

A—Health		
A1	Gender	
A2	Age	
A3	Self-Rated Health	How would you rate your overall health at the present time? Would you say your health is excellent, good, fair, or poor?
A4	Self-Rated Health	Would you say your health is better, about the same, or worse than most people your age?
A5	Self-Rated Health	Do you think your health is better, about the same, or worse than it was a year ago?
A6	Checklist of Acute and Chronic Health Conditions	E.g., arthritis, asthma, hypertension
A7	Cholesterol medications	Are you presently taking any prescription medications for cholesterol including statins such as Zocor, Lipitor, Simvastatin, and Prevastatin?
A8	List of activities of daily living	E.g., bathing, standing for two hours
A9	Symptom Checklist	E.g., cramps, headaches
A10	Moderate Physical Exercise	How many days in the average week do you do at least 15 minutes of moderate exercise that does not make you feel exhausted?
A11	Vigorous physical exercise	How many days in the average week do you do at least 15 minutes of strenuous exercise, where your heart beats rapidly?
A12	Fruit and vegetable intake	On how many days in a typical week do you eat at least five servings of fruits and vegetables?
A13	Red meat consumption	On how many days in a typical week do you eat red meat?
A14	Daily hours of sleep	During the past month, on average, how many hours of sleep do you get each night?
A15	Sleep difficulties – Pittsburgh Sleep Questionnaire	During the past month, how often have you had trouble falling asleep within 30 minutes?

A16	Sleep quality – Pittsburg Sleep Questionnaire	During the past month, how would you rate your sleep quality overall?
B—Emotions		
B1	Big Five Personality Inventory	E.g., I see myself as someone who is reserved
B2	Positive Affect and Negative Affect Schedule	E.g., Alert
B3-5	Happiness	
B6-8	Satisfaction With Life Scale	E.g., In most ways my life is close to my ideal
B9	(Rosenberg) Self-Esteem	E.g., I feel I am a person of worth, or at least on an equal plane with others
B10-13	Gratitude - General	
B14-17	(Life Orientation Test) Optimism	
B18-23	Meaning in Life (Neal)	
B24-31	(CES-D) depression	
B32-38	Generalized Anxiety Disorder - 7	
C—Outlook		
C1-C4	Death anxiety	
C5-C9	Anger/Hostility	
C10-C12	Social isolation	
D – Religious identity		
D1	Spiritual/religious identity	e.g, “I am spiritual and religious”
D2	Religious preference	
D3	No religious preference	
D4	Jewish	
D5	Muslim	
D6	Buddhist	
D7	Hindu	
D8	Part of Christian Faith?	
D9	Which Protestant Denomination	
D10	Baptist	
D11	Methodist	
D12	Lutheran	
D13	Presbyterian	
D14	Episcopalian	
D15	Other protestant	
D16	Beliefs about the Bible	
D17	Frequency of Religious Services Attendance	
D18	Frequency of	

	Volunteering	
D19	Frequency of Private Prayer	
D20	Frequency of Prayers for Other People	
D21	Frequency of Bible Reading	
D22-24	Religious Commitment	
E – Beliefs about God		
E1	Sanctification of Life	I see God’s presence in all of life
E2	Sanctification of Life	I feel there is something of me that is sacred
E3	Sanctification of Life	I find the sacred in my relationships with people
E4	Sacred Body View	My body is a gift from God
E5	Sacred Body View	My body is created in God’s image
E6	Sacred Body View	A spark of the divine resides in my body
E7	View of God - Zinnbauer	Which of the following statements best describes how you think about God?
E8-13	Views of God Scale- Ironson	e.g., I believe God is all merciful
E14-19	Attachment to God Inventory	e.g, I often worry about whether God is pleased with me
E20-29	Emotions toward God - Nick	e.g., joy, anger
F – Other beliefs		
F1-F5	Afterlife Beliefs	E.g., My life may end, but that which is important will live on through my family
F6-F8	Humility	e.g., I can honestly assess my strengths and weaknesses
F9-F13	Compassion	
F14-15	Gratefulness to God	E.g., When I think of all the good in my life it makes me want to thank God
F17-19	Forgiveness	E.g., I have forgiven those who hurt me
F20-23	Peace Items IronsonWoods Scale	E.g., My beliefs and practices give me a sense of peace
F24-26	Religious Optimism	E.g., My religious or spiritual beliefs help me see that things will turn out well in the future
F27-29	Religious Meaning in Life	E.g., God put me in this life for a purpose
G – Stressful events		
G1-12	Stressful events	E.g., Moved to a new residence
G13	Most stressful event	What is the most stressful event that you have faced during the past 18 months?

G14	Positive Religious Coping Benevolent Religious Reappraisals	
G15	Positive Religious Coping Seeking Spiritual Support	
G16-G18	Spiritual Struggles Divine Struggle	
G19-G21	Spiritual Struggles Interpersonal Struggle	
G22-G24	Spiritual Struggles Supernatural Evil	
G25-G27	Spiritual Struggles Intrapsychic Struggle	
G28-G30	Spiritual Struggles Crisis of Ultimate Meaning	
G31-34	Sacred Loss	
G35-43	Lifetime Trauma	E.g., Did anyone every take something from you by force or threat of force, such as in a robbery, mugging or holdup? (Robbery)
H – Other stressors		
H1	Chronic Financial Strain	At the present time, are you able to afford a home or apartment that is large enough and comfortable enough for (you/your family)?
H2	Chronic Financial Strain	How much difficulty do you have meeting the monthly payments on (your/your family's) bills – a great deal, some, only a little, or none?
H3	Chronic Financial Strain	In general, how do (your/your family's) finances usually work out at the end of the month? Do you find you usually end up with some money left over, just enough money to make ends meet, or not enough money to make ends meet?
H4	Impact of stressful events on religion	
H5-8	Distress tolerance	E.g., I can't handle feeling distressed or upset
H9-11	God Intervention - Health	E.g., Real miracles of healing from God occur today
H12-14	God control of health	E.g., Rather than trying to come up with the right solution to a health problem myself, I let God decide how to deal with it
I – Church experiences		
I1-3	Spiritual Support Received	E.g., Not counting Bible study groups, prayer groups, or church services, how often does someone in your congregation share their own religious experiences with you?

I4-6	Spiritual Support Provided	E.g., Not counting Bible study groups, prayer groups, or church services, how often do you share your own religious experiences with someone in your congregation?
I7-9	Emotional Support at Church Received	E.g., Other than your minister, pastor or priest, how often does someone in your congregation let you know they love and care for you?
I10-12	Emotional Support at Church Provided	E.g., How often do you show someone in your congregation that you love and care for him/her?
I13-15	God Mediated Control	E.g., I rely on God to help me control my life
I16-18	Emotional Support Family and Friends – Received	E.g., How often do your family members and friends let you know they love and care for you?
I19-21	Emotional Support Family and Friends – Provided	E.g., How often do you let your family members and friends know you love and care for them?
I22-24	Emotional Support Family and Friends – Outside of Church- Received	E.g., Not counting your minister or fellow church members, how often do your family and friends let you know they love and care for you?
I25-27	Emotional Support Family and Friends Outside of Church - Provided	E.g., Not counting your minister or fellow church members, how often have you let family and friends know that you love and care for them?
I28	Spiritual turning point	E.g., Has there been a turning point in your life when you made a new and personal commitment to religion or spirituality?
I29	Spiritual turning point	At what age did this happen?
J – Substances		
J1	Smoking	Do you smoke cigarettes now?
J2	Smoking	On average, how many cigarettes or packs of cigarettes do you usually smoke in one day?
J3	Alcohol Consumption	Do you ever drink beer, wine or liquor?
J4	Alcohol Consumption	During the last month, on how many days did you drink beer, wine or liquor?
J5	Alcohol Consumption	On the days you drink, how many cans of beer, glasses of wine, or drinks of liquor do you usually have?
J6	Alcohol Consumption	During the last month, on how many days did you drink beer, wine or liquor to intoxication?
J7	Alcohol Consumption	Has your use of alcohol ever been a problem for you?
J8	Alcohol Consumption	On the days you drink to intoxication, how many cans of beer, glasses of wine, or drinks of

		liquor do you usually have?
J9-12	CAGE – Alcohol Abuse	E.g., Have you ever felt you should cut down on your drinking?
J13-23	ASI-LITE	
K – Background		
K1-2	Education	
K3-4	Race/ethnicity	
K5	Marital status	
K6	Income	
K7	Household Composition	
L – Biomarkers		
L1	Finger Prick Consent	
L2	Height	
L3	Weight	
L4-L4B	Blood pressure – two readings	
L5A L5AA	Waist and hip circumference	
M – Locating		
M1-24	Re-Contact information	
B4N1	Language of Interview	
N – Interviewer rating of neighborhood conditions		
N1-10	Condition of neighborhood	E.g., Neatness and cleanliness of the inside of the building