

NATIONAL BENEFICIARY SURVEY FINAL ROUND 3 QUESTIONNAIRE

December 1, 2006

NATIONAL BENEFICIARY SURVEY

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SECTION A: SCREENER

PRELOADED INFORMATION

S1	(A01_a)	CLUSTERED SAMPLE
٠.	(, , , , , , , , , , , , , , , , , , ,	YES = 01
		NO = 02 (00, if you prefer) FYI: ONLY NON CLUSTERED = OUTCOMES ONLY
PART	ICIPANTS	. (22, 72.1 2.2)
S2	(A01_b)	SAMPLE GROUP
	. – ,	S2 = 01 – Any first time completers (Round 3 beneficiaries, Round 1 longitudinal not responding to
		any prior rounds, Round 2 longitudinal not responding to prior round)
		S2 = 02 - Longitudinal who completed the prior round (Round 1 Longitudinal Participants who
		responded to Round 1 and Round 2, Round 2 Longitudinal who responded to Round 2,
		and Round 1 Longitudinal who responded to Round 2 but not Round 1)
		S2 = 04 – Round 1 longitudinal who completed Round 1, but not Round 2.
S3	(A01_c)	REGION – VALUES = $01 - 08$, where Region 8 = unclustered sample, that is where S1 = 02
S4	(A01_d)	PSU – VALUES = 01010 – 55018; PSU=0 is unclustered sample, aka Region 8
S5	(A01_e)	SDATE (DATE SAMPLE PULLED – believed to be June 30, 2005)
S6	(A02)	ROUND OF DATA COLLECTION
		Round 1 = 01
		Round $2 = 02$ Round $3 = 03$ (This is Round 3)
		Round 4 = 04
S7	(A03)	PHASE - VALUES = 1, 2, 3 (based on state of residence at time of sample selection – Frank/Nuria
	(* 100)	to set this value)
S8	(A04_a)	FULLNAME (original – may be updated in another block: Current Full Name)
S9	(A04_b)	FIRST NAME (original – may be updated in another block: Current First Name)
S10	(A04_c)	LASTNAME (original – may be updated in another block: Current Last Name)
S11	(A04_d)	BIRTHDATE (original – may be updated in another block: Current Birth Date)
		T AGE: IF A71 = 02 OR 03, USE A68 OR A69 TO CALCULATE CURRENT AGE
S12	(A04_e)	GENDER
S13	(A04_f)	BSTATUS (Benefit Type)
		BSTATUS = 01 – SSI ONLY BENEFITS BSTATUS = 02 – SSDI ONLY BENEFITS
		BSTATUS = 02 - SSDI ONLY BENEFITS BSTATUS = 03 - CONCURRENT (BOTH SSI AND SSDI) BENEFITS
S14	(A04_g)	SSIAGE (from SSI records –age first received SSI benefits)
S15	(A04_h)	TSTATUS (TICKET STATUS AS OF DATE SAMPLE PULLED)
•	(, , , , , , , , , , , , , , , , , , ,	TSTATUS = 01 PARTICIPANT
		TSTATUS = 02 NONPARTICIPANT
S16	(A04_I)	LOCALPAA (LOCAL PROTECTION & ADVOCACY GROUPS) (based on state of residence at
	(A67a)	
S17	(A04_j)	ENSAMPLE (EN TICKET ASSIGNED TO AT TIME SAMPLE DRAWN)
S18	(A04_k)	STATE MED (STATE NAME FOR MEDICAID) (based on state of residence at A67a)
S19	(A04_I)	VRNAME (STATE NAME FOR VRA) (based on state of residence at A67a)
S20	(A04_m)	Sample Member's Address at time sample was drawn (may be updated in Section A)
S21	(A04_n)	Sample Member's Phone Number at time sample was drawn FULL NAME
S22 S23	_	PHONE NUMBER
S24	_	ADDRESS 1, ADDRESS 2, CITY, STATE, ZIP
S25		ETER NAME – RETAIN SAMPLE MEMBER PHONE NUMBER ASSOCIATED WITH INTERPETER.
3_0		
FIXE		ec is BSTATUS=01,03 and E3=missing in R1 then FIXE2=01
		ec is AGE<25 and SSIAGE<=22 and E12=missing in R1 the FIXE11=01 ec is BSTATUS= <i>02,03</i> and E15=missing in R1 then FIXE14=01
		ec is TSTATUS= 02,03 and E13=missing in R1 then FIXE14=01 ec is TSTATUS= 01 and E21=00,d,r and E22=00,d,r and E24=missing in R1 then FIXE23=01
	•	

RTYPE: Set at A110 or A110a.

PROGRAMMER: INSTITUTE A PARALLEL BLOCK THAT ALLOWS THE INTERVIEWER TO SWITCH

RESPONDENT FROM SAMPLE MEMBER TO PROXY OR FROM PROXY TO SAMPLE MEMBER AT ANY POINT IN THE INTERVIEW. UPDATE RTYPE BASED ON THE PARALLEL

BLOCK.

PROGRAMMER: A CURRENT CONTACT BLOCK WILL STORE ANY UPDATES TO S8, S9, S10, S11, S20, and

S21. UPDATES TO THE OTHER CURRENT CONTACT BLOCK CAN COME FROM THE

SCREENER OR LOCATING.

PROGRAMMER: STORE UPDATED NAME, ADDRESS, AGE, PROXY, ETC INFORMATION IN ADDRESS

UPDATE BLOCK OR NAME UPDATE BLOCK.

(All)

A0. CALL SCREEN. PROGRAMMER, DISPLAY: INTERVIEWER: YOU ARE CALLING...(ONE ONLY)
NOTE: 01, 04, 07 THROUGH 15 ARE SET IN OVERNIGHT PROCESSING. 02, 03, 05 AND 06 WOULD
BE IN THE FRONT END FOR THE INTERVIEWER TO SELECT.

	SITUATION	DISPLAY, CALLING FOR	GO ТО
01	NEW SCREENER FOR NAME	CALL TO {NAME}	A1
02	CATI CALL-IN	{NAME} CALLING IN	A11
03	CAPI INTERVIEW	{NAME – CAPI}	A64
04	CALL NAME AFTER REMAIL	{NAME , AFTER REMAIL}	A1
05	RELAY CALL IN	{NAME} CALLING IN – RELAY	A11
06	TTY CALL IN	{NAME} CALLING IN – TTY	A11
07	CALL NAME USING RELAY	{NAME} – RELAY	A10
08	CALL NAME USING TTY	{NAME} – TTY	A10
09	CALL NAME USING AMPLIFIER	{NAME} – AMPLIFIER	A1
10	CALL TO IDENTIFIED PROXY	PROXY NAME	A56
11	CALLBACK TO PROXY AFTER REMAIL	PROXY NAME	A56
12	INFORMANT/PROXY CALL IN		A11
13	CALL TO NEW PROXY	PROXY NAME	A56
14	CALL INTERPRETER	INTERPRETER NAME	A8
15	CALL TO NEW / UNNAMED INTERPRETER	INTERPRETER NAME	A4b

CALL TO RESPONDENT

(A0 = 01, 04, OR 09)
A1. Hello, my name is _____, calling on behalf of the Social Security Administration. May I please speak with {NAME}?

INTERVIEWER: We are not selling anything or asking for a contribution.

SPEAKING	01	(A10)
WANTS MORE INFORMATION	02	
{NAME} COMES TO PHONE	03	(A10)
CALL BACK LATER	04	SET A100 = 01 (A100)
{NAME} MOVED	05	(A30)
POSSIBLE PARTICIPATION PROBLEM	06	(A13)
HOSPITALIZED	07	(A27a)
{NAME} DECEASED	80	(A103a)
{NAME} INCARCERATED	09	SET A103 = 01(A103)
LANGUAGE BARRIER (NOT SPANISH)	10	(A3)
INSTITUTIONALIZED	11	(A27a)
MILITARY DUTY	12	SET A103 = 02 (A103)
SWITCH TO AMPLIFIER / CONTINUE	13	(A10)
NO SUCH PERSON AT THIS NUMBER	14	SET A102 = 01 (A102)
OTHER: SUPERVISOR REVIEW NEEDED	15	SET A106 = 05 (A106)
HUNG UP DURING INTRODUCTION	16	SET STATUS = 640 (END)
UNAVAILABLE DURING FIELD PERIOD	17	SET A104 = 06 (A104)
LIVING OUTSIDE USA	18	SET A103 = 03 (A103)
REFUSED	r	SET A105 = 02 (A105)

REQUESTS INFORMATION

(A1=02)

A2. Social Security recently sent {NAME} a letter saying that we would be calling to ask {him/her} to participate in an important national health study we are conducting for them. I work for Mathematica Policy Research, a nationally recognized research company based in Princeton, New Jersey. We are conducting a scientific study. We are not selling anything or asking for contributions. [IF S2 = 02 or S2=04, ADD: {NAME} participated in this study previously and we are calling to ask for {his/her} help again.]

NAME SPEAKING	01	(A10)
{NAME} COMES TO PHONE	03	(A10)
CALL BACK LATER		SET A100 = 01 (A100)
{NAME} MOVED	05	(A30)
POSSIBLE PARTICIPATION PROBLEM	06	(A13)
HOSPITALIZED	07	(A27a)
{NAME} DECEASED	80	(A103a)
{NAME} INCARCERATED	09	SET A103 = 01 (A103)
LANGUAGE BARRIER (NOT SPANISH)	10	
INSTITUTIONALIZED	11	(A27a)
MILITARY DUTY	12	SET A103 = 02 (A103)
SWITCH TO AMPLIFIER / CONTINUE	13	(A10)
NO SUCH PERSON AT THIS NUMBER	14	SET A102 = 01 (A102)
OTHER: SUPERVISOR REVIEW NEEDED	15	SET A106 = 05 (A106)
HUNG UP DURING INTRODUCTION	16	SET STATUS = 640 (END)
UNAVAILABLE DURING FIELD PERIOD	17	SET A104 = 06 (A104)
LIVING OUTSIDE USA	18	SET A103 = 03 (A103)
DID NOT RECEIVE LETTER	19	A22
REFUSED	r	SET A105 = 02 (A105)

LANGUAGE BARRIER

(A1 = 10) OR (A2 = 10)A3. Can someone there speak English? CALL BACK LATER 02 SET A100 = 09 (A100) REFUSED/HUNG UP......r SET A106 = 01 (A106) POSSIBLE INTERPRETER COMES TO PHONE (A3 = 01)A4. _____, calling on behalf of the Social Security Administration. Social Security recently sent {NAME} a letter saying {he/she} was selected to participate in an important health survey we are conducting for them. It is called the National Beneficiary Survey. We are looking for someone who is 18 years or older to help {him/her} by interpreting the interview for us. Are you 18 years of age or older? YES 01 (A4b) NO 00 REFUSED/HUNG UP......r SET A106 = 01 (A106) (A4 = 00)A4a. Is there someone else who is 18 years or older who could come to the phone and help with the interview? YES, PERSON COMES TO PHONE 01 CALL BACK LATER 02 (A6) REFUSED/HUNG UP...... r SET A106 = 01 (A106) (A0 = 15) OR (A4 = 01) OR (A4a = 01)IF (A0=15) or (A4a=01) FILL {Hello, my name is _ _____, calling on behalf of the Social Security A4b. Administration. Social Security recently sent {NAME} a letter saying {he/she} was selected to participate in an important health survey we are conducting for them. It is called the National Beneficiary Survey. We are looking for an interpreter who is 18 years or older to help {him/her} with the interview.} Would you be able to help {NAME} by interpreting the interview? PROBE: We are not selling anything or asking for contributions. YES 01 CALL BACK LATER 02 (A6) (A27a) MILITARY DUTY 10 SET A103 = 02 (A103) NO SUCH PERSON AT THIS NUMBER....... 11 SET A102 = 01 (A102) OTHER: SUPERVISOR REVIEW NEEDED...... 12 SET A106 = 05 (A106) UNAVAILABLE DURING FIELD PERIOD 13 SET A104 = 06 (A104)

REFUSED r SET A105 = 02 (A105)

REQUESTS IN-PERSON INTERVIEW 15 (A39)

(A4b = 0	01)
A5.	If {NAME} is available and you are ready to interpret, we can begin now. If you or {NAME} get tired or need a break <u>at any time</u> , please tell me and we will call back later to finish the interview.
	CONTINUE
	CALL BACK LATER
	INTERPRETER REFUSED r SET A105 = 02 (A105)
(A4a = 0)	2) OR (A4b = 02) OR (A5 = 01 OR 02)
A6.	{IF A5 = 01 DISPLAY Before we begin, please tell me <u>your</u> name.}
	{IF A4a = 02 DISPLAY Please tell me that person's name so we can ask for them when we call back later / IF A5 = 02 OR A4b = 02 DISPLAY: Please tell me your name so we can ask for you when we call back later}. PROBE: IF PERSON IS RELUCTANT TO GIVE NAME, SAY: The first name is all we need. IF NAME IS REFUSED, CODE AS REFUSED AND CONTINUE
	FIRST, MIDDLE, LAST
	DON'T KNOW d
	REFUSEDr
	NEI GOED
	PROGRAMMER: STORE INTERPRETER NAME IN S25 AND LOCATOR
$(\Lambda 6 - \Lambda)$	NSWER OR r)
A7.	And, what is {IF A5 = 01 OR 2) OR (A4b = 02) FILL your / IF A4a = 02 FILL their} relationship to {NAME}?
	{NAME'S} SPOUSE
	NAME'S} MOTHER 02
	{NAME'S} FATHER
	{NAME'S} CHILD
	GRANDPARENT OF {NAME}
	BROTHER/SISTER (NATURAL/STEP) OF {NAME} 06
	AUNT/UNCLE OF {NAME}
	OTHER RELATIVE
	NOT RELATED
	STAFF AT RESIDENCE
	DON'T KNOW d
	REFUSEDr
	NSWER OR d OR r)
A7a.	PROGRAMMER:
	IF A5 = 01 (CONTINUE)
CALLB	ACK TO NAMED INTERPRETER
(A0=14)	
A8.	Hello, my name is, calling on behalf of the Social Security Administration. May I
710.	please speak to {INTERPRETER'S NAME}?
	PROBE: We are not selling anything or asking for contributions.
	ODE AVINO 04
	SPEAKING
	INTERPRETER COMES TO PHONE
	CALL BACK LATER
	HUNG UP DURING INTRODUCTION
	INTERPRETER REFUSED r SET A105 = 02 (A105)

(A8 = 01)	OR 02)		
A9.	{IF A8 = 02 DISPLAY: Hello, my name is,	callin	ng on behalf of the Social Security
	Administration.} When we spoke with you recently, you said this	would	be a good time for you to interpret
	the National Beneficiary Survey for {NAME}. Are you and {NAME}	ready	to begin?
	PROBE: If you or {NAME} get tired or need a break at any time, pl	ease	tell me and we will call back later to
	finish the interview.		
	YES, CONTINUE	01	
	CALL BACK LATER	03	SET A100 = 03 (A100)
	HUNG UP DURING INTRODUCTION	04	SET STATUS = 640 (END)
	INTERPRETER REFUSED	05	
	SET A105 = 02 (A105)		
_	NG TO NAME OR INTERPRETER / NAME OR INTERPRETER O	OME	S TO PHONE / TO NAME AFTER
REMAIL	-		
(A0 = 07)	OR 08) OR (A1 = 01, 03 OR 13) OR (A2 = 01, 03, OR 13) OR (A7a = 01)	OR (49 = 01)
À10.	{PROGRAMMER, IF A7a = 01 DISPLAY "Please tell {NAME} that I	,	,
			, calling on behalf of the

PROBE: We are not selling anything or asking for a contribution.

beneficiaries.]

The interview {IF A0 = 08 FILL will take around 2 - 3 hours because we are using TTY / IF A0 = 07 FILL will take around 2 - 3 hours because we are using Relay. / IF (A0 = 04) OR (A1 = 01, 03 OR 13) OR (A2 = 01 OR 03 OR 13) FILL: will take between 45 and 60 minutes.} DISPLAY FOR ALL In appreciation for your time, we will mail you a check for \$10.00 when we finish the interview. The questions are easy. If you get tired or need a break <u>at any time</u>, please tell me and we will call back later to finish the interview. Let's start now.

Social Security Administration.} Recently, Social Security sent you {PROGRAMMER IF A0 = 04 USE another} a letter explaining an important survey we are conducting for them. {IF A2 = 01 BEGIN HERE} The National Beneficiary Survey is about your health, daily activities, any jobs you may have, and any Social Security programs and services you may use. Congress requires that Social Security conduct this survey. [IF S2 = 01: I'm calling to ask you to participate. The information you and other participants give us will be used to help evaluate Social Security's programs for disability beneficiaries.] [ELSE IF S2=02 or S2=04 DISPLAY: You participated in this study previously and we are calling to ask for your help again The info you and other participants give us will be used to help evaluate Social Security programs for disability

CONTINUE 01 {NAME} WILL CALL MPR 02 CALL BACK LATER 03	
DID NOT RECEIVE LETTER/DOES NOT	
RECALL LETTER 04	(A20)
REQUESTS PROXY	(A39)
REQUESTS IN-PERSON INTERVIEW 06	(A39)
POSSIBLE PARTICIPATION PROBLEM 07	(A13)
REFUSEDr	(IF A1 = 01, 03, 13 OR
	A2 = 01, 03, A13A; OR A0 = 07, 08, 09
	SET A105 = 01 (A105) / IF A7a = 01 OR
	A9 = 01 SET A105 = 02 (A105)

NAME OR UNKNOWN INFORMANT CALLS IN

	05, OR 06) INTERVIEWER: CODE BASED ON SUPERVISOR INS	STRU	JCTION.
	{NAME}	. 02 . 03	(A13a)
(A11 = 0)	1, 02, OR 03)		
	Hello, my name is I'll I Survey is about your health, daily activities, and any justices and Security programs and services. Congress required information you and other participants give us will be used is ability beneficiaries.	obs y Juires	ou might have. It also asks about your use of that Social Security conduct this survey. The
	The interview {PROGRAMMER, IF A11 = 01 FILL will will take around 2 - 3 hours because we are using T because we are using Relay.} In appreciation for your finish the interview. The questions are easy. If you go we will call back later to finish the interview. Let's start	TY / r time et tire	IF A11 = 03 FILL will take around 2 - 3 hours e, we will mail you a check for \$10.00 when we
	CONTINUEWANTS TO SCHEDULE INTERVIEW		` ,
	NEEDS PROXY		,
	NEEDS IN-PERSON POSSIBLE PARTICIPATION PROBLEM		
	REFUSED		
DIFFICU	JLTY PARTICIPATING (SPEAKING WITH NAME / INF	ORN	IANT / UNKNOWN PROXY WHO CALLS IN)
(A1 = 06) A13.) OR (A2 = 06) OR (A4b = 05) OR (A10 = 07) OR (A11 = 04) INTERVIEWER: WHO ARE YOU SPEAKING WITH?) OR	(A12 = 05)
	{NAME} / INTERPRETERINFORMANT/POSSIBLE PROXY		

(A11 = 04) OR (A13 = 01 OR 02)

A13a. **INTERVIEWER:** IF BARRIER ALREADY STATED, CODE RESPONSE THEN CONFIRM BY READING APPROPRIATE CATEGORY BELOW.

{PROGRAMMER: IF A11 = 04, USE: PROBE: Thank you very much for calling and offering to help.

IF NEEDED: What problem does {NAME} have that might prevent {him/her} from participating for {himself/herself}?

IF (A1 = 06) OR (A2 = 06) OR (A4b = 05) OR (A10 = 07) OR (A12 = 05) FILL: PROBE: Why {IF A13 = 01 FILL would you/ IF A13 = 02 FILL would {NAME}} have a problem participating in the survey?

INTERVIEWER: PROBE FOR DON'T KNOW. IF MORE THEN ONE PROBLEM, PROBE FOR THE MAIN PROBLEM.

HEARING DIFFICULTY	01	
SPEECH DIFFICULTY	02	
COGNITIVE BARRIER	03	(A46)
PHYSICAL BARRIER	04	
INCARCERATED	06	SET A103 = 01 (A103)
INSTITUTIONALIZED	07	(A27a)
HOSPITALIZED	80	(A27a)
DECEASED		
SERVING IN MILITARY	10	SET A103 = 02 (A103)
LIVING OUTSIDE USA	11	SET A103 = 03 (A103)
DON'T KNOW	d	
REFUSED	r	SET A105 = 02 (A105)

(A13a = 01, 02, 04, OR d)

A14. [IF S2 = 01 DISPLAY: Recently, Social Security sent {IF A13 = 01 FILL you / IF A13 = 02 FILL {NAME} a letter saying {IF A13 = 01 FILL you were/ IF A13 = 02 FILL {him/her} he/she was} selected to take part in an important health survey we are conducting for them.} ELSE IF S2 = 02 or S2=04 DISPLAY {you/NAME} participated in this study previously and we are calling to ask for {his/her} help again. The information {HE/SHE/you} and other participants give us will be used to help evaluate Social Security's programs for disability beneficiaries.} {IF A12 = 05 START HERE} We would like {IF A13 = 01 FILL you to have / IF A13 = 02 FILL {NAME} to have} the chance to answer the questions for {IF A13 = 01 FILL yourself / IF A13 = 02 FILL himself / herself} if at all possible. I'm going to read some ways that we can arrange for {IF A13 = 01 FILL you / IF A13 = 02 FILL {NAME}} to take part in the study. PROBE: What would work best?

INTERVIEWER: READ LIST AND CODE ONE ONLY. IF MORE THAN ONE MENTIONED, ASK WHAT IS <u>EASIEST</u> FOR {NAME}.

	We can break the interview into a few short calls to		
	$\{IF\ A13 = 01\ FILL\ you\ /\ IF\ A13 = 02\ FILL\ \{NAME\}$	01	(A64)
	We can use Relay or TTY for the interview	02	(A16)
	{PROGRAMMER, DISPLAY 03 ONLY IF A13a = 01}		
	I can switch to a phone amplifier now	03	(A64)
	{PROGRAMMER, DISPLAY 04 ONLY IF A13a = 01}		
	We can call later using a phone amplifier	04	SET A100 = 06 (A100)
	{PROGRAMMER, DISPLAY 05 ONLY IF IN		
	CLUSTERED SAMPLE S1 = 01 We could send		
	an interviewer to {{IF A13 = 01 FILL your /		
	IF A13 = 02 FILL {his/her} home	05	(A42)
	{PROGRAMMER DISPLAY 06 ONLY IF A13 = 02}		
	INFORMANT OFFERS TO BE PROXY	06	(A39)
	{PROGRAMMER, DISPLAY 07 ONLY IF SAMPLE		
	TYPE = UNCLUSTERED, S1 = 02 AND		
	A13 = 01} {NAME} REQUESTS IN-PERSON		
	INTERVIEW	07	(A40)
	{PROGRAMMER DISPLAY 08 ONLY IF A13 = 01}		44.5.5
	{NAME} REQUESTS PROXY	80	(A39)
	PHYSICAL PROBLEM: {NAME} UNABLE TO		(4.45)
	PARTICIPATE		(A46)
	SUGGESTS ANOTHER WAY (SPECIFY_)		(1.22)
	DON'T KNOW		
	REFUSED	r	The state of the s
			IF A13 = 02 SET A105 = 02 (A105)
114 - 10)			
\14 = 10) 14a. Wh	pat is that way?		
14a. WI	nat is that way?		
	<open< td=""><td></td><td></td></open<>		
	DON'T KNOW		d
	REFUSED		
$\lambda 14 = 10$)	INCI OOLD		1
- /	ank you. I will ask my supervisor if that would work. We will call	VOL	hack and let you know
	and jour in a sorting outportion in that froud from the will out	,	. Zas. a. a for you falon.

SET A106 = 05 (A106)

(A13a = 01, 02, 04, OR d) OR (A14 = 02)

A16. INTERVIEWER: WHO ARE YOU SPEAKING WITH?

(A16 = 01)

A17. We can start the interview in a few minutes, by switching to our TTY or to a Relay operator and having them contact you. Alternatively, we can you back another time using TTY or Relay. What works best for you?

PROBE: PROBE FOR TTY OR RELAY IF UNCLEAR.

INTERVIEWER: IF "SWITCH IN A FEW MINUTES", CALL SUPERVISOR FOR HELP.

SWITCH (TTY) IN A FEW MINUTES	01	SET A100 = 04 (A100)
SWITCH (RELAY) IN A FEW MINUTES	02	SET A100 = 05 (A100)
CALL BACK LATER (TTY)	03	SET A100 = 04 (A100)
CALL BACK LATER (RELAY)	04	SET A100 = 05 (A100)
NO, {NAME} WILL CALL TTY	05	SET A108 = 02 (A108)
NO, {NAME} WILL CALL RELAY	06	SET A108 = 03 (A108)
REFUSED/HUNG UP	r	SET A105 = 01 (A105)

(A16 = 02)

A18. Can you help arrange a time when we can call {NAME} and complete the interview using either TTY or Relay? My supervisor will call you back later to find out what time you arranged for {NAME} to be interviewed.

PROBE: PROBE FOR TTY OR RELAY IF UNCLEAR.

INTERVIEWER: IF "SAMPLE MEMBER AVAILABLE, SWITCH IN A FEW MINUTES", CALL SUPERVISOR FOR HELP.

SM AVAILABLE, SWITCH (TTY) IN A FEW MINUTES	01	SET A100 = 04 (A100)
SM AVAILABLE NOW, SWITCH (RELAY) IN A FEW		
MINUTES	02	SET A100 = 05 (A100)
CALL BACK LATER (TTY)	03	SET A100 = 04 (A100)
CALL BACK LATER (RELAY)	04	SET A100 = 05 (A100)
CALL BACK TO ARRANGE AN INTERVIEW TIME	05	SET A106 = 02 (A106)
DON'T KNOW	d	SET A106 = 02 (A106)
REFUSED	r	SET A105 = 02 (A105)

A19 DELETED

NAME REQUESTS LETTER

(A10 = 04)

A20. The letter said that you were selected from a list of all adults who currently receive Social Security benefits and that someone would call to ask you to participate. The National Beneficiary Survey asks about your health, your daily activities, any jobs you might have, and any Social Security programs or services you might use. If you get tired or need a break <u>at any time</u>, please tell me and we will call back later to finish the interview. Let's start now.

CONTINUE	01 (A64)
CALL BACK LATER	02 SET A100 = 01 (A100)
NO, WANTS LETTER	00

		REFUSED	r	SET A105 = 01 (A105)
(A20 = 0)	00)			
A21.	You sho	uld receive the letter in about a week. Or, I can read it to y	ou n	now and we can start the interview.
		READ LETTER, CONTINUE NO, SEND LETTER		(A64)
		REFUSED		SET A105 = 01 (A105)
(A2=19	or $A21 = 0$	00)		
A22.	I want to correct?	o make sure we have your correct name and address. Th	ie rei	cords show (READ BELOW). Is this
	PROGR	AMMER: DISPLAY NAME FROM PRELOADS		
		NAME: PREFIX, FIRST, MIDDLE, LAST, SUFFIX ADDRESS 1 ADDRESS 2 CITY, STATE, ZIP		
		YES	00	(A23)
(A22 = 0)		ANNER- WAS ASSAURT LIDRATEDS		
A23.	PROGR	AMMER: WAS A22 <u>NAME</u> UPDATED?		
		YESNO		(A25)
(A23 = 0)	01)			
A24.	This nar	ne is different from the name in our records – perhaps you that you are the same {NAME} as in our records?	mar	ried or changed your name. Can you
		YES		
		NOREFUSED/HUNG UP		SET A102 = 04 (A102) SET A106 = 05 (A106)
(A22 = 0 A25.	00) OR (A2 PROGR	24 = 01) AMMER CHECK: IS UPDATED STATE <u>OUTSIDE</u> THE U	NITE	ED STATES AND DC?
		YES		SET A109 = 01 (A109)
(A25 = 0)	01)			
A26.	I might h	nave recorded your address wrong. Are you now living out	side	the United States?
	INTERV	IEWER: IF NO (ADDRESS IS IN THE USA), GO BACK T	O A2	22 AND CORRECT STATE.
		YES		SET A103 = 04 (A103)
		REFUSED		SET A106 = 05 (A106)

PROGRAMMER: STORE CHANGED NAME IN S8 UPDATE

NAME INSTITUTIONALIZED / HOSPITALIZED

(A1 = 07 OR 11) OR (A2 = 07 OR 11) OR (A4b = 06 OR 09) OR (A13a = 07 OR 08)A27a. I'm sorry to hear that. How much longer will {NAME} be staying there? INTERVIEWER: ENTER THE NUMBER OF DAYS, WEEKS OR MONTHS INTERVIEWER: (NEXT QUESTION SPECIFIES THE UNITS - DAYS. WEEKS OR MONTHS) **INTERVIEWER: ENTER 997 IF PERMANENTLY** DON'T KNOW d (A27b) REFUSED r (A27b) A27aa. Units. DAYS 01 WEEKS 02 (A27a = ANSWER OR d OR r)A27b. I understand that {NAME} is not able to be at home just now. In order to help {him/her} participate, we could PROBE: READ BELOW. What would work? **INTERVIEWER: CODE ONE ONLY** IF A27a = 01 AND DAYS LESS THAN 30 OR A27a=02 and WEEKS LESS THAN 4 OR A27a=03 (MONTHS) and MONTHS = 1 DISPLAY: call after {he/she} returns home and is feeling **ELSE DISPLAY** If {NAME} is well enough, we can call {him/her} at the {IF (A1 = 11 AND A2 = 11 AND A4b = 09) OR(A13a = 07) FILL institution / IF (A1 = 07 AND A2 = 07 AND A4b = 06) OR (A13a = 08) FILL

hospital.......02

 $\{PROGRAMMER, DISPLAY 03 IF SAMPLE TYPE = \}$

CLUSTERED S1 = 01) We could send an

interviewer to visit $\{him/her\}$ at the $\{(IF\ A1 = 11)\}$

AND A2 = 11 AND A4b = 09) OR (A13a = 07)

FILL institution / (IF A1 = 07 AND A2 = 07 AND

A4b = 06) OR (A13 = 08) FILL hospital}...... 03 (A29)

NAME TOO ILL / SEEK PROXY 04 (A46)

DON'T KNOW d (A46)

r SET A105 = 02 (A105)

(A27b = 02)A28. Please tell me the name and phone number of the {IF (A1 = 11 AND A2 = 11 AND A4b = 09) OR (A13a = 07) FILL institution / IF (A1 = 07 AND A2 = 07 AND A4b = 06) OR (A13a = 08) FILL hospital}, where I can contact {NAME}. If you don't have all the information, please tell me what you can. NAME OF INSTITUTION / HOSPITAL Please tell me the telephone number with the area code first. PHONE NUMBER: { _____ } ___ - ___ SET A100 = 08 (A100) PROGRAMMER: STORE NAME OF HOSPITAL OR INSTITUTION AND PHONE NUMBER IN LOCATOR IF REFUSED SET A106 = 05 (A106) (A27b = 03)A29. Please tell me the name and phone number of the {IF (A1 = 11 AND A2 = 11 AND A4b = 09) OR (A13 = 07) FILL institution / IF (A1 = 07 AND A2 = 07 AND A4b = 06) OR (A13 = 08) FILL hospital}, where I can contact {NAME}. If you don't have all the information, please tell me what you can. NAME OF INSTITUTION / HOSPITAL ADDRESS 1 ADDRESS 2 CITY, STATE, ZIP Please tell me the telephone number with the area code first. TELEPHONE: I__I__I - I__I__I - I__I - I__I__| SET A107 = 01 (A107) REFUSED r SET A106 = 05 (A106) PROGRAMMER: STORE NAME AND ALL CONTACT INFORMATION FOR HOSPITAL OR INSTITUTION IN LOCATOR **IF REFUSED SET A106 = 05 (A106) NEW CONTACT INFORMATION FOR NAME**

(A1 = 05) OR (A2 = 05) OR (A4b = 04)

A30. Do you know how I can reach {NAME}?

YES	01	
NO	00	(A37)
REFUSED	r	SET A105 = 02 (A105)

(A30 = 0)	11)				
A31. Please tell me {his/her} new address and phone number. Also, if {NAME'S} name has changed please me the new name. PROBE: If you don't have all the information please tell me what you can.					
	NAME: PREFIX, FIRST, MIDDLE, LAST, SUFFIX ADDRESS 1 ADDRESS 2 CITY, STATE, ZIP				
	Please tell me the telephone number with the area code first.				
	TELEPHONE: III _ I _ I _ I _ I _ I _ I _ I _				
(A31 = A32.	ANSWER OR d OR r) PROGRAMMER CHECK A31: IS STATE OUTSIDE THE UNITED STATES AND	DC	?		
	YES (OUTSIDE USA)		(A36)		
(A32 = A33.	I may have recorded something incorrectly. Is {NAME} now living outside the Unit	ed S	states?		
	INTERVIEWER: IF NO (ADDRESS IS INSIDE THE USA), GO BACK TO A31 AN	D U	PDATE STATE.		
	PROGRAMMER AFTER A31 IS UPDATED, GO TO A36.				
	YES NO GO BACK TO A31; AFTER STATE IS UPDATED GO TO A36.		SET A103 = 04 (A103		
	DELETED DELETED				
(A34 = A36.	ANSWER OR d OR r) PROGRAMMER CHECK: DOES A31 CONTAIN A VALID PHONE NUMBER?				
	YESNO				
	PROGRAMMER: STORE (NAME) CONTACT DATA IN LOCATO	R]		
LEAD	NFORMATION				
(A30 = A37.	00) Is there someone else who might know how to reach {NAME}?				
	YES NO	00 d			
	REFLIGED	r	>- 1 4105 - 02 (4105		

(A37 = 0)	1)
A38.	What's that person's name and phone number?
	PROBE: If you don't have all the information, please tell me what you can.
	PREFIX, FIRST, MIDDLE, LAST, SUFFIX
	Please give me the telephone number, area code first.
	TELEPHONE: IIII _ III _ II DON'T KNOW d REFUSED r
	PROGRAMMER: STORE NAME AND PHONE INFORMATION IN LOCATOR = LEADS;
	SET A101 = 03 (A101)
	IF MISSING/INVALID PHONE NUMBER SET A106 = 05 (A106)
CHECK	FOR POSSIBLE IN-PERSON INTERVIEW
(A10 = 0 A39.	5 OR 06) OR (A12 = 03 OR 04) OR (A4b = 15) OR (A14 = 06, 08, d) PROGRAMMER CHECK FOR POSSIBLE IN-PERSON INTERVIEW. DID?
	NAME REQUEST IN PERSON (A4b = 15) OR (A10 = 06)
	OR (A12 = 04) AND SAMPLE TYPE = CLUSTERED
	(S1 = 01)
	NAME REQUEST IN PERSON (A4b = 15) OR (A10 = 06)
	OR (A12 = 04) AND SAMPLE TYPE = UNCLUSTERED
	(S1 = 02)
	NAME/INFORMANT REQUESTS PROXY (A10 = 05) OR (A12 = 03) OR (A14 = 06, 08 OR d) AND SAMPLE
	TYPE CLUSTERED (S1 = 01)
	NAME REQUEST PROXY (A10 = 05) OR (A12 = 03)
	OR (A14 = 06, 08, d) AND SAMPLE TYPE =
	UNCLUSTERED (S1 = 02) 04 (A41)
NAME F	REQUESTS IN PERSON INTERVIEW AND NOT IN CLUSTERESAMPLE (S1 = 02)
(A14 = 0)	7 OR A 39 = 02)
A40.	I'm sorry, but we have no field representatives working in your area. We can break the phone interview into
	as many short calls as you would like so the interview will not be tiring. Will that help {NAME/you} to participate? If you get tired or need a break <u>at any time</u> , please tell me and we will call back later to finish the interview. Let's start now.
	CONTINUE 01 (A64)
	NO / SEEK PROXY
	DON'T KNOW d (A46)
	r SET A105 = 01 (A105

NAME REQUESTS PROXY AND NOT IN CLUSTERED SAMPLE (S1 = 02)

(A39=04)

A41. If at all possible, we'd like {IF A10 = 5} OR (A12 = 03) OR (A14 = 08) OR (A14 = d AND A13 = 01) FILL you / IF (A14 = 06) OR (A14 = d AND A13 = 02) FILL {NAME}} to answer for {IF (A10 = 5) OR (A12 = 03) OR (A14 = 08) OR (A14 = d AND A13 = 01) FILL yourself / IF (A14 = 06) OR (A14 = d AND A13 = 02) FILL {himself/herself}}. We can break the interview into a few short calls so the interview won't be tiring. If {(IF A10 = 5) OR (A12 = 03) OR (A14 = 08) OR (A14 = d AND A13 = 01) FILL you get tired or need a break / IF (A14 = 06) OR (A14 = d AND A13 = 02) FILL {he/she} gets tired or needs a break} at any time, please tell me and we will call back later to finish the interview. Let's start now.

NAME REQUESTED IN PERSON AND IN CLUSTERED SAMPLE (S1 = 01)

(A14 = 05) OR (A39=01)

A42. Our field representative will be working in your area shortly and will contact you to set up an interview in person.

GO TO A44

NAME REQUESTED PROXY AND IN CLUSTERED SAMPLE (S1 = 01)

(A39=03)

A43. Our interviewer will be working in {IF (A10 = 5) OR (A12 = 03) OR (A14 = 08) OR (A14 = d AND A13 = 01) FILL your / IF (A14 = 06) OR (A14 = d AND A13 = 02) FILL {NAME's area} shortly. If it would help {(IF A10 = 5) OR (A12 = 03) OR (A14 = 08) OR (A14 = d AND A13 = 01) FILL you / IF (A14 = 06) OR (A14 = d AND A13 = 02) FILL {him/her} to answer for {(IF A10 = 5) OR (A12 = 03) OR (A14 = 08) OR (A14 = d AND A13 = 01) FILL yourself / IF (A14 = 06) OR (A14 = d AND A13 = 02) FILL {himself/herself}, we can send an interviewer to interview {IF (A10 = 5) OR (A12 = 03) OR (A14 = 08) OR (A14 = d AND A13 = 01) FILL your / IF (A14 = 06) OR (A14 = d AND A13 = 02) FILL {NAME}} at home. If {(IF A10 = 5) OR (A12 = 03) OR (A14 = 08) OR (A14 = d AND A13 = 01) FILL you get tired or need a break / IF (A14 = 06) OR (A14 = d AND A13 = 02) FILL {he/she gets tired or needs a break} at any time, the interviewer can come back at a later time to finish the interview. Will that help?

YES	01	
NO, PREFER PROXY	02	(A46)
DON'T KNOW	d	(A46)
REFUSED	r	IF A13 = 01 SET A105 = 01 (A105) /
		IF A13 = 02 SET A105 = 03 (A105)

(A42 = ANSWER OR d OR r) OR (A43 = 01)

A44. Let me confirm your address. Is it still...READ BELOW:

PROGRAMMER: DISPLAY NAME'S CONTACT INFORMATION FROM PRELOADED INFORMATION (\$20)

PREFIX, FIRST, MIDDLE, LAST, SUFFIX ADDRESS 1 ADDRESS 2 CITY, STATE, ZIP UPDATE PHONE NUMBER

(A44 = 00)

A44a. INTERVIEWER - BACK UP TO A44 AND EDIT ALL CHANGES (A45)

(A44 = 01) AND (A44a = ANSWER)

A45. If your current address will change within the next month or two, please tell me the new address and phone number.

INTERVIEWER INSTRUCTION: IF ADDRESS OR PHONE NUMBER WILL CHANGE, GO BACK TO A44 AND CHANGE AS APPROPRIATE.

PROGRAMMER: STORE UPDATED INFORMATION IN UPDATE ADDRESS BLOCK

SEEKING PROXY

(A13a = 03) OR (A14 = 09) OR (A27 = 04, OR d) OR (A40 = 02 OR d) OR (A41 = 02 OR d AND A14=8 OR d) OR (A43 = 02 OR d)

A46. Is there someone who can answer questions about {IF (A40 = 02 OR d) OR (A41 = 02 OR d) OR (A43 = 02 OR d) FILL your / IF (A13a = 03) OR (A14 = 09) OR (A27 = 04 OR d) FILL {NAME's}} health, daily activities, any jobs {IF (A40 = 02 OR d) OR (A41 = 02 OR d) OR (A43 = 02 OR d) FILL you / IF (A13a = 03) OR (A14 = 09) OR (A27 = 04 OR d) FILL {he/she} might have, and use of Social Security programs or services? This could be someone who lives with {IF (A40 = 02 OR d) OR (A41 = 02 OR d) OR (A43 = 02 OR d) FILL you / IF (A13a = 03) OR (A14 = 09) OR (A27 = 04 OR d) FILL {NAME} such as a family member or friend, or someone like a social worker or case worker.

INFORMANT WILL SERVE AS PROXY 01	(A48)
PROXY COMES TO PHONE 02	(A48)
PROXY NOT AVAILABLE NOW 03	
PROXY LIVES ELSEWHERE 04	(A51)
{NAME} HOSPITALIZED: NO PROXY 05	SET A104 = 01 (A104)
{NAME} INSTITUTIONALIZED: NO PROXY 06	SET A104 = 02 (A104)
{NAME} HAS COGNITIVE BARRIER:	
NO PROXY 07	SET A104 = 03 (A104)
{NAME) HAS HEARING / SPEECH BARRIER/	
NO PROXY	SET A104 = 04 (A104)
{NAME} HAS PHYSICAL BARRIER:	
NO PROXY 09	SET A104 = 05 (A104)
DON'T KNOW d	SET A106 = 03 (A106)
REFUSEDr	IF A40 = 02 OR d OR A41 = 02 OR d OR
	A43 = O2 OR d SET A105 = 01 (A105) /
	IF A13a – 03 OR A14 = O9 OR A27 – 04 OR
	d SET A105 = 03 (A105)

(A46 = 03)

A47. What is that person's name and phone number so we can call back and ask for that person by name?

NAME: PREFIX, FIRST, MIDDLE, LAST, SUFFIX

Please give me the telephone number, area code first.

PHONE NUMBER: ____ - ___ d SET A106 = 05 (A106)

REFUSED ____ r SET A106 = 05 (A106)

PROGRAMMER: STORE PROXY NAME IN UPDATE ADDRESS BLOCK. SET $\underline{A100} = 02 \ (\underline{A100})$

PROXY COMES TO PHONE

(A14=06 AND A41=02 OR d) OR (A46=01 OR 02) A48. {IF (A46 = 02) USE Hello, my name is, calling on behalf of the Social Security Administration.} {NAME} has been selected to participate in an important national health study we are conducting for SSA. Congress requires Social Security to conduct the National Beneficiary Survey. The information we collect will be used to evaluate Social Security's programs for disability beneficiaries. Are you the person who is most knowledgeable about {NAME's} health, daily activities, any jobs {he/she} may have, and about any Social Security programs and services {he/she} might use?					
	YES 01 A53) WANTS MORE INFORMATION 02 NO 00 (A50) DON'T KNOW d (A50) REFUSED r SET A105 = 03 (A105)				
$(\Lambda A Q = 0)$	2)				
(A48 = 0 A49.	Social Security recently sent {NAME} a letter saying that we would be calling to ask {him/her} to participate in an important national health study we are conducting for Social Security. I work for Mathematica Policy Research, a nationally recognized research firm based in Princeton, New Jersey. We are conducting a scientific study. We are not selling anything or asking for contributions.				
	CONTINUE				
(A48 = 0 A50.	$0~{\rm OR}~{\rm d})~{\rm OR}~({\rm A49}=02)$ Is there someone else who knows about {NAME's} health, daily activities, and any jobs {he/she} might have?				
	YES				
ANOTH	ER PROXY LIVES ELSEWHERE				
(A50 = 0 A51.	What is this person's name and phone number? PROBE: If you don't have all the information, please tell me what you have.				
	PREFIX, FIRST, MIDDLE, LAST, SUFFIX DON'T KNOWd REFUSEDr				
	Please give me the telephone number, area code first.				
	TELEPHONE: III _ I _ I _ I _ I _ I _ I _ I _				

PROGRAMMER: STORE PROXY CONTACT INFORMATION IN LOCATING
DATABASE AND GO TO A52.

IF BOTH NAME AND PHONE NUMBER REFUSED SET A106 = 05 (A106)

(A51 = ANSWER)**PROGRAMMER:** IS THERE A VALID PHONE NUMBER AT A51? A52. YES 01 SET A101 = 02 (A101) **SPEAKING WITH PROXY** (A48 = 01) OR (A49 = 01)A53. The interview will take from 45 to 60 minutes. In appreciation for your time, we will mail you a check for \$10.00 when we finish the interview. If you get tired or need a break at any time, please tell me and we will call back later to finish the interview. Let's start now. CONTINUE 01 CALL BACK LATER 02 PROXY WANTS LETTER 03 (A58) REFUSED r SET A105 = 03 (A105) (A53 = 01 OR 02){IF A53 = 01 USE Before we start} please tell me your name (IF A53 = 02 USE so we can call back and ask A54. for you.) PROBE: Your first name is fine. PREFIX, FIRST, MIDDLE, LAST, SUFFIX DON'T KNOW d REFUSEDr CONTINUE PROGRAMMER STORE PROXY NAME IN DATABASE (A54 = ANSWER OR r)PROGRAMMER: IF A55. **CALLING FOR IDENTIFIED PROXY / PROXY AFTER REMAIL** (A0 = 10 OR 11 OR 13)_____, calling on behalf of the Social Security Administration. May I please A56. Hello, my name is _ speak with {PROXY NAME}? PROBE: We are not selling anything or asking for a contribution. LANGUAGE BARRIER (NOT SPANISH) 06 SET A104 = 07 (A104) NO SUCH PERSON AT THIS NUMBER....... 07 SET A102 = 05 (A105) OTHER: SUPERVISOR REVIEW NEEDED ... 08 SET A106 = 05 (A106) HUNG UP DURING INTRODUCTION 09 SET STATUS = 640 (END)

REFUSED r SET A105 = 03 (A105)

PROXY COMES TO PHONE

(A56 = 01 OR 02) A57. {IF {PROXY} COMES TO PHONE (A56=02), USE Hello, my name is, calling on behalf of the Social Security Administration.} Recently, Social Security sent {IF (A0 = 10) FILL {NAME} / IF (A0 = 11) FILL you} a letter explaining that {he/she} had been selected to participate in an important survey we are conducting for them. The National Beneficiary Survey is about {NAME's} health, daily activities daily activities, any jobs {he/she} might have, and about any Social Security programs or services {he/she} might use. Congress requires that Social Security conduct this study. We were told that you are the most knowledgeable person to respond to the survey on behalf of {NAME}. The interview will take from 45 to 60 minutes. In appreciation for your time, we will mail you a check for \$10.00 when we finish the interview. Would you be able to help us?						
	CONTINUE					
	CALL BACK LATER					
	SEEK ANOTHER PROXY					
	PROGRAMMER: DISPLAY THIS OPTION					
	ONLY IF A0 = 10 WANTS LETTER SENT 04					
	DON'T KNOW d (A59)					
	REFUSED r SET A105 = 03 (A105)					
(A57 = 0)						
A58.						
	CONTINUE 01					
	CALL BACK LATER					
	WANTS LETTER SENT					
	DON'T KNOW d (A59)					
	r SET A105 = 03 (A105)					
,	1 OR 02)					
A58a.	{IF (A58=01) Before we start,} Please tell me your name {IF (A58=02) so we can call back and ask for you.}					
	PREFIX, FIRST, MIDDLE, LAST, SUFFIX					
	REFUSEDr					
	CONTINUE					
	IF A58=01 GO TO A64					
	IE A59-02 SET A100 - 02 (A100)					
	IF A58=02 SET A100 = 02 (A100) PROGRAMMER STORE PROXY NAME IN DATABASE					

(A57=d) OR (A58 = 03 or d)

A59. Please tell me your name and address so we can mail the letter to you.

PREFIX, FIRST, MIDDLE, LAST, SUFFIX ADDRESS 1 ADDRESS 2 CITY, STATE, ZIPCODE

PROGRAMMER STORE PROXY INFORMATION IN LOCATING DATABASE SET A109 = 02 (A109)

SEEK ANOTHER PROXY - CONTACT INFORMATION

(A57 = 0)	Can you give {NAME's} hea	e me the name and phone number for someone else who might be knowledgeable abo alth,daily activities, any jobs {he/she} might have, and about any Social Security programs on she} might use?	
		YES 01 NO 00 SET A106 = 03 (A100) DON'T KNOW d SET A106 = 03 (A100) REFUSED r SET A105 = 02 (A100)	06)
(A60 = 1 A61.	/	person's name and telephone number?	
	PROBE FOR	A60 = 01 ONLY: If you don't have all the information, please tell me what you have.	
	PRE	FIX, FIRST, MIDDLE, LAST, SUFFIX	
		DON'T KNOW d REFUSED r	
	Please give n	ne the telephone number, area code first.	
	TEL	EPHONE NUMBER: _ - _ - _ _	
		DON'T KNOW d REFUSED r	
		PROGRAMMER: STORE PROXY INFORMATION IN LOCATING DATABASE AND GO TO A62. IF NAME AND PHONE NUMBER REFUSED SET A105 = 02 (A105)	
	L	IF NAME AND PHONE NUMBER REPUSED SET A 103 = 02 (A 103)	
`	ANSWER) Programme	R: WHAT KIND OF PROXY CONTACT INFORMATION DOES A61 CONTAIN?	
		NO PHONE NUMBER	02)
A63 DE	LETED		

RESPONDENT VERIFICATION

(A0 = 18) OR (A10 = 1) OR (A12 = 01) OR (A14 = 01 OR 03) OR (A40 = 01) OR (A41 = 01) OR (A55 = 01) OR (A57 = 01)OR (A58 = 01)A64. INTERVIEWER: WHO ARE YOU SPEAKING WITH? INTERVIEWER: IF YOU ARE SPEAKING WITH AN INTERPRETER, CODE SPEAKING WITH {NAME}. NAME 01 A65. DELETED (A64 = ANSWER)Before we start, I need to confirm that I've reached the right person. Is {IF (A64 = 01) FILL your/IF (A64 = 02) FILL {NAME's}} full name: PROGRAMMER: IF A0 = 03, DISPLAY: CAPI INTERVIEWER: DO NOT READ QUESTION; CODE 01, OR 02 AS APPROPRIATE. PROGRAMMER: DISPLAY SAMPLE MEMBER'S FULL NAME BELOW FROM S8. YES 01 (A67a) YES, NAME NOW CHANGED 02 DON'T KNOW d (A72) r IF A64 = 01 SET A105 = 01 (A105) IF A64 = 02 SET A105 = 03 (A105) (A66 = 02)A67. For the record, what is {your/NAME's} new name? PROGRAMMER: IF A0 = 03 DISPLAY: CAPI INTERVIEWER: DO NOT READ QUESTION: RECORD NAME CHANGE AND CONTINUE. **NEW NAME** DON'T KNOW d (A72) REFUSED r IF A64 = 01 SET A105 = 01 (A105) IF A64 = 02 SET A105 = 03 (A105) PROGRAMMER STORE NAME CHANGE IN NAME UPDATE BLOCK. (A65 = 01) OR (A66 = 01) OR (A67 = ANSWER OR r)A67a. {PROGRAMMER: IF A22 OR A44 CONTAIN UPDATED STATE, GO TO A68, ELSE CONTINUE} And in what state {IF (A64 = 01) FILL are you / IF (A64 = 02) FILL IS {NAME}} now living? CAPI INTERVIEWER: DO NO READ QUESTION: RECORD STATE BELOW AND CONTINUE. STATE REFUSED..... r IF A64 = 01 SET A105 = 01 (A105) IF A64 = 02 SET A105 = 03 (A105) DON'T KNOW d

PROGRAMMER: CHECK AREA CODE AND RECORD STATE.

PROGRAMMER STORE STATE CHANGE FOR USE IN FUTURE QUESTIONS AT STATE UPDATE BLOCK (\$20).

(A67a = A68 .	= ANSWER OR r) What is {your/NAM	ME'S} dat	e of birth?			
	PROGRAMMER: DATE OF BIRTH				VIE	WER: DO NOT READ QUESTION. RECORD
	_	_I_I IONTH	III DAY	IIII YEAR		
	•		(1 - 31) [A68a]	(1937 – 1986 ₎ [A68b])	
	DON'T K	NOW			d	(A71) IF A64 = 01 SET A105 = 01 (A105) IF A64 = 02 SET A105 = 03 (A105)
(A68 = A69.	How old (IF (A64					AME)? PROBE: Your best guess is fine. R: DO NOT READ QUESTION, RECORD AGE
	RECORI DON'T K	D AGE: (NOW			 d	YEARS (16 – 67)
(A69 = A70 .	ANSWER OR d) PROGRAMMER	CHECK S	S11: IS A69 A	AGE = +2 OR – 2	ΥΕ	ARS OF NAME'S AGE?
(A68 = A71.	ANSWER) OR (A70 PROGRAMMER (YEAR OF BIRTH	CHECK E	BIRTHDATE:		Y, Y	EAR OF BIRTH AT A68 = MONTH, DAY, AND
	1 MATCI 2 MATCI	HES H			01 02	
(A65 = A72	ANSWER) OR (A66 PROGRAMMER (BIRTHDATE VER	CHECK:	IS {NAME'S	IDENTITY VER	IFIE	02) OR (A67=d) ED (NAME VERIFIED {A66 = 01 OR 02} AND IS
	,	,				SET A102 = 04 (A102)
	PROGRAMMER:					RRENTAGE) USING DATE OF INTERVIEW - EN IN A68 (TO BE USED IN SECTION E). DO

NOT RE-CALCULATE UPON RE-ENTRY.

NAME/PROXY COGNITIVE TEST

(A72 = 01)

A73. INTERVIEWER: WHO ARE YOU SPEAKING WITH?

```
      NAME – CATI OR CAPI INTERVIEW
      01

      NAME, TTY INTERVIEW
      02
      SET A110 = 01 (A110)

      NAME, RELAY INTERVIEW
      03
      SET A110 = 01 (A110)

      PROXY (CATI)
      04

      PROXY (CAPI)
      05
```

(A73=01, 04 OR 05)

A74. Next, I will explain some facts about the survey. After I explain, I will ask you three questions so I can be sure my explanation was clear.

Here's the first explanation. The survey asks about {IF (A73 = 03) FILL your / IF (A73 = 04 OR 05) FILL {NAME's}} health, daily activities, and any jobs {IF (A73 = 03) FILL you / IF (A73 = 04 OR 05) FILL {NAME}} might have. Please tell me in your own words what the survey is about.

INTERVIEWER: IF RESPONDENT SAYS "DON'T KNOW" RECORD AS "LISTS NONE"

A75 IS DELETED

(A74 = 00 OR 01)

A76. INTERVIEWER: YOU ARE ASKING THIS QUESTION FOR THE SECOND AND LAST TIME.

Let's try that again. The survey asks about $\{your/NAME\}$'s <u>health</u>, <u>daily activities</u>, and <u>any jobs $\{IF (A73 = 03) FILL you / IF (A73 = 04 OR 05) FILL {NAME}\} might have</u>. Please tell me in your own words, what the survey is about.</u>$

INTERVIEWER: IF RESPONDENT SAYS "DON'T KNOW" RECORD AS "LISTS NONE"

(A74 = 02 OR 03) OR (A76 = 02 OR 03)

A77. Here is the next explanation. Taking part in the survey is <u>completely voluntary</u>. Completely voluntary means you can choose whether or not to take part. If you decide to take part, you can refuse to answer any questions you do not like and you can stop the interview at any time you choose. Whether you choose to take part or not, {your/NAME's} disability benefits will not be affected in any way.

When I say your participation is completely voluntary, what does that mean to you?

PROBE: IF RESPONDENT SAYS: It is voluntary, PROBE: What does that mean?

INTERVIEWER: EXAMPLES OF ACCURATE ANSWERS ARE: I can decide to take part or not to take part. I can refuse to take part if I want. I don't have to do this. I can do this if I want. No one will take away my benefits if I refuse, etc.

INTERVIEWER: IF NAME/PROXY SAYS "DON'T KNOW" RECORD AS "INACCURATE ANSWER"

(A77=02)

A77a. INTERVIEWER: YOU ARE ASKING THIS QUESTION FOR THE SECOND AND LAST TIME.

Let's try that again. Taking part in the survey is <u>completely voluntary</u>. Completely voluntary means you can choose whether or not to take part. If you decide to take part, you can refuse to answer any questions you do not like and you can stop the interview at any time you choose. Whether you choose to take part or not, {your/NAME's} disability benefits will not be affected in any way. When I say your participation is <u>completely voluntary</u>, what does that mean to you?

PROBE: IF RESPONDENT SAYS: It is voluntary, PROBE: What does that mean?

INTERVIEWER: EXAMPLES OF ACCURATE ANSWERS ARE: I can decide to take part or not to take part. I can refuse to take part if I want. I don't have to do this. I can do this if I want. No one will take away my benefits if I refuse, etc.

INTERVIEWER: IF NAME/PROXY SAYS "DON'T KNOW" RECORD AS "INACCURATE ANSWER"

(A77 = 01 OR A77a = 01)

A78. Here's the last explanation. All your answers will be <u>kept confidential</u> and used <u>only</u> for the research purposes of the study. When I say that your answers will be <u>kept confidential</u>, what does that mean to you? PROBE: IF RESPONDENT OR PROXY SAYS: It is confidential, PROBE: What does that mean?

INTERVIEWER: EXAMPLES OF ACCURATE ANSWERS ARE: My answers will be secret. Only researchers will see what I said. What I say will be (kept) private. It will only be used for research; etc.

INTERVIEWER: IF RESPONDENT SAYS: "DON'T KNOW," RECORD AS "INACCURATE ANSWER"

(A78 = 02)

A78a. INTERVIEWER: YOU ARE ASKING THIS QUESTION FOR THE SECOND AND LAST TIME.

Let's try that again. All your answers will be <u>kept confidential</u> and used <u>only</u> for the research purposes of the study.

When I say that your answers will be kept confidential, what does that mean to you?

PROBE: IF RESPONDENT OR PROXY SAYS: It is confidential, PROBE: What does that mean?

INTERVIEWER: EXAMPLES OF ACCURATE ANSWERS ARE: My answers will be secret. Only researchers will see what I said. What I say will be (kept) private. It will only be used for research; etc.

INTERVIEWER: IF RESPONDENT SAYS "DON'T KNOW" RECORD AS "INACCURATE ANSWER"

ACCURATE ANSWER	01	IF A73 = 03 SET A110 = 01 (A110) /
		IF A73 = 04 OR 05 SET A110 = 02 (A110)
INACCURATE ANSWER - FAILED	02	
REFUSED	r	IF A73 = 03 SET A105 = 01 (A105) /
		IF A73 = 04 OR 05 SET A105 = 03 (A105)

A79 IS DELETED

RESPONDENT OR PROXY FAILS COGNITIVE TEST. FIND A PROXY/ANOTHER PROXY

(A76 = 00 OR 01) OR (A77a = 02 OR A78a = 02)

A80. Thank you. Our study rules say that we need to find {IF (A73 = 03) USE someone / IF (A73 = 04) USE someone else} who can help {IF (A64 = 01) FILL you / IF (A64 = 02) FILL {NAME}} answer the survey questions. Is there someone there who could answer questions about {(IF A64 = 01) FILL your / IF (A64 = 02) FILL {NAME's}} health, daily activities, and any jobs {IF (A64 = 01) FILL you / IF (A64 = 02) FILL he/she} might have?

PROBE: This might be someone who lives with {you/NAME}, a friend, or someone like a social worker or case worker.

(A80 = 02)

A81. What is that person's name so that we can call back and ask for them?

NAME: PREFIX, FIRST, 'MIDDLE, LAST, SUFFIX

PROGRAMMER: RECORD NAME LOCATING DATABASE SET A100 = 02 (A100)

(A80 =	03)
A82.	Do you have that person's name and/or telephone number? If you don't have all the information please tel me what you can.
	YES 01
	NO
(A82 =	01)
A83.	
	PREFIX, FIRST, MIDDLE, LAST, SUFFIX
	DON'T KNOW d
	REFUSED r
	Please give me the telephone number, area code first.
	TELEPHONE NUMBER: III_I_I_I_I_I_I_I_I_I_I
	DON'T KNOW d
	REFUSEDr
	PROCE AMMERICATIONS PROVING AND BUONE NUMBER IN LOCATING
	PROGRAMMER: STORE PROXY NAME AND PHONE NUMBER IN LOCATING DATABASE.
	IF BOTH NAME AND PHONE NUMBER REFUSED, SET A106 = 05 (A106)
	VALID PHONE NUMBER 01 SET A101 = 02 (A101) INVALID PHONE NUMBER 02 SET A106 = 05 (A106) NO PHONE NUMBER 03 SET A106 = 05 (A106)
CALL	TO NEW PROXY/NEW PROXY COMES TO PHONE
(A1 = 1 A85 .	3) OR (A56 = 01 OR O2) OR (A80 = 01) {IF (A56 = 01 OR O2) OR (A80 = 01) USE Hello, my name is, calling on behalf of the Social Security Administration.} Recently, Social Security contacted {NAME} about an important survey we are conducting for them. The National Beneficiary Survey is about beneficiaries' health, daily activities, and any jobs they might have. Congress requires that Social Security conduct this study. I've been told that you are knowledgeable about these topics and are the best person to answer the survey on behalf of {NAME}.
	The interview will take from 45 to 60 minutes. In appreciation for your time, we will mail you a check for \$10.00 when we finish the interview. Would you be able to help us?
	YES 01
	CALL BACK LATER 02 SET A100 = 02 (A100)
	DON'T KNOW d SET A106 = 03 (A106)
	REFUSED r SET A105 = 03 (A105)
(A85=0	01)
A85a.	Before we start, please tell me your name.
	FIRST, MIDDLE, LAST
	DON'T KNOW d REFUSED r

NEW PROXY/ NEW PROXY COMES-TO-PHONE COGNITIVE TEST

(A85 = 01)

A86. Next, I will explain some facts about the survey. After I explain, I will ask you three questions so I can be sure my explanation was clear.

Here's the first explanation. The survey asks about {NAME's} <u>health</u>, <u>daily activities</u>, and <u>any jobs {he/she}</u> <u>might have</u>. Please tell me in your own words what the survey is about.

INTERVIEWER: IF RESPONDENT SAYS "DON'T KNOW," RECORD AS "LISTS NONE"

LISTS NONE	00	
LISTS ONLY 1 TOPIC	01	
LISTS ANY 2 TOPICS	02	(A89)
LISTS 3 TOPICS	03	(A89)
REFUSED	r	SET A105 = 03 (A105)

A87 IS DELETED

(A86 = 00 OR 01)

A88. INTERVIEWER YOU ARE ASKING THIS QUESTION FOR THE SECOND AND LAST TIME.

Let's try that again. The survey asks about {NAME}'s health, daily activities, and any jobs {he/she} might have. Please tell me in your own words what the survey is about.

INTERVIEWER: IF RESPONDENT SAYS "DON'T KNOW" RECORD AS "LISTS NONE"

LISTS NONE	00	(A92)
LISTS ONLY 1 TOPIC	01	(A92)
LISTS ANY 2 TOPICS	02	
LISTS 3 TOPICS	03	
REFUSED	r	SET A105 = 03 (A105)

(A86 = 02 OR 03) OR (A88 = 02 OR 03)

A89. Here is the next explanation. Taking part in the survey is <u>completely voluntary</u>. Completely voluntary means you can choose whether or not to take part. If you decide to take part, you can refuse to answer any questions you do not like and you can stop the interview at any time you choose. Whether you choose to take part or not, {NAME's} disability benefits will not be affected in any way.

When I say your taking part is completely voluntary, what does that mean to you?

PROBE: IF RESPONDENT SAYS: It is voluntary, PROBE: What does that mean?

INTERVIEWER: EXAMPLES OF ACCURATE ANSWERS ARE: I can decide to take part or not to take part. I can refuse to take part if I want. I don't have to do this. I can do this if I want. No one will take away my benefits if I refuse, etc.

INTERVIEWER: IF RESPONDENT SAYS "DON'T KNOW," RECORD AS "INACCURATE ANSWER"

(A89 = 02)

A89a. INTERVIEWER: YOU ARE ASKING THIS QUESTION FOR THE SECOND AND LAST TIME.

Let's try that again. Taking part in the survey is <u>completely voluntary</u>. Completely voluntary means you can choose whether or not to take part. If you decide to take part, you can refuse to answer any questions you do not like and you can stop the interview at any time you choose. Whether you choose to take part or not, {NAME's} disability benefits will not be affected in any way. When I say your taking part is <u>completely voluntary</u>, what does that mean to you?

PROBE: IF RESPONDENT SAYS: It is voluntary, PROBE: What does that mean?

INTERVIEWER: EXAMPLES OF ACCURATE ANSWERS ARE: I can decide to take part or not to take part. I can refuse to take part if I want. I don't have to do this. I can do this if I want. No one will take away my benefits if I refuse, etc.

INTERVIEWER: IF RESPONDENT SAYS "DON'T KNOW" RECORD AS "INACCURATE ANSWER"

(A89a = 01)

A90. Here's the last explanation. All your answers will be <u>kept confidential</u> and used <u>only</u> for the research purposes of the study. When I say that your answers will be <u>kept confidential</u>, what does that mean to you?

PROBE: IF RESPONDENT SAYS: It is confidential, PROBE: What does that mean?

INTERVIEWER: EXAMPLES OF ACCURATE ANSWERS ARE: My answers will be secret. Only researchers will see what I said. What I say will be (kept) private. It will only be used for research; etc.

INTERVIEWER: IF RESPONDENT SAYS "DON'T KNOW," RECORD AS "INACCURATE ANSWER"

(A90 = 02)

A90a. INTERVIEWER: YOU ARE ASKING THIS QUESTION FOR THE SECOND AND LAST TIME.

Let's try that again. All your answers will be <u>kept confidential</u> and used <u>only</u> for the research purposes of the study.

When I say that your answers will be kept confidential, what does that mean to you?

PROXY: IF RESPONDENT SAYS: It is confidential, PROBE: What does that mean?

INTERVIEWER: EXAMPLES OF ACCURATE ANSWERS ARE: My answers will be secret. Only researchers will see what I said. What I say will be (kept) private. It will only be used for research; etc.

INTERVIEWER: IF RESPONDENT SAYS "DON'T KNOW," RECORD AS "INACCURATE ANSWER"

A91 IS DELETED

(A88 = 00 OR 01) OR (A89a = 02) OR (A90a = 02)

A92. Thanks for your patience. There seems to be a problem and I need to check with my supervisor about what to do next. My supervisor will get back to you.

PROXY FAILED COGNITIVE TEST...... 01 SET A106 = 04 (A106)

CALL BACK LATER TO SAME NUMBER (INTERIM)

(A1 = 04) OR (A3 = 02) OR (A5 = 02) OR (A7a = 01) OR (A8 = 03) OR (A9=03) OR (A10 = 03) OR (A12 = 02) OR (A14 = 04) OR (A17 = 01, 02, 03 OR 04) OR (A18=01 or 02 or 03) OR (A20 = 02; OR A27b = 01) OR (A28 = ANSWER) OR (A47 = ANSWER) OR (A52 = 01) OR (A55 = 02) OR (A56 = 03) OR (A57 = 02) OR (A58 = 02) OR (A81 = ANSWER) OR (A84 = 01) OR (A85 = 02)

A100. (INTERNAL VARIABLE – NOT DISPLAYED FOR USER – SHOW FOR TESTING PURPOSES ONLY)

PROGRAMMER: DISPLAY ONLY APPROPRIATE TEXT AND VALUE BELOW.

START NEXT SCREENER AT...

{YOUR NAME}	01	A0 = 01
{PROXY NAME}		
{INTERPRETER NAME}		
{NAME} using TTY	04	A0 = 08
{NAME} using Relay	05	A0 = 07
{NAME} using a phone amplifier	06	A0 = 09
{NEW PROXY NAME} AFTER FIRST PROXY FAILED		
COGNITIVE TEST	07	A0 = 10
$\{NAME\}$ at $\{IF\ A1 = 07;\ OR\ A2 = 07;\ OR\ A4b = 07;$		
OR A13a = 08 FILL HOSPITAL NAME FROM A28/		
IF A1 = 11; OR A2 = 11; OR A4b = 09; OR A13a = 07		
FILL INSTITUTION NAME FROM A28	80	A0 = 01
IF A4a = 02 AND A6 = ANSWER {NEW INTERPRETER		
NAME}	09	A0 = 15

PROGRAMMER: SEND TO CALLBACK SCREEN AND INTERVIEWER WILL SET CALL BACK STATUS THERE.

GO TO END

NEW PHONE NUMBER FOR NAME/PROXY/LEAD TO NAME/LEAD TO PROXY

(A36 = 01) OR (A38 = ANSWER) OR (A52 = 01) OR (A62 = 03, 05, OR 09) OR (A84 = 03, 05, OR 09) A101. Thank you very much; we will be calling {NAME/PROXY/LEAD FROM BELOW} shortly.

PROGRAMMER: DISPLAY ONLY APPROPRIATE TEXT AND 01 OR 02 VALUES BELOW. 03 SHOULD NOT BE DISPLAYED.

START NEXT SCREENER AT...

{NAME}	01	A0 = 01
{PROXY} WHO LIVES ELSEWHERE	02	A0 = 10
LEAD	03	SET $A106 = 06 (A106)$

A101a. PROGRAMMER: GO TO END.

SEND TO LOCATING: NAME OR PROXY (INTERIM)

(A1 = 14) OR (A2 = 14) OR (A4b = 11) OR (A24 = 00) OR (A36 = 00) OR (A37 = 00 OR d) OR (A52 = 00) OR (A56 = 07) OR (A62 = 01, OR 02) OR (A72 = 00) OR (A82 = 00) OR (A84 = 01, 02, 04, 05, 07, OR 08)

A102. Thank you very much. Goodbye.

PROGRAMMER: DISPLAY ONLY APPROPRIATE TEXT AND VALUE BELOW.

INTERVIEWER: PRESS 1 TO CONTINUE

START NEXT SCREENER AT...

{NAME}: NO SUCH PERSON HERE	01	SET STATUS = 530 (EN	ID)	A0 = 01
{NAME}: NEED PHONE NUMBER ONLY	02	SET STATUS = 530 (EN	ID)	A0 = 01
{NAME} NEED ALL CONTACT INFORMATION	03	SET STATUS = 530 (EN	ID)	A0 = 01
{NAME} FAILED VERIFICATION – FIND NAME	04	SET STATUS = 530 (EN	ND)	A0 = 01
{PROXY}: NO SUCH PERSON HERE	05	SET STATUS = 380 (EN	ND)	A0 = 13
{PROXY}: NEED PHONE NUMBER	06	SET STATUS = 380 (EN	ND)	A0 = 13

PROGRAMMER: FOR 05 - 06 SUPERVISOR WILL SET NEXT STARTING QUESTION AND MAY OVERWRITE CODES

INELIGIBLE (INTERIM / POSSIBLE FINAL)

(A1 = 09, 12, OR 18) OR (A2 = 09, 12, OR 18) OR (A4b = 08,10, OR 14) OR (A13a = 06, 10 OR 11) OR (A26 = 01) OR (A33 = 01)

A103. Thank you for explaining. That's all the questions we have for you. Goodbye.

PROGRAMMER: DISPLAY ONLY APPROPRIATE TEXT AND VALUE BELOW.

NOTE: PROGRAMMER, THESE CASES ARE INTERIM UNTIL AFTER SUPERVISOR REVIEW. THEY WILL NOT CYCLE THROUGH THE SCREENER AGAIN UNLESS SUPERVISOR/PROGRAMMER RESETS CASE STATUS.

INTERVIEWER: PRESS ENTER TO CONTINUE

INCARCERATED	01	SET STATUS = 421 (END)
IN ACTIVE MILITARY	02	SET STATUS = 422 (END)
LIVING OUTSIDE THE USA	03	SET STATUS = 461 (END)

(A1=08) OR (A2=08) OR (A4b=07) OR (A13a=09)

A103a. I am sorry to hear {NAME} has passed away. I was calling about a study we are conducting for the Social Security Administration. You might have seen a letter we recently sent [NAME} explaining the study. When did {NAME} pass away?

Thank you. Please accept my condolences. Goodbye.

PROGRAMMER: SET STATUS = 440 GOTO END

BARRIERS TO PARTICIPATION - (INTERIM NON-RESPONSE / POSSIBLE FINAL NON-RESPONSE)

(A1 = 17) OR (A2 = 17) OR (A4b = 13) OR (A46 = 05, 06, 07, 08, OR 09) OR (A56 = 06)

Thank you very much for explaining. That's all the questions I have. Thanks for your time. Goodbye.

PROGRAMMER: DISPLAY ONLY APPROPRIATE TEXT AND VALUE BELOW.

PROGRAMMER, THESE CASES ARE INTERIM UNTIL AFTER SUPERVISOR REVIEW. THEY WILL NOT CYCLE

THROUGH THE SCREENER AGAIN UNLESS SUPERVISOR/PROGRAMMER RESETS CASE STATUS.

INTERVIEWER: PRESS ENTER TO CONTINUE

HOSPITALIZED	01	SET STATUS = 420 (END)
INSTITUTIONALIZED	02	SET STATUS = 420 (END)
COGNITIVE BARRIER	03	SET STATUS = 412 (END)
HEARING/SPEECH BARRIER	04	SET STATUS = 411 (END)
PHYSICAL BARRIER	05	SET STATUS = 410 (END)
UNAVAILABLE DURING FP	06	SET STATUS = 430 (END)
FINAL LANGUAGE BARRIER	07	SET STATUS = 400 (END)

REFUSALS (INTERIM / FINAL)

(IF ANY OF THE FOLLOWING QUESTIONS = r: A1, A2, A4b, A5, A8, A9, A10, A12, A13a, A14, A17, A18, A20, A21, A22, A27b, A29, A30, A37, A40, A41, A43, A44, A45, A46, A48, A49, A50, A53, A56, A57, A58, A60, A61, A66, A67, A67a, A68, A74, A76, A77, A78, A78a, A80, A85, A86, A88, A89, A89a, A90, A90a)

A105. Thank you for your time. Goodbye.

PROGRAMMER: GO TO REFUSAL SCREEN SO INTERVIEWER CAN RECORD REASON FOR REFUSAL. WHILE THE CASE IS STILL IN INTERIM STATUS, THESE CASES WILL BE SUBJECT TO CALL SCHEDULER RULES THAT WILL DETERMINE WHETHER AND WHEN TO START THE NEXT SCREENER CALL (A0 - 01 OR A0 = 10) OR SET AS 860 (END) (REVIEW NEEDED FOR FIELD BY SUPERVISOR, AKA HOLD FOR CAPI)

START NEXT SCREENER AT:

{NAME} REFUSED	01	SET STATUS = 200 (REFUSAL SCREEN) A0 = 01
{UNKNOWN} REFUSED	02	SET STATUS = 220 (REFUSAL SCREEN) A0 = 01
{PROXY} REFUSED	03	SET STATUS = 210 (REFUSAL SCREEN) A0 = 10

INTERVIEWER: PRESS ENTER TO RECORD REASONS FOR REFUSAL IN REFUSAL SCREEN.

SUPERVISOR REVIEW (INTERIM)

(A1 = 15) OR (A2 = 15) OR (A3 = 03 OR r) OR (A4 = r) OR (A4a = 03 OR r) OR (A4b = 03 OR 12) OR (A15 = ANSWER) OR (A18 = 05 OR d) OR (A24 = r) OR (A26=r) OR (A28 = r) OR (A29 = r) OR (A47 = d OR r) OR (A50 = 2) OR (A51 = r) OR (A56 = 05 OR 08) OR (A60 = 00 OR d) OR (A80 = 04 OR d) OR (A101 = 03)

A106. Thank you for your time. Goodbye.

INTERVIEWER: IF CASE NEEDS A SPANISH INTERVIEWER, PLEASE RECORD IN APPOINTMENT OR EXIT, AS APPROPRIATE.

POSSIBLE LANGUAGE PROBLEM 01	SET STATUS = 380 (END)
CALL INFORMANT TO SET TTY/RELAY	
CALL BACK TIME 02	SET STATUS = 380 (END)
NEED TO LOCATE NEW PROXY 03	SET STATUS = 380 (END)
PROXY FAILED COGNITIVE TEST / NO	
OTHER PROXY AVAILABLE 04	SET STATUS = 380 (END)
OTHER SUPERVISOR REVIEW 05	SET STATUS = 380 (END)
CALL LEAD FOR NAME/PROXY INFO 06	SET STATUS = 380 (END)

HOLD FOR CAPI (INTERIM - REQUIRES SUPERVISOR REVIEW)

(A29 = ANSWER) OR (A45 = 01,02, OR d)

A107. Thank you very much. Our field interviewer will call to arrange a time for the interview.

PROGRAMMER: IN ADDITION TO THESE CASES BEING HELD FOR CAPI, REFUSALS AND

UNLOCATABLES WILL ALSO BE HELD FOR CAPI UNDER CERTAIN

CIRCUMSTANCES THAT THE SUPERVISORS WILL DECIDE. NOTE ALSO THAT

ALL CAPI CASES WILL START THE CAPI SCREENER AT A0 = 01.

INTERVIEWER: PRESS 1TO CONTINUE

RESPONDENT WILL CALL MPR (INTERIM)

(A10 = 02) OR (A17 = 05 OR 06)

A108. Thanks for offering to call in. Please write down our toll-free number. {IF (A10 = 02 OR A17 = 06) FILL 877-293-5740. / IF (A17 = 05) FILL Call 877-293-5741 for a TTY interview.} We are available days, evenings, and weekends. If you call after hours, please leave a message and we will get back to you the next day.

INTERVIEWER: PRESS ENTER TO CONTINUE

{NAME} WILL CALL 01	SET STATUS = 830 (END) A0 = 02
{NAME} WILL CALL/TTY	SET STATUS = 830 (END) A0 = 08
{NAME} WILL CALL/RELAY	SET STATUS = 830 (END) A0 = 07

REQUEST FOR LETTER (INTERIM)

(A22 = 01) OR (A25 = 00) OR (A26 = r) OR (A59 = 02)

A109. You should receive the letter in about a week. Thank you for your time. Goodbye.

INTERVIEWER: PRESS 1 TO CONTINUE

START NEXT SCREENER AT...

CONTINUE WITH INTERVIEW

(A78a = 01) OR (A90a = 01)

A110. RESPONDENT CHECK SCREEN

INTERVIEWER: WE SHOW THE RESPONDENT IS

(IF A73 = 01, 02; OR A73 = 03 AND A78a = 01 FILL {NAME} (IF A73 = 04 OR 05 AND A78a = 01; OR A90a = 01 FILL PROXY

INTERVIEWER: IS THIS INFORMATION CORRECT?

(A110 = 00)

A110a. INTERVIEWER: WHO IS THE RESPONDENT?

PRELOADED VARIABLES: SAMPLE TYPE (S2)

SECTION B: DISABILITY AND CURRENT WORK STATUS

DISABILITY STATUS

(All)

B1. **PROGRAMMER:** IF {NAME} COMPLETED AT LEAST ONE PRIOR ROUND (S2 = 02 or S2=04)), ASK: Thank you for agreeing to participate in the National Beneficiary Survey. The survey will cover questions that will help us learn about changes in {your/NAME's} life since the last interview. Your answers are very important to the Social Security Administration. The first questions are about how {your/NAME's} health affects {your/his/her} daily activities. Last time we talked, we asked about physical or mental condition(s) that limited {your/NAME's} ability to work or do other daily activities. We need to ask these questions again to be sure we have up to date information.

Does a physical or mental condition currently limit the kind or amount of work or other daily activities {you/NAME} can do?

- PROBE 1: In other words, are there things {you/NAME} can't do as much or can't do at all that people the same age can?
- PROBE **2:** Daily activities include cooking, shopping, getting around the home, paying bills, or working at a job.

PROGRAMMER: OTHERWISE IF {NAME} IS IN SAMPLE TYPE 1 (S2=01), ASK:

First, I have some questions about how {your/NAME's} health affects {your/his/her} daily activities.

Does a physical or mental condition limit the kind or amount of <u>work or other daily activities</u> {you/NAME} can do?

- PROBE 1: In other words, are there things {you/NAME} can't do as much or can't do at all that people the same age can?
- PROBE **2:** Daily activities include cooking, shopping, getting around the home, paying bills, or working at a job.

YES	01	
NO	00	(B5)
DON'T KNOW	d	(B5)
REFUSED	r	(B5)

(B1=01)

B2. What physical or mental condition is the main reason (you are/NAME is) limited?

INTERVIEWER: ENTER VERBATIM RESPONSE

PROBE 1: By what name do doctors call {your/NAME's} health condition?

PROBE 2: What causes this condition?

<open></open>	
DON'T KNOW	d
REFUSED	r

(B1=01)				
B3.		es NAME} {(IF S2 = 02 OR S2=04) currently} have any other physical dor amount of work or other daily activities {you/he/she} can do?	l or	mental conditions that
	PROBE 1:	In other words, are there things {you/NAME} can't do as much or can same age can?	n't de	o at all that people the
	PROBE 2:	Daily activities include cooking, shopping, getting around the home, $\boldsymbol{\rho}$ job.	ayin	ng bills, or working at a
		YES NO DON'T KNOW REFUSED	00 d	(B18_ age)
(B1=01 a	and B3=01) What are th	nose conditions?		
	INTERVIEV	VER: ENTER VERBATIM RESPONSE		
		By what name do doctors call {your/NAME's} health condition? What causes this condition?		
	<c< td=""><td>PEN></td><td></td><td></td></c<>	PEN>		
		DON'T KNOWREFUSED		
(D4 00		GO TO B18_age		
(B1=00, B5.		NAME} currently receiving disability benefits from Social Security?		
		YES NO DON'T KNOW REFUSED	00 d	. ,
(B1=00, B6.	d, r and B5=0 What phys	1) cal or mental condition is the <u>main</u> reason {you are/NAME is} eligible f	or di	sability benefits?
	INTERVIEV	VER: ENTER VERBATIM RESPONSE		
	PROBE 1:	By what name do doctors call {your/NAME's} health condition?		
	PROBE 2:	What causes this condition?		
	<c< td=""><td>PEN></td><td></td><td></td></c<>	PEN>		
		DON'T KNOWREFUSED		

(B1=00,	d, r and B5=01)			
B7.	{Do you/Does N disability benefits	AME} have any other physical or mental conditions that makes?	e {yo	ou/him/her} eligible fo
		YES		(B18 age)
		DON'T KNOW	d	(B18_ age)
(B1=00, B8.	d, r and B5=01 and What are those	,		
	INTERVIEWER:	ENTER VERBATIM RESPONSE		
		what name do doctors call {your/NAME's} health condition?		
	<open< td=""><td>></td><td></td><td></td></open<>	>		
		DON'T KNOW		
		GO TO B18_ age		
	RAMMER: B9 THR or S2=04)	ROUGH B23 SKIPPED FOR THOSE COMPLETING AT LEAST C	DNE	PRIOR ROUND
(S2=01) B9.	and (B1=00, d, r an {Have you/Has years?	$dB5$ =00,d, r) NAME} received disability benefits from Social Security at an	y tim	ne during the last five
		YES	01	(B11)
		NO		,
		DON'T KNOW		
(S2=01) B10.	We are only inte	d $B5$ =00,d,r and $B9$ =00,d,r) rviewing people who have received disability benefits in the past or and get back to you. Thank you for your help.	five	years. I need to chec
		PRESS 1 TO CONTINUE END CALL. STATUS "SUPERVISOR REVIEW 380."	01	
(S2=01) B11.		d B5=00,d,r and B9=01) AME} still have the physical or mental conditions that made $\{you_y \}$ benefits?	/him	/her} eligible for Socia
		YES	01	
		NO		• •
		DON'T KNOW		
		REFUSED	r	(B15)

B12.	What physical or n	nental condition i	is the main	reason (vou	were/NAME was	eligible for	disability benefits?
------	--------------------	--------------------	-------------	-------------	---------------	--------------	----------------------

J	Trial physical of monal container to the <u>main</u> reacon (you were not a mae) of	ight of alcability borrollic.
	INTERVIEWER: ENTER VERBATIM RESPONSE	
	PROBE 1: By what name do doctors call {your/NAME's} health condition?	
	PROBE 2: What causes this condition?	
	<open></open>	
	DON'T KNOWREFUSED	***
[S2=01] 313 .	1) and (B1=00, d, r and B5=00,d,r and B9=01 and B11=01) {Do you/Does NAME} have any other physical or mental conditions that m disability benefits?	ade {you/him/her} eligible fo
	YES NO	00 (B18_age) d (B18_age)
S2=01) B14.	1) and (B1=00, d, r and B5=00,d,r and B9=01 and B11=01 and B13=01) What are those conditions?	
	INTERVIEWER: ENTER VERBATIM RESPONSE	
	PROBE 1: By what name do doctors call {your/NAME's} health condition? PROBE 2: What causes this condition?	
	<open></open>	
	DON'T KNOWREFUSED	***
	GO TO B18_age	
[S2=01] 315 .	1) and (B1=00, d, r and B5=00,d,r and B9=01 and B11=00,d,r) What physical or mental condition was the main reason (you were/NAME was first started getting disability benefits from Social Security?	as} limited when {you/he/she
	INTERVIEWER: ENTER VERBATIM RESPONSE	
	PROBE 1: By what name did doctors call {your/NAME's} health condition? PROBE 2: What caused this condition?	
	<open></open>	
	DON'T MAIN	
	DON'T KNOWREFUSED	

(S2=01) and (B1=00, d, r and B5=00,d,r and B9=01 and B11=00,d,r) Did {you/NAME} have any other physical or mental conditions that limited the kind or amount of work or B16. other daily activities (you/he/she) could do when (you/he/she) first started getting disability benefits? YES 01 DON'T KNOW d (B18_age) REFUSEDr (B18_age) (S2=01) and (B1=00, d, r and B5=00, d, r and B9=01 and B11=00, d, r and B16=01)B17. What were those conditions? INTERVIEWER: ENTER VERBATIM RESPONSE PROBE 1: By what name did doctors call {your/NAME's} health condition? PROBE 2: What caused this condition? <OPEN> DON'T KNOW d REFUSEDr PROGRAMMER: B18 age THROUGH B23 SKIPPED FOR LONGITUDINAL SAMPLE WHO COMPLETED AT LEAST ONE PRIOR ROUND (S2=02 or S2=04) (S2=01)B18_age. How old {were you/was NAME} when {you/he/she} first became limited in the kind or amount of work or other daily activities {you/he/she} could do? Your best estimate is fine. INTERVIEWER: IF AGE IS NOT KNOWN, ENTER '99' TO PROBE FOR A YEAR. INTERVIEWER: IF LESS THAN ONE YEAR OR SINCE BIRTH, ENTER '0' IN AGE. (B20 IF AGE 0-64) AGE (0-64) (or '99' to probe for year) DON'T KNOW d (B19) REFUSED r (B19) (S2=01) and (B18 age=99) B18_year. PROBE: READ IF NECESSARY: In what year? YEAR (1933-2005) (B20) DON'T KNOW d REFUSED

(S2=01) and (B18_age=d,r) or (B18_age=99 and B18_year=d,r) B19. Did {you/NAME} become limited before the age of 18 or after age 18? PROBE: Your best guess is fine.	
LESS THAN 18	. 02 . d
PROGRAMMER: CALCULATE AGE OF ONSET BASED ON B18_AGE AND B1	8_YEAR:
If B18_age=0-64, then B18_age_calc=B18_age. Else if B18_age=99 and B18_yr \neq d B18_age_calc=0. Else if B18_age=99 and B18_yr \neq d or r and B18_year \neq A68b, B18 Else, if B18_age=99 and B18_yr=d or r, B18_age_calc= B18_yr. Else, if B18_age=d or r,	8_age_calc= B18yr - A68b.
(S2=01 B20. SOFT EDIT: B18_age_calc SHOULD NOT EXCEED CURRENT AGE. IF B18_ TRIGGER EDIT AND DISPLAY FOLLOWING TEXT: INTERVIEWER: AGE (GREATER THAN CURRENT AGE. CHECK ENTRY. IF NECESSARY REAL incorrect answer. I show that {you are/NAME is} now (CURRENTAGE), and { when {you were/(he/she) was} (B18_age_calc). Should I change {your/NAME's} first became limited?	OF DISABILITY ONSET IS O: I must have recorded an iyou/he/she} became limited
CHANGE AGE WHEN FIRST BECAME LIMITED(CHANGE B18_age) SUPPRESS	
(S2=01 B21. CHECK: HAS {NAME} BEEN LIMITED SINCE ADULTHOOD (B18_age_B18_age_calcIS > OR = 18) OR (IF B18_age_calc=D OR R and B19=02)?	_calc <i>NE D OR R, AND</i>
YES	. 01
NO	. 00 (B24)
(S2=01and (B21=01) B22. {Were you/Was NAME} working at a job for pay when {you/he/she} first became	limited?
YES	. 01
NO	. 00 (B24)
DON'T KNOW REFUSED	,
REFUGED	. I (D24)
(S2=01) and (B21=01 and B22=01) B23. Did the job {you/NAME} had at that time require {you/him/her} to use a computer	?
YES	. 01
NO	
DON'T KNOWREFUSED	
1.2. 0022	

CURRENT WORK STATUS

 (All) B24. These next questions are about {your/NAME's} personal goals and {your/his activities. {Are you/ls NAME} <u>currently</u> working at a job or business for pay or pro 		} current work-related
YES NO DON'T KNOW REFUSED	00 d	(B30)
B25. ITEM MOVED TO FOLLOW B29_10_Other		
B26. ITEM MOVED TO FOLLOW B25		
B27. ITEM MOVED TO FOLLOW B26		
(B24=00,d,r) B28. {Have you/Has NAME} been looking for work during the last four weeks? YES	01	
NO	00 d	(B25, new position)
(B28=01)		
B28a. Are {you/NAME} looking for part-time or full-time work?		
FULL-TIME PART-TIME DON'T KNOW REFUSED	02 d	(B29)
(B28=01)	ı	(D29)
B28b. About how many hours per week would {you/NAME} like to work?		
(1-60) (1-168) HOURS		
DON'T KNOW	d r	

(B28=01)

B29. Next, I am going to read you a list of things that some people do to look for work. Please tell me whether or not {you/NAME} did any of these things during the last four weeks. To look for work in the last four weeks did {you/NAME}:

		<u>YES</u>	<u>NO</u>	<u>DK</u>	<u>REF</u>
a.	Contact {your/NAME'S} state's unemployment office?	01	00	d	r
b.	Ask friends or relatives?	01	00	d	r
c.	Look through job advertisements in a newspaper or on the Internet?	01	00	d	r
d.	Contact the State Vocational Rehabilitation Agency or {VRNAME				
	FROM {NAME'S} CURRENT STATE}?	01	00	d	r
e.	Contact a local independent living center?	01	00	d	r
f.	Contact a private employment agency or program?	01	00	d	r
g.	Contact any employers in person, by mail, or by phone?	01	00	d	r
h.	Do anything else that I didn't mention?	01	00	d	r

PROGRAMMER: IF B29h=01, GO TO B29h_OTHERWISE, GO TO B29_1a.

 $(B28=01 \text{ and } B29_h=01)$ B29h_Other. What was it?

INTERVIEWER: PLEASE SPECIFY

	<open></open>		
	DON'T KNOWREFUSED		
(B28=01) B29_1a.	{Have/Has} {you/NAME} received any job offers within the past four weeks?		
	YES		(500 =)
	NO DON'T KNOW		(B29_7) (B25, new position)
NEW ITEM	REFUSED	. r	(B25, new position)
(B29_1a=01) B29_1b.	Did {you/NAME} turn any of these job offers down?		
	YES		
	NO		(B30)
	DON'T KNOW	. d	(B25, new position)
	PEELISED	r	(R25 now position)

NEW ITEM

(B29_1a=01 and B29_1b=01)

B29_2. Now, I am going to read you a list of reasons why people sometimes do not accept a job offer. Please tell me if any of these are reasons why {you/NAME} did not accept a job that {you/he/she} {were/was} offered in the past four weeks.

		YES	S NO	<u>DK</u>	<u>REF</u>
ć	a. {You/NAME} would have needed special equipment or medical				
	devices that {you do / he does /she does} not currently have in order to do the work	01	00	d	r
ŀ	b. [You/NAME] did not have the personal assistance [you/he/she]	01	00	u	!
•	needed to get ready for work each day				
	(Example if needed: This includes things like dressing and bathing)	01	00	d	r
(c. {You/NAME} could not get the help that {you/he/she] needed caring				
	for children or others	01	00	d	r
(d. {You/NAME} did not have reliable transportation to and from the job	01	00	d	r
•	e. The job did not offer a flexible enough schedule	01	00	d	r
f	The job {you/NAME} {were/was} offered did not pay enough	01	00	d	r
(g. The job did not offer health insurance benefits	01	00	d	r
ŀ	n. {You/NAME} would have lost benefits (you need /he needs /she				
	needs) like Social Security, disability insurance, workers'				
	compensation, or Medicaid, if [you/he/she] accepted the job	01	00	d	r
i	. Is there anything else that I did not mention that made {you/NAME}				
	turn down a recent job offer	01	00	d	r
	(700 0 1 04)				
	(B29_2_i=01)				
ı	329_2_i_Oth. What other reasons?				
	<open></open>				
	DON'T KNOW				
	REFUSED	r			
(Dan 1 01	1720 41 04)				
(B29_1a=01 an					
B29_2CHECK	K.CHECK: IS {NAME} A PROXY RESPONDENT (RTYPE=2)?				
	YES	01	(P20 ECUE	~K)	
	NO		(B29_5CHE)	JN)	
	NO	00			
(B29_1a=01 an	d B29 1b=01 AND RTYPE=01)				
	(: IS PAY A REASON RESPONDENT DID NOT ACCEPT JOB (B29_2f=01)?	>			
00201					
	YES	01	(B29 3a)		
	NO		• •		
		-			

NEW ITEM

(B29 2f=01 AND RTYPE=01)

B29_3a. You said that one of the reasons you did not accept a job you were offered was because it did not pay enough.

What is the lowest wage or salary you would have accepted for this job?

INTERVIEWER: Read only if necessary, otherwise code:

\$ _	.	_	
DON'T KNOWREFUSED		•	•
B29_3ahop. Is this:			
HOURLY01 (1	l - 25)	(1-300)	(B29_5CHECK)
DAILY02 (1	I - 384)	(1-1,922)	(B29_4a)
WEEKLY03 (1	I-1,923)	(1-9,615)	(B29_4a)
BI-WEEKLY04 (1	I - 4,166)	(1-20,833)	(B29_4a)
TWICE A MONTH05 (1	I - 4,166)	(1-20,833)	(B29_4a)
MONTHLY06 (1	1-8,333)	(1-41,666)	(B29_4a)
ANNUALLY07 (1	l - 100,000)	(1-500,000)	(B29_4a)
DON'T KNOW		d (B29_4a)	
REFUSED		r (B29_4a)	

NEW ITEM

(B29_2f=00, d, OR r AND RTYPE=01)

B29_3b. If you did get a job offer that matched your current needs and abilities, what is the lowest wage or salary you would be willing to accept for such a job?

INTERVIEWER: If they hesitate or seem to be having difficulty, add: If you have no idea, just say so.

INTERVIEWER: Read only if necessary, otherwise code:

\$ _ .	_	
DON'T KNOW	` '	B29_5CHECK) B29_5CHECK)
B29_3bhop Is this:		
HOURLY	(1-300) (1-1,922) (1-9,615) (1-20,833) (1-20,833) (1-41,666) (1-500,000)	(B29_5CHECK) (B29_4a) (B29_4a) (B29_4a) (B29_4a) (B29_4a) (B29_4a)
DON'T KNOW	. d (B29_4	a)

PROGRAMMER NOTE: FOLLOWING SOFT CHECK IF B29_3ahop or B29_3bhop OUT OF RANGE

REFUSED r (B29_4a)

B29 3check: Soft edit: "Let me make sure I did not make a mistake. You just indicated that the wage or salary you would have accepted for this job is [insert ((B29_3a and B29_3ahop) OR (B29_3b and B29_3hop)). Is this correct?" CHANGE LOWEST WAGE OR SALARY....... 01 (CHANGE B29_3a OR B29 3b) CHANGE PAY PERIOD 02 (CHANGE B29 3ahop OR B29_3bhop) **NEW ITEM** (B29 3ahop=02, 03, 04, 05, 06, d or r) or (B29 3bhop=02, 03, 04, 05, 06, d, or r) B29_4a. How many hours per week would you expect to work for this amount of pay? (Skip to B29_5CHECK) **HOURS** (1-99)DON'T KNOW d (B29 4b) REFUSE r (B29_4b) **NEW ITEM** (B29 4a=d or r)B29_4b. Would you expect to work full-time or part-time? Don't know...... d Refusedr (B29 1a=01 and B29 1b=01) B29_5CHECK. IS LOSING BENEFITS REASON DID NOT ACCEPT JOB (B29_h=1)? **NEW ITEM** $(B29 \ 2 \ h=1)$ B29_5. You said that one of the reasons {you/NAME} did not accept a job was because (you/he/she) would have lost benefits (you/he/she) needed such as Social Security, disability insurance, workers' compensation, or Medicaid. There are many ways people find out about how working will affect their benefits. For example, some people call the Social Security office, some search the Internet, and others contact disability service organizations. Did {you/NAME} contact anyone or do any of these things in order to find out how [your/his/her] benefits would be affected if {you/he/she} went to work? DON'T KNOW d REFUSED.....

Ν	IE۱	N	IT	ΕN	Λ

 $(B29\ 2\ h=1)$

B29_6. What benefits {were/was} {you/NAME} most worried about losing?

INTERVIEWER: MARK ALL THAT APPLY

PRIVATE DISABILITY INSURANCE	01
WORKERS' COMPENSATION	02
VETERANS' BENEFITS	03
MEDICARE	04
MEDICAID	05
SSA DISABILITY BENEFITS	06
PUBLIC ASSISTANCE OR WELFARE	07
FOOD STAMPS	80
PERSONAL ASSISTANCE SERVICES (PAS)	09
UNEMPLOYMENT BENEFITS	10
OTHER STATE DISABILITY BENEFITS	11
OTHER GOVERNMENT PROGRAMS	12
OTHER	13

 $(B29_6=13)$

B29_6_Other: What other benefits?

DON'T KNOW	d

<OPEN>_____

REFUSEDr

GO TO B30

NEW ITEM

(B29 1a=00)

B29_7. Now, I am going to read you a list of reasons why people are sometimes unable to find a job. Please tell me if any of these are reasons why {you/NAME} {have/has} not found a job that {you/he/she} {think/thinks} is right for {you/him/her}.

		<u>YES</u>	NO	<u>DK</u>	<u>REF</u>
a.	{You/NAME} would need special equipment or medical devices				
	to work which {you do /he does /she does} not currently have	01	00	d	r
b.	[You/NAME] [do/does] not have the personal assistance [you/he/she]				
	[need/needs] to get ready for work each day				
	(Example if needed: This includes things like dressing and bathing)	01	00	d	r
c.	{You/NAME} cannot get the help that {you need/ he needs/ she needs]				
	caring for children or others	01	00	d	r
d.	[You/NAME] [do/does] not have reliable transportation to and from work	01	00	d	r
e.	The jobs that are available do not offer a flexible enough schedule	01	00	d	r
f.	{You/NAME} cannot find a job {you are/he is/she is} qualified for	01	00	d	r
g.	The jobs that are available do not pay enough	01	00	d	r
h.	Employers will not give {you/NAME} a chance to show that {you/he/she}				
	can work	01	00	d	r
i.	The jobs that are available do not offer health insurance benefits	01	00	d	r
j.	{You/NAME} would lose benefits (you need / he needs / she needs) like				
	Social Security, disability insurance, workers' compensation, or				
	Medicaid if {you/he/she} took a job.	01	00	d	r
k.	Is there anything else that I did not mention that is a reason why				
	(you/Name) (have/has) not been able to find a job?	01	00	d	r

(B29_7_ B29_7_I	k=01) <_Oth. What other reaso	ons?			
<open:< td=""><td>></td><td></td><td></td><td></td><td></td></open:<>	>				
	DON'T KNOWREFUSED				
(B29_1a=00) B29_7CHECK.	CHECK: IS {NAME} A F	PROXY RESPON	IDENT (RTYPE:	=2)?	
	YES				(B29_9CHECK)
(B29_1a=00 AND RTYPE=0 B29_8CHECK: IS PAY A F		T DID NOT ACCE	EPT JOB (B29_	.7g=1)?	
	YES				
NEW ITEM (B29_7g=1 AND RTYPE=0 B29_8a. You said that one enough. What is abilities?		•	-		
	<i>ERVIEWER:</i> Read only \$	if necessary, oth			
	DON'T KNOW REFUSED B29_8ahop. Is this:				(B29_9CHECK) (B29_9CHECK)
	HOURLY DAILY WEEKLY BI-WEEKLY TWICE A MONTH MONTHLY ANNUALLY	01 (1-25) 02 (1-384) 03 (1-1,923) 04 (1-4,166) 05 (1-4,166) 06 (1-8,333) 07 (1-100,000)	(1-1,922) (1-9,615) (1-20,833) (1-20,833) (1-41,666)	(B29_8c) (B29_8c)	HECK)
	DON'T KNOW				(B29_8c) (B29_8c)
NEW ITEM (B29_7g=00, d, OR r AND R B29_8b. If you did get a you would be w			and abilities, wl	hat is the lo	west wage or salary
	R HESITATES OR SEEI NO INTEREST IN WORI			': If you hav	/e no idea, just say so
INTERVIEWER:	Read only if necessary, \$	otherwise code:	_l		
	DON'T KNOWREFUSED				(B29_9CHECK) (B29_9CHECK)

PRELOADED VARIABLES: SAMPLE TYPE (S2)				
B29_8bhop. Is this:				
HOURLY	01 (1-25)	(1-300)	(B29_9CH	IECK)
DAILY	02 (1-384)	(1-1,922)	(B29_8c)	
WEEKLY	03 (1-1,923)	(1-9,615)	(B29_8c)	
BI-WEEKLY	04 (1-4,166)	(1-20,833)	(B29_8c)	
TWICE A MONTH	05 (1-4,166)	(1-20,833)	(B29_8c)	
MONTHLY	06 (1-8,333)	(1-41,666)	(B29_8c)	
ANNUALLY	07 (1-100,000)	(1-500,000)	(B29_8c)	
DON'T KNOW			d	(B29_8c)
REFUSED			r	(B29_8c)
PROGRAMMER NOTE: FOLLOWIN	G SOFT CHECK IF	B29_8ahop or l	329_8bhop)	OUT OF RANGE
B29_8check: Soft edit: "Let me make sure I di would have accepted for this job is [in correct?"		-		
CHANGE LOWEST	WAGE OR SALARY	<i>(</i>	01	(CHANGE B29_8a OR B29_8b)
CHANGE PAY PER	:IOD		02	(CHANGE B29_8ahop OR B29_8bhop)
SUPPRESS			03	

NEW ITEM

 $(B28_8 ahop = 02,\, 03,\, 04,\, 05,\, 06,\, d,\, or\, r)\, \, or\, (B28_8 bhop = 02,\, 03,\, 04,\, 05,\, 06,\, d,\, or\, r)$

B29_8c. How many hours per week would you expect to work for this amount of pay?

|__|_| (Skip TO B29_9CHECK) HOURS (1-99)

NEW ITEM

 $(B29_8c=d \text{ or } r)$

B29_8d. Would you expect to work full-time or part-time?

FULL-TIME	01
PART-TIME	02
DON'T KNOW	d
REFUSED	r

(B29_1a=00)

B29_9CHECK. IS LOSING BENEFITS REASON DID NOT ACCEPT JOB (B29_7=j)?

YES	01	(B29_9)
NO	00	(B30)

NEW	IT	ΈM
(B29_	7=	=j)

B29_9. You said that one of the reasons {you/NAME} {have/has} not been able to find a job is because {you/he/she} would lose benefits (you need / he needs / she needs) such as Social Security, disability insurance, workers' compensation, or Medicaid if {you/he/she} did get a job. There are many ways people find out about how working will affect their benefits. For example, some people call the Social Security office, some search the Intern anyone or done ne} did go to wo

	Internet, and others contact disability service organizations. {Have/Has} {you/NA done any of these things in order to find out how {your/his/her} benefits will be affect to work?	•
	YES	01
	NO	00
	DON'T KNOW	d
	REFUSED	r
NEW ITE (B29_7=		
B29_10.	What benefits {are/is} {you/NAME} most worried about losing?	
	INTERVIEWER: MARK ALL THAT APPLY	
	PRIVATE DISABILITY INSURANCE	01
	WORKERS' COMPENSATION	02
	VETERANS' BENEFITS	03
	MEDICARE	04
	MEDICAID	05
	SSA DISABILITY BENEFITS	06
	PUBLIC ASSISTANCE OR WELFARE	07
	FOOD STAMPS	08
	PERSONAL ASSISTANCE SERVICES (PAS)	09
	UNEMPLOYMENT BENEFITS	
	OTHER STATE DISABILITY BENEFITS	11
	OTHER GOVERNMENT PROGRAMS	12
	OTHER	13
(B29 10=	=13)	
. –	Other: What other benefits?	
	<open></open>	
	DON'T KNOW	

GO TO B30

REFUSEDr

(B28=00,d, or r) OR (B29 1a= d or r) OR (B29 1b=d or r)

B25. Other beneficiaries have said that they are not working for a number of reasons. I am going to read you a list of these reasons. For each, please tell me if it is a reason why {you are/NAME is} not currently working. {Are you/ Is NAME} not working because PROBE: I need to read the entire list even though some of the reasons may not apply to {you/NAME}. If a reason does not apply to {you/NAME}, please just say so.

INTEDVIEWED. IE DESDONDENTS SAVS 'DOES NOT ADDI V' CODE AS 'NO'

IN	TERVIEWER: IF RESPONDENTS SAYS 'DOES NOT APPLY' CODE AS	'NO'.			
		\/=0		DON'T	5551055
		<u>YES</u>	<u>NO</u>	KNOW	REFUSED
a. b.	A physical or mental condition prevents {you/NAME} from working {You/NAME} cannot find a job that {you are/ he is /she is} qualified	01	00	d	r
	for	01	00	d	r
C.	{You do/NAME does} not have reliable transportation to and from work.	01	00	d	r
d.	You are/NAME is} caring for children or others.	01	00	d	r
e.	ITEM DELETED	01	00	u	•
f.	{You/NAME} cannot find a job {you want/ he wants / she wants}	01	00	d	r
g.	{You are/NAME is} waiting to finish school or a training program	01	00	d	r
h.	Workplaces are not accessible to people with {your/NAME's}				
	disability.	01	00	d	r
i.	{You do/NAME does} not want to lose benefits (you need / he needs / she needs) like Social Security, disability insurance, workers'				
	compensation, or Medicaid.	01	00	d	r
j. k.	{Your/NAME's} previous attempts to work have been discouraging ITEM DELETED	01	00	d	r
I.	Others do not think {you/NAME} can work	01	00	d	r
m.	Employers will not give {you/NAME} a chance to show that				
NE	{you/he/she} can work	01	00	d	r
p.	You/NAME} does not have the special equipment or medical devices				
ρ.	that {you/he/she} would need in order to work	01	00	d	r
q.	{You/NAME} cannot get the personal assistance [you need / he needs	01	00	u	•
4.	/ she needs] in order to get ready for work each day (Example if				
	needed: This includes things like dressing and bathing)	01	00	d	r
(B28=00,d, o	or r) OR (B29_1a= d or r) OR (B29_1b=d or r)				
	e there any other reasons why {you are/NAME is} not working that I did n	ot ment	ion?		
	YES	C)1		
	NO		- (9_11CHE	•
	DON'T KNOW				•
	REFUSED		r (B2	9_11CHE	CK)
(B26=01)					
B27. W	hat are they?				

INTERVIEWER: ENTER VERBATIM RESPONSE

<open></open>	•	
	DON'T KNOW	d
	REFUSED	r

	or r) OR (B29_1a= d or r) OR (B29_1b=d or r) ECK. IS LOSING BENEFITS REASON DID NOT ACCEPT JOB (B25i=01)?		
	YES		
NEW ITEM			
	You said that one of the reasons {you/he/NAME} {are/is} not working is becaudoes} not want to lose benefits (you need / he needs / she needs) such as insurance, workers' compensation, or Medicaid. There are many ways people will affect their benefits. For example, some people call the Social Securit Internet, and others contact disability service organizations. Did {you/NAME} contact these things in order to find out how {your/his/her} benefits would be affected if {	Soofind of the sound of the sou	cial Security, disability out about how working fice, some search the ct anyone or do any of
	YES	01	
	NO	00	
	DON'T KNOW	d	
	REFUSED	r	
NEW ITEM			
(If B25i=01 B29_11b.) What benefits {were/was} {you/NAME} most worried about losing?		
D25_116.	what benefits (were, was) (your wine) most worned about losing:		
	INTERVIEWER: MARK ALL THAT APPLY.		
	PRIVATE DISABILITY INSURANCE	01	
	WORKERS' COMPENSATION		
	VETERANS' BENEFITS	-	
	MEDICARE		
	MEDICAID		
	SSA DISABILITY BENEFITS		
	PUBLIC ASSISTANCE OR WELFARE		
	FOOD STAMPS		
	PERSONAL ASSISTANCE SERVICES (PAS)		
	UNEMPLOYMENT BENEFITS		
	OTHER STATE DISABILITY BENEFITS		
	OTHER GOVERNMENT PROGRAMS		
	OTHER		
(B29_11b=1 B29_11b_0	3) Other: What other benefits?		
	<open></open>		
	DON'T KNOW		
	REFUSED	r	
	or r) OR (B29_1a= d or r) OR (B29_1b=d or r) ECK. CHECK: IS {NAME} A PROXY RESPONDENT (RTYPE=2)?		
	V=0		(200)
	YES		(B30)
	NO	00	

PRELOADED VARIABLES: SAMPLE TYPE (S2) ((B28=00,d, or r) OR (B29 1a= d or r) OR (B29 1b=d or r) AND (RTYPE=01) B29_8CHECK: DID RESPONDENT GIVE CONDITION AS ONLY REASON NOT WORKING (B25_a=01 and (B25 b, B25 c, B25 d, B25 f, B25 g, B25 h, B25 i, B25 j, B25 l, B25 m, B25 n, B25 o=00, d, OR r)? YES 01 (B30) **NEW ITEM** ((B25_a=01 and (B25_b, B25_c, B25_d, B25_f, B25_g, B25_h, B25_i, B25_j, B25_l, B25_m, B25_n, or B25_o=01)) AND (RTYPE=01)) B29_12a. If you did get a job offer that matched your current needs and abilities, what is the lowest wage or salary you would be willing to accept for such a job? INTERVIEWER: IF R HESITATES OR SEEMS TO BE HAVING DIFFICULTY: If you have no idea, just say so. IF R SAYS HAS NO INTEREST IN WORKING, CODE AS DON'T KNOW. **INTERVIEWER:** Read only if necessary, otherwise code: \$|__|_|. DON'T KNOW d (B30) REFUSED r (B30) B29_12ahop. Is this: HOURLY 01 (1-25) (1-300)(B30) DAILY 02 (1-384) (B29_12b) (1-1,922)(1-9,615)WEEKLY 03 (1-1,923) (B29 12b) BI-WEEKLY 04 (1-4,166) (1-20,833)(B29 12b) TWICE A MONTH 05 (1-4,166) (1-20,833)(B29_12b) MONTHLY 06 (1-8,333) (1-41,666)(B29_12b) **ANNUALLY** 07 (1-100,000) (1-500,000)(B29_12b) DON'T KNOW d (B29 12b) REFUSED r (B29_12b) PROGRAMMER NOTE: FOLLOWING SOFT CHECK IF B29_12ahop OUT OF RANGE B29 12check: Soft edit: "Let me make sure I did not make a mistake. You just indicated that the wage or salary you would have accepted for this job is [insert ((B29_12a and B29_12ahop). Is this correct?" CHANGE LOWEST WAGE OR SALARY...... 01 (CHANGE B29_12a) **NEW ITEM** (B29 12ahop=02, 03, 04, 05, 06, d, or r) B29_12b. How many hours per week would you expect to work for this amount of pay? (B30) **HOURS** (1-99)DON'T KNOW d (B29_12c)

REFUSED r (B29_12c)

NEW IT	EM 2b=d or r)			
_		ect to work full-time or part-time?		
		FULL-TIME	01	
		PART-TIME		
			-	
		DON'T KNOW		
		REFUSED	r	
(All) B30.	Did {you/NAME} \	work at a job or business for pay or profit anytime in 2005?		
		YES	01	
		NO	00	
		DON'T KNOW		
		REFUSED		
(All)		NEI OOLD	'	
B33.	CHECK: WAS {N	IAME} WORKING WHEN LIMITATION BEGAN (B22=01)?		
		YES	01	(P27)
		NO		(D37)
D22 00	`	NO	00	
B33=00 B34.	<i>'</i>	IE} CURRENTLY WORKING (B24=01)?		
		YES	01	(B37)
		NO		(1537)
		110	00	
(B33=00	and B34=00)			
B35.		ME} WORK IN 2005 (B30=01)?		
		YES	01	(B37)
		NO		. ,
	PROGRAMMER:	B36 SKIPPED FOR THOSE COMPLETING AT LEAST ONE F S2=04)	PRIO	R ROUND (S2=02 or
(02 01)	1/D22 00 1D2	14 00 1P25 00)		
(S2=01) B36.	and (B33=00 and B3 {Have you/Has N	A=00 and B35=00) IAME} ever worked for pay?		
		YES	Ω1	
		-		
		NO		
		DON'T KNOW	d	
		REFUSED	r	
(All) B37.	Do {your/NAME's skills?	} personal goals include {(IF B36=00) getting a job,} moving up i	n a j	ob or learning new job
		YES	Ω1	
		NO		
		DON'T KNOW	d	
		DEFUSEL/	г	

(All) B37a.	Do {vour/NAME's	s} personal goals include somed	lav working a	nd earning	enough to s	top receiving Soc	ial	
20.0.	Security disability	· ·	.a,			top roconning ood		
		YES			01			
		NO						
		DON'T KNOW			C	I		
		REFUSED			I			
(All)								
B38.	{Do you/Does N/	AME} ever discuss work and car	eer goals with	n family, fri	iends, or any	one else?		
		YES						
		NO) (B47)		
		DON'T KNOW			C	I (B47)		
		REFUSED			I	(B47)		
(B38 =0 B39.		es NAME} discuss {your/his/her) work goolo v	with the me	2012			
DJ9.	wno (ao you/ao	es NAME} discuss (your/nis/ner	work goals v	viin ine mi	JSI?			
	INTERVIEWER:	MARK ONLY ONE.						
		PARENT/GUARDIAN			01	(B40)		
		SPOUSE/PARTNER			02	(B40)		
		FRIEND			03	B (B40)		
		JOB COACH						
		EMPLOYER/SUPERVISOR						
		OTHER RELATIVE						
		CASEWORKER/COUNSELOF						
		MEDICAL PROVIDER						
		OTHER				, ,		
		DON'T KNOW				l (B47)		
		REFUSED				(B47)		
(B38 =0	1 and B39=09)							
	h. Who was it?							
	INTERVIEWER:	PLEASE SPECIFY						
	<open< td=""><td>></td><td></td><td></td><td></td><td></td><td></td><td></td></open<>	>						
		DON'T KNOW			C	ı		
		REFUSED						
(B38=01	1 and B39=01-09)							
B40.	Please tell me h	ow much you agree or disagree agree, or strongly disagree?	e with the follo	owing state	ement. Wou	ld you say you s	trongly	/
			STRONGLY			STRONGLY		REF-
			<u>AGREE</u>	<u>AGREE</u>	DISAGREE	DISAGREE	<u>DK</u>	<u>USED</u>
		RESPONSE FROM B39} thinks						
		s} personal goals should include	:					
		ob, moving up in a job, or						
	learning new	job skills	. 01	02	03	04	d	r

(B38=01 and B39=01-09) B41. {Do you/Does N	AME} discuss {your/his/h	er} work goals w	vith anyone	else?			_
	YES NO DON'T KNOW REFUSED				00 (B47) d (B47)		
(B38=01 and B39=01-09 and B42. Who else {do yo	nd B41=01) ou/does NAME} discuss {y	our/his/her} wo	k goals wit	h?			
INTERVIEWER	MARK ONLY ONE.						
(B38=01 and B39=01-09 an B42_oth. Who was it? INTERVIEWE	PARENT/GUARDIAN SPOUSE/PARTNER FRIEND JOB COACH EMPLOYER/SUPERVIS OTHER RELATIVE CASEWORKER/COUN MEDICAL PROVIDER . OTHER DON'T KNOW REFUSED ad B41=01 and B42=09)	SORSELOR/PROG	RAM STAF	F	02 (B43) 03 (B43) 04 (B43) 05 (B43) 06 (B3) 07 (B43) 08 (B43) 09 (B42_oth) d (B47)		
<open< td=""><td>N></td><td></td><td></td><td></td><td></td><td></td><td></td></open<>	N>						
	DON'T KNOWREFUSED						
	nd B41=01 and B42=01-09) now much you agree or d sagree, or strongly disagr	-	e following	statement. W	ould you say y	ou strongly	
{Your/NAME's} {	RESPONSE FROM	STRONGLY <u>AGREE</u>	<u>AGREE</u>	DISAGREE	STRONGLY DISAGREE	DON'T <u>KNOW</u>	REF- USED
goals should inc moving up in a jo	r/NAME's} personal lude working at a job, ob, or learning new job	. 01	02	03	04	d	r
(B38=01 and B39=01-09 and B44. {Do you/Does N	nd B41=01 and B42=01-09) AME} discuss {your/his/he	er} work goals w	vith anyone	else?			
	YES NO DON'T KNOW				00 (B47) d (B47)		

(B38=01 and B39=01-09 and B41=01 and B42=01-09 and B44=01)

B45. Who else {do you/does NAME} discuss {your/his/her} work goals with?

INTERVIEWER: MARK ONLY ONE.

PARENT/GUARDIAN	01	(B46)
SPOUSE/PARTNER	02	(B46)
FRIEND	03	(B46)
JOB COACH	04	(B46)
EMPLOYER/SUPERVISOR	05	(B46)
OTHER RELATIVE	06	(B46)
CASEWORKER/COUNSELOR/PROGRAM STAFF	07	(B46)
MEDICAL PROVIDER	80	(B46)
OTHER	09	(B45_oth)
DON'T KNOW	d	(B47)
REFUSED	r	(B47)

(B38=01 and B39=01-09 and B41=01 and B42=01-09 and B44=01 and B45=09) B45_oth. Who was it?

INTERVIEWER: PLEASE SPECIFY

<open:< th=""><th>></th><th></th></open:<>	>	
	DON'T KNOW	d
	REFUSED	r

(B38=01 and B39=01-09 and B41=01 and B42=01-09 and B44=01 and B45=01-09)

Please tell me how much you agree or disagree with the following statement. Would you say you strongly agree, agree, disagree, or strongly disagree?

	STRONGLY <u>AGREE</u>	<u>AGREE</u>	DISAGREE	STRONGLY <u>DISAGREE</u>	DON'T <u>KNOW</u>	REF- USED
{Your/NAME's} {RESPONSE FROM B5} thinks {your/NAME's} personal goals						
should include working at a job, moving up in a job, or learning new job skills	01	02	03	04	d	r

(All)

B47. Please tell me how much you agree with the following statements. Would you say you strongly agree, agree, disagree, or strongly disagree?

			STRONGLY AGREE	<u>AGREE</u>	<u>DISAGREE</u>	STRONGLY DISAGREE	DON'T KNOW	REF- USED
	a. b.	You see {yourself/NAME} {(IF B24=01) continuing to work/ (IF B24=00,d,r) working} for pay in the next year(ASK B47b IF B47a=01,02, OTHERWISE GO TO B47c) You see {yourself/NAME} working	01	02	03	04	d	r
		and earning enough to stop receiving disability benefits in the next year	01	02	03	04	d	r
	C.	You see {yourself/NAME} {(IF B24=01) continuing to work/ (IF B24=00,d,r) working} for pay in the next five years	01	02	03	04	d	r
	d.	{ASK B47d IF B47c=01,02, OTHERWISE GO TO B48) You see {yourself/NAME} working and earning enough to stop receiving disability benefits in the						
		next <u>five</u> years	01	02	03	04	d	r
(All) B48.	Ci	HECK: IS {NAME} CURRENTLY WORK	ING (B24 = 01)?				
		YES NO				. ,		
(B48=00 B49.	/	HECK: WAS {NAME} WORKING IN 200	5 (B30 = 01)?					
		YES				01 (D1)		

SECTION C: CURRENT EMPLOYMENT

(All) C1.	Now I am going to ask some questions about the jobs {you/NAME} currently {have/has}. When answering these questions, please include both part-time and full-time jobs, but only include jobs {you <u>hold</u> /NAME <u>holds</u> } for pay or profit.
	How many jobs {do you/does NAME} currently have?
	_ NUMBER OF JOBS (1-5)
(All) C2.	PROGRAMMER: IF MORE THAN ONE JOB (C1>01) AND FIRST JOB: Let us start with {your/NAME's} main job - that is, the job at which {you work/(he/she) works} the most hours.
	What kind of work {do you/does NAME} do, that is, what is {your/NAME's} occupation?
	PROGRAMMER: IF MORE THAN ONE JOB (C1>01) AND SECOND, THIRD, FOURTH, ETC. JOB:
	Now I would like to ask about {your/NAME'S} {second/third/fourth} job. What kind of work {do you/does NAME} do, that is, what is {your/NAME's} occupation?
	ELSE (C1=01): What kind of work {do you/does NAME} do, that is, what is {your/NAME's} occupation?
	INTERVIEWER: ENTER VERBATIM RESPONSE
	PROBE 1: For example, a child-care provider at a private preschool; geometry teacher in a public high school; sales clerk in a women's shoe store.
	PROBE 2: What are {your/NAME'S} main activities or duties? What else {do you/does NAME} do? What else? {Do you /Does NAME} supervise anyone?
	<open></open>
	DON'T KNOW

SECTION C UNIVERSE: CURRENTLY WORKING (B24=01)
VARIABLES NEEDED FROM OTHER SECTIONS: CURRENTLY WORKING (B24), WORKED IN 2005 (B30), RTYPE, BIRTH YEAR (A04_d)
PRELOADED VARIABLES: NONE

(All)
C3. What kind of business is this?

(All) C3.	What kind	of business is this?					
	INTERVIEWER: ENTER VERBATIM RESPONSE						
	PROBE 1:	For what type of organization or industry do you work? For example center, educational facility, food services.	: accounting firm, daycare				
	PROBE 2:	What do they make, sell, or do where {you work/NAME works}?					
	PROBE 3:	Is this mainly manufacturing (making a product), wholesale trade (se or retail trade (selling to customers) or something else?	lling to other businesses)				
	<0	DPEN>					
		DON'T KNOWREFUSED	d r				
(All) C4mth.		nth and year did {you/NAME} start working there? WER : ENTER MONTH HERE AND YEAR ON NEXT SCREEN					
	PROBE: Yo	our best estimate is fine.					
		(1-12) MO					
		DON'T KNOW	d r				
(All) C4yr.	PROBE 1:	In what month and year did {you/NAME} start working there?					
	INTERVIE	NER : ENTER YEAR					
	PROBE 2:	Your best estimate is fine.					
		(1981-2006) YEAR (1951-2006)					
		DON'T KNOW	d r				
(All) C5.		T: YEAR {NAME} STARTED WORKING AT THIS JOB (C4yr) SHOULD YEAR OF BIRTH (A04_d) PLUS 14 YEARS. IF RESPONDENT FAILS					

C5. SOFT EDIT: YEAR {NAME} STARTED WORKING AT THIS JOB (C4yr) SHOULD BE GREATER THAN OR EQUAL TO YEAR OF BIRTH (A04_d) PLUS 14 YEARS. IF RESPONDENT FAILS EDIT, **INTERVIEWER** READ: I must have recorded an incorrect answer. I show that {you were/NAME was} born in (A04_d) and {you/NAME} started working at this job in (C4yr), which means {you/NAME} started working at this job when {you were/he was/she was} (PROGRAMMER CALCULATE AND FILL AGE: C4YR – YEAR OF BIRTH) years old. Is that correct?

YES	01	
NO	02	(CHANGE C4YR)
SUPPRESS		

(All) C5A.	Beneficiaries do not always know that they should report a change in work statu Around that time did {you/NAME} let Social Security know that {you were/ (he/she		
(C5a=01)	YES	00 d	(C6) (C6) (C6)
C5B.	How soon after {you/NAME} started this job did {you/NAME} tell Social Securi working?	ty {y	ou were/(he/she) was}
	PROBE: Your best estimate is fine.		
	INTERVIEWER: IF R TOLD SSA BEFORE STARTED WORKING, CODE AS 1 W	/EEk	ζ.
	WEEKS MONTHS DON'T KNOW REFUSED	02 d	(C5BMonth) (C6)
`	and C5b=01) EK. INTERVIEWER : ENTER NUMBER OF <u>WEEKS</u> WEEKS (1-52)		
	DON'TREFUSED		(C6) (C6)
	and C5b=02) hth. INTERVIEWER: ENTER NUMBER OF MONTHS WEEKS/MONTHS (1-12)		
	DON'TREFUSED		(C6) (C6)
(All) C6 .	{Are you/Is NAME} self-employed at this job? PROBE: Self-employed means that you work for yourself/ or own your} own busin	iess.	
	YES	00 d	

SECTION C UNIVERSE: CURRENTLY WORKING (B24=01) VARIABLES NEEDED FROM OTHER SECTIONS: CURRENTLY WORKING (B24), WORKED IN 2005 (B30), RTYPE, BIRTH YEAR (A04 d) PRELOADED VARIABLES: NONE (All) C7. There are a number of special work programs available to people with disabilities. Is {your/NAME's} job part of a sheltered workshop program, transitional employment program, the Business Enterprise Program for the blind, or a supported employment program? PROBE: A sheltered workshop is a program that provides employment with subsidized wages (or special wages that would not be available in a regular job) for people with disabilities. A transitional employment program allows workers with disabilities to work at reduced levels while they ease back into the workplace. The Business Enterprise Program for the blind offers legally blind persons the opportunity to own their own businesses. Supported employment programs provide job coaches or other onthe-job supports to help individuals with disabilities get and keep jobs. YES 01 DON'T KNOW d REFUSEDr (All) C8. How many hours per week {do you/does NAME} usually work at this job? PROBE: Include overtime if {you/he/she} usually {work/works} overtime. |__|_| HOURS PER WEEK (1-60) (1-168)DON'T KNOW d REFUSED.....r (All) C9. How many weeks per year {do you/does NAME} usually work at this job, including paid vacation and holidays?

PROBE 1: There are 52 weeks in a year.

PROBE 2: Please include time off for vacation and holidays if {you are/NAME is} paid for that time.

PROBE 3: If {you have/NAME has} worked less than a year, please answer for the number of weeks{you expect/NAME expects} to work.

REFUSEDr

|__|_| WEEKS PER YEAR (1-52) DON'T KNOW d

DON'T KNOW d (C12amt) REFUSED r (C12amt) (C10=01)C11. What is {your/NAME's} regular hourly pay, including tips and commissions? PROBE: IF LESS THAN \$5.00 AN HOUR: Does this include tips and commissions? INTERVIEWER: IF ENTERING AN AMOUNT WITH CENTS, PLEASE ENTER DECIMAL POINT \$|__|_| | PER HOUR (1 – 25.00) (1 - 300.00) DON'T KNOW d REFUSEDr GO TO C15 (C10=00, d, or r)Before taxes and other deductions how much {are you/is NAME} paid on this job, including tips and C12amt. commissions.

YEAR (A04_d)

PRELOADED VARIABLES: NONE

(C10=00, d, or r) C12hop.

INTERVIEWER: ENTER HOW OFTEN PAID

DAILY	01	(1-384)	(1-1,922)
WEEKLY	02	(1-1,923)	(1-9,615)
BI-WEEKLY	03	(1-4,166)	(1-20,833)
TWICE A MONTH	04	(1-4,166)	(1-20,833)
MONTHLY	05	(1-8,333)	(1-41,666)
ANNUALLY	06	(1-100,000)	(1-500,000)
DON'T KNOW	d		
REFUSED	r		

PROGRAMMER, CALCULATE MONTHLY PRE-TAX PAY BASED ON C12AMT AND C12HOP FOR EACH JOB:

If C10=1, and C11and C8≠d or r, C JobMnthPay(1)=c11*c8*4.35.

If C10=1 and C8 or C11=d, C_JobMnthPay(1)=d.

If C10=1 and C8 or C11=r and neither are d, C_JobMnthPay(1)=r.

If C10=0, d, or r and C12amt or C12hop=d, C_JobMnthPay(1)=d.

If C10=0, d, or r and C12amt or C12hop=r, and neither are d, C_JobMnthPay(1)=r.

If C10=0, d, or r and c12hop=1, C_JobMnthPay(1)=c12amt*21.74.

If C10=0, d, or r and c12hop=2, C_JobMnthPay(1)=c12amt*4.35.

If C10=0, d, or r and c12hop=3, C_JobMnthPay(1)=c12amt*2.17.

If C10=0, d, or r and c12hop=4, C_JobMnthPay(1)=c12amt*2.

If C10=0, d, or r and c12hop=5, C_JobMnthPay(1)=c12amt.

If C10=0, d, or r and c12hop=6, C_JobMnthPay(1)=c12amt/12.

(C10=00, d, or r)

C13amt. For this job, about how much is left as take-home pay after taxes and other deductions?

PROBE: Is that amount paid daily, weekly, bi-weekly, twice a month, monthly, or annually?

INTERVIEWER: ROUND TO NEAREST DOLLAR AND ENTER HOW OFTEN PAID ON NEXT SCREEN

\$|__|_|_,|__| . 00

DON'T KNOW d

REFUSED r

(C10=00, d, or r)

C13hop. INTERVIEWER: ENTER HOW OFTEN PAID

DAILY	01	(1-346)	(1-1,730)
WEEKLY	02	(1-1,730)	(1 –8,653)
BI-WEEKLY		, ,	(1-18,750)
TWICE A MONTH	04	(1-3,750)	(1-18,750)
MONTHLY	05	(1-7,500)	(1-37,500)
ANNUALLY	06	(1 - 90,000)	(1-450,000)
DON'T KNOW	d		
REFUSED	r		

NBS ROUND 3 INSTRUMENT

SECTION C UNIVERSE: CURRENTLY WORKING (B24=01)

VARIABLES NEEDED FROM OTHER SECTIONS: CURRENTLY WORKING (B24), WORKED IN 2005 (B30), RTYPE, BIRTH

YEAR (A04_d)

PRELOADED VARIABLES: NONE

PROGRAMMER, CALCULATE MONTHLY TAKE HOME PAY FOR EACH JOB BASED ON C13AMT AND C13HOP:

If C10=1 and C11 and C8≠d or r, C JobMnthPayTH(1)=c11*c8*4.35.

If C10=1 and C8_1 or C11=d, C_JobMnthPayTH(1)=d.

If C10=1 and C8_1 or C11=r and neither are d, C_JobMnthPayTH(1)=r.

If C10=0, d, or r and C13amt or C13hop=d, C_JobMnthPayTH(1)=d.

If C10=0, d, or r and C13amt or C13hop=r, and neither are d, C_JobMnthPayTH(1)=r.

If C10=0, d, or r and c13hop=1, C_JobMnthPayTH(1)=c13amt*21.74.

If C10=0, d, or r and c13hop=2, C_JobMnthPayTH(1) =c13amt*4.35.

If C10=0, d, or r and c13hop=3, C_JobMnthPayTH(1)=c13amt*2.17.

If C10=0, d, or r and c13hop=4, C_JobMnthPayTH(1)=c13amt*2.

If C10=0, d, or r and c13hop=5, C_JobMnthPayTH(1)=c13amt.

If C10=0, d, or r and c13hop=6, C_JobMnthPayTH(1)=c13amt/12.

(C10=00, d, or r) and (C12hop=01, 02, 03, 04, 05, or 06) and (C13hop=01, 02, 03, 04, 05, or 06)

C14. SOFT EDIT: AMOUNT OF TAKE-HOME PAY MUST BE LESS THAN OR EQUAL TO PRE-TAX PAY. IF AMOUNT OF CALCULATED MONTHLY TAKE HOME PAY (C_JobMnthPayTH(1)) NE D OR R, AND AMOUNT OF CALCULATED MONTLY PRE-TAX PAY (C_JobMnthPay(1)) NE D OR R, AND C_JobMnthPayTH(1) > C_JobMnthPay(1), TRIGGER EDIT AND DISPLAY FOLLOWING TEXT:. INTERVIEWER, AMOUNT OF CALCULATED MONTLY TAKE HOME PAY IS GREATER THAN AMOUNT OF CACLUATED PRE-TAX PAY. CHECK ENTRY. IF NECESSARY READ: I must have recorded an incorrect answer. You said that {you are/NAME is} paid (C12amt) per (C12hop) before taxes and other deductions which would be about (C_JobMnthPay(1) per month and that (C13amt) per (C13hop), or about (C_JobMnthPayTH(1) per month,is left as take-home pay after taxes and other deductions. Based on what I recorded, your take home pay is more than your pre-tax pay. Should I change the amount {you are/NAME is} paid before taxes and other deductions or the amount {you take/NAME takes} home after taxes and other deductions?

CHANGE AMOUNT PAID BEFORE TAXES AND OTHER		
DEDUCTIONS	01	CHANGE C12amt)
CHANGE AMOUNT OF TAKE-HOME PAY	02	(CHANGE C13amt)
SUPPRESS	03	

(C10=00, d, or r) and (C12hop=01, 02, 03, 04, 05, or 06) and (C13hop=01, 02, 03, 04, 05, or 06)

C14a. SOFT EDIT: DIFFERENCE IN AMOUNT OF CALCUATED MONTHLY TAKE HOME PAY AND CALCULATED MONTHLY PRE-TAX PAY IS GREATER THAN 30%. IF AMOUNT OF TAKE MONTHLY HOME PAY (C_JobMnthPayTH(1)) NE D OR R, AND AMOUNT OF MONTHLY PRE-TAX PAY (C_JobMnthPay(1)) NE D OR R, AND (C_JobMnthPay(1) - C_JobMnthPayTH(1) / C_JobMnthPayTH(1) > .30, TRIGGER EDIT AND DISPLAY FOLLOWING TEXT: INTERVIEWER, DIFFERENCE IN AMOUNT OF CALCUATED MONTHLY TAKE HOME PAY AND CACLUATED MONTHLY PRE-TAX PAY IS GREATER THAN 30%. CHECK ENTRY. IF NECESSARY READ: I may have recorded an incorrect answer. You said that {you are/NAME is} paid (C12amt) per (C12hop) before taxes and other deductions which would be about (C_JobMnthPay(1) per month and that (C13amt) per (C13hop), or about (C_JobMnthPayTH(1) per month is left as take-home pay after taxes and other deductions. Is this correct or should I change the amount {you are/NAME is} paid before taxes and other deductions or the amount {you take/NAME takes} home after taxes and other deductions?

CHANGE AMOUNT PAID BEFORE TAXES AND OTHER		
DEDUCTIONS	01	CHANGE C12amt)
CHANGE AMOUNT OF TAKE-HOME PAY	02	(CHANGE C13amt)
SUPPRESS	03	

LATER IN SECTION K):

PROGRAMMER: CALCULATE TOTAL MONTHLY PAY FROM ALL JOBS COMBINED (TO BE USED

YEAR (A04_d)

PRELOADED VARIABLES: NONE

	If C_JobMnthPay(1) or C_JobMnthPay(2) or C_JobMnthPay(3) (for all jobs listed)=d, C_CurMnthPay=d.
	If C_JobMnthPay(1) or C_JobMnthPay(2) or C_JobMnthPay(3) (for all jobs listed)=r, and none=d, C_CurMnthPay=r. Else, C_CurMnthPay=Sum of (C_JobMnthPay(1) AND C_JobMnthPay(2) AND C_JobMnthPay(3), etc (for all jobs listed)).
(All) C15.C <i>F</i>	IECK: IS {NAME} SELF EMPLOYED (C6=01)?
	YES
(C15=00 C16.	(Have you/Has NAME) received any promotions at this job during the past 12 months?
	YES
(All) C17.C <i>F</i>	IECK: IS {NAME} A PROXY RESPONDENT (RTYPE=2)?
	YES
(C17=00 C18.	Taking all things into account, how satisfied are you with your {main/current} job? Would you say: PROGRAMMER: USE "MAIN" IF C1>01, OTHERWISE USE "CURRENT."
	VERY SATISFIED, 01

(All) C19.

CHECK: IS {NAME} SELF EMPLOYED (C6=01)?

 SOMEWHAT SATISFIED,
 02

 NOT VERY SATISFIED, OR
 03

 NOT AT ALL SATISFIED?
 04

 DON'T KNOW
 d

 REFUSED
 r

(C19=00)

C20. Now, I'd like to ask you a few more questions about {your/NAME's} {main/current} job. I am going to read to you a list of benefits that some employers offer their employees. Please tell me whether or not {your/NAME's} {main/current} employer offers {you/him/her} any of these benefits.

PROGRAMMER: USE "MAIN" IF C1>01, OTHERWISE USE "CURRENT."

Does {your/NAME's} employer offer {you/NAME}

PROBE: Please answer 'yes' if {you are/NAME is} eligible for the benefit but {haven't/hasn't} yet started to receive it.

		DON'T	
<u>YE.</u>	S NO	KNOW	REFUSED
a. Health care insurance? (IF NECESSARY: medical and/or hospital) 01	1 00	d	r
b. Dental benefits?01	1 00	d	r
c. Sick days with pay?01	1 00	d	r
d. Paid vacation? 01	1 00	d	r
e. Free or low-cost childcare? 01	1 00	d	r
f. Transportation, a transportation allowance, or transportation discounts? 01	1 00	d	r
g. Long-term disability benefits? 01	1 00	d	r
h. Pension or retirement benefits? 01	1 00	d	r
i. Flexible health or dependent care spending accounts? 01	1 00	d	r

(All)

C21. CHECK: DOES {NAME} HAVE MORE THAN ONE CURRENT JOB (C1>01)?

YES	01	(REPEAT C2 THROUGH C14 FOR EACH JOB)
NO	00	

(All)

C22. {Do you/Does NAME} use any special equipment related to {your/his/her} disability that helps {you/him/her} work at {your /his/her} job{s}, for example a brace, cane, wheelchair, modified computer hardware or modified computer software?

YES	01	
NO	00	(C27)
DON'T KNOW	d	(C27)
REFUSED	r	(C27)

(C22=01)

C23. What kind of special equipment {do you/does NAME} use?

PROBE: Anything else?

INTERVIEWER: CODE ALL THAT APPLY.

BRACE	01	(C24)
CANE/CRUTCHES/WALKER	02	(C24)
WHEELCHAIR	03	(C24)
MODIFIED COMPUTER HARDWARE	04	(C24)
MODIFIED COMPUTER SOFTWARE	05	(C24)
OTHER	06	
DON'T KNOW	d	(C24)
REFUSED	r	(C24)

DONUT

(C22=01 and C23_Other.	1 C23=06) What kind of other special equipment?		
	<open></open>		
	DON'T KNOWREFUSED		
(C22=01) C24. V	Vho paid for the equipment {you use/he/she uses}?		
els	ROBE: For example, {you or your family/NAME or (his/her) family}, insurance? TERVIEWER: CODE ALL THAT APPLY.	ce or	Medicaid, or someone
	{NAME}	02 03 04 05 06 07 08 09 10 11	(C26amt) (C25) (C25) (C25) (C25) (C25) (C25) (C25) (C25) (C25)
(C22=01 and C24_Other.	C24=11) Who else paid for the equipment {you use/NAME uses}?		
	<open></open>		
	DON'T KNOWREFUSED		
C25. {D	1 C24=03, 04, 05, 06, 07, 08, 09, 10, 11, d, or r) o you or your/Does NAME or (his/her)} family have to pay for any part of the e/(he/she) uses}?	e cost	of the equipment (you
	YES	-	
	NO		,
	DON'T KNOW REFUSED		(C27) (C27)
	NEI 00ED	!	\ - '/

) and (C24=01 or 02) or (C25=01) . How much {do you or your/does NAME or (his/her)} family have to pay?			
	INTERVIEWER: ROUND TO NEAREST DOLLAR HERE AND ENTER HOW SCREEN	/ OF	TEN PAID	ON NEXT
	\$ _ , .00			
	DON'T KNOW	Ь		
	REFUSED			
•) and (C24=01 or 02) or (C25=01) PROBE: How much {do you or your/does NAME or (his/her)} family have to pay? IF NECESSARY: Is that a one-time payment, per week, per month, or per year?			
	INTERVIEWER: ENTER HOW OFTEN PAID			
	ONE TIME PAYMENT PER WEEK PER MONTH PER YEAR DON'T KNOW REFUSED	02 03 04 d	(1-480) (1-2,083)	(1-1,903) (1-8,250)
(All) C27.	{Do you/Does NAME} use any personal assistance services related to {your/his/he {you/him/her} work, for example, a job coach, a sign language interpreter, a reader blind, or a personal care attendant?	-	-	-
	YES	01		
	NO		(C32)	
	DON'T KNOW		. ,	
(C27=01	REFUSED	r	(C32)	
C28.	What kind of personal assistance services {do you/does NAME} use?			
	PROBE: Anything else?			
	INTERVIEWER: CODE ALL THAT APPLY.			
	JOB COACH	01	(C29)	
	SIGN LANGUAGE INTERPRETER			
	READER/INTERPRETER FOR THE BLIND		. ,	
	PERSONAL CARE ATTENDANT/PERSONAL ASSISTANT	04	(C29)	
	OTHER			
	DON'T KNOW		. ,	
	REFUSED	r	(C29)	
*	and C28=05) her. What is the other kind of personal assistance services $\{you/NAME\}$ use?			
	<open></open>			_
	DON'T KNOW	d		
	REFUSED	r		

PROBE: For example, {you or your family/NAME or (his/her) family}, insurance or Medicaid, or someone else?

INTERIVEWER: READ LIST IF NEEDED.

INTERVIEWER: CODE ALL THAT APPLY.

{NAME}	01	(C31amt)
FAMILY	02	(C31amt)
HEALTH INSURANCE	03	(C30)
MEDICARE	04	(C30)
MEDICAID	05	(C30)
EMPLOYER	06	(C30)
STATE VOCATIONAL REHABILITATION AGENCY	07	(C30)
NON-PROFIT ORGANIZATION SERVING PEOPLE WITH		
DISABILITIES	80	(C30)
WORKER'S COMPENSATION	09	(C30)
DISABILITY INSURANCE	10	(C30)
OTHER	11	
DON'T KNOW	d	(C30)
REFUSED	r	(C30)

(C27=01 and C29=11)

C29_Other. Who else paid for the personal assistant services {you use/NAME uses}?

:OPEN>		
DON'T KNOW	. d	
REFUSED	. r	

(C27=01 and C29=03, 04, 05, 06, 07, 08, 09, 10, 11, d, or r)

C30. {Do you or your/Does NAME or (his/her)} family have to pay for any part of the cost of the personal assistance services {you use/(he/she) uses}?

YES	01	
NO	00	(C32)
DON'T KNOW	d	(C32)
REFUSED	r	(C32)

(C27=01) and (C29=01 or 02) or (C30=01)

C31amt. How much {do you or your/does NAME or (his/her)} family have to pay?

INTERVIEWER: ROUND TO NEAREST DOLLAR HERE AND ENTER HOW OFTEN PAID ON NEXT SCREEN

\$ _ .00	
DON'T KNOW	d
REFUSED	r

PRELOADED VARIABLES: NONE

(C27=01) and (C29=01 or 02) or (C30=01)

C31hop. PROBE: How much {do you or your/does NAME or (his/her)} family have to pay?

IF NECESSARY: Is that a one-time payment, per week, per month, or per year?

INTERVIEWER: ENTER HOW OFTEN

ONE TIME PAYMENT	01	(1-25,000)	(1-99,000)
PER WEEK	02	(1-480)	(1-1,903)
PER MONTH	03	(1-2,083)	(1-8,250)
PER YEAR	04	(1-25,000)	(1-99,000)
DON'T KNOW	d		
REFUSED	r		

(All)

C32. CHECK: IS {NAME} SELF EMPLOYED (C6=01)?

YES	01	(C34)
NO	00	

(C32=00)

C33. **PROGRAMMER:** USE "MAIN" IF C1>01, OTHERWISE USE "CURRENT."

Please tell me whether or not {your/NAME's} {main/current} employer has made any of these changes because of {your/his/her} physical or mental condition. Has {your/NAME's} employer because of {your/his/her} physical or mental condition.

PROGRAMMER: USE PROBE IF MORE THAN ONE JOB (C1>01) AND FIRST JOB.

PROBE: {Your/NAME's} main job is the job we have been talking about. The one at which {you work/(he/she) works} the most hours.

		<u>YES</u>	<u>NO</u>	<u>NEEDED</u>	<u>DK</u>	<u>REF</u>
a.	Provided (you/NAME) with any special equipment or assistive					
	technology?					
	(PROBE: For example special tools or equipment, software, or					
	devices to accommodate {your/NAME's} condition in the workplace.)	01	00	02	d	r
b.	Made any changes in <pre>{your/NAME's} work schedule?</pre>					
	(PROBE: For example, working fewer hours, changing the time {you					
	arrive or leave/(he/she) arrives or leaves}, or taking more breaks to					
	accommodate {your/NAME's} condition in the workplace.)	01	00	02	d	r
c.	Made any changes to the tasks (you were/NAME was) assigned or					
	how they are performed?					
	(PROBE: For example, a light duty job or less demanding job tasks					
	to accommodate {your/NAME's} condition in the workplace.)	01	00	02	d	r
d.	Made any changes to the physical work environment to make things					
	easier for {you/NAME}? (PROBE: For example, modifying					
	{your/his/her} work area, improving accessibility in the building, or					
	providing assigned parking to accommodate {your/NAME's}					
	condition in the workplace.)	01	00	02	d	r
e.	Arranged for co-workers or others to assist {you/NAME}?					
	(PROBE: For example, providing a personal care attendant,					
	interpreter, or job coach while at work.)	01	00	02	d	r
f.	Made any other changes that I didn't mention to accommodate					
	{your/NAME's}condition in the workplace?	01	00	02	d	r

PROGRAMMER: IF C33f=01, GO TO C33f_Other, ELSE GO TO C34.

SECTION C UNIVERSE: CURRENTLY WORKING (B24=01)
VARIABLES NEEDED FROM OTHER SECTIONS: CURRENTLY WORKING (B24), WORKED IN 2005 (B30), RTYPE, BIRTH

YEAR	(A04	d)

PRELOADED VARIABLES: NONE

	and C33f=01) her. What other changes?		
	<open></open>		
	DON'T KNOWREFUSED		
(All) C34.	Are there any changes in {your/NAME's} {main/current} job or workplace related to mental condition that {you need/(he/she) needs}, but that have not been made?	to {y	our/his/her} physical or
	PROGRAMMER: USE "MAIN" IF C1>01, OTHERWISE USE "CURRENT."		
	PROGRAMMER: USE PROBE IF MORE THAN ONE JOB (C1>01) AND FIRST	JOB.	
	PROBE: {Your/NAME's} main job is the job that we have been talking about work/(he/she) works} the most hours.	t. T	he one at which {you
	YES NO DON'T KNOW REFUSED	00 d	(C38)
(C34=01 C35.	What are those changes?		
	PROBE: Anything else?		
	INTERVIEWER: ENTER VERBATIM RESPONSE		
	<open></open>		
	DON'T KNOWREFUSED		
(All) C36.	CHECK: IS {NAME} SELF EMPLOYED (C6=01)?		
	YES		(C38)
(C34=01 C37.	and C36=00) Did {you/NAME} or anyone else ask {your/his/her} employer for (any of) these ch	nang	es?
	YES NO DON'T KNOW REFUSED	00 d	
(All) C38. <i>CF</i>	ECK: IS {NAME} A PROXY RESPONDENT (RTYPE=2)?		
	YES	01 00	(C39a2)

PRELOADED VARIABLES: NONE

(RTYPE=1)

C39. Again, thinking about your {main/current} job, how much do you agree with each of the following statements? Would you say you strongly agree, agree, disagree, or strongly disagree?

PROGRAMMER: USE "MAIN" IF C1>01, OTHERWISE USE "CURRENT."

PROGRAMMER: USE PROBE IF MORE THAN ONE JOB (C1>01) AND FIRST JOB.

PROBE: Your main job is the job that we have been talking about. The one at which you work the most hours.

		STRONGLY <u>AGREE</u>	<u>AGREE</u>	DISAGREE	STRONGLY DISAGREE	<u>NA</u>	DON'T KNOW	REF- USED
a.	The pay is good	01	02	03	04	05	d	r
b. c.	The benefits are good	01	02	03	04	05	d	r
d.	security is good. IF {NAME} IS SELF-EMPLOYED (C6=01): The work is steady	01	02	03	04	05	d	r
	EMPLOYED (C6=00, d, or r): You have a chance for promotion ELSE: SKIPTO C39e	01	02	03	04	05	d	r
e.	You have a chance to develop your abilities	01	02	03	04	05	d	r
f.	You have recognition or respect from others.	01	02	03	04	05	d	r
g.	You can work on your own in your job if you want to.	01	02	03	04	05	d	r
h.	You can work with others in a group or team if you want to.	01	02	03	04	05	d	r
i.	Your work is interesting or enjoyable	01	02	03	04	05	d	r
j.	Your work gives you a feeling of accomplishment or contribution	01	02	03	04	05	d	r
k.	IF {NAME} IS NOT SELF- EMPLOYED (C6=00, d, or r): Your supervisor is supportive ELSE: SKIPTO C39I	01	02	03	04	05	d	r
l.	Your co-workers are friendly and supportive	01	02	03	04	05	d	r

NEW ITEM

(All)

C39a2. Sometimes people work fewer hours or earn less money than they could in order to care for family members, keep the cash benefits they need, or just to have more free time. In (your/NAME's) (main/current job), (do you/ does he/ does she) work fewer hours or earn less money than (you/he/she) could for any reason?

YES	01	
NO	00	(C39_1)
DON'T KNOW	d	(C39_1)
REFUSED	r	(C39_1)

PRELOADED VARIABLES: NONE

NEW ITEM

(C39a=01)

C39b. (Do you/Does NAME) work fewer hours or earn less money than (you/he/she) could because (you/he/she)...

PROBE: I need to ask everyone in our study the same questions, even if they don't seem to apply to (you/NAME).

				<u>DON'T</u>	
		<u>YES</u>	NO.	KNOW	REFUSED
a.	{Are/Is} taking care of children or others?	01	00	d	r
b.	{Are/Is} enrolled in school or a training program?	01	00	d	r
C.	Want(s) to keep Medicare or Medicaid coverage?	01	00	d	r
d.	Want(s) to keep cash benefits (you/he/she) need such as				
	disability or workers compensation?	01	00	d	r
e.	Just (do/does) not want to work more?	01	00	d	r
f.	Are there any reasons I didn't mention why (you are/NAME is)				
	working or earning less than (you/he/she) could?	01	00	d	r

PROGRAMMER: IF C39b_f=01 GO TO C39f_Other, ELSE SKIP TO C39_1

(C39b f=01)

C39f_Other What other reason?

<OPEN>_____

DON'T KNOW d
REFUSED r

NEW ITEM

(All)

C39_1. Have any of {your/NAME's} disability-related benefits been reduced or ended because of {your/his/her} (main/current) job?

YES	01	
NO	00	(C39_3)
DON'T KNOW	d	(C39_3)
REFUSED	r	$(C39_3)$

NEW ITEM

(C39 1=01)

C39_2 What benefits have been reduced or ended as a result of {your/NAME's} (main/current) job]? **INTERVIEWER:** MARK ALL THAT APPLY.

PRIVATE DISABILITY INSURANCE	01
WORKERS' COMPENSATION	02
VETERANS' BENEFITS	03
MEDICARE	04
MEDICAID	05
SSA DISABILITY BENEFITS	06
PUBLIC ASSISTANCE OR WELFARE	07
FOOD STAMPS	80
PERSONAL ASSISTANCE SERVICES (PAS)	09
UNEMPLOYMENT BENEFITS	10
OTHER STATE DISABILITY BENEFITS	11
OTHER GOVERNMENT PROGRAMS	12
OTHER	13

PRELOADED VARIABLES: NONE

NΙ	F١	Λ.	 т	Λ /
IV	-	Jν		IVI

(All)

C39_3. Now, I am going to read you a list of things that sometimes help people to work more hours or earn more money. If any of these do not apply to {you/NAME}, please just say so. At [your/NAME's] (main/current) job, do you think that [you/she/he] could work or earn more if you/he/she had

		<u>YES</u>	<u>NO</u>	<u>NA</u>	DK	<u>REF</u>
a.	Help caring for {your/his/her} children or others in the household?	. 01	00	02	d	r
b.	Help with {your/his/her} own personal care such as bathing, dressing,					
	preparing meals, and doing housework?	. 01	00	02	d	r
C.	Reliable transportation to and from work?	. 01	00	02	d	r
d.	Better job skills?	. 01	00	02	d	r
e.	A job with a flexible work schedule?	. 01	00	02	d	r
f.	Help with finding and getting a better job?	. 01	00	02	d	r
g.	Any special equipment or medical devices?	. 01	00	02	d	r
	PROGRAMMER: IF C39_3g=01, GO TO C39_3g_Other,					
	ELSE GO TO C39_3h.					
h.	Is there anything else that I didn't mention that would help					
	[you/NAME] work or earn more?	. 01	00	02	d	r

PROGRAMMER: IF C39_3h=01, GO TO C39_3h_Other, ELSE GO TO C39_4.

(C39 3g=01)

C39_3g_Other. What other special equipment or medical devices?

<open></open>	
DON'T KNOW	

(C39 3h=01)

C39_3h_Other What else?

EN>_____

DON'T KNOW d
REFUSED r

NEW ITEM

(All)

C39_4. One last question about (your / NAME's) (main/current) job. Because of {your/his/her} work, has Social Security needed to make any changes to the amount of {your/his/her} disability benefits?

PROBE: Did {your/NAME's} benefit amount decrease or did {you/he/she} lose benefits altogether?

YES	01	
NO	00	(C39_5)
DON'T KNOW	d	(C39_5)
REFUSED	r	(C39 5)

SECTION C UNIVERSE: CURRENTLY WORKING (B24=01) VARIABLES NEEDED FROM OTHER SECTIONS: CURRENTLY WORKING (B24), WORKED IN 2005 (B30), RTYPE, BIRTH YEAR (A04_d) PRELOADED VARIABLES: NONE **NEW ITEM** (C39 4=01)C39_4a. Because of these changes has the Social Security Administration paid (you/NAME) the wrong benefit amount? YES 01 DON'T KNOW d REFUSEDr **NEW ITEM** C39_5. {Were you/Was NAME} asked to re-pay benefits because the Social Security Administration overpaid {you/him/her}? DON'T KNOW d (C40) REFUSEDr (C40) **NEW ITEM** (C39 5=01)C39_6. {Were you/Was NAME} asked to re-pay the Social Security Administration because {you were/(he was /she was} working while receiving benefits? YES 01 DON'T KNOW d REFUSEDr

CHECK: WAS {NAME} WORKING IN 2005 (B30 = 01)?

(All) C40. PRELOADED VARIABLES: NONE

SECTION D: JOBS/OTHER JOBS DURING 2005

(All)

D1. Now, I will ask you about jobs {you/NAME} had during 2005. When answering these questions, please include both part-time and full-time jobs, but only include jobs {you/NAME} held for pay or profit for one month or longer.

PROGRAMMER: IF C1=01 AND C4 YEAR ≤ 2005, ASK:

Other than (your/NAME's) current job that you already told me about, in 2005 did {you/NAME} work for pay at any other jobs for longer than a month?

PROGRAMMER: IF C1>01 AND C4 YEAR \leq 2005 FOR ONE OR MORE CURRENT JOBS IN SECTION C, ASK:

Other than (your/NAME's) current jobs that you already told me about, in 2005 did {you/NAME} work for pay at any other jobs for longer than a month?

ELSE:

In 2005 did (you/NAME) work for pay at any jobs for longer than a month?

YES	01	(D3)
NO	00	
DON'T KNOW	d	
REFUSED	r	

(D1=00, d, or r)

D2. SOFT EDIT: IF {NAME} WORKED IN 2005 (B30=01) AND {NAME} DID NOT WORK IN 2005 (D1=0,d,r) INTERVIEWER READ: "Earlier you said that {you/NAME} worked for pay in 2005. Let me repeat the question I just read and verify your response."

PROGRAMMER: IF C1=01 AND C4 YEAR < 2005, ASK:

Other than (your/NAME's) current job that you already told me about, in 2005 did (you/NAME) work for pay at any other jobs for longer than a month?

PROGRAMMER: IF C1>01 AND C4 YEAR \leq 2005 FOR ONE OR MORE CURRENT JOBS IN SECTION C, ASK:

Other than (your/NAME's) current jobs that you already told me about, in 2005 did {you/NAME} work for pay at any other jobs for longer than a month?

ELSE:

In 2005 did {you/NAME} work for pay at any jobs for longer than a month?

YES	01	
NO	00	(E1)
DON'T KNOW	d	(E1)
REFUSED	r	(E1)

(D1=01 or D2=01)

D3. **PROGRAMMER:** IF C1=01 AND C4 YEAR ≤ 2005, ASK:

Other than (your/NAME's) current job that you already told me about, how many other jobs did {you/NAME} hold for at least one month in 2005?

PROGRAMMER: IF C1>01 AND C4 YEAR \leq 2005 FOR ONE OR MORE CURRENT JOBS IN SECTION C, ASK:

Other than (your/NAME's) current jobs that you already told me about, how many other jobs did {you/NAME} hold for at least one month in 2005?

ELSE:

How many jobs did {you/NAME}	} hold for a	t least one	month	in 2005?
------------------------------	--------------	-------------	-------	----------

_ NUMBER OF JOBS (1-5)	
DON'T KNOW	C
REFLISED	

PROGRAMMER: D4 THROUGH D23 ASKED FOR ALL JOBS WHEN D3>01

(D1=01 or D2=01)

D4. **PROGRAMMER:** IF MORE THAN ONE JOB (D3>01) AND FIRST JOB:

Let us start with {your/NAME's} main job in 2005 - that is, the job at which {you worked/(he/she) worked} the most hours.

What kind of work {did you/did NAME} do, that is, what was {your/NAME's} occupation?

PROGRAMMER: IF MORE THAN ONE JOB (D3>01) AND SECOND, THIRD, FOURTH, ETC. JOB:

Now I would like to ask about {your/NAME'S} {second/third/fourth} job in 2005.

What kind of work {did you/did NAME} do, that is, what was {your/NAME's} occupation? ELSE (D3=01):

What kind of work {did you/did NAME} do, that is, what was {your/NAME's} occupation?

INTERVIEWER: ENTER VERBATIM RESPONSE

- PROBE 1: For example, a child-care provider at a private preschool; geometry teacher in a public high school; sales clerk in a women's shoe store.
- PROBE 2: What are {your/NAME'S} main activities or duties? What else do you do? What else? Do you supervise anyone?

<open></open>		
DON'T KNOW	d	
REFUSED	r	

(D1=01 or D2=01)

D5. What kind of business was this?

	INTERVIE	WER: ENTER VERBATIM RESPONSE	
	PROBE 1:	For what type of organization or industry did you work? For examp center, educational facility, food services.	ole: accounting firm, daycare
	PROBE 2:	What do they make, sell, or do where {you/NAME} worked?	
	PROBE 3:	Is this mainly manufacturing (making a product), wholesale trade (se retail trade (selling to customers) or something else?	elling to other businesses) o
	<0	DPEN>	
		DON'T KNOWREFUSED	
*	or D2=01) In what mo	nth and year did {you/NAME} start working there?	
	PROBE: Yo	our best estimate is fine.	
	INTERVIE	NER: ENTER MONTH HERE AND YEAR ON NEXT SCREEN	
		(1-12) MO	
		DON'T KNOWREFUSED	
(D1=01 D6yr.	or D2=01) PROBE 1:	In what month and year did {you/NAME} start working there?	
	PROBE 2:	Your best estimate is fine.	
	INTERVIE	<i>NER:</i> ENTER YEAR (1981-2005) YEAR (1951-2005)	
		DON'T KNOW	
(D1=01 d	THAN OR I INTERVIEV in (A04d) a working at	IT: YEAR {NAME} STARTED WORKING AT THIS JOB (D6 YEAR) S EQUAL TO YEAR OF BIRTH (A04d) PLUS 14 YEARS. IF RESPOND WER READ: I must have recorded an incorrect answer. I show that { Ind {you/NAME} started working at this job in (D6 YEAR), which mean this job when {you were/he was/she was} (PROGRAMMER CALCUL EAR OF BIRTH) years old. Is that correct?	DENT FAILS EDIT, you were/NAME was} born as {you/NAME} started ATE AND FILL AGE: D6
		YES	02 (CHANGE D6 YEAR)

VARIABLES NEEDED FROM OTHER SECTIONS: RTYPE, WORKED IN 2005 (B30), NUMBER OF CURRENT JOBS (START DATES OF CURRENT JOBS (C4mth, C4yr), BIRTH YEAR (A04_d) PRELOADED VARIABLES: NONE	(C1
(D1=01 or D2=01) D8mth. In what month and year did {vou/NAME} stop working there?	

`	or D2=01)	
D8mth.	In what month and year did {you/NAME} stop working there? PROBE: Your best estimate is fine.	
	INTERVIEWER: ENTER MONTH HERE AND YEAR ON NEXT SCEEN	
	(1-12) MO DON'T KNOW REFUSED	
(D.1. 0.1	Pa 40	
(D1=01 o	or D2=01) PROBE 1: In what month and year did {you/NAME} stop working there? PROBE 2: Your best estimate is fine. INTERVIEWER: ENTER YEAR (1981-2006) YEAR (1951-2006)	
	DON'T KNOW	
	KLI OGLD	ı
(D1=01 o	or D2=01) SOFT EDIT: DATE {NAME} STOPPED WORKING AT THIS JOB (D8 MONTH, DE LATER THAN DATE {NAME} STARTED WORKING AT THIS JOB (D6 MONTH, DE RESPONDENT FAILS EDIT, INTERVIEWER READ: I must have recorded an incomposition of the started working at this job in (D6 MONTH, D6 YEAR) and that (you/Name) this job in (D8 MONTH, D8 YEAR). Is that correct?	06 YEAR). IF orrect answer. I show that
	YES	
	NO, CHANGE ANSWER TO D6	
	NO, CHANGE ANSWER TO D8 NO, CHANGE ANSWERS FOR BOTH D6 AND D8	
	SUPPRESS	,
(D1=01 o	or D2=01) SOFT EDIT: IF DATE {NAME} STOPPED WORKING AT THIS JOB (D8 MONTH {NAME} STARTED WORKING AT THIS JOB (D6 MONTH, D6 YEAR) ARE THE SYEAR – D6 MONTH, D6 YEAR = 0), INTERVIEWER READ: You said that {you/N working at this job in (D8 MONTH, D8 YEAR). I'd like to verify that {you/NAME} w than one month. Is this correct?	SAME (D8 MONTH, D8 IAME} started and stopped
	YES, WORKED AT JOB FOR LESS THAN ONE MONTH NO, WORKED AT JOB FOR MORE THAN ONE MONTH SUPPRESS	02
(D1=01 d	or D2=01)	
D11.	SOFT EDIT: IF YEAR {NAME} STOPPED WORKING AT THIS JOB (D8 YEAR) IS INTERVIEWER READ: You said that {you/NAME} stopped working at this job in (verify that this job ended before 2005. Is this correct?	

YES, JOB ENDED BEFORE 2005	01
NO, JOB DID NOT END BEFORE 2005	02
SUPPRESS	03

(D1=01 D12.	or D2=01) CHECK: DID {NAME} WORK AT THIS JOB FOR LESS THAN ONE MONTH (D1	0=01)?
	YES	, ,
(D12=00		
D13.	CHECK: DID THIS JOB END BEFORE 2005 (D11=01)?	
	YES	' '
((D1=01	or D2=01) and D12=00 and D13=00)	
D14.	{Were you/Was NAME} self-employed at this job?	
	PROBE: Self-employed means that you work for yourself or own your own business	SS.
	YES	01
	NO	
	DON'T KNOW	d
	REFUSED	r
D15.	Was this job part of a sheltered workshop, transitional employment program Program for the blind, or supported employment program? PROBE: A sheltered workshop is a program that provides employment with sull wages that would not be available in a regular job) for people with employment program. A transitional employment program allows employment program allows workers. A transitional employment program disabilities to work at reduced levels while they ease back into the Enterprise Program for the blind offers legally blind persons for the persons the opportunity to own their own businesses. Supported employed coaches or other on-the-job supports to help individuals with disability.	osidized wages (or special disabilities. A transitional workers. A transitional agram allows workers with workplace. The Business blind offers legally blind loyment programs provide
	YES	01
	NO	
	DON'T KNOW	d
	REFUSED	r
((D1=01 D16.	or D2=01) and D12=00 and D13=00) How many hours per week did {you/NAME} usually work at this job?	
	PROBE: Include overtime if {you/he/she} usually worked overtime.	
	HOURS PER WEEK (1-60) (1-168)	
	DON'T KNOW	d
	REFUSED	r

((D1=01 D17.		d, D12=00 and D13=00) weeks per year did {you/NAME} usually work at this	job, including paid	vaca	ition and holidays?		
		Please include time off for vacations and holidays if here are 52 weeks in a year.	{you were/NAME wa	as} p	paid for that time.		
		_ WEEKS PER YEAR (1-52)					
		DON'T KNOWREFUSED					
((D1=01 D18.	PROGRAM For the pur	dD12=00 and D13=00) MER: IF MORE THAN ONE JOB (D3>01) AND FIF cose of this survey, it is important to obtain some In {your/(his/her)} main job in 2005. On {your/NAM	e information on how				
	PROGRAMMER: IF MORE THAN ONE JOB (D3>01) AND SECOND, THIRD, FOURTH, ETC. JOB: For the purpose of this survey, it is important to obtain some information on how much {you were/NAME was} paid on {your/(his/her)} {second/third/fourth} job in 2005. On {your/NAME's} {second/third/fourth} job {were you/was (he/she} paid by the hour?						
	ELSE (D3=01): For the purpose of this survey, it is important to obtain some information on how much {you were/NAME was} paid on {your/(his/her)} job in 2005. On {your/NAME's} job {were you/was (he/she} paid by the hour? PROGRAMMER: IF MORE THAN ONE JOB (D3>01) AND FIRST JOB:						
	PROBE:	{Your/NAME's} main job in 2005 was the job at whours.	vhich {you worked/(l	he/s	he) worked} the most		
		YES NO DON'T KNOW REFUSED		00 d	(D20amt) (D20amt) (D20amt)		
	· · · · · · · · · · · · · · · · · · ·	D12=00 and D13=00 and D18=01) our/NAME'S} regular hourly pay, including tips and	commissions?				
	PROBE: IF	LESS THAN \$5.00 AN HOUR: Does this include tip	s and commissions	?			
		\$. PER HOUR	(1 - 25.00) (1 - 300.00)				
		DON'T KNOW		d			

9/7/06

GO TO D23

PRELOADED VARIABLES: NONE ((D1=01 or D2=01) and D12=00 and D13=00 and D18=00,d,r) D20amt. Before taxes and other deductions how much {were you/was NAME} paid on this job, including tips and commissions? PROBE: {Were you/Was NAME} paid daily, weekly, bi-weekly, twice a month, monthly, or annually? INTERVIEWER: ROUND TO NEAREST DOLLAR \$|___|, |___|.00 DON'T KNOW d REFUSEDr ((D1=01 or D2=01) and, D12=00 and D13=00 and D18=00,d,r) D20hop. Before taxes and other deductions how much {were you/was NAME} paid on this job, including tips and commissions? PROBE: {Were you/Was NAME} paid daily, weekly, bi-weekly, twice a month, monthly, or annually? INTERVIEWER: ENTER HOW OFTEN PAID DAILY 01 (1-384) (1-1,922)WEEKLY 02 (1-1,923) (1-9,615)(1-20,833)TWICE A MONTH 04 (1-4,166) (1-20,833)(1-8,333)(1-41,666)(1-500,000)DON'T KNOW d REFUSEDr PROGRAMMER, CALCULATE MONTHLY PRE-TAX PAY BASED ON D20AMT AND D20HOP FOR EACH JOB: If D18=1, and D19 and D16≠d or r, C_Job2005MnthPay(1)=D19*D16*4.35. If D18=1 and D19 or D16=d, C_Job2005MnthPay(1)=d. If D18=1 and D19 or D16=r and neither are d, C_Job2005MnthPay(1)=r. If D18=0, d, OR r AND D20AMT OR D20HOP=d, C_Job2005MnthPay(1)=d. If D18=0, d, OR r AND D20AMT OR D20HOP=r AND NEITHER ARE d, C_Job2005MnthPay(1)=r. If D18=0, d, or r and D20hop=1, C_Job2005MnthPay(1)=D20amt*21.74. If D18=0, d, or r and D20hop=2, C_Job2005MnthPay(1)=D20amt*4.35. If D18=0, d, or r and D20hop=3, C_Job2005MnthPay(1)=D20amt*2.17. If D18=0, d, or r and D20hop=4, C_Job2005MnthPay(1)=D20amt*2. If D18=0, d, or r and D20hop=5, C_Job2005MnthPay(1)=D20amt. If D18=0, d, or r and D20hop=6, C_Job2005MnthPay(1)=D20amt/12. If D18=0, d, or r and D20hop or D20amt=d, then C_Job2005MnthPay(1)=d. If D18=0, d, or r and D20hop or D20amt=r and none=d, then C_Job2005MnthPay(1)=r. ((D12=00 or D2=01) and D13=00 and D18=00,d,r) D21amt. For this job, about how much was left as take-home pay after taxes and other deductions? PROBE: {Were you/Was NAME} paid daily, weekly, bi-weekly, twice a month, monthly, or annually? INTERVIEWER: ROUND TO NEAREST DOLLAR \$|___|, |___|.00

DON'T KNOW d
REFUSED r

((D1=01 or D2=01) and D12=00 and D13=00 and D18=00,d,r)

D21hop. For this job, about how much was left as take-home pay after taxes and other deductions?

PROBE: {Were you/Was NAME} paid daily, weekly, bi-weekly, twice a month, monthly, or annually?

INTERVIEWER: ENTER HOW OFTEN PAID.

DAILY	01	(1-346)	(1-1,730)
WEEKLY	02	(1-1,730)	(1-8,653)
BI-WEEKLY	03	(1-3,750)	(1-18,750)
TWICE A MONTH	04	(1-3,750)	(1-18,750)
MONTHLY	05	(1-7,500)	(1-37,500)
ANNUALLY	06	(1-90,000)	(1-450,000)
DON'T KNOW	d		
REFUSED	r		

PROGRAMMER, CALCULATE MONTHLY TAKE HOME PAY FOR EACH JOB BASED ON D21AMT AND D21HOP:

If D18=1 and D19 and D16≠d or r, C Job2005MnthPayTH(1)=D19*D16*4.35.

If D18=1 and D19 or D16=d, C_Job2005MnthPayTH(1)=d.

If D18=1 and D19 or D16=r and neither are d, C_Job2005MnthPayTH(1)=r.

If D18_1=0, d, or r and D21amt or D21hop=d, C_Job2005MnthPayTH(1)=d.

If D18_1=0, d, or r and D21amt or D21hop=r, and neither are d, C_Job2005MnthPayTH(1)=r.

If D18=0, d, or r and D21hop=1, C_Job2005MnthPayTH(1)=D21amt*21.74.

If D18=0, d, or r and D21hop=2, C_Job2005MnthPayTH(1) =D21amt*4.35.

If D18=0, d, or r and D21hop=3, C_Job2005MnthPayTH(1)=D21amt*2.17.

If D18=0, d, or r and D21hop=4, C_Job2005MnthPayTH(1)=D21amt*2.

If D18=0, d, or r and D21hop=5, C_Job2005MnthPayTH(1)=D21amt.

If D18=0, d, or r and D21hop=6, C_Job2005MnthPayTH(1)=D21amt/12.

If D18=0, d, or r and D21hop or D21amt=d, then C_Job2005MnthPayTH(1)=d.

If D18=0, d, or r and D21hop or D21amt=r and none=d, then C_Job2005MnthPayTH(1)=r.

((D1=01 or D2=01) and D12=00 and D13=00 and D18=00,d,r) and (D20hop= 01, 02, 03, 04, 05, or 06) and (D21hop= 01, 02, 03, 04, 05, or 06)

D22. SOFT EDIT: AMOUNT OF CALCULATED MONTHLY TAKE-HOME PAY MUST BE LESS THAN OR EQUAL TO CALCULATED MONTHLY PRE-TAX PAY. IF AMOUNT OF MONTHLY TAKE HOME PAY (C_Job2005MnthPayTH(1)) NE D OR R, AND AMOUNT OF PRE-TAX MONTHLY PAY (C_Job2005MnthPay(1)) NE D OR R, AND C_Job2005MnthPayTH(1) > C_Job2005MnthPay(1), TRIGGER EDIT AND DISPLAY FOLLOWING TEXT:. INTERVIEWER, AMOUNT OF CALCULATED MONTHLY TAKE HOME PAY IS GREATER THAN AMOUNT OF CALCULATED MONTHLY PRE-TAX PAY. CHECK ENTRY. IF NECESSARY READ: I must have recorded an incorrect answer. You said that {you were/NAME was} paid (D20) per (D20 AMOUNT), which would be about (C_Job2005MnthPay(1) before taxes and other deductions and that (D21) per (D21 AMOUNT), or about (C_Job2005MnthPayTH(1) was left as take-home pay after taxes and other deductions. Based on what I recorded, your take home pay was more than your pre-tax pay. Should I change the amount {you were/NAME was} paid before taxes and other deductions or the amount {you took/NAME took} home after taxes and other deductions?

CHANGE AMOUNT PAID BEFORE TAXES AND OTHER		
DEDUCTIONS	01	(CHANGE D20amt)
CHANGE AMOUNT OF TAKE-HOME PAY	02	(CHANGE D21amt)
SUPPRESS	03	

((D1=01 or D2=01) and D12=00 and D13=00 and D18=00,d,r) and (D20hop= 01, 02, 03, 04, 05, or 06) and (D21hop= 01, 02, 03, 04, 05, or 06)

D22a. SOFT EDIT: DIFFERENCE IN AMOUNT OF CALCULATED MONTHLY TAKE HOME PAY AND CALCULATED MONTHLY PRE-TAX PAY IS GREATER THAN 30%. IF AMOUNT OF MONTHLY TAKE HOME PAY (C_Job2005MnthPayTH(1)) NE D OR R, AND AMOUNT OF MONTHLY PRE-TAX PAY (C_Job2005MnthPay(1)) NE D OR R, AND (C_Job2005MnthPay(1)) - C_Job2005MnthPayTH(1) / C_Job2005MnthPayTH(1) > .30, TRIGGER EDIT AND DISPLAY FOLLOWING TEXT: INTERVIEWER, DIFFERENCE IN AMOUNT OF TAKE HOME PAY AND PRE-TAX PAY IS GREATER THAN 30%. CHECK ENTRY. IF NECESSARY READ: I may have recorded an incorrect answer. You said that {you were/NAME was} paid (D20) per (D20 AMOUNT), which would be about (C_Job2005MnthPay(1) before taxes and other deductions and that (D21) per (D21 AMOUNT), or about (C_Job2005MnthPayTH(1) was left as take-home pay after taxes and other deductions. Is this correct or should I change the amount {you were/NAME was} paid before taxes and other deductions or the amount {you took/NAME took} home after taxes and other deductions?

(D1=01 or D2=01)

D23. Why did {you/NAME} stop working at this job?

INTERVIEWER: ASK 'Any other reason?' UNTIL RESPONDENT INDICATES NO OTHER REASONS. IF RESPONDENT SAYS QUIT, ASK FOR THE REASON.

INTERVIEWER: CODE ALL THAT APPLY.

LAYOFF, FIRED, RETIRED:		
LAYOFF, PLANT CLOSED	01	(D24)
FIRED	02	(D24)
RETIRED/OLD AGE	03	(D24)
JOB WAS TEMPORARY AND ENDED		
PROBLEMS WITH JOB:		
DID NOT LIKE SUPERVISOR OR CO-WORKERS	05	(D24)
DID NOT LIKE JOB DUTIES	06	(D24)
DID NOT LIKE JOB EARNINGS	07	(D24)
DID NOT LIKE BENEFITS	80	(D24)
DID NOT LIKE OPPORTUNITIES FOR ADVANCEMENT		, ,
DID NOT LIKE LOCATION		
DID NOT GET ACCOMMODATIONS THAT WERE NEEDED	11	(D24)
OTHER PROBLEMS:		
TRANSPORTATION PROBLEMS	12	(D24)
DECIDED TO GO TO SCHOOL	13	(D24)
CHILD CARE RESPONSIBILITIES (PREGNANT)	14	(D24)
OTHER FAMILY OR PERSONAL REASONS	15	(D24)
DISABILITY:		
DISABILITY GOT WORSE		
BECAME DISABLED	17	(D24)
OTHER	18	(D23_other)
DON'T KNOW	d	(D24)
REFUSED	r	(D24)

	1 or D2=01) and other. What is	1 D23=18) the other reason?				
	<of< th=""><th>PEN></th><th></th><th></th><th></th><th></th></of<>	PEN>				
		DON'T KNOWREFUSED		d r		
(D1=01 D24.	or D2=01) CHECK: Di	ID {NAME} HOLD MORE THAN ONE JOB DURING 2005	(D3 > 01)?			
		YES(REPEAT D4 THROUGH D23 FOR EACH JOB) NO				
(D1=01 D25.	members, ke	people work fewer hours or earn less money than they co sep the cash benefits they need, or just to have more free to or earn less money than (you/he/she) could have for any re	ime. In 2005 eason?	, did (ya	-	work
		NO DON'T KNOW REFUSED		0 (D26) d (D26) r (D26))	
		E) work <u>fewer</u> hours or earn <u>less</u> money than (you/he/she) eed to ask everyone in our study the same questions,				-
	(your tr tiviz).				DON'T	
	. () () () () ()	(ap) taking any of shildren or others?	YES	<u>NO</u>	<u>KNOW</u>	REF
		as} taking care of children or others?		00 00	d d	r r
	-	to keep Medicare or Medicaid coverage?		00	d	r
		to keep cash benefits (you/he/she) needed such as disabil				
		compensation?		00	d	r
		not want to work more?	01	00	d	r
		e any reasons I didn't mention why {you/NAME} might rked or earned less than {you/he/she} could have during 20	005? 01	00	d	r
((D1=0		D25f=01 GO TO D25f_Other, ELSE SKIP TO D25_1 D25=01 and D25f=01) ther reason?				
	<of< td=""><td>PEN></td><td></td><td></td><td></td><td></td></of<>	PEN>				
		DON'T KALOW				
		DON'T KNOW		d r		

((D1=01 or D2=01) and	D25=01)
--------------------------	---------

PRELOADED VARIABLES: NONE

D25_1. Were any of (your/NAME's) disability-related benefits reduced or ended as a result of {your/his/her} working in 2005?

YES	01
NO	00 (D26)
DON'T KNOW	d (D26)
REFUSED	r (D26)

NEW ITEM

(D25 1=01)

D25_2. What benefits were reduced or ended as a result of {your/NAME's} job in 2005?

INTERVIEWER MARK ALL THAT APPLY.

PRIVATE DISABILITY INSURANCE	01
WORKERS' COMPENSATION	02
VETERANS' BENEFITS	03
MEDICARE	04
MEDICAID	05
SSA DISABILITY BENEFITS	06
PUBLIC ASSISTANCE OR WELFARE	07
FOOD STAMPS	80
PERSONAL ASSISTANCE SERVICES (PAS)	09
UNEMPLOYMENT BENEFITS	10
OTHER STATE DISABILITY BENEFITS	11
OTHER GOVERNMENT PROGRAMS	12
OTHER	13

(D25 2=13)

D25_2_Other: What other benefits?

<open></open>				
·-				

DON'T KNOWd
REFUSEDr

(D1=01 or D2=01)

D26. Now, I am going to read you a list of things that sometimes help people to work more hours or earn more money. If any of these do not apply to {you/NAME}, please just say so.

In 2005, do you think {you/NAME} could have worked or earned more if {you/he/she} had...

		<u>YES</u>	<u>NO</u>	<u>NA</u>	<u>DK</u>	<u>REF</u>
a.	Help caring for {your/his/her} children or others in the household?	01	00	02	d	r
b.	Help with {your/his/her} own personal care such as bathing,					
	dressing, preparing meals, and doing housework?	01	00	02	d	r
C.	Reliable transportation to and from work?	01	00	02	d	r
d.	Better job skills?	01	00	02	d	r
e.	A job with a flexible work schedule?	01	00	02	d	r
f.	Help with finding and getting a better job?	01	00	02	d	r
g.	Any special equipment or medical devices?	01	00	02	d	r
	PROGRAMMER: IF D26g=01, GO TO D26g_Other, ELSE GO					
	TO D26h.					
h.	Is there anything else that I didn't mention that would have helped					
	{you/NAME} to work or earn more during 2005?	01	00	02	d	r

	PROGRAMMER	: IF D26h=01, GO TO D26h_Other, ELSE GO TO D27.			
	or D2=01) and D26 Other What othe	m fg=01) r special equipment or medical devices?			
	<open< th=""><th>></th><th></th><th></th><th> (D26h)</th></open<>	>			(D26h)
		DON'T KNOW		(D26h) (D26h)	
	or D2=01) and D26 Other What else?	5h=01)			
	<open< td=""><td>></td><td></td><td></td><td></td></open<>	>			
		DON'T KNOWREFUSED			
(D1=01 o D27.	•	n about when {you were/NAME was} working in 2005. Because or eed to make any changes to the amount of {your/his/her} disability		-	work, did
	PROBE: Did {you	ur/NAME's} benefit amount decrease or did {you/he/she} lose ben	efits	altogether?	•
		YES NO	00 d		
((D1=01 D28.	or D2=01) and D27 Because of thes amount at any tir	e changes did the Social Security Administration pay {you/NAME}	} the	wrong ben	efit
		YES NO	00 d		
(D1=01 o D29.	or D2=02=1) In 2005, {were y overpaid {you/hir	vou/was NAME} ever asked to re-pay benefits because the Soci	ial S	Security Adn	ministration
		YES NO DON'T KNOW REFUSED	00 d	(E1) (E1) (E1)	

((D1=01 or D2=01) and D29=01)

D30. {Were you/Was NAME} asked to re-pay the Social Security Administration because {you were/(he/she) was} working while receiving benefits?

YES	01
NO	00
DON'T KNOW	d
REFUSED	r

 ${\tt PRELOADED\ VARIABLES:\ BSTATUS,\ SSIAGE,\ SAMPLE\ AGE,\ TSTATUS,\ ENSAMPLE,\ SDATE,\ VRNAME,\ SAMPLE\ TYPE}$

(S2), FIXE2, FIXE11, FIXE14, ROUND2 ANSWERS TO E39, E41, E45, E46

SECTION E: AWARENESS OF SSA WORK INCENTIVE PROGRAMS AND TICKET TO WORK AWARENESS OF SSA WORK INCENTIVES

(All)					
E1.	COMPLETED AN ROUND1 (FIXE: supports that Soc	Y PRIOR ROUNDS (\$2=01 OR FIXE11=01 (S2=01). OR IF S2=0 OR FIXE14=01) I'm gople getting disability b	4 AND SKIPPED going to read you benefits, to encourage	"IF {NAME} HAS NOT QUESTIONS DURING a list of incentives and ge them to work. Please any of them.
		PRESS 1 TO CONTINU	JE	0 [,]	1
(All) E2.	CHECK: IS {NAM	E} AN SSI BENEFICIAF	RY (BSTATUS = 01,03)	?	
		YES			
	PROGRAMMER:		IG ROUND 1 (FIXE2=0		D {NAME} WAS ASKED TION E4, OTHERWISE
(S2=04	and E2=01 and FIXE	2=01) or (S2=01 and E2=0	01)		
E3.	{Have you/Has N Security incentive	AME) ever heard of a F	Plan for Achieving Self ries} set aside money		S Plan? This is a Social you/them} reach a work
	•	you/Has NAME} ever he e not sure, please just s			
	INTERVIEWER:	'NOT SURE', CODE A	AS DON'T KNOW		
		YES		0 [,]	1
		NO		00) (PROGRAMMER NOTE BEFORE E5)
		DON'T KNOW			(PROGRAMMER NOTE BEFORE E5)
		REFUSED			r (PROGRAMMER NOTE BEFORE E5)

(S2=04 and FIXE2=01 and E3=01) or ((S2=02 or S2=04) and E2=01 and FIXE2=00) or (S2=01 and E3=01) and E3=01)

E4. {Have you/Has NAME} ever used a Plan for Achieving Self-Support or a PASS Plan?

PROGRAMMER: ONLY INSERT THE FOLLOWING STATEMENT, PROBE, AND INTERVIEWER INSTRUCTION IF {NAME} (S2=02) or (S2=04), WAS AN SSI BENEFICIARY AND {NAME} WAS ASKED QUESTION E3 DURING ROUND 1 (FIXE2=00)):

This is a Social Security incentive that lets {you/beneficiaries} set aside money to be used to help {you/them} reach a work goal. The money set aside does not affect {your/their} benefits.

PROBE: If you're not sure or never heard of a Plan for Achieving Self-Support or a PASS Plan, please just say so.

INTERVIEWER: IF 'NOT SURE' OR 'NEVER HEARD OF' CODE AS DON'T KNOW

YES	01
NO	00
DON'T KNOW	d
REFUSED	r

PROGRAMMER: IF {NAME} (S2=02) or (S2=04), WAS AN SSI BENEFICIARY AND {NAME} WAS ASKED QUESTION E5 DURING ROUND 1 (FIXE2=00)) SKIP TO QUESTION E6, OTHERWISE GO TO QUESTION E5

((S2=04) and E2=01 and FIXE2=01) or (S2=01 and E2=01)

E5. {Have you/Has NAME} ever heard of the <u>earned income exclusion</u> or the <u>1 for 2 earnings</u> exclusion? This is a Social Security incentive where one-half of {your/a beneficiary's} earnings over \$85 are not counted when Social Security figures {your/the} benefit.

PROBE 1: {Have you/Has NAME} ever heard of this exclusion?

PROBE 2: If you're not sure, please just say so.

INTERVIEWER: IF 'NOT SURE', CODE AS DON'T KNOW

YES	. 01	
NO	. 00	(PROGRAMMER NOTE
		BEFORE E7)
DON'T KNOW	. d	(PROGRAMMER NOTE
		BEFORE E7)
REFUSED	. r	(PROGRAMMER NOTE
		BEFORE E7)

(S2=04 and FIXE2=01 and E5=01) or (S2=02 or S2=04 and E2=01 and FIXE2=00) or (S2=01 and E2=01 and E5=01) E6. {Have you/Has NAME} ever used the earned income exclusion or the 1 for 2 earnings exclusion?

PROGRAMMER: ONLY INSERT THE FOLLOWING STATEMENT, PROBE, AND INTERVIEWER INSTRUCTION IF {NAME} (S2=02) or (S2=04), WAS AN SSI BENEFICIARY AND {NAME} WAS ASKED QUESTION E5 DURING ROUND 1 (FIXE2=00)):

This is a Social Security incentive where one-half of {your/a beneficiary's} earnings over \$85 are not counted when Social Security figures {your/the} benefit.

PROBE: If you're not sure or never heard of an earned income exclusion or the 1 for 2 earnings_exclusion, please just say so.

INTERVIEWER: IF 'NOT SURE' OR 'NEVER HEARD OF' CODE AS DON'T KNOW

YES	01
NO	00
DON'T KNOW	d
REFUSED	r

PROGRAMMER: IF {NAME} (S2=02) or (S2=04) AND {NAME} WAS AN SSI BENEFICIARY AND {NAME} WAS ASKED QUESTION E7 DURING ROUND 1 (FIXE2=00)) SKIP TO QUESTION E8, OTHERWISE GO TO QUESTION E7

(S2=04) and E2=01 and FIXE2=01) or (S2=01 and E2=01)

E7. {Have you/Has NAME} ever heard of <u>Property Essential to Self-Support</u>, or <u>PESS</u>? This is a Social Security incentive where the dollar value of tools, equipment, or other property needed for {your/a beneficiary's} work is excluded when Social Security figures {your/the} benefit.

INTERVIEWER: IF 'NOT SURE', CODE AS DON'T KNOW

YES	01	
NO	00	(PROGRAMMER NOTE
		BEFORE E9)
DON'T KNOW	d	(PROGRAMMER NOTE
		BEFORE E9)
REFUSED	r	(PROGRAMMER NOTE
		BEFORE E9)

PRELOADED VARIABLES: BSTATUS, SSIAGE, SAMPLE AGE, TSTATUS, ENSAMPLE, SDATE, VRNAME, SAMPLE TYPE

(S2), FIXE2, FIXE11, FIXE14, ROUND2 ANSWERS TO E39, E41, E45, E46

(S2=04 and FIXE2=01 and E7=01) or ((S2=02 or S2=04) and E2=01 and FIXE2=00) or (S2=01 and E2=01 and E7=01)

E8. {Have you/Has NAME} ever used Property Essential to Self-Support or PESS?

PROGRAMMER: ONLY INSERT THE FOLLOWING STATEMENT, PROBE, AND INTERVIEWER INSTRUCTION IF {NAME} (S2=02) or (S2=04), WAS AN SSI BENEFICIARY AND {NAME} WAS ASKED QUESTION E7 DURING ROUND 1 (FIXE2=00)):

This is a Social Security incentive where the dollar value of tools, equipment, or other property needed for {your/a beneficiary's} work is excluded when Social Security figures {your/the} benefit.

PROBE: If you're not sure or never heard of a Property Essential to Self-Support or PESS, please just say so.

INTERVIEWER: IF 'NOT SURE' OR 'NEVER HEARD OF' CODE AS DON'T KNOW

YES	 01
NO	 00
DON'T KNOW	 d
REFUSED	 r

 $\label{eq:programmer: of the programmer: IF name} \textbf{PROGRAMMER:} \quad \text{IF name} \ (S2=02) \ \text{or} \ (S2=04) \ \text{AND name} \ \text{NAME was an SSI Beneficiary and name} \ \text{NAME} \$

WAS ASKED QUESTION E9 DURING ROUND 1 (FIXE2=00)) SKIP TO QUESTION

E10, OTHERWISE GO TO QUESTION E9

(S2=04 and E2=01 and FIXE2=01) or (S2=01 and E2=01)

E9. {Have you/Has NAME} ever heard of <u>Continued Medicaid Eligibility</u> or <u>1619(b) coverage?</u> This is a Social Security incentive that lets {you/beneficiaries} keep {your/their} Medicaid insurance after {you/they} go to work, even if {your/their} benefits have stopped.

INTERVIEWER: IF 'NOT SURE', CODE AS DON'T KNOW

YES	01	
NO	00	(E11)
DON'T KNOW	d	(E11)
REFUSED	r	(E11)

 $(S2=04 \text{ and } FIXE2=01 \text{ and } E9=01) \text{ or } ((S2=02 \text{ or } S2=04) \text{ and } E2=01 \text{ and } FIXE2=00) \text{ or } (S2=01 \text{ and } E9=01) \text{ or } (S2=02 \text{ or } S2=04) \text{ and } E3=01 \text{$

E10. {Have you/Has NAME} ever used Continued Medicaid Eligibility or 1619(b) coverage?

PROGRAMMER: ONLY INSERT THE FOLLOWING STATEMENT, PROBE, AND INTERVIEWER INSTRUCTION IF {NAME} (S2=02) or (S2=04), WAS AN SSI BENEFICIARY AND {NAME} WAS ASKED QUESTION E9 DURING ROUND 1 (FIXE2=00)):

This is a Social Security incentive that lets {you/beneficiaries} keep {your/their} Medicaid insurance after {you/they} go to work, even if {your/their} benefits have stopped.

PROBE: If you're not sure or never heard of a Continued Medicaid Eligibility or 1619(b) coverage, please just say so.

INTERVIEWER: IF 'NOT SURE' OR 'NEVER HEARD OF' CODE AS DON'T KNOW

YES	01
NO	00
DON'T KNOW	d
REFUSED	r

RELOADED VARIABLES:	L M OTHER SECTIONS: RTYPE BSTATUS, SSIAGE, SAMPLE AGE, TSTATUS, E 4, ROUND2 ANSWERS TO E39, E41, E45, E46	ENSAMPLE, SDATE, VRNAME, SAMPLE TYPE
2=01) 1. CHECK: IS {NAMI BEFORE AGE 22 {	E} 25 OR YOUNGER {C_Intage < or = 25} AN SSIAGE <_22}?	ID DID {NAME} RECEIVE SSI BENEFITS
	YES	-
PROGRAMMER	:: IF {NAME} (S2=02) or (S2=04), WAS AN S YOUNGER, RECEIVED SSI BENEFITS BI QUESTION E12 DURING ROUND 1 (FIXI E13, OTHERWISE GO TO QUESTION E1	EFORE AGE 22, AND WAS ASKED E2=00 and FIXE 11 =00)) SKIP TO QUESTION
2. {Have you/Has incentive where		ncome exclusion? This is a Social Security \$1,340 of earnings per month are not counted
INTERVIEWER:	IF 'NOT SURE', CODE AS DON'T KNOW	
	YES NO DON'T KNOW REFUSED	00 (E14) d (E14)
XE11=00) or (S2=01 and	XE2=01 and FIXE11=01 and E12=01) or (S2= E2=01 and E11=01 and E12=01) NAME} ever used the student earned-income	=04 and E2=01 and E11=01 and FIXE2=00 and exclusion?
PROGRAMMER	:: ONLY INSERT THE FOLLOWING STATE INSTRUCTION IF {NAME} (S2=02) or (S2: ASKED QUESTION E3 DURING ROUND E12 DURING ROUND 1 (FIXE11=00)):	·
	Security incentive where if {you are/a benefic bunted when Social Security figures {your/the}	iary is} in school, up to \$1,340 of earnings pe benefit.
PROBE: If you're	e not sure or never heard of the student earne	ed-income exclusion, please just say so.
INTERVIEWER:	IF 'NOT SURE' OR 'NEVER HEARD OF' CO	DE AS DON'T KNOW
	YES NO DON'T KNOW REFUSED	00 d
l) 4. CHECK: IS {NA	AME} A SSDI BENEFICIARY (BSTATUS=02,0	23)?

YES 01

BEFORE E19)

(S2), FIXE2, FIXE11, FIXE14, ROUND2 ANSWERS TO E39, E41, E45, E46

PROGRAMMER: IF {NAME} (S2=02) or (S2=04, WAS A SSDI BENEFICIARY, AND WAS ASKED QUESTION E15 DURING ROUND 1 (FIXE14=00)) SKIP TO QUESTION E16, OTHERWISE GO TO QUESTION E15

				-		
(S2=04) E15.	•	AME) ever heard	of a Trial Work	<u>Period</u> ? This is a Soine months without losi		rity incentive that lets heir} benefits.
	INTERVIEWER: IF	'NOT SURE', CC	DE AS DON'T K	NOW		
	N E	OON'T KNOW			d	(PROGRAMMER NOTE BEFORE E17) (PROGRAMMER NOTE BEFORE E17)
	r	KEFUSED			г	(PROGRAMMER NOTE BEFORE E17)
(S2=02) E16.	or (S2=04 and E14=0 {Have you/Has NA			2=04 and FIXE14=00) or d?	· (S2=01 ar	nd E14=01 and E15=01)
	This is a Social Se without losing {you	INSTRUCTION IF WAS ASKED QUecurity incentive the r/their} benefits.	F {NAME} (S2=02 IESTION E15 DU nat lets {you/bene	STATEMENT, PROB 2) or (S2=04), WAS AN RING ROUND 1 (FIXE eficiaries) earn above S ork Period, please just	SSDI BE 	
	•			O OF' CODE AS DON'	-	
	N [NO DON'T KNOW			00 d	
		ASKED QUESTION	ON E17 DURING	AS AN SSDI BENEFIC ROUND 1 (FIXE14=0 E17 (S2=04) and E14	0)) SKIP 1	TO QUESTION E18,
E17.		that lets {you/bend		Period of Eligibility for Medicare coverage who		re? This is a Social ey} go to work, even if
	INTERVIEWER: IF	'NOT SURE', CO	DDE AS DON'T K	NOW		
						(PROGRAMMER NOTE BEFORE E19)
	Г	OON'T KNOW			d	(PROGRAMMER NOTE BEFORE E19)
	F	REFUSED			r	(PROGRAMMER NOTE

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BEFORE E19)

(S2=02) or (S2=04 and E14=01 and FIXE14=01 and E17=01) or ((S2=04 and FIXE14=00) or (S2=01 and E14=01 and E17=01) E18. {Have you/Has NAME} ever used an Extended Period of Eligibility for Medicare?

PROGRAMMER: ONLY INSERT THE FOLLOWING STATEMENT, PROBE, AND INTERVIEWER INSTRUCTION IF {NAME} (S2=02) or (S2=04), WAS AN SSDI BENEFICIARY, AND WAS ASKED QUESTION E17 DURING ROUND 1 (FIXE14=00)):

This is a Social Security incentive that lets {you/beneficiaries} keep Medicare coverage when {you/they} go to work, even if {your/their} benefits have stopped.

PROBE: If you're not sure or never heard of an Extended Period of Eligibility for Medicare, please just say so.

YES	01
NO	00
DON'T KNOW	d
REFUSED	r

PROGRAMMER: IF {NAME} (S2=02 or S2=04) SKIP TO QUESTION E20, OTHERWISE GO TO QUESTION E19

(S2=01)

E19. {Have you/Has NAME} ever heard of exclusions for Impairment-Related Work Expenses or Blind Work Expenses or <a href="Blind Work Expenses

INTERVIEWER: IF 'NOT SURE', CODE AS DON'T KNOW

1E9	UT	
NO	00	(PROGRAMMER NOTE BEFORE E20a)
DON'T KNOW	d	(PROGRAMMER NOTE BEFORE E20a)
REFUSED	r	(PROGRAMMER NOTE BEFORE E20a)

(S2=02 or S2=04) or (S2=01 and E19=01)

E20. {Have you/Has NAME} ever used exclusions for Impairment-Related Work Expenses or Blind Work Expenses?

PROGRAMMER: ONLY INSERT THE FOLLOWING STATEMENT, PROBE, AND INTERVIEWER INSTRUCTION IF {NAME} IS IN LONGITUDINAL SAMPLE (S2=02 or S2=04):

This is a Social Security incentive where the value of certain impairment-related items is not counted when figuring {your/a person's} benefits and eligibility.

PROBE: If you're not sure or never heard of Impairment-Related Work Expenses or Blind Work Expenses, please just say so.

INTERVIEWER: IF 'NOT SURE' OR 'NEVER HEARD OF' CODE AS DON'T KNOW

YES	01
NO	00
DON'T KNOW	d
REFUSED	r

(S2), FIXE2, FIXE11, FIXE14, ROUND2 ANSWERS TO E39, E41, E45, E46

PROGRAMMER: IF {NAME} (S2=02 or S2=04) SKIP TO QUESTION E20b, OTHERWISE GO TO QUESTION E20a

(S2=01)

E20a.

{Have you/Has NAME} ever heard of <u>Expedited Reinstatement</u>? This is a Social Security incentive that lets beneficiaries restart their benefits without having to complete a new application if their attempts at work are not successful.

INTERVIEWER: IF 'NOT SURE' ANSWER 'DON'T KNOW'.

YES	01	
NO	00	(PROGRAMMER NOTE BEFORE E20c)
DON'T KNOW	d	(PROGRAMMER NOTE BEFORE E20c)
REFUSED	r	(PROGRAMMER NOTE BEFORE E20c)

(S2=02 or S2=04) or (S2=01 and E20a=01)

E20b. {Have you/Has NAME} ever used Expedited Reinstatement?

PROGRAMMER: ONLY INSERT THE FOLLOWING STATEMENT, PROBE, AND INTERVIEWER INSTRUCTION IF {NAME} IS IN LONGITUDINAL SAMPLE (S2=02 or S2=04):

This is a Social Security incentive that lets beneficiaries restart their benefits without having to complete a new application if their attempts at work are not successful.

PROBE: If you're not sure or never heard of Expedited Reinstatement, please just say so.

INTERVIEWER: IF 'NOT SURE' OR 'NEVER HEARD OF' CODE AS DON'T KNOW

YES	01
NO	00
DON'T KNOW	d
REFUSED	r

PROGRAMMER: IF {NAME} (S2=02 or S2=04) SKIP TO QUESTION E20d, OTHERWISE GO TO QUESTION E20c

(S2=01)

E20c.

{Have you/Has NAME} ever heard of <u>benefit specialists or BPAOs</u>? These are programs funded by Social Security to provide information to beneficiaries about how their benefits are affected by work.

INTERVIEWER: IF 'NOT SURE', ANSWER 'DON'T KNOW'

PROBE: BPAO stands for Benefits Planning, Assistance and Outreach

YES	01	
NO	00	(E21)
DON'T KNOW	d	(E21)
REFUSED	r	(E21)

SECTION E UNIVERSE: ALL VARIABLES NEEDED FROM OTHER SECTIONS: RTYPE PRELOADED VARIABLES: BSTATUS, SSIAGE, SAMPLE AGE, TSTATUS, ENSAMPLE, SDATE, VRNAME, SAMPLE TYPE

(S2=02 or S2=04) or (S2=01 and E20c=01)

E20d. {Have you/Has NAME} ever used a benefit specialist or BPAO?

(S2), FIXE2, FIXE11, FIXE14, ROUND2 ANSWERS TO E39, E41, E45, E46

PROGRAMMER: ONLY INSERT THE FOLLOWING STATEMENT, PROBE, AND INTERVIEWER INSTRUCTION IF {NAME} (S2=02 or S2=04):

These are programs funded by Social Security to provide information to beneficiaries about how their benefits are affected by work.

PROBE 1: BPAO stands for Benefits Planning, Assistance and Outreach

PROBE 2: If you're not sure or never heard of a benefit specialist or BPAO, please just say so.

INTERVIEWER: IF 'NOT SURE' OR 'NEVER HEARD OF' CODE AS DON'T KNOW

YES	01
NO	00
DON'T KNOW	d
REFUSED	r

AWARENESS OF TICKET TO WORK

E21. {Have you/Has NAME} ever heard of the Ticket to Work program?

PROBE: The Ticket to Work program provides services to help disability beneficiaries achieve steady, long-term employment by providing them greater choices and opportunities to go to work if they want to.

YES	01	(CHECKE25)
NO	00	
DON'T KNOW	d	
REFUSED	r	

(E21=00,d,r)

E22. {Have you/Has NAME} heard of any new Social Security programs in the last few years that allow disability beneficiaries to get services to help them go to work or earn more?

YES	01	(E25)
NO	00	
DON'T KNOW	d	
REFUSED	r	

(E21=00,d,r and E22=00,d,r)

E23. CHECK: DID {NAME} HAVE A TICKET ASSIGNED AT THE TIME OF SAMPLE SELECTION (TSTATUS=01)?

YES	01	
NO	00	(G1)

(E21=00,d,r and E22=00,d,r andTstatus=01)

E24. {Are you/Is NAME} aware that, according to Social Security, {you are/(he/she) is} participating in the Ticket to Work program and {your/his/her} Ticket is assigned to {ENSAMPLE} as of {SDATE}?

YES 01	(CHECK25)
NO 00	(EN2005=1, go to F; EN2005=0, go to G)
DON'T KNOW d	(EN2005=1, go to F; EN2005=0, go to G)
REFUSED r	(EN2005=1, go to F; EN2005=0, go to G)

(E22=01)

E25. Does the program {you've/NAME's} heard of include a certificate or Ticket that {you/NAME} would give to a service provider in exchange for services?

YES 01	
NO 00	(EN2005=1, go to F; EN2005=0, go to G)
DON'T KNOW d	(EN2005=1, go to F; EN2005=0, go to G)
REFUSEDr	(EN2005=1, go to F; EN2005=0, go to G)

(E21=01 or E24=01 or E25=01)

CHECKE25. DID {NAME} COMPLETE AT LEAST ONE PRIOR ROUND (S2=02 OR S2=04)?

YES 01	(CHECKE37)
NO 00	(E26)

(S2=01 and (E21=01 or E24=01 or E25=01))

.

E26. PROGRAMMER: IF {NAME} HEARD OF TICKET TO WORK PROGRAM (E21=01) ASK:

In what year did {you/NAME or his/her representative} first hear about the Ticket to Work program? Was it.

PROGRAMMER: OTHERWISE (E21=00,d,r) ASK:

The program is usually called the Ticket to Work program. I'm going to call it the Ticket to Work program in the next few questions. In what year did {you/NAME or his/her representative} first hear about the Ticket to Work program? Was it.

04 (504)

In 2006	01	(E34)
In 2005	02	
BEFORE 2005	03	(E34)
DON'T KNOW	d	(E34)
REFUSED	r	(E34)

(S2=01) and (E21=01 or E24=01 or E25=01 and E26=02)

E27. Now I would like to know <u>how</u> {you/NAME or his/her representative} first heard about the Ticket to Work program. Did {you/NAME or his/her representative} receive information in the mail?

YES	01	
NO	00	(E29)
DON'T KNOW	d	(E29)
REFUSED	r	(E29)

(S2=01 and (E21=01 or E24=01 or E25=01) and E26=02 and E27=01)

E28. Who sent {you/NAME or his/her representative} the information?

INTERVIEWER: CODE ALL THAT APPLY.

SOCIAL SECURITY ADMINISTRATION		
STATE VOCATIONAL REHABILITATION AGENCY, OR	02	(E29)
{VRNAME}	03	(E29)
CURRENT/FORMER EMPLOYER		
FRIEND/FAMILY MEMBER	05	(E29)
INDEPENDENT LIVING CENTE	06	(E29)
EMPLOYMENT NETWORK	07	(E28g_other)
OTHER AGENCY/ORGANIZATION	80	(E28h_Other
HEALTH CARE PROVIDER	09	(E28i_Other)
OTHER		
DON'T KNOW	d	(E29)
REFUSED	r	(E29)
(\$2-01 and (\$21-01 an \$24-01 an \$25-01) and \$26-02 and \$27-01 and \$28-07)		
(S2=01 and (E21=01 or E24=01 or E25=01) and E26=02 and E27=01 and E28=07) E28g_Other. What Employment Network sent {you/NAME} the information?		
L20g_Other: What Employment Network Sent (you/NAME) the information?		
<open></open>		
DON'T KNOW		
REFUSED	r	
(\$2-01, and (\$21-01 or \$24-01 or \$25-01) and \$26-02 and \$27-01 and \$28-08))		
(S2=01, and (E21=01 or E24=01 or E25=01) and E26=02 and E27=01 and E28=08)) E28h_Other. What other Agency/Organization sent {you/NAME} the information?		
L2011_Other. What other Agency/Organization sent (you/NAME) the information:		
<open></open>		
DONIT KALOW		
DON'T KNOW		
REFUSED	r	
((S2=01) and (E21=01 or E24=01 or E25=01) and E26=02 and E27=01 and E28=09))		
E28i_Other. What Health Care Provider sent {you/NAME} the information?		
EZOLONI. What Floater Floward Bolt (you) Will the information.		
<open></open>		
DON'T KNOW		
REFUSED	r	
((S2=01) and (E21=01 or E24=01 or E25=01) and E26=02 and E27=01 and E28=10))		
E28j_Other. Who sent {you/NAME} the information?		
<open></open>		
DON'T KNOW	ا۔	
DON'T KNOW	d	
REFUSED	r	

9/7/06

((S2=01)) and (E21=01 or E24=01 or E25=01) and E26=02))		
E29.	Did somebody call {you/NAME or his/her representative}?		
	YES	01	
	NO		(E31)
	DON'T KNOW		(E31)
	REFUSED		(E31)
((S2 =01) and (E21=01 or E24=01 or E25=01) and E26=02 and E29=01))		
E30.	Who called {you/NAME or his/her representative}?		
	INTERVIEWER: CODE ALL THAT APPLY.		
	INTERVIEWER, CODE ALL THAT AFFLY.		
	SOCIAL SECURITY ADMINISTRATIONMAXIMUS		
	STATE VOCATIONAL REHABILITATION AGENCY, OR {VRNAME}	03	(E31)
	CURRENT/FORMER EMPLOYER		
	FRIEND/FAMILY MEMBER	05	(E31)
	INDEPENDENT LIVING CENTER		
	EMPLOYMENT NETWORK		
	OTHER AGENCY/ORGANIZATION		
	HEALTH CARE PROVIDER		•
	OTHER		
	DON'T KNOW		
	REFUSED	r	(E31)
) and (E21=01 or E24=01 or E25=01) and E26=02 and E29=01 and E30=07)) Other. What Employment Network called {you/NAME}?		
	<open></open>		
	DON'T KNOW	d	
	REFUSED		
	and (E21=01 or E24=01 or E25=01) and E26=02 and E29=01 and E30=08)) Other. What other Agency/Organization called {you/NAME}?		
	Striot. What outer Agency, Organization ballod (your while).		
	<open></open>		
	DON'T KNOW	d	
	REFUSED	r	
) and (E21=01 or E24=01 or E25=01) and E26=02 and E29=01 and E30=09)) ther. What Health Care Provider called {you/NAME}?		
	<open></open>		
	DON'T KNOW	٦	
	REFUSED		

((S2=01) and E21=01 or E24=01 or E25=01) and E26=02 and E29=01 and E30=10)) E30j_Other. Who called {you/NAME}?		
<open>_</open>		
DON'T KNOW	r	on?
YES	00 d	(E33)
SOCIAL SECURITY ADMINISTRATION	03 04 05 06 07 08 09 10 d	(E33) (E33) (E33) (E33) (E32g_other) (E32h_Other) (E32i_Other) (E32j_Other) (E33)
<open></open>		
DON'T KNOW		
<open></open>		
DON'T KNOW	d r	

* * * * * * * * * * * * * * * * * * * *	01 or E24=01 or E25=01) and E26=02 and E31=01 and E32=09)) t Health Care Provider talked to {you/NAME}?	
	<open></open>	
	DON'T KNOWREFUSED	
* * * * * * * * * * * * * * * * * * * *	01 or E24=01 or E25=01) and E26=02 and E31=01 and E32=10)) talked to {you/NAME}?	
	<open></open>	
	DON'T KNOWREFUSED	
	01 or E24=01 or E25=01) and E26=02)) Did {you/NAME or his/her representative} learn about the prog	ram on a web site?
	YES NO DON'T KNOW REFUSED	00 d
E34. PROGRA Do you r	Of or E24=01 or E25=01) AMMER: IF PROXY RESPONDENT, USE {NAME} ecall {NAME} getting a Ticket in the mail from Social Security viriting and the title says 'Ticket to Work and Self-Sufficiency'.	y? It looks like a certificate with blue
	YES NO DON'T KNOW REFUSED	00 d
* * * * * * * * * * * * * * * * * * * *	01 or E24=01 or E25=01) and E34=00,d,r)) IAME} ever try to get a Ticket from Social Security or anywhere	e else?
	YES NO DON'T KNOW REFUSED	00 (F31) d (F31)
E36. {Have your Employment	KET =01 or E24=01 or E25=01) and (E34=01 or E35=01)) bu/Has NAME} ever used {your/his/her} Ticket to sign usent Networks are organizations or businesses that offer ser arn more money as part of the Ticket to Work Program.	
PROBE:	Employment Networks can be public or private and Rehabilitation Agency.	can include the State Vocationa
	YES NO DON'T KNOW REFUSED	00 (F1) d (F1)

SECTION E UNIVERSE: ALL VARIABLES NEEDED FROM OTHER SECTIONS: RTYPE PRELOADED VARIABLES: BSTATUS, SSIAGE, SAMPLE AGE, TSTATUS, ENSAMPLE, SDATE, VRNAME, SAMPLE TYPE (S2), FIXE2, FIXE11, FIXE14, ROUND2 ANSWERS TO E39, E41, E45, E46

TICKET USE IN 2005

((S2=02 or S2=04) and (E21=01 or E24=01 or E25=01)) or (S2=01 and (E34=01 and E36=01) or (E34=00,d,r and E35=01 and E36=01)

CHECK37. DID {NAME} COMPLETE IMMEDIATELY PRIOR ROUND (S2=02) AND WAS {NAME} SIGNED UP WITH AN EMPLOYMENT NETWORK IN 2005 {IN ROUND 2, E41=01 OR E45=01}?

YES	01	
NO	00	(E37)

(S2=02 and (E21=01 or E24=01 or E25=01) and CHECK37=01)

E37a. Now I am going to ask about {your/NAME's} Ticket use in 2005. When we interviewed you last year, you said {you were /NAME was} signed up with {EN FROM ROUND 2, E39 OR EN FROM E46 IF E41=01 OR E45=01}. {Are you/Is NAME} currently signed up with {EN FROM ROUND 2, E39 OR EN FROM E46, IF E41=01 OR E45=01}?

PROBE: IF EN NAME FILL IS 99999999: When we interviewed {you/NAME} in 2005, {you/NAME} said that {you were/he/she was} signed up with an EN, but {you/NAME} did not know the name. {Are you/Is NAME} still signed up with this EN from 2005?

YES	01	(E37b)
NO	00	
DON'T KNOW	d	
REFUSED	r (E38)

((S2=02 and (E21=01 or E24=01 or E25=01) and CHECK37=01 and E37a=00,d,r))

E37Amth. In what month and year did {you/NAME} stop receiving services from {EN FROM ROUND 2 E39 OR E46 WHEN E41=01 OR E45=01}?

PROBE: Your best estimate is fine.

INTERVIEWER: ENTER MONTH HERE AND YEAR ON NEXT SCREEN

|__|__| (1-12)
MO

DON'T KNOW d
REFUSED r

((S2=02 and (E21=01 or E24=01 or E25=01) and CHECK37=01 and E37a=00,d,r))

E37ayr. PROBE: In what month and year did {you/NAME} stop receiving services from {EN FROM ROUND 2, E39 OR E46 WHEN E41=01 OR E45=01}?

PROBE: Your best estimate is fine.

INTERVIEWER: ENTER YEAR

YEAR	
(2005-2006)	
(2001-2006)	
DON'T KNOW	d
REFUSED	r

(S2=02 and (E21=01 or E24=01 or E25=01) and CHECK37=01 and E37a=00,d,r and E37ayr<2005 or E37ayr>2006)
E37a0. SOFT EDIT: [YEAR STOPPED RECEIVING SERVICES (E37ayr) SHOULD BE 2005 OR 2006.] IF {NAME}
FAILS EDIT, INTERVIEWER READ: Let me make sure I did not make a mistake. i I entered that you stopped receiving services from {EN FROM ROUND 2, E39 OR EN FROM E46 IF E41=01 OR E45=01} in [insert yr from E37ayr]. Is this correct?

YES	01	
NO	02	(CHANGE E37ayr)
SUPPRESS	03	

((S2=02 and (E21=01 or E24=01 or E25=01) and CHECK37=01 and E37a=00,d,r))

E37a1. Why {are you/is NAME} no longer receiving services from {EN FROM ROUND 2 E39 OR E46 WHEN E41=01 OR E45=01}?

INTERVIEWER: ENTER VERBATIM RESPONSE

<open:< th=""><th></th></open:<>		
	DON'T KNOW	d
	REFUSED	r

(S2=02 and (E21=01 or E24=01 or E25=01) and CHECK37=01)

E37b. {Were you/Was NAME} signed up with any other Employment Networks or a State Vocational Rehabilitation Agency at any time in 2005?

YES	01	(E38)
NO	00	(E44)
DON'T KNOW	d	(E44)
REFUSED	r	(F44)

((S2=02 or S2=04) and (E21=01 or E24=01 or E25=01)) and CHECK37=00)) or ((S2=01 and (E21=01 or E24=01 or E25=01)) and E36=01 and CHECK37=00))

PROGRAMMER: IF {NAME} IS IN LONGITUDINAL SAMPLE AND COMPLETED IMMEDIATELY PRIOR (S2 = 02), ASK: Now I am going to ask you about {your/NAME's} Ticket use in 2005. {Were you/Was NAME} signed up with any Employment Networks or a State Vocational Rehabilitation Agency at any time in 2005?

PROBE: Employment Networks are organizations or businesses that offer services to help people with disabilities work or earn more money as part of the Ticket to Work Program. Employment Networks can be public or private and can include the State Vocational Rehabilitation Agency.

PROGRAMMER: IF {NAME} IS NOT IN LONGITUDINAL SAMPLE (S2=01) OR IS IN LONGITUDINAL SAMPLE BUT DID NOT COMPLETE IMMEDIATELY PRIOR ROUND (), ASK: {Were you/Was NAME} signed up with any Employment Networks or a State Vocational Rehabilitation Agency at any time in 2005?

PROBE: Employment Networks are organizations or businesses that offer services to help people with disabilities work or earn more money as part of the Ticket to Work Program. Employment Networks can be public or private and can include the State Vocational Rehabilitation Agency.

YES	01	
NO	00	(E44)
DON'T KNOW	d	(E44)
REFUSED	r	(E44)

9/7/06 E-16 NBS ROUND 3 INSTRUMENT

SECTION E UNIVERSE: ALL
VARIABLES NEEDED FROM OTHER SECTIONS: RTYPE
PRELOADED VARIABLES: BSTATUS, SSIAGE, SAMPLE AGE, TSTATUS, ENSAMPLE, SDATE, VRNAME, SAMPLE TYPE
(S2), FIXE2, FIXE11, FIXE14, ROUND2 ANSWERS TO E39, E41, E45, E46

((S2=02 or S2=04) and (E21=01 or E24=01 or E25=01) and CHECK37=00 and E37=01) or ((S2=02 and (E21=01 or E24=01 or E25=01) and CHECK37=01 and E37b=01)) or ((S2=01 and (E21=01 or E24=01 or E25=01) and E36=01 and CHECK37=00 and E37=01)

E38. **PROGRAMMER:** IF {NAME} IS CURRENTLY SIGNED UP WITH OTHER ENs (E37b=01), USE "OTHER" How many {other} Employment Networks {were you/was NAME} signed up with in 2005?

_ EMPLOYMENT NETWORKS IN 2005 (1-2) (1-5)	
DON'T KNOW	d r

((S2=02 or S2=04) and (E21=01 or E24=01 or E25=01) and CHECK37=00 and E37=01) or ((S2=02 and (E21=01 or E24=01 or E25=01) and CHECK37=01 and E37b=01)) or ((S2=01 and (E21=01 or E24=01 or E25=01) and E36=01 and (CHECK37=00 and E37=01))

E39. **PROGRAMMER:** IF MORE THAN ONE EMPLOYMENT NETWORK IN 2005 ((IF S2=01,04 and E38>1) OR (IF S2=02 and E37a=01 and E37b=01) OR (IF S2=02 and E38>1)), USE {FIRST, SECOND, THIRD, ETC.}

PROGRAMMER: IF {NAME} IS CURRENTLY SIGNED UP WITH EN FROM IMMEDIATELY PRIOR ROUND (E37a=01) AND IS CURRENTLY SIGNED UP WITH OTHER ENs (E37b=01), USE "OTHER"

What was the name of the {first, second, third, fourth, fifth} {other} Employment Network {you were/ NAME was} signed up with in 2005?

INTERVIEWER: ENTER VERBATIM RESPONSE

E39a (EN#1 2005) <string=240></string=240>	
E39b (EN#2 2005) <string=240></string=240>	
E39c (EN#3 2005) <string=240></string=240>	
E39d (EN#4 2005) <string=240></string=240>	
E39e (EN#5 2005) <string=240></string=240>	
DON'T KNOW	d
REFUSED	r

PROGRAMMER: ASK E40- E43 FOR EACH EMPLOYMENT NETWORK LISTED IN E39

((S2=02 or S2=04) and (E21=01 or E24=01 or E25=01) and CHECK37=00 and E37=01) or ((S2=02 and (E21=01 or E24=01 or E25=01) and CHECK37=01 and E37b=01)) or ((S2=01 and (E21=01 or E24=01 or E25=01) and E36=01 and (CHECK37=00 and E37=01))

E40mth. The Ticket to Work program started in 2001. In what month and year did {you/NAME} first use {your/his/her} ticket with {EN IN 2005 FROM E39}?

PROBE: Your best estimate is fine.

INTERVIEWER: ENTER MONTH HERE AND YEAR ON NEXT SCREEN

(1-12)	
MO	
DON'T KNOW	d
REFLISED	r

SECTION E UNIVERSE: ALL VARIABLES NEEDED FROM OTHER SECTIONS: RTYPE PRELOADED VARIABLES: BSTATUS, SSIAGE, SAMPLE AGE, TSTATUS, ENSAMPLE, SDATE, VRNAME, SAMPLE TYPE (S2), FIXE2, FIXE11, FIXE14, ROUND2 ANSWERS TO E39, E41, E45, E46

((S2=02 or S2=04) and (E21=01 or E24=01 or E25=01) and CHECK37=00 and E37=01) or ((S2=02 and (E21=01 or E24=01 or E2 E25=01) and CHECK37=01 and E37b=01)) or ((S2=01 and (E21=01 or E24=01 or E25=01) and E36=01 and (CHECK37=00 and E37=01))

E40yr.		tet to Work program started in 2001. In what month and year did {you/NAME} first use your 2005 FROM E39}?
	PROBE: Your bes	st estimate is fine.
	INTERVIEWER:	ENTER YEAR (2001-2005) YEAR
		DON'T KNOW d REFUSED r
	PROGRAMMER:	IF {NAME} IS CURRENTLY SIGNED UP WITH EN FROM ROUND 2 (E37a=01) AND {NAME} WAS SIGNED UP WITH OTHER EN'S IN 2005 (E37b=01), THEN GO TO QUESTION E42mth, OTHERWISE, GO TO E41. ((S2=02 or S2=04 and (E21=01 or E24=01 or E25=01) and (CHECK37=00 and E37=01)) or((S2=02 and (E21=01 or E24=01 or E25=01) and CHECK37=01 and E37b=01)) or ((S2=01and (E21=01 or E24=01 or E25=01) and E36=01 and (CHECK37=00 and E37=01))
E41.	{Are you/Is NAM	IE} currently signed up with {EN IN 2005 FROM E39}?
		YES 01 (NEXT EN OR E44) NO 00 DON'T KNOW d REFUSED r
(E21=01 (E21=01	or E24=01 or E25= or E24=01 or E25=0	1=01 or E24=01 or E25=01) and CHECK37=00 and E37=01 and E41=00,d,r) or ((S2=02 and 01) and CHECK37=01 and E37b=01 and E41=00,d,r) or (E37a=01 and E37b=01)) or (S2=01 and 01) and E36=01 and (CHECK37=00 and E37=01) and E41=00,d,r) and year did {you/NAME} stop receiving services from {EN IN 2005 FROM E39}?
	PROBE: Your bes	st estimate is fine.
	INTERVIEWER:	ENTER MONTH HERE AN YEAR ON NEXT SCREEN
		(1-12) MO DON'T KNOW

(S2=02 and (E21=01 or E24=01 or E25=01) and CHECK37=00 and E37=01 and E41=00,d,r) or ((S2=02 and (E21=01 or E24=01 or E25=01) and CHECK37=01 and E37b=01 and E41=00,d,r) or (E37a=01 and E37b=01)) or (S2=01 and (E21=01 or

	01 or E25=01) and E36=01 and (CHECK37=00 and E37=01) and E41=00,d,r) r. PROBE 1: In what month and year did {you/NAME} stop receiving services from {EN	IN 2005 FROM E39}?
	PROBE 2: Your best estimate is fine.	
	INTERVIEWER: ENTER YEAR	
	_ _ (2001-2006) (2004 - 2006) YEAR DON'T KNOW	
E24=01 E24=01	22 and (E21=01 or E24=01 or E25=01) and CHECK37=00 and E37=01 and E41=00,d,r) or 01 or E25=01) and CHECK37=01 and E37b=01 and E41=00,d,r) or (E37a=01 and E37b=01)) of 01 or E25=01) and E36=01 and (CHECK37=00 and E37=01) and E41=00,d,r) and (E42yr<2004 or 1. SOFT EDIT: [YEAR STOPPED RECEIVING SERVICES (E42yr) SHOULD BE 2008 FAILS EDIT, INTERVIEWER READ: Earlier you reported (you were/NAME was) sign FROM E39} in 2005. I recorded (you/NAME) stopped receiving services in (E42yr).	or (S2=01and (E21=01 or or E42yr>2005) 5 OR 2006.} IF {NAME}
	Is this correct?	
	YES	(CHANGE E42yr)
E24=01	02 and (E21=01 or E24=01 or E25=01) and CHECK37=00 and E37=01 and E41=00,d,r) or 01 or E25=01) and CHECK37=01 and E37b=01 and E41=00,d,r) or (E37a=01 and E37b=01))) o 01 or E25=01) and E36=01 and (CHECK37=00 and E37=01) and E41=00,d,r) Why {are you/is NAME} no longer receiving services from {EN IN 2005 FROM E39}?	* *
	INTERVIEWER: ENTER VERBATIM RESPONSE	
	<open></open>	
	DON'T KNOWd REFUSEDr	
CURRE	RENT TICKET USE	
((S2=02 E44.	02 or S2=04) and (E21=01 or E24=01 or E25=01)) or (S1=01 and (E21=01 or E24=01 or E25=01) CHECK: IS {NAME} CURRENTLY SIGNED UP WITH AN EMPLOYMENT NETWOR {E37a=01 or E41=01 FOR ANY EN}?	,
	YES	

SECTION E UNIVERSE: ALL VARIABLES NEEDED FROM OTHER SECTIONS: RTYPE PRELOADED VARIABLES: BSTATUS, SSIAGE, SAMPLE AGE, TSTATUS, ENSAMPLE, SDATE, VRNAME, SAMPLE TYPE (S2), FIXE2, FIXE11, FIXE14, ROUND2 ANSWERS TO E39, E41, E45, E46

(((S2=02 or S2=04) and (E21=01 or E24=01 or E25=01) and E44=00)) or ((S1=01 and (E21=01 or E24=01 or E25=01) and E36=01 and E44=00))

E45. {Are you/Is NAME} <u>currently</u> signed up with an Employment Network?

PROBE: Employment Networks are organizations or businesses that offer services to help people with disabilities work or earn more money as part of the Ticket to Work Program. Employment Networks can be public or private and can include the State Vocational Rehabilitation Agency.

YES	01	
NO	00	(E48)
DON'T KNOW	d	(E48)
REFUSED	r	(E48)

(((S2=02 or S2=04) and (E21=01 or E24=01 or E25=01) and E44=00 and E45=01)) or ((S1=01 and (E21=01 or E24=01 or E25=01) and E36=01 and E44=00 and E45=01))

E46. What is the name of the Employment Network (you are/NAME is) currently signed up with?

INTERVIEWER: ENTER VERBATIM RESPONSE CURRENT EN #1 <STRING=240>

DON'T KNOW	d
REFUSED	r

(((S2=02 or S2=04) and (E21=01 or E24=01 or E25=01) and E44=00 and E45=01)) or ((S1=01 and (E21=01 or E24=01 or E25=01) and E36=01 and E44=00 and E45=01))

E47mth. The Ticket to Work program started in 2001. In what month and year did {you/NAME} first use {your/his/her} ticket with {CURRENT EN FROM E46}?

PROBE: Your best estimate is fine.

INTERVIEWER: ENTER MONTH HERE AND YEAR ON NEXT SCREEN

|__|__| (1-12)

MO

DON'T KNOW d

REFUSED r

(((S2=02 or S2=04) and (E21=01 or E24=01 or E25=01) and E44=00 and E45=01)) or ((S1=01 and (E21=01 or E24=01 or E25=01) and E36=01 and E44=00 and E45=01))

E47yr. PROBE 1: The Ticket to Work program started in 2001. In what month and year did {you/NAME} first use {your/his/her} ticket with {CURRENT EN FROM E46}?

PROBE 2: Your best estimate is fine.

INTERVIEWER: ENTER YEAR

|__|_| (2001-2006) YEAR

 ${\tt PRELOADED\ VARIABLES:\ BSTATUS,\ SSIAGE,\ SAMPLE\ AGE,\ TSTATUS,\ ENSAMPLE,\ SDATE,\ VRNAME,\ SAMPLE\ TYPE}$

(S2), FIXE2, FIXE11, FIXE14, ROUND2 ANSWERS TO E39, E41, E45, E46

OTHER EMPLOYMENT NETWORKS NOT PREVIOUSLY DISCUSSED

	PROGRAMMER	: E48 THROUGH (S2=02)	l E50yr SKIPPED IF	COMPLETED IMMED	IATELY PRIOR ROUND	
(S2=01 a		NAME} ever used		and (E21=01 or E24=01 or to sign up with any oth	r E25=01)) ner Employment Networks	that
	disabil	ities work or ear	n more money as	part of the Ticket to	services to help people Work Program. Employronal Rehabilitation Agency.	ment
		NO DON'T KNOW			00 (E51) d (E51)	
(S2=01,0 E49.			and E36=01 and E48 works {have you/ha	=01) s NAME} been signed u	p with?	
			 OTHER EMPLOY (1-2) (1-5)	MENT NETWORKS		
	. The Ticket to Wo	· · · · · · · · · · · · · · · · · · ·		*	n/NAME} <u>first</u> use {your/his	;/her}
	PROBE: Your be	est estimate is fine				
	INTERVIEWER:	ENTER MONTH	HERE AND YEAR ((1-12) MO	ON NEXT SCREEN		
(S2=01,0 E50yr.	PROBE: The Tid	cket to Work prog	and E36=01 and E48 ram started in 200° h an Employment N	. In what month and	year did {you/NAME} <u>first</u>	<u>t</u> use
	PROBE: Your be	est estimate is fine				
	INTERVIEWER:	ENTER YEAR	(2 YEAR	001-2006)		
		DON'T KNOW			d	

REFUSEDr

SECTION E UNIVERSE: ALL VARIABLES NEEDED FROM OTHER SECTIONS: RTYPE PRELOADED VARIABLES: BSTATUS, SSIAGE, SAMPLE AGE, TSTATUS, ENSAMPLE, SDATE, VRNAME, SAMPLE TYPE (S2), FIXE2, FIXE11, FIXE14, ROUND2 ANSWERS TO E39, E41, E45, E46

((S2=02 or S2=04) and (E21=01 or E24=01 or E25=01)) or (S2=01 and (E21=01 or E24=01 or E25=01) and E36=01)

E51. CHECK: WAS {NAME} A TICKET NON-PARTICIPANT IN 2005 (E36=00,d,r or E37=00,d,r)] OR [(S2=02 and PREVEN=01) AND (E24=00,d,r or E25=00,d,r)]?

YES	01	(F1)
NO	00	(G1)

PRELOADED INFORMATION: VRNAME (NAME FOR STATE VR AGENCY)

SECTION F: TICKET NON-PARTICIPANTS IN 2005

TRIED TO GET INFORMATION OR PARTICIPATE IN 2005

(E51=01)

F1. During **2005**, did {you/NAME or his/her representative} contact, or try to contact, anyone to find out more about the Ticket to Work program or to participate in the program?

YES	01	
NO	00	(F31)
DON'T KNOW	d	(F31)
REFUSED	r	(F31)

(E51=01 and F1=01)

F2. Thinking only about **2005**, who did {you/NAME or his/her representative} contact to get information about the Ticket to Work program?

Did {you/NAME or his/her representative} contact....

	YES	NO	DON'T KNOW	REFUSED
a. The Social Security Administration?	01	00	d	r
b. Maximus?	01	00	d	r
c. The State Vocational Rehabilitation Agency or{VRNAME}?	01	00	d	r
d. A Benefits Planning and Assistance Organization (BPAO)?	01	00	d	r
e. A Benefits Specialist or caseworker?	01	00	d	r
f. A friend or family member?	01	00	d	r
g. An Independent Living Center?	01	00	d	r
h. An Employment Network	01	00	d	r
PROBE: Employment Networks are organizations or businesses that offer services to help people with disabilities work or earn more money as part of the Ticket to Work program. Employment Networks can be public or private and can include the State Vocational Rehabilitation Agency.				
PROGRAMMER: IF F2h=01 GO TO F2h_OTHER, ELSE GO TO F2	2i			
i. Another Agency or Organization	01	00	d	R

PROGRAMMER: IF F2I=01 GO TO F2i_OTHER, ELSE GO TO F3

SECTION F UNIVERSE: TICKET NON-PARTICIPANTS IN 2005 (E35=00,d,r or E51=01) VARIABLES FROM OTHER SECTIONS: RTYPE PRELOADED INFORMATION: VRNAME (NAME FOR STATE VR AGENCY)

	F1=01 and F2h=01) ner. What other Employment Network?			
	<open></open>			_ (F2i)
	DON'T KNOWREFUSED		(F2i) (F2i)	
	F1=01 and F2i=01) er. What other Agency or Organization?			
	<open></open>			
	DON'T KNOWREFUSED			
(E51=01 F3.	and $F1=01$) In general, how easy was it for {you/NAME or his/her representative} to get wanted about the Ticket to Work program? Was it:	the	information	{you/they
	Very easy,			
	Somewhat easy,			
	Not very easy, or			
	Not at all easy?			
	DON'T KNOW REFUSED			
INFORM	IATION ABOUT EMPLOYMENT NETWORKS			
(E51=01	and F1=01)			
F4.	Now I'd like to ask you about Employment Networks. During 2005 , did {you/NAMI get any information about the Employment Networks that serve {your/NAME's} are		his/her repre	esentative
	PROBE: Employment Networks are organizations or businesses that offer sed disabilities work or earn more money as part of the Ticket to Work Program. Empublic or private and can include the State Vocational Rehabilitation Agency			-
	YES	01		
	NO	00	(F12)	
	DON'T KNOW	d	(F12)	
	REFUSED	r	(F12)	
(E51=01 F5.	and F1=01 and F4=01) How did {you/NAME} receive this information about Employment Networks? representative} receive information in the mail?	Did	{you/NAME	or his/he
	YES	01		
	NO		(F7)	
	DON'T KNOW	d	(F7)	
	REFUSED	r	(F7)	

(E51=01 and F1=01 and F4=01 and F5=01)

F6. Who sent {you/NAME or his/her representative} the information about Employment Networks?

INTERVIEWER: CODE ALL THAT APPLY.

	SOCIAL SECURITY ADMINISTRATION	02 03 04 05 06 07 08 09 10 d	(F7) (F7) (F7) (F7) (F7) (F7) (F7) (F7)
	REFUSED	r	(F7)
(E51=01 and F1=0) F6j_Other. Wha	01 and F4=01 and F5=01 and F6=10) t Other place?		
	<open></open>		
	DON'T KNOW		
(P51 01 1P1 (1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1		
(E51=01 and F1=0	,	4 N I =	tura el ca O
F7. Did som	nebody call {you/NAME or his/her representative} to talk about Employmen	t ive	tworks?
	YES	Λ1	
	NO		(F9)
	DON'T KNOW		· •
	REFUSED		` '
			()
(E51=01 and F1=0	01 and F4=01 and F7=01)		
F8. Who ca	lled {you/NAME or his/her representative}?		
INTER	/IEWER: CODE ALL THAT APPLY.		

SOCIAL SECURITY ADMINISTRATION	01	(F9)
MAXIMUS	02	(F9)
STATE VOCATIONAL REHABILITATION AGENCY or		
{VRNAME}	03	(F9)
A BENEFITS PLANNING AND ASSISTANCE		
ORGANIZATION (BPAO)	04	(F9)
A BENEFITS SPECIALIST OR CASEWORKER	05	(F9)
FRIEND/FAMILY MEMBER	06	(F9)
INDEPENDENT LIVING CENTER	07	(F9)
EMPLOYMENT NETWORK	80	(F9)
OTHER AGENCY/ORGANIZATION	09	(F9)
OTHER	10	(F8_jOther)
DON'T KNOW	d	(F9)
REFUSED	r	(F9)

SECTION F UNIVERSE: TICKET NON-PARTICIPANTS IN 2005 (E35=00,d,r or E51=01) VARIABLES FROM OTHER SECTIONS: RTYPE

PRELOADED INFORMATION: VRNAME (NAME FOR STATE VR AGENCY)

(E51=01 and F1=01 and F4=01 and F7=01 and F8=10) F8j_Other. What Other place?		
<open></open>		
DON'T KNOWREFUSED		
 (E51=01 and F1=01 and F4=01) F9. Did somebody talk to {you/NAME or his/her representative} about Employment N 	letwo	rks in-person?
YES	00 d r	(F11)
F10. Who talked to {you/NAME or his/her representative} about Employment Network	s?	
INTERVIEWER: CODE ALL THAT APPLY. SOCIAL SECURITY ADMINISTRATION	02 03 0) 04 05 06 07 08 09 10	(F11) (F11) (F11) (F11) (F11) (F11) (F11) (F11) (F10j_OTHER) (F11)
	ــــــــــــــــــــــــــــــــــــــ	
DON'T KNOW	r a wel	b site?
NO	_	
DON'T KNOW		
REFUSED		

PRELOADED INFORMATION: VRNAME (NAME FOR STATE VR AGENCY)

CONTACT WITH STATE VR AGENCIES

(E51=01 and F1=01)

F12. The next questions are about trying to use a Ticket with the vocational rehabilitation agency in {your/NAME's} state. In {your/NAME's} state the vocational rehabilitation agency is called {STATE NAME FOR VR AGENCY}. I'm going to refer to this as {your/NAME's} State VR agency. In 2005, did {you/NAME or his/her representative} contact {your/his/her} State VR agency to use {your/his/her} Ticket or to talk about getting services from them?

YES	01	
NO	00	(F20)
DON'T KNOW	d	(F20)
REFUSED	r	(F20)

(E51=01 and F1=01 and F12=01)

F13. In **2005**, did {you/NAME or his/her representative} try to use {your/NAME's} Ticket to sign up with {your/NAME's} State VR agency?

YES	01	(F15)
NO	00	
DON'T KNOW	d	(F20)
REFUSED	r	(F20)

(E51=01 and F1=01 and F12=01 and F13=00)

F14. Why didn't {you/NAME or his/her representative} try to use {your/NAME's} Ticket with the State VR agency in **2005**?

INTERVIEWER: ENTER VERBATIM RESPONSE

(E51=01 and F1=01 and F12=01 and F13=01)

F15. In 2005, did {your/NAME's} State VR agency accept {your/his/her} Ticket?

YES	01	(F17)
NO	00	
DON'T KNOW	d	(F20)
REFUSED	r	(F20)

(E51=01 and F1=01 and F12=01 and F13=01and F15=00)

F16. Why didn't the State VR agency accept {your/NAME's} Ticket in 2005?

INTERVIEWER: CODE ALL THAT APPLY.

NOT TAKING TICKETS WHEN CONTACTED	01	(F17)
DID NOT OFFER SERVICES {NAME} NEEDED	02	(F17)
DID NOT SERVE PEOPLE WITH {NAME'S} DISABILITY/NEEDS	03	(F17)
{NAME} NOT WILLING/ABLE TO WORK FULL-TIME/ENOUGH		
HOURS	04	(F17)
{NAME} NOT WILLING TO GO OFF OF DISABILITY BENEFITS	05	(F17)
OTHER	06	
DON'T KNOW	d	(F17)
REFUSED	r	(F17)

SECTION F UNIVERSE: TICKET NON-PARTICIPANTS IN 2005 (E35=00,d,r or E51=01) VARIABLES FROM OTHER SECTIONS: RTYPE PRELOADED INFORMATION: VRNAME (NAME FOR STATE VR AGENCY)

*	and F1=01 and ner. What oth	d F12=01 and F13=01 and rer reason?	d F15=00 and F16=06)		
	<0	PEN>			(F20)
(E51=01 F17.		d F12=01 and F13=01 and AS <i>TICKET ASSIGNEL</i>	d F15=01, 00) O TO STATE VR AGENC	Y IN 2005 (F15=01)?	
(E51=01 F18.	SOFT EDIT 2005 (F15=0 2005 (E51=0	TYou said that {your/lot), but I show that you	nd F15=01,00 and F17=01) NAME's} State VR agence ou told me earlier {you/Name} (you/NAME} participated	AME) had not assigne	ed {your/his/her} Ticket in
		NO, DID NOT PA DON'T KNOW	CIPATE IN 2005 RTICIPATE IN 2005	(02 (F20) d (F20)
(E51=01 F19.	I have encou		F15=01,00 and F17=01 and the interview and need to	,	isor. I will call you back
	INTERVIEW	VER: GO TO PARALLE REVIEW 380.	EL BREAKOFF BLOCK, E	END INTERVIEW AND	STATUS SUPERVISOR
CONTA	CT WITH EM	PLOYMENT NETWOR	KS OTHER THAN THE	STATE VR AGENCY	
*	state vocation	onal rehabilitation agendher than {your/NAME's]	/NAME's} contact with Em cy, {VRNAME}. In 2005 , d state VR Agency to use	lid (you/NAME) contact	t any Employment
		disabilities work or e	are organizations or bus earn more money as par c or private and can include	rt of the Ticket to Wor	rk Program. Employmen
		NO DON'T KNOW		(

	ADED INFORMATION		OR STATE VR AGENCY)	
(E51=01	and F1=01 and F20	=01)		
F21.	How many other E	Employment Network	ss did {you/NAME} contact in 2005?	
	PROBE: Your bes	st guess is fine.		
		_ NUMBER	(1-2) (1-15)	
(E51=01 F22.	and F1=01 and F20 PROGRAMMER: BEFORE F22:	*	NE EMPLOYMENT NETWORK IN F21, REA	AD THIS STATEMENT
	•	uestions, I am going u/ (he/she)} contacte	to ask about {your/NAME's} overall experienced.}	ence with the Employment
	PROGRAMMER:	USE "ANY OF" A (F21>1).	ND "NETWORKS" IF {NAME} CONTACTED	MORE THAN ONE EN
	**	r his/her representat vork(s) {you/he/she}	tive} try to use {your/NAME's} Ticket to sign contacted?	up with {any of} the
		NO DON'T KNOW		00 d (F24)
(E51=01 F23.	and F1=01 and F20 PROGRAMMER (F21>1).		S" and "ANY OF" IF {NAME} CONTACTED	MORE THAN ONE EN
		/NAME or his/her vork(s) {you/he/she}	representative} try to use {your/NAME's} contacted?	Ticket with (any of) the
	INTERVIEWER:	ENTER VERBATIM	RESPONSE	
	<open></open>	>		(F30)
				, ,
(E51=01 F24.	and F1=01 and F20: PROGRAMMER: (F21>1).		D "NETWORKS" IF {NAME} CONTACTED	MORE THAN ONE EN
	In 2005 , did {any	of} the Employmen	t Network(s) {you/NAME} tried to use {you	/his/her} Ticket with accept

In **2005**, did {any of} the Employment Network(s) {you/NAME} tried to use {your/his/her} Ticket with accept {your/NAME's} Ticket?

YES	01	(F26)
NO	00	
DON'T KNOW	d	(F30)
REFUSED	r	(F30)

SECTION F UNIVERSE: TICKET NON-PARTICIPANTS IN 2005 (E35=00,d,r or E51=01)

VARIABLES FROM OTHER SECTIONS: RTYPE

PRELOADED INFORMATION: VRNAME (NAME FOR STATE VR AGENCY)

(E51=01 and F1=01 and F20=01 and F22=01,d,r and F24=00)

F25. PROGRAMMER: USE "NETWORKS" IF {NAME} CONTACTED MORE THAN ONE EN (F21>1).

Overall, why didn't the Employment Network(s) {you/NAME} tried to use {your/his/her} Ticket with accept {your/NAME's} Ticket in **2005**?

PROGRAMMER: USE "THESE" AND "NETWORKS" IF {NAME} CONTACTED MORE THAN ONE EN (F21>1)

PROBE: Were there any other reasons why {these/this} Employment Network(s) would not accept

{your/NAME'S} Ticket in 2005?

INTERVIEWER: CODE ALL THAT APPLY.

NOT TAKING TICKETS WHEN CONTACTED01	(F30)
DID NOT OFFER SERVICES {NAME} NEEDED02	(F30)
EMPLOYMENT NETWORK DID NOT SERVE PEOPLE WITH {NAME'S}	
DISABILITY/NEEDS03	(F30)
{NAME} NOT WILLING/ABLE TO WORK FULL-TIME/ENOUGH HOURS 04	(F30)
{NAME} NOT WILLING TO GO OFF OF DISABILITY BENEFITS	(F30)
OTHER	
DON'T KNOW d	(F30)
REFUSEDr	(F30)

(E51=01 and F1=01 and F20=01 and F22=01,d,r and F24=00 and F25=06)

F25 Other. What Other reason?

<open></open>			
-			

DON'T KNOW d
REFUSED r

GO TO F30

(E51=01 and F1=01 and F20=01 and F22=01.d,r and F24=01)

F26. **PROGRAMMER:** USE "ONE OF" AND "NETWORKS" IF {NAME} CONTACTED MORE THAN ONE EN (F21>1).

You said that {one of} the Employment Network{s} {you/NAME} tried to use {your/his/her} Ticket with accepted {your/his/her} Ticket some time during **2005** (F24=01), but I show that you told me earlier {you/NAME} had not assigned {your/his/her} Ticket in **2005** (E51=01). Is it correct that {you/NAME} participated in the Ticket program in **2005**?

YES, DID PARTICIPATE IN 2005	01	
NO, DID NOT PARTICIPATE IN 2005	02	(F30)
DON'T KNOW	d	(F30)
REFUSED	r	(F30)

SECTION F UNIVERSE: TICKET NON-PARTICIPANTS IN 2005 (E35=00,d,r or E51=01)

VARIABLES FROM OTHER SECTIONS: RTYPE

PRELOADED INFORMATION: VRNAME (NAME FOR STATE VR AGENCY)

(E51=01 and F1=01 and F20=01 and F22=01,d,r and F24=01 and F26=01)

F27. I have encountered a problem with the interview and need to speak with my supervisor. I will call you back shortly. Thank you for your time.

INTERVIEWER: GO TO PARALLEL BREAKOFF BLOCK, END INTERVIEW AND STATUS SUPERVISOR REVIEW 380.

	GO. EKVIGOKKENEN GGG.		
RECEIV	ED INFORMATION BUT DID NOT CONTACT ENS IN 2005		
(E51=01 F28.	and F1=01 and F20=00,d,r) CHECK: DID {NAME} RECEIVE INFORMATION ABOUT EMPLOYMENT NET NOT CONTACT THEM (F12=00 AND F20=00)?	WOF	RKS (F4=01) BUT DID
	YES		(F30)
(E51=01 F29.	and F1=01 and F20=00,d,r and F28=01) After receiving information about the Employment Networks in {your/NAME's Vocational Rehabilitation agency or {VRNAME}, why didn't {you/NAME or his/any of them?}	-	-
	INTERVIEWER: CODE ALL THAT APPLY.		
	PHYSICAL/MENTAL CONDITION CHANGED MIND FAMILY RESPONSIBILITIES FAMILY WOULD NOT SUPPORT COULD NOT GET RELIABLE TRANSPORTATION ECONOMIC CONDITIONS CHANGED – NO LONGER THINK JOB OPPORTUNITIES EXIST FEARED SERVICES WOULD ENDANGER BENEFITS INFORMATION TOO CONFUSING – DID NOT KNOW WHERE TO START EMPLOYMENT NETWORK {NAME} WANTED WAS NOT PARTICIPATING ENS TOO FAR AWAY COULD NOT GET IN CONTACT WITH ENS NO ENS PROVIDED SERVICES {NAME} NEEDS NO ENS SERVE MY KIND OF DISABILITY OTHER DON'T KNOW REFUSED	02 03 04 05 06 07 08 09 10 11 12 13 14 d	(F30) (F30) (F30) (F30) (F30) (F30) (F30) (F30) (F30) (F30) (F30) (F30) (F30)
*	and F1=01 and F20=00,d,r and F28=01 and F29=14) HER. What other reason?		
	<open></open>		
	DON'T KNOWREFUSED		

9/7/06

PRELOADED INFORMATION: VRNAME (NAME FOR STATE VR AGENCY)

FUTURE PLANS ABOUT TICKET TO WORK PARTICIPATION

E51=01	and $F1=01$) Do you think {you/NAME} will try to participate in the Ticket to Work program at	any tir	me in the future?
		-	
	YES		
	DON'T KNOW		
	REFUSED	r	
	GO TO F33		
AWARI	OF TICKET PROGRAM BUT DID NOT TRY TO GET INFORMATION OR PAR	TICIP	ATE DURING 2005
E35=00 F31 .	,d,r) OR (E51=01 and F1=00,d,r) What are the main reasons {you did/NAME did} not try to participate in the Ticket	et to W	ork program in 2005
	INTERVIEWER: CODE ALL THAT APPLY:		
	PHYSICAL/MENTAL CONDITION	01	(F32)
	DIDN'T WANT TO		
	FAMILY RESPONSIBILITIES		
	FAMILY WOULD NOT SUPPORT		
	COULD NOT GET RELIABLE TRANSPORTATION		
	ALREADY HAD A JOB		
	FEARED SERVICES WOULD ENDANGER BENEFITS		, ,
	INFORMATION TOO CONFUSING - DID NOT KNOW	07	(1 32)
	WHERE TO START EMPLOYMENT NETWORK {YOU/NAME} WANTED WAS	08	(F32)
	NOT PARTICIPATING	09	(F32)
	ENs TOO FAR AWAY	10	(F32)
	COULD NOT GET IN CONTACT WITH ENS	11	(F32)
	NO ENS PROVIDED SERVICES (NAME) NEEDS	12	(F32)
	NO ENS SERVE MY KIND OF DISABILITY		
	IN SCHOOL		
	OTHER		
	DON'T KNOW		
	REFUSED		
F31=15) D. <i>INTERVIEWER:</i> ENTER VERBATIM RESPONSE		
31_0ti	<open></open>		
	(o) 2.17		
	DON'T KNOW	d	
	REFUSED	r	
E35=0(F 32 .	,d,r) OR (E51=01 and F1=00,d,r) Do you think {you/NAME} will try to participate in the Ticket to Work program at	anv tir	me in the future?
		-	
	YES		
	NO	00	
	DON'T KNOW	d	
	REFUSED	r	

9/7/06 F-10 NBS ROUND 3 INSTRUMENT **VARIABLES FROM OTHER SECTIONS: RTYPE**

PRELOADED INFORMATION: VRNAME (NAME FOR STATE VR AGENCY)

KNOWLEDGE OF TICKET TO WORK PROGRAM

(E35=00,d,r or E51=01)

F33. Now I'm going to read you some statements about the Ticket to Work program. For each statement, please tell me if it is something {you/NAME or his/her representative} knew before today or not.

PROGRAMMER: INSERT STATEMENT BELOW HERE

Is this something {you/NAME or his/her representative} knew before today or not?

INTERVIEWER: REPEAT AS NECESSARY

		KNEW BEFORE TODAY	DID NOT KNOW BEFORE <u>TODAY</u>	DON'T <u>KNOW</u>	REFUSED
a.	Ticket to Work is a program to help people with disabilities get training or other employment services to improve their ability to work. These employment services are paid for by Social Security	01	00	d	r
b.	Ticket to Work participants are free to choose an employment service provider from among a network of employment service providers in the program	01	00	d	r
C.	{Your/NAME's} employment service provider in the Ticket to Work program is not paid by Social Security unless {you go/(he/she) goes} back to work	01	00	d	r
d.	While participating in the Ticket to Work program, Social Security will not conduct a review of {your/NAME's} medical eligibility for disability benefits	01	00	d	r

SECTION G: EMPLOYMENT-RELATED SERVICES AND SUPPORTS USED IN 2005

SERVICE PROVIDERS

(All)

G1. **PROGRAMMER:** USE LANGUAGE BELOW IF {NAME} HAS NOT COMPLETED ANY PRIOR ROUND (S2=01)

Next, I will ask about different types of services that people with disabilities sometimes get in order to improve their ability to work or live independently.

First, I will ask about employment services {you/NAME} may have received.

(IF DISABLED BEFORE AGE 16 (B18_AGE < 16 OR IF BIRTHYEAR – B18_YEAR <16)) Since age 16, {have you/has NAME} received any employment services to help {you/him/her} get a job?

(IF DISABLED AT AGE 16 OR LATER (B18_AGE ≥ 16 OR IF BIRTHYEAR - B18_YEAR ≥ 16)) Since becoming disabled, {have you/has NAME} received any employment services to help {you/him/her} get a job?

PROGRAMMER: USE LANGUAGE BELOW IF {NAME} COMPLETED ONE OR MORE PRIOR ROUNDS (S2=02 or S2=04)

Next, I will ask about different types of services that people with disabilities sometimes get in order to improve their ability to work or live independently.

First, I will ask about employment services {you/NAME} may have received.
Thinking about 2005, did {you/NAME} receive any employment services to help {you/him/her} get a job?

YES	01	
NO	00	(G10)
DON'T KNOW	d	(G10)
REFUSED	r	(G10)

(G1=01) G2.		e name of the place {you/NAME} went to for those employment services?
	PROGRAMI	MER: DISPLAY Anyplace else? ON SCREEN FOR PROVIDERS 2 THROUGH 8
	INTERVIEW	ER: PRESS 'ENTER' FOR NO OTHER PLACE
	!	IF RESPONDENT DOESN'T KNOW NAME: I need to enter something that will help identify the place {you/NAME} received these services from in later questions. What could I enter to help us identify this place later? Street name, address, person spoken with there, even the color of the building would help identify it.
		(IF (S2=01 AND E36=01) OR (IF S2=02 and E37a=01 or E37b=01) or (S2=02 or S2=04 and E37=01)):
	This includes	s services {you/NAME} received from an Employment Network.
		PROVIDER 1 <string=240></string=240>
		PROVIDER 2 < STRING=240>
		PROVIDER 3 < STRING=240>
		PROVIDER 4 < STRING=240>
		PROVIDER 5 < STRING=240>
		PROVIDER 6 < STRING=240>
		PROVIDER 7 < STRING=240>
		PROVIDER 8 < STRING=240>
		REFUSEDr
(G1=01)		
G3.		S {NAME} A TICKET PARTICIPANT IN 2005(E37=01) OR (IF S2=02 AND EN2005=01)?
		YES
	PROGRAMN	MER: REPEAT G4 THROUGH G6 ONLY FOR THE FIRST AND SECOND 2005 EMPLOYMENT NETWORKS
LIOTED	W. 500 OD D	011ND0 FN FD 014 D0 F00 0D D011ND0 FN FD 014 D0 F40

LISTED IN E39 OR ROUND2 EN FROM R2 E39 OR ROUND2 EN FROM R2 E46

(G1=01 and G3=01)

G4. **INTERVIEWER:** IS {EMPLOYMENT NETWORK IN 2005 (DISPLAY FIRST/SECOND NAME FROM E39 OR ROUND2 EN FROM R2 E39 OR ROUND2 EN FROM R2 E46)} ON

THIS LIST {DISPLAY LIST FROM G2}?

YES	01	(DISPLAY SECOND EN FROM E39)
		OR (ROUND2 EN FROM R2 E39) OR
		(ROUND2 EN FROM R2 E46) THEN
		SKIP TO G7
NO	00	

(G1=01 a	=01 and G3=01 and G4=00) In 2005, did {you/NAME} receive employment services from {FIRST/SECOND EMPLOYMENT NETWORK IN 2005 (E39 OR ROUND2 EN FROM R2 E39 OR ROUND2 EN FROM R2 E46)}?			
	YES NO DON'T KNOW REFUSED	00 d	(G7)	
(G1=01 a	and G3=01 and G4=00 and G5=01) Then let me add $\{FIRST/SECOND EMPLOYMENT NETWORF R2 E39 OR ROUND2 EN FROM R2 E46)\}$ to this list.	(FRC	DM 2005 (E39 OR ROUND2 EN FROM	
	INTERVIEWER: ENTER '1' TO ADD NAME OF EMPLOYMEN	ΓNE	TWORK TO LIST	
	PRESS 1 TO CONTINUE	01		
(G1=01) G7 .	PROGRAMMER: ASK G7 THROUGH G9 FOR EACH PLACE NETWORKS THAT WERE ADDED IN G6.	LIST	ED IN G2 INCLUDING EMPLOYMENT	
	Thinking about {PROVIDER FROM G2}, was this place:			
	A state agency,	02 03 d	(NEXT PROVIDER OR G10) (G7_oth) (NEXT PROVIDER OR G10)	
	and G7=03) INTERVIEWER: PLEASE SPECIFY			
	<open></open>		(NEXT PROVIDER OR G10)	
	DON'T KNOWREFUSED		(NEXT PROVIDER OR G10) (NEXT PROVIDER OR G10)	
(G1=01 a	and G7=01) CHECK: WAS {PROVIDER FROM G2} A STATE AGENCY (G	7 = 01	1)?	
	YES	_	(NEXT PROVIDER OR G10)	
(G1=01 a	and G7=01 and G8=01) Was this place a:			
	A vocational rehabilitation agency, A welfare agency, A mental health agency, Some other state agency, Workforce center or employment/unemployment office,	02 03 04	(NEXT PROVIDER OR G10) (NEXT PROVIDER OR G10) (NEXT PROVIDER OR G10) (G9_oth1) (NEXT PROVIDER OR G10)*	
	Some other type of place DON'T KNOW REFUSED	05 d	(G9_oth2) (NEXT PROVIDER OR G10) (NEXT PROVIDER OR G10)	

*Note: G9=6 is a category added at R2 and R3; value of "other" category (G9=5) maintained for comparability across rounds.

(G1=01 G7=01 and G8=01 and G9=04)

G9_oth1. INTERVIEWER: PLEASE SPECIFY

<OPEN>______(NEXT PROVIDER OR G10)

(G1=01 G7=01 and G8=01 and G9=05)

G9_oth2. INTERVIEWER: PLEASE SPECIFY

<OPEN>_____(NEXT PROVIDER OR G10)

(All)

G10. **PROGRAMMER:** USE LANGUAGE BELOW IF {NAME} HAS NOT COMPLETED ANY PRIOR ROUNDS (S2=01)

Sometimes people get training to help them learn new skills so they can get a new job or change careers.

(IF DISABLED BEFORE AGE 16 (B18_AGE < 16 OR IF BIRTHYEAR – B18_YEAR <16)) Since age 16, {have you/has NAME} received any training to help {you/him/her} get a new job or change careers?

(IF DISABLED AT AGE 16 OR LATER (B18_AGE ≥ 16 OR IF BIRTHYEAR - B18_YEAR ≥ 16)) Since becoming disabled, {have you/has NAME} received any training to help {you/him/her} get a <u>new</u> job or change careers?

PROBE: Please do not include places you already told me about.

PROGRAMMER: USE LANGUAGE BELOW IF {NAME} HAS COMPLETED ONE OR MORE PRIOR ROUNDS (S2=02 or S2=04)

Sometimes people get training to help them learn new skills so they can get a new job or change careers. In 2005, did {you/NAME} receive any training to help {you/him/her} get a new job or change careers?

PROBE: Please do not include places you already told me about.

YES	01	
NO	00	(G15)
DON'T KNOW	d	(G15)
REFUSED	r	(G15)

(G10=01)

G11. What was the name of the place {you/NAME} went to for that training?

PROBE: Please do not include any places you already told me about.

PROGRAMMER: DISPLAY Anyplace else? ON SCREEN FOR PROVIDERS 2 THROUGH 8

INTERVIEWER: PRESS 'ENTER' FOR NO OTHER PLACE

PROBE 1: IF RESPONDENT DOESN'T KNOW NAME: I need to enter something that will help identify the place {you/NAME} received these services from in later questions. What could I enter to help us identify this place later? Street name, address, person spoken with there, even the color of the building would help identify it.

PROBE 2: (IF (S2=01AND E36=01) OR (IF S2=02 and E37a=01 or E37b=01) or (S2=02 or S2=04 and E37=01)):

This includes services {you/NAME} received from an Employment Network.

PROVIDER 1 <string=240></string=240>	
PROVIDER 4 < STRING=240>_	
PROVIDER 5 < STRING=240>_	
REFUSED	

PROGRAMMER: FOR EACH PROVIDER LISTED IN G11 DISPLAY G12

(G10=01)

G12. INTERVIEWER: DID THE RESPONDENT MENTION (PROVIDER LISTED IN G11) AT G2?

INTERVIEWER: IF THE LIST OF PROVIDERS ALREADY MENTIONED IS BLANK, NO PROVIDERS HAVE BEEN MENTIONED YET.

INTERVIEWER: PROVIDERS MENTIONED AT G2 INCLUDE (DISPLAY PROVIDERS FROM G2):

YES	01	(PROGRAMMER: DELETE ONE MENTION)
NO	00	(NEXT PROVIDER OR G13)

PROGRAMMER: ASK G13 THROUGH G14 FOR EACH NEW PROVIDER LISTED IN G11.

(G10=01)

G13. Thinking about {NEW PROVIDER FROM G11}, was this place:

*Note: G13=4 is a category added at R2 and R3; value of "other" category (G13=3) maintained for comparability across rounds.

E36, E37, E38, E39 PRELOADED VARIABLES: BIRTHYEAR

	and G13=03) n. INTERVIEWER: PLEASE SPECIFY		
	<open></open>		(NEXT PROVIDER OR G15)
	DON'T KNOWREFUSED		
(G10=01	and G13=01)		
	Was this place a:		
	A vocational rehabilitation agency, A welfare agency, A mental health agency Some other state agency, or None of these DON'T KNOW REFUSED	02 03 04 05 d	(NEXT PROVIDER OR G15) (NEXT PROVIDER OR G15) (G14_oth) (NEXT PROVIDER OR G15) (NEXT PROVIDER OR G15)
(G10=01	and G13=01 and G14=04)		
G14_oth	n. INTERVIEWER: PLEASE SPECIFY		
	<open></open>		(NEXT PROVIDER OR G15)
	DON'T KNOWREFUSED		(NEXT PROVIDER OR G15) (NEXT PROVIDER OR G15)

E36, E37, E38, E39

PRELOADED VARIABLES: BIRTHYEAR

(All)

G15. **PROGRAMMER:** USE LANGUAGE BELOW IF {NAME} HAS NOT COMPLETED ANY PRIOR ROUNDS (S2=01)

Sometimes people with disabilities receive medical services to improve their ability to work or help them live independently. Some examples of these services are physical therapy, surgery, and help getting special equipment or devices.

(IF DISABLED BEFORE AGE 16 (B18_AGE < 16 OR IF BIRTHYEAR - B18_YEAR <16)) Since age 16, {have you/has NAME} received any medical services to improve {your /his/her} ability to work or live independently?

(IF DISABLED AT AGE 16 OR LATER (B18_AGE \geq 16 OR IF BIRTHYEAR - B18_YEAR \geq 16)) Since becoming disabled, {have you/has NAME} received any medical services to improve {your/his/her} ability to work or live independently?

PROBE: Please do not include places you already told me about.

PROGRAMMER: USE LANGUAGE BELOW IF {NAME} HAS COMPLETED ONE OR MORE PRIOR ROUNDS (S2=02 or S2=04)

Sometimes people with disabilities receive medical services to improve their ability to work or help them live independently. Some examples of these services are physical therapy, surgery, and help getting special equipment or devices.

In 2005, did {you/NAME} receive any medical services to improve {your/his/her} ability to work or live independently?

PROBE: Please do not include places you already told me about.

YES	01	
NO	00	(G19)
DON'T KNOW	d	(G19)
REFUSED	r	(G19)

(G15=01)

G16. What was the name of the place {you/NAME} went to for those medical services?

PROBE: Please do not include any places you already told me about.

PROGRAMMER: DISPLAY Anyplace else? ON SCREEN FOR PROVIDERS 2 THROUGH 8

INTERVIEWER: PRESS 'ENTER' FOR NO OTHER PLACE

PROBE 1: IF RESPONDENT DOESN'T KNOW NAME: I need to enter something that will help identify the place {you/NAME} received these services from in later questions. What could I enter to help us identify this place later? Street name, address, person spoken with there, even the color of the building would help identify it.

PROBE 2: (IF (S2=01 AND E36=01) OR (IF S2=02 and E37a=01 or E37b=01) or (S2=02 OR S2=04 AND E37=01)): This includes services {you/NAME} received from an Employment Network.

PROVIDER 1 <string=240></string=240>	
PROVIDER 2 < STRING=240>	
PROVIDER 3 < STRING=240>	
PROVIDER 4 < STRING=240>	
PROVIDER 5 < STRING=240>	
PROVIDER 6 < STRING=240>	
PROVIDER 7 < STRING=240>	
PROVIDER 8 < STRING=240>	
REFUSED	

PROGRAMMER: FOR EACH PROVIDER LISTED IN G16 DISPLAY G17.

(G15=01)

G17. INTERVIEWER: DID THE RESPONDENT MENTION {PROVIDER LISTED IN G16} AT G2 OR G11?

INTERVIEWER: IF THE LIST OF PROVIDERS ALREADY MENTIONED IS BLANK, NO PROVIDERS

HAVE BEEN MENTIONED YET.

INTERVIEWER: PROVIDERS MENTIONED AT G2 OR G11 INCLUDE {DISPLAY PROVIDERS FROM

G2 AND G11}:

PROGRAMMER: ASK KINDPLACE FOR EACH NEW PROVIDER LISTED IN G16.

(G15=01)

G18. Thinking about {NEW PROVIDER FROM G16}, was this place:

A clinic,	01	(NEXT PROVIDER OR G19)
A hospital	02	(NEXT PROVIDER OR G19)
A doctor's office, or	03	(NEXT PROVIDER OR G19)
Some other type of place?	04	(G18_oth)
DON'T KNOW	d	(NEXT PROVIDER OR G19)
REFUSED	r	(NEXT PROVIDER OR G19)

(G15=01 and G18=04)

G18_oth. INTERVIEWER: PLEASE SPECIFY

<OPEN>______(NEXT PROVIDER OR G19)

DON'T KNOW d (NEXT PROVIDER OR G19)
REFUSED r (NEXT PROVIDER OR G19)

(All)

G19. **PROGRAMMER:** USE LANGUAGE BELOW IF {NAME} HAS NOT COMPLETED ANY PRIOR ROUNDS (S2=01)

Sometimes people go to a mental health professional to get therapy or counseling to improve their ability to work or live independently.

(IF DISABLED BEFORE AGE 16 (B18_AGE < 16 OR IF BIRTHYEAR – B18_YEAR <16)) Since age 16, {have you/has NAME} received mental health therapy or counseling to improve {your/his/her} ability to work or live independently? This could include treatment for alcohol or drug abuse.

(IF DISABLED AT AGE 16 OR LATER (B18_AGE ≥ 16 OR IF BIRTHYEAR - B18_YEAR ≥ 16)) Since becoming disabled, {have you/has NAME} received mental health therapy or counseling to improve {your/his/her} ability to work or live independently? This could include treatment for alcohol or drug abuse.

PROBE: Please do not include places you already told me about.

PROGRAMMER: USE LANGUAGE BELOW IF {NAME} HAS COMPLETED ONE OR MORE PRIOR ROUNDS (S2=02 or S2=04):

Sometimes people go to a mental health professional to get therapy or counseling to improve their ability to work or live independently. In 2005, did {you/NAME} receive mental health therapy or counseling to improve {your/his/her} ability to work or live independently? This could include treatment for alcohol or drug abuse.

PROBE: Please do not include places you already told me about.

YES	01	
NO	00	(G23)
DON'T KNOW		
REFUSED	r	(G23)

(G19=01)

G20. What was the name of the place {you/NAME} went to for therapy or counseling?

PROBE: Please do not include any places you already told me about.

PROGRAMMER: DISPLAY Anyplace else? ON SCREEN FOR PROVIDERS 2 THROUGH 8

INTERVIEWER: PRESS 'ENTER' FOR NO OTHER PLACE

PROBE 1: IF RESPONDENT DOESN'T KNOW NAME: I need to enter something that will help identify the place {you/NAME} received these services from in later questions. What could I enter to help us identify this place later? Street name, address, person spoken with there, even the color of the building would help identify it.

PROBE 2: (IF (S2=01 AND E36=01) OR (IF S2=02 and E37a=01 or E37b=01) or (S2=02 OR S2=04 AND E37=01)): This includes services {you/NAME} received from an Employment Network.

PROVIDER 1 <string=240></string=240>
PROVIDER 2 < STRING=240>
PROVIDER 3 < STRING=240>
PROVIDER 4 < STRING=240>
PROVIDER 5 < STRING=240>
PROVIDER 6 < STRING=240>
PROVIDER 7 < STRING=240>
PROVIDER 8 < STRING=240>
REFUSEDr

PROGRAMMER: FOR EACH PROVIDER LISTED IN G20 DISPLAY G21.

(G19=01)

G21. INTERVIEWER: DID THE RESPONDENT MENTION (PROVIDER LISTED IN G20) AT G2, G11 OR G16?

INTERVIEWER: IF THE LIST OF PROVIDERS ALREADY MENTIONED IS BLANK, NO PROVIDERS

HAVE BEEN MENTIONED YET.

INTERVIEWER: PROVIDERS MENTIONED AT G2, G11, OR G16 INCLUDE (DISPLAY PROVIDERS

FROM G2, G11, AND G16}:

PROGRAMMER: ASK KINDPLACE FOR EACH NEW PROVIDER LISTED IN G20.

(G19=01)

G22. Thinking about {NEW PROVIDER FROM G20}, was this place:

A mental health agency,	01	(NEXT PROVIDER OR G23)
A clinic,	02	(NEXT PROVIDER OR G23)
A hospital,	03	(NEXT PROVIDER OR G23)
A doctor's office, or	04	(NEXT PROVIDER OR G23)
Some other type of place?	05	(G22_oth)
DON'T KNOW	d	(NEXT PROVIDER OR G23)
REFUSED	r	(NEXT PROVIDER OR G23)

(G19=01 and G22=05)

G22 oth. INTERVIEWER: PLEASE SPECIFY

<OPEN>_____(NEXT PROVIDER OR G23)

(All)

G23. **PROGRAMMER:** USE LANGUAGE BELOW IF {NAME} HAS NOT COMPLETED ANY PRIOR ROUNDS (S2=01)

(IF DISABLED BEFORE AGE 16 (C_DISAGE <16)) Since age 16, {have you/has NAME} enrolled in school or taken any classes to help {you/him/her} get a new job or change careers? Please do not include any training you have already told me about.

(IF DISABLED AT AGE 16 OR LATER (C_DISAGE ≥ 16)) Since becoming disabled, {have you/has NAME} enrolled in school or taken any classes to help {you/him/her} get a new job or change careers? Please do not include any training you have already told me about.

PROBE 1: This could include vocational training in high school, college classes, or other instructional programs.

PROBE 2: Please don't include places you already told me about.

PROGRAMMER: USE LANGUAGE BELOW IF {NAME} HAS COMPLETED ONE OR MORE PRIOR ROUNDS (S2=02 or S2=04):

In 2005, did {you/NAME} enroll in school or take any classes to help {you/him/her} get a new job or change careers?

Please do not include any training you have already told me about.

PROBE 1: This could include vocational training in high school, college classes, or other instructional programs.

PROBE 2: Please don't include places you already told me about.

 YES
 01

 NO
 00 (G29a)

 DON'T KNOW
 d (G29a)

 REFUSED
 r (G29a)

(G23=01)

G24. Where did {you/NAME} enroll in school or take classes?

PROBE: Please do not include any places you already told me about.

PROGRAMMER: DISPLAY Anyplace else? ON SCREEN FOR PROVIDERS 2 THROUGH 8

INTERVIEWER: PRESS 'ENTER' FOR NO OTHER PLACE

PROBE 1: IF RESPONDENT DOESN'T KNOW NAME: I need to enter something that will help identify the place {you/NAME} received these services from in later questions. What could I enter to help us identify this place later? Street name, address, person spoken with there, even the color of the building would help identify it.

PROBE 2: (IF (S2=01AND E36=01) OR (IF S2=02 and E37a=01 or E37b=01) or (S2=02 OR S2=04 AND E37=01)): This includes services {you/NAME} received from an Employment Network.

PROVIDER 1 <string=240></string=240>
PROVIDER 2 < STRING=240>
PROVIDER 3 < STRING=240>
PROVIDER 4 < STRING=240>
PROVIDER 5 < STRING=240>
PROVIDER 6 < STRING=240>
PROVIDER 7 < STRING=240>
PROVIDER 8 < STRING=240>
REFUSEDr

PROGRAMMER: FOR EACH PROVIDER LISTED IN G24 DISPLAY G25.

(G23=01)

G25. **INTERVIEWER:** DID THE RESPONDENT MENTION {PROVIDER LISTED IN G24} AT G2, G11, G16, OR G20?

INTERVIEWER: IF THE LIST OF PROVIDERS ALREADY MENTIONED IS BLANK, NO PROVIDERS HAVE BEEN MENTIONED YET.

INTERVIEWER: PROVIDERS MENTIONED AT G2, G11, G16, OR G20 INCLUDE {DISPLAY PROVIDERS FROM G2, G11, G16, AND G20}:

(G10=01 or G23=01)

G26. {Are you/Is NAME} <u>currently</u> enrolled in school or taking any classes?

YES	01	
NO	00	(G29a)
DON'T KNOW	d	(G29a)
REFUSED	r	(G29a)

E36, E37, E38, E39 PRELOADED VARIABLES: BIRTHYEAR

*	or $G23=01$ and $G26=01)$ {Are you/Is NAME} working toward a degree, a certificate or license, or {are y classes?	/ou/i	s (he/she)} jı	ust taking
	WORKING TOWARD DEGREE	02 03 d	(G29a)	
*	or G23=01 and G26=01 and G27=01,02) PROGRAMMER: IF G27=01 USE "DEGREE" AND IF G27=02 USE "CERTIFICA Toward what type of {degree/certificate or license} {are you/is NAME} working? INTERVIEWER: CODE ONE ONLY.	TE C	OR LICENSE'	,
	INTERVIEWER. CODE ONE ONLY.			
	GED OR HIGH SCHOOL EQUIVALENCE PROGRAM/COURSES VOCATIONAL PROGRAM ASSOCIATE DEGREE PROGRAM (AA DEGREE) UNDERGRADUATE DEGREE PROGRAM (BA, BS DEGREE) GRADUATE DEGREE PROGRAM (e.g., MA, MS, MD, EdD) OTHER DON'T KNOW REFUSED	02 03 04 05 06 d	(G29) (G29) (G29) (G28f_oth) (G29)	
	or G23=01 and G26=01 and G27=01,02 and G28=02) th. INTERVIEWER: PLEASE SPECIFY			
	DPEN>			_(G29)
	DON'T KNOWREFUSED			
	or G23=01 and G26=01 and G27=01,02 and G28=06) n. <i>INTERVIEWER:</i> PLEASE SPECIFY			
<0	DPEN>			_
	DON'T KNOWREFUSED			
(G10=01 G29.	or G23=01 and G26=01 and G27=01 or 02) {Are you/Is NAME} a full-time or part-time student?			
	FULL-TIME PART-TIME DON'T KNOW REFUSED	02 d		

DE-DUPLICATION OF THE LIST OF PROVIDERS

(All) G29a .	CHECK: DID {I	NAME} RECEIVE ANY SERVICES (G1=1 OR G10=1 OR G15=1 OR G19=1)?
		YES
		770
(G29a=0 G30_1.	1)	
	PROGRAMMER:	LIST PROVIDERS FROM G2, G11, G16, AND G20.
	INTERVIEWER:	IF A PROVIDER APPEARS ON THE LIST BELOW MORE THAN ONCE, ENTER THE NUMBER IN FRONT OF <u>ONE</u> OF THE PROVIDER NAMES TO DELETE IT FROM THE LIST. DO NOT MARK BOTH PROVIDER NAMES AS DUPLICATES.
	INTERVIEWER:	ONCE A PROVIDER NAME HAS BEEN DELETED, IT WILL APPEAR IN TEAL.
		NONE/DONE
(G29a=0	/	
G30_1.	••	ME) received employment, medical, and therapy services from {LIST BELOW}. I want to service provider is listed only once. Are any of these providers the same?
	INTERVIEWER:	IF A PROVIDER APPEARS ON THE LIST BELOW MORE THAN ONCE, ENTER THE NUMBER IN FRONT OF $\underline{\sf ONE}$ OF THE PROVIDER NAMES TO DELETE IT FROM THE LIST. DO NOT MARK BOTH PROVIDER NAMES AS DUPLICATES.
	INTERVIEWER:	ONCE A PROVIDER NAME HAS BEEN DELETED, IT WILL APPEAR IN TEAL.
		NONE/DONE
	PROGRAMMER:	IF ALL PROVIDERS DELETED, DISPLAY, YOU HAVE DELETED ALL PROVIDERS. RETURN TO G30 AND DELTE DUPLICATES ONLY.
		TED THE APPROPRIATE PROVIDER FOR DELETION (OR SELECTED 'NONE/DONE') DERROR MESSAGE TO CONTINUE.
WHEN S	SERVICES RECEI	/ED
	PROGRAMMER:	IF {NAME} COMPLETED ANY PRIOR ROUND (S2=02 OR S2=04), SKIP QUESTIONS G33_BASE THROUGH G35
		ke to know when {you/NAME} last received services from the places I just read and more services {you/he/she} received from those places.
	INTERVIEWER:	PRESS 1 TO CONTINUE
	PROGRAMMER:	IF {NAME} HAS NOT COMPLETED ANY PRIOR ROUND (S2=01), ASK G33 THROUGH G35 FOR EACH PLACE LISTED IN G30_1 AFTER DE-DUPLICATION.

S2 = 01	and ((G29a=01	'

G33. PROBE: Next, I would like to know when {you/NAME} last received services from the places I just read and more about the kinds of services {you/he/she} received from those places.

Think about all the services {you/NAME} received from {PROVIDER FROM G30_1 DE-DUPLICATED LIST}. In what year did {you/he/she} last receive services from {PROVIDER FROM G30_1 DE-DUPLICATED LIST}? Was it in 2006, in 2005, or before 2005?

	IN 2006	02	,
	DON'T KNOW		(NEXT FROVIDER OR G46)
	REFUSED	r	
S2=01 and (G29a=G34. Was it:	=01 and G33=d,r)		
	Within the last 2 years		
	2 to 5 years ago,	02	(NEXT PROVIDER OR G48)
	5 to 10 years ago, or	03	(NEXT PROVIDER OR G48)
	More than 10 years ago?	04	(NEXT PROVIDER OR G48)
	DON'T KNOW	d	(NEXT PROVIDER OR G48)

S2=01 and (G29a=01 and G33=01,d,r and G34=01)

Did (you/NAME) receive services from (PROVIDER FROM G30 1 DE-DUPLICATED LIST) at any time in 2005?

YES	01	(NEXT PROVIDER OR G35a)
NO	00	(NEXT PROVIDER OR G48)
DON'T KNOW	d	(NEXT PROVIDER OR G48)
REFUSED	r	(NEXT PROVIDER OR G48)

REFUSEDr (NEXT PROVIDER OR G48)

SPECIFIC SERVICES RECEIVED FROM PROVIDERS AND SERVICE-RELATED EXPERIENCES IN 2005

(G29a=01 and G33=01,d,r and G34=01 and G35=01)

G35a. CHECK: DID {NAME} RECEIVE SERVICES FROM ANY PROVIDER IN 2005 ON DE-DUPLICATED LIST (S2=01AND G33=02 OR G35=01) OR (S2=02 OR S2=04 AND THERE ARE DE-DUPLICATED PROVIDERS LISTED IN G30_1) FOR ANY PROVIDER IN DE- DUPLICATED LIST?

YES	01	
NO	00	(G48)

PROGRAMMER: ASK G36 THROUGH G47 FOR EACH PROVIDER LISTED IN G30_1 (AFTER DE-

DUPLICATION) IF USED IN 2005 (S2=01AND G33=02 OR G35=01) OR (S2=02 OR S2=04 AND

THERE ARE DE-DUPLICATED PROVIDERS LISTED IN G30_1)

(G35a=01 or G33=02)

G36. In 2005, please tell me if {you/NAME} received any of the following services from {PROVIDER FROM G30_1 DE-DUPLICATED LIST IF USED IN 2005}. Did {you/he/she} receive:

PROBE: from {PROVIDER FROM G30_1 DE-DUPLICATED LIST IF USED IN 2005 for G36_a thru G36_m}.

		VEO	NO	N. A	DON'T	D==
	Di i lu	YES	NO	NA 00	KNOW	REF
	Physical therapy?	01	00	02	d	r (G37)
	Occupational therapy? PROBE: Occupation therapy is treatment that helps people achieve independence in all areas of their lives and can include home and job site evaluations, skills assessments, equipment recommendations, and other treatment to help improve a	04	00	00	۔	- (C27)
	person's ability to perform daily activities	01	00	02	d	r (G37)
C.	Speech therapy?	01	00	02	d	r (G37)
e.	Special equipment or devices?	01	00	02	d	r (G36e_oth)
f.	Personal counseling or therapy?	01	00	02	d	r (G37)
g.	Group therapy?	01	00	02	d	r (G37)
d.	Medical services?	01	00	02	d	r (G37)*
h.	A work or job assessment?	01	00	02	d	r (G37)
i.	Help to find a job?	01	00	02	d	r (G37)
j.	Training to learn a new job or skill?	01	00	02	d	r (G37)
k.	Advice about modifying {your/his/her} job or work place?	01	00	02	d	r (G37)
I.	On-the-job training, job coaching, or support services?	01	00	02	d	r (G37)
m.	Anything else that I didn't mention?	01	00	02	d	r (G36m_oth)
*Note: G36d r	moved to after G36g at R2 and R3.					
*	33=02 and G36e=01) ITERVIEWER: PLEASE SPECIFY					
	<open></open>					-
	DON'T KNOWREFUSED			d r		
•	33=02 and G36m=01) NTERVIEWER: PLEASE SPECIFY					
	<open></open>					-
	70.07.40.04					

DON'T KNOW d
REFUSED r

FRELOADED VARIABLES. BIRTHTEAR		
(G35a=01 or G33=02)		
G37. In 2005, how many times did {you/NAME} receive these services from {PRO		
DUPLICATED LIST IF USED IN 2005}? You can tell me either the total number of times per week or per month.	ot tim	nes in 2005 or the total
number of times per week or per month.		
PROBE: How many times did {you/NAME} go to the place or have contact with th	e sei	rvice provider in 2005?
TOTAL TIMES IN 2005	01	(G37 T2005)
TIMES PER WEEK		,
TIMES PER MONTH	03	(G37_Tmonth)
DON'T KNOW		. ,
REFUSED	r	(G39)
(G35a=01 or G33=02 and G37=01)		
G37_T2005. PROBE: READ IF NECESSARY: How many times did {you/NAME} go to	the	place or have contact
with the service provider in 2005?		p.a.c. ca.c coac.
_ _		
(1-99) (1-999)		
DON'T KNIOW		
DON'T KNOW REFUSED		
NEI OOLD	'	
GO TO G39		
(G35a=01 or G33=02 and G37=02)		
G37_Tweek. PROBE: READ IF NECESSARY: How many times did {you/NAME} go to	the	place or have contact
with the service provider per week?		
(1-7) (1-99)		
DON'T KNOW	d	
REFUSED	r	
(G35a=01 or G33=02 and G37=02)		
G38_week. In 2005, about how many weeks did {you/NAME} get these services?		
- Coo_mook in 2000, about now many wooko dia (journame) got mood cornocc.		
WEEKS		
(1-52)		
DON'T KNIOW	ام	
DON'T KNOW		
NEI OOLD	'	
GO TO G39		
(G35a=01 or G33=02 and G37=03)		
G37_Tmonth. PROBE: READ IF NECESSARY: How many times did {you/NAME} go to	the	place or have contact
with the service provider per month?		
 (1-31) (1-99)		
(1 31) (1 33)		

DON'T KNOW d REFUSEDr E36, E37, E38, E39 PRELOADED VARIABLES: BIRTHYEAR

(G35a=01 or G33=02 and G37=03) G38_month. In 2005, about how many months did {you/NAME} get these services?
_ MONTHS (1-52) (1-12)
DON'T KNOW d REFUSED r
(G35a=01 or G33=02) G39. About how long did each service session with {PROVIDER FROM G30_1 DE-DUPLICATED LIST IF USEI IN 2005} last?
MINUTES 01 (G39_min) HOURS 02 (G39_hr) DAYS 03 (G39_day) DON'T KNOW d (G40) REFUSED r (G40)
(G35a=01 or G33=02 and G39=01) G39_min. <i>INTERVIEWER:</i> ENTER NUMBER OF MINUTES.
 (1-59) (1-240)
DON'T KNOW
(G35a=01 or G33=02 and G39=02) G39_hr. <i>INTERVIEWER:</i> ENTER NUMBER OF HOURS.
 (1-59) (1-24)
DON'T KNOW
(G35a=01 or G33=02 and G39=03) G39_day. <i>INTERVIEWER:</i> ENTER NUMBER OF DAYS. (1-3) (1-90)
DON'T KNOW d REFUSEDr

E36, E37, E38, E39

PRELOADED VARIABLES: BIRTHYEAR

(G35a=0	1 or G33=02)
G40.	How useful to {you/NAME} were the services provided by {PROVIDER FROM G30_1 DE-DUPLICATED
	LIST IF USED IN 2005}? Would you say they were:

Very useful,	01
Somewhat useful,	02
Not very useful, or	03
Not at all useful?	04
DON'T KNOW	d
REFUSED	r

(G35a=01 or G33=02)

G41. CHECK: WAS {NAME} A TICKET PARTICIPANT IN 2005 (E37=01) OR (IF S2=02 AND EN2005=01)?

YES	01	
NO	00	(G45)

(G35a=01 or G33=02 and G41=01)

G42. CHECK: IS THE INTERVIEWER ALREADY ASKING ABOUT AN EMPLOYMENT NETWORK USED IN 2005 (SEE E39 OR ROUND2 EN FROM R2 E39 OR ROUND2 EN FROM R2 E46)?

YES	01	(G45)
NO	00	

(G35a=01 or G33=02 and G41=01 and G42=00)

G43. **PROGRAMMER:** IF MORE THAN ONE EMPLOYMENT NETWORK IN 2005 (IF E38>1) OR (IF S2=02 and E37a=01 and E37b=01)

Did {you/NAME} receive any of these services from {PROVIDER FROM G30_1 DE-DUPLICATED LIST IF USED IN 2005} during the time {your/his/her} Ticket was assigned to any Employment Networks in 2005?

PROGRAMMER: OTHERWISE USE

Did {you/NAME} receive any of these services from {PROVIDER FROM G30_1 DE-DUPLICATED LIST IF USED IN 2005} during the time {your/his/her} Ticket was assigned to {EMPLOYMENT NETWORK IN 2005 (E39 OR ROUND2 EN FROM R2 E39 OR ROUND2 EN FROM R2 E46)}?

YES	01
NO	00
DON'T KNOW	d
REFUSED	r

(G35a=01 or G33=02 and G41=01 and G42=00)

G44. **PROGRAMMER:** IF MORE THAN ONE EMPLOYMENT NETWORK IN 2005 E38>1) OR (IF S2=02 and E37a=01 and E37b=01)

Employment Networks often arrange services with other providers. In 2005, did any of {your/NAME's} Employment Networks arrange for any of the services {you/he/she} received from {PROVIDER FROM G30_1 DE-DUPLICATED LIST IF USED IN 2005 }?

PROGRAMMER: OTHERWISE USE

Employment Networks often arrange services with other providers. In 2005, did {EMPLOYMENT NETWORK IN 2005 (E39 OR ROUND2 EN FROM R2 E39 OR ROUND2 EN FROM R2 E46)} arrange for any of the services {you/NAME} received from {PROVIDER FROM G30_1 DE-DUPLICATED LIST IF USED IN 2005 }?

YES	01
NO	00
DON'T KNOW	d
REFUSED	r

PAYMENT FOR SERVICES

(G35a=01 or G33=02)

G45.

In 2005, who paid for the services {you/NAME} received from {PROVIDER FROM G30_1 DE-DUPLICATED LIST IF USED IN 2005 }?

PROBE: Anybody else?

INTERVIEWER: CODE ALL THAT APPLY.

{NAME}	01	(G47)
{PROVIDER FROM G30_1 DE-DUPLICATED LIST IF USED		
IN 2005}	02	(G46)
NO ONE	03	(G46)
FAMILY	04	(G47)
HEALTH INSURANCE/OTHER INSURANCE		
EMPLOYMENT NETWORK	06	(G46)
MEDICARE		
MEDICAID	80	(G46)
EMPLOYER	09	(G46)
NON-PROFIT ORGANIZATION SERVING PEOPLE WITH		
DISABLITIES		
WORKER'S COMPENSATION	11	(G46)
DISABILITY INSURANCE	12	(G46)
OTHER	13	(G45_oth)
DON'T KNOW	d	
REFUSED	r	

E36, E37, E38, E39 PRELOADED VARIABLES: BIRTHYEAR

(G35a=01 or G33=02 and G45=13) G45_oth. <i>INTERVIEWER:</i> PLEASE SPECIFY
<open></open>
DON'T KNOW d REFUSED r
(G35a=01 or G33=02 and G45=02,03,05-13,d,r) G46. In 2005, did {you or your/NAME or (his/her)} family have to pay for any part of the cost of the service {you/he/she} received from {PROVIDER FROM G30_1 DE-DUPLICATED LIST IF USED IN 2005}?
YES
(G35a=01 or G33=02 and G46=01) G47. About how much did {you or your/ NAME or (his/her)} family have to pay in 2005? Your best estimate fine.
INTERVIEWER: ROUND TO NEAREST DOLLAR.
PER WEEK
(G35a=01 or G33=02 and G46=01,d,r and G47=01) G47_week. <i>INTERVIEWER</i> : ROUND TO NEAREST DOLLAR.
INTERVIEWER: ENTER AMOUNT PER WEEK.
\$ _, . 00 (1–300) (1-999)
DON'T KNOW
(G35a=01 or G33=02 and G46=01,d,r and G47=02) G47_month. <i>INTERVIEWER:</i> ROUND TO NEAREST DOLLAR.
INTERVIEWER: ENTER AMOUNT PER MONTH.
\$ _ , _ . 00 (1-1,200) (1-9,900) DON'T KNOW
GO TO G48

E36, E37, E38, E39 PRELOADED VARIABLES: BIRTHYEAR

PRELC	DADED VARIABLES: BIRTHYEAR
	e01 or G33=02 and G46=01,d,r and G47=03) rear. <i>INTERVIEWER:</i> ROUND TO NEAREST DOLLAR.
	INTERVIEWER: ENTER AMOUNT PER YEAR.
	\$, . 00 (1-14,400) (1-99,000)
(A11)	DON'T KNOW d REFUSED r
(All) G48 .	CHECK: WAS {NAME} A TICKET PARTICIPANT IN 2005 (E37=01) OR (IF S2=02 AND EN2005=01)?
	YES
MONE	Y RECEIVED FROM EMPLOYMENT NETWORK IN 2005
(G48=0 G49.	PROGRAMMER: IF MORE THAN ONE EMPLOYMENT NETWORK IN 2005 (E38>1) OR (IF S2=02 and E37a=01 and E37b=01) In 2005, did any Employment Network give {you/NAME} money to use for any reason?
	PROGRAMMER: OTHERWISE USE In 2005, did {EMPLOYMENT NETWORK IN 2005 (E39 OR ROUND2 EN FROM R2 E39 OR ROUND2 EN FROM R2 E46)} give {you/NAME} money to use for any reason?
	PROBE: This includes money to purchase services, equipment, or use in any other way.
	YES
	REFUSEDr (G52)
	PROGRAMMER: IF MORE THAN ONE EMPLOYMENT NETWORK IN 2005 (E38>1) OR (IF S2=02 and E37a=01 and E37b=01)
	In 2005, how much money did {you/NAME} receive from all Employment Networks?
	PROGRAMMER: OTHERWISE USE In 2005, how much money did {you/NAME} receive from {EMPLOYMENT NETWORK IN 2005 (E39 OR ROUND2 EN FROM R2 E39 OR ROUND2 EN FROM R2 E46)}?
	PROBE 1: You can tell me the total amount per week or per month.
	PROBE 2: Your best estimate is fine.
	INTERVIEWER: ROUND TO NEAREST DOLLAR
	TOTAL AMOUNT IN

REFUSEDr (G52)

SECTION G UNIVERSE: ALL VARIABLES NEEDED FROM OTHER SECTIONS: RTYPE, B18_AGE, B18_YEAR, {NAME'S} ADDRESS FROM SECTION A,

E36, E37, E38, E39

PRELOADED V	ARIABLES:	BIRTHYEAR
(G48=01 and Ga G50_T2005.	PROGRA	350=01) AMMER: IF MORE THAN ONE EMPLOYMENT NETWORK IN 2005 (E38>1) OR (IF nd E37a=01 and E37b=01)
	PROBE:	READ IF NECESSARY In 2005, how much money did {you/NAME} receive from all Employment Networks?
	PROGRA	AMMER: OTHERWISE USE
	PROBE:	READ IF NECESSARY In 2005, how much money did {you/NAME} receive from {EMPLOYMENT NETWORK IN 2005 (E39 OR ROUND2 EN FROM R2 E39 OR ROUND2 EN FROM R2 E46)}?
		\$ _, ,
		DON'T KNOW
	PROGRAM	650=02) MER: IF MORE THAN ONE EMPLOYMENT NETWORK IN 2005 (E38>1) OR (IF S2=02) and E37b=01)
PROE		IF NECESSARY In 2005, how much money did {you/NAME} receive from all Employment orks per week?
	BE: READ {EMPL	R: OTHERWISE USE IF NECESSARY In 2005, how much money did {you/NAME} receive from LOYMENT NETWORK IN 2005 (E39 OR ROUND2 EN FROM R2 E39 OR ROUND2 EN IR R2 E46)} per week?
		\$ _ , .00 (1-65) (1-385) (G51_weeks)
		DON'T KNOW
*	PROGRAI	G50=02 and G50_Tweek≠d,r) MMER: IF MORE THAN ONE EMPLOYMENT NETWORK IN 2005 (E38>1) OR (IF S2=02 =01 and E37b=01)
How Netwo	-	eks in 2005 {did you/did NAME} receive this money from {your/his/her} Employmen
Abou	t how many	R: OTHERWISE USE y weeks in 2005 did {you/NAME} receive this money from {{EMPLOYMENT NETWORK DR ROUND2 EN FROM R2 E39 OR ROUND2 EN FROM R2 E46)} in 2005 ?
		WEEKS (G52) (1 – 52) (1-12)
		DON'T KNOWd (G52)

REFUSEDr (G52)

SECTION G UNIVERSE: ALL

VARIABLES NEEDED FROM OTHER SECTIONS: RTYPE, B18_AGE, B18_YEAR, {NAME'S} ADDRESS FROM SECTION A,

E36, E37, E38, E39

PRELOADED VARIABLES: BIRTHYEAR

(G48=01 and G49=01 and G50=03)

G50_Tmonth. PROGRAMMER: IF MORE THAN ONE EMPLOYMENT NETWORK IN 2005 (E38>1) OR (IF S2=02 and E37a=01 and E37b=01)

PROBE: READ IF NECESSARY In 2005, how much money did {you/NAME} receive from all Employment Networks per month?

PROGRAMMER: OTHERWISE USE

PROBE: READ IF NECESSARY In 2005, how much money did {you/NAME} receive from {EMPLOYMENT NETWORK IN 2005 (E39 OR ROUND2 EN FROM R2 E39 OR ROUND2 EN FROM R2 E46)} per month?

	\$ _, , _ <i> </i> .00	(1-300)	(1-1,700) (G51_months)
DON'T KNOW			d (G52)
REFUSED			r (G52)

(G48=01 and G49=01 and G50=03 and G50_Tmonth \neq d,r) G51_months.

PROGRAMMER: IF MORE THAN ONE EMPLOYMENT NETWORK IN 2005 (E38>1) OR (IF S2=02 and E37a=01 and E37b=01)

How many months in 2005 {did you/did NAME} receive this money from {your/his/her} Employment Networks?

PROGRAMMER: OTHERWISE USE

About how many months in 2005 did {you/NAME} receive this money from {EMPLOYMENT NETWORK IN 2005 (E39 OR ROUND2 EN FROM R2 E39 OR ROUND2 EN FROM R2 E46)} in 2005?

WHY USED SERVICES IN 2005

(All)

G52. CHECK: DID {NAME} USE ANY SERVICES IN 2005 (G33=02 OR G35=01) OR (S2=02 OR S2=04 AND THERE ARE DE-DUPLICATED PROVIDERS ON LIST) FOR ANY PROVIDER IN DE-DUPLICATED LIST USED IN 2005)?

YES	01	
NO	00	(G58)

(G52=01)

G53. The next few questions are about why {you/NAME} decided to use the employment, medical, or therapy services {you/he/she} used in 2005 .

Thinking only about the services {you/NAME} used in 2005 , what are the main reasons {you/he/she} decided to use these services?

INTERVIEWER: CODE ALL THAT APPLY.

TO FIND A JOB/GET A BETTER JOB	01	(G54)
TO INCREASE INCOME	02	(G54)
TO IMPROVE HEALTH/ WELL BEING	03	(G54)
TO IMPROVE ABILITY TO DO DAILY ACTIVITIES	04	(G54)
TO AVOID A CONTINUING DISABILITY REVIEW	05	(G54)
SOMEONE PRESSURED (NAME) TO PARTICIPATE	06	(G55)
WANTED ACCESS TO A SPECIFIC		
PROGRAM/SERVICE/RESOURCE	07	(G54)
OTHER	80	
DON'T KNOW	d	(G54)
REFUSED	r	(G54)

(G52=01 and G53=08)

G53h_oth. INTERVIEWER: PLEASE SPECIFY

<OPEN>_____

DON'T KNOW d
REFUSED r

(G52=01 and G53=01-05,07,08,d,r)

G54. Did anybody pressure {you/NAME} to use any services when {you/NAME} did not want to?

YES	01	
NO	00	(G58)
DON'T KNOW	d	(G58)
REFUSED	r	(G58)

(G52=01 and G54=01)

G55. Who pressured {you/NAME} to use these services?

INTERVIEWER: CODE ALL THAT APPLY.

PARENT/GUARDIAN	01	(G56)
SPOUSE/PARTNER		
OTHER FAMILY MEMBER	03	(G56)
FRIEND/CO-WORKER	04	(G56)
EMPLOYER/SUPERVISOR	05	(G56)
STAFF OF EMPLOYMENT NETWORK	06	(G56)
VOCATIONAL REHABILITATION CASE MANAGER	07	(G56)
JOB COACH		
SSA LETTER	09	(G56)
SSA STAFF	10	(G56)
BENEFIT SPECIALIST/BPAO		(G56)
OTHER	12	
DON'T KNOW	d	(G56)
REFUSED	r	(G56)

E36, E37, E38, E39 PRELOADED VARIABLES: BIRTHYEAR

	nd G54=01 and G55=12) INTERVIEWER: PLEASE SPECIFY	
<0	PEN>	
	DON'T KNOW	
	REFUSED	r
	and ${ m G54=}01)$ How did {your/NAME's} {FILL PERSON(S) FROM G55} pressure {you/him/her} to	use these services?
i	PROBE: What did they say or do that made {you/NAME} feel pressured?	
ı	NTERVIEWER: CODE ALL THAT APPLY.	
G56_oth.	SAID {NAME} WOULD LOSE DISABILITY AND/OR HEALTH INSURANCE BENEFITS ENCOURAGED/WOULD NOT TAKE "NO" FOR AN ANSWER THREATENED TO WITHHOLD SERVICES THREATENED TO TAKE AWAY OTHER SUPPORT (E.G., KICK OUT OF THE HOUSE) OTHER DON'T KNOW REFUSED INTERVIEWER: PLEASE SPECIFY DON'T KNOW REFUSED DON'T KNOW REFUSED	02 (G57) 03 (G57) 04 (G57) 05 d (G57) r (G57)
G57. 1	and G54=01) Now that {you have/NAME has} used these services, listen to this statement agree, agree, disagree, or strongly disagree. Being pressured to use these servicest interest.	and tell me if you stror
	INTERVIEWER: READ IF NECESSARY.	
	STRONGLY AGREE	02 03 04 d

E36, E37, E38, E39 PRELOADED VARIABLES: BIRTHYEAR

INFORMATION ABOUT SERVICES IN 2005

All)			
G58.	Now I want to ask you about how easy it is to get information about services. T {you/NAME} used and did not use.	his	includes both services
	Thinking only about 2005 , did {you/NAME} or {your/his/her} representative contact information about services to help {you/NAME} work or live independently?	ct ar	nyone to try to get
	YES	01	
	NO	00	(G60)
	DON'T KNOW	d	(G60)
	REFUSED	r	(G60)
G58=0	1)		
G59.	In general, how easy was it for {you/NAME} or {your/his/her} representative to get wanted about these services? Was it:	the	information {you/they
	Very easy,	01	
	Somewhat easy,		
	Not very easy, or		
	Not at all easy?		
	DON'T KNOW	d	
	REFUSED	r	
SERVIO	CES NEEDED BUT NOT RECEIVED IN 2005		
G60.	In 2005, were there any services, equipment, or other supports that {you/NAME} that would have improved {your/his/her} ability to work or live independently?	need	ded but did not receive
	YES	01	
	NO		(G62)
	DON'T KNOW		(G62)
	REFUSED		(G62)
G60=0	1)		
G61.	Why {were you/was NAME} unable to get these services?		
	<open></open>		
	DON'T KNOW	d	
	REFUSED	r	
All) 362.	CHECK: WAS {NAME} A TICKET PARTICIPANT IN 2005 (E37=01) OR (IF S2=0)	2 AI	VD FN2005 =01)2
	525.2	_ , ,,	
	YES	01	(H1)
	NO	00	(11)

SECTION H: TICKET PARTICIPANTS IN 2005

((S2=0 H1.	e01, 02, 04 and E37=01) OR (S2=02 and PREVEN=1)) and (E21=1 or E24=1 or CHECK: DID {NAME} START PARTICIPATING IN TICKET TO WO ((S2=01), OR ((S2=02 or S2=04) AND PREV_PART=00))	
	AND {NAME} STARTED WITH AT LEAST ONE EN IN 2005 (E40Y)	R = 2005 FOR ANY EN IN
	E39) AND {NAME} DID NOT START WITH ANY EN BEFORE 200 2004 FOR ANY EN IN E39))	5 (E40YR IS NOT 2001, 2002, 2003 OR
	OR (S2=02 AND PREVE47YR=01 AND PREVE37=2)?	
	YES	
(S2=01 H2.	01 and E37=01) OR ((S2=02 or S2=04) and PREV_PART=0) and H1=01 Now, I'm going to ask you some questions about {your/NAME's} e Work program.	experiences participating in the Ticket to
	PRESS 1 TO CONTINUE	01
PROG	GRAM EXPERIENCES OF FIRST-TIME TICKET PARTICIPANTS IN 2	005
(S2=01 H3.	01and E37=01) OR ((S2=02 or S2=04) and PREV_PART=0) and H1=01 and H Why did {you/NAME} decide to participate in the Ticket to Work programmer.	
	INTERVIEWER: ENTER VERBATIM RESPONSE	
•	<open></open>	
	DON'T KNOWREFUSED	
(S2=01 H4.	01and E37=01) OR ((S2=02 or S2=04) and PREV_PART=0) and H1=01 and H How soon after receiving {your/his/her} Ticket did {you/NAME} try receiving it or after four weeks?	
	WITHIN FOUR WEKSAFTER FOUR WEEKSDON'T KNOWREFUSED	02 (H7) d
(S2=01 H5.	01and E37=01) OR ((S2=02 or S2=04) and PREV_PART=0) and H1=01 and H Before {you/NAME} received {your/his/her} Ticket, did {you/he/she} because {you were/(he/she) was} waiting to use {your/his/her} Ticket	put off getting any employment services
	YES NO DON'T KNOW	00

(S2=01 and E37=01) OR ((S2=02 or S2=04) and PREV PART=0) and H1=01 and H2=01 and H4=01,d,r)

H6. Before {you/NAME} received {your/his/her} Ticket, did {you/he/she} put off working because {you were/(he/she) was} waiting to use {your/his/her} Ticket to help {you/him/her} get a job?

YES	01
NO	00
DON'T KNOW	d
REFUSED	r

(S2=01 and E37=01) OR ((S2=02 or S2=04) and PREV PART=0) and H1=01 and H2=01

H7. Thinking only about 2005, whom did {you/NAME or (his/her) representative} contact to get information about the Ticket to Work program?

Did {you/NAME or (his/her) representative} contact....

INTERVIEWER: REPEAT STEM AS NECESSARY

			· · · · · · · · · · · · · · · · · · ·	
	YES	NO	DON'T KNOW	REFUSED
a. The Social Security Administration?	01	00	d	r (H8)
b. Maximus?	01	00	d	r (H8)
c. The State Vocational Rehabilitation Agency or {VRNAME}?	01	00	d	r (H8)
d. A Benefits Planning and Assistance Organization (BPAO)	01	00	d	r (H8)
e. A benefits specialist or caseworker?	01	00	d	r (H8)
f. A friend or family member?	01	00	d	r (H8)
g. An independent living center?	01	00	d	r (H8)
h. An Employment Network?	01	00	d	R (H7h_other)
PROBE: Employment Networks are organizations or businesses that offer services to help people with disabilities work or earn more money as part of the Ticket to Work program. Employment Networks can be public or private and can include the State Vocational Rehabilitation Agency.				
i. Another agency or organization?	01	00	d	r (H7i_Other)
j. Anyone else?	01	00	d	r (H7j_Other)
(S2=01and E37=01) OR ((S2=02 or S2=04) and PREV_PART=0) and H1=01 ar H7h_Other What Employment Network did you contact?	nd H2=0	l and H	17h=1)	
<open></open>				
DON'T KNOWREFUSED				

(S2=01and E37=01) OR ((S2 H7i_Other What other Age	$=$ 02 or S2=04) and PREV_PART=0) and H1=01 and H2=01 and H7i=ency or Organization?	1)
<open></open>	>	
	DON'T KNOW	
(S2=01and E37=01) OR ((S2 H7j_Other Who else?	=02 or S2=04) and PREV_PART=0) and H1=01 and H2=01 and H7j=	01)
<open></open>	·	
	DON'T KNOW	
H8. In general, how	e=02 or S2=04) and PREV_PART=0) and H1=01 and H2=01 easy was it for {you/NAME or (his/her) representative} to get Ticket to Work program? Was it:	the information {you/they}
	Very easy,	02
	Not very easy, or	04
	REFUSED	-
	=02 or S2=04) and PREV_PART=0) and H1=01 and H2=01 ME} A PROXY RESPONDENT (RTYPE=02)?	
	YES	· ·

(S2=01 and E37=01) OR ((S2=02 or S2=04) and PREV PART=0) and H1=01 and H2=01 and H9=00)

H10. Now I'm going to read you some statements about the Ticket to Work program. For each statement, please tell me if it is something you knew before today or not.

Is this something you knew before today or not?

		KNEW BEFORE TODAY	DID NOT KNOW BEFORE TODAY	DON'T <u>KNOW</u>	REFUSED
a.	Participation in the Ticket to Work program is voluntary and you do not have to participate to	0.4	20		
b.	keep your disability benefits You can, during any month, take back your Ticket and give it to another employment Network or	01	02	d	r
C.	participating provider	01	02	d	r
d.	participation	01	02	d	r
	Medicaid and/or Medicare benefits	01	02	d	r

(S2=01 and E37=01) OR ((S2=02 or S2=04) and PREV PART=0) and H1=01 and H2=01 and H9=00)

H11. Before you started participating, how much would you say you knew about the Ticket to Work program? Would you say:

A lot,	01
Some,	02
A little, or	03
Nothing?	04
DON'T KNOW	d
REFUSED	r

INFORMATION ABOUT EMPLOYMENT NETWORKS

(S2=01and E37=01) OR ((S2=02 or S2=04) and PREV PART=0) and H1=01 and H2=01

H12. Now, I'd like to ask you about Employment Networks. Employment Networks are organizations or business that offer services to help people with disabilities work or earn more money as part of the Ticket to Work Program.

<u>Before</u> {you/NAME or (his/her) representative} used {your/NAME's} Ticket in 2005, did {you/NAME or (his/her) representative} get any information about the Employment Networks that serve {your/NAME's} area?

PROBE: Employment Networks can be public or private and can include the State Vocational Rehabilitation Agency, or {VRNAME}.

YES	01	
NO	00	(H21)
DON'T KNOW	d	(H21)
REFUSED	r	(H21)

H13.	Did (you/NAME or (his/her) representative) receive information about Employment		
	YES	01	
	NO		(H15)
	DON'T KNOW		` '
	REFUSED		(H15)
(S2=01	1and E37=01) OR ((S2=02 or S2=04) and PREV_PART=0) and H1=01 and H2=01 and H12=	=01 a	and H13=01
H14.	Who sent {you/NAME or (his/her) representative} the information about Employment	ent N	letworks?
	INTERVIEWER: CODE ALL THAT APPLY.		
	SOCIAL SECURITY ADMINISTRATION		` '
	MAXIMUS		` '
	STATE VOCATIONAL REHABILITATION AGENCY or {VRNAME}		` '
	A BENEFITS PLANNING AND ASSISTANCE ORGANIZATION (BPAO)		• •
	A BENEFITS SPECIALIST OR CASEWORKER		• •
	FRIEND/FAMILY MEMBER		` '
	INDEPENDENT LIVING CENTER		• •
	EMPLOYMENT NETWORK		•
	OTHER AGENCY/ORGANIZATION		•
		40	/LI4 4: Othor)
	OTHER		
(S2=01	DON'T KNOWREFUSED	d r	(H15) (H15)
	DON'T KNOW	d r	(H15) (H15)
	DON'T KNOW REFUSED land E37=01) OR ((S2=02 or S2=04) and PREV_PART=0) and H1=01 and H2=01 and H12= Other. What Employment Network? <open></open>	d r =01 a	(H15) (H15)
	DON'T KNOW	d r =01 a	(H15) (H15)
H14h_	DON'T KNOW	d r =01 a d r	(H15) (H15) and H13=01and H14=08)
H14h_	DON'T KNOW	d r =01 a d r	(H15) (H15) and H13=01and H14=08)
H14h_	DON'T KNOW REFUSED and E37=01) OR ((S2=02 or S2=04) and PREV_PART=0) and H1=01 and H2=01 and H12= Other. What Employment Network? <open> DON'T KNOW REFUSED and E37=01) OR ((S2=02 or S2=04) and PREV_PART=0) and H1=01 and H2=01 and H12= Other. What other Agency or Organization?</open>	d r=01 a d r=01 a	(H15) (H15) and H13=01and H14=08)
H14h_	DON'T KNOW REFUSED I and E37=01) OR ((S2=02 or S2=04) and PREV_PART=0) and H1=01 and H2=01 and H12= _Other. What Employment Network? <open> DON'T KNOW REFUSED I and E37=01) OR ((S2=02 or S2=04) and PREV_PART=0) and H1=01 and H2=01 and H12= Other. What other Agency or Organization? <open></open></open>	d r=01 a d r=01 a	(H15) (H15) and H13=01and H14=08)
(S2=01 H14i_0 (S2=01 H14=1	DON'T KNOW	d r=01 a d r=01 a	(H15) (H15) and H13=01and H14=08) and H13=01and H14=09)
(S2=01 H14i_0 (S2=01 H14=1	DON'T KNOW	d r=01 a d r=01 a	(H15) (H15) and H13=01and H14=08) and H13=01and H14=09)
(S2=01 H14i_0 (S2=01 H14=1	DON'T KNOW	d r=01 a d r=01 a	(H15) (H15) and H13=01and H14=08) and H13=01and H14=09)
(S2=01 H14i_0 (S2=01 H14=1	DON'T KNOW	d r =01 a d r =01 a	(H15) (H15) and H13=01and H14=08) and H13=01and H14=09)

(S2=01 H15.	, , , , , , , , , , , , , , , , , , , ,	2=02 or S2=04) and PREV_PART=0) and H1=01 and H2=01 and H12= all {you/NAME or (his/her) representative} to talk about Employme		letworks?
	ŕ			
		YES		
		NO		(H17)
		DON'T KNOW		(H17)
		REFUSED	r	(H17)
(S2=01 H16.		2=02 or S2=04) and PREV_PART=0) and H1=01 and H2=01 and H12=/NAME or (his/her) representative}?	=01ar	nd H15=01
	INTERVIEWER:	CODE ALL THAT APPLY.		
		SOCIAL SECURITY ADMINISTRATION	01	(H17)
		MAXIMUS		` ,
		STATE VOCATIONAL REHABILITATION AGENCY OR		,
		{VRNAME}	03	(H17)
		A BENEFITS PLANNING AND ASSISTANCE		,
		ORGANIZATION (BPAO)	04	(H17)
		A BENEFITS SPECIALIST OR CASEWORKER		
		FRIEND/FAMILY MEMBER		• •
		INDEPENDENT LIVING CENTER	07	(H17)
		EMPLOYMENT NETWORK	80	(H16h_Other)
		OTHER AGENCY/ORGANIZATION	09	(H16i_Other)
		OTHER	10	(H16j_Other)
		DON'T KNOW	d	(H17)
		REFUSED	r	(H17)
	and E37=01) OR ((S Other. What Emplo	2=02 or S2=04) and PREV_PART=0 and H1=01 and H2=01 and H12=0 yment Network?	01 an	nd H15=01 and H16=08)
	<open< td=""><td>></td><td></td><td></td></open<>	>		
		DON'T KNOW	d	
		REFUSED		
		NEI OOLD	'	
		2=02 or S2=04) and PREV_PART=0 and H1=01 and H2=01 and H12=0 agency or Organization?	01 ar	nd H15=01 and H16=09)
	<open< td=""><td>></td><td></td><td></td></open<>	>		
		DON'T KNOW	d	
		REFUSED	r	
	and E37=01) OR ((S: Other. Who else?	2=02 or S2=04) and PREV_PART=0 and H1=01 and H2=01 and H12=	01 an	nd H15=01and H16=10)
	<open< td=""><td>></td><td></td><td></td></open<>	>		
		DON'T KNOW	d	
		REFUSED	r	

	VEO	0.4		
	YES		(1110)	
	NO		, ,	
	DON'T KNOW		, ,	
	REFUSED	r	(H19)	
	37=01) OR ((S2=02 or S2=04) and PREV_PART=0 and H1=01 and H2=01 and H12-0		d H17=01)	
H18. Wh	o talked to {you/NAME or (his/her) representative} about Employment Network	s?		
INT	TERVIEWER: CODE ALL THAT APPLY.			
	SOCIAL SECURITY ADMINISTRATION	01	(H19)	
	MAXIMUS	02	(H19)	
	STATE VOCATIONAL REHABILITATION AGENCY OR {VRNAME}	03	(H19)	
	A BENEFITS PLANNING AND ASSISTANCE ORGANIZATION (BPAO)	04	(H19)	
	A BENEFITS SPECIALIST OR CASEWORKER	05	(H19)	
	FRIEND/FAMILY MEMBER	06	(H19)	
	INDEPENDENT LIVING CENTER		, ,	
	EMPLOYMENT NETWORK			
	OTHER AGENCY/ORGANIZATION		•	
	OTHER			
	DON'T KNOW	٦	(1.14.0)	
	REFUSED			
(S2=01and E3	REFUSED	r	(H19)	ϵ
		r	(H19)	;)
	REFUSED	r	(H19)	3)
	REFUSED	r	(H19)	3)
	REFUSED	r)1 an	(H19)	3)
	REFUSED	r)1 an	(H19)	;)
H18h_Other.	REFUSED	r)1 an d r	(H19) d H17=01 and H18=08	
H18h_Other.	REFUSED	r)1 an d r	(H19) d H17=01 and H18=08	
H18h_Other.	REFUSED	r)1 an d r	(H19) d H17=01 and H18=08	
H18h_Other.	REFUSED	r)1 an d r	(H19) d H17=01 and H18=08	
H18h_Other.	REFUSED 37=01) OR ((S2=02 or S2=04) and PREV_PART=0 and H1=01 and H2=01 and H12-0 What other Employment Network? <open> DON'T KNOW REFUSED 37=01) OR ((S2=02 or S2=04) and PREV_PART=0 and H1=01 and H2=01 and H12=0 What other Agency or Organization?</open>	r)1 an d r	(H19) d H17=01 and H18=08	
H18h_Other.	REFUSED 37=01) OR ((S2=02 or S2=04) and PREV_PART=0 and H1=01 and H2=01 and H12-0 What other Employment Network? <open> DON'T KNOW REFUSED 37=01) OR ((S2=02 or S2=04) and PREV_PART=0 and H1=01 and H2=01 and H12=0 What other Agency or Organization?</open>	r 01 an d r 01 ar	(H19) d H17=01 and H18=08	
H18h_Other.	REFUSED	r d r d r d d d d d d d d d	(H19) d H17=01 and H18=08	
H18h_Other. (S2=01and E3 H18i_Other.	REFUSED	r n l an d r 01 ar d r	(H19) d H17=01 and H18=08	9)
H18h_Other. (S2=01and E3 H18i_Other.	REFUSED	r n l an d r 01 ar d r	(H19) d H17=01 and H18=08	9)
H18h_Other. (S2=01and E3 H18i_Other.	REFUSED	r n l an d r 01 ar d r	(H19) d H17=01 and H18=08	9)
H18h_Other. (S2=01and E3 H18i_Other.	REFUSED 37=01) OR ((S2=02 or S2=04) and PREV_PART=0 and H1=01 and H2=01 and H12-0 What other Employment Network? <open></open>	r n l an d r 01 ar d r	(H19) d H17=01 and H18=08	9)
H18h_Other. (S2=01and E3 H18i_Other.	REFUSED	r r n)1 an d r 01 ar	(H19) d H17=01 and H18=08	9)

(S2=01a H19.		2=02 or S2=04) and PREV_PART=0 and H1=01 and H2=01 and H12= or (his/her) representative} learn about Employment Networks on		eb site?
		YES	-	
		NO		
		DON'T KNOW		
		REFUSED	r	
(S2=01a H20.	In general, how	2=02 or S2=04) and PREV_PART=0) and H1=01 and H2=01 and H12=01 useful was the information {you/NAME or (his/her) representworks that serve {your/NAME's} area? Was it:		e} received about the
		Very useful,	01	
		Somewhat useful,		
		Not very useful, or		
		Not at all useful?		
		DON'T KNOW	-	
		REFUSED		
CONTA	CT WITH STATE	VR AGENCIES		
(S2=01a	nd F37=01) OR ((S	2=02 or S2=04) and PREV PART=0) and H1=01 and H2=01		
(32 01a H21.		ons are about the vocational rehabilitation agency in {your/NAME	'el et	tate In Syour/NAME's
1121.	•	onal rehabilitation agency is called {VRNAME}. I'm going to refe	-	
		y. In2005, did {you/NAME or his/her representative} contact {you		
		her} Ticket or talk about getting services from them?	11/1113	filer, State VIX agency
	to use (your/ms/i	nery ricket of talk about getting services from them?		
		YES	01	
		NO	00	(H26)
		DON'T KNOW		(H26)
		REFUSED		(H26)
(S2=01a	nd E37=01) OP ((S	2=02 or S2=04) and PREV PART=0) and H1=01 and H2=01 and H21=	=0.1	
H22.		or (his/her) representative} try to use {your/NAME's} Ticket to		up with the State VR
		YES	01	(H24)
		NO		,
		DON'T KNOW	d	(H24)
		REFUSED		(H24)
(S2=01a H23 .		2=02 or S2=04) and PREV_PART=0) and H1=01 and H2=01 and H21=NAME or his/her representative} try to use {your/NAME's} Ticke		
	INTERVIEWER:	ENTER VERBATIM RESPONSE		
	<open< td=""><td>\</td><td></td><td></td></open<>	\		
	COI EIN			
		DON'T KNOW	d	(H26)
		REFUSED		(H26)
				, ,

(S2=01 and E37=01) OR ((S2=02 or S2=04) and PREV_PART=0) and H1=01 and H2=01 and H21 H24. Did the State VR agency accept {your/NAME'S} Ticket in 2005?	=01 a	and H22=01,d,r
T124. Did the state vivagency accept (your/waivie of Ticket in 2000:		
YES	01	(H26)
NO		
DON'T KNOW		
REFUSED	r	(H26)
(S2=01and E37=01) OR ((S2=02 or S2=04) and PREV_PART=0) and H1=01 and H2=01 and H24=00	H21=	=01 and H22=01,d,r and
H25. Why didn't the State VR agency accept {your/NAME's} Ticket in 2005?		
INTERVIEWER: CODE ALL THAT APPLY.		
NOT TAKING TICKETS WHEN CONTACTED	01	(H26)
DID NOT OFFER SERVICES (NAME) NEEDED		, ,
DID NOT SERVE PEOPLE WITH {NAME'S}		
DISABILITY/NEEDS	03	(H26)
{NAME} NOT WILLING/ABLE TO WORK FULL-		
TIME/ENOUGH HOURS	04	(H26)
{NAME} NOT WILLING TO GO OFF OF DISABILITY	0.5	(1100)
BENEFITS		, ,
OTHER DON'T KNOW		
REFUSED		
\ <u>-</u>	•	(1.23)
(S2=01and E37=01) OR ((S2=02 or S2=04) and PREV_PART=0) and H1=01 and H2=01 and H25=06	H22=	=01,d,r and H24=00 and
H25_Other. What Other reason?		
<open></open>		
DON'T KNOW	d	
REFUSED		
CONTACT WITH OTHER EMPLOYMENT NETWORKS		

 $(S2=01 \text{ and } E37=01) \text{ OR } ((S2=02 \text{ or } S2=04) \text{ and } PREV_PART=0) \text{ and } H1=01 \text{ and } H2=01$

H26. In 2005, other than the Employment Network {you/NAME} assigned {your/his/her} Ticket to, did {you/NAME or (his/her) representative} contact any other Employment Networks to use {your/his/her} Ticket or talk about getting services from them?

YES	01	
NO	00	(H32)
DON'T KNOW	d	(H32)
REFUSED	r	(H32)

(S2=01a:	, ,,	· · · · · · · · · · · · · · · · · · ·	ART=0) and H1=01 and H2=01 and H26= d {you/NAME} contact in 2005?	01
	PROBE: Your bo	est guess is fine.		
		(1	_ _ NUMBER -2) -15)	
(S2=01a: H28.			ART=0) and H1=01 and H2=01 and H26= FWORKS" IF {NAME} CONTACTED M	
	Did {you/NAME of Employment	r (his/her) representative} t	try to use {your/NAME's} Ticket to sign	n up with {any of) the other
	Network(s) {you/N	IAME or (his/her) represen	tative} contacted in 2005?	
		NO DON'T KNOW		00 d (H32)
(S2=01ar H29.		· · · · · · · · · · · · · · · · · · ·	ART=0) and H1=01 and H2=01and H26=0 FWORKS" IF {NAME} CONTACTED M	
			ntative} try to use {your/NAME's} Ticl her) representative} contacted in 2005	
	INTERVIEWER:	ENTER VERBATIM RESPO	ONSE	
	<open></open>			
				d r

(S2=01and E37=01) OR ((S2=02 or S2=04) and PREV PART=0) and H1=01 and H2=01and H26=01 and H28=01 PROGRAMMER: USE "ANY OF" AND "NETWORKS" IF {NAME} CONTACTED MORE THAN ONE EN H31. (H27>1).Why didn't (any of) the other Employment Network(s) {you/NAME} tried to use {your/his/her} Ticket with accept {your/NAME's} Ticket in 2005? INTERVIEWER: CODE ALL THAT APPLY. EMPLOYMENT NETWORK DID NOT SERVE PEOPLE {NAME} NOT WILLING/ABLE TO WORK FULL-TIME/ENOUGH HOURS 04 (H32) OTHER (SPECIFY) <OPEN> _____ 06 (H31_Other) DON'T KNOW d (H32) REFUSED r (H32) (S2=01and E37=01) OR ((S2=02 or S2=04) and PREV PART=0) and H1=01 and H2=01 and H26=01 and H28=01 and H31=06) H31 Other. What Other reason? DON'T KNOW d REFUSED (S2=01and E37=01) OR ((S2=02 or S2=04) and PREV PART=0) and H1=01 and H2=01 H32. Is there any information {you/NAME or (his/her) representative} needed, but didn't get when {you/they} were choosing an Employment Network? YES 01 NO 00 (H33a) DON'T KNOW d (H33a) REFUSED r (H33a) (S2=01and E37=01) OR ((S2=02 or S2=04) and PREV PART=0) and H1=01 and H2=01 and H32=01) H33. What information did {you/NAME} need but didn't get? INTERVIEWER: ENTER VERBATIM RESPONSE <OPEN>____ DON'T KNOW d

REFUSEDr

(S2=01 and E37=01) OR ((S2=02 or S2=04) and PREV PART=0) and H1=01 and H2=01 H33a.

CHECK: DID {NAME} ANSWER DON'T KNOW OR REFUSE TO E40MTH, E40YR ORE42MTH, E42YR FOR ANY EMPLOYMENT NETWORK IN 2005 (E40mth=d,r or E40yr=d,r or E42mth=d,r or E42yr=d,r) FOR ANY EMPLOYMENT NETWORK IN 2005)?

YES	01	
NO	00	(H34)

(S2=01and E37=01) OR ((S2=02 or S2=04) and PREV PART=0) and H1=01 and H2=01 and H33a=01

H33b. Earlier you said that you were signed up with the following Employment Networks in 2005 {LIST EN'S FROM E39}.

In 2005, which of these employment networks were you signed up with the longest? PROBE: Your best estimate is fine.

PROGRAMMER; DISPLAY IF NO ROUND 2 EN FILLED: *INTERVIEWER:* RESPONSE 1 IS NOT A VALID CHOICE

PROGRAMMER: ALLOW INTERVIEWER TO CHECK ONE EMPLOYMENT NETWORK. THIS EMPLOYMENT NETWORK SHOULD BE USED AS THE LONGEST EMPLOYMENT NETWORK IN 2005 FOR QUESTIONS H34, H35, H36, H37, H40, H41, H42.

(S2=01and E37=01) OR ((S2=02 or S2=04) and PREV PART=0) and H1=01 and H2=01

H34. **PROGRAMMER:** IF MORE THAN ONE EMPLOYMENT NETWORK (E38>1), FILL NAME OF EMPLOYMENT NETWORK (E39) THAT {NAME} WAS SIGNED UP WITH THE LONGEST (STOP DATE (E42mth, E42yr) - START DATE (E40mth, E40yr) OR INTERVIEW DATE {IDATE} - START DATE (E40mth, E40yr))

Next, I'm going to read you some statements about the individual work plan {you/NAME} developed with {{LONGEST} EMPLOYMENT NETWORK IN 2005}. An individual work plan, sometimes called an IWP, is the plan for the services and activities that {your/NAME's} Employment Network will provide. Please tell me if you strongly agree, agree, disagree, or strongly disagree with each statement.

PROBE: These plans are also sometimes called Individual Plans for Employment or IPEs.

		STRONGLY AGREE	AGREE	DISAGREE	STRONGLY DISAGREE	DON'T KNOW	REFUSED
a.	{You/NAME and (his/her) representative} helped develop {your/NAME's} individual work plan.	01	02	03	04	d	r
b.	{You/NAME and (his/her) representative} could choose the goals {you/NAME} wanted in {your/his/her} individual work plan	01	02	03	04	d	r
C.	The activities and services in {your/NAME's} work plan are likely to help {you/NAME} meet {your/his/her} work goals	01	02	03	04	d	r
d.	{{LONGEST} EMPLOYMENT NETWORK IN 2005} told {you/NAME and (his/her) representative} that {you/NAME} could change {your/his/her} Individual Work Plan if {you/he/she} wanted to	01	02	03	04	d	r

(S2=01and E37=01) OR ((S2=02 or S2=04) and PREV PART=0) and H1=01 and H2=01

H35. **PROGRAMMER:** IF MORE THAN ONE EMPLOYMENT NETWORK (E38>1), FILL NAME OF EMPLOYMENT NETWORK ((E39) THAT {NAME} WAS SIGNED UP WITH THE LONGEST (STOP DATE (E42mth, E42yr) – START DATE (E40mth, E40yr) OR INTERVIEW DATE {IDATE} - START DATE (E40mth, E40yr))

Why did {you/NAME or (his/her) representative} choose {{LONGEST} EMPLOYMENT NETWORK IN 2005}?

INTERVIEWER: CODE ALL THAT APPLY.

STAFF WERE MOST RESPONSIVE/COURTEOUS/KNOWLEDGEABLE	01	(H35a)
MOST WILLING TO PROVIDE THE SERVICES {NAME} WANTED	02	(H35a)
SERVED PEOPLE WITH {NAME'S} DISABILITY/NEEDS	03	(H35a)
WAIT FOR SERVICES WAS NOT TOO LONG	04	(H35a)
ONLY PROVIDER NEARBY/CLOSEST PROVIDER	05	(H35a)
ONLY PROVIDER WILLING TO ACCEPT TICKET	06	(H35a)
OTHER	07	(H35_Other)
DON'T KNOW	d	(H35a)
REFUSED	r	(H35a)

(S2=01 and E37=01) OR ((S2=02 or S2=04) and $PREV_PART=0)$ and H1=01 and H2=01 and H35=07 H35_Other. What Other reason?

OPEN:	>	
	DON'T KNOW	d
	REFUSED	r

PROGRAM EXPERIENCES OF ALL PARTICIPANTS IN 2005

 $(S2=01 \text{ and } E37=01) \text{ OR } ((S2=02 \text{ or } S2=04) \text{ and } PREV_PART=0) \text{ and } (H1=01 \text{ or } H1=00)$

H35a. CHECK: DID {NAME} ANSWER DON'T KNOW OR REFUSE TO E40mth, E40yr OR E42mth, E42yr FOR ANY EMPLOYMENT NETWORK IN 2005 (IF S2=01,02,or 03 and E40mth=d,r or E40yr=d,r or E42mth=d, or E42yr=d,r FOR ANYEMPLOYMENT NETWORK IN 2005) OR (IF S2=02, ALSO CHECK (ROUND2 E40MTH =d,r

ROUND2 E40YR =d,r, ROUND2 E42MTH =d,r, ROUND2 E42YR =d,r, ROUND2 E47MTH=d,r, ROUND2 E47YR=d,r) FOR EN FILLED IN QUESTION E37a)?

YES	01	
NO	00	(H36)

(S2=01and E37=01) OR ((S2=02 or S2=04) and PREV PART=0) and (H1=01 or H1=00) and H35a=01

H35b. Earlier you said that you were signed up with the following Employment Networks in 2005 {IF S2=01,04 LIST EN'S FROM E39 BUT IF S2=02 LIST EN'S FROM E39 AND LIST 2005 EN THAT WAS FILLED IN QUESTION E37a}.

In2004, which of these employment networks were you signed up with the longest?

PROBE: Your best estimate is fine.

PROGRAMMER: ALLOW INTERVIEWER TO CHECK ONE EMPLOYMENT NETWORK. THIS EMPLOYMENT NETWORK SHOULD BE USED AS THE LONGEST EMPLOYMENT

NETWORK IN 2005 FOR QUESTIONS H36, H37, H40, H41, H42.

(S2=01and E37=01) OR ((S2=02 or S2=04) and PREV PART=0) and (H1=01 or H1=00)

H36. **PROGRAMMER:** (IF S2=01,04 and E38>1) OR (IF S2=02 and E37a=01 and E37b=01) OR (IF S2=02 and E38>1), FILL NAME OF 2005 EMPLOYMENT NETWORK (IF S2=01,04 THIS IS FROM E39 BUT IF S2=02 THIS IS FROM E39 OR EN THAT WAS FILLED IN QUESTION E37a) THAT {NAME} WAS SIGNED UP WITH THE LONGEST IN 2005.

IF MORE THAN ONE EMPLOYMENT NETWORK IN 2005 AND S2=01 OR 03, OR THEN CALCULATE TIME WITH EACH EN DURING 2005 ONLY. IF TWO ENS HAVE SAME LENGTH, USE EN SIGNED UP WITH MOST RECENTLY (LATEST END MONTH IN 2005).

IF (S2=01 OR 03 AND E37=01 AND E41=00) OR (S2=02 AND WAS NOT SIGNED UP WITH EN AT ROUND 1, AND E37=01 AND E41=00) THEN USE (STOP DATE (E42mth, E42yr) –START DATE (E40mth, E40yr)).

IF S2=01 OR 03 AND E37=01 AND E41=01 THEN USE ((12, 2005) - START DATE (E40mth, E40yr)).

IF S2=01 OR 03 AND STOP DATE (E42mth, E42yr) OR START DATE (E40mth, E40yr) ARE MISSING OR STOP DATES<2005, USE FILL AT H33b or H35b.

IF S2=02 AND E37a=01 USE EN FILLED IN QUESTION E37a (ROUND 1 EN).

IF S2=02 AND E37a=00 INCLUDE ROUND 1 EN IS CALCULATION AND COMPARE TO ENS LISTED IN E39. USE (STOP DATE (E37amth, E37ayr) –START DATE FROM ROUND 1(ENSTMTH, ENSTYR)) AND (STOP DATE (E42mth, E42yr) –START DATE (E40mth, E40yr)) OR ((12, 2005) - START DATE (E40mth, E40yr)) IF CURRENTLY SIGNED UP WITH AN EN (E41=01). IF NO EN IN E39, USE ROUND 1 EN FILLED IN QUESTION E37A.

IF S2=02 AND E37=01 AND E41=00 THEN USE (STOP DATE (E42mth, E42yr) -START DATE (E40mth, E40yr))

IF S2=02 AND STOP DATE (E42mth, E42yr) OR START DATE (E40mth, E40yr) IS MISSING OR STOP DATES<2005, LENGTH=DK, USE FILL AT H33b or H35b)

IF S2=02 AND E37=01 AND E41=01 THEN USE ((12, 2005) - START DATE (E40mth, E40yr)).

PROGRAMMER: IF H1=00, USE QUESTION BELOW

PROGRAMMER: IF (IF S2=01,04 and E38>1) OR (IF S2=02 and E37a=01 and E37b=01) OR (IF S2=02

and E38>1) USE "THE LONGEST"

Now I'm going to focus on the services {you/NAME} received from the Employment Network {you were/NAME was} with {the longest} in 2005, {{LONGEST} EMPLOYMENT NETWORK IN 2005}. For each of the following statements about {{LONGEST} EMPLOYMENT NETWORK IN 2005}, please tell me if you strongly agree, agree, disagree, or strongly disagree. If the statement does not apply just say so.

PROGRAMMER: OTHERWISE USE

For each of the following statements about {{LONGEST} EMPLOYMENT NETWORK IN 2005} in 2005, please tell me if you strongly agree, agree, disagree, or strongly disagree.

		STRONGLY AGREE	AGREE	DISAGREE	STRONGLY DISAGREE	DON'T KNOW	REF- USED	DOES NOT APPLY
a.	Staff were courteous.	01	02	03	04	d	r	na
b.	Staff were able to answer {your/NAME'S} questions	01	02	03	04	d	r	na
C.	Staff listened to {your/NAME's} opinions and concerns.	01	02	03	04	d	r	na
d.	{{LONGEST} EMPLOYMENT NETWORK IN 2005} responded to {your/NAME's} requests for changes to {your/his/her} Individual Work Plan.							
	PROBE: An individual work plan is sometimes called an IWP	01	02	03	04	d	r	na
e.	{{LONGEST} EMPLOYMENT NETWORK IN 2005} offered all the services {you/NAME} needed to meet {your/his/her} work goals	01	02	03	04	d	r	na
f.	The services provided were those included in {your/NAME'S} Individual Work Plan							
	PROBE: An individual work plan is sometimes called an IWP	01	02	03	04	d	r	na
g.	The services provided were available when {you/NAME} needed them	01	02	03	04	d	r	na
h.	Overall, the services provided helped {you/NAME} meet {your/his/her} work goals	01	02	03	04	d	r	na

 $(S2=01 and \ E37=01) \ OR \ ((S2=02 \ or \ S2=04) \ and \ PREV_PART=0) \ and \ (H1=01 \ or \ H1=00)$

H37. During 2005, did {you/NAME} have any problems with the services {you/he/she} received from {{LONGEST} EMPLOYMENT NETWORK IN 2005}?

YES	01	
NO	00	(H39)
DON'T KNOW	d	(H39)
REFUSED	r	(H39)

(S2=01 and E37=01) OR ((S2=02 or S2=04) and PREV_PART=0) and (H1=01 or H1=00) and H37=01 H38. What problems did $\{you/NAME\}$ have during 2005?

INTERVIEWER: ENTER VERBATIM RESPONSE

<open></open>	
DON'T KNOW	d
REFUSED	r

(S2=01a H39.	and E37=01) OR ((S2=02 or S2=04) and PREV_PART=0) and (H1=01 or H1=00) CHECK: DID {NAME} WORK IN 2005 (B30 =01)?	
	YES	01
	NO	
	110	00 (1141)
(S2=01a	nd E37=01) OR ((S2=02 or S2=04) and PREV PART=0) and (H1=01 or H1=00) and H39=	=01
H40.	You told me earlier that {you/NAME} worked at a job during 2005. How much di {{LONGEST} EMPLOYMENT NETWORK IN 2005} help {you/NAME) to get {you/he/she} had in 2005? Would you say the services:	d the services provided by
	Helped a lot,	01
	Helped somewhat,	
	Helped very little, or	
	Didn't help at all?	
	JOB ENDED BEFORE SERVICES STARTED 05	
	DON'T KNOW	d
	REFUSED	r
(S2=01a H41.	and E37=01) OR ((S2=02 or S2=04) and PREV_PART=0) and (H1=01 or H1=00) In 2005, {were you/was NAME} ever pressured by {{LONGEST} EMPLOYMENT to take a job {you/he/she} did not want?	NETWORK IN 2005} staff
	YES	04
	NO	
	DON'T KNOW	
	REFUSED	r
(S2=01a H42.	and E37=01) OR ((S2=02 or S2=04) and PREV_PART=0) and (H1=01 or H1=00) In 2005, {were you/was NAME} ever pressured by {{LONGEST} EMPLOYMENT to work more hours than {you/he/she} wanted?	NETWORK IN 2005} staff
	YES	01
	NO	
	DON'T KNOW	
	REFUSED	
(S2=01a H43.	and E37=01) OR ((S2=02 or S2=04) and PREV_PART=0) and (H1=01 or H1=00) Since {you/NAME} started participating in the Ticket to Work program, how such have/he/she has} been in reaching {your/his/her} work goals? Would you say:	ccessful do you think {you
	Very successful,	01
	Somewhat successful,	
	Not very successful, or	
	Not at all successful?	
	DON'T KNOW	d
	REFUSED	r
(S2=01a H44.	and E37=01) OR ((S2=02 or S2=04) and PREV_PART=0) and (H1=01 or H1=00) CHECK: IS {NAME} A PROXY RESPONDENT (RTYPE=02)?	
	YES	01 (H46)
	A10	00

(S2=0) H45.	, , , , , , , , , , , , , , , , , , , ,	2=02 or S2=04) and PREV_PART=0) and (HT=01 or HT=00) AND RT isfied are you with the Ticket to Work program? Would you say:	YPE	=02
		Very satisfied,	Ω1	
		Somewhat satisfied,		
		Not very satisfied, or		
		Not at all satisfied?		
		DON'T KNOW		
		REFUSED		
PROE	BLEMS WITH EMPL	OYMENT NETWORKS		
(S2=0	land E37=01) OR ((S	2=02 or S2=04) and PREV PART=0) and (H1=01 or H1=00)		
H46.	These next que	stions are about any problems {you/NAME} might have had	with	the State VR agency
		r an Employment Network. During2005, did {you/NAME} have an Employment Network?	ny p	roblems with the State
		YES		
		NO		\ /
		DON'T KNOW		
		REFUSED	r	(11)
(S2=0) H47.		2=02 or S2=04) and PREV_PART=0) and (H1=01 or H1=00) AND H4 with the State VR agency, another Employment Network, or both		
		STATE VR AGENCY	01	
		EMPLOYMENT NETWORK	02	
		BOTH		
		DON'T KNOW		
		REFUSED	r	
(S2=0) H48.	1and E37=01) OR ((S What was the pr	2=02 or S2=04) and PREV_PART=0) and (H1=01 or H1=00) AND H4 oblem about?	6=01	ſ
	INTERVIEWER:	ENTER VERBATIM RESPONSE		
	<open></open>			
		DON'T KNOW	d	
		REFUSED	r	
(S2=0) H49.	, , , , , , , , , , , , , , , , , , , ,	2=02 or S2=04) and PREV_PART=0) and (H1=01 or H1=00) AND H4 or anyone else do anything to try to solve the problem?	6=01	ſ
		YES	01	
		NO		(H60)
		DON'T KNOW	d	(H60)
		REFUSED	r	(H60)

(S2=01 and E37=01) OR $((S2=02 \text{ or } S2=04) \text{ and } PREV_PART=0)$ and (H1=01 or H1=00) AND H46=01 and H49=01 H50. What did $\{you/NAME\}$ or someone else do to try to solve the problem?

PROBE: Anything else?

INTERVIEWER: CODE ALL THAT APPLY.

REFERRED TO DOCUMENTS/INFORMATION ABOUT		
PROVIDER/PROGRAM	01	(H51)
CONTACTED EN BY PHONE	02	(H51)
CONTACTED EN IN WRITING	03	(H51)
CONTACTED MAXIMUS BY PHONE	04	(H51)
CONTACTED MAXIMUS BY WRITING	05	(H51)
CONTACTED SSA BY PHONE	06	(H51)
CONTACTED SSA IN WRITING	07	(H51)
CONTACTED OTHER STATE/LOCAL AGENCY	80	(H51)
CONTACTED (LOCAL PROTECTION & ADVOCACY		
AGENCY} FOR HELP	09	(H54)
CONTACTED CASE WORKER/JOB COACH	10	(H51)
OTHER	11	(H50_other)
DON'T KNOW	d	(H51)
REFUSED	r	(H51)

 $(S2=01 \text{ and } E37=01) \text{ OR } ((S2=02 \text{ or } S2=04) \text{ and } PREV_PART=0) \text{ and } (H1=01 \text{ or } H1=00) \text{ AND } H46=01 \text{ and } H49=01 \text{ and } H50=11$

H50_Other. What else did you do?

OPEN:	>		
	DON'T KNOW	d	
	REFUSED	r	

 $(S2=01 \text{ and } E37=01) \text{ OR } ((S2=02 \text{ or } S2=04) \text{ and } PREV_PART=0) \text{ and } (H1=01 \text{ or } H1=00) \text{ AND } H46=01 \text{ and } H49=01 \text{ and } (H50=01-08 \text{ or } 10,11,d,r)$

H51. Did {you/NAME or (his/her) representative} ever receive information from any source about where to get help solving problems with an employment network or state VR agency?

YES	01
NO	00 (H53)
DON'T KNOW	d (H53)
REFUSED	r (H53)

9/7/06

(S2=01 and E37=01) OR $((S2=02 \text{ or } S2=04) \text{ and } PREV_PART=0)$ and (H1=01 or H1=00) AND (H46=01 and H49=01 and (H50=01-08 or 10,11,d,r and H51=01)

H52. From whom did {you/NAME} get this information?

INTERVIEWER: CODE ALL THAT APPLY.

STATE VOCATIONAL REHABILITATION AGENCY OR		
{VRNAME}	01	(H53)
EMPLOYMENT NETWORK	02	(H53)
MAXIMUS	03	(H53)
PROTECTION AND ADVOCACY AGENCY(LOCALPAA)	04	(H53)
BENEFITS PLANNING AND ASSISTANCE ORGANIZATION		
(BPAO)	05	(H53)
SOCIAL SECURITY ADMINISTRATION	06	(H53)
OTHER	07	(H52_Other)
DON'T KNOW	d	(H53)
REFUSED	r	(H53)

 $(S2=01 \text{and } E37=01) \ OR \ ((S2=02 \ \text{or } S2=04) \ \text{and } PREV_PART=0) \ \text{and } (H1=01 \ \text{or } H1=00) \ \text{AND} \ (H46=01 \ \text{and } H49=01 \ \text{and} \ (H50=01-08 \ \text{or } 10,11,d,r) \ \text{and } H51=01 \ \text{and } H52=07$

H52_Other. From whom did you get this information?

<open:< th=""><th>></th><th></th></open:<>	>	
	DON'T KNOW	d
	REFUSED	r

 $(S2=01 \text{ and } E37=01) \text{ OR } ((S2=02 \text{ or } S2=04) \text{ and } PREV_PART=0) \text{ and } (H1=01 \text{ or } H1=00) \text{ AND } (H46=01 \text{ and } H49=01 \text{ and } (H50=01-08 \text{ or } 10,11,d,r))$

H53. Did {you/NAME} ever contact the local protection and advocacy agency in {your/NAME's} area, called {LOCALPAA}, for help?

PROBE: Social Security funds certain agencies to help beneficiaries when they are having problems with employment networks or the state VR agency. These are called Protection and Advocacy agencies. The agency in your area is called {LOCALPAA}.

YES	01	
NO	00	(H56)
DON'T KNOW	d	(H56)
REFUSED	r	(H56)

 $(S2=01 \text{and } E37=01) \ OR \ ((S2=02 \ \text{or} \ S2=04) \ \text{and} \ PREV_PART=0) \ \text{and} \ (H1=01 \ \text{or} \ H1=00) \ AND \ H46=01 \ \text{and} \ H49=01 \ \text{and} \ (H50=09 \ \text{or} \ H53=01)$

H54. When {you/NAME or (his/her) representative} tried to get help from {LOCALPAA}, how easy was it to get in touch with someone? Was it:

Very easy,	01
Somewhat easy,	02
Not very easy, or	03
Not at all easy?	
DON'T KNOW	d
REFUSED	r

9/7/06 H-19 NBS ROUND 3 INSTRUMENT

(S2=01and E37=01) OR ((S2=02 or S2=04) and PREV_PART=0) and (H1=01 or H1=00) AND (H46=01 and H49=01 and (H50=09 or H53=01)

H55. **PROGRAMMER:** IF H47 = 01, USE "STATE VR AGENCY", IF H47=02, USE "EMPLOYMENT NETWORK", IF H47=03, USE "STATE VR AGENCY AND THE EMPLOYMENT NETWORK", IF H47=DK OR RF USE "STATE VR AGENCY OR EMPLOYMENT NETWORK"

How helpful was {LOCALPAA} in helping {you/NAME or (his/her) representative} solve the problem with the {State VR Agency/Employment Network/State VR Agency and the Employment Network}? Were they:

Very helpful,	01
Somewhat helpful,	02
Not very helpful, or	03
Not at all helpful?	04
DON'T KNOW	d
REFUSED	r

H47=DK OR RF as "STATE VR AGENCY OR EMPLOYMENT NETWORK"

(S2=01 and E37=01) OR ((S2=02 or S2=04) and PREV_PART=0) and (H1=01 or H1=00) ANDH46=01 and H49=01 H56. Has the problem been solved yet?

 NO
 00 (H59)

 DON'T KNOW
 d (H59)

 REFUSED
 r (H59)

(S2=01 and E37=01) OR $((S2=02 \text{ or } S2=04) \text{ and } PREV_PART=0)$ and (H1=01 or H1=00) AND H46=01 and H49=01 and H56=01

H57. CHECK: IS {NAME} A PROXY RESPONDENT (RTYPE=02)?

PROGRAMMER: IF H56=00,d,r THEN SKIP TO H59.

 $(S2=01 \text{ and } E37=01) \text{ OR } ((S2=02 \text{ or } S2=04) \text{ and } PREV_PART=0) \text{ and } (H1=01 \text{ or } H1=00) \text{ AND } H46=01 \text{ and } H49=01 \text{ and } H56=01 \text{ and } H57=00$

H58. How satisfied are you with how the problem was solved? Are you:

Very satisfied,	01
Somewhat satisfied,	02
Not very satisfied, or	03
Not at all satisfied?	04
DON'T KNOW	d
REFUSED	r

9/7/06

 $(S2=01 \text{ and } E37=01) \text{ OR } ((S2=02 \text{ or } S2=04) \text{ and } PREV_PART=0) \text{ and } (H1=01 \text{ or } H1=00) \text{ AND } H46=01 \text{ and } H49=01 \text{ and } H57=00$

H59. **PROGRAMMER:** IF H47 = 01, USE "STATE VR AGENCY", IF H47=02, USE "EMPLOYMENT NETWORK", IF H47=03, USE "STATE VR AGENCY AND THE EMPLOYMENT NETWORK", IF H47=DK OR RF USE "STATE VR AGENCY OR EMPLOYMENT NETWORK"

Overall, how satisfied are you with the helpfulness of the {State VR Agency/Employment Network/State VR Agency and the Employment Network} in trying to solve this problem? Are you:

01
02
03
04
d
r

GO TO 11

 $(S2=01 \text{ and } E37=01) \text{ OR } ((S2=02 \text{ or } S2=04) \text{ and } PREV_PART=0) \text{ and } (H1=01 \text{ or } H1=00) \text{ AND } H46=01 \text{ and } H49=00,d,r$ H60. Why didn't {you/NAME or (his/her) representative} do anything to try to solve the problem?

INTERVIEWER: CODE ALL THAT APPLY.

PROBLEM SOLVED ITSELF	01	(H61)
WAS NOT WORTH THE BOTHER		
DID NOT KNOW WHAT TO DO	03	(H61)
HAS NOT HAD TIME TO TAKE ACTION YET	04	(H61)
WAS AFRAID OF GETTING IN TROUBLE WITH		
EMPLOYMENT NETWORK	05	(H61)
DID NOT THINK IT WOULD DO ANY GOOD	06	(H61)
CHANGED EMPLOYMENT NETWORK BEFORE PROBLEM		
WAS ADDRESSED	07	(H61)
LEFT TICKET PROGRAM BEFORE PROBLEM WAS		
ADDRESSED	80	(H61)
OTHER	09	(H60_Other)
DON'T KNOW	d	(H61)
REFUSED	r	(H61)

 $(S2=01 \text{ and } E37=01) \text{ OR } ((S2=02 \text{ or } S2=04) \text{ and } PREV_PART=0) \text{ and } (H1=01 \text{ or } H1=00) \text{ AND } H46=01 \text{ and } H49=00,d,r \text{ and } H60=09$

H60_Other. What Other reason?

<open></open>		
	DON'T KNOW	d
	REFUSED	r

 $(S2=01 \text{ and } E37=01) \text{ OR } ((S2=02 \text{ or } S2=04) \text{ and } PREV_PART=0) \text{ and } (H1=01 \text{ or } H1=00) \text{ AND } H46=01 \text{ and } H49=00, d, r \\ \text{H61.} \qquad \textbf{PROGRAMMER: } \text{IF } \text{H47} = 01, \text{ USE "STATE VR AGENCY", IF } \text{H47} = 02, \text{ USE "EMPLOYMENT NETWORK", } \\ \text{IF } \text{H47} = 03, \text{ USE "STATE VR AGENCY AND } \text{THE EMPLOYMENT NETWORK"}$

Did {you/NAME or (his/her) representative} ever receive any information about how to get help solving problems with the {State VR Agency/Employment Network/State VR Agency and the Employment Network}?

YES	01
NO	00
DON'T KNOW	d
REFUSED	r

SECTION I: HEALTH AND FUNCTIONAL STATUS

GENERAL HEALTH STATUS

(All) I1.	The next questions are about {your/NAME's} health.	
	Overall, how would you rate {your/NAME's} health during the past 4 weeks?	
	Excellent,	02 03 04
	Very poor	d
(All) I2.	During the past 4 weeks, how much did physical health problems limit {you activities (such as walking or climbing stairs?)	ır/NAME's} usual physical
	Not at all, Very little, Somewhat, Quite a lot, or. Could {you/he/she} not do physical activities? DON'T KNOW REFUSED	02 03 04 05 d
(All) I3.	During the past 4 weeks, how much difficulty did {you/NAME} have doing {your/home and away from home, because of {your/his/her} physical health?	his/her} daily work, both at
	None at all, A little bit, Some, Quite a lot, or. Could {you/he/she} not do daily work? DON'T KNOW REFUSED	02 03 04 05 d
(All) 14.	How much bodily pain {have you/has NAME} had in the past 4 weeks?	
	None, Very mild, Mild, Moderate, Severe, or Very severe? DON'T KNOW	02 03 04 05 06

REFUSEDr

(All) I5.	During the past 4 weeks, how much energy did {you/NAME} have?	
	Very much,	01
	Quite a lot,	
	Some,	
	A little, or	
	None?	
	DON'T KNOW	
	REFUSED	
	KEI OOLD	r
(All) I6.	During the past 4 weeks, how much did (vour/NAME's) physical health or	omational problems limi
10.	During the past 4 weeks, how much did {your/NAME's} physical health or {your/his/her} usual social activities with family or friends?	emotional problems iimi
	Notatall	04
	Not at all,	
	Very little,	
	Somewhat,	
	Quite a lot, or	
	Could {you/he/she} not do social activities? DON'T KNOW	
	REFUSED	
	KEFUSED	r
(All) 17.	During the past 4 weeks, how much {have you/has NAME} been bothered by er feeling anxious, depressed or irritable?)	motional problems (such as
	Not at all,	01
	Slightly,	
	Moderately,	
	Quite a lot, or	
	Extremely?	
	DON'T KNOW	
	REFUSED	
(All)		
l8.	During the past 4 weeks, how much did personal or emotional problems kee {your/his/her} usual work, school or other daily activities?	ep {you/NAME} from doing
	Not at all,	01
	Very little,	
	Somewhat,	03
	Quite a lot, or	
	Could {you/he/she} not do daily activities?	05
	DON'T KNOW	d

(All) 19.	Compared to {THIS MO	NTH, LAST YEAR}, how would you rate {your/NAME's} he	ealth in general now?
	Much	better now,	01
		what better now,	
		t the same,	
		what worse now, or	
		worse now?	
	DON"	T KNOW	d
	REFU	JSED	r
(All) I10.	{Do you/Does NAME} ta	ake any prescription medications for any ongoing physical	health conditions?
	PROBE: Please do not	include over the counter medication such as cold or heada	ache medication.
	YES		01
			-
		T KNOW	
		JSED	
(All) I11.	{Do vou/Does NAME} ta	ake any prescription medications for any ongoing mental o	r emotional conditions?
	, . , ,		
	YES.		01
	NO		00
	DON"	T KNOW	d
	REFU	JSED	r
(All) I12.	Since {THIS MONTH, L condition at a hospital, o	AST YEAR}, {have you/has NAME} received any treatmer clinic, or doctor's office?	nt for a mental or emotional
	PROBE: Do not include	e medications.	
	YES		01 (117a)
		T KNOW	d (I17a)
		ISED	
ADL, IA	DL, AND FUNCTIONAL	LIMITATIONS	
(All)			
I17a. Now I'd like to ask you some questions about everyday activities and how much difficulty {you I has}			difficulty {you have/NAME
	doing these activities. Our study requires that all beneficiaries be asked these questions. Please give me your best answer even if the questions don't seem to apply to {you/NAME}.		
	{Do you/Does NAME} e	ver wear glasses or contact lenses?	
	YES		01
		T KNOW	` '
		JSED	

(117a=0)	1,d,r)			
l17b.	{Do you/Does NAME} have any difficulty seeing words and letters in ordinary new {your/his/her} glasses or contact lenses?	wsprint even when wearing		
	YES NO	00 d	` '	
(I17a=ar I18.	nswer and I17b=d,r) {Do you/Does NAME} have any difficulty seeing words and letters in ordinary news	sprir	nt?	
	YES	00 d	(121)	
(I17b=0 I19.	1,d,r and I18=01,d,r){Do you/Does NAME} use any devices, special equipment, or other special assis seeing, such as telescopic lenses, adapted computer equipment, Braille, a guide of the computer equipment.		-	
	PROBE: Do not include glasses or contact lenses.			
	YESDON'T KNOWREFUSED	00 d	(I21)	
(I17b=0 I20.	1,d,r and I18=01,d,r and I19=01) What devices, equipment, or other types of assistance {do you/does NAME} use?			
	PROBE: Anything else?			
	INTERVIEWER: CODE ALL THAT APPLY.			
	TELESCOPIC LENSES	02 03 04 05 06 07 d	(I21) (I21) (I21) (I21) (I21)	
*	1,d,r and I18=01,d,r and I19=01 and I20=07) ner. What other seeing assistance?			
<	OPEN>			
	DON'T KNOWREFUSED			

(All) I21 .	{Do you/Does NAME} have any difficulty hearing normal conversation even {you/he/she} usually wear{s} one?	if u	ising a hearing aid if
	YES	01	
	NO		(125)
	DON'T KNOW	d	,
	REFUSED	r	
(I21=01	,d,r)		
l22.	{Are you/Is NAME} able to hear what is said in normal conversation at all?		
	YES	01	
	NO	00	
	DON'T KNOW		
	REFUSED	r	
(I21=01			
123.	{Do you/Does NAME} use any devices, special equipment, or other special assist hearing? This includes a hearing aide, a phone amplifier, TTY or teletype, an assidevice, or an interpreter.		•
	YES	01	
	NO	00	(125)
	DON'T KNOW	d	(125)
	REFUSED	r	(125)
(I21=01 I24.	,d,r and I23=01) What devices, equipment, or other types of assistance {do you/does NAME} use?		
	PROBE: Anything else?		
	INTERVIEWER: CODE ALL THAT APPLY.		
	HEARING AIDE	01	(125)
	PHONE AMPLIFIER		. ,
	TDD		· · ·
	TYY OR TELETYPE	04	(125)
	CLOSED CAPTION TV	05	(125)
	ASSISTIVE LISTENING/SIGNALING DEVICE	06	(125)
	INTERPRETER	07	(125)
	OTHER HEARING ASSISTANCE		
	DON'T KNOW		(125)
	REFUSED	r	(I25)
	,d,r and I23=01 and I24=08) her. What other hearing assistance?		
<	:OPEN>		
	DON'T KNOW	d	
	REFUSED		
	1\L1 00LD		

		DON'T KNOWREFUSED	d r	
<	OPEN>			
	d,r and I27=01 and the difference of the differe			
(125=01	d r and 127=01 and	128=04)		
		REFUSED		(129)
		DON'T KNOW		(129)
		SIGN LANGUAGE INTERPRETER OTHER SPEECH ASSISTANCE		(128)
		VOICE AMPLIFIER		
		VOICE SYNTHESIZER		· ·
	INTERVIEWER:	CODE ALL THAT APPLY.		
	PROBE: Anythin	g else?		
l28.		quipment, or other types of assistance {do you/does NAME} use?		
(I25=01,	d,r and I27=01)			
		REFUSED	r	(I29)
		DON'T KNOW		(129)
		YES		(129)
	speaking or having	ng {your/his/her} speech understood, such as a voice synthesize		roice amplifier?
(I25=01, I27.		AME} use any devices, special equipment, or other special assis	stanc	e because of difficulty
		REFUSED		
		DON'T KNOW		
		YES		
	PROBE: This app	plies only to spoken speech and does not include sign language	spe	ech'.
(I25=01, I26.		E} able to have {your/his/her} speech understood at all?		
(125-01	4)	REFUSED	r	
		DON'T KNOW		. ,
		NO		(129)
		YES	01	
I25.	condition or prob	IAME} have any difficulty having {your/his/her} speech unders lem?	31000	because of a nealth
(All)	(Da/Daga N	IANAT) have any difficulty basing (value/hig/hag) and all value		

(All) 129.	{Do you/Does NAME} have any difficulty walking without assistance for a quarter of a mile or about 3 city blocks?				
	YES NO DON'T KNOW REFUSED	00 d	(133)		
(I29=01, I30.	$d,r\;)$ {Are you/Is NAME} able to walk a quarter of a mile without assistance at all?				
	YES NO DON'T KNOW REFUSED	00 d			
(I29=01, I31.	$d,\!r$) {Do you/Does NAME} use any devices, special equipment, or other special assistant	stano	ce because of difficulty		
	walking, such as a cane, walker, wheelchair, scooter, prosthetic device, or a personal value of the control of	onal	care attendant?		
	YES NO	00 d	. ,		
(I29=01, I32.	d,r and I31=01) What devices, equipment, or other types of assistance (do you/does NAME) use?				
	PROBE: Anything else?				
	INTERVIEWER: CODE ALL THAT APPLY.				
132_Oth	BRACES, CRUTCHES, CANE, OR WALKER	02 03 04 05 06 07 08 d	(I33) (I33) (I33) (I33) (I33) (I33)		
	DON'T KNOW	d			
	REFUSED				

(All) I33.	{Do you/Does NAME} have any difficulty climbing up 10 steps without resting?		
	YES NO DON'T KNOW REFUSED	00 d	(135)
(I33=0	I,d,r)		
I34.	{Are you/Is NAME} able to climb 10 steps at all?		
	YES NO DON'T KNOW REFUSED	00 d	
(All)			
I35.	{Do you/Does NAME} have any difficulty lifting and carrying something as heavy full bag of groceries?	y as	10 pounds, such as a
	YES NO DON'T KNOW REFUSED	00 d	(137)
(I35=0			
I36.	{Are you/Is NAME} able to lift and carry 10 pounds at all?		
	YES NO DON'T KNOW REFUSED	00 d	
(All) 137.	{Do you/Does NAME} have any difficulty using {your/his/her} hands and fingers to up a glass or grasping a pencil?	o do	things such as picking
	YES NO DON'T KNOW REFUSED	00 d	(139)
(137=0	l.d.r)		
I38.	{Are you/Is NAME} able to use {your/his/her} hands and fingers to grasp and han	dle	at all?
	YES NO DON'T KNOW	00	

(All)			
139.	{Do you/Does NAME} have any difficulty reaching over {your/his/her} head?		
	YES	Ω1	
		-	(144)
	NO		(141)
	DON'T KNOW	d	
	REFUSED	r	
(I39=01	1,d,r)		
140.	{Are you/Is NAME} able to reach over {your/his/her} head at all?		
	YES	01	
	NO	00	
	DON'T KNOW	d	
	REFUSED		
(All)			
l41.	{Do you/Does NAME} have any difficulty standing or being on {your/his/her} feet for	or or	ne hour
	YES	01	
	NO	00	(143)
	DON'T KNOW		(- /
	REFUSED		
(T41 01			
(I41=01			
142.	{Are you/Is NAME} able to stand on {your/his/her} feet at all?		
	YES	01	
	NO	00	
	DON'T KNOW	d	
	REFUSED	r	
(All)			
Ì43.	{Do you/Does NAME} have any difficulty stooping, crouching or kneeling?		
	YES	01	
	NO	00	(145)
	DON'T KNOW		, ,
	REFUSED	r	
(143=01	1 4 m		
(143–01 144.	{Are you/Is NAME} able to stoop, crouch, or kneel at all?		
	VEO	0.4	
	YES		
	NO	00	
	DON'T KNOW	d	
	REFUSED	r	
(All)			
145.	{Do you/Does NAME} have any difficulty getting around inside {your/his/her} home	e?	
	YES	01	
	NO	00	(147)
	DON'T KNOW		. ,
	REFUSED	r	

(145=0)	1,d,r)				
l46.		NAME} need the help	o of another person in order to get around insid	de {y	our/his/her} home?
		VES		Ω1	
		REFUSED		r	
(All) I47 .	{Do you/Does	NAME} have any diffi	iculty getting around outside {your/his/her} ho	me,	for example to shop of
	visit a doctor's	s office?			
		YES		01	
					(149)
					(* * * *)
(I47=0	1,d,r)				
l48.	{Do you/Does	NAME} need the help	of another person in order to get around outs	ide ·	(your/his/her) home?
		YES		01	
		NO		00	
		-			
				-	
		KEI OOLD		'	
(All) 149.	{Do vou/Does	NAME} have anv diffi	culty getting into and out of bed or a chair?		
	. ,	, ,	, ,		
		YES		01	
		NO		00	(I51)
					,
		REFUSED			
(149=0	1 d r)				
150.		NAME} need the help	o of another person in order to get into and out	of b	ed or a chair?
		YES		01	
		KEFUSED		r	
(All)					
l51.	{Do you/Does	NAME} have any diffi	culty bathing or dressing?		
		YES		01	
		NO		00	(153)
		DON'T KNOW		d	
(I51=0	1,d,r)				
152.		NAME} need the help	o of another person in order to bathe or dress?	•	
		YES		01	
		NO		00	
		_			
		DEELIGED		r	

SECTION I UNIVERSE: ALL VARIABLES FROM OTHER SECTIONS: NONE PRELOADED INFORMATION: THIS MONTH, LAST YEAR

(All) I53.	{Do you/Does NAME} have any difficulty shopping for personal items, s	such as toilet ite	ems or medicine?
	YES	00	(155)
	DON'T KNOW REFUSED		
(I53=0) I54.	$01,d,r)$ {Do you/Does NAME} need the help of another person in order to shop	o for personal ite	ems?
		-	
	YES	_	
	DON'T KNOW		
	REFUSED		
(All) 155.	{Do you/Does NAME} have any difficulty preparing {your/his/her} own r	meals?	
	YES	01	
	NO	00	(157)
	DON'T KNOW	d	
	REFUSED	r	
(I55=0) I56.	$01,d,r)$ {Do you/Does NAME} need the help of another person in order to prep	are {your/his/he	r} meals?
	YES	_	
	NO		
	DON'T KNOW REFUSED		
(All) I57.	{Do you/Does NAME} have any difficulty eating? PROBE: This includes difficulty chewing, swallowing, or using utensils.		
	YES	01	
	NO		(159)
	DON'T KNOW	d	,
	REFUSED	r	
(I57=0	01,d,r)		
158.	{Do you/Does NAME} need the help of another person in order to eat?		
	YES	• • • • • • • • • • • • • • • • • • • •	
	NO		
	DON'T KNOW		
	REFUSED	r	
(All) 159.	{Do you/Does NAME} have a lot of trouble concentrating long enough	to finish everyda	ay tasks?
	YES	01	
	NO	_	
	DON'T KNOW	d	
	REFUSED	r	

(All) 160.	{Do you/Does i	NAME} have a lot of tro	uble coping with day-to-day s	tresses?	
		YES		01	
		NO		00	
		DON'T KNOW		d	
		REFUSED		r	
(All)					
l61.	{Do you/Does friendships?	NAME} have a lot o	f trouble getting along with	other people an	d making or keeping
		YES		01	
		DON'T KNOW		d	
		REFUSED		r	
ALCOH	OL ABUSE				
(A 11)					
(All)	Those post au	aatiama ama ahawt (waw	"/NIANIE'a)a of clockel . [that wave analyses are
162.	-	***	r/NAME's} use of alcohol. If the drink alcohol at all, just say		ınat your answers are
	In the past 12 r drinking?	months, have {you/ frier	nds or family} ever felt {you/N.	AME} ought to cut	down on {your/his/her}
		YES		01	
			I DON'T DRINK		(172)
					(=)
(162=01	.00.d.r)				
Ì63.		months, have people an	noyed {you/NAME} by criticiz	ting {your/his/her} o	Irinking?
		YES		01	
		NO		00	
		IF VOLUNTEERED:	I DON'T DRINK	02	(172)
					,
		REFUSED		r	
(162=01	,00,d,r and I63=01	.00.d.r)			
164.			NAME} ever felt bad or guilty	about {your/his/hei	} drinking?
		YES		Ω1	
			I DON'T DRINK		(172)
					(11 4)
		שטוא ו הואטאי		a	

PRELOADED INFORMATION: THIS MONTH, LAST YEAR

(162 = 01	.00.0	d.r and	163 = 01.	.00.d.r	and I64=	=01.	.00.	.d.r

In the past 12 months, {have you/has NAME} ever had a drink first thing in the morning to steady {your/his/her} nerves, get rid of a hangover, or get the day started?

YES	01
NO	00
DON'T KNOW	d
REFUSED	r

(I62=01,00,d,r and I63=01,00,d,r and I64=01,00,d,r)

During the past 12 months, has {your/NAME's} doctor or another health professional advised {you/NAME} to stop using alcohol or recommended that {you/he/she} participate in a program to help {you/him/her} stop using alcohol?

YES	01
NO	00
DON'T KNOW	d
REFUSED	r

(I62=01,00,d,r and I63=01,00,d,r and I64=01,00,d,r)

167. During the past 12 months, {have you/has NAME} received treatment or counseling for {your/his/her} use of alcohol?

YES	01	(172)
NO	00	(172)
DON'T KNOW	d	(172)
REFUSED	r	(172)

DRUG ABUSE

(All)

172. The next questions are about the use of prescription and non-prescription drugs. I will be asking if {you have/NAME has} ever used these drugs on {your/his/her} own. By 'on {your/his/her} own' I mean using non-prescription drugs or using prescription drugs in a non-prescribed manner, such as using larger quantities than prescribed or for longer periods than prescribed. Examples of non-prescription drugs are marijuana or pot, speed, crack or cocaine, LSD, or Ecstasy.

During the past 12 months, {have you/has NAME} used drugs on {your/his/her} own more than 5 times?

PROBE: Have you used drugs to get high or used drugs without a prescription or in larger amounts than prescribed?

YES	01
NO	00 (J1)
DON'T KNOW	d (J1)
REFUSED	r (.l1)

(172=01)

During the past 12 months, did {you/NAME} find {you/he/she} needed larger amounts of these drugs to get an effect or that {you/he/she} could no longer get high on the amount {you/he/she} had used before?

YES	01
NO	00
DON'T KNOW	d
REFUSED	r

PRELOADED INFORMATION: THIS MONTH, LAST YEAR

(172=01) 174.	During the past 12 months, did {you/NAME} have emotional or physical problem as withdrawal symptoms, inability to work, feeling crazy, paranoid, depressed craving, or wanting to stop and being unable to?	
	YES	00 d
(172=01) 175.	During the past 12 months has {your/NAME's} doctor or another health profession stop using non-prescription drugs or recommended that {you/he/she} participation drugs or prescription drugs in a non-prescription drugs in a non-prescription drugs in a non-prescription drugs or prescription drugs in a non-prescription	ate in a program to help
	YES NO	00 d
(I72=01) I76.	During the past 12 months, {have you/has NAME} received treatment or counselinon-prescription drugs or of prescription drugs in a non-prescribed manner?	ng for {your/his/her} use of
	YES NO	

DON'T KNOW d REFUSEDr

SECTION J: HEALTH INSURANCE

(All) J1 .	Now, I'm going to ask you about different types of health insurance coverage {you/NAME} might have.
	{Are you/Is NAME} currently covered by Medicare?
	PROBE: Medicare is health insurance coverage provided nationally to certain disabled people under age 65 including Social Security Disability Insurance beneficiaries that have been receiving benefits for more than 24 months.
	YES
(All) J2.	PROGRAMMER: IF STATEMED IS EQUAL TO "MEDICAID" USE FOLLOWING TEXT: There is a program called Medicaid that pays for health care for persons in need. {Are you/Is NAME; currently covered by Medicaid?
	OTHERWISE USE: There is a program called Medicaid that pays for health care for persons in need. In {your/NAME'S} state you may also hear it called {STATEMED FROM {NAME'S} CURRENT STATE}. {Are you/Is NAME currently covered by Medicaid?
	PROBE: Medicaid is a state medical assistance program that serves low-income people and Social Security Income recipients with disabilities
	YES
(All) J4.	{Are you/Is NAME} currently covered by military health care, through Armed Forces retirement benefits, the VA, TRICARE, CHAMPUS, or CHAMP-VA?
	PROBE: TRICARE is a managed health care program for active duty and retired members of the uniformed services, their families and survivors. CHAMPUS is a health care program for dependents of active or retired military personnel. CHAMP-VA is health insurance for dependents or survivors of disabled veterans.
	YES

(All) J5.		E} currently covered by <u>private health insurance</u> , for example, s} through an employer, a family member, or that {you purchan?	
		YES NO	00 (J7) d (J7)
		REFUSED	r (J7)
(J5=01) J6.		AME} currently receive {your/his/her} private health insurance thurs/his/hers}, through a present or former employer of {your/hother source?	
	INTERVIEWER:	IF THE RESPONDENT SAYS THAT THEY OR SOMEONE FOR THEIR HEALTH INSURANCE, CODE 'PAID BY SELF/FAI	
		OWN EMPLOYER	02 (J7)
		<open> DON'T KNOW REFUSED</open>	d (J7)
*	and H6=04) er. What is the Oth	er Source?	
<(OPEN>		
		DON'T KNOW	
(All) J7.	CHECK: DOES {	NAME} HAVE ANY TYPE OF INSURANCE (J1=01 OR J2=01 O	R J4=01 OR J5=01)?
		YES	
(J7=00) J8.		(you do/NAME does) not currently have any health insurance spitals, doctors, and other health professionals. Is that correct?	coverage to help pay for
		YES	, ,
		NO	d (J10)

(J7=00 and J8=00)

J9.	What kinds of health insurance coverage	ldo	vou/does	NAME	have?
J9.	What kinds of health insulance coverage	լսပ	you/uoes	IN/\IVIL j	r nave:

PROBE: Any other kind?

INTERVIEWER: CODE ALL THAT APPLY.

MEDICAID/{STATEMED}	01	(J10)
MEDICARE	02	(J10)
CHAMPUS/CHAMP-VA, TRICARE, VA, OTHER MILITARY	03	(J10)
INDIAN HEALTH SERVICE	04	(J10)
MEDI-GAP	05	(J10)
STATE PROGRAM	06	(J10)
PRIVATE INSURANCE THROUGH OWN EMPLOYER	07	(J10)
PRIVATE INSURANCE THROUGH SPOUSE/PARTNER/PARENT	80	(J10)
PRIVATE INSURANCE PAID BY SELF/FAMILY	09	(J10)
OTHER PLAN (SPECIFY) < OPEN>	10	
DON'T KNOW	d	(J10)
REFUSED	r	(J10)

((J7=00 and J8=00 and J9=10)

J9_Other. What is the Other Plan?

<OPEN>_____

DON'T KNOW d
REFUSED r

(All)

J10. Now, I'd like you to think back to 2005. In 2005, {were you/was NAME} covered by any type of health insurance?

PROBE: Answer 'yes' if {you were/NAME was} covered for any part of the year.

YES	01	
NO	00	(K1)
DON'T KNOW	d	(K1)
REFUSED	r	(K1)

(J10=01)

J11. What kinds of health coverage did {you/NAME} have?

PROBE: Any other kind?

INTERVIEWER: CODE ALL THAT APPLY.

MEDICAID/{STATMED}	01	(K1)
MEDICARE	02	(K1)
CHAMPUS/CHAMP-VA, TRICARE, VA, OTHER MILITARY	03	(K1)
INDIAN HEALTH SERVICE	04	(K1)
MEDI-GAP	05	(K1)
STATE PROGRAM	06	(K1)
PRIVATE INSURANCE THROUGH OWN EMPLOYER	07	(K1)
PRIVATE INSURANCE THROUGH SPOUSE/PARTNER/PARENT	80	(K1)
PRIVATE INSURANCE PAID BY SELF/FAMILY	09	(K1)
OTHER PLAN (SPECIFY) < OPEN>	10	
DON'T KNOW	d	(K1)
REFUSED	r	(K1)

SECTION J UNIVERSE: ALL VARIABLES NEEDED FROM OTHER SECTIONS: RTYPE PRELOADED VARIABLES: STATEMED

(J10=01 and J11=10)		
J11_Other. What is the	ther plan?	
<open></open>		
	DON'T KNOW	d
	REFUSED	r

SECTION K: INCOME AND OTHER ASSISTANCE

(All) K1.	MONTH, THIS_Y answering these	questions is about income {you/NAME} received <u>last month</u> (EAR]. This includes earnings from work and benefits from questions, please think only about {your/NAME's} own earning benefits that other family members may have received.	different programs. When
		PRESS 1 TO CONTINUE	. 01
< 4.11\			
(All) K2 .	CHECK 1: IS {N	AME} CURRENTLY WORKING (B24=01)?	
		YES	. ,
/V2 04	`	NO	. 00 (K2CHECK3)
(K2=01 <i>K2CHE</i>	•		
	CHECK 2: DID {I	NAME} START AT LEAST ONE JOB PRIOR TO OR DURING TH THIS YEAR AND C4YR = <mark>2006)</mark> OR (C4YR < 2006)) <mark>?</mark>	G LAST MONTH ((C4MTH <
		YES	. 01 (K3)
		NO	, ,
	PROGRAMMER:	IF {NAME} IS CURRENLTY WORKING (B24=01) AND STAF MONTH THIS YEAR - (C4MTH > LAST MONTH THIS YEAR TO K2A	
) E} EVER WORKED (B36=01, D, OR R) OR (B22=01, D, OR R) ED MISSING (S2=02 or S2=04) and (B36=.)?	OR (B30=01, D, OR R) OF
		YES	, ,
(K2CHI K2A.	ECK2=00 and K2CH Did {you/NAME} v		
	,		
		YES	,
(K2CHI K3 .		01) ut the jobs {you/NAME} had last month, including all jobs {you last month, that is, in [INSERT LAST MONTH, THIS YEAR] be	
	INTERVIEWER:	ROUND TO NEAREST DOLLAR	
		\$, . 00 (0- 12,500) (0 - 40,000)	
		DON'T KNOW	. d
		REFUSED	

PRELOADED INFORMATION: LAST MONTH, THIS YEAR

(K2CHECK3=01 and K2A=01 and K3 > or = 0)

K3b. SOFT EDIT: LAST MONTH INCOME SHOULD BE WITHIN 30% OF TOTAL CURRENT MONTHLY PAY AS REPORTED IN SECTION C. IF K3 NE D OR R AND C_CURMNTHPAY NE D OR R, AND THE ABSOLUTE VALUE OF (K3 - C_CurMnthPay/ K3 >.30) AND THE ABSOLUTE VALUE OF (C_CurMnthPay - K3/ C_CurMnthPay >.30), TRIGGER EDIT, AND DISPLAY FOLLOWING TEXT: INTERVIEWER, LAST MONTH INCOME IS AT LEAST 30% HIGHER OR LOWER THAN AMOUNT REPORTED AS TOTAL MONTHLY PAY IN SECTON C. CHECK ENTRY. IF NECESSARY READ: I may have recorded an incorrect answer. Earlier we calculated that {you are/NAME is} currently paid about (C_CurMnthPay) on all jobs combined. Is this correct or should I change the amount {you/NAME} earned last month before taxes and other deductions?

CHANGE AMOUNT PAID BEFORE TAXES AND OTHER		
DEDUCTIONS	01	(CHANGE K3)
SUPPRESS	03	

(K2CHECK3=01 and K2A=01 and (K3 > or = 0 or d or r)

K3a. Including all jobs {you/NAME} had, how much was left last month, that is in [INSERT LAST MONTH, THIS YEAR], as take-home pay after taxes and other deductions?

INTERVIEWER: ROUND TO NEAREST DOLLAR

(K2CHECK3=01 and K2A=01 and K3 > or = 0 and K3a > 0)

K3b1. SOFT EDIT: AMOUNT OF TAKE-HOME PAY (K3a) MUST BE LESS THAN OR EQUAL TO AMOUNT PAID BEFORE TAXES AND OTHER DEDUCTIONS (K3). IF K3A NE D OR R AND K3 NE D OR R, AND K3A > K3, TRIGGER EDIT AND DISPLAY FOLLOWING TEXT: INTERVIEWER, TAKE HOME PAY IS GREATER THAN PRE-TAX PAY. CHECK ENTRY. IF NECESSARY READ: I must have recorded an incorrect answer. You said that {you are/NAME is} paid (K3) before taxes and other deductions and that (K3a) is left as take-home pay after taxes and other deductions. Based on what I recorded, your take home pay is more than your pre-tax pay. Should I change the amount {you are/NAME is} paid before taxes and other deductions?

OUANOE AMOUNT DAID DEFORE TAYED AND OTHER

CHANGE AMOUNT PAID BEFORE TAXES AND OTHER		
DEDUCTIONS	01	(CHANGE K3)
CHANGE AMOUNT OF TAKE-HOME PAY	02	(CHANGE K3a)
SUPPRESS	03	

(K2CHECK3=01 and K2A=01 and K3> or = 0 and K3a > 0)

K3b2. SOFT EDIT: IF K3 GREATER THAN 0, K3A SHOULD BE GREATER THAN 0. IF K3 >0 AND K3A =0, TRIGGER EDIT AND DISPLAY FOLLOWING TEXT: INTERVIEWER: AMOUNT OF TAKE HOME PAY=0, CHECK ENTRY. IF NECESSARY READ: I may have recorded an incorrect answer. I have recorded that you are paid (K3) before taxes and deductions but that your take home pay is 0. Should I change the amount {you are/NAME is} paid before taxes and other deductions or the amount {you take/NAME takes} home after taxes and other deductions?

CHANGE AMOUNT PAID BEFORE TAXES AND OTHER		
DEDUCTIONS	01	(CHANGE K3)
CHANGE AMOUNT OF TAKE-HOME PAY	02	(CHANGE K3a)
SUPPRESS	03	

PRELOADED INFORMATION: LAST MONTH, THIS YEAR

K3b3. SOFT EDIT: DIFFERENCE IN AMOUNT OF TAKE HOME PAY AND PRE-TAX PAY IS GREATER THAN 30%. IF AMOUNT OF TAKE HOME PAY (K3A) NE D OR R, AND AMOUNT OF PRE-TAX PAY (K3) NE D OR R, AND (K3 - K3A) / K3A > .30, TRIGGER EDIT AND DISPLAY FOLLOWING TEXT: INTERVIEWER, DIFFERENCE IN AMOUNT OF TAKE HOME PAY AND PRE-TAX PAY IS GREATER THAN 30%. CHECK

	ENTRY. IF NECESSARY READ: I may have recorded an incorrect is} paid (K3) before taxes and other deductions and that (K3A) is left deductions. Is this correct or should I change the amount {you are	as take- NAME	home paid	ay after ta before ta	xes and other	
	deductions or the amount {you take/NAME takes} home after taxes a	ind other	deducti	ons		
	CHANGE AMOUNT PAID BEFORE TAXES AND					
	DEDUCTIONS					
	CHANGE AMOUNT OF TAKE-HOME PAY SUPPRESS			•	iE K3a)	
(All)						
K4.	Thinking about the benefits {you/NAME} received <u>last month</u> , did Social Security?	{you/he/	she} red	ceive any	income from	
	INTERVIEWER: SHOULD INCLUDE ANY SSI AND SSDI PAYMEN	TS				
	YES		01			
	NO		00			
	DON'T KNOW					
	REFUSED		r			
(All)						
K5.	PROGRAMMER: IF {NAME} RECEIVED INCOME FROM ANY S THROUGH K10 IMMEDIATELY AFTER EACH 'YES'. OTHERWI INCOME IN K6.				•	
(All)						
K6.	Last month did {you/NAME} receive any income from					
		\/=0		DON'T	55511055	
	Drivete disability incurance (cometimes called lang	<u>YES</u>	<u>NO</u>	<u>KNOW</u>	REFUSED	
	a. Private disability insurance (sometimes called long- term_care disability insurance)?	01	00	d	r	
	b. Workers' compensation?	01	00	d d	r r	
	c. Veterans' benefits?	01	00	d	r	
	d. Public assistance or welfare payments?	01	00	d	r	
	e. Unemployment benefits?	01	00	d	r	
	f. Private pensions or government employee pensions?	01	00	d	r	
	g. Other sources on a regular basis but not from jobs or	٠.		-		
	Social Security?	01	00	d	r (K6 <u>g</u>	oth)
	h. Other sources not on a regular basis?	01	00	d	r (K6_h	
(K6 g=	01)					
	oth What were they?					
	INTERVIEWER: PLEASE SPECIFY					
	<open></open>					
	DON'T KNOW		d			

$(K6_h=01)$ $K6_h_oth$ What were	they?
INTERVIEW	ER: PLEASE SPECIFY
<op< td=""><td>PEN></td></op<>	PEN>
	DON'T KNOW d REFUSED r
(K6=01) K7. How much inc	come did {you/NAME} receive <u>last month</u> from {SOURCE FROM K6}?
INTERVIEWE	ER: ROUND TO NEAREST DOLLAR
	\$, . 00 (GO TO K6 FOR NEXT SOURCE OR K11) (1-1,000) (1-15,000)
	DON'T KNOW d REFUSED r
(K6=01 and K7=d,r) K8. Was it more t	han or less than \$300?
	\$300 OR MORE
(K6=01 and K7=d,r and K9. Was it more t	K8=01) han or less than \$500?
	\$500 OR MORE
	GO TO K6 FOR NEXT SOURCE OR K11.
(K6=01 and K7=d,r and K10. Was it more t	K8=02) han or less than \$150?
	\$150 OR MORE

GO TO K6 FOR NEXT SOURCE OR K11.

(All)	ADED INFORMATION: LAST MONTH, THIS YEAR		
K11.	Did {you/NAME} receive any food stamps <u>last month</u> ? Please include only received by {you/NAME} and {your/NAME's} family. Do not include food stamps remembers of [your/NAME's} household.		
	YES		
	NO DON'T KNOW		` '
	REFUSED		(K13)
(K11=0 K12.	V1) What was the dollar value of the food stamps {you/NAME} received <u>last month?</u>	PI	ease include only food
	stamps {you/NAME} received by {you/NAME} for {your/NAME's} family.		ouse morage cm, less
	INTERVIEWER: ROUND TO NEAREST DOLLAR		
	\$, . 00 (0-400) (0-950)		
	DON'T KNOW	d	
	REFUSED	r	
(All) K13.	Did {you/NAME} receive assistance from any other government program <u>last mor</u> or energy assistance.	<u>nth</u> ?	For example, housing
	YES	-	
	NO DON'T KNOW		` '
	REFUSED		(L1)
(K13=0 K14.	What other assistance did {you/NAME} receive? INTERVIEWER: PROGRAM:		
	<open></open>		
	DON'T KNOW		
(K13=0 K15.	How much income did {you/NAME} receive <u>last month</u> from the assistance you just	st to	ld me about?
	PROBE: Your best estimate is fine.		
	INTERVIEWER: ROUND TO NEAREST DOLLAR		
	\$ <u> </u> , <u> </u> . 00 (0-500)		

REFUSEDr

(0-10,000)

DON'T KNOW d

SECTION L: SOCIODEMOGRAPHIC INFORMATION

PROGRAMMER: L1 AND L2 SKIPPED FOR LONGITUDINAL SAMPLE WHO COMPLETED ANY PRIOR ROUND (S2=02 or S2=04)

(S2=01)				
L1.	I have a few more	e questions about {you/NAME}.		
	What is {your/NA	ME's} ethnic background? {Are you/ls (he/she)}:		
		Hispanic or Latino, or)1	
		Not Hispanic or Latino?)2	
		DON'T KNOW	d	
		REFUSED	r	
(S2=01) L2.	What is {your/N	NAME's} race? {Are you/ls (he/she)}:		
	INTERVIEWER	R: CODE ALL THAT APPLY.		
		Alaska Native or American Indian,)1	
		Asian,		
		Black or African American,		
		Native Hawaiian or Other Pacific Islander, or)4	
		White)5	
		DON'T KNOW	d	
		REFUSED	r	
(All)				
L3.	What is the higher	est year or grade {you/NAME} finished in school?		
	INTERVIEWER:	READ LIST IF NECESSARY. CODE ONE ANSWER.		
	INTERVIEWER:	IF ATTENDED SCHOOL BUT COMPLETED LESS THAN HIGH SIF NEVER ATTENDED SCHOOL, CODE AS 10.	SCHOOL, (CODE AS 1.
	INTERVIEWER:	IF RESPONDENT SAYS THEY WERE HOME SCHOOLED, PROYEAR, GRADE, DEGREE, OR CERTIFICATE COMPLETED.	BE FOR H	IIGHEST
	DID NO	T COMPLETE HIGH SCHOOL OR GED		01
	HIGH S	CHOOL: GED		02
		CHOOL: DIPLOMA		03
	HIGH S	CHOOL: CERTIFICATE OF COMPLETION		04
		COLLEGE/SOME POSTSECONDARY VOCATIONAL COURSES .		05
	2-YEAR	OR 3-YEAR COLLEGE DEGREE (ASSOCIATE'S DEGREE) OR		
	VO	CATIONAL SCHOOL DIPLOMA		06
		COLLEGE DEGREE (BACHELOR'S DEGREE)		07
		GRADUATE WORK/NO GRADUATE DEGREE		08
	GRADU	ATE OR PROFESSIONAL DEGREE (e.g., MA, MBA, Ph.D., J.D, I	M.D)	09

NEVER ATTENDED SCHOOL 10
SPECIAL EDUCATION WITH NO CERTIFICATE OF COMPLETION 11
DON'T KNOW d
REFUSED r

PROGRAMMER: L4 AND L5 SKIPPED FOR LONGITUDINAL SAMPLE WHO COMPLETED ANY PRIOR

ROUND (S2=02 or S2=04)

(S2=	n	1	1
(104)	v	1	

L4. What is the highest year or grade {your/NAME's} father finished in school?

INTERVIEWER: READ LIST IF NECESSARY. CODE ONE ANSWER.

INTERVIEWER: IF ATTENDED SCHOOL BUT COMPLETED LESS THAN HIGH SCHOOL, CODE AS 1.

IF NEVER ATTENDED SCHOOL, CODE AS 10.

INTERVIEWER: IF RESPONDENT SAYS THEY WERE HOME SCHOOLED, PROBE FOR HIGHEST

YEAR, GRADE, DEGREE, OR CERTIFICATE COMPLETED.

DID NOT COMPLETE HIGH SCHOOL OR GED	01
HIGH SCHOOL: GED	02
HIGH SCHOOL: DIPLOMA	03
HIGH SCHOOL: CERTIFICATE OF COMPLETION	04
SOME COLLEGE/SOME POSTSECONDARY VOCATIONAL COURSES	05
2-YEAR OR 3-YEAR COLLEGE DEGREE (ASSOCIATE'S DEGREE) OR	
VOCATIONAL SCHOOL DIPLOMA	06
4-YEAR COLLEGE DEGREE (BACHELOR'S DEGREE)	07
SOME GRADUATE WORK/NO GRADUATE DEGREE	80
GRADUATE OR PROFESSIONAL DEGREE (e.g., MA, MBA, Ph.D., J.D, M.D)	09
NEVER ATTENDED SCHOOL	10
SPECIAL EDUCATION WITH NO CERTIFICATE OF COMPLETION	11
DON'T KNOW	d
REFUSED	r

(S2=01)

L5. What is the highest year or grade {your/NAME's} mother finished in school?

INTERVIEWER: READ LIST IF NECESSARY. CODE ONE ANSWER.

INTERVIEWER: IF ATTENDED SCHOOL BUT COMPLETED LESS THAN HIGH SCHOOL, CODE AS 1.

IF NEVER ATTENDED SCHOOL, CODE AS 10.

INTERVIEWER: IF RESPONDENT SAYS THEY WERE HOME SCHOOLED, PROBE FOR HIGHEST YEAR, GRADE, DEGREE, OR CERTIFICATE COMPLETED.

(All) L6ft.	How tall {are you/is NAME}?		
	INTERVIEWER: ENTER FEET FEET (3-8)		
	DON'T KNOWREFUSED	d r	
(All) L6in.	(How tall {are you/is NAME}?)		
	PROBE: ROUND TO NEAREST WHOLE NUMBER (E.G. ENTER 6 FOR 5 ½ INC	HES	5)
	INTERVIEWER: ENTER INCHES.		
	 INCHES (0-12)		
	DON'T KNOWREFUSED	d r	
(All) L7.	How much {do you/does NAME} weigh?		
	(50-300) POUNDS (50-600)		
	DON'T KNOWREFUSED	d r	
(All) L8.	{Are you/Is NAME} now married, widowed, divorced, separated or {have you/h married?	has	(he/she)} never been
	MARRIED WIDOWED DIVORCED SEPARATED NEVER MARRIED DON'T KNOW REFUSED.	02 03 04 05 d	(L10)
(L8=01) L9.	Do {you/NAME} and {your/his/her} spouse live in the same household?		
	YES NO	-	

GO TO L11

(L8=02,	03,04,05,d,r)		
L10.	{Do you/Does NAME} have a long-term partner who lives in the same household with {your marriage-like relationship?	u/him	n/her} in a
	YES		
(All) L11.	Which of the following best describes {your/NAME's} living situation?		
	INTERVIEWER: READ LIST. CODE ONE ANSWER. 'LIVE WITH CHILDREN' SHOULD BE	COD	ED AS '2'
	PROGRAMER DISPLAY ONLY IF L9≠01 {You live/NAME lives} alone	01	(L11a)
	or other relative		(L11a)
	{You live/NAME lives} with friends or roommates	03	(L11a)
	{you/him/her}	04	(L11a)
	{You live/NAME lives} in some other living situation		
	DON'T KNOW		(L11a) (L11a)
(L11=05 L11_Ot	her. What is the other living situation?		
	<open></open>		_
	DON'T KNOW d REFUSED r		
(All) L11a.	SOFT EDIT: RESPONDENT CANNOT LIVE IN SAME HOUSEHOLD WITH SPOUSE (L9=01 SAME HOUSEHOLD WITH LONG-TERM PARTNER (L10=01) AND LIVEALONE (L11=01). RESPONDENT FAILS EDIT, INTERVIEWER READ: I must have recorded an incorrect answ (you live/NAME lives) in the same household with (your/his/her) spouse or partner and (you/N Could you verify which is correct?	IF er. I	show that
	LIVE WITH SPOUSE OR PARTNER		

- (Δ	11	1

L12. The next question is about the place {you live/NAME lives}. Is this place a...

	INTERVIEWER: CODE ONE ANSWER.		
	Single family home	01	(I 12a)
	Mobile home.		` '
	Regular apartment		,
	Supervised apartment		
	Group home		
	Halfway house		
	Personal care or board and care home		
	Assisted living facility		,
	Nursing or convalescent home		· ·
	Center for Independent Living		
	Some other type of supervised group residence or facility		
	Something else		(=:==)
	DON'T KNOW		(L12a)
	REFUSED		
(L12=12 L12_Ot			
	<open></open>		
	DON'T KNOW		
	REFUSED	r	
(All) L12a.	SOFT EDIT: RESPONDENT CANNOT LIVE ALONE (L11=01) AND LIVE IN A 11). IF RESPONDENT FAILS EDIT, INTERVIEWER READ: I must have reconshow that {you/NAME} live alone in a {FILL ANSWER FROM L12}? Which is constituted in the constant of the constant in the cons	rded an	•
	LIVE ALONE	01	(CHANGE L12)
	LIVE IN GROUP SETTING	02	(CHANGE L11)
	SUPPRESS	03	
(All) L13.	CHECK: DOES {NAME} LIVE IN A GROUP SETTING (L12 = 04 - 12)?		
	YES	_	(L14)
(L13=01	1)		
L15.	Is this place primarily for people with hearing or vision impairments, mental developmental disabilities?	illness,	mental retardation, or
	YES	01	
	NO	_	
	DON'T KNOW		
	REFUSED		
(A 11)			

9/7/06

(All)

L14.

CHECK: DOES {NAME} LIVE ALONE (L11 = 01) OR LIVE IN GROUP SETTING (L12=4-12)?

•										•		` `			•	٠.
P	RE	LC	DΑ	DE	D١	VAR	IAE	3LE	ES:	SA	MPL	E T	YPE	(S2)	

(L14=00)				
L16.	How many ad	ults 18 years of age	or older live in {your/l	NAME's} household	l, including {yourself/NAME}?
			s who usually live the away at school or on r	-	re temporarily away on business,
			_ ADULTS	(1-4) (1-20)	
(L14=00 L17 .	*	ildren under 18 year	s of age live in {your/l	NAME's} household	?
		s includes all childre ospital, or away at so		ere, even if they are	e temporarily away on vacation, in
			_ CHILDREN	(0-6) (0-20)	
					•••••
(L14=00 L18.	*	NO CHILDREN LIVI	E IN THE HOUSEHO	LD (L17 =0)?	
(L14=00 L19.	and L18=00) How many of children.	these children are	{your/NAME's} own?	Please include bid	ological, adopted, step, and foster
			_ CHILDREN	(0-6) (0-20)	
(A 11)					
(All) L20.	{Do you /Doe household?	s NAME} have child	ren of {your/his/her} o	wn under the age o	of 18 living outside of {your/his/her
	PROBE: Ple	ase include biologica	al, adopted, step, and	foster children.	
(L20=01)	NO DON'T KNOW .			00 (L22a) d (L22a)
L21.		nildren under 18 not l	living in {your/NAME's	} household {do yo	u/does (he/she)} have?
			_ CHILDREN	(1-6) (1-20)	
		DON'T KNOW . REFUSED			d

9/7/06

PREL	OADED VARIABLES: SAMPLE TYPE (S2)
(All) L22a.	CHECK: DOES {NAME} HAVE ANY CHILDREN (L17>=1 AND L19>=1) OR (L21>=1)?
	YES 01
	NO
(L22a	=01)
L22.	Are any of {your/NAME's} children, either living with {you/him/her} or not, under the age of six?
	YES 01
	NO
	DON'T KNOW d
	REFUSED r
(All)	
L23A	amt. PROGRAMMER: IF L11=01, 03, or 04, ASK:
	What was {your/NAME's} total income in 2005, before taxes or other deductions? Please include mone {you/NAME} received from <u>all</u> sources.
	PROGRAMMER: IF L11=02, or 05, d, r, ASK: What was the total combined income of all members of {your/NAME's} household in 2005, before taxes o other deductions? Please include money all members of {your/NAME's} household received from a sources.
	PROBE: IF RESPONDENT CANNOT PROVIDE AN ANNUAL AMOUNT: If it is hard to calculate an annual amount can you tell me what your income was per day, week, bi-weekly, twice a month or monthly in 2005.
	INTERVIEWER: ROUND TO NEAREST DOLLAR
	\$ _ , . 00 AMOUNT (10,000-75,000)
	(0-500,000)

DON'T KNOW d (L24) REFUSEDr (L24) PRELOADED VARIABLES: SAMPLE TYPE (S2)

(L23Aamt = numeric response)

L23Ahop. PROBE: PROGRAMMER: IF L11=01, 03, or 04, DISPLAY:

What was {your/NAME's} total income in 2005, before taxes or other deductions? Please include money {you/NAME} received from all sources.

PROBE: **PROGRAMMER:** IF L11=02, or 05, d, r, DISPLAY:

What was the total combined income of all members of {your/NAME's} household in 2005, before taxes or other deductions? Please include money all members of {your/NAME's} household received from all sources.

PROBE: IF RESPONDENT CANNOT PROVIDE AN ANNUAL AMOUNT: If it is hard to calculate an annual amount can you tell me what your household income was per day, week, bi-weekly, twice a month or monthly in 2005.

PROBE: Is that daily, weekly, bi-weekly, twice a month, or annually?

INTERVIEWER: ENTER HOW OFTEN PAID

ANNUALLY	01	(L25)
MONTHLY	02	(L23b)
TWICE A MONTH	03	(L23b)
WEEKLY	04	(L23b)
BI-WEEKLY	05	(L23b)
DAILY	06	(L23b)
OTHER	07	

(L23Aamt = numeric response and L23Ahop =07) L23Ahop_Other.

INTERVIEWER: ENTER OTHER

<open></open>	
DON'T KNOW	d r

GO TO L24

(L23Aamt = numeric response and L23Ahop = 02, 03, 04, 05, 06)

L23b. **PROGRAMMER:** USE "{YOUR/NAME'S} HOUSEHOLD" IF L11=02 OR 05, OTHERWISE USE "{YOUR/NAME}"

How many {days/weeks/months} did {{you/NAME}/{your household/NAME's household}} receive this income in 2005?

DAYS/WEEKS/MONTHS	
(1-365) (1-52) (1/12)	
DON'T KNOW	d
REFUSED	r

GO TO L25

PRELOADED VARIABLES: SAMPLE TYPE (S2)

(L	23Aamt	=d,r o	r L23	Aho	p=07
----	--------	--------	-------	-----	------

l 24	PROGRAMMER:	USF "HOUSEHOL	D" IF I 11=02 OR 05

Could you please tell me if {your/NAME'S}	annual (household)	income before tax	xes and other	deductions in
2005 was				

\$2,500 or less,	01
\$2, 501 to \$5,000,	02
\$5,001 to \$10,000,	03
\$10,001 to \$20,000,	04
\$20,001 to \$30,000,	05
\$30,001 to \$40,000,	06
\$40,001 to \$50,000,	07
\$50,001 to \$75,000,	80
\$75,001 to \$100,000, or	09
More than \$100,000?	10
DON'T KNOW	d
REFUSED	r

NEW ITEM

(All)

L25. These next two questions are about the impact that Hurricanes Katrina and Rita have had on (you/NAME). In 2005, as a result of either Hurricane Katrina or Rita, (were you/was NAME) forced to leave the place (you were/he was/she was) living for a period of 1 month or longer?

YES	01
NO	00
DON'T KNOW	d
REFLISED	r

NEW ITEM

(All)

L26. In 2005, did you lose your job as a result of Hurricane Katrina or Hurricane Rita?

YES	01
NO	00
DON'T KNOW	C
REFUSED	

GO TO M1

SECTION M: CLOSING INFORMATION AND OBSERVATIONS

(All) M1.		: IF WE HAVE NAME, ADDRESS, AND PHONE NUMBI FROM THE OTHER PRELOADED INFORMATION DISPLAY IMBER.		
	That concludes the	nis interview. Can you please verify (your/NAME'S) current conta	ct inf	formation?
	STREET ADDRE	AME FROM SCREENER OR PRELOADED INFORMATION) SS 1: {FIRST LINE OF ADDRESS FROM SCREENER OR PRE SS 2: {SECOND LINE OF ADDRESS FROM SCREENER OR P INFORMATION}		•
	CITY OR TOWN: STATE: {STATE ZIP CODE: {ZIP	SS 3: {THIRD LINE OF ADDRESS FROM SCREENER OR PRE {CITY OR TOWN FROM SCREENER OR PRELOADED INFOF FROM SCREENER OR PRELOADED INFORMATION} CODE FROM SCREENER OR PRELOADED INFORMATION} IMBER: {TELEPHONE NUMBER FROM SCREENER OR PREL	RMA	TION}
	TELET HONE NO	SAME AS PROVIDED		
		INCORRECT INFORMATION ABOVE, NEED TO ENTER NEW INFORMATION	01 d	(M1_Firstname) (M1a)
		OX FOR DATA ENTRY. 1,0, D, R ARE THE ONLY POSSIBLE I GO TO QUESTIONS BELOW, OTHERWISE SKIP TO M1a}	RESI	PONSES;
(M1=01) M1_First	tName.	Y FULL NAME FROM SCREENER OR PRELOADED INFORMA	ATIO	N WITH FIRST NAME
	<open:< td=""><td>></td><td></td><td></td></open:<>	>		
		DON'T KNOW		
	dleName. NAME: {DISPLA` INITIAL BOLDED Middle initial?	Y FULL NAME FROM SCREENER OR PRELOADED INFORMA 0}	(OIT	N WITH MIDDLE
	<open:< td=""><td>></td><td></td><td></td></open:<>	>		
		DON'T KNOW		

DDEI UVDED	VARIABLES:	FYDTVDE	PILITATOT

1		SPLAY FULL NAME FROM SCREENER OR PRELOADED INFORMATION WITH LAST NAME
	<0	PEN>
		DON'T KNOW d REFUSED r
	NAME: {DIS	SPLAY FULL NAME} IER: PRESS 1 TO CONTINUE
I		
ı	INTERVIEW	ER: REFUSED AND DON'T KNOW ALLOWED, WILL SKIP REST OF ADDRESS QUESTIONS.
	<0	PEN>
		DON'T KNOW d REFUSED r
		(DISPLAY ENTIRE ADDRESS FROM SCREENER OR PRELOADED INFORMATION WITH D)
I	PROBE:	READ IF NECESSARY: Second part of the address.
	<0	PEN>
		DON'T KNOW d REFUSED r
(M1=01) M1_Addr		{DISPLAY ENTIRE ADDRESS FROM SCREENER OR PRELOADED INFORMATION WITH LINE 3 BOLD}
	PROBE: RE	AD IF NECESSARY: Third part of the address.
	<0	PEN>
		DON'T KNOW d REFUSED r

(M1=01) M1_City.			
	ADDRESS: {DIS	PLAY ENTIRE ADDRESS FROM SCREENER OR PRELOADED I	NFORMATION WITH
	Town or city?	Y BOLD}	
	<open:< td=""><td>></td><td></td></open:<>	>	
		DON'T KNOW	
(M1=01)			
	ADDRESS: {DIS	PLAY ENTIRE ADDRESS FROM SCREENER OR PRELOADED I TE BOLD}	NFORMATION WITH
	INTERVIEWER:	USE TWO CHARACTER ABBREVIATION. ENTER ZZ TO ENTER INTERNATIONAL CITY AND COUNTRY E	BELOW.
	<open:< td=""><td>></td><td></td></open:<>	>	
(M1=01)		DON'T KNOWREFUSED	
M1_ZipC	code. ADDRESS: {DISI ZIP Zip code?	PLAY ENTIRE ADDRESS FROM SCREENER OR PRELOADED I CODE BOLD} >	NFORMATION WITH
		DON'T KNOW	
	ADDRESS: {DIS	PLAY FULL ADDRESS} PRESS 1 TO CONTINUE	
_	•	FELEPHONE NUMBER FROM SCREENER OR PRELOADED INF The telephone number, area code first?	FORMATION}
	<open:< td=""><td>></td><td></td></open:<>	>	
		DON'T KNOW	d r

PROGRAMMER: ASK M1_TIMEZONE IF TIME ZONE IS NOT CURRENTLY ENTERED

/ARIABLES NEEDED FROM OTHER SECTIONS: RTYPE, {NAME^S} AD	DKESS FROM
PRELOADED VARIARIES EXPTYPE TSTATUS	

(M1=01	,			
M1_Tim	ne∠one. What time zone∃	is that in?		
		CURRENT TIME ZONE: {DISPLAY TIME ZONE BASED ON}		
		HAWAII/ALEUTIAN TIME ZONE	02	
		ALASKA TIME ZONE	03	
		PACIFIC TIME ZONE	04	
		MOUNTAIN TIME ZONE	05	
		CENTRAL TIME ZONE	06	
		EASTERN TIME ZONE	07	
		ATLANTIC TIME ZONE		
		NEWFOUNDLAND TIME ZONE		
		OTHER INTERNATIONAL TIME ZONE	98	
(M1=01	,			
M1_Co				
		JMBER: {TELEPHONE NUMBER FROM SCREENER OR PREL ME ZONE FROM SCREENER OR PRELOADED INFORMATION		DED INFORMATION}
	INTERVIEWER:	PRESS 1 TO CONTINUE		
(All)				
M1a.	{Do you have/Do	es NAME have} an email address?		
		YES	01	
		NO	00	(M2A)
		DON'T KNOW	d	
		REFUSED	r	
(M1a=0	1)			
M2	What is {your/NA	ME's} email address?		
	<open:< td=""><td>></td><td></td><td></td></open:<>	>		
		DON'T KNOW	d	
		REFUSED		
(All)				
M2A.	CHECK: IS INTE	RVIEWER SPEAKING WITH {NAME} OR A PROXY?		
		{NAME}		(M2CHECK)
		PROXY	02	
(M2A=0	02)			
	. What is your first	name?		
		PRESS 1 TO CONTINUE		
0.50				
(M2A=0	02) rstName.			
IVIZa_FI		Y PROXY'S FULL NAME FROM SCREENER OR PRELOAD	ED I	INFORMATION WITH
	FIRST NAME BO		בט	II VI CINIMITION WITH
	First name?	,		
	<open:< td=""><td>></td><td></td><td></td></open:<>	>		
		DON'T KNOW		
		REFUSED	r	

9/7/06

PRELOADED VARIABLES: EXPTYPE. TSTA	THIS	

(M2A=02) M2a_MiddleName.		
NAME: {DISPLA MIDDLE INITIAL Middle initial?	Y PROXY'S FULL NAME FROM SCREENER OR PRELOADE BOLD}	ED INFORMATION WITH
	>	
(O) E11/		
	DON'T KNOW	
(M2A=02) M2a_LastName.		
NAME: {DISPLA LAST NAME BOI Last name?	Y PROXY'S FULL NAME FROM SCREENER OR PRELOADE LD}	ED INFORMATION WITH
<open:< td=""><td>></td><td></td></open:<>	>	
	DON'T KNOW	
(M2A=02) Confirm. NAME: {DISPLA'	Y PROXY'S FULL NAME} PRESS 1 TO CONTINUE	
(M2A=02) M2a_Address1. ADDRESS: Street and numb	er?	
INTERVIEWER:	REFUSED OR DON'T KNOW ALLOWED. WILL SKIP REST OF	ADDRESS QUESTIONS.
<open:< td=""><td>></td><td></td></open:<>	>	
(M2A=02)	DON'T KNOW	
	PLAY ADDRESS1 FROM PREVIOUS QUESTION} F NECESSARY: Second part of the address.	
<open:< td=""><td>></td><td></td></open:<>	>	
	DON'T KNOW	
•	PLAY ADDRESS1 AND ADDRESS2 FROM PREVIOUS QUESTION F NECESSARY: Third part of the address.	ONS}
<open:< td=""><td>></td><td></td></open:<>	>	
	DON'T KNOW	d

PRELOADED	VARIABL	.ES: E	EXPTYP	E. TST.	ATUS

(M2A=02)			
M2a_Addre			
		PLAY ADDRESS1, ADDRESS2, AND ADDRESS3 FROM PREV	IOUS QUESTIONS}
PI	ROBE. READ II	F NECESSARY: Fourth part of the address.	
	<open:< td=""><td>></td><td></td></open:<>	>	
		DON'T KNOW	
		REFUSED	r
(M2A=02)			
M2a_City.	ADDRESS: {	DISPLAY ADDRESS1, ADDRESS2, ADDRESS3, AND ADDR	ESS4 FROM PREVIOUS
	QUESTIONS)	}	
	Town or City?		
	ODEN		
	<open:< td=""><td>></td><td></td></open:<>	>	
		DON'T KNOW	d
		REFUSED	r
0.40 + 00			
(M2A=02)	ADDRESS: JI	DISPLAY ADDRESS1, ADDRESS2, ADDRESS3, ADDRESS4,	AND TOWN/CITY FROM
WZa_Otato	PREVIOUS Q		AND TOWNSONT TROM
	State?	···	
		USE TWO CHARACTER ABBREVIATION.	DELOW
IN	IERVIEWER:	ENTER ZZ TO ENTER INTERNATIONAL CITY AND COUNTRY	BELOW.
	<open:< td=""><td>></td><td></td></open:<>	>	
		DON'T KNOW	
		REFUSED	r
(M2A=02)			
M2a_ZipCo	ode.		
	•	PLAY ADDRESS1, ADDRESS2, ADDRESS3, ADDRESS4, TOW	N/CITY, AND STATE
		S QUESTIONS}	
ΖI	p code?		
	<open:< td=""><td>></td><td></td></open:<>	>	
		DON'T KNOW	
		REFUSED	r
(M2A=02)			
	AME: {DISPLA}	Y PROXY'S FULL ADDRESS}	
	•	PRESS 1 TO CONTINUE	
(M2A=02) M2a_Phone	a Niumbar		
	ELEPHONE NU	IMBER·	
	_	ne telephone number, area code first?	
	_		
	<open:< td=""><td>></td><td></td></open:<>	>	
		DON'T KNOW	d
		REFUSED	

9/7/06 M-6 NBS ROUND 3 INSTRUMENT

PROGRAMMER: ASK M2A_TIMEZONE IF TIME ZONE IS NOT CURRENTLY ENTERED			
(M2A=02)			
M2A_TimeZone.			
What time zone is that in?			
INTERVIEWER: CURRENT TIME ZONE: {DISPLAY TIME ZONE BASED ON}			
HAWAII/ALEUTIAN TIME ZONE	02		
ALASKA TIME ZONE	03		
PACIFIC TIME ZONE	04		
MOUNTAIN TIME ZONE	05		
CENTRAL TIME ZONE	06		
EASTERN TIME ZONE	07		
ATLANTIC TIME ZONE			
NEWFOUNDLAND TIME ZONE			
OTHER INTERNATIONAL TIME ZONE	98		
(M2A=02) M2A_Confirm.			
TELEPHONE NUMBER: {PROXY'S TELEPHONE NUMBER} TIME ZONE: {PROXY'S TIME ZONE}			
INTERVIEWER: PRESS 1 TO CONTINUE			
(M2A=02) M2a_Rlshp. How are you related to {NAME}?			
{NAME'S} SPOUSE			
{NAME'S} MOTHER			
{NAME'S} FATHER			
{NAME'S} CHILD			
GRANDPARENT OF {NAME}			
BROTHER/SISTER (NATURAL/STEP) OF {NAME}			
AUNT/UNCLE OF {NAME}		(IVI2a_email)	
OTHER RELATIVE OF {NAME}NOT RELATED		(M2a Pleba	oth?\
STAFF AT RESIDENCE			_0112)
DON'T KNOW		(M2a_email)	
REFUSED		-	
(M2A=02 and M2a_Rlshp=08) M2a_ oth1. <i>INTERVIEWER:</i> PLEASE SPECIFY			
<open></open>			
DON'T KNOWREFUSED			
(M2A=02 and M2a_Rlshp=09) M2a_ oth2. <i>INTERVIEWER</i> : PLEASE SPECIFY			
<open></open>			
DON'T KNOW	d		

REFUSEDr

SECTION M UNIVERSE: ALL VARIABLES NEEDED FROM OTHER SECTIONS: RTYPE, {NAME'S} ADDRESS FROM SECTION A PRELOADED VARIABLES: EXPTYPE, TSTATUS

(M2A=02)			
M2a_email.	Do you have an email address?		
	YES	01	
	NO		(M2CHECK)
	DON'T KNOW		
	REFUSED		,
(M2∆=02 and	M2a email=01)		
*	at is your email address?		
	<open></open>		
	DON'T KNOW	d	
	REFUSED	r	
(All)			
M2CHECK. I	PROGRAMMER: ONLY ASK M2_PREPAY OF THE TREATMENT GROUP E	XPT	YPE=01, ELSE GC
TO M3.	NAME} PART OF THE TREATMENT GROUP (EXPTYPE=01)?		
13 {1	VAINE; FART OF THE TREATMENT GROUP (EXPTTPE=UT)?		
	YES	01	
	NO	00	(M3)
(M2CHECK=	01)		
*	Did {you/NAME} receive a check for \$10.00 in the mail that {you/NAME} can	cash	?
	V50		(1.10)
	YES		, ,
	NO, COLLECT ADDRESS AND SEND ANOTHER CHECK DON'T KNOW		
			, ,
	REFUSED	г	(IVI3)
PROGRAMN	IER: IF CAPI CASE, THEN DISPLAY M2_PREPAY BELOW		
M2_PrePay.	INTERVIEWER: ARE YOU GIVING THE CHECK TO THE RESPONDENT?		
	YES		
	NO, COLLECT ADDRESS AND SEND ANOTHER CHECK	00	(M3)
(M2CHECK=	01,00 or M2_PrePay=00,d, r)		
M3. Wo	uld you like the check made out to {you/NAME} or someone else?		
	{YOU/NAME}	01	(M6)
	MAKE CHECK OUT TO SOMEONE ELSE		()
	DON'T KNOW		
	DEFLICED		

PRELOADED VARIABLES: EXPTYPE, TSTATUS		
(M2_PrePay=00,d, r or M3=02,d,r)	500 THE DI	0DI 41/ 01/
M4. PROGRAMMER: WE WOULD LIKE THE FOLLOWING FORMAT TO BE USED	_	
TOP HALF OF SCREEN (IF POSSIBLE, THIS DISPLAY SHOULD CHANGE	AS THE INTE	RVIEWER
ENTERS NEW INFORMATION):		
What is the name and address of the person to whom we should send the \$10.00 c	check?	
NAME: {FULL NAME FROM M1}		
STREET ADDRESS 1: {FIRST LINE OF ADDRESS FROM M1}		
STREET ADDRESS 2: {SECOND LINE OF ADDRESS FROM M1}		
STREET ADDRESS 3: {THIRD LINE OF ADDRESS FROM M1}		
CITY OR TOWN: {CITY OR TOWN FROM M1}		
STATE: {STATE FROM M1}		
ZIP CODE: {ZIP CODE FROM M1}		
TELEPHONE NUMBER: {TELEPHONE NUMBER FROM M1}		
SAME AS PROVIDED	00 (M6)	
INCORRECT INFORMATION ABOVE, NEED TO ENTER	,	
NEW INFORMATION	01 (M4Fname	e)
DON'T KNOW	d (M6)	
REFUSED	r (M6)	
PROGRAMMER: SEE M1 FOR FORMATTING TO USE FOR BOTTOM OF SCREEN		
(M2_PrePay=00,d, r or M3=02,d,r and M4=01) M4_Firstname.		
NAME:		
First name?		
<open></open>		
DON'T KNOW		
REFUSED	r	
(M2_PrePay=00,d, r or M3=02,d,r and M4=01) M4_Middlename.		
NAME: {DISPLAY FIRST NAME FROM QUESTION M4_FIRSTNAME}		
Middle initial?		
<open></open>		<u>—</u>
DON'T KNOW	d	
REFUSED	r	
(M2_PrePay=00,d, r or M3=02,d,r and M4=01) M4_Lastname.		
NAME: {DISPLAY FIRST NAME FROM QUESTION M4_FIRSTNAME AND M4_MIDDLENAME} Last name?	MIDDLE NA	ME FROM
<open></open>		

DON'T KNOW d REFUSEDr

Confirm. NAME: (DISPLAY NAME FROM PREVIOUS QUESTIONS) INTERVIEWER: PRESS 1 TO CONTINUE (M2 PrePay=00.d, r or M3=02.d,r and M4=01) M4_Address1. ADDRESS: Street and number? INTERVIEWER: REFUSED OR DON'T KNOW ALLOWED. WILL SKIP REST OF ADDRESS QUESTIONS.	PRELOADED VARIABLES: EXPTYPE, TSTATUS (M2 PrePay=00,d, r or M3=02,d,r and M4=01)	
(M2_PrePay=00.d, r or M3=02.d,r and M4=01) M4_Address1. ADDRESS: Street and number? INTERVIEWER: REFUSED OR DON'T KNOW ALLOWED. WILL SKIP REST OF ADDRESS QUESTIONS. <pre></pre>	Confirm. NAME: {DISPLAY NAME FROM PREVIOUS QUESTIONS}	
M4_Address1. ADDRESS: Street and number? INTERVIEWER: REFUSED OR DON'T KNOW ALLOWED. WILL SKIP REST OF ADDRESS QUESTIONS. <0PEN>	INTERVIEWER: PRESS 1 TO CONTINUE	
ADDRESS: Street and number? WTERVIEWER: REFUSED OR DON'T KNOW ALLOWED. WILL SKIP REST OF ADDRESS QUESTIONS. OPEN>	(M2_PrePay=00,d, r or M3=02,d,r and M4=01)	
### INTERVIEWER: REFUSED OR DON'T KNOW ALLOWED. WILL SKIP REST OF ADDRESS QUESTIONS. COPEN>		
AOPEN>	Street and number?	
DON'T KNOW	INTERVIEWER: REFUSED OR DON'T KNOW ALLOWED. WILL SKIP REST OF ADDRESS	SS QUESTIONS.
REFUSED	<open></open>	
(M2_PrcPay=00.d, r or M3=02.d,r and M4=01) M4_Address2. ADDRESS: {DISPLAY ADDRESS1 FROM PREVIOUS QUESTION} PROBE: READ IF NECESSARY: Second part of the address. <		
M4_Address2. ADDRESS: {DISPLAY ADDRESS1 FROM PREVIOUS QUESTION} PROBE: READ IF NECESSARY: Second part of the address. <	REFUSEDr	
ADDRESS: {DISPLAY ADDRESS1 FROM PREVIOUS QUESTION} PROBE: READ IF NECESSARY: Second part of the address. <pre></pre>	(M2_PrePay=00,d, r or M3=02,d,r and M4=01)	
<open></open>	-	
DON'T KNOW	PROBE: READ IF NECESSARY: Second part of the address.	
REFUSED	<open></open>	
(M2_PrePay=00,d, r or M3=02,d,r and M4=01) M4_Address3. ADDRESS: {DISPLAY ADDRESS1 AND ADDRESS2 FROM PREVIOUS QUESTIONS} PROBE: READ IF NECESSARY: Third part of the address. <-OPEN>		
M4_Address3. ADDRESS: {DISPLAY ADDRESS1 AND ADDRESS2 FROM PREVIOUS QUESTIONS} PROBE: READ IF NECESSARY: Third part of the address. OPEN>	REFUSED	
ADDRESS: {DISPLAY ADDRESS1 AND ADDRESS2 FROM PREVIOUS QUESTIONS} PROBE: READ IF NECESSARY: Third part of the address.	(M2_PrePay=00,d, r or M3=02,d,r and M4=01)	
<pre></pre>		
DON'T KNOW		
REFUSED	<open></open>	
(M2_PrePay=00,d, r or M3=02,d,r and M4=01) M4_Address4. ADDRESS: {DISPLAY ADDRESS1, ADDRESS2, AND ADDRESS3 FROM PREVIOUS QUESTIONS} PROBE: READ IF NECESSARY: Fourth part of the address. <-OPEN> DON'T KNOW	DON'T KNOW d	
M4_Address4. ADDRESS: {DISPLAY ADDRESS1, ADDRESS2, AND ADDRESS3 FROM PREVIOUS QUESTIONS} PROBE: READ IF NECESSARY: Fourth part of the address. <pre></pre>	REFUSEDr	
ADDRESS: {DISPLAY ADDRESS1, ADDRESS2, AND ADDRESS3 FROM PREVIOUS QUESTIONS} PROBE: READ IF NECESSARY: Fourth part of the address.	(M2_PrePay=00,d, r or M3=02,d,r and M4=01) M4_Address4	
DON'T KNOW	ADDRESS: {DISPLAY ADDRESS1, ADDRESS2, AND ADDRESS3 FROM PREVIOUS QU	IESTIONS}
REFUSED	<open></open>	
(M2_PrePay=00,d, r or M3=02,d,r and M4=01) M4_City. ADDRESS: {DISPLAY ADDRESS1, ADDRESS2, ADDRESS3, AND ADDRESS4 FROM PREVIOUS QUESTIONS} Town or city?	DON'T KNOW d	
M4_City. ADDRESS: {DISPLAY ADDRESS1, ADDRESS2, ADDRESS3, AND ADDRESS4 FROM PREVIOUS QUESTIONS} Town or city?	REFUSEDr	
<open></open>	QUESTIONS}	ROM PREVIOUS
	<open></open>	

9/7/06 M-10

PRELOADED	VARIABLES:	FXPTYPF	TSTATUS
INCLUADED	VAINIADEEU.		1017100

(M2 PrePay=00,d, r or M3=02,d,r and M4=01)

ADDRESS: {DISPLAY ADDRESS1, ADDRESS2, ADDRESS3 ADDRESS4, AND TOWN/CITY FROM

PREVIOUS QUESTIONS}	, ,
State?	
INTERVIEWER: USE TWO CHARACTER ABBREVIATION. INTERVIEWER: ENTER ZZ TO ENTER INTERNATIONAL CITY AND COUNTRY	BELOW.
<open></open>	
DON'T KNOWREFUSED	
$(M2_PrePay=00,d,\ r\ or\ M3=02,d,r\ and\ M4=01)$ $M4_Zip. ADDRESS:\ \{DISPLAY\ ADDRESS1,\ ADDRESS2,\ ADDRESS3,\ ADDRESS4,\ FROM\ PREVIOUS\ QUESTIONS\}$	TOWN/CITY, AND STATE
Zip code?	
<open></open>	
DON'T KNOWREFUSED	
(M2_PrePay=00,d, r or M3=02,d,r and M4=01) Confirm. ADDRESS: {DISPLAY FULL ADDRESS}	
INTERVIEWER: PRESS 1 TO CONTINUE	
(M2_PrePay=00,d, r or M3=02,d,r and M4=01) M4_Telephone.	
TELEPHONE NUMBER: Please give me the telephone number, area code first?	
<open></open>	
DON'T KNOW	d
REFUSED	
PROGRAMMER: ASK M4_TIMEZONE IF TIME ZONE IS NOT CURRENTLY ENTERED	
(M2_PrePay=00,d, r or M3=02,d,r and M4=01) M4_TimeZone.	
What time zone is that in?	
INTERVIEWER: CURRENT TIME ZONE: {DISPLAY TIME ZONE BASED ON}	
HAWAII/ALEUTIAN TIME ZONE	
ALASKA TIME ZONEPACIFIC TIME ZONE	••
MOUNTAIN TIME ZONE	
CENTRAL TIME ZONE	
	-
EASTERN TIME ZONEATLANTIC TIME ZONE	-

(M2_PrePa M4_Confi	•	=02,d,r and M4=01)		
		NUMBER: {DISPLAY TELEPHONE NUMBER} DISPLAY TIME ZONE}		
I	NTERVIEWER	R: PRESS 1 TO CONTINUE		
(All) M6. <i>CHEC</i>	CK: IS {NAME}	PART OF THE PARTICIPANT SAMPLE (TSTATUS=01)?		
		YES		(M10a)
() n li	your/his/her) h name, address	t one year the Social Security Administration may wish to contact (ealth and other circumstances. In case we have trouble reaching, and phone number of a close relative or friend who is not livin (your/his/her) location in the future? For example, a mother, fafriend.	ı (yo ıg w	u/him/her), what is the ith (you/NAME) and is
(Do you/Does N	NAME) have a contact person?		
F	PROGRAMME	R: PLEASE USE SAME FORMATTING AS M1 FOR SCREENS \ CONTACT PERSON INFORMATION	ΛHE	N GATHERING
CONTAC	T PERSON 1			
		YES NO DON'T KNOW REFUSED	00 d	(CP1_Fname) (M10a) (M10a) (M10a)
	<ope< td=""><td>N></td><td></td><td></td></ope<>	N>		
		DON'T KNOWREFUSED		
	dleName.	AY FIRST NAME FROM CP1_FIRSTNAME}		
	<opei< td=""><td>N></td><td></td><td></td></opei<>	N>		
		DON'T KNOWREFUSED		

(M6=01 and M7=01) CP1_LastName. NAME: {DISPLA CP1_MIDDLENA	Y FIRST NAME AND MIDDLE INITIAL FROM CP1_FIRSTNAME AME}	AND
Last name?		
<open< td=""><td>></td><td></td></open<>	>	
	DON'T KNOW	
· · · · · · · · · · · · · · · · · · ·	Y FULL NAME FROM PREVIOUS QUESTIONS} PRESS 1 TO CONTINUE	
(M6=01 and M7=01) CP1_Address1. ADDRESS: Street and numb	er? REFUSED OR DON'T KNOW ALLOWED, WILL SKIP REST OF	ADDRESS QUESTIONS
<open< td=""><td>></td><td></td></open<>	>	
	DON'T KNOW	
(M6=01 and M7=01) CP1_Address2. ADDRESS: {DIS	PLAY CP1_ADDRESS1}	
PROBE: READ I	F NECESSARY: Second part of the address.	
<open< td=""><td>></td><td></td></open<>	>	
	DON'T KNOW	
(M6=01 and M7=01) CP1_Address3. ADDRESS: {DIS	PLAY CP1_ADDRESS1 AND CP2_ADDRESS2}	
PROBE: READ I	F NECESSARY: Third part of the address.	
<open< td=""><td>></td><td></td></open<>	>	
	DON'T KNOWREFUSED	d r

PRELOADED	VARIARI ES	FXPTYPF	TSTATUS

(M6=01 and M7=01)
CP1_Address4. ADDRESS: {DISPLAY CP1_ADDRESS1, CP2_ADDRESS2, AND CP_ADDRESS3}
PROBE: READ IF NECESSARY: Fourth part of the address.
<open></open>
DOMET KALOW
DON'T KNOW d REFUSED r
(M6=01 and M7=01)
CP1_City. ADDRESS: {DISPLAY CP1_ADDRESS1, CP2_ADDRESS2, CP_ADDRESS3, AND CP_ADDRESS4} Town or city?
<open></open>
DON'T KNOW d
REFUSED r
(M6=01 and M7=01) CP1_State. ADDRESS: {DISPLAY CP1_ADDRESS1, CP2_ADDRESS2, CP_ADDRESS3, CP_ADDRESS4, AND CP1_CITY} State?
INTERVIEWER: USE TWO CHARACTER ABBREVIATION. INTERVIEWER: ENTER ZZ TO ENTER INTERNATIONAL CITY AND COUNTRY BELOW.
<open></open>
DON'T KNOW d REFUSED r
(M6=01 and M7=01) CP1_Zip5. ADDRESS: {DISPLAY CP1_ADDRESS1, CP2_ADDRESS2, CP_ADDRESS3, CP_ADDRESS4
<open></open>
DON'T KNOW d
REFUSEDr
(M6=01 and M7=01) Confirm. ADDRESS: {DISPLAY CP1_ADDRESS1, CP2_ADDRESS2, CP_ADDRESS3, CP_ADDRESS4, CP1_CITY CP1_STATE, AND CP1_ZIPCODE} INTERVIEWER: PRESS 1 TO CONTINUE

PREL	OADED	VARIABL	ES: EXP	TYPE, TS	TATUS

_	NE NUMBER: e me the telephone number, area code first?		
</th <th>OPEN></th> <th></th> <th></th>	OPEN>		
	DON'T KNOWREFUSED		
PROGRAMMER: A	SK CP1_TIMEZONE IF NO TIME ZONE IN SYSTEM FOR NUMBER E	ENTE	ERED
M6=01 and M7=01) CP1_TimeZone. W	hat time zone is that in?		
INTERVIE	EWER: CURRENT TIME ZONE: {DISPLAY TIME ZONE BASED ON}		
	HAWAII/ALEUTIAN TIME ZONE	02	
	ALASKA TIME ZONE	03	
	PACIFIC TIME ZONE	04	
	MOUNTAIN TIME ZONE	05	
	CENTRAL TIME ZONE	06	
	EASTERN TIME ZONE	07	
	ATLANTIC TIME ZONE		
	NEWFOUNDLAND TIME ZONE		
	OTHER INTERNATIONAL TIME ZONE	98	
(M6=01 and M7=01)	t person related to {you/NAME}, if at all?		
vio. I low is tila	t person related to {you/NAINIE}, if at all!		
	{NAME'S} SPOUSE		
	{NAME'S} MOTHER		
	{NAME'S} FATHER		
	{NAME'S} CHILD		
	GRANDPARENT OF {NAME}		
	BROTHER/SISTER (NATURAL/STEP) OF {NAME}		
	AUNT/UNCLE OF {NAME}OTHER RELATIVE OF {NAME}		(IVIƏ)
	NOT RELATED		(MR i oth)
	STAFF AT RESIDENCE		
	DON'T KNOW		, ,
	REFUSED		
M6=01 and M7=01 a M8_h_oth.	and M8=08) VIEWER: PLEASE SPECIFY		
<open< td=""><td>l></td><td></td><td></td></open<>	l>		
	DON'T KNOW	Ч	
	REFUSED		

M-15

PREL	OADED VARIAE	LES: EXPTYPE,	TSTATUS	

	01, and M8=09) INTERVIEWER: PLEASE SPECIFY		
•	<open></open>		
	DON'T KNOWREFUSED		
CONTACT F	PERSON		
(M6=01 and M M9. Can	17=01) you give me the name, address, and phone number of another person?		
	YES NO DON'T KNOW REFUSED	00 d	(M10a) (M10a)
(M6=01 and M CP2_FirstNa NAM Firs	me.		
	DON'T KNOWREFUSED		
	DON'T KNOWREFUSED		
	DON'T KNOW	d r	
(M6=01 and M	19=01) NAME: {DISPLAY CP2_FIRSTNAME, CP2_MIDDLENAME, AND CP2_LAST	NAN	ΛE}

INTERVIEWER: PRESS 1 TO CONTINUE

PRELOADED	VARIABL	.ES: I	EXPTYF	PE. TST	ATUS

(M6=01 and M9=01)		
CP2_Address1.		
ADDRESS:		
Street and numb		
INTERVIEWER:	REFUSED OR DON'T KNOW ALLOWED, WILL SKIP REST OF A	ADDRESS QUESTIONS.
<open< td=""><td> ></td><td></td></open<>	 >	
	DON'T KNOW	
	REFUSED	r
(M6=01 and M9=01) CP2_Address2.		
	SPLAY CP2_ADDRESS1}	
-	IF NECESSARY: Second part of the address.	
0.7.	·	
<open< td=""><td><u> </u></td><td></td></open<>	<u> </u>	
	DON'T KNOW	d
	REFUSED	
	KEFUSED	I
(M6=01 and M9=01)		
CP2_Address3.	SPLAY CP2_ADDRESS1 AND CP2_ADDRESS2}	
•	IF NECESSARY: Third part of the address.	
T NODE. NEAD	in NEOLOGARY. Third part of the address.	
<open< td=""><td>></td><td></td></open<>	>	
	DON'T KNOW	
	REFUSED	r
(M6=01 and M9=01)		
CP2_Address4.	PDLAV CD2 ADDDECC4 CD2 ADDDECC2 AND CD2 ADDDECC	201
•	PLAY CP2_ADDRESS1, CP2_ADDRESS2, AND CP2_ADDRESS IF NECESSARY: Fourth part of the address.	53}
<opfn< td=""><td>l></td><td></td></opfn<>	l>	
	DON'T KNOW	d
	REFUSED	r
•	{DISPLAY CP2_ADDRESS1, CP2_ADDRESS2, CP2_ADDRESS	3}, AND
CP2_ADDR	·	
Town or city	/?	
<open< td=""><td> ></td><td></td></open<>	>	
	DON'T KNIOW	
	DON'T KNOW	
	REFUSED	r

PRELOADED	VARIABL	ES:	EXPTY	PE. TST	ATUS

(M6=01 and MCP2_State.	*	ESS1, CP2_ADDRESS2, CP2_ADDRESS3 CP2_ADDRESS4, AND
	INTERVIEWER: USE TWO CHARA INTERVIEWER: ENTER ZZ TO EN	CTER ABBREVIATION. TER INTERNATIONAL CITY AND COUNTRY BELOW.
	<open></open>	
		d r
	le.	, CP2_ADDRESS2, CP2_ADDRESS3 CP2_ADDRESS4,
Zip	code? <open></open>	
		d r
(·
(M6=01 and MCP2_Teleph		
	EPHONE NUMBER: ase give me the telephone number, a	rea code first?
	<open></open>	
	DON'T KNOWREFUSED	d r
PR	OGRAMMER: ASK CP2_TIMEZONE	IF NO TIME ZONE IN SYSTEM FOR NUMBER ENTERED
	one. 'hat time zone is that in?	E: {DISPLAY TIME ZONE BASED ON}
	ALASKA TIME ZONE PACIFIC TIME ZONE MOUNTAIN TIME ZONE CENTRAL TIME ZONE EASTERN TIME ZONE ATLANTIC TIME ZONE NEWFOUNDLAND TIME	ME ZONE

PRELOADED VARIABLES: EXPTYPE. TSTA	ZUT	

(M6=01	and M9=01)		
Confirm	. TELEPHONE NUMBER: {DISPLAY CP2_TELEPHONE}		
	TIME ZONE: {DISPLAY CP2_TIMEZONE}		
	INTERVIEWER: PRESS 1 TO CONTINUE		
(M6=01	and M9=01)		
M10.	How is that person related to {you/NAME}, if at all?		
	{NAME'S} SPOUSE	01	(M10a)
	{NAME'S} MOTHER	02	(M10a)
	{NAME'S} FATHER	03	(M10a)
	{NAME'S} CHILD	04	(M10a)
	GRANDPARENT OF {NAME}	05	(M10a)
	BROTHER/SISTER (NATURAL/STEP) OF {NAME}	06	(M10a)
	AUNT/UNCLE OF {NAME}	07	(M10a)
	OTHER RELATIVE OF {NAME}	80	(M10_h_Other)
	NOT RELATED	09	(M10_i_oth)
	STAFF AT RESIDENCE	10	(M10a)
	DON'T KNOW	d	(M10a)
	REFUSED	r	(M10a)
	and M9=01 and M10=08)		
M10_h_	oth. INTERVIEWER: PLEASE SPECIFY		
	<open></open>		
	DON'T KNOW		
	REFUSED	r	
0.46 01	11/0 01 11/10 00		
	and M9=01 and M10=09)		
M10_i_0	oth. INTERVIEWER: PLEASE SPECIFY		
	<open></open>		
	DON'T KNOW	d	
	REFUSED	r	
(All)			
M10a.	Thank you very much for taking part in this survey. Because people like you are su		
	we do, I'd like you to think about the survey you just participated in. On a scale from		
	means 'it was not a good use of time' and ten means "it was a good use of time", w and 10 best describes how you feel about your experience today?	nich	number between 1
	and to best describes now you reel about your experience today?		
	 (01-10)		
	(01-10)		
	DON'T KNOW	٦	
	REFUSED		
	NEFUJED	I	
(All)			
	nanks. Thank you for your cooperation. This completes the survey! Thank you aga	in	
1V1 1 1 1 1 1	ianks. Thank you for your cooperation. This completes the survey! Thank you aga	art.	
	PRESS 1 TO CONTINUE	າ1	
	THEOUT TO CONTINUE	٠.	

INTERVIEWER OBSERVATIONS

INTERVIEWER OBSER	VATIONS		
NEW ITEM			
(All) M11a. How was this inte	antique conducted?		
WITTA. HOW WAS UNSTITLE	siview conducted?		
	Over the telephone	01	(M11)
	In person		, ,
	Using TTY		` '
	Other: Specify		` '
	,		· – /
(M11a=04) M11a Other. <i>INTERVIE</i>	EWER: PLEASE SPECIFY		
<ope< td=""><td>N></td><td></td><td></td></ope<>	N>		
(All)			
	: INTERVIEWER OBSERVATIONS:		
WITT: NATERVIEWEN	. INTERVIEWER OBSERVATIONS.		
Who was the re	spondent to this interview?		
INTEDVIEWER	: PLEASE CODE THE PERSON WITH WHOM YOU CONI		TED MOST OF THE
INTERVIEWER	INTERVIEW.	500	TED WOST OF THE
	IIVI LIXVILVV.		
	{NAME} HIMSELF/HERSELF	01	
	PROXY FOR {NAME}		(M13)
		-	(
(M11=01)			
*	ssisted by anyone during this interview? That is, did anyone help	{NAI	ME} in interpreting the
questions or giv	· · · · · · · · · · · · · · · · · · ·	•	, ,
	YES	01	
	NO	00	(M15)
(M11=02 or M12=01)			
	R: IFM12=01 FILL "ASSISTANT" AND IF M11=02 FILL "PROXY"		
How is the {ass	istant/proxy} related to (NAME)?		
INTERVIEWER	: IF MORE THAN ONE ASSISTANT OR PROXY, INDICATE THE		
	ONE YOU CONSIDER TO BE THE MAIN ASSISTANT OR PRO	OXY	
	(NAME(O) OPOLIOE	04	(B.4.4.4)
	(NAME'S) SPOUSE		
	{NAME'S} MOTHER		, ,
	{NAME'S} FATHER		
	{NAME'S} CHILD		, ,
	GRANDPARENT OF {NAME}		
	BROTHER/SISTER (NATURAL/STEP) OF {NAME}		` '
	AUNT/UNCLE OF {NAME}		, ,
	OTHER RELATIVE OF {NAME}		,
	NOT RELATED		,
	STAFF AT RESIDENCE		, ,
	DON'T KNOWREFUSED		, ,

^{*}Note: M14=11 is a category added at R2; value of "other" category (M14=10) maintained for comparability across rounds.

PRELOADED	VARIABL	.ES: E	EXPTYP	E. TST.	ATUS

`	2 or M12=01 and M13=08)		
IVI I 3_II	_oth.		
	<open></open>		
	DON'T KNOW	d	
	REFUSED		
(M11=0	2 or M12=01 and M13=09)		
	oth. <i>INTERVIEWER:</i> PLEASE SPECIFY		
	<open></open>		
	DON'T KNOW	Ч	
	REFUSED		
(M11=0	2 or M12=01)		
M14.	PROGRAMMER: IFM12=01 FILL "ASSISTANT" AND IF M11=02 FILL "PROXY"		
	PROGRAMMER: ONLY DISPLAY RESPONSE OPTION 10, IF M11=02		
	Why was an {assistant/proxy} needed?		
	INTERVIEWER: CODE ALL THAT APPLY.		
	{NAME} DIDN'T KNOW HOW TO ANSWER	01	(M15)
	{NAME} HOSPITALIZED		· · · ·
	{NAME} INSTITUTIONALIZED	03	(M15)
	{NAME} HAS HEARING PROBLEM	04	(M15)
	{NAME} HAS SPEECH PROBLEM	05	(M15)
	{NAME} HAS LANGUAGE PROBLEM		· · · ·
	{NAME} HAS POOR MEMORY OR CONFUSION		
	{NAME} HAS OTHER MENTAL CONDITION		· · · ·
	{NAME} HAS PHYSICAL ILLNESS OR DISABILITY		
	{NAME} FAILED COGNITIVE TEST		(M15)*
	OTHER NON-HEALTH RELATED REASON		(* • • • = \
	DON'T KNOW		(M15)
#A 1.1.	REFUSED		(M15)
*Note:	M14=11 is a new category added at R2 and R3; value of "other" category comparability across rounds.	(IVI14	1=10) maintained for
(M11=0	2 or M12=01 and M14=10)		
M14_j_	oth. INTERVIEWER: PLEASE SPECIFY		
	<open></open>		
	DON'T KNOW	d	
	REFUSED	r	
(All)			
M15.	In general, do you feel the respondent was intellectually capable of responding?		
	YES	01	
	NO	00	
	DON'T KNOW	d	

SECTION M UNIVERSE: ALL VARIABLES NEEDED FROM OTHER SECTIONS: RTYPE, {NAME'S} ADDRESS FROM SECTION A PRELOADED VARIABLES: EXPTYPE, TSTATUS

(All) M16.	In general, do you	u feel the respondent's answers were reasonably accurate?		
		YES	01	
		NO		
		DON'T KNOW		
(All)				
M17.	In general, do you	u feel the respondent understood the questions?		
		YES	01	
		NO	00	
		DON'T KNOW	d	
(All) M18.	In general how ti	ring did the interview seem to be for the respondent?		
WITO.	in gonorai, now in	and the line view doon to be for the respondent.		
		VERY TIRING	01	
		A LITTLE TIRING	02	
		NOT TIRING	03	
		DON'T KNOW	d	
(All)				
M19.	In general, did the	e respondent have difficulty hearing you during the interview?		
		YES	01	
		NO	00	(M21)
		DON'T KNOW		
(M19=01	1)			
M20.	In general, do you	u feel the respondent's hearing difficulty affected the interview?		
		YES	01	
		NO	00	
		DON'T KNOW	d	
(All)				
M21.	INTERVIEWER:	Record any special circumstances encountered while interviewing	ng re	espondent.