Financial Resource Strain

How hard is it for you to pay for the very basics like food, housing, medical care, and heating?
Not hard at all | Not very hard | Somewhat hard | Hard | Very hard | Patient refused

Food Insecurity

Patient refused all

Within the past 12 months, you worried that your food would run out before you got money to buy more.
Never true | Sometimes true | Often true | Patient refused

Within the past 12 months, the food you bought just didn’t last and you didn’t have money to get more.
Never true | Sometimes true | Often true | Patient refused

Transportation Needs

Patient refused all

In the past 12 months, has lack of transportation kept you from medical appointments or from getting medications?
Yes | No | Patient refused

In the past 12 months, has lack of transportation kept you from meetings, work, or getting things needed for daily living?
Yes | No | Patient refused

Physical Activity

Patient refused all

On average, how many days per week do you engage in moderate to strenuous exercise (like walking fast, running, jogging, dancing, swimming, biking, or other activities that cause a light or heavy sweat)?
0 days | 1 day | 2 days | 3 days | 4 days | 5 days | 6 days | 7 days | Patient refused

On average, how many minutes do you engage in exercise at this level?
0 min | 10 min | 20 min | 30 min | 40 min | 50 min | 60 min | 70 min | 80 min | 90 min | 100 min | 110 min | 120 min | 130 min | 140 min | 150+ min | Patient refused

Stress

Do you feel stress - tense, restless, nervous, or anxious, or unable to sleep at night because your mind is troubled all the time - these days?
Not at all | Only a little | To some extent | Rather much | Very much | Patient refused
### Social Connections

**Patient refused all**

**In a typical week, how many times do you talk on the phone with family, friends, or neighbors?**

- Never
- Once a week
- Twice a week
- Three times a week
- More than three times a week
- Patient refused

**How often do you get together with friends or relatives?**

- Never
- Once a week
- Twice a week
- Three times a week
- More than three times a week
- Patient refused

**How often do you attend church or religious services?**

- Never
- 1 to 4 times per year
- More than 4 times per year
- Patient refused

**Do you belong to any clubs or organizations such as church groups, unions, fraternal or athletic groups, or school groups?**

- Yes
- No
- Patient refused

**How often do you attend meetings of the clubs or organizations you belong to?**

- Never
- 1 to 4 times per year
- More than 4 times per year
- Patient refused

**Are you now married, widowed, divorced, separated, never married or living with a partner?**

- Married
- Widowed
- Divorced
- Separated
- Never married
- Living with partner
- Patient refused

### Intimate Partner Violence

**Patient refused all**

**Within the last year, have you been afraid of your partner or ex-partner?**

- Yes
- No
- Patient refused

**Within the last year, have you been humiliated or emotionally abused in other ways by your partner or ex-partner?**

- Yes
- No
- Patient refused

**Within the last year, have you been kicked, hit, slapped, or otherwise physically hurt by your partner or ex-partner?**

- Yes
- No
- Patient refused

**Within the last year, have you been raped or forced to have any kind of sexual activity by your partner or ex-partner?**

- Yes
- No
- Patient refused
Sample report of how answers to the above questions are displayed in graph format: