SPECIFIC PHOBIA SECTION (SP)

*SP1. INTERVIEWER: (SEE *SC77a-f) CIRCLE # IF GROUP WAS ENDORSED	
Group 1: ANIMALS	1
Group 2: STILL WATER OR WEATHER EVENTS	2
Group 3: BLOOD, INJURIES, OR MEDICAL EXPERIENCES	3
Group 4: CLOSED SPACES	4
Group 5: HIGH PLACES	5
Group 6: FLYING	6

*SP2. INTERVIEWER CHECKPOINT: (SEE *SP1)

GO TO FIRST CIRCLED GROUP ON GRID *SP1 AND FOLLOW SKIP

GROUP 11	GO TO *SP3
GROUP 22	GO TO *SP5
GROUP 33	GO TO *SP7
GROUP 44	GO TO *SP9
GROUP 55	GO TO *SP11
GROUP 66	GO TO *SP13

	GROUP 1 [KEY PHRASE = ANIMALS]				
*SP3.	Earlier you mentioned being a lot more afraid than most people of	1			
	bugs, snakes or other animals. How old were you the very first time	YEARS OLD			
	you had a fear of some type of animal?	BEFORE STARTED SCHOOL 4			
	IF "ALL MY LIFE" OR "AS LONG AS I CAN REMEMBER,"	BEFORE TEENAGER12			
	PROBE: Was it before you first started school? IF NOT YES, PROBE: Was it before you were a teenager?	NOT BEFORE TEENAGER13			
		DON'T KNOW998			
		REFUSED 999			
*SP3a.	Was there ever a time when you almost always became very <u>upset</u> or <u>anxious</u> whenever you were faced with (ANIMAL/the type of animal	YES1			
	that scared you most)?	NO5			
		DON'T KNOW8 REFUSED9			
*SP3b.	Did you ever <u>avoid</u> situations where you might have even a small	YES1			
	chance of seeing (ANIMAL/this type of animal) whenever you could because of your fear?	NO5 GO TO *SP3d			
		DON'T KNOW8 GO TO *SP3d			
		REFUSED 9 GO TO *SP3d			
*SP3c.	How old were you when you first avoided situations where you might see (ANIMAL/animals)?	YEARS OLD			
		BEFORE STARTED SCHOOL 4			
	IF "ALL MY LIFE" OR "AS LONG AS I CAN REMEMBER," PROBE: Was it before you first started school?	BEFORE TEENAGER12			
	·	NOT BEFORE			
	IF NOT YES, PROBE: Was it before you were a teenager? NOT BEFORE TEENAGER				
		DON'T KNOW998			
		REFUSED999			
*SP3d.	INTERVIEWER QUERY: DID R ANSWER "YES" TO *SP3a OR	*SP3b OR BOTH?			
	YES				
*SP3e.	Do you think this fear was <u>ever</u> excessive, or unreasonable, or much st	tronger than it should have been?			
	YES1 NO5				
	DON'T KNOW				
*SP3f.	When was the last time you either strongly <u>feared</u> or <u>avoided</u> (ANIM month, between two and six months ago, between seven and twelve m				
	WITHIN PAST MONTH 1 GO TO *SP4 2 AND 6 MONTHS AGO 2 GO TO *SP4 7 AND 12 MONTHS AGO 3 GO TO *SP4 MORE THAN 12 MONTHS AGO 4 DON'T KNOW 8 REFUSED 9 GO TO *SP4				
l					

*SP3g.	How old were you the last time you either strongly feared or avoided (ANIMAL/this type of animal)?
	YEARS OLD
	DON'T KNOW

*SP4. INTERVIEWER CHECKPOINT: (SEE *SP1)

GO TO NEXT CIRCLED GROUP ON GRID *SP1, PAGE 69 AND FOLLOW SKIP

GROUP 2	2	GO TO *SP5
GROUP 3	3	GO TO *SP7
GROUP 4	4	GO TO *SP9
GROUP 5	5	GO TO *SP1
GROUP 6	6	GO TO *SP13
ALL OTHERS	7	GO TO *SP14

	GROUP 2 [KEY PHRASE = STORMS OR STILL WATER]				
*SP5.	(Earlier you/ You also) mentioned being a lot more afraid than most people of either being in storms or in still water. How old were you the very first time you had this fear?	YEARS OLD BEFORE STARTED SCHOOL4			
	IF "ALL MY LIFE" OR "AS LONG AS I CAN REMEMBER," PROBE: Was it before you first started school? IF NOT YES, PROBE: Was it before you were a teenager?	BEFORE TEENAGER			
*SP5a.	Was there ever a time when you almost always became very <u>upset</u> or <u>anxious</u> whenever you were faced with the situation like this that scared you most?	REFUSED			
*SP5b.	Did you ever <u>avoid</u> situations where you could be in a storm or still water whenever you could because of your fear?	YES 1 NO 5 GO TO *SP5d DON'T KNOW 8 GO TO *SP5d REFUSED 9 GO TO *SP5d			
*SP5c.	How old were you when you first started avoiding these situations? IF "ALL MY LIFE" OR "AS LONG AS I CAN REMEMBER," PROBE: Was it before you first started school? IF NOT YES, PROBE: Was it before you were a teenager?	YEARS OLD BEFORE STARTED SCHOOL4 BEFORE TEENAGER			
*SP5d.	INTERVIEWER QUERY: DID R ANSWER "YES" TO *SP5a OR * YES				

*SP5e.	Do you think this fear was <u>ever</u> excessive, or unreasonable, or much stronger than it should have been?		
	YES1		
	NO5		
	DON'T KNOW 8		
	REFUSED9		
*SP5f.	When was the last time you either strongly <u>feared</u> or <u>avoided</u> storms or still water – within the past one month,		
	between two and six months ago, between seven and twelve months ago, or more than twelve months ago?		
	WITHIN PAST MONTH 1 GO TO *SP6		
	2 AND 6 MONTHS AGO 2 GO TO *SP6		
	7 AND 12 MONTHS AGO 3 GO TO *SP6		
	MORE THAN 12 MONTHS AGO4		
	DON'T KNOW		
	REFUSED		
*SP5g.	How old were you the last time you either strongly feared or avoided storms or still water?		
	YEARS OLD		
	DON'T KNOW998		
	REFUSED 999		
*SP6. II	NTERVIEWER CHECKPOINT: (SEE *SP1)		
	GO TO NEXT CIRCLED GROUP ON GRID *SP1, PAGE 69 AND FOLLOW SKIP		

GROUP 3......3

GROUP 5......5

GROUP 4...... 4 **GO TO *SP9**

GO TO *SP7

GO TO *SP11

GROUP 3 [KEY PHRASE = BLOOD, INJURIES, OR MEDICAL EXPERIENCES] *SP7 (Earlier you/ You also) mentioned being a lot more afraid than most YEARS OLD people of going to a doctor or a dentist or a hospital, getting a shot or injection, or seeing blood or injury. How old were you the very first BEFORE STARTED SCHOOL4 time you had this fear? BEFORE TEENAGER12 IF "ALL MY LIFE" OR "AS LONG AS I CAN REMEMBER," PROBE: Was it before you first started school? NOT BEFORE TEENAGER13 IF NOT YES, PROBE: Was it before you were a teenager? DON'T KNOW998 REFUSED......999 *SP7a. Was there ever a time when you almost always became very upset or YES.....1 anxious whenever you were faced with any of these things? NO5 DON'T KNOW8 REFUSED.....9 *SP7b. Did you ever avoid any of these things whenever you could because YES.....1 of your fear? NO5 GO TO *SP7d DON'T KNOW8 GO TO *SP7d REFUSED.....9 GO TO *SP7d

*SP7c.	How old were you when you first avoided any of these situations? IF "ALL MY LIFE" OR "AS LONG AS I CAN REMEMBER," PROBE: Was it before you first started school? IF NOT YES, PROBE: Was it before you were a teenager?	YEARS OLD BEFORE STARTED SCHOOL4 BEFORE TEENAGER
*SP7d.	INTERVIEWER QUERY: DID R ANSWER "YES" TO *SP7a OR *	 * SP7b OR BOTH?
	YES	
*SP7e.	Do you think this fear was <u>ever</u> excessive, or unreasonable, or much str	ronger than it should have been?
	YES1 NO5	
	DON'T KNOW8	
	REFUSED9	
*SP7f.	How often did you faint when you saw blood – all of the time, most of	the time, sometimes, rarely, or never?
	ALL OF THE TIME	
	NEVER5	
	DON'T KNOW	
*SP7g.	When was the last time you either strongly <u>feared</u> or <u>avoided</u> seeing a past one month, between two and six months ago, between seven and ago?	
	WITHIN PAST MONTH	
	REFUSED	
*SP7h.	How old were you the last time you either strongly feared or avoided	seeing a doctor, getting a shot, or seeing blood?
	YEARS OLD	
	DON'T KNOW998 REFUSED999	

*SP8. INTERVIEWER CHECKPOINT: (SEE *SP1)

GO TO NEXT CIRCLED GROUP ON GRID *SP1, PAGE 69 AND FOLLOW SKIP

GROUP 44	GO TO *SP9
GROUP 55	GO TO *SP11
GROUP 66	GO TO *SP13
ALL OTHERS7	GO TO *SP14

GROUP 4 [KEY PHRASE = CLOSED SPACES]			
*SP9.	(Earlier you/ You also) mentioned being a lot more afraid than most people of closed spaces, like caves, tunnels, closets, or elevators. How old were you the very first time you had this fear? IF "ALL MY LIFE" OR "AS LONG AS I CAN REMEMBER," PROBE: Was it before you first started school? IF NOT YES, PROBE: Was it before you were a teenager?	YEARS OLD BEFORE STARTED SCHOOL4 BEFORE TEENAGER	
		DON'T KNOW998 REFUSED999	
*SP9a.	Was there ever a time when you almost always became very <u>upset</u> or <u>anxious</u> whenever you were faced with closed spaces? (IF VOL: "IT DEPENDS WHICH CLOSED SPACE," PROBE: What if you were faced with the closed space that you feared <u>most</u> – in <u>that</u> case, did you almost always become very <u>upset</u> or <u>anxious</u> ?)	YES	
*SP9b.	Did you ever <u>avoid</u> any of these closed spaces whenever you could because of your fear?	YES 1 NO 5 GO TO *SP9c.1 DON'T KNOW 8 GO TO *SP9c.1 REFUSED 9 GO TO *SP9c.1	
*SP9c.	How old were you when you first avoided closed spaces? IF "ALL MY LIFE" OR "AS LONG AS I CAN REMEMBER," PROBE: Was it before you first started school? IF NOT YES, PROBE: Was it before you were a teenager?	YEARS OLD BEFORE STARTED SCHOOL4 BEFORE TEENAGER	
*SP9c.1	I.INTERVIEWER QUERY: DID R ANSWER "YES" TO *SP9a OR *SP9b OR BOTH ? YES		

*SP9d. Do you think this fear was <u>ever</u> excessive, or unreasonable, or much stronger than it should have been?				
YI	ES 1			
NO	O 5	GO TO *SP10		
DO	ON'T KNOW 8	GO TO *SP10		
RE	EFUSED9	GO TO *SP10		

	f the following things did you strongly fear about closed spaces: : Were you afraid)	YES (1)	NO (5)	DK (8)	RF (9)	
*SP9f.	That you might be trapped and unable to escape?	1	5	8	9	
*SP9g.	That you might have a panic attack and be unable to get help?	1	5	8	9	
*SP9h.	That you might become physically ill and be unable to get help?	1	5	8	9	
*SP9i.	That you might not be able to breathe?	1	5	8	9	
*SP9j.	[INTERVIEWER CHECKPOINT: (SEE *SP9f-*SP9i SERIES)] AT LEAST ONE RESPONSE CODED '1' 1 GO TO *SP9I ALL OTHERS					
*SP9k.	DON'T KNOW					
*SP91.	II. When was the last time you either strongly feared or avoided closed spaces – within the past one month, between two and six months ago, between seven and twelve months ago, or more than twelve months ago? WITHIN PAST MONTH					
*SP9m.	How old were you the last time you either strongly feared or avoided clo YEARS OLD DON'T KNOW	osed space	es?			

SP10. INTERVIEWER CHECKPOINT: (SEE *SP1)

GO TO NEXT CIRCLED GROUP ON GRID *SP1, PAGE 69 AND FOLLOW SKIP

GROUP 55	GO TO *SP11
GROUP 66	GO TO *SP13
ALL OTHERS7	GO TO *SP14

GROUP 5 [KEY PHRASE = HIGH PLA	ACES]
*SP11. (Earlier you/ You also) mentioned being a lot more afraid than most people of high places. How old were you the very first time you had this fear? IF "ALL MY LIFE" OR "AS LONG AS I CAN REMEMBER," PROBE: Was it before you first started school? IF NOT YES, PROBE: Was it before you were a teenager?	YEARS OLD BEFORE STARTED SCHOOL4 BEFORE TEENAGER
*SP11a. Was there ever a time when you almost always became very <u>upset</u> or <u>anxious</u> whenever you were faced with being in a high place? (IF VOL: "IT DEPENDS WHICH HIGH PLACE," PROBE: What if you were faced with the high place that you feared <u>most</u> – in <u>that</u> case, did you almost always become very <u>upset</u> or <u>anxious</u> ?) *SP11b. Did you ever avoid high places whenever you could because of your fear?	YES
*SP11c. How old were you when you first avoided high places? IF "ALL MY LIFE" OR "AS LONG AS I CAN REMEMBER," PROBE: Was it before you first started school? IF NOT YES, PROBE: Was it before you were a teenager? *SP11d. INTERVIEWER QUERY: DID R ANSWER "YES" TO *SP11a Old the started school.	YEARS OLD BEFORE STARTED SCHOOL4 BEFORE TEENAGER
YES	K SI III OK DOIII:

*SP11e. Do you think this fear was eve	<u>er</u> excessive, or unreasonable, or much stronger than it should have been?
YES1	
NO 5	GO TO *SP12
DON'T KNOW 8	GO TO *SP12
REFUSED9	GO TO *SP12

Which of the following things did you strongly fear about high places:	YES (1)	NO (5)	DK (8)	RF (9)
(IF NEC: Were you afraid)		(0)		
*SP11f. That you might get dizzy and fall?	1	5	8	9
*SP11g. That you might jump?	1	5	8	9
*SP11h. That you might have a panic attack and be unable to get help?	1	5	8	9
*SP11i. That you might become physically ill and be unable to get help?	1	5	8	9
SP11j. INTERVIEWER CHECKPOINT: (SEE SP11f -* SP11i SERIES)				
AT LEAST ONE RESPONSE CODED '1' 1 GO TO *SP111 ALL OTHERS5				
*SP11k. What was it, then, that you feared most about high places?				-
DON'T KNOW				-
DON'T KNOW 8 REFUSED 9				
*SP111. When was the last time you either strongly <u>feared</u> or <u>avoided</u> high place between two and six months ago, between seven and twelve months ago. *WITHIN PAST MONTH				
DON'T KNOW				
*SP111. When was the last time you either strongly feared or avoided high place between two and six months ago, between seven and twelve months ago. WITHIN PAST MONTH				
DON'T KNOW				
DON'T KNOW	go, or more	than twe		
DON'T KNOW	go, or more	than twe		
*SP111. When was the last time you either strongly feared or avoided high place between two and six months ago, between seven and twelve months ago. WITHIN PAST MONTH	go, or more	than twe		

SP12. INTERVIEWER CHECKPOINT: (SEE *SP1)

GO TO NEXT CIRCLED GROUP ON GRID *SP1, PAGE 69 AND FOLLOW SKIP

GROUP 6 [KEY PHRASE = FLYING]				
*SP13. (Earlier you/ You also) mentioned being a lot more afraid than most people of flying or airplanes. How old were you the very first time you had this fear? IF "ALL MY LIFE" OR "AS LONG AS I CAN REMEMBER," PROBE: Was it before you first started school? IF NOT YES, PROBE: Was it before you were a teenager?	YEARS OLD BEFORE STARTED SCHOOL			
*SP13a. Was there ever a time when you almost always became very <u>upset</u> or <u>anxious</u> whenever you were faced with flying?	YES			
*SP13b. Did you ever avoid flying whenever you could because of your fear?	YES 1 NO 5 GO TO *SP13d DON'T KNOW			
*SP13c. How old were you when you first avoided flying? IF "ALL MY LIFE" OR "AS LONG AS I CAN REMEMBER," PROBE: Was it before you first started school? IF NOT YES, PROBE: Was it before you were a teenager?	YEARS OLD BEFORE STARTED SCHOOL			
*SP13d. INTERVIEWER: DID R ANSWER "YES" TO *SP13a OR *SP13 YES	Bb OR BOTH?			
*SP13e. Do you think this fear was <u>ever</u> excessive, or unreasonable, or much so YES	tronger than it should have been?			

	f the following things did you strongly fear about flying: : Were you afraid of)	YES (1)	NO (5)	DK (8)	
*SP13f.	Being high in the air?	1	5	8	
*SP13g.	Being in a closed space?	1	5	8	
*SP13h.	That you might have a panic attack and be unable to get help?	1	5	8	
*SP13i.	That you might become physically ill and be unable to get help?	1	5	8	
*SP13j.	That the plane might crash?	1	5	8	
	INTERVIEWER QUERY: DID R ANSWER "YES" TO AT LEAST *SP13j SERIES? YES	<u>ONE</u> QUE	SHON	IN THE *	Si
					_
+GD12	REFUSED	:d: d		4 1	
	two and six months ago, between seven and twelve months ago, or mo WITHIN PAST MONTH	re than twe			
SF 13II.	YEARS OLD DON'T KNOW998 REFUSED999	rymg (
*SP3e	VIEWER CHECKPOINT: (SEE *SP3e, *SP5e, *SP7e, *SP7f, *SP9c EQUALS'1' OR *SP5e EQUALS '1' OR *SP7e EQUALS '1' OR EQUALS '1' – '3' OR *SP9d EQUALS '1' OR *SP11e EQUALS '1' EQUALS '1'	OR	,) GO TO *	<u>-</u>
ALLO		••••••		CO TO *	

EQUALS '1' OR *SP7f EQUALS '1' - '3': blood, injuries, or medical spaces/ and/ IF *SP11e EQUALS '1': high places/ and/ IF *SP13e EQUALS '1': high places/ and/ IF *SP1	UALS '1': fly	ying) How i	much did y	our fear (or
NOT AT ALL 1 A LITTLE 2 SOME 3 A LOT 4 EXTREMELY 5 DON'T KNOW 8 REFUSED 9				
*SP17. Was there ever a time in your life when you felt emotionally upset, worrifear (or avoidance) of these things? YES	ed, or disapp	ointed with	yourself be	ecause of you
*SP18. (RB, PG 6) Think of the time in your life when the fear was mothings or thought you would have to be, did you ever have two READ LIST BELOW STARTING WITH SP18a ONLY IF R F YES	or more of t	he problem	ns on Page	6?
GO TO *SP21				
GO TO *SP21 AFTER <u>TWO</u> "YES" RESPONSES	YES (1)	NO (5)	DK (8)	RF (9)
*SP18a. Did your heart ever pound or race?	1	5	8	9
*SP18b. Did you sweat?	1	5	8	9
*SP18c. Did you tremble?	1	5	8	9
*SP18d. Did you feel sick to your stomach?	1	5	8	9
*SP18e. Did you have a dry mouth?	1	5	8	9
*SP18f. Did you have chills or hot flushes?	1	5	8	9
*SP18g. Did you feel numbness or have tingling sensations?	1	5	8	9
*SP18h. Did you have trouble breathing normally?	1	5	8	9
*SP18i. Did you feel like you were choking?	1	5	8	9
*SP18j. Did you have pain or discomfort in your chest?	1	5	8	9

*SP16. You had fears of (IF *SP3e EQUALS '1': animals/ and/ IF *SP5e EQUALS '1': storms or still water/ and/ IF *SP7e

*SP18k. Did you feel dizzy or faint?	1	5	8	9
*SP18l. Were you afraid that you might die?	1	5	8	9
*SP18m. Did you ever fear that you might lose control, go crazy, or pass out?	1	5	8	9
*SP18n. Did you feel like you were "not really there", like you were watching a movie of yourself?	1	5	8	9
	GO TO *SP21			
*SP18o. Did you feel that things around you were unreal or like a dream?	1	5	8	9

*SP21.	What if you were faced with one of these things <u>today</u> :	How strong would your fear be – not at all, mild, moderate, severe, or	or
	very severe?		

(IF VOL "IT DEPENDS ON WHICH THING," PROBE: What if you were faced with the thing that scares you <u>most</u>: How strong would your fear be - not at all, mild, moderate, severe, or very severe?)

NOT AT ALL	1
MILD	2
MODERATE	
SEVERE	
VERY SEVERE	5
DON'T KNOW	
REFUSED	

^{*}SP40. Did you receive professional treatment for your fear at any time in the past 12 months?

YES	1
NO	5
DON'T KNOW	8
REFUSED	9

*SP42. INTERVIEWER CHECKPOINT (SEE *SC68, *SC68a, *SC68b, *SC72, *SC72a, *SC72b, *SC74, *SC74a, *SC76, *SC84, *SC86, *SC88): FOLLOW SKIP FOR FIRST ENDORSED ITEM.

*SC74 EQUALS '1' OR *SC74a EQUALS '1' OR *SC86 EQUALS '1'	GO TO *SO1
*SC76 EQUALS '1'	GO TO *AG1
*SC88 EQUALS '1'	GO TO *AG1
*SC72 EQUALS '1'	GO TO *G1 INTRO 1
*SC72a EQUALS '1'	GO TO *G1 INTRO 2
*SC72b EQUALS '1'6	GO TO *G1 INTRO 3
*SC84 EQUALS '1'	GO TO *G1 INTRO 3
*SC68 EQUALS '1'	GO TO *IED1
*SC68a EQUALS '1'9	GO TO *IED3 INTRO 4
*SC68b EQUALS '1'	GO TO *IED3 INTRO 5
ALL OTHERS11	GO TO *SD1