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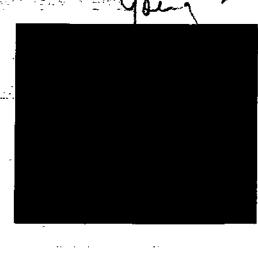
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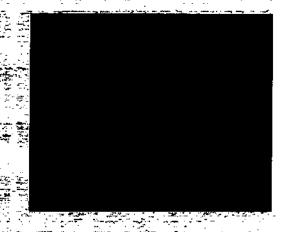
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# Report of a Pretest of the Survey Instrument for the Vietnam Era Twin Study Survey of Health

Mary Utne O'Brien, Ph.D. NORC August 1984

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# Report of a Pretest of the Survey Instrument for the Vietnam Era Twin Study Survey of Health

#### Overview of the Report

This is the report of a pretest of the survey instrument and accompanying respondent meterials proposed for use in the Yietnam Era Twin Study (YETS) <u>Survey of Health</u>. The pretest was conducted by NORC, a social science research center at the University of Chicago, under contract to the National Academy of Sciences. The purpose of the pretest was to obtain information about the performance of the items comprising the survey instrument—their clarity and face validity, the suitability of their particular organization within the instrument, and the appropriateness of their interconnecting instructions. Also under study was whether the cover letter accompanying and introducing the study to respondents was as informative and persuasive a document as possible.

A convenience sample of veteran twin pairs from the Chicago area was mailed the cover letter and survey instrument in late May, 1984. Returns from this sample were manually reviewed for respondent problems with instructions and apparent misunderstandings of the intent of items. All such item problems were recorded by case number and are described in this report. Responses to the open-ended items in the survey were recorded verbatim, and questionnaires were then edited for machine entry of responses for computer analysis. Responses to items are also summarized in this report.

A subgroup of the respondents to the mail survey, selected to represent diversity with respect to several of the key variables in the questionnaire, was invited to NORC for discussion of the survey instrument and cover letter. Two focus groups, involving fraternal and identical twin pairs (i.e., both brothers present), were conducted.

The examination of response problems, the statistical analyses of items, the discussions with the twin veterans themselves, and experience with many other mail survey instruments, lead NORC to conclude that the VETS <u>Survey of Health</u> is an exceptionally clear and effective document. Responses were remarkably error-free, item non-response was extremely low, and veterans reported enjoying the experience of completing the survey. NORC recommends a number of changes in the survey instrument and in the cover letter, however, and these are described, and the reasons for them documented, in this report. A complete draft of the recommended form of the survey instrument and the cover letter is attached to this report.

The remainder of this report consists of four sections. Section I briefly reviews the purposes of the twin registry and the survey of health. Section II describes the design of the pretest. Section III presents the study's findings. In the fourth and final section, NORC describes its recommendations for changes in the survey instrument and the cover letter, for use in the main survey.

### The Vietnam Era Twin Study and the Vietnam Era Twin Registry <u>Survey of Health</u>

A. Components of the VETS—The Yietnam Era Twin Study <u>Survey of Health</u> is one component of the overall research program known as the Yietnam Era Twin Study (VETS). The YETS is composed of three distinct activities: 1) identification of a set of approximately 12,000 Vietnam era veteran twin pairs; 2) the mailed <u>Survey of Health</u>, sent to all 12,000 twin pairs; and 3) a comprehensive medical, psychiatric, psychological and psycho-social examination of 600 pairs of identical twins randomly selected from the Yietnam Era Twin Registry.

The identification of 12,000 veteran twin pairs is being carried out by the National Academy of Sciences Medical Follow-Up Agency (NAS-MFUA) under contract with the Yeterans Administration. Yeteran twin pairs will be identified using the military records maintained at the National Personnel Records Center in St. Louis. The NAS-MFUA is abstracting a large number of socio-demographic and military service variables from the military records. All of the items collected are being entered into a computer file which will form the Yietnam Era Twin Registry.

The second component of the YETS, the <u>Survey of Health</u>, is designed to serve two purposes. First, it will gather information about a wide range of health parameters that can be used as "screener" information by future researchers. For example, all those who report having diabetes might form one group for future study; those with chronic skin conditions, such as severe acne, another group; those who report severe emotional problems, another; and so on.

A second purpose of the <u>Survey of Health</u> will be to provide information for analyses that require no further data collection. That is, it will yield a data set with sufficient information to support original analyses about specific health conditions. By combining the information abstracted from the military records with the <u>Survey of Health</u> it will be possible to examine the relationship between military service and a wide variety of medical and psychological conditions.

The third component of the YETS is the comprehensive medical, psychiatric, psychological, and psycho-social assessment of health. The comprehensive health assessment (which is presently in the planning phase) will involve selecting a random sample of 600 twin pairs from the Yietnam Era

Twin Registry. These 600 twin pairs would then be invited to St. Louis for examination and testing. The purpose of the comprehensive health assessment is to provide a precise understanding of the association between service in Southeast Asia and long-term health status.

- **B. Major Sections of the <u>Survey of Health</u>** The YETS <u>Survey of Health</u> asks questions in seven major topical areas: zygosity, demographic, alcohol and cigarette consumption, physical health, combat experience, emotional health, marriage and reproductive history, and locating information. Each of these major areas is briefly discussed below:
- Zygasity. The purpose of the zygosity questions is to discriminate between
  monozygotic and dizygotic twins. The ability to distinguish between mono and dizygotic twins is
  important for all future studies that examine the impact of genetics and environment on health and
  disease.
- 2. Demographics. Basic demographic questions are included so that the Yietnam Era Twin Registry can be compared and contrasted to the population of all Yietnam Era veterans. In addition, many demographic characteristics are strongly associated with health and disease.
- 3. Alcohol and Cigarette Consumption. These items are known to be associated with many diseases. In studying the health effects of military service it essential to adjust for the potential confounding effects of alcohol and smoking.
- 4. Physical Health. The twin pairs are asked about a broad spectrum of specific illnesses and diseases (such as concer, stroke, liver disease, etc.). Each veteran is asked whether he currently has a specific disease, whether he has visited a physician for the condition, and whether he has been hospitalized for this condition.
- 5. Combat Experience. A list of 18 different combat roles or experiences that men could have had while in Southeast Asia is included. These items are potentially important contributors to the long-term physical and emotional health of the veterans.
- 6. Emotional Health. A considerable number of questions are asked regarding the respondent's emotional health. A special effort has been made to ascertain whether any veterans display symptoms of Post-Traumetic Stress Disorder.
- 7. Marriage and Fertility History. A complete marital and fertility history is obtained from each veteran. Included in this history are dates of all marriages, divorces and childbirths.
- 8. Locating Information. The respondent's most recent address and telephone number are requested; also the most recent address and telephone number of his twin are obtained. This information will be very important for future studies involving the Vietnam Era Twin Registry.

#### II. Design of the Pretest

The pretest consisted of a mail survey of 119 individuals, all Yietnam-era veteran twins, and focus group discussions of the survey instrument and study procedures with selected mail survey respondents. The entire pretest was conducted over a five-week period from late-May through June, 1984.

- A. The Sample The pretest used two convenience samples of veteran twins. The first sample, which yielded the majority of the cases, was from Defense Manpower Data Center (DMDC) data tapes. The second sample consisted of a group of self-selected veteran twins.
- 1. The DMDC sample. The DMDC data tapes contain information reported at the time of separation from service for all individuals who were discharged from the U.S. military after 1968. Following an initial sort on year of separation from service ( to encompass veterans from the period of service of interest to the study (1968–1975)), and Chicago-area zip code, veteran twin pairs were selected using the following criteria:
  - 1. Same last name
  - 2. Same date of birth
  - 3. Different first name
  - 4. Social security number the same to the first five digits.

Selection on these criteria yielded 91 veteran twin pairs. Inspection of the DMDC information available for each case revealed that due to coding and data entry errors, there were actually only 81 likely twin pairs. In addition to the non-twins that were eliminated, two more pairs were excluded because inspection of first names suggested they were female, as later confirmed by parents, bringing the total number of pairs in the DMDC sample to 79.

DMDC data on these individuals include "home address" at the time of separation from service. For most of these young men, this was their parents' home address. The age of this information ranged from 9 to 16 years old—a fairly cold trail for locating. Fortunately, the parents of fully 46% of the veteran twins could still be reached at the address reported at the time of leaving the service. Using the non-extraordinary locating techniques of directory assitance, telephone directories and criss—cross directories (which, given an address, supply any associated telephone number), 47 twin pairs, or 59 per cent of the DMDC sample of 79 pairs, were located and mailed the questionnaire. [Note: In the course of the locating effort it was learned from one of the veteran twins that his veteran twin brother had died since leaving the military. The deceased brother was not, of

course, sent a questionnaire. Therefore, although 47 pairs were located, only 93 individuals from the DMDC sample group were sent the pretest survey, and the sample number reported is an uneven number.]

2. The self-selected sample. The DMDC sample was augmented by 13 pairs of veteran twins who had contacted NORC, the National Academy, or the Veterans Administration to ask to be included in the study. All had read newspaper accounts of the registry, and wanted to be sure that they were not missed by those seeking to study all Vietnam-era veteran twins. In some cases it was not the twin, but a non-twin sibling or a spouse who contacted one of the three organizations to "volunteer" a veteran twin.

Thus, a total of 119 veteran twins—93 from DMDC sources and 26 self-selected——were sent the pretest questionnaire. Characteristics of respondents from each of the two sources are reported separately, but for the most part responses to the major analytic variables in the questionnaires are combined in this report, because they are assumed to be unrelated to differences in the samples.

B. Procedures of the Pretest Data on the performance of the survey instrument and the individual items were gathered by two methods: a mail survey; and small-group discussions (also called focus group discussions) with the veteran twin mail survey respondents.

#### 1. The mail survey pretest.

Locating. The mail survey began with efforts to locate the individuals whose names and 9 to 16 year-old addresses were produced by the DMDC selection procedure, confirm the twin veteran status of these individuals, and obtain a current mailing address for each one. (No locating was needed for the self-selected sample, because these individuals reported their current addresses when they approached the study.)

Using directory assistance, telephone directories, and criss-cross or reverse directories (which supply phone numbers, given addresses), people at the home addresses listed by the veterans at the time of separation from service were contacted in pursuit of information about current addresses. These approaches yielded information on 58 per cent of the DMDC sample. In not all of these cases was direct access to the veteran obtained. Often a parent would agree to forward any materials sent to their sons at their (the parents') address, rather than give out their sons' addresses to NORC. In some instances one brother, directly contacted, would agree to the same (i.e., he would forward the

material to his brother, rather than give out an address). Other families were very forthcoming, not only with twins' addresses but with their telephone numbers as well.

The remaining 42 per cent of the DMDC sample was not pursued with any more extraordinary locating effort. The pretest was designed to use a convenience sample. It was not intended to function as a test of the adequacy of and difficulties associated with use of the DMDC tapes as a sample source (although indications of such were, of course, obtained).

The self-selected sample was added to the pretest sample at this point in order to insure enough responses to support the planned item analyses--approximately 75-100 cases.

Maileut and follow-up. Each veteran twin in the pretest sample was sent: a cover letter explaining the study and asking the veteran's cooperation in completing the survey; a questionnaire; and a postage-paid envelope addressed to NORC in which to return the questionnaire. These materials were mailed out on May 20, 1984. The first returns were received three days later, on May 23. Follow-up telephone calls to the nonrespondents and/or their families began ten days after that, in early June. Several respondents reported that they had not received the original mailing, so a second packet of materials was immediately sent to them. Three and one-half weeks after the initial mailing a second mailing, along with an additional cover letter strongly urging participation, and \$5.00 cash payment "as a token of appreciation for [their] assistance" was sent to 29 respondents who at some point had indicated a willingness to participate, but whose questionnaires had not yet been received.

Materials contained in the mailouts are reproduced in Appendix 1.

Editing and processing survey returns. Surveys were logged in upon receipt at NORC, and batched for data entry. Prior to editing for machine entry, all cases comprising a batch were reviewed, one-by-one, and problems in responses noted (by respondent ID number) and described on a blank questionnaire labelled "Summary of Item Problems." Summarized across all batches (i.e., summarized for all cases), these problems are presented in the Findings section below.

After item problems were recorded, responses to the two open-ended questions in the questionnaire were recorded verbatim on a separate tally sheet. These responses are also reported in the Findings section below, along with the responses to all other items.

2. Focus group discussions. The purpose of the focus groups was to learn as much as possible from respondents about the cover letter, the items, and the questionnaire as a whole. The focus groups solicited feedback on all aspects of language choice, as well as the adequacy (completeness, mutual exclusivity) of the reponse categories provided, given the varieties of experiences of the respondents. They sought information on any errors of omission, as well. Thus, participants were asked if there were any important health conditions that they felt had been overlooked by the survey, and whether there were any personal experiences—military or otherwise—that they felt were related to their current health that the questionnaire had failed to ask about.

The first 50 or so individuals to return their questionnaires to NORC formed the group for consideration for participation in the focus group discussions (because of the short time available for the pretest, the focus groups were to be conducted simultaneously with the field period for the mail surveys). In examining the responses of these individuals, NORC sought to represent: twin pairs in the same group (i.e., both brothers present); identical and fraternal twins; Yietnam and non-Yietnam-experienced veterans; a range of combat experiences; those who reported some post-service distress; the more lequacious (or at least those who wrote a great deal in response to open-ended questions and in the margins of the questionnaire); those who responded selectively (to explore reasons why some items elicit more non-response than others); and those who seemed especially slow (it is essential that the questionnaire be clearly understood by the least educated and least bright, yet not be tedious for others, so it was necessary that ranges of ability be represented).

Two focus group discussions were scheduled for two successive weekday evenings, the time NORC has found to be most convenient for participants in such groups. NORC sought to schedule 7-8 individuals for each group. There were to be other individuals present—NORC project staff and three different "outsiders" each evening (YA representatives and the Principal Investigators)—bringing the group totals to approximately 13-14 people (see Appendix 2 for list of participants). NORC's experience is that in focus groups larger than this, the conversational dynamic usually changes such that people become less open, conversation less free—wheeling, and the discussions less productive.

Respondents were asked to select one of the two evenings convenient for them, were sent instructions for how to find NORC, and were given \$10.00 to offset their expenses.

The agenda for the focus groups is included in Appendix 2.

#### C. The Analyses

1. Qualitative analyses. As noted above, all questionnaires were carefully reviewed, item-by-item, and any apparent difficulties in following instructions for responding and in understanding the intended meaning of items were separately recorded. For example, Question 4. lists people who may have been a part of the repondent's life as a child--parents, siblings, grandparents, classmates, teachers, and strangers--and asks the respondent whether and to what extent each "...had difficulty in telling you and your twin brother apart." Identical twins typically respond that while parents and siblings had difficulty at least "some of the time", the others had difficulty telling them apart "all of the time." Fraternal twins, on the other hand, usually report that the people listed "never" had trouble telling them apart.

A close reading of individual questionnaires, however, revealed that two respondents misunderstood the item, responding as if it were asking how often the people listed <u>could</u> tell "you and your twin brother apart" ("all of the time...some of the time... never"). These two respondents, who had already reported being an identical twin, and as like their brother "as two peas in a pod," also said their parents had difficulty telling them apart "all of the time" while strangers "never" had difficulty. Every instance of this type of misunderstanding was recorded, and is described in the the reports on individual items in the next section. The qualitative analyses, then, informed recommendations for changes in item wording and layout or visual presentation (e.g., to be sure words essential to the meaning of an item were prominent).

Finally, issues raised in the focus group discussions, while reported in full in the Findings section, were subject to a "qualitative analysis" that informed NORC's final recommendations. That is, not all veterans' recommendations became NORC recommendations. The participants' views were reviewed in light of NORC's experience with usual advice from those who infrequently encounter surveys, and in light of the specific needs, purposes, and limitations (space, time, self-administered format, etc.) of this survey.

2. Quantitative analyses. After responses were data-entered for machine analysis, a number of simple indicators of data quality were calculated: the percentage of correct and incorrect responses to each item; the percentage of non-responses to each item for which there should have been responses (i.e., not including valid skips); and the percentage of questionnaires with no errors at all.

Finally, the substance of responses was tabulated; that is, frequencies for each category of response for each item, and descriptive statistics, such as means, where these are meaningful, were calculated and reported.

The information from all the analyses is presented in the following section.

### III. Findings

A. Overview The pretest revealed the YETS <u>Survey of Health</u> to be a survey instrument that was clear and easy to understand. Respondents committed relatively few errors in completing the questionnaire, and the vast majority of these errors was easily corrected using conventional coding rules. For example, a respondent may have circled an entire response category, rather than the code number representing the category. Others circled both category and code. Or, some respondents failed to zero-fill blank columns when reporting numbers, although they otherwise correctly reported the numbers, beginning each sequence from the right.

Despite the inclusion of items that dealt with sensitive and potentially threatening topics—mental distress, infant death and abnormality, and income, for example—the instrument enjoyed an exceptionally low level of item non-response. In fact, only 66 out of a possible over—15,600 responses (78 net respondents, approximately 200 variables), or .4%, were left blank. No respondent refused to report income, traditionally among the most sensitive of questionnaire items. In fact, the few cases of item non-response seemed to be due more to misunderstandings of skip patterns and instructions than to a refusal to disclose information deemed "too personal" to report in a survey.

Finally, the respondents to the <u>Survey of Health</u> were highly motivated to respond fully and accurately to a degree that is unusual in NORC experience. For example, it is notable, although impossible to document, that the veteran twins' responses were among the most painstakingly <u>nest</u> that the experienced NORC coders and data processing staff working on this project have ever encountered. When a NORC staff member remarked upon this to focus-group participants, many reported that they had read through the entire questionnaire before responding, so that they could answer as accurately and with as full an understanding of the questionnaire as possible. This kind of care is not typical of general-public samples for mail surveys. In addition, as described in Section 4, not a single veteran failed to provide his current telephone number for the survey, requested explicitly for the purpose of facilitating future contacts for other studies. Although 28 per cent of the responding pretest sample was self-selected, and thus should be expected to be highly motivated to respond, the other 72 per cent, approached "cold," was equally responsive to this item. We believe that the high quality of the survey instrument, as well as the special nature of the study population (twins, Vietnam-era veterans), accounts for the accuracy and completeness of responses.

# B. Who Responded: Rates of Response and Characteristics of Respondents

1. Response rates by sample subgroup. The sample for the pretest comprises two subsamples; those whose names were obtained from DMDC records, and a self-selected group of veteran twins. In the course of attempting to locate the DMDC sample twins direct contact was made with some veterans and for their spouses, while in other cases no direct contact was made (e.g., DMDC address information was simply confirmed by Directory Assistance, and no further contacts were made with the household prior to mailing the survey materials). We further divide the DMDC subsample, then, into those personally contacted, and those with no personal contact prior to receipt of survey materials. The initial composition of the resulting three sample subgroups is described in Table 1.

Table 1 shows the importance of the initial personal contact with veteran twins who otherwise have no knowledge of the study. While almost 85 per cent of the self-selected veteran twins responded, and 80 per cent of the DMDC veteran twins who were personally informed of the survey by NORC locating-callers, the response rate for the DMDC group that received no prior contact was about 56 per cent. Overall response rate for the survey was 68.1 per cent.

Table 2 describes the net sample of respondents. Of the 81 questionnaires that were returned, two were from triplets, and one was from an individual who never actually served in the military. None of these individuals are in the theoretical population of interest, so are subtracted from the gross sample to yield a net sample of 78 responses out of an initial net sample of 116.

Table 1: Survey of Health Response Rates, by Sample Subgroup

Number Sent	Number Received	Response Rate
1 30	24	80.0%
63	35	55.6%
26	22	84.6%
119	81	68.1%
	30 63 26	Sent         Received           30         24           63         35           26         22

Table 2: Composition of Final Sample

Original sample	119
Out-of-sample (triplet,	
not in military)	3
Net sample	116
Returned questionnaires	81
Out-of-sample returns	
Net responses	
Gross response rate (Returned	
questionnaires/Original sample)	68.1%
Net response rate (Net responses/	
Net sample)	67.2%

2. Characteristics of respondents. The self-selected sample (N = 21) differed from the DMDC sample (N = 57) in a number of respects. The self-selected veteran twins were on average about five years older, had slightly less education, were more likely to have served in Southeast Asia, and thus to have had combat experience, and were much more likely to report that they were identical twins. Information on the two samples is presented in Table 3. Information on the combined total sample is presented, item-by-item, in the following section.

Table 3: Characteristics of DMDC and Self-Selected Samples

<u>Characteristic</u> 1. Age	<u>DMDC Sample</u> Mean = 34.5	Self-Selected Sample Mean = 39.4
2. Level of education (High school degree = 12, College degree = 16, etc.)	Mean = 15.3	Mean = 14.2
3. Ever merried	Yes = 82.5%	Yes = 90.5%
4. Any children	Yes = 63.2%	Yes = 81.0%
5. Zygosity	Identical = 47.4% Fraternal = 50.9% Don't know = 1.8%	Identical = 76.2% Fraternal = 23.8%
6. Southeast Asia duty	Yes = 38.6%	Yes = 57.1%
7. Combat experience	Yes = 24.6%	Yes = 57.1%

#### C. Findings: Focus Group Reactions to the Introductory Letter

NORC solicited the opinions of focus group participants about the clarity and persuasive effectiveness of the letter accompanying and introducing the survey materials. Participants provided very useful feedback about the letter, resulting in the changes presented in the proposed modified cover letter in Appendix 3.

For the most part the focus group participants found the letter to be very effective. The letterhead stationary of the National Academy of Sciences was seen as impressive and authoritative, yet removed enough from any association with official government (e.g., military) bodies to not be off-putting.

They were of the strong opinion that the letter's description of the study as conducted "...with the cooperation of ...the Department of Defense" would result in a refusal to participate by veterans with very hard feelings toward the military, of whom they felt there would be enough to possibly cause a problem with bias in the sample. The recommended new form of the letter omits the reference to the Department of Defense.

The major change in the letter is the dropping of the fourth paragraph, which sights the Federal Code of Regulations under which authority the study is being conducted. This paragraph was viewed as jarringly technical and out of place by respondents. NORC recommends that the paragraph be moved to the cover of the questionnaire itself, rather than embedded in the cover letter.

No other changes in the introductory letter are recommended.

#### D. Findings: Responses to the Items in the Survey of Health

In this, the longest single section of the report, the responses to each item in the questionnaire are reported. In addition to the substance of the responses (i.e., the frequency of responses in each response category), this section reports all anomalous or non-standard responses to items. If a non-standard response can be rendered accurately interpretable by standard coding and editing procedures, it is described below as an "Item Event." If the response cannot be so corrected, e.g., it would require a call-back to the respondent to clarify the response, it is described as an "Item Error." Item events were edited prior to tabulation of frequencies, and so are not reflected in the Numbers and Percentages reported next to each response category.

The findings are reported in the order in which they appear in the questionnaire, and are grouped into the seven major topical areas they represent.

#### 1. Zugosity Questions (Qs.1-7)

#### Q. 1. Do you have a twin brother? (CIRCLE ONE)

	Mumber	<u>Percent</u>
Yes, living (60 TO Q.2)1	77	98.7
Yes, deceased (GO TO Q.2)2	1	1.3
No3	0	0.0
Triplet or higher4	_ 0	0.0
	78	100%

IF "NO' OR 'TRIPLET', PLEASE STOP HERE AND RETURN FORM IN THE ENVELOPE PROVIDED.

#### Non-standard responses

Item Events: Circles "Yes" rather than "1" ....... # of instances: 2
Circles both "Yes" and "1" ....... # of instances: 2

% accurate (with conventional coding/editing procedures): 100%

#### <u>item non-response: 0%</u>

#### Discussion and recommendation

Neither the focus group nor the item analysis uncovered any difficulties with this question. It is recommended that it be retained as is.

Q.2. As children, were you and your twin "as alike as two peas in a pod," or of only ordinary family resemblance? (CIRCLE ONE)

	Number	<u>Percent</u>
As alike as two peas in a pod1	49	62.8
Of only ordinary family resemblance 2	27	34.6
DON'T KNOY8	_2	2.6
	78	100%

Non-standard responses

Item Error: Circles "1" and "2"...... of instances: 1

% accurate (with conventional coding/editing procedures): 99%

item non-response: 0%

#### Discussion and recommendations

Focus group discussion indicated that this item was clearly understood and meaningful, item response analysis confirms this. It is recommended that the item be retained as is,

Q.3. Do you yourself believe that you and your twin are identical (monozygotic) twins, or do you believe that you are fraternal (dizygotic) twins? (CIRCLE ONE)

	<u>Number</u>	<u>Percent</u>
Identical (monozygotic)1	43	55.1
Fraternal (dizygotio)2	34	43.6
DON'T KNOW		<u>1.3</u>
•	78	100%

Non-standard responses

S Accurate (with conventional coding/editing procedures): 108%

Item non-response: 0%

#### Discussion and recommendations

Two veterans said that the terms "monozygotic" and "dizygotic" should be dropped, because these terms are redundant with "identical" and "fraternal." The latter terms cover the topic adequately. Despite the focus group comments, we recommend that the item be retained in its current form. No one reported any problems with the terms, and to insure clarity of meaning, the apparent redundancy should be kept.

# Q. 4. When you were children, how often did the following persons have difficulty in telling you and your twin brother apart? (CIRCLE ONE FOR EACH LINE)

		All of	Some of		DON'T	DOES NOT		
		the time	the time	Never	KNOW	APPLY	<u>Number</u>	
a.	Parents	1 (0.0%	s) <b>2.</b> .(32.5)	)3(62.3)	8(5.2	) <b>.6</b> .	77	
b.	Other Brothers							
	and Sisters	1(1.3)	2(20.8)	<b>3</b> (62.3)	<b>8</b> (10.	4)6	77	
c.	Grandparents	1(14.5)	2(38.2).	3(34.2)	8(2.6	)6(10.5)	76	
d.	Classmates	1(27.3	) <b>.2</b> (40.2)	) <b>3</b> (27.3)	8(5.2	2) <b>.6</b>	77	
ę.	Teachers	1(26.9)	)2(38.5)	3(30.8)	8.E)8	) <b>6</b>	78	
f.	Stranger	<b>1(55</b> .1)	)2(15.4)	3(23.1)	) <b>.8</b> (6.4	)6	78	
			*****					

#### Non-standard responses

Item Events:	Self-corrected mistake on e	.# of instances:	1
	Self-corrected mistake on c, d	# of instances:	1
	Reverses answers	# of instances:	2
	For "c" writes "Never met them"		
	instead of "6"	.# of instances:	1
Item Errors:	Does not answer a-d	# of instances:	1
	Does not answer c	# of instances:	1

% accurate (with conventional coding/editing procedures): 99%

#### item non-response: <1%

#### Discussion and recommendations

The editing process revealed that the question may elicit reversed responses, that is, the respondent may read the question as saying "How often could (LIST)...tell you and your twin apart?" It is recommended that the question be reformatted so that the question and its instruction form a clear and unbroken block of type (see layout in Appendix 3).

Q. 5. The following list describes characteristics that you and your twin brother may or may not have shared when you were children. For each characteristic listed, please consider your childhood years (before you were teenagers) and describe whether you and your twin brother were very similar, somewhat similar or very different. (CIRCLE ONE FOR EACH LINE)

Yhen we were children our:	Very Simi	·	iomewi Simila		Very Differe	nt	DON" KNOY	•	NUMBER
a. Eye color was	1	(84.4%	) 2	(2.6)	3	(10.4)	8	(2.6)	77
b. Hair color was			2	(14.1)	3	(6.4)	8	(1.3)	78
c. Hair type was	. 1	(77.9)	2	(14.3)	3	(5.2)	8	(2.6)	77
d. Heights were	1	(63.6)	2	(28.6)	3	(5.2)	8	(2.6)	` 77
e. Weights were	1	(56.2)	2	(34.6)	3	(6.4)	8	(2.6)	78
f Teeth were	1	(59.0)	2	(33.3)	3	(3.8)	8	(3.8)	78
g. Voices were		(55.1)	2	(33.3)	3	(9.0)	8	(2.6)	78
h. Muscular strength was		(59.0)	2	(32.1)	3	(7.7)	8	(1.3)	78
i. Temperaments were		(41.0)	2	(33.3)	3	(24.4)	8	(1.3)	78
j. Musical abilities were		(51.3)	2	(21.8)	3	(7.7)	8	(19.2)	78
k. Language abilities were		(64.9)	2	(28.6)	3	(0.0)	8	(6.5)	77
l. Manual skills (dexterity)		** ** *		,	_	* *			
were	. 1	(74.4)	2	(21.8)	3	(2.6)	8	(1.3)	78

#### Non-standard responses

\*\* accurate (with conventional coding/editing procedures): 100% for b, e - j, l; 99% for a, c, d, k

<u>|| Item non-response: <1%</u>

#### Discussion and recommendations

The item appears to have worked well and it is recommended that it be retained as is.

Q. 6. About how tall are you without shoes? (WRITE IN NUMBER OF FEET AND INCHES, IF ZERO INCHES, WRITE IN "GO")
FEET    INCHES (Response Range: 5'3" - 6'3";   Mean: 5'10"   N = 78)
Non-standard responses  Item events: Self-corrected error
% accurate (with conventional coding/editing procedures): 100%
Item non-response: 0%
<u>Discussion and recommendations</u> The main observation which can be drawn from item edit and the focus groups is that some respondents like to put in fractions. Recommendation: retain as is. (Fractional and decimal heights can be dealt with in the process of questionnaire coding and editing.)
7. About how much do you weigh without clothes or shoes? (WRITE IN NUMBER OF POUNDS)      POUNDS (Response Range: 130-243;
Mean: 171.98 pounds N = 78)
Non-standard Responses There were no non-standard responses.
% accurate (with conventional coding/editing procedures): 100%
Item pen-response: AS

<u>Discussion and recommendation</u>

Neither focus group discussions nor item edit revealed any difficulties with this question. It is recommended that the item be retained as is.

#### 2. Demography Questions. (Qs.8. and 9.)

A Q N	Are not precently	u employed part-time or	full-time?	(CIRCLE	ONE
W.O.N.	LIT & GOOD BL & DERICK	1 Attibiolist het turne a	IGH_(HIME:	<b>LONGUE</b>	U146/

Yes, full-time (GO TO B)	1 2 3	Number 70 2 6 78	Percent 89.7 2.6 7.7 100%
IF PRESENTLY EMPLOYED:  B. What kind of business or industry is this? (Example: TV and radio manufacture, retail shoe store, State Labor Department, farm,			
etc.)  C. What kind of work are you doing? (Example: Electrical engineer, stock clerk, typist, farmer, etc.)		•	
D. What are your most important activities or duties? (Example: Typing, filing, selling new cars, finishing concrete, etc.)			
(A wide range of occupations was reported, from self-employed truck di analyst, floor layer to clinical psychologist.)	river	to comput	er
Hon-standard responses Item Events: Misses skip at 8.A., gives unneeded answers* of instance (Circles "Yes" not "1"	ances Bnces	: 1 : 1	

% Accurate (with conventional coding/editing procedures): 97.4%

#### Item non-response: 0%

#### Discussion and recommendations

One somewhat embarrassed veteran told the focus group that he was gainfully occupied ("Im not on welfare or anything"), but had no outlet to describe his full-time student status. It is recommended that the item be retained but that a new item, asking about student status, be added.

Q.9.	What is the highest grade or year of school	l you have completed and gotten credit for?
	(CIRCLE THE ONE HIGHEST GRADE OR YEAR)	•

à.	None	IJ								
b.	Elementary0	1	02	03	04	05	06	07	08	
¢.	High School0	9	10	11	12					
đ.	College1	3	14	15	16					
e.	Some Graduate									
	School 1	7		(R	ange:	11-	18;	Mean	: 13.8	N = 78
f.	Graduate or Pro-				·		·			
	fessional Degree1	8				•				

#### Q.9. continued

#### Non-standard responses

% accurate (with conventional coding/editing practices): 100%

#### Item nen-response: 0%

#### Discussion and recommendations:

The item needs an option covering post-secondary tertiary institutions other than colleges--for example, vocational schools.

#### 3. Alcohol and Cigarette Consumption Questions (Qs. 10-16)

In order to get an accurate picture of each veteran's general health, everyone is asked the next few questions about alcoholic beverages and smoking.

Q.10. Have you had more than 20 alcoholic drinks in your entire.

116e? (CIRCLE ONE)

CIRCLE ONE)	Number	<u>Percent</u>
Yes (60 TO Q.11)1	75	96.2
No (SO TO 0.16)2	_3	3.8
•	78	100%

Mon-standard\_responses

Item Events: Circles "Yes" instead of "1"......# of instances: 2

Circles "Yes" and "1"......# of instances: 1

% accurate (with conventional coding/editing procedures): 100%

item non-response: 0%

#### Discussion and recommendations

This item emerged from the response analysis and the focus groups as straightforward and clear. It is recommended that it be retained in present form.

Q. 11. How old were you when you first started drinking alcoholic beverages regularly? (WRITE IN AGE)

Never drink alcoholic beverages regularly........00 (N = 8, 10.3%)

#### Non-standard responses

There were no non-standard responses.

% accurate (with conventional coding/editing procedures): 100%

<u>item non-response: 0%</u>

#### Discussion and recommendations

Focus group participants reported some confusion with the word "first" in the question. They suggested that "first" clouds the question's meaning by suggesting "when did you take your first drink." We recommend retaining the question but deleting the word "first."

day	ing the entire time that you have been drinking a sper week or month do you drink alcoholic beve ITE IN <u>EITHER</u> DAYS PER <u>WEEK</u> OR DAYS PER <u>M</u>	rages, on the average?
	LLI DAYS PER WEEK	( (Response range: 1-7; Mean: 3.6 N = 46)
	G G	
	I DAYS PER M	ONTH (Response range: 1-25; Mean: 6.7 N = 34)
or s	DRINK is considered one can or bottle of beer or shot of hard liquor, how many DRINKS would you drink? (WRITE IN NUMBER OF DRINKS, PUT A	u have on the average, on those days when
		(Response range: 1-20; Mean: 4.2)
Non-stand	ard responses	
Item Events	Fills both halves of disjunct	# of instances: 13
	Fails to zero fill (left justify)	
	Self-corrected errors	# of instances: 2
Item Error: 12. B	Writes "unknown" and leaves blank	# of instances: 1
item Events:	Fails to zero fill	# of instances: 8
	Writes in answer, leaves 12 B blank	
	have skinned (from "2" at 10 \	# of instances 2

\*\*securate (with conventional coding/editing procedures: 12A: 99%; 12B: 100%

#### item non-response: <1%

#### Discussion and recommendations:

Some respondents utilized <u>both</u> the days-per-week <u>and</u> the days-per-month format. While there was no conflicting information reported—that is, the duplicate days per month figures were always 4 times the reported days per week—it is likely that with over 12,000 pairs in the main survey some contradictory information will be reported. To prevent the need for arbitrary coding decisions in such instances, we recommend dropping the days per month response option in all the drinking questions. This will result in less sensitivity to those who report infrequent drinking (less than once a week), but infrequent drinkers are of less analytic interest, as well.

Focus group participants reported that the question is confusing if you have quit drinking. The particular difficulty with this item is that it would not appear to give the clearest path to the critical data. It is recommended that Q.12 be dropped. The preferable sequence would be from Q.11 to Q.14 followed by Q.13 (see Appendix 3 for all recommended changes.)

	s there a period in your life ( <u>re</u> than this?	of at least 6 months) when	n your consi	umption was
			<u>Number</u>	<u>Percent</u>
	Yes	(GO TO B)1	53	72
	No	(GO TO Q. 14)2	<u>21</u>	28
			74	100%
IF YES:				
B. Whe	n was this (WRITE IN YEARS)			
Highes	1_1_9_1 t concentration of response	to <u>  1   9                                 </u>	period of he	
	bout how many days per wee age? (WRITE IN <u>EITHER</u> DAY			oholic beverages, on th
		LLI DAYS PER WEEK		ange: 1-7; 3 N = 43)
		or	ाणकारः कर	) H = 40)
		VI	•	
	<b>[</b>	LL DAYS PER MONTH	•	range: 1-31; .3 N=17)
~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	***************************************	of to m		
Non-standa	rd respenses			
	Circles "Yes" instead of "1	i"#ofin	otoncoo. Z	
riem Lyems.	Circles "No" instead of "2	!	iatannos, 1	
	Circles both "Yes" and "1"			
	Writes "Yes" but circles			
	Circles "2" but misses sk	ιμ vi i:	113 (011/45): 1	
13. B.				
	ir Error: None.			
13. C.			_	
Item Events:	Fills in both days/week ar			
	Qualifies days/week with	-		
	Left-justifies answer	of ins	tances: 2	
13.D.				
Item Error:	Illegitimate skip		tances: 1	
item Event: 2	Zero fill problem (fails to	IETT JUSTITY)# OT 10\$	ances 5	
% accurate	(with conventional coding	/editing procedures): A	, <u>B,C= 10(</u>	<u>)\$, D=99\$</u>

item non-response: <1%

<u>Discussion and recommendations</u>
Item edit and focus group discussion confirmed that the question is accurately understood.
However, the order of questions 13 and 14 should be reversed (see discussion at Q.12).

Q.14. A. Do y	you still drink alcoholic beverages?			
		•	Number Pero	
	Yes (GO TO B)		67 89	· <del>-</del>
	No (GO TO Q.15)	2	<u>8</u> <u>10</u> 75 10	
IF YES:			75 10	0%
	about how many days per week or month do	uou ourrentiu drin	k slooholic have	#300E
	average? (WRITE IN <u>EITHER</u> DAYS PER <u>WEE</u>			1 ayes,
	LLL DAYS PER WEEK	( (Response ra	ange: 1-7;	
		Mean: 1.8	)	
	or			
		····· /=		
	LLL DAYS PER MON	ITH (Response ran Mean: 2.6)	ge: 1-20;	
	r many drinks do you have, on the average, R OF DRINKS: PUT A "O" IN ANY EXTRA BO		n you drink? ('a	RITE IN
	i Drinks	(Response range: Mean: 3.3 N = 6		
	I <u> 60 TQ 9.</u>	<u>16</u> .l		
Non-stands	ord responses			
	Circles "Yes" instead of "1"	<b>#</b> n	finstances 7	ζ
14 B	on the feet of the contract of	······································	, (110ta11000, C	•
–	Fills in both (week + month)	*	of instances:	7
· ·	Self-corrects error			
	Fails to zero-fill			1
14 C	19119 W 601 9 - 1111	***************************************	or rilotations.	•
	Leaves boxes blank but writes in answer	. *	of instances	1
AVIII EYGIIG	Fails to zero-fill			•
	Misses skip (14A .= "No")			
	Transport and transport to the transportation	********************	g. / 110 100 100 00 00 00 00 00 00 00 00 00	*
% accurate	(with conventional coding/editing proce	dures): 100%		

#### Item non-response: 0%

#### Discussion and recommendations

Non-standard responses to this item were of the readily editable kind. Just as with 0.12, 0.14 sometimes elicited both the days per week and days per month response from the same respondent. As with Q.12, it is recommended that the item drop the days-per-month response option, and that its sequence in the questionnaire should be altered (see Appendix 3).

Q.15. How old were you when you stopped drinking? (WRIT	E IN AGE)
LILI YEARS OLD	(Range: 24-38; Mean age: 29.8 years)
Non-standard responses Item Event: Fails to skip when should have (writes in "00")*	finstances: 18
% accurate (with conventional coding/editing proced	ures): 100%
Item nen-response: 0%	
<u>Discussion and recommendations</u> The question should be retained. However, given the sk recommended that an introductory direction repeat tha those who did drink regularly but no longer drink at al	t the item is to be answered only by
Q.16.A. Have you smoked at least 100 cigarettes in your (CIRCLE DNE)	
Yes (60 TO 8)1 No (60 TO Q. 17)2	Number         Percent           54         69.2           24         30.8           78         100%
IF YES  8. Do you smoke digarettes now? (CIRCLE GNE)  Yes	Number Percent 30 55 <u>24</u> 45 54 100%
<ul> <li>C. On the average, about how many digarettes a day (WRITE IN NUMBER SMOKED PUT A "O" IN ANY EX</li> </ul>	· ·
LLL CIGARETTES	(Response range: 1-60; Mean: 26.8)
D. About how long has it been since you last smoked cigarettes fairly regularly? (CIRCLE ONE)	
Currently smake1	Number Percent 29 54
Days2	0 0
Yeeks	0 0 2 4
Years	21 38
Never smoked regularly6	

#### Q.16 continued

#### Non-standard responses

16 A			
Item Event:	Circles "yes" instead of "1"	# of instances:	4
16 B			
Item Events:	Circles "yes" instead of "1"	# of instances:	2
	Circles "no" instead of "2"		
16 C		•	
Item Events:	Fails to zero-fill	of instances:	9
	Fails to answer		
16 D			
No errors or	item events		

% accurate (with conventional coding/editing procedures): 99%

#### Item non-response: <1%

#### Discussion and recommendations

The Principal Investigators have informed NORC that two substitute questions are needed here to provide more specific information on the number of years the respondent has smoked (i.e., the number of "pack years"), even if the respondent is no longer smoking. Part D. was intended to provide an indication of pack years, but it is too indirect.

For all respondents who have smpoked at least 100 cigarettes, the sequence will now ask how old they were when they first started smoking regularly. For those who have stopped smoking, the sequence will ask how long it has been since they smoked regularly. (See Qs. 17.-19., Appendix 3.)

#### 4. Physical Health Conditions (Qs.17-21)

# Q.17. Do you <u>currently</u> have any of the following health problems? (CIRCLE YES OR NO FOR <u>EACH</u> LINE, 1-16)

1. 2.	· · · · · · · · · · · · · · · · · · ·		No 2 2.	% 12.8 9.0
3.	Respiratory conditions, such as lung			
	trouble, persistent coughing, etc	.1	2	5.1
4.	Cancer	. 1	2	0.0
	Heart trouble		2	1.3
6.	Stroke	.1	2	0.0
7.	Kidney, bladder, or urinary problems,			
	such as stones, infections, etc	, 1	2	0.0
8.	Skin problems, such as aone or skin rash	.1	2	16.7
	Mental or emotional problems	1	2	1.3
10.	Diabetes	1	2	0.0
11.	Stomach or digestive disorders, such as ulcers,			
	inflammations, etc	1	2	7.7
12.	Liver problems, such as hepatitis, cirrhosis, etc	1	2	1.3
13.	Blood disorders, such as anemia, blood clots, etc	1	2	1.3
14.	Nerve disorders, such as epilepsy, migraines, etc	1	2	1.3
15.	Visual problems	1	2	21.8
	Hearing problems	1	2	14.1

N = 78 to all subparts

#### Non-standard responses

### % Accurate (edited)

17. 1. Self-corrected error (1 instance)	100%
2. Circles "2" with note "under control" (1)	100 <b>%</b>
3	100%
4	100%
5	100%
б. <del></del>	100%
7	100%
8. Self-corrected error (1)	100%
9	100%
10	100%
11	100%
12	100%
13	100%
14. Circles "migraines" (1)	100%
15. Self-corrected error (1); writes in "glasses" (1)	100%
16	100%

#### Item non-response: 0%

#### Q.17 continued

#### Discussion and recommendations

Focus group participants pointed to several significant omissions in the list of health conditions. Skeletal and joint disorders, for example, should be included.

Some of the categories of health problems were thought vague: especially "accidental injury," "skin problems, such as acne or skin rash," "mental or emotional problems," and "visual problems."

The category "mental or emotional problems" seemed to many of the focus group participants as out of place, buried as it is in a list of physical disorders.

Finally, a category for describing "Other" health problems was recommended by the veterans in the focus groups.

Our recommendations follow closely upon the observations raised in the focus groups:

- \* Omit "accidental injuries." The category is overly broad, and while intended as an indirect measure of risk-taking behavior, there was no evidence from the focus groups that the item is a valid operationalization of this concept.
- \* Omit "mental or emotional problems." This category is best dealt with separately from the list of physical conditions.
- \* Omit "visual problems," which introduces the problem of interpretation as between corrected and uncorrected visual defects.
- \* Sharpen the focus of "Skin problems, such as acre or skin resh" by specifying "persistent" skin problems.
- \* Add a category for joint and skeletal problems.
- \* Add a category for "Other," and ask respondent to specify the condition.

## 18. Please indicate which statement below best describes your military duty status: (CIRCLE ONE)

	<u>Number</u>	<u>Percent</u>
Released from active military		
duty during the years 1965-751	69	91
Released from duty after 19752	7	9
Still on active military duty3	0	_0_
	76	100%

#### Non-standard responses

% accurate (with conventional coding/editing procedures): 97.5%

Item non-response: 2.5%

#### Discussion and recommendations

Other than the fact that two individuals failed to respond to this item, it appears to have worked well and should be retained in its present form. It is noteworthy, however, that in response to Q.23.A. two respondents reported that they were still in the military. These are apparently the two non-respondents to this item, because no one responded in the equivalent category here.

The Principal Investigators recommended that a question be added, later in the sequence, to ascertain whether the respondent requested a military duty assignment in Vietnam, to assess the extent of volunteering. (See Q.25, Appendix 3.)

19. The questions below concern your health over the entire period since your active duty during the Vietnam Era, 1965-1975.

If you were released from active military duty during the years 1965-1975, please describe your health since your date of release.

If you are still on active duty, or released after 1975, describe your health since 1975.

In responding, please include any current health problems you described in 0.17. (ALWAYS ANSWER A AND THEN ANSWER 8 AND C AS APPROPRIATE FOR EACH LINE, 1-16)

A. Since active' military duty .1965-75, have you had this problem? B. Have you con- C. Have you ever suited a been hospiphysician about this problem?

talized overnight for this problem?

IF YES TO THIS, ANSWER 8 \*\*\*\* IF YES TO THIS, ANSWER C ---->

		.	1	
		Α	8.	Ç.
1.	Accidental Injury	Yes29 (38%)	Yes29	Yes 9
	ļ	No48 (62%)	No	No
2.	9	Yes 7 (09%)	Yes 5	Yes 2
	sure/Hypertension	No70 (91%)	No	No
3.	Respiratory Condi-	Yes 8 (10%)	Yes 6	Yes 2
	Trouble, Persis- tent Coughing, etc.	No69 (90%)	No	No
4.	Cancer	Yes 0 (0%)	Yes	Yes
		No77 (100%)	No	No
5.	Heart Trouble	Yes 3 (04%)	Yes 3	Yes 2
		No74 (96%)	No	No
6.	Stroke	Yes 0 (0%)	Yes	Yes
		No77 (100%)	No	No
7.	Kidney, Bladder, or	Yes 4 (05%)	Yes 4	Yes 3
	Urinary Problems such as Stones, Infections, erc.	No73 (95%)	No	No
	1			I

Total Number of Respondents: 77

#### 19. (continued)

A. Since active military duty 1965-75, have you had this groblem? B. Have you consuited a physician about this problem?

C. Mave you ever been hospiratized overnight for this problem?

IF YES TO THIS, ANSWER 8 ----> IF YES TO THIS, ANSWER C .....

	ANSWER 6	ANSWER C. TOTAL	
	Α,	е.	C.
Skin Problems such as Acne or Skin Rash	Yes19 (25%)	Yes 8	Yes 1
	No++++58 (75%)	Ngere	No
	Yes 4 (05%)	Yes 3	Yes 1
Problem	No73 (95%)	NO	Na
Olapetes .	Yes 0 (02)	Yes	Yes
	No77 (100%)	Ng	No
Stommen or Digestive	Yes 8 (10%)	Yes 8	Yes 5
Disorders, such as Ulcers, inflamme- tions, etc	No 69 (90%)	Nossa	No
Liver Problems, such as Hepatitis, Cirrhosis, etc.	Yes 1 (1%)	Yes 1	Yes I
	No76 (99%)	Ng	No
Slood Disorders,	Yes 2 (3%)	Yes 2	Yes 2
Such as America. Slood Clots, etc.	No75 (97%)	No	No
	Yes 4 (05%)	Yes 4	Yes 1
Migraines, etc.	No73 (95%)	Nossa	No
Visual Problems	Yes16 (21%)	Yes 15	Yes 1
	No61 (79%)	No	No
Hearing Problems	Yes 9 (12%)	Yes 9	Yes 0
	No68 (88%)	No	No
	As Acme or Skin Rash  Mental or Emotional Problem  Diapetes  Stommon or Digestive Disorders, such as Ulcers, inflammentions, etc  Liver Problems, such as Hepatitis, Cirrnosis, etc.  Blood Disorders, such as Anamia, such as Epilepsy Migraines, etc.  Visual Problems	Skin Problems such as Acne or Skin Rash No58 (752)  Mental or Emotional Yes 4 (052) Problem Yes 4 (052) No73 (952)  Diapetes Yes 0 (02) No77 (1002)  Stomech or Digestive Disorders, such as Ulcers, inflammentions, etc.  Liver Problems, such as Ulcers, inflammentions, etc.  Liver Problems, such as Hepatitis, Cirrhosis, etc.  Blood Disorders, such as Anemia, Blood Giors, etc.  Nerve Disorders, such as Epilepsy Migraines, etc.  Nerve Disorders, such as Epilepsy Migraines, etc.  Visual Problems Yes 4 (052) No73 (952)  Hearing Problems Yes 9 (127)	No   Skin Problems such as Acne or Skin   Yes   19 (25%)   Yes   8   No   19 (25%)   Yes   8   No   19 (25%)   Yes   19

Total Number of Respondents: 77

## Q.19 continued

## Non-standard responses

General: Answers B and C even though A is "no" # of instances: 1	11
Answers Cleven though Blis "no"# of instances:	1
Fails to include health problems	
described in C. 17* of instances:	4

		% Accurate (edited)
19. 1.	Self-corrects error (2)	100 <b>%</b>
2.	No problems	100%
3.	Yes for B but skips C (1)	99%
4.		100%
5.		100%
6.		100%
7.		100%
8.	Answers C even though B is "no" (1)	100%
	Answers B and C though A is "no" (1)	100%
9.	Answers Cleven though B is "no" (1)	100%
10.	No problems	100%
11.	No problems	100%
12.	No problems	100%
13.	Self-corrects error (1)	1 <b>00%</b>
14.	Self-corrects error (1)	100%
15.	"Yes" to A but illegitimate skip of B and C (1) Negative answer to 19.15, contradicts	
	response to Q. 17 (1)	97%
16.	Self corrects error (1)	100%

## Item non-response: <1%

## <u>Discussion and recommendations</u>

For a visually very complex item, the error rate is extremely low for Q.19. Errors are for the most part in the direction of providing **mere** information than is actually required.

Categories must be amended as per recommendations for Q.17: omit "Accidental Injury;" qualify "Skin problems" with "persistent;" omit "Mental or emotional problem;" add "Joint or skeletal disorders...;" omit "Ylsual problems;" and add a category for "Other."

The Principal Investigators recommend that a fourth category or question, D., be added to the sequence of 19.A, B, and C. It will ask all those who reported hospitalization for a health problem to also report the date of the first hospitalization. This will allow easy identification of health problems that existed prior to service. (See Q.22., Appendix 3.)

## Q.20. Would you say that your health in general is excellent, very good, good, fair, or poor? (CIRCLE ONE)

	Number	<u>Percent</u>
Excellent 5	35	44.9
Very good4	30	38.5
Good3	11	14.1
Fair	2	2.6
Poor1	<u>o</u>	0.0
	78	100%

## Non-standard responses

Item Error: Circles both "5" and "4" with line connecting. # of instances: 1

% accurate (with conventional coding/editing procedures): 99%

item nen-response: 0%

## Discussion and recommendations

Both focus group discussion and item edit confirmed that the item was straightforward and easily understood. It is recommended that it be retained as is.

Q. 21.A. Compared to your twin brother's health, how would you rate your health?

Would you say your health is...(CIRCLE ONE)

	<u>Number</u>	<u>Percent</u>
Better than your brother's (GO TO B)	16	20.5
About the same as your brother's (GO TO 0.22)2	52	66.7
Worse than your brother's (GO TO B)3	9	11.5
Doesn't apply, because brother		
is not living6	_1	1.3
	78	10098

IF HEALTH IS BETTER OR WO	ORSE	WORS	/ORSE
---------------------------	------	------	-------

В.	In what way	, is your	health di	fferent fron	ı your br	other's h	ealth?
					<del> </del>	<del></del>	

## Yerbatim Responses to Question 218.

- (R's health worse than brother's)
   Had surgery (twice) in the last ten years: once for colon re-section, other for polyp on duodenum.
- (R's health better than brother's)
   My brother had liver damage from too much alcoholic intake. He has had two operations (about 10 years apart) for polyps in the large intestine.
- 3. (R's health better than brother's)
  Mu brother has back problems and trouble with his hips.
- 4. (R's health better than brother's) I don't have an ulcer.
- (R's health better than brother's)
   He must take medication for migraines, plus he was wounded in Vietnam, which resulted in a leg injury, keeping him from obtaining total mobility.
- 6. (R's health better than brother's)

  My brother suffers from ulcers, migraine (cluster) headaches, and takes blood thinners and other prescribed medication. I take no prescribed medicine nor do I suffer the above problems. However, I suspect that my chlorache condition is possibly the result of exposure to Agent Orange. Two of my partners aborted pregnancy because of this fear.
- (R's health worse than brother's)
   Never had malaria or hepatitis or in any severe accident or exposed to Agent Grange.
- (R's health better than brother's)
   My brother gets more colds and has had some stomach and nerve problems.
- 9. (R's health worse than brother's)
  Worse because although I am very fit and exercise hard regularly, I have arthritis in my left hand which makes it difficult to perform many simple tasks;
- 10. (R's health better than brother's)
  My brother is overweight and has had some stomach problems.

11. (R's health better than brother's)

My brother seems to get more colds or flu whereas I rarely get sick at all (once or twice in ten uears).

12. (R's health better than brother's)

I do not have high blood pressure which requires treatment/or medication.

13. (R's health worse than brother's)

I have stomach problems, he does not.

14. (R's health worse than brother's)

I catch colds more often and seem to be sick longer.

- 15. (R's health worse than brother's)
  - --My brother weighs less in relation to his height (6' 2")
  - -- He eats better foods (i.e., maintains a better diet)
  - -- He drinks less alcohol less often (does not smoke either)
  - -- He exercises strenuously daily, while I do so only 3 times a week.
- 16. (R's health worse than brother's)

He doesn't smoke cigarettes and I do.

17. (R's health worse than brother's)

He is alim and very active whereas I get tired easily (I'm on medication for high blood pressure) and I get in the dumps lately.

18. (R's health better than brother's)

I can tell and I know without a doubt my health is better.

19. (R's health better than brother's)

Brother's accidental injuries, and problems he had when discharged--which was supposedly malaria he picked up in Nam.

20. (R's health better than brother's)

I am more physically active, therefore in better shape.

21. (R's health better than brother's)

I'm more physically active and I don't drink as much as my brother and I don't smoke at all.

22. (R's health worse than brother's)

He does not smoke. He is in better fitness than I'm in.

23. (R's health better than brother's)

Not as many colds.

24. (R's health better than brother's)

He smokes and drinks more than I.

25. (R's health better than brother's)

He is 100% disabled due to injuries incurred in combat in RYN, I am not, I stay in good physical health by regular excercise.

## Q.21. continued

## Non-standard responses

No non-standard responses. All who should have gone on to explain differences, did so.

% accurate (with conventional coding/editing procedures): 100%

Item non-response: 0%

## Discussion and recommendations

The kinds and quality of data elicited by the question seem impressive. It is recommended the the question be retained. Because it is so productive of rich data, it is also recommended that the better/worse "compared to your brother" format be utilized in an additional context, so that a new item could ask each respondent to compare his adjustment to civilian life to that of his twin (pretest Q.23., Appendix 3 Qs. 29, 30).

## 5. SEA and combet experience: Q.22.

22.A. When you were in the military, were you stationed in Vietnam, Laos, or Cambodia; in the waters in or around these countries; or fly in missions over these areas? (CIRCLE ONE)

	<u>Number</u>	Percent
Yes (60 T0 8)1	34	43.6
No (GO TO Q.23A)2	44	<u>56.4</u>
	78	100%

B. Below is a list of 18 different combat roles and experiences that men had during the Vietnam war. <u>For each statement</u>, please indicate whether you had that combat experience. (CIRCLE YES OR NO FOR <u>EACH</u> LINE, 1-18)

		N= 34
	Yes No	Z YES
1.	In an artiitery unit which fired on the enemy1 2	14.7
2.	Flew in an aircraft (reconnaissance, or fixed wing F-14, 8-52, etc.)	23.5
3.	Flew heilcopter attack gunships or medvacs1 2	11.8
4.	Stationed at a forward observation post 2	26,5
5.	Tunnel rat checking enemy base camps	2.9
6.	Served on river patrol or gunboat	5.9
7.	Demolitions expert in the field	11.8
8.	Assigned to Graves and Registration to retrieve dead bodies from the field	0.0
9.	Served as a medic in combat	2.9
10.	Received incoming fire	61.8
11.	Encountered mines and booby traps	38.2
12.	Received sniper or sapper fire 2	61.8
13.	Unit patrol ambushed 2	26.5
14.	Flew in aircraft (fixed wing or helicopters) and was shot down	2.9
15.	Engaged VC and/or NVA in firefight 2	38.2
16.	Saw Americans killed, and/or saw Vietnamese killed	55.9
17.	Wounded1 2	14.7
18.	Captured by the enemy	0.0

## Q. 22. continued

## Non-standard responses

22A

Item Event: Circles neither "1" nor "2" but writes "Classified in

22B

Item Event: Misses skip at 22B (that is, answers "no," then

gives negative answers for all elements of 22B)...... of instances: 6

22A: Saccurate (with conventional coding/editing procedures): 100%

22B: \* accurate (with conventional coding/editing procedures): 100%

item nen-response: 0%

## Discussion and recommendations

Several focus group participants wondered if the geographic range described in 22.A. was sufficiently inclusive. What if one had been stationed in Thailand? What about the Korean DMZ?

In connection with 22.B., one veteran, a non-combat zone medic, reported that he had felt very stressed in the role although the question gave him no outlet for describing this form of combat-related stress.

Another instanced the role of supplying (for example, with chemicals) front-line forces as a task attended by tensions in many ways akin to those of combat. However, given that the intent of the question is geographically restrictive, and that focus is on combat or combat related roles rather than on an exhaustive list of stressful situations, it is recommended that the question be retained as is.

## 6. Psychological health conditions, including PTSD (Qs.23-24)

23.A. Overall, how would you describe your readjustment to civilian life after your release from active duty? Would you say that returning to civilian life caused you...(CIRCLE ONE)

Considerable difficulty (GO TO B)	<u>Number</u> 5	Percent 6.4
Some difficulty (GO TO Q. 24)2	20	25.6
Yery little difficulty (GO TO Q. 24)3	11	14.1
None, or practically no difficulty (GO TO Q. 24)4	40	51.3
Does not apply; I am still in the military (GO TO Q. 24) 5	<u>2</u> 78	<u>2.6</u> 100%

IF CONSIDERABLE DIFFICULTY

B. Please describe the difficulties you had...

## Yerbatim Responses to Question 238.

- I don't believe I had the emotional maturity to deal with the Vietnam experience in the first
  place. Readjustment was so difficult that it is nearly indescribable. It took about 2-3 years to gain a
  semblance of normality. I stayed alone quite a bit. Problems with nightmares and flashbacks.
- Life style of training for Olympios all day long to civilian life of getting an education in college and a job.
- 3. Adjusting from single life to married life due to the service.
- 4. I had to adjust to losing one leg and some use of the other leg.
- 5. (should have skipped: listed "some difficulty")
  A small problem being accepted by people younger and older than me. The younger and their peace movement activity & the older (Yorld War II vets) with being in a war that had a no win situation.
- The civilians had no idea what the war was about and still don't know. Only someone who was there will ever know.
- (should have skipped: listed "some difficulty")
   The idea drilled in to kill the enemy.

## Non-standard responses

tem Events: Self-corrects on 23A ...... # of instances: 1

Respondent circles "2" for "mental adjustment"

and notes that he is circling "4" for health ....... # of instances: 1
Respondent answers B when not required.............. # of instances: 2

**% accurate** (with conventional coding/editing procedures): 100%

Item nen-response: 0%

## Discussion and recommendations

The process of questionnaire edit revealed that some respondents had needed more space for writing answers to 23B.

In the focus groups, a number of participants expressed their feelings that the instruction indicating that only those who had experienced "considerable difficulty" should answer 23B was far too restrictive. Those who had experienced "some difficulty" felt frustrated in not being given the opportunity to relate their problems.

Generally, focus group participants felt that the question scratched only the surface of homecoming/readjustment issues, although it was the intention of the investigators that Q.23, be the main outlet for the telling of homecoming problems. As such, the item did not adequately elicit—the nature and depth of response which the investigators had hoped for.

It is therefore recommended that this item be supplemented by a number of questions, dealing with opportunities to share feelings about the military experience with selected categories of people, with abilities to become reinvolved in civilian life, and explicitly comparing degree of adjustment to civilian life with twin's adjustment (see Appendix 3, Qs.27-30).

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## Q.24. continued

## Non-standard responses

Item Errors: 24.j. and k.: Respondent circles two answers, "3" and "4."

24.o.: Respondent circles two answers, "4" and "5."

24.: One respondent skipped the entire item.

Item Events:

Self-correction at item f...... of instances: 1

Circles and puts in check marks too..... # of instances: 1

Self corrects at item m...... of instances: 1

## <u>% accurate (with conventional coding/editing procedures): 98%</u>

## item non-response: 18

## Discussion and recommendations

Generally, focus group discussants thought the items were easy to understand, and did not cover content that they would feel reluctant to report. One participant, however, found item a. (sleep problems) vague. Given the performance levels revealed by the item analysis, it is recommended that the question be retained in its present form.

## 7. Fertility and marital history (Qs 25-30)

25.	Since your discharge from active military duty, have you an problems having children? (CIRCLE ONE)  Yes	1 2 .	<u>Number</u> 10		
Ite	n-standard responses mevents: Self-corrects error	••••••		of instances:	2
	accurate (with conventional coding/editing procedures) m non-response: 0%		100%		
Which discount may mig consider to the transfer of the transfe	ite item analysis indicated that the question yields readily cussions suggested some ways in which the question could in discharge from active military duty" would seem inapper yetill be in the military. Also, the vagueness of "any prolyth be rectified by focusing the question on any period of a ceive a child were unsuccessful. Finally, in its pretest for ween individuals who respond "No" because they have tried to have those who say "No" because they have never tried to have yield findings biased in the direction of no problems with mat depicted in Qs. 35 and 36 in Appendix 3. The two alterstionnaire.	be all ropriblem year rm to d to il child conc	narpened. iate insofa s" and the or more he item do have child dren at all eptions, y	Thus, the phrin as some resilack of a time in which attention between without properties. In order that we recommend	ase "Since pondents frame npts to uish roblems, t the item the new
2 <del>6</del> .	How many children have you eyer fathered? (ENTER NUMBER BOX ON THE LEFT)				l <b>6</b> )
	25 respondents (32%) reported having no children. Of the rethe mean number was 2.15. $N=78$ .	niem	ing 68% w	ith children,	
<u>No s</u>	n-standard responses n events: Writes in "maybe 3" (2 described in Q 27) Fails to zero-fill (but result unambiguous)				

% accurate (with conventional coding/editing procedures): 100%

## ltem non-response: 0%

## Discussion and recommendations

Item edit and focus group discussions uncovered a number of potential ambiguities in this question. In particular, how are current pregnancies, miscarriages, abortions, still births, and neonatal deaths to be counted? In order to be certain that such ambiguities not affect the integrity of the data collected, it is recommended that the number of natural children fathered be taken from the live birth question which follows, and supplemented by an additional question relating to current pregnancy (see Appendix 3, Qs. 35 and 36).

27. In the table below we would like you to enter information about your natural (not adopted) children. Please Include all live births, even if a child is no longer living.

Please indicate: (A) The date of birth of each child; (B) the child's mother's age at the time of the birth; and (C) whether each child had any abnormatity, birth defects, or handicaps. Briefly describe any birth defect in the space provided (D). If a child is no longer living, please enter date of death in (E).

	, A.	в.	C.	0.	٤.
Natural Children	Date of Birth Month   Day   Year	Mother's Age At Child's Birth (ENTER YEARS)	Any Birth Defects? (CIRCLE) Yes - No	Description of Birth Defects. Abnormality, or Hendicap	If Deceased, Date of Death Month   Day   Year
ist Child	50-35/	56-57/	Y N 56/ .	59-60/	61-66/
2nd Child	67-72/	73-74/	Y N	76-77/	(BEGIN DECK 4)
3ed Child	16-21/	22-23/	Y N 24/	25-26/	27-32/
4th Child	53-38/	39-40/	Y N	42-43/	44-49/
5th Child	50-95/	36~57/	Y N 58/	<del>59=</del> 60/	61-66/
5th Child	67-72/	73-74/	Y N	76-77/	(BEGIN DECK 5)
Other Children					-
			-	<u> </u>	16/

## Q.27. findings continued

A total of 114 children were reported.

A. Range of dates of birth for: B. Mean age of mother at child's birth:

first child: 1955-1982 23.9
second child: 1958-1984 25.9
third child: 1960-1984 25.4
fourth child: 1969-1983 27.6
fifth child: 1976,1981 29
sixth child: 1983 33

C. Nine respondents reported a total of 13 children born with birth abnormalities or defects.

## D. Verbatim description of birth abnormalities

1. (R reports three children. Two born post- VN reported to have birth defects.)

Child 2: Tumor. Hole in heart.

Child 3: Webbed foot. Extra thumb.

(R reports four children. "No" to birth defect for youngest, although "birth abnormality" reported, so coded as "Yes" to birth defect.)

Child 1: Jundice in color.

3. (R reports two births, both with abnormalitites, as well as a miscarriage.)

Child 1: Skin rash comes and goes. Has dizzy spells.

Child 2: Born 6 fingers on left hand. Has constant skin rash.

4. (R reports two children, firstborn with birth abnormality.)

Child 1: Abnormal, [Verbatim description]

5. (R reports two children, firstborn with birth abnormality)

Child 1: Mentally retarded.

6. (R reports three children. Latter two said to have birth abnormality.)

Child 2: Positional deformity of right foot.

Child 3: Developmentally delayed and speech delayed. Unknown origin.

7. (R reports two children. Second has abnormality.)

Child 2: Skin rashes and growth on shoulder called Nevus (Sp?)[R's question]

8. (R reports two children. Both reported to have abnormalities.)

Child 1: Leg's crooked.

Child 2: Strolismuss in eyes.

9. (R reports four children. Birth abnormality reported for third birth.)

Child 3: Discolored skin on leq.

E. No deaths of children were reported.

## Q.27. continued

Non-standard responses

Item Error: Birthdate month and day left blank......# of instances: 2 Item event: Fails to zero-fill month and day of birth.....# of instances: 1

Column B

Column C

Column D

Column E

No errors or item events.

## Item non-response: 1%

## Discussion and recommendations

Focus group discussions and item edit confirmed that this question was effective in eliciting the desired information. It is recommended that it be retained in its present form.

28.A. Have you ever been the father of a stillborn child? (CIRCLE ONE)	<u>Number</u>	Percent
Yes (G0 T0 B)1	1	1.3
No. (GO TO Q.29)2		<u>98.7</u>
	78	100%

### IF YES:

- B. In what year(s) did this happen? (WRITE IN YEAR OR YEARS)
  - 1. |19----

(One respondent had had one stillborn child only)

- 2. |1|**2|\_\_\_**|
- 3. 119-1-1

## Non-standard responses

Item events: Circles "no" but not "2"......# of instances: 3

Circles "no" and "2".....# of instances: 2

% accurate (with conventional coding/editing procedures): 100%

## item non-response: 0%

## Discussion and recommendations

Neither item analysis nor the focus group discussions revealed any difficulty with this question. It is recommended that it be retained as is.

29.A. To your knowledge, did any pa	arther ot yours ever have a miscarriage	•		
(CIRCLE ONE)			Number	Percent
	Yes (G0 T0 B)			14.1
	No (GC TO Q. 30)	. 2	57	73.1
	Not applicable (60 TO Q. 30)	. 3	8	10.3
	DON'T KNOW (GO TO Q. 30)	. 8	_2	2.6
<u>if yes:</u>			78	100%
B. How many are you aware of?	(WRITE IN NUMBER, PUT A "O" IN ANY BOX ON THE LEFT)	EXTR	A	
	IIII ME	CARE	HAGES	
(One respondent reported 3	s miscarriages; one reported 2; and r	ine r	eported 1	1)
C. in what year(s) did they occur 1.1191—1—1	ur? (WRITE IN YEAR OR YEARS)			
2. <u>]1 9                                    </u>				
3. <u>[1</u> ]9				
Hon-standard responses				
· 29.A. Item events; Circles "yes"	" instead of "1"	#	of instan	ces: 1
Circles "no" inst	ead of "2"	#	of inst <del>a</del> n	ces: 2
	and fills in "00"			
29.C. Error: Fails to fill in yea	r (one miscarriage)	#	of instal	nces: 1

% accurate (with conventional coding/editing procedures): A=100%, B=100%, C=99%

## Item non-response: 1%

## Discussion and recommendations

One focus group discussant raised the issue of whether abortions counted as miscarriages.

However, given the general understanding of miscarriage as an unplanned spontaneous event as opposed to a deliberate human intervention, the question as phrased appeared to pose no threat of misunderstanding. It is recommended that the item be retained as is.

30. A.	Have you ever be	Yes (GO 1	TO B) ) Q. 31)	1 66	Percent 84.6 15.4 100%	
B.	your first marri widowed or divo	age ended because of	erried and/or divorced	ate the date you were		
		Married Month   Year	Diversed Month   Year	Yidowed Month   Year		
ist Man	riage					
2nd Mari	riage			<del>                                     </del>		
3rd Man	riage		<del>                                     </del>			
4th Marr	riage		<del> </del>			
(Respons	se frequencies: 6	6 married, 15 divor	oed, O widowed, 8 sec	ond marriages , 8 second d	livorces)	
Non-standard responses  30.A. Item event: Circles "Yes" instead of "1"						
S accurate (with conventional coding/editing procedures): A = 1005, B = 965						
<u>ltem n</u> e	pa-response:	2%				
Discus	sien and rece	mmendations				

Focus group discussion confirmed that the item was well understood. It is recommended that the question be retained in its current form.

## 8. Income (Q. 31)

The next question concerns your total family income. Income is important for analyzing and interpreting the health information we receive from veterans. For example, income information helps us to learn whether persons in one income group have certain conditions more or less

frequently than people in another income group.

31. What was your total combined <u>family\_income</u> (that is, for both yourself and your partner, if any) during the past 12 months? Include money from jobs, social security, unemployment payments, retirement income, public assistance and so forth. (CIRCLE ONE)

	Number	<u>Percent</u>
Less than \$ 5,00001	2	2.6
\$ 5,000 - \$9,99902	0	0.0
\$ 10,000 - \$14,99903	1	1.3
\$ 15,000 - \$19,99904	8	10.3
\$ 20,000 - \$24,99905	13	16.7
\$ 25,000 - \$29,99906	15	19.2
\$ 30,000 - \$34,99907	12	15.4
\$ 35,000 - \$39,99908	11	14.1
\$ 40,000 - \$49,99909	6	7.7
\$50,000 or more10	10	12.8
•	78	100%

## Non-standard responses

Item error: circles both 04 and 05..... of instances: 1

% Accurate (with conventional coding/editing procedures): 99%

Item non-response: 0%

## Discussion and recommendations

It was particularly gratifying that 100% item response was obtained for the income question, since income items are notoriously sensitive. Both item analysis and focus group discussion showed the item performing well. It is recommended that it be retained in its present form.

## 9. Locating information (Qs.32-37)

## Findings and Non-standard responses

**32. Respondent name, address, phone number.** All information provided in full. No errors or item events.

33	Social	Security	Number
<b>.</b>	JUL 1 91		

Errors: Fails to provide social security number...... # of instances: 2

## 34. Respondent's birthdate.

Item event: Fails to zero-fill month of birth. ..... # of instances: 1

## 35. Twin brother's name, address, phone number.

Errors:	Omits all information on brother	*	of	instances:	2	
	Omits street, number and city from address	#	of	instances:	1	
	Omits brother's telephone number	*	Qf	instances:	2	

## 36. Whether twin brother is living.

All information provided in full. One brother deceased. No errors or item events.

## 37. Name, address, phone number of contact person for future locating.

Errors: Illegitimate skip of Q. 37	* of instances: 2	2
Incomplete telephone number	# of instances: 1	١

% Ac	curate (with conventional coding /editing procedures):	Non-response:
32:	100%	0%
33:	97.5%	2.5%
34:	100%	0%
35:	93.6% complete information; 3.8% partial information	. 4%
36:	100%	0%
<b>37</b> :	96% complete information; 1.3% partial information.	1%

## Discussion and recommendations

On the basis of item analysis and focus group discussion, it is recommended that the locating (address updating) section (Q 32 - 37) be retained unchanged.

## IV. Summary and Recommendations

The performance of the items in the <u>Survey of Health</u> is summarized below.

Item Number	% Accurate	% Non-response
1.	100%	0%
2.	99	0
<b>3</b> .	100	0
4.	99	<1
5.	<b>&gt;99</b>	∢1
6.	100	Û
7.	100	0 .
8	97.4	0
9.	100	0
10.	100	0
11.	100	0
12.	<b>&gt;99</b>	<1
13.	<b>&gt;99</b>	∢1
14.	. 100	0
15.	100	0
16.	99	41
17.	100	0
18.	97.5	2.5
19.	<b>&gt;99</b>	<1
20.	. 99	Û
21.	100	0
22.	100	0
23.	100	0
24.	98	1
25.	100	0
<b>26</b> .	100	Û
27.	99	1
<b>28</b> .	100	0
<b>29</b> .	<b>&gt;99</b>	1
30.	98	2
31.	99	0
32.	100	0
<b>33</b> .	97.5	2.5
34.	100	· O
<b>35</b> .	96	4
<b>36.</b>	100	0
37.	98	1

As the summary makes apparent, the <u>Survey of Health</u> enjoyed an unusually high level of respondent accuracy in completing the questions, and a similarly high level of item reponse. (The figures for Item Accuracy include any illigitimate skips or non-responses to items.) Out of almost 15,600 response possibilities (78 respondents x 200 variables) there were only 66 non-responses (.4%).

In the item-by-item review of findings, it was recommended that three items be dropped from the questionnaire for the main survey. The recommended deletions are: Q. 12., a question on average alcohol consumption over one's entire drinking history, which a number of respondents found confusing; Q.16.D., an indirect measure of a smoker's "pack years;" and Q. 26., a too-vague question about the number of children ever fathered.

NORC also recommended that some items be moved within the questionning sequence. In particular, it was recommended that the items about mental or emotional problems, embedded in lists of physical health problems in pretest questions 17. and 19., be removed from the physical health context and placed later in the questionnaire near other items that deal with psychological health issues, becoming items 32., 33., and 34 (see Appendix 3). A slight modification of the question was also recommended. Rather than ask whether the respondent has consulted a <u>physician</u> about any emotional problem, the respondent is asked whether he has consulted "...a health care professional (such as a physician, psychologist, or social worker)...." Broadening the reference to "health care professional" rather that just "physician" is less likely to result in underreporting of emotional problems.

Several items that did not appear in the pretest questionnaire were recommended for addition to the main survey instrument. They are, by question number in the proposed survey instrument reproduced in Appendix 3:

## Additions to the occupation sequence:

- 9.E. How many years have you worked at this job?
- 10. After your discharge from active military duty, how long did it take you to find a full-time job?

The above two items are adapted from the <u>Legacies of Vietnam</u> (Egendorf, et al., 1981) occupation questionnaire, #C-40.

Additional category in the educational attainment item:.

11.E. Vocational or technical school after high school.

Substitute in aigarette consumption sequence:

- 17.C. About hew long has it been since you last smoked eigarettes regulary?
- 19. About how old were you when you first started smoking eigarettes regularly?

Addition to list of physical health problems:

20.13. Joint or skeletal disorders, such as arthritis, swollen joints, etc.

Addition to sequence of information on hospitalization for health problems:

22.D. Then were you first hespitalized for this problem?

25. While in the military, did you request a Vietnam duty assignment?

The above item is adapted from the June, 1984 draft of the CDC questionnaire for the study of the Yietnam experience and Herbicide Orange.

As part of an expanded sequence on the homecoming experience:

- 27.B. After your discharge from active military duty, how often did you talk to the following individuals about your experiences in the military? List: parents, wife or girlfriend, twin brother, friends, other Vietnam veterans.
- 28. After your discharge from active military duty, were you eager to get involved in everything, or did you not want to participate in things with other people?

The above two items are adapted from the Homecoming Questionnaire (items C2-6 and C2-9) from the <u>Legacies fof Yietnam</u> research.

As part of the revised section on fertility history:

- 35. Is your wife (or partner) now pregnant?
- 36.A. Have you and your partner(s) ever tried for a period of a year or more to conceive a child?

[IF YES]: B. Yere you able to conceive a child after a year of trying?

These items are adapted from the June, 1984 draft of the CDC questionnaire.

These changes result in a questionnaire of substantially similar burden to respondents, but without the opportunities for frustration presented to respondents in the pre-test survey due to a small number of vague and inadequate questions and response options.

NORC is confident that the recommended changes in the questionnaire will result in an even more successful fielding of the Survey of Health with the main study sample.

## Appendix 1

- 1. Cover letter of introduction to <u>Survey of Health</u>
- 2. Pretest version, <u>Survey of Health</u>
- 3. Follow-up letter to non-respondents

# NATIONAL RESEARCH COUNCIL ASSEMBLY OF LIFE SCIENCES

2101 Constitution Avenue Washington, D. C. 20418

TWIN REGISTRY

June 1984

Address of Veteran

Dear [Name of Veteran]:

We need your help in a new study, of great interest and importance to medicine, on the health of twins. This study provides a very unusual opportunity to learn more about the health effects of military service, and the inheritance of many important illnesses. The plan is to create a registry of twins who are veterans of the Vietnam era. We are writing to ask that you participate in this effort by completing the enclosed questionnaire and returning it in the prepaid envelope.

The study is a purely scientific one which is being conducted by the National Academy of Sciences-National Research Council, with the cooperation of the Veterans Administration and the Department of Defense. NORC, a research center at the University of Chicago, is responsible for collecting the survey information. The study can be carried out only with the help of the twins themselves, and we want you to take part in the study by supplying the information asked for on the attached form.

All information you supply will be held in strict confidence and will be available only to the medical investigators working on this study. The study has nothing to do with any compensation, claims, or other . contacts you may have with the Veterans Administration. No individual will be identified in the published results of the study.

The data are being collected under authority of Title 38, Sec 4101 of the Code of Federal Regulations, which authorizes the VA to conduct medical research.

Twin pairs who participate in the registry may be asked, from time-to-time, to participate in research studies. Your involvement in any study is entirely voluntary. The purpose of each study will be explained fully so that you can make an informed decision about your participation.

It is hoped that a great deal can be learned about genetic effects upon health and length of life from the registry. We sincerly hope that you will be able to help us by completing and returning the enclosed material. If you have any questions about the registry or studies of twins, please write to Dr. Mary O'Brien, or call her, collect, at 312/962-8967.

Sincerely,

C. Dennis Robinette, Ph.D.

Director

C-8. R.

National Research Council Twin Registry

Mary O'Brien, Ph.D.

Director

NORC Twin Registry Data Collection VIETNAM ERA TWIN STUDY
SURVEY OF HEALTH

NOTICE: All information you supply will be held in strict confidence and will be available only to the medical investigators working on this study. The study has nothing to do with any compensation, claims, or other contacts you may have with the Veterans Administration. No individual will be identified in the published results of the study.

			BEGIN	DECK	1
CASE	ID:	0	1-7/		

### BEFORE YOU BEGIN...PLEASE READ THESE INSTRUCTIONS

For some questions in this survey you will simply write answers in your own words. Other questions, however, ask you to follow instructions and use the answer categories provided. You will find instructions for responding included with each question, in CAPITAL LETTERS within parantheses. Below are examples of all the different instructions you will see, and the correct way to answer each type of question.

## INSTRUCTION 1: (CIRCLE ONE)

ı.	What	ís	the	color	ο£	your	eyes?	(CIRCLE	ONE)
----	------	----	-----	-------	----	------	-------	---------	------

Blue1	IF THE COLOR OF YOUR EYES
Brown	IS BROWN, YOU WOULD
Green3	CIRCLE THE NUMBER TO THE
Another color4	RIGHT OF "BROWN."

## INSTRUCTION 2: (CIRCLE ALL THAT APPLY)

- 2. Last week, did you do any of the following? (CIRCLE ALL THAT APPLY)
  - a. Work for pay..... D
    b. Attend classes....1 IF YOU WORKED FOR PAY, EXERCISED,
    c. Watch TV..... D
    d. Visit friends.....1 WOULD CIRCLE THE NUMBERS TO THE
    e. Exercise..... RIGHT OF THE ITEMS, AS SHOWN.

### INSTRUCTION 3: (CIRCLE ONE FOR EACH LINE)

3. Do you plan to do any of the following next week? (CIRCLE ONE FOR EACH LINE)
Not

	<u>Yes Sure No</u>	IF YOU DON'T PLAN TO VISIT A
a.	Visit a relative23	RELATIVE NEXT WEEK, MAY GO TO A
ъ.	Go to a museum123	MUSEUM, AND DEFINITELY ARE GOING
	Go to a library 1 2 3	TO GO TO A LIBRARY AND WATCH
d.	Watch sports on TV 1 23	SPORTS ON TV, YOU WOULD CIRCLE
		THE NUMBERS AS SHOWN

## INSTRUCTION 4: (WRITE IN NUMBER. PUT A "O" IN ANY EXTRA BOXES ON THE LEFT)

4. How many cups of coffee do you drink each day, on average? (WRITE IN NUMBER. PUT A "O" IN ANY EXTRA BOXES ON THE LEFT)

		IF YOU DRINK 5 CUPS OF COFFEE
0 5	Cups of Coffee	DAILY, YOU WOULD WRITE IN THE
	-	NUMBERS AS SHOWN.

## INSTRUCTION 5: (WRITE IN NUMBER)

5. What is your date of birth? (WRITE IN NUMBER)



IF YOU WERE BORN ON THE SIXTH OF JULY, 1952, YOU WOULD WRITE IN THE NUMBERS AS SHOWN, INCLUDING THE "O" IN THE UNUSED BOXES.

	W you have a fath biginer: (CIRCLE ONE)	
	Yes, living (GO TO Q.2)1	
	Yes, deceased (GO TO Q.2)2	
	· \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	10/
15 MA	Triplet or higher4  WOW OR WITRIPLETM, PLEASE STOP HERE AND RETURN FORM IN THE ENVELOPE PRO	WIDED.
	As children, were you and your twin "as alike as two peas in a pod," only ordinary family resemblance? (CIRCLE ONE)	
	As alike as two peas in a pod1	
	Of only ordinary family resemblance2	11/
	DON'T KNOW8	
3.	Do you yourself believe that you and your twin are identical (monozy twins, or do you believe that you are fraternal (dizygotic) twins? ONE)	
	Identical (monozygotic)1	
	Fraternal (dizygotic)2	12/
	DON'T KNOW8	
4.	When you were children, how often did the following persons have dif in telling you and your twin brother apart? (CIRCLE ONE FOR <u>EACH</u> LI	
	All of Some of DON'T DOES NOT the time the time Never KNOW APPLY	
	a. Parents 1 2 3 8	13/
	b. Other Brothers and Sisters 1 2 3 8 6	14/
	c. Grandparents 1 2 3 8 6	15/
	d. Classmates 1 2 3 8	16/
	e. Teachers 1 2 3 8	17/
	f. Strangers 1 2 3 8	18/

POUNDS

34-36/

5.	bro cha wer	o following list describes other may or may not have suracteristic listed, please teenagers), and describe tilar, somewhat similar or	shared when a consider a whether	you were your child you and you	children. Thood years ur twin bro	For eac before ther wer	ch e you re ver
	Whe	n we were children our:	Very Similar	Somewhat Similar	Very <u>Different</u>	DON'T KNOW	
	a.	Eye color was	1	2	3	8	19/
	b.	Hair color was	1	2	3	8	20/
	c.	Hair type was	1	2	3	8	21/
	d.	Heights were	1	2	3	8	22/
	е.	Weights were	1	2	3	8	23/
	f.	Teath were	1	2	3	. 8	24/
	g.	Voices were	1	2	3	8	25/
	h.	Muscular strength was	1	2	3	8	26/
	i.	Temperaments were	1	2	3	8	27/
	j.	Musical abilities were	1	2	3	8	28/
	k.	Language abilities were	1	2	3	8	29/
	١.	Manual skills (dexterity) were		2	3	8	30/
6.		ut how tall are you withou HES. IF ZERO INCHES, WRIT			NUMBER OF	FEET AND	)
			FEET	31/	] ] N	CHES 3	32-33/
7.		ut how much do you weigh w POUNDS)	ithout clo	thes or sh	ioes? (WRI	TE IN NU	IMBER

8.	Α.	Are you presently employed part-time or full-time? (CIRCLE UNE	=)
		Yes, full-time (GO TO B)	
		Yes, part-time (GO TO B)2	37/
		Not employed (GO TO Q.9)3	
	<u>IF</u>	PRESENTLY EMPLOYED:	
	В.	What kind of business or industry is this? (Example: TV and r manufacture, retail shoe store, State Labor Department, farm, e	
			38-40/
	С.	What kind of work are you doing? (Example: Electrical enginees stock clerk, typist, farmer, etc.)	эг,
			41 <b>-43</b> /
•	D.	What are your most important activities or duties? (Example: Typing, filing, selling new cars, finishing concrete, etc.)	
		· · · · · · · · · · · · · · · · · · ·	14-45/
9.	Wha ten	it is the highest grade or year of school you have completed and credit for? (CIRCLE THE <u>ONE</u> HIGHEST GRADE OR YEAR)	got-
	a.	None <u>00</u>	
	b.	Elementary	
	c.	High School	16-47/
	d.	College	10-4//
	θ.	Some Graduate School	
	f.	Graduate or Pro- fessional Degree <u>18</u>	

	In order to get an accurate picture of each veteran's general health, everyone is asked the next few questions about alcoholic beverages and smoking.
10.	Have you had more than 20 alcoholic drinks in your entire life? (CIRCLE ONE)
	Yes (GO TO Q.11)
	No (GO TO Q.16)2
11.	How old were you when you first started drinking alcoholic beverages regularly? (WRITE IN AGE)
	YEARS OLD 49-50/
	Never drink alcoholic beverages regularly00
12.	A. During the entire time that you have been drinking alcoholic beverages, how many days per week or month do you drink alcoholic beverages, on the average? (WRITE IN EITHER DAYS PER WEEK OR DAYS PER MONTH)
	DAYS PER WEEK 51/
	DAYS PER MONTH 52-53/
	B. If a DRINK is considered one can or bottle of beer or one glass of wine, or one mixed drink or shot of hard liquor, how many DRINKS would you have on the average, on those days when you drink? (WRITE IN NUMBER OF DRINKS. PUT A "O" IN ANY EXTRA BOX ON THE LEFT)
	DRINKS 54-55/

13.		s there a period in your life (of at least 6 months) when your con- nption was <u>more</u> than this?
		Yes (GO TO B)
		No (GO TO Q.14)2
	<u>IF</u>	YES:
	8.	When was this (WRITE IN YEARS)
		1 9 to 1 9 59-60/
		37-307 37-007
	c.	On about how many days per week or month would you drink more alcoholic beverages, on the average? (WRITE IN EITHER DAYS PER WEEK OR DAYS PER MONTH)
		DAYS PER WEEK 61/
		DAYS PER MONTH 62-63/
	D.	How many drinks would you have, on the average, on those days when you were drinking more? (WRITE IN NUMBER OF DRINKS. PUT A "O" IN ANY EXTRA BOX ON THE LEFT)
		DRINKS 64-65/
14.	Α.	Do you still drink alcoholic beverages?
		Yes (GO TO B)1
		No (GO TO Q.15)2
	1F	YES:
	В.	On about how many days per week or month do you currently drink alcoholic beverages, on the average? (WRITE IN EITHER DAYS PER WEEK OR DAYS PER MONTH)
		DAYS PER WEEK 67/
		DAYS PER MONTH 68-69/

14.	(00	ontinued)
	C.	How many drinks do you have, on the average, on those days when you drink? (WRITE IN NUMBER OF DRINKS. PUT A "O" IN ANY EXTRA BOX ON THE LEFT)
		ORINKS 70-71/
		GO TO Q.16
15.	How	old were you when you stopped drinking? (WRITE IN AGE)
		YEARS OLD 72-73/
16.	Α.	Have you smoked at least 100 digarettes in your life? (CIRCLE ONE)
		Yes (GO TO B)
		No (GO TO Q.17)2
	<u>1F</u>	YES:
	8.	Do you smoke digarettes now? (CIRCLE ONE)
		Yes1
		No2
	с.	On the average, about how many cigarettes a day (do/did) you smoke? (WRITE IN NUMBER SMOKED. PUT A "O" IN ANY EXTRA BOXES ON THE LEFT)
		CIGARETTES 76-78/
	0.	About how long has it been since you last smoked digarettes fairly regularly? (CIRCLE ONE)
		Currently smoke1
		Days2
		Weeks
		Months4
		Years5
		Never smoked regularly6

17.	Do you <u>currently</u> have any of the following health problems?	(CIRCLE YES
	OR NO FOR EACH LINE, 1-16)	

		Yes		No	
1.	Accidental injury	1.	•••	2	10/
2.	High blood pressure/hypertension	1.	•••	2	11/
3.	Respiratory conditions, such as lung trouble, persistent coughing, etc	1.	•••	2	12/
4.	Cancer	1.	•••	2	13/
5.	Heart trouble	١.	• • •.	2	14/
б.	Stroke	1.	•••	2	15/
7.	Kidney, bladder, or urinary problems, such as stones, infections, etc	1.	•••	2	16/
8.	Skin problems, such as acne or skin rash	1.	•••	2	17/
9.	Mental or emotional problems	1.	•••	2	18/
10.	Diabetes	1 .	•••	2	19/
11.	Stomach or digestive disorders, such as ulcers, inflammations, etc	1 .	•••	2	20/
12.	Liver problems, such as hepatitis, cirrhosis, etc	1	•••	2	21/
13.	Blood disorders, such as anemia, blood clots, etc	1 .	•••	2	22/
14.	Nerve disorders, such as epilepsy, migraines, etc	1 .	•••	2	23/
15.	Visual problems	1 .	• • •	2	24/
16.	Hearing problems	1 •	• • •	2	25/

18. Please indicate which statement below best describes your military duty status: (CIRCLE ONE)

19. The questions below concern your health over the entire period since your active duty during the Vietnam Era, 1965-1975.

If you were released from active military duty during the years 1965-1975, please describe your health <u>since your date of release</u>.

If you are still on active duty, or released after 1975, describe your health since 1975.

In responding, please include any current health problems you described in Q.17. (ALWAYS ANSWER A AND THEN ANSWER B AND C AS APPROPRIATE FOR EACH LINE, 1-16)

- A. Since active military duty 1965-75, have you had this problem?
- B. Have you con C.
  suited a
  physician
  about this
  problem?
- D. Have you ever been hospitalized ove night for the problem?

IF YES TO THIS, ANSWER B ====>

IF YES TO THIS, ANSWER C ====>

		Α.		8.		C.	
. 15	Accidental Injury	Yes1	***>	Yes1	==#>	Yes1	
		No2		No2		No2	٠.
			27/		28/		29/
2.	High Blood Pres-	Yes1	384>	Yes1	***>	Yes1	
	sure/Hypertension	No2		No2		No2	
			30/		31/	3	32/
3.		Yes1	===>	Yes1	38 <b>2</b> >	Yesi	
	tions such as Lung Trouble, Persis-	No2		No2		No2	
	tent Coughing, etc.		33/		34/	<u> </u>	35/
4.	Cancer	Yes1	182>	Yesi	===>	YesI	
		No2		No2		No2	
			36/		37/		38/
5.	Heart Trouble	Yesl	355>	Yes1	222>	Yes1	
		No2		No2		No2	ı
			39/		40/	4	41/
6.	Stroke	Yes1	222>	Yes1	===>	Yes1	
		No2		No2		No2	
			42/		43/	4	44/
7.	Kidney, Bladder, or	Yes1	222>	Yes1	===>	Yes1	
	Urinary Problems such as Stones,	No2		No2		No2	
	infections, etc.		45/		46/	4	47/

## 19. (continued)

Α.	Since active
	military duty
	1965-75, have
	you had this
	problem?

sulted a physician about this problem?

B. Have you con- C. Have you ever been hospitalized overnight for this problem?

IF YES TO THIS, ANSWER B ====>

IF YES TO THIS, ANSWER C ====>

				i			
		Α.		В.		C.	
8.	Skin Problems such as Acne or Skin Rash	Yes1	#8E>	Yes1	===>	Yes1	
		No2		No2		No2	
			48/		49/		50/
9.	Mental or Emotional Problem	Yes1	===>	Yesi	===>	Yes1	
		No2		No2		No2	
			51/		52/		53/
10.	Díabetes	Yes1	***>	Yes1	===>	Yes1	
		No2		No2	•	No2	
			54/		55/		56/
11.	Stomach or Digestive Disorders, such as Ulcers, Inflamma- tions, etc	Yes1	===>	Yes1	##2>	Yesl	<del></del>
		No2		No2	1	No2	
			57/		58/		59/
12.	Liver Problems, such as Hepatitis, Cirrhosis, etc.	Yes1	222>	Yes1	***>	Yes1	
		No2		No2		No2	
			60/		61/		62/
13.	Blood Disorders, such as Anemia, Blood Clots, etc.	Yes1	===>	Yes1	*==>	Yes1	
		No2		No2		No2	
			63/		64/		65/
14.	Nerve Disorders, such as Epilepsy Migraines, etc.	YesI	3#4>	Yes	===>	Yes1	
		No2	}	No2		No2	
			66/		67/		68/
15.	Visual Problems	YesI	***>	Yes1	===>	Yes1	
		No2		No2		No2	
			69/		70/		71/
16.	Hearing Problems	Yes1	===>	Yesi	===>	Yes1	
		No2		No2		No2	!
			72/		73/		74/

20.		<pre>id you say that your health in general is excellent, very good, r, or poor? (CIRCLE ONE)</pre>	good,
		Excellent5	
		Very Good4	
		Good3	75/
		Fair2	
		Poor1	
21.	Α.	Compared to your twin brother's health, how would you rate your health? Would you say your health is (CIRCLE ONE)	-
		Better than your brother's (GO TO B)1	
		About the same as your brother's (GO TO Q.22)2	767
		Worse than your brother's (GO TO B)	76/
		Doesn't apply, because brother is not living (GO TO Q.22)6	
	(IF	HEALTH IS BETTER OR WORSE):	
	В.	In what way is your health different from your brother's health	1?
			7-78/

22.	Α.	When you were in the military, were you stationed in Vietnam, Laos	5,
		or Cambodia; in the waters in or around these countries; or fly in	n
		missions over these areas? (CIRCLE ONE)	

Yes (GO TO B)	
	10/
No (GO TO 0.23A)	

#### IF YES:

B. Below is a list of 18 different combat roles and experiences that men had during the Vietnam war. For each statement, please indicate whether you had that combat experience. (CIRCLE YES OR NO FOR EACH LINE, 1-18)

	<u>Yes No</u>	
1.	In an artillery unit which fired on the enemy1 2	11/
2.	Flew in an aircraft (reconnaissance, or fixed wing F-14, 8-52, etc.)	12/
3.	Flew helicopter attack gunships or medvacs1 2	13/
4.	Stationed at a forward observation post 2	14/
5.	Tunnel rat checking enemy base camps 2	15/
6.	Served on river patrol or gunboat	16/
7.	Demotitions expert in the field 2	17/
8.	Assigned to Graves and Registration to retrieve dead bodies from the field 2	18/
9.	Served as a medic in combat 2	19/
10.	Received incoming fire 2	20/
11.	Encountered mines and booby traps	21/
12.	Received sniper or sapper fire 2	22/
13.	Unit patrol ambushed 2	23/
14.	Flew in aircraft (fixed wing or helicopters) and was shot down	24/
15.	Engaged VC and/or NVA in firefight 2	25/
16.	Saw Americans killed, and/or saw Vietnamese killed 2	26/
17.	Wounded1 2	27/
18.	Captured by the enemyt 2	28/

	Α,	Overall, how would you describe your readjustment to civilian after your release from active duty? Would you say that retucivilian life caused you (CIRCLE ONE)	
		Considerable difficulty (GO TO B)1	
		Some difficulty (GO TO Q.24)2	
		Very little difficulty (GO TO Q.24)3	29/
		None, or practically no difficulty (GO TO Q.24)4	
		DOES NOT APPLY; I AM STILL IN THE MILITARY (GO TO Q.24)6	
	۱F	CONSIDERABLE DIFFICULTY:	
		Please describe the difficulties you had.	
			30-31/
		•	
24.		the past 12 months how frequently have you experienced the fooblems? (CIRCLE ONE FOR EACH LINE, a-o)	llowing
24.			llowing
24.	pr	oblems? (CIRCLE ONE FOR EACH LINE, a-o)  Very Some- Almost Often Often times Never	llowing Never
24.	pr	Very Some- Almost Often Often times Never staying asleep or sleeping	Never
24.	pr	oblems? (CIRCLE ONE FOR EACH LINE, a-o)  Very Some- Almost Often Often times Never Had trouble falling asleep,	Never
24.	pro	Very Some- Almost Often Often times Never Had trouble failing asleep, staying asleep or sleeping too much	Never
24.	pro	Very Some- Almost Often Often times Never Had trouble falling asleep, staying asleep or sleeping too much	Never
24.	pro	Very Some- Almost Often Often times Never Had trouble failing asleep, staying asleep or sleeping too much	Never 5 32/
24.	pr:	Very Some- Almost Often Often times Never  Had trouble falling asleep, staying asleep or sleeping too much	Never 5 32/
24.	pr:	Very Some- Almost Often Often times Never Had trouble failing asleep, staying asleep or sleeping too much	Never 5 32/
24.	pr:	Very Some- Almost Often Often times Never  Had trouble falling asleep, staying asleep or sleeping too much	Never 32/
24.	b.	Very Some- Almost Often Often times Never  Had trouble failing asleep, staying asleep or sleeping too much	Never 32/
24.	b.	Very Some- Almost Often Often times Never  Had trouble failing asleep, staying asleep or sleeping too much	Never 32/
24.	b.	Very Some- Almost Often Often times Never Had trouble failing asleep, staying asleep or sleeping too much	Never  . 5 32/ . 5 33/
24.	b.	Very Some- Almost Often Often times Never Had trouble failing asleep, staying asleep or sleeping too much	Never  . 5 32/ . 5 33/
24.	b.	Very Some-Almost Often Often times Never  Had trouble failing asleep, staying asleep or sleeping too much	Never  . 5 32/ . 5 33/
24.	b.	Very Some- Almost Often Often times Never Had trouble failing asleep, staying asleep or sleeping too much	Never  . 5 32/ . 5 33/
24.	b.	Very Some- Almost Often Often times Never Had trouble failing asleep, staying asleep or sleeping too much	Never  . 5 32/ . 5 33/
24.	b.	Very Some- Almost Never Had trouble failing asleep, staying asleep or sleeping too much	Never  . 5 32/ . 5 33/

#### 24. (continued)

			Often	Often	times	Never	Never	
	ŕ.	Had times when other						
		feelings or actions be-						
		came stronger when you						
		were in situations that						
		reminded you of times in						
		the military	1	2	3	. 4	5	37/
	g.	Felt ashamed or guilty						
	3*	about the kind of things						
		you did to survive while						
		in the military	. 1	2	3	. 4	5	38/
	h.	Had trouble concentrating	1	2	3	. 4	5	39/
	ı.	Had trouble with your						
	•	memory	1	2	3	. 4	. 5	40/
	j.	Have been irritable						
		and short-tempered	!	2	3	. 4	. 5	41/
	k.	Had explosions of angry						
		or aggressive behavior	1	2	3	. 4	. 5	42/
	l.	Lost interest in your						
		usual daily activities	. 1	. 2	3	. 4	5	43/
	m.	Feit distant from every-						
		one, even those people						
		you care about	. 1	2	3	. 4	. 5	44/
	n.	Feit that life is						
		not meaningful		2	3	. 4	. 5	45/
	٥.	Felt jumpy and easily						
		startled or felt that						
		you had to stay on guard						
		all the time	. 1	. 2	3	. 4	. 5	46/
25.		nce your discharge from active rtner(s) ever had problems hav					r	<del></del>
		Yes	•••••	• • • • • • •	********	1		47/
<u>- :</u>		No.	******	• • • • • • •		2		
26.		many children have you ever EXTRA BOX ON THE LEFT)	fathered	? (ENTE	R NUMBER.	PUT A	#O#	lN
					сн	IILDREN	48-	49/

27. In the table below we would like you to enter information about your natural (not adopted) children. Please include all live births, even if a child is no longer living.

Please indicate: (A) The date of birth of each child; (B) the child's mother's age at the time of the birth; and (C) whether each child had any abnormality, birth defects, or handicaps. Briefly describe any birth defect in the space provided (D). If a child is no longer living, please enter date of death in (E).

	A.	θ.	с.	D <b>.</b>	€.
Natural Children	Date of Birth Month   Day   Year	Mother's Age At Child's Birth (ENTER YEARS)	Any Birth Defects? (CIRCLE) Yes - No	Description of Birth Defects, Abnormality, or Handicap	If Deceased, Date of Death Month   Day   Year
lst Child	50-55/	56-57/	Y N 58/	59-60/	61-66/
2nd Child	67-72/	73-74/	Y N	76-77/	(BEGIN DECK 4)
3rd Child	16-21/	22-23/	Y N 24/	25-26/	27-32/
4th Child	33-38/	39–40/	Y N 41/	42 <b>-4</b> 3/	44-49/
5th Child	50-55/	96-57/	Y N 58/	59 <del>-6</del> 0/	61-66/
6th Child	67-72/	73-74/	Y N	76-77/	(BEGIN DECK 5)
Other Children					
					16/

28.	Α.	Have you ever been the father of a stillborn child? (CIRCLE ONE)
		Yes (GO TO 8)1
		No (GO TO Q.29)2
	<u>IF</u>	YES:
	8.	In what year(s) did this happen? (WRITE IN YEAR OR YEARS)
		1. 1 9 18-19/
		2. 1 9 20-21/
		3. 1 9 22-23/
29.	Α.	To your knowledge, did any partner of yours ever have a miscarriage? (CIRCLE ONE)
		Yes (GO TO B)1
	•	No (60 TO Q.30)2
		Not Applicable (GO TO Q.30)6 24/
		DON'T KNOW (GO TO Q.30)8
	IF	YES:
	в.	How many are you aware of? (WRITE IN NUMBER, PUT A "O" IN ANY EXTRA BOX ON THE LEFT)
		MISCARRIAGES 25-26/
	C.	In what year(s) did they occur? (WRITE IN YEAR OR YEARS)
		1. 1 9 27-28/
		2. 1 9 29-30/
		3. 1 9 31-32/

30. A. Have you ever been married?

Yes	(GO	ΤO	8)	 	 • • • •	 ,1	
							33/
No	(GO 1	гοο	.31).	 	 	 .2	

#### IF YES:

B. In the table below, please list the month and year in which you were married. If your first marriage ended because of death or divorce, indicate the date you were widowed or divorced. If you were married and/or divorced more than once, please complete the remainder of the table.

, 43.01	Married Month   Year	Olvorced Month   Year	Widowed Month   Year
ist Marriage	34-37/	38-41/	42-45/
2nd Marriage	46-49/	50-53/	54-57/
3rd Marriage	58-61/	62-65/	66-69/
4th Marriage	70-73/	74-77/	(BEGIN DECK 6)

The next question concerns your total family income. Income is important for analyzing and interpreting the health information we receive from veterans. For example, income information helps us to learn whether persons in one income group have certain conditions more or less frequently than people in another income group.

31. What was your total combined <u>family</u> income (that is, for both yourself and your partner, if any) during the past 12 months? Include money from jobs, social security, unemployment payments, retirement income, public assistance and so forth. (CIRCLE ONE)

Less than	\$ 5,00001	
\$ 5,000 -	\$ 9,99902	
\$10,000 -	\$14,99903	
\$15,000 -	\$19,99904	
\$20,000 -	\$24,99905	14-15/
\$25,000 -	\$29,99906	14-13/
\$30,000 -	\$34,99907	
\$35,000 -	\$39,99908	
\$40,000 -	\$49,99909	
\$50,000 or	more10	

ACC ID	_
ASE ID	· U

ACCORCE	LADOLATIANS	INFORMATION
	I PUR LINES	INPONENTIAL

The last set of questions will help us to make sure that we have the correct address for both you and your twin prother in case we need to contact you in future years for additional health surveys. 32. Please print your name, address, and telephone number (where you can be reached in the coming year). Your Full Name \_\_\_\_ Number and Street Address . \_\_\_\_ State \_\_\_\_ Zip Code 33. Your Social Security Number 27-32/ 34. Your Date of Birth 35. If your twin brother is allve, please print his name, current address and telephone number. Your Twin Brother's Name Number and Street Address \_\_\_\_\_\_ Apt. Telephone Number 36. A. If your twin brother is dead, in what year did he die? B. In what city, state, and country did he die? City \_\_\_\_\_ State \_\_\_\_ Country 37/ 37. Since we may need to contact you again at some time, please give us the name, address and telephone number of a person other than your twin who will always know where you can be reached. Full Name Number and Street Address City \_\_\_\_\_ Telephone Number

#### THANK YOU FOR YOUR ASSISTANCE

Your responses will be kept strictly confidential. Please return this questionnaire to NORC in the envelope provided.

Dear Veteran Twin:

I am the Project Director for the Victnam Era Twins Study (VETS) Survey of Health, and I'm writing to you because we need your help.

Several weeks ago we sent to you a letter, a questionnaire, and a stamped return envelope for sending the questionnaire back to us. A copy of the same materials is enclosed with this letter.

Since that time a member of the project staff called and spoke with you or someone in your household. He was calling to make sure that the questionnaire had reached you, and to answer any questions you might have about the study. You, or the household member we spoke with, assured us that the questionnaire had indeed arrived at your home, and that you would likely be sending it back to us shortly.

Unfortunately, we have not yet received your questionnaire. It is possible that it is in the mail to us right now. If so, please accept our sincere thanks, and just discard the enclosed materials. If you have not had a chance to fill out your questionnaire, or have misplaced it, we ask that you take 15-20 minutes right now to complete the copy enclosed with this letter and send it off to us.

As the letter explaining the study states, this study of the health of twins will provide extremely valuable information to medical researchers about many important illnesses. The findings of the study can not be considered accurate, however, if only a limited number of the twins we contact reply. Already close to 100 Chicago-area veteran twins have responded to the survey. Please join them, and contribute to medical knowledge by responding today.

If it is more convenient for you, we will be happy to collect your answers over the phone. Please call me, Mary O'Brien, at (312) 962-8967, or Matt Deshler, (312) 962-1045. We will be happy to arrange a time to call you back and interview you. Whether mailed to us or given over the phone, your responses will be kept strictly confidential.

Receiving your answers as soon as possible is very important for the success of the study. To be included in the preliminary report, which will be presented to the federal Office of Management and Budget in early July, we must have your responses within a week of your receipt of this letter.

As a token of our appreciation, enclosed you will find \$5.00 for your help.

Very sincerely,

# Appendix 2

- 1. Focus group participants
- 2. Focus group agenda

# List of People Attending Veteran Twins Focus Group at NORC, June 13 and 14, 7-9 p.m.

Wednesday June 13

Thursday, June 14

### <u>Veterans</u>

[Names removed to preserve confidentiality]

## Other Guests

Jack Goldberg

William True

Bill Henderson

John Leavitt

Dennis Robinette

Seth Eisen

## NORC Staff

Mary O'Brien

Mary O'Brien

Matt Deshler

Matt Deshler

Martha Van Haitsma

Stephen Ingels

# AGENDA FOR VETERAN TWINS FOCUS GROUP June 13 & 14, 1984

- I. Introduction by Mary O'Brien of NORC Description of the evening's agenda
- II. Introduction of those present: Names, where we're from Veterans please include:
  - --your branch of service
  - --your period of service
  - --whether you served in SouthEast Asia
  - --whether you are a fraternal or identical twin, if you know this
- III. Review of the cover letter sent with the survey

  Strengths? Weaknesses? Recommendations to strengthen its appeal?
  - IV. Review of the questionnaire

    Length: How long did it take to fill out? Too long? About right?

    Could even be added to without discouraging cooperation?

    Item-by-item review of the questions. Review of question sequences or sections, as well (e.g., alcohol questions)
  - V. Additions to the questionnaire

    Veterans' views: Health issues not covered? Military experiences

    that might be related to current health not asked about? etc.

    Guests' ideas on additional questions, and veterans' reactions
- VI. Anything else: Questions about this study, about twin research, about the military experience, about being twins, etc.

## Appendix 3

- 1. Revised cover letter, recommended for main survey
- 2. Revised <u>Survey of Health</u>, recommended for main survey

July 9, 1984

Address of Veteran

Dear [Name of Veteran]:

We need your help in a new study, of great interest and importance to medicine, on the health of twins. This study provides a very unusual opportunity to learn more about the health effects of military service, and the inheritance of many important illnesses. The plan is to create a registry of twins who are veterans of the Vietnam era. We are writing to ask that you participate in this effort by completing the enclosed questionnaire and returning it in the prepaid envelope.

The study is a purely scientific one which is being conducted by the National Academy of Sciences-National Research Council, with the cooperation of the Veterans Administration. NORC, a research center at the University of Chicago, is responsible for collecting the survey information. The study can be carried out only with the help of the twins themselves, and we want you to take part in the study by supplying the information asked for on the attached form.

All information you supply will be held in strict confidence and will be available only to the medical investigators working on this study. The study has nothing to do with any compensation, claims, or other contacts you may have with the Veterans Administration. No individual will be identified in the published results of the study.

Twin pairs who participate in the registry may be asked, from time-to-time, to participate in research studies. Your involvement in any study is entirely voluntary. The purpose of each study will be explained fully so that you can make an informed decision about your participation.

It is hoped that a great deal can be learned about genetic effects upon health and length of life from the registry. We sincerely hope that you will be able to help us by completing and returning the enclosed material. If you have any questions about the registry or studies of twins, please write to Dr. Mary O'Brien, or call her, collect, at 312/962-8967.

Sincerely,

C. Dennis Robinette, Ph.D. Director
National Research Council Twin Registry

Mary O'Brien, Ph.D. Director NORC Twin Registry Data Collection

#### VIETNAM ERA TWIN STUDY

#### SURVEY OF HEALTH

NOTICE: The information asked for in this survey is being collected under authority of Title 38, Section 41 of the Code of Federal Regulations, which authorizes the VA to conduct medical research.

All information you supply will be held in strict confidence and will be available only to the medical investigators working on this study. The study has nothing to do with any compensation, claims, or other contacts you may have with the Veterans Administration. No individual will be identified in the published results of the study.

CASE ID: BEGIN DECK 1

1-7/

#### BEFORE YOU BEGIN...PLEASE READ THESE INSTRUCTIONS

For some questions in this survey you will simply write answers in your own words. Other questions, however, ask you to follow instructions and use the answer categories provided. You will find instructions for responding included with each question, in CAPITAL LETTERS within parantheses. Below are examples of all the different instructions you will see, and the correct way to answer each type of question.

#### INSTRUCTION 1: (CIRCLE ONE)

1. What is the color of your eyes? (CIRCLE ONE)

#### INSTRUCTION 2: (CIRCLE ALL THAT APPLY)

2. Last week, did you do any of the following? (CIRCLE ALL THAT APPLY)

a. Work for pay.....

b. Attend classes....1 IF YOU WORKED FOR PAY, EXERCISED,

c. Watch TV........... AND WATCHED TV LAST WEEK, YOU

d. Visit friends.....1 WOULD CIRCLE THE NUMBERS TO THE

e. Exercise........... RIGHT OF THE ITEMS, AS SHOWN.

#### INSTRUCTION 3: (CIRCLE ONE FOR EACH LINE)

3. Do you plan to do any of the following next week? (CIRCLE ONE FOR EACH LINE)

#### INSTRUCTION 4: (WRITE IN NUMBER. PUT A "O" IN ANY EXTRA BOXES ON THE LEFT)

4. How many cups of coffee do you drink each day, on average? (WRITE IN NUMBER. PUT A "O" IN ANY EXTRA BOXES ON THE LEFT)

C 5 Cups of Coffee DAILY, YOU WOULD WRITE IN THE NUMBERS AS SHOWN.

#### INSTRUCTION 5: (WRITE IN NUMBER)

5. What is your date of birth? (WRITE IN NUMBER)



IF YOU WERE BORN ON THE SIXTH OF JULY, 1952, YOU WOULD WRITE IN THE NUMBERS AS SHOWN, INCLUDING THE "O" IN THE UNUSED BOXES.

#### Vietnam Era Twin Study

#### Survey of Health

This survey concerns the health of twins who served in the U.S. military. While some of the questions may not appear to be directly related to health issues, they all ask for information that has been shown in other studies to be associated with the physical or psychological health of veterans, twins, or both.

both.		
1.	Do you have a twin brother?	(CIRCLE ONE)
		Yes, living (GO TO Q.2)
		Yes, deceased (GO TO 0.2)2
		No3
		Triplet or higher4
IF "N	O" OR "TRIPLET", PLEASE STOP	HERE AND RETURN FORM IN THE ENVELOPE PROVIDED
2.	As children, were you and yo only ordinary family resembl	ur twin "as alike as two peas in a pod," or of ance? (CIRCLE ONE)
	As a	like as two peas in a pod
	Of o	nly ordinary family resemblance2
	DON	T KNOW8
3,	• •	you and your twin are identical (monozygotic) t you are fraternal (dizygotic) twins? (CIRCLE
		Identical (monozygotic)
	ı	fraternal (dizygotic)2
		DON*T KNOW8
4.	•	often did the following persons ou and your twin brother apart?
	All of the time	Some of DON'T DOES NOT the time Never KNOW APPLY
	a. Parents 1	2 3 8
	b. Other Brothers and Sisters 1	2 3 8 6
	c. Grandparents 1	2 3 8 6
	d. Classmates 1	2 3 8

5.	bro cha wer	e following list describes other may or may not have so aracteristic listed, please teenagers), and describe milar, somewhat similar or	hared whee consider whether y	you were your child your child you	children. dhood years ur twin bro	For each (before you other were v	er.
	Whe	en we were children our:	Very Similar	Somewhat Similar	Very <u>Different</u>	DON'T KNOW	
	a.	Eye color was	•• † ••••	2	3	8	
	b.	Hair color was	1	2	3	8	
	c.	Hair type was	1	2	3	8	•
	đ.	Heights were	1	2	3	8	
	e.	Weights were	1	2	3	8	
	f.	Teeth were	1	2	3	8	
	g.	Voices were	1	2	3	8	
	h.	Muscular strength was	1	2	3	8	
	i.	Temperaments were	1	2	3	8	
	j•	Musical abilities were	1	2	3	8	
	k.	Language abilities were	1	2	3	8	
	1.	Manual skills (dexterity)	1	2	3	8	
6.		ut how tall are you without HES. IF ZERO INCHES, WRITE			NUMBER OF	FEET AND	
			FEET	31/	1N	CHES	
7.		ut how much do you weigh wi	ithout clo	thes or s	hoes? (WRI	TE IN NUMBE	R

POUNDS

8.	Are	you a part-time or full-time student? (CIRCLE ONE)
		Yes, full-time1
		Yes, part-time2
		No, not a student3
9.	Α.	Are you presently employed part-time or full-time? (CIRCLE ONE)
		Yes, full-time (GO TO 8)
		Yes, part-time (GO TO B)2
		Not employed (GO TO 0.10)3
-	<u>IF</u>	PRESENTLY EMPLOYED:
	В.	What kind of business or industry is this? (Example: TV and radio manufacture, retail shoe store, State Labor Department, farm, etc.)
٠.	С.	What kind of work are you doing? (Example: Electrical engineer, stock clerk, typist, farmer, etc.)
	D.	What are your most important activities or duties? (Example: Typing, filing, selling new cars, finishing concrete, etc.)
	Ε.	How many years have you worked at this job? (WRITE IN NUMBER OF YEARS. IF LESS THAN ONE YEAR, WRITE IN "00")
10.		er your discharge from active military duty, how long did it take you
	to a.	find a full-time job? (CIRCLE ONLY ONE)  Less than one month
	b.	Less than six months2
	c.	Less than one year
	d.	Greater than one year4
	θ.	Does not apply; became a student after discharge
		Does not apply: still on active military duty

11.		ris the highest grade or ye credit for? (CIRCLE THE <u>ON</u>						red a	nd got-
	a.	None <u>00</u>							
	b.	Elementary01	<u>02 03</u>	<u> 04</u>	<u>05</u>	<u>06</u>	<u>07</u>	<u>80</u>	
	c.	High School <u>09</u>	10 1	12					
	d.	College <u>13</u>	14 15	<u>16</u>					
	θ.	Vocational or tech- nical school after high school <u>17</u>							
	f.	Some Graduate School18							
	_								
	g.	Graduate or Pro- fessional Degree 19	of each	vetera	n's oe	eneral	hea	ıth.	everyone
	der ked	ro get an accurate picture of the next few questions about	alcoho	olic be	verage	s and	smol	cing.	,
s as	der ked Hav	fessional Degree 19 o get an accurate picture of the next few questions about you had more than 20 alcohol.	alcoho	olic be	n your	es and	smod re li	fe?	,
s as	der ked Hav	fessional Degree 19  o get an accurate picture of the next few questions about you had more than 20 alcoholy	<b>alcoho</b> olic dr	olic be rinks i TO Q.13	n your	es and	smod	fe?	,
12.	der ked Hav ONE	fessional Degree 19  To get an accurate picture of the next few questions about you had more than 20 alcoholye	alcoho	olic be	n your	enti	smod	fe?	(CIRCLE
s as	der ked Hav ONE	fessional Degree 19  o get an accurate picture of the next few questions about you had more than 20 alcohology and the next few questions about the next few questions about you had more than 20 alcohology and the next few questions about you had more you when you	alcoho	olic be	n your	es and enti	smod	fe?	(CIRCLE

14.	A. Do you still drink alcoholic beverages?
	Yes (GO TO B)
	No (GO TO Q.16)2
	IF YES:
	B. On about how many days per week do you currently drink alcoholic beverages, on the average? (WRITE IN DAYS PER WEEK)
	DAYS PER WEEK
	C. How many drinks do you have, on the average, on those days when you drink? (WRITE IN NUMBER OF DRINKS. PUT A "O" IN ANY EXTRA BOX ON THE LEFT)
	DRINKS
15.	Was there a period in your life (of at least 6 months) when your consumption was more than this?
	Yes (GO TO 8)1
	No (GO TO Q.17)2
	IF YES:  B. When was this (WRITE IN YEARS)
	1 9 1 9 57-58/
	C. On about how many days per week would you drink more alcoholic beverages, on the average? (WRITE IN DAYS PER WEEK)
	DAYS PER WEEK
	D. How many drinks would you have, on the average, on those days when you were drinking more? (WRITE IN NUMBER OF DRINKS. PUT A "O" IN ANY EXTRA BOX ON THE LEFT)
	DRINKS PER DAY
	GO TO Q.17

IF Y	OU NO LONGER DRINK:
16.	How old were you when you stopped drinking? (WRITE IN AGE)
	YEARS OLD
17.	A. Have you smoked at least 100 cigarettes in your life? (CIRCLE ONE)
	Yes (GO TO B)
	. No (GO TO 0.20)2
	IF YES:
	B. Do you smoke cigarettes now? (CIRCLE ONE)
	Yes (GO TO Q.18)1
	No (GO TO C)2
	C. About how long has it been since you last smoked digarettes regularly? (WRITE IN YEARS. IF LESS THAN ONE YEAR, WRITE IN "00")
	YEARS
	Never smoked cigarettes regularly (WRITE "00" IN BOXES ABOVE)
18.	On the average, about how many cigarettes a day (do/did) you smoke? (WRITE IN NUMBER SMOKED. PUT A "O" IN ANY EXTRA BOXES ON THE LEFT)
	CIGARETTES
19.	About how old were you when you first started smoking cigarettes regularly? (WRITE IN AGE. PUT A "O" IN ANY EXTRA BOXES ON THE LEFT)
	YEARS OLD

Never smoked digarettes regularly (WRITE "00" IN BOXES ABOVE)

20.	Do OR	you <u>currently</u> have any of the following health pr NO FOR <u>EACH</u> LINE, 1-16)	oblems?	(CIRCLE	YES
			Yes	No	
	1.	High blood pressure/hypertension (INCLUDE EVEN IF CONTROLLED BY MEDICATION)	1	2	
	2.	Respiratory conditions, such as lung trouble, persistent coughing, etc	1	2	
	3.	Cancer	1	2	
	4.	Heart trouble	1	2	
	5.	Stroke	1	2	
	6.	Kidney, bladder, or urinary problems, such as stones, infections, kidney failure, etc	1	2	
	7.			_	
		асле, rashes, efc	1	2	
	8.	Diabetes	1	2	
	9.	Stomach or digestive disorders, such as ulcers, inflammations, etc	1	2	
	10.	Liver problems, such as hepatitis, cirrhosis, etc	1	2	
	11.	Blood disorders, such as anemia, blood clots, etc	1	2	
	12.	Nerve disorders, such as epilepsy,			
		migraines, etc	1	2	
	13,	Joint or skeletal disorders, such as arthritis, swollen joints, etc	1	2	
,	14.	Hearing problems	1	2	
	15.	Other (PLEASE SPECIFY)	1	2	
				***	
	Plea stai	ese indicate which statement below best describes tus: (CIRCLE ONE)	your mil	itary du	ty
		Released from active military duty during the years 1965-75.			
		Released from duty after 1975.	, <b></b> .	.2	
		Still on active military duty.		.3	

22. The questions below concern your health over the entire period since your active duty during the Vietnam Era, 1965-1975.

If you were released from active military duty during the years 1965-1975, please describe your health since your date of release.

If you are still on active duty, or released after 1975, describe your health since 1975.

in responding, please <u>include</u> any current health problems you described in Q.20. (ALWAYS ANSWE A AND THEN ANSWER B C AND Q SAPPROPRIATE FOR EACH LINE. 1-16)

	A AND THEN ANSWER B	C AND DASAPPROP	RIATE	FOR EACH I	INE, 1-	16)		,,,	• •	
		A. Since active military dut 1965-75, have you had this problem?	y <del>3</del>	B. Have you suited physici about 1 problem	ian this	С	Have you been hosp talized o night for problem?	oi- over-		in what year were you first hospi- talized for this problem
		IF YES TO THIS ANSWER B ====		IF YES TO ANSWER C	THIS,	-	IF YES TO TANSWER D	THIS,		
	·	Α.	_	8.			c.		· 	D.
1.	High Blood Pres- sure/Hypertension (INCLUDE EVEN IF CONTROLLED BY	Yes1 ==== No2	> [	Yes1 No2	===>	•	Yes1 No2		1_1	9
	MEDICATION)	· }	4			4	•	4		
2.	Respiratory Condi- tions such as Lung Trouble, Persis- tent Coughing, etc.	Yes1 ==== No2	·	Yes! No2	*==>	-  -  /	Yes1 No2	/1	1	9
3.	Cancer	Yes1 === No2	·	Yes1 No2	*==>	   	Yes1	<u> </u>   	1	9   _
4.	Heart Trouble	Yes1 ≠==: No2	·	Yes1 No2	===>	     	Yes1	<u> </u>	1_1	9
5.	Stroke	Yes1 ===: No2	·	Yesi No2	===>	   	Yes1 No2	1 4		9
6.	Kidney, Bładder, or Urinary Problems, such as Stones, Infections, Kidney Failure, etc.	Yes1 ===: No2	/1	Yes1 No2	322>	   	Yes1 No2	/1		9
						_ _				

?2. (continued)

		A. Since a militar 1965-75 you had problem	y duty , have this		8. Have you suited physic about problem	a ian this		C. Have you ever been hospi- talized over- night for thi problem?	were you <u>first</u> hospi-
		IF YES TO ANSWER B	THIS,	<b>-</b>	IF YES TO ANSWER C	THIS,		IF YES TO THIS	5,
		Α,			8.			c.	D.
7.	Persistent Skin	Yes1	===>	ĺ	Yes1	*==>	]	Yes1	1.1.1.1
	Conditions, such as Severe Acne, Rashes, etc.	No2		/	No2		4	No2	1_1   9
<del>_</del>	Diabetes	YesI	===>		Yesi	222>	   	Yes!	<u></u>
		No2		•	No2		'	No2	
				1			4	4	
9.	Stomach or Digestive	Yes1	322>		Yes1	===>	<u></u>	Yes1	
	Disorders, such as Ulcers, inflamma-	No2			No2			. No2	1 9 1
	tions, etc			_/			4	/	
0.	Liver Problems,	Yes1	===>		Yes1	322>		Yes1	
	such as Hepatitis, Cirrhosis, etc.	No2			No2			No2	
	<u> </u>	· · · · · · · · · · · · · · · · · · ·	· ·		·	<del></del>	4		·
1.	Blood Disorders, such as Anemia,	Yes1	225>		Yesi			Yes1	111011
	Blood Clots, etc.	No2			No2			No2	
_							4		
2.	Nerve Disorders, such as Epilepsy,	Yes1		ŀ	Yes1		1	Yes1	11191 1
	Migraines, etc.	No2		,.	No2		,.	No2	
_							4		
3.	Joint or Skeletal Disorders, such as	Yes1	222>	1	Yes1	===>	İ	Yes1 No2	11191
	Arthritis, Swolien Joints, etc.	No2		4	No2		4	/1	
4.	Hearing Problems	Yes1	3#2>	اــــا ا	Yes1	===>	- 	Yes1	
	<b>4</b> 11 - 11 - 11 - 11 - 11 - 11 - 11 - 11	No2		•	No2		ı	No2	
	1			4			4	/1	
5.	Other (PLEASE	Yes1	***>	- 	Yes1	22#>		Yes1	
	SPECIFY)	No2		•	No2		•	No2	1 9
	<u> </u>			71			71	/1	
_							l.		<del></del>

43,			or? (CIRCLE ONE)	Th in general is excellent, very good, good,
				Excellent5
				Very Good4
				Good3
				Fair2
				Poor1
24.	Α.			other's health, how would you rate <u>your</u> our health is (CIRCLE ONE)
			Better than you	r brother's (GO TO B)
			About the same a	as your brother's (GO TO Q.25)2
			Worse than your	brother's (GO TO B)3
			Doesn't apply, is not living (	because brother 30 TO Q.25)6
	<u>( F</u>	HEALTH I	S BETTER OR WORS	<u>E):</u>
	в.	In what	way is your heal	th different from your brother's health?
			<del></del>	
		·		
				<del></del>
25.		le in the RCLE ONE)		ou request a Vietnam duty assignment?
				Yes1
				No2

26.	Α.	or C	you were in the military, were you stationed in Vietnam, Laos, Cambodia; in the waters in or around these countries; or fly in sions over these areas? (CIRCLE ONE)
			Yes (GO TO B)1
			No (GO TO Q.27A)2
	<u>IF</u>	YES:	
	в.	men whet	w is a list of 18 different combat roles and experiences that had during the Vietnam War. <u>For each statement</u> , please indicate ther you had that combat experience during the Vietnam War. CLE YES OR NO FOR <u>EACH</u> LINE, 1-18)
			<u>Yes No</u>
		1.	In an artillery unit which fired on the enemy1 2
		2.	Flew in an aircraft (reconnaissance, or fixed wing F-14, 8-52, etc.)
		3.	Flew helicopter attack gunships or medvacs1 2
		4.	Stationed at a forward observation post 2
		5.	Tunnel rat checking enemy base camps
		6.	Served on river patrol or gunboat
		7.	Demolitions expert in the field 2
		8.	Assigned to Graves and Registration to retrieve dead bodies from the field 2
		9.	Served as a medic in combat
		10.	Received incoming fire 2
		11.	Encountered mines and booby traps 2
,		12.	Received sniper or sapper fire 2
		13.	Unit patrol ambushed 2
		14.	Flew in aircraft (fixed wing or helicopters) and was shot down
		15.	Engaged VC and/or NVA in firefight 2
		16.	Saw Americans killed, and/or saw Vietnamese killed
		17.	Wounded 2
		18.	Captured by the enemy

27.	Α.	Are you still on active military duty? (CIRCLE ONE)
		Yes (GO TO Q.31)
		No (GO TO 8)2
	<u>1</u> F	<u>NO</u> :
	8.	After your discharge from active military duty, how often did you talk to the following individuals about your experiences in the military? (CIRCLE ONE FOR EACH LINE)
		Very Occa- DOES NOT Often Often sionally Rarely APPLY
		a. Parents 6
		b. Wife or Girlfriend 1 2 3 4 6
		c. Twin Brother 1 2 3 4 6
		d. Friends 4
		e. Other Vietnamera Veterans 1 2 3 4
28.	inv	er your discharge from active military duty were you eager to get olved in everything, or did you not want to participate in things h other people? Were you (CIRCLE ONE)
		Very rejuctant to get involved1
		Somewhat reluctant to get involved2
		Somewhat eager to get involved3
		Very eager to get involved4

29	Α.	Overall, how would you describe your adjustment to civilian life after your release from active duty? Would you say that returning to civilian life caused you (CIRCLE ONE)
		Considerable difficulty1
		Some difficulty2
		Very little difficulty3
		None, or practically no difficulty4
		Does not apply; I am still in the military6
30.	Α.	Compared to your twin brother's adjustment to civilian life, how would you rate your adjustment to civilian life? Would you say your adjustment was (CIRCLE ONE)
		Easier than your brother's (GO TO B)1
		About the same as your brother's (GO TO Q.31)2
		More difficult than your brother's (GO TO B)3
٠.	• .	Does not apply because brother is either not living or still on active duty (GO TO 0.31)4
	<u>IF</u>	ADJUSTMENT WAS EASIER OR MORE DIFFICULTY:
	в.	In what way was your adjustment to civilian life different from your brother's adjustment to civilian life?
31.		the past 6 months how frequently have you experienced the following blems? (CIRCLE ONE FOR EACH LINE, a-o)
		Very Some- Almost
	:	Often Often times Never Never Hed trouble failing asleep, staying asleep or sleeping too much
	1	Had repeated dreams or nightmares about things that happened to you while in the military 5

### 31. (continued)

		Very		Some-	Almost	
		Often	Often	† imes	Never	Never
c.	Had painful memories of					
	things that happened to you		_			_
	while in the military		2	3	. 4	5
	Avoided activities that					
d.						
	might remind you of things that happened to you while	•				
	in the military	1	2	1	A	
	III : 1119 INC   1 1 2 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2	•• ' ••••	***	•• > •••••		•••
9.	Found yourself in a situa-					
	tion where you started to					
	feel and act as though a					
	disturbing event you ex-					
	perlanced in the military					
	was happening all over again	1	2	3	. 4	5
	,, ,	••			. ,	
f.	Had times when other					
	feelings or actions be-					
	came stronger when you					
	were in situations that					
	reminded you of times in			•		
	the military	1	2	3	. 4	5
g.	Felt ashamed or guilty					
	about the kind of things					
	you did to survive while					
	in the military	1	2	3	. 4	5
h.	Had trouble concentrating	1	2	3	. 4	5
Ι.	Hed trouble with your		_	_		_
	меногу	•• ! •••••	2	3	. 4	5
j.	Have been irritable		_	_		_
	and short-tempered	•• 1 •••••	2	3	. 4	•• 5
	Had and the term of the arms.					
х.	Had expissions of angry or aggressive behavior	•	•	•		_
	or aggressive behavior	••   •••••	•• 4 •••••	•• > •••••	• 4 •••••	** 2
	Lost interest in your					
1.	usual daily activities	•	2			e
	usual daily activities	**   *****	•• 4 •••••	•• > •••••	. 4	•• >
_	Feit distant from every-					
AI#	one, even those people					
	you care about	1	2	3	4 .	5
	you care about	•• ' •••••	•• • ••••	•• - •••••	• ~ ••••	•• •
R.	Felt that !!fe is					
	not meaningful	1	2	3	. 4	5
		*****		<b></b>		· · ·
o.	Feit jumpy and easily					
-•	startled or felt that		•			
	you had to stay on guard					
	all the time	. 1	. 2	3	. 4	5

	ph	ysician, psychologist, or social worker) about a mental or otional problem? (CIRCLE ONE)
		Yes (GO TO B)1
	IF YES	No (GO TO Q.33)2
		what year did you <u>first</u> consult a health care professional about is problem? (WRITE IN YEAR)
		1 9
33.		ve you ever been hospitalized for a mental or emotional problem? IRCLE ONE)
		Yes (GO TO B)1
	IF YES	No (GO TO Q.34)2
		what year were you first hospitalized for this problem? RITE IN YEAR)
34.	Do you	currently have a mental or emotional problem? (CIRCLE ONE)
		Yes1
		No2
The f	inal se	No
The f		<del></del>
		t of questions concerns health issues regarding your family life.
		t of questions concerns health issues regarding your family life. wife (or partner) now pregnant? (CIRCLE ONE)
		t of questions concerns health issues regarding your family life.  wife (or partner) now pregnant? (CIRCLE ONE)  Yes
35.	Is your	t of questions concerns health issues regarding your family life.  wife (or partner) now pregnant? (CIRCLE ONE)  Yes
35.	A. Hav	r of questions concerns health issues regarding your family life.  - wife (or partner) now pregnant? (CIRCLE ONE)  Yes
35.	A. Hav	r of questions concerns health issues regarding your family life.  - wife (or partner) now pregnant? (CIRCLE ONE)  Yes
35.	A. Have more	t of questions concerns health issues regarding your family life.  wife (or partner) now pregnant? (CIRCLE ONE)  Yes
35.	A. Have more Yes No.	r of questions concerns health issues regarding your family life.  wife (or partner) now pregnant? (CIRCLE ONE)  Yes
35.	A. Have more Yes No.	r of questions concerns health issues regarding your family life.  - wife (or partner) now pregnant? (CIRCLE ONE)  Yes
35.	A. Have more Yes No.	r of questions concerns health issues regarding your family life.  wife (or partner) now pregnant? (CIRCLE ONE)  Yes

37. In the table below we would like you to enter information about your natural (not adopted) children. Please include all live births, even if a child is no longer living.

Please indicate: (A) The date of birth of each child; (B) the child's <u>mother's</u> age at the time of the birth; and (C) whether each child had any abnormality, birth defects, or handicaps. Briefly describe any birth defect in the space provided (D). If a child is no longer living, please enter date of death in (E).

	/ A•	8.	c.	D.	E.
Nature: Children	Oate of Birth Month   Day   Year	Mother's Age At Child's Olinth (ENTER YEARS)	Any Birth Defects? (CIRCLE) Yes - No	Description of Birth Defects, Abnormality, or Handicap	If Deceased, Date of Death Month   Day   Year
ist Child			Y N	1	
2nd Child			Y N		
3rd Child			Y N	<u></u>	
4th Child			Y N	/	
5th Child			Y N /		
6th Child			Y N	/	
Other: Children		<u> </u>	<u>                                       </u>		<u>                                       </u>
- 1		<b>i</b>	1		·

38.	A. Have you ever been the	father of a stillborn child? (CIRCLE ONE)
		Yes (GO TO B)1
		No (GO TO 0.39)2
	IF YES:	
	8. In what year(s) did th	is happen? (WRITE IN YEAR OR YEARS)
		1. 1 9
	·	
		2. 1 9
		3. 1 9
39.	A. To your knowledge, did age? (CIRCLE ONE)	any partner of yours ever have a miscarri-
		Yes (GO TO B)1
		No (GO TO Q.40)2
		Not Applicable (GO TO Q.40)6
	•	DON'T KNOW (GO TO Q.40)8
	IF YES:	
	B. How many are you aware BOX ON THE LEFT)	of? (WRITE IN NUMBER, PUT A-"O" IN ANY EXTRA
		MISCARRIAGES
	C. In what year(s) did the	ey occur? (WRITE IN YEAR OR YEARS)
		1. 1 9
		2. 1 9
		3. 1 9

•

40. A. Have you ever been	married?	
---------------------------	----------	--

Yes	(G0	TO	8).	٠.	• • •	•	• •	•	٠	• •	•	•	٠	•	•	٠	•	•	ı
No (	ന്ദര 1	ro (	3 4 1	١.															,

#### IF YES:

B. In the table below, please list the month and year in which you were married. If your first marriage ended because of death or divorce, indicate the date you were widowed or divorced. If you were married and/or divorced more than once, please complete the remainder of the table.

145154	Married Month Year	Divorced Month   Year	Widowed Month Year
1st Marriage			
2nd Marriage			
3rd Marriage			
4th Merriage			

The next question concerns your total family income. Income is important for analyzing and interpreting the health information we receive from veterans. For example, income information helps us to learn whether persons in one income group have certain conditions more or less frequently than people in another income group.

41. What was your total combined <u>family</u> income (that is, for both yourself and your partner, if any) during the past 12 months? Include money from jobs, social security, unemployment payments, retirement income, public assistance and so forth. (CIRCLE ONE)

Less than	\$ 5,00001
\$ 5,000 -	\$ 9,99902
\$10,000 -	\$14,99903
\$15,000 -	\$19,99904
\$20,000 -	\$24,99905
\$25,000 -	\$29,99906
\$30,000 -	\$34,99907
\$35,000 -	\$39,99908
\$40,000 -	\$49,99909
\$50,000 or	more10

	be reached in the c	oming year).
Your Full Name		
Number and Street Address		
CI†y	State	Zîp Code
Telephone Number		
Your Social Security Number		
Your Date of Birth Month Day Year	_	
If your twin brother is alive, please print his name, current address	s and telephone numb	er.
Your Twin Brother's Name		
Number and Street Address		• ,
City		ZIp Code
Telephone Number Area Code		
A. If your twin brother is dead, in what year did he die?	1 1	
B. In what city, state, and country did he die?		
CI ty State	Country	
	<del> </del>	<del></del>
Since we may need to contact you again at some time, please give us to person other than your twin who will always know where you can be rea	·	d felephone number of

CASE ID

#### THANK YOU FOR YOUR ASSISTANCE

Your responses will be kept strictly confidential. Please return this questionnaire to NORC in the envelope provided.

# Appendix 4

1. Coding and editing specifications for data entry of <u>Survey of Health</u> responses

#### DATA ENTRY SPECIFICATIONS FOR "VIETNAM ERA TWIN REGISTRY" 4393

#### I. GENERAL INSTRUCTIONS

- A. Leading zeros should appear in output file.
- B. All survey caseID's are prefixed with a preprinted "0" which should be punched. Thus, the caseID is seven (7) digits long.
- C. Each questionnaire represents six decks of data on the output file. The first seven characters of each deck are the caseID with a five digit sequential number, a one digit twin number (always 1 or 2) and a one digit check digit. The eighth and ninth columns of each deck will be the deck number (ranging from 01 06). (NOTE: Deck Number is not columned on the quex, but is printed at the top of each page on the sample quex with the deck number to be punched/columns to punch them in indicated in red pencil. For example, on page 2 is marked "01/8-9" to indicate that deck number 01 is punched in columns 8-9 of that deck). The following columns are filled for each deck:

DECK	FILLED COLUMNS	ALWAYS BLANK
1	1-37, 46-79	38-45, 80
2	1-76	77-80
3	1-29, 32-58 61-75	30-31,59-60,76-80
4	1-24,27-41,44-58, 61-75	25-26,42-43,59-60, 76-80
5	1-77	78-80
6	1-39	40-80

The decks should all be eighty (80) columns long with the unfilled columns left blank.

D. There are skip patterns in the questionnnaire such that every respondent will not answer every question. If Q1 (Question 1) is answered with the value of "3" or "4", that is the only information that need be punched for that case, and is the only information which should appear on the survey form. If the answer is "1" or "2", however, the respondent should complete the questionnaire. For those who answer "1" or "2" to Q1, the following questions must be answered:

QUESTION	DECK	COLS	QUESTION	DECK	COLS
CASEID - 8A	1	1 - 37	Q19.12A	2	60
Q9 - Q10	1	46 - 48	Q19.13A	2	63
Q16A	1	74	Q19.14A	2	66
Q17 - Q19.1A	2	10 - 27	Q19.15A	2	69
Q19.2A	2	30	Q19.16A	2	72
Q19.3A	2	33	Q20 - Q21A	2	75 - 76
Q19.4A	2	36	Q22A	3	10
Q19.5A	2	39	Q23A	3	29
Q19.6A	2	42	Q24 - Q26	3	32 - 49
Q19.7A	2	45	Q28A	5	17
Q19.8A	2	48	Q29A	5	24
Q19.9A	2	51	Q30A	5	33
Q19.10A	2	54	Q31 - Q37	6	14 - 39
Q19.11A	2	<b>57</b> .	•		

NOTE: These items have a "\*" beside them on the attached sample quex and in the field specific instructions below.

- E. If an item with an asterisk beside it (indicating it may not be skipped) IS left blank by the respondent, enter asterisks (\*\*\*) in those columns. Asterisks should be written in by coders to indicate that the special character "\*" should be entered in those columns.
- F. On the last page, the respondent's caseID will appear in the upper left hand corner of the page. This should NOT be punched. The caseID appears always and only in the first seven columns of every eighty column deck.
- G. On the last page, only the respondent's social security number and date of birth, and his twin's date of death (if applicable) will be punched as such. The other locating information will be punched as 1 (present) or left blank (absent). If the column number is circled in red by NORC coders, then a "1" should be punched. If the column has an R (reject) beside it, then it should be left blank.
- H. All questionnaires should be 100% verified in the following fields:

QUESTIO	N -	DECK	1-5 6 7 8-9 10 11 26
CASEID:	SEQUENTIAL # TWIN NUMBER CHECK DIGIT	1-6 1-6 1-6	
DECK NU Q1 Q2 Q18 Q22A	MBER	1-6 1 1 2 3	
Q31 Q33 Q34		6 6 6	14-15 18-26 27-32

- CaseID appears on the cover page. Ignore page 1-- these are simply instructions to the respondent.
- NORC coders will mark the questionnaires in red pencil. Columns to be left blank will be marked with "R" (reject). Whole sections or entire pages to be left blank will have an "R--->" (R,arrow) to mark the span of columns to be left blank. All corrections will be in red pencil, including the asterisk convention (marking missing data where the respondent should have answered) and corrected respondent error such as failure to right justify, zero-fill, or follow a skip pattern. The red pencil edit markings take precedence over the respondent's own marks.

#### II. FIELD SPECIFIC INSTRUCTIONS

POSITION IN **OUTPUT FILE** 

	QUESTION	DECK	COLUMN	VALID VALUES	COMMENTS
*CASE	SEQUENTIAL TWIN # CHECK DIGIT	1 1 1	1-5 6 7	00001 - 00215 1,2 0-9	100% VERIFIED NEVER BLANK 100% VERIFIED NEVER BLANK 100% VERIFIED NEVER BLANK
*	DECK NUMBER	1	8 <del>-9</del>	01	100% VERIFIED NEVER BLANK
*	Ql	1	10	1-4	100% VERIFIED IF Q1 = "3" OR "4", END KEYPUNCH. IF Q1 = "1" OR "2", Q2 ~ Q8A NEVER BLANK
*	Q2	1	11	1,2,8	100% VERIFIED
*	Q3	1	12	1,2,8	
* Q4	Q4A Q4B Q4C Q4D Q4E Q4F	1 1 1 1 1	13 14 15 16 17 18	1-3,8 1-3,6,8 1-3,6,8 1-3,8 1-3,8 1-3,8	
* Q5	Q5A Q5B Q5C Q5D Q5E Q5F Q5G Q5H Q5I Q5J Q5J Q5L	1 1 1 1 1 1 1 1 1 1 1	19 20 21 22 23 24 25 26 27 28 29 30	1-3,8 1-3,8 1-3,8 1-3,8 1-3,8 1-3,8 1-3,8 1-3,8 1-3,8 1-3,8 1-3,8 1-3,8	

QUESTION	DECK	COLUMNS	VALID VALUES	COMMENTS
Q6   Q6.1   Q6.2	1	31 32-33	4-7 00-12	100% VERIFIED 100% VERIFIED
* Q7	1	34-36	050-400	
* Q8A	1	37	1-3	
Q8B Q8C Q8D	1	38-40 41-43 44-45	ALWAYS BLANK ALWAYS BLANK ALWAYS BLANK	ALWAYS BLANK ALWAYS BLANK ALWAYS BLANK
* Q9	1	46-47	00-18	
* Q10	1	48	1-2	
Q11	1	49-50	05-41,96,97,99, BLANK	
Q12A1 Q12A2	1	51 52-53	0-7, BLANK 00-31, BLANK	
Q12B	1	54-55	00-99, BLANK	
Q13A	1	56	1-2, BLANK	
Q13B1 Q13B2	1	57-58 59-60	55-84, BLANK 55-84, BLANK	
Q13C1 Q13C2	1	61 62-63	0-7, BLANK 00-31, BLANK	
Q13D	1	64-65	00-99, BLANK	
Q14A	1	66	1-2, BLANK	
Q14B1 Q14B2	1 1	67 68-69	0-7, BLANK 00-31, BLANK	
Q14C	1	70-71	00-99, BLANK	
Q15	1	72-73	12-41, BLANK	
* Q16A	1	74	1-2	

. -

Q	UESTION	DECK	COLUMNS	VALID VALUES	COMMENTS
	Q16B	1	75	1-2, BLANK	
	Q16C	1	76-78	000-150, BLANK	
	Q16D	1	79	1-6, BLANK	
		1	80	ALWAYS BLANK	
BEG	IN DECK 2				
	DECK NUMBER	2	8-9	02	100% VERIFIED
*Q17	Q17.1 Q17.2 Q17.3 Q17.4 Q17.5 Q17.6 Q17.7 Q17.8 Q17.9 Q17.10 Q17.11 Q17.12 Q17.13 Q17.14 Q17.15 Q17.16	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25	1-2 1-2 1-2 1-2 1-2 1-2 1-2 1-2 1-2 1-2	
*	Q18	2	26	1-3	100% VERIFIED
*	Q19A1	2	27	1-2	
	Q19B1 Q19C1	2 2	28 29	1-2, Blank 1-2, Blank	
*	Q19A2 Q19B2	2 2	30 31	1-2 1-2, Blank	
*	Q19C2 Q19A3 Q19B3	2 2 2 2 2	32 33 34	1-2, BLANK 1-2 1-2, BLANK	
it	Q19C3 Q19A4 Q19B4	2 2 2 2 2 2 2 2 2 2	35 36 37	1-2, BLANK 1-2 1-2, BLANK	
*	Q19C4 Q19A5 Q19B5	2 2 2	38 39 40	1-2, BLANK 1-2 1-2, BLANK	
*	Q19C5 Q19A6 Q19B6	2 2 2	41 42 43	1-2, BLANK 1-2 1-2, BLANK	
*	Q19C6 Q19A7 Q19B7	2 2 2 2	44 45 46	1-2, BLANK 1-2 1-2, BLANK	
*	Q19C7 Q19A8	2 2	47 48	1-2, BLANK 1-2	

9	UESTION	DECK	COLUMNS	VALID VALUES	COMMENTS
	Q19B8	2	49	1-2, BLANK	
	Q19C8	2	50	1-2, BLANK	
ईर :	4	2 2 2 2 2 2	51	1-2	
	Q1989	2	52 53	1-2, BLANK	
אֹנ	Q19C9 Q19A10	2	53 54	1-2, BLANK 1 <b>-</b> 2	
, i	Q19B10	· 5	55	1-2, BLANK	
	Q19C10	2	56	1-2, BLANK	
*	Q19A11	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	57	1-2	
	Q19B11	2	58	1-2, BLANK	
	Q19C11	2	59	1-2, BLANK	
*	Q19A12	2	60	1-2	
	Q19B12	2	61	1-2, BLANK	
	Q19C12	2	62	1-2, BLANK	
*	Q19A13	2	63	1-2	
	Q19B13 · Q19C13	2	64 65	1-2, BLANK	
*	· · · · · · · · · · · · · · · · · · ·	2	65 6 <b>6</b>	1-2, BLANK 1-2	•
"	Q19B14	5	67	1-2, BLANK	
1	Q19C14	2	68	1-2, BLANK	
*	Q19A15	2	69	1-2	
	Q19B15	2	70	1-2, BLANK	
ĺ	Q19C15	2	71	1-2, BLANK	
*	Q19A16	2 2 2 2	72	1-2	
ſ	Q19B16	2	73	1-2, BLANK	
ł	Q19C16	2	74	1-2, BLANK	
-	<del></del>				
*	Q20	2	75	1-5	NOTE THAT CODES ARE IN DESCENDING ORDER IN THE QUEX
*	Q21A	2	76	1-3,6	
	Q21B	2	77-78	ALWAYS BLANK	ALWAYS BLANK
		2	79-80	ALWAYS BLANK	ALWAYS BLANK
BĒGIN	DECK 3				
	DECK NUMBER	3	8-9	03	100% VERIFIED
	Q22A	3	10	1-2	100% VERIFIED
	Q22A	J	10	• •	100% VARIII LID
<del>-</del>	Q22B1	3	11	1-2, BLANK	
	Q22B2	3	12	1-2, BLANK	•
	Q22B3	3	13	1-2, BLANK	
İ	Q22B4	3	14	1-2, BLANK	
1	Q22B5	3	15	1-2, BLANK	
	Q22B6	3	16	1-2, BLANK	
	Q22B7	3	17	1-2, BLANK	
ŀ	Q22B8	3 3 3 3 3 3 3 3 3 3 3 3 3 3	18	1-2, BLANK	
	Q22B9	3	19	1-2, BLANK	
	Q22B10 Q22B11	3	20 21	1-2, BLANK 1-2, BLANK	
ļ	Q22B11 Q22B12	3	22	1-2, BLANK	
	Q22B12	3	23	1-2, BLANK	
	4	~	<b>-</b> ₹	, <del></del>	•

<u>Q</u>	UESTION	DECK	COLUMNS	VALID VALUES	COMMENTS
	Q22B14	3	24	1-2, BLANK	
	Q22B15	3	25	1-2, BLANK	
	Q22B16	3	26	1-2, BLANK	
	Q22B17	3 3	27	1-2, BLANK	
	Q22B18	3	28	1-2, BLANK	
rk	Q23A	3	29	1-4,6	
	Q23B	3	30-31	ALWAYS BLANK	ALWAYS BLANK
-		•	22		
	Q24A	3333333333333	32 33	1-5 1-5	
*Q24C	Q24B Q24C	3	33 34	1-5 1-5	
	Q24D	3	35	1-5	
	Q24E	3	36	1-5	
	Q24F	3	37	1-5	
	Q24G	3	38	1-5	
	Q24H	3	39 60	1-5	
	Q24I Q24J	3	40 41	1-5 1-5	
	Q245 Q24K	3	42	1-5	
	Q24L	3	43	1-5	
	Q24M	3	44	1-5	
- 1	Q24N	3	45	1-5	
ŀ	Q24 <u>Q</u>	3	46	1-5	
*	Q25	3	47	1-2	
*	Q <b>2</b> 6	3	48-49	00-50	
_					
ŀ	Q27A1MO	3	50-51	01-12, BLANK	
[	Q27A1DAY	3 3	52-53	01-31, BLANK	
İ	Q27A1YR		54-55	56-84, BLANK	
l	Q27B1	3	56-57	13-50, BLANK	NOTE: Y=1 N=2
İ	Q27C1 Q27D1	3	58 59-60	1-2, BLANK ALWAYS BLANK	ALWAYS BLANK
ľ	Q27E1MO	3	61-62	01-12, BLANK	ummera anum
ļ	Q27E1DAY	3	63-64	01-31, BLANK	
ľ	Q27E1YR	3	65-66	56-84, BLANK	
1	Q27A2MO	3	67-68	01-12, BLANK	
	Q27A2DAY	3	09-/U	01-31, BLANK	
	Q27A2YR	3	71-72	56-84, BLANK	
	Q27B2 Q27C2	33333333333	73-74 75	13-50, BLANK 1-2, BLANK	NOTE: Y=1 N=2
ľ	Q2702 Q27D2	3	76-77	ALWAYS BLANK	ALWAYS BLANK
,	4	3	78-80	ALWAYS BLANK	ALWAYS BLANK
887	nede 4				
BEGIN	DECK 4				
	DECK NUMBER	4	8-9	04	100% VERIFIED
I	Q27E2MO	4	10-11	01-12, BLANK	
İ	Q27E2DAY	4	12-13	01-31, BLANK	•
l	Q27E2YR	4	14-15	56-84, BLANK	

91	JESTION	DECK	COLUMNS	VALID VALUES	COMMENTS
1	Q27A3MO	4	16-17	01-12, BLANK	
	Q27A3DAY	4	18-19	01-31, BLANK	
	Q27A3YR	4	20-21	56-84, BLANK	•
	Q27B3	4	22-23	13-50, BLANK	
	Q27C3	4	24	1-2, BLANK	NOTE: Y=1 N=2
ĺ	Q27D3	4	25-26	ALWAYS BLANK	ALWAYS BLANK
	Q27E3MO		27-28	01-12, BLANK	
ł	Q27E3DAY		29-30	01-31, BLANK	
	Q27E3YR		31-32	56-84, BLANK	
	027A4MO	4	33-34	01-12, BLANK	
	Q27A4DAY	4	35-36	01-31, BLANK	
	Q27A4YR	4	37-38	56-84, BLANK	
1	Q27B4	4	39-40	13-50, BLANK	
	Q2764 Q27C4	4	41	1-2, BLANK	NOTE: Y=1 N=2
	Q27D4		42-43	ALWAYS BLANK	ALWAYS BLANK
i	Q27E4MO		44-45		ALWAIS BLANK
	Q27E4DAY		46-47	01-12, BLANK	
	•	4	40-47 40-40	01-31, BLANK	
	Q27E4YR	4	48-49	56-84, BLANK	
ļ	Q27A5MO		50-51	01-12, BLANK	
į	Q27A5DAY		52-53	01-31, BLANK	
	Q27A5YR		54-55	56-84, BLANK	
. !	Q27B5		56-57	13-50, BLANK	
	Q27C5	4	58	1-2, BLANK	NOTE: Y=1 N=2
•	Q27D5		59-60	ALWAYS BLANK	ALWAYS BLANK
	Q27E5MO		61-62	01-12, BLANK	
	Q27E5DAY		63 <del>-64</del>	01-31, BLANK	
	Q27E5YR		65 <del>-</del> 66	56-84, BLANK	
	Q27A6MO		67-68	01-12, BLANK	•
- 1	Q27A6DAY		69-70	01-31, BLANK	
	Q27A6YR	4	71-72	56-84, BLANK	
	Q27B6	4	73-74	13-50, BLANK	
1	Q27C6	4	75	1-2, BLANK	NOTE: Y=1 N=2
	Q27D6	4	76-77	ALWAYS BLANK	ALWAYS BLANK
	•	4	78-80	ALWAYS BLANK	ALWAYS BLANK
BEGIN	DECK 5				
	DECK NUMBER	5	8-9	05	100% WERIFIED
1		5	10-11	01-12, BLANK	
1	Q27E6DAY	5	12-13	01-31, BLANK	
ľ	Q27E6YR	5	14-15	56-84, BLANK	
	Q27F	5	16	1-2, BLANK	1= +6 CHILDREN
ŀ	QZII ,	7	10	1 2, bean	BLANK= 1-6 CHILDREN
- 1					OR NO CHILDREN
<u> </u>					OK NO CHILDREN
_	<del> –</del>				
*	Q28A	5	17	1-2	
	•				
		_		<b></b>	
- 1	Q28B1	5	18-19	56-84, BLANK	
	Q28B2	5 5	20-21	56-84, BLANK	
ļ	Q28B3	5	22-23	56-84, BLANK	
-	<del></del>				
*	Q29A	5	24	1,2,6,8	
•	Q47K	J	47	. , . , . , .	
	Q29B	5	25-26	00-10, BLANK	
	•			-	

QUESTION	DECK	COLUMNS	VALID VALUES	COMMENTS
Q29C.1   Q29C.2   Q29C.3	5 5 5	27-28 29-30 31-32	56-84, BLANK 56-84, BLANK 56-84, BLANK	
* Q30A	5	33	1-2	
	_			
Q30B1.AMO Q30B1.AYR Q30B1.AMO Q30B1.AMO Q30B1.AMO Q30B1.AYR Q30B2.AMO Q30B2.AYR Q30B2.AMO Q30B2.AYR Q30B2.AYR Q30B2.AMO	5 5 5 5 5 5 5 5 5 5 5	36-37 38-39 40-41 42-43 44-45 46-47 48-49 50-51 52-53 54-55 56-57 58-59	01-12, BLANK 56-84, BLANK 01-12, BLANK 56-84, BLANK 01-12, BLANK 56-84, BLANK 01-12, BLANK	
Q30B3.AYR Q30B3.AMO	5 5	60-61 62-63	56-84, BLANK 01-12, BLANK	
Q30B3.AYR Q30B3.AMO Q30B3.AYR Q30B4.AMO Q30B4.AYR Q30B4.AMO Q30B4.AMO	5 5 5 5 5 5	64-65 66-67 68-69 70-71 72-73 74-75 76-77	56-84, BLANK 01-12, BLANK 56-84, BLANK 01-12, BLANK	
BEGIN DECK 6	•		, <u>Janua</u>	
DECK NUMBER Q3084.AMO Q3084.AYR	6 6 6	8-9 10-11 12-13	06 01-12, BLANK 56-84, BLANK	100% VERIFIED
* Q31	6	14-15	01-10,99	100% VERIFIED
Q32A Q32B	6 6	16 17	1, BLANK 1, BLANK	1= COLUMNS CIRCLED IN RED
* Q33	6	18-26 006	000000-999999999	100% VERIFIED
Q34MONTH Q34DAY Q34YEAR	6 6 6	27-28 29-30 31-32	01-12 01-31 43-56	100% VERIFIED 100% VERIFIED 100% VERIFIED
Q35A Q35B	6 6	33 34	1, BLANK 1, BLANK	1= COLUMNS CIRCLED IN RED

QUESTION	DECK	COLUMNS	VALID VALUES	COMMENTS
Q36A	6	35-36	43-83, BLANK	1= COLUMN CIRCLED
Q36B	6	37	1, BLANK	IN RED
Q37A	6	38	1, BLANK	1= COLUMN CIRCLED
Q37B	6	39	1, BLANK	IN RED

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