Disentangling the role of socioeconomic status (SES) disparities in health and health care is critical to understanding race/ethnic health disparities. Uniformity in collecting SES and other sociodemographic variables would enhance our ability to compare results across studies. The measurement and methods core has developed a multidimensional framework of socioeconomic status (SES), based on a review of survey questions from several external and internal sources. This framework is a "work in progress".

<table>
<thead>
<tr>
<th>Concept</th>
<th>Key Domains</th>
<th>Items Available</th>
</tr>
</thead>
<tbody>
<tr>
<td>Race/ ethnicity (self identified)</td>
<td>• Main group or multiethnic&lt;br&gt;• If Latino/Hispanic or Asian query which subgroup they identify with&lt;br&gt;• If multiethnic, query which main group they identify with</td>
<td>Yes</td>
</tr>
<tr>
<td>Place of birth, generation</td>
<td>• Country of origin of self&lt;br&gt;• Country of origin of parents and paternal and maternal grandparents&lt;br&gt;For those not born in the U.S.:&lt;br&gt;• Years living in the U.S.&lt;br&gt;• Age first immigrated&lt;br&gt;• Main reason for immigrating</td>
<td>Yes</td>
</tr>
<tr>
<td>Language and language proficiency</td>
<td>• Current English language proficiency&lt;br&gt;• Main language (language spoken growing up)&lt;br&gt;For persons whose main language is not English:&lt;br&gt;• Current &quot;other&quot; language proficiency&lt;br&gt;• Literacy&lt;br&gt;• Health literacy&lt;br&gt;• Numeracy</td>
<td>Yes</td>
</tr>
<tr>
<td>Acculturation and enculturation (for immigrants)</td>
<td>• Language acculturation&lt;br&gt;• Language preference for receiving medical care&lt;br&gt;• Identification with old/new culture&lt;br&gt;• Language preference for receiving written health information</td>
<td>Yes</td>
</tr>
<tr>
<td>Education</td>
<td>• Highest grade or year&lt;br&gt;• Highest degree (including GED)&lt;br&gt;• Vocational or technical training&lt;br&gt;• Location of education&lt;br&gt;• Point in time when education obtained&lt;br&gt;• Age received final education&lt;br&gt;• Quality of education&lt;br&gt;• Lifecourse education (education of parents)</td>
<td>Yes</td>
</tr>
<tr>
<td>Family and household configuration</td>
<td>• Marital status&lt;br&gt;• Family and household configuration&lt;br&gt;• More than one family within a structure/home</td>
<td>Yes</td>
</tr>
<tr>
<td>Financial status</td>
<td>• Annual household before taxes&lt;br&gt;• Number of people supported by income&lt;br&gt;• Income instability&lt;br&gt;• Wealth / assets&lt;br&gt;• Poverty – formal receipt of assistance&lt;br&gt;• Poverty – defined by cutoff point of income and family size</td>
<td>Yes</td>
</tr>
</tbody>
</table>
| Financial strain | • Global financial strain  
• Basics financial strain – insufficient money for food, rent/house payment, utilities  
• Put off medical care due to financial strain  
• Put off filling prescriptions due to financial strain  
• Lifecourse financial strain | Yes |
|---|---|
| Subjective social status | • Subjective status compared to community  
• Subjective status compared to U.S.  
• Lifecourse: subjective status compared to childhood  
• For immigrants: subjective status in country of origin | Yes |
| Health Insurance | • Type of insurance  
• Deductible / co-pay  
• Covered services | Under development |
| Occupation | • Current occupation(s)  
• Typical occupation if >1  
• Past occupation(s)  
• Stability of occupation(s)  
• Occupational status  
• Occupational exposure to toxins  
• Occupational autonomy  
• Occupational safety (% job related injuries by occupation) | Under development |
| Employment | • Employed (full time, part time, unemployed)  
• Number of jobs  
• Employment schedule (days, nights, erratic/stable)  
• Employment stability  
• Retired/disabled (not in job market) | Under development |