

WNY Public Health Alliance HRA 2005 Codebook

Variable	Question	Valid Responses
RESP	--	--
NUM	--	--
age	How old are you?	999 Missing
gender	Are you Male or Female?	1 Male 2 Female 999 Missing
WGT	How much do you weigh?	999 Missing
ht	How tall are you (inches)	999 Missing
bmi	Body Mass Index (calculated)	999 Missing
bmicat	Body Mass Index Categories (calculated)	1 Underweight 2 Healthy Weight 3 Overweight 4 Obese 999 Missing
smoke	Smoking Status	1 Non-Smoker 2 Former Smoker 3 Current Smoker 999 Missing
raceb	What race do you consider yourself?	1 Hispanic 2 Non-Hispanic White 3 Non-Hispanic Black 4 Asian Pacific Islander 5 American Indian/Alaskan Native 6 Other 999 Missing

WNY Public Health Alliance HRA 2005 Codebook

Variable	Question	Valid Responses
Strata4	County or Supplemental area	1 Allegany 2 Cattaraugus 3 Chautauqua 4 Erie 5 Genesee 6 Niagara 7 Orleans 8 Wyoming 9 Lower West Side of Buffalo 10 Near East Side of Buffalo 11 City of Niagara Falls 12 Dunkirk 13 Jamestown 999 Missing
r02a	Is there one particular clinic, health center, doctor's office or hospital emergency room that you usually go to if you are sick or need advice about your health?	1 Yes 2 No 999 Missing
r02b	What kind of place is it that you go? (for care in question r02a)	1 A doctor's office of HMO 2 A clinic or Health Center 3 A Hospital outpatient center 4 A hospital ER 5 An urgent care center 6 Some other kind of place 999 Missing
r03a	When was your last medical visit?	0 Never 1 Under 6 months ago 2 6 months – 1 year ago 3 1 – 2 years ago 4 2 – 3 years ago 5 Over 3 years ago 999 Missing

WNY Public Health Alliance HRA 2005 Codebook

Variable	Question	Valid Responses
r03b	What was the reason for your last medical visit?	1 Check Up 2 Had a problem 999 Missing
r04a	Was there a time in the past 12 months when you needed medical care, but could not get it?	1 Yes 2 No 999 Missing
r04b	What is the main reason you did not get medical care? (in question r04a)	1 Cost/No Insurance 2 Distance 3 Office wasn't open when I got there 4 Too long to wait for an appointment 5 Too long to wait in the waiting room 6 No child care 7 No Transportation 8 No access for people w. disabilities 9 The medical provider didn't speak my language 10 Other 999 Missing
r05a	In the last 12 months, have you gone to an emergency department for medical care?	1 Yes 2 No 999 Missing
r05b	Did you go to the emergency department because of a medical emergency, a provider referral, problems accessing the usual place you receive care or for some other reason?	1 Medical Emergency 2 Provider Referral 3 Problems with access 4 Other 999 Missing

WNY Public Health Alliance HRA 2005 Codebook

Variable	Question	Valid Responses
r05c	You mentioned that you went to the emergency department because you had problems accessing your usual place of care (question r05b). What type of problem did you have?	1 Cost 2 Hours 3 Convenience 4 Other 999 Missing
r06a	What type of health insurance do you have, if any?	0 None/self pay 1 Hill Burton 2 Medicaid 3 Medicare 4 Blue Cross/Blue Shield 5 Community Blue 6 Community Care (BC/BS Medicaid) 7 Independent Health 8 Medisource (IHA/Medicaid) 9 Univera/Choice Care 10 Fidelis 11 Workers Compensation 12 Other 77 Don't Know 999 Missing
r06b	Has there been a time in the last 12 months when you did not have any health insurance?	1 Yes 2 No 999 Missing
r06c	About how long has it been since you last had health care coverage?	0 Never 1 6 months or less 2 6 months to a year ago 3 1 – 3 years ago 4 More than 3 years ago 999 Missing

WNY Public Health Alliance HRA 2005 Codebook

Variable	Question	Valid Responses
r06d	What is the main reason you do not have any kind of health care coverage now?	0 Lost job/changed employer 1 Spouse lost job/changed employer 2 Became divorced/separated 3 Spouse or parent died 4 Not eligible because of age/left school 5 Employer does not offer/stopped coverage 6 Cut to part time/temporary employee 7 Benefits ran out 8 Couldn't afford to pay the premiums 9 Insurance company refused coverage 10 Lost Medicaid/medical assistance eligibility 11 Other 999 Missing
rdiab	During the past 12 months have you had diabetes/high blood sugar?	1 Yes, diagnosed by a doctor 2 Yes, not diagnosed by a doctor 3 No 999 Missing
rhbp	During the past 12 months have you had High Blood Pressure?	1 Yes, diagnosed by a doctor 2 Yes, not diagnosed by a doctor 3 No 999 Missing

WNY Public Health Alliance HRA 2005 Codebook

Variable	Question	Valid Responses
rhchol	During the past 12 months have you had High Cholesterol?	1 Yes, diagnosed by a doctor 2 Yes, not diagnosed by a doctor 3 No 999 Missing
rheart	During the past 12 months have you had Heart Condition/Problem?	1 Yes, diagnosed by a doctor 2 Yes, not diagnosed by a doctor 3 No 999 Missing
rstroke	During the past 12 months have you had Stroke?	1 Yes, diagnosed by a doctor 2 Yes, not diagnosed by a doctor 3 No 999 Missing
rasthma	During the past 12 months have you had Asthma?	1 Yes, diagnosed by a doctor 2 Yes, not diagnosed by a doctor 3 No 999 Missing
rcopd	During the past 12 months have you had COPD?	1 Yes, diagnosed by a doctor 2 Yes, not diagnosed by a doctor 3 No 999 Missing
remphy	During the past 12 months have you had Emphysema?	1 Yes, diagnosed by a doctor 2 Yes, not diagnosed by a doctor 3 No 999 Missing

WNY Public Health Alliance HRA 2005 Codebook

Variable	Question	Valid Responses
rarthris	During the past 12 months have you had Arthritis?	1 Yes, diagnosed by a doctor 2 Yes, not diagnosed by a doctor 3 No 999 Missing
rback	During the past 12 months have you had Low Back Pain?	1 Yes, diagnosed by a doctor 2 Yes, not diagnosed by a doctor 3 No 999 Missing
ranx	During the past 12 months have you had Anxiety?	1 Yes, diagnosed by a doctor 2 Yes, not diagnosed by a doctor 3 No 999 Missing
rdep	During the past 12 months have you had Depression?	1 Yes, diagnosed by a doctor 2 Yes, not diagnosed by a doctor 3 No 999 Missing
rcan	During the past 12 months have you had Cancer?	1 Yes, diagnosed by a doctor 2 Yes, not diagnosed by a doctor 3 No 999 Missing
rlupus	During the past 12 months have you had Lupus?	1 Yes, diagnosed by a doctor 2 Yes, not diagnosed by a doctor 3 No 999 Missing

WNY Public Health Alliance HRA 2005 Codebook

Variable	Question	Valid Responses
numdis	Total number of diseases listed above (calculated)	
rnodis	During the past 12 months have you had no diseases?	1 Yes 2 No 999 Missing
r08a	Have you ever had your blood cholesterol checked??	1 Yes 2 No 999 Missing
r08b1	Do you know your cholesterol level? (Primary Only)	1 Yes 2 No 999 Missing
r08b2	What is your total cholesterol level? (Primary Only)	999 Missing
r08b3	What is your LDL Cholesterol Level? (Primary Only)	999 Missing
r08b4	What is your HDL Cholesterol Level? (Primary Only)	999 Missing
r08c	Have you ever been told that your blood cholesterol level is above normal and that you are in need of treatment?	999 Missing
r08d	Are you currently receiving treatment to lower your cholesterol?	1 Yes 2 No 999 Missing
r08e	Are you currently taking medicine for high cholesterol?	1 Yes 2 No 999 Missing
r08f	Have you changed your diet to lower your cholesterol?	1 Yes 2 No 999 Missing
r08g	Do you exercise to lower your cholesterol?	1 Yes 2 No 999 Missing

WNY Public Health Alliance HRA 2005 Codebook

Variable	Question	Valid Responses
r09a	Have you ever checked your blood pressure?	1 Yes 2 No 999 Missing
r09b	Do you know your blood pressure?	1 Yes 2 No 999 Missing
r09c1	What is your SBP? (Primary Only)	999 Missing
r09c2	What is your DBP? (Primary Only)	999 Missing
r09d	Have you been told your blood pressure is above normal and that you are in need of treatment?	1 Yes 2 No 999 Missing
r09e	Are you currently receiving treatment for your blood pressure?	1 Yes 2 No 999 Missing
r09f	Are you taking medicine for high blood pressure?	1 Yes 2 No 999 Missing
r09g	Have you changed your diet to lower your blood pressure?	1 Yes 2 No 999 Missing
r09h	Do you exercise to lower your blood pressure?	1 Yes 2 No 999 Missing
r10a	Did your birth mother or any of your sisters have a heart attack before the age of 65?	1 Yes 2 No 999 Missing
r10b	Did your birth father or any of your brothers have heart attack before the age of 55?	1 Yes 2 No 999 Missing

WNY Public Health Alliance HRA 2005 Codebook

Variable	Question	Valid Responses
r11a	Did either of your birth parents ever have cancer?	1 Yes 2 No 999 Missing
r11b	Did any of your siblings ever have cancer?	1 Yes 2 No 999 Missing
r12	During the past 4 weeks, how would you describe your general health?	1 Excellent 2 Very Good 3 Good 4 Fair 5 Poor 999 Missing
r13	During the past 4 weeks, have you accomplished less than you would have liked as a result of any emotional problems such as feeling depressed or anxious?	1 Yes 2 No 999 Missing
r14	Have you had a flu shot within the last year?	1 Yes 2 No 999 Missing
r15	How long ago did you have your most recent PAP smear? (Females only)	0 Never had a PAP smear 1 Within the last year 2 1 – 3 years ago 3 Over 3 years ago 999 Missing
r16	When was the last time you had a breast examination by a doctor? (Females only) (Females only)	0 Never had a breast exam 1 Less than a year ago 2 1 – 2 years ago 3 2 – 4 years ago 4 More than 4 years ago 999 Missing

WNY Public Health Alliance HRA 2005 Codebook

Variable	Question	Valid Responses
r17	When was the last time you had a mammogram? (Females 40 or older only)	0 Never had a mammogram 1 Less than a year ago 2 1 – 2 years ago 3 2 – 4 years ago 4 More than 4 years ago 999 Missing
r18a	Have you ever had a PSA test? (Males 40 or older only)	1 Yes 2 No 999 Missing
r18b	How long has it been since your last PSA test? (Males 40 or older only)	0 Less than 12 months ago 1 1 year but less than 2 years 2 2 years but less than 3 years 3 3 years but less than 4 years 4 5 or more years ago 999 Missing
r19a	Have you ever received a digital rectal exam? (40 or older only)	1 Yes 2 No 999 Missing
r19b	How long has it been since your last digital rectal exam? (40 or older only)	0 Less than 12 months ago 1 1 year but less than 2 years 2 2 years but less than 3 years 3 3 years but less than 4 years 4 5 or more years ago 999 Missing
r20	Do you consider yourself overweight, underweight or just about right? (Prim only)	1 Overweight 2 Underweight 3 Just about right 999 Missing
r21	About how many Servings of Vegetables do you eat per week? (Prim only)	999 Missing

WNY Public Health Alliance HRA 2005 Codebook

Variable	Question	Valid Responses
R22	About how many servings of fruit do you eat per week? (Prim only)	999 Missing
r23	What kind of milk do you drink? (Prim only)	1 Whole milk 2 2% milk 3 1% milk 4 Skim milk 5 Other 999 Missing
r24	What best describes your level of physical activity? (Prim only)	1 No physical activity 2 Physical activity once in a while 3 Physical activity 3+ times a week 999 Missing
r25a	How many times per week do you do vigorous activities for at least 10 minutes that cause heavy sweating or large increases in breathing or heart rate?	999 Missing
r25b	About how long do you do these vigorous activities each time?	999 Missing
r25c	Each time you do these vigorous activities, do you do them 20 minutes or more or less than 20 minutes?	0 Less than 20 minutes 1 20 minutes or more 999 Missing
r26a	How often do you do light or moderate activities for at least 10 minutes that cause only light sweating or a slight to moderate increase in breathing or heart rate?	999 Missing
r26b	About how long do you do these light or moderate activities each time?	999 Missing
r26c	Each time you do these light or moderate activities, do you do them 20 minutes or more, or less than 20 minutes?	0 Less than 20 minutes 1 20 minutes or more 999 Missing
r27	How often do you do physical activity specifically designed to strengthen your muscles such as lifting weights or doing calisthenics?	999 Missing

WNY Public Health Alliance HRA 2005 Codebook

Variable	Question	Valid Responses
R28	On an average day, how many hours do you watch TV or spend time in front of a monitor? (recreational only)	0 No TV on an average day 1 Less than 1 hour per day 2 1 hour per day 3 2 hours per day 4 3 hours per day 5 4 hours per day 6 5 or more hours per day 999 Missing
r29a	When driving or riding in the front seat of a car or truck do you wear a seatbelt?	0 Never 1 All or most of the time 2 Some of the time 3 Once in a while 4 Don't ride in car/truck 999 missing
r29b	When riding in the back seat of a car or truck do you wear a seatbelt?	0 Never 1 All or most of the time 2 Some of the time 3 Once in a while 4 Don't ride in car/truck 999 missing
r30a	Have you smoked at least 100 cigarettes in your entire life?	1 Yes 2 No 999 Missing
r30b	Do you now smoke cigarettes?	0 Not at all 1 Every Day 2 Some Days 999 missing
r30c	How many cigarettes per day do you usually smoke?	999 Missing
r30d	Have you ever tried to quit smoking?	1 Yes 2 No 999 Missing

WNY Public Health Alliance HRA 2005 Codebook

Variable	Question	Valid Responses
r30e	How many times have you tried to quit smoking?	999 Missing
r30f1	When trying to quit smoking have you used nicotine patch?	1 Yes 2 No 999 Missing
r30f2	When trying to quit smoking have you used nicotine gum?	1 Yes 2 No 999 Missing
r30f3	When trying to quit smoking have you used zyban?	1 Yes 2 No 999 Missing
r30f4	When trying to quit smoking have you used an inhaler?	1 Yes 2 No 999 Missing
r30f5	When trying to quit smoking have you used alternative treatments such as acupuncture?	1 Yes 2 No 999 Missing
r31a	Have you smoked a pipe at least 20 times in your entire life?	1 Yes 2 No 999 Missing
r31b	Do you now smoke a pipe?	0 Not at all 1 Every Day 2 Some Days 999 missing
r32a	Have you smoked a cigar at least 20 times in your entire life?	1 Yes 2 No 999 Missing
r32b	Do you now smoke a cigar?	0 Not at all 1 Every Day 2 Some Days 999 missing

WNY Public Health Alliance HRA 2005 Codebook

Variable	Question	Valid Responses
r33a	Have you used snuff at least 20 times in your entire life?	1 Yes 2 No 999 Missing
r33b	Do you now use snuff?	0 Not at all 1 Every Day 2 Some Days 999 missing
r34a	Have you used chewing tobacco at least 20 times in your entire life?	1 Yes 2 No 999 Missing
r34b	Do you now use chewing tobacco?	0 Not at all 1 Every Day 2 Some Days 999 missing
r36a	Have you felt that someone in your household should cut down on drinking? (Primary only)	0 No/Never 1 Occasionally 2 Often 999 missing
r36b	Has anyone in your household ever felt annoyed by complaints about their drinking? (Primary only)	0 No/Never 1 Occasionally 2 Often 999 missing
r36c	Has anyone in your household felt guilty about their drinking? (Primary only)	0 No/Never 1 Occasionally 2 Often 999 missing
r36d	Has anyone in your household ever had a drink first thing in morning to steady nerves or get rid of a hangover? (Primary only)	0 No/Never 1 Occasionally 2 Often 999 missing

WNY Public Health Alliance HRA 2005 Codebook

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r37a	Has anyone living in your household ever used marijuana? (Primary only)	1 Yes 2 No 999 Missing
r37b	Has anyone living in your household ever used cocaine, crack, heroin or any other street drug? (Primary only)	1 Yes 2 No 999 Missing
r37c	Has anyone living in your household ever used a needle to take street drugs? (Primary only)	1 Yes 2 No 999 Missing
r38	During the past 12 months, has anyone in your household Witnessed or been involved in physical violence? (Primary only)	1 Yes 2 No 999 Missing
r40	What is the highest grade or level of school you have completed or the highest degree you have received? (Primary only)	1 Less than HS 2 HS or GED 3 Trade 4 Some College 5 Grad School 999 Missing
r41	What is your current marital status? (Primary only)	1 Married/Living with partner 2 Widowed 3 Divorced 4 Separated 5 Never married 999 Missing
r42a	Are you currently employed?	1 Yes 2 No 999 Missing
r42b	Are you employed full time, part time or self-employed?	1 Employed Full Time 2 Employed Part Time 3 Self-employed 999 Missing

WNY Public Health Alliance HRA 2005 Codebook

Variable	Question	Valid Responses
r42c	Are you retired, a homemaker, a student, or looking for work?	1 Retired 2 Disabled/Medical reason 3 Homemaker 4 Student 5 Looking for work 6 None of the above 999 Missing
r42d	How long have you been unemployed?	0 Unemployed less than 6 months 1 Unemployed more than 6 months 999 missing
r43a	How many employees work in your company or organization?	1 1 2 2-10 3 11-25 4 26-50 5 51-100 6 101-200 7 201-300 8 301-400 9 401-500 999 Missing
r43b	Does your employer or union offer a health insurance plan for employees?	1 Yes 2 No 999 Missing
r43c	Does your employer pay for all, some, or none of the cost of health insurance coverage?	0 None 1 All 2 Some 999 missing

WNY Public Health Alliance HRA 2005 Codebook

Variable	Question	Valid Responses
r44	Which of the following is closest to your current household income? (Primary only)	1 < 10,000 2 10 – 29,999 3 30 – 49,999 4 > 50k 999 Missing
r45	Do you receive any form of public assistance?	1 Yes 2 No 999 Missing
r46	Did you feel comfortable answering for others in the household? (Primary only)	1 Yes 2 No 999 Missing
popwt	Population Weight	999 Missing
age2	Age groups - 18-44, 45-64, and 65+ (calculated)	1 18-44 2 45-64 3 65+ 999 Missing
age4	Age groups - 18-64 and 65+ (calculated)	1 18-64 2 65+ 999 Missing
genagewt	Gender/Age weight	999 Missing

WNY Public Health Alliance HRA 2005 Codebook

Variable	Question	Valid Responses
genage	Groups by gender and age (calculated)	1 Male 18 – 44 2 Male 45 – 64 3 Male 65+ 4 Female 18 – 44 5 Female 45 – 64 6 Female 65+ 999 Missing
pipe	Do you smoke a pipe?	1 Non-Pipe Smoker 2 Former Pipe Smoker 3 Current Pipe Smoker 999 Missing
cigar	Do you smoke a cigar?	1 Non-Cigar Smoker 2 Former Cigar Smoker 3 Current Cigar Smoker 999 Missing
snuff	Do you use snuff?	1 Non-snuff user 2 Former snuff user 3 Current snuff user 999 Missing
chew	Do you chew tobacco?	1 Non-tobacco chewer 2 Former tobacco chewer 3 Current tobacco chewer 999 Missing

WNY Public Health Alliance HRA 2005 Codebook

Variable	Question	Valid Responses
vegfit	# of Servings of Veg/Fruit per day	999 Missing
filter_\$	strata4 < 9 (FILTER)	
age4fly		1 18 – 35 2 36 – 55 3 55+ 999 Missing