RECONTACT SECTION

>RCI_BEGIN<

Ask this question If FAMINT ne FX or SKIPFLAG (L_NO) eq <1>; If NAME@FNAME ne <R> and NAME@FNAME ne <D> and NAME@LNAME ne <R> and NAME@LNAME ne <D> goto PROXY; Else goto NAMVER.

>NAMVER<

RCI.010

FR: Verify or ask if name is missing or was refused or not known. Enter (D) or (R) for any parts of name refused or not known.

If there is no middle initial, leave blank.

First name of {subject name} is : @F
Middle initial of {subject name}: @M
Last name of {subject name} : @L

>PROXY<

RCI.020

FR: Mark first category that applies for {subject name}.

(1) Present for all questions
(2) Present for some questions
(3) Not present

>NCNAM<

RCI.030 Does {subject name} usually go by another first name?

(1) Yes (RCI.040)
(2) No (RCICCII)
(7) Refused (RCICCII)
(9) Don’t know (RCICCII)

>NCNAME<

RCI.040 What is this other first name?

(7) Refused
(9) Don’t know

>RCICCII<

CAPI: If RPSEX eq <1> or RPSEX eq <R> or RPSEX eq <D>, goto FATHNAM; If RPSEX eq <2> and (MARITAL eq <5> or AGE lt <14>), goto FATHNAM; If RPSEX eq <2> and MARITAL eq <6> and COHAB1 ne <1>; goto FATHNAM; else goto MAIDNAM.
>MAIDNAM<

RCI.050 What is {subject name}’s maiden name?

(S) Same as **current** last name (displayed above)
(7) Refused
(9) don’t know

>FATHNAM<

RCI.060 What is {subject name}’s FATHER’S last name?

(S) Same as **current** last name (displayed above)
(7) Refused
(9) Don’t know

>SSN<

**FR: READ TO RESPONDENT(S):**

We also need your Social Security Number. The National Center for Health Statistics will use {Family Respondent}’s Social Security Number to conduct health-related research by linking your survey data with vital statistics and other records. We may also use it if we need to recontact {Family Respondent} or your family. Except for these purposes, the National Center for Health Statistics will not release {Family Respondent}’s SSN to anyone, including any government agency. Providing this information is voluntary and is collected under the authority of the Public Health Service Act. There will be no effect on {Family Respondent}’s benefits if you do not provide it.

**FR: READ IF NECESSARY:** The Public Health Service Act is title 42, United States Code, section 242k.

RCI.070 What is your Social Security Number?

**FR: Enter (N) if no Social Security Number.**

(999999997) Refused
(999999999) Don’t know

>SSN2<

**FR: DO NOT READ TO RESPONDENT(S):**

YOU MIGHT WANT TO ENTER H TO READ SSN HELP SCREEN.

RCI.075 **HAVE YOU CONVINCED THE RESPONDENT TO GIVE YOU THE SOCIAL SECURITY NUMBER?** (H)

(1) Yes (RCI.070)
(2) No (RCI_CCI2)
FR: ENTER HOW SOCIAL SECURITY NUMBER WAS REPORTED.

(1) from Memory  
(2) from Records

FR: SELECT ONE CATEGORY BELOW TO INDICATE REPORTING OF SOCIAL SECURITY NUMBER

(1) Self - in person  
(2) Self - telephone  
(3) Proxy - in person  
(4) Proxy - telephone

FR: READ TO RESPONDENT:

The United States Public Health Service may wish to contact {you/your family} again to obtain additional health related information.

CAPI: [roster end PERSONS]

CAPI: [roster begin PERSONS]

[if FAMINT ne FX or HHSTAT9 ne <G> goto END_CP; else goto RECINTRO - only ask Social Security number of Family Respondent]

CAPI:  

If TELENUM eq <N> [goto TELCEL]  
Else if TELENUM eq <R,D> [goto TELECHG]  
Else [goto TELECHK]

Earlier I recorded the telephone number as {fill TELENUM}. Is this {your/your family's} telephone number?

(1) Yes (RCI.092.010)  
(2) No (RCI.092)  
(7) Refuse (RCI.092.010) {blind}  
(9) Don't know (RCI.092.010) {blind}
>TELECHG<
   RCI.092  What is {your/your family's} telephone number?
   <1000000000-9999999999>
   (7) Refused
   (9) Don't know

>TELCCEL<
   RCI.092.010  Does anyone in your family have a working cellular telephone?
   (1) Yes (RCI_CCI4)  (7) Refused (RCI_CCI4)
   (2) No (RCI_CCI4)  (9) Don't know (RCI_CCI4)

   RCI_CCI4:  If TELCEL=1, go to WRKCEL; else if TELCEL=2,R,D and TELEFAM = N,R,D goto RNOSERV; else if TELCEL=2,R,D and TELEFAM=(valid number) goto TELDIRC

>WRKCEL<
   RCI.092.020  How many working cellular telephones do people in your family have?
   FR:   ENTER (N) FOR NONE
   (__) Number of cellular telephones
   (77) Refused
   (99) Don't know

   RCI_CCI5:  If WRKCEL=1-10,R,D and TELEFAM=N,R,D goto RNOSERV; Else if WRKCEL=1-10,R,D and TELEFAM=(valid number), goto VCELNUM

>VCELNUM<
   RCI.092.030  Is {fill phone number from RCI.092 if asked; else fill from TELENUM} the telephone number for {one of} the cellular phone{s}?
   (1) Yes (RCI.092.040)  (7) Refused (RCI.092.040)
   (2) No (RCI.092.080)  (9) Don't know (RCI.092.040)

>CURWRK<
   RCI.092.040  Is there at least one telephone INSIDE your home that is currently working and is not a cellular telephone?
   (1) Yes (RCI.092.060)  (7) Refused (RCI.093.010)
   (2) No (RCI.093.010)  (9) Don't know (RCI.093.010)

>TELHOME<
   RCI.092.060  What is the telephone number for your home telephone?
   <1000000000-9999999999>
   (7) Refused
   (9) Don't know
TELDIRC
RCI.092.080

[If RCI.092.010=2, read]
Is the number I just mentioned listed in the telephone directory?
[Else]
Is this phone number listed in the telephone directory?

(1) Yes (RCI.093) (7) Refused (RCI.093.010)
(2) No (RCI.093.010) (9) Don't know (RCI.093.010)

TELST
RCI.093

How is this phone number listed in the telephone directory?
(What is the relationship of the person listed in the telephone directory to {fill R_HOFMAN}?)

FR: SPECIFY NAME AND RELATIONSHIP AND/OR OTHER VERBATIM RESPONSE. RECORD UP TO FOUR LINES OF INFORMATION. ENTER (N) WHEN ALL ENTRIES HAVE BEEN MADE.

@A
@B
@C
@D

RNOSERV
RCI.093.010

Not including cellular telephones, has your family been without telephone service for more than one week during the past 12 months?
(1) Yes (7) Refused
(2) No (9) Don't know

MOVE
RCI.096

{Do/Does} {you/your family} expect to move at any time in the next year?

(1) Yes (RCI.097)
(2) No (RCI.100)
(7) Refused (RCI.100)
(9) Don’t know (RCI.100)

MVTIME
RCI.097

Approximately when do you think that will happen?

FR: PROBE FOR MONTH AND YEAR.

   Month: @M  Year: @Y
Where do you expect to move?

FR: PROBE FOR AS MUCH DETAIL AS RESPONDENT CAN PROVIDE -- LOCATION, SPECIFIC ADDRESS IF POSSIBLE [STREET ADDRESS, APT#, CITY, STATE, ZIP]. RECORD UP TO FOUR LINES OF ADDRESS INFORMATION. ENTER (N) WHEN ALL ENTRIES HAVE BEEN MADE.

(N) Nothing/No more notes
(7) Refused
(9) Don’t know

@A
@B
@C
@D

Please give me the names, addresses, and telephone numbers of TWO relatives or friends who would know where {you/your family} could be reached in case we have trouble reaching you.

(Please give me the names of persons not currently living in the household.)

FIRST CONTACT PERSON'S NAME:

First Name:  @F
Middle Initial: @M
Last Name:  @L

What is this person's address?

FR: READ IF NECESSARY: If there is more than one address, please give us the address used most often.  (H) (At STATE only)

ADDRESS1: @ADD1
ADDRESS2: @ADD2
City: @PO
State: @ST
Zip Code: @ZP5 @ZP4
>CPITELNO<
RCI.120 What is this person's telephone number, beginning with the area code?

FR: ENTER THE AREA CODE AND THE NUMBER OR ENTER (N) IF NO PHONE.

Phone Number:  @PHON

Extension:  @EXT

(9999999996) Does not have a telephone {blind}
(9999999997) Refused {blind}
(9999999999) Don’t know {blind}

>CPIREL<
RCI.130 What is the relationship of this contact person to [fill CP1NAME]?

(1) Spouse (Husband or wife)/ex-spouse not living in HH
(2) Unmarried partner not living in HH
(3) Child
(4) Grandchild
(5) Parent (mother or father)
(6) Brother or sister
(7) Grandparent
(8) Other relative
(9) Legal Guardian
(10) Friend
(11) Co-worker
(12) Neighbor
(13) Other
(97) Refused
(99) Don’t know

>CPNAME2<
FR: READ TO RESPONDENT:

Please give us the name, address, and telephone number of the second relative or friend who would also know where you could be reached in case we have trouble reaching you. Again, this should be someone who is not currently living in the household.

RCI.140 SECOND CONTACT PERSON'S NAME:

First Name:  @F

Middle Initial:  @M

Last Name:  @L
What is this person's address?

FR: READ IF NECESSARY: If there is more than one address, please give us the address used most often. (H) (At STATE only)

ADDRESS1: @ADD1
ADDRESS2: @ADD2
City: @PO
State: @ST
Zip Code: @ZP5 @ZP4

What is this person's telephone number, beginning with the area code?

FR: ENTER THE AREA CODE AND THE NUMBER OR ENTER (N) IF NO PHONE.

Phone Number: @PHON
Extension: @EXT

(9999999996) Does not have a telephone {blind}
(9999999997) Refused {blind}
(9999999999) Don’t know {blind}

What is the relationship of this contact person to [fill CP2NAME]?

(1) Spouse (Husband or wife)/ex-spouse not living in HH
(2) Unmarried partner not living in HH
(3) Child
(4) Grandchild
(5) Parent (mother or father)
(6) Brother or sister
(7) Grandparent
(8) Other relative
(9) Legal Guardian
(10) Friend
(11) Co-worker
(12) Neighbor
(13) Other
(97) Refused
(99) Don’t know
If we need to contact {you/your family} again, when are the best times to call or visit?

FR: PROBE FOR DETAIL (FOR EXAMPLE EVENINGS, WEEKENDS, WORK TELEPHONE NUMBER, ETC.). RECORD UP TO FOUR LINES OF INFORMATION. ENTER (N) WHEN ALL ENTRIES HAVE BEEN MADE.

(7) Refused
(9) Don't know

@A
@B
@C
@D

[roster end PERSONS] Store <1> in FCIFLG(FAMINT).

Goto Child section, or Adult section, or next family.