### 2004 CONTROL CARD INTERVIEW

#### Negative Number Response Codes Key
-4/B = Break off
-7/V = Invalid skip (CAPI)
-5/S = Legitimate skip on path
-8 = Don't know (D)
-9 = Refused (R)

#### Variable Name Highlighted Grey = Variable not included in data set.

#### VERIFY CASE

<table>
<thead>
<tr>
<th>CASEID</th>
<th>Length</th>
<th>Case ID</th>
</tr>
</thead>
<tbody>
<tr>
<td>length 8</td>
<td>Case ID</td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>F_FULLNA</th>
<th>Length 42</th>
<th>Full Name</th>
</tr>
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#### Address:

<table>
<thead>
<tr>
<th>HNO</th>
<th>Length 10</th>
<th>Household number</th>
</tr>
</thead>
<tbody>
<tr>
<td>HNSUF</td>
<td>Length 3</td>
<td>Household number suffix</td>
</tr>
<tr>
<td>STRNAME</td>
<td>Length 33</td>
<td>Street name</td>
</tr>
<tr>
<td>UNITDES</td>
<td>Length 20</td>
<td>Unit designation</td>
</tr>
<tr>
<td>PO</td>
<td>Length 22</td>
<td>City</td>
</tr>
<tr>
<td>ST</td>
<td>Length 2</td>
<td>State</td>
</tr>
<tr>
<td>ZIP5</td>
<td>Length 5</td>
<td>Zip 5</td>
</tr>
<tr>
<td>ZIP4</td>
<td>Length 4</td>
<td>Zip 4</td>
</tr>
<tr>
<td>PHYSDES</td>
<td>Length 99</td>
<td>Physical description of housing unit</td>
</tr>
</tbody>
</table>

#### Phone:

<table>
<thead>
<tr>
<th>AREA</th>
<th>Length 3</th>
<th>Area Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>PREFIX</td>
<td>Length 3</td>
<td>Telephone number prefix</td>
</tr>
<tr>
<td>SUFFIX</td>
<td>Length 4</td>
<td>Telephone number suffix</td>
</tr>
</tbody>
</table>

#### VERIFICATION CHECK

- Telephone Interview - SKIP TO DIAL CHECK (DT_DIAL_CK)
- Personal Visit Interview
- Incorrect Date/Time - SKIP TO DT_OUTCOME AT END OF DETAILED INTERVIEW, remains unchanged
- Incorrect Case - SKIP TO DT_OUTCOME AT END OF DETAILED INTERVIEW, remains unchanged

#### IN PERSON INTERVIEW

**FR:** PLEASE SELECT AN OPTION BELOW:

1. Someone answers
2. No contact; no one home
3. No such address; sample person not at this address
4. Do not continue

#### DIAL CHECK

**FR:** YOU ARE SUPPOSED TO HAVE SUPERVISORY PERMISSION TO CONDUCT A PHONE INTERVIEW, OCCASIONALLY THE SAMPLE PERSON INSISTS ON DOING THE INTERVIEW ON THE PHONE. ATTEMPT TO CONVERT THEM TO A FACE-TO-FACE INTERVIEW. SEE THE CONVERSION SCRIPTS BELOW. ATTEMPT CONVERSION TO FACE-TO-FACE INTERVIEW.

**CONVERSION 1:** It is important that we do this interview in person if at all possible. A personal interview allows the use of visual aids, and makes it easier to explain and clarify questions. Why do you want to do this interview by phone?

**CONVERSION TIME:** The interview will actually be shorter if you are able to actually see some of the answers rather than having me read them to you.

**CONVERSION FEAR:** Could we conduct this interview in a public place like a senior citizen’s center or coffee shop? I will come with identification from the Census Bureau so that you will know who I am and a copy of the letter you received so that you will know this is legitimate.

**FR:** Permission received

**FR:** No permission, MUST do in person interview - SKIP TO DT_REASON AT END OF DETAILED INTERVIEW and set = 23

**FR:** No such address; SP not at this address SKIP TO DT_REASON AT END OF DETAILED INTERVIEW and set = 18

**FR:** Do not continue - SKIP TO DT_OUTCOME AT END OF DETAILED INTERVIEW, remains unchanged

#### DT DIAL_CHK

<table>
<thead>
<tr>
<th>DT_DIAL_CK</th>
<th>Length 1</th>
<th>Insisted On Phone Interview now</th>
</tr>
</thead>
<tbody>
<tr>
<td>value 1</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### WARNING

**FR:** THE DETERMINATION OF QUARTERS SHOULD BE DONE BY YOUR ON-SITE INSPECTION OF THE SAMPLE PERSON'S RESIDENCE. IF YOU CANNOT MAKE AN ON-SITE INSPECTION BEFORE CONTINUING WITH THE INTERVIEW AND HAVE NO KNOWLEDGE OF THE SAMPLE PERSON'S RESIDENCE BASED ON A PRIOR VISIT, THEN ASK THE SAMPLE PERSON.

#### ADDRESS CHECK

**FR:** ARE YOU FAMILIAR WITH THIS ADDRESS?

- Yes
- No

#### TELEPHONE INTERVIEW

**FR:** DIAL TELEPHONE NUMBER, RECORD RESPONSE

- Someone Answers
- No contact (answer machine/busy) - SKIP TO DT_OUTCOME AT END OF DETAILED INTERVIEW, remains unchanged
- New number or phone disconnected - Call directory assistance - SKIP BACK TO VERIFY CASE

#### DIAL

<table>
<thead>
<tr>
<th>DIAL</th>
<th>Length 1</th>
<th>Unchanged</th>
</tr>
</thead>
<tbody>
<tr>
<td>value 1</td>
<td></td>
<td></td>
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</tbody>
</table>

#### CAPT STATUS CHECK

Check contact history to start interview at appropriate point. If LTC_FLAG equals 1, 2 or 3 - SKIP TO QUESTION 2 (DT_READY), or next unanswered question. If LTC_FLAG has not been set, continue.

#### STATUS

#### DETAILED QUARTERS

**FR:** IF THE SAMPLE PERSON IS IN AN INSTITUTION OR OTHER GROUP FACILITY, GO TO THE FRONT DESK. INTRODUCE YOURSELF. SHOW YOUR IDENTIFICATION CARD. ASK TO SPEAK TO ADMINISTRATOR. IF THE ADMINISTRATOR HAD NOT RECEIVED THE LETTER SIGNED BY THE DIRECTOR OF THE CENSUS BUREAU, PLEASE HAND THE ADMINISTRATOR A COPY OF THE L3 LETTER AND ITS ENCLOSURE.

0. We are conducting a survey of health conditions and physical activities of persons
56 years of age and over who live in the United States. Does [SAMPNAME] live here?

**FR:** Yes
**FR:** No - SKIP To 1a (DT_HASNNAME)
**FR:** Decesased. If SC_OUTCOME = 405, set DT_OUTCOME = 9 - SKIP TO 1b1 (DEA_01_M)

#### NOTE -- SCREENER and CONTROL CARD QUARTERS MERGED

Quarters information for some observations was collected in the Screener Quarters section during a personal visit Screener interview, and the Control Card Quarters section was skipped on-path. To be consistent with prior waves, we have copied the Screener Quarters information for these respondents into the Detailed Quarters variables. In these cases, LTC_FLAG_SPV is copied into LTC_FLAG.

**FR:** CAP: IF DT_INTYPE equals <P> or DT_INTYPE equals <T> and DT_ADDRESS_CHK equals <T> display:
**FR:** IF NOT READ ALOUD: CLASSIFY THE LIVING QUARTERS OF THE SAMPLE PERSON.
**CAP:** IF DT_INTYPE equals <T> and DT_ADDRESS_CHK equals <T> display:
**FR:** ASK THE RESPONDENT:
What type of residence does [SAMPNAME] live in?
**FR:** PROBE AS NECESSARY. CLASSIFY THE LIVING QUARTERS OF THE
### SAMPLE PERSON BASED ON THE HELP SCREEN AND THE RESPONSE.

<table>
<thead>
<tr>
<th>QUARTER1_R</th>
<th>Length</th>
<th>2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Staff quarters in institution - SKIP TO LTC FLAG (LTC_FLAG) and set = 2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Assisted Living Community, Continuing Care Retirement Community, or Congregate Care Facility</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Active Adult Community/Senior Complex (Specify in DT_QUARTERS_S1 below)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Quarters, not a HU, in a foster or family care home, or group home, convent or commune - SKIP TO 0e (UNREL)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Resident's unit in nursing, convalescent or rest home, or home for the aged (Nonstaff) - SKIP TO 0e (NURSE)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nursing wing or unit of Continuing Care Retirement Community</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Patient's unit in mental or other long-stay hospital - SKIP TO 0e (NURSE)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nonstaff unit in other institution (Specify in DT_QUARTERS_S2 below) - SKIP TO 0e (NURSE)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Inmate's unit in correctional/detention facility - SKIP TO END OF DETAILED INTERVIEW and set DT_REASON = 8</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### HELP SCREEN: [REFERENCE]

1. **Housing Unit** - The living quarters (rooms, group of rooms, house, etc.) occupied by persons who live or eat together is a housing unit if it meets two requirements: separateness and direct access.

2. **Staff Quarters in an Institution** - A residential unit in an institution that is provided to staff or employees of the institution. The institution can be a nursing home, assisted living facility, mental or long stay hospital, or a correctional facility. Anytime this living quarter is checked, you will need to provide a description of the living quarter. The description should include the type of institution where the sample person is living.

3. **Assisted Living Community**

   This could be a Retirement Home, Elderly Community, Independent Living Community, Group Home, etc., with varying degrees of assistance available to the sample person. Some assisted-living communities will group residents into different "levels" of care. Housing in assisted-living communities includes cottages, apartments and something resembling nursing home rooms. If you enter that the sample person lives in an Assisted Living Community, you will verify this with the respondent. If the respondent agrees that the living quarters are in an Assisted Living Community, you will next ask a series of questions to determine the level of care the sample person is receiving.

4. **Active Adult Community/Senior Apartment Complex** - These places are age-restricted housing (often 55 and older) which may offer some services, such as meals or social activities, but usually do not provide assistance with activities of daily living, such as help with dressing and bathing.

5. **Quarters, Not a Housing Unit, in a Rooming or Boarding House, Convent, Community, Foster or Family Care Home, Group Home, Community Residential Facility, Etc.**

   Group Home - A group of five or more unrelated persons living together who pool their resources but have no regular arrangements for contributing to expenses.

   Convents, Monasteries, and Other Residences for Religious Orders - A place is a convent or monastery if it is officially called a convent or monastery, regardless of the number of persons in the place. "Official" means that there is a sign or a name on the mailbox, such as "St. Joseph's Convent," or the group consider the place to be a convent or monastery.

   Communes - These are residences, such as foster homes and board-and-care homes, that provide a home environment in the community for the elderly, handicapped, and functionally disabled as an alternative to institutional care. The occupants must own or rent their living quarters. Some supportive services are offered, such as supervision of diet and self-administered medication, assistance with housekeeping, and arrangement of transportation and recreational activities. Services do not include continual nursing care, medical care or psychiatric care by staff members. Meals may or may not be provided.

6. **Inmate’s Unit in Correctional/detention Facility** - A non-staff residential unit within an institution. This classification should only be used when the sample person resides in the nursing wing of the CCRC, mark this box.

7. **Nursing Wing or Unit of a Continuing Care Retirement Community (CCRC)** - These places offer skilled nursing care on the same level as a nursing home. If you have sufficient information from the address or some other source that the sample person resides in the nursing wing of the CCRC, mark this box.

8. **Patient's Unit in Mental or Other Long-stay Hospital**

   Chronic or cancer hospital
   Home for incurables, or hospice
   Home for mental convalescents
   Home or training school for mentally handicapped
   Home, training school, colony, or village for epileptics
   Hospital for the treatment of alcoholics or drug addicts
   Private, State, Federal, County, City, or Veterans' Administration hospital or sanatorium for mentally ill
   Tuberculosis sanatorium

9. **Non-staff Unit in Other Institution** - A non-staff residential unit within an institution. This classification should only be used when the sample person's living quarters cannot be classified in any of the existing categories. Anytime this living quarter category is checked, you will need to provide a description of the living quarters. The description should include the type of institution where the sample person is living.

   County or city jail, workhouse, or penitentiary
   State, Federal, county, or municipal training or industrial school
   Federal Detention headquarters
   Private school for delinquents such as "House of Good Shepherd," "Boys Town," etc.
   State or Federal penitentiary, prison, or reformatory

   **b.** Is [SAMPNAME]'s residence located in an Assisted Living Facility, Continuing Care Retirement Community, or a Congregate Care Facility?

<table>
<thead>
<tr>
<th>REitre1</th>
<th>Length</th>
<th>2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>No - SKIP TO 0f (UNREL)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Don't Know, Refused - SKIP TO 0f (UNREL)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### HELP SCREEN: [REFERENCE]

An assisted-living community could be a Retirement Home, Elderly Community, Independent Living Community, Group Home, etc., with varying degrees of assistance available to the sample person.

Some assisted-living communities will group residents into different "levels" of care. If you enter that the sample person lives in an Assisted Living Community, you will verify this with the respondent.

If the respondent agrees that the living quarters are in an Assisted Living Community, you will next ask a series of questions to determine the level of care the sample person is receiving.

**c.** Does the Assisted Living Facility, Continuing Care Retirement Community, or Congregate Care Facility provide any of following services to [SAMPNAME]?

   Care Facility provide any of following services to [SAMPNAME]:
   - Preparation of meals
      | RETire21 | Length | 2 |
      | Yes |
      | No |
      | Don't Know, Refused |
(2) Housekeeping
RETIRE22

(3) Help with eating
RETIRE23

(4) Help with moving around
RETIRE24

(5) Substantial nursing care of any kind
RETIRE25

Yes - SKIP TO LTC_FLAG (LTC_FLAG)
No - SKIP TO LTC_FLAG (LTC_FLAG)

ld. Are there three or more unrelated persons living at (FULL address)?
Yes - SKIP TO LTC_FLAG (LTC_FLAG)
No - SKIP TO LTC_FLAG (LTC_FLAG)

be. Is a Registered Nurse, Licensed Practical Nurse, Licensed Vocational Nurse, physician, psychiatrist, or other health professional on duty every day at this address?
Yes - SKIP TO LTC_FLAG (LTC_FLAG)
No - SKIP TO LTC_FLAG (LTC_FLAG)

HELP SCREEN: [REFERENCE]
The purpose of this question is to determine whether the sample person's quarters should be classified as an institution.

Note: Question 0f not used in 2004.

LTC_FLAG

CAPI: If response (5) to 0c above (RETIRE25 = 1) is marked 'yes' or '0c (NURSE = 1) is marked 'yes', set flag equal to '1'. Otherwise, set flag equal to '2'. [Note: code '2' is recoded to '3' in the Caregiver Selection section if a caregiver is selected.]

LTC_FLAG

DT_CKDETAIL

CAPI displays one of the following based on DT_CKDETAIL:
- [Facility Name]
- [Full Name]
- [Address]
- [Telephone]
- [Language]

FR: YOU MUST CONDUCT THE NEXT PORTION OF THE INTERVIEW WITH A FACILITY ADMINISTRATOR OR NURSING ASSISTANT. IS ONE OF THEM AVAILABLE NOW?

FR: ARE YOU NOW SPEAKING WITH INSTITUTIONAL STAFF?

Note: Question 0f not used in 2004.

CAPI: Since SP has moved, type of quarters is undetermined. If LTC_FLAG has been set, reset it to -5.

CAPI: Displays a note based on DT_CKDETAIL:
NOTE TO INTERVIEWER:
THIS WILL BE A COMMUNITY INTERVIEW.
THIS WILL BE AN INSTITUTIONAL INTERVIEW.
FR: YOU MUST CONDUCT THE NEXT PORTION OF THE INTERVIEW WITH A FACILITY ADMINISTRATOR OR NURSING ASSISTANT. IS ONE OF THEM AVAILABLE NOW?

DT_INST_APPT

DT_Q_STAFF

DT_Q_INSTNAME

DT_Q_ADMCLOSE

FR: IF NO ADDRESS IS KNOWN, GET NAME OF INSTITUTION OR FAMILY MEMBER FOR TRACING:

DO YOU KNOW [SAMPNAME]'S NEW ADDRESS AND TELEPHONE NUMBER?

FR: IF NO TELEPHONE NUMBER OR EXTENSION AVAILABLE, PRESS ENTER.

FR: IF NO ADDRESS IS KNOWN, GET NAME OF INSTITUTION OR FAMILY MEMBER FOR TRACING:

All skip to 1a3 (DT_INJAIL)
1a3. In what type of living facility does [SAMPNAME] now reside?

- Correctional facility—Set DT_REASON = 8
- Armed Forces—Set DT_REASON = 15
- Other
- Don't Know, Refused

1d4. FR: WHAT IS THE MOVER STATUS?

IF YOU CHOOSE CATEGORY 4, CATEGORY 5, OR CATEGORY 6, PLACE AND SET = 835

- Don't Know, Refused

1b1. We would like to ask you a few questions about [SAMPNAME]. When did he/she die?

- Month
- Year
- Don't Know, Refused

1b2. Did [SAMPNAME] die before or after April 1, 2004?

- Before 04-01-04
- After 04-01-04
- Don't Know, Refused

1b3. Were you knowledgeable about [SAMPNAME]'s health and general care while he/she was living?

- Yes - SKIP TO 1b5
- No
- Don't Know, Refused

1b4. Do you know of someone who knew about [SAMPNAME]'s health and general care?

- Yes - SKIP TO 1b7
- No
- Don't Know, Refused

1b5. What is (your/that person's) relationship to [SAMPNAME]?

- Spouse/Spousal Equivalent
- Son
- Daughter
- Son-in-law
- Daughter-in-law
- Mother
- Father
- Mother-in-law
- Father-in-law
- Brother
- Sister
- Brother-in-law
- Sister-in-law
- Other male relative
- Other female relative
- Male friend
- Female friend
- Male neighbor
- Female neighbor
- Employee / Someone hired
- Someone from helping organization
- Institution / Assisted Living Center
- Legal guardian
- Unable to determine
- Someone else (specify)
- Child gender unknown
- Don't Know, Refused

1b6. What is (your/that person's) name, address, and telephone number?

- First Name
- Last Name
- Street Address 1
- Street Address 2
- City
- State
- Zip 5
- Zip 4
- Telephone number
- Don't Know, Refused
- Specify:

1b7. FR: ENTER THE NAME, ADDRESS, AND TELEPHONE NUMBER OF THE PERSON OR ORGANIZATION THAT HELPED YOU DETERMINE THE CASE STATUS.

- First Name
- Last Name
- Street Address 1
- Street Address 2
- City
- State
- Zip 5
- Zip 4
- Telephone number
- Don't Know, Refused

Thank you for your time and cooperation. You have been very helpful.
2. May I speak to [SAMPNAME]?

2a1. Will [SAMPNAME] be available before February 15, 2005?

2a2. When will [SAMPNAME] be available to conduct the interview?

2a3. If the sample person is unavailable or unable to answer, ask to speak to someone who is knowledgeable about the sample person's health conditions and physical activities. The proxy must be at least 15 years old.

2b3. May I speak with [SCPR_NA1, SCPR_NA2]?

2c3. If the sample person is unavailable or unable to answer, ask to speak to someone who is knowledgeable about the sample person's health conditions and physical activities. The proxy must be at least 15 years old.

2a4. What is your name?

2a5. Identify reason(s) for proxy interview.

2a6. What is your name?

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Sister-in-law

No - SKIP TO DT_REASON AT END OF DETAILED INTERVIEW

2

2a9. Do you reside with [SAMPNAME]?

DTPR_REL_SP

Length 40

Specify Other Relationship

-8, -9 = Don’t Know, Refused

Note: Question 2a9 not used in 2004.

2a10. What is your telephone number?

FR: USE (N) FOR NO TELEPHONE.

DTPR_PH1

Length 3

Area Code

-8, -9, N = Don’t Know, Refused, No Phone

DTPR_PH2

Length 7

Telephone number

2a11. What is your address?

Address:

DT_PRIND

Length 10

House number

DT_PRNSUF

Length 3

House number suffix

DT_PSTRNM

Length 33

Street name

DT_PRUNIT

Length 20

Housing unit

DT_PRPO

Length 22

City

DT_PRST

Length 2

State

DT_PZIP5

Length 5

Zip 5

DT_PZIP4

Length 4

Zip 4

DT_PDES

Length 99

Physical description of housing

-8, -9 = Don’t Know, Refused

CHECK PERMISSIONS

CAP: IF DTPR_REL_R = 17-23, 25, 26, D, R display:

FR: DO YOU HAVE [SAMPNAME]’S PERMISSION TO DISCUSS (HIS/HER) HEALTH WITH PROXY?

DT_CKPERM

Length 2

Yes

No - SKIP TO DT REASON AT END OF DETAILED INTERVIEW — set = 10

Note: Question 3 not used in 2004.

3. FR: DO NOT READ ALOUD. IS RESPONDENT THE SAMPLE PERSON OR A PROXY OR BOTH? CHOOSE ONE.

DT_DETRE_R

Length 2

Sample Person

Proxy

Sample Person and Proxy

HELP SCREEN [REFERENCE]

Who is a Proxy?

Ideally, a proxy should be a household member 15 years of age or older who knows about the care obtained or needed by the sample person. (Do not interview a teenager, however, except as a last resort.) The proxy may or may not be related to the sample person. The key requirement is that the proxy know about the sample person’s regular care.

When the sample person lives by himself/herself and cannot be interviewed because he/she is deaf or cannot speak understandably, you should try to interview a non-household member over the age of 15 who knows about the care obtained or needed by the sample person. (Note: An inability to speak understandably, or any other speech problem, does not include a sample person’s being unable to be interviewed because he/she does not speak English.) You may have to make inquiries to find the name, address, or telephone number of a relative if the sample person lives alone.

When to interview a Proxy.

Proxies should be interviewed when the sample person is unavailable for interview because he/she: is temporarily absent during the survey period is unable to be interviewed due to a physical or mental disability Does not speak sufficient English.

If the sample person is deaf or does not speak English and an interpreter is available during the interview, the interview is considered to be a self-interview. However, if the person answers for the sample person without first interpreting the question for him/her, that person is considered a proxy. The interview is a proxy interview. You may also use a proxy for part of the interview if the sample person indicates that someone else can answer certain items more accurately.

3a. FR: IF FIRST VISIT:

Recently, we mailed a letter explaining our survey. Did (NAME/you) receive the letter signed by the Director of the Census?

FR: IF CONTINUATION OF INTERVIEW AFTER FIRST VISIT:

Recently we contacted you to answer some questions regarding long-term care in the United States. Some of the questions have already been answered. Let me see where we should begin.

Item to begin: (LDQ)

FR: PRESS ENTER TO CONTINUE.

DT_ADVLTR

Length 2

-8, -9 = Don’t Know, Refused

ALL SKIP TO FIRST UNANSWERED QUESTION

3b. FR: READ THE LTC-9(L2) LETTER TO THE SAMPLE PERSON OR, IF PERSONAL VISIT, HAND PERSON A COPY OF THE ADVANCE LETTER.

ALLOW ENOUGH TIME FOR HIM/HER TO READ IF HE/SHE SO DESIRES.

We are conducting the 2004 National Long Term Care Survey which is sponsored by Duke University under a grant from the National Institute on Aging. We would like to take about 1 hour of your time to ask some questions about your age, marital status, and everyday activities. Depending on your answers, we may have some additional questions about your health and health care needs. These additional questions will take about 30 or 60 minutes depending on your living situation. The Census Bureau and Duke University will keep your answers confidential and all information will be used for statistical purposes only. This survey is authorized under Title 42, of the United States Code, Section 285a-1 and approved by the Office of Management and Budget. Your participation is voluntary. Although there are no penalties for not answering any questions, your cooperation will be extremely important to ensure the completeness and accuracy of the data.

Duke University, under a grant from the National Institute on Aging, has asked the U.S. Census Bureau to conduct the 2004 National Long-Term Care

-8 = Don’t Know

-9 = Refused

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Survey (NLCTS). We selected _______________________________________________, who lives at your facility, for this survey. Our field representative will contact you soon to arrange for the collection of information about him/her and your facility. Usually, this consists of a short interview with you or members of your staff. The interview will be longer if the individual is not capable of an interview and if he/she does not have relatives we can interview.

CHECK SURVEY
CAP: If LTC_FLAG equals 2 or 3, SKIP TO DT CONTROL CARD BEGIN.

IAD WHO1
FR: COMPLETE THIS SECTION WITH AN ADMINISTRATOR OR NURSING ASSISTANT.

Respondent is: 1 Administrator
2 Other staff member - Specify below in IAD_WHO2
3 Nonstaff member - Specify below in IAD_WHO3

IAD_WHO2
FR: COMPLETE THIS SECTION WITH AN ADMINISTRATOR OR NURSING ASSISTANT.

Length 2
IAD_WHO3
FR: COMPLETE THIS SECTION WITH AN ADMINISTRATOR OR NURSING ASSISTANT.

Length 2

4. I would first like to ask a few questions regarding [SAMPNAME]'s current condition.

Does (he/she) NOW have:

a. Alzheimer's disease? 1 Yes

b. Mental retardation? 1 Yes

c. Dementia? 1 Yes

5. Are there any reasons why [SAMPNAME] cannot participate in this survey?

FR: MARK ALL THAT APPLY.

IF THERE IS NO REASON WHY THE SAMPLE PERSON CAN'T PARTICIPATE, THEN SELECT OPTION 6.
ENTER THE CATEGORY NUMBER TO SELECT OR DESELECT.
ENTER (N) WHEN DONE.

(1) Access is denied 1 Yes

(2) Sample person is incapable of speech 1 Yes

(3) Sample person comatose 1 Yes

(4) Sample person is a danger to self or others 1 Yes

(5) Other Reasons--Please specify below in CND_2Z_SP.

Specify: ____________________________

(6) No Reason 1 Yes

SELECT RESPONDENT
FR: WHO IS AVAILABLE FOR THE INSTITUTIONAL SAMPLE PERSON INTERVIEW, OR INSTITUTIONAL ACCOUNTING INTERVIEW?

SEL_RESP
FR: WHO IS AVAILABLE FOR THE INSTITUTIONAL SAMPLE PERSON INTERVIEW, OR INSTITUTIONAL ACCOUNTING INTERVIEW?

Length 2

CHECK COGNITIVE
CAP: Refer to questions 1a, 1b, 1c, and 2 above. If Sample Person has Alzheimer's, mental retardation, or dementia, institutional interview (excluding cognitive) will be conducted by proxy.

COG_IMPAIRED
FR: WHO IS AVAILABLE FOR THE INSTITUTIONAL SAMPLE PERSON INTERVIEW, OR INSTITUTIONAL ACCOUNTING INTERVIEW?

Length 1

CHECK CONDITION 1
CAP: Refer to questions 1a, 1b, 1c, and 2 above.

IAD_CK1
FR: WHO IS AVAILABLE FOR THE INSTITUTIONAL SAMPLE PERSON INTERVIEW, OR INSTITUTIONAL ACCOUNTING INTERVIEW?

Length 1

OPTION MENU 1 - Sample Person Responding
FR: EACH MODULE SHOULD BE ANSWERED BY THE PRIMARY RESPONDENT.
IF THE PRIMARY RESPONDENT IS NOT AVAILABLE, THE SECONDARY RESPONDENT MAY BE USED.

Module

0 DT_CONTROL CARD
1 Conditions
2 ADL
3 Cognitive
4 Previous Admissions
5 Income and Assets
6 Siblings
7 Current Admissions & Health Ins.
8 Certified Beds
9 Accounting

Primary
Sample Person
Sample Person Only
Sample Person
Sample Person
Sample Person
Sample Person
Sample Person
Accounting

Secondary
Nurse or Nurse's Aide
Nurse or Nurse's Aide
Nurse or Nurse's Aide
Knowledgeable Family Member
Knowledgeable Family Member
Knowledgeable Family Member
Knowledgeable Family Member
Designated Proxy
Designated Proxy

OPTION MENU 2 - Family Member Proxy Responding
FR: EACH MODULE SHOULD BE ANSWERED BY THE PRIMARY RESPONDENT.
IF THE PRIMARY RESPONDENT IS NOT AVAILABLE, THE SECONDARY RESPONDENT MAY BE USED.

Primary
Secondary

-8 = Don't Know
-9 = Refused

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Module | Respondent | Respondent
---|---|---
0 DT_CONTROL CARD | Family Member | Nurse or Nurse's Aide
1 Conditions | Family Member | Nurse or Nurse's Aide
2 ADL | Family Member | Nurse or Nurse's Aide
3 Previous Admissions | Family Member | Designated Proxy
4 Income and Assets | Family Member | Designated Proxy
5 Siblings | Family Member | Designated Proxy
6 Current Admissions & Health Ins. | Accounting | Designated Proxy
7 Certified Beds | Accounting | Designated Proxy
8 Cognitive | Sample Person Only |

### CHECK SCREENER MARITAL STATUS

**1a.** If marital status is -5, code "No".

- I have (your) [SAMPNAME]'s marital status listed as [SCN_24]. Is this correct?

   - Yes—Set MARSTAT = SCN_24_R and SKIP TO 2a (DT_CKSEDU)
   - No
   - Don't Know, Refused—Set MARSTAT = SCN_24_R and SKIP TO 2a (DT_CKSEDU)

- (Are you) [SAMPNAME] currently married, widowed, divorced, separated, partnered (not married), or (have you) (he/she) never been married?

   - Yes
   - No
   - Don't Know, Refused—Set MARSTAT = SCN_24_R and SKIP TO 2a (DT_CKSEDU)

**1b.** MARSTAT

- Length 2
- If Education Level is -5, code "No".

### CHECK SCREENER EDUCATION LEVEL

**2a.** If education level is -5, code "No".

- I have (your) [SAMPNAME]'s educational attainment level listed as [SCN_EDUCA]. Is this correct?

   - Yes—Set EDUCAL = SCN_EDUCA - SKIP TO 3 (DT_CKSRACE)
   - No
   - Don't Know, Refused—Set EDUCAL = SCN_EDUCA - SKIP TO 3 (DT_CKSRACE)

- What is the highest level of regular school (you) [SAMPNAME] has completed or the highest degree (you/he/she) has received?

   - Less than 1st grade
   - 1st grade
   - 2nd grade
   - 3rd grade
   - 4th grade
   - 5th grade
   - 6th grade
   - 7th grade
   - 8th grade

### HELP SCREEN+ [REFERENCE]

**Education exclusions:**

- Do not include education obtained at vocational schools, business schools or colleges, and other trade and specialized schools unless such schools are part of a regular school system.

- Do not include training received by mail from "correspondence" schools, unless the correspondent course counted toward promotion in a regular school.

- Do not include any "on-the-job" training.

- Do not include adult education classes unless such schooling is being counted for credit in a regular school system. If a person is taking adult education classes but not for credit, he/she should not be regarded as enrolled in a regular school. Most of the training such as is under the Manpower Development and Training Act of 1962, Comprehensive Employment and Training Act of 1973 (CETA), or Poverty Program more than likely will be courses obtained at private vocational or trade schools or possibly will be in the nature of on-the-job training. In any event, most training under these Acts or the Poverty Program will not be obtained at a regular school. There may, however, be a few isolated cases where such schooling is given for credit at a regular school. Ask to be sure.

**3.** I have (your) [SAMPNAME]'s race listed as [race variable]. Is this correct?

- Yes—Set Detailed race variables equal to Screener Race variables - SKIP TO 3h (DT_CKSCAF)
- No
- Don't Know, Refused—Set Detailed race variables equal to Screener Race variables - SKIP TO 3h (DT_CKSCAF)
3a. Please answer the questions both about being Spanish, Hispanic, or Latino and about race.

(Are you/is) [SAMPNAME] Spanish, Hispanic, or Latino?

<table>
<thead>
<tr>
<th>Option</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>1</td>
</tr>
<tr>
<td>No - SKIP TO 3d (DT_6DTG_1)</td>
<td>2</td>
</tr>
<tr>
<td>Don't Know, Refused - SKIP TO 3d (DT_6DTG_1)</td>
<td>3</td>
</tr>
</tbody>
</table>

- HELP SCREEN - [REFERENCE]

Before you ask for the sample person's race, you will ask if he or she is of Spanish or Hispanic origin or descent. The national origin or cultural group a person is descended from is determined by the nationality or lineage of a person's ancestors. There is no rule on how many generations to consider. A respondent may report origin based on the origin of a parent, grandparent, or far-removed ancestor.

When the respondent is unsure, ask for the origin of the sample person's mother.

Listed below are possible responses and countries considered to be Spanish or Hispanic:

- Argentina
- Balearic Islands
- Basque
- Bolivia
- Californie
- Californio (Californi)
- Canary Islands
- Catalonian
- Chicano
- Costa Rica
- Cuban
- Dominican Republic
- Ecuatoriano
- El Salvador
- Guatemalan
- Hispanic
- Honduran
- Iberian (i.e. Spain)
- La Riza
- Majorcan
- Mexican-American
- Mexican
- Nicaragua
- Panama
- Puerto Rican
- Spanish
- Spanish-American
- Spanish speaking
- Spaniard
- Uruguay
- Venezuela

Always ask for the sample person's ethnicity even if the answer seems obvious. Record the response. If you are conducting the interview with a proxy, ask the question as worded. If the proxy is a family or household member, do not assume the proxy and the sample person are of the same race or descent.

3b. (Are you/is) [SAMPNAME] Mexican, Mexican American, Chicano, Puerto Rican, Cuban, Cuban American, or some other Spanish, Hispanic, or Latino group?

<table>
<thead>
<tr>
<th>Option</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mexican - SKIP TO 3d (DT_6DTG_1)</td>
<td>1</td>
</tr>
<tr>
<td>Mexican American - SKIP TO 3d (DT_6DTG_1)</td>
<td>2</td>
</tr>
<tr>
<td>Chicano - SKIP TO 3d (DT_6DTG_1)</td>
<td>3</td>
</tr>
<tr>
<td>Puerto Rican - SKIP TO 3d (DT_6DTG_1)</td>
<td>4</td>
</tr>
<tr>
<td>Cuban - SKIP TO 3d (DT_6DTG_1)</td>
<td>5</td>
</tr>
<tr>
<td>Cuban American - SKIP TO 3d (DT_6DTG_1)</td>
<td>6</td>
</tr>
<tr>
<td>Other Spanish, Hispanic, or Latino group</td>
<td>7</td>
</tr>
<tr>
<td>Don't Know, Refused - SKIP TO 3d (DT_6DTG_1)</td>
<td>8</td>
</tr>
<tr>
<td>Other - Specify in DT_6C2_2 below</td>
<td>9</td>
</tr>
</tbody>
</table>

3c. What is the name of (your)/[SAMPNAME]'s other Spanish, Hispanic, or Latino group?

<table>
<thead>
<tr>
<th>Option</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Argentinean</td>
<td>1</td>
</tr>
<tr>
<td>Balearic Islands</td>
<td>2</td>
</tr>
<tr>
<td>Basque</td>
<td>3</td>
</tr>
<tr>
<td>Belize or British Honduran or Belice</td>
<td>4</td>
</tr>
<tr>
<td>Bolivian</td>
<td>5</td>
</tr>
<tr>
<td>Brazilian</td>
<td>6</td>
</tr>
<tr>
<td>Canary Islands</td>
<td>7</td>
</tr>
<tr>
<td>Castilian</td>
<td>8</td>
</tr>
<tr>
<td>Catalan</td>
<td>9</td>
</tr>
<tr>
<td>Central American</td>
<td>10</td>
</tr>
<tr>
<td>Central American Indian</td>
<td>11</td>
</tr>
<tr>
<td>Chilean</td>
<td>12</td>
</tr>
<tr>
<td>Colombian</td>
<td>13</td>
</tr>
<tr>
<td>Costa Rican</td>
<td>14</td>
</tr>
<tr>
<td>Dominican</td>
<td>15</td>
</tr>
<tr>
<td>Ecuadoran</td>
<td>16</td>
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<tr>
<td>Filipino</td>
<td>17</td>
</tr>
<tr>
<td>Guatemalan</td>
<td>18</td>
</tr>
<tr>
<td>Guamanian or Chamorro</td>
<td>19</td>
</tr>
<tr>
<td>Haitian</td>
<td>20</td>
</tr>
<tr>
<td>Hispanic</td>
<td>21</td>
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<tr>
<td>Honduran</td>
<td>22</td>
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<td>Latin American</td>
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</tr>
<tr>
<td>Latino</td>
<td>24</td>
</tr>
<tr>
<td>Nicaraguan</td>
<td>25</td>
</tr>
<tr>
<td>Panamanian</td>
<td>26</td>
</tr>
<tr>
<td>Paraguayan</td>
<td>27</td>
</tr>
<tr>
<td>Peruvian</td>
<td>28</td>
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<tr>
<td>Portuguese</td>
<td>29</td>
</tr>
<tr>
<td>Salvadoran</td>
<td>30</td>
</tr>
<tr>
<td>Sephardic</td>
<td>31</td>
</tr>
<tr>
<td>South American</td>
<td>32</td>
</tr>
<tr>
<td>South American Indian</td>
<td>33</td>
</tr>
<tr>
<td>Spanish</td>
<td>34</td>
</tr>
<tr>
<td>Spanish American</td>
<td>35</td>
</tr>
<tr>
<td>Spanish American Indian</td>
<td>36</td>
</tr>
<tr>
<td>Spanish Basque</td>
<td>37</td>
</tr>
<tr>
<td>Spaniard</td>
<td>38</td>
</tr>
<tr>
<td>Uruguayan</td>
<td>39</td>
</tr>
<tr>
<td>Venezuelan</td>
<td>40</td>
</tr>
<tr>
<td>Both Spanish, Hispanic, or Latino and some other group</td>
<td>41</td>
</tr>
<tr>
<td>Don't Know, Refused - SKIP TO 3d (DT_6DTG_1)</td>
<td>42</td>
</tr>
<tr>
<td>Other - Specify in DT_6C2_2 below</td>
<td>43</td>
</tr>
</tbody>
</table>

3d. **FR: ENTER ALL THAT APPLY.**

IF PERSONAL VISIT INTERVIEW, SHOW FLASHCARD 2 AND ASK QUESTION. IF TELEPHONE INTERVIEW, SAY:

I'm going to read you a list of five race categories. Please choose one or more races that (you)/[SAMPNAME] consider(s) (yourself/himself/herself) to be:

- White; Black or African American; American Indian or Alaskan Native; Asian; OR Native Hawaiian or Other Pacific Islander.

**FR: DO NOT PROBE - UNLESS RESPONSE IS HISPANIC OR IS A HISPANIC ORIGIN.**

ENTER THE CATEGORY NUMBER TO SELECT OR DESELECT.

**ENTER (N) WHEN DONE.**

<table>
<thead>
<tr>
<th>Option</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>White</td>
<td>1</td>
</tr>
<tr>
<td>Black or African American</td>
<td>2</td>
</tr>
<tr>
<td>American Indian, or Alaska Native</td>
<td>3</td>
</tr>
</tbody>
</table>

-8 = Don't Know
-9 = Refused

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### Race Questions

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
<th>Value</th>
<th>Instruction</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Asian Indian</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Chinese</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Filipino</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Japanese</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Korean</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Vietnamese</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Other Asian</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Don't Know</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Refused</td>
<td>Yes</td>
<td></td>
</tr>
</tbody>
</table>

**Help Screen**: When asking for the sample person's race, do not try to explain or define any of the groups. The concept of race does not reflect clear cut definitions of biological stock or conform to any scientific definition. Rather, it reflects self-identification by the respondent. It reflects the race(s) with which the sample person most clearly identifies.

Read the respondent the race categories. If more than one race is reported, enter all of the race categories reported by the respondent.

If the response is not listed in the codes you read to the respondent (for example, ethnic origin such as Spanish, French, Italian, instead of a race), ask "Which of the races I read previously is that?" For responses of Caucasian, select 1 for White. For responses of Negro, select 2 for Black.

#### Asian Questions

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
<th>Value</th>
<th>Instruction</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Asian Indian</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Chinese</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Filipino</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Japanese</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Korean</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Vietnamese</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Other Asian</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Don't Know</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Refused</td>
<td>Yes</td>
<td></td>
</tr>
</tbody>
</table>

#### Native Hawaiian or Other Pacific Islander Questions

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
<th>Value</th>
<th>Instruction</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Native Hawaiian</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Guamanian or Chamorro</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Samoan</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Other Pacific Islander</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Don't Know</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Refused</td>
<td>Yes</td>
<td></td>
</tr>
</tbody>
</table>

**Help Screen**: When asking for the sample person's race, do not try to explain or define any of the groups. The concept of race does not reflect clear cut definitions of biological stock or conform to any scientific definition. Rather, it reflects self-identification by the respondent. It reflects the race(s) with which the sample person most clearly identifies.

Read the respondent the race categories. If more than one race is reported, enter all of the race categories reported by the respondent.

If the response is not listed in the codes you read to the respondent (for example, ethnic origin such as Spanish, French, Italian, instead of a race), ask "Which of the races I read previously is that?" For responses of Caucasian, select 1 for White. For responses of Negro, select 2 for Black.
3g. **CAPI**: if the "Other" box is checked:

FR: READ ONLY IF NECESSARY. MARK ALL THAT APPLY.

ENTER THE CATEGORY NUMBER TO SELECT OR DESELECT.

ENTER (N) WHEN DONE.

1. **Aleut**
   - **DT_6D3TG_1**
   - Length: 2
   - Yes
   - No

2. **African American**
   - **DT_6D3TG_2**
   - Length: 2
   - Yes
   - No

3. **African Nation, Ethnic Group, or Tribe**
   - **DT_6D3TG_3**
   - Length: 2
   - Yes
   - No

4. **American**
   - **DT_6D3TG_4**
   - Length: 2
   - Yes
   - No

5. **American Indian or Alaska Native**
   - **DT_6D3TG_5**
   - Length: 2
   - Yes
   - No

6. **Anglo-Saxon**
   - **DT_6D3TG_6**
   - Length: 2
   - Yes
   - No

7. **Arab**
   - **DT_6D3TG_7**
   - Length: 2
   - Yes
   - No

8. **Asian**
   - **DT_6D3TG_8**
   - Length: 2
   - Yes
   - No

9. **Asian Indian**
   - **DT_6D3TG_9**
   - Length: 2
   - Yes
   - No

10. **Black**
    - **DT_6D3TG_10**
    - Length: 2
    - Yes
    - No

11. **Brazilian**
    - **DT_6D3TG_11**
    - Length: 2
    - Yes
    - No

12. **Caucasian**
    - **DT_6D3TG_12**
    - Length: 2
    - Yes
    - No

13. **Chicano**
    - **DT_6D3TG_13**
    - Length: 2
    - Yes
    - No

14. **Chinese**
    - **DT_6D3TG_14**
    - Length: 2
    - Yes
    - No

15. **Creole**
    - **DT_6D3TG_15**
    - Length: 2
    - Yes
    - No

16. **Cuban or Cuban American**
    - **DT_6D3TG_16**
    - Length: 2
    - Yes
    - No

17. **Eskimo**
    - **DT_6D3TG_17**
    - Length: 2
    - Yes
    - No

18. **European**
    - **DT_6D3TG_18**
    - Length: 2
    - Yes
    - No

19. **Filipino**
    - **DT_6D3TG_19**
    - Length: 2
    - Yes
    - No

20. **German**
    - **DT_6D3TG_20**
    - Length: 2
    - Yes
    - No

21. **Guamanian or Chamorro**
    - **DT_6D3TG_21**
    - Length: 2
    - Yes
    - No

22. **Hispanic**
    - **DT_6D3TG_22**
    - Length: 2
    - Yes
    - No

23. **Jamaican**
    - **DT_6D3TG_23**
    - Length: 2
    - Yes
    - No

24. **Japanese**
    - **DT_6D3TG_24**
    - Length: 2
    - Yes
    - No

25. **Korean**
    - **DT_6D3TG_25**
    - Length: 2
    - Yes
    - No

26. **Latin American**
    - **DT_6D3TG_26**
    - Length: 2
    - Yes
    - No

27. **Latino**
    - **DT_6D3TG_27**
    - Length: 2
    - Yes
    - No

28. **Mexican or Mexican American**
    - **DT_6D3TG_28**
    - Length: 2
    - Yes
    - No
<table>
<thead>
<tr>
<th>(29) Native American</th>
<th>Length 2</th>
<th>2 No</th>
</tr>
</thead>
<tbody>
<tr>
<td>DT_6DSTG_29</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(30) Native Hawaiian or Other Pacific Islander</td>
<td>Length 2</td>
<td>2 No</td>
</tr>
<tr>
<td>DT_6DSTG_30</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(31) Negro</td>
<td>Length 2</td>
<td>2 No</td>
</tr>
<tr>
<td>DT_6DSTG_31</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(32) Puerto Rican</td>
<td>Length 2</td>
<td>2 No</td>
</tr>
<tr>
<td>DT_6DSTG_32</td>
<td></td>
<td></td>
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<tr>
<td>(33) Samoan</td>
<td>Length 2</td>
<td>2 No</td>
</tr>
<tr>
<td>DT_6DSTG_33</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(34) Scots-Irish</td>
<td>Length 2</td>
<td>2 No</td>
</tr>
<tr>
<td>DT_6DSTG_34</td>
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<td></td>
</tr>
<tr>
<td>(35) Spanish</td>
<td>Length 2</td>
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<td>(36) Vietnamese</td>
<td>Length 2</td>
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<tr>
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<tr>
<td>(37) West Indian</td>
<td>Length 2</td>
<td>2 No</td>
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<tr>
<td>DT_6DSTG_37</td>
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<td></td>
</tr>
<tr>
<td>(38) White</td>
<td>Length 2</td>
<td>2 No</td>
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<tr>
<td>DT_6DSTG_38</td>
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<tr>
<td>(39) No &quot;race&quot; given</td>
<td>Length 2</td>
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</tr>
<tr>
<td>DT_6DSTG_39</td>
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<td></td>
</tr>
<tr>
<td>(40) Other - Specify in DT_6D3_SP below</td>
<td>Length 2</td>
<td>2 No</td>
</tr>
<tr>
<td>DT_6DSTG_40</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Specify _________________</td>
<td></td>
<td></td>
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<tr>
<td>DT_6D3_SP</td>
<td>Length 30</td>
<td></td>
</tr>
<tr>
<td>(41) Don't Know</td>
<td>Length 2</td>
<td>2 No</td>
</tr>
<tr>
<td>DT_6DSTG_DK</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(42) Refused</td>
<td>Length 2</td>
<td>2 No</td>
</tr>
<tr>
<td>DT_6DSTG_RF</td>
<td></td>
<td></td>
</tr>
<tr>
<td>DT_6D3_KEY</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### CHECK SCREENER ARMED FORCES

**CAPI:** If INC_1A in Screener equals <> D, R - SKIP TO 3i (DT_INC_1A).

3. **FR:** IF MILITARY SERVICE IS -5, CODE "No."

**CAPI:** Reference Screener variables INC_1A, INC_1B_1 - INC_1B_RF.

I have (your)/[SAMNAME]'s military service status listed as (served) / (never served).  
Is this correct?  
DT_CKSCAF Length 2 -8, -9 Don't Know, Refused

3i. Did (you)/[SAMPNAME] EVER serve on active duty in the Armed Forces of the United States?  
DT_INC_1A Length 2 -8, -9 Don't Know, Refused - SKIP TO CHECK LTC_FLAG 1

**HELP SCREEN+ [REFERENCE]**

**SERVICE IN THE ARMED FORCES**

Service in the Armed Forces includes active duty in the U.S. Army, Navy, Air Force, Marine Corps, Coast Guard, and any National Guard unit which was activated as a part of the regular Armed Forces.

The following categories of service are also included:
1. Service in the reserves if on active duty status for several months.
2. Commissioned officers of the U.S. Public Health Service who were attached to a branch of the Armed Services.
3. The 6-month period a sample person may have served in connection with the provisions of the Reserve Forces Act of 1955.
4. Cadets in the United States military academies, such as West Point.

The following are not included as Service in the Armed Forces:
1. Sample persons whose only service was in the Coast Guard Temporary Reserve.
2. Employees of the Merchant Marine, Maritime Commission, American Field Service, or civilian employees of the Department of Defense.
3. Service in a National Guard Unit which was not activated into the regular forces.
4. Sample persons who had short periods of active reserve training or who attended weekly reserve meetings.

There are two components of each of the military services, a regular component and a reserve component. Always consider members of the regular Armed Forces to be on active duty unless retired. Members of reserve components may be called to active duty by military order. Include as active duty the 4-6 month period young men serve in connection with provisions of the Reserve Forces Act of 1955.

3j. **FR:** ENTER EACH ITEM MENTIONED.

When did (you)/[SAMPNAME] serve? Any other period of service?

FR: ENTER THE CATEGORY NUMBER TO SELECT OR Deselect.

ENTER (N) FOR NO MORE:

1. World War I (April '17 - Nov '18)  
   DT_INC_1BTG_1 Length 2 -8, -9 Don't Know

2. World War II (Sept '40 - July '47)  
   DT_INC_1BTG_2 Length 2 -8, -9 Don't Know

3. Korean War (June '50 - Jan '55)  
   DT_INC_1BTG_3 Length 2 -8, -9 Don't Know

4. Vietnam War (Aug '64 - April '75)  
   DT_INC_1BTG_4 Length 2 -8, -9 Don't Know

-8 = Don't Know
-9 = Refused
(5) Post Vietnam (May '75 - present)

(6) Other Service (All other periods)

(D) Don't Know

(R) Refused

(5) Post Vietnam (May '75 - present)

1. Yes

2. No

3. No - SKIP TO 3m (DT_INC_2A)

4. Don't Know, Refused - SKIP TO CHECK LTC_FLAG 1

5. Other Service (All other periods)

1. Yes

2. No

3. No - SKIP TO CHECK LTC_FLAG 1

4. Don't Know, Refused - SKIP TO CHECK LTC_FLAG 1

3k. (Were you/Was) [SAMPNAME] EVER an active member of a National Guard or military reserve unit?

1. Yes

2. No - SKIP TO 3m (DT_INC_2A)

3. Don't Know, Refused - SKIP TO CHECK LTC_FLAG 1

4. Set WORK = D or R and SKIP TO CHECK MARITAL 1

4. (Are you/Is) [SAMPNAME] currently working?

1. Yes

2. No—Set WORK = 0 and SKIP TO CHECK MARITAL 1

3. Don't Know, Refused—Set WORK = D or R and SKIP TO CHECK MARITAL 1

5. What is (your)/[SAMPNAME]'s current VA disability rating?

1. 0 - 10

2. 10

3. 20

4. 30

5. 40

6. 50

7. 60

8. 70

9. 80

10. 90

11. 100

12. -8 = Don't Know

13. -9 = Refused

4a. How many hours (do you/does) [SAMPNAME] usually work per week?

1. 0-99

2. 0

3. -8, -9 = Don't Know, Refused

5. What is (your)/[SAMPNAME]'s (wife's/husband's) full name?

1. First Name

2. Last Name

3. Don't Know, Refused

6. How old is (your)/[SAMPNAME]'s (fill spouse) as of today?

1. Less than 1st grade

2. 1st, 2nd, 3rd or 4th grade

3. 5th or 6th grade

4. 7th or 8th grade

5. 9th grade

6. 10th grade

7. 11th grade

8. 12th grade, no diploma

9. High School Graduate - Diploma or Equivalent (e.g., GED)

10. Some college but no degree

11. Diploma or certificate from a vocational, technical, trade or business school beyond the High School level

12. Associate Degree in college - Occupational/vocational program

13. Associate Degree in college - Academic

14. Bachelors Degree (e.g., BA, AB, BS)

15. Master's Degree (e.g., MA, MS, MEng, MEd, MSW, MBA)

16. Professional School Degree (e.g., MD, DDS, DVM, LLB, JD)
HELP SCREEN [REFERENCE]

Education exclusions:
Do not include education obtained at vocational schools, business schools or colleges, and other trade and specialized schools unless such schools are part of a regular school system.
Do not include training received by mail from "correspondence" schools, unless the correspondent course counted toward promotion in a regular school.
Do not include any "on-the-job" training.

Most of the training such as is under the Manpower Development and Training Act of 1962, Comprehensive Employment and Training Act of 1973 (CETA), or Poverty Program more than likely will be courses obtained at private vocational or trade schools or possibly will be in the nature of on-the-job training. In any event, most training under these Acts or the Poverty Program will not be obtained at a regular school.

There may, however, be a few isolated cases where such schooling is given for credit at a regular school. Ask to be sure.

R. Is (your) [SAMPNAME]'s [FILL spouse] currently working?

- No - Set SPWORK = 0 and SKIP TO CHECK LTC_FLAG 2

HELP SCREEN [REFERENCE]

Work includes residence as a paid employee in the person's own business, professional practice, or farm; or work without pay as an employee in a family farm or business.

Work does not include work as a volunteer without pay for such organizations as the Red Cross, USO, etc.

6a. How many hours does (your) [SAMPNAME]'s [FILL spouse] usually work per week?

- 0-99 Hours

- 8, 9

CHECK LTC_FLAG 2

CAPI: If LTC_FLAG = 1, then SKIP TO CHECK SPMEM.

CHECK MARRITAL 2

CAPI: Refer to MARSTAT.

SPMEM

CAPI: If SPMEM equal to 1, -8, -9, store in HHMEM_02. Else HHMEM_02 equal -5.

OPEN HOUSEHOLD ROSTER -

NOTE: "01" or "1" subscript reserved for sample person. "02" or "2" subscript is reserved for spouse.

There may be a maximum of 20 persons (sample person, spouse, other household members, children not in household, helpers not previously mentioned, and proxy) in the person roster. These people are referenced by arrays of variables subscripted "01" - "20", each subscript representing one person. For example, since the sample person is always the first entry into the person roster, all person roster variables referring to the sample person are stored in variables ending in subscript "01". Variables not relevant to the rostered person are coded -5. For example, if the third person entered into the roster is a household member, all rostered variables ending in '03' or '_3' will refer to that person. Since s/he is a household member, all of the 'children not in household' variables ending in '03' or '_3' will be coded -5.

NOTE: The roster questions below are administered in the following manner. First, the names of all household members are collected (10a). Then all the information for the first person is collected (questions 10c through 10k), then we cycle back and collect all the information for the second person added until all information is collected. The same approach is used for children living outside of the household. The same approach is used for children living outside of the household.

10a. FR: ENTER LINE NUMBER.

ENTER (P) FOR PERSON NOT LISTED.
ENTER (E) TO ERASE A NEWLY ADDED NAME.
ENTER (N) FOR NO MORE.
ENTER (D) FOR DON'T KNOW.
ENTER (R) FOR REVISED.

What are the names of all (other) persons living or staying here now?

Anyone else?

If the third person entered into the roster is a household member, all rostered variables ending in '03' or '_3' will refer to that person. Since s/he is a household member, all of the 'children not in household' variables ending in '03' or '_3' will be coded -5.

NOTE: The roster questions below are administered in the following manner. First, the names of all household members are collected (10a). Then all the information for the first person is collected (questions 10c through 10k), then we cycle back and collect all the information for the second person added until all information is collected. The same approach is used for children living outside of the household.

10c. FR: SHOW FLASHCARD 4.

What is [ROS_NAME_1-20]'s relationship to (you) [SAMPNAME]?

CAPI store REL_01_1 - REL_20_1 into ROS_REL_3 - ROS_REL_20
<table>
<thead>
<tr>
<th>Question</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>10d.</td>
<td>Does [ROS_NAME_3-20] usually live here?</td>
</tr>
<tr>
<td>10e.</td>
<td>Is [ROS_NAME_3-20] male or female?</td>
</tr>
<tr>
<td>10f.</td>
<td>How old is [ROS_NAME_3-20] as of today?</td>
</tr>
<tr>
<td>10g.</td>
<td>How many children under 15 years of age live with [ROS_NAME_3-20]?</td>
</tr>
<tr>
<td>10h.</td>
<td>How many hours does [ROS_NAME_3-20] usually work per week?</td>
</tr>
</tbody>
</table>

**HELP SCREEN** (REFERENCE)

*Education exclusions:*
No include education obtained at vocational schools, business schools or colleges, and other trade and specialized schools unless such schools are part of a regular school system.

*Do not include training received by mail from 'correspondence' schools, unless the correspondent course counted toward promotion in a regular school.*

*Do not include any "on-the-job" training.*

*Do not include adult education classes unless such schooling is being counted for credit in a regular school.*

*If a person is taking adult education classes but not for credit, he/she should not be regarded as enrolled in a regular school.*

*Most of the training such as is under the Manpower Development and Training Act of 1962, Comprehensive Employment and Training Act of 1973 (CETA), or Poverty Program more than likely will be courses obtained at private vocational or trade schools or possibly will be in the nature of on-the-job training.*

*In any event, most training under these Acts or the Poverty Program will not be obtained at a regular school.*

*There may, however, be a few isolated cases where such schooling is given for credit at a regular school. Ask to be sure.*

*HELP SCREEN** (REFERENCE)

*Work includes work as a paid employee in the person's own business, professional practice, or farm; or work without pay as an employee in a family farm or business.*

Note: Questions CHECK RELATIONSHIP through LASTSExx were skipped for all observations because of CAPI error in 2004. Variables HHSWORKxXx and CHFAM_xxx were set to -7 for children with MEMxx equal to 2 (not usually in the household). LASTSExx was set to 1, since these children were currently visiting the Sample Person.

**CHECK RELATIONSHIP**

CAPI: Check ROS_REL_3 - ROS_REL_20.

- If ROS_REL_3-20 is not equal or 3 or 4 and last name in roster, SKIP TO CHECK SPMEM.
- If ROS_REL_3-20 not equal or 3 or 4 and more names in roster, SKIP BACK TO 10c.
- If ROS_REL_3-20 equal 3 or 4 and HHAR03-20 not equal to 1, SKIP TO CHECK HOUSEHOLD MEMBERSHIP.

**CHECK HOUSEHOLD MEMBERSHIP**

CAPI: Check MEM03 - MEM20

- If MEM03-20 is equal to 1, SKIP TO CHECK CHILDREN. Otherwise, CONTINUE.
10h. When did you [SAMPNAME] last see [ROS_NAME_3-20]?
   LASTSE03 -
   Length 2
   3 - 8 days ago
   4 - 31 days - 12 months ago
   5 - More than 12 months ago
   -8, -9 = Don't Know, Refused

HELP SCREEN: [REFERENCE]
One of the questions you will be asking regarding the sample person's children is how long it usually takes him/her to get to the sample person's home. Enter the code column. For example, if the respondent states that it would take 60 minutes by plane but 8 hours by car, probe to see which mode of transportation is usually used when making visits to the sample person.

CLOSE HOUSEHOLD ROSTER -
CHECK SPMEM
CAPI: If SPMEM not equal to 1 and MARSTAT = 1 continue, else SKIP TO DT_CHK_CHILD.
11a. What is the name of the institution where your [SAMPNAME]'s [FULL spouse] is staying?
   SPINSN3M
   Length 2
   2 - Don't Know, Refused
   -8, -9 = Don't Know, Refused
   Other - specify in SPINSNM3_SP below

11b. What is [SAMPNAME]'s [FULL spouse]'s address?
   DT_SPADDR_SPADD2
   Length 54
   Street Address
   DT_SPADDR_SPPLACE
   Length 54
   Town, City, Place
   DT_SPADDR_SPSTATE
   Length 40
   County
   DT_SPADDR_SPZIP4
   Length 2
   Zip Code 5
   DT_SPADDR_SPZIP5
   Length 4
   Zip 4
   -8, -9 = Don't Know, Refused

CHECK CHILDREN
CAPI: Refer to 10c [ROS_REL_3-20] and 10d [MEM03-20].
DT_CHK_CHILD
Length 2
1-18 = Any children in household roster - SKIP TO 12a (OTHCHILD)
0 = No children in household roster

12. How many living children, including natural, adopted, and step children (do you/does) [SAMPNAME] have?
   SPINSN3M
   Length 2
   0 - No children - SKIP TO DT CONTROL CARD END
   2 - 7 days ago
   4 - 31 days - 12 months ago
   5 - More than 12 months ago
   -8, -9 = Don't Know, Refused

12a. READ NAMES OF CHILDREN ALREADY GIVEN.
   If SPMEM not equal to 1 and MARSTAT = 1 continue, else SKIP TO DT_CHK_CHILD.
   ANYCHILD
   Length 2
   2 = Don't Know, Refused - SKIP TO DT CONTROL CARD END

OPEN CHILDREN NOT IN HOUSEHOLD ROSTER
12b. What are the names of (your) [SAMPNAME]'s (other) children?
   DT_CHROSNM
   Length 35
   Full Name
   CAPI store DT_CHROSNM into
   ROS_NAME_3 - ROS_NAME_20
   and set CH_ADD03 - CH_ADD20 to 1
   CH_ADD03 -
   CH_ADD20
   Length 2
   1 = Child not in household - Entered in roster

FR: ENTER (P) FOR PERSON NOT LISTED.
ENTER (S) FOR A PERSONAL DESCRIPTION.
ENTER (E) TO ERASE A NEWLY ADDED NAME.
ENTER (N) FOR NO MORE CHILDREN GIVEN.
ENTER (D) FOR DON'T KNOW.
ENTER (R) FOR REFUSED.
   ROS_TYPE_3 -
   Length 2
   R = Roster Entry added, person name
   H = Roster Entry added, description

Are there any more children?
   DT_CHK1
   N = No More - Fill response in DT_CHK1, then CONTINUE TO 12d (DT_CHKSEX03-20)
   D = Don't Know, Refused - Fill response in DT_CHK1 & SKIP TO DT CONTROL CARD END
   DT_CHK2
   Allows more entries up to a maximum of 20
   IF LESS THAN 1 YEAR OF AGE, ENTER 1.

FR: IF GENDER IS APPARENT, MARK WITHOUT ASKING.
   Is [ROS_NAME_3-20] male or female?
   DT_CHKSEX03 -
   Length 2
   Male
   Female
   -8, -9 = Don't Know, Refused

   How old is [ROS_NAME_3-20] as of today?
   DT_CHKSEX03 -
   Length 3
   Years - SKIP TO 12j (HOWFAR03-20)
   1-18
   16 - 130
   -8, -9 = Don't Know, Refused

12b. How many hours does [ROS_NAME_3-20] usually work per week?
   DT_CHKWORK03 -
   Length 2
   0 - 99 Hours
   -8, -9 = Don't Know, Refused

12c. Is [ROS_NAME_3-20] currently married, widowed, divorced, separated, partnered (not married), or has (his/her) never been married?
   DT_CHKMARST03 -
   Length 2
   Married
   Widowed - SKIP TO 12i (CHFAM_03-20)
   Divorced - SKIP TO 12i (CHFAM_03-20)
   Separated - SKIP TO 12i (CHFAM_03-20)
   Never Married - SKIP TO 12i (CHFAM_03-20)
### 12h. How many hours does [ROS_NAME_3-20]'s (FILL spouse) usually work per week?

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-99</td>
<td>Hours</td>
</tr>
<tr>
<td>-8</td>
<td>Don't Know, Refused</td>
</tr>
</tbody>
</table>

**DT_CHSPWORK03 - Length 2**
**DT_CHSPWORK20**

### 12i. How many children under 15 years of age live with [ROS_NAME_3-20]?

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-30</td>
<td>Number of children</td>
</tr>
<tr>
<td>-8</td>
<td>Don't Know, Refused</td>
</tr>
</tbody>
</table>

**CHFAM_03 - Length 2**
**CHFAM_20**

### 12j. About how long does it USUALLY take for [ROS_NAME_3-20] to get here from (he/she) lives?

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>10 minutes or less</td>
</tr>
<tr>
<td>2</td>
<td>11-30 minutes</td>
</tr>
<tr>
<td>3</td>
<td>31-60 minutes</td>
</tr>
<tr>
<td>4</td>
<td>61 minutes, but less than 1 day</td>
</tr>
<tr>
<td>5</td>
<td>1 day or longer</td>
</tr>
<tr>
<td>-8</td>
<td>Don't Know, Refused</td>
</tr>
</tbody>
</table>

**HOWFAR03 - Length 2**
**HOWFAR20**

### 12k. When did (you)/[SAMPNAME] last see [ROS_NAME_3-20]?

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Today or Yesterday</td>
</tr>
<tr>
<td>2</td>
<td>2-7 days ago</td>
</tr>
<tr>
<td>3</td>
<td>8-30 days ago</td>
</tr>
<tr>
<td>4</td>
<td>31 days - 12 months ago</td>
</tr>
<tr>
<td>5</td>
<td>More than 12 months ago</td>
</tr>
<tr>
<td>-8</td>
<td>Don't Know, Refused</td>
</tr>
</tbody>
</table>

**LASTSE03 - Length 2**
**LASTSE20**

---

**HELP SCREEN** [REFERENCE]

One of the questions you will be asking regarding the sample person's children is how long it usually takes him/her to get to the sample person's home. Enter the code column. For example, if the respondent states that it would take 60 minutes by plane but 8 hours by car, probe to see which mode of transportation is usually used when making visits to the sample person.

### 12l. When did (you)/[SAMPNAME] last see [ROS_NAME_3-20]?

1. Complete—Set DT_OUTCOME AT END OF DETAILED INTERVIEW = 801
2. Incomplete - SKIP TO DT_REASON AT END OF DETAILED INTERVIEW—set = 99

**DT_CC_COMPLETE - Length 2**

---

**CHECK MORE CHILDREN**

- CLOSE CHILDREN NOT IN HOUSEHOLD ROSTER -

**CAPT** If more children in roster, return to 12d (DT_CHSEX03-20) and complete questions 12d (DT_CHSEX03-20) - 12k (LASTSE03-20) for each child.

**SELECT SURVEY**

- LTC_FLAG equals 2 or 3, SKIP TO CND BEGIN.

**CHECK MENTAL**

- LTC_FLAG equals 1 and SEL_RESP equals 1 or 2, SKIP TO CND BEGIN. IF LTC_FLAG equals 1 and SEL_RESP equals 3, SKIP TO AMNH BEGIN.