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| ID |  |
| fam\_income | 1= $0-$14,999  2= $15,000-$24,999  3= $25,000-$34,999  4= $35,000-$49,999  5= $50,000-$74,999  6= $75,000-$124,999  7= $125,000 or more |
| birth\_yr | 4 digit number |
| gender | 1=male  2=female |
| race | Text categories |
| education | 1-Up to 8th grade  2-Some high school  3-HS grad/GED  4-Some college  5-Associate's degree  6-Bachelor's degree  7-Grad/prof degree |
| sex\_orient | Heterosexual  Bisexual  Gay/Lesbian |
| limitations | B14. Is the (respondent) limited, because of physical,mental or emotional  0=no; 1=yes |
| reg\_meds | B18. Does the (respondent) have any medications he/she takes on a regular basis?  0=no; 1=yes |
| hx-mi | B20. Has the (respondent) ever had a heart attack?  0=no; 1=yes |
| hx\_chf | B21. Has the (respondent) ever been treated for heart failure? (For example, had fluid in the lungs or told the heart was not pumping well.)  0=no; 1=yes |
| hx\_dm | B24. Has the (respondent) ever been  diagnosed with diabetes?  0=no; 1=yes |
| hx\_hiv | B25. Has the (respondent) ever been diagnosed with HIV/AIDS?  0=no; 1=yes |
| hx\_hepA\_B | B26. Has the (respondent) ever been diagnosed with hepatitis A or B?  0=no; 1=yes |
| hx\_hepC | B27. Has the (respondent) ever been diagnosed with hepatitis C?  0=no; 1=yes |
| hx\_cancer | B29. Has (respondent) ever been diagnosed with any type of cancer?  0=no; 1=yes |
| copd | B31a. Has (respondent) ever been diagnosed with any of the following:  Emphysema/COPD  0=no; 1=yes |
| chr\_bronch | B31b. Has (respondent) ever been diagnosed with any of the following:  Chronic bronchitis  0=no; 1=yes |
| asthma | B31c. Has (respondent) ever been diagnosed with any of the following:  Asthma  0=no; 1=yes |
| flushot12mos | B32. During the past 12 months, has the (respondent) had a flu shot?  0=no; 1=yes |
| smoke\_reg | B35. Does the (respondent) smoke tobacco regularly?  0=no; 1=yes |
| gen\_health | C1. Would you say in general your health is:  1-Excellent  2-Very good  3-Good  4-Fair  5-Poor |
| health\_ins | C3. Do you currently have any health insurance?  0=no; 1=yes |
| hi\_cholest | C20. Have you ever been told by a doctor,  nurse or other health professional that  your blood cholesterol is high?   * no * yes * don’t know/not sure |
| told\_asthma | C21. Have you ever been told by a doctor that you have asthma?  0=no; 1=yes |
| told\_dm | C24. Have you ever been told by a doctor that you have diabetes?  0=no;  1=in pregnancy;  2=yes |
| sob\_exert | C29. Have you had shortness of breath either when hurrying on the level or walking up a slight hill?  0=no; 1=yes |
| hgt\_inch | Height in inches |
| weight | Weight in pounds |
| dys\_badmental | C40. Now thinking about your mental health, which includes stress, depression, and problems with emotions, for how many days during the past 30 days was your mental health not good? |
| days\_sad | C42. During the past 30 days, for about how many days have you felt sad, blue, or depressed? |
| days\_worried | C43. During the past 30 days, for about how many days have you felt worried, tense, or anxious? |
| seat\_belt | D1. When you drive or ride in a vehicle, how often do you use a seat belt?  0-I don't ride in any cars or trucks  1-Never  2-Rarely  3-Sometimes  4-Most of the time  5-Always |
| active\_past30 | D3. During the past 30 days, other than your regular job, did you participate in any physical activity such as running, calisthenics, golf,  gardening, or walking for exercise?  0=no; 1=yes |
| smoker | D4. What is your cigarette smoking behavior?  Currently a smoker  Never smoked  Ex-smoker |
|  | D5. On average, how many cigarettes a day  do you smoke now?  a-None  b-1-10  c-11-20  d-21-40  e-More than 40 |
| Dui\_month | D12. In the past month, have you driven a car while under the influence of alcohol or drugs?  0=no; 1=yes |
| handgun | D15a. In your home, do you have gun(s) (include those in a car, truck, or outdoor storage area)?  0=no; 1=yes  Note: Survey distinguished between guns with and without locks. I collapsed them into one category for simplicity |
| rifle\_shotgun | D15b. In your home, do you have rifle(s) or shotgun(s) (include those in a car, truck, or outdoor storage area)?  0=no; 1=yes  Note: Survey distinguished between guns with and without locks. I collapsed them into one category for simplicity |