			0704/Exp 11/30/202
	BACKGROUND INFORMATION		1 year to less than 2 years old
1.	What is your marital status? Married Separated Divorced Widowed		2 to 5 years old 6 to 13 years old
2.	Is <u>your spouse</u> currently serving on active duty (not a member of the National Guard or Reserve)? Yes No	8.	14 to less than 18 years old [Ask if Q6 = "Yes" AND (Q7 a > 0 OR Q7 b > 0 OR Q7 c > 0 OR Q7 d > 0 OR Q7 e > 0)
3.	How many years have you been married? To indicate less than 1 year, enter "0".		Do you have child(ren) who routinely use child care arrangements so you and/or your spouse can work? Yes No
4.	Are you Spanish/Hispanic/Latino? No, not Spanish/Hispanic/Latino Yes, Mexican, Mexican-American, Chicano, Puerto Rican, Cuban, or other Spanish/Hispanic/Latino	9.	[Ask if Q6 = "Yes" AND Q7 = "Yes" AND Q7 [Matching item] >0 AND Q8 = "Yes"] How many of your child(ren) in each age group
5.	What is your race? Mark one or more races to indicate what you consider yourself to be. White Black or African American American Indian or Alaska Native Asian (e.g., Asian Indian, Chinese, Filipino, Japanese, Korean, or Vietnamese) Native Hawaiian or other Pacific Islander (e.g., Samoan, Guamanian, or Chamorro)		routinely use child care arrangements? Mark one answer in each row. To indicate none, select "0". To indicate more than nine, select "9". Less than 1 year old 1 year to less than 2 years old 2 to 5 years old
	YOUR FAMILY		6 to 13 years old
6.	Do you or your spouse have any children under the age of 18 living at home either part-time or full-time? Yes No		14 to less than 18 years old
7.	[Ask if Q6 = "Yes"] How many children under the age of 18 do you or your spouse have, living at home either part-time or full-time, in each age group? Please select the number of children you have in each age group. To indicate none, select "0". To indicate more than nine, select "9".		

OPA

Less than 1 year old

10.	[Ask if Q6 = "Yes" AND Q8 = "No"] What is
	the main reason you do not use child care?
	Mark one.
	No need for child care services
	I have made other suitable child care arrangements (e.g., neighbors, grandparents)
	Child care services are too expensive
	I want to have my child(ren) closer to home
	The hours of operation do not meet my needs
	I have concerns about the quality of care
	I have problems arranging for consistent transportation
	The wait list is too long
	Other

The following items will help us understand a bit about your child care arrangements for children in the household.

11. [Ask if Q6 = "Yes" AND Q8 = "Yes"] During the work day, do you routinely use the following sources of child care? *Mark* "Yes" or "No" for each item.

			No
	,	Yes	
a.	Military child care center	\times	
b.	Military (or military-affiliated) family child care home	X	
C.	Civilian child care—receiving military child care fee assistance	X	
d.	Civilian child care—not receiving military child care fee assistance	X	

12. [Ask if Q6 = "Yes" AND Q8 = "Yes" AND (Q11 a = "No" AND Q11 b = "No")] Which of the following are reasons why you do not use military child care? Mark "Yes" or "No" for each item.

		No
	Yes	
a.	Availability of child care	
b.	Quality of child care	\boxtimes
c.	Affordability of child care	\boxtimes
d.	Inconvenient location	\boxtimes
e.	Operating hours	

13. [Ask if Q6 = "Yes"] Did any child(ren) residing with you attend the following types of schools last year? Mark "Yes" or "No" for each item.

			No
		Yes	
a.	Public traditional school	\times	\boxtimes
b.	Public charter school	\times	
C.	Department of Defense-run school (DoDEA Americas, DoDEA Europe or DoDEA Pacific)		
d.	Home school		
e.	Private school	\times	\boxtimes
f.	Other	\times	\boxtimes

14. [Ask if Q6 = "Yes" AND Q13 [Matching item] = "Yes'] How satisfied are you with your child's education?

Very dissatisfie				ied		
Dissatisfied						
	Neither satisfied nor	dissa	atisf	ied		
	Sa	tisfie	d			
	Very satisfied	t				
a.	Public traditional school		\times	\boxtimes	\times	\boxtimes
b.	Public charter school		\times	\boxtimes	\times	\boxtimes
C.	Department of Defense-run school (DoDEA Americas,					
	DoDEA Europe or DoDEA Pacific)		X		\times	
d.	Home school		\times		\times	
e.	Private school	30	\times	\boxtimes	\times	\boxtimes
f.	Other school		\times		\times	X

Consider the child(ren) in your household. Think of the child (younger than 18 years of age) whose <u>birth month</u> is closest to your <u>birth month</u>. Please respond to the following questions for that <u>one child</u>.

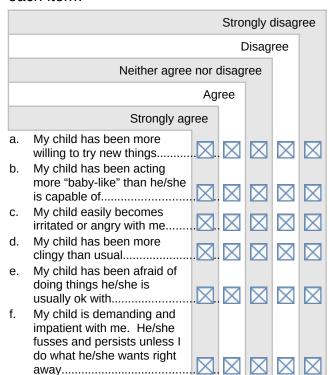
15. [Ask if Q6 = "Yes"] What is the age of this child?

		Years		
16.	[Ask if Q6	= "Yes" AND	15 < 18]	Is this

Male?
Female?

child...

17. [Ask if Q6 = "Yes" AND 15 < 18] Indicate how much you agree or disagree with the following statements about this child during the <u>last four weeks</u>. *Mark one answer for each item*.



18. [Ask if Q6 = "Yes" AND 15 < 18] In the <u>past</u> 12 months, has this child experienced an increase in any of the following? *Mark one* answer for each item.

		Not ap	plica	ble
			No	
		Yes		
a.	Academic problems		\times	
b.	Behavior problems at home		\times	\boxtimes
c.	Behavior problems at school	🖂	\times	\boxtimes
d.	Pride in having a military parent		\times	\boxtimes
e.	Anger about my spouse's military requirements		X	
f.	Closeness to family members		\times	\boxtimes
g.	Acceptance of responsibility		\times	

SERVICE, EDUCATION, AND EMPLOYMENT

- 19. Have you previously served in an active duty Service (e.g., Army, Navy, Marine Corps, Air Force, Coast Guard, Space Force) or National Guard/Reserve? *Mark one*.
 - X No
 - Yes, I served in an active duty Service or National Guard/Reserve, but did NOT retire
 - Yes, I served in an active duty Service or National Guard/Reserve and retired
- 20. Are you currently serving in the military?
 - Yes, on active duty (not a member of the National Guard/Reserve)
 - Yes, as a member of the National Guard or Reserve in a full-time active duty program (AGR/FTS/AR)
 - Yes, as a traditional National Guard/Reserve member (e.g., drilling unit, IMA, IRR)
 - X No
- 21. [Ask if Q20 = "No" or Q20 = "Yes, as a traditional National Guard/Reserve member (e.g., drilling unit, IMA, IRR)" or Q20 = .]

 Last week, did you do any work for pay or profit? Mark "Yes" even if you worked only one hour, or helped without pay in a family business or farm for 15 hours or more.
 - X Yes
 - No.
- 22. [Ask if (Q20 = "No" OR Q20 = "Yes, as a traditional National Guard/Reserve member (e.g., drilling unit, IMA, IRR)" OR Q20 = .)
 AND Q21 = "No"] Last week, were you temporarily absent from a job or business?
 - Yes, on vacation, temporary illness, labor dispute, etc.
 - No No
- 23. [Ask if (Q20 = "No" OR Q20 = "Yes, as a traditional National Guard/Reserve member (e.g., drilling unit, IMA, IRR)" OR Q20 = .)
 AND Q21 = "No" AND Q22 = "No"] Have you been looking for work during the <u>last</u> four weeks?
 - X Yes

No

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24.	[Ask if (Q20 = "No" OR Q20 = "Yes, as a traditional National Guard/Reserve member (e.g., drilling unit, IMA, IRR)" OR Q20 = .) AND Q21 = "No" AND Q22 = "No" AND Q23 = "Yes"] Last week, could you have started a job if one had been offered? Yes No
25.	[Ask if (Q20 = "No" OR Q20 = "Yes, as a traditional National Guard/Reserve member (e.g., drilling unit, IMA, IRR)" OR Q20 = .) AND Q21 = "No" AND Q22 = "No" AND Q23 = "Yes"] How many weeks have you been looking for work? If you have been looking for work for less than one week, enter "0". If you have been looking for work for more than one year, enter "52". Weeks
26.	[Ask if (Q20 = "No" OR Q20 = "Yes, as a traditional National Guard/Reserve member (e.g., drilling unit, IMA, IRR)" OR Q20 = .) AND Q21 = "No" AND Q21= "No" AND Q23 = "No"] Which of these would you consider to be the main reason you have not been looking for work? Mark the one answer you feel is the MAIN reason.

AND Q21 = "No" AND Q21= "No" AND Q23
= "No"] Which of these would you consider to be the main reason you have not been looking for work? Mark the one answer you feel is the MAIN reason.

I did not want to be employed at this time
I am retired
I cannot find any work that matches my skills.
I am preparing for/recovering from a PCS move.
I stay home to homeschool my children.
I am/was caring for children not in school or daycare
I lack the necessary schooling, training, or skills.
I do/did not have transportation to work
Child care is too costly.
I do not have child care available to me.
I am attending school or other training.
I am not physically prepared to work (e.g., pregnant, sick, disabled).
I am unable to work while my spouse is deployed.

There are no jobs in my career field where I currently

I am a caregiver to a family member.

live.

Other

[Ask if Q26 = "Other"] Please specify your other main reason for not working for pay or profit. Please do not include any personally identifiable information (e.g., names, addresses). 27. [Ask if (O20 = "No" OR O20 = "Yes, as a traditional National Guard/Reserve member (e.g., drilling unit, IMA, IRR)" OR Q20 = .) AND (Q21 = "Yes" OR (Q21 = "No" AND Q22 = "Yes, on vacation, temporary illness, labor dispute, etc."))] Are you employed by government, by a private company, a nonprofit organization, or are you selfemployed or working in a family business? Mark one. Government Private company Non-profit organization including tax exempt and charitable organizations Self-employed Working in a family business 28. [Ask if (Q20 = "No" OR Q20 = "Yes, as a traditional National Guard/Reserve member (e.g., drilling unit, IMA, IRR)" OR Q20 = .) AND (Q21 = "Yes" OR (Q21 = "No" AND Q22 = "Yes, on vacation, temporary illness, labor dispute, etc."))] On average, how many hours a week do you spend working for pay (including hours worked for a family business or farm)? Hours

29. [Ask if (Q20 = "No" OR Q20 = "Yes, as a traditional National Guard/Reserve member (e.g., drilling unit, IMA, IRR)" OR Q20 = .)

AND (Q21 = "Yes" OR (Q21 = "No" AND Q22 = "Yes, on vacation, temporary illness, labor dispute, etc.")) AND (Q28 < 35 and Q28 > 1)] What is your main reason for working part-time (i.e., fewer than 35 hours a week) instead of full-time? *Mark one*.

Could only find part-time work

Want to spend time with children

Child care problems

Other family/personal obligations

Health/medical limitations

Do not have required license or credential in my occupational field

I do not want to work full-time

I am self-employed

💢 I am a caregiver to a family member

I am attending school or training

○ Other

30. [Ask if (Q20 = "No" OR Q20 = "Yes, as a traditional National Guard/Reserve member (e.g., drilling unit, IMA, IRR)" OR Q20 = .) AND (Q21 = "Yes" OR (Q21 = "No" AND Q22 = "Yes, on vacation, temporary illness, labor dispute, etc."))] Please indicate how much you agree or disagree with the following statements. *Mark one answer for each item.*

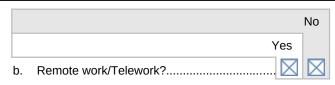
	Strongly disagre					ree
	Disagree					
	Neither agree	nor	disag	ree		
		Ag	ree			
	Strongly ag	ree				
a.	I am paid less than those with similar credentials		\boxtimes		\times	
b.	Given my credentials, I should have a higher position at work		\boxtimes		\boxtimes	
C.	I need to find a job that allows me to work more hours		\boxtimes		\boxtimes	
d.	I work in temporary positions, but I would prefer not to		X		X	
e.	I had to take a job outside of my field		\times	\boxtimes	X	
f.	My pay is not enough to live on	\boxtimes	\times	\boxtimes	\times	

31. [Ask if (Q20 = "No" OR Q20 = "Yes, as a traditional National Guard/Reserve member (e.g., drilling unit, IMA, IRR)" OR Q20 = .)
AND (Q21 = "Yes" OR (Q21 = "No" AND Q22 = "Yes, on vacation, temporary illness, labor dispute, etc."))] Are you currently employed within the area of your education or training?

X Yes
No

32. [Ask if (Q20 = "No" OR Q20 = "Yes, as a traditional National Guard/Reserve member (e.g., drilling unit, IMA, IRR)" OR Q20 = .)
AND (Q21 = "Yes" OR (Q21 = "No" AND Q22 = "Yes, on vacation, temporary illness, labor dispute, etc."))] Does your employer offer the following... *Mark "Yes" or "No" for each item.*

		No
	Yes	
a.	Flexible scheduling?	\boxtimes



33. [Ask if (Q20 = "No" OR Q20 = "Yes, as a traditional National Guard/Reserve member (e.g., drilling unit, IMA, IRR)" OR Q20 = .)
AND (Q21 = "Yes" OR (Q21 = "No" AND Q22 = "Yes, on vacation, temporary illness, labor dispute, etc.")) and Q32 b = "Yes"]

Please select the response that best describes your current work location.

\times	Fully remote (limited or no on-site requirement)
\times	Hybrid (combination of remote and on-site work)
\times	Fully on-site

34. What is the highest degree or level of school that you have completed? *Mark the one answer that describes the highest grade or degree that you have completed.*

aeg	gree that you have completed.
\times	12 years or less of school (no diploma)
X	High school graduate—high school diploma or equivalent (e.g., GED)
\times	Some college credit, no degree
\times	Vocational or technical diploma
\times	Associate's degree
\times	Bachelor's degree
\times	Advanced degree (e.g., MA/MS/PhD/MD/JD)

35.	In what career field is	your current or mos
	recent employment?	Mark one.

\times	Not applicable, I have never been employed
\times	Administrative services (e.g., administrative
	assistant, secretary)

- Child care and child development (e.g., attend to children at schools, businesses, private households, and childcare institutions)
- Communications and marketing (e.g., writer/editor, call center, film/TV, social media, web development)
- Community and social services (e.g., mental health counselor, social worker, probation officers and correctional treatment specialists, school bus monitor)
- Education (e.g., teacher, teacher's assistant)
- Financial services (e.g., claim adjuster, credit analyst, accountant, financial counselor, banker, insurance agent)
- Health care practitioners and technical occupations (e.g., nurse, dental hygienist, pharmacist, medical records specialist, dentist, doctor, paramedic, optician, veterinarian)
- Health care support (e.g., home health aide, nursing assistant, occupational or physical therapy aid)
- Information technology (e.g., network analyst, database administrator)
- Legal (e.g., lawyer, paralegal, legal assistant, mediator, magistrate)
- Protective services (e.g., correctional officer, firefighter, police officer, animal control worker, security quard)
- Recreation and hospitality (e.g., restaurant, hotel business/management, personal trainer, ticket agent)
- Retail and customer service (e.g., cashier, sales person, customer service representative, manager)
- Skilled trades (e.g., electrician, cosmetology, plumber, construction, welder)
- Software development (e.g., coding)
- Transportation and material moving occupations (e.g., aircraft service attendant; parking attendant; bus, taxi or truck driver)
- Other occupations which require a state license
- Other occupations which do NOT require a state license

[Ask if Q35 = "Other occupations which require a state license" or "Other occupations which do NOT require a state license"] In what other career field is your

current or most recent employment?

36.	What barriers have you faced in entering
	your most recent or current career field?
	Mark all that apply.

Pay does not cover cost of child care

Lack vocational training

Lack required education/degree

Lack required certification

Lack transferability of certifications/licensure

X Lack experience

X Lack available/flexible child care

Frequent moves

Lack of jobs in my field in my current location

Medical or health limitations

Caregiver (non-child) requirements

Lack of part-time options

Lack of flexible hours/flexible schedule

Not applicable/None

37. Regardless of your current employment status, does your occupation or career field require... *Mark* "Yes" or "No" for each item.

			No
	Ye	es	
a.	A certification provided by an organization that sets standards for your occupation?	X	
h.	A state issued license?	\times	\square

38.	[Ask if Q37 a = "Yes" OR Q37 b = "Yes"]
	What kind of professional license/
	certification/credential does your career field
	require? Mark one.

Accounting

Architecture

Cosmetology

Counseling (e.g., professional counselor, marriage and family therapist)

Dentistry/Dental hygiene

Dietition

Law (e.g., attorney)

Massage therapy

Nursing

Occupational therapy

Pharmacy/Pharmacy technician

Physical therapy

Physician

Physician Assistant

Professional engineer

Psychology

Skilled trade (e.g., master electrician, plumber, heating, air conditioning, ventilation and refrigeration)

7 Social work

Social work

Teaching (elementary and secondary)

○ Other

[Ask if Q37 a = "Yes" OR Q37 b = "Yes" AND Q22 = "Other"] Please share the 'other' professional license/certification/ credential your career field requires.

L	

39. Are you working toward or did you receive a new credential(s) or certification, in the last 12 months? *Mark all that apply.*

High school graduate—high school diploma or equivalent (e.g., GED)

Vocational or technical diploma

Associate's degree

Bachelor's degree

Master's, doctoral, or professional school degree

Professional license

Professional certificate

None/Not applicable

40.	Have you used a Military Spouse Career Advancement Accounts (MyCAA) Scholarship? <i>Mark one</i> . Yes, in the past 12 months Yes, but not in the past 12 months	44. [Ask if Q42 = "Yes"] Think about the quality of your experiences with military commissaries in the past 12 months. How would you and/or your family rate the following: <i>Mark one answer for each item</i> .						
	No, and I was not aware of this resource						Р	oor
	No, but I am aware of this resource					F	air	1
41.	[Ask if Q40 = "No, but I am aware of this				Go	ood		
	resource"] What is the main reason you did not use a MyCAA Scholarship? <i>Mark one.</i>			Very go	ood			
	I am not eligible because of my husband/wife's rank.			Excellent				
	I will not be eligible long enough to use MyCAA (e.g., my spouse will soon be promoted or leave the		a.	Convenience of store locations	\boxtimes		X	
	military). I need education, training, or testing not covered by		b. c.	Convenience of store hours	X	M	X	X
	MyCAA.			quality	\times		\times	
	I have limited time for additional education/training because of family/personal obligations.		d.	Variety and selection of merchandise	\times		\times	
	I am not interested in additional education/training.		e.	Availability of merchandise	\times		\times	\boxtimes
	I do not feel that additional education/training are important for my career.		f.	Courtesy and helpfulness of staff	\times		\times	
	,		g.	Layout and cleanliness of the store	\boxtimes		X	
	COMMISSARIES		h.	Speed of the checkout				
			i.	Ability to provide brand name				
42.	In the past 12 months, have you and/or your family used a commissary?		j.	products	\times	M	\times	
	Yes No, although a commissary was available		J.	promotions	\times		\times	$ \times $
			45. [Ask if Q42 = "Yes"] Thinking about you					
	No, a commissary was <u>not</u> available			mily's nutritional needs, how				
43.	[Ask if Q42 = "Yes"] In the past 12 months,		-	u with how well commissary erings meet those needs?	/ pro	oauc	is a	and
	how often, on average, do you and/or your family shop at a commissary?			Very satisfied				
	Daily		\boxtimes	Satisfied				
	More than once a week		X	Neither satisfied nor dissatisfied				
	Weekly		X	Dissatisfied Very dissatisfied				
	2-3 times a month			Tory dissautions a				
	Once a month Less than once a month			RESIDENCE/WHERE YO	U L	IVE		
	_	46	Do	you and your spouse curre	-ntlv	, rec	ide	
		40.	toç	gether in the same home (e. ring deployments)? Yes No	-			
		47.	W	hich of the following best de	escri	bes	wh	ere
			yo	u currently live?				
			X X X	Military housing, on base Military housing, off base Civilian housing				

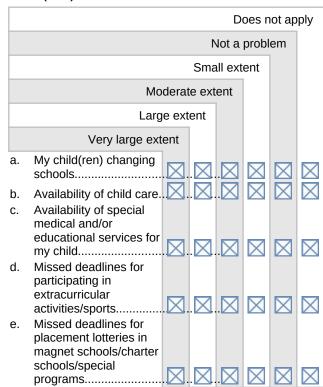
48. [Ask if Q46 = "No"] Which of the following

best describes where your spouse currently lives? Military housing, on base Military housing, off base Civilian housing 49. [Ask if Q46 = "Military housing, off base" OR Q47 = "Civilian housing"] How close do you live to a military base/installation? Less than 30 minutes 30 minutes to less than 1 hour 1 to 2 hours More than 2 hours LIFE IN THE MILITARY 50. Overall, how satisfied are you with the military way of life? Very satisfied Satisfied Neither satisfied nor dissatisfied Dissatisfied Very dissatisfied 51. Do you think your spouse should stay on or leave active duty? I strongly favor staying I somewhat favor staying I have no opinion one way or the other I somewhat favor leaving I strongly favor leaving PERMANENT CHANGE OF STATION (PCS) 52. During your spouse's active duty career, have you ever experienced a PCS move? Yes No 53. [Ask if Q52 = "Yes"] In what month and year was your last PCS move? Month Year

54. [Ask if Q52 = "Yes"] For your most recent PCS move, to what extent were the following a problem for you? Mark one answer for each item.

			D	oes r	ot ap	ply
		1	Not a	probl	em	
		Sma	all ext	ent		
	Modera	ate ex	tent			
	Large ex	ktent				
	Very large extent					
a.	Loss or decrease of your income			\boxtimes		\times
b.	Finding employment			\times		\times
C.	your education			\boxtimes		\times
d.	Obtaining licenses/ certifications necessary for employment			\boxtimes		\boxtimes
e.	Availability of special medical and/or educational services for					
	yourself		\boxtimes	\times	\boxtimes	\times
f.	Coordinating move with moving company			\boxtimes	\boxtimes	X
g.	Timeliness of receiving household goods			X		X
h.	Waiting for permanent housing to become					
	available			\times		\times
i.	Settling claims for damaged or missing household goods					\boxtimes
j.	Un-reimbursable moving costs (e.g., housing deposits, costs					
	of setting up new residency, temporary					
	lodging costs, transportation costs)			\boxtimes		\times
k.	Access to relocation information, services, or support			\boxtimes		X

55. [Ask if Q52 = "Yes" AND Q6 = "Yes"] For your most recent PCS move, to what extent were the following a problem for your child(ren)? Mark one answer for each item.



56. [Ask if Q52 = "Yes"] How long did it take you to find employment after your <u>last PCS</u> move? *Mark one.*

Less than 1 month

1 month to less than 4 months

4 months to less than 7 months

7 months to less than 10 months

10 months or more

Sought but could not find employment after last PCS

Did not seek employment after last PCS move

57. [Ask if Q52 = "Yes"] After your <u>last PCS</u> move, did you have to acquire a new professional or occupational license or credential in order to work at the new duty location?

Yes No

Does not apply

58. [Ask if Q52 = "Yes" and Q57 = "Yes"] How long did it take you to acquire a new professional or occupational license or credential in order to work at the new duty location? *Mark one*.

Less than 1 month

1 month to less than 4 months

4 months to less than 7 months

7 months to less than 10 months

10 months or more

59. [Ask if Q57 = "Yes"] Have you utilized the portability provisions of an occupational licensure compact to help secure transfer of your professional credentials?

Yes, I utilized a state compact to transfer my credentials

I am not aware of a compact for my profession
I am aware a compact to help transfer my professional credentials but have not used it

60. [Ask if Q52 = "Yes"] During your spouse's active duty career, how many times have you chosen to remain in place/not PCS with your spouse? *To indicate "never," enter "0"*.

Time

DEPLOYMENT

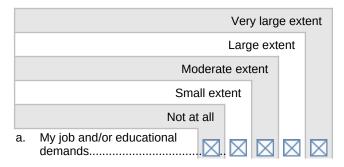
61. During your spouse's active duty career, has he/she been deployed for more than 30 consecutive days?

Yes, in the past 36 months

Yes, but not in the past 36 months

X No

62. [Ask if Q61 = "Yes, in the past 36 months" OR Q61 = "Yes, but not in the past 36 months"] During your spouse's most recent deployment, to what extent were each of the following a problem for you? *Mark one answer for each item*.



				Ver	y larg	e ext	ent
				Larg	e ext	ent	
		Мо	derat	e ext	ent		
		Sma	ll ext	ent			
		Not at	all				
	b.	Managing expenses and bills.	\boxtimes	\times	\boxtimes	\times	\boxtimes
	C.	Home/car repairs/ maintenance or yard work		X		X	
	d.	Safety of my family in our community		X		X	
	e.	Health problems in the family, including emotional problems		\boxtimes		\boxtimes	
	f.	Technical difficulties communicating with my spouse		\boxtimes		\boxtimes	
	g.	Marital problems, difficulty maintaining emotional connection with spouse		\times		\boxtimes	
	h.	Loneliness, dealing with issues/decisions alone		X		X	
	i.	Parenting alone, managing child care/child schedules, school/education, etc		\boxtimes		\boxtimes	
	j.	No time for recreation, fitness, or entertainment activities		\boxtimes		\boxtimes	
	k.	A lack of and/or problems with military offered support for myself/my family		\boxtimes	\boxtimes	\boxtimes	
	l.	Other	\boxtimes	\times	\boxtimes	\times	\boxtimes
·.	[As	sk if Q61 = "Yes, in the	past	36	moi	nths	11

63. [Ask if Q61 = "Yes, in the past 36 months" OR Q61 = "Yes, but not in the past 36 months"] Was your spouse's most recent deployment to a combat zone (e.g., an area where he/she drew imminent danger pay or hostile fire pay)? *Mark one*.

X No

Yes, deployed to Iraq/Afghanistan

Yes, deployed to a combat zone other than Iraq/ Afghanistan

64. [Ask if Q61 = "Yes, in the past 36 months" OR Q61 = "Yes, but not in the past 36 months"] Has your spouse returned home from a deployment? *Mark one*.

Yes, but my spouse has since redeployed

Yes, and my spouse has not redeployed

X No

65. [Ask if (Q61 = "Yes, in the past 36 months" OR Q61 = "Yes, but not in the past 36 months") AND (Q64 = "Yes, but my spouse has since redeployed" OR Q64 = "Yes, and my spouse has not redeployed")] After your spouse most recently returned home from a deployment, to what extent did your spouse seem to... *Mark one answer for each item.*

			· · ·	0.0		• • • •
Very large extent						
	Large extent					
	Mo	dera	te ext	ent		
	Sma	all ext	ent			
	Not a	t all				
a.	Be more emotionally distant (e.g., less talkative, less affectionate, less interested in social life)?		\boxtimes		\boxtimes	
b. c.	Show negative personality changes (e.g., more critical, indifferent to family/life)?		\boxtimes		\boxtimes	
	changes (e.g., more attentive, more agreeable)?				X	
d.	Appreciate life more?	X	X	X	X	K
e. f.	Get angry faster? Appreciate family and friends more?				X	
g.	Have mental health concerns (e.g., anxiety, being "on guard")?		\boxtimes		\boxtimes	
h.	Drink more alcohol?	\boxtimes	\times		\times	
i.	Have more confidence?	\boxtimes	\boxtimes	\boxtimes	\boxtimes	
j.	Take more risks with his/her safety?	\boxtimes	\times	\boxtimes	X	
k.	Have difficulty adjusting (e.g., to family responsibilities, to civilian life)?				\boxtimes	
l.	Have trouble sleeping?		\times		\times	\boxtimes
m.	Have difficulty with day-to- day activities (e.g., driving, eating, hygiene)?		\boxtimes		\boxtimes	
n.	Be different in another way?		\times		\times	

HEALTH AND WELL-BEING

66. Overall, how would you rate the current level of stress in your personal life?

Much less than usual

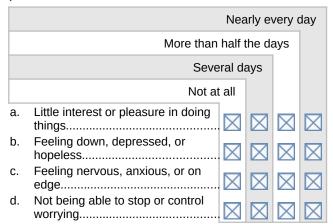
Less than usual

About the same as usual

More than usual

Much more than usual

67. Over the <u>last two weeks</u>, how often have you been bothered by any of the following problems? *Mark one answer for each item*.



68. Taking things altogether, how satisfied are you with your marriage right now?

Very satisfied
Satisfied
Neither satisfied nor dissatisfied
Dissatisfied
Very dissatisfied

69. Have you seen a counselor... *Mark "Yes" or "No" for each item*.

			No
		Yes	
a.	During your spouse's active duty career?	\square	
b.	In the past six months?		

70.	[Ask if Q69 a = "Yes" OR Q69 b = "Yes"]
	Which of these would you consider to be the
	main issue you discussed with your
	counselor? Mark the one answer you feel is
	the MAIN issue.

X	Coping with stress
X	Financial issues
X	Family issues
X	Marital issues
<	Couple's communication issues
X	Parent/child issues
<	Deployment and reunion
X	Crisis situations
X	Grief and loss
X.	Mental health concerns for self/family member (e.g., PTSD, depression, anxiety)
<	Medical issues for self/family member
X	Jealousy/concerns around infidelity
X.	Dealing with the military way of life (e.g., managing separations, demands of the military)

71. [Ask if Q69 a = "Yes" OR Q69 b = "Yes"] If you accessed counseling through the following sources, how useful was it? *Mark one answer for each item*.

Other concerns

	Did not access counseling from this source				
	Not useful				
	Somewhat useful				
	Very useful				
a.	Military OneSource		\times		
b.	Military Family Life Counselors (MFLC)		X		
c.	TRICARE	\boxtimes	\times	\boxtimes	
d.	Your spouse's installation	\bowtie	\times	\boxtimes	
e.	Military chaplain/civilian religious or spiritual leader		X	\boxtimes	
f.	Another military source	\boxtimes	\times	\boxtimes	
g.	Another non-military source		X		

[Ask if Q75 a = "Yes" OR Q75 b = "Yes" AND Q77 f = "Marked" OR Q77 g =

"Marked"] What other source(s) did you access counseling through? Do not provide any personally identifiable information.

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L	

FINANCIAL CONDITION

72. In 2022, what was your total household income before taxes?

Less than \$25,000

\$25,000-\$34,999

\$25,000=\$34,999

\$35,000-\$49,999

\$50,000-\$74,999

\$75,000-\$99,999

\$100,000-\$149,999

\$150,000-\$199,999

\$200,000 and above

73. Which of the following <u>best</u> describes your (and/or your spouse's) financial condition? Mark one.

Very comfortable and secure

Able to make ends meet without much difficulty

Occasionally have some difficulty making ends meet

Tough to make ends meet but keeping our heads above water

In over your head

74. Compared to 12 months ago, is your financial situation better, worse, or has it stayed the same?

Much better

Somewhat better

X Stayed the same

Somewhat worse

Much worse

75. [Ask if ((Q20 = "No" OR Q20 = "Yes, as a traditional National Guard/Reserve member (e.g., drilling unit, IMA, IRR)" OR Q20 = .)

AND (Q21 = "Yes" OR (Q21 = "No" AND Q22 = "Yes, on vacation, temporary illness, labor dispute, etc."))) OR (Q20 = "Yes, on active duty (not a member of the National Guard/Reserve)" OR Q20 = "Yes, as a member of the National Guard or Reserve in a full-time active duty program (AGR/FTS/AR)")] How much does your income contribute toward your total household

Less than 50%

50%

income?

More than 50%

76. Are you <u>currently</u> receiving support from any of the following nutrition assistance resources? *Mark all that apply*.

SNAP (Supplemental Nutrition Assistance Program/ Food Stamps)

WIC (Women, Infants, and Children) program

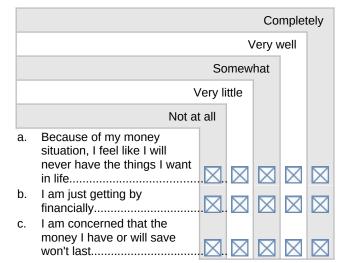
National School Breakfast Program (children receive free or reduced breakfast at school)

National School Lunch Program (children receive free or reduced lunch at school)

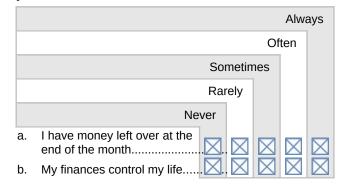
Some other assistance resource

No, I am not using any nutrition assistance resource

77. How well does each statement describe you or your situation? *Mark one answer for each item.*



78. How often does each statement apply to you? *Mark one answer for each item.*



FEDERAL VOTING ASSISTANCE PROGRAM

The following questions help us make sure that the Department

The following questions help us make sure that the Department of Defense is providing the necessary voting assistance resources to spouses.	not provide any personally identifiable information.
79. Were you registered to vote in the United States for the November 8, 2022 election? Yes No	
80. Did you request an absentee ballot for the November 8, 2022 election? Yes No, but I automatically received an absentee ballot from a local election official No, I never received an absentee ballot, but I expected to receive one No, I did not need an absentee ballot	85. [Ask if Q1 = "Widowed" OR Q1 = "Div OR Q2 = "No"] Based on your answer previous questions, you are ineligible this survey. If you feel you have encountered this message in error, clic back arrow button and check your answer.

81. [Ask if Q80 = "Yes"] Did you receive an absentee ballot for the November 8, 2022 election?

X	Yes
\times	No

82. [Ask if Q80 = "No, but I automatically received an absentee ballot from a local election official" OR Q80 = "Yes"] Did you return your absentee ballot for the November 8, 2022 election?



COMMENTS

83. Please share what the military could do to improve support for you and your family. Do not provide any personally identifiable information.

[Ask if Q1 = "Widowed" OR Q1 = "Divorced" OR Q2 = "No"] Based on your answers to previous questions, you are ineligible to take this survey. If you feel you have encountered this message in error, click the back arrow button and check your answers. If you have any additional comments or concerns, please enter them below. To submit your answers click <i>Submit</i> . For further help, please call our Survey Processing Center toll-free at 1-800-881-
5307 or e-mail ADS-Survey@mail.mil. Do not provide any personally identifiable
information.

84. Please describe the top issue(s) impacting

the quality of life for you and your family. Do