

CENTER FOR POPULATION HEALTH AND HEALTH DISPARITIES

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Project Title: Healthy City Assessment Project – Texas City

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PARA DATA AND INDIVIDUAL ITEMS			
Database Variable Name	Section and Number in Instrument	Label	Domain Values
Para Data Information and Site Information			
Author(s): In house			
Reference(s): 2000 Census			
Id. user		Interviewer Identification Number	Only number characters are acceptable
Id.date		Date of Interview	
Id.start		Start Time of Interview	
Id.end		End Time of Interview	
Id.time		Overall Time of Interview	
Id.site		Neighborhood Number	Only number characters are acceptable
q1	A.1.1.	Complete Participant Name	All characters are acceptable
q2	A.1.2.	Participant Unique Identification Number	Only number characters are acceptable
q3	A.1.3.	Complete Home Address	All characters and numbers are acceptable
q4a	A.1.4	Census Tract	Only numbers characters are acceptable
q4b	A.1.4	Block Number	Only numbers characters are acceptable
q5a	A.1.5	Systolic Blood Pressure	Only number characters are acceptable
q5b	A.1.5	Diastolic Blood Pressure	Only number characters are acceptable
q5c	A.1.5	Pulse	Only number characters are acceptable
Q6	A.1.6.	Height	Only number characters are acceptable and only inches
q7	A.1.6.	Height Self Report	Only number characters are acceptable
q8	A.1.7.	Weight	Only number characters are acceptable
q9	A.1.7.	Weight Self Report	Only number characters are acceptable
Database Variable	Section and Number in Instrument	Label	Domain Values
Individual Item Section A			
Author(s): In house			
Reference(s): 2000 Census			
q10a	A.1.8 Date of Birth (DOB)	Month	Only number characters are acceptable
q10b		Day	Only number characters are acceptable
q10c		Year	Only number characters are acceptable
q11	A.1.9 Age	Age	Only number characters are acceptable
q12	A.1.10 Gender	Gender	1-Male 2-Female

q13	A.1.11 Marital Status	What is your marital status	1-Now married 2-Married 3-Divorced 4-Seperated 5-Never married
q14_1	A.1.12 Race	Which one or more of the following would you say is your race?	1-White
q14_2			2-Black or African-American
q14_3			3-Asian
q14_4			4-Native Hawaiian/Pacific Islander
q14_5			5-American Indian/Alaska Native
q14_6			6-Other
q15	A.1.13 Ethnicity	Are you Spanish/Hispanic/Latino?	1-Yes 2-No 3- Don't Know 4-Refused
q16	A.1.14 Nationality	What do you consider yourself to be?	1-Mexican, Mexican-American, Mexicano 2-Salvadorian, Guatemalan, Honduran
q16a		Other	Other
q17	A.1.15 Education	Altogether, how many years of school did you complete?	Only number characters are acceptable
q18	A.1.16 Years at Address	How many years have you lived at this address?	Only characters are acceptable
q19	A.1.17 Years in Texas City	How many years have you lived in Texas City?	Only characters are acceptable

HEALTH OUTCOMES			
Database Variable Name	Section and Number in Instrument	Label	Domain Values
SF-36 Items Author: Ware, J.E.			
q20	B.1.1	In general, would you say your health is:	1-Excellent 2-Very Good 3-Good 4-Fair 5-Poor 6-Don't Know 7-Refused
q21	B.1.2	Compared to one year ago, how would you rate your health in general now?	1-Much better now than one year ago 2-Somewhat better now than one year ago 3-About the same as one year ago 4-Somewhat worse now than one year ago 5-Much worse now than one year ago 6-Don't Know 7-Refused
q22	B.1.3	Does your health limit you in Vigorous activities, such as running, lifting heavy objects, participating in strenuous sports?	1-Yes, limited a lot 2-Yes, limited a little 3-No, not limited at all 4-Don't Know 5-Refused
q23	B.1.4	Does your health limit you in Moderate activities, such as moving a table, pushing a vacuum cleaner, bowling, or playing golf?	1-Yes, limited a lot 2-Yes, limited a little 3-No, not limited at all 4-Don't Know 5-Refused
q24	B.1.5	Does your health limit you in lift or carrying groceries?	1-Yes, limited a lot 2-Yes, limited a little 3-No, not limited at all 4-Don't Know 5-Refused
q25	B.1.6	Does your health limit you in climbing several flights of stairs?	1-Yes, limited a lot 2-Yes, limited a little 3-No, not limited at all 4-Don't Know 5-Refused
q26	B.1.7	Does your health limit you in climbing one flight of stairs?	1-Yes, limited a lot 2-Yes, limited a little 3-No, not limited at all 4-Don't Know 5-Refused
q27	B.1.8	Does your health limit you in bending, kneeling, or stooping?	1-Yes, limited a lot 2-Yes, limited a little 3-No, not limited at all 4-Don't Know 5-Refused

q28	B.1.9	Does your health limit you in walking more than one mile?	1-Yes, limited a lot 2-Yes, limited a little 3-No, not limited at all 4-Don't Know 5-Refused
q29	B.1.10	Does your health limit you in walking several blocks?	1-Yes, limited a lot 2-Yes, limited a little 3-No, not limited at all 4-Don't Know 5-Refused
q30	B.1.11	Does your health limit you in walking one block?	1-Yes, limited a lot 2-Yes, limited a little 3-No, not limited at all 4-Don't Know 5-Refused
q31	B.1.12	Does your health limit you in bathing or dressing yourself?	1-Yes, limited a lot 2-Yes, limited a little 3-No, not limited at all 4-Don't Know 5-Refused
q32	B.1.13	During the past 4 weeks, how much of the time have you had to cut down on the amount of time you spent on work or other activities as a result of your physical health?	1-All of the time 2-Most of the time 3-Some of the time 4-A little of the time 5-None of the 6-Don't Know 7-Refused
q33	B.1.14	During the past 4 weeks, how much of the time have you accomplished less than you would like as a result of your physical health?	1-All of the time 2-Most of the time 3-Some of the time 4-A little of the time 5-None of the 6-Don't Know 7-Refused
q34	B.1.15	During the past 4 weeks, how much of the time were you limited in the kind of work or other activities as a result of your physical health?	1-All of the time 2-Most of the time 3-Some of the time 4-A little of the time 5-None of the 6-Don't Know 7-Refused
q35	B.1.16	During the past 4 weeks, how much of the time have you had difficulty performing the work or other activities (for example, it took extra effort) as a result of your physical health?	1-All of the time 2-Most of the time 3-Some of the time 4-A little of the time 5-None of the 6-Don't Know 7-Refused

q36	B.1.17	During the past 4 weeks, how much of the time have you had to cut down on the amount of time you spent on work or other activities as a result of your emotional problems (such as feeling depressed or anxious)?	1–All of the time 2–Most of the time 3–Some of the time 4–A little of the time 5–None of the 6–Don't Know 7–Refused
q37	B.1.18	During the past 4 weeks, how much of the time have you accomplished less than you would like as a result of any emotional problems (such as feeling depressed or anxious)?	1–All of the time 2–Most of the time 3–Some of the time 4–A little of the time 5–None of the 6–Don't Know 7–Refused
q38	B.1.19	During the past 4 weeks, how much of the time did you work or other activities less carefully than usual as a result of any emotional problems (such as feeling depressed or anxious)?	1–All of the time 2–Most of the time 3–Some of the time 4–A little of the time 5–None of the 6–Don't Know 7–Refused
q39	B.1.20	During the past 4 weeks, to what extent has your physical health or emotional problems interfered with your normal social activities with family, friends, neighbors, or groups?	1–Not at all 2–Slightly 3–Moderately 4–Quite a bit 5–Extremely 6–Don't know 7–Refused
q40	B.1.21	During the past 4 weeks, how much did pain interfere with your normal work (including both work outside the home and housework)?	1–Not at all 2–Slightly 3–Moderately 4–Quite a bit 5–Extremely 6–Don't know 7–Refused
q41	B.1.22	How much bodily pain have you had during the past 4 weeks?	1–None 2–Very mild 3–Mild 4–Moderate 5–Severe 6–Very severe 7–Don't know 8–Refused
q42	B.1.23	How much of the time during the past 4 weeks did you feel full of life?	1–All of the time 2–Most of the time 3–Some of the time 4–A little of the time 5–None of the time 6–Don't know 7–Refused

q43	B.1.24	How much of the time during the past 4 weeks have you been very nervous?	1-All of the time 2-Most of the time 3-Some of the time 4-A little of the time 5-None of the time 6-Don't know 7-Refused
q44	B.1.25	How much of the time during the past 4 weeks have you felt so down in the dumps that nothing could cheer you up?	1-All of the time 2-Most of the time 3-Some of the time 4-A little of the time 5-None of the time 6-Don't know 7-Refused
q45	B.1.26	How much of the time during the past 4 weeks have you felt calm and peaceful?	1-All of the time 2-Most of the time 3-Some of the time 4-A little of the time 5-None of the time 6-Don't know 7-Refused
q46	B.1.27	How much of the time during the past 4 weeks did you have a lot of energy?	1-All of the time 2-Most of the time 3-Some of the time 4-A little of the time 5-None of the time 6-Don't know 7-Refused
q47	B.1.28	How much of the time during the past 4 weeks have you felt downhearted and depressed?	1-All of the time 2-Most of the time 3-Some of the time 4-A little of the time 5-None of the time 6-Don't know 7-Refused
q48	B.1.29	How much of the time during the past 4 weeks did you feel worn out?	1-All of the time 2-Most of the time 3-Some of the time 4-A little of the time 5-None of the time 6-Don't know 7-Refused
q49	B.1.30	How much of the time during the past 4 weeks have you been happy?	1-All of the time 2-Most of the time 3-Some of the time 4-A little of the time 5-None of the time 6-Don't know 7-Refused

q50	B.1.31	How much of the time during the past 4 weeks did you feel tired?	1-All of the time 2-Most of the time 3-Some of the time 4-A little of the time 5-None of the time 6-Don't know 7-Refused
q51	B.1.32	During the past 4 weeks, how much of the time has your physical health or emotional problems interfered with your social activities (like visiting friends, relatives, etc.)?	1-All of the time 2-Most of the time 3-Some of the time 4-A little of the time 5-None of the time 6-Don't know 7-Refused
q52	B.1.33	I seem to get sick a little easier than other people...	1-Definitely true 2-Mostly true 3-Don't know 4-Mostly false 5-Definitely false 6-Refused
q53	B.1.34	I am as healthy as anybody I know...	1-Definitely true 2-Mostly true 3-Don't know 4-Mostly false 5-Definitely false 6-Refused
q54	B.1.35	I expect my health to get worse...	1-Definitely true 2-Mostly true 3-Don't know 4-Mostly false 5-Definitely false 6-Refused
q55	B.1.36	My health is excellent...	1-Definitely true 2-Mostly true 3-Don't know 4-Mostly false 5-Definitely false 6-Refused

Database Variable Name	Section and Number in Instrument	Label	Domain Values
Conditions Checklist			
Author(s): In house			
q56	B. 2.1	Stroke or brain hemorrhage?	1-Yes 2-No 3-Don't know 4-Refused 5-Not applicable
q57		Cancer, a malignancy or tumor of any kind?	1-Yes 2-No 3-Don't know 4-Refused 5-Not applicable
q57a	B. 2.2	Please specify type of cancer	6-Please specify
q58	B. 2.3	Diabetes (sugar)?	1-Yes 2-No 3-Don't know 4-Refused 5-Not applicable
q59	B. 2.4	High blood pressure?	1-Yes 2-No 3-Don't know 4-Refused 5-Not applicable
q60	B. 2.5	Need to lose weight?	1-Yes 2-No 3-Don't know 4-Refused 5-Not applicable
q61	B. 2.6	Emphysema, chronic bronchitis, asthma or other respiratory problems?	1-Yes 2-No 3-Don't know 4-Refused 5-Not applicable
q62	B. 2.7	Arthritis?	1-Yes 2-No 3-Don't know 4-Refused 5-Not applicable
q63	B.2.8	Depression?	1-Yes 2-No 3-Don't know 4-Refused 5-Not applicable
q64	B.2.9	Anxiety?	1-Yes 2-No 3-Don't know 4-Refused 5-Not applicable

q65	B.2.10	Heart attack?	1-Yes 2-No 3-Don't know 4-Refused 5-Not applicable
q66	B.2.11	Skin problems?	1-Yes 2-No 3-Don't know 4-Refused 5-Not applicable
q67	B.2.12	Gall bladder disease?	1-Yes 2-No 3-Don't know 4-Refused 5-Not applicable
q68 q68a	B.2.13	Any other condition? Please specific	1-Yes 2-No 3-Don't know 4-Refused 5-Not applicable

Database Variable Name	Section and Number in Instrument	Label	Domain Values
Alcohol Items Author(s): Cage Reference(s): BRFSS			
q69	B. 3.1	Have you ever drunk any type of alcohol (beer, wine, liquor) in your entire life? (do not include communion wine)	1-Yes 2-No 3-Don't know 4-Refused
q70	B. 3.2	A drink of alcohol is 1 can or bottle of beer, 1 glass of wine, 1 can or bottle of wine cooler, 1 cocktail or 1 shot of liquor. During the past 30 days, on average how many days per week did you have at least one drink of any alcoholic beverage?	1-"1" # of days 2-"2" # of days 3-"3" # of days 4-"4" # of days 5-"5" # of days 6-"6" # of days 7-"7" # of days 8-No drinks in the past 30 days 9-Not sure 10-Don't know 11-Refused
q71	B. 3.3	On the days when you drank, about how many drinks did you drink on average?	1-"1" drink on average 2-"2" drink on average 3-"3" drink on average 4-"4" drink on average 5-"5" drink on average 6-"6" drink on average 7-"7" drink on average 8-"8" drink on average 9-"9" drink on average 10-"10" drink on average 11-"10+" drinks on average 12-Not sure 13-Don't know 14-Refused
q72	B.3.4	Has there ever been a time when you drank quite a bit more than you drink now?	1-Yes 2-No 3-Don't know 4-Refused
q73	B.3.5	Have you ever felt you should cut down on your drinking?	1-Yes 2-No 3-Don't know 4-Refused
q74	B.3.6	Have people annoyed you by criticizing your drinking?	1-Yes 2-No 3-Don't know 4-Refused
q75	B.3.7	Have you ever felt bad or guilty about your drinking?	1-Yes 2-No 3-Don't know 4-Refused

q76	B.3.8	Have you ever had a drink first thing in the morning to steady your nerves or to get rid of a hangover? (eye-opener)	1-Yes 2-No 3-Don't know 4-Refused
Database Variable Name	Section and Number in Instrument	Label	Domain Values
Smoking Items Author(s): In house Reference(s): BRFSS			
q77	B.4.1	Have you ever smoked at least 100 cigarettes in your entire life? That is at least five packs of cigarettes	1-Yes 2-No 3-Don't know 4-Refused
q78	B.4.2	Do you now smoke cigarettes every day, some days, or not at all?	1-Everyday 2-Some days 3-Not at all 4-Don't know 5-Refused
q79a	B.4.3	About how long has it been since you have smoked cigarettes?	Only number characters are acceptable
q80	B.4.4	We are interested in the actual # of cigarettes people smoke each day. How many cigarettes do/did you smoke (when you last smoked regularly)? (one pack equals 20 cigarettes)	Only number characters are acceptable
Database Variable Name	Section and Number in Instrument	Label	Domain Values
Physical Activity Items Reference(s): Adapted from items 200, 220, 320, 340 Physical Activity Question (NCHS) & Hebrew Study			
q81	B.5.1	Over the past 7 days, did you do any vigorous activities for at least 10 minutes that caused heavy sweating, or large increases in breathing or your pulse? (e.g. running, swimming, yard work, baseball, soccer, gardening, basketball, fishing, aerobics classes or very fast bicycling).	1-Never 2-Seldom (1-2 days/wk) 3-Sometimes (3-4 days/wk) 4-Often (5-7 days/wk) 5-Don't know 6-Refused

q82	B.5.2	<p>Over the past 7 days, did you do any moderate activities for at least 10 minutes that caused only light sweating, or a slight to moderate increase in breathing or your pulse? (e.g. fast walking, bicycling for pleasure, golf, dancing, running, swimming, yard work, baseball, soccer, gardening, basketball, fishing, aerobics classes or fast bicycling).</p>	<p>1-Never 2-Seldom (1-2 days/wk) 3-Sometimes (3-4 days/wk) 4-Often (5-7 days/wk) 5-Don't know 6-Refused</p>
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Database Variable Name	Section and Number in Instrument	Label	Domain Values
Sleep Items Author(s): Morin et al			
q83	B.6.1	How often in the past month did you have trouble falling asleep?	1-All of the time 2-Most of the time 3-Some of the time 4-A little of the time 5-None of the time 6-Don't know 7-Refused
q84	B.6.2	How often in the past month did you wake up several times per night?	1-All of the time 2-Most of the time 3-Some of the time 4-A little of the time 5-None of the time 6-Don't know 7-Refused
q85	B.6.3	How often in the past month did you have trouble staying asleep (including waking far too early)?	1-All of the time 2-Most of the time 3-Some of the time 4-A little of the time 5-None of the time 6-Don't know 7-Refused
q86	B.6.4	How often in the past month did you wake up after your usual amount of sleep feeling tired and worn out?	1-All of the time 2-Most of the time 3-Some of the time 4-A little of the time 5-None of the time 6-Don't know 7-Refused

Database Variable Name	Section and Number in Instrument	Label	Domain Values
Center for Epidemiologic Studies Depression Scale - CESD-R Depression Scale			
q87	B.7.1	Your appetite was poor	1-Not at all or less than 1 day (last week) 2-"1-2" days (last week) 3-"3-4" days (last week) 4-"5-7" days (last week) 5-Nearly every day for 2 weeks
q88	B.7.2	You could not shake off the blues	1-Not at all or less than 1 day (last week) 2-"1-2" days (last week) 3-"3-4" days (last week) 4-"5-7" days (last week) 5-Nearly every day for 2 weeks
q89	B.7.3	You had trouble keeping your mind on what you were doing	1-Not at all or less than 1 day (last week) 2-"1-2" days (last week) 3-"3-4" days (last week) 4-"5-7" days (last week) 5-Nearly every day for 2 weeks
q90	B.7.4	You felt depressed	1-Not at all or less than 1 day (last week) 2-"1-2" days (last week) 3-"3-4" days (last week) 4-"5-7" days (last week) 5-Nearly every day for 2 weeks
q91	B.7.5	Your sleep was restless	1-Not at all or less than 1 day (last week) 2-"1-2" days (last week) 3-"3-4" days (last week) 4-"5-7" days (last week) 5-Nearly every day for 2 weeks
q92	B.7.6	You felt sad	1-Not at all or less than 1 day (last week) 2-"1-2" days (last week) 3-"3-4" days (last week) 4-"5-7" days (last week) 5-Nearly every day for 2 weeks
q93	B.7.7	You could not get going	1-Not at all or less than 1 day (last week) 2-"1-2" days (last week) 3-"3-4" days (last week) 4-"5-7" days (last week) 5-Nearly every day for 2 weeks

q94	B.7.8	Nothing made you happy	1-Not at all or less than 1 day (last week) 2-"1-2" days (last week) 3-"3-4" days (last week) 4-"5-7" days (last week) 5-Nearly every day for 2 weeks
q95	B.7.9	You felt like a bad person	1-Not at all or less than 1 day (last week) 2-"1-2" days (last week) 3-"3-4" days (last week) 4-"5-7" days (last week) 5-Nearly every day for 2 weeks
q96	B.7.10	You lost interest in your usual activities	1-Not at all or less than 1 day (last week) 2-"1-2" days (last week) 3-"3-4" days (last week) 4-"5-7" days (last week) 5-Nearly every day for 2 weeks
q97	B.7.11	You slept much more than usual	1-Not at all or less than 1 day (last week) 2-"1-2" days (last week) 3-"3-4" days (last week) 4-"5-7" days (last week) 5-Nearly every day for 2 weeks
q98	B.7.12	You felt like you were moving too slowly	1-Not at all or less than 1 day (last week) 2-"1-2" days (last week) 3-"3-4" days (last week) 4-"5-7" days (last week) 5-Nearly every day for 2 weeks
q99	B.7.13	You felt fidgety	1-Not at all or less than 1 day (last week) 2-"1-2" days (last week) 3-"3-4" days (last week) 4-"5-7" days (last week) 5-Nearly every day for 2 weeks
q100	B.7.14	You wish you were dead	1-Not at all or less than 1 day (last week) 2-"1-2" days (last week) 3-"3-4" days (last week) 4-"5-7" days (last week) 5-Nearly every day for 2 weeks
q101	B.7.15	You wanted to hurt yourself	1-Not at all or less than 1 day (last week) 2-"1-2" days (last week) 3-"3-4" days (last week) 4-"5-7" days (last week) 5-Nearly every day for 2 weeks
q102	B.7.16	You were tired all the time	1-Not at all or less than 1 day (last week) 2-"1-2" days (last week) 3-"3-4" days (last week) 4-"5-7" days (last week) 5-Nearly every day for 2 weeks

q103	B.7.17	You did not like yourself	1-Not at all or less than 1 day (last week) 2-"1-2" days (last week) 3-"3-4" days (last week) 4-"5-7" days (last week) 5-Nearly every day for 2 weeks
q104	B.7.18	You lost a lot of weight without trying to	1-Not at all or less than 1 day (last week) 2-"1-2" days (last week) 3-"3-4" days (last week) 4-"5-7" days (last week) 5-Nearly every day for 2 weeks
q105	B.7.19	You had a lot of trouble getting to sleep	1-Not at all or less than 1 day (last week) 2-"1-2" days (last week) 3-"3-4" days (last week) 4-"5-7" days (last week) 5-Nearly every day for 2 weeks
q106	B.7.20	You could not focus on the important things	1-Not at all or less than 1 day (last week) 2-"1-2" days (last week) 3-"3-4" days (last week) 4-"5-7" days (last week) 5-Nearly every day for 2 weeks

SOCIAL ENVIRONMENT

Database Variable Name	Section and Number in Instrument	Label	Domain Values
Perceived Neighborhood Scale Author(s): Martinez et al Reference(s): Journal of Community Psychology, 30 (1), 23–43			
q107	C.1.1	How many years have you lived in your neighborhood?	Only number characters are acceptable
q108	C.1.2	Among my neighbors there are people I can rely on.	1-Strongly agree 2-Somewhat agree 3-Neither agree, nor disagree 4-Somewhat disagree 5-Strongly disagree 6-Don't know 7-Not applicable 8-Refused
q109	C.1.3	People in my neighborhood trust each other.	1-Strongly agree 2-Somewhat agree 3-Neither agree, nor disagree 4-Somewhat disagree 5-Strongly disagree 6-Don't know 7-Not applicable 8-Refused
q110	C.1.4	I feel I belong in my neighborhood.	1-Strongly agree 2-Somewhat agree 3-Neither agree, nor disagree 4-Somewhat disagree 5-Strongly disagree 6-Don't know 7-Not applicable 8-Refused
q111	C.1.5	I care about what my neighbors think of how I dress and how my house looks.	1-Strongly agree 2-Somewhat agree 3-Neither agree, nor disagree 4-Somewhat disagree 5-Strongly disagree 6-Don't know 7-Not applicable 8-Refused
q112	C.1.6	I have a close relationship with some of my neighbors.	1-Strongly agree 2-Somewhat agree 3-Neither agree, nor disagree 4-Somewhat disagree 5-Strongly disagree 6-Don't know 7-Not applicable 8-Refused

q113	C.1.7	People in my neighborhood are usually warm and friendly.	1-Strongly agree 2-Somewhat agree 3-Neither agree, nor disagree 4-Somewhat disagree 5-Strongly disagree 6-Don't know 7-Not applicable 8-Refused
q114	C.1.8	In my neighborhood people help each other out.	1-Strongly agree 2-Somewhat agree 3-Neither agree, nor disagree 4-Somewhat disagree 5-Strongly disagree 6-Don't know 7-Not applicable 8-Refused
q115	C.1.9	My neighborhood is a good place to live.	1-Strongly agree 2-Somewhat agree 3-Neither agree, nor disagree 4-Somewhat disagree 5-Strongly disagree 6-Don't know 7-Not applicable 8-Refused
q116	C.1.10	My neighborhood has been getting worse recently.	1-Strongly agree 2-Somewhat agree 3-Neither agree, nor disagree 4-Somewhat disagree 5-Strongly disagree 6-Don't know 7-Not applicable 8-Refused
q117	C.1.11	The buildings and yards in my neighborhood are really run down.	1-Strongly agree 2-Somewhat agree 3-Neither agree, nor disagree 4-Somewhat disagree 5-Strongly disagree 6-Don't know 7-Not applicable 8-Refused
q118	C.1.12	If I could I would move out of my neighborhood.	1-Strongly agree 2-Somewhat agree 3-Neither agree, nor disagree 4-Somewhat disagree 5-Strongly disagree 6-Don't know 7-Not applicable 8-Refused

q119	C.1.13	There is a good place (e.g., playground) for children to play in my neighborhood.	1-Strongly agree 2-Somewhat agree 3-Neither agree, nor disagree 4-Somewhat disagree 5-Strongly disagree 6-Don't know 7-Not applicable 8-Refused
q120	C.1.14	My neighborhood is a good place to raise a family.	1-Strongly agree 2-Somewhat agree 3-Neither agree, nor disagree 4-Somewhat disagree 5-Strongly disagree 6-Don't know 7-Not applicable 8-Refused
q121	C.1.15	There are troublemakers hanging around in my neighborhood.	1-Strongly agree 2-Somewhat agree 3-Neither agree, nor disagree 4-Somewhat disagree 5-Strongly disagree 6-Don't know 7-Not applicable 8-Refused
q122	C.1.16	There is public drinking in my neighborhood.	1-Strongly agree 2-Somewhat agree 3-Neither agree, nor disagree 4-Somewhat disagree 5-Strongly disagree 6-Don't know 7-Not applicable 8-Refused
q123	C.1.17	There is open drug abuse or drug dealing in my neighborhood.	1-Strongly agree 2-Somewhat agree 3-Neither agree, nor disagree 4-Somewhat disagree 5-Strongly disagree 6-Don't know 7-Not applicable 8-Refused
q124	C.1.18	It's safe to walk alone in my neighborhood at night.	1-Strongly agree 2-Somewhat agree 3-Neither agree, nor disagree 4-Somewhat disagree 5-Strongly disagree 6-Don't know 7-Not applicable 8-Refused

q125	C.1.19	Some of my friends and relatives won't visit me because they don't feel safe in my neighborhood.	1-Strongly agree 2-Somewhat agree 3-Neither agree, nor disagree 4-Somewhat disagree 5-Strongly disagree 6-Don't know 7-Not applicable 8-Refused
q126	C.1.20	People are afraid of being robbed in my neighborhood.	1-Strongly agree 2-Somewhat agree 3-Neither agree, nor disagree 4-Somewhat disagree 5-Strongly disagree 6-Don't know 7-Not applicable 8-Refused
q127	C.1.21	How likely is it that a neighbor would loan you a few dollars if you needed it in an emergency?	1-Very likely 2-Somewhat likely 3-Neither likely, nor unlikely 4-Somewhat unlikely 5-Very unlikely 6-Don't know 7-Not applicable 8-Refuse
q128	C.1.22	How likely is it that a neighbor would ask you to borrow some food if he/she needed some in an emergency?	1-Very likely 2-Somewhat likely 3-Neither likely, nor unlikely 4-Somewhat unlikely 5-Very unlikely 6-Don't know 7-Not applicable 8-Refuse
q129	C.1.23	How likely is it that a neighbor would watch your place if you're away or take care of your child when you're sick?	1-Very likely 2-Somewhat likely 3-Neither likely, nor unlikely 4-Somewhat unlikely 5-Very unlikely 6-Don't know 7-Not applicable 8-Refuse
q130	C.1.24	How likely is it that you would help a neighbor by watching their place if they're away or taking care of their child if they are sick?	1-Very likely 2-Somewhat likely 3-Neither likely, nor unlikely 4-Somewhat unlikely 5-Very unlikely 6-Don't know 7-Not applicable 8-Refuse

q131	C.1.25	How often do you greet your neighbors when you see them?	1-Very often (daily) 2-Couple of times per week 3-Several times a month 4-Once every few months 5-Never 6-Don't know 7-Not applicable 8-Refused
q132	C.1.26	How often do you have casual visits with neighbors either in their home or in yours?	1-Very often (daily) 2-Couple of times per week 3-Several times a month 4-Once every few months 5-Never 6-Don't know 7-Not applicable 8-Refused
q133	C.1.27	How often do you go to activities like church fairs, neighborhood meetings or sports events?	1-Very often (daily) 2-Couple of times per week 3-Several times a month 4-Once every few months 5-Never 6-Don't know 7-Not applicable 8-Refused
q134	C.1.28	How often do you exchange/share child care with neighbors?	1-Very often (daily) 2-Couple of times per week 3-Several times a month 4-Once every few months 5-Never 6-Don't know 7-Not applicable 8-Refused
q135	C.1.29	How often do you talk to neighbors?	1-Very often (daily) 2-Couple of times per week 3-Several times a month 4-Once every few months 5-Never 6-Don't know 7-Not applicable 8-Refused
Database Variable Name	Section and Number in Instrument	Label	Domain Values
Medical Outcome Study - Social Support			
Author(s): Sherbourne et al			
Reference(s): Social Science Medicine, 32 (6), 705–714			
q136	C.2.1	Someone you can count on to listen to you when you need to talk.	1-None of the time 2-A little of the time 3-Some of the time 4-Most of the time 5-All of the time 6-Don't know 7-Refused

q137	C.2.2	Someone to give you information to help you understand a situation.	1-None of the time 2-A little of the time 3-Some of the time 4-Most of the time 5-All of the time 6-Don't know 7-Refused
q138	C.2.3	Someone to give you good advice in a crisis.	1-None of the time 2-A little of the time 3-Some of the time 4-Most of the time 5-All of the time 6-Don't know 7-Refused
q139	C.2.4	Someone to confide in or talk to about yourself or your problems.	1-None of the time 2-A little of the time 3-Some of the time 4-Most of the time 5-All of the time 6-Don't know 7-Refused
q140	C.2.5	Someone whose advice you really want.	1-None of the time 2-A little of the time 3-Some of the time 4-Most of the time 5-All of the time 6-Don't know 7-Refused
q141	C.2.6	Someone to share your most private worries and fears with.	1-None of the time 2-A little of the time 3-Some of the time 4-Most of the time 5-All of the time 6-Don't know 7-Refused
q142	C.2.7	Someone to turn to for suggestions about how to deal with a personal problem.	1-None of the time 2-A little of the time 3-Some of the time 4-Most of the time 5-All of the time 6-Don't know 7-Refused
q143	C.2.8	Someone who understands your problems.	1-None of the time 2-A little of the time 3-Some of the time 4-Most of the time 5-All of the time 6-Don't know 7-Refused

q144	C.2.9	Someone who would help you if you were confined to bed.	1-None of the time 2-A little of the time 3-Some of the time 4-Most of the time 5-All of the time 6-Don't know 7-Refused
q145	C.2.10	Someone to take you to the doctor if you needed it.	1-None of the time 2-A little of the time 3-Some of the time 4-Most of the time 5-All of the time 6-Don't know 7-Refused
q146	C.2.11	Someone to prepare your meals if you were unable to do it yourself.	1-None of the time 2-A little of the time 3-Some of the time 4-Most of the time 5-All of the time 6-Don't know 7-Refused
q147	C.2.12	Someone to help with daily chores if you were sick.	1-None of the time 2-A little of the time 3-Some of the time 4-Most of the time 5-All of the time 6-Don't know 7-Refused
q148	C.2.13	Someone who shows you love and affection.	1-None of the time 2-A little of the time 3-Some of the time 4-Most of the time 5-All of the time 6-Don't know 7-Refused
q149	C.2.14	Someone to love you and make you feel wanted.	1-None of the time 2-A little of the time 3-Some of the time 4-Most of the time 5-All of the time 6-Don't know 7-Refused
q150	C.2.15	Someone who hugs you.	1-None of the time 2-A little of the time 3-Some of the time 4-Most of the time 5-All of the time 6-Don't know 7-Refused

q151	C.2.16	Someone to have a good time with.	1-None of the time 2-A little of the time 3-Some of the time 4-Most of the time 5-All of the time 6-Don't know 7-Refused
q152	C.2.17	Someone to get together with for relaxation.	1-None of the time 2-A little of the time 3-Some of the time 4-Most of the time 5-All of the time 6-Don't know 7-Refused
q153	C.2.18	Someone to do something enjoyable with.	1-None of the time 2-A little of the time 3-Some of the time 4-Most of the time 5-All of the time 6-Don't know 7-Refused
q154	C.2.19	Someone to do things with to help you get your mind off things.	1-None of the time 2-A little of the time 3-Some of the time 4-Most of the time 5-All of the time 6-Don't know 7-Refused

ASSIMILATION AND ACCULTURATION

Database Variable Name	Section and Number in Instrument	Label	Domain Values
Identity Author(s): Vega et al Reference(s): Fresno MAPPS HAZUDA			
q155	D.1.1.	In what country were you born?	1-Mexico 2-United States
q155a	D.1.1	Please specify	3-Other
q156	D.1.2	In what state did you grow up, meaning where did you live most of the time when you were between the ages of 6 and 16?	Cities in Mexico
q157	D.1.3	In what state did you grow up, meaning where did you live most of the time when you were between the ages of 6 and 16?	Cities in the United States
q158	D.1.4	In what year did you first come to the United States?	Only numbers characters are acceptable If less than 1 year = .5
q159	D.1.5	In what year did you first come to Texas City?	Only numbers characters are acceptable If less than 1 year = .5
Database Variable Name	Section and Number in Instrument	Label	Domain Values
Language Author(s): Vega et al Reference(s): Fresno MAPPS HAZUDA			
q160		What was the first language that you learned to speak?	1-English 2-English and Spanish simultaneously 3-Spanish 4-Other 5-Don't know 6-Refused
q160a	D.1.6	Please specify	Please specify
q161		What language was spoken in your home when you were a child?	1-Only English 2-Mostly English 3-Spanish and English Equally 4-Mostly Spanish 5-Only Spanish 6-Other 7-Don't know 8-Refused
q161a	D.1.7	Please specify	Please specify

q162	D.1.8	How important do you feel it is for children to know something about the history of Mexico? Would you say...	1-Very important 2-Somewhat important 3-Not very important 4-Not important at all 5-Not sure 6-Don't know 7-Refused
q163	D.1.9	How important do you feel it is for children to follow Mexican customs and ways of life? Would you say...	1-Very important 2-Somewhat important 3-Not very important 4-Not important at all 5-Not sure 6-Don't know 7-Refused
q164	D.1.10	How important do you feel it is for children to celebrate Mexican holidays such as Cinco de Mayo or el dieciseis (16) de Septiembre?	1-Very important 2-Somewhat important 3-Not very important 4-Not important at all 5-Not sure 6-Don't know 7-Refused
q165		When you were growing up, meaning the time you were between 6 and 16, were your neighbors...	1-Mostly Spanish/Hispanic/Latino 2-Mostly Anglo 3-About equal numbers of each 4-Other 5-Don't know 6-Refused
q165a	D.1.11	Please specify	Please specify
q166		When you were growing up, meaning the time you were between 6 and 16, were your school mates...	1-Mostly Spanish/Hispanic/Latino 2-Mostly Anglo 3-About equal numbers of each 4-Other 5-Don't know 6-Refused
q166a	D.1.12	Please specify	Please specify
q167		When you were growing up, meaning the time you were between 6 and 16, were your close personal friends...	1-Mostly Spanish/Hispanic/Latino 2-Mostly Anglo 3-About equal numbers of each 4-Other 5-Don't know 6-Refused
q167a	D.1.13	Please specify	Please specify
q168	D.1.14	What language do you speak at home?	1-Only English 2-Mostly English 3-Both Equally 4-Mostly Spanish 5-Only Spanish 6-Other 7-Not applicable 8-Refused

q169	D.1.15	What language do you speak outside your home?	1-Only English 2-Mostly English 3-Both Equally 4-Mostly Spanish 5-Only Spanish 6-Other 7-Not applicable 8-Refused
q170	D.1.16	What language do you speak at family gatherings, such as Christmas or other holidays?	1-Only English 2-Mostly English 3-Both Equally 4-Mostly Spanish 5-Only Spanish 6-Other 7-Not applicable 8-Refused
q171	D.1.17	What language do you use when you listen to the radio and watch TV?	1-Only English 2-Mostly English 3-Both Equally 4-Mostly Spanish 5-Only Spanish 6-Other 7-Not applicable 8-Refused
q172	D.1.18	What type of music do you prefer?	1-Mexican/Latin/Spanish 2-American/Anglo/English 3-Both equally 4-Don't know 5-Refused
q173	D.1.19	How many days in a week do you eat authentic homemade or restaurant Mexican food?	1-"1" day 2-"2" days 3-"3" days 4-"4" days 5-"5" days 6-"6" days 7-"7" days 8-Don't know 9-Refused
Database Variable Name	Section and Number in Instrument	Label	Domain Values
Family Separation Author(s): Vega et al Reference(s): Fresno MAPPS HAZUDA			
q174	D.1.20	Do you want to...	1-Stay in the United States for good 2-Move to Mexico as soon as you can 3-Move to Mexico when you retire 4-Live in both countries 5-Don't know 6-Refused
q175	D.1.21	Have you traveled to Mexico in the last 12 months?	1-Yes 2-No 3-Don't know 4-Refused

q176	D.1.22	Was your mother born in Mexico?	1-Yes 2-No 3-Don't know 4-Refused
q177	D.1.23	Was your father born in Mexico?	1-Yes 2-No 3-Don't know 4-Refused
q178	D.1.24	Was your mother's father born in Mexico?	1-Yes 2-No 3-Don't know 4-Refused
q179	D.1.25	Was your mother's mother born in Mexico?	1-Yes 2-No 3-Don't know 4-Refused
q180	D.1.26	Was your father's father born in Mexico?	1-Yes 2-No 3-Don't know 4-Refused
q181	D.1.27	Was your father's mother born in Mexico?	1-Yes 2-No 3-Don't know 4-Refused
Database Variable Name	Section and Number in Instrument	Label	Domain Values
Social Embeddedness Author(s): Vega et al Reference(s): Fresno MAPPS HAZUDA			
q182	D.1.28	Are the people with whom you work closely on your current job ...	1-Mostly Spanish/Hispanic/Latino 2-Mostly Anglo 3-About equal numbers of each 4-Other
q182a	Please specify	Please specify	Please specify
q183	D.1.29	Were the people with whom you worked closely on your last job ...	1-Mostly Spanish/Hispanic/Latino 2-Mostly Anglo 3-About equal numbers of each 4-Other
q183a	Please specify	Please specify	Please specify
q184	D.1.30	Throughout most of your adult life, have your neighbors been...	1-Mostly Spanish/Hispanic/Latino 2-Mostly Anglo 3-About equal numbers of each 4-Other
q184a	Please specify	Please specify	Please specify
q185	D.1.31	Throughout your adult life, have your close, personal friends been...	1-Mostly Spanish/Hispanic/Latino 2-Mostly Anglo 3-About equal numbers of each 4-Other
q185a	Please specify	Please specify	Please specify
Database Variable Name	Section and Number in Instrument	Label	Domain Values

Perceived Discrimination

Author(s): Vega et al

Reference(s): Fresno MAPPS
HAZUDA

q186	D.1.32	Do you feel unaccepted by other (races or groups) due to your Spanish/Hispanic/Latino culture?	1-Yes 2-No 3-Don't know 4-Refused
q187	D.1.33	How often do you feel people treat you unfairly because you are Spanish/Hispanic/Latino?	1-Always 2-Often 3-Sometimes 4-Never 5-Don't know 6-Refused
q188	D.1.34	How often have you seen friends treated unfairly because they are Spanish/Hispanic/Latino?	1-Always 2-Often 3-Sometimes 4-Never 5-Don't know 6-Refused

STRESSORS, STRESS AND COPING BEHAVIORS

Database Variable Name	Section and Number in Instrument	Label	Domain Values
Daily Hassle Scale Author(s): Turner, R.J. Reference(s): Journal of Behavioral Medicine, 4,1, 1–39.			
q189	E.1.1	Too many responsibilities.	1-Not at all bothered 2-A little bothered 3-Somewhat bothered 4-Bothered a great deal 5-Don't know 6-Refused
q190	E.1.2	Too many things to do.	1-Not at all bothered 2-A little bothered 3-Somewhat bothered 4-Bothered a great deal 5-Don't know 6-Refused
q191	E.1.3	Not enough time to do the things you need to do.	1-Not at all bothered 2-A little bothered 3-Somewhat bothered 4-Bothered a great deal 5-Don't know 6-Refused
q192	E.1.4	Not enough money for housing.	1-Not at all bothered 2-A little bothered 3-Somewhat bothered 4-Bothered a great deal 5-Don't know 6-Refused
q193	E.1.5	Concerns about owing money and concerns about getting credit.	1-Not at all bothered 2-A little bothered 3-Somewhat bothered 4-Bothered a great deal 5-Don't know 6-Refused
q194	E.1.6	Concerns about money for emergencies.	1-Not at all bothered 2-A little bothered 3-Somewhat bothered 4-Bothered a great deal 5-Don't know 6-Refused
q195	E.1.7	Not enough money for basic necessities.	1-Not at all bothered 2-A little bothered 3-Somewhat bothered 4-Bothered a great deal 5-Don't know 6-Refused

q196	E.1.8	Not enough money for transportation.	1-Not at all bothered 2-A little bothered 3-Somewhat bothered 4-Bothered a great deal 5-Don't know 6-Refused
q197	E.1.9	Not enough money for entertainment and recreation.	1-Not at all bothered 2-A little bothered 3-Somewhat bothered 4-Bothered a great deal 5-Don't know 6-Refused
q198	E.1.10	Friends or relatives too far away.	1-Not at all bothered 2-A little bothered 3-Somewhat bothered 4-Bothered a great deal 5-Don't know 6-Refused
q199	E.1.11	Problems with aging parents.	1-Not at all bothered 2-A little bothered 3-Somewhat bothered 4-Bothered a great deal 5-Don't know 6-Refused
q200	E.1.12	Problems with your children.	1-Not at all bothered 2-A little bothered 3-Somewhat bothered 4-Bothered a great deal 5-Don't know 6-Refused
q201	E.1.13	Overloaded with family responsibilities.	1-Not at all bothered 2-A little bothered 3-Somewhat bothered 4-Bothered a great deal 5-Don't know 6-Refused
q202	E.1.14	Difficulties with friends.	1-Not at all bothered 2-A little bothered 3-Somewhat bothered 4-Bothered a great deal 5-Don't know 6-Refused

q203	E.1.15	Not enough time for family.	1-Not at all bothered 2-A little bothered 3-Somewhat bothered 4-Bothered a great deal 5-Don't know 6-Refused
q204	E.1.16	Problems getting along with fellow workers.	1-Not at all bothered 2-A little bothered 3-Somewhat bothered 4-Bothered a great deal 5-Don't know 6-Refused
q205	E.1.17	Concerns about job security.	1-Not at all bothered 2-A little bothered 3-Somewhat bothered 4-Bothered a great deal 5-Don't know 6-Refused
q206	E.1.18	Laid-off or out of work.	1-Not at all bothered 2-A little bothered 3-Somewhat bothered 4-Bothered a great deal 5-Don't know 6-Refused
q207	E.1.19	Don't like current work duties.	1-Not at all bothered 2-A little bothered 3-Somewhat bothered 4-Bothered a great deal 5-Don't know 6-Refused
q208	E.1.20	Worries about decisions to change jobs.	1-Not at all bothered 2-A little bothered 3-Somewhat bothered 4-Bothered a great deal 5-Don't know 6-Refused
q209	E.1.21	Hassles from boss or superior.	1-Not at all bothered 2-A little bothered 3-Somewhat bothered 4-Bothered a great deal 5-Don't know 6-Refused
q210	E.1.22	Troublesome neighbors.	1-Not at all bothered 2-A little bothered 3-Somewhat bothered 4-Bothered a great deal 5-Don't know 6-Refused
q211	E.1.23	Neighborhood deterioration.	1-Not at all bothered 2-A little bothered 3-Somewhat bothered 4-Bothered a great deal 5-Don't know 6-Refused

q212	E.1.24	Transportation problems.	1-Not at all bothered 2-A little bothered 3-Somewhat bothered 4-Bothered a great deal 5-Don't know 6-Refused
q213	E.1.25	Noise.	1-Not at all bothered 2-A little bothered 3-Somewhat bothered 4-Bothered a great deal 5-Don't know 6-Refused
q214	E.1.26	Crime.	1-Not at all bothered 2-A little bothered 3-Somewhat bothered 4-Bothered a great deal 5-Don't know 6-Refused
q215	E.1.27	Traffic.	1-Not at all bothered 2-A little bothered 3-Somewhat bothered 4-Bothered a great deal 5-Don't know 6-Refused
q216	E.1.28	Pollution.	1-Not at all bothered 2-A little bothered 3-Somewhat bothered 4-Bothered a great deal 5-Don't know 6-Refused

Database Variable Name	Section and Number in Instrument	Label	Domain Values
Life Events Stressor			
Author(s): Turner et al			
q217	E.2.1	Was there a serious accident or injury?	1-Yes 2-No
q218	To whom did this event occur	To whom did this event occur?	1-Respondent/self 2-Partner/boyfriend/girlfriend 3-Parent 4-Other relative/friend
q219	E.2.2	Was there a serious illness?	1-Yes 2-No
q220	To whom did this event occur	To whom did this event occur?	1-Respondent/self 2-Partner/boyfriend/girlfriend 3-Parent 4-Other relative/friend
q221	E.2.3	Did a child die?	1-Yes 2-No
q222	To whom did this event occur	To whom did this event occur?	1-Respondent/self 2-Partner/boyfriend/girlfriend 3-Parent 4-Other relative/friend
q223	E.2.4	Did a partner/boyfriend/girlfriend die?	1-Yes 2-No
q224	To whom did this event occur	To whom did this event occur?	1-Respondent/self 2-Partner/boyfriend/girlfriend 3-Parent 4-Other relative/friend
q225	E.2.5	Was there trouble with the law?	1-Yes 2-No
q226	To whom did this event occur	To whom did this event occur	1-Respondent/self 2-Partner/boyfriend/girlfriend 3-Parent 4-Other relative/friend
q227	E.2.6	Did anyone have something taken from them by force...	1-Yes 2-No
q228	To whom did this event occur	To whom did this event occur	1-Respondent/self 2-Partner/boyfriend/girlfriend 3-Parent 4-Other relative/friend

q229	E.2.7	Was anyone beaten up or physically attacked?	1-Yes 2-No
q230	To whom did this event occur	To whom did this event occur	1-Respondent/self 2-Partner/boyfriend/girlfriend 3-Parent 4-Other relative/friend
q231	E.2.8	Was there an unwanted pregnancy?	1-Yes 2-No
q232	To whom did this event occur	To whom did this event occur	1-Respondent/self 2-Partner/boyfriend/girlfriend 3-Parent 4-Other relative/friend
q233	E.2.9	Was there an abortion or miscarriage?	1-Yes 2-No
q234	To whom did this event occur	To whom did this event occur	1-Respondent/self 2-Partner/boyfriend/girlfriend 3-Parent 4-Other relative/friend
q235	E.2.10	Was someone accused of or arrested for a crime?	1-Yes 2-No
q236	To whom did this event occur	To whom did this event occur	1-Respondent/self 2-Partner/boyfriend/girlfriend 3-Parent 4-Other relative/friend
q237	E.2.11	Did someone drop out of school?	1-Yes 2-No
q238	To whom did this event occur	To whom did this event occur	1-Respondent/self 2-Partner/boyfriend/girlfriend 3-Parent 4-Other relative/friend
q239	E.2.12	Did a close friend die?	1-Yes 2-No
q240	To whom did this event occur	To whom did this event occur	1-Respondent/self 2-Partner/boyfriend/girlfriend 3-Parent
q241	E.2.13	Was there a marital separation or divorce?	1-Yes 2-No
q242	To whom did this event occur	To whom did this event occur	1-Respondent/self 2-Partner/boyfriend/girlfriend 3-Parent
q243	E.2.14	Was someone fired or laid off?	1-Yes 2-No

q244	To whom did this event occur	To whom did this event occur	1-Respondent/self 2-Partner/boyfriend/girlfriend 3-Parent
q245	E.2.15	Did someone have a business that failed?	1-Yes 2-No
q246	To whom did this event occur	To whom did this event occur	1-Respondent/self 2-Partner/boyfriend/girlfriend 3-Parent
q247	E.2.16	Did someone have a major financial crisis?	1-Yes 2-No
q248	To whom did this event occur	To whom did this event occur	1-Respondent/self 2-Partner/boyfriend/girlfriend 3-Parent
q249	E.2.17	Did someone fail school or a training program?	1-Yes 2-No
q250	To whom did this event occur	To whom did this event occur	1-Respondent/self 2-Partner/boyfriend/girlfriend 3-Parent
q251	E.2.18	Experienced a change of job for a worse one?	1-Yes 2-No
q252	To whom did this event occur	To whom did this event occur	1-Respondent/self 2-Partner/boyfriend/girlfriend
q253	E.2.19	Was demoted at work or took a cut in pay?	1-Yes 2-No
q254	To whom did this event occur	To whom did this event occur	1-Respondent/self 2-Partner/boyfriend/girlfriend
q255	E.2.20	Was sued by someone?	1-Yes 2-No
q256	To whom did this event occur	To whom did this event occur	1-Respondent/self 2-Partner/boyfriend/girlfriend
q257	E.2.21	Went on welfare?	1-Yes 2-No
q258	To whom did this event occur	To whom did this event occur	1-Respondent/self 2-Partner/boyfriend/girlfriend
q259	E.2.22	Was forced off welfare?	1-Yes 2-No
q260	To whom did this event occur	To whom did this event occur	1-Respondent/self 2-Partner/boyfriend/girlfriend
q261	E.2.23	Went on strike?	1-Yes 2-No
q262	To whom did this event occur	To whom did this event occur	1-Respondent/self 2-Partner/boyfriend/girlfriend
q263	E.2.24	A romantic relationship ended?	1-Yes 2-No
q264	E.2.25	A close relationship ended?	1-Yes 2-No
q265	E.2.26	Partner/boyfriend/girlfriend found out you were unfaithful?	1-Yes 2-No
q266	E.2.27	Increased arguments with your partner/boyfriend/girlfriend?	1-Yes 2-No
q267	E.2.28	Moved to a worse residence or neighborhood?	1-Yes 2-No
q268	E.2.29	Had driver's license taken away?	1-Yes 2-No
q269	E.2.30	Had your house or car broken into?	1-Yes 2-No

Database Variable Name	Section and Number in Instrument	Label	Domain Values
Optimism LOT-R Author(s): Carver, C.S. Reference(s): Journal of Personality and Social Psychology, 67, 1063-1078.			
q271	E.3.1	In uncertain times, you usually expect the best?	1-I agree a lot 2- I agree a little 3- I neither agree nor disagree 4-I disagree a little 5-I disagree a lot 6-Don't know 7-Refused
q272	E.3.2	It's easy for you to relax?	1-I agree a lot 2- I agree a little 3- I neither agree nor disagree 4-I disagree a little 5-I disagree a lot 6-Don't know 7-Refused
q273	E.3.3	If something can go wrong for you, it will?	1-I agree a lot 2- I agree a little 3- I neither agree nor disagree 4-I disagree a little 5-I disagree a lot 6-Don't know 7-Refused
q274	E.3.4	You're always optimistic about your future?	1-I agree a lot 2- I agree a little 3- I neither agree nor disagree 4-I disagree a little 5-I disagree a lot 6-Don't know 7-Refused
q275	E.3.5	You enjoy your friends a lot?	1-I agree a lot 2- I agree a little 3- I neither agree nor disagree 4-I disagree a little 5-I disagree a lot 6-Don't know 7-Refused
q276	E.3.6	It's important for you to keep busy?	1-I agree a lot 2- I agree a little 3- I neither agree nor disagree 4-I disagree a little 5-I disagree a lot 6-Don't know 7-Refused
q277	E.3.7	You hardly ever expect things to go your way?	1-I agree a lot 2- I agree a little 3- I neither agree nor disagree 4-I disagree a little 5-I disagree a lot 6-Don't know 7-Refused

q278	E.3.8	You don't get upset too easily?	1-I agree a lot 2- I agree a little 3- I neither agree nor disagree 4-I disagree a little 5-I disagree a lot 6-Don't know 7-Refused
q279	E.3.9	You rarely count on good things happening to you?	1-I agree a lot 2- I agree a little 3- I neither agree nor disagree 4-I disagree a little 5-I disagree a lot 6-Don't know 7-Refused

Database Variable Name	Section and Number in Instrument	Label	Domain Values
Brief Coping Scale Author(s): Carver, C.S. Reference(s): International Journal of Behavioral Medicine, 4, 92-100.			
q281	E.4.1	Turn to work or other activities to take your mind off things.	1-I do not do this at all 2-I do this a little bit 3-I do this a medium amount 4-I do this a lot 5-Don't know 6-Refused
q282	E.4.2	Concentrate your efforts on doing something about ...	1-I do not do this at all 2-I do this a little bit 3-I do this a medium amount 4-I do this a lot 5-Don't know 6-Refused
q283	E.4.3	Say to yourself "this isn't real."	1-I do not do this at all 2-I do this a little bit 3-I do this a medium amount 4-I do this a lot 5-Don't know 6-Refused
q284	E.4.4	Use alcohol or other drugs to make yourself feel better.	1-I do not do this at all 2-I do this a little bit 3-I do this a medium amount 4-I do this a lot 5-Don't know 6-Refused
q285	E.4.5	Get emotional support from others.	1-I do not do this at all 2-I do this a little bit 3-I do this a medium amount 4-I do this a lot 5-Don't know 6-Refused
q286	E.4.6	Give up trying to deal with it.	1-I do not do this at all 2-I do this a little bit 3-I do this a medium amount 4-I do this a lot 5-Don't know 6-Refused
q287	E.4.7	Take action to try to make the situation better.	1-I do not do this at all 2-I do this a little bit 3-I do this a medium amount 4-I do this a lot 5-Don't know 6-Refused
q288	E.4.8	Refuse to believe that it has happened.	1-I do not do this at all 2-I do this a little bit 3-I do this a medium amount 4-I do this a lot 5-Don't know 6-Refused

q289	E.4.9	Say things to let your bad feelings escape.	1-I do not do this at all 2-I do this a little bit 3-I do this a medium amount 4-I do this a lot 5-Don't know 6-Refused
q290	E.4.10	Get help and advice from other people.	1-I do not do this at all 2-I do this a little bit 3-I do this a medium amount 4-I do this a lot 5-Don't know 6-Refused
q291	E.4.11	Use alcohol or other drugs to help you get through it.	1-I do not do this at all 2-I do this a little bit 3-I do this a medium amount 4-I do this a lot 5-Don't know 6-Refused
q292	E.4.12	Try to see it in a different light, to make it seem more positive.	1-I do not do this at all 2-I do this a little bit 3-I do this a medium amount 4-I do this a lot 5-Don't know 6-Refused
q293	E.4.13	Criticize yourself.	1-I do not do this at all 2-I do this a little bit 3-I do this a medium amount 4-I do this a lot 5-Don't know 6-Refused
q294	E.4.14	Try to come up with a strategy about what to do.	1-I do not do this at all 2-I do this a little bit 3-I do this a medium amount 4-I do this a lot 5-Don't know 6-Refused

q295	E.4.15	Receive comfort and understanding from someone.	1-I do not do this at all 2-I do this a little bit 3-I do this a medium amount 4-I do this a lot 5-Don't know 6-Refused
q296	E.4.16	Give up the attempt to cope.	1-I do not do this at all 2-I do this a little bit 3-I do this a medium amount 4-I do this a lot 5-Don't know 6-Refused
q297	E.4.17	Look for something good in what is happening.	1-I do not do this at all 2-I do this a little bit 3-I do this a medium amount 4-I do this a lot 5-Don't know 6-Refused
q298	E.4.18	Make jokes about it.	1-I do not do this at all 2-I do this a little bit 3-I do this a medium amount 4-I do this a lot 5-Don't know 6-Refused
q299	E.4.19	Do something to think about it less, such as going to movies, watching TV, reading, daydreaming, sleeping, or shopping.	1-I do not do this at all 2-I do this a little bit 3-I do this a medium amount 4-I do this a lot 5-Don't know 6-Refused
q300	E.4.20	Accept the reality of the fact that it has happened.	1-I do not do this at all 2-I do this a little bit 3-I do this a medium amount 4-I do this a lot 5-Don't know 6-Refused
q301	E.4.21	Express your negative feelings.	1-I do not do this at all 2-I do this a little bit 3-I do this a medium amount 4-I do this a lot 5-Don't know 6-Refused
q302	E.4.22	Try to find comfort in your religion or spiritual beliefs.	1-I do not do this at all 2-I do this a little bit 3-I do this a medium amount 4-I do this a lot 5-Don't know 6-Refused
q303	E.4.23	Try to get advice or help from other people about what to do.	1-I do not do this at all 2-I do this a little bit 3-I do this a medium amount 4-I do this a lot 5-Don't know 6-Refused

q304	E.4.24	Learn to live with it.	1-I do not do this at all 2-I do this a little bit 3-I do this a medium amount 4-I do this a lot 5-Don't know 6-Refused
q305	E.4.25	Think hard about what steps to take.	1-I do not do this at all 2-I do this a little bit 3-I do this a medium amount 4-I do this a lot 5-Don't know 6-Refused
q306	E.4.26	Blame yourself for things that happened.	1-I do not do this at all 2-I do this a little bit 3-I do this a medium amount 4-I do this a lot 5-Don't know 6-Refused
q307	E.4.27	Pray or meditate.	1-I do not do this at all 2-I do this a little bit 3-I do this a medium amount 4-I do this a lot 5-Don't know 6-Refused
q308	E.4.28	Make fun of the situation.	1-I do not do this at all 2-I do this a little bit 3-I do this a medium amount 4-I do this a lot 5-Don't know 6-Refused
q309	E.4.29	Do anything else that we have not mentioned.	String

Database Variable Name	Section and Number in Instrument	Label	Domain Values
Religiosity Author(s): In house			
q310		Do you participate regularly in any non-religious groups such as a senior center, a political organization, or any other social or recreational group?	1-Yes 2-No 3-Don't know 4-Refused
q310a	E.5.1	Please specify	Please specify
q311	E.5.2	E.5.2. How often do you attend religious services?	1-Never or almost never 2-Several times a year 3-Once or twice a month 4-Almost every week 5-More than twice a week 6-Don't know 7-Refused

Database Variable Name	Section and Number in Instrument	Label	Domain Values
Perceived Stress Scale Author(s): Cohen et al			
q312	E.6.1	In the last month, how often have you been upset because of something that happened unexpectedly?	1-Never 2-Almost never 3-Sometimes 4-Fairly often 5-Very often 6-Don't know 7-Refused
q313	E.6.2	In the last month, how often have you felt that you were unable to control the important things in your life?	1-Never 2-Almost never 3-Sometimes 4-Fairly often 5-Very often 6-Don't know 7-Refused
q314	E.6.3	In the last month, how often have you felt nervous and "stressed"?	1-Never 2-Almost never 3-Sometimes 4-Fairly often 5-Very often 6-Don't know 7-Refused
q315	E.6.4	In the last month, how often have you felt confident about your ability to handle your personal problems.	1-Never 2-Almost never 3-Sometimes 4-Fairly often 5-Very often 6-Don't know 7-Refused
q316	E.6.5	In the last month, how often have you felt that things were going your way?	1-Never 2-Almost never 3-Sometimes 4-Fairly often 5-Very often 6-Don't know 7-Refused
q317	E.6.6	In the last month, how often have you found that you could not cope with all the things that you had to do?	1-Never 2-Almost never 3-Sometimes 4-Fairly often 5-Very often 6-Don't know 7-Refused
q318	E.6.7	In the last month, how often have you been able to control irritations in your life?	1-Never 2-Almost never 3-Sometimes 4-Fairly often 5-Very often 6-Don't know 7-Refused

q319	E.6.8	In the last month, how often have you felt that you were on top of things?	1-Never 2-Almost never 3-Sometimes 4-Fairly often 5-Very often 6-Don't know 7-Refused
q320	E.6.9	In the last month, how often have you been angered because of things that were outside of your control?	1-Never 2-Almost never 3-Sometimes 4-Fairly often 5-Very often 6-Don't know 7-Refused
q321	E.6.10	In the last month, how often have you felt difficulties were piling up so high that you could not overcome them?	1-Never 2-Almost never 3-Sometimes 4-Fairly often 5-Very often 6-Don't know 7-Refused

PERCEPTION OF RISK AND COPING WITH INDUSTRY

Database Variable Name	Section and Number in Instrument	Label	Domain Values
Perceived Risk of Hazard Scale Author(s): In house			
q322	F.1.1	How concerned are you that pollution from the oil and chemical plants might harm your health or your family's health?	1-Not at all concerned 2-A little concerned 3-Moderately concerned 4-Very concerned 5-Extremely concerned 6-Don't know 7-Refused
q323	F.1.2	How concerned are you that accidents, such as explosions or spills, from the oil and chemical plants might harm your health or your family's health?	1-Not at all concerned 2-A little concerned 3-Moderately concerned 4-Very concerned 5-Extremely concerned 6-Don't know 7-Refused
q324	F.1.3	How concerned are you that stored waste from the oil and chemical plants might harm your health or your family's health?	1-Not at all concerned 2-A little concerned 3-Moderately concerned 4-Very concerned 5-Extremely concerned 6-Don't know 7-Refused
q325	F.1.4	How concerned are you that the oil and chemical plants might cause health problems or disease in you or your family?	1-Not at all concerned 2-A little concerned 3-Moderately concerned 4-Very concerned 5-Extremely concerned 6-Don't know 7-Refused
q326	F.1.5	How much do you know about potential risks associated with the oil and chemical plants?	1-Know nothing 2-Know a little 3-Know some 4-Know a lot 5-Don't know 6-Refused
q327	F.1.6	How much control over those risks do you think you have?	1-No control 2-A little control 3-Some control 4-Total control 5-Total control 6-Don't know 7-Refused

Database Variable Name	Section and Number in Instrument	Label	Domain Values
Hazard Coping Efficacy – Self Author(s): In house			
q328	F.2.1	Get used to the daily hassles of the plants (smells, noise).	1-Certain cannot do at all 2-Probably cannot do 3-Maybe can do 4-Probably can do 5-Certain can do 6-Don't know 7-Refused
q329	F.2.2	Follow an emergency plan in case of a plant leak, spill, or explosion.	1-Certain cannot do at all 2-Probably cannot do 3-Maybe can do 4-Probably can do 5-Certain can do 6-Don't know 7-Refused
q330	F.2.3	Manage fears that some harm from the plants might go to you or your family.	1-Certain cannot do at all 2-Probably cannot do 3-Maybe can do 4-Probably can do 5-Certain can do 6-Don't know 7-Refused
q331	F.2.4	Take some action at home to reduce your risk of harm.	1-Certain cannot do at all 2-Probably cannot do 3-Maybe can do 4-Probably can do 5-Certain can do 6-Don't know 7-Refused
q332	F.2.5	Learn facts about possible risks from the plants.	1-Certain cannot do at all 2-Probably cannot do 3-Maybe can do 4-Probably can do 5-Certain can do 6-Don't know 7-Refused
q333	F.2.6	Speak out in the community to make the plants safer.	1-Certain cannot do at all 2-Probably cannot do 3-Maybe can do 4-Probably can do 5-Certain can do 6-Don't know 7-Refused

q334	F.2.7	Focus on your work or your family instead of the nearby plants.	1-Certain cannot do at all 2-Probably cannot do 3-Maybe can do 4-Probably can do 5-Certain can do 6-Don't know 7-Refused
q335	F.2.8	Talk privately with friends about the dangers of the plants.	1-Certain cannot do at all 2-Probably cannot do 3-Maybe can do 4-Probably can do 5-Certain can do 6-Don't know 7-Refused
q336	F.2.9	Try to concentrate on the good aspects of the plants, such as jobs.	1-Certain cannot do at all 2-Probably cannot do 3-Maybe can do 4-Probably can do 5-Certain can do 6-Don't know 7-Refused

Database Variable Name	Section and Number in Instrument	Label	Domain Values
Hazard Coping Efficacy – Collective			
Author(s): In house			
q337	F.3.1	Learn facts about possible risks from the plants.	1-Certain cannot do at all 2-Probably cannot do 3-Maybe can do 4-Probably can do 5-Certain can do 6-Don't know 7-Refused
q338	F.3.2	Work with the local companies to reduce the risks.	1-Certain cannot do at all 2-Probably cannot do 3-Maybe can do 4-Probably can do 5-Certain can do 6-Don't know 7-Refused
q339	F.3.3	Follow city guidelines about emergency procedures.	1-Certain cannot do at all 2-Probably cannot do 3-Maybe can do 4-Probably can do 5-Certain can do 6-Don't know 7-Refused
q340	F.3.4	Protest the negative effects of the plants.	1-Certain cannot do at all 2-Probably cannot do 3-Maybe can do 4-Probably can do 5-Certain can do 6-Don't know 7-Refused
q341	F.3.5	Comfort each other in the case of an accident.	1-Certain cannot do at all 2-Probably cannot do 3-Maybe can do 4-Probably can do 5-Certain can do 6-Don't know 7-Refused

SOCIO ECONOMIC AND COMPLIMENTARY MEDICINE

Database Variable Name	Section and Number in Instrument	Label	Domain Values
Occupation Author(s): In house Reference(s): BRFSS, 2000 Cenus			
q342	G.1.1	Has anyone in this household worked in a petrochemical plant?	1-Yes 2-No 3-Don't know 4-Refused
q343		Who has worked in a petrochemical plant?	1-Respondent 2-Spouse/partner 3-Other Please specify
q343a	G.1.2	Please specify	Please specify
q344	G.1.3	Is anyone in this household working in a petrochemical plant now?	1-Yes 2-No 3-Don't know 4-Refused
q345		Who is working in a petrochemical plant now?	1-Respondent 2-Spouse/partner 3-Other Please specify
q345a	G.1.4	Please specify	Please specify
q346	G.1.5	Are you currently?	1-Employed full time 2-Employed part time 3-Retired, but working 4-Homemaker 5-Retired 6-Disabled 7-Never worked 8-Don't know 9-Refused
q347a		Where did you work last week? (COMPLETE ADDRESS NEEDED)	All characters and numbers are acceptable
q347b		Street number	Only numbers are acceptable
q347c		City	Only are characters acceptable
q347d	G.1.6	Zip code	Only numbers are acceptable
q348	G.1.7	Who do you work for? (Name of company)	All characters and numbers are acceptable
q349	G.1.8	What kind of industry or business is this?	All characters and numbers are acceptable
q350	G.1.9	What kind of work do you do? (please specify)	All characters and numbers are acceptable

q351	G.1.10	Who is working in a petrochemical plant now?	All characters and numbers are acceptable
Database Variable Name	Section and Number in Instrument	Label	Domain Values
Housing Author(s): In house Reference (s): 2000 Census			
q352		Fill in type of home	1-Mobile house 2-A one family house 3-Duplex 4-Apartment/condo 5-Other
q352a	G.1.11	Please specify	Please specify
q353		With regard to your home do you and your partner/husband/wife?	1-Own/buy 2-Rent 3-Live rent free with employer or friend 4-Other
q353a	G.1.12	Please specify	Please specify
q354	G.1.13	What would your home be worth if it were sold today?	Dollar amount, Only numbers are acceptable
q355	G.1.14	What was the purchase price of your home when you bought it?	Dollar amount, Only numbers are acceptable
q356	G.1.15	What is your monthly rent?	1-Yes 2-No 3-Don't know 4-Refused

Database Variable Name	Section and Number in Instrument	Label	Domain Values
Health Insurance Author(s): In house			
q357	G.1.16	Do you have health insurance?	1-Yes 2-No 3-Don't know 4-Refused
Database Variable Name	Section and Number in Instrument	Label	Domain Values
Complimentary Medicine Author(s): In house			
q358	G.1.17	During the past 12 months, how many times did you discuss health conditions with a pharmacist?	1-Never 2-Once a month 3-More than once a month 4-Don't know 5-Refused
q359_1	G.1.18	What did you discuss? (check all that apply) - Health maintenance-disease prevention	1-Health maintenance-disease prevention
q359_2	G.1.18	What did you discuss? (check all that apply) - Prescription medication	2-Prescription medication
q359_3	G.1.18	What did you discuss? (check all that apply) - Experienced side effects of prescription medication	3-Experienced side effects of prescription medication
q359_4	G.1.18	What did you discuss? (check all that apply) - Over the counter medication	4-Over the counter medication
q359_5	G.1.18	What did you discuss? (check all that apply) - Experienced side effects of over the counter medication	5-Experienced side effects of over the counter medication
q359_6	G.1.18	What did you discuss? (check all that apply) - Nutritional supplements	6-Nutritional supplements
q359_7	G.1.18	What did you discuss? (check all that apply) - Vitamins and minerals	7-Vitamins and minerals
q359_8	G.1.18	What did you discuss? (check all that apply) - Alternative therapies	8-Alternative therapies

q359_9	G.1.18	What did you discuss? (check all that apply) - Don't Know	9-Don't know
q359_10	G.1.18	What did you discuss? (check all that apply) - Refused	10-Refused
q359_11	G.1.18	What did you discuss? (check all that apply) - Not applicable	11-Not applicable
Database Variable Name	Section and Number in Instrument	Label	Domain Values
Income Author(s): In house Reference(s): 2000 Census, BRFSS			
q360	G.1.19	Is your annual household income from all sources?	1-Less than \$10,000 2-Less than \$15,000-(\$10,000 to less than \$15,000) 3-Less than \$20,000-(\$15,000 to less than \$20,000) 4-Less than \$25,000-(\$20,000 to less than \$25,000) 5-Less than \$35,000-(\$25,000 to less than \$35,000) 6-Less than \$50,000-(\$35,000 to less than \$50,000) 7-Less than \$75,000-(\$50,000 to less than \$75,000) 8-\$75,000 or more 9-Don't know/Not sure 10-Refused