



Constructed Variables CHIS 2011-12 Adult Survey

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BASIC DEMOGRAPHIC INFORMATION

SRAGE_P Self-Reported Age (PUF Recode)

The SRAGE_P is a recoded version of SRAGE, which assigns age to the respondent.

Note: Top code: 85

SRSEX Gender

SRSEX is a variable created by the CHIS data collection vendor, Westat. It is a dichotomous variable indicating the self-reported gender of the adult respondent.

SRAS Self-Reported Asian

SRAS is dichotomous indicator of whether or not a respondent self-reports as being Asian. SRAS was constructed by the CHIS data collection vendor, Westat.

SRASO OMB Self-Reported Other Asian Group

SRASO is a dichotomous indicator of whether or not a respondent self-reports as being Asian as defined by the Office of Management and Budget. SRASO was constructed by the CHIS data collection vendor, Westat.

SRCH Self-Reported Chinese

SRCH is a dichotomous indicator of whether or not a respondent self-reports as being Chinese. SRCH was constructed by the CHIS data collection vendor, Westat.

SRKR OMB Self-Reported Korean

SRKR is a dichotomous indicator of whether or not a respondent self-reports as being Korean as defined by the Office of Management and Budget. SRKR was constructed by the CHIS data collection vendor, Westat.

SRPH OMB Self-Reported Filipino

SRPH a dichotomous indicator of whether or not a respondent self-reports as being Filipino as defined by the Office of Management and Budget. SRPH was constructed by the CHIS data collection vendor, Westat.

SRVT**Self-Reported Vietnamese**

SRVT is a dichotomous indicator of whether or not a respondent self-reports as being Vietnamese. SRVT was constructed by the CHIS data collection vendor, Westat.

SRH**Self-Reported Latino/Hispanic**

SRH is a dichotomous indicator of whether or not a respondent self-reports as being Latino/Hispanic. SRH is constructed by the CHIS data collection vendor, Westat.

SRO**Self-Reported Other Race**

SRO is a dichotomous indicator of whether or not a respondent self-reports as being of a race other than White, Black/African American, Asian, American Indian/Alaska Native/Native American, Other Pacific Islander, or Native Hawaiian. SRO is constructed by the CHIS data collection vendor, Westat.

OMBSRASO**OMB S-R Non-Hispanic Asian Group (Only)**

The OMBSRASO variable is derived from the OMB self-reported race ethnicity variable (OMBSRREO) and the ASIAN10 variable specifying which Asian subgroup the adult identifies with.

1. If an adult is identified as a non-Hispanic Asian (OMBSRREO=5), then assignments of the OMBSRASO values are based on the following specific ASIAN10 values:

Condition:	OMBSRASO Value:	OMBSRASO Label:
If OMBSRREO=5 and ASIAN10=1	1	Non-Hispanic Chinese Only
If OMBSRREO=5 and ASIAN10=3	2	Non-Hispanic Korean Only
If OMBSRREO=5 and ASIAN10=4	3	Non-Hispanic Filipino Only
If OMBSRREO=5 and ASIAN10=6	4	Non-Hispanic Vietnamese Only
If OMBSRREO=2,3,4,6, or 7 and ASIAN10=-1	5	Non-Hispanic Other or Non-Asian

OMBSRREO**OMB Self-Reported Race Ethnicity**

OMBSRREO is a race/ethnicity variable that follows the Office of Management and Budget-revised guidelines (1997) and the Census modification of the OMB guidelines. OMB 1) separates race and ethnicity, and 2) recognizes five main racial categories: White; Black or African American; American Indian and Alaska Native; Asian and Native Hawaiian; and Other Pacific Islander. Assignment of adults who chose only “Some other race” followed procedures similar to those used by the Census Bureau. (Refer to Chapter 8 Methodology Series Report 5.)

The OMBSRREO variable is derived from RACEDOF variable and is assigned the following values:

Condition:	OMBSRREO Value:	OMBSRREO Label:
If RACEDOF=1	1	Hispanic
If RACEDOF=6	2	Non-Hispanic White
If RACEDOF=5	3	Non-Hispanic African-American
If RACEDOF=3	4	Non-Hispanic American Indian, Alaska Native
If RACEDOF=4	5	Non-Hispanic Asian
If RACEDOF=2	6	Non-Hispanic Native Hawaiian, Other Pacific Islander
If RACEDOF=8	7	Non-Hispanic More than one race

RACECEN

Race – Census 2000 Definition

The RACECEN variable uses the Census SF1 definition/tabulation of race. RACECEN is derived from the imputed Westat variables SRPI, SRAI, SRAS, SRAA, SRW, and SRO. Cases are assigned either to one of several single-race categories or to a multiple-race category.

1. The number of races reported for each case is counted using the race variables SRPI, SRAI, SRAS, SRAA, SRW, and SRO.
2. The cases with a single race reported are assigned RACECEN values:

Condition:	RACECEN Value:	RACECEN Label:
If only SRPI=1	1	Pacific Islander
If only SRAI=1	2	American Indian/Alaska Native
If only SRAS=1	3	Asian
If only SRAA=1	4	African American
If only SRW=1	5	White
If only SRO=1	6	Other single race

3. The cases with more than one race reported are assigned to the multiple-race category:

Condition:	RACECEN Value:	RACECEN Label:
If more than one of the following (SRPI, SRAI, SRAS, SRAA, SRW, SRO)=1	7	More than one race

RACEDOF

Race – Former Department of Finance Definition

The RACEDOF variable uses the former definition of race classification from the California Department of Finance's race categories. This variable is derived from the imputed Westat variables SRH, SRPI, SRAI, SRAS, SRAA, SRW and SRO. Latino is considered to be a race category for this variable and is given priority.

RACEDOF values are assigned in the following hierarchical manner:

1. The number of races reported for each case is counted using the race variables SRPI, SRAI, SRAS, SRAA, SRW, and SRO.
2. All cases that are reported to be Latino (if SRH=1) are assigned to the Latino category:

Condition:	RACEDOF Value:	RACEDOF Label:
If SRH=1	1	Latino

3. The remaining cases with a single race reported are assigned to one of several non-Latino categories:

Condition:	RACEDOF Value:	RACEDOF Label:
If only SRPI=1	2	Non-Latino Pacific Islander
If only SRAI=1	3	Non-Latino American Indian/Alaska Native
If only SRAS=1	4	Non-Latino Asian
If only SRAA=1	5	Non-Latino Afr. Amer.
If only SRW=1	6	Non-Latino White
If only SRO=1	7	Non-Latino Other, One Race

4. The remaining cases with more than one race reported are assigned to the non-Latino multiple-race category:

Condition:	RACEDOF Value:	RACEDOF Label:
If more than one of the following (SRPI, SRAI, SRAS, SRAA, SRW, SRO) =1	8	Non-Latino, Two + Races

Note: The non-Latino single race category (RACEDOF=7) is not included in the original population projection by the Department of Finance (DOF). Corrections for this category assignment will be made in the construction of future CHIS RACEDOF variables (2005 and beyond).

SRPI

Self-Reported PI and NTV HW

SRPI is a dichotomous indicator of whether or not a respondent self-reports as being Other Pacific Islander, Native American, or Native Hawaiian. SRPI was constructed by the CHIS data collection vendor, Westat.

RACEHPR2

Race – UCLA CHPR Definition, Unabridged

The purpose of the RACEHPR2 variable is to create a measure of race that takes into account which race/ethnicity the respondents most identify with. For the cases with multiple races reported, and no indication of which group the respondent most identifies with, a few other rules are used. RACEHPR2 is derived from the imputed Westat variables SRH, SRPI, SRAI, SRAS, SRAA, SRW, SRO, and questionnaire items AA5AOS, AA5F, AA5C, and AA5G. Latino is also considered to be a separate race category for this variable.

RACEHPR2 values are assigned in the following hierarchical manner:

A. Adjustments for non-Latino respondents:

- If a single race reported, then RACEHPR2 is assigned based on single race.
- If multiple races reported and:
 - Respondent identifies with one race in particular (AA5G), then RACEHPR2 is assigned based on AA5F.
 - Respondent does not identify with one race in particular, then RACEHPR2 is assigned in the multiple race category.

B. Adjustments for Latino Respondents:

- If single race reported and:
 - If Latino is imputed and race is not imputed, then RACEHPR2 is assigned based on single race.
 - If Latino is not imputed and race is imputed, then RACEHPR2 RACEHPR2 is assigned in the Latino category.
 - If Latino and race variables are not imputed and:
 - Respondent identifies with one race in particular (AA5G), then RACEHPR2 is assigned based on AA5F.
 - Respondent does not identify with one race in particular, then RACEHPR2 is assigned in the multiple race category.
 - Report single race as “other”, then use AA5AOS to assign RACEHPR2.
- If multiple races reported and:
 - If Latino is not imputed and race is imputed, then RACEHPR2 is assigned as Latino.
 - Others
 - Respondent identifies with one race in particular (AA5G), then RACEHPR2 is assigned based on AA5F.
 - Respondent does not identify with one race in particular, then RACEHPR2 is assigned in the multiple race category.

C. Adjustments for AIAN Respondents.

- If a respondent reported belonging to a California tribe (AA5G) or identifies most with “American Indian or Alaska Native” in AA5F, then RACEHPR2 is reassigned to the AIAN category.

SRW

Self-Reported White

SRW is a dichotomous indicator of whether or not a respondent self-reports as being White. SRW is constructed by the CHIS data collection vendor, Westat.

SRAA**Self-Reported African American**

SRAA is a dichotomous indicator of whether or not a respondent self-reports as being African American. SRAA is constructed by the CHIS data collection vendor, Westat.

SRAI**Self-Reported American Indian**

SRAI is a dichotomous indicator of whether or not a respondent self-reports as being American Indian. SRAI is constructed by the CHIS data collection vendor, Westat.

CATRIBE**California Tribal Heritage**

The California Tribal Heritage variable indicates whether or not the respondents who report themselves as being American Indian/Alaska Native (if SRAI=1) identify themselves with a California or a non-California tribal heritage. This variable is constructed using questionnaire items AA5B_1 – AA5B_11, SRAI, AA5BOS, and AA5DOS.

Since the questionnaire response categories in AA5B include only non-California tribes, it was important to construct CATRIBE in order to capture verbatim responses in AA5BOS or AA5DOS that may indicate California tribal heritage among the population of American Indians responding to the questionnaire.

Therefore, any American Indian/Alaska Native respondents (if SRAI=1) who report a California Tribe in AA5BOS or AA5DOS are considered to have California Tribal Heritage (CATRIBE=1). All remaining respondents who identify themselves with at least one of the non-California tribes in AA5B_1-11, or indicate a non-California tribe as a verbatim answer in AA5BOS, are considered to be of non-California Tribal Heritage (CATRIBE=2).

Respondents who do not indicate being of American Indian/Alaska Native heritage are assigned a skip value, CATRIBE= (-1). All other respondents whose tribe cannot be ascertained are assigned a value (-9) for this variable.

Note: This variable indicates reported tribal heritage. The cases included in this variable all reported themselves as American Indian/Alaska Natives (if SRAI=1), but may or may not be enrolled members of a federal or state recognized tribe (please see the AA5C variable for this information).

ASIAN8**Asian Subtypes - 8 (PUF Recode)**

The ASIAN8 variable is derived from ASIAN10 variable, which utilizes questionnaire items AA5A_4 and AA5E_1 through AA5E_23 (19-23 are re-classified categories). The purpose of this variable is to provide a re-categorization representing the specific Asian subgroups for those who report that they are Asian (if AA5A_4=1).

A. First, the number of Asian ethnic groups reported for each case is counted using ASIAN10_1 through ASIAN10_10

B. The cases with adults who report only one Asian ethnic group are assigned ASIAN8 values.

1. The adults who report only one ethnic group in ASIAN10 are assigned the following values for the ASIAN8 variable:

Condition:	ASIAN8 Value:	ASIAN8 Label:
If ASIAN10=1	1	Chinese
If ASIAN10=2	2	Japanese
If ASIAN10=3	3	Korean
If ASIAN10=4	4	Filipino
If ASIAN10=5	5	South Asian
If ASIAN10=6	6	Vietnamese
If ASIAN10=7 or 8	7	Southeast Asian
If ASIAN10= 9 or 10	8	Other Asian/2+ Asian Types

- The adults who only report one Asian ethnic group, and are not yet assigned an ASIAN8 value, are imputed to assign an ASIAN8 value.
- Adults that are identified as not belonging to an ASIAN ethnic or race group are assigned the value of ASIAN8=(-1).

ASNHP2_P

Asian Group – UCLA CHPR Definition (PUF Recode), Unbridged

The ASNHP2_P variable representing the most-identified-with Asian ethnicity is a recoded version of ASNHP2 for the public use file. It collapses adult reports of Cambodian ethnicity and other single/multiple Asian ethnic group, to make it less identifiable.

A. The number of Asian ethnic groups reported for each case is counted using the ASIANHPR variable.

- The adults who report belonging to an ethnic group in ASNHP2 are assigned the following values for the ASNHP2_P variable:

Condition:	ASNHP2_P Value:	ASNHP2_P Label:
If ASNHP2=2	1	Chinese
If ASNHP2=3	2	Filipino
If ASNHP2=4	3	South Asian
If ASNHP2=5	4	Japanese
If ASNHP2=6	5	Korean
If ASNHP2=7	6	Vietnamese

If ASNHP2=1 or 8	7	Cambodian/Single or multiple Asian
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2. Adults who are not of Asian race/ethnicity, ASNHP2= (-1), are assigned a value of ASNHPR2_P= (-1).

MARIT

Marital Status

The marital status variable is constructed with questionnaire item AH43.

MARIT is constructed by combining values in AH43 in order to create consolidated categories.

The values for the marital status variable, MARIT, are assigned in the following manner:

Condition:	MARIT Value:	MARIT Label:
If AH43=1	1	Married
If AH43=2 (living with partner) or 3 (widowed) or 4 (divorced) or 5 (separated)	2	Other/Widowed/Separated/Divorced/Living with Partner
If AH43=6	3	Never married

MARIT_45

Marital Status – Age 45 years and Older

The Marit_45 variable provides marital status for adults age 45 years and older, and follows the same logic as MARIT2 but provides a separate category for respondents (45 yrs +) who are widowed.

The values for the marital status variable, MARIT_45, are assigned in the following manner:

Condition:	MARIT_45 value:	MARIT_45 label:
If AH43 = 1 (married)	1	Married
If AH43 = 2 (living with partner)	2	Living with partner
If AH43 = 3 (widowed)	3	Widowed
If AH43 = 4 (divorced) or 5 (separated)	4	Separated/Divorced
If AH43 = 6 (never married)	5	Never married

MARIT2

Marital Status – 4 Categories

The marital status variable is constructed with questionnaire item AH43.

MARIT is constructed by combining values in AH43 in order to create consolidated categories. The purpose of MARIT2 is to separate those who are living with their partner from those who are widowed, separated, or divorced.

The values for the marital status variable, MARIT2, are assigned in the following manner:

Condition:	MARIT2 value:	MARIT2 label:
If AH43 = 1 (married)	1	Married
If AH43 = 2 (living with partner)	2	Living with partner

partner)		
If AH43 = 3 (widowed) or 4 (divorced) or 5 (separated)	3	Widowed/Separated/Divorced
If AH43 = 6 (never married)	4	Never married

LATIN9TP

Latino/Hispanic Subtypes – 9 Levels

The purpose of this variable is to provide a 9-level measurement of which group(s) the respondents identify with of those who report that they are of Latino/Hispanic origin (if SRH=1). This variable is derived from items, SRH and AA5_1 through AA5_21 (14-21 are upcoded categories).

A. First, the numbers of Latino/Hispanic ancestries reported for each case are counted using items AA5_1 through AA_21.

B. The cases with respondents who report only one Latino/Hispanic ancestry are assigned values for the temporary variable LATINTEMP.

1. The respondents who report that they belong to a single Latino/Hispanic ancestry are assigned the following LATINTEMP values:

Condition:	LATINTEMP Value:	LATINTEMP Label:
If AA5_1=1 (Mexican/Mexicano) or AA5_2=1 (Mexican American) or AA5_3=1 (Chicano) or	1	Mexican
If AA5_4=1 (Salvadoran)	2	Salvadoran
If AA5_5=1 (Guatemalan)	3	Guatemalan
If AA5_6=1 (Costa Rican) or AA5_7=1 (Honduran) or AA5_8=1 (Nicaraguan) or AA5_9=1 (Panamanian) or	4	Central American
If AA5_10=1 (Puerto Rican)	5	Puerto Rican
If AA5_11=1 (Cuban)	6	Cuban
If AA5_12=1 (Spanish American) or AA5_17=1 (Portuguese) or AA5_20=1 (Other European Origin)	7	Latino European
If AA5_14=1 (Colombian) or AA5_15=1 (Argentinean) AA5_16=1 (Peruvian) AA5_19=1 (Other South American Origin)	8	South American
If AA5_18=1 (Other Caribbean Origin) or AA5_21=1 (Other Latino/Hispanic)	9	Other Latino

C. The cases with more than one ancestry reported are assigned LATINTEMP values.

1. The cases with more than one ancestry reported are all assigned to the “two or more Latino types” category:

Condition:	LATINTEMP Value:	LATINTEMP Label:
More than one Latino/Hispanic Ancestry	10	Two or more Latino types

D. The respondents who report that they are not of Latino or Hispanic origin (if SRH=2) are assigned a skip value (-1) for this variable.

E. Finally, all of the cases are assigned values for the LATIN9TP variable using the categories generated with LATINTEMP.

Each case is tested through the following conditions until a LATIN9TP is assigned:

Condition:	LATIN9TP Value:	LATIN9TP Label:
If LATINTEMP=1 (Mexican)	1	Mexican
If LATINTEMP=2 (Salvadoran)	2	Salvadoran
If LATINTEMP=3 (Guatemalan)	3	Guatemalan
If LATINTEMP=4 (Central American)	4	Central American
If LATINTEMP=5 (Puerto Rican)	5	Puerto Rican
If LATINTEMP=7 (Latino European)	6	Latino European
If LATINTEMP=8 (South American)	7	South American
If LATINTEMP=6 (Cuban)	8	Other Latino
If LATINTEMP=9 (Other Latino)		
If LATINTEMP=10	9	Two or more Latino types
If LATINTEMP=-1	-1	Non-Latino

F. If LATIN9TP cannot be determined, and AA5 is missing, then country of birth is used (AH33) to assign Latino ethnic group in LATIN9TP.

GENERAL HEALTH

ASTCUR

Current Asthma

The ASTCUR variable is derived from questionnaire items AB40 and AB41 and is based on the diagnosis of asthma by a doctor (AB17). ASTCUR is a dichotomous variable that indicates whether or not the adult respondent currently has asthma. Of those who were diagnosed with asthma by a doctor (AB17=1), those who still have asthma (AB40=1) or have had an asthma attack or episode in the past 12 months (AB41=1) are considered to currently have asthma (ASTCUR=1). Of those who were diagnosed with asthma by a doctor (AB17=1), but do not still have asthma (AB40=2) or have not suffered from an asthma attack in the past 12 months (AB41=2) are not considered to currently have asthma (ASTCUR=2). Finally, those who were never diagnosed with asthma by a doctor (AB17=2) are not considered to currently have asthma (ASTCUR=2).

Cases in which asthma status cannot be ascertained are imputed to assign a value of ASTCUR.

ASTS**Asthma Symptoms Past 12 Mos Population Diagnosed w/ Asthma**

The ASTS variable is derived from questionnaire items AB19 and AB66. This variable provides a measure of the presence of asthma symptoms in the past year for those who have been diagnosed with asthma. Cases are assigned values based on the following conditions:

Condition:	ASTS Value:	ASTS Label:
If AB19 = 2, 3, 4 or 5 or AB66 in 2, 3, 4 or 5	1	Symptoms
If AB19=1 or AB66=1	2	No symptoms

Respondents are assigned a skip value (ASTS=-1) if they were never diagnosed with asthma (AB19=-1 and AB66=-1)

ASTYR**Asthma Symptoms Past 12 Months**

This variable is derived from questionnaire item AB19, which measures the frequency of asthma symptoms in the past 12 months. ASTYR is a dichotomous variable that determines whether or not the adult respondent has had any asthma symptoms in the past 12 months. Adults who have not had any asthma symptoms in the past 12 months (AB19=1) are assigned a value of ASTYR=2. Adults who report having asthma symptoms daily (AB19=5), weekly (AB19=4), monthly (AB19=3) or less than monthly (AB19=2) are assigned a value of ASTYR=1.

Those who have never been diagnosed with asthma (AB17=2) are assigned a value of ASTYR= (-1).

Cases in which frequency of asthma symptoms cannot be determined are imputed to assign a value

AB106_P**Visited ER/URGT Care for Asthma Because Unable to See Own Doctor**

AB106_P is a recoded version of AB106, which identifies adult respondents with current asthma who visited the ER due to their condition and because they were unable to see their primary care doctor in the past 12 months. The variable also identifies those who do not have a personal health care provider. The construction of AB106_P from AB106 follows the same rules as AB110_P and AB116_P, whereby responses indicating, "Doesn't Have a Doctor" are categorized under AB106 =1 for AB106_P.

AB110_P**Visited ER for Diabetes Because Unable to See Own Doctor**

AB110_P is a recoded version of AB110, which identifies adult respondents with diabetes who have visited the ER due to their condition and because they were unable to see their primary care doctor in the past 12 months. The variable also identifies those who do not have a personal health care provider. The construction of AB110_P from AB110 follows the same rule as AB116_P, whereby responses indicating "doesn't have a doctor" are categorized under AB110 =1 for AB110_P.

AB116_P**Visited ER for Heart Disease Because Unable to See Own Doctor**

The AB116_P is a PUF recode of AB116, which identifies adult respondents with heart disease who have visited the ER due to their condition and because they were unable to see their primary care doctor in the past 12 months. The variable also identifies those who do not have a personal health care provider. In

the PUF version of AJ116, adult respondents who do not have a personal doctor are regrouped with those who answered YES to AB116. Therefore, responses indicating “doesn’t have a doctor” are categorized under AB116 =1 for AB116_P.

AB23_P

Age First Told Have Diabetes (PUF Recode)

AB23_P is a top coded version of questionnaire item AB23.

Note: Top code is 85.

DIABCK

Number of Times Check Glucose/Sugar per Month

The DIABCK variable is constructed from questionnaire item AB26UNT. The purpose of this continuous variable is to describe how frequently the respondent checks her or his blood for glucose or sugar in times per month.

DIAMED

Taking Insulin or Pills

The DIAMED variable is derived from questionnaire items AB24 and AB25. This variable categorizes the use of insulin and medication by adults who have been told they have diabetes (AB22=1). Values are assigned based on the following criteria:

Condition:	DIAMED Value:	DIAMED Label:
If AB24=1 and AB25=1	1	Taking insulin and pills
If AB24=1 and AB25=2	2	Taking insulin only
If AB24=2 and AB25=1	3	Taking pills only
If AB24=2 and AB25=2	4	Not taking insulin or pills

Those who have never been told they have diabetes by a doctor (AB22=2) were assigned a value of DIAMED= (-1).

Finally, cases in which the use of insulin could not be ascertained are imputed to assign a value of DIAMED.

HGHTI_P

Height – Inches (PUF Recode)

The HGHTI_P variable is a recoded version of the HGHTI variable.

Top code: 77 inches. Bottom Code: 42.

HGHTM_P

Height – Meters (PUF Recode)

The HGHTM_P variable is a recoded version of the HGHTM variable.

Top code: 2 meters.

Bottom code: 1 meter.

HEIGHM_P **Height – Meters (UCLA) (PUF Recode)**

The HEIGHM_P variable is a recoded version of the HEIGHTM variable using the UCLA definition of conversion. It uses the top and bottom code of HEIGHTM.

Bottom code: 1 meter. Top code: 2 meters.

WEIGHK_P **Weight – Kilograms (UCLA) (PUF Recode)**

The WEIGHK_P variable is a recoded version of the WEIGHTKG variable using the UCLA definition of conversion. It uses the top code of WEIGHTKG.

Top code: 150 kilos.

WGHTK_P **Weight – Kilograms (PUF Recode)**

The WGHTK_P variable is a recoded version of the WGHTK variable.

Top code: 150 kilos.
Bottom code: 41 kilos.

WGHTP_P **Weight – Pounds (PUF Recode)**

The WGHTP_P variable is a recoded version of the WGHTP variable.

Top code: 330 lbs.
Bottom code: 90 lbs.

WT18K_P **Weight at Age 18 – Kilograms (PUF Recode)**

The WT18K_P variable is a recoded version of the WT18K variable.

Top code: 150 kilos.
Bottom code: 41 lbs.

WT18P_P **Weight at Age 18 – Pounds (PUF Recode)**

The WT18P_P variable is a recoded version of WT18P.

Top Code: 330 lbs.
Bottom code: 90 lbs.

BMI_P**Body Mass Index for Adults (PUF Recode)**

The BMI_P variable is continuous and is a recoded version of BMI. BMI_P is calculated with the PUF variables that represent weight (WEIGHK_P - top coded) and height (HEIGHM_P - bottom coded). If no top or bottom code is assigned for weight or height, BMI=BMI_P.

Top code: 12

Bottom code: 99

RBMI**BMI Descriptive**

The RBMI variable is constructed based on BMI values. This variable categorizes BMI into 4 weight range groups. Values are assigned based on the following criteria:

Condition:	RBMI value:	RBMI label:
If $0 \leq \text{BMI} \leq 18.49$	1	Underweight
If $\text{BMI} > 18.49$ and $\text{BMI} \leq 24.99$	2	Normal
If $\text{BMI} > 24.99$ and $\text{BMI} \leq 29.99$	3	Overweight
If $\text{BMI} > 29.99$	4	Obese

Cases in which BMI cannot be determined are imputed to assign an RBMI value.

OVRWT**Overweight or Obese**

The OVRWT variable is constructed based on RBMI criteria. This variable is dichotomous and determines whether the adult respondent is considered to be physically overweight or obese. A value is assigned for the final constructed variable, OVRWT, based on RBMI that determines whether the adult is overweight or obese.

Condition:	OVRWT Value:	OVRWT Label:
If $\text{RBMI} = 3$ or 4	1	Yes
If $\text{RBMI} = 1$ or 2	2	No

Cases in which RBMI cannot be determined are imputed to assign an OVRWT value.

DISABLE**Disability Status Due to Physical/Mental/Emotional Condition**

The DISABLE variable is a dichotomous indicator of whether or not the respondent is disabled based on self-reports of a disability due to a physical, mental or emotional condition. DISABLE is constructed using questionnaire items AD50, AD51, AD52, AB53, AD54, and AD57. Cases are assigned values based on the following conditions:

Condition:	DISABLE Value:	DISABLE Label:
If AD50=1 (blind or deaf, or have a severe vision or hearing problem) OR If AD51=1 (difficulty learning,	1	DISABLED

remembering, or concentrating) OR If AD52=1 (difficulty dressing, bathing, or getting around the house) OR If AD53=1 (difficulty going outside the home alone to shop or visit a doctor's office) OR If AD54=1 (difficulty working at a job or business) OR If AD57=1 (condition that substantially limits one or more basic activities such as walking, climbing stairs, reaching, lifting, or carrying)		
All other values	2	NOT DISABLED

Adult cases age 65 years and older were excluded from having a disabling condition due to difficulties at a job or business (AD54).

HEALTH BEHAVIORS

AE_FRIES

Number of times ate fries per week

The variable AE_FRIES is constructed with variable AE3 and AE3UNT. The purpose of AE_FRIES is to convert all units into number of times per week.

AE_FRUIT

Number of times eating fruit per week

The variable AE_FRUIT is constructed with variable AE2 and AE2UNT. The purpose of AE_FRUIT is to convert all units into number of times per week.

AE_SODA

Number of times drank soda per week

The variable AE_SODA is constructed with variable AC11 and AC11UNT. The purpose of AE_SODA is to convert all units into number of times per week.

AE_VEGI

Number of times ate vegetables per week

The variable AE_VEGI is constructed with variable AE7 and AE7UNT. The purpose of AE_VEGI is to convert all units into number of times per week.

SMKCUR**Current Smoker**

The SMKCUR variable was derived from questionnaire items AE15 and AE15A. If the adult indicated smoking every day (AE15A=1) or some of the days (AE15A=2) then the respondent was considered to be a current smoker (SMKCUR=1). If the respondent indicated never smoking more than 100 cigarettes in one's lifetime (AE15=2) or not smoking cigarettes daily (AE15A=3) then he or she was considered to be a non-smoker (SMKCUR=2).

SMOKING**Current Smoking Habits**

The SMOKING variable is constructed from questionnaire items AE15 and AE15A. This variable categorizes the smoking habits of the adult respondent. If an adult indicates smoking 100 or more cigarettes in his/her lifetime (AE15=1) and smokes every day (AE15A=1) or some of the days (AE15A=2) then SMOKING=1. If the adult respondent indicates smoking 100 or more cigarettes in his/her lifetime and currently does not smoke at all then SMOKING=2. If an adult respondent has never smoked 100 or more cigarettes in his/her lifetime (AE15=2), then SMOKING=3.

Cases in which current smoking status cannot be determined are imputed to assign a value to SMOKING.

NUMCIG**Number of Cigarettes Per Day**

The constructed NUMCIG variable is derived from questionnaire items AE15, AE15A, AE16 and AD32. This variable categorizes the number of cigarettes smoked per day by adults who smoke every day (AE15A=1) and adults who smoke some days (AE15A=2). Values are assigned according to the following criteria.

Condition:	NUMCIG Value:	NUMCIG Label:
If AE15=2 or AE15A=3	1	None
(If AD32=0 or 1) or (AE16=0 or 1)	2	<=1 cigarette
(If AD32>=2 and AD32<=5) or (AE16>=2 and AE16<=5)	3	2–5 cigarettes
(If AD32>=6 and AD32<=10) or (AE16>=6 and AE16<=10)	4	6–10 cigarettes
(If AD32>=11 and AD32<=19) or (AE16>=11 and AE16<=19)	5	11–19 cigarettes
If AD32>=20 or AE16>=20	6	20 + cigarettes

Cases in which number of cigarettes cannot be determined are imputed to assign a value to NUMCIG.

HHSMK**Household Smoking**

The constructed HHSMK variable provides categorical measures of the amount of smoking within the respondent's household. This variable is derived from questionnaire items AC17 and AD34, which measure whether or not smoking is allowed in the respondent's household (AC17=1) in addition to the number of days there is any smoking within the household (AD34 – continuous). Respondents who report that smoking is not allowed inside their home are assigned a value of HHSMK=1. Those indicating smoke some days within the household are assigned a value of HHSMK=2. Finally, those reporting the presence of smoking within the household every day are assigned a value of HHSMK=3. Values are assigned as follows:

Condition:	HHS MK Value:	HHS MK Label:
If AC17=2	1	None
If AC17=1 and (AD34>=1 and AD34<7)	2	Some days
If AC17=1 and AD34=7	3	Every day

BINGE12

Binge Drinking in Past Year. 5+ Drinks (Male), 4+ Drinks (Female)

The BINGE12 variable measures how often the respondents have engaged in binge drinking within the past year. For males, the criteria for binge drinking are 5 and more drinks in a row on one occasion, and 4 or more drinks in a row on one occasion for females. This variable is constructed with questionnaire items AC34, AC35, and AC32. Values are assigned according to the following criteria:

Condition:	BINGE12 Value:	BINGE12 Label:
If AC34=0 or AC35=0 or AC32=2	1	No binge drinking
If AC34=1 or AC35=1	2	Once a year
If 2<=AC34<=9 or 2<=AC35<=9	3	Less than monthly, more than once a year
If 10<=AC34<=12 or 10<=AC35<=12	4	Monthly
If 12<AC34<=49 or 12<AC35<=49	5	Less than weekly but more than monthly
If AC34>=50 or AC35>=50	6	Daily or weekly

AC42_P

How Often Find Fresh Fruit/ Veg. in Neighborhood

The AC42_P variable is a recoded version of AC42. This variable provides a likert measure of how often the respondent is able to find fresh fruits and vegetables in his/her neighborhood (always, usually, sometimes, never). Cases were collapsed into one single category if no fruits/vegetables are consumed, the respondent does not shop for fresh fruits/ vegetables or the respondent does not shop for fresh fruits/vegetables in his/her neighborhood (AC42_P=5).

WOMEN'S HEALTH

AD22_P

of Breast Operations to Remove Non-cancer (PUF Recode)

The variable AD22_P is a recoded version of questionnaire item AD22 for the number of breast operations the respondent had to remove non-cancer lumps. AD22_P is a top coded version of questionnaire item AD22.

Note: Top code is 4.

MAM_SCRN**Had Mammogram in Past 2 Years**

The MAM_SCRN variable is derived from questionnaire items AD14 and AD17. This variable provides a categorical measure of time since the respondent's last mammogram for females age 30 years and older. Values are assigned based on the following criteria:

Condition:	MAM_SCRN Value:	MAM_SCRN Label:
If AD17=1 or 2	1	Within past 2 years
If AD17=3, 4 or 5	2	More than 2 years ago
If AD14=2	3	Never

Male respondents are assigned a skip value of MAM_SCRN= (-1).

Cases in which mammogram screening among women cannot be determined are imputed to assign a value to MAM_SCRN.

MENTAL HEALTH**DISTRESS****Serious Psychological Distress Past Month**

The DISTRESS variable is a continuous measure of generalized psychological distress during the past month using the Kessler 6-Item Psychological Distress Scale (K6). It is created with questionnaire items AJ29, AJ30, AJ31, AJ32, AJ33, and AJ34. Items are reverse coded so that cases with a greater frequency of symptoms receive higher scores. Scores are assigned based on the following criteria:

Value (AJ29- AJ34)	Assigned score
1 (all of the time)	4
2 (most of the time)	3
3 (some of the time)	2
4 (a little of the time)	1
5 (not at all)	0

The DISTRESS value is the total of the assigned scores for items AJ29 to AJ34. The maximum value is 24 and the minimum is 0.

DSTRS12**Likely Has Psychological Distress Past Year**

The DSTRS12 variable indicates if the respondent likely has psychological distress during the past year, based on the value of DSTRSYR. The assignment of value follows this manner:

Condition:	DSTRS12 Value:	DSTRS12 Label:
If DSTRSYR>=13	1	Yes
If 0<=DSTRSYR<13	2	No

DSTRS30**Likely Has Psychological Distress Past Month**

The DSTRS30 variable indicates if the respondent likely has psychological distress during the past month, based on the value of DISTRESS. The assignment of value follows this manner:

Condition:	DSTRS30 Value:	DSTRS30 Label:
If DISTRESS $\geq$ 13	1	Yes
If 0 $\leq$ DISTRESS $<$ 13	2	No

DSTRSYR**Serious Psychological Distress for Worst Month in Past Year**

The DSTRSYR variable measures psychological distress for worst month in past year using responses from two sets of questionnaire items, AJ29-AJ34, and AF63-AF68.

A temporary reverse value of each questionnaire item is first assigned in the following manner:

Condition: (same applies to AJ30-AJ34, AF63-AF68)	AJ29temp Value:
If AJ29=5	0
If AJ29=4	1
If AJ29=3	2
If AJ29=2	3
If AJ29=1	4

The sum of the temporary variables AJ29temp-AJ34temp is compared with that of the temporary variables AF63temp-AF68temp. The higher value will be assigned as DSTRSYR.

CHORES2**Chore Impairment Past 12 Months**

CHORES2 is similar to CHORES from previous CHIS cycles, but is not trendable with CHORES due to changes in the input variable, AF70B. Similar to CHORES, CHORES2 identifies whether a respondent has had any impairment completing chores in the past year due to his/her emotions. The variable assigns reverse scores using AF70B so that higher scores reflect greater impairment. Scores are assigned based on the following criteria:

Condition:	CHORES2 Value:	CHORES2 Label:
AF70=3	0	None
AF70=2	1	Moderate
AF70=1	2	Severe

IMPAIR2**Functional Role Impairment Due to Emotions Past 12 Months**

IMPAIR2 is similar to IMPAIR from previous CHIS cycles, but is not trendable with IMPAIR due to changes in the input variables AF69B – AF72B. Similar to IMPAIR, IMPAIR2 is a composite measure based on the mean score of functional role impairment due to emotions, using constructed variables, CHORES2, SOCIAL2, FAMILY2 and WORK2 (for respondents who are not working, the variable WORK2

would be excluded in the composite). A higher score indicates more severe functional role impairment due to by emotional stress.

SOCIAL2

Social Life Impairment Past 12 Months

SOCIAL2 is similar to SOCIAL from previous CHIS cycles, but it is not trendable with SOCIAL due to changes in the input variable, AF71B. Similar to SOCIAL, SOCIAL2 identifies whether a respondent has had any social impairment in the past year due to his/her emotions. The variable assigns reverse scores using AF71B so that higher scores reflect greater impairment. Scores are assigned based on the following criteria:

Condition:	SOCIAL2Value:	SOCIAL2 Label:
AF71=3	0	None
AF71=2	1	Moderate
AF71=1	2	Severe

WORK2

Work Impairment Past 12 Months

WORK2 is similar to WORK from previous CHIS cycles, but is not trendable with WORK due to changes in the input variable, AF69B. Similar to WORK, WORK2 identifies whether a respondent has had any work impairment in the past year due to his/her emotions. The variable assigns reverse codes scores using AF69B so that higher scores reflect greater impairment. Scores are assigned based on the following criteria:

Condition:	WORK2 Value:	WORK2 Label:
AF69=3	0	None
AF69=2	1	Moderate
AF69=1	2	Severe
AF69=4 (does not work)	-1	Not applicable

Respondents who are older than 70 years of age were skipped and are assigned the value, WORK= (-1).

FAMILY2

Family Life Impairment Past 12 Months

FAMILY2 is similar to FAMILY from previous CHIS cycles, but is not trendable with FAMILY due to changes in the input variable, AF72B. Similar to FAMILY, FAMILY2 identifies whether a respondent has had any impairment in family life within the past year due to his/her emotions. The variable assigns reverse scores based on AF72B, so that higher scores reflect greater impairment. Scores are assigned based on the following criteria:

Condition:	FAMILY2 Value:	FAMILY2 Label:
AF72B=3	0	None
AF72B=2	1	Moderate
AF72B=1	2	Severe

ADDITIONAL DEMOGRAPHIC INFORMATION

AH33NEW

Born in U.S.

The AH33NEW variable is derived from source variable AH33. It dichotomizes AH33 responses into two categories indicating whether or not the respondent was born in the United States or one of its territories. Respondents who were born in U.S. or one of its territories (i.e. American Samoa, Guam, Puerto Rico, and the Virgin Islands) are coded as having been born in the U.S. (AH33NEW=1). All other responses are coded as having been born outside the U.S. (AH33NEW=2).

AH34NEW

Mother Born In U.S.

The AH34NEW variable is derived from source variable AH34. It dichotomizes AH34 responses into two categories indicating whether or not the respondent's mother was born in the United States or one of its territories. Respondents whose mother was born in U.S. or one of its territories (i.e. American Samoa, Guam, Puerto Rico, and the Virgin Islands) are coded as having been born in the U.S. (AH34NEW=1). All other responses are coded as having been born outside the U.S. (AH34NEW=2).

AH35NEW

Father Born In U.S.

The AH35NEW variable is derived from source variable AH35. It dichotomizes AH35 categories into two categories indicating whether or not the respondent's father was born in the United States or one of its territories. Respondents whose father was born in U.S. or one of its territories (i.e. American Samoa, Guam, Puerto Rico, and the Virgin Islands) are coded as having been born in the U.S. (AH35NEW=1). All other responses are coded as having been born outside the U.S. (AH35NEW=2).

CNTRYF

Country Father Born In

CNTRYF is constructed with questionnaire items AH35 and AH35OS. CNTRYF is constructed by re-classifying the verbatim responses in questionnaire item AH35OS into AH35 and creating more general categories. The CNTRYF variable re-categorizes the father's country of birth (AH35) into more general geographic regions.

Each case is tested through the following conditions until a CNTRYF value is assigned:

Condition:	CNTRYF Value:	CNTRYF Value:
If AH35=1 (United States), 2 (American Samoa), 9 (Guam), 22 (Puerto Rico), 26 (Virgin Islands)	1	United States
If AH35=18 (Mexico)	2	Mexico
If AH35=5 (El Salvador), 10 (Guatemala), 27 (Other Central America)	3	Central America
If AH35=28 (Other South America), 32 (Caribbean)	4	Other Latin America

If AH35=4 (China), 12 (India), 13 (Iran), 16 (Japan), 17 (Korea), 19 (Philippines), 23 (Russia), 24 (Taiwan), 25 (Vietnam), 29 (Other Asian or Pacific Island), 33 (Middle East)	5	Asia and Pacific Islands
If AH35=6 (England), 7 (France), 8 (Germany), 11 (Hungary), 14 (Ireland), 15 (Italy), 20 (Poland), 21 (Portugal), 30 (Other Europe)	6	Europe
If AH35=3 (Canada), 31 (Africa), 34 (Other)	7	Other

Cases in which a father's country of birth could not be ascertained were imputed to assign a value to CNTRYM.

Note: See Appendix A for detailed information on the definitions.

CNTRYM Country Mother Born In

CNTRYM is constructed with questionnaire items AH34 and AH34OS. CNTRYM is constructed by re-classifying the verbatim responses in AH34OS into AH34 and creating more general categories. The CNTRYM variable re-categorizes the mother's country of birth (AH34) into more general geographic regions.

Each case is tested through the following conditions until a CNTRYM value is assigned:

Condition:	CNTRYM Value:	CNTRYM Value:
If AH34=1 (United States), 2 (America Samoa), 9 (Guam), 22 (Puerto Rico), 26 (Virgin Islands)	1	United States
If AH34=18 (Mexico)	2	Mexico
If AH34=5 (El Salvador), 10 (Guatemala), 27 (Other Central America)	3	Central America
If AH34=28 (Other South America), 32 (Caribbean)	4	Other Latin America
If AH34=4 (China), 12 (India), 13 (Iran), 16 (Japan), 17 (Korea), 19 (Philippines), 23 (Russia), 24 (Taiwan), 25 (Vietnam), 29 (Other Asian or Pacific Island), 33 (Middle East)	5	Asia and Pacific Islands
If AH34=6 (England), 7 (France), 8 (Germany), 11 (Hungary), 14	6	Europe

(Ireland), 15 (Italy), 20 (Poland), 21 (Portugal), 30 (Other Europe)		
If AH34=3 (Canada), 31 (Africa), 34 (Other)	7	Other

Cases in which a mother's country of birth could not be ascertained were imputed to assign a value to CNTRYM.

Note: See Appendix A for detailed information on the definitions.

CNTRY5

Country Born In

CNTRY5 is constructed with questionnaire items AH33 and AH33OS. CNTRY5 is constructed by re-classifying the verbatim responses in AH33OS into AH33 and creating more general categories that identify the adult respondent's geographic place of birth. Values are assigned based on the following criteria:

Condition:	CNTRY5 Value:	CNTRY5 Label:
AH33=1 (United States), 2 (America Samoa), 9 (Guam), 22 (Puerto Rico)	1	United States
AH33=18 (Mexico)	2	Mexico
AH33=5 (El Salvador), 10 (Guatemala), or 27 (Other Central America)	3	Central America
AH33=28 (Other South America), 32 (Caribbean)	4	Other Latin America
AH33=4 (China), 12 (India), 13 (Iran), 16 (Japan), 17 (Korea), 19 (Philippines), 23 (Russia), 24 (Taiwan), 25 (Vietnam), 29 (Other Asian or Pacific Island), or 33 (Middle East)	5	Asia and Pacific Islands
AH33=6 (England), 7 (France), 8 (Germany), 11 (Hungary), 14 (Ireland), 15 (Italy), 20 (Poland), 21 (Portugal), or 30 (Other Europe)	6	Europe
AH33=3 (Canada), 31 (Africa), or 34 (Other)	7	Other

Note: See Appendix A for detailed information on the definitions.

LANGHOME

Types of Languages Spoken at Home

The LANGHOME variable indicates the languages spoken in the homes of the respondents. This variable is derived from questionnaire items AH36_1 - AH36_22. The variable takes into account households in which multiple languages are spoken. The LANGHOME variable is created with the categories generated with the LANGTEMP construct variable.

1. First, values are assigned to a LANGTEMP variable based on criteria from questionnaire items AH36_1 – AH36_22.

Condition:	LANGTEMP value:	LANGTEMP label:
If AH36_1=1	1	English
If AH36_2=1	2	Spanish
If AH36_3=1 or AH36_6=1	3	Chinese
If AH36_4=1	4	Vietnamese
If AH36_5=1	5	Tagalog
If AH36_7=1	6	Korean
If AH36_8=1	7	Asian Indian Languages
If AH36_9=1	8	Russian
If AH36_12=1	9	Japanese
If AH36_13=1	10	Other Asian Language
If AH36_14=1 or AH36_15=1 or AH36_16=1	11	European
If AH36_18=1	12	Farsi
If AH36_19=1	13	Armenian
If AH36_20=1	14	Arabic
If AH36_21=1	15	African/Afro-Asiatic
If AH36_22=1	16	Other language

2. For cases in which respondents speak two or more languages, values for LANGTEMP were assigned based on the following criteria:

If AH36_1=1 and AH36_2=1	17	English and Spanish
If AH36_1=1 and (AH36_3=1 or AH36_6=1)	18	English and Chinese
If AH36_1=1 and (AH36_9=1 or AH36_14=1 OR AH36_15=1 OR AH36_16=1 or AH36_17=1)	19	English and European language
If AH36_1=1 and (AH36_4=1 OR AH36_5=1 or AH36_7=1 OR AH36_8=1 or AH36_13=1)	20	English and another Asian Language
If sum of AH36_1-22=2 and AH36_1=1	21	English and one other language
If sum AH36_1-22>=2	22	Other two or more languages/ three or more languages

3. Next, each case is tested through the following steps until a LANGHOME value can be assigned:

Condition:	LANGHOME Value:	LANGHOME Label:
If LANGTEMP=1	1	English

If LANGTEMP=2	2	Spanish
If LANGTEMP=3	3	Chinese
If LANGTEMP=4	4	Vietnamese
If LANGTEMP=6	5	Korean
If LANGTEMP= Tagalog (5) Asian Indian Languages (7) Japanese (9) Other Asian language (10)	6	Other one Asian language
If LANGTEMP= Russian (8) European (11) Farsi (12) Armenian (13) Arabic (14) African/Afro-Asiatic (15) Other language (16)	7	Other one language only
If LANGTEMP=17	8	English and Spanish
If LANGTEMP=18	9	English and Chinese
If LANGTEMP=19	10	English and a European language
If LANGTEMP=20	11	English and another Asian language
If LANGTEMP=21	12	English and one other language
If LANGTEMP=22	13	Other two or more languages

SPK_ENG

English Use and Proficiency

The SPK_ENG variable is derived from questionnaire items AH36 and AH37. This variable measures the strength and use of the English language by the adult respondent. Adults who indicate speaking only English (AH36_1=1) were assigned a value of SPK_ENG=1. Of those who speak another language, those who indicate speaking English very well (AH37=1) or well (AH37=2) were assigned a value of SPK_ENG=2. Of those who speak another language, those who indicate speaking English not well (AH37=3) or not at all (AH37=4) were assigned a value of SPK_ENG=3.

Cases for which the use of English cannot be determined are imputed to assign a value to SPK_ENG.

CITIZEN2

Citizenship Status for Adults

The CITIZEN2 variable collapses green card status and is created in order to provide another indication of citizenship. This variable also reflects a definition from UCLA's Center for Health Policy Research. CITIZEN2 is derived from questionnaire items AH33, AH39 and AH40.

Each case is tested through the following conditions until a CITIZEN2 value is assigned:

Condition:	CITIZEN2 Value:	CITIZEN2 Value:
If AH33=1, 2, 9, 22, or 26 (respondent reports that they were born in the U.S., American Samoa, Guam, Puerto Rico, or the Virgin Islands)	1	U.S.-Born Citizen

If AH39=1 (respondent reports that they are U.S. citizens, but were not born in the U.S., American Samoa, Guam, Puerto Rico, or Virgin Islands)	2	Naturalized Citizen
If AH40=1, 2, or 3 (permanent resident with green card, not permanent resident, or have application pending)	3	Non-Citizen

YRUS

Years Lived in the U.S.

YRUS is constructed with questionnaire item AH41.

YRUS assigns the number of years the respondent has lived in the U.S. (AH41) into range levels. In addition, YRUS standardizes the number of years for those who reported a particular year (1895-2002).

The value for this variable is calculated for the respondents who report a particular year by subtracting the year they report from 2007 (2007-AH41).

A skip value (-1) is assigned for all persons who were born in the U.S., Guam, Samoa, or the Virgin Islands.

PCTLF_P

Percent Life in U.S. (PUF Recode)

The PCTLF_P is a recode of the continuous construct variable PCTLF. This variable provides categorical measure of the percentage of the adult respondent's life spent in the United States.

Values are assigned as follows:

Condition:	PCTLF_P Value:	PCTLF_P Label:
If $0 \leq \text{PCTLF} \leq 20$	1	0%-20%
If $21 \leq \text{PCTLF} \leq 40$	2	21%-40%
If $41 \leq \text{PCTLF} \leq 60$	3	41%-60%
If $61 \leq \text{PCTLF} \leq 80$	4	61%-80%
If $81 \leq \text{PCTLF}$	5	81%+

WRKST

Working Status

This variable provides a categorical measure of current working status for adults and is derived from questionnaire items AK1, AK2, AK3, and AG10.

WRKST values are assigned in the following hierarchical manner:

1. Respondents who currently/usually work per week, were working at a job last week, or were looking for work last week were assigned values based on the following criteria:

Condition:	WRKST Value:	WRKST Label:
If AK3>=21	1	Full-time employed (21+ hours/week)
If 0<AK3<=20	2	Part-time employed (0-20 hours/week)
If AK1=1 and AK3=0	3	Employed but not at work
If AK1=3 or AG10=3	4	Unemployed, looking for work.

2. All cases that reported having a job but were not at work last week were coded as being unemployed and looking for work:

Condition:	WRKST Value:	WRKST Label:
AK1=2 and AK3=0	3	Employed, not at work

3. Respondents who reported not working at a job or business last week, usually work, and were either laid off/on strike or on family or maternity leave were also coded as being unemployed and looking for work:

Condition:	WRKST Value:	WRKST Label:
If AK1=4 and AK2 in (8 or 9) and AG10=1	4	Unemployed and looking for work

4. Respondents who reported not working at a job last week due to reasons other than being laid off or maternity leave were coded as unemployed and not looking for work:

Condition:	WRKST Value:	WRKST Label:
If AK1=4	5	Unemployed and not looking for work

Cases in which current working status could not be ascertained are imputed to assign a value to WRKST.

WRKST_S

Spouse Working Status

The WRKST_S variable is derived from questionnaire items AK20, AG8, AG11, and AH43. This variable categorizes the working status of the adult respondent's spouse. Values are assigned based on the following criteria:

Condition:	WRKST_S Value:	WRKST_S Label:
If AK20>=21	1	Full-time employed (21+ hours/week)
If 0<AK20<=20	2	Part-time employed (0-20 hours/week)
If AG8=(1 or 2) and AK20=0	3	Employed but not at work
If AG8=3 or AG11=3	4	Unemployed, looking for work
If AG8=4	5	Unemployed, not looking for work

Respondents with no spouse (AH43~=1) are assigned an inapplicable value of WRKST_S= (-1).

Cases for which current working status of the spouse could not be ascertained are imputed to assign a value to WRKST_S.

AHEDUC Educational Attainment

AHEDUC is constructed with questionnaire item AH47.

AHEDUC is constructed by combining values in AH47 in order to create more general categories for education levels.

The values for the educational attainment variable are assigned in the following manner:

Condition:	AHEDUC Value:	AHEDUC Label:
If AH47=1, 2, 3, 4, 5, 6, 7, 8 (grades), or 30 (no formal education)	1	Grade 1 through 8
If AH47=9, 10, or 11 (grades)	2	Grade 9 through 11
If AH47=12 (grade)	3	Grade 12/HS diploma
If AH47=13, 14, 15, or 22	4	Some college
If AH47=24, 25, or 26	5	Vocational school
If AH47=23	6	AA or AS degree
If AH47=16 or 17 (4 th or 5 th year at university)	7	BA or BS degree
If AH47=18	8	Some grad school
If AH47=19 or 20	9	MA or MS degree
If AH47=21	10	PhD or equivalent

Note: See F_AHEDUC for imputation flag.

AKWKLNG Time at Main Job

AKWKLNG is constructed with AK7 and AK7UNT. AKWKLNG standardizes the measurement unit of questionnaire item AK7 into years on the job in decimals. The respondents who report the length of time they have worked at their main job in months have their answers converted to years by dividing by 12 and rounding to the nearest whole number. This variable presents the values in range levels.

Those who are not employed or who usually work zero hours are assigned a skip value (-1) for this variable. Any remaining cases are imputed to assign a AKWKLNG value.

FAMTYP_P Family Type (PUF Recode)

The FAMTYP_P is a recoded version of FAM_TYPE, which is constructed using a number of questionnaire items that measure marital status, age of the respondent and parenthood. This variable is constructed for purposes of determining eligibility for public-based health care programs.

If a respondent is not married (AH43=1), is older than 21 years (SRAGE>=21) and has no children, that case is assigned a value of FAMTYP_P =1. Similarly, for those 21 and older who are married (AH43=1) but do not live with their spouse in the same household (AH44=2), the same value (FAMTYP_P =1) is also assigned. The same logic holds true for adult respondents ages 19 and 20 years old (FAMTYP_P =2). Respondents who are married (AH43=1) and live with their spouse in the same household (AH44=1)

but have no children are assigned the value of FAMTYP_P =3. Respondents who are married (AH44=1) and live with their spouse (AH44=1) and have one child or more or are co-parents of one child or more are assigned the value of FAMTYP_P =4. A respondent is considered to be single with kids (FAMTYP_P =5) if he/she is not currently married (AH43~1) or is married but does not live in the same household (AH44=2), and has one child or more, excluding co-parentship. Finally, a respondent is considered to be 18 years old and single (FAMTYP_P =6) if he/she does not have any children, is not married (AH43~1) or is married but does not live in the same household as the spouse (AH44=2) and is age 18.

HEALTH INSURANCE

AH50_P

Name of Medicare HMO Plan (PUF Recode)

The AH50_P is a recoded version of questionnaire item AH50, indicating the name of the respondent's reported HMO health plan under Medicare. This variable collapses categories into more general Medicare HMO plans.

HMO

HMO Status

The HMO variable is constructed from the constructed variable **INSTYPE** (Type of Current Health Coverage Source for all Ages) and several questionnaire items: **AH49** (Medicare Coverage Provided through HMO), **AI22C** (Main Health Insurance is HMO) **AI22A** (Name of Main Health Plan) and **AH50** (Name of Medicare HMO Plan). Respondents were coded as Yes for HMO status under three conditions: 1) Are covered by a Medicare coverage provided through HMO or have HMO as a main health insurance; 2) Respondents who were skipped out of **AH49** and **AI22C**, but identified as having Medi-Cal as a main health plan or Medicare HMO plan; and, 3) Respondents who identified Healthy Families as the current health coverage source. HMO values are assigned as follows:

Condition:	HMO Value:	HMO Label:
If INSTYPE=1	3	Uninsured
AH49=1 or AI22C=1	1	HMO
(AH49=-1 and AI22C=-1) and (AI22A =38 or 54) or (AH50=38 or 54)	1	HMO
INSTYPE=6	1	HMO
AH49=2(no) or AI22C=2(no)	2	Non-HMO
All other conditions	-9	Not Ascertained

AI22A_P

Name of Health Plan (PUF Recode)

The AI22A_P is a recoded version of questionnaire item AI22A, indicating the name of the respondent's reported health plan. This variable collapses reported health plans into more general health insurance plans. It is not asked of respondents who have Medicare HMO plans (see AH50_P).

AI25NEW**RX Coverage Edited for Medical/HF**

The AI25NEW variable is constructed from source variables AI25, INSMD, and INSHF. AI25NEW indicates whether or not respondents who are covered by Medi-CAL or Healthy Families are covered for prescription drugs.

IHS**Covered by Indian Health Services**

The IHS variable is derived from questionnaire items AI19_8 and AI20. Respondents who report that the type of health coverage they have is through the Indian Health Service, Tribal Health Program, or Urban Indian Clinic (if AI19_8=1 or AI20=1) are considered to be covered for this variable (IHS= 1). Those who report that they are not covered by the Indian Health Service, Tribal Health Program, or Urban Indian Clinic (if AI20=2), are considered to be not covered for this variable (IHS= 2).

Note: Only the respondents who report that they are American Indian/Alaska Native (if AA5A_3=1) are asked item AI20.

The **IHS_S** variable measures whether or not the adult respondent's spouse is covered by Indian Health Services. Construction of this variable uses the same logic as IHS using items AI47_8 and AI49_8.

INS**Currently Insured**

This variable indicates the current insurance status of the respondent. INS is created with other constructed insurance variables. Cases that are assigned a value of 1 (covered) for any of the following variables are considered to be currently insured (INS=1): INSMC, INSMD, INSHF, INSEM, INSPR, INSML, INSOG, INSOT. The cases assigned a value of 2 (not covered) for all of those variables are considered to not be currently insured (INS=2).

Note: The **INS_S** variable provides a dichotomous measure of the respondent's spouse's current insurance status. Construction of this variable uses the same logic as INS.

INS12M**Number of Months Covered by Health Insurance in Past 12 Months**

This variable indicates the number of months a respondent has been insured during the past 12 months. The INS12M variable is derived from items AI31, AI34, AI35, AI27, and AI29.

Each case is tested through the following series of conditions until a value for INS12M can be assigned:

1. The INS12M values are first assigned to the cases with respondents who report that they have current health coverage during the administration of the questionnaire:

Condition:	INS12M Value:	INS12M Label:
If AI31=1 (have had current health insurance for all of the past 12 months)	12	Insured 12 months
If AI34=2 (have current coverage, some kind of	12	Insured 12 months

health insurance for all of the past 12 months)		
If AI35 >= 0 (months with no health insurance at all)	12 – AI35 value (#)	Insured # months

2. The INS12M values are then assigned to the cases with respondents who do not report current health coverage during the administration of the questionnaire:

Condition:	INS12M Value:	INS12M Label:
If AI27=2 (no health insurance for all of the past 12 months)	0	Insured 0 months
If AI29 >= 0 (months with health insurance)	AI29 value (#)	Insured # months

Note: This variable is constructed in an identical manner in the adult, adolescent, and child data files.

INS64_P

Current Health Coverage Under 65 Yrs Old (PUF Recode)

This INS64_P variable is re-coded from the constructed variable INS64 and is used in the public use file. This variable also indicates the type of current health insurance coverage for persons under 65 years old, but collapses CHIP coverage with other public health insurance coverage.

Cases are assigned based on the following INS64 criteria:

Condition:	INS64_P Value:	INS64_P Label:
If INS64=2	2	Medicaid
If INS64=4	3	Medicare
If INS64=5	4	Employment-based
If INS64=6	5	Privately purchased
If INS64=3 or INS64=7	6	CHIP/Other public
If INS64=1	1	Uninsured

Any cases with an adult who is 65 years or older (if INS64= -1) are assigned a skip value (-1) for this variable:

Condition:	INS64_P Value:	INS64_P Label:
If INS64=-1	-1	Skipped >= 65

Note: The **INS64S_P** variable measures current health coverage for the spouse of the respondent age 64 years and younger (PUF recode). Construction of this variable uses the same logic as INS64_P.

INS65**Type of Current Health Coverage Source for the Elderly**

The INS65 variable specifies the type of current health insurance coverage for adults 65 years and older. This variable also indicates whether or not the adult is covered simultaneously by Medicare and some other type of insurance. INS65 is created with other constructed insurance variables.

Each case with a respondent who is 65 years or older (if SRAGE >= 65) is tested through the following series of conditions until a respective INS65 value is assigned:

Condition:	INS65 Value:	INS65 Label:
If INSMC=1 (Medicare) and INSMD=1 (Medi-Cal)	1	Medicare + Medicaid
If INSMC=1 (Medicare) and another type of coverage: [If INSHF=1 or INSEM=1 (employer based) or INSPR=1 (private) or INSML=1 (military) or INSOG=1 (other government) or INSOT=1 (other non-government)]	2	Medicare + Other
If INSMC=1 (Medicare) and no other type of coverage: [If INSMD=2 and INSHF=2 (no Healthy Families) and INSEM=2 (no employer-based) and INSPR=2 (no private) and INSML=2 (no military) and INSOG=2 (no government) and INSOT=2 (no non-government)]	3	Medicare Only
INS=1	4	Other Only
INS=2	5	Uninsured

Any cases with an adult, adolescent or child who is under 65 years old (if SRAGE < 65) are assigned a skip value (-1) for this variable:

Condition:	INS65 Value:	INS65 Label:
If SRAGE < 65 (under 65 years old)	-1	Skipped – Age < 65

Adjustment 1: Those who are initially not included in the “Medicare + Medi-Cal” category (if INS65~1), but are covered by Medicare (if INSMC=1) and a supplemental Medicare policy (if AI4=1), are considered to be covered by “Medicare + Other” (INS65=2).

Adjustment 2: The respondents with Medicare (if INSMC=1) who are also in a managed care program [(if AI25=1 (covered for Rx), AI21=1 (have to sign up with PCP, group or clinic that must go to), and AI22=1 (have to get referrals))] are assigned to the “Medicare + Other” category.

Note: The corresponding constructed variable for the type of current health coverage for persons under 65 years old (if SRAGE < 65) is INS64.

The **INS65_S** variable measures type of insurance coverage for the spouse of the respondent age 65 years and older. Construction of this variable uses the same logic as INS65.

INSANY

Any Health Insurance in the Last 12 Months

The purpose of the INSANY variable is to indicate whether or not respondents have had any health insurance in the last 12 months. Instead of using the source variables from the questionnaire, INSANY is derived from other constructed insurance variables, including INS64 (Type of current health coverage source – under 65 years old), INS65 (Type of current health coverage source for the elderly), and INS12M (Number of months covered by health plans in past 12 months).

Each case is tested through the following series of conditions until an INSANY value is assigned:

1. The respondents under 65 years old (if SRAGE < 65) are first assigned INSANY values:

Condition:	INSANY Value:	INSANY Label:
If INS64=1	1	Currently uninsured
If 0<=INS12M<12	2	Uninsured any of the last 12 months
If INS12M=12 and INS64>1	3	Insured all of the last 12 months

2. Next, the respondents 65 and older (if SRAGE >= 65) are assigned INSANY values:

Condition:	INSANY Value:	INSANY Label:
If INS65= 5	1	Currently uninsured
If 0<=INS12M<12	2	Uninsured any of the past 12 mo
If INS12M=12 and 1<=INS_ INS65<5	3	Insured all of the past 12 mo

INSEM

Covered by Employer-Based Plans

The INSEM variable is derived from questionnaire item AI8, AH56 and AI19. Respondents who identify themselves as covered by a health insurance plan or HMO through a current or former employer/union (if AI8=1) or covered through premium payment for a health plan (if AH56_1, AH56_2, AH56_3, AH56_4 or AH56_5=1) are considered to be covered for this variable (INSEM=1). Those who report that they are not covered by an employer-based plan (AI8=2) are considered to be not covered (INSEM=2).

In addition, the cases with INSEM~1 who report that they are covered by a plan that was missed through a current or former employer/union, school, professional association trade group, or other organization (if AI19_1=1 or AI19_2=1), are also considered to be covered by an employer-based plan for this variable (INSEM=1).

Note: The **INSEM_S** variable provides a dichotomous measure of spouse coverage by employer-based health plans. Construction of this variable uses the same logic as INSEM using items AI40, AI40A, AI47_1, AI47_2, AI49_1 and AH49_2.

INSMC

Covered by Medicare

The INSMC variable is derived from questionnaire item AI1, AI2, AH56_9 and AI19_4. Respondents who identify themselves as covered by Medicare (if AI1=1 or AI2=2) or covered through a premium payment for a health plan (AH56_9) are considered to be covered for this variable (INSMC=1). Those who identify themselves as not covered (if AI1=2) are considered to be not covered (INSMC=2).

In addition, the cases with INSMC~=1 who report that they are covered by Medicare through a plan that was missed (if AI19_4=1) are also considered to be covered by Medicare (INSMC=1).

Data editing adjustment 1: Respondents who were younger than 65 years old and reported having Medicare coverage, but were working and not disabled or legally blind, are reassigned as not having Medicare coverage (INSMC=2).

Data editing adjustment 2: Respondents who were younger than 65 years old and reported having Medicare coverage, but were not on SSDI, are reassigned as not having Medicare coverage (INSMC=2).

Note: The **INSMC_S** variable measures spouse's coverage by Medicare. Construction of this variable uses the same logic as INSMC using items AI37, AI47_4, and AI49_4.

INSMD

Covered by Medi-Cal

The INSMD variable is derived from questionnaire items AI6, AH55_7, AH56_7 and AI19_5. Respondents who identify themselves as being covered by Medi-Cal (if AI6=1) or covered through premium payment for a health plan (if AH55_7 or AH56_7=1) are considered to be covered for this variable (INSMD=1). Those who report that they are not covered by Medi-Cal (if AI6=2) are considered to be not covered (INSMD=2).

In addition, the cases with INSMD~=1, who report that they are covered by Medi-Cal through a plan that was missed (if AI19_5=1), are considered to be covered for this variable (INSMD=1).

Data editing adjustment 1: The respondents with INSMD~=1 (no Medi-Cal), who report that they have SSI/ AFDC/TANF/CalWorks, are considered to be covered by Medi-Cal (INSMD=1).

Note: The **INSMD_S** variable measures spouse's coverage by Medi-Cal. Construction of this variable uses the same logic as INSMD using items AI38, AI47_5 and AI49_5.

INSOG

Covered by Other Government Plans

The INSOG variable is derived from questionnaire items AI17 and AI19_9. Respondents who report that they are covered by some other government plan (such as AIM, Mister MIP, the Family PACT program, or something else) (if AI17=1) are considered to be covered for this variable (INSOG=1). The respondents who skip out of item AI17 (-1) or report that they are not covered by some other government plan (if AI17=2) are considered to be not covered for this variable (INSOG=2).

In addition, cases with INSOG ~=1 who report that they are covered by a plan that was missed, which is some other government health plan (if AI19_9=1), are considered to be covered for this variable (INSOG=1).

Note: This variable cannot be used as a count of respondents with other government plans. Only those without Medicare, Medi-Cal, employer, private, or military coverage are asked this question.

The **INSOG_S** variable measures spouse's coverage by other government plans. Construction of this variable uses the same logic as INSOG using items AI42A, AI47_9, and AI49_9.

INSPR **Covered by Plans Purchased On Own**

The INSPR variable is derived from questionnaire item AI11 and AI19_3. If respondents report that they are covered by a health insurance plan that was purchased directly from an insurance company or HMO (if AI11=1), they are considered to be covered by a plan purchased on their own (INSPR=1). The respondents who skip out of AI11 (-1), or report that they are not covered by a plan purchased directly (if AI11=2), are considered to be not covered by a plan that was purchased on their own (INSPR=2).

In addition, cases with INSPR ~1 who report that they are covered by a plan purchased directly that was missed (if AI19_3=1) are considered to be covered for this variable (INSPR=1).

Note: This variable cannot be used as a count of respondents with private insurance. Only those without Medicare, Medi-Cal, or employer coverage are asked this question.

The **INSPR_S** measures spouse's coverage by plans purchased directly from an insurance company or HMO. Construction of this variable uses the same logic as INSPR using items AI41, AI47_3 and AI49_3.

INSPS **Covered by Employer-Based Plans as Primary Coverage**

The INSPS variable is derived from questionnaire items AI8, AI9, AH56, AH59, AI19_1 and AI19_2. Respondents who identify themselves as covered by a health insurance plan or HMO through a current or former employer/union (if AI8=1) and report that the plan was obtained in their own name (if AI9=1 or AH59=1), are considered to be covered for this variable (INSPS=1). Those who report that they are covered by a health insurance plan or HMO through a current or former employer/union (if AI8=1), but report that the plan was obtained in someone else's name (if AI9=2 or AH59=1), are considered to have secondary coverage (INSPS=2).

Those who report their current or former employers or unions pay the health plan premium (if AH56_1=1, AH56_2=1 or AH56_3=1) are considered to have primary coverage for employer-based plan (INSPS=1). Those who report their spouse's current or former employers or unions pay the health plan premium (if AH56_4=1 or AH56_5=1) are considered to have secondary coverage (INSPS=2).

In addition, those who report having an employer-based plan by a plan that was missed (if AI19_1=1 or AI19_2=1) were skipped out of the question of primary or secondary coverage (AI9). These cases were imputed to assign an INSPS value.

Those who are skipped out of item AI9 because they do not have an employer-based plan (AI8=2) are assigned a skip value (-1).

Note: The **INSPS_S** measures spouse's primary or secondary coverage plans. Construction of this variable uses the same logic as INSPS using items AI40 AI40A AI9, AI9A, AI40, AI40A, AH55_4, AH55_5, AH56_4, AH56_5, AH60 and AH62.

INSTYP_P **Type of Current Health Coverage Source for All Ages (PUF Recode)**

The INSTYP_P variable is a recode of INSTYPE which assigns the adult's insurance type. INSTYP_P collapses categories into less identifiable levels.

Condition:	INSTYP_P Value:	INSTYP_P Label:
If INSTYPE=1	1	Uninsured
If INSTYPE=2	2	Medicare & Medicaid
If INSTYPE=3	3	Medicare & Others
If INSTYPE=4	4	Medicare Only
If INSTYPE=5	5	Medicaid
If INSTYPE=7	6	Employment Based
If INSTYPE=8	7	Privately Purchased
If INSTYPE=6, 9	8	Healthy Families/Other public

RSN_UNI2

Reason for Uninsured Status Anytime Past 12 Months

The RSN_UNI2 variable is derived from a construct variable, INSANY, and questionnaire items, AI24 and AI36, which provide specific reasons why the adult has no current health insurance coverage in the past 12 months. This variable re-categorizes and reassigns reasons given into distinct responses based on the above questionnaire items. For those who were uninsured anytime in the past 12 months (INSANY ~ = 3), the RSN_UNI2 values are assigned as follows:

Condition:	RSN_UNI2 Value:	RSN_UNI2 Label:
If AI24=1 or AI36=1	1	Can't afford/too expensive
If AI24=2 or AI36=2	2	Not eligible working status
If AI24=3 or AI36=3	3	Not eligible due to health or other problems
If AI24=4 or AI36=4	4	Not eligible due to citizenship/immigration
If AI24=5 or AI36=5	5	Family situation changed
If AI24=6 or AI36=6	6	Don't believe in insurance
If AI24=7 or AI36=7	7	Switched insurance companies, delay
If AI24=8 or AI36=8	8	Can get health care for free/Pay for own
If AI24=9 or AI36=9	9	Can't qualify for public program coverage
If AI24=10 or AI36=10	10	Procrastination /Hasn't taken steps to get insurance
If AI24=11 or AI36=11	11	Don't know where or how to get insurance/forms too difficult
If AI24=12 or AI36=12	12	Health insurance was cancelled/was dropped
If AI24=13 or AI36=13	13	Not offered at job
If AI24=14 or AI36=14	14	No need - General
If AI24=15 or AI36=15	15	In process of looking for/getting insurance
If AI24=16 or AI36=16	16	Other

Any cases with the respondent identified as being insured are assigned a skip value (-1) for this variable:

Condition:	RSN_UNI2 Value:	RSN_UNI2 Label:
If INS=1	-1	Inapplicable

INST_12**Health Ins Coverage in Last 12 Mos, Incl Current Status: 8 LvlS**

The INST_12 variable is derived from the constructed variable INSLT12. This variable re-categorizes health insurance coverage over the past 12 months, including current status, into 8 distinct levels. The values of INST_12 are assigned as follows:

Condition:	INST_12 Value:	INST_12 Label:
If INSLT12=1	1	Medi-Cal (Medicaid) only
If INSLT12=2	2	Employer-based coverage only (EBI)
If INSLT12=17	3	Private coverage only
If INSLT12=10, 18, 19	4	Other coverage only
If INSLT12=6, 8, 9, 12, 13, 14, 16	5	Any 2 or more types (never uninsured)
If INSLT12=3	6	Uninsured only
If INSLT12=4	7	Uninsured + Employer-based only
If INSLT12=5, 7, 11, 15	8	Any 1 or more types + Uninsured
Age >= 65	-1	Inapplicable – Age >=65

RSN_UNIN**Reason for Current Uninsured Status**

The RSN_UNIN variable is derived from a construct variable, INS, and questionnaire items, AI24 and AI36, which provide specific reasons why the adult has no current health insurance coverage. This variable re-categorizes and reassigns reasons given into distinct responses based on the above questionnaire items. For those who were uninsured (INS=2), the RSN_UNIN values are assigned as follows:

Condition:	RSN_UNIN Value:	RSN_UNIN Label:
If AI24=1 or AI36=1	1	Can't afford/too expensive
If AI24=2 or AI36=2	2	Not eligible working status
If AI24=3 or AI36=3	3	Not eligible due to health or other problems
If AI24=4 or AI36=4	4	Not eligible due to citizenship/immigration
If AI24=5 or AI36=5	5	Family situation changed
If AI24=6 or AI36=6	6	Don't believe in insurance
If AI24=7 or AI36=7	7	Switched insurance companies, delay
If AI24=8 or AI36=8	8	Can get health care for free/Pay for own
If AI24=9 or AI36=9	9	Can't qualify for public program coverage
If AI24=10 or AI36=10	10	Procrastination /Hasn't taken steps to get insurance
If AI24=11 or AI36=11	11	Don't know where or how to get insurance/forms too difficult
If AI24=12 or AI36=12	12	Health insurance was cancelled/was dropped
If AI24=13 or AI36=13	13	Not offered at job
If AI24=14 or AI36=14	14	No need - General
If AI24=15 or AI36=15	15	In process of looking for/getting insurance
If AI24=16 or AI36=16	16	Other

Any cases with the respondent identified as being insured are assigned a skip value (-1) for this variable:

Condition:	RSN_UNIN Value:	RSN_UNIN Label:
If INS=1	-1	Inapplicable

UNINSANY

Uninsured in Past 12 Months

The UNINSANY variable is derived from the constructed variable INSLT12R, which measures health insurance coverage in the last 12 months. This variable assigns values based on the adult's insurance status during all or part of the year. Values are assigned as follows:

Condition:	UNINSANY Value:	UNINSANY Label:
If INSLT12R=3	1	Uninsured all year
If INSLT12R=6, 7	2	Uninsured part year
If INSLT12R=1, 2, 4, 5, 8, 9	3	Insured all year

OFFTK

Offer, Eligibility, Acceptance of Employer-Based Insurance (EBI)

This variable is constructed from a series of other constructed insurance variables, as well as questionnaire items. OFFTK categorizes the offering, eligibility and acceptance of health insurance plans by the respondent from his or her employer. Adults working for wages that are covered by employer-based plans (INSEM=1) or who have employer-based coverage as their primary plan (INSPS=1) are considered to have accepted employer-based coverage (OFFTK=1). Otherwise, among persons who were working last week (AK1=1) or who usually work (AG10=1), case assignments are based on the following criteria:

Condition:	OFFTK Value:	OFFTK Label:
If AI13=1 and AI14=1	2	Did not accept EBI, but was offered and eligible
If AI13=1 and AI14=2	3	Was offered EBI, but was not eligible
If AI13=2	4	Was not offered EBI

Adults indicating an unemployed status are assigned a skip value of OFFTK=(-1).

Note: The **OFFTK_S** variable is constructed using the same logic as OFFTK. This variable also categorizes the eligibility and acceptance of health insurance plans offered to the respondent's spouse by the spouse's employer.

AH101_P

Person who helped Find Health Plan

AH101_P is a recoded version of AH101, which identifies the person who helped the adult respondent find their health plan while they were trying to purchase the insurance on their own. This question is only asked among those who are currently uninsured or have been uninsured in the past 12 months.

AH102_P**# of Nights in Hospital Past 12 Months**

AH102_P is a categorical recode of the continuous variable AH102, which indicates the number of nights the adult respondents with asthma, diabetes or heart disease stayed in a hospital in the past year. For AH102_P, values 0 to 6 are identical to AH102. However, for AH102_P, values greater than 7 were combined and collapsed into different categories in order to combine potentially identifying data into less identifiable categories. Categories were assigned as follows:

Condition:	AH102_P Value:	AH102_P Label:
If 7 <= AH102 <= 8	7	7-8 nights
If 9 <= AH102 <= 12	8	9-12 nights
If 13 <= AH102 <= 24	9	13-24 nights
If AH102 >= 25	10	25+ nights

AH95_P**# Times Visited ER in Past 12 Months**

AH95_P is a categorical recode of the continuous variable AH95, which indicates the number of times the adult respondents visited the ER in the past year. Values greater than 7 were combined and collapsed into different categories in order to combine potentially identifying data into less identifiable categories. Categories were assigned as follows:

Condition:	AH95_P Value:	AH95_P Label:
If 7 <= AH95 <= 8	7	7-8 times
If 9 <= AH95 <= 12	8	9-12 times
If 13 <= AH95 <= 24	9	13-24 times
If AH95 >= 25	10	25+ times

AH96_P**Health Plan Deductible > \$2000**

AH96_P is a recode of the variable AH96, which indicates whether the adult respondent's health plan deductible is greater than \$ 2000. Cases in the third category under AH96 (YES, BUT ONLY WHEN I GO OUT OF NETWORK) were re-categorized as not having health plan deductible greater than \$2000.

AH97_P**Health Plan Deductible Covering all Persons > \$4000**

AH97_P is a recode of the variable AH97, which indicates whether the adult respondent's health plan deductible covering all persons is greater than \$ 4000. Cases in the third category under AH97 (YES, BUT ONLY WHEN I GO OUT OF NETWORK) were re-categorized as not having health plan deductible greater than \$4000.

HEALTH CARE UTILIZATION AND ACCESS

ACMDNUM

Number of Doctor Visits in the Past Year

The ACMDNUM variable is derived from the continuous AH5 variable, which assigns the number of doctor visits in the last year as reported by the respondent. The ACMDNUM variable provides 10 categories for the number of visits reported. ACMDNUM values are assigned as follows:

Condition:	ACMDNUM Value:	ACMDNUM Label:
If AH5=0	0	0 visits
If AH5=1	1	1 visit
If AH5=2	2	2 visits
If AH5=3	3	3 visits
If AH5=4	4	4 visits
If AH5=5	5	5 visits
If AH5=6	6	6 visits
If AH5=7, 8	7	7-8 visits
If AH5=9 to 12	8	9-12 visits
If AH5=13 to 24	9	13-24 visits
If AH5=25+	10	25+ visits

DOCT_YR

Visited a Doctor During the Past 12 Months

The DOCT_YR variable is derived from the questionnaire item AH5. The DOCT_YR variable is a dichotomous variable that ascertains whether or not the adult respondent visited a doctor at least once during the past 12 months. Those who indicated one or more visits (AH5>=1) were assigned the value DOCT_YR=1. Those indicating 0 visits (AH5=0) were assigned the value DOCT_YR=2.

Cases in which the number of visits could not be ascertained were imputed to assign a value to DOCT_YR.

AJ50_P

Language Doctor Speaks To Respondent (PUF Recode)

The AJ50_P variable is a recoded version of AJ50 which assigns the language used by the respondent's doctor to communicate with the respondent. The purpose is to collapse categories into less identifiable categories. The values are assigned as follows:

Condition:	AJ50_P Value:	AJ50_P Label:
If AJ50=1	1	English
If AJ50=2	2	Spanish
If AJ50=4	3	Vietnamese
If AJ50=7	4	Korean
If AJ50=3	5	Cantonese
If AJ50=6	6	Mandarin
If AJ50=5 or AJ50>=8	7	Other

USOC**Usual Source of Care Other Than ER**

The USOC variable is derived from constructed variable USUAL_TP. USOC provides a dichotomous measure of whether an adult respondent has a usual source of care other than emergency room services.

Each case is first tested through the following conditions until a USOC value is assigned:

Condition:	USOC Value:	USOC Label:
If USUAL_TP=1 (Doc Office/HMO/Kaiser) 2 (Commun/Gov Clinic) 5 (Some Other Place) or 6 (No One Particular Place)	1	Yes
If USUAL_TP=3 (Emergency Room) or 7 (No Usual Source of Care)	2	No

Cases in which respondents refused to report their usual source of care or did not know their usual source of care are imputed to assign a value to USOC.

USUAL**Have Usual Place to Go When Sick or Needing Health Advice**

USUAL is constructed with questionnaire item AH1.

USUAL is constructed by combining the responses in AH1 in order to create a dichotomous variable for usual source of care.

The respondents who report in questionnaire item AH1 that they have a usual place (AH1=1), have a doctor (AH1=3), go through Kaiser (if AH1=4), or usually go to more than one place (if AH1=5), are considered to have a usual place to go when sick or needing health advice (USUAL=1). Respondents who indicate not having a usual place to go to when sick (AH1=2) are assigned the value of USUAL=2.

USUAL_TP**Usual Source of Care – 7 Levels**

The USUAL_TP variable is derived from questionnaire items AH1, AH3, and AH4, which measure source of health care for the adult respondent. The constructed USUAL_TP variable categorizes cases based on the place most often sought for source of health care. Values are assigned according to the following criteria:

Condition:	USUAL_TP Value:	USUAL_TP Label:
If AH1=3 or 4 or AH3=1, 2, or 3	1	Doc Office/HMO/Kaiser
If AH3=4	2	Community/Gov. Clinic, Community Hospital
If AH3=5	3	Emergency Room
If AH3=6, 7 or 8	5	Some Other Place
If AH3=94	6	No one particular place
If AH1=2	7	No usual source of care

Cases in which respondents did not know their usual source of care or the usual source of care cannot be determined are imputed to assign a value to USUAL_TP.

USUAL5TP**Usual Source of Care – 5 Levels**

The USUAL5TP variable is derived from the constructed variable USUAL_TP, which categorizes the most often visited place the adult respondent goes to for health care. Five levels are assigned to USUAL5TP that re-categorize the usual source of care for the respondent. Values are assigned according to the following criteria:

Condition:	USUAL5TP Value:	USUAL5TP Label:
If USUAL_TP=1	1	Doc Office/HMO/Kaiser
If USUAL_TP=2	2	Community/Gov. Clinic, Community Hospital
If USUAL_TP=3	3	Emergency Room/Urgent Care
If USUAL_TP=5 or 6	4	Other place, no one place
If USUAL_TP=7	5	No usual source of care

Cases in which a usual source of care cannot be determined are imputed to assign a value of USUAL5TP.

ER**Emergency Room Visit in the Past Year**

The ER variable is constructed using questionnaire items AH12, AH13A, AB67, AB109 and AB115. This dichotomous variable indicates whether or not the adult visited an emergency room for any reason within the past year. Respondents who indicated that they visited an emergency room within the last year (AH12=1) are assigned a value of ER=1. Current asthmatics who visited the ER for asthma in the past year (AH13A=1) are assigned a value of ER=1. Respondents who have been diagnosed with asthma but who do not currently have asthma and visited the ER for asthma in the past year (AB67=1) are assigned a value of ER=1. Diabetics who visited the ER for diabetes in the past year (AB109=1) are assigned a value of ER=1. Finally, respondents who visited the ER for heart disease in the past year (AB115=1) are also assigned a value of ER=1. Those respondents who did not visit the ER for any reason (AH12=2) or who did not visit the ER for asthma in the past year (among current asthmatics and those who used to have asthma) (AH13A=2 or AB67=2) or who did not visit the ER for diabetes or heart disease in the past year (AB109=2 or AB115=2) are assigned a value of ER=2. Those who were coded as “Inapplicable” (-1) for questionnaire items AH12, AH13A, AB67, AB109 and AB115 were also assigned a value of -1 or “Inapplicable” for the variable ER.

EMPLOYMENT, INCOME, POVERTY, & FOOD SECURITY**AK10_P****Earnings Last Month Before Taxes and Deductions (PUF Recode)**

AK10_P is a top coded version of questionnaire item AK10.

Note: Top code is \$30,000

AK10A_P**Spouse's/Partner's Earnings Last Month (PUF Recode)**

AK10A_P is a top coded version of questionnaire item AK10A.

Note: Top code is \$30,000

AK22_P

Household's Total Annual Income (PUF Recode)

AK22_P is a top coded version of questionnaire item AK22.

Note: Top code is 300,000.

POVGWD_P

Family Poverty Threshold Level (PUF Recode)

The POVGWD_P construct is a recoded variable of POVGWD that measures family poverty threshold level.

Top code: 24.

POVLL

Poverty Level

The POVLL variable indicates the total annual income of the household as a percent of the Federal Poverty Level.

In order for Westat to approximate the 100%, 200%, and 300% Federal Poverty Level cutoff points for each household, the respondents were asked to report the number of people living in their household who are supported by the total annual household income (AK17/HHINC), and if needed, how many of those people are children under 18 years old (AK18). The 100%, 200%, and 300% cutoff values for each household were calculated during the administration of the survey by multiplying the 2007 Census Poverty Threshold "size of family unit" by "related children under 18 years" table amounts by 1, 2, or 3 (U.S. Bureau of the Census: Current Population Survey). The income values were then rounded to the nearest 100 dollars. The three household income cutoff points for each household were then stored as CATI variables POVRT100, POVRT200, and POVRT300.

A. First, the income values within the poverty variables (POVRT100, POVRT200, POVRT300) are categorized into the same income range levels as the household income variable (HHINC), creating three transitional variables (i.e. POVRT100n, 200n, 300n).

B. Second, the POVLL values are assigned.

1. Each case with a POVRT100n value equal to (-9) is assigned a value of 4 (301% FPL and above) that indicates an income of 301% FPL and above.
2. Next, questionnaire items AK18A, AK18B, AK18C and the CATI variables POVRT100, POVRT200, and POVRT300 are used in order to assign POVLL values to the recoded cases. Each case is tested through the following series of conditions until a value is assigned:

Condition:	POVLL Value:	POVLL Label:
AK18A=1 (equal to or less than calculated POVRT100)	1	0-99 %FPL
AK18A=2 (more than POVRT100) or AK18B=1 (equal to or less than	2	100-199% FPL

calculated POVRT 200)		
AK18B=2 (more than POVRT200) or AK18C=1 (equal to or less than POVRT300)	3	200-299% FPL
AK18C=2 (more than POVRT300)	4	300% FPL and above

3. For the remaining cases, the actual household income values (HHINC) are compared to the transitional poverty variables -- POVRT100n, POVRT200n, and POVRT300n -- which have the same range levels. Each case is tested through the following conditions until a respective POVLL value is assigned:

Condition:	POVLL Value:	POVLL Label:
If HHINC <= POVRT100n	1	0-99% FPL
If HHINC <= POVRT200n	2	100-199% FPL
If HHINC <= POVRT300n	3	200-299% FPL
If HHINC > POVRT300n	4	300% FPL and above

POVLL2_P

Poverty Level as Times of 100% FPL (PUF Recode)

The POVLL2_P variable is based on the POVLL2 (source) variable. This variable provides a recoded continuous measure of poverty times the 100% Federal Poverty Level.

Top-code is 24.

ELIGPRG3

Uninsured Medi-Cal/Healthy Families Eligible (3 levels)

A series of eligibility variables was constructed to estimate and categorize the number of uninsured Californians who meet the eligibility criteria for the “full-scope” Medi-Cal or Healthy Families programs if they were to apply. The estimated number of uninsured eligible is used to calculate program participation rates for the Medi-Cal and Healthy Families programs.

Criteria for assignment within these eligibility variables are based on a number of factors:

- A. *Categorical Eligibility*: Persons eligible for program participation must meet a number of age-related and/or disability criteria. Questionnaire items are used to measure age, disability status, pregnancy status, and whether the respondent is a parent of a minor.
- B. *Family Composition*: Questionnaire items are used to derive family composition necessary for eligibility with these two programs. Variables used include the adult respondent's marital status; the presence of a spouse in the household; and whether each child in the household is related by blood, guardianship to the adult respondent, their spouse or their unmarried partner with whom they share a biological child, or their unmarried partner with whom they share guardianship of a non-biological child.

- C. *Income Eligibility*: Family income as a percent of the federal poverty guidelines (POVGWD) is used for both Medi-Cal and Healthy Families income eligibility. The monthly earnings by the adult respondent and/or spouse of the adult respondent and the Federal Poverty guidelines are used as the primary income source in constructing the eligibility variable.
- D. *Immigration Status*: In order to participate in the full-scope Medi-Cal and Healthy Families programs, eligible persons must be citizens or legal residents. Questionnaire items related to immigration status are used to construct the eligibility variable.
- E. *Asset Test*: Adults in the Medi-Cal program are subject to an asset test, but there is no asset test for children in either the Medi-Cal or Healthy Families programs. The main questionnaire item used to construct this variable addresses the combined values of specific types of family assets exceeding \$5,000.

Note: Other constructed eligibility variables include **ELIGPRG4** (Uninsured Medi-Cal/Health Families Eligible--4 levels) and **ELIGPP03, ELIGPP04, ELIGPP05, ELIGPP07** (Eligibility program including local child coverage expansions). These variables are constructed using the same logic and criteria as ELIGPRG4.

FSLEV

Food Security Status Level

The FSLEV variable provides a categorical measure of food security status for adults who fall below the 200% federal poverty line. This variable is derived from questionnaire items AM1 through AM5. Construction of this variable is based on the following criteria:

1. First, a temporary variable (FSLEVSCR) is created that represents an additive food insecurity score derived from items AM1-AM5. Adults indicating some type of food deprivation in the past 12 months were assigned a value of 1, whereas adults indicating no food deprivation in the past 12 months were assigned a value of 0. The range for this temporary variable is 0 to 6.
2. Next, scores were assigned to one of the following food security metric scale scores:

Condition:	FSLEVTEMP Value:
If FSLEVSCR=0	0
If FSLEVSCR=1	2.04
If FSLEVSCR=2	2.99
If FSLEVSCR=3	3.77
If FSLEVSCR=4	4.50
If FSLEVSCR=5	5.38
If FSLEVSCR=6	6.06

3. Finally, cases were assigned to one of the following food security status levels (FSLEV):

Condition:	FSLEV Value:	FSLEV Label:
If FSLEVTEMP=0 or 2.04	1	Food secure
If FSLEVTEMP=2.99, 3.77, or 4.50	2	Food insecure without hunger
If FSLEVTEMP=5.38 or 6.06	3	Food insecure with hunger

4. Cases with fewer than 3 missing values in AM1-AM5 (-7, -8 or -9) were imputed. Cases with more than 3 missing values are computed.

FSLEVCB

Food Security Status (2 Levels)

The FSLEVCB variable is derived from the constructed variable FSLEB. This variable provides a dichotomous measure of food security, whereby persons who are food secure (FSLEV=1) are assigned a value of FSLEVCB=1. Adults who are considered to be food insecure without hunger (FSLEB=2) and with (FSLEV=3) hunger are assigned a value of FSLEVCB=2.

Skip values are assigned to cases that fall above 200% of federal poverty line (FSLEVCB=-1).

ELDER_IDX

Elderly Single/Couple Income Below County Cost of Living Thresholds

The ELDER_IDX variable is a dichotomous measure of income inadequacy for adults, aged 65 or older who reside in families with 2 or fewer persons. This variable is constructed based on the 2011 Elder Index amounts for single elders and older couples living alone. The Elder Index amounts are calculated for all counties in California and use publicly available data to calculate basic living costs for housing, food, healthcare, transportation and miscellaneous items; these costs do not assume any subsidies. For a detailed description of ELDER_IDX, please refer to the following methodology report and website:

http://healthpolicy.ucla.edu/programs/health-disparities/elder-health/EIRD2011/Documents/elderindex_methodology2011.pdf

<http://healthpolicy.ucla.edu/programs/health-disparities/elder-health/Pages/elder-index-2011.aspx>

Values of ELDER_IDX were assigned in the following manner:

Using FAM_SIZE, adults aged 65 or older were divided into six groups based on marital/partner status and whether they rented or own their home, and, for homeowners, whether they paid or do not pay for a mortgage(s) in 2011-2012:

1. Single Elders, homeowner with mortgages
2. Older Couples, homeowner with mortgages
3. Single Elders, homeowner without mortgages
4. Older Couples, homeowner without mortgages
5. Single Elders, renter
6. Older Couples, renter

Individual annual income (AK22) was compared to the county-specific minimum annual family income needed for each of these six groups. If a respondent's annual income was less than the minimum income value threshold for county of residence, then 1 (YES) was assigned to ELDER_IDX, otherwise a value of 2 (NO) was assigned.

Note: Family size and household size are not interchangeable. Current ELDER_IDX construction may include elderly single/couple family types residing in single households with multiple families. ELDER_IDX

was constructed using the source variable, FAM_SIZE, which assigns family size of 1 or 2 persons; however, these persons may reside in households which are larger in size than their family size. Please refer to AskCHIS to obtain population estimates for elderly singles/couples that live alone or subset ELDER_IDX where HH_SIZE=FAM_SIZE; FAM_SIZE is a confidential variable. Please refer to the following for more information: <http://healthpolicy.ucla.edu/chis/data/Pages/confidential.aspx>

PUBLIC PROGRAM PARTICIPATION

AL16_P **Total Recvd from Alimony/Child Support/Govt (PUF Recode)**

AL16_P is a top coded version of questionnaire item AL16.

Note: Top code is 4,000.

AL18_P **Total Alimony/Child Support Paid Last Month (PUF Recode)**

AL18_P is a top coded version of questionnaire item AL18.

Note: Top code is 2,000.

AL18B_P **Total Security/Pension Recvd Last Month (PUF Recode)**

AL18B_P is a top coded version of questionnaire item AL18B.

Note: Top code is 3,500.

GEOGRAPHICAL INFORMATION

UR_BG **Rural and Urban - Claritas (By Block Group)**

The UR_BG variable assigns rural and urban block group using the definition from the commercial company, Nielson, Inc (formerly Claritas). We obtained a file from Nielson Inc. that contains block groups in California and their associated urbanization categories. In order to construct UR_BG, the block group for each case (using the CBLK variable) is assigned to its corresponding urbanization category as provided by Nielson. For cases with missing CBLK data, the block the respondent reports using questionnaire items AM8 and AM9 is used in order to make this assignment.

Nielson assigns block groups in California to 4 urbanization categories based on the analysis of population density grids using projected 2013 geoboundaries, redistricting updates, and population estimates.

The urbanization categories are defined by Nielson, Inc. as follows:

Urban	Blocks associated with dense neighborhoods that represent the central cities of most major metropolitan areas (more than 4,150 persons/square mile).
2 nd City	Blocks associated with moderate-density neighborhoods in population centers (more than 1,000 and fewer than 4,150 persons/square mile).
Suburban	Blocks associated with moderate-density neighborhoods that are not surrounded by urban or second-city population centers (estimated to be more than 1,000 persons/square mile and not in an urban or 2 nd city population center).
Town or Rural	Blocks associated with isolated small towns or less-developed areas on the exurban frontier (estimated to be more than 210 but fewer than 950 persons/square mile). Small villages and rural hamlets surrounded by productive farmland or wide-open spaces (estimated to be 210 or fewer persons/square mile).

The cases with no block information are imputed to assign a value to UR_BG.

UR_CLRT

Rural and Urban – Claritas (By Zipcode) (4 levels)

The UR_CLRT variable uses a definition of rural and urban from the commercial company Nielson, Inc (formerly Claritas). Nielson assigns the ZIP codes in California to 4 urbanization categories based on the analysis of population density grids using the projected 2013 geoboundaries, redistricting updates, and population estimates. We obtained a file from Nielson Inc. that contains the ZIP codes in California and their associated urbanization categories.

The urbanization categories are defined by Nielson, Inc. as follows:

Urban	ZIP codes associated with dense neighborhoods that represent the central cities of most major metropolitan areas (more than 4,150 persons/square mile).
2 nd City	ZIP codes associated with moderate-density neighborhoods in population centers (more than 1,000 and fewer than 4,150 persons/square mile).
Suburban	ZIP codes associated with moderate-density neighborhoods that are not surrounded by urban or second-city population centers (estimated to be more than 1,000 persons/square mile and not in an urban or 2 nd city population center).
Town or Rural	ZIP codes associated with isolated small towns or less-developed areas on the exurban frontier (estimated to be more than 210 but fewer than 950 persons/square mile). Small villages and rural hamlets surrounded by productive farmland or wide-open spaces (estimated to be 210 or fewer persons/square mile).

	fewer persons/square mile).
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In order to create the UR_CLRT variable, the ZIP code for each case (within the BESTZIP variable) is assigned to its corresponding urbanization category as provided by Nielson. For cases with missing BESTZIP data, the ZIP code the respondent reports in questionnaire item AM7 is used in order to make this assignment (if AM7 > 90001).

In addition, some respondents report the ZIP code of a PO Box location rather than a ZIP code for a residence. Nielson Inc. provided the “parent ZIP codes” for these PO Box locations. The urbanization categories assigned to the “parent” ZIP codes are used to classify these cases..

The cases with no ZIP code information are imputed to assign a value to UR_CLRT.

UR_CLRT2

Rural and Urban – Claritas (By Zipcode) (2 levels)

Four urbanization categories are defined for the ZIP codes in California by the commercial company Nielson, Inc (please see constructed variable UR_CLRT). The UR_CLRT2 variable is a modified version of the constructed UR_CLRT variable. The UR_CLRT2 variable designates all ZIP codes as either rural or urban.

1. The cases assigned to the urban, 2nd city, or suburban UR_CLRT categories (if UR_CLRT=1, 2, or 3) are considered to be urban (UR_CLRT2=1).
2. The cases assigned to the small town or rural UR_CLRT category (if UR_CLRT=4) are considered to be rural (UR_CLRT2=2).

Note: This variable is particularly useful since it provides an estimate that seems to correspond to the Census definition of urbanized and non-urbanized areas. As Nielson Inc. states, “The rural and small town/exurban classifications are not far from the density cutoff of the Census definition that distinguishes urbanized from non-urbanized areas as those having densities above/below 1,000 persons/square mile.”

UR_IHS

Rural and Urban – Indian Health Service

The UR_IHS variable uses a county-level classification of rural and urban from the Indian Health Service. According to the IHS definition, counties are classified either as urban or rural. All counties (SRCNTY) are classified as either rural or urban using the IHS definition. In addition, the cities of San Diego, Santa Barbara, and Bakersfield are coded as urban.

1. Respondents who report that they live within an urban county are coded as urban (UR_IHS=1).
2. Respondents who report that they live in ZIP codes within the cities of San Diego, Santa Barbara, or Bakersfield are also assigned to the urban category for this variable (UR_IHS=1).
3. Respondents who report that they live within a rural county, but are not in ZIP codes for the cities of San Diego, Santa Barbara or Bakersfield, are considered to be rural (UR_IHS=2).

UR_OMB

Rural and Urban – OMB

The UR_OMB variable reflects the Office of Management and Budget’s (OMB) classification of metropolitan statistical areas (MSAs). Counties are considered to be metropolitan or non-metropolitan

depending on whether or not they are included in an MSA. All except one stratum level in the data file are composed entirely of either metropolitan or non-metropolitan counties.

Each case is tested through the following series of conditions until a UR_OMB value is assigned:

1. The cases with respondents who report that they live within a metropolitan county (SRCNTY) are assigned to the metropolitan category (UR_OMB=1).
2. The cases with respondents who report that they live within a non-metropolitan county (SRCNTY) are assigned to the non-metropolitan category (UR_OMB=2).

UR_RHP

Rural and Urban – Office of Rural Health Policy

THE UR_RHP variable uses an operational classification of rural and urban from the Federal Office of Rural Health Policy (ORHP). The ORHP classifies counties as either rural or urban. The counties are classified with the same criteria that the Office of Management and Budget uses to determine metropolitan and non-metropolitan areas (see UR_OMB). However, to take into account particular rural areas within large urban counties (>1225 square miles), certain census tracts within these counties are designated as rural.

Each case is tested through the following series of steps until a UR_RPH value is assigned:

1. Respondents who report that they live within counties that are designated as rural are coded as rural (UR_RPH=2).
2. The cases with census tracts that are designated as rural, within a large urban county, are assigned to the rural category.
3. The remaining respondents who report that they live within a county that is classified as urban counties are coded as urban (UR_RHP=1).

UR_TRACT

Rural and Urban - Claritas (By Census Tract)

The UR_TRACT variable assigns the definition of rural and urban tract from the commercial company, Nielson, Inc (formerly Claritas). We obtained a file from Nielson Inc. that contains the tracts in California and their associated urbanization categories. Nielson assigns the tracts in California to 4 urbanization categories based on the analysis of population density grids using projected 2013 geoboundaries, redistricting updates, and population estimates.

The urbanization categories are defined by Nielson, Inc. as follows:

Urban	Tracts associated with dense neighborhoods that represent the central cities of most major metropolitan areas (more than 4,150 persons/square mile).
2 nd City	Tracts associated with moderate-density neighborhoods in population centers (more than 1,000 and fewer than 4,150 persons/square mile).
Suburban	Tracts associated with moderate-density neighborhoods that are not surrounded by urban or second-city population centers (estimated to be more than 1,000

	persons/square mile and not in an urban or 2 nd city population center).
Town or Rural	Tracts associated with isolated small towns or less-developed areas on the exurban frontier (estimated to be more than 210 but fewer than 950 persons/square mile). Small villages and rural hamlets surrounded by productive farmland or wide-open spaces (estimated to be 210 or fewer persons/square mile).

In order to create the UR_TRACT variable, the tract for each case is assigned to its corresponding urbanization category as provided by Nielson. For cases with missing tract data, the tract of the respondent reports in questionnaire items AM8 and AM9 is used in order to make this assignment.

The cases with no tract information are imputed to assign a value to UR_TRACT.

OTHER CONSTRUCTED VARIABLES

HHSIZE_P

Household Size (PUF Recode)

The HHSIZE_P variable is a recoded variable based on the HH_SIZE variable that measures household size. The purpose of the household size variable is to combine the number of adults, children, and adolescents in the selected household. The HHSIZE_P variable is created by adding together counts derived from the temporary variables ADLTCNT, CHLDCNT, and TEENCNT.

Note: Top code: 10

PROXY

Proxy Interview

The PROXY variable provides an indicator of whether or not the respondent participated in a proxy interview on behalf of another household member. Respondents serving as proxies are assigned the value PROXY=1. Non-proxy interviews are assigned a value of PROXY=2.

TIMEAD

Length of Time Lived at Current Address

The TIMEAD variable is derived from questionnaire item AM14. This variable is continuous and measures the length of time in months the adult respondent has lived at his/her current address.

SRTENR

Self-Reported Household Tenure (HH)

SRTENR is a Westat-generated variable and is constructed using the adult questionnaire item, AK25. Adult respondents who own their households are assigned a value of SRTENR=1. Adult respondents who rent their households are assigned a value of SRTENR=2. For missing values, AK25 is imputed. For this imputation method, please consult methodology reports by the CHIS data collection vendor, Westat.

INTVLANG**Language of Interview**

The INTVLANG variable indicates the language spoken during the interview by the interviewer and the respondent. This variable was derived from ENGLSPAN (Source Data).

Each case is reassigned to an INTVLANG value based on the following criteria:

Condition:	INTVLANG Value:	INTVLANG Label:
If ENGLSPAN=1	1	English
If ENGLSPAN=2	2	Spanish
If ENGLSPAN=3	3	Vietnamese
If ENGLSPAN=4	4	Korean
If ENGLSPAN=5	5	Cantonese
If ENGLSPAN=6	6	Mandarin

AHCHLDC**Amount Per Week Paid for Child Care**

Adults who have children under 14 and used paid child care in the last month (AH44A) are asked in the questionnaire item to report how much they paid for these services. Respondents reported the amount they paid in the last month or the amount they paid in a typical week.

In order to convert the amount paid in the last month to a weekly unit, the dollar amount (in whole numbers) was divided by four and rounded to the nearest whole number.

Another reason for creating this variable was to present the amounts paid for childcare in range levels. Please see the data dictionary for details.

A few respondents reported that they used paid childcare in the past month, but they did not make a payment. These cases are assigned a value of zero for this variable.

Adults without children under 12, and those who did not use paid childcare in the last month, are assigned a skip value (-1) for this variable.

Remaining respondents are imputed to assign a value.

Appendix A

Recodes of Country of Birth

“Other specified” responses for country of birth were recoded into the following categories using the definitions below (AH33OS, AH34OS, and AH35OS).

Please note: original AH33 response categories were also recoded into the following categories.

1=United States: Includes the 50 states and District of Columbia. Includes dependencies or territories associated with the United States, such as American Samoa, Guam, Puerto Rico, and the Virgin Islands.

2=Mexico: Includes all regions.

3=Central America: Includes all countries that are part of the continent. Excludes the Caribbean islands.

4=Other Latin America: Consists of the 12 countries and 3 territories located south of the Isthmus of Panama on the South American Continent. Also includes the Caribbean islands.

5=Asia and Pacific Islands: Composed of the 47 countries and assorted islands east of Europe. Includes the Middle East and Southeast Asian countries. Also includes the Pacific Islands nations of Polynesia, Melanesia, and Micronesia located in the South Pacific Ocean, such as Fiji, the North Mariana Islands, Palau, Samoa, Tonga, and New Caledonia. Excludes American Samoa and Guam. New Zealand and Australia are also assigned to this category.

6=Europe: Includes the 44 countries and numerous related dependencies, territories, and islands that are considered part of Europe such as the Azores, the Canary Islands and Iceland. Traditionally, the Urals to the east and the Caucasus Mountains to the south form the line of demarcation between Europe and Asia. The part of Russia west of the Urals is sometimes included with Europe. The portion of Turkey west of the Bosphorus is geographically part of Europe. However, because it was not possible to discern where specifically the respondent and his/her parents were from, Russia was coded as Asia, as the entire country is officially part of Asia. Because Turkey is generally classified as a Middle Eastern country, which was included in the Asian category, it was classified as an Asian country.

7=Other: Responses that were unidentifiable and those that were too broad to be coded into one of the above categories were also included in this “other” category. Also includes Canada, those countries located on the African continent, some mid-Indian Ocean islands like Reunion Island and Mauritius, and Cape Verde, an island in the mid-Atlantic Ocean.

Sources:

United States Central Intelligence Agency (CIA) The World Factbook 2001
<http://www.cia.gov/cia/publications/factbook/>

United States Department of State Geographic Learning Site
 Countries and Regions Section
<http://www.state.gov/countries/>

World Atlas.com - uses information from the CIA's The World Factbook 2001
<http://www.worldatlas.com/aatlas/infopage/continent.htm>

For “Pacific Islands” category we used the following sources:

- Pacific Islanders’ Cultural Association Website with a listing of Pacific Islands’ nations

<http://www.pica-org.org/websurf/websurf.html>

- Asian Development Bank Policy Paper “A Pacific Strategy for the New Millennium.” September 2000 http://www.adb.org/Documents/Policies/Pacific_Strategy/default.asp.