

Social Determinants of Health (SDOH)

Thank you (again) for being a part of the *All of Us* Research Program. Many things can make us sick or keep us healthy. Where you were born or where you live, go to school, or work can affect your health. These are sometimes referred to as social factors, or the "social determinants," of health. Help us learn more by completing this survey about your neighborhood, social life, stress, and feelings about your everyday life. This survey will take less than 10 minutes to complete.

Please answer each question as honestly as possible. It is important that you answer as many questions as you can. We are looking for your own answers, and not what you think your doctors, family, or friends want you to say.

Don't feel like you have to spend a long time over each question. The first answer that comes to you is usually the best one. If you aren't sure how to answer a question, choose the best answer from the options given. Some of the questions may be sensitive. You can choose not to answer.

The neighborhood where you live may play a role in a variety of health outcomes. Sharing details about your neighborhood may help researchers better understand the relationship between a person's neighborhood and their overall well-being.

The following statements describe what your neighborhood might be like. Tell us how much you agree or disagree.

People around here are willing to help their neighbors.¹

[Original Source Question Text: People around here are willing to help their neighbors.]

- Strongly agree
- Agree
- Neutral (neither agree nor disagree)
- Disagree
- Strongly disagree

People in my neighborhood generally get along with each other.¹

[Original Source Question Text: People in my neighborhood generally get along with each other.]

- Strongly agree
- Agree

- Neutral (neither agree nor disagree)
- Disagree
- Strongly disagree

People in my neighborhood can be trusted.¹

[Original Source Question Text: People in my neighborhood can be trusted.]

- Strongly agree
- Agree
- Neutral (neither agree nor disagree)
- Disagree
- Strongly disagree

People in my neighborhood share the same values.¹

[Original Source Question Text: People in my neighborhood share the same values.]

- Strongly agree
- Agree
- Neutral (neither agree nor disagree)
- Disagree
- Strongly disagree

There is a lot of graffiti in my neighborhood.²

[Original Source Question Text: There is a lot of graffiti in my neighborhood.]

- Strongly disagree
- Disagree
- Agree
- Strongly agree

My neighborhood is noisy.²

[Original Source Question Text: My neighborhood is noisy.]

- Strongly disagree
- Disagree
- Agree
- Strongly agree

Vandalism is common in my neighborhood.²

[Original Source Question Text: Vandalism is common in my neighborhood.]

- Strongly disagree
- Disagree

- Agree
- Strongly agree

There are a lot of abandoned buildings in my neighborhood.²

[Original Source Question Text: There are a lot of abandoned buildings in my neighborhood.]

- Strongly disagree
- Disagree
- Agree
- Strongly agree

My neighborhood is clean.²

[Original Source Question Text: My neighborhood is clean.]

- Strongly disagree
- Disagree
- Agree
- Strongly agree

People in my neighborhood take good care of their houses and apartments.²

[Original Source Question Text: People in my neighborhood take good care of their houses and apartments.]

- Strongly disagree
- Disagree
- Agree
- Strongly agree

There are too many people hanging around on the streets near my home.²

[Original Source Question Text: There are too many people hanging around on the streets near my home.]

- Strongly disagree
- Disagree
- Agree
- Strongly agree

There is a lot of crime in my neighborhood.²

[Original Source Question Text: There is a lot of crime in my neighborhood.]

- Strongly disagree
- Disagree
- Agree

- Strongly agree

There is too much drug use in my neighborhood.²

[Original Source Question Text: There is too much drug use in my neighborhood.]

- Strongly disagree
- Disagree
- Agree
- Strongly agree

There is too much alcohol use in my neighborhood.²

[Original Source Question Text: There is too much alcohol use in my neighborhood.]

- Strongly disagree
- Disagree
- Agree
- Strongly agree

I'm always having trouble with my neighbors.²

[Original Source Question Text: I'm always having trouble with my neighbors.]

- Strongly disagree
- Disagree
- Agree
- Strongly agree

In my neighborhood, people watch out for each other.²

[Original Source Question Text: In my neighborhood, people watch out for each other.]

- Strongly disagree
- Disagree
- Agree
- Strongly agree

My neighborhood is safe.²

[Original Source Question Text: My neighborhood is safe.]

- Strongly disagree
- Disagree
- Agree
- Strongly agree

The next questions ask about what is in your neighborhood. Think about the area around your home that you can walk to in 10–15 minutes.

What is the main type of housing in your neighborhood?³

[Original Source Question Text: What is the main type of housing in your neighborhood?]

- Detached single-family housing
- Townhouses, row house, apartments, or condos of 2-3 stories
- Mix of single-family residences and townhouses, row houses, apartments or condos
- Apartments or condos of 4-12 stories
- Apartments or condos of more than 12 stories
- Don't know/Not sure

Many shops, stores, markets or other places to buy things I need are within easy walking distance of my home. Would you say that you...³

[Original Source Question Text: Many shops, stores, markets or other places to buy things I need are within easy walking distance of my home. Would you say that you...]

- Strongly disagree
- Somewhat disagree
- Somewhat agree
- Strongly agree
- Don't know/Not sure

It is within a 10–15 minutes walk to a transit stop (such as bus, train, trolley, or tram) from my home. Would you say that you...³

[Original Source Question Text: It is within a 10-15 minute walk to a transit stop (such as bus, train, trolley, or tram) from my home. Would you say that you...]

- Strongly disagree
- Somewhat disagree
- Somewhat agree
- Strongly agree
- Don't know/Not sure

There are sidewalks on most of the streets in my neighborhood. Would you say that you...³

[Original Source Question Text: There are sidewalks on most of the streets in my neighborhood. Would you say that you...]

- Strongly disagree

- Somewhat disagree
- Somewhat agree
- Strongly agree
- Does not apply to my neighborhood
- Don't know/Not sure

There are facilities to bicycle in or near my neighborhood, such as special lanes, separate paths or trails, shared use paths for cycles and pedestrians. Would you say that you...³

[Original Source Question Text: There are facilities to bicycle in or near my neighborhood, such as special lanes, separate paths or trails, shared use paths for cycles and pedestrians. Would you say that you...]

- Strongly disagree
- Somewhat disagree
- Somewhat agree
- Strongly agree
- Does not apply to my neighborhood
- Don't know/Not sure

My neighborhood has several free or low-cost recreation facilities, such as parks, walking trails, bike paths, recreation centers, playgrounds, public swimming pools, etc. Would you say that you...³

[Original Source Question Text: My neighborhood has several free or low-cost recreation facilities, such as parks, walking trails, bike paths, recreation centers, playgrounds, public swimming pools, etc. Would you say that you...]

- Strongly disagree
- Somewhat disagree
- Somewhat agree
- Strongly agree
- Don't know/Not sure

The crime rate in my neighborhood makes it unsafe to go on walks at night. Would you say that you...³

[Original Source Question Text: The crime rate in my neighborhood makes it unsafe to go on walks at night. Would you say that you...]

- Strongly disagree
- Somewhat disagree
- Somewhat agree
- Strongly agree

- Don't know/Not sure

The crime rate in my neighborhood makes it unsafe to go on walks during the day. Would you say that you...³

[Original Source Question Text: The crime rate in my neighborhood makes it unsafe to go on walks during the day. Would you say that you...]

- Strongly disagree
 - Somewhat disagree
 - Somewhat agree
 - Strongly agree
 - Don't know/Not sure
-

Supportive relationships may play a key role in helping people live healthy lives. Answering the following questions may help researchers learn more about the potential health benefits of supportive relationships.

People sometimes look to others for friendship, help, or other types of support. Choose the answer that best describes how often you can find support if you need it?

Someone to help you if you were confined to bed⁴

[Original Source Question Text: Someone to help you if you were confined to bed]

- None of the time
- A little of the time
- Some of the time
- Most of the time
- All of the time

Someone to take you to the doctor if you need it⁴

[Original Source Question Text: Someone to take you to the doctor if you needed it]

- None of the time
- A little of the time
- Some of the time
- Most of the time
- All of the time

Someone to prepare your meals if you were unable to do it yourself⁴

[Original Source Question Text: Someone to prepare your meals if you were unable to do it yourself]

- None of the time
- A little of the time
- Some of the time
- Most of the time
- All of the time

Someone to help with daily chores if you were sick⁴

[Original Source Question Text: Someone to help with daily chores if you were sick]

- None of the time
- A little of the time
- Some of the time
- Most of the time
- All of the time

Someone to have a good time with⁴

[Original Source Question Text: Someone to have a good time with]

- None of the time
- A little of the time
- Some of the time
- Most of the time
- All of the time

Someone to turn to for suggestions about how to deal with a personal problem⁴

[Original Source Question Text: Someone to turn to for suggestions about how to deal with a personal problem]

- None of the time
- A little of the time
- Some of the time
- Most of the time
- All of the time

Someone who understands your problems⁴

[Original Source Question Text: Someone who understands your problems]

- None of the time
- A little of the time
- Some of the time

- Most of the time
- All of the time

Someone to love and make you feel wanted⁴

[Original Source Question Text: Someone to love and make you feel wanted]

- None of the time
 - A little of the time
 - Some of the time
 - Most of the time
 - All of the time
-

We would like to ask you some questions about your relationships with others. Choose the answer that is true for you.

I lack companionship⁵

[Original Source Question Text: I lack companionship]

- Never
- Rarely
- Sometimes
- Often

There is no one I can turn to⁵

[Original Source Question Text: There is no one I can turn to]

- Never
- Rarely
- Sometimes
- Often

I am an outgoing person⁵

[Original Source Question Text: I am an outgoing person]

- Never
- Rarely
- Sometimes
- Often

I feel left out⁵

[Original Source Question Text: I feel left out]

- Never
- Rarely
- Sometimes
- Often

I feel isolated from others⁵

[Original Source Question Text: I feel isolated from others]

- Never
- Rarely
- Sometimes
- Often

I can find companionship when I want it⁵

[Original Source Question Text: I can find companionship when I want it]

- Never
- Rarely
- Sometimes
- Often

I am unhappy being so withdrawn⁵

[Original Source Question Text: I am unhappy being so withdrawn]

- Never
- Rarely
- Sometimes
- Often

People are around me but not with me⁵

[Original Source Question Text: People are around me but not with me]

- Never
- Rarely
- Sometimes
- Often

**People who experience discrimination may be at higher risk of negative health outcomes.
Sharing your experiences with discrimination in everyday life and in healthcare settings may**

help researchers learn how to reduce negative health outcomes associated with discrimination.

The next statements describe how others may treat you. In your day-to-day life, how often do any of these happen to you?

You are treated with less courtesy than other people are.⁶

[Original Source Question Text: You are treated with less courtesy than other people are]

- Almost every day
- At least once a week
- A few times a month
- A few times a year
- Less than once a year
- Never

You are treated with less respect than other people are.⁶

[Original Source Question Text: You are treated with less respect than other people are]

- Almost every day
- At least once a week
- A few times a month
- A few times a year
- Less than once a year
- Never

You receive poorer service than other people at restaurants or stores.⁶

[Original Source Question Text: You receive poorer service than other people at restaurants or stores.]

- Almost every day
- At least once a week
- A few times a month
- A few times a year
- Less than once a year
- Never

People act as if they think you are not smart.⁶

[Original Source Question Text: People act as if they think you are not smart.]

- Almost every day

- At least once a week
- A few times a month
- A few times a year
- Less than once a year
- Never

People act as if they are afraid of you.⁶

[Original Source Question Text: People act as if they are afraid of you.]

- Almost every day
- At least once a week
- A few times a month
- A few times a year
- Less than once a year
- Never

People act as if they think you are dishonest.⁶

[Original Source Question Text: People act as if they think you are dishonest.]

- Almost every day
- At least once a week
- A few times a month
- A few times a year
- Less than once a year
- Never

People act as if they're better than you are.⁶

[Original Source Question Text: People act as if they're better than you are.]

- Almost every day
- At least once a week
- A few times a month
- A few times a year
- Less than once a year
- Never

You are called names or insulted.⁶

[Original Source Question Text: You are called names or insulted.]

- Almost every day
- At least once a week
- A few times a month

- A few times a year
- Less than once a year
- Never

You are threatened or harassed.⁶

[Original Source Question Text: You are threatened or harassed.]

- Almost every day
- At least once a week
- A few times a month
- A few times a year
- Less than once a year
- Never

What do you think is the main reason for these experiences?⁶

[Original Source Question Text: What do you think is the main reason for these experiences?

Select all that apply.]

- Your Ancestry or National Origins
- Your Gender
- Your Race
- Your Age
- Your Religion
- Your Height
- Your Weight
- Some Other Aspect of Your Physical Appearance
- Your Sexual Orientation
- Your Education or Income Level
- Other (specify)

Branching logic: when "Other (specify)" selected, then:

Please specify.¹⁴

The next statements describe how others may treat you. How often do any of these happen to you when you go to a doctor's office or other health care provider?

You are treated with less courtesy than other people.⁷

[Original Source Question Text: You are treated with less courtesy than other people are]

- Never
- Rarely
- Sometimes
- Most of the time
- Always

You are treated with less respect than other people.⁷

[Original Source Question Text: You are treated with less respect than other people are]

- Never
- Rarely
- Sometimes
- Most of the time
- Always

You receive poorer service than others.⁷

[Original Source Question Text: You receive poorer service than others.]

- Never
- Rarely
- Sometimes
- Most of the time
- Always

A doctor or nurse acts if he or she thinks you are not smart.⁷

[Original Source Question Text: A doctor or nurse acts if he or she thinks you are not smart.]

- Never
- Rarely
- Sometimes
- Most of the time
- Always

A doctor or nurse acts as if he or she is afraid of you.⁷

[Original Source Question Text: A doctor or nurse acts as if he or she is afraid of you.]

- Never
- Rarely
- Sometimes
- Most of the time
- Always

A doctor or nurse acts as if he or she is better than you.⁷

[Original Source Question Text: A doctor or nurse acts as if he or she is better than you.]

- Never
- Rarely
- Sometimes
- Most of the time
- Always

You feel like a doctor or nurse is not listening to what you were saying.⁷

[Original Source Question Text: You feel like a doctor or nurse is not listening to what you were saying.]

- Never
- Rarely
- Sometimes
- Most of the time
- Always

The next set of questions asks about food and housing.

Lower food and housing security may increase the risk of negative health outcomes. Sharing your experiences about you or your family on this topic may help researchers learn how food and housing security influence health and well-being.

Within the past 12 months, we worried whether our food would run out before we got money to buy more.⁸

[Original Source Question Text: Within the past 12 months, we worried whether our food would run out before we got money to buy more.]

- Often true
- Sometimes true
- Never true

Within the past 12 months, the food we bought just didn't last and we didn't have money to get more.⁸

[Original Source Question Text: Within the past 12 months, the food we bought just didn't last and we didn't have money to get more.]

- Often true

- Sometimes true
- Never true

In the last 12 months, how many times have you or your family moved from one home to another?

Number of moves in past 12 months.⁹

[Original Source Question Text: In the last 12 months, how many times have you or your family moved from one home to another?]

_____ (integer value)

Think about the place you live. Do you have problems with any of the following (check all that apply)?¹⁰

[Original Source Question Text: Think about the place you live. Do you have problems with any of the following (check all that apply)?]

- Bug infestation
- Mold
- Lead paint or pipes
- Inadequate heat
- Oven or stove not working
- No or not working smoke detector
- Water leaks
- None of the above

The amount of stress you feel can lead to negative health outcomes. Sharing your experiences may help researchers identify common triggers that induce stress in individuals and ways to provide support for individuals and communities.

The next questions ask you about your feelings and thoughts during the last month. Please choose how often you felt or thought a certain way.

In the last month, how often have you been upset because of something that happened unexpectedly?¹¹

[Original Source Question Text: In the last month, how often have you been upset because of something that happened unexpectedly?]

- Never
- Almost Never

- Sometimes
- Fairly Often
- Very Often

In the last month, how often have you felt that you were unable to control the important things in your life?¹¹

[Original Source Question Text: In the last month, how often have you felt that you were unable to control the important things in your life?]

- Never
- Almost Never
- Sometimes
- Fairly Often
- Very Often

In the last month, how often have you felt nervous and “stressed”?¹¹

[Original Source Question Text: In the last month, how often have you felt nervous and “stressed”?]

- Never
- Almost Never
- Sometimes
- Fairly Often
- Very Often

In the last month, how often have you felt confident about your ability to handle your personal problems?¹¹

[Original Source Question Text: In the last month, how often have you felt confident about your ability to handle your personal problems?]

- Never
- Almost Never
- Sometimes
- Fairly Often
- Very Often

In the last month, how often have you felt that things were going your way?¹¹

[Original Source Question Text: In the last month, how often have you felt that things were going your way?]

- Never
- Almost Never

- Sometimes
- Fairly Often
- Very Often

In the last month, how often have you found that you could not cope with all the things that you had to do?¹¹

[Original Source Question Text: In the last month, how often have you found that you could not cope with all the things that you had to do?]

- Never
- Almost Never
- Sometimes
- Fairly Often
- Very Often

In the last month, how often have you been able to control irritations in your life?¹¹

[Original Source Question Text: In the last month, how often have you been able to control irritations in your life?]

- Never
- Almost Never
- Sometimes
- Fairly Often
- Very Often

In the last month, how often have you felt that you were on top of things?¹¹

[Original Source Question Text: In the last month, how often have you felt that you were on top of things?]

- Never
- Almost Never
- Sometimes
- Fairly Often
- Very Often

In the last month, how often have you been angered because of things that were outside of your control?¹¹

[Original Source Question Text: In the last month, how often have you been angered because of things that were outside of your control?]

- Never
- Almost never

- Sometimes
- Fairly often
- Very often

In the last month, how often have you felt difficulties were piling up so high that you could not overcome them?¹¹

[Original Source Question Text: In the last month, how often have you felt difficulties were piling up so high that you could not overcome them?]

- Never
- Almost Never
- Sometimes
- Fairly Often
- Very Often

Elements of religion and spirituality can affect health outcomes. Sharing your beliefs and experiences may help researchers better understand the effects of religion and spirituality on health and well-being.

The next questions ask about your spiritual life. Some questions use the word “God.” If it makes you more comfortable, you can replace that word with whatever you believe is spiritual, holy, or divine when answering.

How often do you experience the following:

I feel God’s (or a higher power’s) presence¹²

[Original Source Question Text: I feel God’s presence]

- Many times a day
- Every day
- Most days
- Some days
- Once in a while
- Never or almost never
- I do not believe in God (or a higher power)

I find strength and comfort in my religion¹²

[Original Source Question Text: I find strength and comfort in my religion]

- Many times a day
- Every day
- Most days
- Some days
- Once in a while
- Never or almost never
- I am not religious

I feel deep inner peace or harmony¹²

[Original Source Question Text: I feel deep inner peace or harmony]

- Many times a day
- Every day
- Most days
- Some days
- Once in a while
- Never or almost never

I desire to be closer to or in union with God (or a higher power)¹²

[Original Source Question Text: I desire to be closer to or in union with God]

- Many times a day
- Every day
- Most days
- Some days
- Once in a while
- Never or almost never
- I do not believe in God (or a higher power)

I feel God's (or a higher power's) love for me, directly or through others¹²

[Original Source Question Text: I feel God's love for me, directly or through others]

- Many times a day
- Every day
- Most days
- Some days
- Once in a while
- Never or almost never
- I do not believe in God (or a higher power)

I am spiritually touched by the beauty of creation¹²

[Original Source Question Text: I am spiritually touched by the beauty of creation]

- Many times a day
- Every day
- Most days
- Some days
- Once in a while
- Never or almost never

How often do you go to religious meetings or services?¹³

[Original Source Question Text: How often do you go to religious meetings or services?]

- More than once a week
- Once a week
- 1 to 3 times per month
- Less than once per month
- Never (or almost never)
- I am not religious

Having a preferred language that is not English can be a barrier to health care access, use of health care services, and understanding health-related information. Sharing your English-speaking abilities with us can help researchers understand the relationship between speaking English and health outcomes.

The following question asks if you speak any languages other than English at home.

Do you speak a language other than English at home?¹⁴

[Original Source Question Text: Does this person speak a language other than English at home?]

- Yes

Branching logic: when "Yes" selected, then:

Since you speak a language other than English at home, we are interested in your own thoughts about how well you speak English. Would you say you speak English...¹⁴

[Original Source Question Text: Since you speak a language other than English at home, we are interested in your own opinion of how well you speak English. Would you say you speak English...]

- Very well
- Well

All of Us Research Program

Participant Provided Information (PPI)

- Not well
- Not at all
- Prefer not to answer
- Don't know
- No
- Prefer not to answer

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 - a. Year of Original Source: 1992
 - b. Brief Description of Source: The Nurses' Health Study, led by researchers at Harvard University, is a study meant to assess and understand risk factors for major chronic diseases in women. Questionnaire-based methods have been developed to assess a variety of factors including diet and physical activity.
14. [California Health Interview Survey](http://healthpolicy.ucla.edu/chis/design/Pages/questionnairesEnglish.aspx). Los Angeles, CA: UCLA Center for Health Policy Research. Available from: <http://healthpolicy.ucla.edu/chis/design/Pages/questionnairesEnglish.aspx>
 - a. Year of Original Source: 2021
 - b. Brief Description of Source: The California Health Interview Survey (CHIS) is conducted on a continuous basis by researchers at the UCLA Center for Health Policy Research. Originally launched in 2001, it is the largest state-based phone and email administered survey in the U.S. and covers items related to a variety of health topics.