST 100 DOLLARS. REFER TO SPECIFICATIONS ADDENDUM xxx FOR THE TABLE OF VALUES. THE 100% POVERTY CUTOFF VALUE WILL BE STORED IN CATI VARIABLE POVRT100, THE 200% POVERTY CUTOFF VALUE WILL BE STORED IN CATI VARIABLE POVRT200 AND THE 300% VALUE IN CATI VARIABLE POVRT300).

IF EITHER QA05_K17 OR QA05_K18 IS MISSING, USE THE TOTAL NUMBER OF ADULTS ENUMERATED IN THE SCREENER (GIVEN BY CATI VARIABLE RADLTCNT) AND THE TOTAL NUMBER OF CHILDREN ENUMERATED AT QA05_G14 OF THE ADULT INTERVIEW (GIVEN BY CATI VARIABLE KIDCNT) INSTEAD.

ASCERTAIN IF THE HOUSEHOLD INCOME IS ...

- 1) AT OR BELOW 100% FPL,
- 2) ABOVE 100% FPL BUT AT OR BELOW 130% FPL.
- 3) ABOVE 130% FPL BUT AT OR BELOW 200% FPL
- 3) ABOVE 200% FPL BUT AT OR BELOW 300% FPL,
- 4) ABOVE 300% FPL, OR
- 5) UNKNOWN BECAUSE HOUSEHOLD INCOME WAS NOT GIVEN.

IF QA05_K9= -7 OR -8 (REF/DK) AND IF THE HOUSEHOLD'S 100% CUTOFF VALUE FALLS WITHIN A RESPONSE FROM QA05_K12, QA05_K14, OR QA05_K16 OR QA05_K11 = -7 OR QA05_K13 = -7 OR QA05_K15 = -7, ASK QA05_K19 USING POVRT100 (THE 100% FPL CUTOFF DISPLAY AMOUNT); ELSE GO TO PROGRAMMING NOTE QA05_K20

QA05_K19	I need to ask just one last, very specific question about income. 我需要再問最後一個有關收入的具體問題,然後我們就差不多結束了。
AK18A	Was your total annual household income before taxes less than or more than \${POVRT100}? 你家庭在扣稅前的年收入總數是少過還是超過 \${XX,XXX}?
ANIOA	EQUAL TO OR LESS
IF QA05_K9 : RESPONSE QA05_K15= - AMOUNT);	ING NOTE QA05_K20: = -7 OR -8 (REF/DK) AND IF THE HOUSEHOLD'S 200% CUTOFF VALUE FALLS WITHIN A FROM QA05_K12, QA05_K14, OR QA05_K16 OR IF QA05_K11 = -7 OR QA05_K13 = -7 OR -7, CONTINUE WITH QA05_K20 USING POVRT200 (200% POVERTY CUTOFF DISPLAY PROGRAMMING NOTE QA05_K22
QA05_K20	{I need to ask just one last, very specific question about income.} Was your total annual household income before taxes less than or more than \${POVRT200}? 我需要向您提出最後一個有關收入的非常具體的問題。 您的家庭扣稅前的全年總收入是超過{}美元還是不足{}美元?
AK18B	EQUAL TO OR LESS
IF QA05_K9 : RESPONSE	ING NOTE QA05_K21: = -7 OR -8 (REF/DK) AND IF THE HOUSEHOLD'S 300% CUTOFF VALUE FALLS WITHIN A FROM QA05_K12, QA05_K14, OR QA05_K16 OR IF QA05_K11 = -7 OR QA05_K13= -7 OR -7, CONTINUE WITH QA05_K21 USING POVRT300 (300% POVERTY CUTOFF DISPLAY QA05_K23
QA05_K21	{I need to ask just one last, very specific question about income.} Was your total annual household income before taxes less than or more than \${POVRT130}? 是不足還是超過 {XX,XXX} 美元?
AK18D	EQUAL TO OR LESS

PROGRAMMING NOTE QA05 K2	PR	OGR/	AMMING	NOTE	QA05	K22
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IF QA05_K9 = -7 OR -8 (REF/DK) AND IF THE HOUSEHOLD'S 300% CUTOFF VALUE FALLS WITHIN A RESPONSE FROM QA05_K12, QA05_K14, OR QA05_K16 OR IF QA05_K11 = -7 OR QA05_K13= -7 OR QA05_K15 = -7, CONTINUE WITH QA05_K22 USING POVRT300 (300% POVERTY CUTOFF DISPLAY AMOUNT);

ELSE GO T	O QA05_K23
QA05_K22	{I need to ask just one last, very specific question about income.} Was your total annual household income before taxes less than or more than \${POVRT300}? 是不足還是超過 {XX,XXX} 美元?
AK18C	EQUAL TO OR LESS
QA05_K23	Do you live in a house, a duplex, a building with 3 or more units, or in a mobile home? 您是住在獨立屋、雙連屋、三單元或多單元建築物還是活動房屋中?
AK23	[IF NEEDED, SAY: "A duplex is a building with 2 units".] [IF NEEDED, SAY: "雙連屋指有兩個單元的建築物。"] HOUSE
QA05_K24	Do you own or rent your home? 您是自己擁有住宅還是租用住宅?
AK25	OWN
QA05_K25	About how long have you lived at your current address? 以下是有關您的住宅和社區的問題。 您在目前的住址大約已經居住多久了?
AM14	(MONTHS/YEARS) REFUSED

QA05_K26	Do you feel safe in your neighborhood all of the time, most of the time, some of the time, or none of
	the time?

您在居住區附近是.....感到安全?

AK28

ALL OF THE TIME	
MOST OF THE TIME	2
SOME OF THE TIME	3
NONE OF THE TIME	4
REFUSED	7
DON'T KNOW	8

Section L- Public Program Participation

PROGRAMMING NOTE QA05 L1: IF HOUSEHOLD INCOME IS <= 300% FPL (POVERTY = 1 OR 2 OR 3) OR IF HOUSEHOLD POVERTY LEVEL CANNOT BE DETERMINED (POVERTY = 5) CONTINUE WITH SECTION L; ELSE GO TO PROGRAMMING NOTE QA05 M1 TANF/CalWORKS **QA05 L1** Are you now receiving TANF or CalWORKS? 您目前是否在領取 AFDC、TANF 或 CalWORKS? AL2 [IF NEEDED, SAY: "TANF means Temporary Assistance to Needy Families; and CalWORKS means California Work Opportunities and Responsibilities to Kids. Both replaced AFDC, California's old welfare entitlement program."] [IF NEEDED, SAY: "AFDC 是向需要贍養子女的家庭提供資助的計劃; TANF 指貧困家庭臨時協助計劃;CalWORKS 指加州工作機會與對兒童承擔責任的計劃"] YES......1 REFUSED.....-7 DON'T KNOW.....-8 PROGRAMMING NOTE QA05 L2: IF SAMPLED TEEN IN HOUSEHOLD, CONTINUE WITH QA05 L2 ELSE GO TO QA05 L3 QA05_L2 Is {TEEN} now receiving TANF, or CalWORKS? {}目前是否在領取 AFDC、TANF 或 CalWORKS? IAP1 [IF NEEDED, SAY: "TANF means Temporary Assistance to Needy Families; and CalWORKS means California Work Opportunities and Responsibilities to Kids. Both replaced AFDC, California's old welfare entitlement program."] [IF NEEDED, SAY: "AFDC 是向需要贍養子女的家庭提供資助的計劃; TANF 指貧困家庭臨時協助計劃: CalWORKS 指加州工作機會與對兒童承擔責任的計劃"] YES......1 NO......2 REFUSED.....-7 DON'T KNOW.....-8 **Food stamps** Are you receiving Food Stamp benefits? QA05_L3 您是否在領取糧食券? AL5 [IF NEEDED, SAY "You may receive benefits as stamps or through an EBT card." "EBT stands for Electronic Benefit Transfer card and is also known as the Golden State Advantage Card1 YES......1 NO......2 REFUSED.....-7 DON'T KNOW.....-8

IF ELIGIBLE T	NG NOTE QA05_L4: EEN IN HOUSEHOLD, CONTINUE WITH QA05_L4; PROGRAMMING NOTE QA05_L5
QA05_L4	Is {TEEN} receiving Food Stamp benefits? {}是否在領取糧食券?
IAP2	[IF NEEDED, SAY "You may receive benefits as stamps or through an EBT card." "EBT stands for Electronic Benefit Transfer card and is also known as the Golden State Advantage Card]
Supplemental	YES
QA05_L5	Are you receiving SSI? 您是否在領取 SSI?
AL6	[IF NEEDED, SAY: "SSI means Supplemental Security Income. This is different from Social Security".] [IF NEEDED, SAY: "SSI 指安全補助收入。"]
	YES
IF QA05_A5 = CONTINUE WI ELSE GO TO (
WIC QA05_L6	Are you on WIC? 您是否參加了 WIC?
AL7	[IF NEEDED, SAY: "WIC is the Supplemental Food Program for Women, Infants and Children."] [IF NEEDED, SAY: "WIC 指為婦女、嬰兒和兒童提供的補助食品計劃。"]
	YES

Assets				
QA05_L7	Not counting the value of any h	nouse or ca	ır vou mav own. wou	ld vou say that {vour/vour
_				d furniture together are worth more than
	\$5,000?	•	,	ŭ
	不把您擁有的任何房子或汽車計	计算在内。 (忽認為您的資產,即您	您所有的現金、儲蓄、
	投資和家俱的總值,有沒有超過			20/// / 3 · · · · · · · · · · · · · · · ·
A1.0	及其中外内17mg	<u> </u>	·u.	
AL9	VE0		4	
	YES			
	NO			
	REFUSED			
	DON'T KNOW	•••••	8	
DDOCDAMMI	NG NOTE QA05_L8:			
	= 1 (MARRIED TO SOMEONE II	M HH) DIS	DI AV "vou or vour s	nouse":
	= 2 (LIVING WITH PARTNER), [
ELSE DISPLA		JIGITEAT	you or your partiter,	
Alimony/child	•			
QA05_L8		r vour nartn	er/voul receive any	money <u>last month</u> for alimony, child
QAUJ_LU	support, or money from a gove			noney last month for all mony, child
	您 {或您的配偶} 上個月有沒有			弗 スカは荼弗式姿全?
	芯 {以心的配两} 工间月月没有1	促以所以返	四半人 計画 限	貝、丁女伏食貝以貝並?
AL15				
	YES		_	_
	NO			
				├_[GO TO QA05_L10]
	DON'T KNOW		8_	J
DD00D41414	NO NOTE CASE I S			
	NG NOTE QA05_L9:	05.10		
	1 (YES), CONTINUE WITH QAC		LIGE NOT MEMBER	OF HILL BIODI AV WAIL of coop of the
				R OF HH), DISPLAY "What was the
	that you received from all thes			
	= 1 (MARRIED) AND QA05_G1			
	Vhat was the combined total an	nount that	you and your {spo	use} received from all these
sources?"				
ELSE GO TO	PROGRAMMING NOTE QA05_	L10		
QA05_L9	What was the (sembined) total	l amount th	at valu fand valur ana	use} received from all these sources las
QAU5_L9		amount the	at you {and your spo	use} received from all triese sources <u>las</u>
	month?	== + >= , \(\ot	**************************************	H 4 4 0
	您 {和您的妻子/丈夫} 上個月從	所有這些來	源獲得的(總)收入	是多少?
AL16				
	[IF AMOUNT GREATER THAN	۱ \$999,995	, ENTER "999,995"]	
	\$ AM	OUNT	[000001-999995]	

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

	G NOTE QA05_L10:
IF QA05_A15 =	2 (LIVING WITH PARTNER), DISPLAY "you or your partner or both of you";
IF QA05_G10 =	1 (SPOUSE LIVES IN HH), DISPLAY "you or your spouse or both of you";
ELSE DISPLAY	' "you."
	•
QA05_L10	Did {you or your partner or both of you/you or your spouse or both of you/you} pay any alimony or child
<u></u>	support <u>last month?</u>
	您 {或您的配偶或你們兩人} 上個月有沒有支付任何瞻養費或子女扶養費?
	心 (以心的比例以你们所入) 工间户有及有关的任何幅度复现了么次度复。
AL17	
	YES, RESPONDENT PAID1
	YES, SPOUSE/PARTNER PAID2
	YES, BOTH PAID3
	NO4 [GO TO QA05_L12]
	REFUSED7 [GO TO QA05_L12]
	DON'T KNOW8 [GO TO QA05_L12]
	-0 [GO 10 QA03_L12]
QA05_L11	What was the total amount {you/your spouse/your partner/you both} paid in alimony or support last
	month?
	{您/您的配偶/您的伴侣/你們兩人} 上個月支付的瞻養費或子女扶養費總 數是多少?
AL18	
	[IF AMOUNT GREATER THAN \$999,995, ENTER "999,995"]
	AMOUNT
	REFUSED7
	DON'T KNOW8
PROGRAMMIN	IG NOTE QA05_L12:
	R OLDER AND QA05_A15 ≠ 1 (MARRIED) CONTINUE WITH QA05_L12 AND DISPLAY "you";
	ND QA05 A15 = 2 (LIVING W/ PARTNER) CONTINUE WITH QA05 L12 AND DISPLAY "you or your
partner";	WE GAOS_ATO = 2 (EIVING WITAKTINEK) OCIVINGE WITH GAOS_ETZ AND BIOLEAT YOUR OF YOUR
	DOODAMMING NOTE OAGE 144
	ROGRAMMING NOTE QA05_L14
	R AGE RANGE IS BETWEEN 50 AND 64 AND QA05_14 =1 (MARRIED) AND QA05_G10 = 1
•	NG IN SAME HH) CONTINUE WITH QA05_L12 AND DISPLAY "you or your spouse";
	/pension payments
QA05_L12	Did {you/you or your spouse/you or your partner} receive any Social Security or Pension payments las
	month?
A1 40 A	
AL18A	
	YES1_
	NO2
	REFUSED7 ├─ [GO TO PN QA05_L14]
	DON'T KNOW8

QA05_L13	What was the total amount received <u>last month</u> from Social Security and Pensions? 您上個月領取的社會安全金和養老金總額是多少?
AL18B	[IF AMOUNT GREATER THAN \$999,995, ENTER "999,995"]
	AMOUNT
	REFUSED7 DON'T KNOW8
PROGRAMM	ING NOTE QA05_L14:
IF ARMCAL =	1, GO TO QA05_M1
ELSE CONTIN	NUE WITH QA05_ L14
Reasons for	non-participation in Medi-Cal
QA05_L14	What is the one main reason why you are not enrolled in the Medi-Cal program?
_	您為什麼沒有加入加州醫療輔助計劃 (Medi-CAL)?請告訴我一個主要原因?

AL19

Section M - Food Insecurity and Hunger

PROGRAMMING NOTE QA05 M1

IF POVERTY < 3 (HH Income <= 200% FPL) OR 5 (HH INCOME NOT KNOWN), CONTINUE WITH QA05_M1; ELSE GO TO QA05_N1

Availability of food in household

QA05 M1

These next questions are about the food eaten in your household in the last 12 months and whether you were able to afford food.

以下是有關你們家在過去十二個月中所吃的食物以及是否有錢購買所需的食物的問題。

I'm going to read two statements that people have made about their food situation. For each, please tell me whether the statement describes something that was often true, sometimes true, or never true for you and your household in the last 12 months.

我馬上會讀出兩句話,這是一般人針對家庭的食物狀況所說的。請就每一句話告訴我,這是否經常符合有時符合還是從不符合**您和您的家庭在過去十二個月的情況**

The first statement is:

"The food that (I/we) bought just didn't last, and (I/we) didn't have money to get more."

Was that often true, sometimes true, or never true for you and your household in the last 12 months? 第一句話是: 「{}購買的食物總是不夠,{}沒有錢買更多的食物。」

這是經常符合、有時符合還是從不符合您和您的家庭在過去十二個月的情況?

AM1

OFTEN TRUE	1
SOMETIMES TRUE	2
NEVER TRUE	3
REFUSED	7
DON'T KNOW	8

QA05_M2

The second statement is:

"(I/We) couldn't afford to eat balanced meals."

Was that often true, sometimes true, or never true for you and your household in the last 12 months? 第二個句子是: 「{我/我們} 無法負擔營養均衡的飲食。」

這句話對您和您的家人在過去 **12** 個月的情況,是通常正確、有時正確、還是完全不正確?

AM2

OFTEN TRUE	1
SOMETIMES TRUE	2
NEVER TRUE	3
REFUSED	7
DON'T KNOW	8

QA05 M3

Please tell me yes or no. In the last 12 months, since {DATE 12 MONTHS AGO}, did you or other adults in your household ever cut the size of your meals or skip meals because there wasn't enough money for food?

請告訴我,在過去12個月中,從{}起,您或家中

的其他成年人有沒有因為沒有足夠的錢購買食物而減少食物量或減少用餐次數?

AM3

YES	1	
NO	2	[GO TO QA05 M5]
REFUSED		
DON'T KNOW	8	[GO TO QA05_M5]

Version 11.2 (Chinese)

December 20, 2012

AM5

CHIS 2003 Adult Survey

在過去 12 個月中, 從{ 1999 年 2 月 }起, 您有沒有因為買不起足夠

because you couldn't afford enough food?

的食物而挨餓?

Section N – Demographic Information Part III and Closing

County of residence

QA05_N1 Just a few final questions and then we are done.

To be sure we are covering the entire state, what county do you live in? 為了確保我們把全州都包括在研究範圍內,您住在哪個縣?

AH42

ALAMEDA	1
ALPINE	2
AMADOR	3
BUTTE	4
CALAVERAS	5
COLUSA	6
CONTRA COSTA	7
DEL NORTE	
EL DORADO	9
FRESNO	10
GLENN	11
HUMBOLDT	12
MPERIAL	13
NYO	
KERN	
KINGS	16
LAKE	17
LASSEN	18
LOS ANGELES	19
MADERA	20
MARIN	21
MARIPOSA	22
MENOCINO	23
MERCED	24
MODOC	
MONO	26
MONTEREY	27
NAPA	28
NEVADA	29
ORANGE	30
PLACER	31
PLUMAS	32
RIVERSIDE	
SACRAMENTO	
SAN BENITO	35
SAN BERNARDINO	36
SAN DIEGO	37
SAN FRANCISCO	38
SAN JOAQUIN	.39
SAN LUIS OBISPO	
SAN MATEO	41
SANTA BARBARA	
SANTA CLARA	
SANTA CRUZ	
SHASTA	
SIERRA	
SISKIYOU	
SOLANO	48

QA05_N1	CONTINUED	
	SONOMA49	
	STANISLAUS50	
	SUTTER51	
	TEHAMA52	
	TRINITY53	
	TULARE54	
	TUOLUMNE	
	VENTURA56 YOLO57	
	YUBA	
	REFUSED -7	
	DON'T KNOW8	
	NG NOTE QA05_N2:	
	.ETTER SENT, ASK QA05_N2; SS IS A P.O. BOX, GO TO QA05_N3	
ELSE GO TO		
	rmation, cross streets, zip code	
QA05_N2	Your phone number was randomly selected for this study by a	computer. We were able to match
	an address to your phone number to send a letter to your hom	
	study.	
	您的電話號碼透過電腦以隨機方式選出來參加本項研究。我們	
	已經根據您的電話號碼查到您的地址,以便給您寄一封信,解	
釋本項研究的目	的。	
	Do you now live at {R's address and street}?	
	您目前是否住在	
AO1		
	YES1	[GO TO QA05_N6]
	NO2	
	REFUSED7	
	DON'T KNOW8	
QA05_N3	What is your zip code?	
_	您的郵遞區號是?	
AM7		
	(ZIP CODE)	
	·	
	REFUSED7	
	DON'T KNOW8	

QA05_N4	To help us better understand the environment you live in and hell me the address where you live. This information will be kep 為了幫助我們更好地了解您的生活環境以及您的生活環境對您的的影響,您能夠告訴我您的居住地址嗎?我們不會將您的地址負或任何其他機構。與您的電話號碼一樣,我們會為您的地址仍	ot confidential. 內健康 產生 告訴研究人
AO2	(HOUSE ADDRESS NUMBER)	·· - ·
	(NAME OF STREET, VERIFY SPELLING)	[GO TO QA05_N6]
	NO	
	DON'T KNOW8	
QA05_N5	Can you tell me just the name of the street you live on? 您是否能夠只告訴我您居住的街道名稱?	
AM8	(NAME OF STREE	ET)
	REFUSED7 DON'T KNOW8	[GO TO CLOSE1] [GO TO CLOSE1]
QA05_N6	And what is the name of the street down the corner from you th 在您所住的街道轉角處與您所住的街道交叉的街道名稱是什麼?	
AM9	(NAME OF CROSS-STREET)	
	REFUSED7 DON'T KNOW8	
CLOSE1	Those are my final questions. I really appreciate your patience	Э.
Follow-up st QA05_N7	urvey permission Finally, do you think you would be willing to do a follow-up to tl 最後,我想問一下您是否願意今後參加本項研究的一次後續調 _至	
AM10	YES	[GO TO CLOSE2]

QA05_N8	In case we do call you back for another study, would you give me your full name so that we will know who to ask for?
	假如我們需要因另一項研究重新給您打電話,您願意告訴我們您的全名 以便我們與您聯絡嗎?
AO5	(First name) (Last name, confirm spelling)
	REFUSED7 [GO TO CLOSE2] DON'T KNOW8 [GO TO CLOSE2]
QA05_N9	Is there another number where we might be able to reach you if this one doesn't work? 是否有另一個號碼可以使用,以便我們在這個號碼無法接通時與您聯絡?
AO6	(read back to confirm alternate telephone number)
	REFUSED7 DON'T KNOW8
CLOSE2	Thank you, I really appreciate your time and cooperation. You have helped with a very importan health survey. Thank you and good-bye. 謝謝,我的問題完了。 非常感謝您花費的寶貴時間和給予的合作。您為一項非常重要的健康調查提供了幫助。 謝謝,再見!