

2010 NHAS Cross-sectional Survey - Public Data

Data Description Ver. 1.0

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Contact:

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1. Methodology

This study utilized a cross-sectional survey design and collaborated with eleven agencies across the United States to better understand the risk and protective factors impacting the health and well-being of lesbian, gay, bisexual, and transgender (LGBT) older adults, defined as aged 50 years and older.

Data was gathered over a six-month period from June 2010 to November 2010 via a self-administered survey questionnaire. Participating agencies mailed 4,650 paper surveys with invitation letters via agency contact lists. Two weeks following the initial distribution of the survey, a reminder letter was sent. Two weeks later, a second reminder letter was sent. Of the surveys, 647 were not mailed, 245 had incomplete addresses and 157 were not deliverable (e.g., wrong address or deceased). In addition, 81 of the returned surveys did not meet criteria for inclusion in the study (e.g., respondent was not LGBT or was younger than 50 years of age). A total of 2,201 usable surveys were returned via mail for a response rate of 63 percent.

For the agencies with electronic mailing lists, a similar web-based survey was used. The same protocol for survey distribution was used: an electronic invitation letter including a web link for the survey was sent, with a two-week reminder. Two weeks after the first reminder, a follow-up reminder was sent; 390 electronic surveys were returned. Of these, 31 did not meet criteria for inclusion in the study. Thus, a total of 359 electronic surveys were obtained.

The total N for the survey including both mail and electronic surveys was 2,560, the largest sample to date of LGBT older adults. All study procedures were reviewed and approved by the University of Washington Institutional Review Board.

2. Processing Notes

- 1) Restricted-Use/Confidentiality: Users interested in obtaining these data from NHAS must send a signed NHAS Data Request Application to <u>AgePride@uw.edu</u> or Aging with Pride, University of Washington, 4101 15th Ave NE, Seattle, WA 98195-9472. After receipt of the application it will be reviewed by the Data Access Review Committee. If approved, Investigator(s) must sign an NHAS Data Use Agreement and send it to <u>AgePride@uw.edu</u> or Aging with Pride, University of Washington, 4101 15th Ave NE, Seattle, WA 98195-9472. Users can download these forms from <u>Age-Pride.org</u> on the Researchers' tab.
- 2) Sequential Record Identifier: The original study identification numbers of the participants are not included in this public data. NHAS created a unique sequential record identifier named *case id* for the NHAS 2010 Survey Public Data.
- 3) To minimize the risk of indirect identification and increase data confidentiality, sub-state geographic identifiers (county, city, and zip code) and sensitive variables (e.g. HIV/AIDS diagnosis year) are excluded from the NHAS 2010 Survey Public Data.
- 4) Responses to open-ended questions are not included in the NHAS 2010 Survey Public Data. Responses to "Other: Please Specify" were reviewed and back-coded to existing categories if applicable.

3. Key Terms and Measures

Below are descriptions of the key terms and measures used in this data. Variable names corresponding to each measure are shown in parentheses.

Socio-demographic characteristics

Sexual orientation (sexorien64): Participants were asked to select from the following categories: gay; lesbian; bisexual; heterosexual or straight; or other.

Gender identity (transgen, transgen_s, out1trgen, out2trgen): Assessed by the following questions: "Are you transgender?" (yes or no), and "How old were when you first considered yourself transgender?" Participants were also asked: "If transgender, are you female to male (FTM), male to female (MTF), or other?"

Sex (gendr): Participants were asked to select from the following categories: female; male; or other.

Age (age_c, impage3_80): Calculated from participants' year of birth at the time of survey response. To protect confidentiality, participants aged 80 and older were collapsed into a single age category.

Race and ethnicity (hispanic, racehisp8): Participants were asked whether they were Hispanic or Latino (yes or no) and were asked to select their race. The data provide a race/ethnicity variable: Hispanic; non-Hispanic White; non-Hispanic Black or African American; non-Hispanic Asian; non-Hispanic Native Hawaiian or Other Pacific Islander; non-Hispanic American Indian or Alaskan Native; non-Hispanic other; or non-Hispanic multiracial.

Income (*income6*): Participants selected their annual household income from the following categories: less than \$20,000; \$20,000 to \$24,999; \$25,000 to \$34,999; \$35,000 to \$49,999; \$50,000 to \$74,999; \$75,000 or more.

Education (educa): Determined by the highest grade of school completed. Categories included: never attended school or only attended kindergarten; grades 1 - 8; grades 9 - 11; grade 12 or GED; college 1 - 3 years; college 4 or more years.

Employment (employ, v05a1, v05a2, v05a3, v05a4, v05a5): Participants were asked if they had been employed full or part-time during the past 12 months (yes or no). If not employed, they were asked for the main reason they were not working. Categories included: retired; ill or disabled; taking care of home or family; unable to find work; or doing something else.

Military service (milit): Participants were asked if they had served in the military (yes or no).

Relationship status (relation2): Participants were asked to select their current relationship status: single, partnered, married, divorced, widowed, or separated. Relationship status was dichotomized: married or partnered; or other.

Living arrangement (Ivarr, Ivpartn, Ivfam, Ivnonfam): Participants selected from the following categories: living alone; with a partner/spouse; with other family members; or with non-family members.

Death of same-sex partner (loss): Participants were asked whether they had experienced the death of a same-sex partner or spouse (yes or no).

Housing (housing): Determined by asking participants to select the type of housing in which they currently lived. Categories included: own a house or apartment; rent; senior housing; assisted living; nursing home; homeless; or other.

Geographic location (rucacode): Urbanity was determined by RUCA codes (http://depts.washington.edu/uwruca/ruca-codes.php).

Resilience

Disclosure (out_mom, out_dad, out_bro, out_sis, out_child, out_gchild, out_gparent, out_friend, out_superv, out_neighbor, out_faith, out_physician, outness): This study modified the 12-item Outness Inventory scale¹ and used a 4-point Likert scale to measure whether specific individuals knew the participants' sexual orientation or gender identity, including mother; father; brothers; sisters; children; grandchildren; grandparents; best friend; current or most recent work supervisor; neighbors; faith community; and primary physician. Participants' average "outness" scores were calculated from 12 items to examine the overall level of outness. The range of the score is 1 to 4 with higher scores indicating greater levels of disclosure.

Community belonging (colest_f, colest_g, colest): Measured by asking to what degree participants agreed with the statement "I feel good about belonging to the LGBT community," measured on a 4-point Likert scale. The measure was adapted from the Collective Self-Esteem scale.² Higher scores indicate greater community belonging.

Social network size (v72aa, v72ba, v72ca, v72da, v72ea, v72ab, v72bb, v72cb, v72db, v72eb, network, networkquar): Assessed by asking participants how many people (e.g. friends, family members, colleagues, and neighbors) they had interacted with in a typical month. Participants were also asked to report the size of their social networks by sexual orientation and gender identity as well as by age (50 and older and younger than 50). Networks were summed to calculate the total social network size and categorized by quartiles so eliminate potential outlier effects, with 1 indicating a small network (bottom 25%) and 4 indicating a large social network (top 25%).

Social support (socsup1, socsup2, socsup3, socsup4, socsup): The 4-item abbreviated Social Support Instrument³ was adapted to measure the degree of perceived social support, using a 4-point Likert scale. The items measured if participants had someone they could turn to for instrumental support (i.e. "to help with daily chores if you were sick") and emotional support (i.e. "to do something enjoyable with"). Higher scores indicate greater social support.

Religious and spiritual activity (relignum): Participants were asked how often during the past thirty days they had attended spiritual or religious services or activities.

Health risks

Victimization (disc_a – disc_f, disc_n – disc_p, vict_g – vict_m, discr_sum, vict_sum, discvict): Assessed using 16 items adapted from the 9-item MacArthur Foundation National Survey of Midlife Development in the United States (MIDUS)⁴ and a 7-item victimization survey.⁵ Participants were asked how many times in their lives ("never, once, twice, three or more times") they had experienced types of

victimization and discrimination related to their actual or perceived sexual orientation or gender identity. Examples include being denied healthcare or provided with inferior healthcare; being hassled by the police; physical or verbal assault; being denied a job; being fired from a job; or being prevented from living in a neighborhood. A 4-point Likert scale was used, with higher scores indicating more experiences of victimization.

Internalized stigma (stg_a – stg_e, stigma): A 5-item measure (using a 4-point Likert scale) adapted from Bruce, which asks participants to what extent they agree with various statements related to their sexual or gender identity, such as "I wish I weren't lesbian, gay, bisexual or transgender," "I have tried to not be lesbian, gay, bisexual or transgender," and "I feel that being lesbian, gay, bisexual or transgender is a personal shortcoming for me." The range is 1 to 4 with higher scores indicating higher levels of internalized stigma.

Abuse by a partner, family member, or close friend (physiviol, verbalviol): Physical abuse was assessed by whether "in the past year" the participant had been "hit, slapped, pushed, shoved, punched, or threatened with a weapon" by a partner, family member or close friend. Verbal abuse was assessed by whether "in the past year" the participant was "severely criticized, made fun of, told you were stupid or worthless, or threatened verbally to harm you, your possessions or pets" by a partner, family member or close friend.

Physical health (v20a – v20d, qolphy): Measured using four items of the SF-8 Health Survey.⁷ The scale measures a participant's overall subjective assessment of physical health. The range is 0 to 100 with higher scores indicating better perceived physical health. In addition, an individual item was utilized to measure general health: "Overall, how would you rate your health during the past 4 weeks?" Response categories were dichotomized as poor (very poor; poor; fair) and good (good; very good; excellent).

Disability (limitact, equip, disable): Defined as being limited in any activities due to physical, mental, or emotional problems, or having any health problem that requires the use of special equipment (e.g. cane, special telephone), based on the definition recommended by *Healthy People 2010*.⁸

Vision, hearing, and dental impairments (seeing, hearing, dental): Determined by asking participants whether they had trouble with seeing "even when wearing glasses or contact lenses" or hearing "even when wearing your hearing aid." They were also asked if they had a dental problem that needed dental care.

Obesity (height, weight, bmi): Based on participant's self-reported weight and height (calculated by Body Mass Index ≥ 30kg/m2).⁹

Health conditions (diab, highbp, hichol, hrtattack, angina, strok, arthri, hrtfail, catar, asthma, cancer, colon, breast, lungc, prostc, otherc, hepat, osteo, hiv, aids, msclero, depress, anxiety): Measured by asking whether the participant had ever been told by a health professional that they had one or more of the following conditions: diabetes; high blood pressure; high cholesterol; heart attack; angina; stroke; congestive heart failure; cataracts; arthritis; asthma; cancer (specifically colon/rectal, breast, lung, prostate, or other); hepatitis; osteoporosis; HIV; AIDS; multiple sclerosis; depression; or anxiety. Cardiovascular disease (CVD) was defined as having had a heart attack, angina, or stroke. ¹⁰

Mental health

General mental health (v20e – v20h, qolmen): Measured using four items of the SF-8 Health Survey. The scale measures a participant's overall subjective assessment of their mental health. The range is 0 to 100, with higher scores indicating better perceived mental health.

Depression ($cesd_a - cesd_j$, cesd): The 10-item short form of the Center for Epidemiological Studies Depression Scale (CES-D), was utilized to measure current depressive symptomatology. ¹¹ Scores range from 0 – 30, with a score of 10 or higher indicating depressive symptomatology at a clinical level. ¹²

Suicidal ideation (suicide, suicide_sub): Assessed by the following question: "Have you ever seriously thought of taking your own life?" (yes or no). Those who responded in the affirmative were asked if their suicidal thoughts were related to their sexual orientation or gender identity.

Stress (pss_1 – pss_4, pss4): Measured using the 4-item Perceived Stress Scale (PSS4), which assesses the degree to which participants perceive the events and situations in their lives during the preceding month as being stressful.¹³ Utilizing a 5-point Likert scale, questions included such items as "in the last month, how often have you felt that you were unable to control the important things in your life?" Higher scores indicate greater levels of perceived stress.

Loneliness (lone1, lone2, lone3, lone): Assessed with the 3-item Loneliness Scale, ¹⁴ which measures subjective perceptions of feeling a sense of not-belonging, isolation, and disconnection. Utilizing a 3-point Likert scale, participants were asked questions such as: "How often do you feel isolated from others?" Higher scores indicate greater levels of loneliness.

Neglect (neglect): Measured by asking participants how many days during the previous week they felt they did not have their "own basic needs met such as food, cleanliness, or safety." Higher scores indicate greater levels of neglect.

Healthcare access

Healthcare access (ins_mcare, ins_mcaid, ins_prvhlth, ins_prvlong, ins_va, ins_indian, uninsured, ins_other, bar_doc, bar_med, hlthprvd, checkup, emergen, v26a): Assessed by: health insurance coverage; financial barriers (whether a participant had experienced a financial barrier to seeing a doctor in the last 12 months or a financial barrier to obtaining medication); healthcare provider (whether a participant had a personal doctor or healthcare provider); routine checkup (whether a participant had a routine checkup in the preceding year); and emergency room use (whether a participant visited a hospital emergency room for his/her own health in the preceding year).

Fear accessing services (v66h, v66i): Participants were asked to what extent they feared accessing healthcare services inside the LGBT community, and to what extent they feared accessing healthcare services outside the LGBT community.

Health behaviors

Physical activities (modact, modnum, vigact, vignum): Adapted from BRFSS, physical activity was defined as moderate if a participant engaged in activities "such as brisk walking, bicycling, vacuuming, gardening, or anything else that causes some increase in breathing or heart rate," for ten or more minutes at a time in a usual week. Vigorous exercise was defined as activities "such as running, aerobics, heavy yard work,

or anything else that causes a large increase in breathing or heart rate" for ten or more minutes at a time in an average week.

Wellness activities (wellact, wellnum) included reading; meditation; drawing; painting; crafts; photography; and other activities that promote wellness.

Sexual activity (v38): Participants were asked with whom they had engaged in sex during the past 12 months (men only; women only; both men and women; or have not had sex).

Health screening (bldstool, colonosc, osteotst, hivtst, mammo, paptst, psa): Participants were asked how long it had been since they had the following screenings: a blood stool test using a home kit; colonoscopy; osteoporosis test; HIV test; mammogram; Pap smear; or a prostate-specific antigen test.

Health risk behaviors

Current smoking (v43, v43a, smoker4, smoknow): Defined as having ever smoked 100 or more cigarettes and currently smoking every day or some days.¹⁵

Excessive drinking (bingdrk2): Defined as having had five or more drinks (men) or four or more drinks (women) on one occasion during the past 30 days.¹⁶

Drug use, non-prescribed (druguse): Defined as having used drugs other than those required for medical reasons during the past 12 months.

Services, programs, and legal arrangements

Services and programs (v02a – v02r): Participants were asked if they were currently using programs or services for older adults in the LGBT community. In addition, participants indicated what programs and services they thought were most important in the LGBT community to meet the needs of older adults. Services listed included: transportation; meals delivered to home; meals at a center or agency; short term help or relief for a caregiver; personal care (such as bathing, grooming); referral for services; inhome health services; social events; senior housing; adult day care; assisted living; nursing homes; support groups; legal services; fitness and exercise programs; physical/occupational/speech therapy; care management; and other services.

Will (will): Participants were asked whether or not they had a will (yes or no).

Durable power of attorney for healthcare (poa, nopoa): Participants were asked whether they had a durable power of attorney for healthcare (yes or no). Those who answered no were also asked if they knew someone they would be comfortable with in this role.

Caregiving and care receiving

Caregiving (careprov, crrelation, crsexorien, crgender, crtransgen, v75e, crliving, crlong, caretype1 – caretype4, v75i, caremoney, crcare): Assessed by asking participants if they currently assisted a partner/spouse, friend, or family member as a result of a health issue or other needs. For those who indicated they were caregivers, additional questions included: background characteristics (sexual orientation, gender, transgender identity, age, relationship, living arrangement) for the person that they

helped the most; the duration of the caregiving relationship; and the number of hours spent in a typical week providing care. Additionally, participants were asked what type of care they provided, approximately how much money they spent in a typical month helping the care recipient, and whether their care recipients also provided help to caregiver participants.

Care receiving (carerecy, cgrelation, cgsexorien, cggender, cgtransgen, v51e, cgliving, cglong, cghour, cghealth, cgcare): Assessed by asking if participants currently received help from a partner/spouse, friend, or family member as a result of a health issue or other needs. Those who indicated they were care recipients were asked about background characteristics (sexual orientation, gender, transgender identity, age, relationship, living arrangement) for the person who helped them most, the duration of the caregiving relationship, and the number of hours spent in a typical week receiving care.

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4. Codebook

Data filename: 2010CAPdata_public_ver1.0.dta

Q. #	Items	Var.	Response Category
	Study ID	case_id	Numeric
	Survey mode: Paper or Online	qver	1=Paper
			2=Online
1	Are you <u>currently</u> using programs or services for older adults in	curuse	1=Yes
	the LGBT community?		0=No
2	Please indicate the programs you think are the most important		
	in the LGBT community to meet the needs of older adults.		
	(PLEASE MARK ALL THAT APPLY)		
	Transportation	v02a	
	Meals delivered to home	v02b	
	Meals at a center or agency	v02c	
	Short term help or relief for a caregiver	v02d	
	Personal care (bathing, grooming, etc)	v02e	
	Referral for services	v02f	
	In-home health services	v02g	_
	Social events	v02h	_
	Senior housing	v02i	1=Yes
	Adult day care	v02j	0=No
	Assisted living	v02k	
	Nursing home	v02l	
	Support groups	v02m	
	Legal services	v02n	
	Fitness and exercise programs	v02o	
	Physical/occupational/speech therapy	v02p	
	Care management	v02q	
	Other services	v02r	
3	Age	age_c	Actual value
J	7,60		80 = age 80 +
		impage3_80	1=50-64
			2=65-79
			3=80 and older
4	What is the highest grade or year of school you completed?	educa	1= Never attended
	g and a grant part of the part		school or only
			attended kindergarten
			2=Grades 1 through 8
			3=Grades 9 through 11
			4=Grade 12 or GED
			5=College 1 year to 3
			years
			6=College 4 years or
			more
5	Have you been employed full or part-time during the past 12	employ	1=Employed
	months?		0=Unemployed

Q. #	Items	Var.	Response Category
5a	If No, what was the main reason you did not work in the past	10	nespense category
	12 months?		
	Retired	v05a1	1=Yes
			0=No
5b	(If retired) In what year? – year of retirement	v05b	Actual value
	III, disabled	v05a2	1=Yes
	,		0=No
	Taking care of home or family	v05a3	1=Yes
	,		0=No
	Unable to work	v05a4	1=Yes
			0=No
	Doing something else	v05a5	1=Yes
			0=No
6	What is your living arrangement? (PLEASE MARK ALL THAT		
	APPLY)		
	Alone	lvarr	1=Living alone
	Alone	Ivaii	0=Living with others
	with a partner/spouse	lvpartn	1=Yes
	with a partner/spouse	Ivpartii	0=No
	with other family members	lvfam	
	with non-family members	lvnonfam	
7	Do you have children?	child	1=Yes
			0=No
7a	(If YES) What are their ages?		
	First	v07a	Actual value
	Second	v07b	Actual value
	Third	v07c	Actual value
	Fourth	v07d	Actual value
	Fifth	v07e	Actual value
	Sixth	v07f	Actual value
8	Do you have grandchildren?	gchild	1=Yes
			0=No
8a	(If YES) What are their ages?		
	First	v08a	Actual value
	Second	v08b	Actual value
	Third	v08c	Actual value
	Fourth	v08d	Actual value
	Fifth	v08e	Actual value
	Sixth	v08f	Actual value
9	How many people (including yourself) live in your household?	hsize	Actual value
10	What type of housing do you currently live?	housing	1= Own house/own
			apartment
			2=Rent
			house/apartment/roo
			m
			3=Senior housing
			4=Assisted living
			5=Nursing home with
			available medical personnel

Q. #	Items	Var.	Response Category
			6=Homeless
			7=Other
11	RUCA codes (See http://depts.washington.edu/uwruca /ruca-codes.php) based on ZIP code	rucacode	
12	Are you Hispanic or Latino?	hispanic	1=Hispanic
			0=Non-Hispanic
13	Race/ethnicity	racehisp8	1=White, non-Hispanic 2=Black or African American, non- Hispanic 3=Asian, non-Hispanic 4=NHPI, non-Hispanic 5=AIAN, non-Hispanic 6=Other, non-Hispanic 7=Multiracial, non- Hispanic
			8=Hispanic
14	Sexual identity. Do you consider yourself to be:	sexorien64	1= Gay/lesbian 2=Bisexual 3=Heterosexual or Straight 4=Other
15	Sex	gendr	1=Female
			2=Male 3=Other
16	Are you transgender?	transgen	1=Transgender
	If v63 or v64 were answered, transgen=1.		0=Not transgender
16a	If YES	transgen_s	1=Female to Male (FTM) 2=Male to Female (MTF) 3=Other
17	What is your current relationship status?	relation2	1=Married or partnered 0=Other
17a	If partnered or married, how long have you been in this relationship? mplength = 12*years+months	mplength	Actual values in months
18	Do you have a pet or pets?	pet	1=Yes 0=No
19	Below are five statements with which you may agree or disagree. Indicate your agreement with each item.		
	a. In most ways, my life is close to my ideal.	v19a	1=Strongly Agree
	b. The conditions of my life are excellent.	v19b	2= Agree
	c. I am satisfied with my life.	v19c	3= Disagree
	d. So far, I have gotten the important things I want in life.	v19d	4= Strongly disagree
	e. If I could live my life over, I would change almost nothing.	v19e	
	Life satisfaction (mean of v19a through v19e) Excluded if # of missing greater than 2.	life	Range: 1 (satisfied)-4 (not satisfied)
20	Answer every question below. If you are unsure about how to		,
	answer a question, please give the best answer you can.		

Q. #	Items	Var.	Response Category
	a. Overall, how would you rate your health during the past 4	v20a	1=Excellent
	weeks?		2=Very good
			3=Good
			4=Fair
			5=Poor
			6=Very poor
	Recode of v20a	qolphy1	5 TS. 7 PSS.
	(1=100)(2=80)(3=60)(4=40)(5=20)(6=0)	90.5,1	
	Dichotomized general health	genhlth2	0=Excellent/good
	Dictiotofffized general fleatiff	gennunz	1=Fair/very poor
	b. How much bodily pain have you had during the past 4	v20b	1=None
		V200	2=Very mild
	weeks?		1
			3=Mild
			4=Moderate
			5=Severe
			6=Very Severe
	Recode of v20b	qolphy2	
<u> </u>	(1=100)(2=80)(3=60)(4=40)(5=20)(6=0) c. During the <u>past 4 weeks</u> , how much did physical health	v20c	1=Not at all
		V20C	
	problems limit your usual physical activities (such as walking or		2=Very Little
	climbing stairs)?		3=Somewhat
			4=Quite a lot
			5=Could not do
	Recode of v20c	qolphy3	
	(1=100)(2=75)(3=50)(4=25)(5=0)		
	d. During the <u>past 4 weeks</u> , how much difficulty did you have	v20d	1=None at all
	doing your daily work, both at home and away from home,		2=A little bit
	because of your physical health?		3=Some
			4=Quite a lot
			5=Could not do
	Recode of v20d	qolphy4	
	(1=100)(2=75)(3=50)(4=25)(5=0)		
	e. During the past 4 weeks, how much energy did you have?	v20e	1=Very much
			2=Quite a lot
			3=Some
			4=A little
			5=None
	Recode of v20e	qolmen1	
1	(1=100)(2=75)(3=50)(4=25)(5=0)	-,	
	f. During the past 4 weeks, how much did your physical health	v20f	1=Not at all
	or emotional problems limit your usual social activities with	-	2=Very little
	family or friends?		3=Somewhat
	is, or memor		4=Quite a lot
			5=Could not do
	Recode of v20f	qolmen2	5-could flot do
	(1=100)(2=75)(3=50)(4=25)(5=0)	quinciiz	
	g. During the past 4 weeks, how much have you been bothered	v20g	1=Not at all
	by emotional problems (such as feeling anxious, depressed or		2=Slightly
	irritable)?		3=Moderately
	,		4=Quite a lot
			5=Extremely
			J-LAU CHICIY

Q. #	Items	Var.	Response Category
	Recode of v20g	qolmen3	
	(1=100)(2=75)(3=50)(4=25)(5=0)		
	h. During the past 4 weeks, how much did personal or	v20h	1=Not at all
	emotional problems keep you from doing your usual work or		2=Very little
	other daily activities?		3=Somewhat
	· ·		4=Quite a lot
			5=Could not do
	Recode of v20h	qolmen4	
	(1=100)(2=75)(3=50)(4=25)(5=0)		
	Health related quality of life – Physical health	qolphy	Range: 0 to 100
	Mean of qolphy1 through qolphy4		
	Health related quality of life – mental health	qolmen	Range: 0 to 100
	Mean of qolmen1 through qolmen4		
21	The questions below ask you about your feelings and		
	thoughts. In each case, please indicate how often you felt or		
	thought a certain way.		
	a. In the past 4 weeks, how often have you felt that you were	pss_1	0=never
	unable to control the important things in your life?		1=almost never
			2=sometimes
			3=fairly often
			4=very often
	b. In the past 4 weeks, how often have you felt confident	pss_2	4=never
	about your ability to handle your personal problems?		3=almost never
	c. In the past 4 weeks, how often have you felt that things	pss_3	2=sometimes
	were going your way?		1=fairly often
			0=very often
	d. In the <u>past 4 weeks</u> , how often have you felt difficulties	pss_4	0=never
	were piling up so high that you could not overcome them?		1=almost never
			2=sometimes
			3=fairly often
		_	4=very often
	Perceived Stress Scale	pss4	Range: 0 (low stress)-4
	mean of pss_1, pss_2, pss_3, pss_4		(high stress)
22	Excluded if # of missing greater than 2		,
22	Below is a list of the ways you might have felt or behaved.		
	Please indicate how often you have felt this way during the		
	past week.	cocd c	0 / 1 / 1 / 1
	a. I was bothered by things that usually don't bother me. b. I had trouble keeping my mind on what I was doing.	cesd_a cesd_b	0 = (< 1 day)
	1 5 7	cesd_b	1=(1-2 days) 2=(3-4 days)
	c. I felt depressed.	_	3=(5-7 days)
	d. I felt that everything I did was an effort.	cesd_d	
	e. I felt hopeful about the future.	cesd_e	3= (< 1 day) 2=(1-2 days)
			1=(3-4 days)
			0=(5-7 days)
	f. I felt fearful.	cesd_f	0=(<1 day)
	g. My sleep was restless.	_	1=(1-2 days)
	g. Iviy sieep was restiess.	cesd_g	2=(3-4 days)
			3=(5-7 days)
	h. I was happy.	cesd_h	3= (< 1 day)
			2=(1-2 days)
L	1	1	- (+ - days)

Q. #	Items	Var.	Response Category
			1=(3-4 days)
			0=(5-7 days)
	i. I felt lonely.	cesd i	0= (< 1 day)
	j. I could not "get going".	cesd_j	1=(1-2 days)
			2=(3-4 days)
			3=(5-7 days)
	CESD-10	cesd	, , , ,
	Sum of cesd_a through cesd_j		Range: 0-30
	*not computed if more than 2 items are missing		
	Neglect: k. I did not have my own basic needs met such as	neglect	0= < 1 day)
	food, cleanliness, or safety.		1=(1-2 days)
			2=(3-4 days)
			3=(5-7 days)
23	Do you have one person you think of as your personal doctor	hlthprvd	1=Yes, only one
	or health care provider?		2=More than one
	·		3=No
24	About how long has it been since you last visited a doctor for a	checkup	1=Within past 1 yr
	routine checkup? A routine checkup is a general physical exam,	•	2=Within past 2 yrs
	not an exam for a specific injury, illness, or condition.		3=Within past 5 yrs
	, , , , , , , , , , , , , , , , , , , ,		4=5 or more years ago
			5=never
25	Please mark the situations that occurred to you in the past 12		
	months. (PLEASE MARK ALL THAT APPLY.)		
	You needed to see a doctor but could not because of cost.	bar_doc	1=Yes
		_	0=No
	You needed to have medication but could not because of	bar_med	1=Yes
	cost.		0=No
26	During the past 12 months, did you visit a hospital emergency	emergen	1=Yes
	room for your own health?		0=No
26a	(If YES) How many times?	v26a	Actual value
27	In general, people with larger incomes can more easily get	income6	1=less than \$20,000
	medical care. Select a category that best describes YOUR		2=\$20,000 to \$24,999
	HOUSEHOLD income before taxes for all of 2009. Please		3=\$25,000 to \$34,999
	include the income of everyone in your household who		4=\$35,000 to \$49,999
	contributed to your household income.		5=\$50,000 to \$74,999
	, ,		
			6=\$75,000 or more
28	What type of health care coverage do you have? (PLEASE		
	MARK ALL THAT APPLY)		
	Medicare	ins_mcare	1=Yes
			0=No
	Medicaid	ins_mcaid	1=Yes
			0=No
	Private Insurance: Health/Medical	ins_prvhlth	1=Yes
			0=No
	Private Insurance: Long-term care	ins_prvlong	1=Yes
			0=No
	Veteran's Administration	ins_va	1=Yes
			0=No
	Indian Health Service	ins_indian	1=Yes
			0=No

Q. #	Items	Var.	Response Category
	Uninsured	uninsured	1=Yes
			0=No
	Other	ins_other	1=Yes
			0=No
29	Are you limited in any way in any activities because of physical,	limitact	1=Yes
	mental, or emotional problems?		0=No
30	Do you now have any health problem that requires you to use	equip	1=Yes
	special equipment, such as a cane, a wheelchair, a special bed,		0=No
	or a special telephone? (including occasional use)		
	Disability: limited activities (limitact) or using a special	disable	1=yes
	equipment (equip)		0=no
31	In a usual week, do you do moderate activities for at least 10	modact	1=Yes
	minutes at a time, such as brisk walking, bicycling, vacuuming,		0=No
	gardening, or anything else that causes some increase in		
	breathing or heart rate?	madnum	Actual value
22	How many times per week?	modnum	Actual value 1=Yes
32	In a usual week, do you do vigorous activities for at least 10 minutes at a time, such as running, aerobics, heavy yard work,	vigact	0=No
	or anything else that causes large increase in breathing or		0-110
	heart rate?		
	How many times per week?	vignum	Actual value
33	In a usual week, do you do any of the following activities:	wellact	1=Yes
33	reading, meditation, drawing, painting, crafts, photography, or	Wender	0=No
	other activities that promote your wellness?		0 110
	How many times per week?	wellnum	Actual value
34	Do you have trouble with any of the following? (PLEASE MARK		
	ALL THAT APPLY)		
	Seeing (even when wearing glasses or contact lenses)	seeing	1=Yes (marked)
			0=No
	Hearing (even when wearing your hearing aid)	hearing	1=Yes (marked)
			0=No
	Dental problem (need dental care)	dental	1=Yes (marked)
			0=No
35	About how tall are you without shoes?		
		height	Actual value in inches
36	About how much do you weigh?	weight	Actual value in lbs
		bmi	=(weight/(height^2))*7
			03
		bmi4	1=underweight
			2=normal
			3=overweight
27	And you have been been an artist white the	27	4=obese
37	Are you now trying to lose or gain weight?	v37	1=Trying to lose weight
			2=Trying to gain weight 3=Neither
38	In the past 12 months who have you had sex with?	v38	1=Men only
30	III the past 12 months who have you had sex with:	V30	2=Women only
			3=Both men and
			women
			4=I have not had sex
<u> </u>		1	1 I have not had sex

Q. #	Items	Var.	Response Category
39	Has a doctor ever told you that you had any of the following?		
	(Please mark all that apply)		
	Diabetes	diab	
	High blood pressure	highbp	
	High cholesterol	hichol	
	Heart attack	hrtattack	
	Angina	angina	
	Stroke	strok	1=Yes (marked)
	Congestive heart failure	hrtfail	O=No
	Cataracts	catar	
	Colon/Rectal cancer	colon	
	Hepatitis	hepat	
	HIV	hiv	
	AIDS	aids	1=Yes (marked)
			0=No
	Prostate cancer	prostc	
	Lung cancer	lungc	
	Breast cancer	breast	
	Other cancer	otherc	
	Osteoporosis	osteo	1=Yes (marked)
	Depression	depress	0=No
	Anxiety	anxiety	
	Arthritis	arthri	-
	Multiple Sclerosis (MS)	msclero	\dashv
	Asthma	asthever	\dashv
	Do you still have Asthma?	v39y	1=yes
	bo you still have Astillia:	VSSY	2=no
	Asthma ever and now?	asthma	1=asthma now
	Astimic ever und now.	ustimu	2=ever asthma, but not
			now
			3=neither
	HIV or AIDS?	hivaids	1=yes
	3.7		0=no
	Any cancer?	cancer	1=yes
	,		0=no
	Number of chronic conditions: sum of highbp hichol hrtattack	chronic	
	angina strok cancer hivaids asthever arthri diab		Range: 0 - 10
40	How long has it been since		
	a. you had a blood stool test using a home kit?	bldstool	
	b. you had a colonoscopy?	colonosc	1=Never
	c. you had an osteoporosis test?	osteotst	2=Within the past year
	d. you had a HIV test?	hivtst	3=Within the past 3
	e. you had a mammogram?	mammo	years
	f. you had a Pap smear?	paptst	4=3 or more years ago
	g. you had a PSA (prostate-specific antigen test)?	psa	
	h. you have taken hormones?	horm	1=Never
	,		2=Within the past year
			3=Within the past 3
			years
			4=3 or more years ago

Q. #	Items	Var.	Response Category
	i. (If YES) Have you ever taken hormones not prescribed by a	horm3	1=Yes
	doctor?		0=No
41	Have you ever had a silicone injection or implant?	silic	1=Yes
			0=No
41a	(If YES) Were they all done by a doctor?	silic2	1=Yes
			0=No
43	Have you smoked at least 100 cigarettes in your entire life?	v43	1=yes
			2=no
43a	(If YES) Do you now smoke cigarettes every day, some days, or	v43a	1=Every day
	not at all?		2=Some days
			3=Not at all
		smoker4	1=everyday smoker
			2=occasional smoker
			3=previous smoker
			4=nonsmoker
	Recode of smoker4	smoknow	1=Yes
4.4	Everyday and occasional smokers are current smokers.	aludus lusus s	0=No
44	During the past 30 days, did you have at least one drink of any	drinkone	1=Yes
	alcoholic beverage? One drink is equivalent to a 12-ounce		0=No
	beer, a 5-ounce glass of wine, or a drink with one shot of liquor.		
45a	During the past 30 days, how many days did you have at least	v45a	Actual value
438	one drink of any alcoholic beverage?	V43a	Actual value
45b	During the past 30 days, on the days when you drank, about	v45b	1-6 = Actual value
436	how many drinks on average did you drink?	V-35	7 = 7 or more days
45c	During the past 30 days, considering all types of alcoholic	v45c	Actual value
	beverages, what is the largest number of drinks you had on		7.100.00.0
	any one occasion?		
	Binge drinking	bingdrk2	1=Yes
	Men-5 drinks or more per occasion		0=No
	Women-4 drinks or more per occasion		
	Heavy drinking	hvydrk2	1=Yes
	Men-more than 60 drinks in the last 30 days		0=No
	Women-more than 30 drinks in the last 30 days		
46	Have you used drugs other than those required for medical	druguse	1=Yes
	reasons during the past 12 months?		0=No
47	Have you used prescription drugs other than in the manner	prescrib	1=more than
	prescribed during the <u>past 12 months</u> ? (Mark all that apply)		prescribed
			2=less than prescribed
			3=both
40	During the west west, have your sended and like the fit		4=No
48	During the <u>past week</u> , have you needed any kind of help		
	with (PLEASE MARK ALL THAT APPLY) IADL: Using the telephone	iadl1	
	IADL: Grocery Shopping	iadl2	_
	IADL: Grocery Snopping IADL: Meal/food preparation	iadl3	_
			1-Voc
	IADL: Housekeeping (making the bed, vacuuming, dusting)	iadl4	1=Yes
	IADL: Doing laundry	iadl5	0=No
	IADL: Traveling by car, bus, etc.	iadl6	_
	IADL: Taking medications in the correct dosages and/or at the	iadl7	
	correct time		

Q. #	Items	Var.	Response Category
Q. #	IADL: Handling finances	iadl8	Response Category
	IADL: Nanding infances IADL: None of the above	iadl9	-
49	During the past week, have you needed help:	lauis	
43	ADL: Dressing	adl1	
	ADL: Walking	adl2	-
	ADL: Walking ADL: Toileting	adl3	-
	ADL: Tolleting ADL: Eating meals	adl4	1=Yes
	ADL: Bathing excluding rinsing the back	adl5	- 0=No
	ADL: Moving in and out of bed or chair	adl6	-
	ADL: None of the above		
F0		adl7	1 Vaa
50	Do you currently <u>receive</u> help from a partner/spouse, friend, or	carerecv	1= Yes 0= No
Г1	family member as a result of a health issue or other needs?		U= NO
51	Please provide the following information about the person		
F1-	who helps you the most.	a malation	1 Downton on / Concuss
51a	How is this person related to you? (PLEASE MARK ONLY ONE)	cgrelation	1=Partner/Spouse 2= Friend
			3=Parent or parent-in-
			law
			4=Child
			5=Grandchild
			6=Other relative
			7=Other
51b	What is this person's sexual orientation?	cgsexorien	1=Gay or Lesbian
310	what is this person s sexual orientation:	cgsexurien	2=Bisexual
			3=Heterosexual or
			straight
51c	Person's sex?	cggender	1=Female
310	r cison s sex:	cggender	2=Male
51d	Is this person transgender?	cgtransgen	1=Yes
310	is this person transgender:	cgtransgen	0=No
51e	How old is this person that helps you the most?	v51e	Actual value in years
51f	What is this person's primary living arrangement?	cgliving	1=Lives with you
31.	what is this person s primary itting arrangement.	588	0=Does not live with
			you
51g	How long have you been receiving care from this person?		100
0-6	Duration of care in month	cglong	Actual value in months
51h	Approximately how many hours does this person help you in a	cghour	Actual value in hours
	typical week?	-8	
51i	Does this person who helps you have a health problem or a	cghealth	1= Yes
	disability that requires others' care?		0=No
51j	(IF YES) Are you the person that provides the most care to this	cgcare	1= Yes
,	person?		0=No
52	Do you have a durable power of attorney for health care?	poa	1= Yes
J2	bo you have a durable power of attorney for health care:	Poa	0=No
52a	(If NO) Do you know someone you would be comfortable with	nopoa	1= Yes
JZa	in this role?	Ποροα	0=No
53	Do you have a will?	will	1=Yes
55	Do you have a will:	VVIII	0=No
56	Have you served in the military?	milit	1=Yes
50	Have you served in the military:	711111	0=No
		I.	0-110

Q. #	Items	Var.	Response Category
57	Have you ever had a commitment ceremony or married	marr_opp	1=Yes
	someone of the opposite sex?		0=No
58	Have you had a commitment ceremony or married a same-sex	marr_same	1=Yes
	partner?		0=No
59	Have you experienced the death of a same-sex	loss	1=Yes
	partner/spouse?		0=No
60	During the past 30 days, how often did you attend spiritual or	relignum	Actual value
	religious services/activities?		
61	How old were you when you first considered yourself lesbian,	out1lgb	Numeric
	gay, or bisexual?		.a=Not applicable
			.=missing
62	How old were you when you first told someone that you were	out2lgb	Numeric
	lesbian, gay, or bisexual?		.a=Not applicable
			.=missing
63	How old were you when you first considered yourself	out1trgen	Numeric
	transgender?		.a=Not applicable
			.=missing
64	How old were you when you first told someone that you were	out2trgen	Numeric
	transgender?		.a=Not applicable
			.=missing
65	Do the following people know, or have known, that you are		
	gay, lesbian, bisexual, or transgender?		
65a	Mother	out_mom	
65b	Father	out dad	=
65c	Brothers (one or more)	out bro	1=Definitely do not
65d	Sisters (one or more)	out sis	know
65e	Children (one or more)	out child	2=Probably do not
65f	Grandchildren (one or more)	out gchild	know
65g	Grandparent (one or more)	out_gparent	3=Probably know
65h	Best friend	out friend	4=Definitely know
65i	Current or most recent work supervisor	out superv	.a=Not Applicable
65j	Neighbors (one or more)	out_neighbor	.=missing
65k	Faith community	out faith	1
651	Primary physician	out_physician	-
	Overall outness (mean)	outness	Mean of outness
	Civeran outriess (mean)	Guerress	scores
66	Please rate the extent to which you agree or disagree with		
	each of the following statements.		
66a	I wish I weren't lesbian, gay, bisexual or transgender.	stg_a	
66b	I have tried to not be lesbian, gay, bisexual or transgender.	stg_b	†
	If someone offered me the chance to be completely		1=Strongly Disagree
66c	heterosexual or not transgender, I would accept the chance.	stg_c	2=Disagree
	I feel that being lesbian, gay, bisexual or transgender is a	_	3=Agree
66d	personal shortcoming for me.	stg_d	4=Strongly Agree
	I would like to get professional help to not be lesbian, gay,		- 3, 5
66e	bisexual or transgender.	stg_e	
	Identity stigma (mean of stg_a through stg_e)		
	Excluded if # of missing greater than 2	stigma	Range: 1-4
	I'm glad I belong to the lesbian, gay, bisexual or transgender		1=Strongly Disagree
66f	community.	colest_f	2=Disagree
<u> </u>	- Community.	1	2-DISUBLEE

Q. #	Items	Var.	Response Category
66g	I feel good about belonging to the lesbian, gay, bisexual or	colest_g	3=Agree
oog	transgender community.	colest_g	4=Strongly Agree
	Positive sense of community (mean of colest_f and colest_g)	colest	Range: 1-4
66h	I fear accessing health services <u>inside</u> the lesbian, gay, bisexual or transgender community.	v66h	1=Strongly Agree 2=Agree 3=Disagree 4=Strongly Disagree
66i	I fear accessing health services <u>outside</u> the lesbian, gay, bisexual or transgender community.	v66i	1=Strongly Agree 2=Agree 3=Disagree 4=Strongly Disagree
6	Please indicate how many times in your life you have		
7	experienced each of the following <u>because you are, or were</u> thought to be, lesbian, gay, bisexual or transgender.		
67a	I was not hired for a job.	disc_a	
67b	I was not given a job promotion.	disc_b	
67c	I was fired.	disc_c	
67d	I was prevented from living in the neighborhood I wanted.	disc_d	
67e	I was hassled by the police.	disc_e	
67f	I was denied or provided inferior health care.	disc_f	
67g	I was verbally insulted (yelled at, criticized).	vict_g	
67h	I was threatened with physical violence.	vict_h	0=Never
67i	I had an object thrown at me.	vict_i	1=Once
67j	I was punched, kicked, or beaten.	vict_j	2=Twice
67k	I was threatened with a knife, gun or another weapon.	vict_k	3=3 or more times
67I	I was attacked sexually.	vict_l	
67m	Someone threatened to tell someone else I am lesbian, gay, bisexual or transgender.	vict_m	
67n	I was arrested or jailed.	disc_n	
67o	I was ignored by the police when I needed help.	disc_o	
67p	My property was damaged or destroyed.	disc_p	
	Discrimination (sum of 67a to 67f and 67n, 67o, and 67p)	discr_sum	Numeric
	Victimization (sum of 67g to 67m)	vict_sum	Numeric
	Sum of discrimination and victimization	discvict	Numeric
	Three times or more in discrimination and victimization	discvict3	0=never 1=three times or more
68	Have you ever seriously thought of taking your own life?	suicide	1=Yes 0=No
68a	Were suicidal thoughts related to your sexual orientation or gender identity?	suicide_sub	1=Yes 0=No
69	In the <u>past year</u> , were you hit, slapped, pushed, shoved, punched or threatened with a weapon by a partner, family member or close friend?	physiviol	1=Yes 0=No
70	In the <u>past year</u> , were you severely criticized, made fun of, told you were stupid or worthless, or threatened verbally to harm you, your possessions or pets, by a partner, family member or close friend?	verbalviol	1=Yes 0=No

Q. #	Items	Var.	Response Category
71	Please indicate how often the following type of support is		
	available to you if you need it?		
71a	Someone to help with daily chores if you were sick (tangible	1	
	support).	socsup1	
71b	Someone to turn to for suggestions about how to deal with a	socsup2	1=Never
	personal problem (emotional-informational support).		2=Seldom
71c	Someone to do something enjoyable with (positive social	socsup3	3=Usually
	interaction support).		4=Always
71d	Someone to love and make you feel wanted (affectionate	socsup4	
İ	support).		
	Social support (mean of socsup1 through socsup4)	socsup	Danger 1 4
	Excluded if # of missing greater than 2		Range: 1-4
72	How many different lesbian, gay, bisexual, transgender or		
	straight people (such as your friends, family members,		
	colleagues, neighbors, etc.) have you interacted with (including		
	talked to, visited with, exchanged phone calls or emails with,		
	etc.) in a typical month?		
	Age 50 and older		
72a	Gay men:	v72aa	
72b	Gay women/lesbians:	v72ba	
72c	Bisexual men and women:	v72ca	Actual value
72d	Transgender men and women:	v72da	
72e	Heterosexual or straight men and women:	v72ea	
	Under the age of 50		
72a	Gay men:	v72ab	
72b	Gay women/lesbians:	v72bb	
72c	Bisexual men and women:	v72cb	Actual value
72d	Transgender men and women:	v72db	
72e	Heterosexual or straight men and women:	v72eb	
	A total number of network	network	
	v72aa+v72ba+v72ca+v72da+v72ea+v72ab+v72bb+v72cb+v72d		
	b+v72eb		
	Missing when all values in v72aa through v72eb are missing.		
	Quartile rank of network	networkquar	1=small
			2=medium
			3=large
			4=very large
73	The next questions are about how you feel about different		
	aspects of your life. For each one, indicate how often you feel		
	that way.		
73a	How often do you feel that you lack companionship?	lone1	1=Hardly ever
73b	How often do you feel left out?	lone2	2=Some of the time
73c	How often do you feel isolated from others?	lone3	3=Often
	Loneliness: mean of lone1, lone2 and lone3		
	Excluded if # of missing greater than 1	lone	Range: 1-3
		IOIIE	Nullge. 1-3
	Cronbach's alpha: 0.8661		
74	Do you currently assist a partner, a friend, or a family member	careprov	0=No, I do not
	who has a health issue or other needs?		currently provide
			assistance.
			1=Yes

Q. #	Items	Var.	Response Category
74a	(IF YES) List ages of those you assist?	v74a	
		v74b	
		v74c	
		v74d	
		v74e	
		v74f	
75	Please provide the following information about the person you		
	assist the most.		
75a	a. How is this person related to you? (PLEASE MARK ONLY	crrelation	1=Partner/Spouse
	<u>ONE</u>)		2= Friend
			3=Parent or parent-in-
			law
			4=Child
			5=Grandchild
			6=Other relative
			7=Other
75b	What is this person's sexual orientation?	crsexorien	1=Gay or Lesbian
			2=Bisexual
			3=Heterosexual or
			straight
75c	Person's sex?	crgender	1=Female
			2=Male
75d	Is this person transgender?	crtransgen	1=Yes
			0=No
75e	How old is this person?	v75e	Actual value in years
75f	What is this person's primary living arrangement?	crliving	1=Lives with you
			0=Does not live with
			you
75g	How long have you been providing care to this person?		
	Duration of care providing in months	crlong	Actual values in
			months
75h	Which of the following kinds of assistance do you provide to		
	this person? (PLEASE MARK ALL THAT APPLY)		
	Transportation, grocery shopping, doing laundry, preparing	caretype1	
	food		1 1/22
	Personal care (dressing, grooming, toileting, bathing, eating)	caretype2	1=Yes
	Handling finances	caretype3	O=No
	Managing care provided by others	caretype4	
75i	Overall, approximately how many hours do you spend helping	v75i	Actual value in hours
	this person in a <u>typical week</u> ?		
75j	Overall, approximately how much money do you spend helping	caremoney	1=None
	this person in a typical month?		2=Less than \$100
			3=\$100-\$249
			4=\$250-\$499
			5=\$500 or more
75k	If you are ill or need help, is this the person who helps you the	crcare	1=Yes
	most?		0=No