**Stepping Up to Health** is providing you with both a pedometer and a website to help you walk more. To begin the program, please answer the following survey questions so we can learn more about you, your current level of activity, and other questions related to your lifestyle. The survey must be taken in one sitting, so you might want to set aside some time to take this survey. If you quit before the end of the survey, your answers will not be saved, and you will have to start over when you return. It takes most people 20-30 minutes to complete this survey. Please answer each question. Your honest answers will provide the keys we need to create a program that meets your individual needs. The more we know, the more we can develop tools that make sense to you. However, you are not required to answer any question. When you complete the main survey, you may be directed to up to three disease-specific sections. You will have a chance to take a break before filling out the additional sections.

#### {THEREAREXQUESTIONS}

### Section 1 Question Code: 2X2X5 Short Desc: 1EnjoyRecAct Do you participate in any of the following social or recreational activities? Check any that apply Bowling (2X2X5Bowl) Gardening (2X2X5Garden) Golfing (2X2X5Golf) ☐ Shuffleboard (2X2X5Shuffle) Reading (2X2X5Read) Watching television (2X2X5TV) Bicycling (2X2X5Bike) Fishing (2X2X5Fish) Tennis (2X2X5Tennis) Swimming (2X2X5Swim) Bingo (2X2X5Bingo) ☐ Playing cards (2X2X5Cards) Attending church or social clubs (2X2X5Church) Going to lunch or coffee with friends (2X2X5Friends) I do not partake in any recreational activities (2X2X5None) Question Code: 2X2X6 Short Desc: 2aSitAct

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Over the past 7 days in your leisure time, how often did you participate in sitting activities such as

### reading, watching TV or doing handcrafts? Choose only one of the following

- Never (Never)
- Seldom (1-2 days) (Seldom)
- Sometimes (3-4 days) (Sometimes)
- Often (5-7 days) (Often)

Question Code: 2X2X7 Short Desc: 2bSitActWriteIn

What were these activities? SEE QUSTIONCODE ABOVE

Question Code: 2X2X8 Short Desc: 2cHrsSitAct

# On average, how many hours per day did you engage in these sitting activities in your leisure time? Choose only one of the following

- Less than 1 hour (Less1hour)
- 1 but less than 2 hours (1to2hours)
- 2-4 hours (2to4hours)
- More than 4 hours (More4hours)

Question Code: 2X2X9 Short Desc: 3aWalkOutside

Over the past 7 days, how often did you take a walk outside your home or yard for any reason? For example, for fun or exercise, walking to work, walking the dog, etc.?

Choose only one of the following

- Never (Never)
- Seldom (1-2 days) (Seldom)
- Sometimes (3-4 days) (Sometimes)
- Often (5-7 days) (Often)

Question Code: 2X2X10
Short Desc: 3bWalkOutsideWriteIn
What were these activities?
SEE QUSTIONCODE ABOVE

Question Code: 2X2X11 Short Desc: 3cHrsWalkOutside

#### On average, how many hours (minutes) per day did you spend walking? Choose only one of the following

- Less than 1 hour (Less1hour)
- 1 but less than 2 hours (1to2hours)
- 2-4 hours (2to4hours)
- More than 4 hours (More4hours)

Question Code: 2X2X12 Short Desc: 4aLightRecAct

Over the past 7 days, how often did you engage in light sport or recreational activities such as bowling, golf with a cart, shuffleboard, fishing from a boat or pier or other similar activities?

Choose only one of the following

- Never (Never)
- Seldom (1-2 days) (Seldom)
- Sometimes (3-4 days) (Sometimes)
- Often (5-7 days) (Often)

Question Code: 2X2X14
Short Desc: 4bLightRecActWriteIn

What were these activities? SEE QUSTIONCODE ABOVE

Question Code: 2X2X15 Short Desc: 4cHrsLightRecAct

On average, how many hours per day did you engage in these light sport or recreational activities?

Choose only one of the following

- Less than 1 hour (Less1hour)
- 1 but less than 2 hours (1to2hours)
- 2-4 hours (2to4hours)
- More than 4 hours (More4hours)

Question Code: 2X2X16 Short Desc: 5aModRecAct

Over the past 7 days, how often did you engage in moderate sport and recreational activities such as doubles tennis, ballroom dancing, hunting, ice skating, golf without a cart, softball or other similar activities?

#### Choose only one of the following

- Never (Never)
- Seldom (1-2 days) (Seldom)
- Sometimes (3-4 days) (Sometimes)
- Often (5-7 days) (Often)

Question Code: 2X2X17 Short Desc: 5bModRecActWriteIn

What were these activities? SEE QUSTIONCODE ABOVE

Question Code: 2X2X18 Short Desc: 5cHrsModRecAct

## On average, how many hours per day did you engage in these moderate sport or recreational activities? Choose only one of the following

- C Less than 1 hour (Less1hour)
- 1 but less than 2 hours (1to2hours)
- 2-4 hours (2to4hours)
- More than 4 hours (More4hours)

Question Code: 2X2X19 Short Desc: 6aStrenRecAct

Over the past 7 days, how often did you engage in strenuous sport and recreational activities such as jogging, swimming, cycling, singles tennis, aerobic dance, skiing (downhill or cross-country) or other similar activities?

#### Choose only one of the following

- Never (Never)
- Seldom (1-2 days) (Seldom)
- Sometimes (3-4 days) (Sometimes)
- Often (5-7 days) (Often)

Question Code: 2X2X20 Short Desc: 6bStrenRecActWriteIn

## What were these activities? SEE QUSTIONCODE ABOVE

Question Code: 2X2X21 Short Desc: 6cHrsStrenRecAct

## On average, how many hours per day did you engage in these strenuous sport or recreational activities? Choose only one of the following

- Less than 1 hour (Less1hour)
- 1 but less than 2 hours (1to2hours)
- 2-4 hours (2to4hours)
- More than 4 hours (More4hours)

Question Code: 2X2X22 Short Desc: 7aEndurEx

Over the past 7 days, how often did you do any exercises specifically to increase muscle strength and endurance, such as lifting weights or pushups, etc.?

Choose only one of the following

- Never (Never)
- Seldom (1-2 days) (Seldom)
- Sometimes (3-4 days) (Sometimes)
- Often (5-7 days) (Often)

Question Code: 2X2X23 Short Desc: 7bEndurExWriteIn

What were these activities? SEE QUSTIONCODE ABOVE

Question Code: 2X2X24 Short Desc: 7cHrsEndurEx

On average, how many hours per day did you engage in exercises to increase muscle strength and endurance?

Choose only one of the following

- C Less than 1 hour (Less1hour)
- 1 but less than 2 hours (1to2hours)
- 2-4 hours (2to4hours)

More than 4 hours (More4hours)

Question Code: 2X2X27 Short Desc: 9aWorkPayVol

## During the past 7 days, did you work, either for pay or as a volunteer?

Choose only one of the following

Yes (Yes)
No (No)

Question Code: 2X2X28 Short Desc: 9bHrsWorkPayVol Question Code: 2X2X29 Short Desc: 9cPhysActForJob

#### **Section 2**

Question Code: 2X5X26 Short Desc: 8a-f

### During the past 7 days, did you engage in any of the following activities? Yes No Have you done any light housework, such as dusting or washing dishes? 2X5X26LtHousework Have you done any heavy housework or chores, such as vacuuming, scrubbing floors, washing windows, or carrying wood? 2X5X26HeavyHousework Home repairs like painting, wallpapering, electrical work, etc.? 2X5X26HomeRepairs Lawn work or yard care, including snow or leaf removal, wood chopping, etc.? 2X5X26LawnWork Outdoor gardening? 2X5X26Gardening Caring for another person, such as children, grandchildren, dependent spouse, or another adult?

2X5X26CareForOther

Question Code: 2X5X30 Short Desc: 10OAMotWalk

### Overall, how MOTIVATED are you to walk each day? Use the scale below.

1 - Not 2 3 4 5 6 7 8 9 Extremely Motivated

Choose One 2X5X30Menu

Question Code: 2X5X31 Short Desc: 11Int

# How much have you THOUGHT about your reasons for exercising? Use the scale below. Choose only one of the following

 $^{igcap}$  1 No thought at all (1)

<sup>©</sup> 2 (2)

<sup>©</sup> 3 (3)

<sup>6</sup> 4 (4)

<sup>6</sup> 5 (5)

<sup>6</sup> 6 (6)

<sup>6</sup> 7 (7)

<sup>6</sup> 8 (8)

<sup>6</sup> 9 (9)

10 A great deal of thought (10)

Question Code: 2X5X32 Short Desc: 12Int

There are many REASONS people decide to walk. Please tell us how important each reason is for YOU.

•	1 Not at all important	2	3	4	5	6	7 Very important
To prevent future health problems 2X5X32IMPreventFuture	Ċ	Ó	Ó	Ċ	Ò	O	0
I feel guilty for not	O	О	0	0	O	0	0

	cising more K32NMGuilt								
	er people want me to K32EMOtherWant	C		O	0	0	0	0	0
my o	ake responsibility for own health K32IMResponsible	0	,	0	0	0	0	0	0
exan	cise sets a good nple for my family K32EMGdExFam	c		0	0	0	0	0	0
heal	nprove my physical th K32IMPhysHealth	c		O	0	0	0	C	0
exer	loctor told me to cise more K32EMDoctor	c		0	0	0	0	C	0
	oy exercise K32IMEnjoy	Ċ	. ,	Ò	0	0	0	O	0
exan com	nt to set a good nple for my munity K32EMGdExCom	0		0	0	0	0	0	0
	ieve it is a good thing 《32IMBelieve	c		Ò	0	Ô	0	Ô	0
I will	lon't exercise, I know regret it K32NMRegret	О		0	0	0	O	0	0
with	ers would be upset me if I didn't K32EMUpsetOthers	C	,	0	0	0	0	С	0
	nanage my weight K32IMManageWeight	C		O	0	0	0	С	O
dowi	n't want to let others n K32EMOthersDown	C	,	0	О	0	0	0	0

To improve my ability to do daily activities 2X5X32IMDailyAct	0	0	0	0	0	0	C
To increase my energy levels 2X5X32IMIncreaseEnerg	O	0	0	0	0	0	C
I want others to see that I can 2X5X32EMOthersSee	O	0	0	0	0	0	C
It is easier to do what I am told 2X5X32EMTold	O	Ò	0	O	O	C	O
I would feel bad about myself if I didn't 2X5X32NMBadAboutSelf	0	0	0	0	0	0	C
To control an existing health problem 2X5X32MotControlExist	0	0	0	0	O	0	C
It will give me a sense of accomplishment 2X5X32IMAccomplishmen	O	0	0	0	0	0	C
To feel less tension and stress 2X5X32MotLessTension	0	0	0	0	C	0	C
To feel more attractive 2X5X32MotAttractive	O	0	0	0	0	0	0

Question Code: 2X5X33 Short Desc: 13OAConWalk

Overall, how CONFIDENT are you that you can walk each day? Use the scale below.  Choose only one of the following							
1 Not at all Confident							
♥ 2							
€ 3							
<i>©</i> 5							
<b>€</b> 6							
© 7							

₾ 8
₾ 9
10 Extremely Confident

Question Code: 2X5X34 Short Desc: 14OAC

Short Desc: 140AC								
Listed below are issues that can make it DIFFICULT for people to exercise. How confident are you that you can exercise when:								
	1 Not at all Confident	2	3	4	5	6	7 Very Confident	
You feel you don't have the time to exercise 2X5X34BarTime	0	0	0	0	0	0	0	
The weather is hot 2X5X34BarHotWeath	Ó	Ó	Ó	Ó	Ò	Ô	c	
The weather is cold 2X5X34BarColdWeath	C	0	0	O	0	0	C	
Health issues make it difficult 2X5X34BarHealthProb	С	0	0	0	O	0	С	
You're afraid of getting hurt 2X5X34BarHurt	C	0	0	0	0	O	O	
It takes too much effort 2X5X34BarEffort	Ô	Ó	Ó	Ó	Ò	Ô	0	
It's too expensive to join a club or gym 2X5X34BarExpensive	0	0	0	0	0	0	0	
You don't feel you have a safe place to exercise 2X5X34BarSafePlace	O	О	0	0	0	0	С	
You might sweat 2X5X34BarSweat	C	O	0	0	0	0	0	
You don't have anyone to exercise with	0	O	О	0	0	0	С	

2X5X34BarNoOne							
You feel self conscious about your looks during exercise 2X5X34BarSelfConsciou	C	0	0	0	0	C	C
You don't have energy 2X5X34BarEnergy	o	0	0	0	0	0	0
You feel tired 2X5X34BarTired	0	O	О	0	0	0	O
You're in a bad mood 2X5X34BarBadMood	C	0	0	0	0	C	c

Question Code: 2X5X35 Short Desc: 15Cur

Do you currently GET support from your family or friends in getting enough physical activity?

Choose only one of the following

> Question Code: 2X5X36 Short Desc: 16WantSupport

Do you WANT support from your family or friends in getting enough physical activity?

Choose only one of the following

ិ Yes (Yes) ិ No (No)

> Question Code: 2X5X37 Short Desc: 17WhoSupport

#### **Section 3**

Question Code: 2X6X38 Short Desc: 18Nei

Please choose the answer that best applies to you and your neighborhood. Both "local" and "within walking distance" mean a 20-minute walk from your home or less.

	Strongly Disagree			Strongly Agree
I can do most of my shopping at local stores. 2X6X38LocalStores	0	0	0	C
Stores are within easy walking distance of my home. 2X6X38StoresWalkDist	C	0	0	¢
Parking is difficult in local shopping areas. 2X6X38ParkingDiff	O	0	0	O
There are many places to go within easy walking distance of my home. 2X6X38ManyPlacesWalk	C	0	0	¢
It is easy to walk to a bus/subway/train stop from my home. 2X6X38EasyWalkTransit	О	0	0	O
The streets in my neighborhood are hilly, making my neighborhood difficult to walk in. 2X6X38StreetsHillyDif	Ċ	O	Ö	O

Question Code: 2X6X39 Short Desc: 19Saf

Please choose the answer that best applies to you and your neighborhood. Both "local" and "within walking distance" mean a 20-minute walk from your home or less.

	Strongly Disagree			Strongly Agree
There are sidewalks or walking paths that I feel are safe enough to walk on in my neighborhood. 2X6X39SidewalksSafe	C	0	0	c
I feel safe walking in my neighborhood during the day. 2X6X39SafeWalkDay	O	O	Ô	O

I feel safe walking in my neighborhood at night.

Question Code: 2X6X40 Short Desc: 200wnDog

### Do you own a dog? Choose only one of the following

Yes (Yes)
No (No)

Question Code: 2X6X41 Short Desc: 21WalkDog Question Code: 2X6X42 Short Desc: 22OftenWalkDog

#### **Section 4**

Question Code: 2X7X43 Short Desc: 23GenHealth

#### In general, how would you rate your health? Choose only one of the following

- Excellent (Excellent)
- Very good (VeryGood)
- Good (Good)
- Fair (Fair)
- Poor (Poor)

Question Code: 2X7X44 Short Desc: 24GenHealth

### Please rate how much your health currently limits you in the following activities.

Not at all Somewhat Significantly Limited Limited

Moderate intensity activities, such as racquet sports, pushing a vacuum cleaner, bowling, golf, bicycling, swimming, or fast walking 2X7X44SF36d

Low intensity activities, such as casual walking, home maintenance, or gardening 2X7X44SF36L	0	C	0
Climbing several flights of stairs 2X7X44SF36S	0	0	0
Climbing one flight of stairs 2X7X44SF36O	O	С	0

Question Code: 2X7X45 Short Desc: 25GenHealth

For each question please give the one answer that comes closest to the way you have been feeling in the last 4 weeks. How much of the time:

	None of the time	A little of the time	of	Most of the time	the
Have you felt calm and peaceful? 2X7X45CalmPeaceful	Ô	Ó	O	O	Ô
Did you have a lot of energy? 2X7X45HaveEnergy	O	0	0	0	0
Have you felt downhearted and blue? 2X7X45DownheartedBlue	O	Ô	O	O	O

Question Code: 2X7X46 Short Desc: 26HealthHistory

Do you or have you ever suffered from, or have you been diagnosed with, any of the following?  Check any that apply	u
Stroke (2X7X46Strok)	
Parkinson's disease (2X7X46Parki)	
Lung disease, emphysema, asthma or bronchitis (2X7X46Asthm)	
Arthritis (2X7X46Arthr)	

Osteoporosis or thin bones (2X7X46Osteo) Depression, anxiety or an emotional problem

(2X7X46MdDis)	
Neurological disorder (2X7X46NeurD)	
Sleep problems such as insomnia or narcolepsy (2X7X46Sleep)	
Chronic pain (2X7X46Chron)	
A hip or knee joint replacement surgery (2X7X46Joint)	
Liver problems (2X7X46Liver)	
Type 2 diabetes (2X7X46Diabe)	
☐ High blood pressure (2X7X46HBP)	
☐ Impaired glucose tolerance (pre-diabetes) (2X7X46IGT)	
High cholesterol (2X7X46HiCho)	
☐ Breast cancer (2X7X46Breas)	
Colon cancer (2X7X46Colon)	
Prostate cancer (2X7X46Prost)	
Lung cancer (2X7X46LungC)	
Other cancer (2X7X46Other)	
$\square$ Stomach or digestive disorder (2X7X46Diges)	
Kidney problems (2X7X46Kidne)	
Angina or chest pain from heart disease (2X7X46Angina)	
Heart failure (2X7X46HeartFail)	
☐ Heart attack (2X7X46HeartAttack)	
Coronary artery disease (2X7X46CAD)	
! '	1

Question Code: 2X7X47 Short Desc: 27HealthHistory

Each item below is a belief statement about your health with which you may agree or disagree. Please choose a response along the scale that best represents how you feel.

	feel.						
	1 - Strongly disagree	2	3	4	5		7 - Strongly agree
The main thing that affects my health is what I myself do 2X7X47MHLCWhatIDoAffe	c	0	0	0	0	0	0
If I take care of myself, I can avoid illness 2X7X47MHLCSelfCareAvo	C	0	О	0	0	0	0
If I take the right actions, I can stay healthy 2X7X47MHLCRightActSta	0	0	0	0	0	0	0

Question Code: 2X7X48 Short Desc: 28OtherBeh

### Please tell us about other behaviors related to your health.

#### Check any that apply

, , , , , , , , , , , , , , , , , , , ,
I wear my seat belt when driving or a passenger in a car. (2X7X48SeatBelt)
☐ I wear a helmet when riding a bicycle. (2X7X48BicHelmet)
I wear a helmet when riding a motorcycle. (2X7X48MotorHelmet)
I have a physical with a health care provider every 1-3 years. (2X7X48Physical)
I practice a stress management technique (such as yoga or deep breathing). (2X7X48StressManage)
I floss my teeth. (2X7X48Floss)
I get a flu shot every year. (2X7X48FluShot)
☐ I take a multivitamin. (2X7X48MultiVit)
I'm up to date with my shots (tetanus, diphtheria, measles, chicken pox, etc). (2X7X48Vacc)

Question Code: 2X7X49 Short Desc: 29TryingLoseWt

### Are you currently trying to lose weight? Choose only one of the following

ិ Yes (Yes)

No (No)

Question Code: 2X7X50 Short Desc: 30SmokeCigs

## Do you currently smoke cigarettes? Choose only one of the following

Yes (Yes)

No, but I am a former smoker (NoFormer)

No, I have never smoked (NoNever)

Question Code: 2X7X51 Short Desc: 31CigsDaily Question Code: 2X7X52 Short Desc: 32YrsAgoQuit Question Code: 2X7X53 Short Desc: 33FamilyHealthHist

Does anyone in your immediate family (mother, father, sister, brother) have any of the following

### conditions? Check any that apply Arthritis (2X7X53Arthritis) Diabetes (2X7X53Diabetes) Impaired glucose tolerance (pre-diabetes) (2X7X53IGT) Cardiovascular disease (2X7X53CVD) Stroke (2X7X53Stroke) High cholesterol (2X7X53HiChol) ☐ High blood pressure (2X7X53HBP) Breast cancer (2X7X53BreastCancer) Colon cancer (2X7X53ColonCancer) Prostate cancer (2X7X53ProstateCancer) Other cancer (2X7X53OtherCancer) Osteoporosis (2X7X53Osteo) Overweight and/or obese (2X7X53OvrWtObese) I do not know my family health history (2X7X53DK)

#### **Section 5**

Question Code: 2X10X82 Short Desc: 34PedUse

### Have you ever used a pedometer? Choose only one of the following

Yes (Yes)
No (No)

Question Code: 2X10X83 Short Desc: 35Ped30Days Question Code: 2X10X87 Short Desc: 39MaritalStatus

### What is your current marital status? Choose only one of the following

- Single (Single)
- Married (Married)
- Living with partner (Partner)
- Separated (Separated)
- Divorced (Divorced)
- Widowed (Widowed)
- Other (Other)

Question Code: 2X10X88 Short Desc: 40HispanicLatino

Do you consider yourself to be Hispanic or Latino (a

# person of Mexican, Puerto Rican, Cuban, South or Central American, or other Spanish culture or origin)?

#### Choose only one of the following

Yes, Hispanic or Latino (Yes)
No, not Hispanic or Latino (No)

Question Code: 2X10X89

### Short Desc: 41Race

#### What race do you consider yourself to be? Check any that apply

J	American Indian or Alaska Native. A person having origins
1	n any of the original peoples of North, Central, or South
Δ	America, and who maintains tribal affiliation or community
a	attachment. (2X10X89AmIndian)

Asian. A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent. (2X10X89Asian)

Black or African-American. A person having origins in any of the black racial groups of Africa. (2X10X89Black)

Native Hawaiian or Other Pacific Islander. A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands. (2X10X89PacIsland)

White. A person having origins in any of the original peoples of Europe, the Middle East, or North Africa. (2X10X89White)

Othe	er	race	(2X10X89OtherRace)	)

Other:

Question Code: 2X10X90 Short Desc: 42HomeStatus

### Do you live alone? Choose only one of the following

C Yes (Yes)

No (No)

Question Code: 2X10X91 Short Desc: 43AdultInHome

### What other adults live with you? Check any that apply

Spouse (2X10X91Spouse)

Partner (2X10X91Partner)

Friend (2X10X91Friend)

Adult children (2X10X91AdultChild)

Immediate family (mother, father, brother, sister) (2X10X91ImFamily)
Relative (2X10X91Relative)
Other adults (2X10X91OthAdult)

Question Code: 2X10X92 Short Desc: 44ChildInHome

### Do any children under the age of 18 live in your home?

Choose only one of the following

Yes (Yes)
No (No)

Question Code: 2X10X93 Short Desc: 45EducationLevel

## What is the highest grade or level of schooling you have completed? Choose only one of the following

- 7th grade or less (Lessthan7)
- Between 8th and 11th grade (8to11)
- 12th grade or completed high school or GED (12orGED)
- Post high school training other than college (e.g., vocational or technical) (PostHiSchool)
- Some college (SomeCollege)
- 2-year college graduate (Associate's degree) (2YearCollege)
- College graduate (CollegeGrad)
- Postgraduate (Postgraduate)

Question Code: 2X10X94 Short Desc: 46Employment

# Which of the following best describes your current employment status? Check any that apply

Working full time, 35 hours or more a week (2X10X94FullTime)

Working part time, less than 35 hours a week (2X10X94PartTime)

Unemployed or laid off and looking for work (2X10X94UnLooking)

Unemployed and not looking for work (2X10X94UnNotLooking)

Homemaker (2X10X94Homemaker)

In school (2X10X94Student)
Retired (2X10X94Retired)
☐ Disabled, not able to work (2X10X94Disabled)
Other (2X10X94EmployOther)

Question Code: 2X10X95 Short Desc: 47Income

# Which of the categories best describes your total annual combined household income from all sources? Choose only one of the following

- Less than \$5,000 (Less5K)
- \$5,000 to \$9,999 (5Kto9999)
- \$10,000 to \$14,999 (10Kto14999)
- \$15,000 to \$19,999 (15Kto19999)
- \$20,000 to \$29,999 (20Kto29999)
- \$30,000 to \$39,999 (30Kto39999)
- \$40,000 to \$49,999 (40Kto49999)
- \$50,000 to \$59,999 (50Kto59999)
- \$60,000 to \$69,999 (60Kto69999)
- \$70,000 and over (70KMore)

Question Code: 2X10X96 Short Desc: 48InternetAbil

### How would you rate your ability to use the Internet? Choose only one of the following

- Limited (Limited)
- Basic (Basic)
- Moderate (Mod)
- Advanced (Adv)
- Expert (Expert)

Question Code: 2X10X97 Short Desc: 49InternetUse

#### Would you say that you use the Internet... Choose only one of the following

- Every day (EveryDay)
- A few times a week (FewWk)
- Once a week (OnceWk)
- A few times a month (FewMnth)
- Once a month (OnceMnth)
- Less than once a month (LessOnceMnth)

next >>

[Exit and Clear Survey]