

HRSA SPNS US/Mexico Border Health Initiative

Centro de Evaluación: US/Mexico Border Health Evaluation Center
San Ysidro Health Center, CA - El Rio Community Health Center, Tucson, AZ - Camino de Vida, Las Cruces, NM - La Fe Clinic, El Paso, TX - Valley AIDS Council, Harlingen, TX

LIFESTYLE B

SPNS Program:

--	--	--

Project sub-site:

--	--	--

Staff Person:

--	--	--

HRSA number (unique ID number):

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Language of the form:

- English
- Spanish

How was this data submitted?

- paper (mailed)
- faxed
- e-form (internet)

Service date: (MM/DD/YY)

		/			/		
--	--	---	--	--	---	--	--

1. Do you have ties to:

- yes no U.S.
- yes no Mexico
- yes no Central or South America
- yes no other country

2. How many times did you cross the US/Mexico border during the last year (roundtrip)?

--	--	--

3. How many months during the last year did you live or visit in Mexico (0-12)?

--	--

4. How many months during the last year did you live in the area around the program (0-12)?

--	--

5. Are you a migrant farm worker?

- yes no don'tknow/unknown

6. Do you travel around the US or Mexico for non-farm jobs?

- yes no don'tknow/unknown

7. Do you use a traditional healer?

- yes, in Mexico only yes, in U.S. only yes, in both U.S. & Mexico no don'tknow/unknown

8. What is your housing status?

- your house/apartment
- someone else's house/apartment
- transitional housing
- on the streets
- institution <30 days
- institution >30 days
- other

9. What is your marital status?

- single
- married
- live with same sex partner
- live with opposite sex partner
- separated
- divorced
- widowed
- other
- unknown / refused

10. Within the last year, have you recieved the following:

- non-HIV medical care in Mexico yes no don'tknow/unknown
- non-HIV medical care in the U.S. yes no don'tknow/unknown
- HIV medical care in Mexico yes no don'tknow/unknown
- medications (prescription) in Mexico yes no don'tknow/unknown
- traditional medications or herbs in Mexico yes no don'tknow/unknown

11. Do you have health insurance for health care in Mexico?

- yes
- no
- don'tknow/unknown

12. Do you recieve public benefits in Mexico?

- yes
- no
- don'tknow/unknown

If you are Hispanic or Latino, please answer the questions on the next page.

HRSA number (unique ID number):

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

If you are Hispanic, please complete the following questions:

If you are not Hispanic, this form is complete

13. What language do you prefer?

- Spanish only
- mostly Spanish, some English
- Spanish and English, about equally
- mostly English, some Spanish
- English only

14. What language do you speak?

- Spanish only
- mostly Spanish, some English
- Spanish and English, about equally
- mostly English, some Spanish
- English only

15. Where were you born?

- Mexico
- U.S.
- not sure
- other

16. Where was your father born?

- Mexico
- U.S.
- not sure
- other

17. Where was your mother born?

- Mexico
- U.S.
- not sure
- other

18. Which ethnic identification does (did) your father use? Is (was) it:

- Mexican
- Chicano
- Mexican American
- Spanish, Hispanic, Latin American, South American
- Anglo American
- Negro, Black, Afro American, African American
- other
- not sure/don't know

19. Which ethnic identification does (did) your mother use? Is (was) it:

- Mexican
- Chicano
- Mexican American
- Spanish, Hispanic, Latin American, South American
- Anglo American
- Negro, Black, Afro American, African American
- other
- not sure/don't know

20. How would you rate yourself? That is, do you consider yourself:

- very Mexican/Latin American
- mostly Mexican/Latin American
- bicultural (equally Mexican/Latin American & American)
- mostly American
- very American
- other

21. Where were you raised before the age of 16?

- in Mexico only
- mostly Mexico, some in the U.S.
- equally in the U.S. & Mexico
- mostly in the U.S., some in Mexico
- in the U.S. only
- other

22. How often do you use Spanish in these situations?

(never=1; seldom=2; about half the time=3; most of the time=4; always=5)

- | | | | | | |
|-----------------------|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|
| Visiting with friends | <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 | <input type="radio"/> 4 | <input type="radio"/> 5 |
| In the family | <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 | <input type="radio"/> 4 | <input type="radio"/> 5 |
| At work | <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 | <input type="radio"/> 4 | <input type="radio"/> 5 |
| Social gatherings | <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 | <input type="radio"/> 4 | <input type="radio"/> 5 |

23. How well do you read in the following?

(not at all=1; somewhat=2; very well=3)

- | | | | |
|---------|-------------------------|-------------------------|-------------------------|
| Spanish | <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 |
| English | <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 |
| other | <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 |