

**Multi-Ethnic Study of Atherosclerosis  
Exam 2**



**Health and Life**

**Self-Administered**

**Participant Id#: Idno**

**Acrostic: Acrostic**

**Date:**





Month



Day





Year

This questionnaire asks about how you feel about your life. Things about people's lives may be important in understanding why they do or do not have health problems. Knowing about your feelings toward the following experiences may help us understand the causes of heart disease better. **Do not spend too much time on any one question, and remember that there are no right or wrong answers.** We are interested in your feelings and opinions.

This questionnaire has several parts to it. At the beginning of each part there are instructions. If you do not understand the instructions or do not understand one of the questions please ask a member of our staff, who will be glad to help you. Do not leave a question blank unless you are instructed to skip to another question. Thank you for filling out this questionnaire.

Please read the following statements about yourself and indicate how much the statement describes the way you usually are. Choose one answer per question.

	<b>A lot like me</b>	<b>Somewhat like me</b>	<b>A little like me</b>	<b>Not at all like me</b>
<b>1</b> In uncertain times, I usually expect the best	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
	<b>expbest2</b>			
<b>2</b> If something can go wrong for me, it will	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
	<b>gowrong2</b>			
<b>3</b> I'm always optimistic about my future	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
	<b>optmst2</b>			
<b>4</b> I hardly ever expect things to go my way	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
	<b>notmywy2</b>			
<b>5</b> I rarely count on good things happening to me	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
	<b>goodthn2</b>			
<b>6</b> Overall I expect more good things to happen to me than bad	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
	<b>mregood2</b>			

7 In general, would you say your health is:

genhel2

- Excellent 1     
  Very Good 2     
  Good 3     
  Fair 4     
  Poor 5

The following items are about activities you might do during a typical day. Does your health now limit you in these activities? If so, how much?

8 Moderate activities such as moving a table, pushing a vacuum cleaner, bowling, or playing golf

- |                          |                             |                       |
|--------------------------|-----------------------------|-----------------------|
| Yes,<br>limited<br>a lot | Yes,<br>limited<br>a little | No, not<br>limited    |
| 2                        | 1                           | 0                     |
| <input type="radio"/>    | <input type="radio"/>       | <input type="radio"/> |
- modact2

9 Climbing several flights of stairs

- |                       |                       |                       |
|-----------------------|-----------------------|-----------------------|
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
|-----------------------|-----------------------|-----------------------|
- climb2

During the past 4 weeks, have you had any of the following problems with your work or other regular daily activities as a result of **your physical health**?

10 You accomplished less than you would have liked to.

- |                       |                       |
|-----------------------|-----------------------|
| Yes                   | No                    |
| 1                     | 0                     |
| <input type="radio"/> | <input type="radio"/> |
- physacc2

11 You were limited in the kind of work you do or other regular daily activities.

- |                       |                       |
|-----------------------|-----------------------|
| 1                     | 0                     |
| <input type="radio"/> | <input type="radio"/> |
- physjob2

During the past 4 weeks, have you had any of the following problems with your work or other regular daily activities as a result of any **emotional problems** (such as feeling depressed or anxious)?

12 You accomplished less than you would have liked to.

- |                       |                       |
|-----------------------|-----------------------|
| Yes                   | No                    |
| 1                     | 0                     |
| <input type="radio"/> | <input type="radio"/> |
- emotacc2

13 You were limited in the kind of work or other activities.

- |                       |                       |
|-----------------------|-----------------------|
| 1                     | 0                     |
| <input type="radio"/> | <input type="radio"/> |
- emotjob2

14 During the past 4 weeks, how much did pain interfere with your normal work (including work outside the home and housework)?

- |                       |                       |                       |                       |                       |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| Not<br>at all         | A little<br>bit       | Moderately            | Quite<br>a bit        | A lot                 |
| 1                     | 2                     | 3                     | 4                     | 5                     |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
- emotwrk2

These questions are about how you feel and how things have been with you during the past 4 weeks.

- |   | None of the time           | A little of the time       | Some of the time           | A good bit of the time     | Most of the time           | All of the time            |
|---|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|
| 15 Have you felt calm and peaceful?   | 1<br><input type="radio"/> | 2<br><input type="radio"/> | 3<br><input type="radio"/> | 4<br><input type="radio"/> | 5<br><input type="radio"/> | 6<br><input type="radio"/> |
|   | <b>calm2</b>               |                            |                            |                            |                            |                            |
| 16 Did you have a lot of energy?  | 1<br><input type="radio"/> | 2<br><input type="radio"/> | 3<br><input type="radio"/> | 4<br><input type="radio"/> | 5<br><input type="radio"/> | 6<br><input type="radio"/> |
|   | <b>energy2</b>             |                            |                            |                            |                            |                            |
| 17 Have you felt downhearted and blue?  | 1<br><input type="radio"/> | 2<br><input type="radio"/> | 3<br><input type="radio"/> | 4<br><input type="radio"/> | 5<br><input type="radio"/> | 6<br><input type="radio"/> |
|   | <b>dwnhrt2</b>             |                            |                            |                            |                            |                            |
| 18 How much of the time has your physical health or emotional problems interfered with your social activities (like visiting friends, relatives, etc.)? | 1<br><input type="radio"/> | 2<br><input type="radio"/> | 3<br><input type="radio"/> | 4<br><input type="radio"/> | 5<br><input type="radio"/> | 6<br><input type="radio"/> |
|   | <b>nosocal2</b>            |                            |                            |                            |                            |                            |

The following questions are for persons who are currently employed or self employed at a job for pay full or part time.

- 19 Are you currently employed or self-employed at a job for pay?

Yes 1 <input type="radio"/>	<b>jobnow2</b>	No 0 <input type="radio"/>
	↓	
<i>Skip to question 38 on page 5</i>		

Things about people's jobs may be important to their health. We would like to ask you some things about what your job is like.

- 20 How long have you been at your current job?

			years (If less than one year please write 0)
<b>yrsjob2</b>			

For the following questions, please choose the closest answer:

- |  | Never/<br>almost<br>never  | Seldom                     | Sometimes                  | Often                      |
|--|----------------------------|----------------------------|----------------------------|----------------------------|
| 21 My job requires that I learn new things               | 1<br><input type="radio"/> | 2<br><input type="radio"/> | 3<br><input type="radio"/> | 4<br><input type="radio"/> |
|  | <b>jblearn2</b>            |                            |                            |                            |
| 22 My job involves a lot of repetitive work              | 1<br><input type="radio"/> | 2<br><input type="radio"/> | 3<br><input type="radio"/> | 4<br><input type="radio"/> |
|  | <b>jbrepet2</b>            |                            |                            |                            |
| 23 My job requires me to be creative                     | 1<br><input type="radio"/> | 2<br><input type="radio"/> | 3<br><input type="radio"/> | 4<br><input type="radio"/> |
|  | <b>jbcreat2</b>            |                            |                            |                            |
| 24 My job allows me to make a lot of decisions on my own | 1<br><input type="radio"/> | 2<br><input type="radio"/> | 3<br><input type="radio"/> | 4<br><input type="radio"/> |
|  | <b>jbdecis2</b>            |                            |                            |                            |

Never/  
almost  
never      Seldom      Sometimes      Often

25 My job requires a high level of skill

1       2       3       4

**jbskill2**

26 On my job, I have very little freedom to decide how I do my work

1       2       3       4

**jbfree2**

27 I get to do a variety of different things on my job

1       2       3       4

**jbvrty2**

28 I have a lot to say about what happens on my job

1       2       3       4

**jbsey2**

29 I have an opportunity to develop my own special abilities

1       2       3       4

**jbablt2**

30 My job requires working very fast

1       2       3       4

**jbfast2**

31 My job requires working very hard

1       2       3       4

**jbhard2**

32 I am asked to do an excessive amount of work

1       2       3       4

**jbnowrk2**

33 I have enough time to get the job done

1       2       3       4

**jbtime2**

34 I am free from conflicting demands that others make

1       2       3       4

**jbdemnd2**

35 My job security is good **jbsecur2**

1 Strongly disagree       2 Disagree       3 Agree       4 Strongly agree

36 How steady is your work? **jbstead2**

1 Regular and steady       2 Seasonal       3 Frequent layoffs       4 Both seasonal and frequent layoffs       5 Other

37 Sometimes people permanently lose jobs they want to keep. How likely is it that during the next couple of years you will lose your present job with your employer? **jbfire2**

1 Not at all likely       2 Not too likely       3 Somewhat likely       4 Very likely

The following questions refer to activities you may or may not do. For each question, please choose the closest answer:

38 How often do you attend religious services or otherwise participate in organized religion (such as watching services on TV, listening to services on the radio, participating in Bible study groups, etc.)?

Never	Once or twice a year	Monthly	Weekly	Daily
1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>

**gorelgn2**

39 Within your religious or spiritual tradition, how often do you pray or meditate?

1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
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**medtate2**

Please consider if and how often you have these experiences, and try to disregard whether you feel you should or should not have them. In addition, a number of items use the word "God". If you prefer, please substitute another idea or word that calls to mind the divine or holy for you (e.g. Buddha). Please tell us how often you feel or experience the following things by checking the closest answer.

40 I feel God's presence

Never	Once in a while	Some days	Most days	Every day	Many times a day	Don't know/ no response
1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	7 <input type="radio"/>

**feelgod2**

41 I find strength and comfort in my religion

1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	7 <input type="radio"/>
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**relcomf2**

42 I feel deep inner peace or harmony

1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	7 <input type="radio"/>
----------------------------	----------------------------	----------------------------	----------------------------	----------------------------	----------------------------	----------------------------

**harmony2**

43 I feel God's love for me, directly or through others

1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	7 <input type="radio"/>
----------------------------	----------------------------	----------------------------	----------------------------	----------------------------	----------------------------	----------------------------

**godlove2**

44 I am spiritually touched by the beauty of creation

1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	7 <input type="radio"/>
----------------------------	----------------------------	----------------------------	----------------------------	----------------------------	----------------------------	----------------------------

**creation2**

45 I desire to be closer to God

1 <input type="radio"/>	0 <input type="radio"/>	9 <input type="radio"/>	Don't know/ no response
Yes	No		

**closegod2**

The following list is made up of statements which may or may not be true about you or with which you may or may not agree. For each statement please mark *Probably True* if the statement is generally true about you or if you agree with the statement. Mark *Probably False* if the statement generally is not true about you or if you disagree with the statement. Please read each item quickly but carefully before responding. Remember this is not a test so there are no right or wrong answers.

	Probably True	Probably False
46 I think most people would lie to get ahead	1 <input type="radio"/>	0 <input type="radio"/>
	<b>liesucd2</b>	
47 Most people inwardly dislike putting themselves out to help other people	1 <input type="radio"/>	0 <input type="radio"/>
	<b>helpoth2</b>	
48 Most people make friends because friends are likely to be useful to them	1 <input type="radio"/>	0 <input type="radio"/>
	<b>usefrnd2</b>	
49 It is safer to trust nobody	1 <input type="radio"/>	0 <input type="radio"/>
	<b>notrust2</b>	
50 No one cares much what happens to you	1 <input type="radio"/>	0 <input type="radio"/>
	<b>nocare2</b>	
51 Most people are honest through fear of being caught	1 <input type="radio"/>	0 <input type="radio"/>
	<b>fearlie2</b>	
52 I commonly wonder what hidden reasons another person may have for doing something nice for me	1 <input type="radio"/>	0 <input type="radio"/>
	<b>hidrsns2</b>	
53 Most people will use somewhat unfair means to gain profit or an advantage rather than to lose it	1 <input type="radio"/>	0 <input type="radio"/>
	<b>unfair2</b>	

For MESA Field Center Use	<input type="radio"/> <b>hlfloc2</b>	Completed at:	<input type="radio"/> 1 Home	<input type="radio"/> 2 Clinic
	<input type="radio"/> <b>hlfadm2</b>	Completed	<input type="radio"/> 1 Self-Administered	<input type="radio"/> 2 Interviewer-Administer
Interviewer ID:	<input type="text" value="hlfiid2"/>	Reviewer	<input type="text" value="hlfrid2"/>	Data Entry
				<input type="text" value="hlfdid2"/>