

SECTION I
Health Conditions and Health Services

VARIABLES IMPORTED FROM EARLIER SECTIONS:

RSTATE STATE OF RESIDENCE FROM SCREENER PRELOADS
CMINTVW: CENTURY MONTH OF INTERVIEW (FROM A)
CMLSTYR_FILL MO/YR FILL FOR CMLSTYR (FROM A)
AGESCRN R'S AGE AT SCREENER (FROM A)
AGE_R R'S AGE AT INTERVIEW (FROM A)
CMBIRTH CENTURY MONTH OF R'S BIRTH (FROM A)
MARSTAT INFORMAL MARITAL STATUS (FROM A)
FMARIT FORMAL MARITAL STATUS (FROM A)
RHADSEX WHETHER R EVER HAD SEX OR NOT (FROM B)
LIFEPRT # OF FEMALE SEXUAL PARTNERS IN LIFETIME (BC-6, ASKED)
LIFEPRTS # OF FEMALE SEXUAL PARTNERS IN LIFETIME (COMPUTED IN B)
CMFSXCWP CM DATE OF 1ST SEX W/ CURRENT WIFE/COHAB PARTNER (FROM C)

VARIABLES CREATED IN THIS SECTION & OUTPUT TO DATA FILE:

CMINFVIS CM DATE OF LAST/MOST RECENT INFERTILITY VISIT (FLOW CHECK I-9)
CMHIVTST CM DATE OF LAST/MOST RECENT HIV TEST (FLOW CHECK I-10)

VARIABLES CREATED IN THIS SECTION & ARE NOT OUTPUT TO DATA FILE:

CMHIVTST_FILL Mo/Yr fill for CMHIVTST (Flow Check I-10)

{ ASKED FOR ALL

INTRO_I1

IA-0. The next questions are about your experiences with health care providers, health insurance, and health problems.

♦ ENTER [1] to continue

Access to Health Care (IA)

USUALCAR

IA-1. Is there a place that you usually go to when you are sick or need advice about health?

Yes1
No5

FLOW CHECK I-0: IF IA-1 USUALCAR = 5 or DK/RF, GO TO IA-3 CURRCOV.

{ ASKED IF R REPORTED A USUAL SOURCE OF CARE

USLPLACE

IA-2. Please look at Card 25a. What kind of place is it?

[SHOW CARD 25a]

Private doctor's office or HMO.....1
Community health clinic, community clinic,
public health clinic2
Family planning or Planned Parenthood Clinic3
Employer or company clinic4
School or school-based clinic5
Hospital outpatient clinic6
Hospital emergency room7
Hospital regular room8
Urgent care center, urgi-care, or walk-in facility9
Sexually transmitted disease (STD) clinic.....10
In-store health clinic (like CVS, Target, or Walmart)...11
Some other place20

{ ASKED IF R REPORTED A USUAL SOURCE OF CARE IN USUALCAR
USL12MOS

IA-2a. Have you gone to this place in the last 12 months, that is, since
(CMLSTYR_FILL)?

Yes1
No5

{ ASKED FOR ALL
CURRCOV

IA-3. Are you currently covered by any kind of health insurance or some other
kind of health care plan?

[HELP AVAILABLE]

Yes1
No5

FLOW CHECK I-1a: IF IA-3 CURRCOV = 5 or DK/RF, GO TO IA-8 COVER12

{ASKED IF R IS CURRENTLY COVERED BY HEALTH INSURANCE
COVERHOW

IA-4. Card 76 shows different types of health care coverage. Which of these
are you covered by?

ENTER all that apply

[HELP AVAILABLE]

A private health insurance plan (from employer or workplace;
purchased directly; through a state or local government program
or community program).....1
Medicaid-additional name(s) for Medicaid in this state: [DISPLAY
STATE MEDICAID PROGRAM NAME(S)].....2
Medicare.....3
Medi-Gap.....4
Military health care, including: the VA, CHAMPUS, TRICARE, CHAMP-VA.5
Indian Health Service.....6
CHIP (Children's Health Insurance Program-additional name(s) for
CHIP in this state: [DISPLAY STATE CHIP PROGRAM NAME(S)].....7
Single-service plan (e.g., dental, vision, prescriptions).....8
State-sponsored health plan (called [DISPLAY STATE PLAN NAME] in
this state).....9
Other government health care.....10

FLOW CHECK I-1b: IF AGE_R < 18 OR AGE_R > 25, THEN GO TO IA-6 INS_EXCH.

**ELSE IF AGE_R >= 18 AND AGE_R <=25 AND IA-4 COVERHOW HAS
ONLY ONE RESPONSE AND IA-4 COVERHOW = 1 (PRIVATE HEALTH
INSURANCE), OR MORE THAN ONE RESPONSE IN IA-4 COVERHOW AND
ANY MENTION OF IA-4 COVERHOW = 1 (PRIVATE HEALTH
INSURANCE), ASK IA-5 PARINSUR.**

ELSE GO TO IA-6 INS_EXCH.

{ ASKED IF R IS 18-25 AND CURRENTLY HAS PRIVATE INSURANCE COVERAGE
PARINSUR

IA-5. Are you covered on your parents' private health insurance plan?

Yes1
No5

{ ASKED IF R IS CURRENTLY COVERED BY HEALTH INSURANCE

INS_EXCH

IA-6. IF MORE THAN ONE TYPE OF INSURANCE WAS MENTIONED IN IA-4 COVERHOW (COVERHOW2 NE blank), ASK:

Were any of your health insurance plans obtained through Healthcare.gov or the [DISPLAY STATE MARKETPLACE NAME]?

ELSE IF ONLY ONE TYPE OF INSURANCE WAS MENTIONED IN IA-4 COVERHOW (COVERHOW2 = blank), ASK:

Was your health insurance plan obtained through Healthcare.gov or the [DISPLAY STATE MARKETPLACE NAME]?

Yes1
No5

{ ASKED IF R IS CURRENTLY COVERED BY HEALTH INSURANCE

INS_PREM

IA-7. IF MORE THAN ONE TYPE OF INSURANCE WAS MENTIONED IN IA-4 COVERHOW (COVERHOW2 NE blank), ASK:

A health insurance premium is the amount you or a family member pays each month for health care coverage. Do you or a family member pay a premium for any of your health insurance plans?

ELSE IF ONLY ONE TYPE OF INSURANCE WAS MENTIONED IN IA-4 COVERHOW (COVERHOW2 = blank), ASK:

A health insurance premium is the amount you or a family member pays each month for health care coverage. Do you or a family member pay a premium for your health insurance plan?

Yes1
No5

{ ASKED FOR ALL

COVER12

IA-8. Looking at Card 75 for examples of types of health insurance coverage, in the past 12 months, that is, since (CMLSTYR_FILL), was there any time that you did not have any health insurance or coverage?

[SHOW CARD 75]
[HELP AVAILABLE]

Yes1
No5

FLOW CHECK I-2: IF IA-8 COVER12 = 5 or DK/RF, GO TO IB-1 YUOGFPC.

{ ASKED IF R HAD NO HEALTH INSURANCE AT SOME TIME IN THE PAST YEAR

NUMNOCOV

IA-9. In how many of the past 12 months were you without coverage?

- ◆ ENTER number of months.
- ◆ If R went less than one month without coverage, enter [1].

UNDERLYING RANGE: 1-12

Use of Family Planning Clinics (IB)

{ asked of all Rs

YOUGOFPC

IB-1. Now please look at Card 69, which shows some family planning and health services. Have you, yourself, ever received services such as these from a family planning clinic or Planned Parenthood clinic?

[SHOW CARD 69]

Yes1
No5 (IC-1 DEAF)

WHENGOFPC

IB-2. When was the last time you received services from a family planning clinic or Planned Parenthood clinic? Was it within the last 12 months, that is, since (CMLSTYR_FILL), or more than 12 months ago?

Within the last 12 months1
More than 12 months ago2 (IC-1 DEAF)

YOUFPSVC

IB-3. Please look again at Card 69. Which of these services did you receive at that visit?

♦ ENTER all that apply

[SHOW CARD 69]

Physical exam1
Information or advice on birth control methods, including condoms.2
HIV testing3
Testing for sexually transmitted infection other than HIV4
Treatment for sexually transmitted infection other than HIV5
Some other service.....6

Health Problems or Impairments; Cancer (IC)

DEAF

IC-1. The following questions are about other health problems or impairments you may have. Do you have serious difficulty hearing?

Yes1
No5

BLIND

IC-2. Do you have serious difficulty seeing, even when wearing?

Contact lenses should be considered in the same way as glasses.

Yes1
No5

DIFDECIDE

IC-3. Because of a physical, mental, or emotional condition, do you have serious difficulty concentrating, remembering or making decisions?

Yes1

No5

DIFWALK

IC-4 Do you have serious difficulty walking or climbing stairs?

Yes1

No5

DIFDRESS

IC-5. Do you have difficulty dressing or bathing?

Yes1

No5

DIFOUT

IC-6. Because of a physical, mental, or emotional condition, do you have difficulty doing errands alone such as visiting a doctor's office or shopping?

Yes1

No5

{ Asked for all

EVRCANCER

IC-7. Now I would like to ask you about cancer. Have you ever been told by a doctor or other health care provider that you had cancer?

Yes1

No5 (IC-8 ALCORISK)

{ Asked if R has ever had cancer

AGECANCER

IC-7a. At what age were you first told that you had cancer?

♦ *If necessary:* if you have had more than one cancer, please tell me about your first cancer.

♦ *ENTER age in years*

UNDERLYING RANGE = 0 to 45

EDIT CHECK IC7a_1: IF AA-1 AGE_R > IC-7a AGECANCER, DISPLAY TEXT: R has reported that his first cancer was diagnosed at an age older than his current age. Please correct the age of his first cancer diagnosis (AGECANCER).
HARD, NONSUPPRESSIBLE EDIT CHECK.

{ Asked if R has ever had cancer

CANCTYPE

IC-7b. What type of cancer was it? If you had cancer more than once, please say what your first cancer was.

INTERVIEWER NOTE: Code based on what respondent reports for his first type of cancer. The list is alphabetical. Read the list only if necessary. You may stop reading the list when the respondent states a cancer.

Bladder cancer01

Blood02

Bone cancer.....03

Brain cancer or tumor, spinal cord cancer, or other cancer of the central nervous system	04
Breast cancer	05
BLANK	06
Colon cancer	07
Esophageal (Esophagus) cancer.....	08
BLANK	09
Gallbladder Cancer.....	10
Head and neck cancer.....	11
Heart cancer	12
Laryngeal (Larynx/Windpipe)cancer..	13
Leukemia.....	14
Liver cancer	15
Lung cancer	16
Lymphoma including Hodgkins disease/ Lymphoma and non-Hodgkins lymphomas	17
Melanoma	18
Neuroblastoma	19
Oral (mouth/tongue/lip) cancer	20
BLANK.....	21
Pancreatic (pancreas) cancer.....	22
Pharyngeal (throat/pharynx) cancer.	23
Prostate cancer.....	24
Rectal (rectum) cancer	25
Renal (kidney) cancer	26
Skin cancer (non-melanoma)	27
Skin cancer (DK what kind)	28
Soft Tissue (muscle or fat)sarcoma..	29
Stomach cancer	30
Testicular (testis) cancer	31
Thyroid cancer	32
Other	33

[IF CODE 33 NOT REPORTED, GO TO ID-1 VISIT12MO]

SP_CANCTYPE

IC-7sp. IF IC-7b CANCTYPE = 33 (other):
INTERVIEWER: Record verbatim what R reports for his type of
cancer.

TYPE: STRING [250]

{ ASKED FOR ALL

ALCORISK

IC-8. Do you think that drinking more than 1 alcoholic beverages a day
increases one's chances of getting cancer a lot, a little, or not at
all or do you have no opinion?

A lot1
A little2
Not at all3
No opinion4

Health Services (ID)

VISIT12MO

ID-1. Please look at card 69a. In the past 12 months, that is, since

(CMLSTYR_FILL), did you have any of these types of visits to a doctor or health care provider ...

[SHOW CARD 69a]

- ♦ ENTER all that apply
- ♦ ENTER space or [-] to separate responses.

A routine physical exam1
A physical exam for sports or work..... 2
A doctor visit when you were sick or hurt....3
Did not have any visits to a doctor4

EDIT CHECK ID1_1: IF VISIT12MO = 4 AND ANY OTHER CODE, DISPLAY TEXT:
"Did not have any visits to a doctor" may not be used in combination with any other answer for this question. Verify the answer with R and re-enter."
HARD, NONSUPPRESSIBLE EDIT CHECK.

FLOW CHECK I-3: IF ID-1 VISIT12MO = 4 GO TO ID-9 BARRIER.
ELSE if ID-1 VISIT12MO=DK or RF, GO TO Flow Check I-7
ELSE ASK ID-2 SVC12MO.

{ Asked if ID-1 VISIT12MO=1,2,3

SVC12MO

ID-2. Please look at Card 69b. Did you receive any of the services shown on this card at those visits in the past 12 months?

[SHOW CARD 69b]

- ♦ ENTER all that apply
- ♦ ENTER space or [-] to separate responses.

A testicular exam (had your testicles examined)1
Testing for sexually transmitted disease2
Treatment for sexually transmitted disease3
Information or advice about using condoms4
Information or advice about your partner using female methods of birth control5
Information or advice about you getting a vasectomy (surgically sterilized)6
Information or advice about HIV or AIDS7
Information or advice about other sexually transmitted infections, such as gonorrhea, Chlamydia, syphilis, or genital herpes8
None of the above9

EDIT CHECK ID2_1: IF SVC12MO = 9 AND ANY OTHER CODE, DISPLAY TEXT:
"None of the above" may not be used in combination with any other answer for this question. Verify the answer with R and re-enter."
HARD, NONSUPPRESSIBLE EDIT CHECK.

{ Asked if ID-1 VISIT12MO=1,2,3

NUMVISIT

ID-3. How many visits did you have in the last 12 months in order to receive these services from a doctor or other health care provider?

- ♦ ENTER number of visits
- {Underlying range 1 to 95}

{ Asked if ID-1 VISIT12MO=1,2,3

PLACEVIS

ID-4. Please look at Card 25a. What place or places did you go for these service(s)?

- ◆ ENTER all that apply
- ◆ ENTER space or [-] to separate responses.

[SHOW CARD 25a]

Private doctor's office or HMO.....1
Community health clinic, community clinic,
public health clinic2
Family planning or Planned Parenthood clinic3
Employer or company clinic4
School or school-based clinic5
Hospital outpatient clinic6
Hospital emergency room7
Hospital regular room8
Urgent care center, urgi-care, or walk-in facility ..9
Sexually transmitted disease (STD) clinic.....10
In-store health clinic (like CVS, Target, or Walmart)11
Some other place20

{ Asked if ID-1 VISIT12MO=1,2,3

SVCPAY

ID-5. Please look at Card 16a. In which of the ways shown on this card was the bill for these visits paid?

- ◆ ENTER all that apply.
- ◆ PROBE: Any other ways?

[SHOW CARD 16a]

Insurance1
Co-payment2
Out-of-pocket payment3
Medicaid4
No payment required.....5
Some other way6

{ Asked if ID-1 VISIT12MO=1,2,3

TALKSA

ID-6. During your visit(s) in the past 12 months did a doctor or health care provider ask you if you were sexually active?

Yes..... 1
No..... 5
If vol: Provider already knew R's status..... 7

TALKEC

ID-7. During your visit in the past 12 months, did a doctor or health care provider talk with you about emergency contraception?

Yes1
No5

TALKDM

ID-8. During your visit in the past 12 months, did a doctor or health care provider talk with you about using a condom at the same time as a female method of contraception?

Yes1
No5

**FLOW CHECK I-4: IF ANY OF THE RESPONSES TO ID-2 SVC12MO = 2
GO TO ID-8A WHYPSTD.
ELSE GO TO ID-10 BLDPRESS.**

{ IF R RECEIVED AN STD TEST IN LAST 12 MONTHS (SVC12MO =2)

WHYPSTD

ID-8a. Please look at Card 25b. In the past 12 months you received a test for a sexually transmitted disease from a [Display response to where received services in the last 12 months separated by an "or"]. What is the main reason that you chose this place for care?

Could walk in or get same-day appointment.....1
Cost.....2
Privacy concern.....3
Expert care here.....4
Embarrassed to go to usual provider.....5
Other.....6

BARRIER

ID-9. IF ID-1 VISIT12MO = 4 THEN ASK:
You reported that you did not go to a doctor in the past 12 months. Please look at Card 69c. Which of the reasons shown on this card explain why you did not see a doctor?

♦ ENTER all that apply.
♦ ENTER space or [-] to separate responses.

[SHOW CARD 69c]

I did not need to see a doctor in the last year.....1
I did not know where to go for care.....2
I could not afford to pay for a visit.....3
I was afraid to hear bad news.....4
I had privacy/confidentiality concerns.5
I could not take time off from work.....6
Something else (please specify)20

{ Asked if R said "something else" on ID-9 BARRIER

BARRIER_SP

ID-9sp. What other reason(s) made it difficult for you to see a doctor in past 12 months?

TYPE: STRING [100]

{ Asked for all respondents

BLDPRESS

ID-10. The next couple of questions are about your blood pressure. In the past 12 months, that is, since (CMLSTYR_FILL), have you had your blood pressure checked by a doctor or other medical care provider?

Yes.....1
No.....5 (ID-13 ASKSMOKE)

HIGHBP

ID-11. During your visit in the past 12 months, did a doctor or other medical care provider tell you that you had hypertension, also called high blood pressure?

Yes.....1
No.....5
IF VOL: Not told results..6

FLOW CHECK I-5: IF ID-11 HIGHBP = 5, 6, DK, or RF, GO TO ID-13 ASKSMOKE.

BPMEDS

ID-12. Are you currently taking any medicine prescribed by a doctor for your high blood pressure?

Yes.....1
No.....5

ASKSMOKE

ID-13. The next question is about things your doctor or other medical care provider may have asked you about in the past 12 months either in person, or via a computerized or paper form.

During the last 12 months, has a doctor or other medical care provider asked you whether you smoke cigarettes or use other kinds of tobacco?

Yes.....1
No.....5

Infertility Services (IE)

FLOW CHECK I-7: IF RHADSEX= 2 (R NEVER HAD SEX), GO TO INTRO_I2 (start of IF Series on HIV testing).

{ For all who have had sex (RHADSEX=yes)
{ 1st 3 wording variants deal with Rs with only 1 partner in lifetime
{ last 2 wording variants deal with Rs with > 1 partner in lifetime or dk/rf on number of partners in lifetime

INFHELP

IE-1. IF (LIFEPRTS=1 AND BC-6 LIFEPRT NE DK OR RF) AND AD-7b MARSTAT= 1 or 5 (currently married or separated), ASK:
Have you or your wife ever been to a doctor or other medical care provider to talk about ways to help you have a baby together?

ELSE IF (LIFEPRTS=1 and BC-6 LIFEPRT NE DK OR RF) AND (AD-7b MARSTAT=2 (currently cohabiting)), ASK:
Have you or your partner ever been to a doctor or other medical care provider to talk about ways to help you have a baby together?

ELSE IF (LIFEPRTS = 1 AND BC-6 LIFEPRT NE DK OR RF) AND AD-7b MARSTAT= 3 OR 4 (WIDOWED OR DIVORCED), ASK:
Did you or your wife ever go to a doctor or other medical care provider to talk about ways to help you have a baby together?

ELSE IF FMARIT EQ 0 or 5 (never married), ASK:

During any of your relationships, have you or your partner at the time ever been to a doctor or other medical care provider to talk about ways to help you have a baby together?

ELSE ASK:

During any of your relationships, have you or your wife or partner at the time ever been to a doctor or other medical care provider to talk about ways to help you have a baby together?

- ♦ *Do not code yes if main purpose of visit was for something other than seeking help to have a baby.*

YES1
NO5 (INTRO_I2)

INFSVCS

IE-2. IF (LIFEPRTS = 1 AND BC-6 LIFEPRT NE DK OR RF) AND MARSTAT= 1 or 5 (married or separated), ASK:

Which of the services shown on Card 70 have you or your wife had to help you have a baby together?

ELSE IF (LIFEPRTS = 1 AND BC-6 LIFEPRT NE DK OR RF) AND (AD-7b MARSTAT = 2 (currently cohabiting)), ASK:

Which of the services shown on Card 70 have you or your partner had to help you have a baby together?

ELSE IF (LIFEPRTS = 1 AND (AD-7B MARSTAT NE 1, 2, OR 5 (MARRIED, COHABITING, OR SEPARATED))), ASK:

Which of the services shown on Card 70 did you or your partner have to help you have a baby together?

ELSE ASK:

Think about all of the medical help you or your partners have ever received to help you have a baby together. Which of the services shown on Card 70 have you or they had (to help you have a baby together)?

- ♦ *ENTER all that apply*
- ♦ *ENTER space or [-] to separate responses.*

[SHOW CARD 70]

Advice.....1
Infertility testing2
Drugs to improve ovulation3
Surgery to correct blocked tubes4
Artificial insemination5
Treatment for varicocele6
Other types of medical help7

**FLOW CHECK I-7b: IF IE-2 INFSVCS RESPONSE INCLUDES MENTION OF INFERTILITY TESTING (code 2), ASK IE-3 INFTEST.
ELSE IF NO MENTION OF CODE 2, GO TO FLOW CHECK I-7c.**

INFTEST

IE-3. Who was it that had infertility testing? Was it you, her, or both of you?

You1
Her2
Both of you3

FLOW CHECK I-7c: IF IE-2 INFSVCS RESPONSE INCLUDES MENTION OF ARTIFICIAL INSEMINATION (code 5), ASK IE-4 WHOINSEM.
ELSE IF NO MENTION OF CODE 5, GO TO FLOW CHECK I-8.

WHOINSEM

IE-4. Was your wife or partner inseminated with sperm from you only, from some other donor only, or from both?

- You only1
- Some other donor only2
- Both3

FLOW CHECK I-8: IF R IS CURRENTLY MARRIED OR COHABITING (AD-7b MARSTAT = 1 or 2), ASK IE-5 INFHLPNW. ELSE GO TO IE-6 LASTVIS_M.

INFHLPNW

IE-5. IF R IS CURRENTLY MARRIED (AD-7b MARSTAT = 1), ASK:

Are you and your wife currently pursuing medical help to have a baby together?

ELSE IF R IS CURRENTLY COHABITING (AD-7b MARSTAT=2), ASK:

Are you and your partner currently pursuing medical help to have a baby together?

♦ *"Currently pursuing help" means that R or his (wife/partner) plan to visit the doctor or infertility clinic again.*

- Yes1
- No5

LASTVIS_M

1 OF 2

IE-6m. IF IE-5 INFHLPNW = YES, ASK:

In what month and year was your most recent visit for medical help to have a baby together?

ELSE IF IE-5 INFHLPNW=NO, BLANK, DK, OR RF, ASK:

In what month and year was your last visit for medical help to have a baby together?

- ♦ ENTER MM/YYYY
- ♦ PROBE for season if DK month.

- | | | | |
|-------------|-----------|--------------|------------|
| 1. January | 5. May | 9. September | 13. Winter |
| 2. February | 6. June | 10. October | 14. Spring |
| 3. March | 7. July | 11. November | 15. Summer |
| 4. April | 8. August | 12. December | 16. Fall |

LASTVIS_Y

2 OF 2

IE-6y. IF IE-5 INFHLPNW = YES, ASK:

(In what month and year was your most recent visit for medical help to have a baby together?)

ELSE IF IE-5 INFHLPNW NO, BLANK, DK, OR RF, ASK:

(In what month and year was your last visit for medical help to have a baby together?)

- ♦ ENTER (LASTVIS_M)/YYYY

UNDERLYING RANGE: 1984 to 2020

FLOW CHECK I-9: COMPUTE CMINFVIS:
(Century month for date of last or most recent infertility visit)

SET CMINFVIS = null/blank.

IF LASTVIS_Y = RF, SET CMINFVIS = 9998.
ELSE IF LASTVIS_Y = DK, SET CMINFVIS = 9999.

ELSE IF LASTVIS_M LE 12,
COMPUTE CMINFVIS = (LASTVIS_Y - 1900)*12 + LASTVIS_M

ELSE IF 13 LE LASTVIS_M LE 16, USE MONTH APPROPRIATE TO SEASON & COMPUTE CMINFVIS AS ABOVE.

ELSE IF LASTVIS_M = DK OR RF, ASSIGN MONTH = 6 (June) & COMPUTE CMINFVIS AS ABOVE.

Edit Check IE6_1: IF (LASTVIS_M LE 12) AND CMINFVIS > CMINTVW, DISPLAY:
The date entered cannot be after the date of interview. Please correct.
HARD, NONSUPPRESSIBLE EDIT CHECK.

Edit Check IE6_2: IF (LASTVIS_M LE 12) AND CMINFVIS < CMBIRTH, DISPLAY:
The date entered cannot be before his date of birth. Please correct.
HARD, NONSUPPRESSIBLE EDIT CHECK.

Edit Check IE6_3: IF (13 LE LASTVIS_M LE 16) AND CMINFVIS > (CMINTVW + 2), DISPLAY: The date entered cannot be after the date of interview. Please correct.
HARD, NONSUPPRESSIBLE EDIT CHECK.

Edit Check IE6_4: IF (13 LE LASTVIS_M LE 16) AND CMINFVIS < (CMBIRTH - 3), DISPLAY: The date entered cannot be before his date of birth. Please correct.
HARD, NONSUPPRESSIBLE EDIT CHECK.

Edit Check IE6_5: IF (LASTVIS_M = DK OR RF) AND LASTVIS_Y > (CMINTVW/12 + 1900), DISPLAY: The date entered cannot be after the date of interview. Please correct.
HARD, NONSUPPRESSIBLE EDIT CHECK.

Edit Check IE6_6: IF (LASTVIS_M = DK OR RF) AND LASTVIS_Y < (CMBIRTH/12 + 1900) - 1, DISPLAY: The date entered cannot be before his date of birth. Please correct.
HARD, NONSUPPRESSIBLE EDIT CHECK.

EDIT CHECK IE6_7: PROBE IF LIFEPRTS = 1 AND MARSTAT = 1 OR 2 AND CMINFVIS < CMFSXCWP. DISPLAY TEXT: R has reported a date of last/most recent visit that is earlier than when he first had sex with his current wife/partner. Confirm if this is correct.
INVOLVING (LASTVIS_M, LASTVIS_Y, WPSX1WN_M, CWPSX1WN_Y)

INFRTTHIS

IE-7. When you and your wife or partner went for medical help to have a baby together, were you ever told that you had any of the following male infertility problems shown on Card 71?

- ◆ ENTER all that apply
- ◆ ENTER space or [-] to separate responses.

[SHOW CARD 71]

Low sperm count or no sperm1
Varicocele2
Genetic disorder that alters sperm production ...3
Low testosterone level4
Other5
None of the above6

EDIT CHECK IE7_1: IF INFRTHIS=6 AND ANY OTHER CODE DISPLAY TEXT:
"None of the above" cannot be chosen with any other answer for this question. Either de-select all other answers or de-select "None of the above".
HARD, NONSUPPRESSIBLE EDIT CHECK.

HIV TESTING AND AIDS KNOWLEDGE/COUNSELING (IF)

{ Asked for all Rs
INTRO_I2

IF-0. Now I would like to ask you about testing for HIV, the virus that causes AIDS.

- ◆ENTER [1] to continue

{ Asked for all Rs
DONBLOOD

IF-1. First, I'll ask you about blood and blood product donations you may have made to the Red Cross or other blood banks. By blood products, we mean such things as plasma, platelets, and marrow. Have you ever donated blood or blood products at the Red Cross, at a bloodmobile, at a blood drive, or at other blood banks?

[HELP AVAILABLE]

Yes 1
No 5

{ Asked for all Rs
HIVTEST

IF-2. IF IF-1 DONBLOOD = YES, ASK:
Not counting tests you may have had as part of donating blood or blood products, have you ever been tested for HIV?

ELSE IF IF-1 DONBLOOD = 5, DK, or RF, ASK:
Have you ever been tested for HIV?

- ◆ Explain, if necessary, that you will not be asking for the results of any test he may have ever had.

Yes 1
No 5

FLOW CHECK I-9b: IF IF-2 HIVTEST = 5, ASK IF-2b NOHIVTST.
ELSE IF HIVTEST = DK or RF, GO TO IF-6 TALKDOCT.
(We do not want to ask NOHIVTST for DK/RF responses on HIVTEST.)
ELSE IF HIVTEST = 1 (yes), GO TO IF-3 WHENHIV_M.

{ Asked if R never had an HIV test (HIVTEST=5)
NOHIVTST

IF-2b. IF IF-2 HIVTEST = NO ASK:
Which one of these reasons shown on Card 88 would you say is the
MAIN reason why you have not been tested for HIV?

[SHOW CARD 88]

- You have never been offered an HIV test.....1
- You are worried about what other people would think if you
got tested for HIV.....2
- It's unlikely you've been exposed to HIV3
- You were afraid to find out if you were HIV positive (that
you had HIV)4
- You don't like needles5
- Some other reason20

FLOW CHECK I-9b2: IF IF-2b NOHIVTST = 20, ASK IF-2sp SP_NOHIVTST.
ELSE GO TO IF-6 TALKDOCT.

{ Asked if R reported 'some other reason'
SP_NOHIVTST

IF-2sp. What was the MAIN reason why you have not been tested for HIV?

TYPE: STRING [250]

FLOW CHECK I-9c: IF IF-2 HIVTEST = 5 (no), GO TO IF-6 TALKDOCT.

{ Asked if R ever was tested for HIV outside of blood donation (HIVTEST=1)
WHENHIV_M

① of ②

IF-3m. IF IF-1 DONBLOOD = 1 THEN ASK:

Not including tests you may have had as part as part of donating blood
or blood products, in what month and year was your last test for HIV,
the virus that causes AIDS?

ELSE IF IF-1 DONBLOOD = 5, DK, or RF, THEN ASK:

In what month and year was your last test for HIV, the virus that
causes AIDS?

◆ENTER MM/YYYY

◆PROBE for season if DK month.

- | | | | |
|-------------|-----------|--------------|------------|
| 1. January | 5. May | 9. September | 13. Winter |
| 2. February | 6. June | 10. October | 14. Spring |
| 3. March | 7. July | 11. November | 15. Summer |
| 4. April | 8. August | 12. December | 16. Fall |

{ Asked if R ever was tested for HIV outside of blood donation (HIVTEST=1)
WHENHIV_Y

② of ②

IF-3y.If IF-1 DONBLOOD = 1 THEN ASK:

(Not including tests you may have had as part as part of donating blood or blood products, in what month and year was your last test for HIV, the virus that causes AIDS?)

ELSE IF IF-1 DONBLOOD = 5, DK, or RF, THEN ASK:

(In what month and year was your last test for HIV, the virus that causes AIDS?)

♦ ENTER (WHENHIV_M)/YYYY

UNDERLYING RANGE: 1984 to 2020

FLOW CHECK I-10: COMPUTE CMHIVTST Century month for date of last or most recent HIV test outside of blood or blood product donation.

SET CMHIVTST = null/blank.

IF WHENHIV_Y = RF, SET CMHIVTST = 9998.

ELSE IF WHENHIV_Y = DK, SET CMHIVTST = 9999.

ELSE IF WHENHIV_M LE 12,

COMPUTE CMHIVTST = (WHENHIV_Y - 1900)*12 + WHENHIV_M

ELSE IF 13 LE WHENHIV_M LE 16, USE MONTH APPROPRIATE TO SEASON & COMPUTE CMHIVTST AS ABOVE.

ELSE IF WHENHIV_M = DK OR RF, ASSIGN MONTH = 6 (June) & COMPUTE CMHIVTST AS ABOVE.

IF CMHIVTST NE blank AND 1 LE WHENHIV_M LE 12 AND CMHIVTST LT 9996, ESTABLISH CMHIVTST_FILL.

Edit Check IF3_1: IF (WHENHIV_M LE 12) AND CMHIVTST > CMINTVW, DISPLAY: The date entered cannot be after the date of interview. Please correct.
HARD, NONSUPPRESSIBLE EDIT CHECK.

Edit Check IF3_2: IF (WHENHIV_M LE 12) AND CMHIVTST < CMBIRTH, DISPLAY: The date entered cannot be before his date of birth. Please correct.
HARD, NONSUPPRESSIBLE EDIT CHECK.

Edit Check IF3_3: IF (13 LE WHENHIV_M LE 16) AND CMHIVTST > (CMINTVW + 2), DISPLAY: The date entered cannot be after the date of interview. Please correct.
HARD, NONSUPPRESSIBLE EDIT CHECK.

Edit Check IF3_4: IF (13 LE WHENHIV_M LE 16) AND CMHIVTST < (CMBIRTH - 3), DISPLAY: The date entered cannot be before his date of birth. Please correct.
HARD, NONSUPPRESSIBLE EDIT CHECK.

Edit Check IF3_5: IF (WHENHIV_M = DK OR RF) AND WHENHIV_Y > (CMINTVW/12 + 1900), DISPLAY: The date entered cannot be after the date of interview. Please correct.
HARD, NONSUPPRESSIBLE EDIT CHECK.

Edit Check IF3_6: IF (WHENHIV_M = DK OR RF) AND WHENHIV_Y < (CMBIRTH/12 +1900)- 1, **DISPLAY:** The date entered cannot be before his date of birth. Please correct.
HARD, NONSUPPRESSIBLE EDIT CHECK.

FLOW CHECK I-10a: If CMHIVTST= 9999 (DK) or 9998 (RF) or (CMHIVTST > CMINTVW - 24 AND IF-3 WHENHIV_M = 13-16, DK, or RF), then ask IF-3b HIVTSTYR

{ Asked if R does not report specific month and year and year is within last 2 years

HIVTSTYR

IF-3b. Did you have this last HIV test since (CMLSTYR_FILL)?
Yes1
No5

FLOW CHECK I-10b: IF IF-3b HIVTSTYR=1 AND (CMHIVTST= 9999 (DK) or 9998 (RF)), THEN SET CMHIVTST = CMINTVW - 6

{ Asked if R ever was tested for HIV outside of blood donation (HIVTEST=1)

HIVRESULT

IF-3d. After your last test for HIV, did you find out your test result?
Yes1
No5

FLOW CHECK I-10b2: IF IF-3d HIVRESULT = 1, DK, or RF, GO TO IF-4 PLCHIV.

{ ASKED IF R DID NOT GET TEST RESULT (HIVRESULT=5)

WHYNOGET

IF-3e. What was the main reason why you did not receive your test result?

You thought the testing site would contact you.....1
You were afraid to find out if you were HIV positive (that you had HIV).....2
You didn't want to know your HIV test results.....3
You didn't know where or how to get your test result.....4
Some other reason20

FLOW CHECK IF-3: IF IF-3e WHYNOGET = 20, ASK IF-3e_sp SP_WHYNOGET.
ELSE GO TO IF-4 PLCHIV.

{IF IF-3e WHYNOGET=20, ASK:

SP_WHYNOGET

IF3e_sp. What was this other reason that you did not receive your HIV test result?

TYPE: STRING [250]

{ Asked if R ever was tested for HIV outside of blood donation (HIVTEST=1)

PLCHIV

IF-4. IF IF-1 DONBLOOD = 1 THEN ASK:

Please look at Card 72. Not including tests you may have had as part of donating blood or blood products, where did you have that last test for HIV?

ELSE IF IF-1 DONBLOOD = 5, DK, or RF, THEN ASK:

Please look at Card 72. Where did you have that last test for HIV?

[SHOW CARD 72]

Private doctor's office.....	1
HMO facility	2
Community health clinic, community clinic, public health clinic	3
Family planning or Planned Parenthood clinic	4
Employer or company clinic	5
School or school-based clinic	6
Hospital outpatient clinic	7
Hospital emergency room	8
Hospital regular room	9
Urgent care center, urgi-care, or walk-in facility ..	10
Your worksite	11
Your home	12
Military induction or military service site.....	13
Sexually transmitted disease (STD) clinic.....	14
Laboratory or blood bank	15
Some other place -- <i>specify</i>	20

**FLOW CHECK IF-4a: IF IF-4 PLCHIV=20, GO TO SP_PLCHIV HE-4sp
ELSE GO TO FLOW CHECK IF-4b.**

{ IF IF-4 PLCHIV=20, ASK:

SP_PLCHIV

IF-4sp Where was this other place that you had your last HIV test?

TYPE: STRING [255]

**FLOW CHECK IF-4b: IF IF-4 PLCHIV = 12 (your home), ASK IF-4a RHHIVT1.
ELSE, GO TO IF-5 HIVTST.**

{ Asked if R reported their last HIV test was done at their home (PLCHIV=12)

RHHIVT1

IF-4a. A rapid home HIV test is a test you can use to test yourself that can provide results in about 20 minutes or less. The last time you had an HIV test, did you use a rapid home HIV test?

Yes.....1

No.....5 (IF-5 HIVTST)

{ Asked if R reported their last HIV test was a rapid home HIV test

RHHIVT2

IF-4b. People use a rapid home HIV test for many different reasons. Looking at Card 73, which of these reasons did you have for using the rapid home HIV test?

ENTER all that apply

I didn't want to get tested by a doctor or
at an HIV testing site

I didn't want other people to know I am getting tested ...2

I wanted to get tested together with someone, before
we had sex

I wanted to get tested by myself, before having sex

I wanted to get tested by myself, after having sex

A sex partner asked me to take a rapid home HIV test

Other reason20

{ Asked if R ever was tested for HIV outside of blood donation (HIVTEST=1)
HIVTST

IF-5. Please look at Card 73b. I am going to show you a list of reasons why some people have been tested for HIV, the virus that causes AIDS.

IF IF-1 DONBLOOD = 1 THEN ASK:

Not including tests you may have had as part of donating blood or blood products, which of these would you say was the main reason for your last HIV test?

ELSE IF IF-1 DONBLOOD = 5, DK, or RF THEN ASK:

Which of these would you say was the main reason for your last HIV test?

[SHOW CARD 73b]

- Part of a medical checkup or surgical procedure (a doctor or medical provider asked for the test).....1
- Required for health or life insurance coverage.....2
- Required for marriage license or to get married.....3
- Required for military service or a job4
- You wanted to find out if infected or not (you were the one who asked for the test).....5
- Someone else suggested you should be tested6
-**Intentionally Blank**.....7
- You might have been exposed through sex or drug use8
- You might have been exposed in some other way9
- Some other reason - *specify*20

**FLOW CHECK I-10c: IF IF-5 HIVTST=6, ASK IF-5b WHOSUGG.
ELSE, GO TO FLOW CHECK I-10d.**

{ Asked if HIVTST=6 (someone else suggested the test)

WHOSUGG

IF-5b. Who suggested you should be tested - a doctor or other medical care provider, a sexual partner, or someone else?

- Doctor or other medical care provider.....1
- Sexual partner.....2
- Someone else3

**FLOW CHECK I-10d: IF IF-5 HIVTST=20, ASK IF-5sp SP_HIVTST.
ELSE, GO TO IF-6 TALKDOCT.**

SP_HIVTST

IF-5sp. What was the main reason for your last HIV test?
TYPE: STRING [255]

{ ASKED FOR ALL Rs.

TALKDOCT

IF-6. Has a doctor or other medical care provider ever talked with you about HIV, the virus that causes AIDS?

- Yes1
- No5 (JA-0 SAMEADD)

{ ASKED FOR THOSE WITH TALKDOCT = YES

AIDSTALK

IF-7. Looking at Card 74, what topics related to HIV or AIDS were covered in the discussion you had with the doctor or other medical care provider?

- ♦ ENTER all that apply
- ♦ ENTER space or [-] to separate responses.

[SHOW CARD 74]

How HIV/AIDS is transmitted.....1
Other sexually transmitted diseases like
 gonorrhea, herpes, or Hepatitis C.....2
The correct use of condoms.....3
Needle cleaning/using clean needles.....4
Dangers of needle sharing.....5
Abstinence from sex (not having sex).....6
Reducing your number of sexual partners.....7
Condom use to prevent HIV or STD transmission.....8
"Safe sex" practices (abstinence, condom use, etc).....9
Getting tested and knowing your HIV status10
Other - *specify*.....20

{ Asked if AIDSTALK includes code 20

SP_AIDSTALK

IF-7sp. IF IF-7 AIDSTALK=20 THEN ASK AND RECORD VERBATIM:
What was the other topic covered in your discussion with the
doctor or medical care provider about HIV or AIDS?

TYPE: STRING [50]