2021 MCBS Community Questionnaire MBQ-MOBILITY OF BENEFICIARIES

Variable Name	MR Screen Name	Question Type	Question Text/Description	Code List	Routing
			MOBILITY OF BENEFICIARIES QUESTIONNAIRE SPECIFICATIONS CRITERIA INTTYPE=ALL SPALIVE=1 SEASON=FALL SPPROXY=SP or PROXY Other: N/A PLACEMENT If INTTYPE in (C001, C004, C005), administer after CPS. If INTTYPE in (C002, C006), administer after NSQ. If INTTYPE in (C003), administer after HIQ.		
	BOX MBBEG	routing	GO TO MB1 - MTBLGTPL.		
MTBLGTPL	MB1	yes/no	My next questions are about [your/(SP)'s] travel activities and [your/his/her] health. Because of a health or physical problem, [have you/has (SP)] had trouble getting places, like the doctor's office, a supermarket, or a friend's house since (TODAY'S DATE - 12 MONTHS, MONTH AND YEAR)?	(01) YES (02) NO (-8) Don't Know (-9) Refused	MB2 - MREDTRAV
MREDTRAV	MB2	yes/no	Because of a health or physical problem, [have you/has (SP)] reduced [your/his/her] day-to-day travel since (TODAY'S DATE - 12 MONTHS, MONTH AND YEAR)?	(01) YES (02) NO (-8) Don't Know (-9) Refused	MB3 - MASKRIDE
MASKRIDE	MB3	yes/no	Because of a health or physical problem, [have you/has (SP)] asked others for rides since (TODAY'S DATE - 12 MONTHS, MONTH AND YEAR)?	(01) YES (02) NO (-8) Don't Know (-9) Refused	BOX MB1
	BOX MB1	routing	If the respondent ever reported that they don't drive, have never driven, or gave up driving (SAMPLE_PERSON.P_MGIVUPDR =1, 3, 4, or 5), go to MB6-MUSETRNS. Else go to MB5-MGIVUPDR.		
MGIVUPDR	MB5	yes/no	IDPORE FOR PROPER RESPONSE IF PROFERRY MORE THAN A VESIOR NO RESPONSE LISING PROPES	(01) YES (02) NO (03) DOESN'T DRIVE (DO NOT DISPLAY.) (04) HAS NEVER DRIVEN (05) GAVE UP DRIVING BEFORE (TODAY'S DATE - 12 MONTHS, MONTH AND YEAR) (-8) Don't Know (-9) Refused	(01) MB6 - MUSETRNS (02) MB4 - MLIMDRIV (03) MB6 - MUSETRNS (DO NOT DISPLAY.) (04) MB6 - MUSETRNS (05) MB6 - MUSETRNS (-8) MB4 - MLIMDRIV (-9) MB4 - MLIMDRIV

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Variable Name	MR Screen Name	Question Type	Question Text/Description	Code List	Routing
MLIMDRIV	MB4	yes/no	Because of a health or physical problem, [have you/has (SP)] limited driving to daytime since (TODAY'S DATE - 12 MONTHS, MONTH AND YEAR)? [PROBE FOR PROPER RESPONSE IF R OFFERS MORE THAN A YES OR NO RESPONSE, USING PROBES SUCH AS "Was this because of a health or physical problem" and "I just want to check whether this was before or after (TODAY'S DATE - 12 MONTHS, MONTH AND YEAR)".] [IF THE R DOES NOT DRIVE, BACK UP AND CHANGE THE RESPONSE TO THE PREVIOUS QUESTION.]	(01) YES (02) NO (03) DOES NOT DRIVE (DO NOT DISPLAY.) (-8) Don't Know (-9) Refused	MB6 - MUSETRNS
MUSETRNS	MB6	yes/no	Because of a health or physical problem, [have you/has (SP)] used a taxi or special transportation service since (TODAY'S DATE - 12 MONTHS, MONTH AND YEAR)? [EXPLAIN IF NECESSARY: A special transportation service may include a van or shuttle service for seniors or people with disabilities.]	(01) YES (02) NO (-8) Don't Know (-9) Refused	BOX MBEND
	BOX MBEND	routing	GO TO PVQ.		