

HPOG 2.0 Long-term Follow-Up Survey

Contents

HPOG 2.0 Long-term Follow-Up Survey.....	1
INTRODUCTION.....	4
SCREENER/VERIFICATION:.....	5
A. CURRENT EDUCATION ACTIVITY AND CREDENTIALS.....	6
Current Education.....	6
Credentials.....	9
College diplomas or academic degrees.....	10
Vocational Certificates.....	12
Certifications and Licenses.....	15
Work-Based Training.....	18
Future Aspirations.....	18
B. BARRIERS TO LONG-TERM CREDENTIAL RECEIPT.....	20
C. EMPLOYMENT SUCCESS.....	23
Advancement in Career Pathway.....	23
Current/Most Recent Job.....	30
Job Quality.....	33
D. EARNINGS FROM INFORMAL EMPLOYMENT.....	38
E. HOUSEHOLD COMPOSITION.....	41
F. INCOME AND ADULT WELL-BEING.....	44
Life Challenge.....	44
Perceived Stress.....	45
Physical Health.....	46
Income and Receipt of Public Assistance.....	46
Assets.....	48
Other Debt.....	49
Expenses.....	50
Food Insecurity.....	51
Financial Resilience.....	51
Health Insurance.....	51
Housing Status and Neighborhood Satisfaction.....	52

G. 21st CENTURY SKILLS/COGNITIVE SKILLS.....54
 Cognitive Skills in Everyday Life.....54
 Self-Directed Learning.....54
H. PARENT REPORTS: CHILD MODULE.....56
 Child Introduction/Screening.....56
 Child Education Status.....58
 Child Supervision.....61
 Family Routines (Preschool to High School).....62
 Education-Related Goals and Support.....63
 Child Outcomes.....65
I. CONTACT INFORMATION.....71

Reviewer Notes:

Throughout the instrument, there are places where the CAPI software will insert text to customize the question for the respondent. A couple of key text inserts are defined here:

[MYLI]: The MYLI is the start of the reference period for questions asking about new credentials. For those study participants who responded to the intermediate follow-up survey (ITS), the LTS will ask about credentials earned since the date of the ITS, usually about three years before the date of the LTS. If the participant did not respond to the ITS but did respond to the STS, the LTS will ask about credentials earned since the short-term follow-up survey (STS). If the participant responded to neither the ITS nor the STS, the LTS will ask about credentials earned since the date of randomization. So, the MYLI is either the date of the most recent prior survey response or the date of randomization.

[3YEARPRIORDATE]: This date should be calculated as three years prior to the date of the interview. This field is used in the employment section to determine intermediate employment status for those who did not complete the intermediate follow-up survey (ITS)

[EMPLOYER]: Sections C and D refer to the current or most recent employer. EMPLOYER is defined as

1. Employer name in C2 if C9=1 (Yes still employed there) or Employer name in C16.

[CHILD]: this is the name of the focal child, who was selected for this survey. It is used throughout Section H.

Sections C and D, current versus most recent employer: Throughout Sections C and D, questions ask about the respondent's current or most recent job. If [C9 or C13=Yes (currently employed)] all questions in Section C and D are asked in present tense. If not currently employed but worked in past three years (C15=Yes), then all questions in Section C and D are asked in past tense. CAPI programming will insert the appropriate verbiage based on C9, C14 and C15 responses.

CAPI notes, which begin with **CAPI:** are instructions for the programmers. They are noted in bold font and the skip logic for CAPI is noted with numeric values, for example: **CAPI: IF B6=1 SKIP TO B8.**

Plain text descriptions of who is asked each question are noted in bold font in orange text boxes. Skip logic for plain text descriptions is noted with alpha values, for example: **Ask B7 if they stopped attending a program without completing it (B6=YES).**

INTRODUCTION

Hello, my name is []. May I please speak with _____?

Thank you for taking the time to talk with me today. I work for Abt Associates. Abt Associates is an independent research company, and we are helping the Administration for Children and Families (ACF) in the U.S. Department of Health and Human Services (HHS) with its national evaluation of the Health Profession Opportunity Grants (HPOG) Program. We are conducting interviews with people who agreed to be in a study about a program offered at [NAME OF ORGANIZATION] called [PROGRAM NAME].

This interview will include questions on your employment, education, and training activities, and your overall well-being. We will also ask a few questions about the people living with you and your children. This interview will take about 60 minutes to complete. When we are done, we will send you a link to access a \$50 gift certificate to a store of your choice. This interview is connected to the consent form you signed to let researchers collect information from you back in [RAD] when you enrolled in the HPOG study. [CAPI: IF RESPONDENT COMPLETETED 15 or 36-MONTH SURVEY DISPLAY: This is a follow-up to the interview you participated in [MONTH/YEAR OF LAST INTERVIEW].

By participating in this study, you will help ACF learn if and how programs like [PROGRAM NAME] make a difference in people's lives and how to improve these kinds of training programs in the future. We need to talk with people who got into the program and those who did not. Your experiences are unique. Your participation in this study will help policymakers and program operators better understand how to help people attain educational credentials and find and keep jobs.

Before we begin the survey, I would like to assure you that all of your responses on this survey will be kept private and only used by people approved for conducting research consistent with the goals of this study. Any data sets that are developed for sharing outside this study will be stripped of information that would make it easy to identify you. Your name will not appear in any written reports we produce. Your responses to these questions are completely voluntary. That means you may choose not to answer any question, or you may stop the interview if you wish, but we hope you don't. Your responses to these questions will in no way affect your participation in any programs or your receipt of any kinds of public benefits or services. As we mentioned at the time of enrollment, we will continue to collect information from data sources such as the National Directory of New Hires and the National Student Clearinghouse so researchers can learn more about your future employment, earnings, and post-secondary education until the end of HHS's research on HPOG grants, or when you choose to withdraw permission.

According to the Paperwork Reduction Act (PRA), an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this collection is 0970-0462 and it expires xx/xx/xxxx. If you have comments regarding estimated survey length or any other aspect of this collection of information, including suggestions for reducing the length of the survey, please send them to Larry Buron 6130 Executive Boulevard Rockville, MD 20852; Attn: OMB-PRA 0970-0462. Do you have any questions before we begin?

Let's begin now.

SCREENER/VERIFICATION:

First, I just need to verify that I am speaking with the correct person.

SC1. What is your date of birth? _____ (MM/DD/YYYY)

INTERVIEWER: ENTER DATE USING FORMAT BELOW.

CAPI NOTE: DISPLAY DOB

Respondent's Birthday: _____ / _____ / _____
MM DD YYYY

REFUSED..... 7

DON'T KNOW..... 8

CAPI: IF DOB AGREES WITH THE BIRTH DATE ON THE FILE, SKIP TO A1. ELSE, CONTINUE.

Ask SC2 if the response is NOT the same as the DOB on file

SC2. What are the last 4 digits of your Social Security Number?

INTERVIEWER – ENTER LAST 4 DIGITS OF SSN CAPI NOTE: DISPLAY LAST 4 DIGITS SSN

RECORD LAST 4 DIGITS: ____ ____ ____ ____

REFUSED..... 7

DON'T KNOW..... 8

CAPI: IF THE 4 DIGITS GIVEN BY RESPONDENT AGREE WITH THE NUMBER ON THE FILE, SKIP TO B1.

IF SSN IS MISSING IN THE SAMPLE OR IS A MISMATCH WITH WHAT IS ENTERED AND THERE IS A MISMATCH IN DOB, DISPLAY DISCONTINUED TEXT:

Read discontinue text if the DOB AND the SSN are NOT the same as what is on file

DISCONTINUED TEXT: *I'm sorry. I was unable to pull up the correct questionnaire. I will need to check with my supervisor to look into the problem. I will re-contact you when the problem is resolved. Thank you for your time.*

A. CURRENT EDUCATION ACTIVITY AND CREDENTIALS

Current Education

A1. What is the highest degree or level of school that you have completed?

1. Grades 1-11
2. 12th grade – no diploma
3. Regular high school diploma
4. GED or alternative credential
5. Some college, but less than 1 year of college credit
6. 1 or more years of college credit, no degree
7. Associate’s degree (for example, AA or AS)
8. Bachelor’s degree (for example, BA or BS)
9. Master’s degree (for example, MA, MS, MEng, Med, MSW, MBA)
10. Professional degree beyond a bachelor’s degree (for example, MD, DDS, DVM, LLB, JD)
11. Doctorate degree (for example, PhD, EdD)
97. REFUSED
98. DON’T KNOW

Next, I’d like to talk about any classes you are taking or training courses you are participating in. Later, I will also ask you about any diplomas or academic degrees, certificates, professional certifications or state or industry licenses you have received.

A2. Are you currently enrolled in any classes, or enrolled but between terms, at some place that is providing education or training? Please consider only classes that you have been enrolled in for one month or more.

1. YES [SKIP TO A2b]
2. NO
7. REFUSED
8. DON’T KNOW

A2a. Think about the time between [MYLI] and today. At any time during that period, have you been enrolled in any classes at some place that is providing education or training? Please consider only trainings that lasted for one month or more.

1. YES
2. NO [SKIP TO SECTION A7_INTRO]
7. REFUSED [SKIP TO SECTION A7_INTRO]
8. DON’T KNOW [SKIP TO SECTION A7_INTRO]

A2b. Thinking about all the training programs you participated in between [MYLI] and today. How much did all of those programs cost? Please do not include the cost of books, uniforms, travel, tools, or tests or assessments. [PROBE: Please provide the cost of training, regardless of who paid for it. Your best estimate is fine.]

[INTERVIEWER: ENTER -1 FOR REFUSED OR -2 FOR DON’T KNOW]

\$ _____ (\$0-120,000)
-1 REFUSED

-2 DON'T KNOW

A2c. How much of your own earnings or savings or those of a spouse or partner did you use to help pay for your school expenses since [MYLI]? PROBE: Your best estimate is fine.

[INTERVIEWER: ENTER -1 FOR REFUSED OR -2 FOR DON'T KNOW]

\$ _____ (\$0-20,000)
-1 REFUSED
-2 DON'T KNOW

A2d. About how much have you personally borrowed, in total, to attend these training programs since [MYLI]? PROBE: Your best estimate is fine.

[INTERVIEWER: ENTER -1 FOR REFUSED OR -2 FOR DON'T KNOW]

\$ _____ (\$0-120,000)
-1 REFUSED
-2 DON'T KNOW

Ask A2e if they don't know how much personal student loan debt they have (A2d=Don't know [-2]).

A2e. Would you say that the total amount of money you had to borrow to attend [SCHOOLNAME_X OR School_X] [IF ONLY STARTDATE_X FILLED: "since [STARTDATE_X]" / IF BOTH STARTDATE_X AND STOPDATE_X FILLED: between "[STARTDATE_X] AND [STOPDATE_X]"] was:

1. Under \$1,000
2. Between \$1,000 and \$4,999
3. Between \$5,000 and \$14,999
4. Between \$15,000 and \$24,999
5. \$25,000 or more?
7. REFUSED
8. DON'T KNOW

Ask A3-A3e if they are currently enrolled in classes or between terms (A2=Yes) or if they were enrolled in classes lasting a month or more since [MYLI] (A2a=Yes).

CAPI: If A2=YES, ASK A3-A3e IN PRESENT TENSE. If A2a=Yes, DISPLAY THE FOLLOWING INTRODUCTION TEXT:

The next few questions are about the time when you were enrolled in classes that lasted at least a month or more. If you were enrolled in more than one place, please think about the place you were enrolled most recently.

A3. [IF A2=YES: How many hours do/IF A2a=YES: How many hours did] you spend in class per week?

[INTERVIEWER: ENTER -1 FOR REFUSED OR -2 FOR DON'T KNOW]

_____ HOURS PER WEEK (1-40)

- 1 REFUSED
- 2 DON'T KNOW

VERIFICATION SCREEN: DO NOT READ TO RESPONDENT
WE HAVE RECORDED A RATE OF: <A3> HOURS PER WEEK.
IF THIS IS NOT CORRECT, PLEASE GO BACK AND ADJUST.

A3a. What type of place [IF A2 = YES, "are you currently taking"/IF A2A = YES "were you taking"] classes at? Is it...?

1. Adult education /adult high school/community school (*excluding community colleges*)
2. Community based/non-profit organization
3. Private school/company that provides training
4. Community or technical college (2-year college)
5. 4-year college/university
6. State unemployment/employment office
7. One-stop career center (also known as American job center)
8. Your place of employment
9. Someplace else (SPECIFY)
97. REFUSED
98. DON'T KNOW

A3b. [IF A2=YES: What is the name of the place that you are taking these classes at now/IF A2a=YES: What was the name of the place that you took classes at most recently?]

- _____ [USE PULLDOWN LIST
OF IPEDS POSTSECONDARY SCHOOLS]
5. NOT LISTED ABOVE (CHECK SPELLING) _____
 7. REFUSED
 8. DON'T KNOW

A3c. [IF A2=YES: Where is this school located? / IF A2a=YES: Where was this school located?] Can you give me the name of the street on which it is located? What is the nearest cross-street? In what city is this school located?

- _____ [Street Address]
_____ [City] _____ [State]
7. REFUSED
 8. DON'T KNOW

A3d. About when did you start taking these classes? Please give me the month and year you started.

_____ (1-12) / _____ (2011-2023)

- M M/ Y Y Y Y
7. REFUSED
8. DON'T KNOW

Ask A3e if they were enrolled in classes lasting a month or more since [MYLI] (A2a=YES).; if they are currently enrolled in classes or between terms (A2=YES) SKIP TO A4.

A3e. [IF A2a=YES] About when did you stop taking these classes? Please give me the month and year you stopped.

- ___ ___ / ___ ___ ___ ___
M M/ Y Y Y Y
7. REFUSED
8. DON'T KNOW

A4. Thinking about all the classes you have taken since [MYLI], would you say that you took them to prepare for work in a particular occupation?

1. YES
2. NO [SKIP TO A5_INTRO]
3. IF VOL: NO CLASSES SINCE MYLI/RAD [SKIP TO A5_INTRO]
7. REFUSED [SKIP TO A5_INTRO]
8. DON'T KNOW [SKIP TO A5_INTRO]

Read the following text and ask A4a if respondent has taken classes to prepare for a particular occupation (A4=YES [1]).

A4a. Is that occupation in the field of healthcare?

1. YES
2. NO
7. REFUSED
8. DON'T KNOW

Credentials

Read the following text and ask A5 of everyone with any training since [MYLI] (A2 or A2a=Yes)

[A5_INTRO] Now I'm going to ask you questions about any *academic* certificates, diplomas, or degrees you may have received since [MYLI]. I will also ask you about any *vocational* certificates, professional certifications, and state or industry licenses you may have received later in this survey. It can be hard to know whether to report a certificate as academic or vocational. Please report it as academic if the required courses for the certificate carry regular college credits that could count toward a degree. Otherwise, report it as vocational.

[IF ITS or STS RESPONDER: When we last talked in [MYLI], you told us you received [A5ReadAloudCount] [IF A5ReadAloudCount=1: "academic certificate, diploma or degree", ELSE "academic certificates, diplomas or degrees"]. [IF A5ReadAloudCount >0: "These included

[A5ReadAloudN1..., A5ReadAloudN7].”] Now I’d like to know if you have received any other academic certificates, diplomas, or degrees since [MYLI].

INTERVIEWER SELECT APPROPRIATE RESPONSE:

1. RESPONDENT DID NOT QUESTION THE LIST [CONTINUE TO A5]
2. RESPONDENT VOLUNTEERED THAT AT LEAST ONE CREDENTIAL WAS WRONG [READ SCRIPT BELOW THEN PROCEED TO A6]

Thank you for clarifying that for me. I have made a note in your file to correct this. Let’s continue now.

College diplomas or academic degrees

A5. Since [MYLI], have you received any *academic* certificates, diplomas, or degrees for completing **any regular college classes**?

1. YES
2. NO [SKIP TO A6_INTRO]
7. REFUSED [SKIP TO A6_INTRO]
8. DON’T KNOW [SKIP TO A6_INTRO]

Ask A5a if they have received an academic certificate, diploma, or degree from college classes since MYLI/RAD (A5=YES [1]).

- A5a. How many *academic* certificates, diplomas or degrees have you received since [MYLI]?
- # _____ (MAX=4)
- 1 REFUSED [SKIP TO A6_INTRO]
- 2 DON’T KNOW [SKIP TO A6_INTRO]

CAPI: DISPLAY “VERIFICATION SCREEN: DO NOT READ TO RESPONDENT. WE HAVE RECORDED __ DIPLOMAS OR ACADEMIC DEGREES. IF THIS IS NOT CORRECT, PLEASE GO BACK AND ADJUST.”

Ask A5b if they have received at least 1 diploma or academic degree from college classes since MYLI (A5a≥1).

- A5b. [CAPI: IF A5a=1] What kind of *academic* certificates, diplomas or degrees have you received?
[CAPI: IF A5a>1 FOR FIRST LOOP ASK] What kind of diploma or academic degree did you receive first?
[CAPI: IF A5a>=2 FOR SUBSEQUENT DIPLOMAS:] What kind of *academic* certificates, diplomas or degrees did you receive after that?
1. A diploma or academic degree requiring less than a full year’s worth of credit,
 2. A diploma or academic degree requiring a full year or more’s worth of credit (but less than an Associate’s Degree),
 3. An Associate’s Degree, or [SKIP TO A5d]

- 4. A Bachelor's degree or higher? [SKIP TO A5d]
- 95. VOL: OTHER (SPECIFY: <A6B_95_OTHER_X> _____) [SKIP TO Ad5]
- 97. REFUSED [SKIP TO A5d]
- 98. DON'T KNOW [SKIP TO A5d]

Ask A5c if they have received at least one diploma from college classes requiring less than an Associate's Degree since MYLI (A5b=a diploma or academic degree requiring less than a full year's worth of credit or a diploma or academic degree that requires a year or more of credit, but less than an Associate's Degree; A5b=1 OR 2).

A5c. What is the name of the *academic* certificates, diplomas, or degrees you received?
<A5C_X> _____

- <A5CDK_X>
- 97. REFUSED
- 98. DON'T KNOW

Ask A5d if they have received at least one diploma or academic degree from college classes (A5a>0) since MYLI.

A5d. Where did you go to receive this *academic* certificate, diploma, or degree?

_____ **SELECT FROM DROPDOWN MENU OF
SCHOOLS REPORTED IN [MYLI]**

- 91. VOL: ON THE JOB TRAINING
- 95. VOL: OTHER (SPECIFY: _____) <A5D_95_OTHER_X>
- 97. REFUSED
- 98. DON'T KNOW

A5e. Is this *academic* certificate, diploma or degree related to working in the field of healthcare?

- 1. YES
- 2. NO
- 7. REFUSED
- 8. DON'T KNOW

A5f. When did you receive this *academic* certificate, diploma, or degree? Please give me the month and year.

<A5FMM_X> ____ ____ (01-12) / ____ ____ ____ <A5FYY_X>
M M / Y Y Y Y

<A5FNA_X>

6. VOL: DIPLOMA EARNED BUT NOT YET RECEIVED
5. VOL: DIPLOMA NOT YET RECEIVED DUE TO COVID-19
7. REFUSED
8. DON'T KNOW

Ask A6 of everyone.

Vocational Certificates

[A6_INTRO] The next set of questions asks about any vocational certificates you may have earned. People sometimes earn vocational certificates from an education or training program. A vocational certificate is one that can be awarded by a training provider or an educational institution for taking courses that don't count toward a degree. A vocational certificate is awarded based on completion of all course requirements. Vocational certificates are different from professional certifications or state or industry licenses. Some people get both a certificate from a school or other training institute and a related certification or license from the state.

As we go through this next set of questions, please answer only about school- and institute-issued educational certificates you may have received since [IF MYLI: [MYLI] / ELSE: [RAD]]. Please do not include school issued diplomas or academic degrees you already told me about. Also, please do not include any professional certifications or state or industry licenses yet. We will talk about those in the next section.

[IF INTERMEDIATE RESPONDER: When we last spoke in [MYLI], you told us that you had received [A6ReadAloudCount] vocational [IF A6ReadAloudCount = 1, "certificate", ELSE "certificates"]. [IF A6ReadAloudCount>0: "These included [A6ReadAloudN1...A6ReadAloudN7]."] Now I'd like to know if you have received any other vocational certificates for completing courses that don't count toward a degree since [MYLI].

INTERVIEWER SELECT APPROPRIATE RESPONSE:

1. RESPONDENT DID NOT QUESTION THE LIST [CONTINUE TO A6]
2. RESPONDENT VOLUNTEERED THAT AT LEAST ONE CREDENTIAL WAS WRONG
[READ SCRIPT BELOW THEN PROCEED TO A6]

Thank you for clarifying that for me. I have made a note in your file to correct this. Let's continue now.

A6. There are different types of vocational certificates people can earn. I'd like to know if you have received any of the following types of vocational certificates.

A6a. Since [MYLI], have you received a vocational certificate for completing a training program that doesn't count toward a degree from an employer, employment agency, union, software or equipment manufacturer, or other training provider?

1. YES
2. NO
7. REFUSED
8. DON'T KNOW

A6b. Since [MYLI], have you received a vocational certificate for completing a vocational training program that doesn't count toward a degree, at a high school?

1. YES
2. NO
7. REFUSED
8. DON'T KNOW

A6c. Since [MYLI], have you received a vocational certificate—that does not count toward a degree—for completing a program at a community or technical college, or other school after high school? Do not include teaching certificates or college degrees.

1. YES
2. NO
7. REFUSED
8. DON'T KNOW

CAPI: IF NO CERTIFICATES (A6a, A6b, AND A6c ARE ALL NO [2], REFUSED [7], OR DON'T KNOW [8]) SKIP TO A7_INTRO

Ask A6d if they have received any certificate since MYLI (A6a, b or c=Yes [1]).

A6d How many certificates have you received since [MYLI]]?

_____ (MAX=4)

-1. REFUSED

[SKIP TO A7_INTRO]

-2. DON'T KNOW

[SKIP TO A7_INTRO]

CAPI: DISPLAY "VERIFICATION SCREEN: DO NOT READ TO RESPONDENT. WE HAVE RECORDED __ CERTIFICATE(S). IF THIS IS NOT CORRECT, PLEASE GO BACK AND ADJUST."

Ask A6e if they have received at least 1 certificate since MYLI (A6d_1≥1).

CAPI: IF A6d>1 CERTIFICATE, REPEAT A6e-i FOR UP TO 4

A6e. [CAPI: IF A6d=1] What is the name of the vocational certificate you received?

[CAPI: IF A6d>=2 FOR FIRST LOOP ASK] What is the name of the vocational certificate you received first?

[CAPI: IF A6d>=2 FOR SUBSEQUENT DIPLOMAS:] What is the name of the vocational certificate you received after that?

CERTIFICATE NAME:

<A6e_X> _____

<A6EDK_X>

7. REFUSED

8. DON'T KNOW

A6f. When you started this training, how long were you told it would take to earn this certificate if you studied full-time?

1. Less than one month
2. One to six months
3. Seven to eleven months
4. One to two years
5. More than 2 years
7. REFUSED
8. DON'T KNOW

A6g. Where did you go to receive this vocational certificate?

<A6G1_SCH_1> _____

SELECT FROM DROPDOWN MENU OF SCHOOLS REPORTED IN [MYLI]

<A6G1_X>

91. VOL: ON THE JOB TRAINING
95. VOL: NOT LISTED ABOVE (CHECK SPELLING) (_____)

<A6G1_95_OTHER_X>

97. REFUSED
98. DON'T KNOW

<A6G1_NAME_X> Captures the name

A6h. Is this vocational certificate related to working in the field of healthcare?

1. YES
2. NO
7. REFUSED
8. DON'T KNOW

A6i. When did you receive this vocational certificate? Please give me the month and year; your best estimate is fine.

<A6IMM_X> ____ (1-12) / ____ <A6IYY_X>
M M / Y Y Y Y

<A6INA_X>

6. IF VOLUNTEERED: CERTIFICATE EARNED BUT NOT YET RECEIVED
5. IF VOLUNTEERED: CERTIFICATE NOT YET RECEIVED DUE TO COVID-19
7. REFUSED
8. DON'T KNOW

Ask A7 of everyone.

Certifications and Licenses

[A7_INTRO] This next set of questions asks about any professional certifications or state or industry licenses you may have received since [MYLI].

A professional certification or license shows you are qualified to perform a specific job like Licensed Realtor, Certified Medical Assistant, Certified Construction Manager, or an IT certification. A certification is awarded by an organization; a state or industry license is awarded by a licensing agency. Both professional certifications and state or industry licenses need to be renewed periodically.

[IF INTERMEDIATE RESPONDER: When we last spoke in [MYLI], you told us that you had received [A7ReadAloudCount] professional [IF A7ReadAloudCount=1 “certification”, ELSE “certifications”] or state, or industry [IF A7ReadAloudCount=1 “license”, ELSE “licenses”]. [IF A7ReadAloudCount > 0: “These included [A7ReadAloudN1..., A7ReadAloudN7].”] Now I’d like to ask about any other professional certifications, or state or industry licenses you received since [MYLI].

INTERVIEWER SELECT APPROPRIATE RESPONSE:

1. RESPONDENT DID NOT QUESTION THE LIST [CONTINUE TO A7]
2. RESPONDENT VOLUNTEERED THAT AT LEAST ONE CREDENTIAL WAS WRONG [READ SCRIPT BELOW THEN PROCEED TO A7]

Thank you for clarifying that for me. I have made a note in your file to correct this. Let’s continue now.

A7. Since [MYLI], have you received any professional certifications, or state or industry licenses? Please do not include any commercial licenses such as a liquor license or vending license.

1. YES
2. NO [SKIP TO A8_INTRO]
7. REFUSED [SKIP TO A8_INTRO]
8. DON’T KNOW [SKIP TO A8_INTRO]

Ask A7a if they have received a professional certification, or state or industry license since MYLI (A7=Yes).

A7a. How many professional certifications or state or industry licenses have you received since [MYLI]?

- # _____ (MAX=4)
- 1. REFUSED [SKIP TO A8_INTRO]
 - 2. DON’T KNOW [SKIP TO A8_INTRO]

CAPI: DISPLAY “VERIFICATION SCREEN: DO NOT READ TO RESPONDENT. WE HAVE RECORDED __ CERTIFICATION(S) OR LICENSE(S). IF THIS IS NOT CORRECT, PLEASE GO BACK AND ADJUST.”

Ask A7b-f if they have received at least 1 professional certification, or state or industry license since MYLI (A7a≥1).

CAPI: IF A7a>1 REPEAT A7bh for up to 4.

A7b. [CAPI: IF A7a=1] What is the name of the professional certification or state or industry license you received?

[CAPI: IF A7a>=2 FOR FIRST LOOP ASK] What is the name of the professional certification or state or industry license you received first?

[CAPI: IF A7a>=2 FOR SUBSEQUENT LOOPS ASK]: What is the name of the professional certification or state or industry license you received next?

<A7b_X> _____

7. REFUSED
8. DON'T KNOW

A7c. When you first decided to seek this professional certification or license, how long were you told it would take? (Please include both formal training time and any required months or years of work in the field.)

1. Less than one month
2. One to six months
3. Seven to eleven months
4. One to two years
5. More than 2 years
7. REFUSED
8. DON'T KNOW

A7d. Is this professional certification, or state or industry license related to working in the field of healthcare?

1. YES
2. NO
7. REFUSED
8. DON'T KNOW

A7e. What kind of work is this professional certification or state or industry license for? For example: teaching, vocational nursing, computer network administration, auditing, or truck driving.

- _____
7. REFUSED
 8. DON'T KNOW

A7f. How many months of supervised work in the field are required to earn this type of professional certification or state or industry license? This type of supervised work could be in an internship, a clinical rotation, or a co-op job.

1. One month
2. Two to three months
3. Four to six months
4. More than six months
5. None required
7. REFUSED
8. DON'T KNOW

A7g. When did you receive this professional certification, or state or industry license? Please give me the month and year.

<A7GMM_X> ___ ___ (1-12) / ___ ___ ___ ___ (20112023) <A7GYY_X>
M M / Y Y Y Y

<A7GNA_X>

6. IF VOLUNTEERED: CERTIFICATION/LICENSE EARNED BUT NOT YET RECEIVED
5. IF VOLUNTEERED: CERTIFICATION/LICENSE NOT YET RECEIVED DUE TO COVID-19
7. REFUSED
8. DON'T KNOW

A7h. Who issued the professional certification, or state or industry license?

1. A federal, state, or local government,
2. A professional or trade association,
3. A business or company,
4. Another group or organization (SPECIFY: _____)
<A8F_4_OTHER_X>
7. REFUSED
8. DON'T KNOW

Work-Based Training

Ask A8 of everyone.

[A8_INTRO] Now I would like to ask you about any formal work-related trainings or experiences you have had since [MYLI].

A8. Since [MYLI], have you completed an internship, co-op, practicum, clerkship, externship, residency, clinical experience, apprenticeship, or similar program? We refer to these as 'work experience programs.'

1. YES
2. NO
7. REFUSED
8. DON'T KNOW

Ask A9a-A9c of everyone.

A9. I am going to read you three statements. Please tell me whether you would say you strongly agree, somewhat agree, somewhat disagree, or strongly disagree with the following statements:

	Strongly agree	Somewhat agree	Somewhat disagree	Strongly disagree	REFUSED	DON'T KNOW
a. I am making progress towards my long-range educational goals . Would you say you:	1	2	3	4	7	8
b. I am making progress towards my long-range employment goals . Would you say you:	1	2	3	4	7	8
c. I see myself on a career path. Would you say you:	1	2	3	4	7	8

Future Aspirations

Ask A10-A11 of everyone who participated in any training (A2 OR A2a=1). If no academic training at all since MYLI (A2 OR A2a=2, 7, or 8) skip to Section B.

[A10_INTRO] Now that we’ve talked about any credentials that you may have received and the progress you are making toward your long-range goals, I’d like to ask a few questions about any plans you may have to take additional classes or move up in your current or similar occupation.

A10. Think about the different schools you’ve attended that we talked about already. Did anyone at those schools suggest other classes or training you should take to move up to the next level in your career?

1. YES
2. NO
7. REFUSED
8. DON'T KNOW

A11. Let’s say that more schooling or training is required for you to move up to the next level in your career. How likely is it that you will pursue the extra schooling or training you need so that you can move up in your career?

1. Very Likely
2. Somewhat likely
3. Not very likely
7. REFUSED
8. DON'T KNOW

B. BARRIERS TO LONG-TERM CREDENTIAL RECEIPT

A long-term healthcare training program is one that should take more than one year to complete. Some examples of a long-term healthcare training program are nursing, radiology technician, physical therapy assistant, etc. We know that there are many things that can make it hard to enroll in or complete a long-term healthcare training. I'd like to talk a little bit about the types of challenges some people face.

B1. Are you currently enrolled in a long-term healthcare training program?

- 1. YES [SKIP TO B5]
- 2. NO
- 7. REFUSED
- 8. DON'T KNOW

B2. Since [RAD], have you ever enrolled in a long-term healthcare training program?

- 1. YES [SKIP TO B5]
- 2. NO
- 7. REFUSED
- 8. DON'T KNOW

B3. Since [RAD], did you ever consider enrolling in a long-term healthcare training program?

- 1. YES
- 2. NO [SKIP TO SECTION C]
- 7. REFUSED [SKIP TO SECTION C]
- 8. DON'T KNOW [SKIP TO SECTION C]

B4. I'm going to read you a list of factors that may **impact a person's ability to enroll in a long-term healthcare training program**. For each item I read, please tell me whether the item had a big impact, some impact, or no impact at all on your ability enroll in a long-term healthcare training program.

	A big impact	Some impact	No impact at all	REFUSED	DON'T KNOW
a) There was a long waiting list for the program I wanted to study	1	2	3	7	8
b) There were too many prerequisite trainings to complete before I could enroll in the training program that I wanted to do	1	2	3	7	8
c) The long-term healthcare training would take more time than I could commit to given other priorities like child care and work.	1	2	3	7	8

[IF B2=NO, REFUSED, DON'T Know, SKIP TO SECTION C, IF B2=YES ASK B5.]

B5. I'm going to read you a list of factors that may **delay a person's ability to start a long-term healthcare training program once they enrolled**. For each item I read, please tell me whether the item had a big impact, some impact, or no impact at all on your ability start a long-term healthcare training program.

	A big impact	Some impact	No impact at all	REFUSED	DON'T KNOW
a) There was a long waiting list for the occupational classes I needed to take	1	2	3	7	8
b) I had trouble getting into the prerequisite trainings I needed to complete because they were full	1	2	3	7	8
c) I had trouble completing the prerequisite classes I needed because they were offered at times that didn't fit well with my schedule	1	2	3	7	8

B6. Since [RAD], did you stop participating in a long-term healthcare training program without completing it?

- 1. YES
 - 2. NO
 - 7. REFUSED
 - 8. DON'T KNOW
- [SKIP TO B8]
 [SKIP TO B8]
 [SKIP TO B8]

B7. I'm going to read you a list of factors that may **impact a person's ability to complete a long-term healthcare training program**. For each item I read, please tell me whether the item had a big impact, some impact, or no impact at all on your ability to complete a long-term healthcare training program.

	A big impact	Some impact	No impact at all	REFUSED	DON'T KNOW
a) The prerequisite courses were hard and I could not complete them	1	2	3	7	8
b) I could no longer afford the tuition or other training expenses for the long-term healthcare training program	1	2	3	7	8
c) I was no longer interested in doing the type of work I was training for	1	2	3	7	8
d) I had personal health, childcare/family responsibilities that prevented me from completing the program	1	2	3	7	8
e) I had trouble getting my clinical hours in, especially during COVID-19	1	2	3	7	8
f) I needed to work more hours, so I did not have time to participate in the training program	1	2	3	7	8
g) I felt it was taking too long to complete the program	1	2	3	7	8

B8. [IF B4a OR B5a OR B5e=1 OR 2, ASK B8; ELSE SKIP TO SECTION C] While you were waiting for a spot to open up, waiting to complete your prerequisite courses, or waiting for your clinical assignments, did you complete a shorter training program?

1. YES
2. NO
7. REFUSED
8. DON'T KNOW

[SKIP TO SECTION C]
 [SKIP TO SECTION C]
 [SKIP TO SECTION C]

B8a. Was this shorter training in the field of healthcare?

1. YES
2. NO
7. REFUSED
8. DON'T KNOW

C. EMPLOYMENT SUCCESS

Advancement in Career Pathway

One of the important parts of this study is learning about the types of jobs participants had since the start of the study. The first set of questions asks specifically about any jobs you may have had in the past three years.

*[IF INTERMEDIATE RESPONDER: We would like to start by asking about your current or most recent job since [MYLI].

CAPI: if this type of R, SKIP TO C14

*[IF INTERMEDIATE NON-RESPONDER: We would like to start by asking about any job you may have had back in [3YRPRIORDATE].

Employment Status At 36-Months If 36-Month Non-responder

C1. In [3YRPRIORDATEI], were you working at a job for pay?

1. YES
2. NO [SKIP TO C14]
7. REFUSED [SKIP TO C14]
8. DON'T KNOW [SKIP TO C14]

Ask C2 if they were working at a job for pay (C1=Yes) in [3YRPRIORDATE].

This next set of questions is about the job you had in [3YEARPRIORDATE]. If you had more than one job, please talk about your main job [3YEARPRIORDATE].

INTERVIEWER: IF ASKED HOW TO DETERMINE MAIN JOB: *This would be about the job where you worked the most hours in [3YEARPRIORDATE].* INTERVIEWER IF HOURS ARE THE SAME: *OK, then please answer about the job you've worked at the longest.* INTERVIEWER: IF HOURS ARE THE SAME AND TENURE IS THE SAME: *Ok, then please pick one of those jobs and answer the next set of questions about that job.*

C2. What was the name of your employer in [3YRPRIORDATE]?

<C2_NAME> _____ (CHECK SPELLING)

6. [IF VOLUNTEERED:] SELF-EMPLOYED
7. REFUSED [SKIP TO C14]
8. DON'T KNOW

Industry and Occupation

C3. In that job, working for [IF C2=6: "yourself" else [C2_NAME]] did you work:

1. as an employee of a private for-profit company or business, or of an individual, for wages, salaries, or commissions?
2. as an employee of a private not for-profit, tax exempt, or charitable organization?
3. as a local government employee (city, county, etc.)? [SKIP TO C5]
4. as a state government employee? [SKIP TO C5]
5. as a federal government employee? [SKIP TO C5]
6. self-employed, in your own *not incorporated* business, professional practice, or farm?
7. self-employed, in your own *incorporated* business, professional practice, or farm?
8. without pay in family business or farm?
97. REFUSED
98. DON'T KNOW

C4. In what kind of business or industry was that job?

- _____ [SKIP TO C5]
7. REFUSED [ASK C4a]
 8. DON'T KNOW [ASK C4a]

Ask C4a of any respondent where (C4 =REFUSED or DON'T KNOW).

C4a. Was that job mainly...

1. Manufacturing
2. Wholesale trade
3. Retail trade
4. Healthcare
5. Self-employed
6. Other (agriculture, construction, service, government, etc.)
7. REFUSED
8. DON'T KNOW

C5. What kind of work did you do at that job, that is, what was your occupation? (For example: registered nurse, personnel manager, supervisor or order department, secretary, accountant.) If you had more than one job, please answer for your main job.

- _____
7. REFUSED
 8. DON'T KNOW

C6. What were your usual activities or duties at this job? (For example: patient care, directing hiring policies, supervising order clerks, typing, and filing, reconciling financial records.)

- _____
7. REFUSED

8. DON'T KNOW

C7. What was your job title?

- 7. REFUSED
- 8. DON'T KNOW

C8. Was this occupation in the field of healthcare?

- 1. YES
- 2. NO [SKIP TO INSTRUCTIONS BEFORE C9]
- 7. REFUSED [SKIP TO INSTRUCTIONS BEFORE C9]
- 8. DON'T KNOW [SKIP TO INSTRUCTIONS BEFORE C9]

C8a. What type of healthcare setting did you work in: was it an in-patient hospital; an out-patient hospital setting; an out-patient private office or clinic; a long-term care facility; or another type of setting?

- 1. IN-PATIENT HOSPITAL
- 2. OUT-PATIENT HOSPITAL
- 3. OUT-PATIENT CLINIC OR PRIVATE PRACTICE
- 4. A LONG-TERM CARE FACILITY
- 5. ANOTHER TYPE OF SETTING (SPECIFY _____)
- 7. REFUSED
- 8. DON'T KNOW

[IF C2=8 then 3YRJOBNAME="at that job"; IF C2=6 then 3YRJOBNAME="for yourself", else 3YRJOBNAME=C2_NAME].

[IF [C2=6] OR [C3=6 or 7] OR C3a=5] then 3YRSELFEMPLOYED=YES else 3YRSELFEMPLOYED=NO]

Ask C9 if they named an employer, reported they were self-employed, or didn't know their employer's name (C2≠REFUSED)

C9. Are you still working [IF C2 = 8, "at that job", or IF C3 = 6 or 7, "for yourself", ELSE "at <C2_NAME>]?

- 1. YES [SKIP TO C11]
- 2. NO
- 7. REFUSED [SKIP TO C11]
- 8. DON'T KNOW [SKIP TO C11]

Ask C10 if they are NOT still working for the same employer/or self-employed (C9=No).

C10. When did you stop working [IF C2 = 8, “at that job”, or IF C3 = 6 or 7, “for yourself”, ELSE “at <C2_NAME>”]?
_____ / _____
M M/ Y Y Y Y

[RANGE = 2011 – CURRENT YEAR]

- 6. [IF VOLUNTEERED:] STILL WORKING THERE
- 7. REFUSED
- 8. DON'T KNOW

Ask C11 if they are NOT self-employed [C2≠6] OR [C3≠6 or 7] OR C3a≠5.

CAPI: IF [C2=6] OR [C3=6 or 7] OR C3a=5] SKIP TO C12

C11. In [MYLI] when you were working [IF C2 = 8, “at that job”, ELSE “at <C2_NAME>”], about how much did you typically earn per hour before taxes?

[INTERVIEWER: ENTER -1 FOR REFUSED OR -2 FOR DON'T KNOW]

\$ (2.50-75.00) ____ . ____ PER HOUR

[SKIP TO C13]

- 1 REFUSED
- 2 DON'T KNOW

VERIFICATION SCREEN: DO NOT READ TO RESPONDENT
WE HAVE RECORDED AN HOURLY RATE OF: <C11>.
IF THIS IS NOT CORRECT, PLEASE GO BACK AND ADJUST.

Ask C11a if they do NOT know how much they earned per hour working for their employer (C11= Refused or Don't know).

C11a. [IF C11=REFUSED OR DON'T KNOW] Can you tell me how much you earned for some other time period besides hourly, such as per day, per week, every two weeks, every month, or every year?

[INTERVIEWER: ENTER -1 FOR REFUSED OR -2 FOR DON'T KNOW]

\$(2.50-75.00) ____ . ____ PER HOUR (INCLUDE DECIMALS)

\$(1-400) _____ PER DAY

\$(1-4,000) _____ PER WEEK

\$(1-8,000) _____ EVERY 2 WEEKS/TWICE A MONTH

\$(1-16,000) _____ EVERY MONTH

\$(1-156,000) _____ ANNUALLY

- 1 REFUSED
- 2 DON'T KNOW

VERIFICATION SCREEN: DO NOT READ TO RESPONDENT
WE HAVE RECORDED A RATE OF: <C11a>.
IF THIS IS NOT CORRECT, PLEASE GO BACK AND ADJUST.

Ask C12 if they were self-employed ([C2=6] OR [C3=6 or 7] OR C3a=5] =Self-employed).

CAPI: IF [C2≠6] OR [C3≠6 or 7] OR C3a≠5 SKIP TO C13.

C12. How much did you earn per week working for yourself?

[INTERVIEWER: ENTER -1 FOR REFUSED OR -2 FOR DON'T KNOW]

\$ _____ PER WEEK (\$1-3,000)

[SKIP TO C13]

-1 REFUSED

-2 DON'T KNOW

VERIFICATION SCREEN: DO NOT READ TO RESPONDENT
WE HAVE RECORDED A WEEKLY RATE OF: <C12>.
IF THIS IS NOT CORRECT, PLEASE GO BACK AND ADJUST.

Ask C12a if they were working for themselves ([C2=6] OR [C3=6 or 7] OR C3a=5) AND they refused to answer or do not know how much they earned per week working for themselves (C12=Refused OR Don't' know).

C12a. Can you tell me how much you earned working for yourself for some other time period besides weekly, such as per hour, per day, every two weeks, every month, or every year?

[INTERVIEWER: ENTER -1 FOR REFUSED OR -2 FOR DON'T KNOW]

\$(2.50-75.00) _____ PER HOUR (INCLUDE DECIMALS)

\$(1-400) _____ PER DAY

\$(1-8,000) _____ EVERY 2 WEEKS/TWICE A MONTH

\$(1-16,000) _____ EVERY MONTH

\$(1-156,000) _____ ANNUALLY/EVERY YEAR

-1 REFUSED

-2 DON'T KNOW

VERIFICATION SCREEN: DO NOT READ TO RESPONDENT
WE HAVE RECORDED A RATE OF: <C12a>.
IF THIS IS NOT CORRECT, PLEASE GO BACK AND ADJUST.

Ask C13 if they were working in [3YRPRIORDATE] (C1=Yes).

C13. In [3YRPRIORDATE] while working [IF C2 = 8, "at that job", or IF C3 = 6 or 7, "for yourself", ELSE "at <C2_NAME>], about how many hours a week did you work in a typical week?

[INTERVIEWER: ENTER -1 FOR REFUSED OR -2 FOR DON'T KNOW]

INTERVIEWER IF RESPONDENT INDICATES THAT THE HOURS VARY, INSTRUCT THEM: Please use the last week that you worked at this job.

_____ HOURS PER WEEK (1-80)

-1 REFUSED

-2 DON'T KNOW

VERIFICATION SCREEN: DO NOT READ TO RESPONDENT
WE HAVE RECORDED A RATE OF: <C13> HOURS PER WEEK.

IF THIS IS NOT CORRECT, PLEASE GO BACK AND ADJUST.

Current Employment Status

Ask C14 if they are NOT still working for the same employer or for themselves (C9=No, Refused, Don't know). If they are still working at same job as three years ago (C9=Yes) skip to C17.

C14. Are you currently working at a job for pay?

1. YES
2. NO
7. REFUSED
8. DON'T KNOW

[SKIP TO NOTE PRIOR TO C16]

Employment Status in Past Three Years

Ask C15 if they are NOT currently working at a job for pay (C14=NO, REFUSED, DON'T KNOW).

C15. Since [MYLI], have you worked at a job for pay?

1. YES
2. NO
7. REFUSED
8. DON'T KNOW

CAPI: IF C9=YES (still employed/self-employed) SKIP TO NOTE BEFORE C17; IF C14=YES OR C15=YES (i.e., currently working or worked last 3 years) ASK C16; IF C15=NO, REFUSED, DON'T KNOW (i.e., not currently working and no work in last 3 years) SKIP TO SECTION D

Read the following text and ask C16 if they are either currently working for pay or have worked for pay in the past 3 years (C14 or C15=Yes).

Okay, I am going to start with some questions about your [IF C9=YES or C14=YES: current job/IF C15=YES: most recent job]. If you have more than one job, please talk about your main job.

INTERVIEWER: IF ASKED HOW TO DETERMINE MAIN JOB: This would be about the job where you worked the most hours. INTERVIEWER IF HOURS ARE THE SAME: OK, then please answer about the job you've worked at the longest. INTERVIEWER: IF HOURS ARE THE SAME AND TENURE IS THE SAME: Ok, then please pick one of those jobs and answer the next set of questions about that job.

C16. What is the name of your [IF C14=YES: current /IF C15=YES: most recent] employer?

<C16_NAME>_____

- 6. [IF VOLUNTEERED:] SELF-EMPLOYED
- 7. REFUSED
- 8. DON'T KNOW

Ask C17- if they are either currently working for pay or have worked for pay in the past 3 years (C9 or C14 or C15=Yes).

C17. When did you start working [IF C9 = 1 AND C10 = 7 OR 8, "at that job", or IF C9 = 1 AND C10 = 6, "for yourself", ELSE IF C9 = 1 AND C2 NE 6, 7, OR 8 "at <C2_NAME>], ELSE [IF C15= 6, "for yourself", ELSE for <C16_NAME>]?

____ (01-12) / ____ (2011-2023)
M M / Y Y Y Y
7. REFUSED
8. DON'T KNOW

Ask C17 if they are NOT self-employed ((C8≠Self-employed AND C9=Yes) OR C15≠Self-employed).

C18. [(IF C9 = 1 AND IF C8 = 7 OR 8) OR (C15 = 7 OR 8) "At that job", OR (IF C9 = 1 AND C2 ≠ 6, 7, or 8, "At your job with C8_NAME", ELSE IF C15 ≠ 6, 7, or 8, "At your job with C15_NAME"], about how much [IF C9=YES or C4=YES: do/IF C15=YES: did] you typically earn per hour before taxes?
[INTERVIEWER: ENTER -1 FOR REFUSED OR -2 FOR DON'T KNOW]

\$(2.50-75.00) ____ . ____ PER HOUR [SKIP TO C19]
-1 REFUSED
-2 DON'T KNOW

VERIFICATION SCREEN: DO NOT READ TO RESPONDENT
WE HAVE RECORDED AN HOURLY RATE OF: <C18>.
IF THIS IS NOT CORRECT, PLEASE GO BACK AND ADJUST.

Ask C18a if they don't know how much they typically earn/earned at their employer or for themselves (C18= Refused or Don't know).

C18a. Can you tell me how much you [IF C9=YES or C14=YES: earn/IF C15=YES: earned] for some other time period besides hourly, such as per day, per week, every two weeks, every month or annually?
[INTERVIEWER: ENTER -1 FOR REFUSED OR -2 FOR DON'T KNOW]

\$(2.50-75.00) ____ . ____ PER HOUR
\$(1-400) ____ PER DAY
\$(1-4,000) ____ PER WEEK
\$(1-8,000) ____ EVERY 2 WEEKS/TWICE A MONTH
\$(1-16,000) ____ EVERY MONTH
\$(1-156,000) ____ ANNUALLY

- 1 REFUSED
- 2 DON'T KNOW

VERIFICATION SCREEN: DO NOT READ TO RESPONDENT
WE HAVE RECORDED A RATE OF: <C18a>.
IF THIS IS NOT CORRECT, PLEASE GO BACK AND ADJUST.

CAPI: IF (C8=6 AND C93=1) OR (C16=6), ASK C19; OTHERWISE, SKIP TO C20

Ask C19 if they ARE self-employed ((C2= Self-employed AND C3=6 or 7) OR (C16=Self-employed)).

C19. How much [IF C9=YES or C14=YES: do/IF C15=YES: did] you earn per week working for yourself?
[INTERVIEWER: ENTER -1 FOR REFUSED OR -2 FOR DON'T KNOW]

- \$ _____ PER WEEK (\$1-3,000 NO DECIMAL) [SKIP TO C20]
- 1 REFUSED
- 2 DON'T KNOW

VERIFICATION SCREEN: DO NOT READ TO RESPONDENT
WE HAVE RECORDED A WEEKLY RATE OF: <C19>.
IF THIS IS NOT CORRECT, PLEASE GO BACK AND ADJUST.

Ask C19a if they ARE self-employed AND don't know how much they earn/earned working for themselves (C19= Refused or Don't know).

C19a. Can you tell me how much you [IF C9=YES or C14=YES: earn/IF C15=YES: earned] for some other time period besides weekly, such as per day, per week, every two weeks, every month, or annually?
[INTERVIEWER: ENTER -1 FOR REFUSED OR -2 FOR DON'T KNOW]

- \$(2.50-75.00) _____ PER HOUR
- \$(1-400) _____ PER DAY
- \$(1-4,000) _____ PER WEEK
- \$(1-8,000) _____ EVERY 2 WEEKS/TWICE A MONTH
- \$(1-16,000) _____ EVERY MONTH
- \$(1-156,000) _____ ANNUALLY
- 1 REFUSED
- 2 DON'T KNOW

VERIFICATION SCREEN: DO NOT READ TO RESPONDENT
WE HAVE RECORDED A RATE OF: <C19a>.
IF THIS IS NOT CORRECT, PLEASE GO BACK AND ADJUST.

Ask C20 if they are currently working for pay or have worked for pay in the past 3 years (C9 or C14 or C15=Yes).

C20. At your job [IF C16_NAME IS NOT MISSING “with C16_NAME”], about how many hours a week [IF C9=YES or C14=YES: do/IF C15=YES: did] you work in a typical week? INTERVIEWER IF R INDICATES THAT THE HOURS VARY INSTRUCT THEM: Please use the last week that you worked at this job.
[INTERVIEWER: ENTER -1 FOR REFUSED OR -2 FOR DON’T KNOW]

- _____ HOURS PER WEEK (1-80)
- 1 REFUSED
- 2 DON’T KNOW

VERIFICATION SCREEN: DO NOT READ TO RESPONDENT
WE HAVE RECORDED A RATE OF: <C20> HOURS PER WEEK.
IF THIS IS NOT CORRECT, PLEASE GO BACK AND ADJUST.

Current/Most Recent Job

CAPI: THIS SECTION IS ASKED FOR THE CURRENT OR MOST RECENT JOB. IF CURRENT JOB (C9 OR C14=1) USE WORDING 1 (PRESENT TENSE); IF MOST RECENT JOB (C15=YES) USE WORDING 2 (PAST TENSE).

Read the following text and ask C21-C33 of any respondent that has worked at all in the past three years (since 36-month survey)—that is where: (C9 OR C14 OR C15=Yes)

This next set of questions is about your [current job/most recent job].

Industry and Occupation

C21. In your [IF C9=YES OR C14=YES: current /IF C15=YES: most recent] job, [do /did] you work:

1. as an employee of a private for-profit company or business, or of an individual, for wages, salaries, or commissions?
2. as an employee of a private not for-profit, tax exempt, or charitable organization?
3. as a local government employee (city, county, etc.)? [SKIP TO C23]
4. as a state government employee? [SKIP TO C23]
5. as a federal government employee? [SKIP TO C23]
6. self-employed, in your own *not incorporated* business, professional practice, or farm?
7. self-employed, in your own *incorporated* business, professional practice, or farm?
8. without pay in family business or farm?
97. REFUSED
98. DON’T KNOW

C22. In what kind of business or industry [is/was] your [IF C9 OR C14=YES: current /IF C15=YES: most recent] job?

- _____ [SKIP TO C23]
- 7. REFUSED [ASK C22a]
- 8. DON’T KNOW [ASK C22a]

Ask C22a of any respondent that has worked at all in the past three years (since 36-month survey)—that is where: (C9 OR C14 OR C15=Yes) and response to C22=refused or don't know.

C22a. [Is/was] your [IF C9 OR C14=YES: current /IF C15=YES: most recent] job mainly...

1. Manufacturing
2. Wholesale trade
3. Retail trade
4. Healthcare
5. Self-employed
6. Other (agriculture, construction, service, government, etc.)
7. REFUSED
8. DON'T KNOW

C23. What kind of work [do you do in your current job/did you do in your most recent job], that is, what [is/was] your occupation? (For example: registered nurse, personnel manager, supervisor or order department, secretary, accountant.) If you [have/had] more than one job, please answer for your main job.

-
7. REFUSED
 8. DON'T KNOW

C24. What [are/were] your usual activities or duties at this job? (For example: patient care, directing hiring policies, supervising order clerks, typing, and filing, reconciling financial records.)

-
7. REFUSED
 8. DON'T KNOW

C25. What [is/was] your job title?

-
7. REFUSED
 8. DON'T KNOW

C26. [IF CURRENT JOB: "Is"/ IF MOST RECENT: "Was"] this occupation in the field of healthcare?

1. YES
2. NO [SKIP TO INSTRUCTIONS BEFORE C26b]
7. REFUSED [SKIP TO INSTRUCTIONS BEFORE C26b]
8. DON'T KNOW [SKIP TO INSTRUCTIONS BEFORE C26b]

C26a. What type of healthcare setting [IF CURRENT JOB: “do” / IF MOST RECENT: “did”] you work in: [IF CURRENT JOB: “is” / IF MOST RECENT: “was”] it an in-patient hospital; an out-patient hospital setting; an out-patient private office or clinic; a long-term care facility; or another type of setting?

1. IN-PATIENT HOSPITAL
2. OUT-PATIENT HOSPITAL
3. OUT-PATIENT CLINIC OR PRIVATE PRACTICE
4. A LONG-TERM CARE FACILITY
5. ANOTHER TYPE OF SETTING (SPECIFY _____)
7. REFUSED
8. DON’T KNOW

[IF C26=NO, REFUSED, DON’T KNOW ASK C26b; ELSE SKIP TO C27]

C26b. Since [RADATE], have you ever worked in the field of healthcare?

1. YES
2. NO [SKIP TO INSTRUCTIONS BEFORE C27]
7. REFUSED [SKIP TO INSTRUCTIONS BEFORE C27]
8. DON’T KNOW [SKIP TO INSTRUCTIONS BEFORE C27]

C26c. Why did you stop working in the field of healthcare?

-
7. REFUSED
 8. DON’T KNOW

Job Quality

Job Schedule

Ask C27 of everyone who was employed at all in the past three years (since 36-month survey) (C9 OR C14 OR C15=YES).

C27. [Do/Did] you usually work a regular daytime schedule or some other schedule [IF C16=6: when working for yourself / IF C16<6: “at [C16_NAME]”, ELSE “at that job”? INTERVIEWER READ IF ASKED: A regular daytime schedule is one in which you work anytime between the hours of 6AM to 6PM.

1. A REGULAR DAYTIME SCHEDULE (ANYTIME BETWEEN 6AM TO 6PM) [SKIP TO C28]
2. SOME OTHER SCHEDULE
7. REFUSED [SKIP TO C28]
8. DON’T KNOW [SKIP TO C28]

Ask C27a-C27c if they work or worked some other schedule (C27=Some other schedule).

C27a. Which of the following best describes the type of schedule you usually (work/worked) [IF C16=6: when working for yourself / IF C16<>6: “at [C16_NAME], ELSE “at that job”]?

1. A regular evening schedule (Anytime between 2 pm to Midnight),
2. A regular night schedule (Anytime around 9pm to 8am),
3. A rotating schedule - one that changes periodically from day to evenings or night,
4. A split schedule - one consisting of two distinct periods each day,
5. An irregular schedule arranged by employer, or
6. Some other schedule? (**SPECIFY**)
7. REFUSED
8. DON'T KNOW

C27b. How far in advance do you receive your work schedule? Would you say...

1. A day in advance,
2. Two or three days in advance,
3. A week in advance,
4. Two weeks to a month in advance, or
5. More than a month in advance?
6. IF VOLUNTEERED: SCHEDULE DOESN'T CHANGE
7. REFUSED
8. DON'T KNOW

C27c. [Does/Did] your job require you to work some nights or weekends?

1. YES
2. NO
7. REFUSED
8. DON'T KNOW

Ask C28 of everyone who has worked at all in the past three years (since 36-month survey) (C9 OR C14 OR C15=Yes).

C28. How much do you agree or disagree with the following statements about working (C16=6: for yourself / IF C16<>6: “at [C16_NAME], ELSE “at that employer”)?

	Strongly agree	Somewhat agree	Somewhat disagree	Strongly disagree	REFUSE D	DON'T KNOW
a. I [am/was] able to balance work and family responsibilities. Do you strongly agree, somewhat agree, somewhat disagree, or strongly disagree?	1	2	3	4	7	8
b. I [have/had] some choice in setting my regular work hours to meet my needs. Do you strongly agree, somewhat agree, somewhat disagree, or strongly disagree?	1	2	3	4	7	8
c. If I [have/had] a family emergency like a sick child, my employer [will allow/allowed] me to take the time off or change my schedule. Do you strongly agree, somewhat agree, somewhat disagree, or strongly disagree?	1	2	3	4	7	8

Job Benefits

Ask C29 of everyone who has worked at all in the past three years (since 36-month survey) (C9 OR C14 OR C15=YES).

C29. [Are/Were] any of the following benefits available to you at [your/that] job? That is, if you [want/had wanted] it, [can you receive/could you have received]:

	YES	NO	REFUSED	DON'T KNOW
a. Health insurance?	1	2	7	8
b. If you [IF CURRENT SPELL: “want” / IF CLOSED SPELL: “had wanted”] it, [IF CURRENT SPELL: “can you receive” / IF CLOSED SPELL: “could you have received”] paid vacation?	1	2	7	8
c. If you [IF CURRENT SPELL: “want” / IF CLOSED SPELL: “had wanted”] it, [IF CURRENT SPELL: “can you receive” / IF CLOSED SPELL: “could you have received”] paid holidays?	1	2	7	8
d. Paid sick days?	1	2	7	8
e. Personal time off or PTO? IF NEEDED: this is sometimes referred to as earned time or paid time off and includes a set number of hours that you can use for sick, vacation, and personal time as you need it.	1	2	7	8
f. Retirement or pension benefits?	1	2	7	8

Quality of Work Life

Ask C30-C31 of everyone who has worked at all in the past three years (since 36-month survey) (C9 OR C14 OR C15=YES).

C30. Overall, how satisfied [are/were] you [IF C16<6: “with your job at [C16_NAME]”/IF C16=6: “working for yourself”, ELSE “at that job”]?

- 1. Very satisfied
- 2. Somewhat satisfied
- 1. Neither satisfied nor dissatisfied
- 2. Somewhat dissatisfied
- 3. Very dissatisfied
- 7. REFUSED
- 8. DON'T KNOW

C31. How much do you agree or disagree with the following statement: There [are/were] many opportunities for career advancement for me [IF C16=6: “when working for myself” / IF C16<6: “with] [C16_NAME]”, ELSE “with my job”]. Would you say you...

1. Strongly agree
2. Agree
3. Disagree
4. Strongly disagree
7. REFUSED
8. DON'T KNOW

Employer Support of Education and Training

Read the following text and ask C32-C33 of everyone who has worked at all in the past three years (since 36-month survey) (C9=YES OR C14=YES OR C15=YES).

Now I would like to ask you about any education and training support your [current/most recent] employer may offer.

C32. Sometimes employers offer financial support to help offset costs of education or training. [Does your current/Did your most recent] employer offer any financial supports to offset the costs of tuition?

1. YES
2. NO
7. REFUSED
8. DON'T KNOW

C33. Next, I'd like to ask about any other types of support your [current/most recent] employer [offers/offered] to employees participating in education and training programs? [Does your current/Did your most recent] employer offer....

	YES	NO	REFUSED	DON'T KNOW
a. A flexible schedule to work around your class schedule	1	2	7	8
b. Paid time off during the workday to attend class	1	2	7	8

Promotions

Read the following text and ask C34 if they are currently working for pay or have worked for pay in the past 3 years (C9 or C14 or C15=Yes).

The next set of questions is about any promotions you may have received. A promotion could be a change in job title, or an increase in job responsibilities with or without an increase in pay. These changes could be at the same employer or a new employer.

C34. Since [MYLI] have you received any promotions? Please include promotions you received from any employer since [MYLI]. If you changed employers to obtain a promotion, please include that as well.

- 1. YES
- 2. NO [SKIP TO SECTION D]
- 7. REFUSED [SKIP TO SECTION D]
- 8. DON'T KNOW [SKIP TO SECTION D]

Ask C35-C37 if they are currently working for pay or have worked for pay in the past 3 years (C9 or C14 or C15=Yes) AND have received a promotion in the past 3 years (C34=Yes).

C35. How many promotions have you received since [MYLI]?

- 1. ONE PROMOTION
- 2. TWO PROMOTIONS
- 3. THREE OR MORE PROMOTIONS
- 7. REFUSED
- 8. DON'T KNOW

C36. Since [MYLI]...

	YES	NO	REFUSED	DON'T KNOW
a. has an employer promoted you to the next level in your line of work?	1	2	7	8
b. have you been assigned increased job responsibilities/difficulty with a pay increase?	1	2	7	8
c. have you been assigned increased job responsibilities or more difficult tasks with no change in pay?	1	2	7	8
d. have you changed employers to take a new job at a higher level—that is a job with more responsibility/difficulty?	1	2	7	8
e. have you changed employers to take a new job with a higher pay rate?	1	2	7	8

C37. Thinking about the (IF C35 = 1 “promotion”, ELSE “promotions”) you have received since [MYLI], (IF C35 = 1 “has the promotion”, ELSE “have the promotions”) required you to have...

	YES	NO	REFUSED	DON'T KNOW
a) a new educational degree or certificate?	1	2	7	8
b) additional coursework or training?	1	2	7	8
c) more work experience?	1	2	7	8

D. EARNINGS FROM INFORMAL EMPLOYMENT

Read the following text and ask D1 of everyone.

Sometimes people do other things to earn money, either instead of a regular job or in addition to a regular job. The next few questions are about those types of activities.

IF JOB SINCE START OF REFERENCE PERIOD BUT NO CURRENT JOB ASK:

D1. You reported that your last job ended [INSERT DATE]. Sometimes people do other things to earn money, for example helping a neighbor care for a sick child or elder. Did you do other things to earn money last week such as helping a neighbor care for a sick child or elder?

- | | |
|---------------|---------------------|
| 1. Yes | [SKIP TO D4] |
| 2. No | [SKIP TO SECTION E] |
| 7. REFUSED | [SKIP TO SECTION E] |
| 8. DON'T KNOW | [SKIP TO SECTION E] |

IF NO JOB AT ALL DURING REFERENCE PERIOD, ASK:

D2. You haven't mentioned any jobs over the last three years. Sometimes people who don't have a regular job do other things to earn money, for example helping a neighbor care for a sick child or elder. Did you do any of those other things to earn money last week?

- | | |
|---------------|---------------------|
| 1. Yes | [SKIP TO D4] |
| 2. No | [SKIP TO SECTION E] |
| 7. REFUSED | [SKIP TO SECTION E] |
| 8. DON'T KNOW | [SKIP TO SECTION E] |

IF CURRENT JOB, ASK:

D3. Sometimes, in addition to working at a job where there is a definite arrangement for regular work on a continuing basis, people do other things to earn money for example helping a neighbor care for a sick child or elder. Outside of your jobs at [LIST CURRENT EMPLOYER NAMES] did you do other things to earn money last week such as helping a neighbor care for a sick child or elder?

- | | |
|---------------|---------------|
| 1. Yes | |
| 2. No | [SKIP TO D10] |
| 7. REFUSED | [SKIP TO D10] |
| 8. DON'T KNOW | [SKIP TO D10] |

D4. Please describe this other work that you did last week to earn money.

_____ [RECORDVERBATIM]

- | | |
|---------------|--|
| 7. REFUSED | |
| 8. DON'T KNOW | |

D5. Was this work in the healthcare field?

1. Yes
2. No
7. REFUSED
8. DON'T KNOW

D6. Some workers find short, in-person jobs or tasks through companies that connect them directly with customers using a website or mobile app, such as Uber, Lyft, and Doordash. These companies also coordinate payment for the service through the app. Other workers select short, paid tasks through companies that maintain online lists of tasks, such as Amazon Mechanical Turk and Figure Eight. These tasks typically take between a few minutes and a few hours to complete and are done entirely online. Do either of these describe any of the other work that you did last week?

1. Yes
2. No
7. REFUSED
8. DON'T KNOW

D7. To the best of your recollection, how many hours did you spend in these activities last week?

_____ [hours]

- 1 REFUSED
- 2 DON'T KNOW

D8. Is this more, less, or about the same amount of time [you/[NAME]] would spend on this activity in a typical week?

1. MORE TIME
2. ABOUT THE SAME AMOUNT OF TIME
3. LESS TIME
9. REFUSED
10. DON'T KNOW

D9. To the best of your recollection, how much money did you net last week after paying expenses like transportation costs?

_____ [dollars]

- 1 REFUSED
- 2 DON'T KNOW

IF CURRENTLY EMPLOYED ACCORDING TO EMPLOYMENT HISTORY MODULE, CONTINUE WITH D10 AND D11. OTHERWISE EXIT THIS MODULE.

D10. When you were hired at [name of current employer with most hours], were you asked to fill out a W-4 form? [IF ASKED: The W-4 form is where you declare how much of your income should be withheld for federal income taxes.]

1. Yes
2. No
7. REFUSED
8. DON'T KNOW

D11. If your employer laid you off because they no longer needed you, do you think you would be able to collect unemployment insurance? [IF ASKED: This is only possible if your employer has been paying unemployment insurance tax to the state on your behalf.]

1. Yes
2. No
7. REFUSED
8. DON'T KNOW

E HOUSEHOLD COMPOSITION

Read the following text and ask E1a of everyone.

[E1_INTRO] Now I'd like to talk to you about your family and current household.

E1. Besides you, who among the following live in your household at least half the time?

E1a. Your spouse?

1. YES
2. NO
7. REFUSED
8. DON'T KNOW

[SKIP TO E1c]

Ask E1b if they do NOT live with a spouse (E1a=No [2], Refused [7] OR Don't know [8]).

E1b. Your unmarried romantic partner?

1. YES
2. NO
7. REFUSED
8. DON'T KNOW

Ask E1c-E1h of everyone.

E1c. Your [IF E1A=YES: or your spouse's/IF E1B=YES: or your romantic partner's] biological, adopted, or stepchildren aged 17 or younger?

1. YES
2. NO
7. REFUSED
8. DON'T KNOW

E1d. Your [IF E1A=YES: or your spouse's/IF E1B=YES: or your romantic partner's] other relatives aged 17 or younger such as younger siblings, nephews, and nieces?

1. YES
2. NO
7. REFUSED
8. DON'T KNOW

E1e. Your [IF E1A=YES: or your spouse's/IF E1B=YES: or your romantic partner's] mother or father?

1. YES
2. NO
7. REFUSED
8. DON'T KNOW

E1f. Your [IF E1A=1: or your spouse's/IF E1B=1: or your romantic partner's] adult children or other relatives aged 18 or older?

1. YES
2. NO
7. REFUSED
8. DON'T KNOW

E1g. Anyone else aged 17 or younger such as children of friends or housemates?

1. YES
2. NO
7. REFUSED
8. DON'T KNOW

E1h. Anyone else aged 18 or older such as friends or housemates?

1. YES
2. NO
7. REFUSED
8. DON'T KNOW

Ask E2 if they DO live with a spouse or an unmarried romantic partner (E1a or E1b=Yes).

E2. How long have you and your [IF E1a=YES: spouse been married/IF E1b=YES: romantic partner been living together]?

1. Less than 2 years
2. 2 or 3 years
3. 4 or 5 years
4. More than 5 years
7. REFUSED
8. DON'T KNOW

Ask E2a if they did NOT answer that they are living with a spouse or an unmarried romantic partner (E1a AND E1b =No, Refused OR Don't know). SKIP TO E3 IF E1a=1 OR E1b=1.

E2a. Have you been married or lived with a romantic partner at any time between [MYLI] and today?

1. YES
2. NO
7. REFUSED
8. DON'T KNOW

Ask E3 if they live with anyone aged 18 or older (E1a, E1b, E1e, E1f, OR E1h=YES).

E3. How many adults, aged 18 or over live with you at least half the time?

___ ___ (1-15) number of persons aged 18 or over

- 1. REFUSED
- 2. DON'T KNOW

CAPI: DISPLAY "VERIFICATION SCREEN: DO NOT READ TO RESPONDENT. WE HAVE RECORDED [___] ADULTS LIVING WITH YOU. IF THIS IS NOT CORRECT, PLEASE GO BACK AND ADJUST."

Ask E4 if they live with anyone aged 17 or younger (E1C, E1D, OR E1G =YES). ELSE SKIP TO NOTE BEFORE E6.

E4. How many persons aged 17 or younger live with you at least half the time? Include biological, adopted, foster, step, and any other children, as well as younger siblings.

___ ___ (1-15) number of persons aged 17 or younger

- 1. REFUSED
- 2 DON'T KNOW

[SKIP TO E6]
[SKIP TO E6]

CAPI: DISPLAY "VERIFICATION SCREEN: DO NOT READ TO RESPONDENT. WE HAVE RECORDED [] PEOPLE UNDER 18 LIVING WITH YOU. IF THIS IS NOT CORRECT, PLEASE GO BACK AND ADJUST."

Ask E5 if they live with at least 1 person aged 17 or younger (E4>=1). ELSE SKIP TO E6.

E5. For how many of these children are you [IF E1A=YES: or your spouse/IF E1B=YES: or your romantic partner] the primary caregiver? By primary caregiver, I mean you [IF E1A=YES: or your spouse/IF E1B=YES: or your romantic partner] are the adult who assumes the most responsibility in caring for the health and well-being of the child?

___ [RANGE: 0 to E4 response] number of children

- 1 REFUSED
- 2 DON'T KNOW

CAPI: DISPLAY "VERIFICATION SCREEN: DO NOT READ TO RESPONDENT. WE HAVE RECORDED [] CHILDREN YOU ARE PRIMARY CAREGIVER FOR. IF THIS IS NOT CORRECT, PLEASE GO BACK AND ADJUST."

E6. [IF E1a OR E1b=1:] Are you and your [IF E1a=YES: spouse/IF E1b=YES: your romantic partner] currently expecting a child?

[If SEX=female and E1a=2, 7 OR 8 and E1b=2, 7 OR 8:] Are you currently pregnant?

[If SEX=male and E1a=2, 7 OR 8 and E1b=2, 7 OR 8:] Is there someone who is currently pregnant with your child?

- 1. YES
- 2. NO
- 7. REFUSED
- 8. DON'T KNOW

E7. [IF SEX= FEMALE:] Have you had a baby since [RAD] [IF SEX=MALE:] Have you fathered a baby since [RAD]?

[IF R=Male, display note: 'INTERVIEWER: THE GENDER ON FILE MAY BE WRONG. IF THE RESPONDENT IS FEMALE, INSTEAD ASK, "Have you had a baby since [RAD]?"']

[IF R=Female, display note: 'INTERVIEWER: THE GENDER ON FILE MAY BE WRONG. IF THE RESPONDENT IS MALE, INSTEAD ASK, "Have you fathered a baby since [RAD]?"']

- 1. YES
- 2. NO
- 7. REFUSED
- 8. DON'T KNOW

F. INCOME AND ADULT WELL-BEING

Ask F1-F3 of everyone.

The next set of questions cover a wide range of beliefs and attitudes about yourself and life in general.

Life Challenge

F1. In the past 12 months, how often have each of the following situations interfered with your school, work, job search, or family responsibilities? (READ RESPONSE OPTIONS AFTER FIRST 3 ITEMS AND THEN REPEAT AS NEEDED)

		Very often	Fairly often	Sometimes	Almost never	Never	REFUSED	DON'T KNOW
a.	Childcare arrangements? Would you say very often, fairly often, sometimes, almost never, or never.	1	2	3	4	5	7	8
b.	In the past 12 months how often have the following situations interfered with your school, work, job search, or family responsibilities: Transportation? Would you say...	1	2	3	4	5	7	8
c.	In the past 12 months how often have the following situations interfered with your school, work, job search, or family responsibilities: Alcohol or drug use? Would you say	1	2	3	4	5	7	8
d.	An illness or health condition?	1	2	3	4	5	7	8

F1e. [IF F1D=1,2, OR 3 ASK F1e. ELSE SKIP TO F2.]

F1e. You said an illness or health condition interfered with your school, work, job search, or family responsibilities in the past 12 months. Was this illness or health condition yours, your child's, or another family member's? (Check all that apply)

- 1 RESPONDENT’S
- 2 CHILD’S
- 3 ANOTHER FAMILY MEMBER’S
- 96 NO OTHER MENTIONS
- 97 REFUSED
- 98 DON’T KNOW

Perceived Stress

F2. In the past month, how often have you felt:

		Very often	Fairly often	Sometimes	Almost never	Never	REFUSED	DON’T KNOW
a.	That you were unable to control the important things in life? Would you say very often, fairly often, sometimes, almost never, or never?	1	2	3	4	5	7	8
b.	In the past month, how often have you felt confident about your ability to handle your personal problems? Would you say...	1	2	3	4	5	7	8
c.	In the past month, how often have you felt that things were going your way? Would you say...	1	2	3	4	5	7	8
d.	That difficulties were piling up so high that you could not overcome them?	1	2	3	4	5	7	8

Physical Health

F3. Would you say your health in general is excellent, very good, fair, or poor?

- 1. EXCELLENT
- 2. VERY GOOD
- 3. FAIR
- 4. POOR
- 7. REFUSED
- 8. DON’T KNOW

Income and Receipt of Public Assistance

Read the following text and ask F4 of everyone.

Now, I am going to ask you some questions about your household income in [PRIOR MONTH]. Since we have already discussed job earnings, I will only ask about other sources of income. Again, I want to assure you that none of your answers will be discussed with anyone.

F4. Did you or other members of the household have income or benefits from any of the following sources in [PRIOR MONTH]?

	YES	NO	REFUSED	DON'T KNOW
a. Temporary Assistance for Needy Families or TANF (“tan-eff”)	1	2	7	8
b. In [PRIOR MONTH], did you or other members of your household have income or benefits from Supplemental Nutrition Assistance Program also known as SNAP (“snap”) or Food Stamps	1	2	7	8
c. In [PRIOR MONTH], did you or other members of your household have income or benefits from Women, Infants and Children Program also known as WIC (“wick”)	1	2	7	8
d. Medicaid	1	2	7	8
e. Subsidized childcare	1	2	7	8
f. Section 8 or public housing	1	2	7	8
g. Low Income Home Energy Assistance Program also known as LIHEAP (“lie-heap”)	1	2	7	8
h. Free or reduced lunch program	1	2	7	8

Ask F5-F6 of everyone.

F5. Thinking of all of the income you received last month, what was your total *personal income* in [PRIOR MONTH]? Please include your job earnings, benefits, and any other types of income except for tax refunds in your answer. (IF NEEDED: Please do not include any refunds of federal, state, or local income taxes you paid in past years. Please do not include any advance Child Tax Credit refunds you received either.)

INTERVIEWER: ENTER -1 FOR REFUSED OR -2 FOR DON'T KNOW]

\$ _____ (\$0-12,000) [SKIP TO F6]
 -1 REFUSED
 -2 DON'T KNOW

VERIFICATION SCREEN: DO NOT READ TO RESPONDENT
WE HAVE RECORDED TOTAL PERSONAL INCOME LAST MONTH AS <F5>.
IF THIS IS NOT CORRECT, PLEASE GO BACK AND ADJUST.

F5a. Would you say your total **personal income** in [PRIOR MONTH] was...?

1. None (\$0)
2. \$500 or less
3. \$501-\$1,000
4. \$1,001-\$1,500
5. \$1,501-\$2,000
6. \$2,001-\$2,500
7. \$2,501- \$5,000
8. \$5,001 or more
97. REFUSED
98. DON'T KNOW

F6. Think of all of the income received by you and the people living in your household last month. What was your total income for everyone living together in your household in [PRIOR MONTH]?

Please consider anyone who lived in your household for at least half of [PRIOR MONTH] when you answer this question, including yourself. *(IF NEEDED: Please do not include any refunds of federal, state, or local income taxes paid in past years.)*

[INTERVIEWER: ENTER -1 FOR REFUSED OR -2 FOR DON'T KNOW]

\$ _____ (\$0-20,000)

[SKIP TO F7]

-1 REFUSED

-2 DON'T KNOW

VERIFICATION SCREEN: DO NOT READ TO RESPONDENT
WE HAVE RECORDED TOTAL HOUSEHOLD INCOME LAST MONTH AS <F6>.
IF THIS IS NOT CORRECT, PLEASE GO BACK AND ADJUST.

Ask F6a if they refused or don't know how much their total income was in the last month (F6=Don't know).

F6a. Which of the following categories best describes your total household income? Please consider income received by anyone who lived in your household for at least half of [PRIOR MONTH] when you answer this question, including yourself. Would you say your total household income in [PRIOR MONTH] was?

1. None (\$0)
2. \$1-1,000
3. \$1,001 to \$2,000
4. \$2,001 to \$3,000
5. \$3,001 to \$4,000
6. \$4,001 to \$5,000
7. \$5,001-10,000
8. \$10,001-\$15,000
9. \$15,001 or more
97. REFUSED

98. DON'T KNOW

Ask F7 of everyone.

F7. Did you or will you claim the Earned Income Tax Credit for [PRIOR YEAR]?

INTERVIEWER IF RESPONDENT ASKS WHAT THIS IS READ: The federal government has a special rule that allows working people who make less than about \$57,000 a year to take advantage of something called the Earned Income Tax Credit, or EITC. They can claim the Earned Income Tax Credit by filling out a special form called Schedule EITC when they fill out their income taxes, or they can fill out a special form with their employer.

1. YES
2. NO
7. REFUSED
8. DON'T KNOW

If E4>=1, ask F7a else skip to F8.

F7a. In the last three months, did you or anyone in your household receive a "Child Tax Credit" payment, that is an advance payment from the expansion of the child tax credit as part of the Federal Government's 2021 American Rescue Plan? Please report "yes" if you received the payment as a paper check or as a direct deposit.

1. YES
2. NO
7. REFUSED
8. DON'T KNOW

Assets

Read the following text and ask F8-F9 of everyone.

The next few questions are about any assets you may have.

F8. I'm going to read you a list of different types of assets people have, aside from a home or automobile. For each item I read, please tell me if this type of asset applies to you [IF E1a=YES or your spouse/IF E1b=YES: or your partner].

	YES	NO	REFUSED	DON'T KNOW
a. Do you [IF E1A=1: or your spouse/ IF E1B=1: or your romantic partner] have a checking account?	1	2	7	8
b. Do you [IF E1A=1: or your spouse/ IF E1B=1: or your romantic partner] have a regular savings account, money market account, or a certificate of deposit?	1	2	7	8
c. Do you [IF E1A=1: or your spouse/IF E1B=1 or your romantic partner] have a life insurance policy?	1	2	7	8

d. Do you [IF E1A=1: or your spouse/IF E1B=1: or your romantic partner] contribute a portion of your income to a retirement plan or 401k plan?	1	2	7	8
--	---	---	---	---

Other Debt

Ask F9-F13 of everyone.

F9. The next question is about the total amount of debt that **you** have. Please do not include any amount **YOU** owe for your own school loans or for your home mortgage, or car loans. Do include all outstanding balances on any other loans, credit cards, and medical bills and any overdue child support payments.

[IF E1A=1 OR E1B=1] Please also include any amount [IF E1A=1: your spouse/ IF E1B=1: your romantic partner] currently owes in school loans.

Which of the following categories best describes the amount you [IF E1A=1: and your spouse/ IF E1B=1: and your romantic partner] currently owe **IN TOTAL** for those things? Would you say your total other debt was...?

1. \$0
2. \$1 to \$2,500
3. \$2,501 to \$5,000
4. \$5,001 to \$7,500
5. \$7,501 to \$10,000
6. \$10,001 to \$25,000
7. \$25,001 to \$50,000
8. Over \$50,000
97. REFUSED
98. DON'T KNOW

Expenses

Now I'd like to ask some questions about your expenses.

F10. Was there any time in the past 12 months when...?

	YES	NO	REFUSED	DON'T KNOW
a. You did not pay the full amount of the rent or mortgage because you could not afford it?	1	2	7	8
b. Was there any time in the past 12 months when you were not able to pay the full amount of the gas, oil, or electricity bills?	1	2	7	8
c. Was there any time in the past 12 months when the gas or electric company turned off service, or the oil company could not deliver oil?	1	2	7	8
d. Your phone service was shut off because payments were not made?	1	2	7	8
e. Your internet service was shut off because payments were not made?				
f. You or someone else in your household needed to see a doctor or go to the hospital but did not go because you could not afford it?	1	2	7	8
g. You or someone else in your household needed to see a dentist but did not go because you could not afford it?	1	2	7	8
h. You or someone else in your household could not fill or postponed filling a prescription for drugs when they were needed because you could not afford it?	1	2	7	8

Food Insecurity

F11. Getting enough food can be a problem for some people. Which of these statements best describes the food eaten in your household in the past six months? Would you say there is...?

1. Enough of the kinds of food you want
2. Enough but not always the kinds of food you want
3. Sometimes not enough to eat
4. Often not enough to eat
7. REFUSED
8. DON'T KNOW

Financial Resilience

- F12. Think again over the past 12 months. Generally, at the end of the month do you end up with: more than enough money left over, some money left over, just enough to make ends meet, or not enough to make ends meet?
1. MORE THAN ENOUGH MONEY LEFT OVER
 2. SOME MONEY LEFT OVER
 3. JUST ENOUGH TO MAKE ENDS MEET
 4. NOT ENOUGH TO MAKE ENDS MEET
 7. REFUSED
 8. DON'T KNOW
- F13. **Based on your current financial situation**, what is the largest emergency expense that you could pay right now using cash or money in your checking/savings account?
1. Under \$100
 2. \$100 to \$199
 3. \$200 to \$299
 4. \$300 to \$399
 5. Over \$400
 7. REFUSED
 8. DON'T KNOW

Health Insurance

Ask F14-of those who are currently employed. Wording based on whether or not they are self-employed.

- F14. IF NOT CURRENTLY EMPLOYED, SKIP TO F15. [IF NOT (SELF-EMPLOYED)] Do you **take** health insurance through [EMPLOYER]? [IF SELF-EMPLOYED] Do you have health insurance through your business?
1. YES
 2. NO
 7. REFUSED
 8. DON'T KNOW

Ask F15 of everyone. Wording based on whether or not they are self-employed.

- F15. [IF NOT SELF-EMPLOYED] Do you **have** health insurance through some non-job-related source such as Medicaid? [IF SELF-EMPLOYED] Do you have health insurance through a source other than your business such as Medicaid or private health insurance?
1. YES
 2. NO
 7. REFUSED
 8. DON'T KNOW

Housing Status and Neighborhood Satisfaction

Read the following text and ask F16-F17a of everyone.

Now I'd like to ask you some questions about your current housing situation.

- F16. Thinking about the place where you are currently living, do you:
1. Rent your home or apartment
 2. Own your own home or apartment
 3. Live with family or friends and pay part of the rent or mortgage
 4. Live with family or friends and do not pay rent
 5. Live in a group shelter or
 6. Live in some other housing arrangement (SPECIFY: _____)
 7. REFUSED
 8. DON'T KNOW

- F17. Please think about the last six months. Were there any times when you were living with a friend or relative because you could not find or afford a place of your own?
1. YES
 2. NO.....[SKIP TO Section G]
 7. REFUSED.....[SKIP TO Section G]
 8. DON'T KNOW.....[SKIP TO Section G]

Ask F17a if they could not afford their own place in that last 6 months (F17=Yes).

F17a. Altogether, how much time in the past six months would you say you spent living with a friend or relative because you could not find or afford a place of your own? You can tell me this answer in days, weeks, or months, whichever is easiest for you.

[INTERVIEWER/CAPI: RECORD NUMBER OF DAYS, WEEKS, or MONTHS. IF 0, RECORD THAT AS WELL. ENTER -1 FOR REFUSED OR -2 FOR DON'T KNOW.]

- NUMBER OF DAYS _____ [RANGE 1-180]
NUMBER OF WEEKS _____ [RANGE 1-26]
NUMBER OF MONTHS _____ [RANGE 1-6]
7. REFUSED.....[SKIP TO Section G]
8. DON'T KNOW.....[SKIP TO Section G]

VERIFICATION SCREEN: DO NOT READ TO RESPONDENT
WE HAVE RECORDED R LIVED WITH FRIEND OR RELATIVE <F17a>.
IF THIS IS NOT CORRECT, PLEASE GO BACK AND ADJUST.

G. 21st CENTURY SKILLS/COGNITIVE SKILLS

Cognitive Skills in Everyday Life

G1. Now I'm going to ask a few questions about computer skills. In everyday life, how often do you usually...

	Never	Less than once a month	Less than once a week, but at least once a month	At least once a week, but not every day	Every day	REFUSED	DON'T KNOW
a. Use email? <G1_1>	1	2	3	4	5	7	8
b. In everyday life, how often do you usually use the internet in order to better understand issues related to, for example, your health or illnesses, financial matters, or environmental issues? <G1_2>	1	2	3	4	5	7	8
c. In everyday life, how often do you usually conduct transactions on the internet, for example buying or selling products or services, or banking? <G1_3>	1	2	3	4	5	7	8
d. Use spreadsheet software, for example Excel? <G1_4>	1	2	3	4	5	7	8
e. Use a word processor, for example Word? <G1_5>	1	2	3	4	5	7	8

Self-Directed Learning

[G2_INTRO] The next set of questions are about different types of activities that some people do when they are looking for classes to take or exploring different types of jobs. I'd like you to think about the time since [MYLI] when answering these questions. I am interested in whether you have done any of the following activities—by your own choice, not because someone recommended you do so.

G2. Since [IF INTERMEDIATE RESPONDER: [MYLI] / ELSE: [RAD]], have you ever chosen to ...

	YES	NO	REFUSED	DON'T KNOW
a. Use the internet to research different types of jobs you might be interested in?	1	2	7	8
b. Since [IF MYLI: [MYLI]/ELSE: [RAD]], have you ever chosen to use the internet to learn more about the schools that offer classes to prepare you for the job you would like to have?	1	2	7	8
c. Since [IF MYLI: [MYLI]/ELSE: [RAD]], have you ever chosen to watch an online video to try and figure out how to solve a math problem?	1	2	7	8
d. Take an online course to help you prepare for admissions exams at a school you wanted to attend?	1	2	7	8
e. Take an online class to improve your English language skills or broaden your English vocabulary?	1	2	7	8

H. PARENT REPORTS: CHILD MODULE

Read the following text and ask CS1 if there is a focal child in this respondent's file.

CAPI: IF SAMPLE FILE INCLUDES A FOCAL CHILD, CONTINUE; IF RESPONDENT SAMPLE FILE DOES NOT INCLUDE A FOCAL CHILD, SKIP TO SECTION I, CONTACT INFORMATION.

Child Introduction/Screener

In the next set of questions, I am interested in collecting more information on your family, particularly your children. These questions will cover topics such as your family activities and your relationship to your child's school. Everything you tell me is completely private.

Although I am interested in all of the children that you [IF E1a=1: and your spouse / E1b=1: and your romantic partner] are the primary caregiver for, the study can only collect data on one. The computer selected the child I should ask about.

Ask CS1 if there is both a name AND a DOB for the child in the file.

CAPI: ASK CS1 IF [FC_NAME AND FC_DOB ARE IN SAMPLE FILE]:

CS1. I would like to ask about [CHILD], who was born on [CHILD DOB].

1. CONTINUE [SKIP TO H1]
2. VOL: NO CHILD BORN THAT MONTH AND YEAR [SKIP TO SECTION I]

Ask CS2-CS2a if there is a DOB but NO name for the child in the file.

CAPI: ASK CS2 IF [FC_NAME] IS MISSING:

CS2. I would like to ask about your child who was born on [CHILD DOB].

1. CONTINUE [ASK CS2a]
2. VOL: NO CHILD BORN THAT MONTH AND YEAR [SKIP TO SECTION I]

CS2a. What is that child's name?

IF NEEDED: We can use an initial if you don't want to name the child. I just need to have something to call him or her as I ask questions.

_____ [RECORD NAME].

7. REFUSED [SKIP TO H1 and INSERT [your child] AS CHILD]
8. DON'T KNOW [SKIP TO H1 and INSERT [your child] AS CHILD]

Ask CS3-Cs3a if there is a name but NO DOB for the child in the file.

ASK CS3 IF [FC_DOB] IS MISSING:

CS3. I would like to ask about [CHILD].

7. CONTINUE

8. VOL: NO CHILD MATCHING THAT CRITERIA [SKIP TO SECTION I]

CS3a. Could you please tell me when [CHILD] was born?

_____/_____/_____ (DOB MUST BE < RAD) [SKIP TO H1]

7. REFUSED

8. DON'T KNOW

ASK C3SB ONLY OF THOSE WHERE C3SA=REFUSED OR DON'T KNOW

CS3b. Could you please tell me how old [CHILD] is?

_____ AGE [RANGE 0 – 25]

7. REFUSED

8. DON'T KNOW

Ask H1 of everyone who has identified a child in the child screener.

H1. Over the last 12 months, has [CHILD] lived with you at least half the time? [

1. YES

[SKIP TO H2]

2. NO

7. REFUSED

[SKIP TO SECTION I]

8. DON'T KNOW

[SKIP TO SECTION I]

Ask H1a if the child has NOT lived with them in the past year (H1=No).

H1a. Where does [CHILD] live at least half the time?

1. With other parent

2. With another family member

3. In foster care

4. In their own apartment

5. In a dorm or apartment with roommate

6. In the military

7. With [CHILD]'s spouse/romantic partner

8. Somewhere else

7. REFUSED

[SKIP TO SECTION I]

8. DON'T KNOW

CAPI: IF [CHILD] AGE>18 SKIP TO H3D

Ask H2 if the child is 18 or younger. (Today's Date less Date of birth) or CS3b<=18)

Child Education Status

H2. Is [CHILD] currently enrolled in school?

1. YES
2. NO [SKIP TO H3a]
3. VOL: CHILD IS ON SUMMER VACATION
4. VOL: CHILD IS TOO YOUNG TO GO TO KINDERGARTEN [SKIP TO H8]
7. REFUSED [SKIP TO SECTION I]
8. DON'T KNOW

Ask H3 if the child is currently enrolled in school or on summer vacation (H2=Yes or On summer vacation or Don't Know).

H3. [IF INTERVIEW TAKES PLACE DURING THE SCHOOL YEAR:] What grade is [CHILD] currently in?

[IF R VOLUNTEERS CHILD IS ON SUMMER VACATION] What grade was [CHILD] in the last school year?

1. PRE-KINDERGARTEN [SKIP TO INTRO BEFORE H4]
2. KINDERGARTEN [SKIP TO INTRO BEFORE H4]
3. 1ST GRADE [SKIP TO INTRO BEFORE H4]
4. 2ND GRADE [SKIP TO INTRO BEFORE H4]
5. 3RD GRADE [SKIP TO INTRO BEFORE H4]
6. 4TH GRADE [SKIP TO INTRO BEFORE H4]
7. 5TH GRADE [SKIP TO INTRO BEFORE H4]
8. 6TH GRADE [SKIP TO INTRO BEFORE H4]
9. 7TH GRADE [SKIP TO INTRO BEFORE H4]
10. 8TH GRADE [SKIP TO INTRO BEFORE H4]
11. 9TH GRADE [SKIP TO INTRO BEFORE H4]
12. 10TH GRADE [SKIP TO INTRO BEFORE H4]
13. 11TH GRADE [SKIP TO INTRO BEFORE H4]
14. 12TH GRADE [SKIP TO INTRO BEFORE H3d]
15. NOT APPLICABLE, CHILD NOT IN SCHOOL [CONTINUE]
16. NOT APPLICABLE, CHILD IN UNGRADED SCHOOL [SKIP TO H3d]
17. 2-YEAR COLLEGE [SKIP TO INTRO BEFORE H3d]
18. 4-YEAR COLLEGE [SKIP TO INTRO BEFORE H3d]
19. VOCATIONAL/TRADE SCHOOL [SKIP TO INTRO BEFORE H3d]
97. REFUSED [SKIP TO SECTION I]
98. DON'T KNOW [SKIP TO INTRO BEFORE H4]

Ask H3a if the child is NOT currently enrolled in school or on summer vacation (H2=No or H3=CHILD NOT IN SCHOOL).

H3a. [IF H2=2 OR H3=15] What grade was [CHILD] last enrolled in?

1. PRE-KINDERGARTEN
2. KINDERGARTEN
3. 1ST GRADE
4. 2ND GRADE
5. 3RD GRADE
6. 4TH GRADE
7. 5TH GRADE
8. 6TH GRADE
9. 7TH GRADE
10. 8TH GRADE
11. 9TH GRADE
12. 10TH GRADE
13. 11TH GRADE
14. 12TH GRADE
15. NOT APPLICABLE, CHILD IN UNGRADED SCHOOL
16. 2-YEAR COLLEGE
17. 4-YEAR COLLEGE
18. VOCATIONAL/TRADE SCHOOL
19. VOL: CHILD IS TOO YOUNG TO GO TO KINDERGARTEN [SKIP TO H8]
97. REFUSED [SKIP TO SECTION I]
98. DON'T KNOW

Ask H3b if the child is NOT currently enrolled in school or on summer vacation AND is old enough to go to kindergarten (H2=No or H3a DOES NOT EQUAL Child is too young to go to kindergarten).

H3b. When was [CHILD] last enrolled in school? Please tell me the month and year.

____ / ____
MM YYYY

6. VOL: NEVER ENROLLED [SKIP TO NOTE AFTER H3d]
7. REFUSED [SKIP TO SECTION I]
8. DON'T KNOW [SKIP TO NOTE AFTER H3d]

Ask H3c if the child is NOT currently enrolled in school or on summer vacation AND is old enough to go to kindergarten AND they gave a date for when the child was last enrolled in school (H3b has a non-missing date).

H3c. [ASK IF H3b<>6,7,8 (DOES NOT EQUAL NEVER ENROLLED, REFUSED, OR DON'T KNOW):] What was the main reason [CHILD] left school at that time? (DO NOT READ LIST)

INTERVIEWER NOTE: IF R GIVES MULTIPLE REASONS, ASK FOR THE MAIN REASON

1. EXPELLED/SUSPENDED
2. POOR GRADES
3. GOT MARRIED/PREGNANT/BECAME A PARENT
4. SCHOOL WAS DANGEROUS
5. DIDN'T GET ALONG WITH OTHER STUDENTS
6. ENTERED MILITARY
7. BECAME EMPLOYED
8. FINANCIAL DIFFICULTIES—COULDN'T AFFORD TO GO
9. CHILD CARE OR OTHER HOME RESPONSIBILITIES
10. DRUGS OR ALCOHOL PROBLEM
11. OTHER HEALTH PROBLEM
12. OTHER (SPECIFY: _____)
97. REFUSED
98. DON'T KNOW

Ask H3d if H3 indicates that the child is in 12th grade, 2-year or 4-year college, vocational school, or ungraded school OR if the child is not currently enrolled in school OR if the child is aged 17 or over.

H3d. [[ASK IF H3=14, 16, 17, 18, 19] OR [ASK IF H3A = 14, 15, 16, 17, OR 18] [IF H2=2 OR H3=15] OR [IF CHILDAGE>=17]] Did [CHILD] graduate from high school or receive a GED?

1. YES, GRADUATED HIGH SCHOOL
2. YES, RECEIVED GED
3. NO
7. REFUSED
8. DON'T KNOW

[SKIP TO SECTION I]

CAPI:

- IF CHILD DOES NOT LIVE WITH R AT LEAST HALF TIME (H1=NO) AND IF CHILD IS >17, SKIP TO H25
- IF CHILD DOES NOT LIVE WITH R AT LEAST HALF TIME (H1=NO) AND IF CHILD IS <18, SKIP TO SECTION I
- IF CHILD AGE>=19 SKIP TO H25

- IF CHILD AGE <18 AND H3B DATE IS > ONE YEAR FROM INTERVIEW DATE OR H3B=6, 7, OR 8, THEN SKIP TO SECTION I, CONTACT INFORMATION
- IF CHILD AGE >=18 AND H3B DATE IS > ONE YEAR FROM INTERVIEW DATE OR H3B=6, 7, OR 8, THEN SKIP TO H25
- IF H3B DATE IS < ONE YEAR FROM INTERVIEW DATE AND H3a=16, 17, 18 THEN SKIP TO H8
- IF H3B DATE IS < ONE YEAR FROM INTERVIEW DATE AND H3a=1-15, OR 98 THEN CONTINUE

Child Supervision

Children in Pre-Kindergarten through Twelfth Grade

Read the following text and ask H4 if the child is 18 or younger AND if the child HAS been in school in the past year AND if the child is NOT in a 2-year or 4-year college or vocational school.

First, I'd like to ask you some questions about the people who care for [CHILD]. Different children need different amounts of supervision. For these questions, please think about a typical week in the last year.

H4. Are you or another adult in the family usually present at home before [CHILD] leaves for school?

1. YES
2. NO [SKIP TO H5]
7. REFUSED [SKIP TO H5]
8. DON'T KNOW [SKIP TO H5]

Ask H4a if there is usually an adult at home before the child leaves for school (H4=Yes).

H4a. Who is usually present? (READ LIST)

1. You,
2. Another adult, or
3. Both you and another adult?
7. REFUSED
8. DON'T KNOW

Ask H5 if the child is 18 or younger AND if the child HAS been in school in the past year AND if the child is NOT in a 2-year or 4-year college or vocational school.

H5. Are you or another adult in the family usually present at home after [CHILD] comes home from school?

1. YES
2. NO [SKIP TO H6]

- | | |
|---------------|--------------|
| 7. REFUSED | [SKIP TO H6] |
| 8. DON'T KNOW | [SKIP TO H6] |

Ask H5a if there is usually an adult at home after the child comes home from school (H5=Yes).

H5a. Who is usually present? (READ LIST)

1. You,
2. Another adult, or
3. Both you and another adult?
7. REFUSED
8. DON'T KNOW

Ask H6 if the child is 18 or younger AND if the child HAS been in school in the past year AND if the child is NOT in a 2-year or 4-year college or vocational school.

H6. Are you or another adult in the family usually present after dinner during the week?

- | | |
|---------------|--------------|
| 1. YES | |
| 2. NO | [SKIP TO H7] |
| 7. REFUSED | [SKIP TO H7] |
| 8. DON'T KNOW | [SKIP TO H7] |

Ask H6a if there is usually an adult at home after dinner during the week (H6=Yes).

H6a. Who is usually present? (READ LIST)

1. You,
2. Another adult, or
3. Both you and another adult?
7. REFUSED
8. DON'T KNOW

Ask H7 if the child is 18 or younger AND if the child HAS been in school in the past year AND if the child is NOT in a 2-year or 4-year college or vocational school.

H7. Are you or another adult in the family usually present with [CHILD] during the weekend?

- | | |
|---------------|--------------|
| 1. YES | |
| 2. NO | [SKIP TO H8] |
| 7. REFUSED | [SKIP TO H8] |
| 8. DON'T KNOW | [SKIP TO H8] |

Ask H7a if there is usually an adult with the child during the weekend (H7=Yes).

H7a. Who is usually present? (READ LIST)

1. You,
2. Another adult, or
3. Both you and another adult?
7. REFUSED
8. DON'T KNOW

Ask H8a-H8b if the child is 18 or younger.

Family Routines (Preschool to High School)

H8. Next, I'd like to ask you some questions about family routines.

- a. In a typical full 7-day week, including the weekend, how many times do you get to eat breakfast with [CHILD]?
[INTERVIEWER: ENTER -1 FOR REFUSED OR -2 FOR DON'T KNOW]
____times/week (0-7)
-1 REFUSED
-2 DON'T KNOW

VERIFICATION SCREEN: DO NOT READ TO RESPONDENT
WE HAVE RECORDED R EATS BREAKFAST WITH FOCAL CHILD <H8a> TIMES PER WEEK.
IF THIS IS NOT CORRECT, PLEASE GO BACK AND ADJUST.

- b. In a typical full 7-day week, including the weekend, how many times do you get to eat dinner with [CHILD]?
[INTERVIEWER: ENTER -1 FOR REFUSED OR -2 FOR DON'T KNOW]
____times/week (0-7)
-1 REFUSED
-2 DON'T KNOW

VERIFICATION SCREEN: DO NOT READ TO RESPONDENT
WE HAVE RECORDED R EATS DINNER WITH FOCAL CHILD <H8b> TIMES PER WEEK.
IF THIS IS NOT CORRECT, PLEASE GO BACK AND ADJUST.

CAPI: IF H3 / H3a =CHILD IN 5TH GRADE OR BELOW, SKIP TO H11

Education-Related Goals and Support

Children in Sixth through Twelfth Grade

Read the following text and ask H9-H10 IF the child is 18 or younger AND in sixth through twelfth grade OR IF the child is 11-18 AND the child is in ungraded school (H3=16 OR H3a=15)

Next are questions about your hopes and aspirations for [CHILD].

H9. Knowing [CHILD] as you do, how far do you think he or she will actually go in school? Do you think he or she will...?

1. Complete some high school
2. Finish high school
3. Complete some technical school after high school
4. Finish technical school after high school
5. Complete some college
6. Finish college, or
7. Earn an advanced degree after college like an MA, MD, PhD, or law degree
97. REFUSED
98. DON'T KNOW

H10. How far does [CHILD] say he or she would like to go in school? Would [CHILD] like to:

1. Complete some high school
2. Finish high school
3. Complete some technical school after high school
4. Finish technical school after high school
5. Complete some college
6. Finish college, or
7. Earn an advanced degree after college like an MA, MD, PhD, or law degree
96. CHILD DOESN'T SAY
97. REFUSED
98. DON'T KNOW

Read the following text and ask H11-H13 if the child is 18 or under AND the child has been in school in the past year.

Now I'd like to talk about [CHILD]'s activities with family members. For these questions, please think about a typical week in the last year.

H11. In a typical week, how often do you talk to [CHILD] about his or her homework assignments or what he or she is learning in school?

1. Never
2. Once or twice a week
3. 3 to 4 times a week
4. 5 or more times a week
7. REFUSED
8. DON'T KNOW

H12. In a typical week, how often do you or someone in your family help [CHILD] with homework?

1. Never

2. Once or twice a week
3. 3 or 4 times a week
4. 5 or more times a week

7. REFUSED
8. DON'T KNOW

H13. In a typical week, how often do you or someone in your family discuss [CHILD]'s grades with him or her? Would you say:

1. Never
2. Once or twice a week
3. 3 or 4 times a week
4. 5 or more times a week

7. REFUSED
8. DON'T KNOW

Read the following if the child is 18 or under AND the child has been in school in the past year.

Child Outcomes

My last set of questions are about how [CHILD] is doing in school.

Ask H14-H15 if the child is 18 or under AND the child has been in school in the past year AND the child is in kindergarten through fifth grade.

IF H3 OR H3a=6th THROUGH 12th GRADE, UNGRADED SCHOOL, 2-YEAR DEGREE, 4-YEAR DEGREE, VOCATIONAL TECHNICAL, SKIP TO H16.

Children in Kindergarten through Fifth Grade

[IF H2=3 "CHILD IS ON SUMMER VACATION" OR H3=15 READ:] When answering these questions please think of how [CHILD] was doing in school last year.

H14. Based on school and teacher reports, how well would you say [CHILD] is doing in reading: Would you say:

1. Not well at all
2. Below average
3. About average
4. Well
5. Very well
7. REFUSED
8. DON'T KNOW

H15. Based on school and teacher reports, how well would you say [CHILD] is doing in math:

1. Not well at all
2. Below average
3. About average
4. Well
5. Very well
7. REFUSED
8. DON'T KNOW

Ask H16-21 if the child is 18 or under AND the child has been in school in the past year.

All ages

H16. Has [CHILD] repeated any grades in school?

1. YES
2. NO
7. REFUSED
8. DON'T KNOW

H17. How many days in the last month was [CHILD] absent from school for any reason?
[CAPI: IF H2=3 "ON SUMMER VACATION" OR H3=15] In the last month that [CHILD] was enrolled in school, how many days was [CHILD] absent from school for any reason?
INTERVIEWER IF VOLUNTEERED: CHILD WAS NOT ABSENT, CODE "ZERO DAYS".

1. 5 or more days
2. 3 or 4 days
3. 1 or 2 days
4. Zero days
7. REFUSED
8. DON'T KNOW

H18. How many days in the last month was your child late for school? [CAPI: IF H2=3 "ON SUMMER VACATION" OR H3=15] In the last month that [CHILD] was enrolled in school, how many days was [CHILD] late for school? [IF VOLUNTEERED: CHILD WAS NEVER LATE, CODE "ZERO DAYS"].

1. 5 or more days
2. 3 or 4 days
3. 1 or 2 days
4. Zero days
7. REFUSED
8. DON'T KNOW

H19. During the 2022-2023 school year, how many times have any of [CHILD]'s teachers or his or her school contacted you or any adult in your household about any behavior problems he or she is having in school? [CAPI: IF H2=3 "ON SUMMER VACATION" OR H3=15] In the

school year [CHILD] was last in school, how many times did any of [CHILD]’s teachers or [his or her] school contact you or any adult in your household about any behavior problems [he or she] was having in school?

1. Never
2. Once or twice
3. Three or more times
7. REFUSED
8. DON’T KNOW

H20. Since the beginning of this school year, how many times have any of [CHILD]’s teachers or his or her school contacted you or any adult in your household about any problems he or she is having with schoolwork? [CAPI: IF H2=3 “ON SUMMER VACATION” OR H3=15] In the school year [CHILD] was last in school, how many times did any of [CHILD]’s teachers or his or her school contact you or any adult in your household about any behavior problems he or she was having with schoolwork?

1. Never
2. Once or twice
3. Three or more times
7. REFUSED
8. DON’T KNOW

H21. In the current school year, has [CHILD] been suspended or expelled from school? [CAPI: IF H2=3 “ON SUMMER VACATION” OR H3=15:] In the school year [CHILD] was last in school, was your child suspended or expelled from school?

1. YES
2. NO
7. REFUSED
8. DON’T KNOW

IF H3 OR H3a=5TH GRADE OR BELOW, SKIP TO SECTION I

Children in Sixth through Twelfth Grade, 2-Year Degree, 4-Year Degree, Vocational/Technical

Ask H22 if the child is 18 or under AND the child has been in school in the past year AND the child is in 6th grade or above.

H22. Overall, what grades did [CHILD] receive in the last full year of school completed?

- | | |
|-----------------------|----------------------------|
| 1. Mostly A’s | [SKIP TO LOGIC BEFORE H23] |
| 2. Mostly A’s and B’s | [SKIP TO LOGIC BEFORE H23] |
| 3. Mostly B’s | [SKIP TO LOGIC BEFORE H23] |
| 4. B’s and C’s | [SKIP TO LOGIC BEFORE H23] |

- | | |
|--|----------------------------|
| 5. Mostly C's | [SKIP TO LOGIC BEFORE H23] |
| 6. C's and D's | [SKIP TO LOGIC BEFORE H23] |
| 7. Mostly D's | [SKIP TO LOGIC BEFORE H23] |
| 8. Mostly below D | [SKIP TO LOGIC BEFORE H23] |
| 9. VOL: NOT APPLICABLE, SCHOOL DOES NOT GIVE OUT LETTER GRADES | [CONTINUE] |
| 97. REFUSED | [SKIP TO LOGIC BEFORE H23] |
| 98. DON'T KNOW | [SKIP TO LOGIC BEFORE H23] |

Ask H22a if the child is 18 or under AND the child has been in school in the past year AND the child is 6th grade or above AND they are in an ungraded school (H22=9) OR IF the child age is 11-18 AND the child has been in school in the past year AND the child is in ungraded school (H3=16 or H3a=15)

[IF DOES NOT HAVE GRADES (H22= 9)]

H22a. Is [CHILD]...

1. One of the best students in his/her class
2. Above the middle in his/her class
3. In the middle of his/her class
4. Below the middle of his/her class
5. Near the bottom of the class
6. Does not attend school at all
7. REFUSED
8. DON'T KNOW

Ask H23a-H23c if the child is 18 or under AND in 10th grade or above.

IF H3 OR H3a= 8TH GRADE OR BELOW, SKIP TO SECTION I

IF H3 OR H3a=9TH GRADE SKIP TO NOTE BEFORE H24

IF H3 OR H3a=10TH GRADE OR ABOVE ASK H23a-C

H23. Has [CHILD] taken any of the following tests as part of college preparation:

- a. Advanced Placement, also known as AP ("A-P"), tests as part of an AP course?
 1. YES
 2. NO
 7. REFUSED
 8. DON'T KNOW

- b. PSAT ("P-S-A-T") test?
 1. YES
 2. NO
 7. REFUSED

8. DON'T KNOW

c. SAT ("S-A-T") or ACT ("A-C-T") test?

1. YES
2. NO
7. REFUSED
8. DON'T KNOW

Ask H24 if the child is age 14-17

H24. Last month, did [CHILD] do any work for pay?

1. YES
2. NO
7. REFUSED
8. DON'T KNOW

Transition to Adulthood

Read the following text and ask H25-H29 if the child is 18 or older.

IF CHILD AGE=18+ CONTINUE:

The next set of questions are about [CHILD] and his/her experiences now that he/she is a young adult including things like starting their own household, college or vocational training and employment.

H25.Has [CHILD] enrolled in any college or vocational training course after high school?

1. YES
2. NO
7. REFUSED
8. DON'T KNOW

H26.Has [CHILD] ever been married or lived with a romantic partner?

1. YES
2. NO
7. REFUSED
8. DON'T KNOW

H27.Does [CHILD] have any biological children of his/her own?

1. YES
2. NO
7. REFUSED
8. DON'T KNOW

H28. Is [CHILD] the primary caregiver for any other children (such as a romantic partner's children or siblings)?

- 1. YES
- 2. NO
- 7. REFUSED
- 8. DON'T KNOW

H29. Last month, did [CHILD] do any work for pay?

- 1. YES..... 1
- 2. NO [SKIP TO I1]
- 7. REFUSED [SKIP TO I1]
- 8. DON'T KNOW [SKIP TO I1]

Ask H29a if the child is 18 or older AND they have worked for pay in the last month (H29=Yes).

H29a. During the last month, how many hours did [CHILD] usually work each week?

[INTERVIEWER: ENTER -1 FOR REFUSED OR -2 FOR DON'T KNOW]

_____ HOURS
-1 REFUSED
-2 DON'T KNOW

VERIFICATION SCREEN: DO NOT READ TO RESPONDENT
WE HAVE RECORDED FC WORKS <H29a> HOURS PER WEEK.
IF THIS IS NOT CORRECT, PLEASE GO BACK AND ADJUST.

I. CONTACT INFORMATION

Read the following text and ask I1-I3 of everyone.

Before we complete this portion of the interview, I would also like to make sure I have your contact information recorded correctly. You may get a call from my supervisor asking you to confirm that you participated in this interview. [IF INTERVIEW COMPLETED BY PHONE: This is where we will send your token of appreciation.]

- I1. I have your name recorded as [FIRST MI LAST]. Is this still correct or have you changed your name?
1. YES, STILL CORRECT [SKIP TO I2]
 2. NO

[IF I1=2, DISPLAY "INTERVIEWER: IF THE RESPONDENT'S NAME HAS CHANGED OR IS NOT RECORDED CORRECTLY, PLEASE SUBMIT A PROBLEM SHEET."]

- I2. I have your address recorded as [STREET, APT, CITY, STATE, ZIP]. Is this still correct or have you moved?

1. YES, STILL CORRECT [SKIP TO I3]
2. NO
 - a. What is your new street address or PO box number? _____
 - b. Is there a complex or building name? _____
 - c. Is there an apartment number? _____
 - d. In what city? _____
 - e. In what state? _____
 - f. What is the zip code? _____

- I3. I have your primary phone number recorded as [xxx-xxx-xxxx]. Is this still correct or do you have a new primary phone number?

1. YES, STILL CORRECT [SKIP TO CLOSING]
2. NO
 - a. What is the new number, starting with the area code?
_____ - _____ - _____
 - b. Is that a home, cell, work, or other number?
 1. Home
 2. Cell
 3. Work
 4. Other

CLOSING: Thank you very much for your time today.