1990 NATIONAL SURVEY OF FUNCTIONAL HEALTH STATUS

FINAL REPORT

by

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NORC

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1.1 Purpose of The 1990 National Survey of Functional Health Status

The 1990 National Survey of Functional Health Status (NHS) was an outgrowth of previous research designed to understand how specific components of the health care system affect the outcomes of care. The NHS addressed the following three research goals:

- To obtain national normative data on the SF-36, a measure of functional health status and well-being.
- To determine whether the public believes that physicians assess functional health status and well-being in the course of the care they provide and whether these aspects of health were considered legitimate content for medical care.
- To explore how measures of quality of life and other social factors relate to the health status and well-being of the general population, with particular interest in the potential relationships in the elderly population.

Additionally, this survey had a methodological purpose: to investigate the relative merits and costs of self-completed mail surveys versus surveys completed by telephone. The NHS offered the opportunity to directly compare the two data collection methods.

1.2 Description of Client, Funding and NORC

The NHS was conducted on behalf of The Institute for the Improvement of Medical Care and Health at the New England Medical Center. NORC, a Social Science Research Center affiliated with the University of Chicago, carried out the data collection, preparation and processing efforts.

1.3 Organization of Report

The NHS Final Report is divided into five major chapters: sample design and implementation, prefield activities, data collection, data preparation and processing, and final datafile.

2.1 Sample Frame

The sample for the NHS was drawn from the sample frame of the 1989 and 1990 General Social Survey (GSS). The GSS is an annual survey of the noninstitutionalized adult population in the United States. The GSS sample frame is a national stratified, multistage area probability sample of households in the continental United States¹. The sample frame for the NHS included 1,537 GSS households from 1989 and 1,372 GSS households from the 1990 GSS for a total base sample of 2,909 households.

2.2 Sample Selection

From the base sample of 2,909 households, the NHS drew two categories of respondents. First, it selected the single member of each household who had been interviewed previously on the GSS in the designated years. As shown in Table 2-1, this category was comprised of 1,537 GSS respondents from 1989 and 1,372 respondents from 1990 for a total "reinterview" sample of 2,909 persons. Second, the NHS selected for interview 342 elderly persons who were residing in the targeted households but had not been selected for GSS interviews. This oversample of elderly included 202 persons aged sixty-four or older as of the date of interview for the 1989 GSS and 140 persons aged sixty-five or older as of the date of interview for the 1990 GSS. Altogether, this NHS sample design yielded a sample size of 3,251 persons in 2,909 households.

l Alaska and Hawaii are not included in the sample.

Table 2-1
Distribution of sample

Survey respondent	1989 GSS	1990 GSS	Total sample
GSS respondent	1,537	1,372	2,909
Sixty-five or older	202	140	342
Total	1,739	1,512	3,251

2.3 Sample Design

The NHS was designed as two parallel surveys—one by mail with telephone followup, the "Mail Survey", and one by telephone alone, the "Telephone Survey." Eighty percent of the 2,909 NHS households were chosen at random for the Mail Survey. The remaining twenty percent were chosen for the Telephone Survey. Table 2-2 shows the breakdown of households (including GSS respondents and elderly) across the two surveys.

The unit of selection for the NHS was, therefore, based on households rather than respondents. Of the 2,909 NHS households, 327 were "multiple respondent households," that is, they contained one or more elderly members in addition to the GSS respondent. Among the multiple respondent households, 313 contained only one elderly oversample respondent, thirteen contained two, and one contained three elderly respondents. The rationale for selecting the NHS by household rather than by individual was to ensure that all respondents within a

given household would fall into the same survey component and be contacted, whether by phone or by mail, in a coordinated manner.

Table 2-2

Mail versus telephone survey households

Survey	Household	Multiple respondent households*
1ail	2,327	258
lephone	582	69
tal	2,909	327

^{*} Multiple respondent households were a subset of the total number of households (n = 2,909).

2.4 Eligibility

The NHS was in effect a reinterview of the 1989 and 1990 GSS respondents. Thus, all respondents from both of these survey years were eligible to participate in the survey. The NHS also selected an oversample of elderly, whose eligibility was contingent upon the following:

- Must have resided in the GSS households but were not interviewed for GSS in 1989 or 1990.
- . Must currently be aged sixty-five years or older.

For this survey, the following respondents were defined as out-of-scope:

Deceased respondents.

- Non-U.S. citizens. (Note that respondents were not explicitly screened for U.S. citizenship in the GSS or the NHS. However, two NHS respondents stated that they held Canadian citizenship and did not feel qualified to answer questions regarding U.S. health care systems. These respondents were deemed out of scope.)
- Respondents who were initially selected as part of the oversample, however, in fact were not aged sixty-five years or older.

This section will discuss questionnaire development, pretests, development of survey materials, and the selection and training of telephone interviewers. The prefield activities for the NHS occurred during a three week period beginning in late September, 1990. A focus group was used to test the self-administered questionnaire whereas the telephone instrument was pretested using a convenience sample by telephone.

3.1 Questionnaire Development

The NHS questionnaire primarily consisted of questions that had been used in the Medical Outcomes Study (MOS), a multiyear study that was designed to address the following two issues:

- Determine whether variations in patient outcomes are explained by differences in system of care, clinician specialty, and clinician's technical and interpersonal styles.
- Develop more practical tools for the routine monitoring of patient outcomes in medical practice.

The MOS included a cross-sectional survey of adult patients. A cohort of patients with chronic illness were selected for the longitudinal component.

The NHS questionnaire was designed for two modes of administration--self-administered and by telephone. Two independent pretests were conducted to determine the following:

- . To prepare the instrument for use with the general population.
- To assess how the instrument should be modified for telephone administration.
- To pretest four new questions not previously used in the MOS and two new demographic questions.

The questionnaire was slightly modified for telephone administration. These modifications primarily consisted of transitional statements in both the lead statements to the question series and in the actual question stems. For example, the SAQ read, "Please indicate how much you agree or disagree with each of the following statements." Each of the response categories appeared at the top of the question grid, STRONGLY DISAGREE, DISAGREE, UNCERTAIN, AGREE, STRONGLY DISAGREE. For telephone administration this was modified to read, "Please indicate if you strongly disagree, disagree, agree or strongly agree with each of the following statements. If you are uncertain, just tell me."

3.2 Pretests

3.2.1 Mail Survey Pretest

The focus group participants included five men and five women, ranging in ages from eighteen to forty-three. Each participant was provided with a brief description of the survey and the focus group procedures. Initially, the ten participants completed the SAQ in a semi-private interviewing carrel. The participants were instructed to record start and end times and to note any questions they had in the margin for discussion when the group reconvened. The average administration time for the SAQ was twenty minutes.

The focus group discussion began with an open-ended question, "Suppose you already had been interviewed previously for the GSS. Would you have responded if you received this questionnaire in the mail?" The focus group respondents gave a wide range of answers to this question. For example, some said they open their mail immediately and answer all requests whereas others said they discard anything that remotely resembles junk mail. One participant said that she would have filled it out but probably would not have bothered to mail it. Respondents

were asked whether an incentive such as a two-dollar bill attached to the questionnaire would increase their likelihood of completing and returning the SAQ. Most replied in the affirmative.

The remainder of the session included a question-by-question review of the SAQ. The participants provided invaluable comments about the questionnaire. For example, many of the questions contained references to "your doctor." The participants found this reference awkward as none of them had a personal physician that they considered their doctor. Based on this insight from the focus group respondents, the survey designers incorporated a new item into the questionnaire, giving the respondents the opportunity to indicate whether they, in fact, had a physician.

3.2.2 Telephone Survey Pretest

Three experienced NORC telephone interviewers conducted the telephone pretest. Prior to the pretest, the interviewers received a briefing consisting of an overview of the study background, objectives, and a review of the questionnaire. The pretest sample was a convenience sample of respondents selected from the Chicago metropolitan area telephone book. A total of thirteen interviews were completed by telephone. The average administration time for the telephone interview was thirty minutes.

After the pretest, an interviewer debriefing was held. It began with a short statement from each interviewer giving their general impression of the questionnaire and their experiences administering it by telephone. Following this discussion, a question-by-question review was held.

On September 28, 1990, in a telephone conference call, NHS and NORC team leaders discussed the results of the pretests and recommendations for the final

survey instruments. Revisions and improvements to the questionnaire were noted and incorporated into the final survey instruments. The final mail questionnaire appears in Appendix A. A copy of the final telephone questionnaire (the CATI screens) appears in Appendix B.

3.3 Development of Survey Materials

NHS and NORC personnel collaborated on the development of the following respondent materials:

- . Respondent letter for first SAQ mailing.
- . Respondent letter for the second SAQ mailing.
- Respondent note for mail sampled households with at least one member other than the respondent aged sixty-five or older.
- Reminder/thank-you postcard.
- Respondent letter for telephone sample single respondent households, (households with no supplemental members aged sixty-five or older).
- Respondent letter for telephone sample multirespondent households, (households which included supplemental members aged sixty-five years or older).

Appendix C contains copies of these materials.

The training materials addressed the context for this survey, questionnaire construction, and gaining the respondent's cooperation. Each interviewer received a training manual with survey procedures, question-by-question specifications, a glossary of key terms, and background materials such as relevant journal articles. The survey team also produced questionnaire exercises, mock interviews, occupational coding exercises, and journal as on occupational coding and "the most common questions asked by respondents".

3.4 Selection and Training of Interviewers

Telephone interviewers for the NHS included two NORC-experienced interviewers and ten interviewers hired specifically for this survey. New hires were recruited by placing ads in local newspapers and with various university job placement centers.

The NHS training was conducted on October 22 and 23, 1990. New interviewers received one additional day of training on basic interviewing techniques. The training covered three main areas:

- Background, design and objectives of the NHS.
- . Gaining cooperation from the respondent and gatekeeper.
- Questionnaire administration.

During the first day of training, interviewers were introduced to the origin of the survey, its sample composition, and relevant health policy issues. This module was delivered by Colleen McHorney, Co-Projector from The Institute for the Improvement of Medical Care and Health. Interviewers were also given techniques for gaining cooperation including strategies for contacting the respondent. Then, interviewers received instruction and practice with the questionnaire such as skip patterns, and the substantive issues addressed by each section. Lastly, interviewers were trained on coding the respondent's occupation.

During the second day of training, on-line CATI training was provided.

Interviewers in pairs conducted mock interviews using the CATI instrument.

Before beginning their telephone assignments, each interviewer conducted a CATI interview by telephone with a supervisor. Feedback was provided to the interviewer at the close of the session.

Data collection began with a staff of twelve interviewers, two of whom were NORC-experienced and ten were new.

4.1 Overview

In order to investigate the relative merits of two data collection methodologies, the NHS was designed as two parallel surveys. The Mail Survey, which contained 80 percent of the sample, included a self-administered questionnaire (SAQ) with telephone followup. SAQ's were data entered using computer-assisted data entry (CADE). The Telephone Survey contained 20 percent of the sample. This component of the survey was conducted at NORC's centralized telephone facility, and was administered using computer-assisted telephone interviewing (CATI).

4.1.1 Comparative Schedules and Strategies

The data for the NHS were collected between October 15, 1990, and December 22, 1990. The schedule for both surveys was designed so that at least 50 percent of the data collection period in both components overlapped. The data collection field period was ten weeks for the Mail Survey and eight weeks for the Telephone Survey.

The strategy for the Mail Survey was to obtain the highest yield from mail questionnaires along with a telephone followup of nonresponders. Prior to the telephone followup, a second mailing to nonresponders was implemented. The strategy for the Telephone Survey was to interview respondents by telephone and only use mail questionnaires for respondents who could not be located or specifically requested to complete the interview by mail.

At the onset of the data collection period, strategies for both surveys were different as a function of the data capture modes. However, once the

telephone followup of nonresponders for the Mail Survey began, strategies such as locating and refusal conversion were parallel.

4.1.2 Survey Management System (SMS)

The principal case management tool of the survey, the SMS, was an automated database designed as a vehicle for collecting and monitoring receipt control, locator, sample, and other types of information. On the NHS, it tracked all events associated with a certain case, such as date of receipt, outcome, and actor. In particular, the SMS was designed to record the actual data capture mode in which the NHS interview was completed.

One of the features of the SMS was its reporting options. A management or data collection report (see Appendix D) was programmed into the SMS and generated each week of the field period. The data collection report was a cross-tabulation of survey component by collapsed case disposition codes. Included in the report was a breakdown of response rate by sampled versus actual data capture mode.

4.2 Mail Survey

4.2.1 First and Second Mailings

The Mail Survey was designed as two waves of mailings with a mail prompt occurring between the two waves. An incentive fee of \$2 was only provided to Mail Survey respondents. The first of the two mailings occurred on October 15, 1990. Each respondent received an SAQ on buff colored paper, the \$2 incentive fee, and a business reply envelope. A respondent letter printed on NORC letterhead constituted the cover of the SAQ. The letter described the purpose of the survey, NORC, and how they were selected that is a reminder about their participation in the GSS. The outgoing First Class envelopes were stamped "Address Correction"

Requested," so that notification of new addresses from the Post Office would be received. The mailing label included a case identifier along with the respondent's name and address. A separate case identifier label was affixed to the back of the SAQ. For multirespondent households, it was necessary to also provide a name label on the back of the SAQ in order to associate the data with the correct respondent (and for the respondent to complete the correct SAQ).

The mail prompt, a postcard (see Appendix C), was sent to all households ten days after the initial mailing, on October 25, 1990. This postcard served a dual purpose. It was a reminder for those respondents who had not yet returned their questionnaire and a thank you for those who had participated.

A second mailing of the SAQ was sent on November 7, 1990, to the 1,241 respondents who had not yet returned their SAQ's. The questionnaire for the second mailing was printed on gray paper to distinguish it from the buff color paper of the initial SAQ. The respondent letter printed on the cover of this SAQ was different than the former letter. An incentive was not included in the second mailing.

4.2.2 Mail/Telephone Followup

Telephone followup for the Mail Survey nonrespondents began on November 20, 1990. If nonresponders reported that they had recently mailed their SAQ, this prompting call constituted our only immediate action. However, if the questionnaire was not received in the ensuing seven to ten days, another call was made to attempt to complete the questionnaire by telephone. Alternatively, if on the initial telephone contact, nonresponders reported that they had not completed the SAQ, the interviewer sought to conduct the interview by telephone at that time.

Telephone interviewing for the Mail Survey followed the same protocol used for the Telephone Survey and is discussed below in Section 4.3.1.

4.3 Telephone Survey

4.3.1 Basic Processes in Implementing NHS CATI

As mentioned in Section 4.1, data collected by telephone was captured using CATI. All telephone sampled households received an advance letter describing the purpose of the survey, NORC, and how they were selected. Multirespondent households received an advance letter similar in content, but specifying an interest in interviewing all household members aged sixty-five years or older in addition to the former GSS respondent.

Hardcopy call records contained basic sample information such as the name, address and telephone number of the respondent. Interviewers recorded information such as date, time, and outcome of each contact on the call record. Maintaining careful record of all contacts and the most appropriate time to make further callbacks was crucial on the NHS since the data collection field period was short—approximately eight weeks. Thus, if a case was called in the late afternoon and evening without an answer, the case would next be assigned during weekend or morning hours.

Case assignments were made at the beginning of each shift. Supervisors managed case flow by reviewing the call records and filing them according to the day of the week and the time of day of the next call. The call records were assigned priorities based on the outcome of the last call.

Telephone interviewing was conducted between the hours of 9 am and 9 pm CST Monday through Friday, 9 am through 5 pm Saturday, and 1 pm through 9 pm Sunday. If a respondent requested to be interviewed during "off hours," a telephone

interviewer or supervisor would complete the interview at home using a hardcopy telephone version of the questionnaire.

Two telephone supervisors worked schedules that ensured the presence of at least one supervisor during interviewing hours. The supervisors were responsible for managing the flow of cases, monitoring the quality of the interviewing, and troubleshooting problems.

4.3.2 Telephone Locating Activities

As with most surveys, locating played an important role in the data collection process. All locating activities were carried out by telephone. Given the small telephone sample size, most locating problems were identified within the first week of data collection and the locating effort for the Telephone Survey began immediately thereafter. On the Mail Survey, the extent of locating cases became evident once the telephone followup of nonresponders was implemented.

The locating protocol for both the Mail and Telephone Surveys followed these three steps:

- Call directory assistance.
- . Check returned envelopes for forwarding address information.
- Review the 1990 GSS case, locator page, and call record for possible locating leads. (Specific information about the person who would always know the whereabouts of the GSS respondent was collected as part of the 1990, but not 1989, GSS interview.)

Further locating measures were taken on problem cases, especially calls to criss-cross directory. However, extra measures were discontinued when the yield proved low and not cost-effective. Since NORC did not have the Social Security numbers for sampled respondents, which most locating agencies require, we were not able

to use outside locating vendors, a strategy which has proved useful on some surveys.

By the end of the data collection field period, 89 percent of the sample had been successfully located. Thus, the unlocatable rate was 11 percent overall--10.6 percent for the Mail Survey and 12.5 percent for the Telephone Survey.

4.3.3 Refusal Aversion and Conversion Strategies

Interviewers took various measures to avert refusals on the NHS. All interviewers were trained to respond to concerns or issues raised by reluctant respondents such as "I'm too busy," "Why should I participate?," and "How did you get my name?"

All interviewers working virgin cases were trained to leave the door open for trained convertors by not pressuring the respondent to participate. If the respondent refused, interviewers probed for the reason for refusal. This information helped the supervisors and interviewers prepare subsequent case-by-case refusal conversion strategies.

NHS respondents who initially refused to cooperate gave reasons which are familiar to those who conduct social research such as too busy or not interested. Some also cited the length of the previous GSS interview, which had averaged 1.5 to 2 hours.

Three NORC-experienced interviewers were chosen as refusal convertors for the NHS. These interviewers received the same project-specific training as discussed in Section 3.4.

When a respondent refused, the initial step was to send a personalized conversion letter (see Exhibit 4-1). The second step, occurring five days later, was to follow up the conversion letter with another telephone contact. During



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Exhibit 4-1 Refusal Letter

November 21, 1990

John Doe 1155 East 60th Street Chicago, IL 60637

Dear John Doe:

I understand from one of our interviewers that you do not wish to participate in the National Health Survey. I thought perhaps if you knew more about the importance of your contribution you might be willing to reconsider.

You are vital to the success of this important research project because you are part of a sample that has been designed to represent everyone in the United States. The study will represent people in all age and income groups, people who are in good health and people who are not. If you, as a selected respondent, do not participate, you and the other Americans who are like you will not be represented. Health care has become a major, national problem. If we are to accurately reflect the status of the health care of all Americans, we need your help.

This brief telephone interview will take about 20 minutes and can be scheduled at any time that is convenient for you. Of course we will respect your wishes in this matter, but I have asked another interviewer to call you shortly after you have received this letter. I do hope you will see the value in this much needed research and agree to participate in this survey.

Thank you for your consideration.

Sincerely,

Richard Rubin Project Director

RR:rdc

this call, the telephone convertor assertively attempted to address the concerns of the respondent while explaining the importance of the NHS and the respondents' critical role in the success of the project. This same strategy was employed for respondents in the Mail Survey who had refused to participate.

The overall cooperation rate for the NHS, that is, the ratio of completed interviews to all contacted cases capable of being interviewed, was 92.5 percent. For the Telephone Survey, the cooperation rate was 85.4 percent and for the Mail Survey, 94.2 percent.

4.4 Survey Results

4.4.1 Response Rates

The NHS achieved an overall response rate of 77.1 percent. Table 4-1 presents response rates by survey component. It shows that a substantially higher response rate was obtained on the Mail Survey, (79 percent) than on the Telephone Survey (68.8 percent). Response rates were calculated as the ratio of completed interviews to all sampled cases excluding out of scope cases.

Table 4-1
Response rates by survey component

Survey	Sample	Out of scope	Completed interviews	Response rate
Mail	2,597	33	2,030	79.2
Telephone	654	9	444	68.8
Overall	3,251	42	2,474	77.1

Table 4-2 presents response rates by original sample type and actual mode of administration. A total of 1,669 cases or 65.1 percent of the Mail Survey sample were completed by mail. Another 361 sampled mail cases (14.1 percent) were obtained by telephone. For the Telephone Survey, 421 telephone cases or 65.3 percent were completed in the original telephone mode. The remaining 23 sampled telephone cases (3.6 percent) were obtained by mail.

Table 4-2

Response rates by original and actual survey mode

Actual mode of administration										
Original sample	Completed by mail	Response rate	Completed by phone	Response rate						
Mail	1,669	65.1	361	14.1						
Telephone	23	3.6	421	65.3						
Total	1,692	52.7	782	24.4						

Table 4-3 displays response rates by type of survey respondent (GSS versus elderly). Included in the table is the final outcome of each case. There was substantial variation among the 1989 and 1990 GSS respondents, 72.7 and 82.6 percent respectively. The overall response rate obtained for the oversample of elderly was 75.1 percent, with negligible variation among 1989 and 1990 households.

Table 4-4 compares response rates by household level and respondent level.

Of interest, is the response rate among members in a multirespondent household.

Table 4-3
Response rates by survey respondent

Survey respondent	Sample	Out of scope	Ref	Unloc	Other NIR	No. NHS completes	Response rate
GSS Respondent							
1989	1,537	22	94	246	75	1 100	72.6
1990	1,372	7	72	26	69	1,127	82.6
Subtotal	2,909	29	166	343	144	2.227	77.3
Sixty-five or older							
1989	202		17	01	22	:42	74.3
1990	140	2		4	12	105	76.1
Subtotal	342	13	34	41	34	247	75.1
Total	3,251	42	200	357	178	2,474	17.1

Other noninterviews (NIR) include physically incapacitated, language barriers, and unavailable.

Response rate is calculated as the ratio of completed interviews to total sample size excluding out of scope cases.

2

Table 4-4
Response rates by household and respondent levels

respgnse rate R level 77.8 61.1 77.2 33.3 interviews completed R level 1,981 470 22 2,474 No. Rs 626 in I 39 4 2,582 3,251 respgnse rate HH level 77.2 9.07 0.00 76.4 46.2 interviews completed HH level 1,981 222 2,209 ئ = 313 2,582 13 2,909 Š Į Household Total size

Household level completed interviews includes only those households where all respondents contained in the household completed an interview. Excludes out of scope respondents contained in the households.

of out Response rate is calculated as the ratio of completed household interviews to households sampled. Note that scope households for size = 1 is 16.

Response rate is calculated as the ratio of completed interviews to the total sample size excluding out of scope cases. Note that the out of scope respondents are as follows: size = 1, n = 16; size = 2, n = 22; size = 3, n = 3; and size = 4, n = 1. က

That is, the likelihood of all members participating given a "foot in the door" or the fact that at least one member had already participated. For this survey, as the number of eligible respondents per household increased, there was a decreasing likelihood of obtaining interviews with all eligible members in the household.

With respect to the respondent level, respondents in either one or two member households were just as likely to participate in the survey, 77.2 and 77.8 percent respectively.

4.4.2 Discussion of Survey Results

As discussed previously, the NHS was in part a methodological experiment designed to assess the virtues of interviews completed by different data capture modes. Based upon the response rates obtained for this survey, respondents in the Mail Survey were more inclined to participate than those in the Telephone Survey. The substantial variation in response rates obtained (79 versus 68 percent) is somewhat counterintuitive and warrants further investigation to explain potential differences between responders and nonresponders. The NHS final datafile which includes complete GSS data for the respective years will provide analysts with the opportunity to perform such analyses.

In the absence of such analyses or statistical tests, we can cite three operational procedures which may have inadvertently affected the response rates obtained for the surveys. The first factor was the use of prepaid incentives. Only Mail Survey respondents received an incentive fee of \$2. This incentive was provided up front in the initial mailing. The survey literature documents the success of an enclosed monetary incentive—they yield higher response rates (for example, see Armstrong, 1978; Dillman, 1978; and Berry and Kanouse, 1987).

The second factor was that respondents in the Mail Survey received the benefit of two modes of administration. Five weeks after the initial mailing, nonrespondents from the Mail Survey were actively pursued by telephone. The telephone contacts either prompted nonresponders to mail back their SAQ's or was the occasion for completing the interview by telephone. Thus, a considerable number of Mail Survey cases were ultimately completed by telephone (n = 342, 14.1 percent). Nonrespondents in the Telephone Survey were not actively pursued by mail. Only respondents who explicitly stated that they would not complete the interview by telephone or could not due to poor hearing were mailed an SAQ. In addition, those without telephones were mailed an SAQ to the last known address.

The final factor was that Mail Survey respondents were able to view the questionnaire prior to participation and thus assess the level of burden. They could clearly discern that the NHS questionnaire (about twenty minutes) was less than one fourth the length of the GSS interview (about 1.5 hours). Telephone Survey respondents were not afforded this same opportunity. Even though respondents in both surveys were told the approximate length of the NHS interview, Telephone Survey respondents may still have been wary.

4.4.3 Cost Per Case Comparison

To further evaluate the merits of different data capture methodologies, NORC calculated data collection costs per case by data collection mode. The two modes of administration were defined as follows:

- The Mail Survey cost per case included all efforts to complete an interview with a selected respondent. Specifically, all prompting and subsequent telephone interviewing with respondents from this sample was included.
- The Telephone Survey cost per case included all efforts to complete an interview with a selected respondent from this sample. Thus, interviews completed by mail were included.

The data collection cost per completed interview includes costs associated with the data collection effort only and excludes prefield activities such as materials development and the pretests. The cost per case figure was the ratio of data collection costs to the number of completed interviews. The items used in this calculation were the variable costs that were case driven such as interviewing and data entry.

Table 4-5 displays the unit cost per case by data collection mode. The data collection cost per case for the Mail Survey (\$39.79) was substantially lower than that of the Telephone Survey (\$70.35), on the order of 57 percent.

Table 4-5
Unit cost per case comparison

Survey	Data collection cost per case				
Mail	\$39.79	-			
Telephone	\$70.35				

5.1 Data Capture

Data for the NHS was captured using computer-assisted telephone interviewing (CATI) and self-administered questionnaires. Data collected from SAQ's were data entered using computer-assisted data entry (CADE).

The CATI/CADE system used for the NHS was a microcomputer-based system running on NORC's local area network. The CATI and CADE components of the system were designed as parallel systems. They were programmed from the same source, and all programmed range and consistency checks were identical. The only difference between the two systems was that at the point of entry only CADE would allow missing values to be entered into the system.

The CATI/CADE screens displayed questions, responses, and interviewer instructions. Key features of the system included:

- Maneuverability. The interviewer/CADE operator had the ability to move backwards to previous items to verify or change the information entered without affecting other data.
- Programmed skip patterns/text changes. Skip patterns and variation in question text were programmed into the system, thus greatly reducing the potential for error.
- Online consistency checks. Intrasection consistency checks at key questions alerted the interviewer/CADE operator that inconsistent information had been entered and returned the interviewer/CADE operator to the original questions to reconcile. In addition, checks at all items ensured that only correct ranges and legal response values were entered.
- Comment functions. Screens with boxes for entry of respondent verbatim comments were triggered automatically by an "Other specify" response and other key items. In addition, interviewers/CADE operators were able to call up a screen for entry of verbatim comments at any item.

The hardcopy questionnaire was translated into a preliminary CATI/CADE version by a programmer working in close coordination with the questionnaire

team. All text and design features of this version were tested by NORC project personnel. Subsequently minor revisions were made to the CATI/CADE program.

5.2 CADE

As mentioned in Section 5.1, SAQ's were CADEd upon receipt in the central office. The CADE supervisor randomly selected ten percent of each CADEr's work for verification. Verification was conducted on a case by reentering the entire questionnaire. NORC's CADE system automatically generated error reports based on the outcome. The error rate for all CADEd cases (n = 1,669) was 0.19 percent.

5.3 Editing and Coding of the Data

Telephone interviewers received supplemental training and materials to code the occupation question (Q 40). During the first two weeks of data collection, 100 percent of all occupation coded items were reviewed by a supervisor. Thereafter, ten percent of all telephone cases were reviewed, and items coded incorrectly were recoded appropriately. The complete verbatim as provided by the respondent was included in the final datafile. Thus, further cleaning or recoding of this item by analysts is possible.

A request for a policy decision for SAQ cases was forwarded by the CADE supervisor to the Survey Director for a policy decision and/or problem resolution. Section 5.3.1 below summarizes the coding decisions.

5.3.1 Coding Decisions

In general, the nature and scope of coding decisions was minimal. The following questions required a policy decision:

- Q 14i, other chronic medical conditions. CADEr's were instructed to recode this question to "yes" if the respondent had circled "no" but entered verbatim medical conditions not previously reported in Q 14 a-h. Similarly, CADEr's were instructed to recode this question to "no" if the respondent circled "yes" but entered verbatim medical conditions that were previously reported in Q 14 a-h.
- Q 32, household enumeration. CADEr's were instructed to zero fill response categories if at least one response was recorded by the respondent. If all responses were left blank, the CADEr's were instructed to enter the missing data reserved code. So for example, if the respondent entered "l" for spouse/partner and left the remaining responses blank (children, relatives, etc.), the CADEr zero filled.
- Q 39, employment. Two respondents circled both working part-time and retired. They both provided information for the subsequent items, Qs 40 and 41 a-p. The CADEr was instructed to enter part-time at Q 39 and the remaining items provided by the respondent.

5.4 Data Cleaning

The CATI/CADE system automatically performed most of the data cleaning by means of the programmed checks for valid responses and ranges. A minimal "backend" cleaning effort was carried out for the NHS data. Specifically, a frequency review of the data was conducted to ensure proper skip patterns and that valid responses and ranges were followed.

6.

6.1 Datafile

In addition to the NHS questionnaire data, the datafile for the NHS includes the following variables from the Survey Management System:

Final Datafile

- Original sampled data collection mode.
- . Actual data collection mode in which NHS interview was completed.
- . Interviewer or CADE operator ID number.
- Final case disposition or outcome.

Noninterview cases were also included in the final datafile.

6.2 Linkage to GSS Data

A special feature of the NHS, which further augments its value to the analyst, is linkage between the GSS dataset and the NHS data set. Specifically, the complete public use data for the 1989 and 1990 GSS has been appended to the NHS datafile. For each NHS sampled case, the corresponding GSS data has been provided.

Appendix A: Mail Questionnaire

University of Chicago

NORC

A Social Science Research Center 1155 East 60th Street, Chicago, Illinois 60637

NATIONAL HEALTH SURVEY

October 12, 1990

Dear Social Survey Respondent:

As you know, billions of dollars are spent each year on medical care. There is a serious lack of current data on people's state of health, and how well they are able to get along in their day-to-day lives. This is your opportunity to inform the people who make decisions about the role physicians and the medical community should take in improving the general health of people like yourself.

At some time in the past two years, one of our interviewers called at your home and conducted an interview with you on such topics as housing, parenthood, working women, politics, crime and various federal policies. Your thoughtful answers are helpful to policy makers in gauging American's attitudes and finding out what is important to them.

We are asking you to help us again by completing this National Health Survey questionnaire and returning it to us as soon as possible in the postage-paid envelope.

NORC has been conducting this kind of not-for-profit social research for nearly 50 years. We are absolutely committed to the rigorous protection of our respondents' confidentiality. The questionnaire has an identification number so we can check it off our list when it is returned. Your name will never be associated with the answers that you provide.

To find out about the health of Americans, we need to collect the information from you directly--for you alone know how you feel and how you're getting along these days. As a token of our appreciation, we are enclosing a two dollar bill which we hope will serve to remind you of both the urgency and the importance of your participation.

Sincerely,

Richard Rubin Project Director

P.S. How about taking a few minutes to complete the questionnaire right now while it's fresh in your mind?

Instructions For Completing The National Health Survey

Please answer every question. Some questions may look like others, but each one is different. Please take the time to read and answer each question carefully by circling the appropriate number or by filling in the answer as requested. Arrows are sometimes used to direct you to the next question you should answer based on a particular response.

EXAMPLE QUESTIONS

1. How long has it been since you last stayed overnight in a hospital?

 Less than 3 months
 ...1

 Between 3 and 6 months
 ...2

 Between 6 and 12 months
 ...3

 Between 1 and 2 years
 ...4

 More than 2 years
 ...5

 Never
 ...6

2. Thinking about your own medical care, please indicate how much you agree or disagree with each statement.

(circle one number on each line)

				,	
	STRONGLY AGREE	AGREE	UNCERTAIN	DISAGREE	STRONGLY DISAGREE
a. There are some things about the medical care I receive that could be better.	1	2	3	4	5

IF YOU HAVE ANY QUESTIONS, PLEASE CALL SURVEY COORDINATOR, KEVIN JACK, TOLL-FREE AT: 1-800-878-2448.

THANK YOU FOR TAKING PART IN THIS SURVEY.

Section 1: HEALTH AND DAILY ACTIVITIES

These questions are about your health \underline{now} and your $\underline{current}$ daily activities. Please try to answer every question as accurately as you can.

1.	What is today's date?	Write in the date:	/		1
	·		MONTH	DAY	YEAR
		•			
2.	In general, would you say your he	ealth is:			
					(circle one)
		Excellent .			1
		Very good .			2
		Good			3
		Fair			4
		Poor			5
3.	Compared to one year ago, how v	vould you rate your	health in gene	ral now?	
					(circle one)
		Much better	now than one	year ago	1
		Somewhat be	etter now than	one year	ago 2
		About the sar	me as one yea	rago .	3
		Somewhat w	orse now than	one year	ago 4
		Much worse	now than one	year ago	5

4. The following items are about activities you might do during a typical day. Does your health now limit you in these activities? If so, how much?

(circle one number on each line)

	ACTIVITIES	YES, LIMITED A LOT	YES, LIMITED A LITTLE	NO, NOT LIMITED AT ALL
a.	Vigorous activities, such as running, lifting heavy objects, participating in strenuous sports	1	2	3
b.	Moderate activities, such as moving a table, pushing a vacuum cleaner, bowling, or playing golf	1	2	3
c.	Lifting or carrying groceries	1	2	3
d.	Climbing several flights of stairs	1	2	3
e.	Climbing one flight of stairs	1	2	3
f.	Bending, kneeling, or stooping	1	2	3
g.	Walking more than a mile	1	2	3
h.	Walking several blocks	1	2	3
i.	Walking one block	1	2	3
j.	Bathing or dressing yourself	1	2	3

5. During the <u>past 4 weeks</u>, have you had any of the following problems with your work or other regular daily activities <u>as a result of your physical health?</u>

		YES	NO
a.	Cut down the <u>amount of time</u> you spent on work or other activities	1	2
b.	Accomplished less than you would like	1	2
c.	Were limited in the kind of work or other activities	1	2
d.	Had difficulty performing the work or other activities (for example, it took extra effort)	1	2

6. During the past 4 weeks, have you had any of the following problems with your work or other regular daily activities as a result of any emotional problems (such as feeling depressed or anxious)?

(circle one number on each line)

		YES	NO
	t down the amount of time you spent on work or er activities	1	2
b. Acc	complished less than you would like	1	2
c. Die	ln't do work or other activities as carefully as usual	1	2

7.	During the past 4 weeks, to what extent has your physical health or emotional problems
	interfered with your normal social activities with family, friends, neighbors, or groups?

(circle one)

Not at all											•	•	•			•	. 1	
Slightly .	•										•	•					. 2	
Moderately								•				•		•		•	. 3	
Quite a bit		•	•	•		•	•			•	•	•		•	•	•	. 4	•
Extremely			•	•													. 5	

8. How much bodily pain have you had during the past 4 weeks?

(circle one)

None	
Very mild	2
Mild	}
Moderate	1
Severe	j
Very severe	5

9.	During the <u>past 4 weeks</u> , how much did <u>pain</u> interfere with your normal work (includir work outside the home and housework)?	ig both
	(circ)	le one)
	Not at all	1
	A little bit	2
	Moderately	3
	Quite a bit	4
	Extremely	5
10.	During the past 4 weeks, how much of the time has your physical health or emotional pinterfered with your social activities (like visiting with friends, relatives, etc.)? All of the time	le one) 1 2 3
	None of the time	5

Section 2: YOUR FEELINGS

These questions are about how you feel and how things have been with you during the past four weeks.

11. How much of the time during the past 4 weeks -

	(chele one number on each mile)									
		ALL OF THE TIME	MOST OF THE TIME	A GOOD BIT OF THE TIME	SOME OF THE TIME	A LITTLE OF THE TIME	NONE OF THE TIME			
a.	Did you feel full of pep?	1	2	3	4	5	6			
b.	Have you been a very nervous person?	1	2	3	4	5	6			
c.	Have you felt so down in the dumps that nothing could cheer you up?	1	. 2	3	4	5	6			
d.	Have you felt calm and peaceful?	1	2	3	4	5	6			
e.	Did you have a lot of energy?	1	2	3	4	5	6			
f.	Have you felt downhearted and blue?	1	2	3	4	5	6			
g.	Did you feel worn out?	1	2	3	4	5	6			
h.	Have you been a happy person?	1	2	3	4	5	6			
i	Did you feel tired?	1	2	3	4	5	6			

Section 3: HEALTH IN GENERAL

These questions are about your health and health-related matters.

12. How TRUE or FALSE is each of the following statements for you?

(circle one number on each line)

		DEFINITELY TRUE	MOSTLY TRUE	DON'T KNOW	MOSTLY FALSE	DEFINITELY FALSE
a.	I seem to get sick a little easier than other people.	1	2	3	4	5
b.	I am as healthy as anybody I know.	1	2	3	4	5
c.	I expect my health to get worse.	1	2	3	4	5
d.	My health is excellent.	1	2	3	4	5

13. Has a doctor **EVER** told you that you had any of the following conditions?

	(01	- The manner	on cach mic)
		YES	NO
a.	Hypertension (sometimes called high blood pressure)	1	2
b.	A heart attack in the <u>last year</u> (myocardial infarction)	1	2
c.	Congestive heart failure (heart failure or enlarged heart)	1	2
d.	Diabetes (high blood sugar)	1	2
e.	Angina (An- <u>JI</u> -na or <u>AN</u> -ji-na)	1	2
f.	Cancer (except skin cancer)	1	2

14. Do you NOW have any of the following conditions?

		`	•
		YES	NO
a.	Chronic allergies or sinus trouble	1	2
b.	Arthritis of any kind or rheumatism	1	2
c.	Sciatica or chronic back problems	1	2
d.	Blindness or other trouble seeing with one or both eyes, even when wearing glasses	1	2
e.	Chronic lung disease (like chronic bronchitis, asthma, or emphysema)	1	2
f.	Dermatitis or other chronic skin rash	1	2
g.	Deafness or other trouble hearing with one or both ears	1	2
h.	Limitation in the use of an arm or leg (missing, paralyzed or weakness)	1	2
i.	Do you have any other chronic medical condition that is affecting what you do or how you feel? If yes, what are the names of the conditions that bother you most?	1	2
	Write in the names of up to four conditions that bother you	ı most.	
	Condition #1		
	Condition #2		
	Condition #3		
	Condition #4		

15. How much of the time during the past 4 weeks -

(circle one number on each line)

		()									
		ALL OF THE TIME	MOST OF THE TIME	A GOOD BIT OF THE TIME	SOME OF THE TIME	A LITTLE OF THE TIME	NONE OF THE TIME				
a.	Were you frustrated about your health?	1	2	3	4	5	6				
b.	Was your health a worry in your life?	1	2	3	4	5	6				
c.	Were you discouraged by any health problems?	1	2	3	4	5	6				
d.	Did you feel weighed down by any health problems?	1	2	3	4	5	6				

16. Please answer each of the following questions by circling 1 for YES or 2 for NO.

		YES	NO
a.	In the past year, have you had 2 weeks or more during which you felt sad, blue, or depressed; or when you lost all interest or pleasure in things that you usually cared about or enjoyed?	1	2
b.	Have you had 2 years or more in your life when you felt depressed or sad most days, even if you felt okay sometimes?	1	2
c.	Have you felt depressed or sad much of the time in the past year?	1	2

Section 4: YOUR LIFE IN GENERAL

The next set of questions is about your life as a whole.

17. All things considered, how would you rate the following areas of your life?

	POOR	FAIR	GOOD	VERY GOOD	EXCELLENT
a. Your neighborhood as a place to live in	1	2	3	4	5
b. Your house or apartment	1	2	3	4	5
c. Your standard of living	1	2	3	4	5
d. Your financial situation	1	2	3	4	5
e. Your family life	1	2	3	4	5
f. Your friendships	1	2	3	4	5

18.	How happy, satisfied, or pleased have you been with your personal life during the past 4 weeks?
	(circle one)
	Extremely happy, could not have been more satisfied or pleased 1
	Very happy most of the time
	Generally satisfied, pleased
	Sometimes fairly satisfied, sometimes fairly unhappy
	Generally dissatisfied, unhappy most of the time

19. People sometimes look to others for companionship, assistance, or other types of support. How much of the time is each of the following kinds of support available to you if you need it?

		(======================================				
		NONE OF THE TIME	A LITTLE OF THE TIME	SOME OF THE TIME	MOST OF THE TIME	ALL OF THE TIME
a.	Someone to get together with for relaxation	1	2	3	4	5
b.	Someone to help with daily chores if you were sick	1	2	3	4	5
c.	Someone to turn to for suggestions about how to deal with a personal problem	1	2	3	4	5
d.	Someone to love and make you feel wanted	1	2	3	4	5
e.	Someone to confide in or talk to about yourself or your problems	1	2	3	4	5

20.	In general, how much stress or pressure har past 4 weeks?	ve you experienced in your daily living in the
ź		(circle one)
•	No	one
	A	little
	\mathbf{A}	good bit
	Qu	nite a bit4
	A	great deal5
21.	To what extent do you feel that the stress o your health?	or pressure you have experienced in your life has affecte
		(circle one)
	No	ot at all1
	Sli	ightly
	M	oderately3
	Qu	uite a bit
	Ех	stremely
22.	In the <u>last year</u> , have any of your family m	embers died?
		o
	Ye	es
		Ţ
	1	If YES, how was that person related to you?
	9	(circle all that apply)
	ſ	Husband or wife . 1
		Father or mother . 2
		Child 3
		Brother or sister . 4
		Other relative 5

23.	Is there a particular doctor's office, clinic, health center, or other place that you u if you are sick or need advice about your health?	sually go to
		(circle one)
	Yes	1
	No	2
24.	Is there one doctor in particular you usually see at the place you usually go to for	medical care?
		(circle one)
	Yes	1
	No	2
	I do not have a regular place where I get medical care	3
25.	How long has it been since you last visited a medical doctor?	(circle one)
	Less than 1 month	1
	Between 1 and 3 months	2
	Between 3 and 6 months	3
	Between 6 and 12 months	4
	Between 1 and 2 years	5
	More than 2 years	6
26.	Thinking about your own medical care, please indicate how much you agree or d statement.	isagree with eacl
	(circle one number on each line)	

		(**************************************				
		STRONGLY AGREE	AGREE	UNCERTAIN	DISAGREE	STRONGLY DISAGREE
a.	I am very satisfied with the medical care I receive.	1	2	3	4	5
b.	I am in better health now because of the medical care I have received.	1	2	3	4	5

27. When you visit a doctor, how often does the doctor ask you whether -

(circle one number on each line)

		EVERY VISIT	MOST VISITS	SOME VISITS	RARELY	NEVER
a.	Your health limits your ability to perform everyday physical activities (such as walking, climbing stairs, or lifting objects)?	1	2	3	4	5
b.	Your physical health limits you in carrying out your regular daily responsibilities (such as work, housework, or child care)?	1	2	3	4	5
c.	Your physical health interferes with your usual social activities with family and friends?	1	2	3	4	5

28. Think about your usual daily activities, including the physical and social activities you do each day and your regular responsibilities.

	(encle one named on each me)					
		DEFINITELY YES	PROBABLY YES	UNCERTAIN	PROBABLY NOT	DEFINITELY NOT
a.	Do you think your doctor considers your usual daily activities when advising you?	1	2	3	4	5
b.	Do you want your doctor to ask you about your usual daily activities?	1	2	3	4	5
c.	Would you be willing to fill out a survey at each visit to tell your doctor about how your physical health limits your usual daily activities?	1	2	3	4	5
d.	Do you think this type of information should be kept in your medical record?	1	2	3	4	5

29. When you visit a doctor, how often does the doctor ask you whether -

(circle one number on each line)

		EVERY VISIT	MOST VISITS	SOME VISITS	RARELY	NEVER
a.	You are feeling sad, depressed, or anxious?	1	2	3	4	5
b.	Emotional problems limit you in carrying out your regular daily respon- sibilities (such as work, housework, or child care)?	1	2	3	4	5
c.	Emotional problems interfere with your usual social activities with family and friends?	1	2	3	, 4	5

30. Think about how you feel emotionally, including feelings of depression or anxiety or feeling that you have nothing to look forward to.

		DEFINITELY YES	PROBABLY YES	UNCERTAIN	PROBABLY NOT	DEFINITELY NOT
a.	Do you think your doctor considers how you feel emotionally when advising you?	1	2	3	4	5
b.	Do you want your doctor to ask you about how you feel emotionally?	1	2	3	4	5
c.	Would you be willing to fill out a survey at each visit to tell your doctor about how you are feeling emotionally?	1	2	3	4	5
d.	Do you think this type of information should be kept in your medical record?	1	2	3	4	5

31. What is your mari	ital status?	·
		(circle one)
	Never married	1
	Married	2
	Divorced	3
	Separated	4
	Widowed	5
		If Widowed:
		\Box
		Please write in the year you became widowed:
		19
	e now live in your household other than yourself? (Wr the following categories. If no one in a category lives	
	Spouse/Partner	
	Children	
	Parents	
	Other relatives	
	Non-relatives	

33.	What is the date of your birth?	Write	in your dat		MONTH	DA		EAR	
34.	Are you -								
							(ci	rcle o	one)
		Mal	e					. 1	
		Fem	iale			• • •		. 2	
35.	What is your main racial or ethnic gro	ານກ?							
		- - -					(ci	rcle o	one)
	White or Caucasian, but not H	lispanic	or Latino					. 1	
	Black or African-American, b	ut not F	Hispanic or	Latino				. 2	
	Hispanic or Latino								
	-					•			
	Other	• • • •	• • • • •	• • • • •	• • •	• • •	• • • •	. 5	
36.	What is the <u>highest</u> year of school or	college	you have <u>e</u>	<u>ver</u> comple	eted?				
		(circle	one number)		•			
	1 2 3 4 5 6 7	8	9 10	11 12	13	14	15	16	16+
	Grade School		High	School		Col	lege		Post Graduate
									•

37.	What is your religious preference?		
			(circle one)
		Protestant	1
		Catholic	2
		Jewish	3
		None	4
		Other (Specify)	5
38.	How often do you attend religious serv	ices?	
			(circle one)
		Never	1
		Less than once a year	2
		About once or twice a year	3
		Several times a year	4
		About once a month	5
		2-3 times a month	6
		Nearly every week	7
		Every week	8
		Several times a week	9

39.	Are	you -
		(circle one)
		Working at a paying job <u>full-time</u>
		Working at a paying job part-time
		Retired
		Laid-off or unemployed, but looking for work
		A full-time homemaker
		Other
40.	Whathe	at kind of work do you (or did you) do? (If you work two or more jobs, please tell us only about job at which you spend the most hours per week.) Is your work classified as:
		(circle one)
	1.	Professional or Technical
	2.	Managers and Administrators (except farm)
	3.	Sales Workers
	4.	Clerical Worker
	5.	Craftsmen
	6.	Operatives (except transport)
	7.	Transport Equipment Operatives
	8.	Farmers and Farm Managers
	9.	Service Worker (except private household)
	10.	Private Household Worker

IF YOU ARE <u>CURRENTLY</u> WORKING FOR PAY, PLEASE CONTINUE WITH QUESTION 41. OTHERWISE, GO TO LAST PAGE, PAGE 21.

41. The following questions ask about different aspects of your current job. Please indicate how much you agree or disagree with each of the following statements.

		STRONGLY DISAGREE	DISAGREE	UNCERTAIN	AGREE	STRONGLY AGREE
a.	My job involves a lot of repetitive work.	1	2	3	4	5
b.	On my job, I have a lot of freedom to decide how I do my work.	1	2	3	4	5
c.	I have a lot of say about what happens on my job.	1	2	3	4	5
d.	I have an opportunity to develop my own special abilities.	1	2	3	4	5
e.	My job requires working very hard.	1	2	3	4	5
f.	I am asked to do an excessive amount of work.	1	2	3	4	5
g.	I have enough time to get the job done.	1	2	3	4	5
h.	I am free from conflicting demands that others make.	1	2	3	4	5
i.	My job requires long periods of intense concentration on the task.	1	2	3	4	5
j.	My job is very hectic.	1	2	3	4	5

Please indicate how much you <u>agree</u> or <u>disagree</u> with each of the following statements.

				, 1141110C1 O11		
		STRONGLY DISAGREE	DISAGREE	UNCERTAIN	AGREE	STRONGLY AGREE
k.	I am often required to work for long periods with my body in physically awk- ward or tiring positions.	1	2	3	4	5
1.	My job security is good.	1	2	3	4	5
m.	My supervisor is helpful in getting the job done.	1	2	3	4	5
n.	People I work with are helpful in getting the job done.	1	2	3	4	5
0.	My prospects for career development and promotions are good.	1	2	3	4	5
p.	In five years, my skills will still be valuable.	1	2	3	4	5

LAST PAGE

So that we can continue to send you information about the National Health Survey even if you move, please provide the name, address, and telephone number of a person who does not live with you, but will always know where you are. NAME: ______ ADDRESS: PHONE NUMBER: (_____) _____ AREA CODE RELATIONSHIP TO YOU: **COMMENTS:** Do you have any comments about this questionnaire? We welcome your comments about the questionnaire in general or about specific questions, especially any that were unclear or confusing to you.

THANK YOU FOR COMPLETING THIS QUESTIONNAIRE.

Please return your completed questionnaire in the enclosed prepaid envelope addressed to:

NORC University of Chicago 1155 East 60th Street Chicago, Illinois 60637 CASE ID

Appendix B: Telephone Questionnaire

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NEWSCRNS. TXT

These first questions are about your health now and your current	daily activities. Please try to answer every question as accurately	
Your	Si O	
and	esti	
30	<u>у</u>	
el th	ever	
r he	SWer	
λ γο	0 an	
about	tryt	
are	ase	
ions	ž	
quest	ties.	
rst	tivi	an.
Ţ	/ ac	2
hese	<u>:</u>	as you can.
-	Q	0

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In general, would you say your health is. . .

1 excellent
2 very good
3 good
4 fair
5 poor?

5

Compared to one year ago, how would you rate your health in general now? Would you say it is . . .

1 much better now than one year ago
2 somewhat better now than one year ago
3 about the same as one year ago
4 somewhat worse now than one year ago
5 much worse now than one year ago

Now I'm going to read a list of activities that you might do during a typical day. As I read each item, please tell me if your health now limits you a lot, limits you a little, or does not limit you at all in these activities.

...moderate activities, such as moving a table, pushing a vacuum cleaner, bowling, or playing golf. Does your health now limit you a lot, limit you a little, or not limit you at all?

6

IF R SAYS S/HE DOES NOT DO ACTIVITY, PROBE: is that because of your health?

YES, LIMITED A LOT YES, LIMITED A LITTLE NO, NOT LIMITED AT ALL -05

6

...lifting or carrying groceries. Does your health now limit you a lot, limit you a little, or not limit you at all?

IF R SAYS S/HE DOES NOT DO ACTIVITY, PROBE: Is that because of your health?

YES, LIMITED A LOT YES, LIMITED A LITLE NO, NOT LIMITED AT ALL -25

0

First, vigorous activities, such as running, lifting heavy objects, participating in strenuous sports. Does your health now limit you a lot, limit you a little, or not limit you at all?

IF R SAYS S/HE DOES NOT DO ACTIVITY, PROBE: Is that because of your health?

YES, LIMITED A LOT YES, LIMITED A LITTLE NO, NOT LIMITED AT ALL

- ~ m

20	20
climbing several flights of stairs. Does your health now limit you a lot, limit you a little, or not limit you at all? IF R SAYS S/HE DOES NOT DO ACTIVITY, PROBE: Is that because of your health?	bending, kneeling, or stooping. Does your health now limit you a lot, limit you a little, or not limit you at all? IF R SAYS S/HE DOES NOT DO ACTIVITY, PROBE: Is that because of your health?
1 YES, LIMITED A LOT 2 YES, LIMITED A LITILE 3 HO, NOT LIMITED AT ALL	1 YES, LIMITED A LOT 2 YES, LIMITED A LITTLE 3 NO, NOT LIMITED AT ALL
20	20
climbing one flight of stairs. Does your health now limit you a lot, limit you a little, or not limit you at all? IF R SAYS S/HE DOES NOT DO ACTIVITY, PROBE: Is that because of your health?	walking more than a mile. Does your health now limit you a lot, limit you a little, or not limit you at all? IF R SAYS S/HE DOES NOT DO ACTIVITY, PROBE: Is that because of your health?
TYES, LIMITED A LOT PYES, LIMITED A LITTLE NO, NOT LIMITED AT ALL	1 YES, LIMITED A LOT 2 YES, LIMITED A LITTLE 3 NO, NOT LIMITED AT ALL
	ICT APRIM
NEWSCRWS, TXT	Page 3 of 38

6

... walking several blocks. Does your health now limit you a lot, limit you a little, or not limit you at all?

IF R SAYS S/HE DOES NOT DO ACTIVITY, PROBE: Is that because of your health?

YES, LIMITED A LOT YES, LIMITED A LITTLE NO, NOT LIMITED AT ALL -25

...walking one block. Does your health now limit you a lot, limit you a little, or not limit you at all?

4

IF R SAYS S/HE DOES NOT DO ACTIVITY, PROBE: Is that because of your health?

YES, LIMITED A LOT YES, LIMITED A LITTLE NO, NOT LIMITED AT ALL -2m

4

...bathing or dressing yourself. Does your health now limit you a lot, limit you a little, or not limit you at all?

IF R SAYS S/HE DOES NOT DO ACTIVITY, PROBE: Is that because of your health?

YES, LIMITED A LOT YES, LIMITED A LITTLE NO, NOT LIMITED AT ALL

80

The following four questions ask you about your physical health and your daily activities.

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Page 5 of 38
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ge,
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ICT APRINT

During the past four weeks, have you had to cut down the amount of time you spent on work or other regular daily activities as a result of your physical health?

8

9

During the past four weeks, were you limited in the kind of work or other regular daily activities you do as a result of your physical health?

1 YES 2 NO

YES NO

During the past four weeks, have you accomplished less than you would like as a result of your physical health?

1 YES 2 NO

912

During the past four weeks, have you had difficulty performing work or other regular daily activities as a result of your physical health, for example it took extra effort?

YES NO

-~~

	i

ICT APRINT

The following three questions ask about your emotions and your daily activities

During the past four weeks, have you accomplished less than you would like as a result of any emotional problems, such as feeling depressed or anxious?

915

YES NO

-~

414

During the past four weeks, have you cut down the amount of time you spent on work or regular daily activities as a result of any emotional problems, such as feeling depressed or anxious?

1 YES 2 NO

916

During the past four weeks, did you not do work or other regular daily activities as carefully as usual as result of any emotional problems, such as feeling depressed or anxious?

1 YES 2 NO

MEINCONG T

		I €/1 4PRINT
How much bodily pain have you had during the past 4 weeks? Have you had I none 2 very mild 3 mild 4 moderate 5 severe 6 or very severe?	During the past 4 weeks, how much of the time has your physical health or emotional problems interfered with your social activities like visiting with friends or relatives? Has it interfered 1 all of the time 2 most of the time 3 some of the time 4 a little of the time 5 or none of the time 5 or none of the time	Page 7 of 38
During the past 4 weeks, to what extent has your physical health or emotional problems interfered with your normal social activities with family, friends, neighbors, or groups? Has it interfered	During the past 4 weeks, how much did pain interfere with your normal work, including both work outside the home and housework? Did it interfere	NEWSCRWS, TXT

The next questions are about how you feel and how things have been with you during the past four weeks.

As I read each statement, please give me the one answer that comes closest to the way you have been feeling; is it all of the time, most of the time, a good bit of the time, some of the time. Ittle of the time, or none of the time?

023

How much of the time during the past 4 weeks . . . have you been a very nervous person? READ CATEGORIES

all of the time most of the time a good bit of the time some of the time a little of the time none of the time

923

How much of the time during the past 4 weeks . . . have you felt so down in the dumps that nothing could cheer you up? READ CATEGORIES ONLY IF NECESSARY

all of the time
most of the time
a good bit of the time
some of the time
a little of the time
none of the time

How much of the time during the past 4 weeks . . did You feel full of pep? READ CATEGORIES

all of the time most of the time a good bit of the time some of the time a little of the time none of the time

023	023
How much of the time during the past 4 weeks	How much of the time during the past 4 weeks have you felt downhearted and blue? READ CATEGORIES ONLY IF NECESSARY
1 all of the time 2 most of the time 3 a good bit of the time 4 some of the time 5 a little of the time 6 none of the time	the
	o hone of the time
023	
How much of the time during the past 4 weeks did you have a lot of energy? READ CATEGORIES ONLY IF NECESSARY	HOW much of the time during the past 4 weeks did you feel worn out? READ CATEGORIES ONLY IF NECESSARY
1 all of the time 2 most of the time 3 a good bit of the time 4 some of the time 5 a little of the time	1 all of the time 2 most of the time 3 a good bit of the time 4 some of the time 5 a little of the time
o none of the time	
	I CAPRINT
MEUSCRNS. IX	Page 9 of 38

ICT APRINT

	IF NECESSARY
	ONLY 1F
the time during the past 4 weeks	CATEGORIES
he past	READ
during t	berson3
time	happy
the	E
₽.	ğ
How much of the	<u>ک</u> و
HOH	have

023

These next questions are about your health and health-related matters.

024

1 all of the time
2 most of the time
3 a good bit of the time
4 some of the time
5 a little of the time
6 none of the time

023

How much of the time during the past 4 weeks . . . did you feel tired? READ CATEGORIES ONLY IF NECESSARY

1 all of the time 2 most of the time 3 a good bit of the time 4 some of the time 5 a little of the time 6 none of the time

Now I'm going to read a list of statements. After each one, please tell me if it is definitely true, mostly true, mostly false, or definitely false. If you don't know, just tell me.

970

Ret]

I seem to get sick a little easier than other people. Would you say that's. . . READ CATEGORIES

1 definitely true
2 mostly true
3 don't know
4 mostly false
5 definitely false?

		IC APRINT
My health is excellent. Would you say that's READ CATEGORIES 1 definitely true 2 mostly true 3 don't know 4 mostly false 5 definitely false?	Now, I'm going to read a list of medical conditions to you. After each one, please tell me if a doctor has ever told you that you had any of these conditions.	Page 11 of 38
I am as healthy as anybody I know. Would you say that's READ CATEGORIES I definitely true Constly true John know A mostly false Gefinitely false	l expect my health to get worse. Would you say that's READ CATEGORIES definitely true mostly fulse don't know mostly false definitely false	

d2p	929
Has a doctor ever told you that you had hypertension, sometimes called high blood pressure?	Has a doctor ever told you that you had congestive heart failure, also known as heart failure or enlarged heart?
1 YES 2 NO .	1 YES 2 NO
029	626
Has a doctor ever told you that you had a heart attack, also called myocardial infarction, in the last year?	Has a doctor ever told you that you had diabetes or high blood sugar?
1 YES 2 NO	1 YES 2 NO
	The state of the s

	ICT APRINT]
Please tell me if you now have any of the following conditions. 132 195 196 299 299 299 399 399 490		Page 13 of 38
Has a doctor ever told you that you had 'an-JI-na' or 'AN-Ji-na'? 1 YES 2 MO Has a doctor ever told you that you had cancer, except skin cancer? 1 YES 2 NO		MEUSCRNS.TXT

Do you now have arthritis of any kind or rheumatism? 1 YES 2 NO	Do you now have blindness or other trouble seeing with one or both eyes, even when wearing glasses? 1 YES 2 NO
Do you now have sciatica or chronic back problems? 1 YES 2 NO	Do you now have chronic lung disease, like chronic bronchitis, asthma, or emphysema?
₹	
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	NAME OF THE PARTY
	032
	Do you now have limitation in the use of an arm or legas in missing, paralyzed, or weakness?
·	1 YES 2 NO
	033
Do you now have deafness or other trouble hearing with one or both ears?	Do you have any other chronic medical condition that is affecting what you do or how you feel?
	1 YES 2 NO
	Page 15 of 38

035	036
What are the names of up to four conditions that bother you the most? ENTER FIRST CONDITION	After each of these questions, please give me the answer that comes closest to the way you have been feeling during the past four weeks; is it all of the time, some of the time, a little of the time?
035	Q38
What other condition? PRESS ENTER IF NO OTHER CONDITION	How much of the time during the past 4 weeks were you frustrated by your health? READ CATEGORIES
	1 all of the time 2 most of the time 3 a good bit of the time 4 some of the time 5 a little of the time 6 none of the time
וונונטטונט ברב	

038	Q38
How much of the time during the past 4 weeks was your health a worry in your life? READ CATEGORIES	How much of the time during the past 4 weeks did you feel weighed down by any health problems? READ CATEGORIES ONLY IF NECESSARY
1 all of the time 2 most of the time 3 a good bit of the time 4 some of the time 5 a little of the time 6 none of the time	1 all of the time 2 most of the time 3 a good bit of the time 4 some of the time 5 a little of the time 6 none of the time
438	039
How much of the time during the past 4 weeks were you discouraged by any health problems? READ CATEGORIES ONLY IF NECESSARY 1 all of the time 2 most of the time 3 a good bit of the time 4 some of the time 5 a little of the time 6 none of the time	In the past year, have you had 2 weeks or more during which you felt sad, blue, or depressed, or when you lost all interest or pleasure in things that you usually cared about or enjoyed? IF R SAYS, "MAYBE" OR "SOME OF THE TIME", PROBE: is that yes or no? 1 YES 2 NO
NEWSCRNS.TXT	Page 17 of 38

070	042
Have you had 2 years or more in your life when you felt depressed or sad most days, even if you felt okay sometimes? If R SAYS, "MAYBE" OR "SOME OF THE TIME", PROBE: Is that yes or no?	The next set of questions are about your life as a whole. All things considered, please rate the following areas of your life as poor, fair, good, very good, or excellent.
1 YES 2 NO	
7	
041	044
Have you felt depressed or sad much of the time in the past year? If R SAYS, "MAYBE" OR "SOME OF THE TIME", PROBE: Is that yes or no? 1 YES 2 NO	Would you rate your neighborhood as a place to live in as: READ CATEGORIES 1 poor 2 fair 3 good 4 very good 5 excellent
	I≪1 APRINT

Would you rate your house or apartment as: READ CAIEGORIES 1 poor 2 fair 3 good 4 very good 5 excellent	Would you rate your financial situation as: READ CATEGORIES 1 poor 2 fair 3 good 4 very good 5 excellent
Would you rate your standard of living as: READ CATEGORIES Poor 3 good 4 very good 5 excellent	Would you rate your family life as: READ CATEGORIES 1 poor 2 fair 3 good 4 very good 5 excellent
NEWSCRNS. TXT	Page 19 of 38

People sometimes look to others for companionship, assistance, or other types of support. How much of the time is each of the following kinds of support available to you, if you need it? Is it available none of the time, a little of the time, some of the time, most of the time, or all of the time? 950 Would you rate your friendships as: READ CATEGORIES poor fair good very good excellent

048

Someone to get together with for relaxation.

How much of the time is this kind of support available to you, if you need it? READ CATEGORIES

none of the time
a little of the time
some of the time
most of the time
all of the time

045

How happy, satisfied, or pleased have you been with your personal life during the past 4 weeks? Have you been . . .

One, extremely happy, could not have been more satisfied or Iwo, very happy most of the time, or Ihree, generally satisfied, pleased, or Four, sometimes fairly satisfied, sometimes fairly unhappy, or five, generally dissatisfied, unhappy most of the time

1

ICT APRINT

048	Someone to love and make you feel wanted. How much of the time is this kind of support available to you, if you need it? READ CATEGORIES	1 none of the time 2 a little of the time 3 some of the time 4 most of the time 5 all of the time	. 870	Someone to confide in or talk to about yourself or your problems. How much of the time is this kind of support available to you, if you need it? READ CATEGORIES	1 none of the time 2 a little of the time 3 some of the time 4 most of the time 5 all of the time			Page 21 of 38
948	Someone to help with daily chores if you were sick. How much of the time is this kind of support available to you, if you need it? READ CATEGORIES	1 none of the time 2 a little of the time 3 some of the time 4 most of the time 5 all of the time	870	Someone to turn to for suggestions about how to deal with a personal problem.	from of the time 1 none of the time 2 a little of the time 4 most of the time 5 all of the time			NEUSCRNS. TXT

In the last year, have any of your family members died? NO YES	Is there a particular doctor's office, clinic, health center, or other place that you usually go to if you are sick or need advice about your health? YES NO
In general, how much stress or pressure have you experienced in your daily living in the past 4 weeks? Would you say you've sexperienced	out that extent do you feel that the stress or pressure you have experienced in your life has affected your health? Would you say it has affected your health not at all slightly moderately moderately extremely?

1014Min

		IC/LAPRINT
You just told me that you have one particular doctor that you usually go to for medical care. However, earlier I recorded that you do not have a particular doctor's office or clinic that you usually go to if you are sick. 1. Sthere a particular doctor's office, clinic, health center, or other place that you usually go to if you are sick or need advice about your health? 1. YES 2. NO	How long has it been since you last visited a medical doctor? Has it been READ CATEGORIES AND THEN CODE ONLY ONE Less than 1 month Between 1 and 3 months Chetween 6 and 12 months Shetween 1 and 2 years, or more than 2 years	Page 23 of 38
Is there one doctor in particular you usually see at the place you usually go to for medical care? 1 YES 2 NO 3 DOES NOT HAVE REGULAR PLACE FOR MEDICAL CARE	You just mentioned that you do not have a regular place for medical care. However, earlier I recorded that you do have a particular doctor's office or clinic that you usually go to if you are sick. 953 Is there a particular doctor's office, clinic, health center, or other place that you usually go to if you are sick or need advice about your health? 1 YES 2 NO	MEWSCRMS, TXT

Thinking about your own medical care, please tell me if you strongly agree, agree, disagree or strongly disagree with the next two statements. If you are uncertain, just tell me.

I am very satisfied with the medical care I receive. Do you . . . READ CATECORIES

a strongly agree

disagree

or strongly disagree?

I am in better health now because of the medical care I have received. Do you . . . READ CATECORIES

I strongly agree

a gree

or strongly agree

disagree

or strongly agree

disagree

or strongly agree

disagree

or strongly agree

a gree

disagree

or strongly agree

or strongly agree

disagree

or strongly agree

When you visit a doctor, how often does the doctor ask you whether your health limits your ability to perform everyday physical activities, such as walking, climbing stairs, or lifting objects?

Does the doctor ask you . . . READ CATEGORIES

1 every visit
2 most visits
3 some visits
4 rarely
5 never

058

The next questions ask about your medical care and how it deals with your ability to do everyday physical activities, carry out your usual daily responsibilities, and participate in your usual social activities.

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ICT APRINT

When you visit a doctor, how often does the doctor ask you whether your physical health limits you in carrying out your regular daily responsibilities, such as work, housework, or child care? Does the doctor ask you or child care? Does the doctor ask you or child care? 1 every visit 2 most visits 3 some visits 4 rarely 5 never	Think about your usual daily activities, including the physical and social activities you do each day and your regular responsibilities. Social activities your doctor considers your usual daily activities when advising you? Bo you think READ CATEGORIES
When you visit a doctor, how often does the doctor ask you whether your physical health limits you in carrying out your regular daily responsibilities, such as work, housework, or child care? Does the doctor ask youREAD CATEGORIES every visit most visits some visits rarely never	and social activities, including the and social activities you do each day and your esponsibilities. The social activities are soon as a second and so second activities when your doctor considers your usual daily activities when you?
	ink your doctor considers your usual daily activities when you? ink READ CATEGORIES
090	ink your doctor considers your usual daily activities when you? ink READ CATEGORIES
When you visit a doctor, how often does the doctor ask you whether your physical health interferes with your usual social activities whether your physical health interferes with your usual social activities Does the doctor ask youREAD CATEGORIES 1 every visit 2 most visits 3 some visits 4 rarely 5 never your considers your considers your considers and formation of the doctor ask you interference considers and formation of the doctor ask you think your doctor considers your advisits 5 mever considers with your doctor ask you think your doctor considers your doctor ask your considers your doctor ask your considers your doctor ask your doctor considers your doctor cons	iy yes iyes n not iy not
NEWSCRMS.TXT Page 25 of	Page 25 of 38

063	063
Do you want your doctor to ask you about your usual daily activities? Do you think READ CATEGORIES	
1 definitely yes 2 probably yes 3 uncertain 4 probably not 5 definitely not	
[F4] search Single Response Code =	[F4] search Single Response Code =
<pre>Id=3311 Prev=0 Back=+ Cancel=! Suspend=* Jump=2 Edit=; Show=? [Ret]=[Ret]</pre>	<pre>id=3311 Prev=0 Back=+ Cancel=1 Suspend=* Jump=Z Edit=; Show=? (Ret)=[Ret]</pre>
Would you be willing to fill out a survey at each visit to tell your doctor about how your physical health limits your usual daily activities? Do you think READ CATEGORIES	When you visit a doctor, how often does the doctor ask you whether you are feeling sad, depressed, or anxious?
1 definitely yes 2 probably yes 3 uncertain 4 probably not 5 definitely not	1 every visit 2 most visits 3 some visits 4 rarely 5 never
[F4] search Single Response Code =	[F4] search Single Response Code =
Id=3311 Prev=0 Back=+ Cancel=! Suspend=* Jump=2 Edit=; Show=? [Ret]=[Ret]	Id=3311 Prev=0 Back=+ Cancel=! Suspend=* Jump=2 Edit=; Show=? [Ret]=[Ret]
	V 1370

1			ICTAPRINT
	Think about how you feel emotionally, including feelings of depression or anxiety, or feeling that you have nothing to look forward to.	Do you think your doctor considers how you feel emotionally when advising you? Do you thinkREAD CATEGORIES 1 definitely yes 2 probably yes 3 uncertain 4 probably not 5 definitely not	Page 27 of 38
The second secon	When you visit a doctor, how often does the doctor ask you whether emotional problems limit you in carrying out your regular daily responsibilities, such as work, housework, or child care? Does the doctor ask youREAD CATEGORIES every visit a most visits some visits tarely some visits tarely some visits tarely tarely	When you visit a doctor, how often does the doctor ask you whether emotional problems interfere with your usual social activities with family and friends? Does the doctor ask youREAD CATEGORIES The every visit and some visits are s	MEWSCRMS, TXT

ICT APRINT

890	890
Do you want your doctor to ask you about how you feel emotionally? Do you thinkREAD CATEGORIES	Do you think this type of information should be kept in your medical record? Do you think,READ CATEGORIES
1 definitely yes 2 probably yes 3 uncertain 4 probably not 5 definitely not	1 definitely yes 2 probably yes 3 uncertain 4 probably not 5 definitely not
998	690
Would you be willing to fill out a survey at each visit to tell your doctor about how you are feeling emotionally? Do you thinkREAD CATEGORIES	Now, let's talk a little about you and your family
1 definitely yes 2 probably yes 3 uncertain 4 probably not 5 definitely not	
וולווייחווי דעד	

ICT 4PRINT

What is your marital status? READ CATEGORIES AND THEN CODE ONLY ONE Narried Subvorced Separated Superiored Widowed	We are interested in how many people now live in your household, other than yourself. Please tell me how many people live in your household for each of the following categories. ENTER NUMBER OF PEOPLE IN EACH CATEGORY. IF NOWE ENTER '00'. Spouse/Partner
In what year did you become widowed?:	I have recorded 0 people other than yourself. Is there anyone else living with you? If YES: EDIT MECESSARY CATEGORIES. Spouse Partner
NEWSCRNS, TXT	Page 29 of 38

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Page 30 of 38

ICT APRINT

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a	
_	

What is your date of birth?

620

What is your main racial or ethnic group? Is it . . READ CATEGORIES AND THEN CODE ONLY ONE

White or Caucasian, but not Hispanic or Latino Black or African-American, but not Hispanic or Latino Hispanic or Latino Asian or something else

What is the highest grade of school or year of college you have completed? CODE ONLY ONE

FIRST GRADE SECOND GRADE THIRD GRADE FOURTH GRADE SIXTH GRADE SIXTH GRADE EIGHTH GRADE TENTH GRADE TENTH GRADE TENTH GRADE 110 98 98 9111

COLLEGE 1 YEAR
COLLEGE 2 YEARS
COLLEGE 3 YEARS
COLLEGE 4 YEARS
POST GRADUATE (16+ YEARS)

082

And you are (male/female)...

980

1 MALE 2 FEMALE

					 	10 TAPRINI	
580	How often do you attend religious services? CODE ONLY ONE	01 NEVER 02 LT ONCE PER YR 03 ABOUT ONCE OR THICE PER YR 04 SEVERAL TIMES PER YR 05 ABOUT ONCE PER MO 06 2-3 TIMES PER MO 07 NEARLY EVERY WK 08 EVERY WK 09 SEVERAL TIMES PER WK	Q86 Are you	1 working at a paying job full-time 2 working at a paying job part-time 3 refired 4 taid-off or unemployed, but tooking for work 5 a full-time homemaker 6 other			Vage 51 of 36
	nat is your religious preference? Is it	rotestant atholic Jewish Jone, or some other religion	SPECIFY OTHER RELIGION.			TAL SREEDS TAL	RESULABLO

	What kind of work do you do? If you work two or more jobs, please tell me only about the job α^{ε} which you spend the most hours per week. ENTER VERBAIIH
89	What kind of work do you do? Itels me only about the job at will ENTER VERBAIIH

CODE OCCUPATION: WAITRESS

FARMERS AND FARM MANAGERS

SERVICE WORKER (EXCEPT PRIVATE
HOUSEHOLD) (FOR EXAMPLE,
JANITOR, COCK, WAIIRESS/WAITER,
MURSING AID, POLICE)
PRIVATE HOUSEHOLD WORKER (FOR
EXAMPLE, PRIVATE COOK, MAID,
CHILD CARE WORKER) 88

5

9

The following questions ask about different aspects of your current job. Please indicate if you strongly disagree, disagree, agree or strongly agree with each of the following statements. If you are uncertain just tell me.

CRAFISMEN (FOR EXAMPLE, CARPENTERS, ELECTRICIANS, MACHINISTS, MECHANICS) OPERATIVES (EXCEPT TRANSPORT) (FOR EXAMPLE, ASSEMBLERS, MACHINE OR TEXTILE OPERATIVES) TRANSPORT EQUIPMENT OPERATIVES (FOR EXAMPLE, CAB, TRUCK OR BUS DRIVERS, CONDUCTORS)

CLERICAL WORKER (FOR EXAMPLE, BANK TELLER, RECEPTIONIST, WORD PROCESSORS)

70

PROFESSIONAL OR TECHNICAL (FOR EXAMPLE, LAWYERS, SCIENTISTS, HEALTH PROFESSIONALS, TEACHERS,

5

8

CODE OCCUPATION: WAITRESS

80

9

8

ARTISTS)

MANAGERS AND ADMINISTRATORS

(EXCEPT FARM) (FOR EXAMPLE, BANK
OFFICERS, OFFICE MANAGERS,
INSPECTORS)
SALES WORKERS (FOR EXAMPLE,
INSURANCE OR REAL ESTATE AGENTS,
SALES CLERKS)

8

260	I have a lot of say about what happens on my job. Do youREAD CATEGORIES	1 strongly disagree 2 disagree 3 uncertain 4 agree 5 strongly agree	260	I have an opportunity to develop my own special abilities. Do youREAD CATEGORIES	1 strongly disagree 2 disagree 3 uncertain 4 agree 5 strongly agree	,		Page 33 of 38
093	My job involves a lot of repetitive work. Do youREAD CATEGORIES	1 strongly disagree 2 disagree 3 uncertain 4 agree 5 strongly agree	£6b	On my job, I have a lot of freedom to decide how I do my work. Do youREAD CATEGORIES	1 strongly disagree 2 disagree 3 uncertain 4 agree 5 strongly agree			NEWSCRWS.TXT

ICTI 4PRINT

My job requires working very hard. Do you. . .READ CATEGORIES

strongly disagree disagree uncertain agree strongly agree

93

I am asked to do an excessive amount of work. Do you. . .READ CATEGORIES

strongly disagree disagree uncertain agree strongly agree

993

I am free from conflicting demands that others make. Do you. . .READ CATEGORIES

strongly disagree disagree uncertain agree strongly agree

093

I have enough time to get the job done. Do you. . .READ CATEGORIES

strongly disagree disagree uncertain agree strongly agree

					ICT 4PRIN	7
1 am often required to work for long periods with my body in physically awkward or tiring positions. Do youREAD CATEGORIES	1 strongly disagree 2 disagree 3 uncertain 4 agree 5 strongly agree	093	My job security is good. Do youREAD CATEGORIES	1 strongly disagree 2 disagree 3 uncertain 4 agree 5 strongly agree		Page 35 of 38
	1 strongly disagree 2 disagree 3 uncertain 4 agree 5 strongly agree	Φ93	My job is very hectic. Do youREAD CATEGORIES	1 strongly disagree 2 disagree 3 uncertain 4 agree 5 strongly agree		MEUSCRNS, TXT

My supervisor is helpful in getting the job done. Do youREAD CATEGORIES strongly disagree disagree uncertain	My prospects for career development and promotions are good. Bo youREAD CATEGORIES 1 strongly disagree 2 disagree 3 uncertain
strongly agree	4 agree S strongly agree 9 agr
People I work with are helpful in getting the job done.	In five years, my skills will still be valuable.
Do youREAD CATEGORIES	Do youREAD CATEGORIES
strongly disagree	1 strongly disagree
disagree	2 disagree
uncertain	3 uncertain
agree	4 agree
strongly agree	5 strongly agree

strongly disagree disagree uncertain agree strongly agree

strongly disagree disagree uncertain agree strongly agree

a 102	Do you have any comments about this questionnaire? We welcome your comments about the questionnaire in general or about specific questions, especially any that were unclear or confusing to you. 1 YES 2 NO				Q103	That's all the questions I have. Thank you very much for your time Thank you for completing this questionnaire.			Page 37 of 38
094-0100	We'd like to continue to send you information about the National Health Survey even if you move. Please tell me the name, address, and telephone number of a person who does not live with you, but will always know where you are? ENIER NAME, ADDRESS, AND PHONE NUMBER.	NAME: MARY SMITH ADDRESS:	CITY: STATE: ZIP:	AREA CODE:	0101	And what is MARY SMITH's relationship to you?			NEWSCRNS. TXT

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						-
						1
	ENTER CASE ID NUMBER					
	CASE 1D					
0106	ENTER					-
•						
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	ER.					*** 0::000
	ER NUME					
	ITERVIEL					
	ENTER YOUR INTERVIEWER NUMBER					
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Appendix C: Respondent Materials

University of Chicago

NORC

A Social Science Research Center 1155 East 60th Street, Chicago, Illinois 60637 NATIONAL HEALTH SURVEY

October 12, 1990

Dear Social Survey Respondent:

As you know, billions of dollars are spent each year on medical care. There is a serious lack of current data on people's state of health, and how well they are able to get along in their day-to-day lives. This is <u>your</u> opportunity to inform the people who make decisions about the role physicians and the medical community should take in improving the general health of people like yourself.

At some time in the past two years, one of our interviewers called at your home and conducted an interview with you on such topics as housing, parenthood, working women, politics, crime and various federal policies. Your thoughtful answers are helpful to policy makers in gauging American's attitudes and finding out what is important to them.

We are asking you to help us again by completing this National Health Survey questionnaire and returning it to us as soon as possible in the postage-paid envelope.

NORC has been conducting this kind of not-for-profit social research for nearly 50 years. We are absolutely committed to the rigorous protection of our respondents' confidentiality. The questionnaire has an identification number so we can check it off our list when it is returned. Your name will never be associated with the answers that you provide.

To find out about the health of Americans, we need to collect the information from you directly--for you alone know how you feel and how you're getting along these days. As a token of our appreciation, we are enclosing a two dollar bill which we hope will serve to remind you of both the urgency and the importance of your participation.

Sincerely,

Richard Rubin Project Director

P.S. How about taking a few minutes to complete the questionnaire right now while it's fresh in your mind?

University of Chicago

NORC

A Social Science Research Center 1155 East 60th Street, Chicago, Illinois 60637 NATIONAL HEALTH SURVEY

November 7, 1990

Dear Social Survey Respondent:

Last month, we sent you the National Health Survey and requested your participation in this important study of the health of Americans. Accompanying the question-naire was a two dollar bill, a token of our appreciation for your completing and returning the National Health Survey. A week ago, we sent you a reminder postcard and are now enclosing a second questionnaire in the event you have misplaced the first one.

We need your help on the National Health Survey in order to understand the health status of and health care provided to Americans like yourself. NORC, affiliated with the University of Chicago, is committed to providing policy-makers and the medical community with timely, accurate and impartial information.

The National Health Survey will gather information on people's state of health and how well they are able to get along in their day-to-day lives. The survey was sent to a small sample of persons including yourself who were selected to represent everyone in the United States. Names are never associated with the answers that are provided.

If you have already completed the questionnaire, we thank you for your participation. If not, please help by completing and returning the enclosed questionnaire.

Sincerely,

Richard Rubin Project Director

NORC

NATIONAL HEALTH SURVEY

When we last interviewed you in your home, you told us that there were one or more persons living with you who would <u>now</u> be 65 or older.

Because health care is of particular concern to older people, we would like their participation in the National Health Survey.

Please ask each person to complete the questionnaire that has their <u>name</u> on the back. Please return the questionnaires to us in the postage-paid envelopes enclosed.

Thanks

P.S. If the person no longer lives with you, please call us toll-free at 1-800-878-2448.

NORC
A Social Science Research Center
University of Chicago
1155 East 60th Street
Chicago, Illinois 60637

ADDRESS CORRECTION REQUESTED

What happened to the survey?

Did you receive your National Health Survey questionnaire? Did you mail it back?

Please don't forget!



If not:

- * Please take a few minutes now to complete it.
- * Use the postage-paid, pre-addressed envelope.
- * Mail it back.

If you need another questionnaire, please call Kevin Jack toll-free at 1-800-878-2448.

If you've already mailed back your survey, Thank you for your cooperation.



A Social Science Research Center University of Chicago

1155 East 60th Street, Chicago, IL 60637 312/702-1200 Fax 312/702-0857

October 17, 1990

Dear Social Survey Respondent:

As you know, billions of dollars are spent each year on medical care. There is a serious lack of current data on people's state of health, and how well they are able to get along in their day-to-day lives. This is your opportunity to inform the people who make decisions about the role physicians and the medical community should take in improving the general health of people like yourself.

At some time in the past two years, one of our interviewers called at your home and conducted an interview with you on such topics as housing, parenthood, working women, politics, crime and various federal policies. Your thoughtful answers are helpful to policy makers in gauging American's attitudes and finding out what is important to them.

We are asking you to help us again by talking to one of our telephone interviewers for the National Health Survey. They will call within the next few weeks to ask you some questions about health and medical care.

NORC has been conducting this kind of not-for-profit social research for nearly 50 years. We are absolutely committed to the rigorous protection of our respondents' confidentiality. Your name will never be associated with the answers that you provide.

To find out about the health of Americans, we need to collect the information from you directly--for you alone know how you feel and how you're getting along these days. We think you will find the National Health Survey interesting and we look forward to talking with you in the near future.

Sincerely, Richard Rubin

Richard Rubin Project Director

P.S. This interview will be <u>much</u> shorter than the last one and should take no more than thirty minutes.



A Social Science Research Center University of Chicago

1155 East 60th Street, Chicago, IL 69637 312/702-1200 Fax 312/702-0857

October 17, 1990

Dear Social Survey Respondent:

As you know, billions of dollars are spent each year on medical care. There is a serious lack of current data on people's state of health, and how well they are able to get along in their day-to-day lives. This is your opportunity to inform the people who make decisions about the role physicians and the medical community should take in improving the general health of people like yourself.

At some time in the past two years, one of our interviewers called at your home and conducted an interview with you on such topics as housing, parenthood, working women, politics, crime and various federal policies. Your thoughtful answers are helpful to policy makers in gauging American's attitudes and finding out what is important to them.

We are asking you to help us again by talking to one of our telephone interviewers for the National Health Survey. They will call within the next few weeks to ask you some questions about health and medical care. Because health care is of particular concern to older people, we would also like to conduct an interview with anyone who was living in your household at the time of our last home contact who is now sixty five or older.

NORC has been conducting this kind of not-for-profit social research for nearly 50 years. We are absolutely committed to the rigorous protection of our respondents' confidentiality. Names are never associated with the answers that are provided.

To find out about the health of Americans, we need to collect the information from you directly--for you alone know how you feel and how you're getting along these days. We think you will find the National Health Survey interesting and we look forward to talking with you in the near future.

Sincerely, Richard Rubin

Richard Rubin Project Director

P.S. This interview will be <u>much</u> shorter than the last one and should take no more than thirty minutes.

Appendix D: Data Collection Report

NATIONAL HEALTH SURVEY FINAL DATA COLLECTION STATUS REPORT

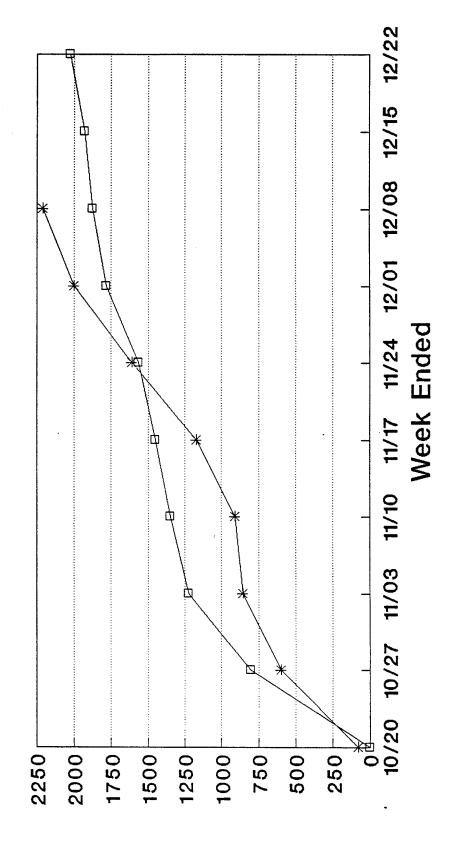
COMPLET TON	79.02%	68.06%	76.82%
TOTAL COMPLETE	2026	439	2465
COMPLETE BV PHONE	357	416	773
COMPLETE BY MAIL		23	1692
NIR ²	538	206	744
OUT OF SCOPE	33	6	42
SAMPLE	2597	654	3251
SURVEV	MAIL	PHONE	TOTAL

Out of scope includes deceased respondents, non-US citizens, and cases where the age of the respondent was data entered incorrectly.

 $^{^2\,}$ NIR refers to cases finalized as noninterviews.

 $^{^3}$ Completion rate is based on the total number of completes/total sample $extst{-}$ out of scope cases.

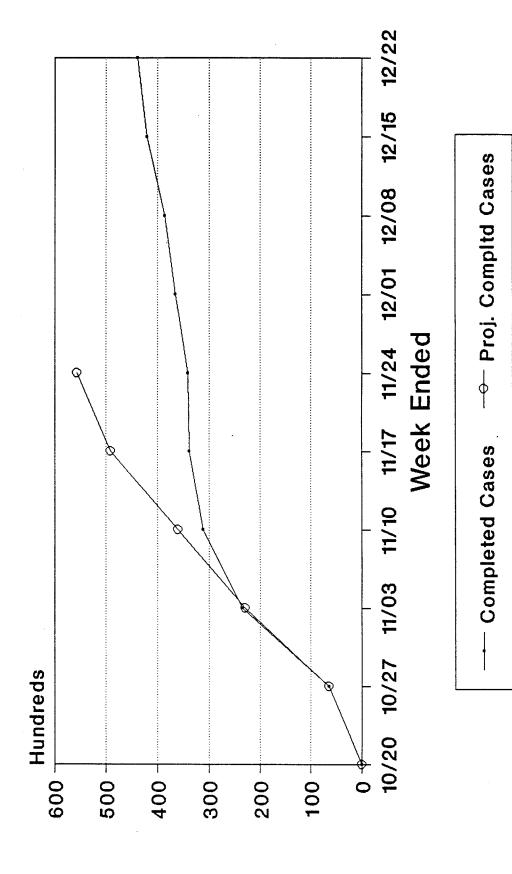
NATIONAL HEALTH SURVEY "MAIL SURVEY" Cumulative Completes by Week



--- Completed Cases * Proj. Completed Cass

Target 85% completion rates; 2,207 completed cases

NATIONAL HEALTH SURVEY "TELEPHONE SURVEY" Cumulative Completes by Week



Target 85% completion rate; 556 completed cases