

Details on Data Thresholds

Threshold – For all questions listed below a threshold of 30 responses for each response option for all questions listed must be met before any data-sharing. If you have questions, please reach out to wellbackground-newloop wellbackground-health.org

*Designates questions that only require 10 responses for each response option to be included in the Clearinghouse.

NIOSH WellBQ questions

Q43A-I: Have you ever had any of the following?

- a. Arthritis
- b. Other musculoskeletal disorders (for example, back pain, neck pain, other pain)
- c. Asthma
- d. Lung disease, other than asthma (for example, chronic obstructive pulmonary disease [COPD], chronic bronchitis, emphysema)
- e. Cancer
- f. Depression
- g. Diabetes
- h. Heart disease
- i. High blood pressure

Q44. Have you ever had chronic insomnia?

- a. Never
- b. In the past
- c. Have currently

Q45. Now, thinking about your mental health, which includes stress, depression, anxiety, and problems with emotions, during the past 30 days, for how many days was your mental health not good?

Q53. Do you use any of the following tobacco products?

- a. Cigarettes
- b. Cigars
- c. Pipes
- d. Smokeless tobacco
- e. Electronic cigarettes

Q54. How many drinks of alcoholic beverages do you have in a typical week? (One drink = one beer, glass of wine, shot of liquor, or mixed drink.)

Q55. During the past year, how often have you had more than four drinks if you are a male, or more than three drinks if you are a female, on any single day? (One drink = one beer, glass of wine, shot of liquor, or mixed drink.

Q59. Because of a physical, mental, or emotional condition, do you have serious difficulty concentrating, remembering, or making decisions?

- Not at all
- Slightly
- Moderately
- Extremely
- Does not apply/do not have condition

Q60. Are you limited in the kind or amount of work you can do because of a physical, mental, or emotional problem?

- Not at all
- Slightly
- Moderately
- Extremely
- Does not apply/do not have problem

Q62. During the past 12 months, did you experience any work-related injuries?

- Yes
- No

Q63. If you experienced any work-related injuries in the past 12 months, did any of them require any first aid or medical treatment, change in job activities, or lost time from work?

- Yes
- No
- Does not apply/was not injured in the past 12 month

Employment questions

E1. How would you describe your work arrangement in your job?

- I am an independent contractor, an independent consultant, or a freelance worker.
- I am on call and work only when called to work.
- I am paid by a temporary agency.
- I work for a contractor who provides workers and services to others under contract.
- I am a regular, permanent employee.

E2. Is your job full-time or part-time?

- Full-time
- Part-time

E3. How long have you worked in your job?

- Less than 1 year
- 1–5 years
- 6–10 years
- 10–20 years
- More than 20 years

E4 - Select the occupation that best describes the kind of work you do in your job.

- Architecture and Engineering
- Arts, Design, Entertainment, Sports, and Media
- Building and Grounds Cleaning and Maintenance
- Business and Financial Operations
- Computer and mathematical
- Community and Social Service
- Construction and Extraction
- Education instruction and library
- Farming, Fishing, and Forestry

- Food preparation and serving related
- Healthcare Practitioners and Technical
- Healthcare support
- Installation, Maintenance, and Repair
- Legal
- Life, Physical, and Social Science
- Management
- Material moving
- Military specific
- Office and Administrative Support
- Personal Care and Service
- Production
- Protective service
- Sales and related
- Transportation
- Other

E4A - If other, please specify.

• This question will not be included unless 30 of the same free-text responses are provided. However, this question does not limit the other questions from being added if the threshold criteria are met.

*E5 - Select the kind of industry or business you work in for your job.

- Arts, Entertainment, and Recreation
- Accommodation and Food Services
- Administrative and Support and Waste Management
- · Agriculture, Forestry, Fishing, and Hunting
- Construction
- Educational Services
- Finance and Insurance
- Health Care and Social Assistance
- Information
- Management of Companies and Enterprises
- Manufacturing
- Military
- Mining, Quarrying, and Oil and Gas Extraction

- Other Services, Except Public Administration
- Public administration
- Professional, Scientific, and Technical Services
- Real Estate and Rental and Leasing
- Retail trade
- Transportation and warehousing
- Utilities
- Wholesale trade
- Other

*E5A - If other, please specify.

• This question will not be included unless 10 of the same free-text responses are provided. However, this question does not limit the other questions from being added if the threshold criteria are met.

E6 - Which of the following best describes your current work?

- Fully remote
- Hybrid, primarily remote
- Hybrid, 50-50 remote/onsite
- Hybrid, primarily onsite
- Onsite

Demographic questions

D1 - What is your age?

- 18-29
- 30-39
- 40-49
- 50-59
- 60-69
- 70+

D2 - What is the highest level of school you have completed or the highest degree you have received?

- Less than high school
- High school/GED
- Some college

- Associate's degree
- Trace, technical, or vocational training
- Bachelor's degree
- Graduate or professional degree

D3 - Do you consider yourself to be Hispanic or Latino?

- Yes
- No
- Prefer not to say
- Don't know

D4 - What race or races do you consider yourself to be?

- White
- Black/African American
- American Indian
- Alaska native
- Native Hawaiian
- Other Pacific Islander
- Asian
- Some other race
- Prefer not to say
- Don't know

D5 - Which sex were you assigned at birth, on your original birth certificate?

- Female
- Male

D5B - How do you currently describe yourself (mark all that apply)?

- Male/man
- Female/woman
- Transgender
- I use a different term

D5C - If you selected, I use a different term and you wish to self-describe, please do so here.

• Free text – responses will only be shown if there are 30 of the same response options written in.

D6 - Which of these best describes your current sexual orientation?

- Gay or lesbian
- Straight, that is, not gay or lesbian
- Bisexual
- I use a different term (free text)
- Prefer not to say

D6A - If you selected, I use a different term and you wish to self-describe, please do so here.

 Free text – responses will only be shown if there are 30 of the same response options written in.

D7 - What was your entire household income last year, before taxes?

- Less than \$20,000
- \$20,000 to \$34,999
- \$35,000 to \$49,999
- \$50,000 to \$74,999
- \$75,000 to \$99,000
- \$100,000 to \$149,999
- \$150,000 to \$199,999
- \$200,000+

D9 - What is current marital status?

- Married or living with partner
- Widowed
- Separated
- Divorced
- Never married

D10 - How many dependents currently live in your household?

- Total number of household members age 0 to 5?
- Total number of household members age 6 to 12?
- Total number of household members age 13 to 17?
- Total number of household members age 18 or older?