**Attachment 1: Proposed ACASI questions (including sexual identity questions) to be tested and respondent debriefing questions administered following full NHIS**

***Note to reviewers: The “Green Arrow Key” refers to the Enter key. A green arrow sticker is placed on the Enter key. The “Red Circle Key” refers to the Space Bar. A red circle sticker is placed on the Space Bar. Finally, the “Blue Arrow Key” is the Tab key. A blue arrow sticker is placed on the Tab key.***

***INSTRUCTIONS AND PRACTICE SESSION QUESTIONS***

**ACASINTR**. READ TO RESPONDENT: Now I will ask you to do an important part of this interview on your own, using the computer and headphones. You will hear questions through the headphones and see them on the computer screen.

FR INSTRUCTION: TURN COMPUTER AND HAND HEADPHONES TO RESPONDENT.

Before you start, you will go through a short practice session. Let me first show you the keys you will use. The practice session that follows will go through what each key does also.

FR INSTRUCTION: WHEN THE RESPONDENT IS READY, ASK THEM TO PRESS “1” TO CONTINUE.

**ACIHEAD**.First I want to make sure you can hear me.I will ask you questions at this level. If you want to change the level of my voice, use the knob that the interviewer showed you.If you have difficulty, ask the interviewer for help. When you are comfortable with the volume, press the Green Arrow Key once.

**ACIINTR1**.We want you to be able to answer the remaining questions in complete privacy. The first questions are for practice. When you are ready to go to the next screen, press the Green Arrow Key.

**ACIINTR2**.You can read the questions on the computer screen and hear them read through the headphones. If you would like to just see the questions on the screen without sound, you can turn off the voice using the knob on the cord. Now press the Green Arrow Key.

**ACIDLIC**. After you hear or read this question, press the Red Circle Key until the circle is on the answer you want, then press the Green Arrow Key.

Did you watch TV in the past 24 hours?

Yes

No

**ACIDOAGN**. You can tell the computer to repeat a question by pressing the Red Circle Key until you are at the question again. Try this now. Then press the Red Circle Key to pick your answer, then press the Green Arrow Key.

Do you own a bicycle?

Yes

No

**ACIBACK**. If you want to change or see your answer to a previous question, you can back up using the Blue Arrow Key. Each time you press this key, the computer will go back one question. Press the Green Arrow Key to continue. Pressing the Green Arrow Key will take you to the next question.

**ACISTART**. You have now completed the practice questions. For the remaining questions, if you are unsure about your answer, please give us your best estimate. If you have any questions, ask your interviewer now. If not, press the Green Arrow Key to begin the questions.

**ACASI QUESTIONS TO BE TESTED**

1. These questions are about you and your neighborhood.

How often do you use a computer?

Never or almost never

Some days

Most days

Every day

 **[If no answer is selected]**

 1a.You did not enter an answer for the question. That is because you:

 Made a mistake and would like to have another chance

 Are not sure how to answer

 Do not want to answer

2. In general, how satisfied are you with the health care you received in the past 12 months?

Very satisfied

Somewhat satisfied

Somewhat dissatisfied

Very dissatisfied

I haven’t had health care in the past 12 months

 **[If no answer is selected]**

 2a.You did not enter an answer for the question. That is because you:

 Made a mistake and would like to have another chance

 Are not sure how to answer

 Do not want to answer

3. About how long have you lived in your present neighborhood?

Less than one year

One to three years

Four to ten years

Eleven to twenty years

More than twenty years

 **[If no answer is selected]**

 3a.You did not enter an answer for the question. That is because you:

 Made a mistake and would like to have another chance

 Are not sure how to answer

 Do not want to answer

4. Please tell us how much you agree or disagree with the following statements about your neighborhood. “People in this neighborhood help each other out.” Would you say:

Definitely agree

Somewhat agree

Somewhat disagree

Definitely disagree

 **[If no answer is selected]**

 4a.You did not enter an answer for the question. That is because you:

 Made a mistake and would like to have another chance

 Are not sure how to answer

 Do not want to answer

5. “There are people I can count on in this neighborhood.” Would you say:

Definitely agree

Somewhat agree

Somewhat disagree

Definitely disagree

 **[If no answer is selected]**

 5a.You did not enter an answer for the question. That is because you:

 Made a mistake and would like to have another chance

 Are not sure how to answer

 Do not want to answer

6. “People in this neighborhood can be trusted.” Would you say:

Definitely agree

Somewhat agree

Somewhat disagree

Definitely disagree

 **[If no answer is selected]**

 6a.You did not enter an answer for the question. That is because you:

 Made a mistake and would like to have another chance

 Are not sure how to answer

 Do not want to answer

7. “This is a close-knit neighborhood.” Would you say:

Definitely agree

Somewhat agree

Somewhat disagree

Definitely disagree

 **[If no answer is selected]**

 7a.You did not enter an answer for the question. That is because you:

 Made a mistake and would like to have another chance

 Are not sure how to answer

 Do not want to answer

**(For men)**

8a.Do you think of yourself as

Gay

Straight, that is, not gay

Bisexual

Something else

I don’t know the answer

 **[If “Something else” is selected]**

By something else, do you mean that…

You are not straight, but identify with another label such as queer, trisexual, omnisexual or pan-sexual

You are transgender, transsexual or gender variant

You have not figured out or are in the process of figuring out your sexuality

You do not think of yourself as having sexuality

You do not use labels to identify yourself

You made a mistake and did not mean to pick this answer

You mean something else

**[If “You mean something else” is selected]**

What do you mean by something else? Please type in your answer and then press the Green Arrow Key.

**[If “I don’t know the answer” is selected]**

By Don’t Know, do you mean that…

You don’t understand the words

You understand the words, but you have not figured out or are in the process of figuring out your sexuality

You mean something else

 **[If “You mean something else” is selected]**

What do you mean by something else? Please type in your answer and then press the Green Arrow Key.

**[If no answer is selected]**

You did not enter an answer for the question. That is because you:

Made a mistake and would like to have another chance

Are not sure how to answer

Do not want to answer

**(For women:)**

8b.Do you think of yourself as

Lesbian or Gay

Straight, that is, not gay

Bisexual

Something Else

I don’t know the answer

**[If “Something else” is selected]**

By something else, do you mean that…

You are not straight, but identify with another label such as queer, trisexual, omnisexual or pan-sexual

You are transgender, transsexual or gender variant

You have not figured out or are in the process of figuring out your sexuality

You do not think of yourself as having sexuality

You do not use labels to identify yourself

You made a mistake and did not mean to pick this answer

You mean something else

**[If “You mean something else” is selected]**

What do you mean by something else? Please type in your answer and then press the Green Arrow Key.

**[If “I don’t know the answer” is selected]**

By Don’t Know, do you mean that…

You don’t understand the words

You understand the words, but you have not figured out or are in the process of figuring out your sexuality

You mean something else

 **[If “You mean something else” is selected]**

What do you mean by something else? Please type in your answer and then press the Green Arrow Key.

**[If no answer is selected]**

You did not enter an answer for the question. That is because you:

Made a mistake and would like to have another chance

Are not sure how to answer

Do not want to answer

9. The next questions ask how worried you are right now about financial matters. How worried are you right now about not having enough money for retirement? Are you…

Very worried

Moderately worried

Not too worried

Not worried at all

 **[If no answer is selected]**

 9a.You did not enter an answer for the question. That is because you:

 Made a mistake and would like to have another chance

 Are not sure how to answer

 Do not want to answer

10. How worried are you right now about not being able to pay medical costs of a serious illness or accident? Are you…

Very worried

Moderately worried

Not too worried

Not worried at all

 **[If no answer is selected]**

 10a.You did not enter an answer for the question. That is because you:

 Made a mistake and would like to have another chance

 Are not sure how to answer

 Do not want to answer

11. How worried are you right now about not being able to maintain the standard of living you enjoy? Are you…

Very worried

Moderately worried

Not too worried

Not worried at all

 **[If no answer is selected]**

 11a.You did not enter an answer for the question. That is because you:

 Made a mistake and would like to have another chance

 Are not sure how to answer

 Do not want to answer

12. How worried are you right now about not being able to pay medical costs for normal healthcare? Are you…

Very worried

Moderately worried

Not too worried

Not worried at all

 **[If no answer is selected]**

 12a.You did not enter an answer for the question. That is because you:

 Made a mistake and would like to have another chance

 Are not sure how to answer

 Do not want to answer

13. How worried are you right now about not having enough money to pay for your children's college? Are you…

Very worried

Moderately worried

Not too worried

Not worried at all

This does not apply to me

 **[If no answer is selected]**

 13a.You did not enter an answer for the question. That is because you:

 Made a mistake and would like to have another chance

 Are not sure how to answer

 Do not want to answer

14. How worried are you right now about not having enough to pay your normal monthly bills? Are you…

Very worried

Moderately worried

Not too worried

Not worried at all

 **[If no answer is selected]**

 14a.You did not enter an answer for the question. That is because you:

 Made a mistake and would like to have another chance

 Are not sure how to answer

 Do not want to answer

15. How worried are you right now about not being able to pay your rent, mortgage, or other housing costs? Are you…

Very worried

Moderately worried

Not too worried

Not worried at all

 **[If no answer is selected]**

 15a.You did not enter an answer for the question. That is because you:

 Made a mistake and would like to have another chance

 Are not sure how to answer

 Do not want to answer

16. How worried are you right now about not being able to make the minimum payments on your credit cards? Are you…

Very worried

Moderately worried

Not too worried

Not worried at all

I don’t have credit cards

 **[If no answer is selected]**

 16a.You did not enter an answer for the question. That is because you:

 Made a mistake and would like to have another chance

 Are not sure how to answer

 Do not want to answer

17. On average, how many hours of sleep do you get in a 24-hour period?

Four hours or less

Five hours

Six hours

Seven hours

Eight hours

Nine hours

Ten hours or more

 **[If no answer is selected]**

 17a.You did not enter an answer for the question. That is because you:

 Made a mistake and would like to have another chance

 Are not sure how to answer

 Do not want to answer

18. In the past week, how often did you have trouble falling asleep?

I didn’t have trouble falling asleep in the past week

One time

Two times

Three times

Four times

Five times

Six times

Seven or more times

 **[If no answer is selected]**

 18a.You did not enter an answer for the question. That is because you:

 Made a mistake and would like to have another chance

 Are not sure how to answer

 Do not want to answer

19. In the past week, how many times did you have trouble staying asleep?

I didn’t have trouble staying asleep in the past week

One time

Two times

Three times

Four times

Five times

Six times

Seven or more times

 **[If no answer is selected]**

 19a.You did not enter an answer for the question. That is because you:

 Made a mistake and would like to have another chance

 Are not sure how to answer

 Do not want to answer

20. In the past week, how many times did you take medication to help you fall asleep or stay asleep?

I did not take medication to help me sleep in the past week

One time

Two times

Three times

Four times

Five times

Six times

Seven or more times

 **[If no answer is selected]**

 20a.You did not enter an answer for the question. That is because you:

 Made a mistake and would like to have another chance

 Are not sure how to answer

 Do not want to answer

21. In the past week, on how many days did you wake up feeling well rested?

I never felt rested

One time

Two times

Three times

Four times

Five times

Six times

Seven or more times

 **[If no answer is selected]**

 21a.You did not enter an answer for the question. That is because you:

 Made a mistake and would like to have another chance

 Are not sure how to answer

 Do not want to answer

22. Now I am going to ask you some questions about feelings you may have experienced over the PAST 30 DAYS.

DURING THE PAST 30 DAYS, how often did you feel

... So sad that nothing could cheer you up?

ALL of the time

MOST of the time

SOME of the time

A LITTLE of the time

NONE of the time

 **[If no answer is selected]**

 22a.You did not enter an answer for the question. That is because you:

 Made a mistake and would like to have another chance

 Are not sure how to answer

 Do not want to answer

23. During the PAST 30 DAYS, how often did you feel

... Nervous?

ALL of the time

MOST of the time

SOME of the time

A LITTLE of the time

NONE of the time

 **[If no answer is selected]**

 23a.You did not enter an answer for the question. That is because you:

 Made a mistake and would like to have another chance

 Are not sure how to answer

 Do not want to answer

24. During the PAST 30 DAYS, how often did you feel

... Restless or fidgety?

ALL of the time

MOST of the time

SOME of the time

A LITTLE of the time

NONE of the time

 **[If no answer is selected]**

 24a.You did not enter an answer for the question. That is because you:

 Made a mistake and would like to have another chance

 Are not sure how to answer

 Do not want to answer

25. During the PAST 30 DAYS, how often did you feel

... Hopeless?

ALL of the time

MOST of the time

SOME of the time

A LITTLE of the time

NONE of the time

 **[If no answer is selected]**

 25a.You did not enter an answer for the question. That is because you:

 Made a mistake and would like to have another chance

 Are not sure how to answer

 Do not want to answer

26. During the PAST 30 DAYS, how often did you feel

...That everything was an effort?

ALL of the time

MOST of the time

SOME of the time

A LITTLE of the time

NONE of the time

 **[If no answer is selected]**

 26a.You did not enter an answer for the question. That is because you:

 Made a mistake and would like to have another chance

 Are not sure how to answer

 Do not want to answer

27. During the PAST 30 DAYS, how often did you feel

...Worthless?

 ALL of the time

MOST of the time

SOME of the time

A LITTLE of the time

NONE of the time

 **[If no answer is selected]**

 27a.You did not enter an answer for the question. That is because you:

 Made a mistake and would like to have another chance

 Are not sure how to answer

 Do not want to answer

**Universe statement: Sample adults 18+ who at least some of the time have felt sad, nervous, restless or fidgety, hopeless, that everything was an effort, or worthless, in the past 30 days.**

28. We just talked about a number of feelings you had during the past 30 days. Altogether, how much did these feelings interfere with your life or activities: a lot, some, a little, or not at all?

A lot

Some

A little

Not at all

 **[If no answer is selected]**

 28a.You did not enter an answer for the question. That is because you:

 Made a mistake and would like to have another chance

 Are not sure how to answer

 Do not want to answer

29. The next question is about the test for HIV, the virus that causes AIDS. Except for tests you may have had as part of blood donations, have you ever been tested for HIV?

Yes

No

 **[If no answer is selected]**

 29a.You did not enter an answer for the question. That is because you:

 Made a mistake and would like to have another chance

 Are not sure how to answer

 Do not want to answer

**RESPONDENT DEBRIEFING QUESTIONS**

1. Answering questions on your own using a recorded voice is one way we can collect data. To help us improve this process, the next few questions ask about your experience using this computer.

Did the interviewer explain how to use this computer?

Yes

No

2. Did you have any difficulty using the keys to choose your answers?

Yes

No

3. Including the practice questions, did you listen to the recorded voice for all of the questions, some of the questions, or none of the questions?

All of the questions

Some of the questions

None of the questions

(Listened to all or some of the questions):

4. Was the recorded voice too slow, too fast, or about the right speed?

Too slow

Too fast

About the right speed

(Listened to all or some of the questions):

5. Did you have any difficulty adjusting the volume?

Yes

No

6. Do you think it was important for this part of the interview to be private?

Yes

No