

Variable / Field Name	Form Name	Section Header	Field Type	Field Label	Choices, Calc	Field Note
record_id	consent_form		text	Record ID		
consent_agree	consent_form		radio	Have you read and understood the information?	1, Yes, I agree to participate	
continue_1	consent_form		descriptive	Click 'Submit' below to go to the next screen		
pitt_co_lived	eligibility_questions		yesno	Have you lived in Pitt County since March 1, 2020?		
zip_code	eligibility_questions		text	What is the five-digit zip code of where you live?		
age	eligibility_questions		text	How many years old are you right now?		
continue_2	eligibility_questions		descriptive	Click 'Submit' below to begin the survey		
sex	survey	This first set	radio	What is your sex?	1, Male 2, Female 3, Other	
sex_other	survey		text	Please indicate your sex		
race	survey		radio	What is your race?	1, White/Caucasian 2, Black/African American 3, Hispanic/Latino 4, Asian/Pacific Islander 5, Other	
race_other	survey		text	Please indicate your race		
ethnicity	survey		radio	What is your ethnicity?	1, Hispanic or Latinx 2, Not Hispanic or Latinx	
education	survey		radio	What is the highest grade of school you completed?	1, Never attended school 2, Less than high school 3, High school graduate 4, Some college 5, Bachelor's degree or higher	
income	survey		radio	What was your annual household income in the 12 months before March 1, 2020?	1, Less than \$10,000 2, \$10,000 - \$14,999 3, \$15,000 - \$24,999 4, \$25,000 - \$34,999 5, \$35,000 or more	
household_n	survey		text	How many total people (including yourself) live in your household?		
household_change	survey		radio	How has the number of people living in your household changed since March 1, 2020?	1, Increased by more than 2 people 2, Increased by 1 person 3, Stayed the same 4, Decreased by 1 person 5, Decreased by more than 1 person	
household_u	survey		text	How many of the people in your household speak a language other than English at home?		
language	survey		radio	What is the primary language spoken at home?	1, English 2, Spanish 3, Other	
language_primary	survey		text	What is the primary language spoken in your home?		
informed2	survey	This next section	radio	On a scale from 0 (not at all) to 4 (very much), how much do you understand the information that was given to you?	0, 0 1, 1 2, 2 3, 3 4, 4	
employment	survey		radio	Before March 1, 2020, were you working full-time (30 or more hours per week) or part-time (fewer than 30 hours per week)?	1, Worked full time (30 or more hours per week) 2, Worked part time (fewer than 30 hours per week) 3, Did not work	
employment_status	survey		text	What is your employment status?		
self_employed	survey		yesno	Before March 1, 2020 when the COVID-19 pandemic began, were you self-employed?		
job_type	survey		radio	Of the job (or jobs) you held before March 1, 2020, which best describes your main job?	1, Management, business, or sales 2, Service or retail 3, Health care 4, Education 5, Government 6, Agriculture, forestry, fishing, or hunting 7, Construction, extraction, or mining 8, Manufacturing or transportation 9, Other	
job_descrip	survey		text	How would you describe your main job?		
job_years	survey		text	How many years had you spent at your main job?		
work_outside	survey		radio	In your main job, how often do you work outside?	1, Always 2, Often 3, Sometimes 4, Never	
job_benefits	survey		checkbox	In your main job, do you have access to paid sick leave?	1, Paid sick leave 2, No paid sick leave	

Has your
employment
status changed
since March
1, 2020
when the
COVID-19
pandemic
began in
North
Carolina?

If you are
now
working
from home
for the
same
employer or
only your
work duties
have
changed,
please
select "No,
my

Which of the following best describes your current work schedule?
1, Working full time (30 or more hours per week)
2, Working part time (less than 30 hours per week)
3, Self-employed or contract worker
4, Do you currently consider yourself self-employed?
Of the job (or jobs) you are currently doing, how would you describe your main job?
1, Management, business, sales or finance
2, Professional or technical
3, Service or sales
4, Production, construction, maintenance or other
How often are you working from home?
1, Always | 2, Often | 3, Sometimes | 4, Never
In your main job, how often do you receive paid sick leave?
1, Paid sick leave | 2, Paid time off | 3, Unpaid time off | 4, None
On a scale of 0 to 4, how often do you receive paid sick leave?
0, 0 | 1, 1 | 2, 2 | 3, 3 | 4, 4
Since March 1, 2020, have you received any financial assistance from your employer?
On a scale of 0 to 4, how often do you receive financial assistance from your employer?
0, 0 | 1, 1 | 2, 2 | 3, 3 | 4, 4
Since March 1, 2020, have you received any financial assistance from your employer?
3, Often True | 2, Sometimes True | 1, Not True
Since March 1, 2020, have you received any financial assistance from your employer?
3, Often True | 2, Sometimes True | 1, Not True
Since March 1, 2020, have you received any financial assistance from your employer?
3, Often True | 2, Sometimes True | 1, Not True
Since March 1, 2020, have you received any financial assistance from your employer?
3, Often True | 2, Sometimes True | 1, Not True
For the 12 months ending March 1, 2020, how often do you receive financial assistance from your employer?
3, Often True | 2, Sometimes True | 1, Not True
For the 12 months ending March 1, 2020, how often do you receive financial assistance from your employer?
3, Often True | 2, Sometimes True | 1, Not True

employment_survey	yesno	
employment_survey	radio	
self_employment_survey	yesno	
job_type_current_survey	radio	
job_description_survey	text	
work_outside_survey	radio	
job_benefits_survey	checkbox	
lose_job_like_survey	radio	
fewer_work_survey	yesno	
fewer_work_survey	radio	
food_household_survey	radio	This next set
food_balance_survey	radio	
food_cut_skills_survey	radio	
food_eat_less_survey	radio	
food_hungry_survey	radio	
food_stress_survey	radio	
food_household_survey	radio	We would not
food_balance_survey	radio	

food_cut_ski survey	radio	For the 12 m 3, Often True 2, Sometir
food_eat_les survey	radio	For the 12 m 3, Often True 2, Sometir
food_hungry_ survey	radio	For the 12 m 3, Often True 2, Sometir
food_stresse survey	radio	For the 12 m 3, Often True 2, Sometir
saving_mone survey	The next set radio	How has the 1, I'm saving a lot more
spending_m survey	radio	How has the 1, I'm spending a lot more
borrow_mon survey	radio	How has the 1, I'm borrowing a lot mor
income_char survey	radio	How do you t 1, Decrease significantly
money_3mo survey	radio	On a scale of 0, 0 1, 1 2, 2 3, 3 4
fin_support survey	radio	On a scale of 0, 0 1, 1 2, 2 3, 3 4
pay_med_bil survey	checkbox	Suppose that 1, put it on my credit card
charity survey	radio	How has the 1, My use of public assista
homeschool survey	radio	How difficult 1, not difficult 2, somew
caregiver survey	yesno	Before the COVID-19 pandemic, did you
continued_c survey	radio	How difficult 1, not difficult 2, somewl

This
following
sets of
questions
ask about
your mental
health and
wellness
since March
1, 2020
when the
COVID-19
pandemic
began in
North
Carolina.

First, we
want to
know how
serious of a
problem
you think
COVID-19

covid_prob_r survey	is. radio	How serious 4, Very serious 3, Somev
covid_prob_c survey	radio	How serious 4, Very serious 3, Somev
covid_prob_t survey	radio	How serious 4, Very serious 3, Somev

covid_prob_v	survey		radio	How serious 4, Very serious 3, Somev
getting_hc	survey	The COVID-1	radio	Getting the l 3, Very concerned 2, Son
place_live	survey		radio	Having a plac 3, Very concerned 2, Son
interact	survey		radio	Being able to 3, Very concerned 2, Son
getting_food	survey		radio	Getting food 3, Very concerned 2, Son
getting_med	survey		radio	Getting med 3, Very concerned 2, Son
transport	survey		radio	Having trans 3, Very concerned 2, Son
caring_fam_	survey		radio	Caring for m 3, Very concerned 2, Son
stress	survey		radio	How signific 4, Very significant 3, Som
anxiety	survey	During the la	radio	Feeling nerv 1, Not at all 2, Several d
worry1	survey		radio	Not being ab 1, Not at all 2, Several d
worry2	survey		radio	Worrying to 1, Not at all 2, Several d
relaxing	survey		radio	Trouble relax 1, Not at all 2, Several d
restless	survey		radio	Being so rest 1, Not at all 2, Several d
irritable	survey		radio	Becoming ea 1, Not at all 2, Several d
afraid	survey		radio	Feeling afrai 1, Not at all 2, Several d
difficulty_adj	survey		radio	How difficult 1, Not difficult 2, Somewl
loss_of_inter	survey	During the la	radio	Little interes 1, Not at all 2, Several d
depressed	survey		radio	Feeling down 1, Not at all 2, Several d
sleep_habits	survey		radio	Trouble fallir 1, Not at all 2, Several d
little_energy	survey		radio	Feeling tired 1, Not at all 2, Several d
appetite	survey		radio	Poor appetit 1, Not at all 2, Several d
bad_feelings	survey		radio	Feeling bad i 1, Not at all 2, Several d
concentration	survey		radio	Trouble conc 1, Not at all 2, Several d
fidgety	survey		radio	Moving or sp 1, Not at all 2, Several d
thoughts_hu	survey		radio	Thoughts tha 1, Not at all 2, Several d
difficulty_adj	survey		radio	How difficult 1, Not difficult 2, Somewl
greater_risk_	survey	During the la	radio	I believed th 1, Yes 2, No 3, I was n
stress_job	survey		radio	I felt extra st 1, Yes 2, No 3, I was n
falling_ill	survey		radio	I was afraid i 1, Yes 2, No
control	survey		radio	I felt I had lit 1, Yes 2, No
survival	survey		radio	I thought I w 1, Yes 2, No
resigning	survey		radio	I thought abc 1, Yes 2, No 3, I was n
pass_covid	survey		radio	I was afraid i 1, Yes 2, No
infect_fam_f	survey		radio	My family ar 1, Yes 2, No
avoidance	survey		radio	People avoid 1, Yes 2, No
accept_risks	survey		radio	I was willing 1, Yes 2, No 3, I have n
contact_worl	survey		radio	How regularl 5, Always 4, Often 3, S
contact_clier	survey		radio	How regularl 5, Always 4, Often 3, S
gloves_acces	survey		radio	How often d 5, Always 4, Often 3, S
gloves_use	survey		radio	How often d 5, Always 4, Often 3, S
mask_access	survey		radio	How often d 5, Always 4, Often 3, S
mask_use	survey		radio	How often d 5, Always 4, Often 3, S

wash_hands survey		radio	How often do 5, Always 4, Often 3, S
sanitize_hands survey		radio	How often do 5, Always 4, Often 3, S
worry_exposed survey		radio	How worried 5, Always worried 4, Oft
This next set of questions asks you about different activities you may do to protect yourself or others from COVID-19 during your daily activities. How often have you done the following things to protect yourself and others since March 1, 2020 when			
mask_worn survey	radio	Worn a face	5, Always 4, Most of the
wash_sanitized survey	radio	Washed hands	5, Always 4, Most of the
six_feet survey	radio	Stayed at least	5, Always 4, Most of the
avoid_crowds survey	radio	Avoided large	5, Always 4, Most of the
avoid_highrisk survey	radio	Avoided contact	5, Always 4, Most of the
avoid_restaurants survey	radio	Avoided food	5, Always 4, Most of the
work_home survey	radio	Worked or studied	5, Always 4, Most of the
avoid_handsling survey	radio	Avoided shaking	5, Always 4, Most of the
stayed_home survey	radio	Stayed home	5, Always 4, Most of the
disinfectant survey	radio	Wiped down	5, Always 4, Most of the
cancel_travel survey	radio	Cancelled or	5, Always 4, Most of the
cancel_travel survey	radio	Cancelled or	5, Always 4, Most of the
cancel_social survey	radio	Cancelled or	5, Always 4, Most of the
cancel_doctor survey	radio	Cancelled a	5, Always 4, Most of the
stockpile survey	radio	Stockpiled food	5, Always 4, Most of the

follow_guide	survey	radio	Followed go 5, Always 4, Most of the
protected	survey	radio	In general, w 1, I've done nothing differ
restrictions	survey	yesno	Since May 22 when stay home restrictio
vaccine	survey	radio	Do you plan t 1, Yes 2, Maybe 3, No
insurance	survey	This section :	Are you covered by any type of medical
insurance_ty	survey	radio	What is the p 1, Private health insurance
insurance_sp	survey	text	Please specify what other health insura
insurance_tir	survey	radio	About how l 1, Less than 6 months 2,
insurance_lo	survey	radio	Was there a 1, yes 2, no 3, I do not
insurance_tir	survey	radio	About how l 1, Less than 6 months 2,
height_ft	survey	text	What is your height right i Feet
height_in	survey	text	Inches
weight	survey	text	What is your weight right now in pound
allergies	survey	Have you eve radio	Allergies 1, Yes 2, No 3, Don't kr
asthma	survey	radio	Asthma 1, Yes 2, No 3, Don't kr
diabetes	survey	radio	Diabetes 1, Yes 2, No 3, Don't kr
hypertension	survey	radio	Hypertensio 1, Yes 2, No 3, Don't kr
cardiovascular	survey	radio	Cardiovascul 1, Yes 2, No 3, Don't kr
respiratory	survey	radio	Chronic respi 1, Yes 2, No 3, Don't kr
kidney	survey	radio	Chronic kidn 1, Yes 2, No 3, Don't kr
liver	survey	radio	Chronic liver 1, Yes 2, No 3, Don't kr
lung_cancer	survey	radio	Lung cancer 1, Yes 2, No 3, Don't kr
cancer	survey	radio	Other cancer 1, Yes 2, No 3, Don't kr
immunocom	survey	radio	Weakened ir 1, Yes 2, No 3, Don't kr
other_chroni	survey	radio	Other chroni 1, Yes 2, No 3, Don't kr
chronic_type	survey	text	What other chronic medical condition(s
pregnant	survey	radio	Are you curre 1, Yes 2, No 3, Don't kr
tested_covid	survey	radio	Since March 1, Yes 2, No 3, Don't Kr
tested_covid	survey	radio	What was th 1, Had symptoms of COVID
tested_covid	survey	text	What was the reason you were tested f
result_covid_survey	survey	radio	What was th 1, Positive 2, Negative
smoke_statu	survey	This section :	Have you eve 1, Yes, I currently smoke
smoke_days	survey	text	How many days per week do you smoke
smoke_numl	survey	text	What is the average number of cigarett
ecig	survey	radio	Have you eve 1, Yes, I currently use then
ecig_days	survey	text	How many days per week do you use el
ecig_number	survey	text	What is the average number of cartridg
alcohol	survey	radio	Have you eve 1, Yes, I currently drink 2
alcohol_days	survey	text	How many days per week do you drink?
alcohol_num	survey	text	What is the average number of drinks y
vaccine_flu	survey	radio	Did you recei 1, Yes 2, No 3, Don't kr
vaccine_flu_t	survey	radio	How often d 1, Every flu season 2, Mo
health_rating	survey	radio	In general, h 5, Excellent 4, Very good

health_rating	survey	radio	In general, how do you rate your health? 5, Excellent 4, Very good
health_moderate	survey	radio	During the last four weeks, have you been limited a lot by your health? 3, Yes, limited a lot 2, Yes, limited a little 1, Not at all
stairs	survey	radio	During the last four weeks, have you been limited a lot by your health? 3, Yes, limited a lot 2, Yes, limited a little 1, Not at all
accomplished	survey	yesno	During the last four weeks, have you been able to do all the things you usually do? Yes No
limited_world	survey	yesno	During the last four weeks, have you been able to do all the things you usually do? Yes No
pain_interference	survey	radio	During the last four weeks, how much has your pain interfered with your normal activities? 1, Not at all 2, A little bit 3, Moderately 4, Quite a bit 5, Very much
calm	survey	radio	How much time do you spend feeling calm or relaxed? 6, All of the time 5, Most of the time 4, Some of the time 3, A little of the time 2, Not at all
energy_level	survey	radio	How much time do you spend feeling energetic? 6, All of the time 5, Most of the time 4, Some of the time 3, A little of the time 2, Not at all
downhearted	survey	radio	How much time do you spend feeling downhearted or discouraged? 6, All of the time 5, Most of the time 4, Some of the time 3, A little of the time 2, Not at all
physical_emotion	survey	radio	During the last four weeks, how often have you experienced physical symptoms such as dizziness, lightheadedness, or shortness of breath? 6, All of the time 5, Most of the time 4, Some of the time 3, A little of the time 2, Not at all
physical_activity	survey	yesno	At least once a week, do you engage in any physical activity? Yes No
exertion_level	survey	radio	When you are engaged in physical activity, how often do you feel exertion? 1, Easy / Warm-up 2, Moderate 3, Hard 4, Very hard 5, Extremely hard
physical_activity	survey	text	On average, how many days per week do you engage in physical activity?
physical_activity	survey	text	On average, how many minutes per day do you engage in physical activity?
survey_completed	survey	radio	Did anyone else help you complete this survey? 1, Yes 2, No 3, Don't know
survey_taken	survey	radio	How did you take the survey? 1, Computer or Laptop 2, Smartphone 3, Tablet
heard_about	survey	checkbox	Please tell us how you heard about this study: 1, AMEXCAN 2, Chamber of Commerce 3, Local business 4, Other
heard_about	survey	text	How did you hear about this study?

These final two

to be
entered in
the drawing
for one of
the \$100
gift cards to
Amazon or
Walmart,
please
provide your
name and
contact
information
. This
information
will only be
used for
contacting
you if your
name is
drawn.
After the
drawing (in
July or
August), all
contact

text survey_completion
fname_draw survey_completion
lname_draw survey_completion
phone_draw survey_completion
email_draw survey_completion

descriptive
text First Name:
text Last Name:
text Phone Number:
text Email Address:

if you are interested in participating in additional COVID-19 studies, we are already planning a follow-up study that will investigate the following questions:

- How common is COVID-19 infection?
- How common is it for

follow_conta	survey_completion	descriptive	individuals
fname_conta	survey_completion	text	First Name:
lname_conta	survey_completion	text	Last Name:
phone_conta	survey_completion	text	Phone Number:
email_conta	survey_completion	text	Email Address:
continue_3	survey_completion	descriptive	Click 'Submit' below to finish the survey

Text Validati Text Validati Text Validati Identifier? Branching Lo Required Fie Custom Aligr

te | 0, No, I do not want to participate y
 urvey form.
 :h 1, 2020 or longer? y
 integer 10000 99999 y
 integer 0 120 y
 /.
 ither | 4, Prefer not to answer y
 [sex] = '3'
 lack or African American | 3, Asian | 4, American Indian or Alaska y
 [race] = '6'
 lot Hispanic or Latinx | 3, Prefer not to answer y
 | 2, Kindergarten through 8th grade | 3, Some high school | 4, High y
 \$10,000-\$19,999 | 3,\$20,000-\$29,999 | 4, \$30,000-\$49,999 | 5, \$5 y
 integer
 two people | 2, Increased by one or two people | 3, The number has not changed | 4, Decrease y
 integer
 , Other y
 i your household? [language] = '3'
 . 4 | 5, 5 | 6, 6 | 7, 7 | 8, 8 | 9, 9 | 10, 10
 more hours/week) | 2, Worked part time (less than 30 hours/week | 3, Was looking for work
 [employment]= '11'
 19 pandemic began in North Carolina, did you consider [employment] = '1' or [employment] = '1'
 or finance | 2, Computer, mathematics, data science [employment] = '1' or [employment] = '1'
 , [job_type] = '12'
 integer [employment] = '1' or [employment] = '1'
 metimes | 4,Hardly ever | 5,Never [employment] = '1' or [employment] = '1'
 vacation/personal leave | 3, Health insurance | 4, Disability [employment] = '1' or [employment] = '1'

[illegible]

nes true | 1, Never true | 9, I don't know
nes true | 1, Never true | 9, I don't know
nes true | 1, Never true | 9, I don't know
nes true | 1, Never true | 9, I don't know
2, I'm saving a little more | 3, I'm saving the same | 4, I'm saving a little less | 5, I'm saving
| 2, I'm spending a little more | 3, I'm spending the same | 4, I'm spending a little less | 5,
e | 2, I'm borrowing a little more | 3, I'm borrowing the same | 4, I'm borrowing a little less
2, Decrease slightly | 3, Stay the same | 4, Increase slightly | 5, Increase significantly
, 4 | 5, 5 | 6, 6 | 7, 7 | 8, 8 | 9, 9 | 10, 10
, 4 | 5, 5 | 6, 6 | 7, 7 | 8, 8 | 9, 9 | 10, 10
and pay it in full at the next statement | 2, put it on my credit card and pay it off over time |
nce or charity has increased a lot | 2, My use of public assistance or charity has increased a li
hat difficult | 3, very difficult | 4, extremely difficult [household_under18] > '0'
I have regular caregiving responsibilities for someone who didn't live in your household (ex. el
hat difficult | 3, very difficult | 4, extremely difficult [caregiver] = '1'

what serious | 2, Not too serious | 1, Not at all serious | 9, Don't know
what serious | 2, Not too serious | 1, Not at all serious | 9, Don't know
what serious | 2, Not too serious | 1, Not at all serious | 9, Don't know

what serious | 2, Not too serious | 1, Not at all serious | 9, Don't know
newhat concerned | 1, Not at all concerned | 9, Don't know
newhat concerned | 1, Not at all concerned | 9, Don't know
newhat concerned | 1, Not at all concerned | 9, Don't know
newhat concerned | 1, Not at all concerned | 9, Don't know
newhat concerned | 1, Not at all concerned | 9, Don't know
newhat concerned | 1, Not at all concerned | 9, Don't know
newhat significant | 2, Not very significant | 1, Not at all significant
ays | 3, More than half the days | 4, Nearly every day
ays | 3, More than half the days | 4, Nearly every day
ays | 3, More than half the days | 4, Nearly every day
ays | 3, More than half the days | 4, Nearly every day
ays | 3, More than half the days | 4, Nearly every day
ays | 3, More than half the days | 4, Nearly every day
ays | 3, More than half the days | 4, Nearly every day
hat difficult | 3, Very difficult | 4, Extremely difficult [anxiety] = '2' or [anxiety] = '3' or [anxi
ays | 3, More than half the days | 4, Nearly every day
ays | 3, More than half the days | 4, Nearly every day
ays | 3, More than half the days | 4, Nearly every day
ays | 3, More than half the days | 4, Nearly every day
ays | 3, More than half the days | 4, Nearly every day
ays | 3, More than half the days | 4, Nearly every day
ays | 3, More than half the days | 4, Nearly every day
ays | 3, More than half the days | 4, Nearly every day
ays | 3, More than half the days | 4, Nearly every day
hat difficult | 3, Very difficult | 4, Extremely difficult [loss_of_interest] = '2' or [loss_of_inter
ot working during the last two weeks
ot working during the last two weeks

not been working with COVID-19 patients

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(([employment] = '1' or [employment] :
```

(([employment] = '1' or [employment] :

$$N([employment] = '1' \text{ or } [employment] = '0')$$

time | 1, Never

time | 1, Never

time | 1, Never

time | 1, Never

time | 1, Never

time | 1, Never

time | 1, Never | 9, Not applicable

time | 1, Never

time | 1, Never | 9, Not applicable

time | 1, Never

time | 1, Never

time | 1, Never

time | 1, Never

time | 1, Never

time | 1, Never

time | 3, Half of the time | 2, Less than half of the time | 1, Never
ently| 2, I've done things differently less than half the time | 3, I've done things differently abo
ons began to be lifted, have you continued to do thing [protected] = '2' or [protected] = '3' or [

or health insurance (including private insurance, insurance you purchased, Medicare, Medicaid
through a job or school | 2, Insurance purchased thro [insurance] = '1'

nce you have [insurance_type] = '9'

More than 6 months but less than 1 year | 3, More th [insurance] = '1'

know [insurance] = '1'

More than 6 months but less than 1 year | 3, More th [insurance] = '0'

integer

integer

ls?

row

row

row

row

row

row

row

row

row

row

row

row

) have you been diagnosed with? [other_chronic] = '1'

row [sex] = '2'

row

D-19 | 2, Close contact of person who had COVID-19 | [tested_covid] = '1'

or COVID-19? [tested_covid_reason] = '4'

3, Inconclusive | 4, Still waiting on the result [tested_covid] = '1'

2, Yes, but I no longer smoke | 3, No, I have never smoked

integer 1 7 [smoke_status] = '1'

es, cigars, or pipe bowls you smoke on the days you s [smoke_status] = '1'

n | 2, Yes, but I no longer use them | 3, No, I have never used them

integer 1 7 [ecig] = '1'

es you use on the days you use electronic cigarettes? [ecig] = '1'

, Yes, but I no longer drink | 3, No, I have never

integer 1 7 [alcohol] = '1'

ou have on the days you drink? (One drink is equal to [alcohol] = '1'

row

st flu seasons | 3, Half of the flu seasons | 4, Less than half of the flu seasons | 5, Never

| 3, Good | 2, Fair | 1, Poor

| 3, Good | 2, Fair | 1, Poor

es, limited a little | 1, No, not limited at all

es, limited a little | 1, No, not limited at all

omplished less than you would like as a result of your physical health?

en limited in the kind of work or other activities as result of your physical health?

| 3, Moderately | 4, Quite a bit | 5, Extremely

: of the time | 4, A good bit of the time | 3, Some of the time | 2, A little of the time | 1, No

: of the time | 4, A good bit of the time | 3, Some of the time | 2, A little of the time | 1, No

: of the time | 4, A good bit of the time | 3, Some of the time | 2, A little of the time | 1, No

: of the time | 4, A good bit of the time | 3, Some of the time | 2, A little of the time | 1, No

regular activity like walking, jogging, bicycling, swimming, etc. long enough to work up a sweat
edium (can hold a conversation) / Aerobic Development [physical_activity] = '1'

do you engage in this kind of exercise? [physical_activity] = '1'

/ do you engage in this kind of exercise? [physical_activity] = '1'

ow

, Tablet | 3, Smartphone | 4, Over the phone

r of Commerce web/Facebook page | 3, Church email/webpage/Facebook | 4, Daily Reflection
[heard_about_study(19)] = '1'

phone
email

y
y
y
y

phone
email
/.

y
y
y
y

Question Nui Matrix Group Matrix Ranki Field Annotation

sed by one or two people | 5,Decreased by more than two people

k/employment | 4,Was unemployed but not looking for work | 5, Retired | 6, Caretaker/Stay

'2'

'2'

'2'

'2'

'2'

ment_current] = '2'
ment_current] = '2'

ment_current] = '2'
ment_current] = '2'
= '2') AND [employment_chg] = '0') OR (([employment_current] = '1' or [employment_curren
= '2') AND [employment_chg] = '0') OR (([employment_current] = '1' or [employment_curren

a lot less

I'm spending a lot less

| 5, I'm borrowing a lot less

3, pay with money currently in savings/checking | 4, pay with money from a bank loan | 5, p
ttle | 3, My use of public assistance or charity has stayed the same | 4, My use of public assist

lderly parent or sibling who you regularly visited and supported, etc.)?

$$\text{worry1} = '4' \text{ or } [\text{worry1}] = '2' \text{ or } [\text{worry1}] = '3' \text{ or } [\text{worry1}] = '4' \text{ or } [\text{worry2}] = '2' \text{ or } [\text{worry2}] = '3' ,$$

rest] = '3' or [loss_of_interest] = '4' or [depressed] = '2' or [depressed] = '3' or [depressed] =

[illegible]

= '2') AND [work_outside_home] < '5' AND [employment_chg] = '0') OR (([employment_curre
= '2') AND [work_outside_home] < '5' AND [employment_chg] = '0') OR (([employment_curre
= '2') AND [work_outside_home] < '5' AND [employment_chg] = '0') OR (([employment_curre

out half the time | 4, I've done things differently most of the time | 5, I've done things differer
[protected] = '4' or [protected] = '5'

id, or any other health insurance program)?

ne of the time
ne of the time
ne of the time
ne of the time
:at, get your heart thumping, or get out of breath?

r County page | 5, ECU Graduate Medical Student announcement | 6, ECU Physicians office fl

at home | 7, Student | 8, On maternity/paternity leave | 9, On illness/sick leave | 10, On dis

```
t] = '2'))  
t] = '2'))
```

pay with money borrowed from family or friends | 6, pay using a payday loan/deposit advance
assistance or charity has decreased a little | 5, My use of public assistance or charity has decreased

or [worry2] = '4' or [relaxing] = '2' or [relaxing] = '3' or [relaxing] = '4' or [restless] = '2' or [re

'4' or [sleep_habits] = '2' or [sleep_habits] = '3' or [sleep_habits] = '4' or [little_energy] = '2'

[illegible]

ent] = '1' or [employment_current] = '2') AND [work_outside_home_curr] < '5')

ent] = '1' or [employment_current] = '2') AND [work_outside_home_curr] < '5')

ent] = '1' or [employment_current] = '2') AND [work_outside_home_curr] < '5')

ntly all of the time

ier | 7, ECU Pediatrics office flier Pitt County Schools | 8, Friend told me about it | 9, Greenv

ability | 11, Other

:/overdraft | 7, pay by selling something else | 8, I wouldn't be able to pay | 9, other
d a lot

stless] = '3' or [restless] = '4' or [irritable] = '2' or [irritable] = '3' or [irritable] = '4' or [afraid]

or [little_energy] = '3' or [little_energy] = '4' or [appetite] = '2' or [appetite] = '3' or [appetit

ille EMS/Fire/Police announcement | 10, Local news coverage (television; radio) | 11, Pitt Co

= '2' or [afraid] = '3' or [afraid] = '4'

e] = '4' or [bad_feelings] = '2' or [bad_feelings] = '3' or [bad_feelings] = '4' or [concentration

Community College announcement | 12, Pitt County Health Department web/Facebook page | :

] = '2' or [concentration] = '3' or [concentration] = '4' or [fidgety] = '2' or [fidgety] = '3' or [fid

13, Pitt County Health Department clinic flier | 21, Pitt County Health Department community

gety] = '4' or [thoughts_hurting] = '2' or [thoughts_hurting] = '3' or [thoughts_hurting] = '4'

r testing day | 14, Pitt County Public Schools webpage/Facebook | 15, Pitt County Volunteer E

MS announcement | 16, Pitt Partners for Health email/webpage/Facebook | 17, Vidant hous

e staff email/announcement | 20, Vidant healthcare provider | 18, West Greenville Health C

ounsel email/webpage/Facebook | 19, Other