

## **ASK U.S. PILOT BASELINE QUESTIONNAIRE**

MODE = WEB, PHONE (inbound only), or IN-PERSON (nonresponse follow-up in pilot only)

LANGUAGE = ENGLISH, SPANISH

**PROGRAMMER NOTE:** Selected individuals will be able to move directly from the Screener into the Baseline Questionnaire. Selected individuals who do not complete the screener will be mailed an invitation to complete the questionnaire via web link or in-bound CATI. Web link will divert to either English or Spanish page with a toggle to switch to the other. Phone or in-person interviewer will choose language.

DEFINE QUEX\_LANG = questionnaire language with SP = Spanish or EN = English  
Defined per language-specific page chosen via link or by interviewer.  
Reclassify QUEX\_LANG = EN to QUEX\_LANG = SP if interview switched but not otherwise.

**[END BASELINE]** Do not allow WEB participants back into the baseline.

**PROGRAMMER NOTE:** All questions are classified optional unless otherwise specified as “required.”

For PHONE and IN-PERSON, include volunteered “DK” and “REF” response options on all questions.

For WEB display DK/REF options if respondent advances without answering question.

**PROGRAMMER NOTE:** For any questions that ask for any of the following and the respondent enters an invalid response, display the following error message:

Email: “Please enter a valid email address.”

Phone number: “Please enter a valid phone number, including the area code.”

Zip code: “Please enter a valid 5-digit zip code”

**CONSENT INTRO.** First, I need to provide you with some information about the Ask U.S. Pilot Panel, your rights as a respondent, and how we are going to protect your privacy. Also, this call may be monitored or recorded for quality assurance.

**CONSENT.**

**Description and Purpose of the Ask U.S. Panel Pilot:** The Ask U.S. Panel pilot is a large nationally representative survey panel pilot led by the U.S. Census Bureau. The purpose of the Ask U.S. Panel pilot is to track public opinion on a variety of topics of interest to numerous federal agencies and their partners, and for conducting experimentation on alternative question wording and methodological approaches. A key objective of the Panel will be to produce representative and reliable statistics on a rapid turnaround suitable for use by federal agencies. The Panel will ensure availability of frequent data collection for nationally representative estimates on a variety of topics and a variety of subgroups of the population. The panel pilot also will test feasibility and procedures that may be used to develop and implement future panels. The pilot will consist of individuals and households living across the U.S. that have agreed to be contacted and invited to participate in surveys led by the U.S. Census Bureau and other federal statistical agencies.

**Privacy Act Statement:** The legal authority for the Ask U.S. Panel Pilot is provided under 13 U.S.C §§ 8(b), 131, 141, 161, 181, 182, and 193; 49 U.S.C. § 329; the Education Sciences Reform Act of 2002, 20 U.S.C. §9543, Section 1110(a) of the Social Security Act as amended, 42 U.S.C. 1310(a); 7 U.S.C. § 3318; 7 U.S.C. 2204(a); Section 306 of the Public Health Service Act, 42 U.S.C. 242k; and 10 U.S.C. § 1782.

The U.S. Census Bureau is conducting this survey in partnership with the Economic Research Service of the USDA, Food and Nutrition Service of the USDA, Social Security Administration, National Center for Education Statistics, National Center for Health Statistics, Department of Labor, the Department of Defense, and the Department of Transportation (partner agencies).

Personally identifiable information (PII) collected includes: Name, Address, Telephone/cell phone number, Date of Birth or age, Email address, Race or ethnicity, and Unique Identifier (Code).

Your privacy is protected by the Privacy Act of 1974 (5 U.S.C. § 552a), Disclosure and use of this information are subject to the published routine uses identified in the Privacy Act System of Records Notice COMMERCE/Census-3 Demographic Survey Collection (Census Bureau Sampling Frame); COMMERCE/Census-5 (Decennial Census Program); and COMMERCE/Census-7 Demographic Survey Collection (non-Census Bureau Sampling Frame). Partner agencies may provide PII to the Census Bureau under the Privacy Act ((5 U.S.C. § 552a(b)(4)). All PII will be secured by staff (employees and contractors) that have received training on privacy and confidentiality laws, policies, and practices. Access to the information that you provide is restricted to authorized personnel. The information will be shared only with staff, contractors, and non-Census sponsors that are authorized and have a need to know.

Furnishing this information is voluntary. Failure to do so will result in the Census Bureau's inability to create a robust probability-based nationwide survey panel.

**Sponsor:** The Ask U.S. Panel pilot is sponsored by the U.S. Census Bureau in partnership with partner agencies listed above. RTI International, a not-for-profit research organization, is establishing and maintaining the panel pilot under a cooperative agreement awarded by the Census Bureau pursuant to the Consolidated Appropriations Act of 2021, Public Law 116-260, Section 110. The Census Bureau will provide reports and other statistical products on the results of the panel collection to partner agencies, as authorized by 13 U.S.C. 8(b).

**Procedures:** This is a panel pilot that will test procedures and feasibility for future panels. Your participation in the panel pilot will last up to 1 year, during which time you will be asked to complete a 20-minute enrollment survey, followed by an additional 15-minute survey later in 2022.

**Financial Considerations:** Participation in the Ask U.S. Panel pilot will involve no cost to you. For completing the baseline questionnaire to enroll in the Ask U.S. Panel pilot, you will receive \$20. Once enrolled in the panel, you will receive \$10.00 for completing an additional 15-minute panel survey later in 2022.

**Voluntary Participation:** Your participation in the panel pilot is completely voluntary. While your responses are very important to us, you can refuse to answer any and all questions, or choose not to participate in future surveys. You can also elect to leave the panel pilot at any time.

**Possible Benefits and Risks:** There are no direct benefits to you for participating in the panel pilot. The potential exists for loss of privacy, though our procedures are designed to protect and secure your personal information. Please see the Privacy section above for details on the procedures in place to protect your privacy.

**Further Questions:** If you have any questions about the research now or in the future, including the surveys, you can contact the Ask U.S. Panel pilot project team at [askuspanel@rti.org](mailto:askuspanel@rti.org) or at 1-866-558-0774 from 9:00 am-12:00 am Monday through Thursday, 9:00 am-11:00 pm on Fridays, 10:00 am-9:00 pm on Saturdays, and 1:30 pm-11:00 pm on Sundays (EST). If you have any questions or concerns about your rights as a research subject, you may call the University of Southern Maine Office of Research Integrity and Outreach at (207) 780-4517 and/or email [usmorio@maine.edu](mailto:usmorio@maine.edu).

[IF PHONE OR IN-PERSON] Do you agree to enroll in the Ask U.S. Panel pilot and receive an invitation to a future Ask U.S. Panel pilot survey?

- 1 YES
- 2 NO [GO TO OUTRO]

[IF WEB] By clicking “Next” below, you are agreeing to enroll in the Ask U.S. Panel pilot and receive an invitation to a future Ask U.S. Panel pilot survey.

**LINK1.** Thank you for agreeing to join this panel pilot. Your participation in this survey and other surveys you receive as a panel member will provide valuable information to federal statistical agencies, such as the U.S. Census Bureau, the Bureau of Labor Statistics, and the National Center for Health Statistics.

We can learn more from the information you provide in this survey if you give your permission to combine your answers with your data collected by other government agencies. Do we have your permission to combine these data?

1. [IF PHONE OR IN-PERSON: YES] [IF WEB: Yes]
2. [IF PHONE OR IN-PERSON: YES] [IF WEB: Yes]

In the previous survey, you provided some information about yourself and those living in your household. We'd now like to ask you for a little more information about you and others living in your home.

## **HH ROSTER**

[IF 2 PEOPLE SELECTED FROM HOUSEHOLD, ASK HH ROSTER QUESTIONS ONLY IF THE QUESTIONS HAVE NOT ALREADY BEEN COMPLETED]

**ROSTER1.** Among the people living with you, how many are ages 16 to 17 years old?

\_\_\_\_\_ # of children 16 to 17 years old [RANGE: 0 – 12]

**ROSTER2.** Among the people living with you, how many are ages 12 to 15 years old?

\_\_\_\_\_ # of children 12 to 15 years old [RANGE: 0 – 12]

**ROSTER3.** Among the people living with you, how many are less than 12 years old?

\_\_\_\_\_ # of children 0 to 11 years old [RANGE: 0 – 12]

**PROGRAMMER NOTE:** Questions ROSTER1 – ROSTER3 required.

**ROSTER4.** What sex were you assigned at birth, on your original birth certificate?

1. Male
2. Female

**ROSTER4a.** Do you currently describe yourself as [IF MODE=WEB: male, female, or transgender] [IF MODE=PHONE OR IN-PERSON: male, female, transgender, or some other way]?

1. Male
2. Female
3. Transgender
4. Other (Please specify:\_\_\_\_\_)

DEFINE HHNUMBER: Total number of people in household  
HHNUMBER=R4 (SCREENER) + ROSTER1 + ROSTER2 + ROSTER3

DEFINE CHILDNUMBER: Total number of children in the household  
CHILDNUMBER=ROSTER1 + ROSTER2 + ROSTER3

[IF HHNUMBER>1] Now we'd like to ask for some more information about the people who live here.

**ROSTER5.** [IF CHILDNUMBER=1]. What is the first name of the child who lives in this household?

\_\_\_\_\_

[IF CHILDNUMBER>1] First, we need some information about the children in this household. Let's start with the oldest and work down to the youngest.

What is the first name of the [oldest/next oldest] child in this household?

\_\_\_\_\_

**PROGRAMMER NOTE:** ADD TO NAMEFILL (DEFINED IN SCREENER) NAME(S) PROVIDED IN ROSTER5.

**ROSTER6.** [IF HHNUMBER >1] What is [NAMEFILL]'s month and year of birth?

\_\_ Month [RANGE: 1-12] \_\_\_\_ Year [RANGE: 1911-2021]

**ROSTER7.** [IF HHNUMBER > 1] How is [NAMEFILL] related to you?

1. Opposite-sex husband/wife/spouse
2. Opposite-sex unmarried partner
3. Same-sex husband/wife/spouse
4. Same-sex unmarried partner
5. Biological son or daughter
6. Adopted son or daughter
7. Stepson or stepdaughter
8. Brother or sister
9. Father or mother
10. Grandchild
11. Parent-in-law
12. Son-in-law or daughter-in-law
13. Other relative
14. Roommate or housemate
15. Foster child
16. Other nonrelative

**ROSTER8a.** [IF HH NUMBER > 1] To the best of your knowledge, was [NAMEFILL] 's sex recorded as male or female at birth?

1. [IF PHONE OR IN-PERSON: MALE] [IF WEB: Male]
2. [IF PHONE OR IN-PERSON: FEMALE] [IF WEB: Female]

**ROSTER8b.** [IF HH NUMBER > 1] To the best of your knowledge, does [NAMEFILL] describes themselves as [IF MODE=WEB: male, female, or transgender] [IF MODE=PHONE OR IN-PERSON: male, female, transgender, or some other way]?

1. [IF PHONE OR IN-PERSON: MALE] [IF WEB: Male]
2. [IF PHONE OR IN-PERSON: FEMALE] [IF WEB: Female]
3. [IF PHONE OR IN-PERSON: TRANSGENDER] [IF WEB: Transgender]
4. [IF PHONE OR IN-PERSON: SOMETHING ELSE (PLEASE SPECIFY: \_\_\_\_\_)] [IF WEB: Something else (Please specify: \_\_\_\_\_)]

**PROGRAMMER NOTE:** REPEAT ROSTER6 – ROSTER8b [HHNUMBER – 2] times.

## LANGUAGE (ACS)

**LANG1.** [IF LANGUAGE=ENGLISH] Do you speak a language other than English at home?

1. [IF PHONE OR IN-PERSON: YES] [IF WEB: Yes]

2. [IF PHONE OR IN-PERSON: NO] [IF WEB: No]

**LANG2.** [IF LANG1=1 AND LANGUAGE=ENGLISH] What language other than English do you speak at home?

\_\_\_\_\_ [MAX 50 CHARACTERS]

**LANG3.** [IF (LANG1=1 AND LANGUAGE=ENGLISH) | LANGUAGE=SPANISH] How well do you speak English?

- 1. Very well
- 2. Well
- 3. Not well
- 4. Not at all

### PROXY REPORTING

**PROX1.** [IF R4 (SCREENER)>1] For the following topics, please rate, on average, how **willing** you are to report this information for **every adult** in your household:

|                                  | Very willing            | Somewhat willing        | Not very willing        | Not at all willing      |
|----------------------------------|-------------------------|-------------------------|-------------------------|-------------------------|
| a. Income                        | 4 <input type="radio"/> | 3 <input type="radio"/> | 2 <input type="radio"/> | 1 <input type="radio"/> |
| b. Job search activities         | <input type="radio"/>   | <input type="radio"/>   | <input type="radio"/>   | <input type="radio"/>   |
| c. Political party affiliation   | <input type="radio"/>   | <input type="radio"/>   | <input type="radio"/>   | <input type="radio"/>   |
| d. Dietary needs and preferences | <input type="radio"/>   | <input type="radio"/>   | <input type="radio"/>   | <input type="radio"/>   |

**PROX2a.** [IF R4 (SCREENER)>1] For the following topics, please rate, on average, how **accurately** you could report this information for **every adult** in your household. How accurately could you report this information for [NAMEFILL]?

|                          | Very accurately         | Somewhat accurately     | Not very accurately     | Not at all accurately   |
|--------------------------|-------------------------|-------------------------|-------------------------|-------------------------|
| a. Income                | 4 <input type="radio"/> | 3 <input type="radio"/> | 2 <input type="radio"/> | 1 <input type="radio"/> |
| b. Job search activities | <input type="radio"/>   | <input type="radio"/>   | <input type="radio"/>   | <input type="radio"/>   |

- |                                  |                       |                       |                       |                       |
|----------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| c. Political party affiliation   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| d. Dietary needs and preferences | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

**PROGRAMMER NOTE:** REPEAT PROX2a R4 (SCREENER) -2 times.

## TRANSIENCE

**TRAN1.** In the last 2 years, how many times have you moved, either temporarily or permanently? *If you moved seasonally, e.g. into a college dorm each fall, count each move separately.*

\_\_\_\_\_ (number of times) [RANGE: 0 – 24]

**TRAN2.** How long have you lived at your current address?

\_\_\_ Years    \_\_\_\_\_ Months [RANGE: 0 – 11]

**PROGRAMMER NOTE:** If Years=0 AND Months=0, display error message: "Either Years or Months must be greater than 0, they cannot both be 0."

## CONTACT

**CON1a.** [IF NOT MISSING EMAILFILL (SCREENER)] We usually send updates, notifications, and survey links via email. The email address we have on record for you is [EMAILFILL]. Is this the best email for us to use to reach you?

1. [IF PHONE OR IN-PERSON: YES] [IF WEB: Yes]
2. [IF PHONE OR IN-PERSON: NO] [IF WEB: No]

**CON1b.** [IF MISSING EMAILFILL (SCREENER)] We usually send updates, notifications, and survey links via email. Do you have an email address you can use for this purpose?

1. [IF PHONE OR IN-PERSON: YES] [IF WEB: Yes]
2. [IF PHONE OR IN-PERSON: NO] [IF WEB: No]

**CON2.** [IF CON1a=2 | CON1b=1] What is the best email address for us to reach you?

\_\_\_\_\_ [MAX OF 50 CHARACTERS]



**CON2a.** [IF EMAIL PROVIDED IN CON2 = EMAIL PROVIDED BY OTHER HOUSEHOLD MEMBER] This information is important so we can contact you about the next survey in this study. Please enter your own, unique email address. If you do not have your own email address, please be sure to enter an accurate phone number in the next question.

\_\_\_\_\_ [MAX OF 50 CHARACTERS]

**CON3a.** [IF NOT MISING R16\_CELL PHONE (SCREENER)] We can also send updates, notifications, and survey links via text message. The cell phone number we have on record for you is [R16\_CELL PHONE]. Is this the best cellphone number for us to use to reach you?

1. [IF PHONE OR IN-PERSON: YES] [IF WEB: Yes]
2. [IF PHONE OR IN-PERSON: NO] [IF WEB: No]

**CON3b.** [IF MISSING R16\_CELL PHONE (SCREENER)] We can also send updates, notifications, and survey links via text message. Do you have a cellphone you can use for this purpose?

1. [IF PHONE OR IN-PERSON: YES] [IF WEB: Yes]
2. [IF PHONE OR IN-PERSON: NO] [IF WEB: No]

**CON4.** [IF CON3a=2 | CON3b=1] What is the best cellphone number for us to reach you?

\_\_\_\_\_ [MAX 10 NUMBERS]

**CON4a.** [IF PHONE NUMBER PROVIDED IN CON4 = PHONE NUMBER PROVIDED BY OTHER HOUSEHOLD MEMBER] This information is important so we can contact you about the next survey in this study. Please enter your own, unique phone number. If you do not have your own phone number, please be sure you have entered an accurate email address in the previous questions.

\_\_\_\_\_ [MAX 10 NUMBERS]

**CON5.** How would you prefer we contact you?

1. Email
2. Text message

**PROGRAMMER NOTE:** PROGRAM CON5 AS MULTI-SELECT.

## INTERNET ACCESS

Now, we have some questions about your access to and use of the internet.

**INT1:** Do you use the Internet at home? This includes accessing the Internet with a cell phone, computer, tablet, or other device.

1. [IF PHONE OR IN-PERSON: YES] [IF WEB: Yes]
2. [IF PHONE OR IN-PERSON: NO] [IF WEB: No]

**INT2:** [IF INT1=2] What are the reasons why you do not use the Internet at home? Please [IF PHONE OR IN-PERSON: tell me] [IF WEB: select] all that apply.

1. Don't need it or not interested
2. Can't afford it
3. Not worth the cost
4. Can use it elsewhere
5. Not available in area
6. No computing device, or device inadequate or broken
7. Online privacy or cybersecurity concerns
8. Personal safety concerns
9. Household moved or is in the process of moving
10. Other: \_\_\_\_\_

**INT3.** [IF INT1=1] How frequently do you use the Internet in your home? *This includes accessing the Internet through a cell phone, computer, or tablet.*

1. Daily
2. At least once a week
3. At least once a month
4. Less than once a month
5. Never

**INT4** [IF INT3=1|2|3|4] Which of the following devices do you usually use to access the internet? Please [IF PHONE OR IN-PERSON: tell me] [IF WEB: select] all that apply.

1. A computer
2. A tablet
3. Smartphone or cell phone
4. Other device: \_\_\_\_\_

**INT5** [IF INT3=1|2|3|4] Do you have access to the Internet using a:

Please [IF PHONE OR IN-PERSON: tell me] [IF WEB: select] all that apply.

1. Cellular data plan for a smartphone or other mobile device?
2. Broadband (high speed) Internet service such as cable, fiber optic, or DSL service installed in this household?
3. Satellite Internet service installed in this household?
4. Dial-up Internet service installed in this household?
5. Some other service? (Specify: \_\_\_\_\_)

**INT6.** Overall, would you say you can access the internet whenever you need to?

1. [IF PHONE OR IN-PERSON: YES] [IF WEB: Yes]
2. [IF PHONE OR IN-PERSON: NO] [IF WEB: No]

[IF INT1=2 OR (INT3=4|5 AND (INT5=4|5 AND INT6=2)] Based on your responses to these questions, we would like to offer an internet-enabled tablet computer to facilitate your participation in the Ask U.S. Panel. Your participation is important, and we want to make sure you have every opportunity to join and participate in future web surveys. If you accept this offer, we will provide you a tablet at no cost to you. The tablet will be equipped with an unlimited data plan that will be managed and paid for by RTI. The tablet will also come with simple instructions to help get you started, and helpdesk support in the event you have any difficulties using the tablet.

**INT7.** Would you like to receive a tablet to use to complete Ask U.S. Panel surveys?

1. [IF PHONE OR IN-PERSON: YES] [IF WEB: Yes]
2. [IF PHONE OR IN-PERSON: NO] [IF WEB: No]

## DIGITAL AFFINITY

**DIG1.** [IF INT3=4|5] Do you regularly access the internet outside of your home?

1. [IF PHONE OR IN-PERSON: YES] [IF WEB: Yes]
2. [IF PHONE OR IN-PERSON: NO] [IF WEB: No]

**DIG2a.** For which of the following communication purposes have you used the internet in the past 6 months? Please [IF PHONE OR IN-PERSON: tell me] [IF WEB: select] all that apply.

1. E-mail
2. Texting or instant messaging
3. Social media (e.g., Facebook, Twitter, Instagram, TikTok)
4. Video or voice calls or conferencing
5. None of the above

**DIG2b.** For which of the following entertainment purposes have you used the internet in the past 6 months? Please [IF PHONE OR IN-PERSON: tell me] [IF WEB: select] all that apply.

1. Streaming or watching videos
2. Streaming or downloading music, radio programs, or podcasts
3. Posting or uploading blog posts, videos, or other content you created
4. None of the above

**DIG2c.** For which of the following work purposes have you used the internet in the past 6 months? Please [IF PHONE OR IN-PERSON: tell me] [IF WEB: select] all that apply.

1. Telecommute or working from home
2. Search or apply for a job
3. Online classes or job training
4. None of the above

**DIG2d.** For which of the following retail or service purposes have you used the internet in the past 6 months? Please [IF PHONE OR IN-PERSON: tell me] [IF WEB: select] all that apply.

1. Request services provided by other people (e.g., Lyft, Uber, Airbnb, Angie's List)
2. Advertise products or services
3. Online shopping, travel reservation, or other consumer services
4. Sell goods (e.g., Etsy, or eBay)
5. Banking, investing, or paying bills online
6. None of the above

**DIG2e.** For which of the following other purposes have you used the internet in the past 6 months? Please [IF PHONE OR IN-PERSON: tell me] [IF WEB: select] all that apply.

1. Interact with appliances connected to the Internet, such as a thermostat, light bulb, or security system
2. Communicate with a doctor or other health professional
3. Accessing health records or health insurance records online
4. Accessing news or information
5. None of the above

**PROGRAMMER NOTE:** Cannot select “None of the above” in combination with other response options for DIG2a-DIG2e. If this happens, display error message: “You cannot select “None of the above” with any other option. Please check and correct your answer.””

## NEWS SOURCES

The next several questions will ask about your use of various media outlets, your participation in your community, and your opinion of government institutions.

**NEWS1.** [IF WEB: How often do you get news from...] [IF PHONE OR IN-PERSON: How often do you news from the following sources - Never, rarely, sometimes, or often?]

|                                      | Never | Rarely | Sometimes | Often |
|--------------------------------------|-------|--------|-----------|-------|
| a. Television                        | 4○    | 3○     | 2○        | 1○    |
| b. Radio                             | ○     | ○      | ○         | ○     |
| c. Print publications                | ○     | ○      | ○         | ○     |
| d. A smartphone, computer, or tablet | ○     | ○      | ○         | ○     |

## VOTING

**VOTE1** In any election, some people are not able to vote because they are sick or busy or have some other reason, and others do not want to vote. Did you vote in the most recent presidential election held on November 3, 2020?

1. [IF PHONE OR IN-PERSON: YES] [IF WEB: Yes]
2. [IF PHONE OR IN-PERSON: NO] [IF WEB: No]

**VOTE2** [IF VOTE1=2] Were you registered to vote in the November 3, 2020 election?

1. [IF PHONE OR IN-PERSON: YES] [IF WEB: Yes]
2. [IF PHONE OR IN-PERSON: NO] [IF WEB: No]

## VOLUNTEERING

The next questions will ask about volunteer activities you have participated in during the past year. For these questions, please include **any** volunteering you have done for an organization as well as any informal donations of time to help with an event or project.

**VOL1** Since [CURRENT MONTH] 1st of last year, have you done any volunteer activities through or for an organization?

1. [IF PHONE OR IN-PERSON: YES] [IF WEB: Yes]
2. [IF PHONE OR IN-PERSON: NO] [IF WEB: No]

**VOL2** [IF VOL1=2] Sometimes people don't think of activities they do infrequently or activities they do for children's schools or youth organizations as volunteer activities. Since [CURRENT MONTH] 1st of last year, have you done any of these types of volunteer activities?

1. [IF PHONE OR IN-PERSON: YES] [IF WEB: Yes]
2. [IF PHONE OR IN-PERSON: NO] [IF WEB: No]

## TRUST IN GOVERNMENT

**TRUST1a.** Below is a list of institutions in American society. Please indicate how much confidence you, yourself, have in each one – a great deal, quite a lot, some or very little.

|                                | A great deal            | Quite a lot             | Some                    | Very little             |
|--------------------------------|-------------------------|-------------------------|-------------------------|-------------------------|
| a. The military                | 4 <input type="radio"/> | 3 <input type="radio"/> | 2 <input type="radio"/> | 1 <input type="radio"/> |
| b. The police                  | <input type="radio"/>   | <input type="radio"/>   | <input type="radio"/>   | <input type="radio"/>   |
| c. The U.S. Supreme Court      | <input type="radio"/>   | <input type="radio"/>   | <input type="radio"/>   | <input type="radio"/>   |
| d. The presidency              | <input type="radio"/>   | <input type="radio"/>   | <input type="radio"/>   | <input type="radio"/>   |
| e. Public schools              | <input type="radio"/>   | <input type="radio"/>   | <input type="radio"/>   | <input type="radio"/>   |
| f. The criminal justice system | <input type="radio"/>   | <input type="radio"/>   | <input type="radio"/>   | <input type="radio"/>   |
| g. Congress                    | <input type="radio"/>   | <input type="radio"/>   | <input type="radio"/>   | <input type="radio"/>   |
| h. U.S. Census Bureau          | <input type="radio"/>   | <input type="radio"/>   | <input type="radio"/>   | <input type="radio"/>   |
| i. U.S. statistical agencies   | <input type="radio"/>   | <input type="radio"/>   | <input type="radio"/>   | <input type="radio"/>   |

**TRUST1b.** Below is a list of institutions in American society. Please indicate how much confidence you, yourself, have in each one – a great deal, quite a lot, some or very little.

|                                     | A great deal            | Quite a lot             | Some                    | Very little             |
|-------------------------------------|-------------------------|-------------------------|-------------------------|-------------------------|
| a. Small business                   | 4 <input type="radio"/> | 3 <input type="radio"/> | 2 <input type="radio"/> | 1 <input type="radio"/> |
| b. The church or organized religion | <input type="radio"/>   | <input type="radio"/>   | <input type="radio"/>   | <input type="radio"/>   |
| c. The medical system               | <input type="radio"/>   | <input type="radio"/>   | <input type="radio"/>   | <input type="radio"/>   |
| d. Banks                            | <input type="radio"/>   | <input type="radio"/>   | <input type="radio"/>   | <input type="radio"/>   |
| e. Newspapers                       | <input type="radio"/>   | <input type="radio"/>   | <input type="radio"/>   | <input type="radio"/>   |
| f. Organized labor                  | <input type="radio"/>   | <input type="radio"/>   | <input type="radio"/>   | <input type="radio"/>   |
| g. Big business                     | <input type="radio"/>   | <input type="radio"/>   | <input type="radio"/>   | <input type="radio"/>   |
| h. News on the internet             | <input type="radio"/>   | <input type="radio"/>   | <input type="radio"/>   | <input type="radio"/>   |
| i. News on social media             | <input type="radio"/>   | <input type="radio"/>   | <input type="radio"/>   | <input type="radio"/>   |
| j. Television news                  |                         |                         |                         |                         |

**TRUST2.** The census, the number of deaths in the U.S. by different diseases, the crime rate, and unemployment rate are examples of federal statistics produced by federal statistical agencies (like the Census Bureau and the Bureau of Labor Statistics) that are part of the federal government. Have you ever used federal statistics for study or work?

1. [IF PHONE OR IN-PERSON: YES] [IF WEB: Yes]
2. [IF PHONE OR IN-PERSON: NO] [IF WEB: No]

**TRUST3.** Personally, how much trust do you have in the federal statistics in the United States? Would you say that you tend to trust federal statistics or tend not to trust them?

1. [IF PHONE OR IN-PERSON: TEND TO TRUST] [IF WEB: Tend to trust]
2. [IF PHONE OR IN-PERSON: TEND NOT TO TRUST] [IF WEB: Tend not to trust]

## DEMOGRAPHICS

Now, we have some more questions about you and your background.

**DEM1.** What is your date of birth?

\_\_\_\_\_ (MM/DD/YYYY) [RANGE: 01/01/1921 – [CURRENT DATE – 18 YEARS]]

**PROGRAMMER NOTE:** Define AGE:

AGE = CURRENT DATE – DEM1

**DEM1a.** [IF AGE <18] You entered [AGE] as your age. Is this correct?

1. Yes → GO TO OUTRO AND SET OUTCOME CODES AS “R INELIGIBLE (UNDER 18”)
2. No

**DEM2.** Which of the following best represents how you think of yourself?

1. Gay or lesbian
2. Straight, that is not gay or lesbian
3. Bisexual
4. Something else
5. I don't know

**PROGRAMMER NOTE:** On DEM2:

For PHONE and IN-PERSON, include only volunteered REF response option (not DK and REF).

For WEB, display only REF option (not DK and REF) if respondent advances without answering question.

**DEM3.** Are you of Hispanic, Latino, or Spanish origin?

1. **No**, not of Hispanic, Latino, or Spanish origin
2. Yes, Mexican, Mexican Am., Chicano
3. Yes, Puerto Rican
4. Yes, Cuban
5. Yes, another Hispanic, Latino, or Spanish origin – *for example, Salvadoran, Dominican, Colombian, Guatemalan, Spaniard, Ecuadorian, etc.* [Specify]

**DEM4.** What is your race? *Please* [IF PHONE OR IN-PERSON: *tell me*] [IF WEB: *select*] *all that apply.*

1. White
2. Black or African American
3. American Indian or Alaska Native
4. Native Hawaiian or Other Pacific Islander



5. Asian

**DEM5.** What is the highest degree or level of school you have completed? [IF PHONE OR IN-PERSON: Tell me] [IF WEB: Mark] ONE response. If currently enrolled, [IF PHONE OR IN-PERSON: tell me] [IF WEB: mark] the previous grade or highest degree received.

1. No schooling completed
2. Nursery school
3. Kindergarten
4. Grade 1 through 11 – Specify
5. 12<sup>th</sup> grade – **NO DIPLOMA**
6. Regular high school diploma
7. GED or alternative credential
8. Some college credit, but less than 1 year of college credit
9. 1 or more years of college credit, no degree
10. Associate's degree (for example: AA, AS)
11. Bachelor's degree (for example: BA, BS)
12. Master's degree (for example: MA, MS, MEng, MEd, MSW, MBA)
13. Professional degree beyond a bachelor's degree (for example: MD, DDS, DVM, LLB, JD)
14. Doctorate degree (for example: PhD, EdD)

**DEM6.** [IF DEM5=6|7|10|11|12|13|14] In what month and year was this degree awarded?

\_\_\_\_ Month [RANGE: 1 – 12] \_\_\_\_ Year [RANGE: 1922 – 2022]

**DEM7.** [IF DEM5>9] What was the major field of study for your highest degree?

**PROGRAMMER NOTE:** Program DEM7 as drop-down list with filtered search. Program list of options from National Center for Educational Statistics (found here: <https://nces.ed.gov/ipeds/cipcode/browse.aspx?y=55>).

**DEM8.** LAST WEEK, did you do ANY work for pay? By last week, we mean the week beginning on Sunday, , [STARTDATE] and ending on Saturday [ENDDATE].

1. [IF PHONE OR IN-PERSON: YES] [IF WEB: Yes]
2. [IF PHONE OR IN-PERSON: NO] [IF WEB: No]

**DEM9** [IF DEM8=2] What was your main reason for not working LAST WEEK?

1. Retired
2. On layoff from a job
3. Student
4. Chronic illness or permanent disability
5. Did not need or want to work

6. Other

**DEM10.** [IF DEM8=1 & MODE=WEB | IN-PERSON] Please review [IF MODE=WEB: the list below] [IF MODE=IN-PERSON: this list] and [IF MODE=WEB: select] [IF MODE=IN-PERSON: tell me] the broad job category that best describes the kind of work you are doing at your current job.

[IF DEM8=1 & MODE=PHONE] I am now going to read a list of job categories. Please listen to the list and stop me when I read the broad job category that best describes the kind of work you are doing at your current job.

1. Business, Financial Operations
2. Clerical or Administrative Support
3. Computers, Mathematics
4. Construction, Installation, Repair
5. Counselor, Social Worker, Community Service
6. Domestic Help
7. Educator, Professor
8. Engineer, Architect, Surveyor
9. Farmer, Forester, Fisherman
10. Food Service
11. Health
12. Homemaker
13. Lawyer, Judge, Other Legal Occupation
14. Management
15. Sales, Marketing, Customer Service
16. Scientist (Life, Physical, Social)
17. Security, Military
18. Other Occupation (Specify)
19. Unemployed or Not Working

**DEM11.** Are you currently enrolled in school either full-time or part-time? If you are on a holiday break from school, but plan to return when the break is over, please answer yes.

1. [IF PHONE OR IN-PERSON: YES] [IF WEB: Yes]
2. [IF PHONE OR IN-PERSON: NO] [IF WEB: No]

**DEM12.** Which category represents the total combined income of all members of your FAMILY during the past 12 months? Include as family any related individuals who currently live in the same household as you.

This includes money from jobs, net income from business, farm or rent, pensions, dividends, interest, social security payments and any other money income received by members of your FAMILY who are 15 years of age or older.

1. Less than \$10,000
2. \$10,000 to \$14,999

3. \$15,000 to \$24,999
4. \$25,000 to \$34,999
5. \$35,000 to \$49,999
6. \$50,000 to \$74,999
7. \$75,000 to \$99,999
8. \$100,000 to \$149,999
9. \$150,000 to \$199,999
10. \$200,000 or more

**DEM13.** [IF ROSTER7>3] What is your marital status?

1. Now married
2. Not married but in a domestic partnership
3. Widowed
4. Divorced
5. Separated
6. Never married

**DEM14.** Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or National Guard)? Reserve and Guard members or spouses who are full-time active duty (AGR/FTS/AR) or currently “activated” should select the “Reserve or National Guard” response(s). Please [IF PHONE OR IN-PERSON: tell me] [IF WEB: select] all that apply.

1. No
2. Yes, I’m serving on active duty
3. Yes, I’m serving in the Reserve or National Guard
4. Yes, my spouse is serving on active duty
5. Yes, my spouse is serving in the Reserve or National Guard

**PROGRAMMER NOTE:** If “No” is selected with any other option, display error message: “You cannot select “No” with any other option. Please check and correct your answer.”

**DEM15.** How many automobiles, vans, and trucks of one-ton capacity or less are kept at home for use by members of this household?

1. [IF PHONE OR IN-PERSON: NONE] [IF WEB: None]
2. 1
3. 2
4. 3
5. 4
6. 5
7. [IF PHONE OR IN-PERSON: 6 OR MORE] [IF WEB: 6 or more]

**DEM16.** [IF DEM8=1] How did you usually get to work LAST WEEK? [IF PHONE OR IN-PERSON: Tell me] [IF WEB: Select] the method of transportation used for most of the distance.

1. Car, truck, or van
2. Bus
3. Subway or elevated rail
4. Long-distance train or commuter rail
5. Light rail, streetcar, or trolley
6. Ferryboat
7. Taxicab
8. Motorcycle
9. Bicycle
10. Walked
11. Worked from home
12. Other method

## HEALTH

Next, we have some questions about your health.

**HEALTH1.** In general, would you say your health is...

1. Excellent
2. Very good
3. Good
4. Fair
5. Poor

## HEALTH INSURANCE

**INS1.** The next questions are about health insurance. Include health insurance obtained through employment or purchased directly as well as government programs like Medicare, and Medicaid that provide medical care or help pay medical bills. Are you CURRENTLY covered by any kind of health insurance or some other kind of health care plan?

- 1 [IF PHONE OR IN-PERSON: YES] [IF WEB: Yes]
- 2 [IF PHONE OR IN-PERSON: NO] [IF WEB: No]

**INS2.** [IF INS1 =1] Are you CURRENTLY covered by any of the following types of health insurance or health coverage plans? [IF PHONE OR IN-PERSON: Tell me] [IF WEB: Mark] "Yes" or "No" for EACH type of coverage.

- a. Insurance through a current or former employer or union (of yours or another family member)
- b. Insurance purchased directly from an insurance company (by you or another family member)
- c. Medicare, for people 65 and older, or people with certain disabilities
- d. Medicaid, Medical Assistance, or any kind of government-assistance plan for those with low incomes or a disability
- e. TRICARE or other military health care
- f. VA (enrolled for VA health care)
- g. Indian Health Service
- h. Any other type of health insurance or health coverage (Specify: \_\_\_\_\_)

## FOOD INSECURITY

**FOOD1.** Are you the person who does most of the **shopping for food** in your household? *If shopping for food is split evenly between you and other household members, [IF PHONE OR IN-PERSON: answer] [IF WEB: select] "Yes."*

1. [IF PHONE OR IN-PERSON: YES] [IF WEB: Yes]
2. [IF PHONE OR IN-PERSON: NO] [IF WEB: No]

**FOOD2.** In the **last 7 days**, which of these statements best describes the food eaten in your household?

1. Enough of the kinds of food [IF HHNUMBER=1: I] [IF HHNUMBER>1: we] wanted to eat
2. Enough, but not always the kinds of food [IF HHNUMBER =1: I] [IF HHNUMBER >1: we] wanted to eat
3. Sometimes not enough to eat
4. Often not enough to eat

**FOOD3.** Do you or anyone in your household receive benefits from the Supplemental Nutrition Assistance Program (SNAP) or the Food Stamp Program?

1. [IF PHONE OR IN-PERSON: YES] [IF WEB: Yes]
2. [IF PHONE OR IN-PERSON: NO] [IF WEB: No]

**FOOD4.** The WIC program - the Women, Infants, and Children program-- provides healthy foods and other services to low-income pregnant and breastfeeding women, infants, and children up to age 5. Is anyone in your household now receiving benefits from WIC?

1. [IF PHONE OR IN-PERSON: YES] [IF WEB: Yes]
2. [IF PHONE OR IN-PERSON: NO] [IF WEB: No]

## ADMINISTRATIVE RECORDS

Lastly, we have a few questions about government data on individuals and your privacy opinions.

**ADMIN1** As you may know, different government departments and services collect data about individuals, for example your tax records and health records. People have different views about whether this data should be used for new purposes after it has been collected. Using this data can bring benefits, such as finding more effective medical treatments or using information about local communities to plan local schools or roads. But some people worry that other uses for data risk their privacy and security, by linking different types of data together and potentially allowing them to be identified.

Overall, which of the following statements comes closest to your opinion?

1. Government should find new ways to use data already collected because it benefits public services and society.
2. Government should not use data already collected in new ways due to the risks to people's privacy and security.
3. I agree equally with both.
4. I don't agree with either.

**ADMIN2.** The government already collects data about people's jobs, earnings, and participation in government programs. If these separate data sources could be combined while keeping them strictly confidential, the information could be used to better understand the US population. Would you be strongly in favor of combining the data, somewhat in favor of it, neither in favor nor against it, somewhat against it, or strongly against it?

1. Strongly in favor of it
2. Somewhat in favor of it
3. Neither in favor nor against it
4. Somewhat against it
5. Strongly against it

**ADMIN3.** [IF ADMIN2=4|5] Which of the following are reasons you are not in favor of combining these data sources to generate information? Please [IF PHONE OR IN-PERSON: tell me] [IF WEB: select] all that apply.

1. Combined data sources are a violation of my privacy
2. Combined data won't be accurate
3. Combined data will give the government too much information (about me)
4. I don't trust the government to use my information correctly
5. I am concerned about the security of my information

## **PRIVACY AND CONFIDENTIALITY**

**PRIV1.** In general, how concerned would you say you are about your personal privacy?

1. Extremely concerned
2. Very concerned
3. Somewhat concerned
4. A little concerned
5. Not at all concerned

**PRIV2.** What about while using the internet? How concerned are you about your privacy while you are using the internet?

1. Extremely concerned
2. Very concerned
3. Somewhat concerned
4. A little concerned
5. Not at all concerned

**PRIV3.** Have you done any of these things to protect your data OR avoid intrusion into your privacy?

(Yes/No)

1. Signed up for the Do Not Call Registry, which removes your number from marketing call lists
2. Blocked a smartphone app or stopped an app from accessing other details on your phone, such as GPS location or your contacts
3. Changed the default settings on your computer or browser
4. Stopped or avoided using a social media service
5. Changed the privacy settings on your social media accounts
6. Started using more secure methods of communication, such as encrypted emails
7. Asked a government department, public service, or private company to delete any information they hold about you

**PRIV4.** Do you think federal government agencies share a single central database of the name, address, and date of birth of U.S. residents?

1. [IF PHONE OR IN-PERSON: YES] [IF WEB: Yes]
2. [IF PHONE OR IN-PERSON: NO] [IF WEB: No]

**LINK2.** [IF LINK1=2] Thank you for completing this survey! Unfortunately, we won't be able to learn as much from the information you provided in this survey if we do not have your permission to combine your answers with your data collected by other government agencies. Do we have your permission to combine these data?

1. [IF PHONE OR IN-PERSON: YES] [IF WEB: Yes]
2. [IF PHONE OR IN-PERSON: NO] [IF WEB: No]

**INCENT1.** Thank you for answering our questions. You will receive [IF R17 (SCREENER) = 1: \$25] [IF R17 (SCREENER) = 2 | SELECT\_1 (SCREENER) = NOT SELECTED: \$20] for completing the screener and enrollment surveys. [IF PHONE OR WEB: Would you prefer to receive this payment in the form of cash, a physical gift card, an electronic gift card, or mailed check?]

- 1 [IF PHONE OR IN-PERSON: CASH] [IF WEB: Cash]
- 2 [IF PHONE: PHYSICAL GIFT CARD] [IF WEB: Physical gift card]
- 3 [IF PHONE: ELECTRONIC GIFT CARD] [IF WEB: Electronic gift card]
- 4 [IF PHONE: MAILED CHECK] [IF WEB: Mailed check]



**INCENT2.** [IF INCENT1 = 1 and PHONE or WEB | 2 | 4] The address we have on file is [ADDRESSFILL]. Is this the address to which we should mail your payment?

- 1 [IF PHONE: YES] [IF WEB: Yes]
- 2 [IF PHONE: NO] [IF WEB: No]

**INCENT3.** [IF INCENT1= 1 and PHONE or WEB | 2 | 4 and INCENT2 <> YES] Please provide the mailing address to which we should send your payment.

ADDRESS: \_\_\_\_\_ [MAX 50 CHARACTERS]  
CITY: \_\_\_\_\_ [MAX 30 CHARACTERS]  
STATE: \_\_\_\_\_ [MAX 30 CHARACTERS]  
ZIP CODE: \_\_\_\_\_ [MAX 5 DIGITS]

**INCENT4.** [IF INCENT1=3 AND NOT MISSING EMAILFILL] The email we have on file is [EMAILFILL]. Is this the email to which you would like us to send your electronic gift card?

- 1 [IF PHONE: YES] [IF WEB: Yes]
- 2 [IF PHONE: NO] [IF WEB: No]

**INCENT5.** [IF INCENT1=3 AND (INCENT4=2 | MISSING EMAILFILL)] Please provide the email address to which we should send your electronic gift card.

\_\_\_\_\_ [MAX OF 50 CHARACTERS]

**INCENT 6.** [IF INCENT1 = 1 and IN-PERSON] INTERVIEWER: GIVE RESPONDENT [IF R17 (SCREENER) = 1: \$25] [IF R17 (SCREENER) = 2 | SELECT\_1 (SCREENER) = NOT SELECTED: \$20] IN CASH.

This form states that you have received the money. This copy is for your records.

INTERVIEWER: DID THE RESPONDENT ACCEPT THE INCENTIVE PAYMENT?  
SELECT YES, NO, or N/A IF THE INTERVIEW WAS NOT A COMPLETE.

- 1 YES
- 2 NO
- 3 N/A – INTERVIEW NOT COMPLETE

**OUTRO.** Those are all the questions we have for you today. Thank you for your participation.

**[IF ALL INTERVIEWS COMPLETE, GO TO ROC IN FRONT\_BACKEND\_SPECS. IF ONE INTERVIEW STILL PENDING, GO TO R18a]**

**R18a** [IF (PHONE OR IN-PERSON) AND NUMSELECTED = 2] We'd like to ask [NAMEFILL\_2] some additional questions to complete their enrollment in the panel. We need to collect some additional information from them. Is [NAMEFILL\_2] available to speak with me now?

- 1 YES
- 2 NO

[IF R18a = 1] The questions [NAMEFILL\_1] just completed indicate that you are eligible to participate in the Ask U.S. Panel pilot, a large nationally representative survey panel pilot led by the U.S. Census Bureau. The purpose of the panel pilot is to track public opinion on a variety of topics. The panel consists of individuals and households living across the U.S. that have agreed to be contacted and invited to participate in surveys led by the U.S. Census Bureau and other statistical agencies.

To complete your enrollment in the panel pilot, we need to collect some information from you. These questions will take approximately 20 minutes of your time to answer. If you complete the enrollment survey you will receive \$20 as a token of our appreciation. If you choose to join the panel pilot, you will also have the chance to receive an additional payment for participating in a future panel survey.

**R18b.** Would you like to begin your enrollment survey now?

- 1 YES [BEGIN BASELINE]
- 2 NO

**R19** [IF R18b=NO] We will contact you soon to complete the enrollment survey. Thank you for your time.

**R19a** [IF R18a=NO] We will contact [NAMEFILL\_2] soon to complete the enrollment survey. Thank you for your time.