Appendix D: Online Survey

Potential participants will see the following information on mTurk. Participants from one study will not be shown the advertisements for other studies; participation is limited to one study per person. If the participant clicks the link to the study, they will be forwarded to a screen on SurveyMonkey with the screening questions on one page. Eligible participants will then see the welcome text on the next page; ineligible participants will be shown a “Thank you” screen and the survey will end. Any text shown in italics will not be shown to the participant.

*Recruitment Advertisement*

|  |  |
| --- | --- |
| **Description:** | We'll ask you to answer survey questions related to your experiences as a veteran.  |
| **Keywords:** | survey, research, veterans |
| **Full Description:** | We are conducting a study to improve the way we ask questions in a government survey. We need to understand whether the questions are clear and easy to understand. Select the link below to complete the survey. At the end of the survey, you will receive a code to paste into the box below to receive credit for taking our survey.To be eligible, participants must be:*[FILL WITH ONE CRTIERION PER STUDY/HIT:]** A veteran and have served in the Reserve or National Guard
* Living in a household with a veteran
* A veteran and have a disability
* A veteran and have been released from active duty within the last 10 years

**Make sure to leave this window open as you complete the survey.**When you are finished, you will return to this page to paste the code into the box. |

*Screening Questions 1 – Veteran and Reserve or National Guard:*

*Participants are eligible if they served on active duty and have ever been a member of the Reserve or National Guard.*

**Please answer these two questions to determine whether you are eligible to participate:**

Have you ever served on active duty in the U.S. Armed Forces?

 Yes

 No

Have you ever been a member of the Reserve or National Guard?

 Yes

 No

*Screening Questions 2 –Veteran Proxy Respondents:*

*Participants are eligible if they live with a veteran and are the husband/wife/partner, parent, or adult child of that person.*

 **Please answer these two questions to determine whether you are eligible to participate:**

Do you live with someone who has ever served on active duty in the U.S. Armed Forces?

 Yes

 No

If you do live with a veteran, how are you related to him or her?

 Spouse/Partner

 Child/Grandchild

 Parent

 Brother/Sister/Other relative

 Roommate/Friend

 Other non-relative

*Screening Questions 3 –Veterans with a Disability:*

*During early rounds of data collection, participants are eligible if they are a veteran and have any disability. If needed to find enough veterans with a disability, eligibility during later rounds of data collection will be limited to participants whose disabilities are service-connected.*

**Please answer these [two/three] questions to determine whether you are eligible to participate:**

Have you ever served on active duty in the U.S. Armed Forces?

 Yes

 No

Do you have a physical or mental health condition or impairment that limits your movements, senses, or activities?

 Yes

 No

*Ask if needed in later rounds of data collection:*

Do you have a service-connected disability?

 Yes

 No

*Screening Questions 4 – Recently Separated Veterans:*

*Participants are eligible if they are a veteran and were released from active duty less than 10 years ago.*

 **Please answer these two questions to determine whether you are eligible to participate:**

Have you ever served on active duty in the U.S. Armed Forces?

 Yes

 No

Were you released from active duty more than 10 years ago, that is before December 31, 2010?

 Yes

 No

*---page break---*

*If not eligible, end the survey:*

Thank you for your interest in our survey but you are not eligible to participate.

*---page break---*

*If eligible, start the survey:*

Welcome! Thanks for your interest in our survey. You’re here because we have asked you to participate in our research. We are asking you and hundreds of other people to tell us about what they think.

Unlike some surveys or online tasks you may be familiar with, we ask that you complete this survey all at one time and that you only start once you are in a quiet place where you won't be disturbed. The survey takes about 15 minutes, on average. Only share information you're comfortable with - nothing too personal - but please be honest and follow the instructions.

 Please do not use your browser's back button.

This voluntary study is being collected by the Bureau of Labor Statistics under OMB No. 1220-0141 (Expiration Date: March 31, 2021). Without this currently approved number, we could not conduct this survey. We estimate that it will take on average 15 minutes to complete this survey. Your participation is voluntary, and you have the right to stop at any time. This survey is being administered by SurveyMonkey and resides on a server outside of the BLS Domain. The BLS cannot guarantee the protection of survey responses and advises against the inclusion of sensitive personal information in any response. By proceeding with this study, you give your consent to participate in this study.

*---page break---*

In the first part of this study, you’ll answer a series of questions from a survey for the Bureau of Labor Statistics about how being a veteran affects experiences looking for civilian employment and transitioning to civilian life.

In the second part, you’ll be asked to give your feedback on those questions. This feedback will be used to improve the way we ask the questions in future surveys.

Let’s get started!

*---page break---*

*All participants complete the Roster and Labor Force Items before seeing the following sections depending on their eligibility criteria. After completing the sections, participants are asked the relevant debriefing.*

*1 – Veteran and Reserve or National Guard and*

*4 – Recently Separated Veterans:*

Time in Military

Transition

Employment

*2 –Veteran Proxy Respondents:*

Time in Military

Transition

Employment

General benefits and post-separation

*3 –Veterans with a Disability:*

Time in Military

Disability

Transition

General benefits and post-separation

*Section: Roster*

To start, we need to know a bit about you and your household. We’ll start with you.

What is your age in years?

*Numeric response*

Have you ever served on active duty in the U.S. Armed Forces?

 Yes

 No

*---page break---*

(If served) When did you serve?

September 2001 or later

August 1990 to August 2001

May 1975 to July 1990

Vietnam Era (August 1964 to April 1975)

February 1955 to July 1964

Korean War (July 1950 to January 1955)

January 1947 to June 1950

World War II (December 1941 to December 1946)

November 1941 or earlier

(If served) Are you now in the Armed Forces?

 Yes

 No

*---page break---*

How many other adults (over the age of 18) live in your household?

 *Numeric response*

Have any of those other adults served on active duty in the U.S. Armed Forces?

 Yes

 No

*---page break---*

(If yes other adults in Armed Forces)

Please enter the first name or an initial for another person in your household who has served on active duty in the U.S. Armed Forces.

 *Text response*

What is that person’s age in years?

*Numeric response*

When did he or she serve?

September 2001 or later

August 1990 to August 2001

May 1975 to July 1990

Vietnam Era (August 1964 to April 1975)

February 1955 to July 1964

Korean War (July 1950 to January 1955)

January 1947 to June 1950

World War II (December 1941 to December 1946)

November 1941 or earlier

Is he or she now in the Armed Forces?

 Yes

 No

*---page break---*

*Section: Labor Force*

Please answer the following questions about [yourself/the veteran in your household].

Last week, did (you/he or she) do any work for pay?

 Yes

 No

 Retired

 Disabled

 Unable to work

*---page break---*

(IF WORKED FOR PAY)

What kind of work (do you/does he or she) do, that is, what is (your/his or her) occupation?

*Text response*

(IF NOT WORKED FOR PAY, RETIRED, DISABLED, UNABLE TO WORK)

What are all of the things you have done to find work during the last 4 weeks?

 *Text response*

*---page break---*

(IF NOT WORKED FOR PAY, RETIRED, DISABLED, UNABLE TO WORK)

Please select from this list all of the ways that you looked for work during the last four weeks.

Contacted employer directly/interview

Contacted public employment agency

Contacted private employment agency

Contacted friends or relatives

Contacted school/university employment center

Sent out resumes/filled out applications

Checked union/professional registers

Placed or answered ads

Looked at ads

Attended job training programs/courses

I did not do anything to look for work

Other

*---page break---*

*Section: Time in Military*

Now we have a few questions to ask you about [your/the veteran in your household’s] military service.

(IF SERVED DURING VIETNAM ERA, PEAFWHN = 4)

(Were you/Was he or she) on active duty in Vietnam, Laos, or Cambodia; in the waters in or around these countries; or did you fly missions over these areas at any time between February 28, 1961 and May 7, 1975?

 Yes

 No

Don’t know

Prefer not to say

(IF SERVED RECENTLY, PEAFWHN = 1)

Did (you/he or she) serve on active duty on the ground, in the air, or at sea in Iraq, Afghanistan, or any other conflict zone at any time since October 1, 2001?

Yes

No

Don’t know

Prefer not to say

Did (you/he or she) EVER serve in a combat or war zone? Persons serving in a combat or war zone often receive combat zone tax exclusion, Imminent Danger Pay, or Hostile Fire Pay.

 Yes

 No

 Don’t know

 Prefer not to say

In total, how long did (you/he or she) serve on active duty in the Armed Forces?

6 months or less

More than 6 months, less than 2 years

2 to 3 years

4 to 5 years

6 to 9 years

10 to 14 years

15 to 19 years

20 years or more

Don’t know

Prefer not to say

In what year (were you/was he or she) LAST released from active duty?

If you are not sure, enter “Don’t know”.

If you prefer not to say, enter “Prefer not to say”.

 *Text response*

From which branch of the Armed Forces (were you/was he or she) last released from active duty?

Army

Air Force

Navy

Marine Corps

Coast Guard

Don’t know

Prefer not to say

Was (your/his or her) LAST period on active duty a result of a call-up from the Reserve or National Guard?

Yes

No

Don’t know

Prefer not to say

*---page break---*

(IF LAST PERIOD WAS RESERVE OR NATIONAL GUARD)

Was that the Reserve or National Guard?

Reserve

National Guard

 Don’t know

 Prefer not to say

(IF LAST ACTIVE DUTY WAS NOT RESERVE OR NATIONAL GUARD)

Was any of (your/his or her) active service the result of a call-up from the Reserve or National Guard?

 Yes

 No

 Don’t know

 Prefer not to say

(IF NO RESPONSES SO FAR INDICATE RESERVE OR NATIONAL GUARD)

(Have you/Has he or she) ever been a member of the Reserve or National Guard?

 Yes

 No

 Don’t know

 Prefer not to say

*---page break---*

(IF RESPONSES INDICATE EVER RESERVE OR NATIONAL GUARD)

(Are you/Is he or she) currently a member of the Reserve or National Guard?

 Yes

 No

Don’t know

Prefer not to say

*---page break---*

What was (your/his or her) rank at separation?

If you are not sure of the rank, give your best guess.

 *Text response*

*---page break---*

*Section: Disability*

Has the Department of Veterans Affairs or Department of Defense determined that (you have/he or she has) a service-connected disability; that is, a health condition or impairment caused or made worse by military service?

 Yes

 No

 Don’t know

 Prefer not to say

*---page break---*

*Skip to next Section if no disability or don’t know if have disability*

What is (your/his or her) current service-connected VA disability rating?

If you are not sure of the percentage, give your best guess.

 0 percent

1-29 percent

30-49 percent

50-69 percent

70-99 percent

100 percent

Don’t know

Prefer not to say

(Do you/Does he or she) currently receive a monthly payment for a service connected disability from either the VA or a branch of the military service?

 Yes

 No

 Don’t know

 Prefer not to say

*---page break---*

(IF DISABILITY RATING = 0-99 PERCENT)

(Do you/Does he or she) receive Individual Unemployability from the VA, or has the VA found (you/him or her) to be unemployable?

 Yes

No

 Don’t know

 Prefer not to say

*---page break---*

(IF RECEIVE INDIVIDUAL UNEMPLOYABILITY)

(Are you/Is he or she) working anyway?

Yes

 No

 Prefer not to say

*---page break---*

(IF WORKING ANYWAY)

For what reasons (are you/is he or she) working?

If you are not sure, enter “Don’t know”.

If you prefer not to say, enter “Prefer not to say”.

 *Open text response*

Did (your/his or her) service connected disability ever prevent (you/him or her) from getting or holding a job in the past?

 Yes

 No

 Don’t know

 Prefer not to say

*---page break---*

(IF DISABILITY DOES NOT PREVENT THEN SKIP TO NEXT SECTION)

Does this disability currently keep (you/him or her) from getting or holding a job?

 Yes

 No

 Don’t know

 Prefer not to say

*---page break---*

(IF CURRENTLY NOT EMPLOYED AND DUE TO DISABILITY)

What was the last year during which (you/he or she) worked at a job or business?

If you are not sure, enter “Don’t know”.

If you prefer not to say, enter “Prefer not to say”.

 *Text response*

*---page break---*

*Section: Employment*

(Were you/Was he or she) released from active duty more than 10 years ago, that is before December 31, 2010?

Yes

No

Don’t know

 Prefer not to say

*---page break---*

*If released more than 10 years ago, then skip to next section.*

Since LAST leaving active duty, (have you/has he or she) ever used any employment services to assist with preparing for or finding a job?

 Yes

 No

 Don’t know

 Prefer not to say

*---page break---*

*If did not use any employment service, skip to question about job training.*

Which services did (you/he or she) use? Please select all that apply.

 Veterans Administration website or center

 State workforce or employment website or office

Non-profit organization – please specify

 Other – please specify

 Don’t know

 Prefer not to say

*---page break---*

(IF USED VA)

Which types of VA employment services did (you/he or she) use at least once? Please select all that apply.

Web-based services

Telephone services

 In-person services

 Don’t know

 Prefer not to say

(IF USED STATE)

Which types of State employment services did (you/he or she) use at least once? Please select all that apply.

Web-based services

Telephone services

 In-person services

 Don’t know

 Prefer not to say

(IF USED ANY EMPLOYMENT SERVICE BUT NOT STATE)

You reported that (you/he or she) did not use your state’s employment office. Why did (you/he or she) choose not to?

 *Text response*

Since LAST leaving active duty, (have you/has he or she) tried to obtain ANY formal job training or job-related schooling?

 Yes

 No

 Don’t know

 Prefer not to say

What type of training or schooling was it?

 *Text response*

*---page break---*

*If did not try to obtain training or schooling, skip to next page.*

Did (you/he or she) find training or schooling that met (your/his or her) needs?

Yes

 No

 Don’t know

 Prefer not to say

(Were you/Was he or she) able to complete the training or schooling?

 Yes

 No

 Don’t know

 Prefer not to say

*---page break---*

(IF NOT ABLE TO BEGIN)

What was the main reason (you weren’t/he or she wasn’t) able to complete the training or schooling?

If you are not sure, enter “Don’t know”.

If you prefer not to say, enter “Prefer not to say”.

 *Text* *response*

How useful would additional training, school, or an apprenticeship be for finding new employment or improving (your/his or her) current employment situation?

 Very useful

 Somewhat useful

Not at all useful

 Don’t know

 Prefer not to say

*---page break---*

(IF TRAINING USEFUL)

Currently, would (you/he or she) prefer training, school, or an apprenticeship?

 Training

 School

 Apprenticeship

 Don’t know

 Prefer not to say

*---page break---*

*Section: Transition*

(IF NOT CURRENTLY IN ARMED FORCES)

Earlier it was reported that (you are/he or she is) no longer in the Armed Forces. Did (you/he or she) separate from the Armed Forces more than 10 years ago, that is before December 31, 2010?

Yes

No

Don’t know

 Prefer not to say

*---page break---*

*If separated more than 10 years ago, skip to next section.*

Did (you/he or she) retire from the Armed Forces?

Yes

No

Don’t know

 Prefer not to say

*---page break---*

(IF RETIRED)

Did (you/he or she) retire due to a medical reason, length of service, or some other reason?

Medical reason

Length of service

 Other reasons – please specify

Don’t know

 Prefer not to say

What was (your/his or her) military occupational specialty, or MOS, at separation?

If you are not sure, enter “Don’t know”.

If you prefer not to say, enter “Prefer not to say”

 *Text response*

(Do you/Does he or she) consider this (your/his or her) primary MOS?

 Yes

 No

 Don’t know

 Prefer not to say

*---page break---*

(IF NOT PRIMARY MOS)

What was (your/his or her) primary MOS?

If you are not sure, enter “Don’t know”.

If you prefer not to say, enter “Prefer not to say”

 *Text* *response*

Did (you/he or she) apply for civilian employment, before or immediately upon separation?

 Yes

 No

 Don’t know

 Prefer not to say

*---page break---*

(IF DID NOT APPLY)

Did (you/he or she) not want a job, return to a previous job, or something else?

 Not want a job

 Return to a previous job

 Something else – please specify

 Don’t know

 Prefer not to say

(IF DID APPLY)

How soon after separation (were you/was he or she) offered a civilian job that (you/he or she) eventually accepted?

Before separation

 Within 2 weeks

 Within 2-4 weeks

 Within 1-3 months

 More than 4 months

 Have not been offered a civilian job

 Don’t know

 Prefer not to say

*---page break---*

(IF EMPLOYED AND OFFERED A CIVILIAN JOB)

Is this the same job (you have/he or she has) now?

 Yes

 No

 Don’t know

 Prefer not to say

(IF OFFERED A CIVILIAN JOB)

Compared to (your/his or her) expectations, how long did it take to find that job?

Much longer than expected

Somewhat longer than expected

About as long as expected

Somewhat faster than expected

Much faster than expected

Don’t know

 Prefer not to say

(IF OFFERED A CIVILIAN JOB)

Compared to (your/his or her) expectations, how high [are/were] the wages for that job?

Much higher than expected

Somewhat higher than expected

About the same as expected

Somewhat lower than expected

Much lower than expected

Don’t know

 Prefer not to say

(IF OFFERED A CIVILIAN JOB)

Compared to (your/his or her) expectations, how long [are/were] the work hours for that job?

Much longer than expected

Somewhat longer than expected

About as long as expected

Somewhat faster than expected

Much faster than expected

Don’t know

 Prefer not to say

(IF CURRENTLY EMPLOYED)

(Do you/Does he or she) feel ‘underemployed’, that is, (do you/does he or she) believe that a different job would be a better fit for (your/his or her) skills, education, and experience?

 Yes

 No

 Don’t know

 Prefer not to say

(IF CURRENTLY EMPLOYED)

(Do you/Does he or she) use the technical skills that (you/he or she) acquired in (your/his or her) military occupation in (your/his or her) current civilian job?

 Yes

 No

 Don’t know

 Prefer not to say

Overall, (do you/does he or she) feel that your military service has improved (your/his or her) ability to work as a civilian?

 Yes

 No

 Don’t know

 Prefer not to say

At what age (do you/does he or she) plan to retire from the workforce?

If you are not sure, enter “Don’t know”.

If you prefer not to say, enter “Prefer not to say”.

 *Text response*

*---page break---*

*Section: Benefits and Post-Separation*

(Are you/Is he or she) currently receiving any military or government benefits?

 Yes

 No

 Don’t know

 Prefer not to say

*---page break---*

(IF RECEIVING)

What benefits?

If you are not sure, enter “Don’t know”.

If you prefer not to say, enter “Prefer not to say”.

 *Text response*

Did (you/he or she) receive any GI Bill benefits?

 Yes

 No

 Don’t know

 Prefer not to say

*---page break---*

(IF RECEIVED GI)

How (have you/has he or she) used the benefits or how (do you/does he or she) plan to use them? Select all that apply.

For self

For a child

For a spouse

For another dependent

 Don’t know

 Prefer not to say

What is the highest level of school completed or highest degree (you/he or she) has received?

No schooling completed

Elementary school diploma

High school diploma or the equivalent (GED)

Associate degree

Bachelor’s degree

Master’s degree

Professional or doctorate degree

 Don’t know

 Prefer not to say

Was that degree awarded before or after (you/he or she) separated from the military?

 Before separation

 After separation

 Don’t know

 Prefer not to say

Was the degree awarded before (you/he or she) entered military service?

 Before entered military

 After entered military

 Don’t know

 Prefer not to say

(Have you/Has he or she) ever been married?

Yes

No

Don’t know

 Prefer not to say

*---page break---*

(IF EVER MARRIED)

(Were you/Was he or she) married at any time while (you were/he or she was) serving in the Armed Forces?

Yes

No

Don’t know

 Prefer not to say

(IF EVER MARRIED)

During or at any time after (your/his or her) military service, did (your/his or her) spouse or ex-spouse experience any trouble finding or keeping a job that he or she wanted, or enrolling in school or training?

 Yes

 No

 Don’t know

 Prefer not to say

*--- page break ---*

Thanks for those responses. Now we’d like to get your feedback about what it was like to answer those questions.

*Debriefing – For participants who responded as having a disability*

Are there any aspects of the experience of being a veteran with a disability that we should have asked about but did not?

 *Text response*

Please suggest any topics or questions you think should be asked in order for us to understand any difficulties that veterans with disabilities face, especially regarding finding and keeping a civilian job.

 *Text response*

*Debriefing – Transition*

Are there any aspects of the transition to civilian life that we should have asked about but did not?

 *Text response*

Please suggest any topics or questions you think should be asked in order for us to understand how to better serve veterans during transition.

 *Text response*

*Debriefing – Employment*

Are there any aspects of the process of finding and keeping a civilian job that we should have asked about but did not?

 *Text response*

Please suggest any topics or questions you think should be asked in order for us to understand how to better help veterans find and keep jobs.

 *Text response*

*Debriefing – General benefits and post-separation*

Are there any benefits or services for veterans that you would like to have but that we did not ask about? Please include the need for the benefit or service.

 *Text response*

Are there any aspects of family employment and health that we should have asked about but did not?

 *Text response*

Please suggest any topics or questions you think should be asked in order for us to understand the challenges faced by veteran’s families.

 *Text response*

*Debriefing – Proxy respondents*

How knowledgeable are you about the information we asked for about the veteran in your household?

Very knowledgeable

 A little knowledgeable

 Not at all knowledgeable

How frequently did you select “Don’t Know” for a response even though you had some knowledge of what the question was asking about?

 Very frequently

 Somewhat frequently

 Almost never

 Did not select “Don’t Know” for a response during the survey

If you responded “Prefer not to say” at any time during the survey, which of the following best describes why you selected that response?

 I thought the veteran would not want me to provide the answer

I thought that the question was inappropriate or should not have been asked

 I did not know the answer

 Other – please specify (*text response*)

*--- page break ---*

And now a few final questions about you.

What is your age?

[open numeric text]

What is your sex?

Male

Female

Are you of Hispanic, Latino, or Spanish origin?

Yes

No

What is your race? You may choose one or more races.

White

Black or African American

American Indian or Alaska native

Asian

Native Hawaiian or Pacific Islander

*---page break---*

Thank you! You are done with the survey.

We appreciate your time and responses. If you have any other feedback for us, please leave it here (optional):

 *Text response*

Your completion code is: [FILL]. Please copy and paste this code into the mTurk window to confirm your participation in this study.