

**Oklahoma State Department of Health
Community Telephone Survey
May 3, 1999 Tornadoes**

Interviewed by _____

Date of Interview ___/___/___

Area code and telephone number (_____) _____

Interview time _____

Interview

Hello, this is ___(NAME)___, with ___(ORGANIZATION)____. We are conducting a survey for the Oklahoma State Department of Health. We are calling people in the Oklahoma City area to gather information about the tornado that struck on May 3, 1999. We want to determine the proportion of people directly affected by the tornado, where they were when the tornado struck, the actions they took, and whether or not they were injured. We also want to inquire about changes in the overall physical and emotional health status of people in the community as a result of the tornado. Your phone number was randomly selected so that we may have an accurate representation of the people in your area. Your answers are confidential to the extent allowed by law.

(Questions A1 – A6 are to determine who will be interviewed)

- 1 Male
- 2 Female
- 3 No adult 18 or older in household – *(Thank, end interview)*
- 4 No adult 18 or older available – *(Set time to call back)*
- 5 (Refused) – *(Thank, end interview)*

A1. How many members of your household, including yourself, are aged 18 or older?

- 00 None - *(Thank, end interview)*
- 01 One – *(Ask to speak to him/her and skip to “READ” before A7:
If not available, set time to call back)*
- 02 –
- 03 *(Continue)*
- 04 (DK) *(Thank, end interview)*
- 05 (Refused) *(Thank, end interview)*

A2. How many of those adults are males, aged 18 or older? *(Open ended and code)*

- 0 None (Continue)
- 1 One (Continue)
- 2 Two (Continue)
- 3 Three (Continue)
- 4 Four (Continue)
- 5 Five (Continue)
- 6 Six (Continue)
- 7 Seven (Continue)
- 8 Eight or more (Continue)
- 9 (Refused) – (Thank, end interview)

A3. (If code “0-8” in A2, ask): How many are females who are aged 18 or older? (Open-ended and code)

- 0 None (Continue)
- 1 One (Continue)
- 2 Two (Continue)
- 3 Three (Continue)
- 4 Four (Continue)
- 5 Five (Continue)
- 6 Six (Continue)
- 7 Seven (Continue)
- 8 Eight or more (Continue)
- 9 (Refused) (Thank, end interview)

A4. (If code “1-8” in A2, ask): Of those men, who is the oldest man who presently lives in this household, who is aged 18 or older? Who is the next oldest man who presently lives in this household, who is aged 18 or older? (Open ended) (Allow eight responses) (Interviewer Note: Enter name or relationship, that is, Fred, brother, etc.)

Oldest Male: _____

2nd Oldest Male: _____

3rd Oldest Male: _____

4th Oldest Male: _____

5th Oldest Male: _____

6th Oldest Male: _____

7th Oldest Male: _____

8th Oldest Male: _____

A5. (If code “1-8” in A3, ask): Of those women, who is the oldest woman who presently lives in this household, who is aged 18 or older? Who is the next oldest woman who presently

lives in this household, who is aged 18 or older? (*Open ended*) (*Allow eight responses*)
(*Interviewer Note: Enter name or relationship, that is, Mary, sister, etc.*)

Oldest Female: _____

2nd Oldest Female: _____

3rd Oldest Female: _____

4th Oldest Female: _____

5th Oldest Female: _____

6th Oldest Female: _____

7th Oldest Female: _____

8th Oldest Female: _____

A6. Selected Respondent: The person in your household that I need to speak with is (*computer selects*). Is that you? (*If “No,” ask to speak to that person or set a time to call back*).

- 1 Male
- 2 Female

(INTERVIEWER NOTE: if selected person is other than person who answered the phone, repeat introduction paragraph.)

(READ) Your opinions are extremely important to this research. Your participation in this research, which means completing the telephone interview, is optional and involves minimal risks. You may experience flashbacks or feel bad. If this happens provisions can be made for you to speak with a professional counselor. Please feel free at any time to “pass” on ANY questions that make you uncomfortable or stop the interview. This survey will take about 15 minutes. If at any time during our conversation you would like to discuss this project or your rights as a participant with the State Health Department’s project manager, I can provide you with the phone number.

Are you willing to go ahead with the survey?

- 1 YES
- 2 NO (*Thank, end interview*)

A7. I need to confirm that you are 18 years of age or older, is that correct?

- 1 Yes (*Continue*)
- 2 No (*Go to A1*)

- 3 (DK) (Go to A1)
- 4 (Refused) (Go to A1)

A8. Were you living in the Oklahoma City area at the time of the May 3, 1999 tornadoes?

- 1 Yes (Skip to #1)
- 2 No (Continue)
- 3 (DK) (Thank, end interview)
- 4 (Refused) (Thank, end interview)

A9. Did you live in any of the Oklahoma City metro area counties at the time of the tornadoes? (Read responses)

- 17 Canadian
- 27 Cleveland
- 83 Logan
- 87 McClain
- 109 Oklahoma
- 125 Pottawatomie
- 997 No (Thank, end interview)
- 998 (DK) (Thank, end interview)
- 999 (Refused) (Thank, end interview)

1. At the time the tornadoes passed through Oklahoma on May 3rd, were you present in an area that was damaged by the tornadoes?

- 1 Yes (SKIP to #3)
- 2 No If not, why?
 - A Left an area that was damaged to escape the tornadoes (SKIP to #7)
 - B Was already in an area that was not damaged by the tornadoes (SKIP to #7)
 - C Was out of town (SKIP to #7)

2. Where were you when the tornado hit your area?

Location (specific address or cross streets): _____

- 1 In a home (check one in each of the 3 columns describing the home)

<input type="checkbox"/> My family home	<input type="checkbox"/> Single family	<input type="checkbox"/> Brick
<input type="checkbox"/> Other's home	<input type="checkbox"/> Duplex	<input type="checkbox"/> Wood/siding

- Apartment Stone/concrete
- Mobile home

4 Motor vehicle

This vehicle was a: Car

Pickup/Van/Sports Utility

Greater than 4 wheels (semi, etc.)

(SKIP to #7)

7 Outdoors

Were you: in a ditch

under a bridge

Other—specify:

Did you get out of a motor vehicle because of the tornado? Yes No

Did you leave a home or building to escape the tornado? Yes No

(SKIP to #7)

5 Storm shelter (*Check one in each column describing the shelter*)

Private

Above ground

Public—specify:

Below ground

6 Public/Commercial building (*not storm shelter*)—specify: _____

8 Other – Specify _____

(SKIP to #7)

10 DK/Don't remember

(SKIP to #7)

3. Was the structure you were in damaged or destroyed during the tornado? Yes No

IF YES, what best describes the structure damage

1 Completely collapsed

2 Some walls damaged and some standing

3 Roof missing

4 Roof damaged

5 Only windows broken

4. Which room or part of the structure were you in when the tornado hit?

1 Basement

2 Underground shelter

3 Hallway

4 Bathtub

5 Bathroom, but not in tub

- 6 Closet
- 7 Bedroom
- 8 Family/living room
- 9 Kitchen
- 10 Other-specify _____

5. What floor of the structure were you on?

- 1 Basement
- 2 1st Floor
- 3 2nd Floor
- 4 3rd Floor
- 5 4th Floor or higher

6. Were you injured (*Read all responses*):

- 1 Directly by the tornado
- 2 During search and rescue or leaving the scene
- 3 During clean-up
- 5 Suffered inhalation of dust/gas/fumes
- 6 Was not injured but suffered another medical condition
- 7 Injured after the tornado (*related to tornado*)
- 8 Injured preparing for the tornado
- 99 Was not injured (**SKIP to #9**)

7. Were you treated by a medical professional for your injuries? (***One response: Circle highest number***)

- 1 No
- 2 Yes - by doctor's office/clinic
- 3 Yes – emergency medical personnel at the scene or in the area
- 4 Yes – treated and released at a hospital
- 5 Yes – admitted to a hospital overnight

8. Did you “drive through” or “go to” any of the areas destroyed by the tornado? (***One response: Circle lowest number***)

- 1 Next day (May 4, 1999)
- 2 Within one week
- 3 Within two weeks
- 4 Within one month
- 5 Did not drive through or go to any of the areas destroyed

9. Were you involved in any of the community helping efforts after the tornado?

- 1 Yes

- 2 No
- 3 (DK/Don't remember)
- 4 (Refused)

10. What warnings/emergency alerts did you have of tornado activity in your area that evening? (*Circle all that apply*)

- 1 Saw tornado at distance
- 2 Weather changes suggestive of tornado
- 3 Heard on standard radio
- 4 Heard on weather band radio
- 5 Saw on television
- 6 Pager or phone
- 7 Heard by word of mouth
- 8 Heard siren
- 9 Didn't know ahead of time
- 10 Other *specify* _____

11. At the time of the tornado, where was the location of the storm shelter nearest to your home?

- 1 Shelter on home premises
- 2 Named a specific site (*name of site*) _____
- 3 Had a general idea
- 4 Didn't know/Not for sure
- 5 No shelter near home

12. Where is the location of the storm shelter nearest to your home now?

- 1 Shelter on home premises **(SKIP to #15)**
- 2 Named a specific site (*name of site*) _____
- 3 Had a general idea
- 4 Didn't know/ Not for sure
- 5 No shelter near home

13. In the event of an approaching tornado, how would you get to the nearest storm shelter?
(*Read responses*)

- 1 Walk
- 2 Drive < 1 mile
- 3 Drive 1-5 miles
- 4 Drive 5-10 miles
- 5 Drive > 10 miles
- 6 Don't know/Not for sure

7 No shelter near home

(Ask #14 and #15 for each item before going to the next)

14. Since the tornado, have you (Read A-D and code response)

Codes 1 Yes 3 (DK)
2 No 4 (Refused)

- A. Experienced ongoing problems from a physical injury or health condition caused by the tornado
- B. Had economic problems resulting from tornado damage such as loss of work time, damage to your home or car, etc.....
- C. Experienced emotional problems related to the tornado
- D. Experienced more fear of storms.....

15. Since the tornado, have any of your family members in the area (Read A-D and code response)

Codes 1 Yes 3 (DK)
2 No 4 (Refused)

- A. Experienced ongoing problems from a physical injury or health condition caused by the tornado
- B. Had economic problems resulting from tornado damage such as loss of work time, damage to your home or car, etc.....
- C. Experienced emotional problems related to the tornado
- D. Experienced more fear of storms.....

(READ) Now, we would like to ask you a few questions about your overall health.

16. In general, would you say your current health is? (READ 1-4)

- 1 Excellent
- 2 Good
- 3 Fair, or
- 4 Poor
- 5 (DK/Not sure)
- 6 (Refused)

17. Would you say your health is now better, worse, or about the same as compared to before the May 3rd, 1999 tornado?

- 1 Better
- 2 Worse
- 3 About the same
- 4 (DK/Not sure)
- 5 (Refused)

18. Prior to the May 3rd tornado, had you ever experienced a traumatic event such as:
(circle all that apply)

- 1 Serving in combat
- 2 Personally experiencing a natural disaster (flood, earthquake, hurricane, tornado, etc.)
- 3 Victim of domestic violence/abuse
- 4 Victim of assault
- 5 Direct Survivor of the April 19, 1995 bombing of the Murrah federal building
- 6 Other traumatic event
- 7 Never experienced traumatic event
- 8 (DK/Not sure)
- 9 (Refused)

19 Since the tornado, would you say that you have had alcoholic beverages to drink “more than”, “less than”, or “about the same” as before the tornado?

- 1 More
- 2 Less
- 3 About the same
- 4 (DK)
- 5 (Refused)

20. I am going to read a list of ways you may have felt. Please tell me how often you have felt this way DURING THE PAST WEEK. (Read and rotate A-J) Was that (Read 1-5).

- | | | |
|--------------|--------------------|--------------|
| <i>Codes</i> | 1 Most of the time | 4 Rarely, or |
| | 2 Often | 5 Never |

3 Some of the time

6 (DK)

7 (Refused)

- A. You were bothered by things that usually don't bother you _____
- B. You did not feel like eating; your appetite was poor _____
- C. You had trouble keeping your mind on what you were doing _____
- D. You felt depressed _____
- E. You felt that everything you did was an effort..... _____
- F. You felt hopeful about the future _____
- G. You felt fearful _____
- H. Your sleep was restless..... _____
- I. You were happy _____
- J. You could not "get going" _____

21. As a result of the tornado, would you say that you are experiencing:

- 1 A lot of stress
- 2 A moderate amount of stress
- 3 Relatively little stress, OR
- 4 Almost no stress at all
- 5 (DK/Not sure)
- 6 (Refused)

22. Have you sought professional help for any personal or emotional problems since the tornado?

- 1 Yes
- 2 No
- 3 (DK)
- 4 (Refused)

23. Have you sought other (not professional) help to control or reduce the amount of stress in your life since the tornado?

- 1 Yes
- 2 No
- 3 (DK)
- 4 (Refused)

24. Since the tornado, how often (*read and rotate A-J*)
Would you say (*read 1-5*)

- | | | |
|--------------|----------------|-----------------|
| <i>Codes</i> | 5 Very often | 1 Never |
| | 4 Fairly often | 6 (DK/Not sure) |
| | 3 Sometimes | 7 (Refused) |
| | 2 Almost never | |

- A. Do you keep remembering the tornado even when you don't want to?....._____
- B. Do you have dreams or nightmares about the tornado?_____
- C. Do you ever suddenly act or feel as though the tornado was happening again, even though it wasn't?_____
- D. Have you avoided activities or situations that might have reminded you of the tornado?_____
- E. Do you lose interest in doing things that used to be important to you?_____
- F. Do you find you no longer had loving or warm feelings toward others?....._____
- G. Do you feel isolated or distant from other people?_____
- H. Do you begin to feel that there was not point in thinking about the future anymore?_____
- I. Do you act unusually irritable or lose your temper?_____
- J. Do you become jumpy or easily startled so that ordinary noises or movements would make you jump?....._____

25. Since the tornado, would you say you have spent “more,” “less,” or “about the same” amount of time visiting with family members who do not live with you, than before the tornado.

- 1 More
- 2 Less
- 3 About the same
- 4 (DK/Not sure)
- 5 (Refused)

26. Since the tornado, would you say you have spent more, less, or about the same amount of time visiting with friends and acquaintances, than before the tornado?

- 1 More
- 2 Less
- 3 About the same
- 4 (DK/Not sure)
- 5 (Refused)

27. Would you strongly agree, somewhat agree, somewhat disagree or strongly disagree that your religious faith helps you through difficult times?

- 1 Strongly agree
- 2 Somewhat agree
- 3 Somewhat disagree
- 4 Strongly disagree
- 5 (DK/Not sure)
- 6 (Refused)

28. Since the tornado, how often do you feel (*read and rotate A-C*)?
 Would you say (*read 1-5*)?

- Codes*
- 1 All of the time
 - 2 Most of the time
 - 3 Some of the time
 - 4 A little of the time, or
 - 5 None of the time
 - 6 (DK/Not sure)
 - 7 (Refused)

- A. Nervous..... _____
- B. Restless or fidgety..... _____
- C. Hopeless..... _____

29. We may want to contact you again in the future to see how your opinions have changed. Would you be willing to give us your name and address so that we may do that?

- 1 Yes
- 2 No
- 3 (DK)
- 4 (Refused)

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____

(DEMOGRAPHICS)

D1. Please tell me your age (*Open ended – actual age*) _____
00 (Refused)
100 99+

D2. What is your race? Are you white, black, Native American, or some other race?

White
Black
Native American
Asian
Pacific Islander
Other _____

D3. Are you of Hispanic ethnicity?

1 Yes
2 No
3 (DK/Not sure)
4 (Refused)

D4. What is your marital status?

1 Single/never married
2 Married
3 Separated
4 Divorced
5 Widowed
6 (Refused)

D5. How many children under 18 live in your household? (*code--actual number*) ____--____

00 None
99 (Refused)

D6. Do you have any kind of health care coverage, including health insurance, prepaid plans such as HMOs, or government plans such as Medicare?

- 1 Yes
- 2 No
- 3 (DK)
- 4 (Refused)

D7. How many different phone lines do you have in your household? We need the number of different phone NUMBERS assigned to your household, NOT the number of phones?

- 1 One
- 2 Two
- 3 Three
- 4 Four
- 5 Five or more
- 6 (DK)
- 7 (Refused)

D8. What is the highest grade or year of school you have completed? (*Open ended and code*)
(*If necessary, read 1-6*)

- 1 Never attended school or kindergarten only
- 2 Elementary school (Grades 1-8)
- 3 Some High School (Grades 9-11)
- 4 High School or GED (Grade 12)
- 5 College, 1 year to 3 years
- 6 College graduate or more
- 7 (Refused)

D9. Are you currently (*read 1-8*)?

- 1 Employed for wages or a salary
- 2 Self-employed
- 3 Been out of work for less than 1 year
- 4 Been out of work for more than 1 year
- 5 A homemaker
- 6 A student
- 7 Retired, or
- 8 Unable to work
- 9 (Refused)

D10. Which of the following categories best describes your annual household income, before taxes, from all sources? Is it (*read 1-8*)?

- 1 Less than \$10,000
- 2 \$10,000 - \$15,000

- 3 \$15,000 - \$20,000
- 4 \$20,000 - \$25,000
- 5 \$25,000 - \$35,000
- 6 \$35,000 - \$50,000
- 7 \$50,000 - \$75,000
- 8 \$75,000 or more
- 9 (DK)
- 0 (Refused)

P1. Please tell me whether you would support the following tornado-preparedness and prevention activities? (*Read A - H*) (*Code to side of each question*)

- | | | |
|--------------|-------|-------------|
| <i>Codes</i> | 1 Yes | 3 (DK) |
| | 2 No | 4 (Refused) |

- A. Designate more public storm shelters in your area
- B. Using tax dollars to build public storm shelters.
- C. Changing building codes to require safe rooms in construction of new homes and businesses.
- D. Using tax dollars to subsidize the construction of safe rooms in homes and businesses.
- E. Legislation requiring underground storm shelters in all mobile home parks.....
- F. Legislation requiring storm shelters/safe rooms in apartment buildings
- G. Extending the warning sirens to areas where they are not present.....
- H. Using tax dollars to provide low-cost severe weather warning radios to homes or businesses.
- I. Conduct individual safety education programs in communities
- J. No efforts are needed. Seeking a safe place inside my home is enough protection.....

(*READ*) We appreciate your helping us determine the opinions of people in Oklahoma. We realize that these may have been difficult time for some people who may need help. We can provide you with two phone numbers if you or someone you know are needing help. Would you like either of the numbers?

- 1 Yes
- 2 No
- 3 (DK)

4 (Refused)

You may call *Project Heartland* 24 hours a day. That number is (405) 848-7070.

You may also call *Catholic Charities* at (405) 523-3036