

**CHIS 2020****Adolescent CATI Questionnaire**

(Interviewer-Administered)

Version 1.02 Chinese

July 26, 2021

(Adolescent Respondents Ages 12-17)

Collaborating Agencies:

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

Contact:**California Health Interview Survey**

UCLA Center for Health Policy Research

10960 Wilshire Blvd, Suite 1550 Los Angeles, CA 90024

Telephone: (866) 275-2447

Fax: (310) 794-2686

Web: www.chis.ucla.edu

Table of Contents

SECTION A: DEMOGRAPHICS PART I AND CIVIC ENGAGEMENT	4
Age	4
Gender Identity	5
School Attendance	6
Name of School	6
SECTION B: HEALTH STATUS AND HEALTH CONDITIONS	8
General Health	8
Height and Weight	8
Missed School Days	8
Asthma	9
SECTION C: DIET, NUTRITION, AND FOOD ENVIRONMENT	14
Dietary Intake	14
SECTION D: PHYSICAL ACTIVITY	15
Commute from School to Home	15
Park and Neighborhood Safety	15
Social Cohesion	16
Sedentary Time	18
SECTION E: Cigarette, Alcohol and Drug Use	19
Cigarette Use	19
E-Cigarette Use	20
Alcohol Use/Abuse	21
SECTION F: MENTAL HEALTH	26
K6 Mental Health Assessment	26
Repeated K6	27
Mental Health and Technology	30
SECTION G: SEXUAL BEHAVIORS	34
SECTION H: HEALTH CARE UTILIZATION AND ACCESS	39
Usual Source of Care	39
Visits to medical doctor	39
Emergency Room Visits	40
Personal Doctor	40
Care Coordination	41
Delays in Care	41
Dental Health	43
SECTION J: DEMOGRAPHIC INFORMATION PART II	45
Race/Ethnicity	45
Country of Birth	51
Language Spoken at Home	53
SECTION K: SUICIDE IDEATION AND ATTEMPTS	55

SECTION L: CIVIC ENGAGEMENT AND RESILIENCY	57
Voting Attitudes	58
Pre-Exposure Prophylaxis.....	58
HIV Testing.....	59
SECTION M: CLOSING	61
Follow Up and Close	61
SUICIDE RESOURCE	61

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 2020 Data Dictionaries for additional information on variables, the population universe answering a specific question, and data file content.

SECTION A: DEMOGRAPHICS PART I AND CIVIC ENGAGEMENT

PROGRAMMING NOTE 'QT2020_A1' :
SET TADATE = CURRENT DATE (YYYYMMDD)

'QT2020_A1' [TA1] - What is your date of birth?

您的出生日期是什麼？

_____ MONTH

- ☐ 1 JANUARY
- ☐ 2 FEBRUARY
- ☐ 3 MARCH
- ☐ 4 APRIL
- ☐ 5 MAY
- ☐ 6 JUNE
- ☐ 7 JULY
- ☐ 8 AUGUST
- ☐ 9 SEPTEMBER
- ☐ 10 OCTOBER
- ☐ 11 NOVEMBER
- ☐ 12 DECEMBER
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

_____ DAY

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

_____ YEAR

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

PROGRAMMING NOTE 'QT2020_A2' :
IF 'QT2020_A1' = -7 OR -8 (REF/DK), CONTINUE WITH 'QT2020_A2' ;
ELSE GO TO 'QT2020_A4'

'QT2020_A2' [TA1A] - What month and year were you born?

您在哪年哪月出生？

_____ MONTH

- ☐ 1 JANUARY
- ☐ 2 FEBRUARY
- ☐ 3 MARCH
- ☐ 4 APRIL
- ☐ 5 MAY
- ☐ 6 JUNE
- ☐ 7 JULY
- ☐ 8 AUGUST
- ☐ 9 SEPTEMBER
- ☐ 10 OCTOBER
- ☐ 11 NOVEMBER
- ☐ 12 DECEMBER
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

_____ YEAR

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

PROGRAMMING NOTE 'QT2020_A3' :
IF 'QT2020_A2' = -7 OR -8 (REF/DK), CONTINUE WITH 'QT2020_A3' ;
ELSE GO TO 'QT2020_A4'

'QT2020_A3' [TA2] - How old are you?

請問你今年多大歲數？

_____ YEARS OF AGE [SR: 12-17]

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

POST-NOTE 'QT2020_A3' :
IF 'QT2020_A1' AND 'QT2020_A3' ARE NOT KNOWN, USE CHILD ROSTER AGE (ENUM.AGE);
IF TEENAGE is less than 12 OR TEENAGE greater than 17, THEN TERMINATE INTERVIEW AND CODE
INELIGIBLE (IT)

'QT2020_A4' [TA20] - On your original birth certificate, was your sex assigned as male or female?

在您的原始出生證明上，您的性別是男性、女性、還是跨性別？

- ☐ 01 MALE
- ☐ 02 FEMALE
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

'QT2020_A5' [TA21] - Do you currently describe yourself as male, female, or transgender?

目前您認為自己是男性，女性，還是跨性別者？

- ☐ 01 MALE
- ☐ 02 FEMALE
- ☐ 03 TRANSGENDER
- ☐ 04 NONE OF THESE
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

If = 1, 2, 3, -7, -8 goto 'QT2020_A7'

PROGRAMMING NOTE 'QT2020_A6': IF 'QT2020_A5' = 4 THEN CONTINUE WITH 'QT2020_A6'; ELSE SKIP TO 'QT2020_A7'

'QT2020_A6' [TA22] - What is your current gender identity?

目前您認為自己是什麼性別？

- ☐ -1 SPECIFY: (_____)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

'QT2020_A7' [TA4] - Did you attend school last week?

您上週上學了嗎？

- ☐ 1 YES
- ☐ 2 NO
- ☐ 3 ON VACATION
- ☐ 4 HOME SCHOOLED
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

If = 1, goto 'QT2020_A9'

'QT2020_A8' [TA4C] - Did you attend school during the last school year?

您上個學年上學了嗎？

- ☐ 1 YES
- ☐ 2 NO
- ☐ 3 HOME SCHOOLED LAST YEAR
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

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

'QT2020_A9' [TA4B] - What is the name of the school you go to or last attended?

您上的學校或最後上的學校名稱是什麼？

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

[IF NEEDED, ASK: 「這是一所小學、中學、初中還是高中？」]

[INTERVIEWER NOTE: RECORD VERBATIM]

_____ NAME OF SCHOOL

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

_____ TYPE OF SCHOOL

- ☐ 0 TEEN NOT IN SCHOOL
- ☐ 1 ELEMENTARY
- ☐ 2 INTERMEDIATE
- ☐ 3 JUNIOR HIGH
- ☐ 4 MIDDLE SCHOOL
- ☐ 5 HIGH SCHOOL
- ☐ 6 SENIOR HIGH SCHOOL
- ☐ 7 CONTINUATION
- ☐ 8 CHARTER SCHOOL
- ☐ 91 OTHER (SPECIFY: _____)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

SECTION B: HEALTH STATUS AND HEALTH CONDITIONS

‘QT2020_B1’ [TB1] - Now I'm going to ask about your health.

In general, would you say your health is excellent, very good, good, fair or poor?

現在，我想詢問你的健康狀況。總體而言，你認為你的健康狀況是極好、很好、較好、一般還是較差？

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

‘QT2020_B2’ [TB2] - About how tall are you without shoes?

你不穿鞋大約有多高？

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

[IF NEEDED, SAY: 「請盡量估計體重。」]

- _____ FEET
- _____ INCHES
- _____ METERS
- _____ CENTIMETERS
- ☐ 1 FEET, INCHES
- ☐ 2 CENTIMETERS
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

‘QT2020_B3’ [TB3] - About how much do you weigh without shoes?

你不穿鞋大約有多重？

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

[IF NEEDED, SAY: 「請盡量估計體重。」]

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

PROGRAMMING NOTE 'QT2020_B4' :
IF 'QT2020_A7' = 1 (ATTENDED SCHOOL LAST WEEK) OR 4 (HOME SCHOOLED), CONTINUE WITH 'QT2020_B4' ;
ELSE GO TO 'QT2020_B5'

'QT2020_B4' [TB4] - During the last four school weeks, how many days of school did you miss because of a health problem?

在最後四週的上學期間，你因健康問題缺了幾天課？

[INTERVIEWER NOTE: INCLUDE HOME SCHOOLERS]

_____ DAYS_[HR: 0-20]

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

'QT2020_B5' [TB5] - Has a doctor ever told you or your parents that you have asthma?

是否曾經有醫生告訴你或你的父母你患有哮喘病？

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

If = 2, -7, -8, goto 'QT2020_C1'

'QT2020_B6' [TB17] - Do you still have asthma?

你是否依然患有哮喘病？

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

'QT2020_B7' [TB18] - During the past 12 months, have you had an episode of asthma or an asthma attack?

在過去十二個月中，你是否曾經有過哮喘發作？

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

PROGRAMMING NOTE 'QT2020_B8' :

**IF 'QT2020_B6' = 1 (YES, STILL HAVE ASTHMA) OR 'QT2020_B7' = 1 (YES, EPISODE IN PAST 12 MONTHS) CONTINUE WITH 'QT2020_B8';
ELSE GO TO 'QT2020_B11'**

'QT2020_B8' [TB19] - During the past 12 months, have you had to visit a hospital emergency room because of your asthma?

在過去十二個月中，你是否曾經因你的哮喘必須前往醫院急診室就診？

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

If = 2, -7, -8, goto "QT2020_B11"

'QT2020_B9' [TB31] - Did you visit a hospital emergency room for your asthma because you were unable to see your doctor?

你是否曾經由於無法約見你的醫生因哮喘病前往醫院急診室就診？

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

- ☐ 1 YES
- ☐ 2 NO
- ☐ 3 DOESN'T HAVE A DOCTOR OR ANY OTHER TYPE OF HEALTHCARE PROVIDER
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

'QT2020_B10' [TF4A] - During the past 12 months, were you admitted to the hospital overnight or longer for your asthma?

在過去十二個月中，您是否因哮喘病曾經住院一天或更長時間？

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

'QT2020_B11' [TB6] - Are you now taking a daily medication to control your asthma that was prescribed or given to you by a doctor?

你目前是否每天服用控制哮喘的醫生處方藥物或醫生給你的藥物？

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

[IF NEEDED, SAY: '包括口服藥和吸入劑，但不是用於快速緩解症狀的吸入劑。']

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

PROGRAMMING NOTE 'QT2020_B12' :

IF 'QT2020_B6' = 1 (YES, STILL HAVE ASTHMA) OR 'QT2020_B7' = 1 (YES, EPISODE IN PAST 12 MONTHS) GO TO 'QT2020_B16' ;

ELSE CONTINUE WITH 'QT2020_B12'

'QT2020_B12' [TB27] - During the past 12 months, how often have you had asthma symptoms such as coughing, wheezing, shortness of breath, chest tightness, or phlegm? Would you say...

在過去12個月中，你出現哮喘症狀的頻率有多高？例如，咳嗽、喘鳴、呼吸急促、胸悶或黏痰。你認為是.....

- ☐ 1 Not at all
- ☐ 2 Less than every month
- ☐ 3 Every month
- ☐ 4 Every week
- ☐ 5 Every day
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

PROGRAMMING NOTE 'QT2020_B13' :

IF 'QT2020_B6' = 1 (YES, STILL HAVE ASTHMA) OR 'QT2020_B7' = 1 (YES, EPISODE IN PAST 12 MONTHS) GO TO 'QT2020_B16' ;

ELSE CONTINUE WITH 'QT2020_B13'

'QT2020_B13' [TB28] - During the past 12 months, have you had to visit a hospital emergency room because of your asthma?

在過去12個月中，你是否曾經由於你的哮喘病必須前往醫院急診室就診？

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

If = 2, -7, -8, goto 'QT2020_B16'

'QT2020_B14' [TB34] - Did you visit a hospital emergency room for your asthma because you were unable to see your doctor?

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

你是否曾經由於無法約見自己的醫生因哮喘病前往醫院急診室就診？

- ☐ 1 YES
- ☐ 2 NO
- ☐ 3 DOESN'T HAVE A DOCTOR
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

'QT2020_B15' [TB29] - During the past 12 months, were you admitted to the hospital overnight or longer for your asthma?

在過去十二個月中，你由於哮喘缺課多少天？

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

'QT2020_B16' [TB24] - During the past 12 months, how many days of school did you miss due to asthma?

在過去十二個月中，你由於哮喘缺課多少天？

[INTERVIEWER NOTE: INCLUDE HOME SCHOOLERS]

_____ DAYS_[HR: 0-365]

- ☐ 996 NOT GOING TO SCHOOL
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

'QT2020_B17' [TB20] - Have your doctors or other medical providers worked with you to develop a plan so that you know how to take care of your asthma?

‘你的醫生或其他醫療服務提供者是否曾經與你一起制定一項計劃，以便你瞭解如何控制哮喘？

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

If = 2, -7, -8, goto 'QT2020_C1'

‘QT2020_B18’ [TB32] - Do you have a written or printed copy of this plan?

你是否有一份該項計劃的書面或列印副本？

[IF NEEDED, SAY: ‘This can be an electronic or hard copy.’]

[IF NEEDED, SAY: 「可以是電子版本或打印件。」]

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

‘QT2020_B19’ [TB33] - How confident are you that you can control and manage your asthma? Would you say you are...

您對控制與管理自己的哮喘信心有多高？您認為是.....

- ☐ 1 Very confident,
- ☐ 1 很有信心,
- ☐ 2 Somewhat confident,
- ☐ 2 較有信心,
- ☐ 3 Not too confident, or
- ☐ 3 不太有信心, 還是
- ☐ 4 Not at all confident?
- ☐ 4 毫無信心？
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

SECTION C: DIET, NUTRITION, AND FOOD ENVIRONMENT

'QT2020_C1' [TE4] - Now, I'm going to ask about the foods you ate yesterday, including both meals and snacks.

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

現在，我要提出有關你昨天吃的食物的問題，包括正餐和零食。你昨天吃了幾份水果，例如蘋果或香蕉？

[IF NEEDED, SAY: 'A serving is whatever it means to you.']

[IF NEEDED, SAY: 「一份是你自己理解的數量。」]

_____ SERVINGS [HR: 0-20; SR: 0-9]

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

'QT2020_C2' [TE6] - [Yesterday,] how many servings of vegetables like green salad, green beans, or potatoes did you have? Do not include fried potatoes.

[昨天,]你吃了幾份蔬菜，例如青菜沙拉、四季豆或馬鈴薯？請不要包括油炸馬鈴薯。

_____ SERVINGS [HR: 0-20; SR: 0-4]

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

'QT2020_C3' [TC28A] - [Yesterday,] how many glasses or cans of soda that contain sugar, such as Coke, did you drink?

Do not include diet soda.

[昨天,]你喝了多少杯或多少罐含糖汽水，例如可樂？請不要包括低卡節食汽水。

[IF NEEDED, SAY: 'Do not include canned or bottled juices or teas.']

[IF NEEDED, SAY: '請不要包括罐裝或瓶裝果汁或茶。']

_____ GLASSES OR CANS [HR 0-15;SR 0-7]

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

SECTION D: PHYSICAL ACTIVITY

PROGRAMMING NOTE 'QT2020_D1' :

**IF 'QT2020_A7' = 4 OR 'QT2020_A8' = 3 (HOME SCHOOLED) OR 'QT2020_A8' = 2 (NO, NOT IN SCHOOL LAST YEAR), GO TO 'QT2020_D3' ;IF 'QT2020_A7' = 2 (NO, NOT IN SCHOOL LAST WEEK) OR 3 (ON VACATION), CONTINUE WITH 'QT2020_D1' AND DISPLAY 'During the school year, on how many days during a typical week do';
ELSE CONTINUE WITH 'QT2020_D1' AND DISPLAY 'How many days in the past week did'**

'QT2020_D1' [TD27] - {How many days in the past week did/During the school year, on how many days during a typical week do} you walk home from school?

在上一週中/在學年中，在普通的一週你有幾天從學校走路回家？

[IF CHILD DOES NOT GO DIRECTLY HOME FROM SCHOOL, INCLUDE # OF DAYS WALKED, ETC. TO CHILDCARE, RELATIVE'S HOME, AFTER-SCHOOL PROGRAM, ETC.]

_____ DAYS

- ☐ -7 REFUSED
☐ -8 DON'T KNOW

PROGRAMMING NOTE 'QT2020_D2' :

**IF 'QT2020_A7' = 2 (NO, NOT IN SCHOOL LAST WEEK) OR 3 (ON VACATION), CONTINUE WITH 'QT2020_D2' AND DISPLAY 'During the school year, on how many days during a typical week do';
ELSE CONTINUE WITH 'QT2020_D2' AND DISPLAY 'How many days in the past week did'**

'QT2020_D2' [TD30] - {How many days in the past week did/During the school year, on how many days during a typical week do} you bicycle or skateboard home from school?

在上一週有幾天/在學年中，在普通的一週你有幾天從學校騎自行車或滑滑板回家？

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

_____ DAYS

- ☐ -7 REFUSED
☐ -8 DON'T KNOW

‘QT2020_D3’ [TD34] - People in my neighborhood are willing to help each other.

‘請告訴我您對以下陳述的贊成程度。您是極為贊成、贊成、不贊成還是極不贊成:我所在社區的居民很願意互相幫助

[IF NEEDED, SAY: ‘Do you strongly agree, agree, disagree, or strongly disagree?’]

[IF NEEDED, SAY: 「你是極為贊成、贊成、不贊成還是極不贊成? 」]

- ☐ 1 STRONGLY AGREE
- ☐ 2 AGREE
- ☐ 3 DISAGREE
- ☐ 4 STRONGLY DISAGREE
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

‘QT2020_D4’ [TD45] - People in this neighborhood generally do NOT get along with each other.

本社區的人通常無法和睦相處。

[IF NEEDED, SAY: ‘Do you strongly agree, agree, disagree, or strongly disagree?’]

[IF NEEDED, SAY: 「你是極為贊成、贊成、不贊成還是極不贊成? 」]

[INTERVIEWER NOTE: DO NOT PROBE A ‘DON'T KNOW’ RESPONSE]

- ☐ 1 STRONGLY AGREE
- ☐ 2 AGREE
- ☐ 3 DISAGREE
- ☐ 4 STRONGLY DISAGREE
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

‘QT2020_D5’ [TD36] - People in this neighborhood can be trusted.

可以信任本社區的人。

[IF NEEDED, SAY: ‘Do you strongly agree, agree, disagree, or strongly disagree?’]

[IF NEEDED, SAY: 「你是極為贊成、贊成、不贊成還是極不贊成? 」]

- ☐ 1 STRONGLY AGREE
- ☐ 2 AGREE
- ☐ 3 DISAGREE
- ☐ 4 STRONGLY DISAGREE
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

‘QT2020_D6’ [TL25] - I care deeply about issues in my community or society.

我非常關心發生在我的社區或社會中的問題。

[IF NEEDED, SAY: ‘Do you strongly agree, agree, disagree, or strongly disagree?']

[IF NEEDED, SAY: 「你是極為贊成、贊成、不贊成還是極不贊成? 」]

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

‘QT2020_D7’ [TL27] - I believe that I can make a difference in my community.

我相信我可以對改善我的社區有所貢獻

[IF NEEDED, SAY: ‘Do you strongly agree, agree, disagree, or strongly disagree?']

[IF NEEDED, SAY: 「你是極為贊成、贊成、不贊成還是極不贊成? 」]

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

‘QT2020_D8’ [TL28] - I feel connected to others who are working to make a difference in my community.

我覺得我與那些努力改善變我社區的人相關連

[IF NEEDED, SAY: ‘Do you strongly agree, agree, disagree, or strongly disagree?']

[IF NEEDED, SAY: 「你是極為贊成、贊成、不贊成還是極不贊成? 」]

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

‘QT2020_D9’ [TE64] - Do you feel safe in your neighborhood...

您在居住區附近感到安全.....

- ☐ 1 All of the time
- ☐ 1 總是
- ☐ 2 Most of the time
- ☐ 2 大部分時候
- ☐ 3 Some of the time
- ☐ 3 有些時候
- ☐ 4 A little of the time
- ☐ 4 少量時候
- ☐ 5 None of the time
- ☐ 5 從未
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

‘QT2020_D10’ [TD39] - The next question is about the time you spend mostly sitting when you are not in school or doing homework.

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

接下來的問題是有關當你不在上學或不在做家庭作業時，大部分坐在那裡的時間。在週末，你通常在一天內坐在那裡看電視、玩電子遊戲、與朋友聊天或做其他坐著的活動的時間有多長？

_____HOUR(S)

_____MINUTE(S)

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

SECTION E: Cigarette, Alcohol and Drug Use

'QT2020_E1' [TC38] - Now I'm going to ask about smoking. Have you ever smoked cigarettes, even 1 or 2 puffs?

現在，我想向你提出有關抽煙的問題。你是否曾經抽過煙，就算只有抽一兩口？

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

If = 2, -7, -8, goto 'E-cigarette Intro Teen'

'QT2020_E2' [TE81] - How old were you when you first tried cigarette smoking, even one or two puffs?

你是在什麼年齡第一次嘗試抽煙，哪怕只吸一兩口？

_____Age

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

'QT2020_E3' [TE19] - In the past 30 days, on how many days did you smoke cigarettes?

在過去 30 天中，你有多少天抽煙？

- ☐ 0 NONE
- ☐ 1 1 OR 2 DAYS
- ☐ 2 3-5 DAYS
- ☐ 3 6-9 DAYS
- ☐ 4 10-19 DAYS
- ☐ 5 20-29 DAYS
- ☐ 6 30 DAYS
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

If = 0, goto 'E-cigarette Intro Teen'

'QT2020_E4' [TE20] - In the past 30 days, when you smoked, about how many cigarettes did you smoke in a typical day?

在過去30天內你抽煙的日子裡，你每天大約抽多少枝煙？

[IF NEEDED, SAY: 'On average.']

[IF NEEDED, SAY: '平均數字。']

[IF NEEDED, SAY: 'On the days you smoked.']

[IF NEEDED, SAY: '在你抽煙的日子裡。']

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

_____NUMBER OF CIGARETTES

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

'E-CIGARETTE INTRO TEEN' [E-CIGARETTE INTRO TEEN] - The next questions are about electronic cigarettes and other electronic vaping products. These products typically contain nicotine, flavors, and other ingredients. They may also be called e-cigs, vape pens, pod mods, hookah pens or e-hookah. Popular brands include JUUL, Blu, NJOY, Suorin, and Vuse.

接下來的問題是關於電子煙和其他電子煙產品。這些產品通常含有尼古丁、香精、和其他成分。它們也可能被稱為電子煙（e-cigs）、筆式電子煙（vape pens）、pod mods、水煙筆（hookah pens）、或電子水煙袋（e-hookah）。熱門品牌包括 JUUL、Blu、NJOY、／suorin 和 ／vuse。

Do not include products used only for marijuana.

不包括僅用於大麻的產品。

'QT2020_E5' [TE79] - Have you ever used an e-cigarette or other electronic vaping product, even just once in your lifetime?

你是否曾經使用過電子煙和其他電子煙產品，即使一生只用過一次？

Please include using JUUL or JUULing in your answer.

請在答案中包括 JUUL 或 JUULing。

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

If = 2, -7, -8, goto 'QT2020_E10'

'QT2020_E6' [TE82] - How old were you when you first tried an e-cigarette, even one or two times?

你是在什麼年齡第一次嘗試吸電子煙，哪怕只吸一兩口？

_____ Age

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

'QT2020_E7' [TE80] - In the past 30 days, on how many days did you use an e-cigarette or other electronic vaping product?

在過去 30 天裡，你曾有多少天使用電子煙和其他電子煙產品？

_____ Number of days [HR: 0 - 30]

If=0,-7,-8 goto 'QT2020_E9'

'QT2020_E8' [TE68] - What are your reasons for using electronic cigarettes?

你是因為什麼原因抽電子煙？

[CODE ALL THAT APPLY]

- ☐ 1 TO QUIT SMOKING
- ☐ 2 TO REPLACE SMOKING
- ☐ 3 TO CUT DOWN OR REDUCE SMOKING
- ☐ 4 TO USE IN PLACES WHERE SMOKING NOT IS NOT ALLOWED
- ☐ 5 TO JUST TRY IT OUT OF CURIOSITY
- ☐ 6 TO AVOID THE LINGERING ODOR OF CIGARETTES
- ☐ 7 TO HELP ME CONCENTRATE/STAY ALERT
- ☐ 8 BECAUSE THEY COME IN MANY FLAVORS
- ☐ 9 BECAUSE THEY ARE LESS EXPENSIVE
- ☐ 10 BECAUSE THEY ARE HEALTHIER THAN CIGARETTES
- ☐ 11 FOR ENJOYMENT OR SOCIAL REASONS
- ☐ 12 TO REDUCE STRESS, ANXIETY OR PAIN
- ☐ 91 OTHER (SPECIFY: _____)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

PROGRAMMING NOTE 'QT2020_E9': IF ['QT2020_E1'=1 AND 'QT2020_E5'=1] AND 'QT2020_E2'='QT2020_E6'
OR IF 'QT2020_E2'=-7,-8 OR IF 'QT2020_E6'=-7,8 CONTINUE WITH 'QT2020_E9';
ELSE GO TO 'QT2020_E10'

'QT2020_E9' [TE83] - Earlier you mentioned that you have tried both cigarettes and e-cigarettes. Which one did you try first?

您之前提到過曾嘗試過香菸以及電子菸。您最先嘗試的是哪一種？

- ☐ 1 Cigarettes
- ☐ 1 支香煙
- ☐ 2 E-cigarettes
- ☐ 2 種電子煙
- ☐ 3 Tried at the same time
- ☐ 3 同時嘗試
- ☐ 4 REFUSED
- ☐ 5 DON'T KNOW

'QT2020_E10' [TE22] - Did you ever have more than a few sips of any alcoholic drink, like beer, wine, mixed drinks, or liquor?

你是否喝過超過幾口的任何含酒精的飲料，例如啤酒、葡萄酒、混合飲料或烈酒？

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

If = 2, -7, -8, goto 'QT2020_E13'

PROGRAMMING NOTE 'QT2020_E11' :
IF 'QT2020_A4' = 1 (MALE AT BIRTH) GO TO 'QT2020_E12' ;
ELSE CONTINUE WITH 'QT2020_E11'

'QT2020_E11' [TE24A] - How many days in the past 30 days did you have four or more drinks in a row, that is within a couple of hours?

在過去30天內，你有多少天在兩三個小時內連續喝四份或以上飲料？

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

PROGRAMMING NOTE 'QT2020_E12' :
IF 'QT2020_A4' = 2 (FEMALE AT BIRTH), GO TO 'QT2020_E13';
ELSE CONTINUE WITH 'QT2020_E12'

'QT2020_E12' [TE24] - How many days in the past 30 days did you have five or more drinks in a row, that is within a couple of hours?

在過去三十天中，你是否曾經連續（即在兩個小時內）飲酒五份或五份以上？

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

PROGRAMMING NOTE 'QT2020_E13':
IF SC24X = 3 OR 5 (NO QUESTIONS ON DRUGS) :
OR IF SC23XXX = 1 SKIP TO 'QT2020_F1'
ELSE CONTINUE TO 'QT2020_E13'

'QT2020_E13' [TE69] - The next questions are about marijuana also called cannabis or weed, hashish, and other products containing THC. There are many methods for consuming these products, such as smoking, vaporizing, dabbing, eating, or drinking.

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

「接下來的問題是關於大麻，又稱大麻或大麻草、哈希什及其他含有四氫大麻酚的產品。使用這些產品有多種方法，包括吸食、蒸氣抽吸、塗抹、進食或進飲。您曾否使用（即使只是一次）大麻或哈希什？」

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

[IF NEEDED: 四氫大麻酚（THC）是大麻中的主要成份。]

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

If = 2, -7, -8, goto 'SECTION F-MENTAL HEALTH'

'QT2020_E14' [TE70] - During the past 30 days, on how many days did you use marijuana, hashish, or another THC product?

過去 30 天內，您有多少天使用過大麻、哈希什或其他含有四氫大麻酚的產品？

- ☐ 1 0 DAYS
- ☐ 2 1-2 DAYS
- ☐ 3 3-5 DAYS
- ☐ 4 6-9 DAYS
- ☐ 5 10-19 DAYS
- ☐ 6 20-29 DAYS
- ☐ 7 30 DAYS OR MORE
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

If = 1, goto 'SECTION F- MENTAL HEALTH'

'QT2020_E15' [TE71] - How often have you used tobacco and marijuana at the same time? Would you say...

您多常在吸煙時亦有使用大麻？您認為.....

- ☐ 1 Usually
- ☐ 1 通常
- ☐ 2 Sometimes
- ☐ 2 有時
- ☐ 3 Never
- ☐ 3 從來沒有
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

‘QT2020_E16’ [TE72] - During the past 30 days, how did you use marijuana? Did you...

Smoke it in a joint, bong, or pipe?

過去 30 天內，您如何使用大麻？您會否.....用煙卷、水煙壺或煙斗吸食？

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

‘QT2020_E17’ [TE78] - During the past 30 days, how did you use marijuana? Did you...

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

過去 30 天內，您如何使用大麻？您會否..... 吸食內含部分或全部大麻的雪茄（有時稱為小雪茄煙）？

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

‘QT2020_E18’ [TE73] - [During the past 30 days, how did you use marijuana?] Did you...

Eat it?

〔過去 30 天內，您如何使用大麻？〕 您有否.....進食大麻？

[IF NEEDED SAY: For example, in brownies, cakes, cookies or candy]

[IF NEEDED SAY: 例如布朗尼、蛋糕、曲奇/餅乾或糖果形式]

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

‘QT2020_E19’ [TE74] - [During the past 30 days, how did you use marijuana?] Did you...

Drink it?

〔過去 30 天內，您如何使用大麻？〕 您有否.....進飲大麻？

[IF NEEDED SAY: For example, in tea, cola, alcohol or other drinks]

[IF NEEDED SAY: 例如茶、可樂、酒或其他飲品形式]

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

‘QT2020_E20’ [TE75] - [During the past 30 days, how did you use marijuana?] Did you...

Vaporize it?

[過去 30 天內，您如何使用大麻？] 您有否.....蒸氣抽吸大麻？

[IF NEEDED SAY: For example, in an e-cigarette type vaporizer]

[IF NEEDED SAY: 例如電子煙式蒸發器]

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

‘QT2020_E21’ [TE76] - [During the past 30 days, how did you use marijuana?] Did you...

Dab it?

[過去 30 天內，您如何使用大麻？] 您有否.....塗抹大麻

[IF NEEDED SAY: For example, using butane hash oil, wax or concentrates]

[IF NEEDED SAY: 例如塗抹丁烷大麻油、蠟或精華]

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

‘QT2020_E22’ [TE77] - [During the past 30 days, how did you use marijuana?] Did you...

Use it some other way?

[過去 30 天內，您如何使用大麻？] 您有否.....以其他方式使用大麻？

- ☐ 1 YES (SPECIFY_____)
- ☐ 2 NO
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

SECTION F: MENTAL HEALTH

‘QT2020_F1’ [TG11] - The next questions are about how you have been feeling during the past 30 days.

以下是有關你在過去三十天內的感覺的問題。

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？

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

‘QT2020_F2’ [TG12] - During the past 30 days, about how often did you feel hopeless—all of the time, most of the time, some of the time, a little of the time, or none of the time?

在過去30天內，您大約每隔多久會感到毫無希望所有的時間、大多數時間、部份時間、較少的時間還是從來沒有？

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

‘QT2020_F3’ [TG13] - During the past 30 days, about how often did you feel restless or fidgety?

在過去三十天內，你大約每隔多久會感到不安或煩躁？

[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: ‘所有的時間、大多數時間、部份時間、較少的時間還是從來沒有？’]

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

‘QT2020_F4’ [TG14] - How often did you feel so depressed that nothing could cheer you up?

你每隔多久會感到非常憂鬱，以致任何事都無法讓你高興起來？

[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: ‘所有的時間、大多數時間、部份時間、較少的時間還是從來沒有？’]

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

‘QT2020_F5’ [TG15] - During the past 30 days, about how often did you feel that everything was an effort?

在過去三十天內，你每隔多久會感到做每件事都非常吃力？

[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: ‘所有的時間、大多數時間、部份時間、較少的時間還是從來沒有？’]

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

‘QT2020_F6’ [TG16] - During the past 30 days, about how often did you feel worthless?

在過去三十天內，你每隔多久會感到自己毫無價值？

[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: ‘所有的時間、大多數時間、部份時間、較少的時間還是從來沒有？’]

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

'QT2020_F7' [TF30] - Was there ever a month in the past 12 months when these feelings occurred more often than they did in the past 30 days?

在過去十二個月中，是否曾經有任何一個月這種感覺出現的頻率比過去30天更頻繁？

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

If = 2, -7, -8, goto 'QT2020_F14'

PROGRAMMING NOTE 'QT2020_F8' :
IF 'QT2020_F7' = 1 THEN CONTINUE WITH 'QT2020_F8';
ELSE SKIP TO 'QT2020_F14'

'QT2020_F8' [TF31] - The next questions are about the one month in the past 12 months when you were at your worst emotionally.

以下是有關在過去十二個月中你的精神狀態最差的一個月的問題。

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

在那個月中，你感到精神緊張的頻率有多高？是所有的時間、大多數時間、某些時間、少數時間還是根本沒有？

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

'QT2020_F9' [TF32] - During that same month, how often did you feel hopeless- all of the time, most, some, a little, or none of the time?

在那個月中，您感到毫無希望的頻率有多高？是所有的時間、大多數時間、某些時間、少數時間還是根本沒有？

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

‘QT2020_F10’ [TF33] - How often did you feel restless or fidgety?

你感到不安或煩躁的頻率有多高？

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

[IF NEEDED, SAY: 「所有的時間、大多數時間、部份時間、較少的時間還是從來沒有？」]

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

‘QT2020_F11’ [TF34] - How often did you feel so depressed that nothing could cheer you up?

您感到非常壓抑以致任何事情都無法讓您高興起來的頻率有多高？

[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: 「所有的時間、大多數時間、部份時間、較少的時間還是從來沒有？」]

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

‘QT2020_F12’ [TF35] - How often did you feel that everything was an effort?

您感到做每件事都很費力的頻率有多高？

[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: 「所有的時間、大多數時間、部份時間、較少的時間還是從來沒有？」]

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

'QT2020_F13' [TF36] - How often did you feel worthless?

您感到自己毫無用處的頻率有多高？

[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: 「所有的時間、大多數時間、部份時間、較少的時間還是從來沒有？」]

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

'QT2020_F14' [TI11] - In the past 12 months did you think you needed help for emotional or mental health problems, such as feeling sad, anxious, or nervous?

在過去十二個月中，你是否認為你需要接受情感或精神健康方面的幫助？例如，感到悲哀、焦慮或不安。

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

'QT2020_F15' [TF11] - In the past 12 months, have you received any psychological or emotional counseling?

在過去12個月中，你有沒有接受過任何心理或情緒方面的諮詢？

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

PROGRAMMING NOTE 'QT2020_F16' :
IF 'QT2020_E10' = 1 (MORE THAN SIP OF ALCOHOL) OR 'QT2020_E13' =1 (EVER USED MARIJUANA)
CONTINUE WITH 'QT2020_F16' ;
ELSE GO TO TE38

'QT2020_F16' [TI13] - In the past 12 months, did you receive any professional help for your use of alcohol or drugs?

在過去十二個月中，你是否曾經接受任何專業人員提供的戒酒或戒毒幫助？

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

‘QT2020_F17’ [TF38] - The next questions are about your use of technology. People may use the internet for streaming videos/music, playing games, checking social media, using apps, browsing the web, etc, on a computer or on a phone or mobile device. On a typical day, how often do you use the internet?

接下來是關於您利用科技的問題。一般人可以在電腦或電話或行動裝置上利用網際網路來串流傳輸視訊／音樂、玩遊戲、查看社群媒體、使用應用程式、或瀏覽網頁等。在平常的一天，您使用網際網路的頻率為多少？

[IF NEEDED: ‘Use the internet either on a computer or mobile device’.]

[IF NEEDED: 「在電腦或行動裝置上使用網際網路」。]

- ☐ 01 Almost constantly
- ☐ 01 幾乎不間斷,
- ☐ 02 Many times a day,
- ☐ 02 每日許多次,
- ☐ 03 A few times a day, or
- ☐ 03 每日幾次
- ☐ 04 Less than a few times a day
- ☐ 04 每天不到幾次
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

‘QT2020_F18’ [TF39] - On a typical day, how often do you use a computer or mobile device for social media?

在平常的一天裡，你使用電腦或行動裝置上社群媒體的頻率為何？

[IF NEEDED: ‘Social media may include Facebook, Instagram, Twitter, Snapchat, YouTube, etc.’]

[IF NEEDED: ‘社群媒體可能包括 Facebook、Instagram、Twitter、Snapchat、YouTube 等。’]

- ☐ 01 Almost constantly
- ☐ 01 幾乎不間斷,
- ☐ 02 Many times a day,
- ☐ 02 每日許多次,
- ☐ 03 A few times a day, or
- ☐ 03 每日幾次
- ☐ 04 Less than a few times a day
- ☐ 04 每天不到幾次
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

‘QT2020_F19’ [TF40] - In the past 12 months, have you tried to get help from an on-line tool, including mobile apps or texting services, for problems with your mental health, emotions, nerves, or your use of alcohol or drugs?

在過去的12個月內，您是否嘗試從線上工具獲得援助，包括行動應用程式或簡訊服務，用來解決您的心理健康、情緒、神經、或酒精或藥物的使用問題？

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

If = 2, goto ‘PN_QT2020_F21’

If = -7, -8, goto ‘PN_QT2020_F22’

‘QT2020_F20’ [TF41] - How useful was this?

其有用的程度？

- ☐ 01 VERY

- ☐ 02 SOMEWHAT
- ☐ 03 NOT AT ALL
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

PROGRAMMING NOTE 'QT2020_F21':
IF 'QT2020_F19' =2, THEN CONTINUE WITH 'QT2020_F21';
ELSE SKIP TO 'QT2020_F22'

'QT2020_F21' [TF42] - What is the main reason you did not try to get support from an on-line tool, including mobile apps or texting services?

您如果沒有嘗試利用線上工具來獲得援助，包括行動應用程式或簡訊服務，其主要原因是什麼？

- ☐ 1 GOT BETTER/NO LONGER NEEDED
- ☐ 2 WANTED TO HANDLE PROBLEM ON OWN
- ☐ 3 DON'T OWN A SMARTPHONE OR COMPUTER
- ☐ 4 DIDN'T KNOW ABOUT THESE APPS
- ☐ 5 DON'T TRUST MOBILE APPS
- ☐ 6 CONCERNS ABOUT PRIVACY AND SECURITY OF THE DATA
- ☐ 7 DON'T THINK IT WOULD BE HELPFUL OR WORK
- ☐ 8 COST
- ☐ 9 DON'T HAVE TIME
- ☐ 10 RECEIVED TRADITIONAL/FACE-TO-FACE SERVICES
- ☐ 11 DON'T THINK I NEEDED IT
- ☐ 12 DON'T HAVE ENOUGH SPACE TO DOWNLOAD NEW APPS
- ☐ 13 Other (Specify: _____)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

'QT2020_F22' [TF43] - In the past 12 months, have you connected online with people that have mental health or alcohol/drug concerns similar to yours through methods such as social media, blogs, and online forums?

在過去的 12 個月中，您是否曾透過社群媒體、部落格、和線上論壇等方式，跟與您有類似心理健康或酗酒／毒品方面關切的人在線上聯繫？

[IF NEEDED: 'Examples include online forums or closed social media groups on specific issues, doing hashtag searches on social media, or following people with similar health conditions.']

[IF NEEDED: '包括對特定問題的線上論壇或封閉社群媒體組群，在社群媒體上從事主題標籤搜索，或關注具有相似健康狀況人群的進展。']

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

‘QT2020_F23’ [TF44] - In the last 12-months, have you used online tools to find, be referred to, contact, or connect with a mental health professional?

在過去 12 個月中，您是否使用線上工具查找、轉介、接觸、或聯繫心理健康專業人員？

[IF NEEDED: ‘Examples of online tools include texting, on-line messaging, video chat, or a mental health or health-related mobile app.’]

[IF NEEDED: ‘例如，透過發簡訊、線上發通訊、視訊聊天、或心理健康或與健康相關的行動應用程式。’]

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

SECTION G: SEXUAL BEHAVIORS

PROGRAMMING NOTE 'QT2020_G1' :
IF SC23XXX =2 , GO TO 'QT2020_H1' ;
ELSE CONTINUE WITH 'QT2020_G1'

'QT2020_G1' [TE32] - The next section is about sexual behavior. The information will be kept private and you can refuse to answer.

Have you ever had sexual intercourse?

接下來的部分是關於性行為。您的回答會被嚴格保密，您也可以拒絕回答。你有沒有過性交？

[IF NEEDED, SAY: 'By sexual intercourse, we mean sex with a penis in a vagina or an anus or rectum.']

[IF NEEDED, SAY: '這裡說的性交是指阴茎在阴道或肛门或直肠里。']

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

PROGRAMMING NOTE 'QT2020_G2':IF SC23XXX =2 GO TO 'QT2020_H1' ,
IF AGE < 15 YEARS GO TO 'QT2020_H1';ELSE IF 'QT2020_A4' = 1 (MALE AT BIRTH) THEN GO TO
'QT2020_G10';ELSE CONTINUE WITH 'QT2020_G2'

'QT2020_G2' [TG17] - Which of the following statements best describes your pregnancy plans? Would you say...

下列哪項陳述最能形容您的生育計劃？您認為.....

- ☐ 1 You do not plan to get pregnant within the next 12 months,
- ☐ 2 You are not sexually active
- ☐ 3 You are planning to get pregnant within the next 12 months, or
- ☐ 4 You are currently pregnant?
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

PROGRAMMING NOTE 'QT2020_G3':
IF 'QT2020_G1' = 2 (NOT SEXUALLY ACTIVE) or 'QT2020_G2'=2,4, THEN GO TO 'QT2020_G10';
ELSE CONTINUE WITH 'QT2020_G3'

'QT2020_G3' [TG18] - Are you or your male sex partner currently using a birth control method to prevent pregnancy?

您或您的男性性伴侶是否採用某種避孕方法避？

- ☐ 1 YES
- ☐ 2 NO
- ☐ 3 NO MALE SEXUAL PARTNER
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

If = 2, goto 'QT2020_G5';
If = 3, -7,-8 goto 'QT2020_G6'

'QT2020_G4' [TG19] - Which birth control method or methods are you using?

您正在使用哪種避孕方法？

[CODE ALL THAT APPLY]

[PROBE: 'Any others?']

[PROBE: 「還有其它語言嗎？」]

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

If =3,4, goto 'QT2020_G7'

If = 5, 6, 7, 91, -7, -8, goto 'PN_QT2020_G6'

'QT2020_G5' [TG20] - What is the main reason you are not currently using birth control?

您目前並無避孕的主因是甚麼？

- ☐ 1 TRYING TO GET PREGNANT/WANT A BABY
- ☐ 2 HAVEN'T FOUND A METHOD I LIKE
- ☐ 3 COST
- ☐ 4 HAVEN'T HAD TIME TO GO IN FOR BIRTH CONTROL
- ☐ 5 NO TRANSPORTATION
- ☐ 6 DON'T KNOW WHERE TO GET IT
- ☐ 7 DON'T BELIEVE IN BIRTH CONTROL
- ☐ 8 WORRIED ABOUT SIDE EFFECTS AND/OR HEALTH RISKS
- ☐ 9 PARTNER WON'T LET ME
- ☐ 91 OTHER (SPECIFY: _____)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

PROGRAMMING NOTE 'QT2020_G6': IF 'QT2020_G4' = 3 (IUD) OR 4 (IMPLANT), GO TO 'QT2020_G10'; ELSE CONTINUE WITH 'QT2020_G6'

'QT2020_G6' [TG25] - Has a doctor, medical provider, or family planning counselor ever talked to you about an implant in your arm or an IUD?

是否有醫生、醫療服務提供者、或計劃生育顧問曾與你討論過子宮內避孕器（IUD）或皮下植入避孕器（植入手臂）？

- ☐ 1 YES
- ☐ 2 NO
- ☐ 3 NO MALE SEXUAL PARTNER
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

'QT2020_G7' [TG26] - During the past 12 months, have you received a birth control method or a prescription for birth control from a doctor, medical provider or a family planning clinic?

在過去的 12 個月中，您是否有從醫生、醫療服務提供者、或計劃生育門診等處獲得節育方法或生育控制處方？

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

If = 2, -7, -8, goto 'PN_QT2020_G10'

'QT2020_G8' [TG27] - What main birth control method or prescription did you receive?

您所得到主要的避孕方法或處方是哪種？

- ☐ 3 IUD (MIRENA, PARAGARD, SKYLA, KYLEENA, LILETTA, ETC)
- ☐ 4 IMPLANT (IMPLANON, NEXPLANON, ETC)
- ☐ 5 BIRTH CONTROL PILLS
- ☐ 6 OTHER HORMONAL METHODS (INJECTION/DEPO-PROVERA, PATCH, VAGINAL RING/NUVA RING)
- ☐ 7 CONDOMS (MALE)
- ☐ 91 OTHER (SPECIFY: _____)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

'QT2020_G9' [TG28] - Where did you receive the main birth control method or prescription?

您從何處得到主要的避孕方法或處方？

- ☐ 1 PRIVATE DOCTOR'S OFFICE
- ☐ 2 HMO FACILITY
- ☐ 3 HOSPITAL OR HOSPITAL CLINIC
- ☐ 4 PLANNED PARENTHOOD
- ☐ 5 COUNTY HEALTH DEPARTMENT, FAMILY PLANNING CLINIC, COMMUNITY CLINIC
- ☐ 6 SCHOOL OR SCHOOL-BASED CLINIC
- ☐ 7 EMPLOYER OR COMPANY CLINIC
- ☐ 8 INDIAN HEALTH SERVICE
- ☐ 9 PHARMACY
- ☐ 10 SOME OTHER PLACE (SPECIFY: _____)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

PROGRAMMING NOTE 'QT2020_G10':
IF 15 ≤ AGE ≤ 17, THEN CONTINUE WITH 'QT2020_G10';
ELSE SKIP TO SECTION H;

'QT2020_G10' [TG21] - During the past 12 months, did you receive counseling or information about male or female birth control from a doctor or medical provider?

在過去十二個月中，您是否曾接受過醫生或醫療提供者有關男性或女性避孕的諮詢或資訊？

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

PROGRAMMING NOTE 'QT2020_G11': IF MALE AND $15 \leq \text{AGE} \leq 17$ AND 'QT2020_G1' = 1 (SEXUALLY ACTIVE) THEN CONTINUE WITH 'QT2020_G11'; ELSE SKIP TO 'SECTION H'

'QT2020_G11' [TG22] - Are you or your female sex partner currently using a birth control method to prevent pregnancy?

您或您的女性伴侶是否採用某種避孕方法避孕？這包括男性或女性絕育。

- ☐ 1 YES
- ☐ 2 NO
- ☐ 3 NO FEMALE SEXUAL PARTNER
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

If = 2, goto 'QT2020_G13'

If = 3, -7, -8, goto 'QT2020_G14'

'QT2020_G12' [TG23] - Which birth control method or methods are you using?

您正在使用哪種避孕方法？

[CODE ALL THAT APPLY]

[PROBE: 'Any others?']

[PROBE: '還有其它語言嗎?']

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

If = 3, 4, 5, 6, 7, 91, -7, -8, goto 'QT2020_G14'

'QT2020_G13' [TG24] - What is the main reason you are not currently using birth control?

您目前並無避孕的主因是甚麼？

- ☐ 1 TRYING TO GET PREGNANT/WANT A BABY
- ☐ 2 HAVEN'T FOUND A METHOD I LIKE
- ☐ 3 COST
- ☐ 4 HAVEN'T HAD TIME TO GO IN FOR BIRTH CONTROL
- ☐ 5 NO TRANSPORTATION
- ☐ 6 DON'T KNOW WHERE TO GET IT
- ☐ 7 DON'T BELIEVE IN BIRTH CONTROL
- ☐ 8 WORRIED ABOUT SIDE EFFECTS AND/OR HEALTH RISKS
- ☐ 9 PARTNER WON'T LET ME
- ☐ 91 OTHER (SPECIFY: _____)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

‘QT2020_G14’ [TG29] - During the past 12 months, have you received a birth control method or a prescription for birth control from a doctor, medical provider or a family planning clinic?

在過去的 12 個月中，您是否有從醫生、醫療服務提供者、或計劃生育門診等處獲得節育方法或生育控制處方？

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

If = 2, -7, -8, goto ‘Section H’

‘QT2020_G15’ [TG30] - What main birth control method or prescription did you receive?

您所得到主要的避孕方法或處方是哪種？

- ☐ 3 IUD (MIRENA, PARAGARD, SKYLA, KYLEENA, LILETTA, ETC)
- ☐ 4 IMPLANT (IMPLANON, NEXPLANON, ETC)
- ☐ 5 BIRTH CONTROL PILLS
- ☐ 6 OTHER HORMONAL METHODS (INJECTION/DEPO-PROVERA, PATCH, VAGINAL RING/NUVA RING)
- ☐ 7 CONDOMS (MALE)
- ☐ 91 OTHER (SPECIFY: _____)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

‘QT2020_G16’ [TG31] - Where did you receive the main birth control method or prescription?

您從何處得到主要的避孕方法或處方？

- ☐ 1 PRIVATE DOCTOR'S OFFICE
- ☐ 2 HMO FACILITY
- ☐ 3 HOSPITAL OR HOSPITAL CLINIC
- ☐ 4 PLANNED PARENTHOOD
- ☐ 5 COUNTY HEALTH DEPARTMENT, FAMILY PLANNING CLINIC, COMMUNITY CLINIC
- ☐ 6 SCHOOL OR SCHOOL-BASED CLINIC
- ☐ 7 EMPLOYER OR COMPANY CLINIC
- ☐ 8 INDIAN HEALTH SERVICE
- ☐ 9 PHARMACY
- ☐ 91 SOME OTHER PLACE (SPECIFY: _____)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

SECTION H: HEALTH CARE UTILIZATION AND ACCESS

'QT2020_H1' [TF1] - Now I'm going to ask about health care visits.

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

現在，我想提出有關健康護理門診的問題。當你生病或者需要獲得健康諮詢時，是否有一個通常去的地方？

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

- ☐ 1 YES
- ☐ 2 NO
- ☐ 3 DOCTOR/MY DOCTOR
- ☐ 4 KAISER
- ☐ 5 MORE THAN ONE PLACE
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

If = 2, -7, -8, goto 'PN_QT2020_H3'

PROGRAMMING NOTE 'QT2020_H2' :

IF 'QT2020_H1' = 4 (KAISER), FILL IN 'QT2020_H2' = 1 AND GO TO 'QT2020_H3' ;

ELSE IF 'QT2020_H1' = 3 (DOCTOR/MY DOCTOR), DISPLAY 'Is your doctor in a private';

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

'QT2020_H2' [TF2] - {What kind of place do you go to most often -- a medical.../Is your doctor in a private...} doctor's office, a clinic or hospital clinic, an emergency room, or some other place?

{你最常去什麼樣的地方—/你的醫生是否在一個私人}醫生辦公室、診所或醫院診所、急診室或其它地方？

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

PROGRAMMING NOTE 'QT2020_H3' :

IF 'QT2020_B8'=1 OR 'QT2020_B13'=1 (ER VISIT DUE TO ASTHMA), MARK 'YES=1' ON 'QT2020_H3'

AND GO TO 'QT2020_H4' ;

ELSE CONTINUE WITH 'QT2020_H3'

'QT2020_H3' [TF3] - 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？

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

'QT2020_H4' [TF16] - During the past 12 months, how many times have you seen a medical doctor?

在過去12個月中，你曾經幾次去看醫生？

_____ TIMES [HR: 0-365]

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

'QT2020_H5' [TF5] - When was the last time you saw a doctor for a physical exam or check-up?

你最近一次接受醫生體檢是什麼時間？

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

PROGRAMMING NOTE 'QT2020_H6' :

**IF 'QT2020_H1' = 1, 3, 4, OR 5 (YES, DOCTOR, KAISER, OR MORE THAN ONE PLACE FOR USUAL SOURCE OF CARE), CONTINUE WITH 'QT2020_H6' ;
ELSE GO TO 'QT2020_H7'**

'QT2020_H6' [TI14] - Do you have a personal doctor or medical provider who is your main provider?

你是否有一位個人醫生或醫療服務提供者擔任你的主要服務提供者？

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

[IF NEEDED, SAY: '可以是全科醫生、專科醫生、醫生助理、護士或其他健康服務提供者']

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

PROGRAMMING NOTE 'QT2020_H7':

IF TEINSURE = 1 OR 'QT2020_H1' = 1, 3, 4, OR 5 (HAS A USUAL SOURCE OF CARE) THEN CONTINUE WITH 'QT2020_H7';

ELSE GO TO PROGRAMMING NOTE 'QT2020_H10';

IF 'QT2020_H6' = 1 (HAS A PERSONAL DOCTOR), THEN DISPLAY 'your';

ELSE DISPLAY 'a';

'QT2020_H7' [TH49] - In the past 12 months, did you try to get an appointment to see {your/a} doctor or medical provider within two days because you were sick or injured?

在過去十二個月內，您是否曾因生病或受傷在兩天內約見的醫生或醫療服務提供者？

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

[IF NEEDED, SAY: ``請勿包括急診。``]

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

If = 2, -7, or -8 go to 'PN_QT2020_H9'

'QT2020_H8' [TH46] - How often were you able to get an appointment within two days? Would you say...

您能夠在兩天內就診的頻率有多高？您認為是...

- ☐ 1 Never
- ☐ 1 從來沒有
- ☐ 2 Sometimes,
- ☐ 2 有時
- ☐ 3 Usually, or
- ☐ 3 通常
- ☐ 4 Always?
- ☐ 5 REFUSED
- ☐ 6 DON'T KNOW

PROGRAMMING NOTE 'QT2020_H9':

IF 'QT2020_B6' = 1 (YES, STILL HAVE ASTHMA) OR 'QT2020_B7' = 1 (YES, ASTHMA EPISODE IN PAST 12 MONTHS) AND IF 'QT2020_H1' = 1, 3, 4, OR 5 (YES, DOCTOR, KAISER, OR MORE THAN ONE PLACE FOR USUAL SOURCE OF CARE) AND IF 'QT2020_H6' = 1 (YES HAS PERSONAL DOCTOR), CONTINUE WITH 'QT2020_H9';

ELSE GO TO 'QT2020_H10'

'QT2020_H9' [TI17] - Is there anyone at your doctor's office or clinic who helps coordinate your care with other doctors or services, such as tests or treatments?

在你的醫生辦公室或診所是否有人幫助協調其他醫生對你提供的護理或服務，例如測試或治療？

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

‘QT2020_H10’ [TI18] - During the past 12 months, did you delay or not get a medicine that a doctor prescribed for you?

在過去十二個月中，你是否曾經延遲或沒有領取醫生為你開的處方藥？

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

If = 2, -7, -8, goto ‘QT2020_H12’

‘QT2020_H11’ [TI21] - Was cost or lack of insurance a reason why you delayed or did not get the prescription?

醫療費用或沒有保險是不是您延遲或沒有領取處方藥物的一個原因？

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

‘QT2020_H12’ [TF9] - During the past 12 months, did you delay or not get any other medical care you felt you needed—such as seeing a doctor, a specialist, or other health professional?

在過去十二個月中，您有沒有延遲或沒有接受任何您認為必要的醫療護理 — 例如看醫生、專科醫生或其他健康護理專業人員？

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

If = 2, -7, -8, goto ‘QT2020_H17’

‘QT2020_H13’ [TH57] - Did you get the care eventually?

你最終接受了護理嗎？

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

‘QT2020_H14’ [TF22] - Was cost or lack of insurance a reason why you delayed or did not get the care you felt you needed?

醫療費用或沒有保險是不是您延遲或沒有獲得您認為自己需要的醫療護理的一個原因？

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

If = 2, -7, -8, goto ‘QT2020_H16’

'QT2020_H15' [TH58] - Was that the main reason?

這是主要原因嗎？

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

If = 1, -7, -8, goto 'QT2020_H17'

'QT2020_H16' [TH59] - What was the one main reason why you delayed getting the care you felt you needed?

你延遲或沒有接受你認為自己需要的護理的**一個**最主要原因是什么？

- ☐ 1 COULDN'T GET APPOINTMENT
- ☐ 2 MY INSURANCE NOT ACCEPTED
- ☐ 3 MY INSURANCE DID NOT COVER
- ☐ 4 LANGUAGE UNDERSTANDING PROBLEMS
- ☐ 5 TRANSPORTATION PROBLEMS
- ☐ 6 HOURS NOT CONVENIENT
- ☐ 7 THERE WAS NO CHILD CARE FOR CHILDREN AT HOME
- ☐ 8 I FORGOT OR LOST REFERRAL
- ☐ 9 I DIDN'T HAVE TIME TO GO
- ☐ 10 TOO EXPENSIVE
- ☐ 11 I HAVE NO INSURANCE
- ☐ 91 OTHER (SPECIFY: _____)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

'QT2020_H17' [TF14] - This next question is about dental health.

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

下面是有關牙齒的問題。您最後一次看牙醫或去牙科診所大約是多久以前？請包括牙科保健員及各類牙科專家。

- ☐ 0 HAVE NEVER VISITED
- ☐ 1 6 MONTHS AGO OR LESS
- ☐ 2 MORE THAN 6 MONTHS UP TO 1 YEAR AGO
- ☐ 3 MORE THAN 1 YEAR UP TO 2 YEARS AGO
- ☐ 4 MORE THAN 2 YEARS UP TO 5 YEARS AGO
- ☐ 5 MORE THAN 5 YEARS AGO
- ☐ -7 REDUSED
- ☐ -8 DON'T KNOW

PROGRAMMING NOTE 'QT2020_H18':

**IF 'QT2020_A7' = 1 (ATTENDED SCHOOL LAST WEEK) OR 'QT2020_A8' = 1 (ATTENDED SCHOOL LAST YEAR) THEN CONTINUE WITH 'QT2020_H18';
ELSE GO TO 'QT2020_H19'**

'QT2020_H18' [TF28] - During the past 12 months, did you miss any time from school because of a dental problem? Do not count time missed for cleaning or a check-up.

在過去十二個月中，您是否曾經因牙科疾病缺課？請不要計入因洗牙或例行牙科檢查缺課的時間。

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

'QT2020_H19' [TM3] - How would you describe the condition of your teeth: excellent, very good, good, fair, or poor?

您如何描述您的牙齒狀況：極好、很好、較好、一般還是較差？

- ☐ 1 EXCELLENT
- ☐ 2 VERY GOOD
- ☐ 3 GOOD
- ☐ 4 FAIR
- ☐ 5 POOR
- ☐ 6 HAS NO NATURAL TEETH
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

SECTION J: DEMOGRAPHIC INFORMATION PART II

'QT2020_J1' [TI1] - So we can be sure we have included all races and ethnic groups in California, I need to ask a few questions about your background.

Are you Latino or Hispanic?

為確保涵蓋加州的所有族裔及種族，我要提出數道關於您背景的問題。您是拉丁裔或者西班牙裔嗎？

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

[IF NEEDED, SAY: 「例如，墨西哥人或中南美洲人？」]

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

If = 2, -7, -8, goto 'PN_QT2020_J3'

'QT2020_J2' [TI1A] - And what is your Latino or Hispanic ancestry or origin? Such as Mexican, Salvadoran, Cuban, Honduran-- and if you have more than one, tell me all of them.

你的拉丁裔或西裔祖籍或原國籍是哪里？例如，墨西哥人、薩爾瓦多人、古巴人、洪都拉斯人 —如果有一個以上原國籍，請將所有的原國籍告訴我。

[IF NECESSARY, GIVE MORE EXAMPLES]

[CODE ALL THAT APPLY]

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

PROGRAMMING NOTE 'QT2020_J3' :**IF 'QT2020_J1' = 1 (YES), DISPLAY 'You said you are Latino or Hispanic. Also,';****IF MORE THAN ONE RACE GIVEN, AFTER ENTERING RESPONSES FOR 'QT2020_J3', CONTINUE WITH PROGRAMMING NOTE 'QT2020_J4' ;****ELSE GO TO SKIPS AS INDICATED FOR SINGLE RESPONSES**

'QT2020_J3' [TI2] - {You said you are Latino or Hispanic. Also,} Please tell me which one or more of the following you would use to describe yourself: Would you describe yourself as Native Hawaiian, Other Pacific Islander, American Indian, Alaska Native, Asian, Black, African American, or White?

你說你是拉丁裔或西裔。另外，}請告訴我你會使用以下哪一項或幾項來描述你自己：夏威夷土著人、其他太平洋群島人、美洲印地安人、阿拉斯加土著人、亞洲人、黑人、非裔美國人還是白人？

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

- ☐ 1 WHITE
- ☐ 2 BLACK OR AFRICAN AMERICAN
- ☐ 3 ASIAN
- ☐ 4 AMERICAN INDIAN OR ALASKA NATIVE
- ☐ 5 OTHER PACIFIC ISLANDER
- ☐ 6 NATIVE HAWAIIAN
- ☐ 91 OTHER (SPECIFY: _____)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

If = 1, 2, 6, 91,-7,-8, And Only One Race, goto 'QT2020_J11'**If = 3, And Only One Race, goto 'PN_QT2020_J7'****If = 4, And Only One Race, goto 'PN_QT2020_J4'****If = 5, And Only One Race, goto 'PN_QT2020_J8'**

PROGRAMMING NOTE 'QT2020_J4' :**IF 'QT2020_J3' = 4 (AMERICAN INDIAN, ALASKA NATIVE) CONTINUE WITH 'QT2020_J4' ;
ELSE GO TO PROGRAMMING NOTE 'QT2020_J7'**

'QT2020_J4' [T12A] - 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.

你說你是美洲印地安人或阿拉斯加原住民，你屬於哪一個部落？如果你屬於一個以上部落，請告訴我所有這些部落。

[CODE ALL THAT APPLY]

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

'QT2020_J5' [T12B] - Are you an enrolled member in a federally or state recognized tribe?

你是聯邦或州認可部落的註冊成員嗎？

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

If = 2, -7, -8, goto 'PN_QT2020_J7'

'QT2020_J6' [TI2C] - Which tribe are you enrolled in?

你在哪一個部落註冊?

- ☐ 1 APACHE
- ☐ 2 BLACKFEET
- ☐ 3 CHEROKEE
- ☐ 4 CHOCTAW
- ☐ 5 NAVAJO
- ☐ 6 POMO
- ☐ 7 PUEBLO
- ☐ 8 SIOUX
- ☐ 9 YAQUI
- ☐ 10 OTHER

APACHE_T

- ☐ 1 MESCALERO APACHE, NM
- ☐ 2 APACHE (NOT SPECIFIED)_
- ☐ 3 OTHER APACHE [Ask for spelling] (SPECIFY: _____)

BLACKFEET_T

- ☐ 4 BLACKFOOT/BLACKFEET_

CHEROKEE_T

- ☐ 5 WESTERN CHEROKEE
- ☐ 6 CHEROKEE (NOT SPECIFIED)_
- ☐ 7 OTHER CHEROKEE [Ask for spelling] (SPECIFY: _____)_

CHOCTAW_T

- ☐ 8 CHOCTAW OKLAHOMA
- ☐ 9 CHOCTAW (NOT SPECIFIED)_
- ☐ 10 OTHER CHOCTAW [Ask for spelling] (SPECIFY: _____)_

NAVAJO_T

- ☐ 11 NAVAJO (NOT SPECIFIED)

POMO_T

- ☐ 12 HOPLAND BAND, HOPLAND RANCHERIA_
- ☐ 13 SHERWOOD VALLEY RANCHERIA_
- ☐ 14 POMO (NOT SPECIFIED)_
- ☐ 15 OTHER POMO [Ask for spelling] (SPECIFY: _____)_

PUEBLO_T

- ☐ 16 HOPI_16
- ☐ 17 YSLETA DEL SUR PUEBLO OF TEXAS_17
- ☐ 18 PUEBLO (NOT SPECIFIED)_18
- ☐ 19 OTHER PUEBLO [Ask for spelling] (SPECIFY: _____)_

SIOUX_T

- ☐ 20 OGLALA/PINE RIDGE SIOUX_
- ☐ 21 SIOUX (NOT SPECIFIED)_
- ☐ 22 OTHER SIOUX [Ask for spelling] (SPECIFY: _____)_

YAQUI_T

- ☐ 23 PASCUA YAQUI TRIBE OF ARIZONA
- ☐ 24 YAQUI (NOT SPECIFIED)
- ☐ 25 OTHER YAQUI [Ask for spelling] (SPECIFY: _____)_
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

PROGRAMMING NOTE 'QT2020_J7' :
IF 'QT2020_J3' = 3 (ASIAN) CONTINUE WITH 'QT2020_J7' ;
ELSE GO TO PROGRAMMING NOTE 'QT2020_J8'

'QT2020_J7' [TI2D] - You said Asian, and what specific ethnic group are you, such as Chinese, Filipino, Vietnamese? If you are more than one, tell me all of them.

你說你是亞洲人，你屬於哪一個種族團體？例如中國人、菲律賓人、越南人。如果你屬於一個以上民族，請告訴我所有這些族裔。

[CODE ALL THAT APPLY]

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

PROGRAMMING NOTE 'QT2020_J8' :
IF 'QT2020_J3' = 5 (PACIFIC ISLANDER) CONTINUE WITH 'QT2020_J8' ;
ELSE GO TO PROGRAMMING NOTE 'QT2020_J9'

'QT2020_J8' [TI2D1] - You said you are Pacific Islander. What specific ethnic group are you, such as Samoan, Tongan, or Guamanian? If you are more than one, tell me all of them.

你說你是太平洋群島人。你具體屬於哪一個種族團體，例如薩摩亞人、湯加人或關島人？如果你屬於一個以上種族團體，請告訴我所有的種族團體。

[CODE ALL THAT APPLY]

- ☐ 1 SAMOAN/AMERICAN SAMOAN
- ☐ 2 GUAMANIAN
- ☐ 3 TONGAN
- ☐ 4 FIJIAN
- ☐ 91 OTHER PACIFIC ISLANDER (SPECIFY: _____)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

PROGRAMMING NOTE 'QT2020_J9' :

IF 'QT2020_J1' = 1 (YES, LATINO) AND ['QT2020_J3' = 6 (NATIVE HAWAIIAN) OR 5 (OTHER PACIFIC ISLANDER) OR 4 (AMERICAN INDIAN OR ALASKA NATIVE) OR 3 (ASIAN) OR 2 (BLACK OR AFRICAN AMERICAN) OR 1 (WHITE) OR 91 (OTHER (Specify))], CONTINUE WITH 'QT2020_J9' ;
ELSE IF MULTIPLE RESPONSES TO 'QT2020_J3' OR 'QT2020_J7' OR 'QT2020_J8' [NOT COUNTING -7 OR -8 (REF/DK)], CONTINUE WITH 'QT2020_J9' ;
ELSE GO TO 'QT2020_J11' ;
FOR 'QT2020_J2' RESPONSES, INCLUDE 'Specify' RESPONSE FOR 91 (OTHER LATINO); IF 'QT2020_J1' = -7 (REFUSE), INSERT 'Latino'

'QT2020_J9' [TI2F] - You said that you are: [RESPONSES FROM TI1A, TI2, TI2D, TI2D1]. Do you identify with any one race in particular?

你曾經說你是： [RESPONSES FROM TI1A, TI2, TI2D, TI2D1]. 你是否認同任何一個特定的種族？

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

IF 'QT2020_J9' = 2,-7,-8 go to 'QT2020_J11'

'QT2020_J10' [TI2E] - Which do you most identify with?

你最認同其中哪一個族裔？

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

‘QT2020_J11’ [TI3] - In what country were you born?

你是在哪一個國家出生的？

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

PROGRAMMING NOTE 'QT2020_J12' :
IF 'QT2020_J11' = 1, 2, 9, 22, OR 26 (BORN IN USA OR US TERRITORY), GO TO 'QT2020_J15' ;
ELSE CONTINUE WITH 'QT2020_J12'

'QT2020_J12' [TI4] - Are you a citizen of the United States?

你是美國公民嗎？

- ☐ 1 YES
- ☐ 2 NO
- ☐ 3 APPLICATION PENDING
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

If = 1, goto 'QT2020_J14'

'QT2020_J13' [TI5] - Are you a permanent resident with a green card?

你是持有綠卡的永久居民嗎？

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

[IF NEEDED, SAY: '人們通常把它稱作「綠卡」，但卡的顏色可能是粉紅色、藍色或白色。']

- ☐ 1 YES
- ☐ 2 NO
- ☐ 3 APPLICATION PENDING
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

'QT2020_J14' [TI6] - About how many years have you lived in the United States?

你在美國居住大約多少年了？

[FOR LESS THAN A YEAR, ENTER 1 YEAR]

_____ NUMBER OF YEARS

_____ YEAR (FIRST CAME TO LIVE IN U.S.)

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

‘QT2020_J15’ [TI7] - What languages do you speak at home?

你在家中使用哪種語言交談？

[CODE ALL THAT APPLY.]

[PROBE: ‘Any others?’]

[PROBE: ‘還有其它語言嗎?’]

- ☐ 1 ENGLISH
- ☐ 2 SPANISH
- ☐ 3 CANTONESE
- ☐ 4 VIETNAMESE
- ☐ 5 TAGALOG
- ☐ 6 MANDARIN
- ☐ 7 KOREAN
- ☐ 8 ASIAN INDIAN LANGUAGES
- ☐ 9 RUSSIAN
- ☐ 91 OTHER 1 (SPECIFY: _____)
- ☐ 92 OTHER 2 (SPECIFY: _____)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

SECTION K: SUICIDE IDEATION AND ATTEMPTS

‘QT2020_K1’ [TK1] - The next section is about thoughts of hurting yourself. Again, if any question upsets you, you don't have to answer it.

Have you ever seriously thought about committing suicide?

下一節是有關自我傷害的想法。再說一遍，如果提出的任何問題使您感到不安，您不需要回答。您是否曾經認真地考慮過自殺？

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

If = 2, -7, -8, goto 'SECTION L-CIVIC ENGAGEMENT AND RESILIENCY'

‘QT2020_K2’ [TK2] - Have you seriously thought about committing suicide at any time in the past 12 months?

您在過去十二個月內的任何時間是否認真地考慮過自殺？

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

If = 2, -7, -8, goto 'QT2020_K4'

‘QT2020_K3’ [TK3] - Have you seriously thought about committing suicide at any time in the past two months?

您在過去兩個月的任何時間是否曾經認真地考慮過自殺的問題？

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

‘QT2020_K4’ [TK4] - Have you ever attempted suicide?

您是否曾經嘗試過自殺？

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

PROGRAMMING NOTE 'QT2020_K5' :

**IF ('QT2020_K2' = 2, -7, OR -8) AND ('QT2020_K4' = 2, -7, OR -8), THEN GO TO SUICIDE RESOURCE;
 IF ('QT2020_K3' = 2, -7, OR -8) AND ('QT2020_K4' = 2, -7, OR -8), THEN GO TO SUICIDE RESOURCE;
 IF 'QT2020_K3' = 1 AND ('QT2020_K4' = 2, -7, OR -8), THEN GO TO SUICIDE RESOURCE;
 ELSE CONTINUE WITH 'QT2020_K5'**

'QT2020_K5' [TK5] - Have you attempted suicide at any time in the past 12 months?

您在過去十二個月內的任何時間是否認真地考慮過自殺？

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

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

我前面已經說過，如果你希望與人談論有關自殺的想法或嘗試的問題，有人可以每天二十四小時向你提供資訊，為你提供幫助。你有什麼東西可以把電話記下來嗎？

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

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

] 該免費電話號碼是 1-800-273-TALK (8255)。

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

Or you can visit a website to find out information about getting help.

你還可以查閱我們的網站，查找有關獲取幫助的資訊，

[SPEAK SLOWLY WHEN GIVING OUT THE WEBSITE ADDRESS.]

The website address is www.suicidepreventionlifeline.org.

該網址是 www.suicidepreventionlifeline.org。

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

POST-NOTE FOR SUICIDE RESOURCE:

**IF ('QT2020_K2' = 2, -7, OR -8) AND ('QT2020_K4' = 2, -7, OR -8), THEN GO TO TH21 (NEXT SECTION);
 ELSE CONTINUE WITH 'QT2020_K6'**

'QT2020_K6' [TK7] - Would you like to discuss your thoughts with this person now or would you like to continue with the survey?

您是否願意與這個人討論您的想法？

- ☐ 1 DISCUSS THOUGHTS WITH PERSON
- ☐ 2 CONTINUE WITH SURVEY
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

SECTION L: CIVIC ENGAGEMENT AND RESILIENCY

‘QT2020_L1’ [TL50] - This next section is about involvement in your community. In the past 12 months, have you volunteered to organize or lead efforts to help solve problems in your community?

在過去 12 個月內，您是否曾經自願組織或領導行動以協助解決您所在社區的問題？

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

‘QT2020_L2’ [TL52] - Imagine that you find out about a problem in your community and you want to do something about it. For example, illegal drugs were being sold near a school, or high levels of lead were found in the local drinking water.

Do you think you could express your views in front of a group of people?

Do you think you...

想像一下，您發現社區中存在問題，並且您想對此有所作為。例如，學校附近出售非法毒品，或在當地飲用水中發現高含量的鉛。您認為您可以在人群面前表達您的觀點嗎？

- ☐ 01 Definitely could not
- ☐ 02 Probably could not
- ☐ 03 Maybe could
- ☐ 04 Probably could
- ☐ 05 Definitely could
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

‘QT2020_L3’ [TL53] - Do you think you could contact an elected official or someone else in government who represents your community?

您認為您可以聯絡民選官員或在政府中其他代表您社區的人嗎？

- ☐ 01 Definitely could not
- ☐ 02 Probably could not
- ☐ 03 Maybe could
- ☐ 04 Probably could
- ☐ 05 Definitely could
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

QT2020_L4' [TL54] - How much do you agree or disagree with this statement?

"The way people vote gives them a chance to influence how things are run in their community and California."
Do you..

您對該表述的贊同或反對程度如何？

“民眾投票方式的形式令民眾有機會影響其所在社區和加利福尼亞州事務的運作方式。” 您是……

- ☐ 1 Strongly agree
- ☐ 1 强烈赞同
- ☐ 2 Somewhat agree
- ☐ 2 比较赞同
- ☐ 3 Neither agree nor disagree
- ☐ 3 既不赞同也不反对
- ☐ 4 Somewhat disagree
- ☐ 4 比较反对
- ☐ 5 Strongly disagree
- ☐ 5 强烈反对

'QT2020_L5' [TL37] - A person's appearance, style, dress, or the way they walk or talk may affect how people describe them. How do you think other people at school would describe you?

個人的外表，風格，服飾，或者他們走路或談話的方式，可能會影響人們如何描述他們。你覺得別人在學校會怎樣形容你？

[IF NEEDED, SAY: 'Think about the last time you attended school'.]

[IF NEEDED, SAY: “想一想在你最近上的學校。’.]

- ☐ 1 Very feminine,
- ☐ 2 Mostly feminine,
- ☐ 3 Equally feminine and masculine
- ☐ 4 Mostly masculine, or
- ☐ 5 Very masculine?
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

PROGRAMMING NOTE 'QT2020_L6';
IF ['QT2020_A4' = 1 AND 'QT2020_L5' = 1,2 (MALE AT BIRTH AND GENDER EXPRESSION IS VERY/MOSTLY FEMININE)] OR ['QT2020_A4'=2 AND 'QT2020_L5' = 4,5 (FEMALE AT BIRTH AND GENDER EXPRESSION IS VERY/MOSTLY MASCULINE)] CONTINUE WITH 'QT2020_L6';
ELSE SKIP TO 'QT2020_L10'
IF SC23XXX =2, (NO QUESTIONS ON SEXUAL BEHAVIOR) SKIP TO 'QT2020_M1';
ELSE CONTINUE WITH 'QT2020_L6'

'QT2020_L6' [TL44] - People who do not have HIV can take one pill a day to lower their risk of getting HIV. This is called pre-exposure prophylaxis, or PrEP. The pill is also called Truvada®.

At any time in the past 30 days, have you taken PrEP or Truvada®?

沒有愛滋病毒（人類免疫缺乏病毒）的人可每天服用一粒藥丸，以減低染上愛滋病毒的風險。這稱為預防性用藥或 PrEP，而藥丸亦稱為特魯瓦達（Truvada®）。過去 30 天內任何時刻，您曾否服用預防性用藥或特魯瓦達？

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

If = 1, goto 'QT2020_L10'

'QT2020_L7' [TL45] - In the past 12 months, have you taken any PrEP or Truvada®?

過去 12 個月內，您曾否服用任何預防性用藥或特魯瓦達？

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

If = 1, goto 'QT2020_L10'

'QT2020_L8' [TL46] - Have you ever taken any PrEP or Truvada®?

您有否試過服用任何預防性用藥或特魯瓦達？

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

If = 1, goto 'QT2020_L10'

'QT2020_L9' [TL47] - Before today, have you ever heard of PrEP or Truvada®?

今天前，您有否聽過預防性用藥或特魯瓦達？

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

'QT2020_L10' [TH31] - Have you ever been tested for HIV, the virus that causes AIDS?

您是否曾經接受過艾茲病毒HIV測試？

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

If = 2, -7, -8, goto 'QT2020_L12'

'QT2020_L11' [TL48] - For your most recent HIV test, were you offered the test or did you ask for the test?

您最近一次接受愛滋病毒測試，是獲提供測試，還是自己主動要求接受測試？

- ☐ 1 I WAS OFFERED THE TEST
- ☐ 2 I ASKED FOR THE TEST
- ☐ 3 I DON'T REMEMBER
- ☐ 91 OTHER (SPECIFY:_____)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

If = 1, 2, 3, 91, -7, -8, goto 'SECTION M-CLOSING'

'QT2020_L12' [TL49] - Were you ever offered an HIV test?

您曾否獲提供愛滋病毒測試？

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

SECTION M: CLOSING

'QT2020_M1' [T110] - Those are my final questions. I appreciate your time and cooperation. Finally, do you think you would be willing to do a follow-up to this survey sometime in the future?

這些是我要問的最後幾個問題。感謝您花費的時間及給予的合作。最後，請問您願意在未來參加本項研究的後續調查嗎？

- ☐ 1 YES
- ☐ 2 MAYBE/PROBABLY YES
- ☐ 3 DEFINITELY NOT
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

PROGRAMMING NOTE SUICIDE RESOURCE 2:

**IF 'QT2020_K6' = 2, -7, OR -8, CONTINUE WITH SUICIDE RESOURCE 2;
ELSE GO TO CLOSE**

'QT2020_M2' [TM4] - As I mentioned earlier, we have a number you can call if you'd like to talk to someone about suicidal thoughts or attempts. Someone is available 24 hours a day to provide information to help you. Do you have something to write with?

我前面已經說過，如果你希望與人談論有關自殺的想法或嘗試的問題，有人可以每天二十四小時向你提供資訊，為你提供幫助。你有什麼東西可以把電話記下來嗎？

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

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

該免費電話號碼是 1-800-273-TALK (8255)。

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

Or you can visit a website to find out information about getting help.

你還可以查閱我們的網站，查找有關獲取幫助的資訊，

[SPEAK SLOWLY WHEN GIVING OUT THE WEBSITE ADDRESS.]

The website address is www.suicidepreventionlifeline.org.

該網址是 www.suicidepreventionlifeline.org。

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

Would you like to speak with someone now?

你現在希望與人交談嗎？

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

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

謝謝！你已經幫助我們完成了一項極為重要的健康問卷調查。如果你對研究有任何問題，請與本項研究負責人 Ponce 博士聯繫。你希望要他的電話號碼嗎？

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

[IF 'YES', SAY: 「你可以撥免費電話號碼 1-866-275-2447，與 Ponce 博士聯繫。再見」]

[IF NO, SAY: 'Goodbye']

[IF NO, SAY: 「再見」]

'QT2020_M3' [TI9] -

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

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

BREAKOFF

CALLBACK

- ☐ 1 YES
- ☐ 2 NO

INELIGIBLE

- ☐ 1 YES
- ☐ 2 NO