7/2/08 Questionnaire: MEC

CURRENT HEALTH STATUS – HSQ Target Group: SPs 12+

HUQ.010	Next, I have some general qu	uestions about {your/SP's} health.
	Would you say {your/SP's} he	ealth in general is
		excellent, 1 very good, 2 good, 3 fair, or 4 poor? 5 REFUSED 7 DON'T KNOW 9
HSQ.470	The next questions are abou	t {your/SP's} recent health during the 30 days outlined on the calendar.
		physical health, which includes physical illness and injury, for how many da (your/his/her) physical health not good?
	HAND CARD HSQ1	
	CAPI INSTRUCTION: HARD EDIT VALUES: 0-30.	
		 ENTER # OF DAYS
		REFUSED
HSQ.480		SP's} mental health, which includes stress, depression, and problems with during the past 30 days was {your/his/her} mental health not good?
	HAND CARD HSQ1	
	CAPI INSTRUCTION: HARD EDIT VALUES: 0-30.	
		 ENTER # OF DAYS
		REFUSED 77

HSQ.490		about how many days did poor physical or me ivities, such as self-care, work, school or recrea	
	HAND CARD HSQ1		
	CAPI INSTRUCTION: HARD EDIT VALUES: 0-30.		
		 ENTER # OF DAYS	
		REFUSED DON'T KNOW	
HSQ.493	During the past 30 days, for usual activities, such as self-	about how many days did pain make it hard care, work, or recreation?	for {you/SP} to do {your/his/her}
	HAND CARD HSQ1		
	CAPI INSTRUCTION: HARD EDIT VALUES: 0-30.		
		 ENTER # OF DAYS	
		REFUSED DON'T KNOW	
HSQ.496	During the past 30 days, for a	about how many days {have you/has SP} felt wo	orried, tense, or anxious?
	HAND CARD HSQ1		
	CAPI INSTRUCTION: HARD EDIT VALUES: 0-30.		
		 ENTER # OF DAYS	
		REFUSED DON'T KNOW	
HSQ.500	Did {you/SP} have a head co	ld or chest cold that started during those 30 day	rs?
	HAND CARD HSQ1		
		YES NO	2 7

HSQ.510	Did {you/SP} have a stomach	or intestinal illness with vomiting or diarrhea that	at started during those 30 days?
	HAND CARD HSQ1		
		YES NO	7
HSQ.520	Did {you/SP} have flu, pneum	nonia, or ear infections that started during those	30 days?
	HAND CARD HSQ1		
		YES	2 7
	CHECK ITEM HSQ.560: IF SP 16 YEARS OR OLD OTHERWISE, GO TO EN	BOX 1 DER, CONTINUE WITH HSQ.571. D OF SECTION.	
HSQ.571	During the past 12 months , you/has SP} donated blood?	, that is, since {DISPLAY CURRENT MONTH,	DISPLAY LAST YEAR}, {have
		YES	7 (HSQ.590)
HSQ.580	How long ago was {your/SP's	} last blood donation?	
	IF LESS THAN ONE MONTH	I, ENTER '1'.	
	CAPI INSTRUCTION: HARD EDIT VALUES: 1-12.		
		 ENTER # OF MONTHS	
		REFUSED DON'T KNOW	

HSQ.590	Except for tests {you/SP} may have had as part of blood donations, {have you/has he/has she} ever had
	{your/his/her} blood tested for the AIDS virus infection?

YES	1
NO	2
REFUSED	7
DON'T KNOW	9