

Promoting Readiness of Minors in Supplemental Security Income (PROMISE): User Guide for the Five-Year Survey Public Use File

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Codebook (Separate volume)

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Acronyms and Abbreviations

ASPIRE Achieving Success by Promoting Readiness for Education and Employment

CaPROMISE California PROMISE

CMS Centers for Medicare & Medicaid Services

ED U.S. Department of Education

MD Maryland

NYS New York State

PROMISE Promoting Readiness of Minors in Supplemental Security Income

PUF Public use file

RA Random assignment

RAF Restricted access file

SSA Social Security Administration

SSI Supplemental Security Income

SSN Social Security number

WI Wisconsin



I. Introduction

PROMISE—Promoting Readiness of Minors in Supplemental Security Income (SSI)—was a joint initiative of the U.S. Department of Education (ED), the Social Security Administration (SSA), the U.S. Department of Health and Human Services, and the U.S. Department of Labor to address critical issues related to supporting youth with disabilities by funding and evaluating programs designed to promote positive change in the lives of youth who were receiving SSI and their families. Under cooperative agreements with ED, six entities across 11 states implemented model demonstration projects in which they enrolled SSI youth ages 14 through 16. The programs intended to (1) provide educational, vocational, and other services to youth and (2) make better use of existing resources by improving service coordination between state and local agencies. Under contract to SSA, Mathematica conducted the national evaluation of how the programs were implemented and operated, their impacts on SSA payments and education and on employment outcomes for youth and their families, and their net benefits. ²

This user guide describes the PROMISE evaluation's five-year public use file (PUF), which includes a subset of the data collected and analyzed for the evaluation's five-year impact analysis that assessed whether each PROMISE program improved the outcomes of the youth and families who were offered PROMISE services as of five years after they enrolled in the program (Patnaik et al. 2022). The PUF contains data from the evaluation's five-year follow-up surveys of youth enrollees and their parents or guardians.³ It also contains select data from the PROMISE random assignment (RA) system, as well as a few variables constructed from the survey, RA system, and SSA administrative data.

Section II of this user guide describes the PUF's contents and specifications, including information about the cleaning and masking of the data. Section III provides context regarding the design of the questionnaires used for the evaluation's surveys and the data collection procedures. The user guide appendices contain a list of the variables in the PUF and the questionnaires themselves. A codebook for the PUF accompanies this user guide as a separate volume.

¹ Hereafter, we refer to the PROMISE model demonstration projects as "PROMISE programs."

² Each PROMISE program also conducted its own formative evaluation.

³ Hereafter, we use "parents" to refer to parents and guardians.



II. File Contents and Specifications

The five-year PUF contains data from the PROMISE evaluation's five-year follow-up surveys of youth and parent enrollees. It also contains select data from the PROMISE RA system, as well as a few variables constructed from the survey, RA system, and SSA administrative data. Appendix A contains a list of all the variables in the PUF.

To be eligible for PROMISE, youth had to be age 14 through 16 at the time of enrollment, in SSI current pay status at some time during the PROMISE enrollment period (and not terminated from SSI before enrolling in the evaluation), living in a PROMISE program service delivery area, and not residing in an institution. In total, 13,444 youth enrolled in the PROMISE evaluation. The research sample for the five-year evaluation comprised the 12,584 youth who were randomly assigned to either the treatment or control group. The PUF contains the full research sample and includes data about the youth, the parent who completed the PROMISE enrollment forms and provided consent to participate in the evaluation (whom we refer to

Parents identified in PUF data sources:

- PROMISE 18-month parent survey: the enrolling parent or another parent or legal guardian
- PROMISE five-year parent survey: the enrolling parent
- RA system: the enrolling parent
- SSA data: If the enrolling parent was the youth's mother or father, we used the parent(s) documented on the SSI record; otherwise, or if no parent was documented on the SSI record, we used the enrolling parent

as the "enrolling parent"), and the other parent if the youth had one. The parent described by a given variable depends on the data source (see text box).⁵

Users interested in obtaining data from the PROMISE evaluation's 18-month follow-up surveys of youth and parent enrollees may consult the separate 18-month PUF, which has its own user guide and codebook. The two PUFs can be linked using PUF ID (variable pufid). For additional data collected and analyzed for the evaluation, users may request the 18-month and five-year restricted access files (RAFs) from SSA.

In the sections that follow, we first describe the contents of the PUF data and documentation package. We then provide greater detail about the survey, PROMISE RA system, and SSA program records that comprise the PUF; the construction of variables used in the evaluation's five-year impact analysis; and the masking procedures used to create the PUF.

A. PUF data and documentation package

The five-year PUF data and documentation package consists of the following three items:

⁴ The PROMISE programs could nonrandomly assign up to five youth to the treatment group. Siblings of youth already enrolled in the evaluation were also nonrandomly assigned to the same group as the first-enrolled sibling. We considered nonrandomly assigned cases as nonresearch cases and excluded them from the impact evaluation.

⁵ To enroll in PROMISE, youth had to provide a valid SSN, which allowed us to identify relevant records in the SSA data. Parents of enrolled youth were encouraged to provide an SSN but were not required to do so. When including the parent(s) documented on the SSI record in the SSA data analyses, we identified the parent(s) using the SSN(s) from the SSI record. When including the enrolling parent, we identified the parent using the SSN provided by the parent at enrollment if available. SSA validated the SSNs provided by parents at enrollment using the Enumeration Verification System.

- This user guide, including appendices that contain a list of the variables in the PUF and the questionnaires used for the evaluation's surveys;
- The PUF; and
- A codebook.

In Table II.1, we present the file names for each item in the PUF data and documentation package. The PUF is available in two formats: Stata and SAS.

Table II.1. PROMISE five-year PUF data and documentation package contents

Item	File name
User guide	PROMISE-5-year-puf-user-guide (this document)
PUF	PROMISE-5-year-puf
Codebook	PROMISE-5-year-puf-codebook

B. Survey data

Mathematica conducted two rounds of survey data collection for the PROMISE evaluation at 18 months and five years after enrollment. Except where data presented a disclosure risk, the five-year PUF includes all variables from the youth and parent five-year surveys. The names of survey variables identify the question number underlying the variable. For the youth survey, each variable name is the number of the question preceded by "Y2_" to indicate that the question was asked in the second round of youth data collection. For the parent survey, each variable name is the number of the question preceded by "P2_" to indicate that the question was asked in the second round of parent data collection. For example, variable Y2_a1 captures responses to question 1 in section A of the five-year youth questionnaire. The codebook entry for each variable also contains the question text.

1. Coding verbatim responses

The five-year surveys included some questions designed to elicit open-ended responses. To facilitate analysis of these responses, we grouped them into categories and assigned them numeric codes when possible. The methodology used to code each variable depended on how the information was solicited:

• Questions with other/specify options offered respondents the opportunity to provide a verbatim response if their response did not conform to an existing response category. For example, item Y2_b_b3 of the youth questionnaire asked respondents to specify another type of training if they did not receive one of the pre-specified types. We examined verbatim responses to uncover dominant themes for each question. If we identified verbatim responses that matched an existing response category, we back-coded the responses into the existing category. For example, some respondents said they were paid by commission in response to item Y2_c_a13 of the youth questionnaire. We back-coded such responses into the existing "Paid by things" category. If we identified many similar responses that did not match an existing category, we created new categories and back-coded the responses into the new categories. For example, we noticed that multiple respondents to question Y2_b_a2 of the youth questionnaire said that they attended transition programs or adult life skills classes. We created new categories called "Transition program" and "Adult life skills classes" and back-coded responses into those categories.

• Interviewer-coded questions required interviewers to code responses into predefined categories without reading the categories aloud to respondents. If none of the categories seemed to apply, interviewers selected an "other/specify" category and typed in the verbatim response. The only interviewer-coded questions are items Y2_c_a9 and Y2_c_a30 of the youth questionnaire and items P2_b_b11 and P2_b_d11 of the parent questionnaire. Item Y2_c_a9 asked what type of work the youth did at his or her job. The interviewer selected an occupation based on the youth's verbatim response. Items Y2_c_a30, P2_b_b11, and P2_b_d11 asked why the youth, parent, or parent's spouse was not working. The interviewer selected a reason based on the respondent's verbatim response.

2. Missing data

a. Missing units

The PUF is missing five-year youth and parent survey data for youth and parents who did not complete the respective survey. Youth and parents may not have completed a survey because they were not eligible, refused to participate, or could not be located. Section III.A provides more information about survey eligibility. The variables R2SY_survey_eligible and R2SP_survey_eligible identify enrollees who were eligible for the youth and parent surveys, respectively. Variables R2SY_complete and R2SP_complete identify enrollees who completed the youth and parent surveys. Data missing because of ineligibility and nonresponse have values of . in the PUF.

To account for survey nonresponse, we calculated and used survey nonresponse weights in all regression models to estimate impacts on the survey-based outcome measures. We calculated the survey nonresponse weights as the product of the estimated probability of locating a sample member for a survey (the location adjustment) and the estimated probability that the sample member, once located, responded to the survey (the cooperation adjustment). For all programs except California PROMISE (CaPROMISE), we attempted to interview all randomly assigned enrollees who were alive during the relevant five-year survey field period. The survey nonresponse weights served as the analysis weights. In the case of CaPROMISE, the analysis weight also accounted for the probability that an enrollee was sampled for the survey. Thus, for CaPROMISE, the analysis weight was the product of the sampling weight and the survey nonresponse weight.

In CaPROMISE, we sampled 2,000 youth of the 3,097 randomly assigned enrollees for the surveys. We initially selected the sample for the 18-month surveys and then used the same sample for the five-year surveys. We used stratified random sampling, in which we defined strata by the local educational agency and treatment status. Because CaPROMISE's enrollment was completed over a 21-month period, the 18-month survey effort began before all enrollments were completed. As a result, we sampled in two phases: first from the group that was enrolled by the time the 18-month survey effort began and then from the remainder of the enrollees (Matulewicz et al. 2018). We calculated sampling weights as the inverse of the probability of being selected for the sample. Because this was a stratified random sample in each phase, the sampling weights were simply the population size in each stratum divided by the sample size. Because

⁶ SSA and Mathematica determined that a sample size of 2,000 was sufficient to detect policy-relevant impacts.

the sample was proportionately allocated to each stratum, the sampling weights were approximately equal to 1.50 for all strata in the first phase and 1.89 for all strata in the second phase.⁷

We calculated survey nonresponse weights separately for each program. To calculate the program-specific nonresponse weights, we first developed a "location model" to estimate the probability of locating a sample member. We then developed a "response model" to estimate the probability of survey response among the located sample members. We used logistic regression models to estimate the two probabilities, with youth and parent baseline characteristics and geographic location information as covariates. The location model for CaPROMISE used the sampling weight normalized to the sample size. The response models for all programs used the normalized location-adjusted weight. The set of covariates under consideration for the models differed by program. We identified potential interactions by using Chi-square Automatic Interaction Detector. We included all available main and interaction effects as covariates in forward and backward stepwise logistic regression models (using the STEPWISE option of the SAS LOGISTIC procedure). We excluded any covariate or interaction that was unlikely to be related to locating the respondent or to response propensity. Because the stepwise logistic regression procedures in SAS did not fully account for the sample design in the variance estimates, we developed the final weighted models by using a command that accounted for the complex sample design (the SURVEYLOGISTIC procedure in SAS).

Next, we evaluated a series of models comparing the following measures of predictive ability and goodness of fit: the R-squared statistic, the percentage of concordant and discordant pairs, and the Hosmer-Lemeshow goodness-of-fit test. Model fitting also involved reviewing the statistical significance of the coefficients of the covariates in the model and avoiding any unusually large adjustment factors. We created five weighting classes for both the location and the response models based on the quintiles of the estimated propensities and calculated the adjustments at each step as the inverse of the weighted response rate within each weighting class. We calculated the survey nonresponse weights as the product of the location and adjustments. As noted above, the survey nonresponse weights served as the analysis weights for all programs but CaPROMISE. For that program, the analysis weight was the product of the sampling and survey nonresponse weights. We assessed the distribution of the weights for unusually high values because widely varying weights make estimates less precise and risk bias if a few cases with high weights had an undue influence on the estimates. However, we did not observe major outliers. In the final step, we ratio-adjusted the marginal weighted sums so they matched the total number of eligible treatment and control group enrollees in each program.

The variables in the PUF are unweighted, but the PUF includes the following weights users may use to account for survey sampling (CaPROMISE only) and survey nonresponse (all programs):

Parent and youth cross-sectional weights for the five-year surveys (R2SY_svywt and R2SP_svywt),
which are recommended when conducting analyses of five-year survey data and restricting the sample
to youth or parents who completed a survey. Mathematica used these weights in the five-year impact
analysis.

⁷ We obtained these values by dividing the population size by the sample size within each stratum. The population sizes were 2,604 in Phase 1 and 493 in Phase 2 across strata. The sample sizes were 1,739 in Phase 1 and 261 in Phase 2 across strata. We obtained 1.50 by dividing 2,604 by 1,739 and 1.89 by dividing 493 by 261. The actual weights varied from stratum to stratum but did not differ much from 1.50 and 1.89 because we used proportional allocation to the strata.

⁸ We calculated Chi-square Automatic Interaction Detector decision trees by using PROC HSPLIT in SAS.

- Youth-parent case cross-sectional weights for the five-year surveys (R2SC_svywt), which are recommended when conducting analyses of five-year survey data and restricting the sample to youth and parents who both completed a survey.
- Parent, youth, and youth-parent case longitudinal weights (R2SY_svywt_long, R2SP_svywt_long, and R2SC_svtwy_long), which are recommended when conducting when conducting analyses of 18-month and five-year survey data and restricting the sample to youth, parents, or both youth and parents who completed both surveys.

b. Missing items

Among survey respondents, survey data can be missing in the PUF because the respondent was ineligible for an item, refused to answer or did not know the answer to an item, completed only part of the interview, or because an interviewer or programming error resulted in a loss of data. Furthermore, a small number of youth and parents are missing data for the majority of items because they responded to abbreviated questionnaires (the abbreviated questionnaires are discussed in Section III.B). Missing items take values of . in the PUF.

C. RA system data

The RA system was a web-based system Mathematica designed and maintained to enroll youth in PROMISE and assign them either to a treatment or control group. Program staff entered data about a youth and parent into the RA system at the time of enrollment (which occurred from April 2014 through April 2016) and the system randomly assigned eligible youth and parents to treatment or control status. The RA system data in the PUF include: program, treatment status, and youth sex. The names of all variables from the RA system begin with RAS_. RA system data are present for all enrollees.

D. SSA program records

The PUF contains variables constructed from SSA program records (discussed in the next section) but no raw data. We obtained data on the SSA disability payments of youth and parents and the status of youth's age-18 redetermination. We used the disability program benefit data from April 2013 through April 2021, which covered the 12 months before RA through the five years following PROMISE enrollment for all youth enrollees and their parents. The data on the youth's age-18 redetermination range from April 2014 through April 2021, covering the five years after RA for all enrollees. Data on SSI receipt, including dates of application and monthly payment amounts, are from the Supplemental Security Record. Data on Old-Age, Survivors, and Disability Insurance program payments are from the Payment History Update System. In addition to data on outcomes related to benefits, we obtained data on several key baseline characteristics from the Supplemental Security Record, including length of SSI payment receipt at RA, age at first SSI application, and the primary impairment that was the basis for the youth's SSI eligibility.

E. Constructed variables

To simplify the PUF and assist users, we included selected variables constructed for the PROMISE evaluation's analyses in the PUF. We constructed variables from the survey, RA system, and SSA administrative data. We accounted for inflation and outliers when constructing variables, as described below:

- Inflation. For most dollar-denominated measures, we inflation adjusted to 2020 dollars using the Consumer Price Index for Urban Wage Earners and Clerical Workers. When inflation adjusting measures that spanned multiple years, we inflation adjusted based on the number of months in each year. When inflation adjusting earnings in the year before the survey for a youth who completed the survey in March 2019, for example, we assumed 3 of 12 months of earnings occurred in 2019 and 9 of 12 months of earnings occurred in 2018. We did not inflation adjust job-level measures (for example, job 1 weekly earnings).
- Outliers. For most continuous measures, we removed extreme outliers and winsorized the distribution. Winsorizing involves removing or transforming extreme values in a data distribution to reduce the effect of possibly spurious outliers. We winsorized outcome measures at the most granular level of data available. For example, for youth earnings, we winsorized earnings at the job level first rather than at the youth level. We took the following steps for all measures with 100 or more non-zero values. First, we calculated the 99th percentile, excluding zeroes and outlier values (values more than three times the inter-quartile range above the 75th percentile of non-zero values). We then top-coded values above the 99th percentile of the program-specific distribution of non-zero and non-outlier values at the 99th percentile of the program-specific distribution of non-zero and non-outlier values. We applied the same winsorizing procedure one more time to certain aggregated outcomes after their construction: youth's total earnings from all jobs and youth's and parents' household income. We also bottom-coded two measures (youth's hourly wage and weekly earnings at a job in the past year) at the 1st percentile of the program-specific distribution of the measure using the same procedure. We did additional top and bottom coding for disclosure avoidance, as described in Section II.F.

The names of constructed variables identify features of the variable. The first segment of the name consists of four characters that signify the following:

- The first two characters indicate the round of data collection: R0 signifies a variable collected at baseline (that is, at RA), R1 signifies a variable collected 18 months after RA, and R2 signifies a variable collected at five years after RA.
- The third character indicates the general data source: S signifies a survey variable and A signifies an administrative variable.
- The fourth character indicates the person described by the data: P signifies a variable about the parent, Y signifies a variable about the youth, and C signifies a variable about the youth-parent case (that is, the youth-parent pair that enrolled in the evaluation together).

Table II.2 lists the 15 possible values that the first segment can take. The codebook entry for each variable notes the variable's specific source (18-month or five-year parent or youth survey, RA system, or SSA data). The codebook entry for each constructed variable also provides the construction specifications.

Table II.2. Definitions of the first segment of analysis file variable names

First segment of the variable name	Definition
R0AC_	Youth-parent case baseline administrative variables
R0AP_	Parent baseline administrative variables
R0AY_	Youth baseline administrative variables
R1AC_	Youth-parent case 18-month administrative variables
R1AP_	Parent 18-month administrative variables

First segment of the variable name	Definition
R1AY_	Youth 18-month administrative variables
R1SC_	Youth-parent case 18-month survey variables
R1SP_	Parent 18-month survey variables
R1SY_	Youth 18-month survey variables
R2AC_	Youth-parent case five-year administrative variables
R2AP_	Parent five-year administrative variables
R2AY_	Youth five-year administrative variables
R2SC_	Youth-parent case five-year survey variables
R2SP_	Parent five-year survey variables
R2SY_	Youth five-year survey variables

F. Disclosure avoidance

We dropped and edited data from the RAFs to ensure the confidentiality of PROMISE enrollees in the PUF. To prevent the identification of enrollees, we first excluded variables containing information that could potentially be used either directly or indirectly to identify an enrollee. We then constructed new variables to mask extreme or rare values and populations. When making exclusion and masking decisions, we followed SSA's Disclosure Review Board guidelines.

1. Variable exclusion

We first excluded all data obtained from the Achieving Success by Promoting Readiness for Education and Employment (ASPIRE) baseline survey of youth and parent enrollees and the Rehabilitation Services Administration because we did not have permission to include these data in the PUF. We next dropped all direct identifiers (for example, Social Security number [SSN]) and created a new, randomly-generated ID (PUF ID; variable pufid) to identify PROMISE enrollees. Finally, we simplified the PUF by dropping variables with little analytic value, including survey administration variables, raw variables summarized by constructed variables, and constructed variables that were duplicative of raw variables or other constructed variables.

2. Masking and constructing new variables

We assessed the remaining variables for their disclosure risk. When variables identified relatively rare populations, we dropped the original variables and replaced them with constructed variables. For many variables that posed a potential risk, constructed variables summarizing the information already existed in the RAFs. When constructed variables did not exist, we used a variety of methods to construct new variables, with the goal of maximizing the analytic value of the PUF while maintaining acceptable confidentiality for enrollees. These methods included applying top and bottom coding and rounding to continuous variables, converting continuous variables into categorical variables, and combining responses for categorical variables. For example, for parent age at RA (variable R0AP_parent_age_ra), we collapsed the continuous ages into three categories: 39 or younger, 40 to 4, and 50 or older. Variables constructed

⁹ The five-year impact analysis also used data from the Centers for Medicare & Medicaid Services (CMS). We excluded these data from the RAF and PUF because of disclosure restrictions imposed by our data use agreement with CMS.

for the PUF have the same name as the original RAF variables followed by the suffix _puf. The PUF codebook includes the specifications used to mask variables

III. Questionnaire Design and Data Collection

Mathematica conducted separate follow-up surveys of the youth and their parents 18 months and five years after they enrolled in PROMISE. This user guide describes the five-year surveys, while the 18-month user guide describes the 18-month surveys. In the sections that follow, we describe the surveys' eligibility criteria, methods of administration, instruments, and response rates. Users can consult the PROMISE Five-Year Sampling and Survey Plan (Matulewicz et al. 2018) for more information.

A. Survey eligibility

In five of the six PROMISE programs, all randomly-assigned evaluation enrollees who were not deceased or withdrawn from the evaluation during the five years after enrollment were eligible to be interviewed for the five-year surveys. CaPROMISE was the only exception where, as noted previously, we sampled 2,000 of the 3,097 randomly-assigned enrollees for the survey. As noted above, the variables R2SY_survey_eligible and R2SP_survey_eligible identify enrollees who were eligible for the youth and parent surveys, respectively.

Although the target respondents for the youth survey were the youth themselves, they were sometimes helped by their parents, or proxies supplied their responses. The target respondent for the parent survey was the enrolling parent. In a small number of cases, proxies supplied responses for the enrolling parent. The variable R2SY_self_report indicates whether a proxy completed the youth interview.

Although most parent and youth survey respondents completed all sections of their respective surveys, certain types of respondents completed only a subset of sections. Tables III.1 and III.2 show the survey sections completed by each type of respondent. Within each section, we asked some questions of all parents or youth who completed the section and others of only those youth or parents to whom the questions were applicable. For example, we obtained detailed information about the nature of current jobs only from respondents who reported current employment.

Table III.1. Parent survey section completion by respondent type

Section identifier	Section name	Completed by parents of dependent youth	Completed by parents of independent youth	Completed by proxies
A	Introduction	Yes	Yes	Yes
В	Educational credentials and employment experience	Yes	Yes	Yes
С	Individual and family well-being	Yes	Partial	Yes
D	Expectations for youth	Yes	Yes	Only if proxy is parent's spouse
E	Contact information	Yes	Yes	Yes

Table III.2. Youth survey section completion by respondent type

Section identifier	Section name	Completed by independent youth	Completed by dependent youth	Completed by proxies
Α	Introduction	Yes	Yes	Yes
В	Education and training	Yes	Yes	Yes
С	Employment and work-based experiences	Yes	Yes	Yes
D	Health and well-being	Yes	Partial	Yes
E	Self-determination and expectations for the future	Yes	Yes	No
F	Knowledge of SSA benefits and work incentives	Yes	Yes	No
G	Contact information	Yes	Yes	Yes

B. Survey administration

Enrollment in the evaluation occurred over 25 months, beginning in April 2014 and ending in April 2016. The five-year surveys were fielded from May 2019 through August 2021. To simplify the survey management process, we aggregated the youth and parents into 25 cohorts corresponding to their month of enrollment. In each month from May 2019 to March 2021, we released a cohort to be surveyed. Among the completed surveys, we completed 97 percent of parent interviews and 96 percent of youth interviews within 24 weeks (five and a half months) from the cohort release date. We completed the remaining interviews slightly later to give more parents and youth the chance to respond. Table III.3 shows the survey fielding start and end dates for each cohort and the PROMISE programs represented in each cohort. Variables Y2_interviewend_puf and P2_interviewend_puf, respectively, indicate the month and year when the youth and parent completed the interview.

Table III.3. Schedule for the five-year survey

		Survey	Survey		PROMISE programs included in cohort				
Cohort	Enrollment month	fielding start month	fielding end month	Arkansas PROMISE	ASPIRE	Ca PROMISE	MD PROMISE	NYS PROMISE	WI PROMISE
1	4/14	5/19	12/19				Х		Х
2	5/14	5/19	12/19				Х		Х
3	6/14	6/19	1/20				Х		X
4	7/14	7/19	1/20				Х		Х
5	8/14	8/19	2/20			Х	Х		X
6	9/14	9/19	2/20	Х		Х	Х		Х
7	10/14	10/19	4/20	Х	Х	Х	Х	Х	Х
8	11/14	11/19	4/20	Х	Х	Х	Х	Х	Х
9	12/14	12/19	6/20	Х	Х	Х	Х	Х	Х
10	1/15	1/20	8/20	Х	Х	Х	Х	Х	Х
11	2/15	2/20	8/20	Х	Х	Х	Х	Х	Х
12	3/15	3/20	10/20	Х	Х	Х	Х	Х	Х

		Survey	Survey						
Cohort	Enrollment month	fielding start month	fielding end month	Arkansas PROMISE	ASPIRE	Ca PROMISE	MD PROMISE	NYS PROMISE	WI PROMISE
13	4/15	4/20	9/20	Х	Х	Χ	X	Х	X
14	5/15	5/20	10/20	Х	Х	Х	Х	Х	Х
15	6/15	6/20	11/20	Х	Х	Х	Х	Х	Х
16	7/15	7/20	12/20	Х	Х	Х	Х	Х	Х
17	8/15	8/20	1/21	Х	Х	Х	Х	Х	Х
18	9/15	9/20	2/21	Х	Х	Х	Х	Х	Х
19	10/15	10/20	3/21	Х	Х	Х	Х	Х	Х
20	11/15	11/20	4/21	Х	Х	Х	Х	Х	Х
21	12/15	12/20	5/21	Х	Х	Х	Х	Х	Х
22	1/16	1/21	7/21	Х	Х	Х	Х	Х	Х
23	2/16	2/21	7/21	Х	Х	Х	Х	Х	Х
24	3/16	3/21	8/21	Х	Х	Х		Х	Х
25	4/16	3/21	8/21	Х	Х	Х		Х	Х

ASPIRE = Achieving Success by Promoting Readiness for Education and Employment; CaPROMISE = California PROMISE; MD = Maryland; NYS = New York State; WI = Wisconsin.

We administered the surveys in English and Spanish in three modes: on the telephone by an interviewer, in person by an interviewer, and on paper via self-administration. Variables Y2_currentlanguage and P2_currentlanguage indicate the language of administration. We halted in-person interviewing from March 2020 to June 2021 because of the COVID-19 pandemic, conducting all interviews during this period by telephone and paper only. Among parent survey respondents, 93 percent completed the survey by telephone, 4 percent completed it in person, and 4 percent completed it on paper. The analogous figures for youth respondents were 91 percent by telephone, 4 percent in person, and 5 percent on paper. The median length of the interview was 19 minutes for the parent survey and 27 minutes for the youth survey.

C. Survey instruments

The interviewer-administered interviews used the same instruments and were deployed via computer-assisted interviewing technology. The self-administered paper questionnaires used abbreviated versions of the instruments. In developing the instruments, we sought to (1) identify and drop items in the PROMISE 18-month instruments that were no longer relevant for outcomes at the five-year mark; (2) add new items that could support analysis of long-term outcomes for youth and parents; and (3) build new response categories, where needed, based on open-ended responses to the 18-month survey items. In seeking items to measure newly added topics, such as youths' exposure to the criminal justice system or challenges they anticipate in pursuing postsecondary education, we drew on previous surveys of youth with disabilities and their parents, including the Youth Transition Demonstration evaluation and the National Longitudinal Transition Study. When our research needs were unmet by existing survey items, we crafted and cognitively tested new items. Table III.4 provides a list of the domains and measures of the five-year survey instruments, roughly in the order that they were covered during the interviews. Appendices B and C contain the English full-length questionnaires.

Table III.4. Youth and parent five-year survey instruments: Domains and measures of interest

	la parent nve year survey metramente. Bomane and measures of interest						
Modules and	Massaures						
domains	Measures						
Parent instrument							
Parent educational c	redentials and employment experience						
Education and training	Whether parent/guardian and spouse had any postsecondary degree, certificate, or license; type of highest degree, certificate, or license (bachelor's, associate's, certificate, or license) achieved by parent/guardian and spouse						
Employment and earnings	For parent/guardian and spouse (if applicable) separately: employment, hours of work, earnings, and access to fringe benefits through paid jobs in past year; current employment; barriers to employment (if not currently employed)						
Parent and family we	ell-being						
Income and program participation	Household income in past year (total and by source); household's current participation in other public-assistance programs						
Health insurance	Any current health insurance coverage; any current private health insurance coverage, any current public health insurance coverage; and any current coverage through the health insurance exchanges for parent/guardian and spouse (if applicable)						
Parent expectations	for youth						
Expectations	Parent's expectations about youth's future education, and employment, residential, and financial independence at age 25						
Youth instrument							
Youth education and	I training						
Secondary and postsecondary education	Current school enrollment status; type of school currently attending; whether currently receiving education accommodations; highest grade completed; high school completion; type of high school credential received; age at high school completion; postsecondary educational attainment, by type of institution or degree; barriers to pursuing further education						
Training	Currently attending a training program; type of training program currently attending; whether currently receiving training accommodations; receipt of training diploma, certificate, or license in past year						
Youth employment-r	elated service receipt and employment experience						
Employment-related service receipt	Receipt of employment-related transition services (services to prepare for, get, and keep a job; services to continue education beyond high school; services to get accommodations for school, work, or living independently)						
Employment	Employment in paid and unpaid jobs in the past year; self-employment; how youth found the job(s); employment, hours of work and earnings in paid jobs in the past year; current employment; types of jobs; employment in integrated setting(s); current receipt of job supports; unemployed youth: barriers to employment; job-seeking activities						
Youth self-determina	ation and expectations for the future						
Self-determination	Index of self-determination; indices of autonomy, psychological empowerment, self-realization, and agentic action						
Expectations	Youth's expectations about highest level of schooling and employment, residential and financial independence at age 25						
Youth contact with t	he justice system						
Arrested or charged	Ever arrested or charged with delinquency or criminal complaint; number of times arrested; whether arrested in past year						
Conviction and incarceration	Ever convicted of or pled guilty to a charge; ever incarcerated (in jail, prison, or detention home); duration of incarceration						

Modules and domains Measures						
Youth health						
Health status	Self-assessment of health status					
Health insurance	Any current health insurance coverage; any current private health insurance coverage, any current public health insurance coverage; any current coverage through the health insurance exchanges					
Parenthood	Whether ever became a biological parent; age at parenthood					
Youth well-being						
Living arrangement	Currently lives alone or with friends, with family, in group home or other institution; currently married or cohabiting; number of people in (independent) youth's household					
Income and program	All youth: knowledge of SSA benefits, work incentives, and wage reporting policies					
participation	Independent youth (only): Income in past year (total and by source); household income in past year; household's current receipt of SSA disability benefits and household's current participation in other public-assistance programs					

D. Survey response rates

The PROMISE five-year youth and parent survey response rates were high. They averaged at least 80 percent for all programs (Table III.5). 10 Response rates were similar for the youth and parent surveys. The differences in response rates between treatment and control group sample members were small, never exceeding 3 percentage points in any program.

We categorized a small number of partially completed interviews (91 parents and 69 youth) as completed. We considered parent interviews completed if responses were provided through item P2_b_b7 of the parent questionnaire. This cutoff point enabled us to obtain data on the parent's employment to estimate impacts on this outcome. We considered youth interviews completed if responses were provided through item Y2_c_a2a of the youth questionnaire. This cutoff point enabled us to obtain data on the youth's education and employment to estimate impacts on these outcomes.

¹⁰ We calculated the response rates as a proportion of the cases eligible for a given survey (response rate = number of completed interviews / number of eligible cases). In five of the PROMISE programs, all parents of randomly assigned youth were eligible for the parent five-year survey unless they had died or withdrawn within five years of enrollment, were the parent of a youth who had died within five years of enrollment, or were a legal guardian employed by an agency. Likewise, all randomly assigned youth were eligible for the youth five-year survey unless they had died or withdrawn within five years of enrollment. For CaPROMISE, we sampled 2,000 of the 3,097 randomly assigned youth. All sampled youth and their parents were eligible for the five-year surveys unless they met one of the conditions described above.

Table III.5. PROMISE five-year survey respondent sample sizes and response rates

Sample	Arkansas PROMISE	ASPIRE	Ca PROMISE	MD PROMISE	NYS PROMISE	WI PROMISE	
Youth survey (Response rate)							
Treatment	733	797	810	738	847	798	
	(82%)	(84%)	(82%)	(81%)	(86%)	(85%)	
Control	708	795	795	748	815	793	
	(79%)	(83%)	(80%)	(81%)	(83%)	(84%)	
Total	1,441	1,592	1,605	1,486	1,662	1,591	
	(81%)	(84%)	(81%)	(81%)	(85%)	(85%)	
Parent survey (Response rate	;)						
Treatment	702	781	813	730	837	786	
	(82%)	(85%)	(83%)	(82%)	(87%)	(86%)	
Control	691	766	792	722	807	775	
	(79%)	(83%)	(81%)	(81%)	(84%)	(84%)	
Total	1,393	1,547	1,605	1,452	1,644	1,561	
	(80%)	(84%)	(82%)	(81%)	(85%)	(85%)	

Note: Response rates equal the number of youth or parents who completed the survey divided by the number of youth or parents eligible for the survey. The number of youth eligible for the survey equals the research sample less youth who died or withdrew within five years of RA or, in the case of CaPROMISE, were not sampled for the survey. The number of parents eligible for the survey equals the research sample less parents who died or withdrew within five years of RA; were the parent of a youth who died within five years of RA; were a legal guardian employed by an agency; or, in the case of CaPROMISE, were not sampled for the survey.

ASPIRE = Achieving Success by Promoting Readiness for Education and Employment; CaPROMISE = California PROMISE; MD = Maryland; NYS = New York State; WI = Wisconsin.

References

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Appendix A. Lists of Variables in the Five-Year Public Use File



Table A.1 Public use file variables, sorted by name

Name	Label	Number
P2_a3	Parent's spouse lives in parent's household	4
P2_a2_puf	Parent's marital status (PUF)	3
P2_a4_puf	Parent's household size (PUF)	5
P2_a_youthrel_puf	Parent's relationship to youth (PUF)	2
P2_b_a1_puf	Parent's highest level of education (PUF)	6
P2_b_b7	Parent is currently working for pay	14
P2_b_b9	Parent has searched for a job in the last four weeks	16
P2_b_b11	Reason parent not working: Other	22
P2_b_b10_1	Reason parent not working: Can't find job	17
P2_b_b10_2	Reason parent not working: No reliable transportation	18
P2_b_b10_3	Reason parent not working: Caring for children or others	19
P2_b_b10_4	Reason parent not working: Don't want to lose benefits	20
P2_b_b10_5	Reason parent not working: Can't find job parent is qualified for	21
P2_b_b11_1	Other reason parent not working: Finishing school/training program	23
P2_b_b11_2	Other reason parent not working: Laid off	24
P2_b_b11_3	Other reason parent not working: Slack work/business conditions	25
P2_b_b11_4	Other reason parent not working: Temporary leave	26
P2_b_b11_5	Other reason parent not working: Discouraged by previous attempts to work	27
P2_b_b11_6	Other reason parent not working: Need help with personal care	28
P2_b_b11_7	Other reason parent not working: Need special equipment	29
P2_b_b11_8	Other reason parent not working: Workplaces not accessible	30
P2_b_b11_9	Other reason parent not working: Retired	31
P2_b_b11_10	Other reason parent not working: Other	32
P2_b_b1_puf	Parent worked for pay in past year (PUF)	7
P2_b_b2_1	Parent's job offered: Health insurance	8
P2_b_b2_2	Parent's job offered: Paid vacation/sick leave	9

Name	Label	Number
P2_b_b2_3	Parent's job offered: Pension/retirement	10
P2_b_b3_puf	Continuous number of hours parent worked per week (PUF)	11
P2_b_b3a	Categorical number of hours parent worked per week	12
P2_b_b4_puf	Number of weeks parent worked per year (PUF)	13
P2_b_b8_puf	Parent is currently searching for a job (PUF)	15
P2_b_c1_puf	Parent's spouse highest level of education (PUF)	33
P2_b_d7	Parent's spouse is currently working for pay	41
P2_b_d9	Parent's spouse has searched for a job in the last four weeks	43
P2_b_d11	Reason parent's spouse not working: Other	49
P2_b_d10_1	Reason parent's spouse not working: Can't find job	44
P2_b_d10_2	Reason parent's spouse not working: No reliable transportation	45
P2_b_d10_3	Reason parent's spouse not working: Can't find childcare/home care	46
P2_b_d10_4	Reason parent's spouse not working: Don't want to lose benefits	47
P2_b_d10_5	Reason parent's spouse not working: Can't find job spouse is qualified for	48
P2_b_d11_1	Other reason parent's spouse not working: Finishing school/training program	50
P2_b_d11_2	Other reason parent's spouse not working: Laid off	51
P2_b_d11_3	Other reason parent's spouse not working: Slack work/business conditions	52
P2_b_d11_4	Other reason parent's spouse not working: Temporary leave	53
P2_b_d11_5	Other reason parent's spouse not working: Discouraged by previous attempts to work	54
P2_b_d11_6	Other reason parent's spouse not working: Need help with personal care	55
P2_b_d11_7	Other reason parent's spouse not working: Need special equipment	56
P2_b_d11_8	Other reason parent's spouse not working: Workplaces not accessible	57
P2_b_d11_9	Other reason parent's spouse not working: Retired	58
P2_b_d11_10	Other reason parent's spouse not working: Other	59
P2_b_d1_puf	Parent's spouse worked for pay in past year (PUF)	34

Name	Label	Number
P2_b_d2_1	Parent's spouse job offered: Health insurance	35
P2_b_d2_2	Parent's spouse job offered: Paid vacation/sick leave	36
P2_b_d2_3	Parent's spouse job offered: Pension/retirement	37
P2_b_d3_puf	Continuous number of hours parent's spouse worked per week (PUF)	38
P2_b_d3a	Categorical number of hours parent's spouse worked per week	39
P2_b_d4_puf	Number of weeks parent's spouse worked per year (PUF)	40
P2_b_d8_puf	Parent's spouse is currently searching for a job (PUF)	42
P2_c_a1	Parent covered by health insurance	60
P2_c_a3	Parent has condition preventing them from working	68
P2_c_a4	Parent's spouse covered by health insurance	69
P2_c_a6	Parent's spouse has private insurance purchased through ACA	76
P2_c_a7	Parent's spouse has condition preventing them from working	77
P2_c_a8	Youth covered by health insurance	78
P2_c_a10	Youth has private insurance purchased through ACA	86
P2_c_a2_1	Parent health insurance type: Private through employer	61
P2_c_a2_2	Parent health insurance type: Private through self	62
P2_c_a2_3	Parent health insurance type: Medicaid	63
P2_c_a2_4	Parent health insurance type: Medicare	64
P2_c_a2_5	Parent health insurance type: Tricare	65
P2_c_a2_6	Parent health insurance type: Other	66
P2_c_a2a	Parent has private insurance purchased through ACA	67
P2_c_a5_1	Parent's spouse health insurance type: Private through employer	70
P2_c_a5_2	Parent's spouse health insurance type: Private through self	71
P2_c_a5_3	Parent's spouse health insurance type: Medicaid	72
P2_c_a5_4	Parent's spouse health insurance type: Medicare	73
P2_c_a5_5	Parent's spouse health insurance type: Tricare	74
P2_c_a5_6	Parent's spouse health insurance type: Other	75
P2_c_a9_1	Youth health insurance type: Private through employer	79

Name	Label	Number
P2_c_a9_2	Youth health insurance type: Private through self	80
P2_c_a9_3	Youth health insurance type: Medicaid	81
P2_c_a9_4	Youth health insurance type: Medicare	82
P2_c_a9_5	Youth health insurance type: Tricare	83
P2_c_a9_6	Youth health insurance type: CHIP	84
P2_c_a9_7	Youth health insurance type: Other	85
P2_c_b1	Parent's household receives TANF	87
P2_c_b2	Parent's household receives SNAP	89
P2_c_b3	Parent's household receives govt housing assistance	91
P2_c_b4	Parent's household receives SSI/SSDI	93
P2_c_b5	Parent's household receives retirement income	95
P2_c_b7	Parent's household receives other income	99
P2_c_b1a_puf	Parent's household income last month: TANF (PUF)	88
P2_c_b2a_puf	Parent's household income last month: SNAP (PUF)	90
P2_c_b3a_puf	Parent's household income last month: Govt housing assistance (PUF)	92
P2_c_b4a_puf	Parent's household income last month: SSI/SSDI (PUF)	94
P2_c_b5a_puf	Parent's household income last month: Retirement income (PUF)	96
P2_c_b6_puf	Parent's household total continuous income (PUF)	97
P2_c_b6a	Parent's household total categorical income	98
P2_c_b7a_puf	Parent's household income last month: Other (PUF)	100
P2_currentlanguage	Parent five-year survey language	107
P2_d_a1	Parent's rated importance of youth working for pay	101
P2_d_a2	Highest level of education parent thinks youth will attain	102
P2_d_a3	Parent expects: Youth will live independently at 25	103
P2_d_a4	Parent expects: Youth will work for pay at 25	104
P2_d_a5	Parent expects: Youth will support themselves at 25	105
P2_d_a6	Parent expects: Youth will support themselves at 25 w/o govt assistance	106
P2_interviewend_puf	Date parent completed the five-year survey (PUF)	108

Name	Label	Number
R0AC_radate_puf	Random Assignment Date (PUF)	109
R0AP_parent_age_ra_puf	Enrolling parent age at RA (PUF)	110
R0AP_parent_disben_cat	Parent receipt of OASDI or SSI benefits in the year before RA	111
R0AY_age_cat_ra	Youth age at RA (categorical)	112
R0AY_has_oasdi_pmt_ra_month	Youth received OASDI benefits in the month of RA	113
R0AY_has_ssi_pmt_ra_month	Youth received SSI payments in the month of RA	114
R0AY_impairment_detailed_puf	Youth detailed primary impairment at RA (PUF)	115
R0AY_mult_elig_child	Youth household had multiple SSI- eligible children at RA	116
R0AY_oasdi_amt_12m_pre_ra_puf	OASDI benefits youth received in the year before RA (PUF)	117
R0AY_ssi_amt_12m_pre_ra_puf	SSI payments youth received in the year before RA (PUF)	118
R0AY_ssi_duration_at_ra_puf	Youth duration of SSI receipt at RA (PUF)	119
R0AY_totben_amt_12m_pre_ra_puf	OASDI and SSI benefits youth received in the year before RA (PUF)	120
R0AY_youthlivarr_ra_puf	Youth living arrangement at RA (PUF)	121
R1SY_race_cat_puf	Youth race and ethnicity at the 18-month survey (PUF)	122
R2AP_oasdi_any_ben_months	Either parent received OASDI benefits during the five years after RA	123
R2AP_oasdi_any_ben_months_y1	Either parent received OASDI benefits in the first year after RA	124
R2AP_oasdi_any_ben_months_y2	Either parent received OASDI benefits in the second year after RA	125
R2AP_oasdi_any_ben_months_y3	Either parent received OASDI benefits in the third year after RA	126
R2AP_oasdi_any_ben_months_y4	Either parent received OASDI benefits in the fourth year after RA	127
R2AP_oasdi_any_ben_months_y5	Either parent received OASDI benefits in the fifth year after RA	128
R2AP_oasdi_ben_amt_paid_puf	OASDI benefits parents received during the five years after RA (PUF)	129
R2AP_oasdi_ben_amt_paid_y1_puf	OASDI benefits parents received in the first year after RA (PUF)	130
R2AP_oasdi_ben_amt_paid_y2_puf	OASDI benefits parents received in the second year after RA (PUF)	131
R2AP_oasdi_ben_amt_paid_y3_puf	OASDI benefits parents received in the third year after RA (PUF)	132
R2AP_oasdi_ben_amt_paid_y4_puf	OASDI benefits parents received in the fourth year after RA (PUF)	133
R2AP_oasdi_ben_amt_paid_y5_puf	OASDI benefits parents received in the fifth year after RA (PUF)	134
R2AP_ssa_any_ben_months	Either parent received OASDI or SSI benefits during the five years after RA	135

Name	Label	Number
R2AP_ssa_any_ben_months_y1	Either parent received OASDI or SSI benefits in the first year after RA	136
R2AP_ssa_any_ben_months_y2	Either parent received OASDI or SSI benefits in the second year after RA	137
R2AP_ssa_any_ben_months_y3	Either parent received OASDI or SSI benefits in the third year after RA	138
R2AP_ssa_any_ben_months_y4	Either parent received OASDI or SSI benefits in the fourth year after RA	139
R2AP_ssa_any_ben_months_y5	Either parent received OASDI or SSI benefits in the fifth year after RA	140
R2AP_ssa_ben_amt_paid_puf	OASDI and SSI benefits parents received during the five years after RA (PUF)	141
R2AP_ssa_ben_amt_paid_y1_puf	OASDI and SSI benefits parents received in the first year after RA (PUF)	142
R2AP_ssa_ben_amt_paid_y2_puf	OASDI and SSI benefits parents received in the second year after RA (PUF)	143
R2AP_ssa_ben_amt_paid_y3_puf	OASDI and SSI benefits parents received in the third year after RA (PUF)	144
R2AP_ssa_ben_amt_paid_y4_puf	OASDI and SSI benefits parents received in the fourth year after RA (PUF)	145
R2AP_ssa_ben_amt_paid_y5_puf	OASDI and SSI benefits parents received in the fifth year after RA (PUF)	146
R2AP_ssi_any_ben_months	Either parent received SSI benefits during the five years after RA	147
R2AP_ssi_any_ben_months_y1	Either parent received SSI benefits in the first year after RA	148
R2AP_ssi_any_ben_months_y2	Either parent received SSI benefits in the second year after RA	149
R2AP_ssi_any_ben_months_y3	Either parent received SSI benefits in the third year after RA	150
R2AP_ssi_any_ben_months_y4	Either parent received SSI benefits in the fourth year after RA	151
R2AP_ssi_any_ben_months_y5	Either parent received SSI benefits in the fifth year after RA	152
R2AP_ssi_ben_amt_paid_puf	SSI payments parents received during the five years after RA (PUF)	153
R2AP_ssi_ben_amt_paid_y1_puf	SSI payments parents received in the first year after RA (PUF)	154
R2AP_ssi_ben_amt_paid_y2_puf	SSI payments parents received in the second year after RA (PUF)	155
R2AP_ssi_ben_amt_paid_y3_puf	SSI payments parents received in the third year after RA (PUF)	156
R2AP_ssi_ben_amt_paid_y4_puf	SSI payments parents received in the fourth year after RA (PUF)	157
R2AP_ssi_ben_amt_paid_y5_puf	SSI payments parents received in the fifth year after RA (PUF)	158
R2AY_age18rdtrm_cessation	Youth received final age-18 redetermination decision to cease benefits at five years after RA	159

Name	Label	Number
R2AY_age18rdtrm_continued	Youth received final age-18 redetermination decision to continue benefits at five years after RA	160
R2AY_age18rdtrm_none	Youth did not have an age-18 redetermination at five years after RA	161
R2AY_age18rdtrm_pending	Youth final age-18 redetermination decision was pending at five years after RA	162
R2AY_oasdi_any_ben	Youth received OASDI benefits during the five years after RA	163
R2AY_oasdi_any_ben_y1	Youth received OASDI benefits in the first year after RA	164
R2AY_oasdi_any_ben_y2	Youth received OASDI benefits in the second year after RA	165
R2AY_oasdi_any_ben_y3	Youth received OASDI benefits in the third year after RA	166
R2AY_oasdi_any_ben_y4	Youth received OASDI benefits in the fourth year after RA	167
R2AY_oasdi_any_ben_y5	Youth received OASDI benefits in the fifth year after RA	168
R2AY_oasdi_ben_amt_paid_puf	OASDI benefits youth received during the five years after RA (PUF)	169
R2AY_oasdi_ben_amt_paid_y1_puf	OASDI benefits youth received in the first year after RA (PUF)	170
R2AY_oasdi_ben_amt_paid_y2_puf	OASDI benefits youth received in the second year after RA (PUF)	171
R2AY_oasdi_ben_amt_paid_y3_puf	OASDI benefits youth received in the third year after RA (PUF)	172
R2AY_oasdi_ben_amt_paid_y4_puf	OASDI benefits youth received in the fourth year after RA (PUF)	173
R2AY_oasdi_ben_amt_paid_y5_puf	OASDI benefits youth received in the fifth year after RA (PUF)	174
R2AY_ssa_any_ben_months	Youth received SSI or OASDI benefits during the five years after RA	175
R2AY_ssa_any_ben_months_y1	Youth received SSI or OASDI benefits in the first year after RA	176
R2AY_ssa_any_ben_months_y2	Youth received SSI or OASDI benefits in the second year after RA	177
R2AY_ssa_any_ben_months_y3	Youth received SSI or OASDI benefits in the third year after RA	178
R2AY_ssa_any_ben_months_y4	Youth received SSI or OASDI benefits in the fourth year after RA	179
R2AY_ssa_any_ben_months_y5	Youth received SSI or OASDI benefits in the fifth year after RA	180
R2AY_ssa_ben_amt_paid_puf	OASDI and SSI benefits youth received during the five years after RA (PUF)	181
R2AY_ssa_ben_amt_paid_y1_puf	OASDI and SSI benefits youth received in the first year after RA (PUF)	182
R2AY_ssa_ben_amt_paid_y2_puf	OASDI and SSI benefits youth received in the second year after RA (PUF)	183

Name	Label	Number
R2AY_ssa_ben_amt_paid_y3_puf	OASDI and SSI benefits youth received in the third year after RA (PUF)	184
R2AY_ssa_ben_amt_paid_y4_puf	OASDI and SSI benefits youth received in the fourth year after RA (PUF)	185
R2AY_ssa_ben_amt_paid_y5_puf	OASDI and SSI benefits youth received in the fifth year after RA (PUF)	186
R2AY_ssi_any_ben	Youth received SSI payments during the five years after RA	187
R2AY_ssi_any_ben_y1	Youth received SSI payments in the first year after RA	188
R2AY_ssi_any_ben_y2	Youth received SSI payments in the second year after RA	189
R2AY_ssi_any_ben_y3	Youth received SSI payments in the third year after RA	190
R2AY_ssi_any_ben_y4	Youth received SSI payments in the fourth year after RA	191
R2AY_ssi_any_ben_y5	Youth received SSI payments in the fifth year after RA	192
R2AY_ssi_ben_amt_paid_puf	SSI payments youth received during the five years after RA (PUF)	193
R2AY_ssi_ben_amt_paid_y1_puf	SSI payments youth received in the first year after RA (PUF)	194
R2AY_ssi_ben_amt_paid_y2_puf	SSI payments youth received in the second year after RA (PUF)	195
R2AY_ssi_ben_amt_paid_y3_puf	SSI payments youth received in the third year after RA (PUF)	196
R2AY_ssi_ben_amt_paid_y4_puf	SSI payments youth received in the fourth year after RA (PUF)	197
R2AY_ssi_ben_amt_paid_y5_puf	SSI payments youth received in the fifth year after RA (PUF)	198
R2SC_sampwt	Youth and parent sampling weight for five-year survey respondents	199
R2SC_svywt	Five-year survey cross-sectional weight for youth-parent pairs	200
R2SC_svywt_long	18-month and five-year survey longitudinal weight for youth-parent pairs	201
R2SP_complete	Parent completed five-year survey	202
R2SP_earn_pastyr_par_puf	Parent's earnings in the year before the five-year survey (PUF)	203
R2SP_earn_pastyr_par_spouse_puf	Parent's spouse's earnings in the year before the five-year survey (PUF)	204
R2SP_income_pastyr_puf	Parents' income from earnings and SSA payments in the year before the five-year survey (PUF)	205
R2SP_survey_eligible	Parent eligible for the five-year survey	206
R2SP_svywt	Five-year survey cross-sectional weight for parents	207

Name	Label	Number
R2SP_svywt_long	18-month and five-year survey longitudinal weight for parents	208
R2SP_wkhrs_pastyr_par_puf	Number of hours parent worked per week in the year before the five-year survey (PUF)	209
R2SP_wkhrs_pastyr_par_spouse_puf	Number of hours parent's spouse worked per week in the year before the five-year survey (PUF)	210
R2SY_complete	Youth completed five-year survey	211
R2SY_days_ever_incarcer_puf	Number of days youth had ever been incarcerated at the five-year survey (PUF)	212
R2SY_duration_job_1_puf	Youth job 1 duration in weeks (PUF)	213
R2SY_duration_job_2_puf	Youth job 2 duration in weeks (PUF)	214
R2SY_duration_job_3_puf	Youth job 3 duration in weeks (PUF)	215
R2SY_earnings_curr_puf	Youth's weekly earnings at the five- year survey (PUF)	216
R2SY_earnings_pastyr_puf	Youth's earnings in the year before the five-year survey (PUF)	217
R2SY_income_pastyr_puf	Youth's income from earnings and SSA payments in the year before the five-year survey (PUF)	218
R2SY_paid_job_1	Youth job 1 was paid	219
R2SY_paid_job_2	Youth job 2 was paid	220
R2SY_paid_job_3	Youth job 3 was paid	221
R2SY_self_report	Youth completed the five-year survey via self-report	222
R2SY_survey_eligible	Youth was eligible for the five-year survey	223
R2SY_svyproxy	Five-year youth survey completed by a proxy	224
R2SY_svywt	Five-year survey cross-sectional weight for youth	225
R2SY_svywt_long	18-month and five-year survey longitudinal weight for youth	226
R2SY_weekly_earnings_job_1_puf	Youth job 1 weekly earnings (PUF)	227
R2SY_weekly_earnings_job_2_puf	Youth job 2 weekly earnings (PUF)	228
R2SY_weekly_earnings_job_3_puf	Youth job 3 weekly earnings (PUF)	229
R2SY_weekly_hours_job_1_puf	Youth job 1 weekly hours worked (PUF)	230
R2SY_weekly_hours_job_2_puf	Youth job 2 weekly hours worked (PUF)	231
R2SY_weekly_hours_job_3_puf	Youth job 3 weekly hours worked (PUF)	232
R2SY_wklyhrs_curr_puf	Number of hours youth worked per week at the five-year survey (PUF)	233
R2SY_wklyhrs_pastyr_puf	Number of hours youth worked per week in the year before the five-year survey (PUF)	234
RAS_program	Program	235
RAS_random_assignment	Study group assignment	236

Name	Label	Number
RAS_youth_sex	Youth sex	237
Y2_a4	Youth and spouse live together	239
Y2_a3_puf	Youth marital status (PUF)	238
Y2_a5_puf	Youth living situation (PUF)	240
Y2_a6_puf	Number of people living in youth household (PUF)	241
Y2_b_a1	Youth currently attending school	242
Y2_b_a3	Youth accommodations for school	244
Y2_b_a6	Youth suspended or expelled school in past year	259
Y2_b_a2_puf	Youth school type (PUF)	243
Y2_b_a4_1	Reason youth stopped school: Graduated	245
Y2_b_a4_2 	Reason youth stopped school: Poor grades	246
Y2_b_a4_3	Reason youth stopped school: Didn't like school	247
Y2_b_a4_4 	Reason youth stopped school: Illness or disability	248
Y2_b_a4_5	Reason youth stopped school: Expelled	249
Y2_b_a4_6	Reason youth stopped school: General disciplinary problems	250
Y2_b_a4_7	Reason youth stopped school: Older than student age limit/aged out	251
Y2_b_a4_8	Reason youth stopped school: Personal or family problems	252
Y2_b_a4_9 	Reason youth stopped school: COVID-19/Pandemic	253
Y2_b_a4_10	Reason youth stopped school: Wanted/Needed/Found job	254
Y2_b_a4_11	Reason youth stopped school: Too expensive/Couldn't afford it	255
Y2_b_a4_12	Reason youth stopped school: Didn't get services/support needed	256
Y2_b_a4_99	Reason youth stopped school: Other	257
Y2_b_a5_puf	Youth highest year of school completed (PUF)	258
Y2_b_a7_a	Youth has GED	260
Y2_b_a7_b	Youth has high school diploma or certificate of completion	261
Y2_b_a9_a	Youth education or training challenges: Not enough information about options	262
Y2_b_a9_b	Youth education or training challenges: Needs to work	263
Y2_b_a9_c	Youth education or training challenges: Financial aid/paying	264
Y2_b_a9_d	Youth education or training challenges: Doesn't do well in school	265

Name	Label	Number
Y2_b_a9_e	Youth education or training challenges: Physical or mental health issues	266
Y2_b_a9_f	Youth education or training challenges: Accommodations	267
Y2_b_a9_g	Youth education or training challenges: Transportation	268
Y2_b_b1	Youth received training diploma, certificate, or license in past year	269
Y2_b_b2	Youth currently in training program or classes outside of school	270
Y2_b_b4	Youth receives support in training program	276
Y2_b_b3_1	Youth type of training: Vocational or trade school	271
Y2_b_b3_2	Youth type of training: Life skills	272
Y2_b_b3_3	Youth type of training: Job skills	273
Y2_b_b3_4	Youth type of training: Leadership/self-determination skills	274
Y2_b_b3_99	Training program type: Other	275
Y2_b_b5_a	Youth receives support in training program: Getting or keeping a job	277
Y2_b_b5_b	Youth receives support in training program: Continuing education	278
Y2_b_b5_c	Youth receives support in training program: School, work, or living independently	279
Y2_c_a1	Youth had job in past year	280
Y2_c_a25	Youth looking for work in last 4 weeks	310
Y2_c_a29	Reason youth not working: Other	338
Y2_c_a10_1	Youth job 1 how found job	289
Y2_c_a10_2	Youth job 2 how found job	290
Y2_c_a10_3	Youth job 3 how found job	291
Y2_c_a16_1	Youth job 1 health insurance	292
Y2_c_a16_2	Youth job 2 health insurance	293
Y2_c_a16_3	Youth job 3 health insurance	294
Y2_c_a17_1	Youth job 1 paid vacation or sick leave	295
Y2_c_a17_2	Youth job 2 paid vacation or sick leave	296
Y2_c_a17_3	Youth job 3 paid vacation or sick leave	297
Y2_c_a18_1	Youth job 1 pension or retirement plan	298
Y2_c_a18_2	Youth job 2 pension or retirement plan	299
Y2_c_a18_3	Youth job 3 pension or retirement plan	300
Y2_c_a19_1	Youth job 1 other workers have disabilities	301

Name	Label	Number
Y2_c_a19_2	Youth job 2 other workers have disabilities	302
Y2_c_a19_3	Youth job 3 other workers have disabilities	303
Y2_c_a20_1	Youth job 1 school-sponsored	304
Y2_c_a20_2	Youth job 2 school-sponsored	305
Y2_c_a20_3	Youth job 3 school-sponsored	306
Y2_c_a21_1	Youth job 1 help from job coach	307
Y2_c_a21_2	Youth job 2 help from job coach	308
Y2_c_a21_3	Youth job 3 help from job coach	309
Y2_c_a26_a	Youth looking for work: Contacted state workforce development or unemployment offices	311
Y2_c_a26_b	Youth looking for work: Asked friends or relatives	312
Y2_c_a26_c	Youth looking for work: Looked through job advertisements	313
Y2_c_a26_d	Youth looking for work: Contacted state VR agency	314
Y2_c_a26_e	Youth looking for work: Contacted employers in person, by mail, or by phone	315
Y2_c_a26_f	Youth looking for work: Other	316
Y2_c_a27_1	Reason youth not looking for work: Disability too severe	317
Y2_c_a27_2	Reason youth not looking for work: No transportation	318
Y2_c_a27_3	Reason youth not looking for work: Don't know how to find job	319
Y2_c_a27_4	Reason youth not looking for work: Don't want to look for job right now	320
Y2_c_a27_5	Reason youth not looking for work: Don't need/want job right now	321
Y2_c_a27_6	Reason youth not looking for work: Family doesn't want them to work	322
/2_c_a27_7 	Reason youth not looking for work: Fear of losing benefits	323
Y2_c_a27_8 	Reason youth not looking for work: In school or training program	324
Y2_c_a27_9 	Reason youth not looking for work: No one would hire - gave up looking	325
Y2_c_a27_10	Reason youth not looking for work: Not interested in types of jobs they could get	326
Y2_c_a27_11	Reason youth not looking for work: No jobs available	327
Y2_c_a27_12	Reason youth not looking for work: Raising children and chose not work now	328
Y2_c_a27_13	Reason youth not looking for work: Waiting to hear about a job/start a job	329

Name	Label	Number
Y2_c_a27_14	Reason youth not looking for work: Other	330
Y2_c_a28_a	Reason youth not working: Cannot find job they want	331
Y2_c_a28_b	Reason youth not working: No reliable transportation	332
Y2_c_a28_c	Reason youth not working: Caring for children or others	333
Y2_c_a28_d	Reason youth not working: Does not want to lose benefits	334
Y2_c_a28_e	Reason youth not working: Physical/mental condition	335
Y2_c_a28_f	Reason youth not working: Cannot find job qualified for	336
Y2_c_a28_g	Reason youth not working: Attending school	337
Y2_c_a2_puf	Number of jobs youth had in past year (PUF)	281
Y2_c_a2a	Youth received income from self- employment	282
Y2_c_a30_code_1	Other reason youth not working code: Finishing school or training program	339
Y2_c_a30_code_2	Other reason youth not working code: Layoff	340
Y2_c_a30_code_3	Other reason youth not working code: Slack work/business conditions	341
Y2_c_a30_code_4	Other reason youth not working code: Leave or vacation	342
Y2_c_a30_code_5	Other reason youth not working code: Previous work has been discouraging	343
Y2_c_a30_code_6	Other reason youth not working code: Cannot get help with personal care	344
Y2_c_a30_code_7	Other reason youth not working code: Special equipment or devices needed	345
Y2_c_a30_code_8	Other reason youth not working code: Lack of accessibility and accommodations	346
Y2_c_a30_code_9	Other reason youth not working code: Other	347
Y2_c_a4_1	Youth job 1 self-employed	283
Y2_c_a4_2	Youth job 2 self-employed	284
Y2_c_a4_3	Youth job 3 self-employed	285
Y2_c_a6_1	Youth job 1 currently working	286
Y2_c_a6_2	Youth job 2 currently working	287
Y2_c_a6_3	Youth job 3 currently working	288
Y2_currentlanguage	Youth interview language	417
Y2_d_a2	Youth is responsible for children	348

Name	Label	Number
Y2_d_a3	Youth has biological children	349
Y2_d_b1	Youth health status	350
Y2_d_b2	Youth health insurance coverage	351
Y2_d_b3_1	Youth health insurance: Private through employer	352
Y2_d_b3_2	Youth health insurance: Private purchased on own	353
Y2_d_b3_3	Youth health insurance: Medicaid	354
Y2_d_b3_4	Youth health insurance: Medicare	355
Y2_d_b3_5	Youth health insurance: Tricare	356
Y2_d_b3_6	Youth health insurance: CHIP	357
Y2_d_b3_7	Youth health insurance: Other	358
Y2_d_b3a	Youth has private insurance purchased through ACA or health insurance exchange	359
Y2_d_c2	Youth ever arrested or taken into custody for a crime or illegal offense	360
Y2_d_c4	Youth ever convicted or pled guilty to charges	362
Y2_d_c5	Youth ever or currently serve time in juvenile or adult prison, jail or other correctional facility	363
Y2_d_c7	Youth arrested in past year	364
Y2_d_c3_puf	Number of times youth arrested or taken into custody for a crime or illegal offense (PUF)	361
Y2_d_d1	Youth household benefits: TANF	365
Y2_d_d2	Youth household benefits: SNAP	367
Y2_d_d3	Youth household benefits: Government housing assistance	369
Y2_d_d4	Youth household benefits: SSI or SSDI income	371
Y2_d_d5	Youth household benefits: Retirement income	373
Y2_d_d7	Youth household benefits: Other	377
Y2_d_d1a_puf	Youth household TANF amount last month (PUF)	366
Y2_d_d2a_puf	Youth household SNAP amount last month (PUF)	368
Y2_d_d3a_puf	Youth household government housing assistance amount last month (PUF)	370
Y2_d_d4a_puf	Youth household SSI or SSDI amount last month (PUF)	372
Y2_d_d5a_puf	Youth household retirement income amount last month (PUF)	374
Y2_d_d6_puf	Youth total household earnings last month - continuous (PUF)	375
Y2_d_d6a	Youth total household earnings last month - categorical	376

Name	Label	Number
Y2_d_d7a_puf	Youth household income from other sources amount last month (PUF)	378
Y2_e_a1_a	Youth ARC SD Scale (Autonomy): Friends and I choose activities we want to do	379
Y2_e_a1_b	Youth ARC SD Scale (Autonomy): I write letters, texts or talk on the phone to friends and family	380
Y2_e_a1_c	Youth ARC SD Scale (Autonomy): I go to restaurants I like	381
Y2_e_a1_d	Youth ARC SD Scale (Autonomy): I choose gifts to give to friends and family	382
Y2_e_a1_e	Youth ARC SD Scale (Autonomy): I go to movies, concerts, dances	383
Y2_e_a1_f	Youth ARC SD Scale (Autonomy): I plan weekend activities I want to do	384
Y2_e_a1_g	Youth ARC SD Scale (Autonomy): I decorate own room	385
Y2_e_b1	Youth ARC SD Scale (Psychological empowerment): I try hard at school	386
Y2_e_b2	Youth ARC SC Scale (Psychological empowerment): I keep trying	387
Y2_e_b3	Youth ARC SD Scale (Psychological empowerment): I know how to make friends	388
Y2_e_b4	Youth ARC SD Scale (Psychological empowerment): I make good choices	389
Y2_e_b5	Youth ARC SD Scale (Psychological empowerment): My choices are honored	390
Y2_e_b6	Youth ARC SD Scale (Psychological empowerment): I make new friends	391
Y2_e_c1_a	Youth ARC SD Scale (Self-realization): I know what I do best	392
Y2_e_c1_b	Youth ARC SD Scale (Self-realization): I like myself	393
Y2_e_c1_c	Youth ARC SD Scale (Self-realization): I am confident in my abilities	394
Y2_e_c1_d	Youth ARC SD Scale (Self-realization): Other people like me	395
Y2_e_c1_e	Youth ARC SD Scale (Self-realization): Better to be yourself than to be popular	396
Y2_e_c1_f	Youth ARC SD Scale (Self-realization): I know how to make up for my limitations	397
Y2_e_c1_g	Youth ARC SD Scale (Self-realization): I am loved because I give love	398
Y2_e_d1_a	Youth ARC SD Scale (Agentic action): I think of more than one way to solve a problem	399

Name	Label	Number
Y2_e_d1_b	Youth ARC SD Scale (Agentic action): I set own goals	400
Y2_e_d1_c	Youth ARC SD Scale (Agentic action): I figure out ways to get around obstacles	401
Y2_e_d1_d	Youth ARC SD Scale (Agentic action): I think about goals	402
Y2_e_d1_e	Youth ARC SD Scale (Agentic action): I take action when new opportunities come	403
Y2_e_d1_f	Youth ARC SD Scale (Agentic action): I come up with ways to reach goals	404
Y2_e_e1	Youth expectations for future: Highest level of schooling completed	405
Y2_e_e2	Youth expectations for future: Age 25 living situation	406
Y2_e_e3	Youth expectations for future: Age 25 financial independence from family	407
Y2_e_e4	Youth expectations for future: Age 25 financial independence from benefit programs	408
Y2_e_e5	Youth expectations for future: Age 25 working at paid job	409
Y2_f_a1	Youth knowledge of benefits: Student Earned Income Exclusion	410
Y2_f_a2	Youth knowledge of benefits: Plan for Achieving Self-Support (PASS)	411
Y2_f_a3	Youth knowledge of benefits: 1 for 2 earnings exclusion	412
Y2_f_a4	Youth knowledge of benefits: Achieving a Better Life Experience (ABLE) account	413
Y2_f_a5_a	Youth knowledge of benefits: Children automatically eligible for SSI as adults	414
Y2_f_a5_b	Youth knowledge of benefits: SSI beneficiaries not allowed to work for pay	415
Y2_f_a5_c	Youth knowledge of benefits: SSI beneficiaries must report earnings to SSA	416
Y2_interviewend_puf	Date youth completed the five-year survey (PUF)	418
pufid	PUF ID	1

Table A.2 Public use file variables, sorted by variable number

Name	Label	Number
pufid	PUF ID	1
P2_a_youthrel_puf	Parent's relationship to youth (PUF)	2
P2_a2_puf	Parent's marital status (PUF)	3
P2_a3	Parent's spouse lives in parent's household	4
P2_a4_puf	Parent's household size (PUF)	5
P2_b_a1_puf	Parent's highest level of education (PUF)	6
P2_b_b1_puf	Parent worked for pay in past year (PUF)	7
P2_b_b2_1	Parent's job offered: Health insurance	8
P2_b_b2_2	Parent's job offered: Paid vacation/sick leave	9
P2_b_b2_3	Parent's job offered: Pension/retirement	10
P2_b_b3_puf	Continuous number of hours parent worked per week (PUF)	11
P2_b_b3a	Categorical number of hours parent worked per week	12
P2_b_b4_puf	Number of weeks parent worked per year (PUF)	13
P2_b_b7	Parent is currently working for pay	14
P2_b_b8_puf	Parent is currently searching for a job (PUF)	15
P2_b_b9	Parent has searched for a job in the last four weeks	16
P2_b_b10_1	Reason parent not working: Can't find job	17
P2_b_b10_2	Reason parent not working: No reliable transportation	18
P2_b_b10_3	Reason parent not working: Caring for children or others	19
P2_b_b10_4	Reason parent not working: Don't want to lose benefits	20
P2_b_b10_5	Reason parent not working: Can't find job parent is qualified for	21
P2_b_b11	Reason parent not working: Other	22
P2_b_b11_1	Other reason parent not working: Finishing school/training program	23
P2_b_b11_2	Other reason parent not working: Laid off	24
P2_b_b11_3	Other reason parent not working: Slack work/business conditions	25
P2_b_b11_4	Other reason parent not working: Temporary leave	26
P2_b_b11_5	Other reason parent not working: Discouraged by previous attempts to work	27

Name	Label	Number
P2_b_b11_6	Other reason parent not working: Need help with personal care	28
P2_b_b11_7	Other reason parent not working: Need special equipment	29
P2_b_b11_8	Other reason parent not working: Workplaces not accessible	30
P2_b_b11_9	Other reason parent not working: Retired	31
P2_b_b11_10	Other reason parent not working:	32
P2_b_c1_puf	Parent's spouse highest level of education (PUF)	33
P2_b_d1_puf	Parent's spouse worked for pay in past year (PUF)	34
P2_b_d2_1	Parent's spouse job offered: Health insurance	35
P2_b_d2_2	Parent's spouse job offered: Paid vacation/sick leave	36
P2_b_d2_3	Parent's spouse job offered: Pension/retirement	37
P2_b_d3_puf	Continuous number of hours parent's spouse worked per week (PUF)	38
P2_b_d3a	Categorical number of hours parent's spouse worked per week	39
P2_b_d4_puf	Number of weeks parent's spouse worked per year (PUF)	40
P2_b_d7	Parent's spouse is currently working for pay	41
P2_b_d8_puf	Parent's spouse is currently searching for a job (PUF)	42
P2_b_d9	Parent's spouse has searched for a job in the last four weeks	43
P2_b_d10_1	Reason parent's spouse not working: Can't find job	44
P2_b_d10_2	Reason parent's spouse not working: No reliable transportation	45
P2_b_d10_3	Reason parent's spouse not working: Can't find childcare/home care	46
P2_b_d10_4	Reason parent's spouse not working: Don't want to lose benefits	47
P2_b_d10_5	Reason parent's spouse not working: Can't find job spouse is qualified for	48
P2_b_d11	Reason parent's spouse not working: Other	49
P2_b_d11_1	Other reason parent's spouse not working: Finishing school/training program	50
P2_b_d11_2	Other reason parent's spouse not working: Laid off	51
P2_b_d11_3	Other reason parent's spouse not working: Slack work/business conditions	52
P2_b_d11_4	Other reason parent's spouse not working: Temporary leave	53

Name	Label	Number
P2_b_d11_5	Other reason parent's spouse not working: Discouraged by previous attempts to work	54
P2_b_d11_6	Other reason parent's spouse not working: Need help with personal care	55
P2_b_d11_7	Other reason parent's spouse not working: Need special equipment	56
P2_b_d11_8	Other reason parent's spouse not working: Workplaces not accessible	57
P2_b_d11_9	Other reason parent's spouse not working: Retired	58
P2_b_d11_10	Other reason parent's spouse not working: Other	59
P2_c_a1	Parent covered by health insurance	60
P2_c_a2_1	Parent health insurance type: Private through employer	61
P2_c_a2_2	Parent health insurance type: Private through self	62
P2_c_a2_3	Parent health insurance type: Medicaid	63
P2_c_a2_4	Parent health insurance type: Medicare	64
P2_c_a2_5	Parent health insurance type: Tricare	65
P2_c_a2_6	Parent health insurance type: Other	66
P2_c_a2a	Parent has private insurance purchased through ACA	67
P2_c_a3	Parent has condition preventing them from working	68
P2_c_a4	Parent's spouse covered by health insurance	69
P2_c_a5_1	Parent's spouse health insurance type: Private through employer	70
P2_c_a5_2	Parent's spouse health insurance type: Private through self	71
P2_c_a5_3	Parent's spouse health insurance type: Medicaid	72
P2_c_a5_4	Parent's spouse health insurance type: Medicare	73
P2_c_a5_5	Parent's spouse health insurance type: Tricare	74
P2_c_a5_6	Parent's spouse health insurance type: Other	75
P2_c_a6	Parent's spouse has private insurance purchased through ACA	76
P2_c_a7	Parent's spouse has condition preventing them from working	77
P2_c_a8	Youth covered by health insurance	78
P2_c_a9_1	Youth health insurance type: Private through employer	79
P2_c_a9_2	Youth health insurance type: Private through self	80

Name	Label	Number
P2_c_a9_3	Youth health insurance type: Medicaid	81
P2_c_a9_4	Youth health insurance type: Medicare	82
P2_c_a9_5	Youth health insurance type: Tricare	83
P2_c_a9_6	Youth health insurance type: CHIP	84
P2_c_a9_7	Youth health insurance type: Other	85
P2_c_a10	Youth has private insurance purchased through ACA	86
P2_c_b1	Parent's household receives TANF	87
P2_c_b1a_puf	Parent's household income last month: TANF (PUF)	88
P2_c_b2	Parent's household receives SNAP	89
P2_c_b2a_puf	Parent's household income last month: SNAP (PUF)	90
P2_c_b3	Parent's household receives govt housing assistance	91
P2_c_b3a_puf	Parent's household income last month: Govt housing assistance (PUF)	92
P2_c_b4	Parent's household receives SSI/SSDI	93
P2_c_b4a_puf	Parent's household income last month: SSI/SSDI (PUF)	94
P2_c_b5	Parent's household receives retirement income	95
P2_c_b5a_puf	Parent's household income last month: Retirement income (PUF)	96
P2_c_b6_puf	Parent's household total continuous income (PUF)	97
P2_c_b6a	Parent's household total categorical income	98
P2_c_b7	Parent's household receives other income	99
P2_c_b7a_puf	Parent's household income last month: Other (PUF)	100
P2_d_a1	Parent's rated importance of youth working for pay	101
P2_d_a2	Highest level of education parent thinks youth will attain	102
P2_d_a3	Parent expects: Youth will live independently at 25	103
P2_d_a4	Parent expects: Youth will work for pay at 25	104
P2_d_a5	Parent expects: Youth will support themselves at 25	105
P2_d_a6	Parent expects: Youth will support themselves at 25 w/o govt assistance	106
P2_currentlanguage	Parent five-year survey language	107
P2_interviewend_puf	Date parent completed the five-year survey (PUF)	108

Name	Label	Number
R0AC_radate_puf	Random Assignment Date (PUF)	109
R0AP_parent_age_ra_puf	Enrolling parent age at RA (PUF)	110
R0AP_parent_disben_cat	Parent receipt of OASDI or SSI benefits in the year before RA	111
R0AY_age_cat_ra	Youth age at RA (categorical)	112
R0AY_has_oasdi_pmt_ra_month	Youth received OASDI benefits in the month of RA	113
R0AY_has_ssi_pmt_ra_month	Youth received SSI payments in the month of RA	114
R0AY_impairment_detailed_puf	Youth detailed primary impairment at RA (PUF)	115
R0AY_mult_elig_child	Youth household had multiple SSI- eligible children at RA	116
R0AY_oasdi_amt_12m_pre_ra_puf	OASDI benefits youth received in the year before RA (PUF)	117
R0AY_ssi_amt_12m_pre_ra_puf	SSI payments youth received in the year before RA (PUF)	118
R0AY_ssi_duration_at_ra_puf	Youth duration of SSI receipt at RA (PUF)	119
R0AY_totben_amt_12m_pre_ra_puf	OASDI and SSI benefits youth received in the year before RA (PUF)	120
R0AY_youthlivarr_ra_puf	Youth living arrangement at RA (PUF)	121
R1SY_race_cat_puf	Youth race and ethnicity at the 18-month survey (PUF)	122
R2AP_oasdi_any_ben_months	Either parent received OASDI benefits during the five years after RA	123
R2AP_oasdi_any_ben_months_y1	Either parent received OASDI benefits in the first year after RA	124
R2AP_oasdi_any_ben_months_y2	Either parent received OASDI benefits in the second year after RA	125
R2AP_oasdi_any_ben_months_y3	Either parent received OASDI benefits in the third year after RA	126
R2AP_oasdi_any_ben_months_y4	Either parent received OASDI benefits in the fourth year after RA	127
R2AP_oasdi_any_ben_months_y5	Either parent received OASDI benefits in the fifth year after RA	128
R2AP_oasdi_ben_amt_paid_puf	OASDI benefits parents received during the five years after RA (PUF)	129
R2AP_oasdi_ben_amt_paid_y1_puf	OASDI benefits parents received in the first year after RA (PUF)	130
R2AP_oasdi_ben_amt_paid_y2_puf	OASDI benefits parents received in the second year after RA (PUF)	131
R2AP_oasdi_ben_amt_paid_y3_puf	OASDI benefits parents received in the third year after RA (PUF)	132
R2AP_oasdi_ben_amt_paid_y4_puf	OASDI benefits parents received in the fourth year after RA (PUF)	133
R2AP_oasdi_ben_amt_paid_y5_puf	OASDI benefits parents received in the fifth year after RA (PUF)	134
R2AP_ssa_any_ben_months	Either parent received OASDI or SSI benefits during the five years after RA	135

Name	Label	Number
R2AP_ssa_any_ben_months_y1	Either parent received OASDI or SSI benefits in the first year after RA	136
R2AP_ssa_any_ben_months_y2	Either parent received OASDI or SSI benefits in the second year after RA	137
R2AP_ssa_any_ben_months_y3	Either parent received OASDI or SSI benefits in the third year after RA	138
R2AP_ssa_any_ben_months_y4	Either parent received OASDI or SSI benefits in the fourth year after RA	139
R2AP_ssa_any_ben_months_y5	Either parent received OASDI or SSI benefits in the fifth year after RA	140
R2AP_ssa_ben_amt_paid_puf	OASDI and SSI benefits parents received during the five years after RA (PUF)	141
R2AP_ssa_ben_amt_paid_y1_puf	OASDI and SSI benefits parents received in the first year after RA (PUF)	142
R2AP_ssa_ben_amt_paid_y2_puf	OASDI and SSI benefits parents received in the second year after RA (PUF)	143
R2AP_ssa_ben_amt_paid_y3_puf	OASDI and SSI benefits parents received in the third year after RA (PUF)	144
R2AP_ssa_ben_amt_paid_y4_puf	OASDI and SSI benefits parents received in the fourth year after RA (PUF)	145
R2AP_ssa_ben_amt_paid_y5_puf	OASDI and SSI benefits parents received in the fifth year after RA (PUF)	146
R2AP_ssi_any_ben_months	Either parent received SSI benefits during the five years after RA	147
R2AP_ssi_any_ben_months_y1	Either parent received SSI benefits in the first year after RA	148
R2AP_ssi_any_ben_months_y2	Either parent received SSI benefits in the second year after RA	149
R2AP_ssi_any_ben_months_y3	Either parent received SSI benefits in the third year after RA	150
R2AP_ssi_any_ben_months_y4	Either parent received SSI benefits in the fourth year after RA	151
R2AP_ssi_any_ben_months_y5	Either parent received SSI benefits in the fifth year after RA	152
R2AP_ssi_ben_amt_paid_puf	SSI payments parents received during the five years after RA (PUF)	153
R2AP_ssi_ben_amt_paid_y1_puf	SSI payments parents received in the first year after RA (PUF)	154
R2AP_ssi_ben_amt_paid_y2_puf	SSI payments parents received in the second year after RA (PUF)	155
R2AP_ssi_ben_amt_paid_y3_puf	SSI payments parents received in the third year after RA (PUF)	156
R2AP_ssi_ben_amt_paid_y4_puf	SSI payments parents received in the fourth year after RA (PUF)	157
R2AP_ssi_ben_amt_paid_y5_puf	SSI payments parents received in the fifth year after RA (PUF)	158
R2AY_age18rdtrm_cessation	Youth received final age-18 redetermination decision to cease benefits at five years after RA	159

Name	Label	Number	
R2AY_age18rdtrm_continued	Youth received final age-18 redetermination decision to continue benefits at five years after RA	160	
R2AY_age18rdtrm_none	Youth did not have an age-18 redetermination at five years after RA	161	
R2AY_age18rdtrm_pending	Youth final age-18 redetermination decision was pending at five years after RA	162	
R2AY_oasdi_any_ben	Youth received OASDI benefits during the five years after RA	163	
R2AY_oasdi_any_ben_y1	Youth received OASDI benefits in the first year after RA	164	
R2AY_oasdi_any_ben_y2	Youth received OASDI benefits in the second year after RA	165	
R2AY_oasdi_any_ben_y3	Youth received OASDI benefits in the third year after RA	166	
R2AY_oasdi_any_ben_y4	Youth received OASDI benefits in the fourth year after RA	167	
R2AY_oasdi_any_ben_y5	Youth received OASDI benefits in the fifth year after RA	168	
R2AY_oasdi_ben_amt_paid_puf	OASDI benefits youth received during the five years after RA (PUF)	169	
R2AY_oasdi_ben_amt_paid_y1_puf	OASDI benefits youth received in the first year after RA (PUF)	170	
R2AY_oasdi_ben_amt_paid_y2_puf	OASDI benefits youth received in the second year after RA (PUF)	171	
R2AY_oasdi_ben_amt_paid_y3_puf	OASDI benefits youth received in the third year after RA (PUF)	172	
R2AY_oasdi_ben_amt_paid_y4_puf	OASDI benefits youth received in the fourth year after RA (PUF)	173	
R2AY_oasdi_ben_amt_paid_y5_puf	OASDI benefits youth received in the fifth year after RA (PUF)	174	
R2AY_ssa_any_ben_months	Youth received SSI or OASDI benefits during the five years after RA	175	
R2AY_ssa_any_ben_months_y1	Youth received SSI or OASDI benefits in the first year after RA	176	
R2AY_ssa_any_ben_months_y2	Youth received SSI or OASDI benefits in the second year after RA	177	
R2AY_ssa_any_ben_months_y3	Youth received SSI or OASDI benefits in the third year after RA	178	
R2AY_ssa_any_ben_months_y4	Youth received SSI or OASDI benefits in the fourth year after RA	179	
R2AY_ssa_any_ben_months_y5	Youth received SSI or OASDI benefits in the fifth year after RA	180	
R2AY_ssa_ben_amt_paid_puf	OASDI and SSI benefits youth received during the five years after RA (PUF)	181	
R2AY_ssa_ben_amt_paid_y1_puf	OASDI and SSI benefits youth received in the first year after RA (PUF)	182	
R2AY_ssa_ben_amt_paid_y2_puf	OASDI and SSI benefits youth received in the second year after RA (PUF)	183	

Name	Label	Number	
R2AY_ssa_ben_amt_paid_y3_puf	OASDI and SSI benefits youth received in the third year after RA (PUF)	184	
R2AY_ssa_ben_amt_paid_y4_puf	OASDI and SSI benefits youth received in the fourth year after RA (PUF)	185	
R2AY_ssa_ben_amt_paid_y5_puf	OASDI and SSI benefits youth received in the fifth year after RA (PUF)	186	
R2AY_ssi_any_ben	Youth received SSI payments during the five years after RA	187	
R2AY_ssi_any_ben_y1	Youth received SSI payments in the first year after RA	188	
R2AY_ssi_any_ben_y2	Youth received SSI payments in the second year after RA	189	
R2AY_ssi_any_ben_y3	Youth received SSI payments in the third year after RA	190	
R2AY_ssi_any_ben_y4	Youth received SSI payments in the fourth year after RA	191	
R2AY_ssi_any_ben_y5	Youth received SSI payments in the fifth year after RA	192	
R2AY_ssi_ben_amt_paid_puf	SSI payments youth received during the five years after RA (PUF)	193	
R2AY_ssi_ben_amt_paid_y1_puf	SSI payments youth received in the first year after RA (PUF)	194	
R2AY_ssi_ben_amt_paid_y2_puf	SSI payments youth received in the second year after RA (PUF)	195	
R2AY_ssi_ben_amt_paid_y3_puf	SSI payments youth received in the third year after RA (PUF)	196	
R2AY_ssi_ben_amt_paid_y4_puf	SSI payments youth received in the fourth year after RA (PUF)	197	
R2AY_ssi_ben_amt_paid_y5_puf	SSI payments youth received in the fifth year after RA (PUF)	198	
R2SC_sampwt	Youth and parent sampling weight for five-year survey respondents	199	
R2SC_svywt	Five-year survey cross-sectional weight for youth-parent pairs	200	
R2SC_svywt_long	18-month and five-year survey longitudinal weight for youth-parent pairs	201	
R2SP_complete	Parent completed five-year survey	202	
R2SP_earn_pastyr_par_puf	Parent's earnings in the year before the five-year survey (PUF)	203	
R2SP_earn_pastyr_par_spouse_puf	Parent's spouse's earnings in the year before the five-year survey (PUF)	204	
R2SP_income_pastyr_puf	Parents' income from earnings and SSA payments in the year before the five-year survey (PUF)	205	
R2SP_survey_eligible	Parent eligible for the five-year survey	206	
R2SP_svywt	Five-year survey cross-sectional weight for parents	207	

Name	Label	Number	
R2SP_svywt_long	18-month and five-year survey longitudinal weight for parents	208	
R2SP_wkhrs_pastyr_par_puf	Number of hours parent worked per week in the year before the five-year survey (PUF)	209	
R2SP_wkhrs_pastyr_par_spouse_puf	Number of hours parent's spouse worked per week in the year before the five-year survey (PUF)	210	
R2SY_complete	Youth completed five-year survey	211	
R2SY_days_ever_incarcer_puf	Number of days youth had ever been incarcerated at the five-year survey (PUF)	212	
R2SY_duration_job_1_puf	Youth job 1 duration in weeks (PUF)	213	
R2SY_duration_job_2_puf	Youth job 2 duration in weeks (PUF)	214	
R2SY_duration_job_3_puf	Youth job 3 duration in weeks (PUF)	215	
R2SY_earnings_curr_puf	Youth's weekly earnings at the five- year survey (PUF)	216	
R2SY_earnings_pastyr_puf	Youth's earnings in the year before the five-year survey (PUF)	217	
R2SY_income_pastyr_puf	Youth's income from earnings and SSA payments in the year before the five-year survey (PUF)	218	
R2SY_paid_job_1	Youth job 1 was paid	219	
R2SY_paid_job_2	Youth job 2 was paid	220	
R2SY_paid_job_3	Youth job 3 was paid	221	
R2SY_self_report	Youth completed the five-year survey via self-report	222	
R2SY_survey_eligible	Youth was eligible for the five-year survey	223	
R2SY_svyproxy	Five-year youth survey completed by a proxy	224	
R2SY_svywt	Five-year survey cross-sectional weight for youth	225	
R2SY_svywt_long	18-month and five-year survey longitudinal weight for youth	226	
R2SY_weekly_earnings_job_1_puf	Youth job 1 weekly earnings (PUF)	227	
R2SY_weekly_earnings_job_2_puf	Youth job 2 weekly earnings (PUF)	228	
R2SY_weekly_earnings_job_3_puf	Youth job 3 weekly earnings (PUF)	229	
R2SY_weekly_hours_job_1_puf	Youth job 1 weekly hours worked (PUF)	230	
R2SY_weekly_hours_job_2_puf	Youth job 2 weekly hours worked (PUF)	231	
R2SY_weekly_hours_job_3_puf	Youth job 3 weekly hours worked (PUF)	232	
R2SY_wklyhrs_curr_puf	Number of hours youth worked per week at the five-year survey (PUF)	233	
R2SY_wklyhrs_pastyr_puf	Number of hours youth worked per week in the year before the five-year survey (PUF)	234	
RAS_program	Program	235	
RAS_random_assignment	Study group assignment	236	

Name	Label	Number	
RAS_youth_sex	Youth sex	237	
Y2_a3_puf	Youth marital status (PUF)	238	
Y2_a4	Youth and spouse live together	239	
Y2_a5_puf	Youth living situation (PUF)	240	
Y2_a6_puf	Number of people living in youth household (PUF)	241	
Y2_b_a1	Youth currently attending school	242	
Y2_b_a2_puf	Youth school type (PUF)	243	
Y2_b_a3	Youth accommodations for school	244	
Y2_b_a4_1	Reason youth stopped school: Graduated	245	
Y2_b_a4_2	Reason youth stopped school: Poor grades	246	
Y2_b_a4_3 	Reason youth stopped school: Didn't like school	247	
Y2_b_a4_4 	Reason youth stopped school: Illness or disability	248	
Y2_b_a4_5 	Reason youth stopped school: Expelled	249	
Y2_b_a4_6 	Reason youth stopped school: General disciplinary problems	250	
Y2_b_a4_7 	Reason youth stopped school: Older than student age limit/aged out	251	
Y2_b_a4_8	Reason youth stopped school: Personal or family problems	252	
Y2_b_a4_9 	Reason youth stopped school: COVID-19/Pandemic	253	
Y2_b_a4_10 	Reason youth stopped school: Wanted/Needed/Found job	254	
Y2_b_a4_11	Reason youth stopped school: Too expensive/Couldn't afford it	255	
Y2_b_a4_12 	Reason youth stopped school: Didn't get services/support needed	256	
Y2_b_a4_99	Reason youth stopped school: Other	257	
Y2_b_a5_puf	Youth highest year of school completed (PUF)	258	
Y2_b_a6	Youth suspended or expelled school in past year	259	
Y2_b_a7_a	Youth has GED	260	
Y2_b_a7_b	Youth has high school diploma or certificate of completion	261	
Y2_b_a9_a	Youth education or training challenges: Not enough information about options	262	
Y2_b_a9_b	Youth education or training challenges: Needs to work	263	
Y2_b_a9_c	Youth education or training challenges: Financial aid/paying	264	
Y2_b_a9_d	Youth education or training challenges: Doesn't do well in school	265	

Name	Label	Number	
Y2_b_a9_e	Youth education or training challenges: Physical or mental health issues	266	
Y2_b_a9_f	Youth education or training challenges: Accommodations	267	
Y2_b_a9_g	Youth education or training challenges: Transportation	268	
Y2_b_b1	Youth received training diploma, certificate, or license in past year	269	
Y2_b_b2	Youth currently in training program or classes outside of school	270	
Y2_b_b3_1	Youth type of training: Vocational or trade school	271	
Y2_b_b3_2	Youth type of training: Life skills	272	
Y2_b_b3_3	Youth type of training: Job skills	273	
Y2_b_b3_4	Youth type of training: Leadership/self-determination skills	274	
Y2_b_b3_99	Training program type: Other	275	
Y2_b_b4	Youth receives support in training program	276	
Y2_b_b5_a	Youth receives support in training program: Getting or keeping a job	277	
Y2_b_b5_b	Youth receives support in training program: Continuing education	278	
Y2_b_b5_c	Youth receives support in training program: School, work, or living independently	279	
Y2_c_a1	Youth had job in past year	280	
Y2_c_a2_puf	Number of jobs youth had in past year (PUF)	281	
Y2_c_a2a	Youth received income from self- employment	282	
Y2_c_a4_1	Youth job 1 self-employed	283	
Y2_c_a4_2	Youth job 2 self-employed	284	
Y2_c_a4_3	Youth job 3 self-employed	285	
Y2_c_a6_1	Youth job 1 currently working	286	
Y2_c_a6_2	Youth job 2 currently working	287	
Y2_c_a6_3	Youth job 3 currently working	288	
Y2_c_a10_1	Youth job 1 how found job	289	
Y2_c_a10_2	Youth job 2 how found job	290	
Y2_c_a10_3	Youth job 3 how found job	291	
Y2_c_a16_1	Youth job 1 health insurance	292	
Y2_c_a16_2	Youth job 2 health insurance	293	
Y2_c_a16_3	Youth job 3 health insurance	294	
Y2_c_a17_1	Youth job 1 paid vacation or sick leave	295	
Y2_c_a17_2	Youth job 2 paid vacation or sick leave	296	

Name	Label	Number
Y2_c_a17_3	Youth job 3 paid vacation or sick leave	297
Y2_c_a18_1	Youth job 1 pension or retirement plan	298
Y2_c_a18_2	Youth job 2 pension or retirement plan	299
Y2_c_a18_3	Youth job 3 pension or retirement plan	300
Y2_c_a19_1	Youth job 1 other workers have disabilities	301
Y2_c_a19_2	Youth job 2 other workers have disabilities	302
Y2_c_a19_3	Youth job 3 other workers have disabilities	303
Y2_c_a20_1	Youth job 1 school-sponsored	304
Y2_c_a20_2	Youth job 2 school-sponsored	305
Y2_c_a20_3	Youth job 3 school-sponsored	306
Y2_c_a21_1	Youth job 1 help from job coach	307
Y2_c_a21_2	Youth job 2 help from job coach	308
Y2_c_a21_3	Youth job 3 help from job coach	309
Y2_c_a25	Youth looking for work in last 4 weeks	310
Y2_c_a26_a	Youth looking for work: Contacted state workforce development or unemployment offices	311
Y2_c_a26_b	Youth looking for work: Asked friends or relatives	312
Y2_c_a26_c	Youth looking for work: Looked through job advertisements	313
Y2_c_a26_d	Youth looking for work: Contacted state VR agency	314
Y2_c_a26_e	Youth looking for work: Contacted employers in person, by mail, or by phone	315
Y2_c_a26_f	Youth looking for work: Other	316
Y2_c_a27_1	Reason youth not looking for work: Disability too severe	317
Y2_c_a27_2	Reason youth not looking for work: No transportation	318
Y2_c_a27_3	Reason youth not looking for work: Don't know how to find job	319
Y2_c_a27_4	Reason youth not looking for work: Don't want to look for job right now	320
Y2_c_a27_5	Reason youth not looking for work: Don't need/want job right now	321
Y2_c_a27_6	Reason youth not looking for work: Family doesn't want them to work	322
Y2_c_a27_7	Reason youth not looking for work: Fear of losing benefits	323
Y2_c_a27_8	Reason youth not looking for work: In school or training program	324

Name	Label	Number
Y2_c_a27_9	Reason youth not looking for work: No one would hire - gave up looking	325
Y2_c_a27_10	Reason youth not looking for work: Not interested in types of jobs they could get	326
Y2_c_a27_11	Reason youth not looking for work: No jobs available	327
Y2_c_a27_12	Reason youth not looking for work: Raising children and chose not work now	328
Y2_c_a27_13	Reason youth not looking for work: Waiting to hear about a job/start a job	329
Y2_c_a27_14	Reason youth not looking for work: Other	330
Y2_c_a28_a	Reason youth not working: Cannot find job they want	331
Y2_c_a28_b	Reason youth not working: No reliable transportation	332
Y2_c_a28_c	Reason youth not working: Caring for children or others	333
Y2_c_a28_d	Reason youth not working: Does not want to lose benefits	334
Y2_c_a28_e	Reason youth not working: Physical/mental condition	335
Y2_c_a28_f	Reason youth not working: Cannot find job qualified for	336
Y2_c_a28_g	Reason youth not working: Attending school	337
Y2_c_a29	Reason youth not working: Other	338
Y2_c_a30_code_1	Other reason youth not working code: Finishing school or training program	339
Y2_c_a30_code_2	Other reason youth not working code: Layoff	340
Y2_c_a30_code_3	Other reason youth not working code: Slack work/business conditions	341
Y2_c_a30_code_4	Other reason youth not working code: Leave or vacation	342
Y2_c_a30_code_5	Other reason youth not working code: Previous work has been discouraging	343
Y2_c_a30_code_6	Other reason youth not working code: Cannot get help with personal care	344
Y2_c_a30_code_7	Other reason youth not working code: Special equipment or devices needed	345
Y2_c_a30_code_8	Other reason youth not working code: Lack of accessibility and accommodations	346
Y2_c_a30_code_9	Other reason youth not working code: Other	347

Name	Label	Number
Y2_d_a2	Youth is responsible for children	348
Y2_d_a3	Youth has biological children	349
Y2_d_b1	Youth health status	350
Y2_d_b2	Youth health insurance coverage	351
Y2_d_b3_1	Youth health insurance: Private through employer	352
Y2_d_b3_2	Youth health insurance: Private purchased on own	353
Y2_d_b3_3	Youth health insurance: Medicaid	354
Y2_d_b3_4	Youth health insurance: Medicare	355
Y2_d_b3_5	Youth health insurance: Tricare	356
Y2_d_b3_6	Youth health insurance: CHIP	357
Y2_d_b3_7	Youth health insurance: Other	358
Y2_d_b3a	Youth has private insurance purchased through ACA or health insurance exchange	359
Y2_d_c2	Youth ever arrested or taken into custody for a crime or illegal offense	360
Y2_d_c3_puf	Number of times youth arrested or taken into custody for a crime or illegal offense (PUF)	361
Y2_d_c4	Youth ever convicted or pled guilty to charges	362
Y2_d_c5	Youth ever or currently serve time in juvenile or adult prison, jail or other correctional facility	363
Y2_d_c7	Youth arrested in past year	364
Y2_d_d1	Youth household benefits: TANF	365
Y2_d_d1a_puf	Youth household TANF amount last month (PUF)	366
Y2_d_d2	Youth household benefits: SNAP	367
Y2_d_d2a_puf	Youth household SNAP amount last month (PUF)	368
Y2_d_d3	Youth household benefits: Government housing assistance	369
Y2_d_d3a_puf	Youth household government housing assistance amount last month (PUF)	370
Y2_d_d4	Youth household benefits: SSI or SSDI income	371
Y2_d_d4a_puf	Youth household SSI or SSDI amount last month (PUF)	372
Y2_d_d5	Youth household benefits: Retirement income	373
Y2_d_d5a_puf	Youth household retirement income amount last month (PUF)	374
Y2_d_d6_puf	Youth total household earnings last month - continuous (PUF)	375
Y2_d_d6a	Youth total household earnings last month - categorical	376

Name	Label	Number	
_d_d7 Youth household benefits: Other		377	
Y2_d_d7a_puf	Youth household income from other sources amount last month (PUF)	378	
Y2_e_a1_a	Youth ARC SD Scale (Autonomy): Friends and I choose activities we want to do	379	
Y2_e_a1_b	Youth ARC SD Scale (Autonomy): I write letters, texts or talk on the phone to friends and family	380	
Y2_e_a1_c	Youth ARC SD Scale (Autonomy): I go to restaurants I like	381	
Y2_e_a1_d	Youth ARC SD Scale (Autonomy): I choose gifts to give to friends and family	382	
Y2_e_a1_e	Youth ARC SD Scale (Autonomy): I go to movies, concerts, dances	383	
Y2_e_a1_f	Youth ARC SD Scale (Autonomy): I plan weekend activities I want to do	384	
Y2_e_a1_g	Youth ARC SD Scale (Autonomy): I decorate own room	385	
Y2_e_b1	Youth ARC SD Scale (Psychological empowerment): I try hard at school	386	
Y2_e_b2	Youth ARC SC Scale (Psychological empowerment): I keep trying	387	
Y2_e_b3	Youth ARC SD Scale (Psychological empowerment): I know how to make friends	388	
Y2_e_b4	Youth ARC SD Scale (Psychological empowerment): I make good choices	389	
Y2_e_b5	Youth ARC SD Scale (Psychological empowerment): My choices are honored	390	
Y2_e_b6	Youth ARC SD Scale (Psychological empowerment): I make new friends	391	
Y2_e_c1_a	Youth ARC SD Scale (Self-realization): I know what I do best	392	
Y2_e_c1_b	Youth ARC SD Scale (Self-realization): I like myself	393	
Y2_e_c1_c	Youth ARC SD Scale (Self-realization): I am confident in my abilities	394	
Y2_e_c1_d	Youth ARC SD Scale (Self-realization): Other people like me	395	
Y2_e_c1_e	Youth ARC SD Scale (Self-realization): Better to be yourself than to be popular	396	
Y2_e_c1_f	Youth ARC SD Scale (Self- realization): I know how to make up for my limitations	397	
Y2_e_c1_g	Youth ARC SD Scale (Self-realization): I am loved because I give love	398	
Y2_e_d1_a	Youth ARC SD Scale (Agentic action): I think of more than one way to solve a problem	399	

Name	Label	Number
Y2_e_d1_b	Youth ARC SD Scale (Agentic action): I set own goals	400
Y2_e_d1_c	Youth ARC SD Scale (Agentic action): I figure out ways to get around obstacles	401
Y2_e_d1_d	Youth ARC SD Scale (Agentic action): I think about goals	402
Y2_e_d1_e	Youth ARC SD Scale (Agentic action): I take action when new opportunities come	403
Y2_e_d1_f	Youth ARC SD Scale (Agentic action): I come up with ways to reach goals	404
Y2_e_e1	Youth expectations for future: Highest level of schooling completed	405
Y2_e_e2	Youth expectations for future: Age 25 living situation	406
Y2_e_e3	Youth expectations for future: Age 25 financial independence from family	407
Y2_e_e4	Youth expectations for future: Age 25 financial independence from benefit programs	408
Y2_e_e5	Youth expectations for future: Age 25 working at paid job	409
Y2_f_a1	Youth knowledge of benefits: Student Earned Income Exclusion	410
Y2_f_a2	Youth knowledge of benefits: Plan for Achieving Self-Support (PASS)	411
Y2_f_a3	Youth knowledge of benefits: 1 for 2 earnings exclusion	412
Y2_f_a4	Youth knowledge of benefits: Achieving a Better Life Experience (ABLE) account	413
Y2_f_a5_a	Youth knowledge of benefits: Children automatically eligible for SSI as adults	414
Y2_f_a5_b	Youth knowledge of benefits: SSI beneficiaries not allowed to work for pay	415
Y2_f_a5_c	Youth knowledge of benefits: SSI beneficiaries must report earnings to SSA	416
Y2_currentlanguage	Youth interview language	417
Y2_interviewend_puf	Date youth completed the five-year survey (PUF)	418

Appendix B. PROMISE Five-Year Survey Parent Questionnaire



PROMISE 60-Month Follow-Up Survey: Parent/Guardian Questionnaire

FINAL CATI SPECIFICATIONS - 03.29.19



Administrative Notes:

- Field Period. The PROMISE 60-month parent and youth surveys will be administered beginning 60 months after random assignment. The parent and youth surveys will be deployed independently and will be fielded concurrently. They may be completed in any order (parent then youth or youth then parent). We anticipate that for the majority of cases, the parent interview will be completed first, followed by the youth interview.
- **Consent** for participation in all interviews (parent 18-month and 60-month and youth 18-month and 60-month) was collected from parents at enrollment. All youth provided **assent** at enrollment.
- **Eligibility.** Parents are ineligible for the survey if (1) they are deceased, (2) the youth is deceased, or (3) they are the employee of an agency or service provider. Parents who withdrew from the PROMISE evaluation will be classified as eligible for weighting and response rate computations but will be removed from all survey outreach.
- The **target respondent** is the parent or guardian who enrolled in the PROMISE evaluation and provided consent to take part. If the enrolling parent (EP) is not willing or able to take part, we will attempt to speak with EP's spouse/partner or another adult household member to complete the interview as a proxy respondent for EP.
- Mode and length. This instrument is designed for an interviewer administration and will take
 approximately 25-35 minutes to complete. Interviews will be conducted in English or Spanish.
 Spanish language cases will be flagged in advance whenever possible.
- Programming logic is used to route respondents to the next applicable item or section based on the responses provided. The target universe for each item (based on skip logic or other criteria) is shown in the bar above the item number, along with fills denoted by text in brackets. Formatting is used to guide interviewing staff on question administration. Text shown in ALL CAPS is not read aloud. <u>Underlined</u> text is emphasized. Item sources are designated at the end of the question text in parentheses. Items repeated from the PROMISE 18-month survey are designated with (P18M-...). Items newly added for the 60-month instrument are highlighted in blue (these items were not part of the 18-month survey).

Sections of the parent questionnaire

Section	Description	Items
Α	Introduction	P2_A_Mode to P2_A_Q8
В	Educational credentials and employment experience	P2_B_Intro to P2_B_D13
С	Individual and family well-being	P2_C_Intro to P2_C_B8
D	Parent's/guardian's expectations for youth	P2_D_Intro to P2_D_A6
E	Contact information	P2_E_Intro to P2_E_B13

TEXT FILLS FOR SPECIFIC SITES AND STATES

PRGM State	Health Insurance Marketplace Name	State-Specific Name for Medicaid	State-Specific Name for TANF	State-Specific Name for American Job Center	State-Specific Name for S-Chip	SNAP program name
AR		Arkansas Medicaid	TANF	Workforce Center	ARKids	SNAP
CA	Covered California	Medi-Cal	CalWORKs	America's Job Center of California	Healthy Families	CalFresh
MD	Maryland Health Connection	Maryland Medicaid Program	Temporary Cash Assistance (TCA)	One Stop Career Centers	Maryland Children's Health Program (MCHP)	Food Supplement Program (FSP)
NY	NY State of Health	New York Medicaid	Family Assistance (FA)	Career Center	Child Health Plus	SNAP
WI		ForwardHealth Medicaid	TANF	Job Center	BadgerCare Plus	FoodShare Wisconsin
ASPIRE AZ		AHCCCS (pronounced 'access')	Cash Assistance (CA)	Arizona @ Work	KidsCare	Arizona Nutrition Assistance NA)
ASPIRE CO	Connect for Health Colorado	Health First Colorado	Colorado Works	Colorado Workforce Center	Child Health Plan Plus (CHP+)	Colorado Food Assistance Program
ASPIRE MT		Montana Medicaid and HMK <i>Plus</i> : Passport to Health (Passport)	TANF	Job Service	Healthy Montana Kids	SNAP
ASPIRE ND		North Dakota Medicaid	TANF	Job Service	Healthy Steps	SNAP
ASPIRE SD		South Dakota Medicaid	TANF	South Dakota Department of Labor and Regulation	Children's Health Insurance Program (CHIP)	SNAP
UT		Utah Medicaid	TANF	Utah Department of Workforce Services Employment Center	Children's Health Insurance Program (CHIP)	Food Stamp Program

PROGRAMMER: ACROSS THE SPECIFICATIONS, THE "ENROLLING PARENT," THE TARGET RESPONDENT FOR THE PARENT SURVEY, IS ABBREVIATED AS "EP." FILL THE FIRST NAME OF THE EP UNLESS OTHERWISE SPECIFIED.

•	Program	AR PROMISE	CaPROMISE	MD PROMISE	NY PROMISE	WI PROMISE	ASPIRE- ARIZONA	ASPIRE- COLORADO	ASPIRE- MONTANA	ASPIRE- NORTH DAKOTA	ASPIRE- SOUTH DAKOTA	ASPIRE- UTAH
	Program State Fill:	Arkansas	California	Maryland	New York	Wisconsin	Arizona	Colorado	Montana	North Dakota	South Dakota	Utah

Project Decision Points:

Variable	Description	Values
FedProject	Study is federally funded	Yes (1)
RecordProject	Project will record all calls	Yes (1)
UseLocating	Project will include a locating component	Yes (1)
UseField	Project includes an in-person field component	Yes (1)
Fieldcalls	Project allows field staff (either Mathematica or from a grantee site) to call in and complete survey with phone interviewer. Requires that project provides list of possible staff calling in for dropdown selection by phone interviewer.	Yes (1)
ProxyOkay	Project allows completion of survey with a proxy.	Yes (1)
InterpOkay	Project allows completion of survey with a household translator.	Yes (1)
InstLang	Languages the instrument has been programmed for	English, Spanish
ExtraTrans	Project will use an external translation services for languages other than English, Spanish	No (0)
ExtraTransLang	Languages supported by external translation services	None
HandleDeceased	Project decision on how to handle cases where the sample member is reported as deceased	Terminate (0), go to youth if parent deceased
HandlePrison	Project decision on how to handle cases where the sample member is reported as incarcerated. If locating is selected and proxyok=1, we will attempt to contact the respondent through locating first before using a proxy.	Locating (1)
AdvRemails	Project decision on whether advance letter remails are allowed	Yes (1)
AdvEmails	Project decision on whether advance emails are allowed	No (0)
PaymentType	The type of payment triggered by a completed survey, or indication that there is no incentive.	None (0)
AllowWeb	The project will allow respondents to complete on web	No (0)
SMUpdateName	Project wants to collect an updated name for sample member	No (0)
SMUpdatePhone	Project wants to collect updated contact phone information for sample member	No (0)
SMUpdateAddress	Project wants to collect updated contact address information for sample member	No (0)
SMUpdateEmail	Project wants to collect updated contact email address information for sample member	No (0)
SMAltContacts	Project wants to collect updated contact alternative contacts for sample member	No (0)
NumAltContacts	Number of alternative contacts collected	0

NOTE: some decisions in table above, such as collection of contact information, are marked as "no" because they are accounted for in the 60-mo questionnaire itself and do not need to be repeated in the CAI shell.

History Review

PROGRAMMER: PULL IN FIELDS FROM 60-MO INTERVIEW HISTORY FILE FOR INTERVIEWER REVIEW

Call Attempt

HISTORY REVIEWED OR DAILRESULT = 6
FILL RESPONDENT PHONE NUMBER AND EXTENSION FROM PRELOAD
DISABLE CLICK TO DIAL (1) IF FEDPROJECT = 0 AND (CURPHNTYPE = CELL (C) OR UNKNOWN (U) OR EMPTY)
DISABLE FIELD STAFF CALLING IN IF FIELDCALLS = 0

DialNumber. phone number details:

phone number= [phone number] extension= [extension]

CODE ONE ONLY

CLICK TO DIAL1	DIALRESULT
MANUAL DIAL2	MANUALDIAL
QUICK EXIT	EXIT, NO
	STATUSUPDATE
RESPONDENT CALLING IN	CALLIN
TRANSFER FROM ANOTHER INTERVIEWER5	CALLIN
FIELD STAFF CALLING IN	FIELDINFO

FIELDCALLS = 1 AND DIALNUMBER = 6

FieldInfo. Hello, my name is [INTERVIEWER NAME]. May I have your name?

INSTRUCTION: SELECT NAME OF FIELD INTERVIEWER/SITE STAFF MEMBER

DROPDOWN: FILL LIST OF FIELD INTERVIEWERS OR GRANTEE STAFF FROM PROJECT

PROGRAMMER: GO TO CALLIN

DIALNUMBER = 2

ManualDial.

PHONE NUMBER DETAILS:

PHONE NUMBER = [PHONE NUMBER]

EXTENSION = [EXTENSION]

INSTRUCTION: ENTER PHONE NUMBER ABOVE. NO DASHES.

HARD CHECK: IF ENTERED NUMBER DOES NOT MATCH LOADED NUMBER: THE PHONE NUMBERS DO NOT MATCH. PLEASE CORRECT.

DIALNUMBER = 1 OR MANUALDIAL = RESPONSE

DialResult.

INSTRUCTION: CODE RESULT OF DIALING

CODE ONE ONLY

SOMEONE ANSWERS	ELLO
NO ANSWER	FINISHED (DISP = 31)
BUSY3	FINISHED (DISP = 2)
VOICEMAIL/ANSWERING DEVICE4	SKIP BOX DIALRESULT
PHONE/LINE PROBLEMS (NOT IN SERVICE, DISCONNECTED)5	FINISHED (DISP = 32)
NEED TO REDIAL THE NUMBER6	DIALNUMBER

PROGRAMMER SKIP BOX DIALRESULT:

IF DIALRESULT = 4 AND VMFREQ = LEAVEMESSAGE, GO TO MESSAGESCRIPT. ELSE, GO TO FINISHED AND SET DISP = 33.

DIALRESULT = 4 AND VMFREQ = LEAVE MESSAGE

MessageScript.

Hi! This message is for [FullName]. I'm calling from Mathematica Policy Research to follow up on a letter we sent inviting you to take part in an important Social Security Administration study. You'll get a \$30 gift card for completing the interview. Please call us at 844-306-5011 to get started. Thanks!

¡Hola! Este mensaje es para [FullName]. Estoy llamando de Mathematica Policy Research llamando para dar seguimiento a una carta que enviamos invitándole a tomar parte en un importante estudio de la Administración del Seguro Social. Recibirá una tarjeta de regalo de \$30 por completar la entrevista. Por favor llámenos al 844-306-5011 para empezar. ¡Gracias!

INSTRUCTION: DID YOU LEAVE THE MESSAGE?

CODE ONE ONLY

YES	1	
NO	0)

PROGRAMMER SKIP BOX MESSAGE SCRIPT

IF MESSAGESCRIPT = 1, GO TO FINISHED AND SET DISP = 34. IF MESSAGESCRIPT = 2, GO TO FINISHED AND SET DISP = 33.

First Contact

DIALRESULT=1

Hello.

Hello, my name is [INTERVIEWER NAME]. I'm calling from Mathematica Policy Research on behalf of the Social Security Administration about an important national study.

May I please speak to [FULLNAME]?

Hola, mi nombre es [INTERVIEWER NAME]. Estoy llamando de Mathematica Policy Research en nombre de la Administración del Seguro Social como parte de un importante estudio nacional. ¿Puedo hablar con [FULLNAME], por favor?

IF PARENT INSTRUMENT, SHOW: INTERVIEWER: IF ENROLLING PARENT IS UNAVAILABLE, ASK FOR THE SPOUSE/PARTNER OF ENROLLING PARENT OR ANOTHER ADULT IN HOUSEHOLD.

CODE ONE ONLY

SPEAKING TO [FIRSTNAME]	SAMPMEMB
[FIRSTNAME] COMES TO THE PHONE2	SAMPMEMB
NEED TO CALLBACK (NO APPT)3	THANKS (DISP = 36)
NEED TO CALLBACK (SET APPT)4	SETAPPT
[FIRSTNAME] HAS A HEALTH PROBLEM5	HEALTHPROB
[FIRSTNAME] IS IN AN INSTITUTION (HOSPITAL, GROUP HOME, JAIL) 6	INSTITUTION
[FIRSTNAME] HAS MOVED/HAS NEW NUMBER7	KNOWWHERE
[FIRSTNAME] DOES NOT SPEAK ENGLISH8	LANG
NEVER HEARD OF [FULLNAME]/WRONG NUMBER9	THANKS (DISP = 37)
HUNG UP DURING INTRODUCTION (HUDI)	FINISHED (DISP=35)
[FIRSTNAME] IS DECEASED11	DECEASED
SPEAKING TO SPOUSE/PARTNER OF [FIRSTNAME]12	NEEDREP
SPEAKING TO OTHER ADULT IN HOUSEHOLD WITH [FIRSTNAME]13	NEEDREP
[FIRST NAME] UNAVAILABLE TO DO INTERVIEW14	NEEDREP
YOUTH IS DECEASED	DECEASED_2

PROGRAMMER SMVERIFIED BOX HELLO

IF HELLO=1 OR 2 AND SMVERIFIED = 0, SET SMVERIFIED = 1.

(DIALNUMBER = 4 OR 5) OR FIELDINFO = ANSWERED

Callin. Hello, my name is [INTERVIEWER NAME]. May I ask your name?

Hola, mi nombre es [INTERVIEWER NAME]. ¿Puedo preguntarle su nombre?

CODE ONE ONLY

SPEAKING TO [FIRSTNAME]	SKIP BOX CALLIN
[FIRSTNAME] CALLED TO MAKE APPOINTMENT2	SETAPPT
[FIRSTNAME] CALLED TO REFUSE	REFUSALREASON
SOMEONE ELSE CALLED TO REFUSE	REFUSALREASON
SOMEONE ELSE CALLED TO SAY [FIRSTNAME] DECEASED5	DECEASED
[FIRSTNAME] HAS A HEALTH PROBLEM6	HEALTHPROB
[FIRSTNAME] IS IN AN INSTITUTION (HOSPITAL, GROUP HOME, JAIL) 7	INSTITUTION
[FIRSTNAME] HAS MOVED/HAS NEW NUMBER 8	KNOWWHERE
[FIRSTNAME] DOES NOT SPEAK ENGLISH9	LANG
SPEAKING TO SPOUSE/PARTNER OF [FIRSTNAME]10	NEWNAMEREP
SPEAKING TO OTHER ADULT IN HOUSEHOLD WITH [FIRSTNAME]11	NEWNAMEREP
YOUTH IS DECEASED	DECEASED_2

PROGRAMMER SMVERIFIED BOX CALLIN

IF CALLIN = 1 AND SMVERIFIED = 0, SET SMVERIFIED = 1

PROGRAMMER SKIP BOX CALLIN

IF CALLIN = 1 AND DIALNUMBER = 6 (FIELD CALL), GO TO SAMPMEMB.

IF CALLIN = 1 AND DIALNUMBER NE 6 AND PHONE NUMBER LOADED, GO TO CALLINNUM.

IF CALLIN = 1 AND DIALNUMBER NE 6 AND NO PHONE NUMBER LOADED, GO TO CALLINBESTNUM.

IF CALLIN = 1 AND DIALNUMBER NE 6 AND PHONE NUMBER LOADED

FILL NUMBER FROM CURRENT LOADED NUMBER

CallinNum.

INTERVIEWER: DID THE RESPONDENT CALL IN FROM [FILL NUMBER]?

CODE ONE ONLY

YES1	SAMPMEMB
NO, DIFFERENT NUMBER2	CALLINBESTNUM
UNKNOWN OR RESTRICTED NUMBER	CALLINBESTNUM

(CALLNUM = 2 - 3) OR (CALLIN = 1 AND DIALNUMBER NE 6 AND NO PHONE NUMBER LOADED)

CallinBestNum.

In case we get disconnected, is the phone number you are calling from the best one to use to call you back?

Por si nos desconectamos, ¿es el número de teléfono del que llama el mejor para llamarle de vuelta?

CODE ONE ONLY

YES1	CALLINNEWNUM
NO0	CALLINNEWNUM
DON'T KNOWd	BOX CALLIN SETPHONE
REFUSEDr	BOX CALLIN SETPHONE

CALLINBESTNUM = 0 OR 1

PROGRAMMER- EXTENSION MAY BE MISSING

CallInNewNum.

IF CALLINBESTNUM = 1

Please tell me the number you are calling from, area code first.

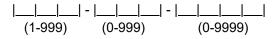
Por favor dígame el número del que llama, empezando con el código de área.

IF CALLINBESTNUM = 0

Please give me the best telephone number to use, area code first.

Por favor dígame el mejor número de teléfono para llamarle, empezando con el código de área.

INSTRUCTION: CONFIRM PHONE WITH RESPONDENT BEFORE CONTINUING



Is there an extension number?

¿Hay un número de extensión?

(0-99999)



SOFT CHECK: IF PHONE NE 10 DIGITS: PHONE NUMBER SHOULD BE 10 NUMERIC DIGITS, NO SPACES, DASHES, PARENTHESES OR OTHER PUNCTUATION (OR EMPTY)

SOFT CHECK: IF AREA CODE LE 200: AREA CODE SHOULD BE GREATER THAN 200

SOFT CHECK: IF EXCHANGE LE 199: EXCHANGE SHOULD BE GREATER THAN 199

CALLINNEWNUM = PHONE PROVIDED

CallinNewNumTZ. What time zone is that in? ¿En qué zona horaria está? IF NEEDED: What time is it there? ¿Qué hora es ahí? INSTRUCTION: A TIME ZONE IS REQUIRED. USE ORIGINAL TIME ZONE OR STATE IF NEEDED. CODE ONE ONLY ARIZONA [(FILL CURRENT TIME)]......68 MOUNTAIN TIME (US & CANADA) [(FILL CURRENT TIME)]......70 PACIFIC TIME (US & CANADA) [(FILL CURRENT TIME)]......71 ALASKA [(FILL CURRENT TIME)]......72 BAJA CALIFORNIA [(FILL CURRENT TIME)]93 PROGRAMMER BOX CALLIN SETPHONE

Health Problem Questions

HELLO = 5 OR CALLIN = 6

HealthProb.

INSTRUCTION: CODE THE TYPE OF HEALTH PROBLEM

ALL SCENARIOS FOR CALLIN GO TO SAMPMEMB.

CODE ONE ONLY

HEALTHPROB = 2

HealthProbType.

INSTRUCTION: CODE THE TYPE OF HEALTH PROBLEM

CODE ONE ONLY

SENSORY IMPAIRMENT (DEAF/BLIND)1	AMPRELAY
VOCAL/SPEECH IMPAIRMENT2	AMPRELAY
PHYSICAL IMPAIRMENT3	CALLLATER
COGNITIVE/INTELLECTUAL IMPAIRMENT4	SKIP BOX HEALTHPROBTYPE
OTHER IMPAIRMENT5	SKIP BOX HEALTHPROBTYPE
DECEASED6	DECEASED

PROGRAMMER SKIP BOX HEALTHPROBTYPE

IF (HEALTHPROBTYPE = 4 OR 5) AND PROXYOKAY = 1, GO TO NEEDREP.

IF (HEALTHPROBTYPE = 4 OR 5) AND PROXYOKAY = 0, GO TO THANKS AND SET DISP = 40.

HEALTHPROBTYPE = 1 OR 2

him IF SAMPMEMBSEX = MALE; her IF SAMPMEMBSEX = FEMALE; him or her IF SAMPMEMBSEX = UNKNOWN

éI IF SAMPMEMBSEX = MALE; **eIIa** IF SAMPMEMBSEX = FEMALE; **éI o eIIa** IF SAMPMEMBSEX = UNKNOWN

AmpRelay. I can increase the volume of my voice or [FIRSTNAME]'s voice, or we could use a relay service. Would either of these enable [him / her / him or her] to complete the interview?

Puedo aumentar el volumen de mi voz o la voz de [FIRSTNAME], o podríamos utilizar un servicio de retransmisión. ¿Permitiría alguno de éstos que [él / ella / él o ella] completara la entrevista?

CODE ONE ONLY

YES – INCREASE VOLUME ON PHONE	RESPAVAIL
YES - USE RELAY SERVICE	RELAYPHONE
NO3	SKIP BOX AMPRELAY
DON'T KNOWd	SETAPPT

PROGRAMMER SKIP BOX AMPRELAY

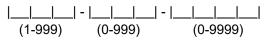
IF AMPRELAY = 3 AND PROXYOKAY = 1, GO TO NEEDREP.
IF AMPRELAY = 3 AND PROXYOKAY = 0, GO TO THANKS AND
SET DISP = 40.

AMPRELAY = 2

RelayPhone.

May I have the telephone number of the relay service we should use to reach [FIRST NAME]?

¿Podría tener el número de teléfono del servicio de retransmisión que debemos utilizar para contactar a [FIRSTNAME]?



DON'T KNOW......d SETAPPT

SOFT CHECK: IF PHONE NE 10 DIGITS:

PHONE NUMBER SHOULD BE 10 NUMERIC DIGITS, NO SPACES, DASHES, PARENTHESES OR OTHER PUNCTUATION (OR EMPTY)

SOFT CHECK: IF AREA CODE LE 200: AREA CODE SHOULD BE GREATER THAN 200

SOFT CHECK: IF EXCHANGE LE 199: EXCHANGE SHOULD BE GREATER THAN 199

AMPRELAY = 1 OR (AMPRELAY = 2 AND RELAYPHONE = RESPONSE)

RespAvail. Is [FIRSTNAME] available now?

¿Está [FIRSTNAME] disponible ahora?

CODE ONE ONLY

YES	SKIP BOX RESPAVAIL
NO – NEEDS CALL BACK	SETAPPT
DON'T KNOWd	SETAPPT

PROGRAMMER SKIP BOX RESPAVAIL

IF RESPAVAIL = 1 AND AMPRELAY = 1, GOTO AMPPHONE.
IF RESPAVAIL = 1 AND AMPRELAY = 2, GO TO CALLRELAY.

AMPRELAY = 1 AND RESPAVAIL = 1

AmpPhone.

INSTRUCTION: INCREASE VOLUME ON PHONE (USING JABBER) AND ASK GATEKEEPER TO CALL [FIRSTNAME] TO THE PHONE.

CODE ONE ONLY

[FIRSTNAME] COMES TO THE PHONE	SAMPMEMB
NEED TO CALLBACK	SETAPPT

PROGRAMMER SMVERIFIED BOX AMPPHONE

IF AMPPHONE = 1 AND SMVERIFIED = 0, SET SMVERIFIED = 1

RESPAVAIL=1 AND AMPRELAY = 2

CallRelay.

INSTRUCTION: CALL RELAY SERVICE USING PHONE PROVIDED BY ANSWERING PARTY. IF THE CONNECTION IS MADE, CODE 1 BELOW AND CONTINUE. IF NOT, CODE 2.

CODE ONE ONLY

[FIRSTNAME] COMES TO THE PHONE1	SAMPMEMB
NEED TO CALLBACK2	SETAPPT

PROGRAMMER SMVERIFIED BOX CALLRELAY

IF AMPPHONE = 1 AND SMVERIFIED = 0, SET SMVERIFIED = 1

HEALTHPROB = 1 OR HEALTHPROBTYPE = 3

CallLater. Will [FIRSTNAME] be able to talk on the telephone if I call back in a week?

If [FIRSTNAME] is unavailable, a spouse/partner of [FIRSTNAME] or another adult in the household with [FIRSTNAME] can complete the interview on [FIRSTNAME]'s behalf.

¿Será [FirstName] capaz de hablar por teléfono si vuelvo a llamar en una semana?

Si [FIRSTNAME] no está disponible, un cónyuge/pareja de [FIRSTNAME] u otro adulto del hogar de [FIRSTNAME] puede completar la entrevista en nombre de [FIRSTNAME].

CODE ONE ONLY

YES/MAYBE - CALLBACK1	SETAPPT
NO0	SKIP BOX CALLLATER
DON'T KNOWd	SETAPPT
CONDUCT INTERVIEW WITH SPOUSE/PARTNER OF [FIRSTNAME]	
OR OTHER ADULT IN HOUSEHOLD WITH [FIRSTNAME]2	NEEDREP

PROGRAMMER SKIP BOX CALL LATER

IF CALLLATER = 0 AND PROXYOKAY = 1, GO TO NEEDREP.

IF CALLLATER = 0 AND PROXYOKAY = 0, GO TO THANKS AND SET DISP = 40.

HELLO = 11 OR CALLIN = 5 OR HEALTHPROBTYPE = 6

Deceased. I am very sorry to hear that (he/she) passed away. Please accept my condolences.

Siento mucho oír que (él/ella) falleció. Por favor acepte mis condolencias.

PROGRAMMER SKIP BOX DECEASED

IF YOUTHDECEASED = 1 OR YOUTHWITHDRAWN = 1 OR YOUTHFINAL = 1, GO TO FINISHED AND SET DISP = 41 FOR PARENT INSTRUMENT IF YOUTHDECEASED = 0 AND YOUTHWITHDRAWN = 0 AND YOUTHFINAL = 0, GO TO BREAKOFF1

IF PARENT INSTRUMENT AND YOUTHDECEASED = 0 AND YOUTHWITHDRAWN = 0 AND	YOUTHFINAL
= 0	

[YOUTH]

BreakOff1. INSTRUCTION: ASK IF [YOUTH] IS AVAILABLE TO COMPLETE AN INTERVIEW NOW.

IF [YOUTH] <u>IS AVAILABLE</u>, CODE 1 BELOW. ONCE THE PARENT RECORD IS CLOSED, OPEN THE YOUTH RECORD TO BEGIN THE YOUTH INTERVIEW.

IF [YOUTH] IS <u>NOT AVAILABLE</u>, CODE 2 BELOW. ONCE THE PARENT RECORD IS CLOSED, OPEN THE YOUTH RECORD TO MAKE AN APPOINTMENT FOR THE YOUTH INTERVIEW.

CODE ONE ONLY

INTERVIEW2	BREAKOFF1PHONE
NO, [YOUTH] IS UNAVAILABLE TO COMPLETE	
YES, [YOUTH] IS AVAILABLE TO COMPLETE INTERVIEW 1	FINISHED (DISP = 41)

YOUTH IS UNAVAILABLE FOR INTERVIEW NOW (BREAKOFF1 = 2)

[YOUTH]

BreakOff1Phone. What's the <u>best</u> telephone number at which to reach [YOUTH]?

¿Cuál es el mejor número de teléfono para contactar a [YOUTH]?

SAME NUMBER USED AS THIS CALL1	PROGRAMMERBOX BREAKOFF1
DIFFERENT PHONE NUMBER2	BREAKOFF1PHONE
DON'T KNOWd	PROGRAMMERBOX BREAKOFF1
REFUSED	PROGRAMMERBOX BREAKOFF1

YOUTH IS UNAVAILABLE FOR INTERVIEW	NOW (BREAKOFF1PHONE = 2)
[YOUTH]	
PROGRAMMER- EXTENSION MAY BE MISS	ING
BreakOff1Phone_PhoneNum. Please give r	ne [YOUTH]'s telephone number, area code first.
NAME],	Por favor deme el número de teléfono de [PROXY FIRST empezando con el código de área.
INSTRUCTION: CONFIRM PHONE WITH RES	PONDENT BEFORE CONTINUING
-	_ -
(1-999) (0-999)	(0-9999)
Is there an extension numb	er?
¿Hay un número de extens	ón?
<u> </u>	
DON'T KNOW	d
REFUSED	r
SOFT CHECK: IF PHONE NE 10 DIGITS: PH	ONE NUMBER SHOULD BE 10 NUMERIC DIGITS, NO
SPACES, DASHES, PARENTHESES OR OTI	HER PUNCTUATION (OR EMPTY)
SOFT CHECK: IF AREA CODE LE 200: ARE	A CODE SHOULD BE GREATER THAN 200
SOFT CHECK: IF EXCHANGE LE 199: EXCH	ANGE SHOULD BE GREATER THAN 199

PROGRAMMER SKIP BOX BREAKOFF1PHONE_PHONENUM

IF BREAKOFF1PHONE_PHONENUM = D OR R, GO TO THANKS (DISP = 41).

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BREAKOFF1PHONE PHONENUM = PHONE PROVIDED

BREAKOFF1PHONETZ. What time zone is that in?

¿En qué zona horaria está?

IF NEEDED: What time is it there?

¿Qué hora es ahí?

INSTRUCTION: A TIME ZONE IS REQUIRED. USE ORIGINAL TIME ZONE OR STATE IF NEEDED.

CODE ONE ONLY

EASTERN TIME (US & CANADA) [(FILL CURRENT TIME)]	. 62
INDIANA (EAST) [(FILL CURRENT TIME)]	. 63
CENTRAL TIME (US & CANADA) [(FILL CURRENT TIME)]	. 65
ARIZONA [(FILL CURRENT TIME)]	. 68
MOUNTAIN TIME (US & CANADA) [(FILL CURRENT TIME)]	. 70
PACIFIC TIME (US & CANADA) [(FILL CURRENT TIME)]	. 71
ALASKA [(FILL CURRENT TIME)]	. 72
HAWAII [(FILL CURRENT TIME)]	. 73
BAJA CALIFORNIA [(FILL CURRENT TIME)]	. 93

PROGRAMMER SKIP BOX BREAKOFF1PHONETZ

GO TO THANKS AND SET DISP = 41

YOUTH IS DECEASED (HELLO=16)

Deceased_2. I am very sorry to hear that (he/she) passed away. Based on this, we will not need to complete an interview with you. Please accept my condolences.

Siento mucho oír que (él/ella) falleció. Basado en esto, no necesitaremos completar una entrevista con usted. Por favor acepte mis condolencias.

PROGRAMMER BOX DECEASED_2

SET DISP = 41 FOR BOTH PARENT AND YOUTH CASES

Institution Questions

EP IS IN AN INSTIUTION (HELLO = 6 OR CALLIN = 7)

Institution.

INSTRUCTION: CODETYPE OF INSTITUTION.

CODE ONE ONLY

HOSPITAL 1	HOMESOON
NURSING HOME2	CAPABLE
ASSISTED LIVING FACILITY	CAPABLE
GROUP HOME4	CAPABLE
JAIL OR PRISON5	HOMESOON

EP IS IN HOSPITAL OR JAIL, PRISON NOW (INSTITUTION = 1 OR 5)

the hospital IF INSTITUTION = 1, jail or prison IF INSTITUTION = 5

del hospital IF INSTITUTION = 1, de la cárcel o prisión IF INSTITUTION = 5

HomeSoon. Do you expect [FirstName] to come home from [the hospital / jail or prison] within a week or two?

IF INSTITUTION = 5, FILL: IF NEEDED: Or is it possible to contact [him/her] by phone in the prison?

¿Espera que [FirstName] vuelva a casa [del hospital /de la cárcel o prisión] en una o dos semanas?

IF INSTITUTION = 5, FILL: IF NEEDED: O, ¿es posible contactarle por teléfono en la prisión?

CODE ONE ONLY

YES, ARRANGE CALLBACK	1
NO – NOT HOME SOON	0
DON'T KNOW	d
REFUSED	r
NO – NOT HOME SOON BUT CAN CONTACT [FIRSTNAME]	
IN JAIL OR PRISON	2

PROGRAMMER SKIP BOX HOMESOON

IF HOMESOON = 1, D OR R, GO TO SETAPPT.

IF HOMESOON = 0 AND INSTITUTION = 1 (HOSPITAL), GO TO CAPABLE.

IF HOMESOON = 0 AND INSTITUTION = 5 (PRISON) AND PROXYOKAY = 1, GO TO NEEDREP.

IF HOMESOON = 0 AND INSTITUTION = 5 (PRISON) AND PROXYOKAY = 0 AND HANDLEPRISON = 0 (TERMINATE), GO TO THANKS AND SET DISP = 42.

IF HOMESOON = 0 AND INSTITUTION = 5 (PRISON) AND PROXYOKAY = 0 AND HANDLEPRISON = 1 (LOCATING), GO TO FACILITY.

IF HOMESOON=2 GO TO INCARCERATED

EP IS IN INSTITION AND NOT HOMESOON:

[(INSTITUTION= 2 - 4) OR (INSTITUTION = 1 (HOSPITAL) AND HOMESOON = 0)]

him IF SAMPMEMBSEX = MALE; her IF SAMPMEMBSEX = FEMALE; him or her IF SAMPMEMBSEX = UNKNOWN he IF SAMPMEMBSEX = MALE; she IF SAMPMEMBSEX = FEMALE; he or she IF SAMPMEMBSEX = UNKNOWN his IF SAMPMEMBSEX = MALE; her IF SAMPMEMBSEX = FEMALE; his or her IF SAMPMEMBSEX = UNKNOWN himself IF SAMPMEMBSEX = MALE; herself IF SAMPMEMBSEX = FEMALE; himself or herself IF SAMPMEMBSEX = UNKNOWN

él IF SAMPMEMBSEX = MALE; **ella** IF SAMPMEMBSEX = FEMALE; **él o ella** IF SAMPMEMBSEX = UNKNOWN **él mismo** IF SAMPMEMBSEX = MALE; **ella misma** IF SAMPMEMBSEX = FEMALE; **él mismo o ella misma** IF SAMPMEMBSEX = UNKNOWN

Capable. I am calling about an interview we would like to conduct with [FirstName].

A letter explaining why we are calling was recently sent to [him / her / him or her].

Would [he / she / he or she] be able to answer questions [himself / herself / himself or herself] or would someone need to answer on [his / her / his or her] behalf?

IF PARENT INSTRUMENT, SHOW: IF NEEDED: If [FIRSTNAME] is unable to respond, a spouse/partner of [FIRSTNAME] or another adult in the household with [FIRSTNAME] can complete the interview on [FIRSTNAME]'s behalf.

Estoy llamando sobre una entrevista que nos gustaría llevar a cabo con [FIRSTNAME].

Recientemente se le envió una carta a [él / ella / él o ella] explicando por qué estamos llamando.

¿Sería [él/ella/ él o ella] capaz de responder preguntas [él mismo / ella misma / él mismo o ella misma] o alguien tendría que responder en su nombre?

IF PARENT INSTRUMENT, SHOW: IF NEEDED: Si [FIRSTNAME] no puede responder, un cónyuge/pareja de [FIRSTNAME] u otro adulto del hogar de [FIRSTNAME] puede completar la entrevista en nombre de [FIRSTNAME].

CODE ONE ONLY

[FIRSTNAME] IS ABLE TO RESPOND	FACILITY
[FIRSTNAME] IS UNABLE TO RESPOND	SKIP BOX CAPABLE
DON'T KNOW d	FACILITY
REFUSEDr	SKIP BOX CAPABLE

PROGRAMMER SKIP BOX CAPABLE

IF (CAPABLE = 2 OR R) AND PROXYOKAY= 1, GO TO NEEDREP.

IF (CAPABLE = 2 OR R) AND PROXYOKAY= 0, GO TO THANKS AND SET DISP = 43.

(CAPABLE=1 OR D) OR (HOMESOON = 0 AND INSTITUTION = 5 (PRISON) AND PROXYOKAY = 0 AND HANDLEPRISON = 1 (LOCATING))

Facility. What is the name of the facility?

¿Cuál es el nombre de la instalación?

CODE ONE ONLY

PROGRAMMER SKIP BOX FACILITY

IF INSTITUTION=5 AND HOMESOON = 0 AND HANDLEPRISON = 1 (LOCATING), GO TO THANKS AND SET DISP = 42 AND LOCTYPE = 2.

IF INSTITUTION=5 AND HOMESOON = 0 AND HANDLEPRISON = 0 (TERMINATE), GO TO THANKS AND SET DISP = 42.

IF INSTITUTION=1-4 AND (CAPABLE = 1 OR D) AND FACILITY = R, GO TO THANKS AND SET DISP = 43.

IF INSTITUTION=1-4 AND (CAPABLE = 1 OR D) AND (FACILITY = D OR ANSWERED), GO TO CONTACT.

(CAPABLE = 1 OR D) AND (FACILITY = D OR ANSWERED)

Contact. Do you have the name of the administrator or a contact person there?

¿Tiene el nombre del administrador o una persona de contacto allí?

CODE ONE ONLY

YES	NEWNAMEFAC
NO	FACADDR
DON'T KNOW d	FACADDR
REFUSEDr	THANKS (DISP = 43)

CONTACT = 1

PROGRAMMER: REQUIRE THAT SOME AMOUNT OF TEXT BE ENTERED IN FIRST NAME OR LAST NAME

NewNameFac. Please give me the correct spelling of his or her full name.

Por favor dígame la manera correcta de escribir el nombre completo de él o ella..

INSTRUCTION: CONFIRM SPELLING OF NAME WITH RESPONDENT BEFORE CONTINUING

First name?	
¿Primer nombre?	
	(STRING 20)
FIRST NAME	
Middle initial	
¿Inicial de segundo nombre?	
	(STRING 1)
MIDDLE INITIAL	
Last name?	
¿Apellido?	
	(STRING 30)
LAST NAME	

(CONTACT= 0 OR D) OR NEWNAMEFAC = ANSWERED

hospital IF INSTITUTION =1; nursing home IF INSTITUTION = 2; assisted living facility IF INSTITUTION = 3; group home IF INSTITUTION = 4

FacAddr. What is the address of the [hospital / nursing home / assisted living facility / group home]?

¿Cuál es la dirección del [hospital/ hogar de ancianos//centro de vivienda asistida/ hogar colectivo]?

INSTRUCTION: CONFIRM ADDRESS WITH RESPONDENT BEFORE CONTINUING

What is the first line of the address?	
¿Cuál es la primera línea de la dirección?	
(STRING (60))	
Street Address Line 1	
Is there an apartment or unit number for this address?	
¿Hay un número de apartamento o unidad en esta dirección?	
(STRING (60))	
Street Address Line 2	
And what is the zip code?	
¿Cuál es el código postal?	
(STRING (10))	
ZIP Code	
Town or city?	
¿Pueblo o ciudad?	
(STRING (20))	
City	
State?	
¿Estado?	
(STRING (2))	
State	
DON'T KNOWd	FACPHONE
REFUSEDr	THANKS (DISP = 43)

FACADDR = ANSWERED OR D PROGRAMMER- EXTENSION MAY BE MISSING FacPhone. May I please have the telephone number of the (hospital/group home/assisted living facility)? ¿Puedo tener el número de teléfono del hospital/hogar colectivo/centro de vivienda asistida? INSTRUCTION: CONFIRM PHONE WITH RESPONDENT BEFORE CONTINUING Please give me the telephone number, area code first. Por favor deme el número de teléfono, empezando con el código de área. | |-| | | (1-999)(0-999)(0-9999)Is there an extension number? ¿Hay un número de extensión? (0-999999)DON'T KNOW......d THANKS (DISP = 43) REFUSED.....r THANKS (DISP = 43) SOFT CHECK: IF PHONE NE 10 DIGITS: PHONE NUMBER SHOULD BE 10 NUMERIC DIGITS, NO SPACES, DASHES, PARENTHESES OR OTHER PUNCTUATION (OR EMPTY) SOFT CHECK: IF AREA CODE LE 200: AREA CODE SHOULD BE GREATER THAN 200 SOFT CHECK: IF EXCHANGE LE 199: EXCHANGE SHOULD BE GREATER THAN 199 FACPHONE = PHONE PROVIDED NewPhoneTZFac. What time zone is that in? ¿En qué zona horaria está? IF NEEDED: What time is it there? ¿Qué hora es ahí? INSTRUCTION: A TIME ZONE IS REQUIRED. USE ORIGINAL TIME ZONE OR STATE IF NEEDED. CODE ONE ONLY EASTERN TIME (US & CANADA) [(FILL CURRENT TIME)].......62 INDIANA (EAST) [(FILL CURRENT TIME)]63 CENTRAL TIME (US & CANADA) [(FILL CURRENT TIME)]65 ARIZONA [(FILL CURRENT TIME)].......68 MOUNTAIN TIME (US & CANADA) [(FILL CURRENT TIME)]......70

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PACIFIC TIME (US & CANADA) [(FILL CURRENT TIME)]......71

ALASKA [(FILL CURRENT TIME)]......72

HAWAII [(FILL CURRENT TIME)]73	
BAJA CALIFORNIA [(FILL CURRENT TIME)]93	

PROGRAMMER SKIP BOX FACPHONE

IF YOUTHDECEASED = 1 OR YOUTHWITHDRAWN = 1 OR YOUTHFINAL = 1, GO TO THANKS AND SET DISP = 36

IF YOUTHDECEASED = 0 AND YOUTHWITHDRAWN = 0 AND YOUTHFINAL = 0, GO TO BREAKOFF2

APPEND NEWNAMEFAC, NEWFACADDR, NEWFACPHONE, AND NEWFACPHONETZ TO CALL HISTORY NOTE

IF YOUTHDECEASED = 0 AND YOUTHWITHDRAWN = 0 AND YOUTHFINAL = 0
[YOUTH]

BreakOff2. [INSTRUCTION: ASK IF [YOUTH] IS AVAILABLE TO COMPLETE AN INTERVIEW NOW.

IF [YOUTH] <u>IS AVAILABLE</u>, CODE 1 BELOW. ONCE THE PARENT RECORD IS CLOSED, OPEN THE YOUTH RECORD TO BEGIN THE YOUTH INTERVIEW.

IF [YOUTH] IS <u>NOT AVAILABLE</u>, CODE 2 BELOW. ONCE THE PARENT RECORD IS CLOSED, OPEN THE YOUTH RECORD TO MAKE AN APPOINTMENT FOR THE YOUTH INTERVIEW.]

CODE ONE ONLY

YES, [YOUTH] IS AVAILABLE TO COMPLETE INTERVIEW 1	THANKS (DISP = 36)
NO, [YOUTH] IS UNAVAILABLE TO COMPLETE INTERVIEW2	BREAKOFF2PHONE

BREAKOFF2 = 2

BreakOff2Phone.

[YOUTH]

What's the best telephone number at which to reach [YOUTH]?

¿Cuál es el mejor número de teléfono para contactar a [YOUTH]?

SAME NUMBER USED AS THIS CALL1	PROGRAMMERBOX BREAKOFF2
DIFFERENT PHONE NUMBER	BREAKOFF2PHONE
DON'T KNOWd	PROGRAMMERBOX BREAKOFF2
REFUSEDr	PROGRAMMERBOX BREAKOFF2

BREAKOFF2PHONE = 2 [YOUTH]; PROGRAMMER- EXTENSION MAY BE MISSING BreakOff2Phone_PhoneNum. Please give me [YOUTH]'s telephone number, area code first. Por favor deme el número de teléfono de [YOUTH], empezando con el código de área. INSTRUCTION: CONFIRM PHONE WITH RESPONDENT BEFORE CONTINUING (1-999)(0-999)(0-9999)Is there an extension number? ¿Hay un número de extensión? (0-999999)DON'T KNOW.......d REFUSED.....r SOFT CHECK: IF PHONE NE 10 DIGITS: PHONE NUMBER SHOULD BE 10 NUMERIC DIGITS, NO SPACES, DASHES, PARENTHESES OR OTHER PUNCTUATION (OR EMPTY) SOFT CHECK: IF AREA CODE LE 200: AREA CODE SHOULD BE GREATER THAN 200 SOFT CHECK: IF EXCHANGE LE 199: EXCHANGE SHOULD BE GREATER THAN 199

PROGRAMMER SKIP BOX BREAKOFF2PHONE_PHONENUM

IF BREAKOFF2PHONE_PHONENUM = D OR R, GO TO THANKS (DISP = 36).

BREAKOFF2PHONE PHONENUM = PHONE PROVIDED

BREAKOFF2PHONETZ. What time zone is that in? ¿En qué zona horaria está? What time is it there? IF NEEDED: ¿Qué hora es ahí? INSTRUCTION: A TIME ZONE IS REQUIRED. USE ORIGINAL TIME ZONE OR STATE IF NEEDED. CODE ONE ONLY EASTERN TIME (US & CANADA) [(FILL CURRENT TIME)]62 ARIZONA [(FILL CURRENT TIME)]......68 MOUNTAIN TIME (US & CANADA) [(FILL CURRENT TIME)]......70 PACIFIC TIME (US & CANADA) [(FILL CURRENT TIME)]......71 HAWAII [(FILL CURRENT TIME)]73 BAJA CALIFORNIA [(FILL CURRENT TIME)]93 PROGRAMMER SKIP BOX BREAKOFF2PHONETZ GO TO THANKS AND SET DISP = 36 EP IS IN PRISON AND ABLE TO HAVE CONTACT BY PHONE (HOMESOON = 2) INCARCERATED. What is the name of the place where [FIRSTNAME] is being held? ¿Cómo se llama el lugar donde [NAME] está detenido(a)? (STRING 200) NAME OF PRISON DON'T KNOW......d REFUSED.....r INCARCERATED= ANSWERED OR d INCARCERATED_2. In what city or town is it located? ¿En qué ciudad o pueblo está ubicado? (STRING 50)

NAME OF CITY/TOWN
DON'T KNOW d
REFUSEDr
INCARCERATED= ANSWERED OR d
INCARCERATED_3 In what state is it located?
¿ En qué estado está ubicado?
_ (DROPDOWN LIST) – STATES
DON'T KNOW d
REFUSEDr
HOMESOON=2
INCARCERATED_4 When is [FIRSTNAME] expected to be released?
¿Cuándo se espera que [NAME] sea puesto(a) en libertad?
PROBE: I just need a month and year. Your best estimate is fine.
Sólo necesito un mes y año. La mejor estimación que me puede dar está bien.
INTERVIEWER: ENTER MONTH ON NEXT SCREEN OR CODE DON'T KNOW.
PROGRAMMER: COLLECT DATE WITH SEPARATE FIELDS
ENTER DATE ON NEXT SCREEN1
SERVING A LIFE SENTENCE
INCARCERATED_4= 1
INCARCERATED_MONTH When is [FIRSTNAME] expected to be released?
¿Cuándo se espera que [NAME] sea puesto(a) en libertad?
PROBE: I just need a month and year. Your best estimate is fine.
Sólo necesito un mes y año. La mejor estimación que me puede dar está bien.
<u> _ _ </u>
(1-12)

PROGRAMMER: COLLECT DATE WITH SEPARATE FIELDS	
OON'T KNOW	d
REFUSED	r

INCARCERATED_4= 1
INCARCERATED_YEAR When is [FIRSTNAME] expected to be released?
¿Cuándo se espera que [NAME] sea puesto(a) en libertad?
PROBE: I just need a month and year. Your best estimate is fine.
Sólo necesito un mes y año. La mejor estimación que me puede dar está bien.
<u> </u>
(2019- 2099)
PROGRAMMER: COLLECT DATE WITH SEPARATE FIELDS
DON'T KNOW d
REFUSEDr
HOMESOON=2
INCARCERATED_5 Do you know [FIRSTNAME]'s inmate number?
¿Y usted sabe el número de preso(a) de [NAME]?
INTERVIEWER: ENTER NUMBER OR CODE DON'T KNOW
(STRING 50)
INMATE NUMBER
DON'T KNOW d
REFUSEDr
DDOODAMMED OKID BOY INCADOEDATED
PROGRAMMER SKIP BOX INCARCERATED IF YOUTHDECEASED = 1 OR YOUTHWITHDRAWN = 1 OR YOUTHFINAL = 1, GO TO THANKS AND SET DISP = 42

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IF YOUTHDECEASED = 0 AND YOUTHWITHDRAWN = 0 AND YOUTHFINAL = 0,

APPEND INCARCERATED, INCARCERATED_2, INCARCERATED_3, INCARCERATED_4, INCARCERATED_MONTH, INCARCERATED_YEAR, AND

INCARCERATED_5 TO THE END OF THE CALL HISTORY NOTE

GO TO BREAKOFF3

IF YOUTHDECEASED = 0 AND YOUTHWITHDRAWN = 0 AND YOUTHFINAL = 0 OR
[YOUTH]

BreakOff3. [INSTRUCTION: ASK IF [YOUTH] IS AVAILABLE TO COMPLETE AN INTERVIEW NOW.

IF [YOUTH] <u>IS AVAILABLE</u>, CODE 1 BELOW. ONCE THE PARENT RECORD IS CLOSED, OPEN THE YOUTH RECORD TO BEGIN THE YOUTH INTERVIEW.

IF [YOUTH] IS <u>NOT AVAILABLE</u>, CODE 2 BELOW. ONCE THE PARENT RECORD IS CLOSED, OPEN THE YOUTH RECORD TO MAKE AN APPOINTMENT FOR THE YOUTH INTERVIEW.]

CODE ONE ONLY

YES, [YOUTH] IS AVAILABLE TO COMPLETE INTERVIEW1	THANKS (DISP = 42)
NO, [YOUTH] IS UNAVAILABLE TO COMPLETE INTERVIEW 2	BREAKOFF3PHONE

BREAKOFF3 = 2
[YOUTH]

BreakOff3Phone. What's the <u>best</u> telephone number at which to reach [YOUTH]?

¿Cuál es el mejor número de teléfono para contactar a [YOUTH]?

SAME NUMBER USED AS THIS CALL1	PROGRAMMERBOX BREAKOFF3
DIFFERENT PHONE NUMBER2	BREAKOFF3PHONE
DON'T KNOWd	PROGRAMMERBOX BREAKOFF3
REFUSEDr	PROGRAMMERBOX BREAKOFF3

BREAKOFF3PHONE = 2
[YOUTH]
PROGRAMMER- EXTENSION MAY BE MISSING
BreakOff3Phone_PhoneNum.
Please give me [YOUTH]'s telephone number, area code first.
Por favor deme el número de teléfono de [YOUTH], empezando con el código de área.
INSTRUCTION: CONFIRM PHONE WITH RESPONDENT BEFORE CONTINUING
_ - - -
(1-999) (0-999)
Is there an extension number?
¿Hay un número de extensión?
<u> </u> (0-99999)
DON'T KNOWd
REFUSEDr

SOFT CHECK: IF PHONE NE 10 DIGITS: PHONE NUMBER SHOULD BE 10 NUMERIC DIGITS, NO SPACES, DASHES, PARENTHESES OR OTHER PUNCTUATION (OR EMPTY)

SOFT CHECK: IF AREA CODE LE 200: AREA CODE SHOULD BE GREATER THAN 200

SOFT CHECK: IF EXCHANGE LE 199: EXCHANGE SHOULD BE GREATER THAN 199

PROGRAMMER SKIP BOX BREAKOFF3PHONE_PHONENUM

IF BREAKOFF3PHONE_PHONENUM = D OR R, GO TO THANKS (DISP = 42).

BREAKOFF3PHONE_PHONENUM = PHONE PROVIDED

BREAKOFF3PHONETZ. What time zone is that in?

¿En qué zona horaria está?

IF NEEDED: What time is it there?

¿Qué hora es ahí?

INSTRUCTION: A TIME ZONE IS REQUIRED. USE ORIGINAL TIME ZONE OR STATE IF NEEDED.

CODE ONE ONLY

EASTERN TIME (US & CANADA) [(FILL CURRENT TIME)]	62
INDIANA (EAST) [(FILL CURRENT TIME)]	63
CENTRAL TIME (US & CANADA) [(FILL CURRENT TIME)]	65
ARIZONA [(FILL CURRENT TIME)]	68
MOUNTAIN TIME (US & CANADA) [(FILL CURRENT TIME)]	70
PACIFIC TIME (US & CANADA) [(FILL CURRENT TIME)]	71
ALASKA [(FILL CURRENT TIME)]	72
HAWAII [(FILL CURRENT TIME)]	73
BAJA CALIFORNIA [(FILL CURRENT TIME)]	93

PROGRAMMER SKIP BOX BREAKOFF3PHONETZ

GO TO THANKS AND SET DISP = 42

Know Where Questions

HELLO = 7 OR CALLIN = 8

KnowWhere. Do you or does anyone there have a phone number for [FirstName]?

If you do not have contact information for [FIRSTNAME], please let me know if you have it for the spouse/partner of [FIRSTNAME], or for another adult in the household with [FIRSTNAME].

INTERVIEWER: IF RESPONDENT HAS CONTACT INFO FOR BOTH, COLLECT FOR [FIRSTNAME] AND SELECT 1 BELOW.

¿Tiene usted o alguien ahí un número de teléfono para [FIRSTNAME]?

IF PARENT INSTRUMENT, SHOW: Si no tiene información de contacto de [FIRSTNAME], por favor dígame si tiene la información de contacto del cónyuge/pareja de [FIRSTNAME], o de otro adulto del hogar de [FIRSTNAME].IF

INTERVIEWER: IF RESPONDENT HAS CONTACT INFO FOR BOTH, COLLECT FOR [FIRSTNAME] AND SELECT 1 BELOW.

CODE ONE ONLY

YES	1	KNOWWHEREPHON
NO	0	THANKS (DISP = 37)
DON'T KNOW	d	THANKS (DISP = 37)
REFUSED	r	THANKS (DISP = 37)
YES HAVE CC	NTACT INFO FOR SPOUSE/PARTNER	
OR OTHER A	DULT IN HOUSEHOLD WITH [FIRSTNAME]2	KNOWWHEREPHON
KNOWWHERE = 1, 2	2, 3	
PROGRAMMER- EXT	TENSION MAY BE MISSING	
KnowWherePhone.	Please give me the telephone number, area code first.	
	Por favor deme el número de teléfono, empezando con el có	digo de área.
INSTRUCTION: CONF	IRM PHONE WITH RESPONDENT BEFORE CONTINUING	
	<u> </u> - - - - - - - - - - - - -	
	Is there an extension number? / ¿Hay un número de extension	ón?
	<u> </u> (0-99999)	
DON'T KNOW	d	THANKS (DISP = 37)
REFUSED	r	THANKS (DISP = 37)
SOFT CHECK: IF PHONE	NE 10 DIGITS: PHONE NUMBER SHOULD BE 10 NUMERIC DIGITS, NO SPACE	ES, DASHES,

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SOFT CHECK: IF AREA CODE LE 200: AREA CODE SHOULD BE GREATER THAN 200 SOFT CHECK: IF EXCHANGE LE 199: EXCHANGE SHOULD BE GREATER THAN 199

KNOWWHEREPHONE = PHONE PROVIDED

KnowWherePhoneTZ. What time zone is that in? / ¿En qué zona horaria está?

IF NEEDED: What time is it there? / ¿Qué hora es ahí?

INSTRUCTION: A TIME ZONE IS REQUIRED. USE ORIGINAL TIME ZONE OR STATE IF NEEDED.

CODE ONE ONLY

EASTERN TIME (US & CANADA) [(FILL CURRENT TIME)]	62
INDIANA (EAST) [(FILL CURRENT TIME)]	63
CENTRAL TIME (US & CANADA) [(FILL CURRENT TIME)]	65
ARIZONA [(FILL CURRENT TIME)]	68
MOUNTAIN TIME (US & CANADA) [(FILL CURRENT TIME)]	70
PACIFIC TIME (US & CANADA) [(FILL CURRENT TIME)]	71
ALASKA [(FILL CURRENT TIME)]	72
HAWAII [(FILL CURRENT TIME)]	73
BAJA CALIFORNIA [(FILL CURRENT TIME)]	93

PROGRAMMER SKIP BOX KNOWWHEREPHONETZ

GO TO THANKS AND SET DISP = 38 (NEW NUMBER).

Language Questions

HELLO = 8 OR CALLIN = 9

Lang.

INSTRUCTION: CODE LANGUAGE NEEDED TO COMPLETE INTERVIEW IF KNOWN:

CODE ONE ONLY

SPANISH	10	
FRENCH	12	
CHINESE	4	
RUSSIAN	25	
GERMAN	7	
HUNGARIAN	14	
VIETNAMESE	42	
OTHER LANGUAGE	99	OTHERLANG
DON'T KNOW	Ь	

PROGRAMMER SKIP BOX LANG

IF LANG = INSTLANG (ONE OF THE PROGRAMMED LANGUAGES, GO TO DIFFLANG.

IF (LANG NE INSTLANG OR LANG = D) AND PROXYOKAY = 1, GO TO NEEDREP.

IF (LANG NE INSTLANG OR LANG = D) AND PROXYOKAY = 0 AND INTERPOKAY = 1, GO TO NEEDREP.

IF LANG NE INSTLANG AND PROXYOKAY = 0 AND INTERPOKAY = 0 AND EXTRATRANS = 1 AND LANG = EXTRATRANSLANG (EXTERNAL TRANSLATION IN THIS LANGUAGE), GO TO SETAPPT.

IF LANG NE INSTLANG AND PROXYOKAY = 0 AND INTERPOKAY = 0 AND EXTRATRANS = 1 AND LANG NE EXTRATRANSLANG. GO TO THANKS AND SET DISP = 44.

IF LANG NE INSTLANG AND PROXYOKAY = 0 AND INTERPOKAY = 0 AND EXTRATRANS = 0, GO TO THANKS AND SET DISP = 44.

LANG = 99	
OtherLang. SPECIFY OTHER LANGUAGE	
	(STRING 15)

PROGRAMMER SKIPBOX OTHERLANG.

IF LANG = 99 AND PROXYOKAY = 1, GO TO NEEDREP.

IF LANG = 99 AND PROXYOKAY = 0 AND INTERPOKAY = 1, GO TO NEEDREP.

ELSE, GO TO THANKS AND SET DISP = 44.

LANG = INSTLANG

FILL LANG FROM LIST

DiffLang. Please allow me a moment to locate a [LANG] speaking interviewer.

Por favor deme un momento para localizar a un encuestador que hable [LANG].

INSTRUCTION: PLACE SAMPLE MEMBER ON HOLD AND ALERT A SUPERVISOR TO TRY AND LOCATE A [LANG] SPEAKING INTERVIEWER.

IF AN INTERVIEWER IS NOT AVAILABLE, SCHEDULE AN APPOINTMENT WITH RESPONDENT.

IF AN INTERVIEWER IS AVAILABLE, TRANSFER CALL AND SCHEDULE A CALLBACK FOR TOMORROW.

TRANSFER TO A [LANG] INTERVIEWER	1
NO INTERVIEWER AVAILABLE	2

PROGRAMMER SKIPBOX DIFFLANG

IF DIFFLANG = 1, LAUNCH APPOINTMENT BOX, SET LANGUAGE = LANG, GO TO THANKS AND SET DISP = 1.

IF DIFFLANG = 2, SET LANGUAGE = LANG, GO TO SETAPPT AND SET (DISP = 1).

Proxy/Interp Questions

 $\begin{tabular}{l} F(PROXYOKAY=1 \ AND \ (AMPRELAY=3 \ OR \ (CALLLATER=0, 2, 3) \ OR \ (HEALTHPROBTYPE=4 \ OR 5) \ OR \ (HOMESOON=0 \ AND \ INSTITUTION=5 \ (PRISON)) \ OR \ (CAPABLE=2 \ OR R) \ OR \ (LANG \ NE \ INSTLANG) \ OR \ (LANG=D \ OR 99))) \ OR \ (PROXYOKAY=0 \ AND \ INTERPOKAY=1 \ AND \ ((LANG \ NE \ INSTLANG) \ OR \ (LANG=D \ OR 99))) \end{tabular}$

OR (PROXYOKAY=1 AND HELLO=12, 13, 14, 15) OR (PROXYOKAY=1 AND CALLIN= 10, 11, 12) OR (PROXYOKAY=1 AND CALLIATER=2.3)

FILL PROXY IF PROXYOKAY = 1, INTERPRETER IF (PROXYOKAY = 0 AND INTERPOKAY = 1)

DISABLE RESEPONES OPTION PROXY LIVES ELSEWHERE (4) ONLY IF PROXYOKAY = 0

NeedRep.

INTERVIEWER: IF SPEAKING TO PROXY ALREADY, DO NOT READ PROXY TEXT BELOW AND SELECT APPLICABLE RESPONSE OPTION.

Is it possible to speak with [FIRSTNAME]'s (spouse or partner) or another adult household member who is knowledgeable about the education and work experiences of [FIRSTNAME]?

¿Es posible hablar con (el cónyuge de/la pareja de) [FIRSTNAME] u otro miembro adulto del hogar que tiene conocimiento de la educación y experiencias laborales de [FIRSTNAME]?

IF INTERPOKAY = 1: INTERVIEWER: READ TEXT BELOW IF PARENT CAN COMPLETE AN INTERVIEW WITH THE ASSISTANCE OF AN INTERPRETER. DO NOT READ IF SPEAKING TO PROXY.

We are looking for someone who is 18 years or older who [lives with [SampMembFULLNAME] to help (him/her) by interpreting the interview for us. Are you 18 years of age or older and live with [SampMembFULLNAME]?]

Estamos buscando a alguien que tenga 18 años o más que [vive con [SampMembFULLNAME] para ayudarle a (él/ella) interpretando la entrevista para nosotros. ¿Tiene usted 18 años o más y vive con [SampMembFULLNAME]?]

ALL: Is now a good time?

¿Es buen momento ahora?

CODE ONE ONLY

YES, SPEAKING TO FAMILY MEMBER/FRIEND WHO WILL ACT AS [PROXY]1	1	NEWNAMEREP
YES, SPEAKING TO [PROXY], BUT IT IS NOT A GOOD TIME	2	NEWNAMEREP
[PROXY] COMES TO PHONE	3	NEWNAMEREP
[PROXY] LIVES HERE AND NOT CURRENTLY AVAILABLE	1	NEWNAMEREP
PROXY LIVES ELSEWHERE	5	NEWNAMEREP
NO [PROXY] AVAILABLE	6	SKIP BOX NEEDREP
DON'T KNOW	t	SKIP BOX NEEDREP
YES, SPEAKING TO FAMILY MEMBER/FRIEND WHO WILL ACT AS [INTERPRETER]	7	NEWNAMEREP
YES, SPEAKING TO [INTERPRETER], BUT IT IS NOT A GOOD TIME	3	NEWNAMEREP
[INTERPRETER] COMES TO PHONE	9	NEWNAMEREP
[INTERPRETER] LIVES HERE AND NOT CURRENTLY AVAILABLE1	10	NEWNAMEREP
INTERPRETER LIVES ELSEWHERE	11	NEWNAMEREP
NO [INTERPRETER] AVAILABLE	12	SKIP BOX NEEDREP

PROGRAMMER SMVERIFIED BOX NEEDREP

IF NEEDREP = 1 - 4 AND 7-10 AND SMVERIFIED = 0, SET SMVERIFIED = 1

NEEDREP = 1 - 5, 7-11

your su nombre completo IF NEEDREP = 1 - 3 OR 7-9; his or her el nombre completo de él o ella IF NEEDREP = 4 - 5 OR 10-11

PROGRAMMER: ONLY MIDDLIE INITIAL IS ALLOWED TO BE MISSING

NewNameRep.

Please give me the correct spelling of [your / his or her] full name.

Por favor dígame la manera correcta de escribir [su nombre completo / el nombre completo de él o ella].

INSTRUCTION: CONFIRM SPELLING OF NAME WITH RESPONDENT BEFORE CONTINUING SPECIFY NAME

First name? / ¿Primer nombre?	
	(STRING 20)
FIRST NAME	
Middle initial / ¿Inicial del segundo nombre?	
	(STRING 1)
MIDDLE INITIAL	
Last name? / ¿Apellido?	
	(STRING 30)
LAST NAME	
DON'T KNOW	d
DEFLICED	

PROGRAMMER SKIP BOX NEWNAMEREP.

IF NEWNAMEREP HAS NAME PROVIDED, SET REPTYPE AND GO TO REPREL. IF NEWNAMEREP = D OR R, GO TO THANKS AND SET DISP = 36 (CALLBACK).

PROGRAMMER SET REPTYPE

IF (NEEDREP = 7-11 AND INTERPOKAY = 1, SET REPTYPE = 1 (INTERPRETER). IF (NEEDREP = 1-5 AND PROXYOKAY = 1, SET REPTYPE = 2 (PROXY) AND UPDATE RESPONDENT TO PROXY.

NEEDREP = 1 – 5, 7-11 AND NEWNAMEREP = ANSWERED (NOT D OR R)

They están ellos relacionados IF NEEDREP = 4 – 5 or 10-11, ELSE, you está usted

RepRel. And how are [they / you] related to [FIRSTNAME]?

OTHER RELATIONSHIP

¿Y cómo [están ellos relacionados / está usted] relacionado(a) con [FIRSTNAME]?

CODE ONE ONLY

OTHER (SPECIFY)	. 8	OTHERREL
ENROLLING PARENT'S SPOUSE/PARTNER	. 9	
OTHER ADULT IN HOUSEHOLD WITH ENROLLING PARENT	. 10	
DON'T KNOW	. d	TERMINATI
REFUSED.	. r	TERMINATI

SOFT CHECK: IF REPREL= D OR R PRIOR TO TERMINATE READ: This helps us document who completed each interview. Your name will be kept private and will not be linked to your answers in any reports we create. Are there any questions or any concerns you have about this question that I could help address?

PROGRAMMER: IF REPREL= D OR R, ROUTE AS REFUSAL. INTERVIEW SHOULD NOT CONTINUE.

PROGRAMMER SKIP BOX REPREL

IF REPREL = 8, GO TO OTHERREL. ELSE, GO TO SKIP BOX NEEDREP.

REPREL= 8		
OtherRel.		
INSTRUCTION: SPECIFY OTHER RELATIONSHIP.		
	(STRING 20)	SKIP BOX
OTHERREL		

Thanks for this information. Based on this, we will not need to complete an interview with you at this time.

Gracias por esta información. Basado en esto, no necesitaremos completar una entrevista con usted en este momento.

PROGRAMMER SKIP BOX OTHERREL

IF REPTYPE=2 AND OTHERREL=POPULATED, GO TO THANKS AND SET DISP=45.

IF NEEDREP = 2 OR 8 (SPEAKING TO BUT NOT GOOD TIME), GO TO SETAPPT. IF NEEDREP = 4 OR 10 (PROXY/INTERPRETER NOT AVAILABLE), GO TO NEEDREPBESTBUM. IF NEEDREP = 5 OR 11 (PROXY/INTERPRETER LIVES ELSEWHERE), GO TO NEEDREPPHONE. IF (NEEDREP = 6 OR D) AND PROXYOKAY = 1, GO TO THANKS AND SET DISP = 45. IF (NEEDREP = 12) AND INTERPOKAY = 1, GO TO THANKS AND SET DISP = 44). NEEDREP = 4 OR 10 AND NEWNAMEREP = ANSWERED (NOT D OR R) [PROXY FIRST NAME] Is this telephone number I reached you on the best number to use to call [PROXY NeedRepBestNum. FIRST NAME]? ¿Es este número de teléfono donde le contacté a usted el mejor número para Ilamar a [PROXI FIRST NAME]? CODE ONE ONLY DON'T KNOW......d THANKS (DISP = 36) REFUSED.....r THANKS (DISP = 36) (NEEDREP = 5 OR 11 AND NEWNAMEREP=ANSWERED (NOT D OR R)) OR NEEDREPBESTNUM = 0 [FIRST NAME] FROM NEWNAMEREP; PROGRAMMER- EXTENSION MAY BE MISSING NeedRepPhone. Please give me [PROXY FIRST NAME]'s telephone number, area code first. Por favor deme el número de teléfono de [PROXY FIRST NAME], empezando con el código de área. INSTRUCTION: CONFIRM PHONE WITH RESPONDENT BEFORE CONTINUING (1-999)(0-999)(0-9999)Is there an extension number? / ¿Hay un número de extensión?

PROGRAMMER SKIP BOX NEEDREP

IF NEEDREP = 1 OR 3, 7 OR 9 (SPEAKING TO PROXY/INTERPRETER), GO TO SAMPMEMBBOX.

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DON'T KNOW....... d

REFUSED......r

(0-999999)

SOFT CHECK: IF PHONE NE 10 DIGITS: PHONE NUMBER SHOULD BE 10 NUMERIC DIGITS, NO SPACES, DASHES, PARENTHESES OR OTHER PUNCTUATION (OR EMPTY)

SOFT CHECK: IF AREA CODE LE 200: AREA CODE SHOULD BE GREATER THAN 200

SOFT CHECK: IF EXCHANGE LE 199: EXCHANGE SHOULD BE GREATER THAN 199

PROGRAMMER SKIP BOX NEEDREPPHONE

IF (NEEDREPPHONE = D OR R) AND NEEDREP = 5, GO TO THANKS (DISP = 45).

IF (NEEDREPPHONE= D OR R) AND NEEDREP=11, GO TO THANKS (DISP=44).

IF (NEEDREPPHONE = D OR R) AND NEEDREPBESTNUM = 0, GO TO THANKS (DISP = 36).

NEEDREPPHONE = PHONE PROVIDED

NeedRepPhoneTZ. What time zone is that in?

¿En qué zona horaria está?

IF NEEDED: What time is it there?

¿Qué hora es ahí?

INSTRUCTION: A TIME ZONE IS REQUIRED. USE ORIGINAL TIME ZONE OR STATE IF NEEDED.

CODE ONE ONLY

EASTERN TIME (US & CANADA) [(FILL CURRENT TIME)]	. 62
INDIANA (EAST) [(FILL CURRENT TIME)]	. 63
CENTRAL TIME (US & CANADA) [(FILL CURRENT TIME)]	. 65
ARIZONA [(FILL CURRENT TIME)]	. 68
MOUNTAIN TIME (US & CANADA) [(FILL CURRENT TIME)]	. 70
PACIFIC TIME (US & CANADA) [(FILL CURRENT TIME)]	. 71
ALASKA [(FILL CURRENT TIME)]	. 72
HAWAII [(FILL CURRENT TIME)]	. 73
BAJA CALIFORNIA [(FILL CURRENT TIME)]	. 93

PROGRAMMER SKIP BOX NEEDREPPHONETZ

GO TO THANKS AND SET DISP = 38 (NEW NUMBER).

NEWNAMEREP = NAME PROVIDED

YOUR SU DIRECCIÓN IF NEEDREP = 1 - 3 OR 7-9; HIS OR HER EL DIRECCIÓN DE ÉL O ELLA IF NEEDREP = 4 - 5 OR 10-11

NeedRepAddr. And [your/his or her] address? ¿Y [su dirección/el dirección de él o ella]? What is the first line of the address? ¿Cuál es la primera línea de la dirección? (STRING (60)) Street Address Line 1 Is there an apartment or unit number for this address? ¿Hay un número de apartamento o unidad en esta dirección? (STRING (60)) Street Address Line 2 And what is the zip code? ¿Cuál es el código postal? (STRING (10)) ZIP Code Town or city? ¿Pueblo o ciudad? (STRING (20)) City State? ¿Estado? (STRING (2)) State INSTRUCTION: CONFIRM ADDRESS WITH RESPONDENT BEFORE CONTINUING DON'T KNOW......d

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REFUSED.....r

SampMemb Questions

(HELLO = 1 OR 2) OR CALLINNUM = 1 OR AMPPHONE = 1 OR CALLRELAY = 1

IF QUALIFIED LEVEL LT 2 (INT NOT STARTED), DISPLAY RESPONSE CHOICE (2), ELSE HIDE.

your name was given IF NEEDREP = 4 - 5; ELSE, you volunteered

[PROMISE/ASPIRE]: IF PROGRAMNAME FROM SAMPLE LOAD = MD PROMISE, WISCONSIN PROMISE, CAPROMISE, NYS PROMISE, OR AR PROMISE MDP, FILL PROMISE. ELSE, FILL ASPIRE.

SampMemb.

IF HELLO = 2 (COMES TO PHONE) AND REPTYPE = 0 – 2 (ALL):

Hi, my name is [INTERVIEWER]. I'm calling on behalf of the Social Security Administration about an important study.

Hola, mi nombre es [INTERVIEWER]. Estoy llamando en nombre de la Administración del Seguro Social acerca de un importante estudio.

<u>IF QL LT 2 (INTERVIEW NOT STARTED) AND REPTYPE = 0 - 1</u>: We're following up on a letter we sent inviting you to take part in the [PROMISE/ASPIRE] 60-Month Survey. The goal of this survey is to learn more about your education, work experiences, and benefits you may receive. Each person's participation is voluntary, but very important and all answers will be held in strict confidence.

Estamos dando seguimiento a una carta que enviamos invitándole a tomar parte en la Encuesta de 60 Meses de [PROMISE/ASPIRE]. El objetivo de esta encuesta es aprender más sobre su educación, experiencias laborales y beneficios que pueda recibir. La participación de cada persona es voluntaria, pero muy importante y todas las respuestas se mantendrán de manera estrictamente confidencial.

<u>IF QL GE 2 (INTERVIEW STARTED) AND REPTYPE = 0 – 2 (ALL)</u>: I'm calling to finish the interview we are conducting about [your/FIRSTNAME's] education, work experiences, and benefits [you/FIRSTNAME] receive. Is now a good time?

Estoy llamando para terminar la entrevista que estamos llevando a cabo sobre [su educación y experiencias laborales /la educación y experiencias laborales de [FIRSTNAME]], y los beneficios que recibe. ¿Es buen momento ahora?

IF QL LT 2 (INTERVIEW NOT STARTED) AND REPTYPE = 2 (PROXY): We are conducting an important study for the Social Security Administration. The questions are about the education, work experiences, and benefits [SampMemFULLNAME] receives and we wanted to interview [SampMembFULLNAME]. But I understand that [SampMembFULLNAME] is unable to be interviewed and [you volunteered/your name was given] as someone who could answer on [his/her] behalf.

Estamos llevando a cabo un importante estudio para la Administración del Seguro Social. Las preguntas son acerca de la educación, experiencias laborales y beneficios que [SampMemFULLNAME] recibe, y queríamos entrevistarle a [SampMemFULLNAME]. Pero entiendo que [SampMembFULLNAME] no puede ser entrevistado(a) y [usted se ofreció/nos dio su nombre] como alguien que podría responder por [él/ella].

CODE ONE ONLY

BEGIN INTERVIEW 1	SAMPMEMBBOX
DID NOT RECEIVE OR DOES NOT RECALL THE LETTER 2	NOLETTER
NOT A GOOD TIME3	SETAPPT
HUNG UP DURING INTRODUCTION4	VERSMCONTACT

PROGRAMMER SMVERIFIED BOX SAMPMEMB

IF SAMPMEMB = 1 AND SMVERIFIED = 0, SET SMVERIFIED = 1.

PROGRAMMER SKIP BOX SAMPMEMB

IF (CURPHNTYPE = CELL (C) OR UNKNOWN (U) OR EMPTY) AND (DIALNUMBER = 1, 24, OR 5), GO TO SAFETY. IF (CURPHNTYPE = CELL (C) OR UNKNOWN (U) OR EMPTY) AND DIALNUMBER = 6 (FIELD CALL IN), GO TO CONFIRMREC BOX.

IF CURPHNTYPE = LANDLINE (L) AND REPREL= 1 - 7, GO TO CONFIRMREC BOX.

IF CURPHNTYPE = LANDLINE (L) AND SAMPMEMB = 1, GO TO CONFIRMREC BOX.

No Letter Questions

SAMPMEMB = 2

NoLetter. I'm sorry the letter did not reach you. I'd be happy to read the letter to you now or answer any questions you may have about the survey. Can we begin now?

Siento que la carta no le llegó. Con gusto puedo leerle la carta ahora o contestar cualquier pregunta que pueda tener sobre la encuesta. ¿Podemos empezar ahora?

CODE ONE ONLY

BEGIN INTERVIEW 1	SKIP BOX SAMPMEMB
WANTS ANOTHER LETTER2	READLETTER
NOT A GOOD TIME	SETAPPT

NOLETTER = 2

ReadLetter. May I read the letter to you and then we can begin?

¿Puedo leerle la carta y luego podemos empezar?

INSTRUCTION: READ LETTER TO RESPONDENT AND CONTINUE.

CODE ONE ONLY

YES, READ THE LETTER1	SKIP BOX SAMPMEMB
NO, WANTS ANOTHER LETTER FIRST	SKIP BOX READLETTER

PROGRAMMER SKIP BOX READLETTER

IF ADVEMAILS = 1, GO TO EMAILEXIT.

IF ADVEMAILS = 0 AND ADVREMAILS = 1, GO TO SENDLETTEREXIT.

IF ADVEMAILS = 0 AND ADVREMAILS = 0, GO TO THANKS AND SET DISP

= 5.

Standard Questions

(DIALNUMBER = 1, 2 4, OR 5) AND (CURPHNTYPE = CELL (C) OR UNKNOWN (U) OR EMPTY) AND ((SAMPMEMB = 1-2) OR (REPREL= 1-8))

Safety. Are you in a place where you can safely talk on the phone and answer my questions?

¿Está en un lugar donde puede hablar por teléfono y responder a mis preguntas de forma segura?

PROBE IF NEEDED: For example, are you driving?

Por ejemplo, ¿está conduciendo?

CODE ONE ONLY

YES, BEGIN INTERVIEW	SKIP BOX
	CONFIRMREC
NOT A GOOD TIME2	SETAPPT
DON'T KNOW d	SETAPPT
REFUSEDr	SETAPPT

PROGRAMMER SKIP BOX CONFIRMREC

IF RECORDPROJECT = 0 (NO), SKIP TO NEXT QUESTION TO BEGIN INTERVIEW. IF RECORDPROJECT = 1 (YES), CONTINUE TO CONFIRMREC.

RECORDPROJECT = 1 (YES)

ConfirmRec. This call may be monitored or recorded for quality assurance purposes.

Esta llamada puede ser monitoreada o grabada para control de calidad.

INSTRUCTION: CODE 0 ONLY IF RESPONDENT OBJECTS TO BEING RECORDED.

CODE ONE ONLY

SOFT CHECK: IF CONFIRMREC = 0, INTERVIEWER PLEASE CONFIRM THE RESPONDENT SAYS HE/SHE DOES NOT WANT TO BE RECORDED.

CONFIRMREC= 1 OR 0

NextQuestion. SURVEY SHOULD THEN CONTINUE TO THE NEXT UNANSWERED

ALL PRIOR REQUIRED SURVEY QUESTIONS ANSWERED

LastQuestion. GO TO CONTACT INFO SECTION BOX

Appointments and Breakoffs

HELLO = 4 OR CALLIN = 2 OR AMPRELAY = D OR RELAYPHONE = D OR (RESPAVAIL = 0 OR D) OR AMPPHONE = 2 OR CALLRELAY = 2 OR (CALLLATER = 1 OR D) OR (HOMESOON = 1, D OR R) OR (LANG NE INSTLANG AND PROXYOKAY = 0 AND INTERPOKAY = 0 AND EXTRATRANS = 1 AND LANG = EXTRATRANSLANG) OR DIFFLANG = 2 OR ((NEEDREP = 2 OR (NEEDREP = 4 AND REPTYPE = 1)) AND ((REPREL = 1 – 7, D, OR R) OR OTHERREL = ANSWERED)) OR SAMPMEMB = 3 OR NOLETTER = 3 OR (SAFETY = 2, D, OR R)

SetAppt. When would be a good time to callback?

¿Cuándo sería una hora conveniente para volver a llamar?

INSTRUCTION: MAKE AN APPOINTMENT USING THE 'APPOINTMENT' ICON OR PRESS <CTRL-A> TO INVOKE THE APPOINTMENT MAKING DIALOG.

PROGRAMMER: NO FORWARD OPTION

PROGRAMMER SKIP BOX SETAPPT

IS PHONE LOADED FOR CURRENT RESPONDENT, GO TO CONFPHONEEXIT. IF NO PHONE LOADED FOR CURRENT RESPONDENT, GO TO NEWPHONEEXIT.

IF TERMINATE BUTTON SELECTED

DISABLE WEBFINISH (5) IF ALLOWWEB = 0; IF YOU PREFER... IF ALLOWWEB = 1 / SI PREFIERE...IF ALLOWWEB = 1

KindOfExit. INSTRUCTION: RECORD THE KIND OF EXIT.

KINDOFEXIT=1 OR (CALLIN = 3 OR 4)

RefusalReason. INSTRUCTION: INDICATE REASON FOR REFUSAL.

	CODE ONE ONLY
CONFIDENTIALITY	1
NOT INTERESTED	2
INTERVIEW TOO LONG	3
DOESN'T BELIEVE STUDY WILL MAKE A DIFFERENCE	4
DOESN'T LIKE TOPIC OR ORGANIZATION	5
DID NOT SPECIFY/NO REASON GIVEN	6
OTHER REASON (SPECIFY)	7
DOES NOT REMEMBER ENROLLING IN PROMISE/ASPIRE	8

REFUSALREASON = 7

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OtherRefusalR	eason.
INSTRUCTION	: SPECIFY THE OTHER REASON.
	(STRING 200)
	PROGRAMMER REFUSALREASON CALL HISTORY BOX
	APPEND REFUSAL REASON TO THE END OF THE CALL HISTORY NOTE.
	IF REFUSAL REASPON = 7, APPEND OTHERREFUSALREASON TEXT.
DEELIO AL DE	ACON A COROTHERREFUGAL REACON ANOMERED
REFUSALREA	ASON = 1 – 6 OR OTHERREFUSALREASON = ANSWERED
RefusalSeverit	y.
INSTRUCTION	SELECT SEVERITY OF REFUSAL.
	CODE ADAMANT (2) IF RESPONDENT:
	 MENTIONED CALLING POLICE THREATENED LEGAL ACTION (LAWYER OR ATTORNEY GENERAL) OR VIOLENCE STATED DO NOT CALL ME AGAIN
	ELSE, CODE SOFT REFUSAL (1)
	CODE ONE ONLY

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KINDOFEXIT = 3

[PROMISE/ASPIRE]: IF PROGRAMNAME FROM SAMPLE LOAD = MD PROMISE, WISCONSIN PROMISE, CAPROMISE, NYS PROMISE, OR AR PROMISE MDP, FILL PROMISE. ELSE, FILL ASPIRE.

NoLetterExit.

The letter explained that the study is being conducted by researchers from Mathematica Policy Research. This study seeks to improve services and help the Social Security Administration and the U.S. Departments of Education, Health and Human Services, and Labor better understand the experiences of people enrolled in the [PROMISE/ASPIRE] programs. The study is paid for by the Social Security Administration.

Mathematica was hired to conduct this survey. Through the survey, researchers hope to learn more about your employment, educational experiences, and any benefits you receive. This voluntary interview takes about 20-35 minutes to complete. Your input is critical to the success of the study, as only you can tell us about your unique experiences.

La carta explicaba que el estudio está siendo realizado por investigadores de Mathematica Policy Research. Este estudio busca mejorar servicios y ayudar a la Administración del Seguro Social y a los Departamentos de Educación, Salud y Servicios Humanos y Trabajo de los Estados Unidos a comprender mejor las experiencias de las personas inscritas en los programas [PROMISE/ASPIRE]. El estudio está financiado por la Administración del Seguro Social.

Mathematica fue contratada para llevar a cabo esta encuesta. A través de la encuesta, los investigadores esperan aprender más sobre su empleo, experiencias educativas y cualquier beneficio que recibe. Completar esta entrevista voluntaria lleva unos 20-35 minutos. Su opinión es fundamental para el éxito del estudio, dado que solamente usted puede contarnos acerca de sus experiencias únicas.

CODE ONE ONLY

CONTINUE INTERVIEW 1	LAST QUESTION
WANTS ANOTHER LETTER2	READLETTEREXIT

NOLETTEREXIT = 2

ReadLetterExit. May I read the letter to you?

¿Puedo leerle la carta?

INTERVIEWER: READ LETTER TO RESPONDENT AND CONTINUE

CODE ONE ONLY

YES, READ THE LETTER1	LAST QUESTION
NO, WANTS ANOTHER LETTER FIRST	SKIP BOX READLETTEREXIT

PROGRAMMER SKIP BOX READLETTEREXIT

IF ADVEMAILS = 1, GO TO EMAILEXIT.

IF ADVEMAILS = 0 AND ADVREMAILS = 1, GO TO SENDLETTEREXIT.

IF ADVEMAILS = 0 AND ADVREMAILS = 0, GO TO THANKS AND SET DISP = 5.

((READLETTER = 0 OR READLETTEREXIT = 0) AND ADVEMAILS = 0 AND ADVREMAILS = 1) OR ((READLETTER = 0 OR READLETTEREXIT = 0) AND ADVEMAILS = 1 AND (EMAILEXIT= 2-3) AND ADVREMAILS = 1)

SendLetterExit.

Okay, I'll send another letter and will call back in a few days.

Muy bien, le enviaré otra carta y le llamaré de nuevo en unos días.

CODE ONE ONLY

ENTER 1 TO COLLECT/CONFIRM ADDRESS 1 SKIP BOX SENDLETTEREXIT

PROGRAMMER SKIP BOX SENDLETTEREXIT

IF ADDRESS LOADED, GO TO CONFLETTERADDRESS. IF NO ADDRESS LOADED, GO TO NEWLETTERADDRESS.

SENDLETTEREXIT = 1 AND ADDRESS LOADED

FILL ADDRESS WITH RESPONDENTS ADDRESS FROM PRELOAD

ConfLetterAddress. Please confirm the address we have on file.

Por favor confirme la dirección que tenemos en archivo.

The address we have is:

La dirección que tenemos es:

ADDRESS: [ADDRESS]

Is that correct?

¿Es correcta?

CODE ONE ONLY

YES, CORRECT1	THANKS (DISP = 46)
NO, EDIT ADDRESS2	NEWLETTERADDRESS
NO. SEND TO NEW ADDRESS	NEWLETTERADDRESS

(CONFLETTERADDRESS = 2 OR 3) OR (SENDLETTEREXIT = 1 AND ADDRESS = BLANK)

IF CONFLETTERADDRESS = 2, FILL ADDRESS WITH ADDRESS

NewLetterAddress. Please tell me the best address to send the letter.

Por favor dígame la mejor dirección para enviar la carta.

INSTRUCTION: CONFIRM ADDRESS WITH RESPONDENT BEFORE CONTINUING

What is the first line of the address? ¿Cuál es la primera línea de la dirección? (STRING (60)) Street Address Line 1 Is there an apartment or unit number for this address? ¿Hay un número de apartamento o unidad en esta dirección? (STRING (60)) Street Address Line 2 And what is the zip code? ¿Cuál es el código postal? (STRING (10)) ZIP Code Town or city? ¿Pueblo o ciudad? (STRING (20)) City State? ¿Estado? (STRING (2)) State REFUSED.....r

PROGRAMMER SKIP BOX NEWLETTERADDRESS

IF NEWLETTERADDRESSADDRESSHAS ADDRESS, GO TO THANKS AND SET DISP = 46.

IF NEWLETTERADDRESS = R, GO TO THANKS AND SET DISP = 5.

SETAPPT = APPT

FILL PHONE WITH SAMPLE MEMBERS PHONE FROM PRELOAD

ConfPhoneExit. Please confirm the phone number we have on file.

i leade commit the priorie number we have on me.

Por favor confirme el número de teléfono que tenemos en archivo.

The phone number we have is:

El número de teléfono que tenemos es:

PHONE:

[PHONE]

Is that correct?

¿Es correcto?

CODE ONE ONLY

YES, CORRECT1	SKIPBOX PHONEEXIT
NO, EDIT PHONE2	NEWPHONEEXIT
NO, NEW PHONE	NEWPHONEEXIT
CALL ENDED BEFORE ASKING4	SKIPBOX PHONEEXIT
REFUSEDr	SKIPBOX PHONE EXIT

PROGRAMMER SKIP BOX CONFPHONEEXIT

IF (CONFPHONEEXIT = 1 OR R), GO TO THANKS AND SET DISP = 1. KEEP CURRENT PHONE. IF CONFPHONEEXIT = 4, GO TO FINISHED AND SET DISP = 1. KEEP CURRENT PHONE. IF CONFPHONEEXIT = 2 - 3, GO TO NEWPHONEEXIT.

(SETAPPT = APPT AND (CONFPHONEEXIT = 2 OR 3 OR NO PHONE LOADED)) OR KINDOFEXIT = 6

IF CONFPHONE = 2, FILL LOADED PHONE

PROGRAMMER- EXTENSION MAY BE MISSING

FILL SECOND INTERVIEWER INSTRUCTION ONLY IF KINDOFEXIT = 6

NewPhoneExit.

Starting with the area code, please give me the best telephone number to use to call you back.

Comenzando con el código de área, por favor deme el mejor número de teléfono para llamarle de vuelta.

INSTRUCTION: CONFIRM PHONE WITH RESPONDENT BEFORE CONTINUING

IF KINDOFEXIT = 6 DISPLAY THE FOLLOWING INSTRUCTION:

INSTRUCTION: MAKE NOTE OF MPRID SO YOU CAN CALL RESPONDENT BACK AFTER COLLECTING NUMBER.

|__|_| - |__| - |__| - |__| |__| (1-999) (0-999) (0-9999)

Is there an extension number?

¿Hay un número de extensión?

(0-99999)

CALL ENDED BEFORE ASKING1	SKIP BOX NEWPHONEEXIT
DON'T KNOWd	SKIP BOX NEWPHONEEXIT
REFUSEDr	SKIP BOX NEWPHONEEXIT

SOFT CHECK: IF PHONE NE 10 DIGITS: PHONE NUMBER SHOULD BE 10 NUMERIC DIGITS, NO SPACES, DASHES, PARENTHESES OR OTHER PUNCTUATION (OR EMPTY)

SOFT CHECK: IF AREA CODE LE 200: AREA CODE SHOULD BE GREATER THAN 200

SOFT CHECK: IF EXCHANGE LE 199: EXCHANGE SHOULD BE GREATER THAN 199

PROGRAMMER SKIP BOX NEWPHONEEXIT

IF (NEWPHONEEXIT = D OR R) AND (SETAPPT = APPT AND (CONFPHONEEXIT = 2 OR 3 OR NO PHONE LOADED)), GO TO THANKS AND SET DISP = 1. KEEP CURRENT PHONE.

IF NEWPHONEEXIT = 1 AND (SETAPPT = APPT AND (CONFPHONEEXIT = 2 OR 3 OR NO PHONE LOADED)), GO TO FINISHED AND SET DISP = 1. KEEP CURRENT PHONE.

IF (NEWPHONEEXIT = D OR R) AND KINDOFEXIT = 6, GO TO THANKS AND SET DISP = 36.

IF (NEWPHONEEXIT = D OR R) AND KINDOFEXIT = 6, GO TO THANKS AND SET DISP = 36 KEEP CURRENT PHONE.

IF NEWPHONEEXIT = 1 AND KINDOFEXIT = 6, GO TO FINISHED AND SET DISP = 36. KEEP CURRENT PHONE.

IF PHONE COLLECTED AT NEWPHONEEXIT, CONTINUE TO NEWPHONETZEXIT.

NEWPHONEEXIT HAS PHONE PROVIDED

NewPhoneTZExit. What time zone is that in?

¿En qué zona horaria está?

IF NEEDED: What time is it there?

¿Qué hora es ahí?

INSTRUCTION: A TIME ZONE IS REQUIRED. USE ORIGINAL TIME ZONE OR STATE IF NEEDED.

CODE ONE ONLY

EASTERN TIME (US & CANADA) [(FILL CURRENT TIME)]	62
INDIANA (EAST) [(FILL CURRENT TIME)]	63
CENTRAL TIME (US & CANADA) [(FILL CURRENT TIME)]	65
ARIZONA [(FILL CURRENT TIME)]	68
MOUNTAIN TIME (US & CANADA) [(FILL CURRENT TIME)]	70
PACIFIC TIME (US & CANADA) [(FILL CURRENT TIME)]	71
ALASKA [(FILL CURRENT TIME)]	72
HAWAII [(FILL CURRENT TIME)]	73
BAJA CALIFORNIA [(FILL CURRENT TIME)]	93

PROGRAMME SKIPBOX NEWPHONETZEXIT

IF (SETAPPT = APPT AND (CONFPHONEEXIT = 2 OR 3 OR NO PHONE LOADED)), GO TO THANKS AND SET DISP = 1. SET NEWPHONE AS NEW PHONE. IF KINDOFEXIT = 6, GO TO THANKS AND SET DISP = 36. SET NEWPHONE AS NEW PHONE.

DISP = ANY (1, 5, 13, 36, 37, 38, 39, 40, 42, 43, 44, 45, 46, 47, 48, 50, 51)

Thanks. Thank you very much for your time.

Muchisimas gracias por su tiempo.

CODE ONE ONLY

ENTER 1 TO CONTINUE 1 SKIP BOX THANKS

PROGRAMMER SKIP BOX THANKS

IF SMVERIFIED = 0 AND (SETAPPT = APPT OR (KINDOFEXIT=1 – 6) OR READLETTEREXIT = 0 OR (REFUSALSEVERITY = 1 OR 2) OR HELLO = 8 OR CALLIN = 9 OR SAMPMEMB = 4), GO TO VERSMCONTACT. ELSE, GO TO FINISHED.

SMVERIFIED = 0 AND (SETAPPT = APPT OR (KINDOFEXIT=1 - 6) OR READLETTEREXIT = 0 OR (REFUSALSEVERITY = 1 OR 2) OR HELLO = 8 OR CALLIN = 9 OR SAMPMEMB = 4)

[SAMPLE MEMBER NAME] IF REPTYPE = 0-1

[SAMPLE MEMBER NAME] OR HIS/HER PROXY IF REPTYPE = 2 (PROXY)

[SAMPLE MEMBER NAME] IF REPTYPE = 0-1

[SAMPLE MEMBER NAME] OR PROXY IF REPTYPE = 2 (PROXY)

FILL SAMPLE MEMBER NAME FROM PRELOAD

VerSMContact.

INSTRUCTION: INDICATE IF [SAMPLE MEMBER NAME] HAS BEEN VERIFIED AT THIS NUMBER.
INSTRUCTION: VERIFIED MEANS YOU SPOKE TO [SAMPLE MEMBER NAME] / [SAMPLE MEMBER NAME] OR VIA AN INTERPRETER / [SAMPLE MEMBER NAME] OR HIS/HER PROXY].

CODE ONE ONLY

VERIFIED. SPOKE WITH [SAMPLE MEMBER NAME] / [SAMPLE MEMBER NAME] OR PROXY] AT THIS NUMBER	FINISHED
NOT VERIFIED. DID NOT SPEAK WITH [SAMPLE MEMBER NAME] / [SAMPLE MEMBER NAME] OR PROXY] AT THIS NUMBER2	FINISHED
UNSURE WHO YOU WERE SPEAKING TO	FINISHED

PROGRAMMER SMVERIFIED BOX VERSMVERIFIED

IF VERSMCONTACT = 1, SET SMVERIFIED FLAG = 1.

ALL

Finished.

THE STATUS OF CASE [MPRID] IS:

[LOGICAL STATUS] [STATUS DESCRIPTION]

ONLY LEAVE A NOTE IF NECESSARY. OTHERWISE, CLICK CONTINUE.

SEE A SUPERVISOR IF THE STATUS DOES NOT MATCH THE OUTCOME OF THE CALL ATTEMPT.

INSTRUCTION: ENTER CASE NOTES. (STRING 200)

Section A Introduction and Eligibility Screening

CONFIRMREC= 0 OR 1

P2 A MODE.

PLEASE RECORD BELOW THE MODE IN WHICH WE ARE COMPLETING THIS INTERVIEW. THIS HELPS US FILL IN TEXT IN LATER ITEMS AND STATUS THE CASE. (P18M-fieldLoc)

CODE ONE ONLY

TELEPHONE INTERVIEW	CONTINUE
FIELD INTERVIEW: IN-PERSON	CONTINUE
FIELD INTERVIEW: BY PHONE	CONTINUE
PAPER COMPLETE - SOC USE ONLY4	CONTINUE
TELEPHONE INTERVIEW – FIELD CALL IN	

PROGRAMMER: MISSING NOT ALLOWED.

PROGRAMMER: IF CHANNEL USED IS CAWI – PRESENT ONLY OPTIONS 2 AND 3 ABOVE. IF CHANNEL USED IS CATI – PRESENT ONLY OPTIONS 1, 4, AND 5 ABOVE.

P2 A MODE = 1 OR 2 OR 3 OR 4 OR 5

[PROMISE PROGRAM] [\$30/\$40/\$50] [YOUTH] [EP]

PROGRAMMER: IF CURRENT DATE > INCENTIVECUTOFFDATE, FILL \$30.

IF CURRENT DATE <= INCENTIVECUTOFFDATE, FILL \$40 IF INCENTIVEGROUP = A.

IF CURRENT DATE <= INCENTIVECUTOFFDATE, FILL \$50 IF INCENTIVEGROUP = B.

P2_A_ELIG.

<u>IF EP</u>: About five years ago, you enrolled in a study called [PROMISE PROGRAM NAME]. You may remember completing a consent form explaining that the study includes two interviews. This is the final interview. You'll receive [\$30/\$40/\$50] for completing this 25-35 minute interview. It asks about your education and employment experiences, benefits you may receive, and your expectations for [YOUTH] in the future.

<u>IF PROXY</u>: We are conducting a national study for the Social Security Administration. This study includes two interviews. This is the second and final one. You'll receive [\$30/\$40/\$50] for completing this 25-35 minute interview. It asks about [EP's] educational and employment experiences, and about any benefits (his/her) household may receive. (P18M-I.ELIG)

IF NEEDED:

All your answers will be held in strict confidence. Nothing you say will affect any benefits or services you may receive, now or in the future. We can start now and take a break whenever you need one. We expect the parent interview will take most people about 26 minutes to complete, depending on your experiences. The youth interview can take from 20 to 35 minutes to complete.

CONTINUE1

PROGRAMMER: MISSING VALUE NOT ALLOWED.

ALL POTENTIAL RESPONDENTS (P2 A ELIG=1)

[YOUTH],

QUESTION TEXT: IF EP, FILL [YOU] AND IF PROXY, FILL [EP]

RESPONSE OPTIONS: FILL [EP]

P2_A_YthLiv. Does [YOUTH] live with [you/EP], with another parent or legal guardian, a group home or institution, or somewhere else? (P18M-I.RTYPE)

SOFT CHECK: IF P2_A_YTHLIV=3:

May I confirm I have recorded correctly that [YOUTH] lives in a group home, institution, or boarding school?

SOFT CHECK: IF P2 A YTHLIV =4:

May I confirm I have recorded correctly that [YOUTH] no longer lives with any parent, a foster parent, or any legal guardian? And does not live in a group home or institution?

P2 A YTHLIV = 1-4

[YOUTH], IF EP, FILL [are you], IF PROXY, FILL [is EP]

P2_A_YouthRel. How [are you/is EP] related to [YOUTH]? (P18M-I.ELIG)

INTERVIEWER:

IF R SAYS <u>MOTHER OR FATHER</u>, PROBE TO SEE IF THAT IS BIOLOGICAL, STEP, OR FOSTER. IF A <u>NON-FAMILY MEMBER</u>, NOT A FOSTER PARENT, PROBE TO SEE IF ENROLLING PARENT WAS A STAFF MEMBER FOR AN AGENCY WHERE YOUTH WAS RECEIVING SERVICES AT THE TIME OF ENROLLMENT. IF R IS <u>NOT YOUTH'S PARENT OR GUARDIAN</u>, PROBE TO CONFIRM (1) HE/SHE LIVES OR STAYS IN THE SAME HOUSEHOLD AS EP (2)

WHETHER HE/SHE IS A FAMILY MEMBER.

CODE ONE ONLY

MOTHER (BIOLOGICAL OR ADOPTED)	GO TO P2_A_Consent
FATHER (BIOLOGICAL OR ADOPTED)2	GO TO P2_A_Consent
STEP MOTHER	GO TO P2_A_Consent
STEP FATHER4	GO TO P2_A_Consent
LEGAL GUARDIAN - FEMALE5	GO TO P2_A_Consent
LEGAL GUARDIAN - MALE	GO TO P2_A_Consent
FOSTER PARENT: FOSTER MOTHER	GO TO P2_A_Consent
FOSTER PARENT: FOSTER FATHER 8	GO TO P2_A_Consent
FAMILY MEMBER LIVING IN HH (PROXY FOR EP)9	GO TO P2_A_Consent
NON-FAMILY MEMBER LIVING IN HH (PROXY FOR EP)10	GO TO P2_A_Consent
STAFF FROM AN AGENCY/SERVICE PROVIDER11	GO TO P2_A_ParInelig
DON'T KNOWD	TERMINATE REFUSAL
REFUSEDR	TERMINATE REFUSAL
PROGRAMMER: MISSING VALUE NOT ALLOWED	

SOFT CHECK: IF P2_A_YOUTHREL=D OR R;

This helps us document who completed each interview. Your name will be kept private and will not be linked to your answers in any reports we create. Are there any questions I can answer or any concerns you may have about answering this question that I could help address?

PARENT CASE INELIGIBLE (P2 A YOUTHREL=11) [YOUTH] [his/her] P2 A Parinelig. Thanks for this information. Based on this, we will not need to complete an interview with you. [IF YOUTHDECEASED = 0 AND YOUTHWITHDRAWN = 0 AND YOUTHFINAL = 0: However, we would still like to speak with [YOUTH] for [his/her] interview.] (New) **INTERVIEWER:** IF YOUTH IS AVAILABLE, CLOSE PARENT RECORD AND OPEN YOUTH RECORD TO BEGIN YOUTH INTERVIEW. IF YOUTH IS DECEASED. PROBE FOR DATE OF DEATH AND LOG IN NOTES. IF YOUTH IS UNAVAILABLE, CLOSE PARENT RECORD AND OPEN YOUTH RECORD TO SET APPOINTMENT WITH YOUTH. PROGRAMMER: IF YOUTHDECEASED = 1 OR YOUTHWITHDRAWN = 1 OR YOUTHFINAL = 1, SHOW OPTION 4 BELOW. ELSE, SHOW OPTIONS 1, 2, AND 3 BELOW. YOUTH IS AVAILABLE 1 CLOSE PARENT RECORD AND OPEN YOUTH RECORD (DISP = 50) YOUTH DECEASED2 GO TO P2 A YOUTHDEC **CLOSE PARENT** RECORD, OPEN YOUTH RECORD, AND SET APPOINTMENT WITH YOUTH (DISP = 50) YOUTH IS COMPLETE OR INELGIBLE......4 TERMINATE (DISP = 50) PROGRAMMER: DO NOT ALLOW MISSING VALUES. P2 A ELIG=2 OR P2 A PARINELIG=2 (HE/SHE) P2_A_YouthDec. I am very sorry to hear that (he/she) passed away. We will not need to complete an interview with you. Please accept my condolences. Goodbye. TERMINATE (DISP = 41)

ALL POTENTIAL RESPONDENTS (P2_A_YOUTHREL=1-10)

[you/EP] FILL TEXT AS FOLLOWS: IF EP (HELLO=1), IF NOT EP: (REPREL=9 OR 10)

P2_A_Consent. Before we begin, may I confirm that you read the letter that we sent [you/EP]?

On the back, there was information about how SSA can use and share the information you provide. Would you like me to read that to you now? Or would you prefer to begin the interview . . . (P18M-I.Consent)

INTERVIEWER: READ TEXT BELOW IF REQUESTED

IF EP:

Section 1110 of the Social Security Act, as amended, authorizes us to request this information. We will use this information to evaluate the impact of services provided to you (the minor participant or household member) during your participation in the Promoting Readiness of Minors in SSI (PROMISE) project. Providing us this information is voluntary. Failing to provide us with all or part of the information will not affect the SSI benefits that you, your child, or other household members receive now or in the future.

We may use the information for the administration of our programs, including sharing information: (1) To comply with Federal laws requiring the release of information from our records (e.g., to the Government Accountability Office and the Department of Veterans Affairs); and (2) To facilitate audit, investigative, or statistical research activities necessary to assure the integrity and improvement of our programs (e.g., to the Bureau of Census and to private entities under contract with us). A complete list of when we may share your information with others, called routine uses, is available in our Privacy Act System of Records Notice entitled, Supplemental Security Income Studies, Surveys, Records and Extracts (Statistics), 60-0203. Additional information about this and other system of records notices and our programs are available from our Internet website at www.socialsecurity.gov or at your local Social Security office.

IF NOT EP:

Section 1110 of the Social Security Act, as amended, authorizes us to request this information. We will use it to evaluate the impact of any services provided to [EP] during (his/her) participation in a national study. Providing us this information is voluntary. Failing to provide us with all or part of the information will not affect the SSI benefits that [EP], (his/her) child, or other household members receive now or in the future.

We may use the information for the administration of our programs, including sharing information: (1) to comply with Federal laws requiring the release of information from our records (e.g., to the Government Accountability Office and the Department of Veterans Affairs); and (2) to facilitate audit, investigative, or statistical research activities necessary to assure the integrity and improvement of our programs (e.g., to the Bureau of Census and to private entities under contract with us). A complete list of when we may share this information with others, called routine uses, is available in our Privacy Act System of Records Notice entitled, Supplemental Security Income Studies, Surveys, Records and Extracts (Statistics), 60-0203. Additional information about this and other system of records notices and our programs are available from our website at www.socialsecurity.gov or at a local Social Security office.

	CODE ONE	<u>ONLY</u>
OK TO BEGIN INTERVIEW NOW	1	
NOT A GOOD TIME	2	SET CALLBACK
REFUSED	R	TERMINATE REFUSAL

PROGRAMMER: IF MODE IS <u>WEB</u> (I.E. A FIELD INTERVIEW), DISABLE (DO NOT PRESENT) RESPONSE OPTION 2.

PROGRAMMER: DO NOT ALLOW MISSING VALUE OR DON'T KNOW.

address?

ALL CONSENTING (P2 A CONSENT=1) [EP] [Proxy] [\$30/\$40/\$50] PROGRAMMER: IF CURRENT DATE > INCENTIVECUTOFFDATE, FILL \$30. IF CURRENT DATE <= INCENTIVECUTOFFDATE. FILL \$40 IF INCENTIVEGROUP = A. IF CURRENT DATE <= INCENTIVECUTOFFDATE, FILL \$50 IF INCENTIVEGROUP = B. May I double check the spelling of your name? I have [EP/PROXY], is that P2 A Q1. correct? IF NEEDED: This information tells us who answered the questions and will be used to send your [\$30/\$40/\$50] payment after completing the interview. INTERVIEWER: CORRECT OR UPDATE IF NEEDED - ELSE CODE "1" BELOW. CORRECT AS SHOWN 1 REFUSED......R TERMINATE REFUSAL PROGRAMMER: MISSING VALUE NOT ALLOWED. SOFT CHECK: IF P2 A Q1=R; This helps us document who completed each interview. Your name will be kept in confidence and will not be linked to your answers in any reports we create. Are there any questions I can answer or any concerns you may have about answering this question that I could help address? P2 A Q1=99 **RECORD RESPONDENT NAME BELOW:** P2 A Q1A. (STRING 30) [FIRST NAME] (STRING 1) [MIDDLE INITIAL] [LAST NAME] REFUSED......R TERMINATE REFUSAL PROGRAMMER: MISSING VALUE NOT ALLOWED. SOFT CHECK: IF P2 A Q1A=r; This helps us document who completed each interview. Your name will

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be kept in confidence and will not be linked to your answers in any reports we create. Are there any questions I can answer or any concerns you may have about answering this question that I could help

ALL CONSENTING (P2 A CONSENT=1) [your/EP's] [you/EP] [Are you/Is EP] P2 A Q2. The first few questions ask about [your/EP's] household and living situation. Your answers will help make the interview go faster because I will know which questions apply to [you/EP]. [Are you/Is EP]... (P18M-I.Q2/NLTS2012, H1) INTERVIEWER: PROBE, FOR CURRENT MARITAL STATUS. IF ONCE DIVORCED, BUT NOW REMARRIED, THE STATUS WOULD BE "MARRIED." CODE ONE ONLY Married, 1 In a marriage-like relationship. Separated, 4 Single, never married? 6 DON'T KNOW D REFUSEDR SOFT CHECK: IF P2 A Q2=D or R; This information helps us know which types of questions to ask about [your/EP's] household. Are there any questions I can answer or any concerns you may have about answering this question that I could help address? PROGRAMMER: FOR ALL SUBSEQUENT ITEMS THAT FILL [SPOUSE/PARTNER] FILL SPOUSE IF P2 A Q2 = 1, FILL PARTNER IF P2_A_Q2 = 2 EP IS MARRIED, MARRIAGE-LIKE RELATIONSHIP (P2 A Q2= 1 OR 2) [your/EP's] [spouse/partner] [you/EP] P2 A Q3. Does [your/EP's] [spouse/partner] live in the same household with [you/EP]? (P18M-I.Q3) PROBE: Your answer to this question helps me make sure you get asked only the questions that apply to you. CODE ONE ONLY DON'T KNOW.......D

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REFUSED......R

ALL CONSENTING (P2_A_C0	DNSENT=1)	
[yourself/EP] [your/(his/her)] [F	RESPONSE TO P2_A_Q4]	
P2_A_Q4. Including [you total? (NEW)	rself/EP], how many people live or sta	y in [your/ (his/her)] household in
_ PEOPLE IN H	OUSEHOLD (1-25)	
DON'T KNOW		D
REFUSED		R
SOFT CHECK: IF P2_A_Q4>1 household at this time?	10; May I confirm I've recorded [P2_A_0	Q4] people live or stay in this
SEX = FROM SAMPLE LOA	D FILE ONLY (SAMPLE LOAD FILL ON '	VARIABLE = " ")
[YOUTH]	STILL ONET (OAM) LE LOAD FILL ON	VAINABLE)
[YOUTH] male or fem IF NEEDED: This	uter can fill the right words in future ale? (P18M-I.Q4) information helps the computer fill in ' juestions ahead.	
the c	aconono ancaa.	CODE ONE ONLY
YOUTH IS MALE		<u></u>
DON'T KNOW		D
REFUSED		R
	PROGRAMMER BOX 1	
THEN: USE MALE FILLS	GIC IN REFERENCES TO YOUTH: IF LOS (HIM, HIS, HE)./IF LOAD FILE= 2 OR IF HE)/IF LOAD FILE= . AND P2_A_Q5 = De), (HIS/HER).	F P2_A_Q5=2 THEN: USE
ALL CONSENTING PROXIES	(P2 A CONSENT=1) AND (REPREL=9	OR 10)
[EP]	(123, COORSELLE 1) 7 11 12 (1.12, 1.12, 1.12, 1.12, 1.12, 1.12, 1.12, 1.12, 1.12, 1.12, 1.12, 1.12, 1.12, 1.12	7 (1.1.10)
P2_A_Q6. Is [EP] male	or female? (P18M-I.Q4)	"ho" or "obo" to decorbe IFDI in the
	information helps the computer fill in fitions ahead.	
ED 10 1441 =		CODE ONE ONLY
EL 19 LEIMATE		

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DON'T KNOW	D
REFUSED	R
PROGRAMM	ER BOX 2
USE TO GUIDE FILL LOGIC IN REFERENCES TO THEN: USE MALE FILLS (HIM, HIS, HE)./ IF P2_A SHE)/IF P2_A_Q6= D OR R THEN: PRESENT BOT	_Q6=2 THEN: USE FEMALE FILLS (HER,
ALL CONSENTING (P2 A CONSENT=1)	
[YOUTH] [P2_A_Q7]	
[10011][F2_A_Q7]	
P2_A_Q7. For verification purposes, can you p (P18M-I.Q5a, rev)	please tell me [YOUTH]'s date of birth?
PROGRAMMER: COLLECT DATE WITH SEPARA	ATE FIELDS
DO NOT PROGRAM YEAR RANGE AS HARD CH	HECK
_ / /	
(1-12) (1 - 31) (1997- 2002)	
DON'T KNOW	D GO TO P2_A_Q7A
REFUSED	R GO TO P2_A_Q7A
PROGRAMMER: MISSING NOT ALLOWED.	
SOFT CHECK: IF P2_A_Q7 NE BLANK; May I confirm I	have recorded [P2_A_Q7]?
P2_A_Q7 RESPONSE IS VALID DATE AND ≠ YOUTH D	OOB ON FILE OR D, R
[YOUTH]	
P2_A_Q7A. And one more time, just so I can co person, what is [YOUTH]'s date of birth? (P1	
PROGRAMMER: COLLECT DATE WITH SEPARA	ATE FIELDS
DO NOT PROGRAM YEAR RANGE AS HARD CH	HECK
_ / /	
(1-12) (1 - 31) (1997- 2002)	
DON'T KNOW	D
REFUSED	R
PROGRAMMER: MISSING NOT ALLOWED.	
SOFT CHECK: IF P2_A_7 DOES NOT MATCH YOUTH have recorded [P2_A_Q7A]?	DOB; Thanks for this information. May I confirm I

ALL CONSENTING (P2 A CONSENT=1)

P2_A_Q8. IF R IS CONTINUING, SELECT "ABLE TO CONTINUE" BELOW. IF R IS NOT ABLE TO CONTINUE AND YOUTH NEEDS TO COMPLETE INTERVIEW, CHECK WHETHER YOUTH IS AVAILABLE. IF SO, SET CALLBACK FOR EP AND SELECT "CONTINUE WITH YOUTH" BELOW. IF NOT, SET CALLBACK FOR EP AND SELECT "YOUTH UNAVAILABLE" BELOW. IF R IS NOT ABLE TO CONTINUE AND YOUTH DOES NOT NEED TO COMPLETE INTERVIEW, SET CALLBACK FOR EP AND SELECT "YOUTH COMPLETE OR INELIGIBLE" BELOW.

PROGRAMMER: IF YOUTHDECEASED = 1 OR YOUTHWITHDRAWN = 1 OR YOUTHFINAL = 1, SHOW OPTIONS 1 AND 4 BELOW. ELSE, SHOW OPTIONS 1, 2, AND 3 BELOW.

P2_B_INTRO

PARENT SURVEY R BREAK OFF – CONTINUE WITH YOUTH2 SET CALLBACK,

CLOSE PARENT

RECORD, OPEN

YOUTH RECORD

PARENT SURVEY R BREAK OFF - YOUTH COMPLETE OR INELIGIBLE 4 SET CALLBACK

PROGRAMMER BOX: CALLBACKS

ROUTE THROUGH ITEMS AS Y BELOW FOR SECTION I BEFORE RESUMING INTERVIEW. R'S WILL VERIFY THESE ITEMS WITH PRIOR RESPONSES SHOWN ON THE SCREEN. THIS HELPS US CONFIRM WE ARE SPEAKING WITH THE SAME R AS BEFORE, TO UPDATE THE INFO FOR THE NEW R, OR UPDATE KEY VARIABLES THAT IMPACT IMPORTANT LOGIC LATER IN THE INTERVIEW.

Variable Name Descriptor Action Step for each below: Yes (Y) / No (N)		s (Y) / No (N)		
		Repeat / Confirm at CB?	Save prior response to variable in dataset	Keep or <u>remove</u> <u>resulting data</u> in later logic paths if answer adjusts path
Hello.	Speaking with	Υ	Υ	Remove
NeedRep	IF NEEDED: Speak with proxy	Y – if new R	N	Remove
NewNameRep	Proxy/interpreter name	Y – if new R	N	N/A
RepRel	Proxy/interpreter relation to parent	Y – if new R	N	N/A
NeedRepPhone	Proxy/interpreter phone number	Y – if new R	N	N/A
NeedRepAddr.	Proxy/interpreter address	Y – if new R	N	N/A
P2_A_ELIG.	Survey scope info	N	N	N/A
P2_A_YthLiv.	Youth living arrangement	Υ	Υ	N/A
P2_A_YouthRel.	Relation to youth	Y- if new R	Υ	Do not remove

Appendix B

P2_A_ParInelig.	Parent ineligible	N/A	N	N/A
P2_A_Consent.	Consent	N	N	N/A
P2_A_Q1.	R name spelling confirmed	Y – if new R	N	N/A
P2_A_Q1A.	Update parent name	Y – if new R	N	N/A
P2_A_Q2.	Parent marital status	Υ	Υ	Do not remove
P2_A_Q3.	Parent and spouse living together	Υ	Υ	Do not remove
P2_A_Q4.	N people living in household	Υ	Υ	N/A
P2_A_Q5.	Youth gender	N	N	N/A
P2_A_Q6.	Parent gender	N	N	N/A
P2_A_Q7.	Youth DOB	Υ	Υ	N/A
P2_A_Q7A.	Youth DOB (repeat)	Υ	Υ	N/A
P2_A_Q8.	R continue	N	N	N/A

Section B Educational Credentials and Employment Experience

SECTION P2_B_A. ENROLLING PARENT EDUCATIONAL CREDENTIALS

ALL CONSENTING (P2_A_CONSENT=1)	
[your /EP's]	

P2_B_INTRO. My first set of questions are about [your /EP's] education and employment.

CONTINUE 1

ALL CONSENTING (P2_A_CONSENT=1)

[you have/EP has]

P2_B_A1. What is the highest grade or year of school [you have/EP has] finished? (P18M-III.B1)

INTERVIEWER: READ CATEGORIES IF NECESSARY. IF R SAYS 'SOME COLLEGE' CODE AS 5. IF R NAMES A SPECIFIC LICENSE THEY RECEIVED (E.G., ENGINEERING LICENSE) PROBE FOR THE PLACE THAT PROVIDED THE LICENSE.

 CODE ONE ONLY

 8TH GRADE OR LESS
 1

 9TH GRADE OR ABOVE, NOT A HIGH SCHOOL GRADUATE
 2

 HIGH SCHOOL GRADUATE
 3

 GED
 4

 POST-HIGH SCHOOL EDUCATION, NO COLLEGE DEGREE
 5

 VOCATIONAL TECHNICAL (VOC-TECH) DEGREE OR CERTIFICATE
 6

 2-YEAR OR 3 YEAR COLLEGE DEGREE/AA DEGREE
 7

 4-YEAR COLLEGE DEGREE/BACHELOR'S DEGREE
 8

 MASTER'S DEGREE
 9

 PHD, MD, JD, LLB OR OTHER PROFESSIONAL GRADUATE DEGREE
 10

 NEVER ATTENDED SCHOOL
 11

 OTHER
 99

 DON'T KNOW
 D

 REFUSED

SECTION P2_B_B. ENROLLING PARENT EMPLOYMENT

ALL CONSENTING (P2_A_CONSENT=1)
[you/EP]

P2_B_B1. Did [you/EP] work for pay at any time in the past year?

PROBE: We are interested in both full-time and part-time work for pay or profit.

INTERVIEWER: CODE 'NO' FOR ANY REASONS PROVIDED NOT WORKING (EXAMPLE: UNABLE TO WORK, IN SCHOOL).

YES	
NO0	GO TO P2_B_B7
RETIRED2	GO TO Box 3
DON'T KNOWD	GO TO P2_B_B7
REFUSEDR	GO TO P2_B_B7

SOFT CHECK: IF P2_B_B1=D: This information is really important to the PROMISE study. Working for pay could include any job held since this time last year.

INTERVIEWER – PROBE BY SEASON OR MONTH, AS APPROPRIATE, TO SEE IF R/EP WORKED IN PAST YEAR.

SOFT CHECK: IF P2_B_B1=R: This information is really important to the PROMISE study. May I ask what your concerns are about providing the answer to this question?

EP WORKED FOR PAY IN PAST YEAR (P2_B_B1=1)
[you/EP]

P2_B_B2. Did <u>any</u> of the jobs [you/EP] worked in the past <u>year</u> offer. . . (YTD- 36-m II.C3, rev)

PROBE: It does not matter if [you take/EP takes] this benefit or not. We just want to know if it is offered.

	YES	NO	DK	REF
a. Health insurance?	1	0	D	R
b. Paid vacation or sick leave?	1	0	D	R
c. Any kind of pension or retirement plan?	1	0	D	R

EP WORKED FOR PAY IN PAST YEAR (P2_B_B1=1)	
[you were/EP was] [you/EP] [you work/EP works] [you were/(h	e/she) was]
P2_B_B3. When [you were/EP was] working in the pas [you/EP] <u>usually</u> work?	t year, about how many hours <u>per week</u> did
Please include hours worked across all jobs if [you time. (YTD-36m, II.B6 rev)	worked/EP worked] more than one job at that
PROBE: Which days [did you/did (he/she)] work?/ What tin [did you/did (he/she)] finish work? [Did you/did (he/	
HOURS PER WEEK USUALLY WORKED	GO TO P2_B_B4
(0-168 ALLOWABLE RANGE)	
DON'T KNOW	D GO TO P2_B_B3A
REFUSED	R GO TO P2_B_B3A
SOFT CHECK: IF P2_B_B3 >50; May I confirm I have correct average, when [you were/(he/she) was] working in the pas	
USUAL HRS EP WORKED FOR PAY IS DK OR REF (P2_B_I	B3= D OR R)
[you/EP]	
P2_B_B3A. Do you think [you/EP] worked (YTD-36m	o, II.B6 rev)
PROBE: Your best estimate is fine.	
	CODE ONE ONLY
Less than 10 hours per week?	1
10-20 hours per week?	2
21-30 hours per week?	3
31-35 hours per week?	4
Or more than 35 hours per week?	5
DON'T KNOW	D

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REFUSED.....R

EP WORKED FOR PAY IN PAST YEAR (P2 B B1=1)

[do you/does (he/she)] [you are/(he/she) is] [you have/(he/she) has] [you expect/(he/she) expects]

P2 B B4.

How many weeks per year [do you/does (he/she)] usually work, including paid vacation and holidays? (NBS, C9)

PROBE: There are 52 weeks in a year. Please include time off for vacation and holidays if [you are/ (he/she) is] paid for that time.

PROBE: If [you have/ (he/she) has] worked less than a year, please answer for the number of weeks [you expect/ (he/she) expects] to work.

_ WEEKS PER YEAR (1-52)	
DON'T KNOW	D
REFUSED	R

EP WORKED FOR PAY IN PAST YEAR (P2 B B1=1)

[you were/EP was] [you/(he/she)] [you/EP]

P2_B_B5.

When [you were/EP was] working in the past year, about how much did [you/ (he/she)] earn <u>before</u> taxes and other deductions? Please include wages, salary, commissions, bonuses and tips from all jobs. Please tell me first how much [you/ (he/she)] earned and then tell me how you are reporting the earnings, such as by the hour, the day, week, month, or year. (NEW)

INTERVIEWER: IF EARNINGS VARIED A LOT BY MONTH, ASK R TO REPORT ON A TYPICAL MONTH LAST YEAR.

PROBE: How much did [you/(he/she)] earn each week in a typical month?

INTERVIEWER:	IF NO EARNINGS, RECORD "0.	,	
\$ _ ,	_ (0-500000)	GO TO P2_B_B5_UNIT	
DON'T KNOW		D	GO TO P2_B_B6
REFUSED		R	GO TO P2 B B6

P2 B B5 = EARNINGS POPULATED AND NE TO D OR R

P2 B B5 Unit. RECORD UNIT BELOW:

CODE ONE OF	ו שור	
-------------	-------	--

PER THING1	GO TO P2_B_B5_hrsthing
PER HOUR2	GO TO P2_B_B7
PER DAY3	GO TO P2_B_B7
PER WEEK4	GO TO P2_B_B7
TWICE A MONTH5	GO TO P2_B_B7
ONCE A MONTH6	GO TO P2_B_B7
YEAR7	GO TO P2_B_B7
DON'T KNOWD	GO TO P2_B_B6
REFUSEDR	GO TO P2_B_B6

SOFT CHECK: IF P2_B_B5 >2,000 and P2_B_B5_unit=6; May I confirm I have correctly recorded that [you/(he/she)] earned \$[P2_B_B5] in a typical month last year?

P2_B_B5_UNIT = 1

[your/EP's] [did you/did (he/she) (make/do/sell)]

P2 B B5 hrsthing

[your/EP's]

When [you were/EP was] working in the past year, about how many things [did you/did (he/she)] (make/do/sell) in an hour? (NEW)

RECORD THINGS PER HOUR

_ _ THINGS/HOUR (1-999)
GO TO P2_B_B7
DON'T KNOW

EP EARNINGS IN TYPICAL MONTH PAST YEAR IS DK OR REF ($P2_B_B5=D$ OR R) OR ($P2_B_B5_UNIT=D$ OR R) OR ($P2_B_B5_HRSTHING=D$ OR R).

P2_B_B6. Were [your/EP's] earnings in a <u>typical</u> month last year more or less than \$2,500? (NEW) PROBE: Your best estimate is fine.

CODE ONE ONLY

MORE THAN \$2,500 1	GO TO P2_B_B6B
\$2,500 OR LESS	
DON'T KNOWD	GO TO P2_B_B7
REFUSEDR	GO TO P2_B_B7

EP EARNINGS IN TYPICAL MONTH IN PAST YEAR >\$2,500 (P2_B_B6=1)

[your/EP's]

\$1,001 to \$1,5004

P2_B_B6B. Were [your/EP's] earnings in a typical month last year ... (NEW)

CODE ONE ONLY

GO TO P2 B B7

\$2,501 to \$3,000	1
\$3,001 to \$3,500	2
\$3,501 to \$4,000	3
\$4,001 to \$4,500	4
\$4,501 to \$5,000, or was it	5
More than \$5,000?	6
DON'T KNOW	D
REFUSED	R

ALL CONSENTING (P2 A CONSENT=1) AND EP WORKED FOR PAY IN PAST YEAR OR DK OR REF (P2 B B1=1 OR D OR R) [Are you/Is EP] P2_B_B7. [Are you/Is EP] currently working at a job for pay? (YTD Baseline-60P, rev) PROBE: We are interested in both full-time and part-time work for pay or profit CODE 'NO' FOR ANY REASONS PROVIDED NOT WORKING (EXAMPLE: INTERVIEWER: RETIRED, UNABLE TO WORK, IN SCHOOL). GO TO BOX 3 GO TO P2 B B8 GO TO P2 B B8 REFUSED......R GO TO P2 B B8 SOFT CHECK: IF P2 B B7=d: This information is really important to the PROMISE study. Working for pay could include any job [you/EP] may be working at this time. SOFT CHECK: IF P2_B_B7=r: This information is really important to the PROMISE study. May I ask what your concerns are about providing the answer to this question? PROGRAMMER: IF P2 B B7=1, 0, D, or R- CASE MEETS QUALIFIED LEVEL TO BE CONSIDERED PARTIAL COMPLETE. EP NOT WORKING FOR PAY NOW OR CURRENT WORK STATUS DK OR REF (P2 B B7=0, D, OR R) [Do you/Does EP] [Do you/Does EP] currently want a job, either full or part time? (P18M-III.A4./CPS D-ant, P2_B_B8. rev) CODE ONE ONLY GO TO P2 B B9 MAYBE, IT DEPENDS2 GO TO B2 B B9 GO TO P2 B B10 GO TO P2 B B10 REFUSED......R GO TO P2 B B10 EP NOT WORKING FOR PAY NOW, WANTS JOB (P2 B B8=1 OR 2) [Have you/Has EP] P2 B B9. [Have you/Has EP] been looking for work during the last four weeks? (NBS-B28)

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REFUSED......R

EP NOT WORKING FOR PAY NOW OR CURRENT WORK STATUS DK OR REF (P2_B_B7=0, D, OR R)

[you/EP] [you are/EP is] [Are you/Is EP] [you want/(he/she) wants]

P2_B_B10. I'm going to read a list of reasons why some people do not work. For each, please tell me if it is a reason why [you are/EP is] not currently working.

[Are you/Is EP] not working because . . . (NBS-2017, B25, CPS)

IF NEEDED: I need to read the entire list even though some of the reasons may not apply to

[you/EP]. If a reason does not apply, please just say so.

INTERVIEWER: IF RESPONDENT SAYS 'DOES NOT APPLY' CODE AS 'NO'.

PROGRAMMER: RANDOMIZE SEQUENCE OF THE ROWS BELOW.

	YES	NO	DK	REF
a. [You/EP] cannot find a job [you want/(he/she) wants].	1	0	D	R
b. [You do/EP does] not have reliable transportation to and from work.	1	0	D	R
c. [You are/EP is] caring for children or others.	1	0	D	R
 d. [You do/EP does] not want to lose benefits [you need/(he/she) needs] like Social Security, disability insurance, workers' compensation, or Medicaid. 	1	0	D	R
e. [You/EP] cannot find a job [you are/(he/she) is] qualified for.	1	0	D	R

EP NOT WORKING FOR PAY NOW OR CURRENT WORK STATUS DK OR REF (P2_B_B7=0, D, OR R)	
[you are/EP is]	

P2_B_B11. Are there any <u>other</u> reasons why [you are/EP is] not working at this time that we have not yet mentioned?

YES1	
NO	GO TO BOX 3
DON'T KNOWD	GO TO BOX 3
REFUSEDR	GO TO BOX 3

OTHER REASON WHY EP NOT WORKING FOR PAY NOW (P2_B_B11=1)

[are you/is EP]

P2_B_B11_Spec. What are the other reasons [you are/EP is] not working at this time? (NBS 2017, BP4a, rev, CPS)

PROBE: Any other reason?

INTERVIEWER: RECORD VERBATIM THEN CODE ALL THAT APPLY

_____ (STRING 750)

P2 B B11 SpecCodes. ASSIGN CODES TO VERBATIM RESPONSE PROVIDED:

CODE ALL THAT APPLY

WAITING TO FINISH SCHOOL OR A TRAINING PROGRAM	. 1
ON LAYOFF (TEMPORARY OR INDEFINITE)	.2
SLACK WORK/BUSINESS CONDITIONS	.3
LEAVE (MATERNITY/PATERNITY, PERSONAL) AND VACATION	4
PREVIOUS ATTEMPTS TO WORK HAVE BEEN DISCOURAGING	.5
CANNOT GET HELP NEEDED WITH PERSONAL CARE. [INCLUDES HELP DRESSING AND BATHING TO GET READY FOR WORK, OR EATING LUNCH, O USING THE RESTROOM AT WORK.]	
DO NOT HAVE SPECIAL EQUIPMENT OR MEDICAL DEVICES NEEDED IN ORD TO WORK	
WORKPLACES ARE NOT ACCESSIBLE TO, OR LACK ACCOMMODATIONS FOI PEOPLE WITH A DISABILITY	
RETIRED	.9
OTHER REASON	.10
DON'T KNOW	D
REFUSED	.R

PROGRAMMER BOX 3

IF SPOUSE/PARTNER LIVES IN HOUSEHOLD (P2_A_Q3=1), GO TO P2_B_C1. ELSE GO TO P2_B_D12.

PROGRAMMER BOX 3A

IF R IS EP (HELLO=1) USE FILLS FOR YOUR SPOUSE/PARTNER.

IF R IS EP'S SPOUSE/PARTNER (REPREL=9), USE FILLS FOR 'YOU/YOUR'.

IF R IS OTHER ADULT HH MEMBER (REPREL=10), USE FILLS FOR "EP'S SPOUSE/PARTNER." THESE FILLS WILL BE PRESENTED CONSISTENTLY IN THIS SEQUENCE FOR ALL APPLICABLE ITEMS.

SECTION P2 B C. EDUCATION CREDENTIALS OF ENROLLING PARENT'S SPOUSE/PARTNER

EP'S SPOUSE/PARTNER LIVES IN HOUSEHOLD (P2 A Q3=1)

[your (spouse/partner) has/you have/(EP's (spouse/partner) has]

P2 B C1.

What is the highest grade or year of school [your (spouse/partner) has/you have/ (EP's (spouse/partner) has] finished? (P18M-III.B1)

INTERVIEWER: READ CATEGORIES IF NECESSARY. IF R SAYS 'SOME COLLEGE' CODE AS 5. IF R NAMES A SPECIFIC LICENSE THEY RECEIVED (E.G., ENGINEERING LICENSE) PROBE FOR THE PLACE THAT PROVIDED THE LICENSE.

SECTION P2_B_D. EMPLOYMENT OF ENROLLING PARENT'S SPOUSE/PARTNER

EP'S SPOUSE/PARTNER LIVES IN HOUSEHOLD (P2_A_Q3=1)

[your (spouse/partner)/you/EP's (spouse/partner)]

P2 B D1.

Did [your (spouse/partner)/you/EP's (spouse/partner)] work for pay at <u>any</u> time in the past <u>year</u>? (New)

PROBE: We are interested in both full-time and part-time work for pay or profit

INTERVIEWER: CODE 'NO' FOR ANY REASONS PROVIDED NOT WORKING (EXAMPLE: UNABLE TO WORK, IN SCHOOL).

YES	
NO	GO TO P2_B_D7
RETIRED2	GO TO P2_B_D12
DON'T KNOWD	GO TO P2_B_D7
REFUSEDR	GO TO P2 B D7

SOFT CHECK: IF P2_B_D1=d: This information is really important to the PROMISE study. Working for pay could include <u>any</u> job held since this time last year.

INTERVIEWER – PROBE BY SEASON OR MONTH, AS APPROPRIATE, TO SEE IF EP'S SPOUSE/PARTNER WORKED IN PAST YEAR.

SOFT CHECK: IF P2_B_D1=r: This information is really important to the PROMISE study. May I ask what your concerns are about providing the answer to this question?

EP'S SPOUSE/PARTNER WORKED FOR PAY IN PAST YEAR (P2_B_D1=1)

[your (spouse/partner)/you/EP's (spouse/partner)]

P2_B_D2.

Did <u>any</u> of the jobs [your (spouse/partner)/you/EP's (spouse/partner)] worked in the past year offer. . . (YTD 36m-II.C3, rev)

PROBE: It does not matter if [your (spouse/partner) takes/you take/EP's (spouse/partner) takes] this benefit or not. We just want to know if it is offered.

	YES	NO	DK	REF
a. Health insurance?	1	0	D	R
b. Paid vacation or sick leave?	1	0	D	R
c. Any kind of pension or retirement plan?	1	0	D	R

EP'S SPOUSE/PARTNER WORKED FOR PAY IN PAST YEAR (P2 B D1=1) [your (spouse/partner) was/you were/EP's (spouse/partner) was] P2 B D3. When [your (spouse/partner) was/you were/EP's (spouse/partner) was] working in the past year, about how many hours per week did [(he/she)/you/(he/she)] usually work? Please include hours worked across all jobs if [(he/she) worked/you worked/(he/she) worked] more than one job. (YTD-36mo, II.B6, rev) Which days [does (he/she)/do you/does (he/she)] work?/ What time [does (he/she)/do you/does (he/she)] start work?/What time [does (he/she)/do you/does (he/she)] finish work? [Does (he/she)/do you/does (he/she)] take a break for lunch? HOURS PER WEEK USUALLY WORKED GO TO P2 B D4 (0-168 ALLOWABLE RANGE) REFUSED......R SOFT CHECK: IF P2 B D3 >50; May I confirm I have correctly recorded [FILL] hours per week, on average, when [your (spouse/partner) was/you were/EP's (spouse/partner) was] working in the past year? USUAL HRS EP'S SPOUSE/PARTNER WORKED FOR PAY IS DK OR REF (P2 B D3=D OR R) Do you think [(he/she)/you/(he/she)] worked ... (YTD-36mo, II.B6) P2 B D3A. PROBE: Your best estimate is fine. CODE ONE ONLY Less than 10 hours per week?1 31-35 hours per week?......4 REFUSED......R

P2_B_D4. How many weeks per year [does (he/she)/do you/does (he/she)] usually work, including paid vacation and holidays? (NBS, C9)

EP'S SPOUSE/PARTNER WORKED FOR PAY IN PAST YEAR (P2 B D1=1)

PROBE:	There are 52 weeks in a year. Please inc [(he/she) is/you are/(he/she) is] paid for		/acati	ion and holidays if
PROBE:	If [(he/she) has/you have/(he/she) has] we the number of weeks [(he/she) expects/y			
_ WEEK	S PER YEAR (1-52)			
DON'T KNOW			D	
REFUSED			R	
EP'S SPOUSE/PARTN	NER WORKED FOR PAY IN PAST YEAR (I	P2_B_D1=1)		
[you were/EP was] [yo	u/(he/she)] [you/EP]			
past year, abou	oouse/partner) was/you were/EP's (sp ut how much did [(he/she)/ you/ (he/s lease include wages, salary, commis	he)] earn <u>before</u>	taxe	es and other
	first how much [(he/she)/you/ (he/she he earnings, such as by the hour, the			•
INTERVIEWER	: IF EARNINGS VARIED A LOT BY MO MONTH LAST YEAR.	NTH, ASK R TO R	EPO	RT ON A TYPICAL
PROBE:	How much did [(he/she)/you/(he/she)] ea	arn each week in a	a <u>typi</u>	cal month?
INTERVIEWER	: IF NO EARNINGS, RECORD "0."			
	_ (0-500000)			GO TO P2_B_D5_UNI
DON'T KNOW			D	GO TO P2_B_D6
REFUSED			R	GO TO P2_B_D6
P2_B_D5 = EARNING	S POPULATED AND NE TO D OR R			
P2_B_D5_Unit. RECO	ORD UNIT BELOW:			
		·	ONE	ONLY
PER THING		1	GO .	TO P2_B_D5_hrsthing
				TO P2_B_D7
PER DAY		3	GO	TO P2_B_D7
PER WEEK		4	GO	TO P2_B_D7
TWICE A MON	TH	5	GO	TO P2_B_D7
ONCE A MONT	Ή	6	GO	TO P2_B_D7
YEAR		7	GO	TO P2_B_D7
DON'T KNOW		D	GO	TO P2_B_D6
REFUSED		R	GO	TO P2_B_D6

SOFT CHECK: IF P2_B_D5 >2,000 and P2_B_D5_unit=6;

May I confirm I have correctly recorded that [(he/she)/you/(he/she)] earned \$[P2_B_D5] in a typical month last year?

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P2_B_D5_UNIT = 1		
[your/EP's] [did you/did (he/she) (make/do/sell)]		
P2_B_D5_hrsthing		
When [your (spouse/partner) was/you were/EP's (spouse/partner) was] was about how many things [did (he/she)/did you/did (he/she)] (make/do/sell		
RECORD THINGS PER HOUR		
THINGS/HOUR (1-999) GO TO P2_B_D7		
DON'T KNOW	D GO TO P2_I	B_D6
REFUSED	R GO TO P2_I	B_D6
EP'S SPOUSE/PARTNER'S EARNINGS IN TYPICAL MONTH PAST YEAR IS DK O R) OR (P2_B_D5_UNIT = D OR R) OR (P2_B_D5_HRSTHING= D OR R)	OR REF (P2_B_D5=	D OR
P2 B D6. Were [(his/her)/your/(his/her)] earnings in a typical month la		
P2_B_D6. Were [(his/her)/your/(his/her)] earnings in a typical month la less than \$2,500? (NEW)	ast year more or	
PROBE: Your best estimate is fine.		
CODE	ONE ONLY	
MORE THAN \$2,500	1 GO TO P2_I	B_D6B
\$2,500 OR LESS	2	
DON'T KNOW	D GO TO P2_I	B_D7
REFUSED	R GO TO P2_I	B_D7
EP'S SPOUSE/PARTNER'S EARNINGS IN TYPICAL MONTH IN PAST YEAR < \$2,5	,500 (P2_B_D6=2)	
[your/EP's]		
P2_B_D6A. Were [(his/her)/your/(his/her)] earnings in a typical month last year	ar (NEW)	
CODE C	ONE ONLY	
Less than \$100	1 GO TO P2_I	B_D7
Between \$100 and \$500	2 GO TO P2_I	B_D7
\$501 to \$1,000	3 GO TO P2_I	B_D7
\$1,001 to \$1,500	4 GO TO P2_I	B_D7
\$1,501 to \$2,000, or was it	5 GO TO P2_I	B_D7
\$2,001 to \$2,500?	6 GO TO P2_I	B_D7
DON'T KNOW	D GO TO P2_I	B_D7

EP'S SPOUSE/PARTNER'S EARNINGS IN TYPICAL MONTH IN PAST YEAR > \$2,500 (P2 B D6=1)

P2_B_D6B. Were [(his/her)/your/(his/her)] earnings in a typical month last year ... (NEW)

CODE ONE ONLY

\$2,501 to \$3,000	1
\$3,001 to \$3,500	2
\$3,501 to \$4,000	3
\$4,001 to \$4,500	4
\$4,501 to \$5,000, or was it	5
More than \$5,000?	6
DON'T KNOW	D
REFUSED	R

EP'S SPOUSE/PARTNER LIVES IN HOUSEHOLD (P2_A_Q3=1) AND EP'S SPOUSE/PARTNER NOT RETIRED (P2_B_D1 = 1, 0, D, OR R)

[Is your (spouse/partner)/Are you/Is EP's (spouse/partner)]

P2_B_D7.

[Is your (spouse/partner)/Are you/Is EP's (spouse/partner)] <u>currently</u> working at a job for pay? (YTD Baseline 62P, rev)

PROBE: We are interested in both full-time and part-time work for pay or profit.

INTERVIEWER: CODE 'NO' FOR ANY REASONS PROVIDED NOT WORKING (EXAMPLE: RETIRED, UNABLE TO WORK, IN SCHOOL).

YES	GO TO P2_B_D12
NO0	GO TO P2_B_D8
DON'T KNOWD	GO TO P2_B_D8
REFUSEDR	GO TO P2 B D8

SOFT CHECK: IF **P2_B_D7=d**: This information is really important to the **PROMISE** study. Working for pay could include <u>any</u> job [(he/she)/you/(he/she)] may be working at this time.

SOFT CHECK: IF P2_B_D7=r: This information is really important to the PROMISE study. May I ask what your concerns are about providing the answer to this question?

PROGRAMMER BOX 4

IF EP'S SPOUSE/PARTNER NOT WORKING NOW OR CURRENT WORK STATUS 0, D OR R (P2 B D7=0 OR D OR R) GO TO P2 B D8. ELSE GO TO P2 B D12.

EP'S SPOUSE/PARTNER NOT WORKING FOR PAY NOW OR CURRENT WORK STATUS DK OR REF (P2_B_D7=0, D, OR R)

[Does your (spouse/partner)/Do you/Does EP's (spouse/partner)]

P2_B_D8.

[Does your (spouse/partner)/Do you/Does EP's (spouse/partner)] currently <u>want</u> a job, either full or part time? (P18M-III.A4/CPS, D-ant, rev)

	CODE ONE	<u>ONLY</u>
YES	1	GO TO P2_B_D9
MAYBE, IT DEPENDS	2	GO TO P2_B_D9
NO	0	GO TO P2_B_D10
DON'T KNOW	D	GO TO P2_B_D10
REFUSED	R	GO TO P2_B_D10

EP'S SPOUSE/PARTNER NOT WORKING FOR PAY NOW, WANTS JOB (P2_B_D8=1 OR 2)

[Has your (spouse/partner)/Have you/Has EP's (spouse/partner)]

P2_B_D9.

[Has your (spouse/partner)/Have you/Has EP's (spouse/partner)] been looking for work during the last four weeks? (NBS-B28)

YES	1
NO	0
DON'T KNOW	D
REFUSED	R

EP'S SPOUSE/PARTNER NOT WORKING FOR PAY NOW OR CURRENT WORK STATUS DK OR REF (P2_B_D7=0, D, OR R)

[your (spouse/partner) is/you are/EP's (spouse/partner) is]

P2_B_D10.

I'm going to read a list of reasons why some people do not work. For each, please tell me if it is a reason why [your (spouse/partner) is/you are/EP's (spouse/partner) is] not currently working. [Is (he/she)/Are you/Is (he/she)] not working because ... (NBS-2016-2017, B25)

IF NEEDED: I need to read the entire list even though some of the reasons may not apply to

[your (spouse/partner)/you/EP's (spouse/partner)]. If a reason does not apply,

please just say so.

INTERVIEWER: IF RESPONDENT SAYS 'DOES NOT APPLY' CODE AS 'NO'.

PROGRAMMER: RANDOMIZE SEQUENCE OF THE ROWS BELOW.

	YES	NO	DK	REF
 a. [(He/She)/You/(He/She)] cannot find a job [(he/she)(he/she) wants/you want/(he/she) wants]. 	1	0	D	R
 b. [(He/She) does/You do/(He/She) does] not have reliable transportation to and from work. 	1	0	D	R
c. [(He/She) is/You are/(He/She) is] caring for children or others.	1	0	D	R
 d. [(He/She) does/You do/(He/she) does] not want to lose benefits [(he/she)(he/she) needs/you need/(he/she)(he/she) needs] like Social Security, disability insurance, workers' compensation, or Medicaid. 	1	0	D	R
e. [(He/She)/You/(He/she)] cannot find a job [(he/she) is/you are/(he/she) is] qualified for.	1	0	D	R

EP'S SPOUSE/PARTNER NOT WORKING FOR PAY NOW OR CURRENT WORK STATUS DK OR REF ($P2_B_D7=0$, D, OR R)

[your (spouse/partner) is/you are/EP's (spouse/partner) is]

P2 B_D11.

Are there any <u>other</u> reasons why [your (spouse/partner) is/you are/EP's (spouse/partner) is] not working at this time that we have not yet mentioned? (NBS 2016-2017, BP4a, rev)

YES	
NO	GO TO P2_B_D12
DON'T KNOWD	GO TO P2_B_D12
REFUSEDR	GO TO P2_B_D12

OTHER REASON WHY EP'S SPOUSE/PARTNER NOT WORKING FOR PAY NOW (P2 B D11=1)

[your (spouse/partner) is/you are/EP's (spouse/partner) is]

time? (NBS 2017, BP4a, rev)

P2 B D11 Spec. What are the other reasons [your (spouse/partner) is/you are/EP's (spouse/partner) is] not working at this PROBE: Any other reason? RECORD VERBATIM THEN CODE ALL THAT APPLY INTERVIEWER: (STRING 750) P2 B D11 SpecCodes. ASSIGN CODES TO VERBATIM RESPONSE PROVIDED: CODE ALL THAT APPLY WAITING TO FINISH SCHOOL OR A TRAINING PROGRAM 1 ON LAYOFF (TEMPORARY OR INDEFINITE)2 SLACK WORK/BUSINESS CONDITIONS......3 LEAVE (MATERNITY/PATERNITY, PERSONAL) AND VACATION......4 PREVIOUS ATTEMPTS TO WORK HAVE BEEN DISCOURAGING5 CANNOT GET HELP NEEDED WITH PERSONAL CARE. [INCLUDES HELP DRESSING AND BATHING TO GET READY FOR WORK, OR EATING LUNCH, OR USING THE RESTROOM AT WORK]......6 DO NOT HAVE SPECIAL EQUIPMENT OR MEDICAL DEVICES NEEDED IN ORDER WORKPLACES ARE NOT ACCESSIBLE TO, OR LACK ACCOMMODATIONS FOR RETIRED9 DON'T KNOW REFUSED......R ALL CONSENTING (P2 A CONSENT=1) PROGRAMMER: INSERT DATE THIS SECTION "EMPLOYMENT" WAS P2 B D12. COMPLETED (MM/DD/YYYY). INTERVIEWER: SELECT "CONTINUE." (P18M-III.A5) CONTINUE1

ALL CONSENTING (P2_A_CONSENT=1)

P2 B D13.

IF R IS CONTINUING, SELECT "ABLE TO CONTINUE" BELOW. IF R IS NOT ABLE TO CONTINUE AND YOUTH NEEDS TO COMPLETE INTERVIEW, CHECK WHETHER YOUTH IS AVAILABLE. IF SO, SET CALLBACK FOR EP AND SELECT "CONTINUE WITH YOUTH." IF NOT, SET CALLBACK FOR EP AND SELECT "YOUTH UNAVAILABLE." IF R IS NOT ABLE TO CONTINUE AND YOUTH DOES NOT NEED TO COMPLETE INTERVIEW, SET CALLBACK FOR EP AND SELECT "YOUTH COMPLETE OR INELIGIBLE."

PROGRAMMER: IF YOUTHDECEASED = 1 OR YOUTHWITHDRAWN = 1 OR YOUTHFINAL = 1, SHOW OPTIONS 1 AND 4 BELOW. ELSE, SHOW OPTIONS 1, 2, AND 3 BELOW.

PARENT SURVEY R ABLE TO CONTINUE 1	GO TO P2_C_INTRO
PARENT SURVEY R BREAK OFF – CONTINUE WITH YOUTH2	SET CALLBACK, CLOSE PARENT RECORD, OPEN YOUTH RECORD
PARENT SURVEY R BREAK OFF – YOUTH UNAVAILABLE 3	SET CALLBACK
PARENT SURVEY R BREAK OFF – YOUTH COMPLETE OR INELIGIBLE 4	SET CALLBACK

Section C Individual and Family Well-Being

PROGRAMMER BOX 5

IF R IS EP (HELLO = 1) USE FILLS FOR YOUR SPOUSE/PARTNER.

IF R IS EP'S SPOUSE/PARTNER (REPREL = 9), USE FILLS FOR 'YOU/YOUR'.

IF R IS <u>OTHER ADULT HH MEMBER</u> (REPREL=10), USE FILLS FOR "EP'S SPOUSE/PARTNER." These fills will be presented consistently in this sequence for all applicable items.

P2_C_A. Household Health and Current Health Insurance Coverage

ALL CONSE	NTING (P2_A_CONSENT=1)
[you/EP] [you	r (spouse/partner)/you/ EP's (spouse/partner)] [youth]
P2_C_Intro.	The next questions are about health insurance, including health insurance obtained through employment or purchased directly, as well as government programs like Medicaid and Medicare. (P18M.III-INTRO)
	CONTINUE 1
ALL CONSE	NTING (P2_A_CONSENT=1)
	FIRST NAME/Is EP FIRST NAME] [you/(he/she)/(he/she)] [you are/ EP FIRST NAME is]

P2_C_A1. [Are you, EP FIRST NAME/IS EP FIRST NAME], covered by <u>any</u> kind of health insurance or some other kind of health care plan? (P18M IV.A1/NHIS, rev)

PROBE: This includes private insurance, as well as other types of health insurance [you/ (he/she)] may receive or have purchased through government programs.

YES1	
NO0	GO TO BOX 6
DON'T KNOWD	GO TO BOX 6
REFUSEDR	GO TO BOX 6

SOFT CHECK IF P2_C_A1=0: May I confirm that I have recorded your answer correctly – that is that [you are/ EP FIRST NAME is] not covered by any kind of health insurance at this time?

EP COVERED BY INSURANCE (P2 C A1=1)

[Are you/Is EP], [STATE MEDICAID NAME] [PROGRAM STATE]

P2_C_A2.

What kind of health insurance or health care plan [are you/ is EP], now covered by? If [you have/ EP has] more than one kind of insurance, please let me know. (P18M-IV.A3, 4, 5, 6 - rev/NHIS, rev)

PROBE: Anything else?

IF NEEDED:

<u>Private health insurance includes any health insurance other than [STATE MEDICAID NAME], Medicare, or TRICARE.</u>

[STATE MEDICAID NAME] is the name for the <u>Medicaid program</u> in [PROGRAM STATE]. Medicaid provides health coverage to eligible low-income adults, children, pregnant women, elderly adults, and people with disabilities.

INTERVIEWER: IF THE EP NO LONGER LIVES IN [PROGRAM STATE], BUT IS ENROLLED IN (HIS/HER) CURRENT STATE, RECORD AS 'MEDICAID' BELOW.

Medicare is the federal health insurance program for certain people with disabilities.

TRICARE is a health insurance program for military service members and their families.

 CODE ALL THAT APPLY

 PRIVATE HEALTH INSURANCE - THROUGH AN EMPLOYER
 1

 PRIVATE HEALTH INSURANCE - PURCHASED ON OWN
 2

 MEDICAID [OR STATE MEDICAID NAME]
 3

 MEDICARE
 4

 TRICARE
 5

 OTHER KIND OF INSURANCE NOT LISTED ABOVE
 6

 DON'T KNOW
 D

 REFUSED
 R

SOFT CHECK-1: (IF <u>RESPONDENT</u> IS REPORTED TO HAVE INSURANCE (P2_C_A1=1), BUT INSURANCE CATEGORY IS REPORTED (P2_C_A2_1 through P2_C_A2_6 all = 0):

May I confirm I have correctly recorded that you have health insurance coverage?

IF NOT COVERED, RETURN TO P2_C_A1 TO CORRECT THE RESPONSE, AS NEEDED. IF COVERED, RETURN TO APPLICABLE ITEM(S) TO UPDATE TYPE OF COVERAGE.

EP COVERED BY PRIVATE INSURANCE PURCHASED	O ON OWN (P2_C_A2_2=1)
[STATE MARKETPLACE NAME] – FILL IF CA, CO, MD,	NY
P2_C_A2A. Was this private insurance purchased health insurance exchange, sometime Healthcare.gov, or ObamaCare? (P18)	es called [<u>state marketplace name,]</u> M-IV.A9/NHIS, rev)
YES	1
NO	0
DON'T KNOW	D
REFUSED	R
ALL CONSENTING (P2_A_CONSENT=1)	
[Do you/Does EP] [you/EP]	
can do? (P18M-III.B4 rev)	h <u>limits</u> the kind or amount of work [you/EP]
YES	
NO	
DON'T KNOW	D
REFUSED	R
PROGRAMN	IER BOX 6
IF SPOUSE/PARTNER LIVES IN HOUSEHOLD TO BOX 7.	(P2_A_Q3=1), GO TO P2_C_A4. ELSE GO
EP'S SPOUSE OR PARTNER IN HOUSEHOLD (P2_A_0	Q3=1)
[Is your (<u>spouse/partner</u>)/Are <u>you</u> /Is EP's (<u>spouse/partner</u>) (spouse/partner) is]	r)] [your (<u>spouse/partner</u>) is/you are/EP's
EP's (<u>spouse/partner</u>)] covered by <u>any</u> kind of health care plan? (P18M, IV.A1/IPROBE: This includes private insurance	tner)]. [Is your (<u>spouse/partner</u>)/Are <u>you</u> / Is kind of health insurance or some other NHIS, rev) , as well as other types of health insurance you through government programs.
DON'T KNOW	D GO TO BOX 7
REFUSED	

SOFT CHECK IF P2_C_A4 = 0: May I confirm that I have recorded your answer correctly – that is that [your (spouse/partner) is/you are/EP's (spouse/partner) is] not covered by any kind of health insurance of any kind at this time?

SPOUSE/PARTNER COVERED BY INSURANCE (P2_C_A4=1)

[Is your (spouse/partner)/Are you/Is EP's (spouse/partner)] [STATE MEDICAID NAME] [PROGRAM STATE].

P2_C_A5. What kind of health insurance or health care plan [is your (<u>spouse/partner</u>)/are <u>you</u>/Is EP's (<u>spouse/partner</u>)] covered by? If [(he/she) has/ you have/ (he/she) has)] more than one kind of insurance, please let me know. (P18M- IV.A3, 4, 5, 6 - rev/NHIS, rev)

PROBE: Anything else?

IF NEEDED:

<u>Private health insurance</u> includes any health insurance other than [STATE MEDICAID NAME], Medicare, or TRICARE.

[STATE MEDICAID NAME] is the name for the <u>Medicaid program</u> in [PROGRAM STATE]. Medicaid provides health coverage to eligible low-income adults, children, pregnant women, elderly adults, and people with disabilities.

INTERVIEWER: IF THE SPOUSE/PARTNER NO LONGER LIVES IN [PROGRAM STATE], BUT IS ENROLLED IN (HIS/HER) CURRENT STATE, RECORD AS 'MEDICAID' BELOW.

Medicare is the federal health insurance program for certain people with disabilities.

TRICARE is a health insurance program for military service members and their families.

CODE ALL THAT APPLY PRIVATE HEALTH INSURANCE - THROUGH AN EMPLOYER 1 PRIVATE HEALTH INSURANCE - PURCHASED ON OWN 2 MEDICAID [OR STATE MEDICAID NAME] 3 MEDICARE 4 TRICARE 5 OTHER KIND OF INSURANCE NOT LISTED ABOVE 6 DON'T KNOW D REFUSED R

SOFT CHECK: (IF EP'S <u>SPOUSE</u>/PARTNER) IS REPORTED TO HAVE INSURANCE (P2_C_A4=1) BUT NO INSURANCE TYPE IS REPORTED (P2_C_A5_1 THROUGH P2_C_A5_6 ALL = 0):

May I confirm I have correctly recorded that [your (<u>spouse/partner</u>) has/<u>you have</u>/EP's (<u>spouse/partner</u>) has] health insurance coverage?

IF NOT COVERED RETURN TO P2_C_A4 TO CORRECT THE RESPONSE, AS NEEDED. IF COVERED, RETURN TO APPLICABLE ITEM TO UPDATE TYPE OF COVERAGE.

SPOUSE/PARTNER HAS PRIVATE INSURANCE PURCHASED ON OWN (P2_C_A5_2	2=1)
[STATE MARKETPLACE NAME] – FILL IF CA, CO, MD, NY	
P2_C_A6. Was this private insurance purchased through the <u>Affordable Care insurance exchange</u> , sometimes called <u>[STATE MARKETPLACE National Realthcare.gov</u> or <u>ObamaCare</u> ? (P18M-IV.A9/NHIS, modified)	
YES1	
NO 0	
DON'T KNOWD	
REFUSEDR	
EP'S SPOUSE/PARTNER LIVES IN HOUSEHOLD (P2_A_Q3=1)	
[Does your (spouse/partner)/Do you/Does EP's (spouse/partner)]	
or mental condition, health problem, or a disability which <u>prevents</u> <u>limits</u> the kind or amount of work [you/ (he/she)] can do? (P18M-III.	
NO	
DON'T KNOWD	
REFUSEDR	
PROGRAMMER BOX 7	
IF YOUTH LIVES IN EP'S HOUSEHOLD (P2_A_YTHLIV=1) GO TO P2_C_A8. ELSE GO TO P2_C_B.INTRO	
YOUTH LIVES IN EP'S HOUSEHOLD (P2_A_YTHLIV=1)	
[YOUTH]	
P2_C_A8. Next I will ask about [YOUTH]. Is [YOUTH] covered by <u>any</u> kind of hor some other kind of health care plan? (P18M, IV.A1/NHIS, rev) PROBE: This includes private insurance, as well as other types of heal [YOUTH] may receive or has purchased through government	Ith insurance
YES	programs.
NO	GO TO P2_C_B.INTRO
DON'T KNOW	GO TO P2_C_B.INTRO
REFUSEDR	GO TO P2_C_B.INTR(
SOFT CHECK IF P2_C_A8 = 0: May I confirm that I have recorded your answer corre	ectly – that [YOUTH]
is <u>not</u> covered by any kind of health insurance at this time?	

YOUTH COVERED BY INSURANCE (P2 C A8=1)

[YOUTH] (he/she) [STATE MEDICAID NAME] [PROGRAM STATE] [STATE-SPECIFIC NAME FOR S-CHIP]

P2_C_A9. What kind of health insurance or health care plan is [YOUTH] now covered by? If (he/she) has more than one kind of insurance or plan, please let me know. (P18M-IV.A3, 4, 5, 6, 7- rev/ NHIS, rev]

PROBE: Anything else?

IF NEEDED: <u>Private health insurance</u> includes any health insurance other than [STATE MEDICAID NAME], Medicare, or TRICARE.

[STATE MEDICAID NAME] is the name for the <u>Medicaid program</u> in [PROGRAM STATE]. Medicaid provides health coverage to eligible low-income adults, children, pregnant women, elderly adults, and people with disabilities.

INTERVIEWER: IF THE YOUTH NO LONGER LIVES IN [PROGRAM STATE], BUT IS ENROLLED IN (HIS/HER) CURRENT STATE, RECORD AS 'MEDICAID' BELOW.

<u>Medicare</u> is the federal health insurance program for certain people with disabilities.

TRICARE is a health insurance program for military service members and their families.

<u>CHILDREN'S HEALTH INSURANCE PROGRAM</u> OR <u>S-CHIP</u> is free or low-cost health insurance for uninsured children under age 19. This program helps reach uninsured children whose families earn too much to qualify for Medicaid, but not enough to get private coverage.

CODE ALL THAT APPLY PRIVATE HEALTH INSURANCE – THROUGH AN EMPLOYER 1 PRIVATE HEALTH INSURANCE - PURCHASED ON OWN 2 MEDICAID [OR STATE MEDICAID NAME] 3 MEDICARE 4 TRICARE 5 CHILDREN'S HEALTH INSURANCE PROGRAM (S-CHIP) OR [STATE NAME] 6 OTHER KIND OF INSURANCE NOT LISTED ABOVE 7 DON'T KNOW D REFUSED

SOFT CHECK: IF \underline{YOUTH} IS REPORTED TO HAVE INSURANCE P2_C_A8=1 BUT INSURANCE TYPE IS NOT REPORTED (P2_C_A9_1 THROUGH P2_C_A9_7 ALL = 0)

May I confirm I have correctly recorded that [YOUTH] has health insurance coverage? IF NO COVERAGE RETURN TO P2_C_A8 TO CORRECT. IF <u>COVERED</u>, RETURN TO APPLICABLE ITEMS TO UPDATE TYPE OF COVERAGE.

YOUTH COVERED BY PRIVATE INSURANCE PURCHASED ON OWN (P2 C A9 2=1) [STATE MARKETPLACE NAME] - FILL IF CA, CO, MD, NY P2 C A10. Was this private insurance purchased through the Affordable Care Act or a health insurance exchange, sometimes called [state marketplace name,] Healthcare.gov, or ObamaCare? (P18M-IV.A9/NHIS, modified) YES......1 REFUSED......R SECTION P2 C B. HOUSEHOLD INCOME AND BENEFIT RECEIPT ALL CONSENTING (P2 A CONSENT=1) [your/EP's] [your/(his/her)] The next set of questions ask about benefits [your/EP's] household may receive, as well P2_C_B_Intro. as [vour/ (his/her)] household income. This information helps researchers better understand how family finances affect students' ability to go to college or pursue other goals after high school. Your answers to these questions are important to the success of this study and will be kept completely confidential. CONTINUE 1 ALL CONSENTING (P2 A CONSENT=1) [Do you/Does EP] [STATE NAME FOR TANF] P2 C B1. [Do you/Does EP] or does anyone in [your/EP's] household receive assistance from temporary assistance for needy families or [STATE NAME FOR TANF]? (P18M IV.B1a) IF NEEDED: The Temporary Assistance for Needy Families (TANF) program provides families with financial assistance and related support services. These programs may include childcare assistance, job preparation, and work assistance. YES......1 GO TO P2 C B2 DON'T KNOW...... D GO TO P2 C B2 REFUSED......R GO TO P2 C B2

R HOUSEHOLD RECEIVES BENEFITS FROM TANF (P2_C_B1=1)		
[your/EP's] [STATE NAME FOR TANF]		
P2_C_B1a. How much money did [your/EP's] household get from T FOR TANF] last month? (YTD 36M XI.B1a, rev)	ANF, or	[STATE NAME
PROBE: Your best guess is fine.		
INTERVIEWER: RECORD IN WHOLE DOLLARS.		
\$ <u> , </u>		
(0-9,000)		
DON'T KNOW		.D
REFUSED		R
SOFT CHECK: IF P2_C_B1a> \$500: May I confirm I have correctly recorded as \$[P2_C_B1a]?	last mor	nth's TANF benefit
ALL CONSENTING (P2_A_CONSENT=1)		
[Do you/Does EP] [or STATE NAME FOR SNAP] [your/EP's]		
from SNAP, the Supplemental Nutrition Assistance Prograr FOR SNAP]? (P18M-IV.B1b) IF NEEDED: SNAP provides a monthly supplement for purchasis Benefits are provided on an electronic card, called an EBT card ATM card and accepted at most grocery stores. This program w "food stamps."	ng nutrit that is u	tious food. Ised like an
YES	1	
NO	0	GO TO P2_C_B3
DON'T KNOW	D	GO TO P2_C_B3
REFUSED	R	GO TO P2_C_B3
RECEIVES SNAP BENEFITS (P2 C B2=1)		
[your/EP's] [or STATE NAME FOR SNAP]		
P2_C_B2a. How much did [your/EP's] household get from the SNAI NAME FOR SNAP] last month? (YTD 36-m, XI.B2a, rev) PROBE: This program was formerly known as "food stamps."/ INTERVIEWER: RECORD IN WHOLE DOLLARS		
\$ <u> , </u>		

(0-1,500)		
DON'T KNOW		D
REFUSED		R
SOFT CHECK: IF P2_C_B2a> \$500: May I confirm I have correct as \$[P2_C_B2a]?	tly recorded last mon	th's SNAP benefit
ALL CONSENTING (P2_A_CONSENT=1)		
[Do you/Does EP] [your/EP's]		
P2_C_B3. [Do you/Does EP] or does anyone in [your/EP's] government housing assistance in paying rent, s Section 8? (P18M-IV.B1c)	such as through pu	blic housing or
IF NEEDED: This is also known as the Housing Choice V funding to help people pay their rent.	oucher Program. Sec	tion 8 provides
YES	1	
NO	0	GO TO P2_C_B4
DON'T KNOW	D	GO TO P2_C_B4
REFUSED	R	GO TO P2_C_B4
EP HOUSEHOLD RECEIVES INCOME FROM PUBLIC-HOUSING	OR SECTION 8 (P2_C	C_B3=1)
[your/EP's]		
P2_C_B3A. How much did [your/EP's] household received paying rent (such as through public housing or XI.B3a rev)		
PROBE: Your best guess is fine. INTERVIEWER: RECORD IN WHOLE DOLLARS.		
\$I ,		
(0-5,000)		
DON'T KNOW	D	
REFUSED	R	
SOFT CHECK: IF P2_C_B3a> \$1500: May I confirm I have correbenefit as \$[P2_C_B3a]?	ctly recorded last mo	nth's housing
ALL CONSENTING (P2_A_CONSENT=1)		
[your/EP's] [YOUTH]		

P2_C_B4. Does anyone in [your/EP's] household receive any income from <u>SSI or SSDI</u> because of a disability? (P18M-IV.B1d)

IF NEEDED: SSI and SSDI provides payments to aged, blind, and disabled persons (including children).

YES	
NO	GO TO P2_C_B5
DON'T KNOWD	GO TO P2_C_B5
REFUSEDR	GO TO P2 C B5

REPORTS HOUSEHOLD INCOME SSI OR SSDI (P2_C_B4=1)	
[your/EP's]	
P2_C_B4a. How much did [your/EP's] household receive from SSI or SSDI <u>last month</u> (New)	?
PROBE: Your best guess is fine.	
INTERVIEWER: RECORD IN WHOLE DOLLARS	
\$ <u> , </u>	
(0-9,999)	
DON'T KNOWD	
REFUSEDR	
SOFT CHECK: IF P2_C_B4a> \$1,000: May I confirm I have correctly recorded last month's SSI/S benefit as \$[P2_C_B4a]?	SDI
ALL CONSENTING (P2_A_CONSENT=1)	
[Do you/Does EP] [your/EP's]	
P2_C_B5. [Do you/Does EP] or does anyone in [your/EP's] household receive retirement income from social security, a retirement plan, pension, 401k, or any other so of retirement income? (NEW)	
IF NEEDED:	
When you work and pay Social Security taxes, you earn "credits" toward <u>Social Security</u> Once you retire, and so long as you accumulated enough credits (at least 10 years of wor are eligible to receive a Social Security benefit payment each month. This payment is bas how much you earned during your working career, and the age at which you decide to ret	k), you ed on
<u>Survivors' benefits</u> are an extension of the Social Security program that pays out a portio of the benefits, of a deceased individual to their surviving spouse or dependent children.	n, or all
Under a <u>retirement plan</u> , such as a 401(k) or 403(b), the employee or employer (or both) con a percentage of an employee's earnings annually. These contributions are then invested, employee ultimately receives the balance following retirement.	
A <u>pension</u> plan promises a specified monthly benefit at retirement. It may state this benefexact dollar amount or may calculate through a formula using salary and years of service	
YES1	
NO 0 GO TO P2	2_C_B6
DON'T KNOW D GO TO P2	2_C_B6
REFUSEDR GO TO P2	C_B6

REPORTS RETIREMENT INCOME FROM SOCIAL SECURITY (P2 C B5=1) [your/EP's] P2 C B5a. How much did [your/EP's] household receive in retirement income from all sources last month? (New) PROBE: Your best guess is fine. INTERVIEWER: RECORD IN WHOLE DOLLARS \$|___|,|___| RETIREMENT EARNINGS FOR HOUSEHOLD (0-9.999)REFUSED......R SOFT CHECK: IF P2 C B5a> \$1,500: May I confirm I have correctly recorded last month's retirement income as \$[P2_C_B5a]? ALL CONSENTING (P2 A CONSENT=1) [CURRENT MONTH - 1 MONTH] [IF P2_C_B5=1 FILL: retirement earnings, or] [your/EP's] P2 C B6. What were the total earnings of all persons in [your/EP's] household last month, that is, in [CURRENT MONTH - 1 MONTH]? Please include wages, salary, commissions, bonuses and tips from all jobs that all household members worked before taxes. Do not include [Fill: retirement earnings,] public benefits or other sources of income [your/EP's] household may have received. (PROMISE 18M-IV.B2, rev) INTERVIEWER: IF NO INCOME THAT MONTH. RECORD "0." \$| | |,| | | (ALLOWABLE RANGE: 0-99,999) GO TO P2 C B7 DON'T KNOW.......D GO TO P2 C B6a REFUSED......R GO TO P2 C B6a SOFT CHECK: IF P2 C B6> \$10,000: May I confirm I have correctly recorded last month's earnings as \$[P2 C B6]?

REFUSED OR DON'T KNOW HOUSEHOLD INCOME FOR LAST YEAR (P2 C B6=D OR R)

[CURRENT MONTH - 1 MONTH] [your/EP's]

P2_C_B6a. I <u>understand</u> you may not be able to provide an exact number for [your/EP's] household's earnings from salaries and other work last month. However, it would be extremely helpful if you could tell us which of the following ranges <u>best</u> describes your <u>total</u> household earnings from salaries and other work before taxes in [CURRENT MONTH – 1 MONTH].

Was your total household earnings last month... (PROMISE 18M-IV.B2-rev)

PROBE: Do not include earnings from [retirement earnings or,] public benefits, or other sources of income outside of jobs or wages that [your/EP's] household may have received.

	CODE ONE ONLY
Less than \$500,	1
\$500 to less than \$1,500,	2
\$1,500 to less than \$2,500,	3
\$2,500 to less than \$3,500,	4
\$3,500 to less than \$4,500,	5
\$4,500 to less than \$5,500,	6
\$5,500 to less than \$6,500 or	7
\$6,500 or more?	8
DON'T KNOW	D
REFUSED	R

ALL CONSENTING (P2_A_CONSENT=1)
[your/EP's]

P2_C_B7. Does anyone in [your/EP's] household receive money from any source you have not already told me about - such as other kinds of public assistance, money from child support or alimony, interest, dividends, or money from friends and family? Please do not include wages, salary, commissions, bonuses and tips from all jobs that all household members worked. (YTD36M, XI.F1-rev)

YES	
NO	GO TO P2_C_B8
DON'T KNOW	GO TO P2_C_B8
REFUSEDR	GO TO P2_C_B8

REPORTS INCOME FROM OTHER SOURCES (P2_C_B7=1)

[your/EP's]

P2_C_B7a. How <u>much</u> money did [your/EP's] household receive from these <u>other sources</u> last month? Please <u>do not</u> include wages, salary, commissions, bonuses and tips from all jobs that all household members worked. (YTD-36M, XI.F2-rev)

PROBE: Your best guess is fine.

SOFT CHECK: IF P2_C_B7a> \$1500: May I confirm I have correctly recorded \$[P2_C_B7a]?

ALL CONSENTING (P2_A_CONSENT=1)

P2_C_B8. IF R IS CONTINUING, SELECT "ABLE TO CONTINUE" BELOW. IF R IS NOT ABLE TO CONTINUE AND YOUTH NEEDS TO COMPLETE INTERVIEW, CHECK WHETHER YOUTH IS AVAILABLE. IF SO, SET CALLBACK FOR EP AND SELECT "CONTINUE WITH YOUTH" BELOW. IF NOT, SET CALLBACK FOR EP AND SELECT "YOUTH UNAVAILABLE" BELOW. IF R IS NOT ABLE TO CONTINUE AND YOUTH DOES NOT NEED TO COMPLETE INTERVIEW, SET CALLBACK FOR EP AND SELECT "YOUTH COMPLETE OR INELIGIBLE" BELOW.

PROGRAMMER: IF YOUTHDECEASED = 1 OR YOUTHWITHDRAWN = 1 OR YOUTHFINAL = 1, SHOW OPTIONS 1 AND 4 BELOW. ELSE, SHOW OPTIONS 1, 2, AND 3 BELOW.

PARENT SURVEY R ABLE TO CONTINUE1 GO TO BOX 8

PARENT SURVEY R BREAK OFF - CONTINUE WITH YOUTH2 SET CALLBACK,

CLOSE PARENT

RECORD, OPEN

YOUTH RECORD

PARENT SURVEY R BREAK OFF – YOUTH UNAVAILABLE......3 SET CALLBACK

PARENT SURVEY R BREAK OFF - YOUTH COMPLETE OR INELIGIBLE4 SET CALLBACK

Section D Expectations for Youth

PROGRAMMER BOX 8

SECTION D IS ASKED ONLY OF <u>EP</u> OR <u>SPOUSE/PARTNER</u> (P2_CURRENTSTATE=1 OR REPREL=9).

NO PROXY FILLS ARE USED AS THESE ARE OPINION ITEMS. IF R IS ANOTHER ADULT HH MEMBER (REPREL=10), SKIP TO P2_E_INTRO.

ALL EP OR E	P SPOUS	E/PARTNER (P2_CURRENTSTATE=1 OR REPREL=9)
[YOUTH] [his	/her]	
P2_D_Intro.		ext set of questions ask about [YOUTH] and expectations you have for [his/her] . (P18M-V-INTRO)
	CONTIN	UE1
ALL EP OR E	P SPOU	E/PARTNER (P2_CURRENTSTATE=1 OR REPREL=9)
[YOUTH] [his	/her] (he/s	he)
		TH] is finished with <u>all</u> of [his/her] schooling, how important to you is it e) work at a paid job? Would you say very important, somewhat
th	at (he/sh portant, ROBE:	TH] is finished with <u>all</u> of [his/her] schooling, how important to you is it e) work at a <u>paid job</u> ? Would you say very important, somewhat not very important, or not at all important? (P18M-VA3a/E. Carter) By "finished with [his/her] schooling, we are talking about the time when [YOUT will have completed all of (his/her education), not completed school for the day.
th	at (he/sh portant, ROBE:	e) work at a <u>paid job</u> ? Would you say very important, somewhat not very important, or not at all important? (P18M-VA3a/E. Carter) By "finished with [his/her] schooling, we are talking about the time when [YOUT
th im	at (ȟe/sh nportant, ROBE:	e) work at a <u>paid job?</u> Would you say very important, somewhat not very important, or not at all important? (P18M-VA3a/E. Carter) By "finished with [his/her] schooling, we are talking about the time when [YOUT will have completed all of (his/her education), not completed school for the day.
th im PF VERY	at (he/sh nportant, ROBE:	e) work at a <u>paid job?</u> Would you say very important, somewhat not very important, or not at all important? (P18M-VA3a/E. Carter) By "finished with [his/her] schooling, we are talking about the time when [YOUT will have completed all of (his/her education), not completed school for the day. CODE ONE ONLY
th im PF VERY SOME	at (he/shaportant, ROBE: IMPORTA	e) work at a <u>paid job</u> ? Would you say very important, somewhat not very important, or not at all important? (P18M-VA3a/E. Carter) By "finished with [his/her] schooling, we are talking about the time when [YOUT will have completed all of (his/her education), not completed school for the day. CODE ONE ONLY NT
VERY SOME	at (he/shaportant, ROBE: IMPORTA WHAT IM	e) work at a <u>paid job</u> ? Would you say very important, somewhat not very important, or not at all important? (P18M-VA3a/E. Carter) By "finished with [his/her] schooling, we are talking about the time when [YOUT will have completed all of (his/her education), not completed school for the day. CODE ONE ONLY NT
VERY SOME	at (he/shaportant, ROBE: IMPORTA WHAT IM ERY IMP	e) work at a <u>paid job</u> ? Would you say very important, somewhat not very important, or not at all important? (P18M-VA3a/E. Carter) By "finished with [his/her] schooling, we are talking about the time when [YOUT will have completed all of (his/her education), not completed school for the day. CODE ONE ONLY NT

ALL EP OR EP SPOUSE/PARTNER (P2_CURRENTSTATE=1 OR REPF	REL=9)
[YOUTH], (he/she)	
P2_D_A2. How far do you think [YOUTH] will get in <u>school</u> ? modified)	Will (he/she): (NLTS2012,
PROBE: What is highest level of schooling you think [Y	OUTH] will complete?
	CODE ONE ONLY
Not complete high school,	1
Complete high school with a diploma or a certificate of comple	etion, 2
Get a GED, or	3
Continue <u>beyond</u> high school to a vocational, technical, or tra- school,	
A 2-year or community college	5
A 4-year college or university, or	6
A Master's, PhD, or other advanced degree?	7
DON'T KNOW	D
REFUSED	R
ALL EP OR EP SPOUSE/PARTNER (P2_CURRENTSTATE=1 OR REPF	RFI =9)
[YOUTH], (he/she)	
P2_D_A3. When [YOUTH] is age 25, do you think (he/she) windown V.A5/NLTS2012, rev)	ill be living (P18M-
	CODE ONE ONLY
With parents or guardians, sibling(s) or other relative(s),	1
On (his/her) own, with friends, or with a spouse or partner,	2
In a group home or institution, or in an	3
Other living situation?	4
DON'T KNOW	D
REFUSED	R
ALL EP OR EP SPOUSE/PARTNER (P2_CURRENTSTATE=1 OR REPR	REL=9)
[YOUTH], (he/she)	
P2_D_A4. When [YOUTH] is age 25, how likely do you think it is at a paid job? Do you think (he/she) (P18M-V.A6/NL	
	CODE ONE ONLY
Definitely will,	1

Probably will,	2
Probably won't, or	3
Definitely won't?	4
DON'T KNOW	D
REFUSED	R
ALL EP OR EP SPOUSE/PARTNER (P2_CURRENTSTA	TE=1 OR REPREL=9)
[YOUTH], (he/she), [HIM/HER]	
P2_D_A5. <u>When</u> [YOUTH] is age 25, how likely do enough to support [him/her]self without (he/she) (P18M-V.A7/NLTS2012, rev)	you think it is that (he/she) will earn t <u>financial</u> help from <u>family</u> ? Do you think

CODE ONE ONLY
1
2
3
4
D
R

ALL EP OR EP SPOUSE/PARTNER (P2_CURRENTSTATE=1 OR REPREL=9) [YOUTH], (he/she), [HIM/HER]

P2_D_A6. When [YOUTH] is age 25, how likely do you think it is that (he/she) will earn enough to support [him/her]self without financial help from government benefit programs? Do you think (he/she) ... (P18M-V.A7/NLTS2012, rev)

CODE ONE ONLY Definitely won't? 4 REFUSED.....R

Section E Contact Information

ALL CONSENTING (P2 A CONSENT=1)

IF CATI AND NOT FIELD CALL IN, fill: [We'll be sending [your/EP's] payment in the next two weeks and need to make sure we have [your/EP's] correct address.]

P2_E_Intro. The last set of questions will be about how to contact [you/EP] and [YOUTH]. (NEW)

IF CATI: [We will be sending [your/EP's] payment in the next two weeks and need to make sure we have [your/EP's] correct address.]

ENTER 1 TO CONTINUE1

SECTION P2_E_A PARENT SURVEY RESPONDENT CONTACT INFO

EP (P2_CURRENTSTATE=1 (SELF))

[BEST ADDRESS FROM EP]

P2_E_A1. Our records show your mailing address is [BEST ADDRESS]. (P18M-VI.B1, rev)

INTERVIEWER: PROBE FOR AND RECORD BOTH P.O. BOX AND STREET ADDRESS. IF HOMELESS, PROBE FOR MAILING ADDRESS OF AGENCY OR CASEWORKER WHERE WE COULD MAIL CHECK/POTENTIALLY REACH YOUTH (IF PHONE COMPLETE).

PROBE: Where do you stay most often?

CONFIRMED ABOVE ADDRESS AS CORRECT1 P2_E_A3	GO TO
UPDATE ADDRESS	GO TO
DON'T KNOWD P2_E_A3	GO TO
REFUSEDR P2 E A3	GO TO

NOT EP (REPTYPE = 2 OR 3) OR EP ADDRESS NOT CORRECT (P2 E A1=99)

[YOUR/EP'S]

P2_E_A2. What is [your/EP's] mailing address? (P18M-VI.B1/NLTS2012, A9a)

IF HOMELESS, PROBE FOR MAILING ADDRESS OF AGENCY OR CASEWORKER WHERE WE COULD MAIL CHECK/POTENTIALLY REACH YOUTH (IF PHONE COMPLETE).

ADDRESS 1	
ADDRESS 2	
CITY	
STATE/TERRITORY	
ZIP	
DON'T KNOW	D
DEEL JOED	5

ALL CONSENTIN	G (P2_A_CONSENT=1)	
[YOU/EP]		
PROGRAMMER-	EXTENSION MAY BE MISSING	
	lum. What is the <u>best</u> telephone number at wh S2012, A10)	ich to reach [you/EP]? (P18M-
<u> </u>	. - -	
(0-999)	(0-999) (0-9999)	
DOES NO	T HAVE A TELEPHONE NUMBER	0
DON'T KN	OW	D
REFUSED		R
P2_E_A3_Extensi	on. Is there an extension number?	
	(0-99999)	
NEW PHONE PR	OVIDED (P2_E_A3_PHONENUM = PHONE PRO	OVIDED)
P2_E_A3TZ.	What time zone is that in?	
	IF NEEDED: What time is it there?	
INSTRUCTION: A	TIME ZONE IS REQUIRED. USE ORIGINAL TIM	E ZONE OR STATE IF NEEDED.
		CODE ONE ONLY
EASTERN	TIME (US & CANADA) [(FILL CURRENT TIME)].	62
INDIANA (I	EAST) [(FILL CURRENT TIME)]	63
CENTRAL	TIME (US & CANADA) [(FILL CURRENT TIME)].	65
ARIZONA	[(FILL CURRENT TIME)]	68
	N TIME (US & CANADA) [(FILL CURRENT TIME)	
PACIFIC T	IME (US & CANADA) [(FILL CURRENT TIME)]	71
ALASKA [(FILL CURRENT TIME)]	72
	FILL CURRENT TIME)]	
	IFORNIA [(FILL CURRENT TIME)]	

SECTION P2_E_B. CONTACT INFORMATION FOR YOUTH

YOUTH LIVES WITH RESPONDENT (P2_A_YTH_LIV=1)		
[YOUTH], [HIS/HER] (HE/SHE) [CONFIRMED MAILING ADDRESS FROM ADDRESS FROM P2_E_A2] [BEST ADDRESS FROM EP] [YOURS/EP'S		ILING
P2_E_B1. We'd appreciate your help in making sure we have the touch with [YOUTH], to complete [his/her] interview. V mailing address? Is it the same as [yours/EP's] or doe different address? (P18M-V1.D1/NLTS2012, A9a modif	Vhat is [YOUT es [he/she] hav	H]'s
PROGRAMMER: IF P2_E_A1 = 1, D, or R, DISPLAY [BEST ADD	RESS FROM EF	P]
IF P2_E_A1 = 99 AND P2_E_A2 = POPULATED, DISPLAY [MAIL P2_E_A2]	ING ADDRESS	FROM
IF $P2_A1 = 99$ AND $P2_A2 = D$ OR R, DISPLAY [BEST ADD	DRESS FROM E	:P]
PROBE: Where does [YOUTH] stay most often?		
SAME DIFFERENT		
DON'T KNOW P2_E_B3	D	GO TO
REFUSEDP2_E_B3	R	GO TO
YOUTH DOES NOT LIVE WITH R (P2_A_YTHLIV= 2, 3 OR 4) OR YOUTI (P2_E_B1=99)	H HAS NEW AD	DRESS
[YOUTH] [HIS/HER]		
P2_E_B2. IF P2 A YTHLIV= 2, 3 OR 4, FILL: We'd appreciate sure we have the best way to get in touch with [YOUTH] to interview. ALL: What is [youth's] mailing address? (P18M-VI.B1/NLTS201: PROBE: Where Does [YOUTH] stay most often?	complete [his	
ADDRESS 1		

Mathematica® Inc. B.105

ADDRESS 2

CITY	
STATE/TERRITORY	
ZIP	
DON'T KNOW	D
REFUSED	R

ALL CONSENTING (P2_A_CONSENT=1)	
[YOUTH], [FILL R PHONE FROM P2_E_A3]	
P2_E_B3. What's the <u>best</u> telephone number at wh VI.D2/NTLS2012, A10)	ich to reach [YOUTH]? (P18M-
IF P2_A_CONSENT=1 FILL: SAME AS [FILL PHONE DIFFERENT?	FROM P2_E_A3], OR IS IT
SAME NUMBER	1 GO TO P2_E_B5
DIFFERENT NUMBER	99
DOES NOT HAVE A TELEPHONE NUMBER	0 GO TO P2_E_B5
DON'T KNOW	d GO TO P2_E_B5
REFUSED	r GO TO P2_E_B5
P2_E_B3=99	
[YOUTH]	
PROGRAMMER- EXTENSION MAY BE MISSING	
P2_E_B4_PhoneNum. What's the <u>best</u> telephone [YOUTH]? (P18M-VI.B1/NTLS2012, A10)	number at which to reach
_ - - - (200-999) (0-999) (0-9999)	
DON'T KNOW	D
REFUSED	R
P2_E_B4_Extension. Is there an extension number? (0-999999)	

NEW PHONE PROVIDED FOR YOUTH (P2_E_B4_PHONENUM = PHONE PROVIDED)

P2_E_B4TZ. What time zone is that in?

IF NEEDED: What time is it there?

INSTRUCTION: A TIME ZONE IS REQUIRED. USE ORIGINAL TIME ZONE OR STATE IF NEEDED.

CODE ONE ONLY

EASTERN TIME (US & CANADA) [(FILL CURRENT TIME)]	62
INDIANA (EAST) [(FILL CURRENT TIME)]	63
CENTRAL TIME (US & CANADA) [(FILL CURRENT TIME)]	65
ARIZONA [(FILL CURRENT TIME)]	68
MOUNTAIN TIME (US & CANADA) [(FILL CURRENT TIME)]	70
PACIFIC TIME (US & CANADA) [(FILL CURRENT TIME)]	71
ALASKA [(FILL CURRENT TIME)]	72
HAWAII [(FILL CURRENT TIME)]	73
BAJA CALIFORNIA [(FILL CURRENT TIME)]	93

ALL CONSENTING (P2_A_CONSENT=1)

[YOUTH]

P2_E_B5. What's the email [YOUTH] checks most often? (P18M-VI.D4)

INTERVIEWER: EMAIL ADDRESS SHOULD INCLUDE TEXT, THE @ SYMBOL, TEXT, A PERIOD, AND A VALID DOMAIN, SUCH AS ABCD@EFGH.COM

IF YOUTH DOES NOT HAVE AN EMAIL ADDRESS, SELECT "NONE"

SPECIFY	
NONE	0
DON'T KNOW	С
REFUSED	F

ALL CONSENTING (P2 A CONSENT=1)

[YOUTH] [his/her], (he/she)

P2_E_B6. <u>Before</u> we speak with [YOUTH] for [his/her] interview, can you tell me whether [YOUTH] will be able to complete it on [his/her] own, or will (he/she) need help from you, another adult, or special technology? (P18M-VI.G1, rev)

IF NEEDED: Special technologies can help youth with disabilities complete the interview by telephone. These could include: voice amplification for youth with hearing impairments or relay services for youth who use sign language. Others may benefit from help from a <u>person</u>, where a trusted adult joins the youth for (his/her) interview, providing support, if needed.

SUPPORT NEEDED (FROM PERSON OR TECHNOLOGY)1	
NO SUPPORT NEEDED0 P2_E_B10	GO TO
DON'T KNOWD P2_E_B10	GO TO
REFUSEDR P2_E_B10	GO TO

YOUTH IDENTIFIED AS NEEDING SUPPORTS FOR INTERVIEW (P2 E B6=1)

P2_E_B6A. What technologies or supports, if any, should we have available? (P18M-VI.G1, rev)

PROBE: Anything else?

INTERVIEWER: PLEASE MAKE NOTE OF ANY ASSISTIVE TECHNOLOGIES

REQUESTED IN THE YOUTH CASE NOTES.

	CODE ALL T	HAT APPLY
R WILL ASSIST WITH YOUTH INTERVIEWP2_E_B10	1	GO TO
R WILL PROXY FOR YOUTHP2_E_B11	2	GO TO
OTHER ADULT WILL PROXY FOR YOUTH	3	
VIDEO RELAYP2_E_B10	4	GO TO
VOICE AMPLIFICATIONP2_E_B10	5	GO TO
IN-PERSON INTERVIEWP2_E_B10	6	GO TO

OTHER TECHNOLOGYP2_E_B10	.99	GO TO
DON'T KNOWP2_E_B10	.D	GO TO
REFUSEDP2_E_B10	.R	GO TO

SOFT CHECK: IF P2_E_B6A=2 OR IF P2_E_B6A=3; May I confirm that [YOUTH] would not be able to answer \underline{any} of the questions on [his/her] own, even with support from you or another trusted adult?

OTHER ADULT PROXY REQUESTED FOR YOUTH (P2_E_B6A_3=1)
[YOUTH]

P2_E_B7. Thanks for letting us know that someone else will o [YOUTH]'s behalf. Would you please tell me his/her (P18M-VI.G2, rev)		
IF NEEDED: This helps us reach out to that person for [YOUTH]'s inte	rview.
	(STRING 30)	
FIRST NAME		
	(STRING 60)	
LAST NAME		
DON'T KNOW		GO TO P2_E_B9
REFUSED	F	R GO TO P2_E_B9
OTHER ADULT PROXY REQUESTED FOR YOUTH (P2_E_B6A_3=1)		
[NAME POPULATED FROM P2_E_B7]		
PROGRAMMER- EXTENSION MAY BE MISSING		
P2_E_B8_PhoneNum. What is [NAME FROM P2_E_B7]'s (YTD Baseline, 85) (200-999) (0-999)	·	
DON'T KNOW	С)
REFUSED	F	R
P2_E_B8_Extension. Is there an extension number? (0-999999)		

P2_E_B8_PHONENUM = PHONE PROVIDED

P2_E_B8TZ. What time zone is that in?

IF NEEDED: What time is it there?

INSTRUCTION: A TIME ZONE IS REQUIRED. USE ORIGINAL TIME ZONE OR STATE IF NEEDED.

CODE ONE ONLY

EASTERN TIME (US & CANADA) [(FILL CURRENT TIME)]	62
INDIANA (EAST) [(FILL CURRENT TIME)]	63
CENTRAL TIME (US & CANADA) [(FILL CURRENT TIME)]	65
ARIZONA [(FILL CURRENT TIME)]	68
MOUNTAIN TIME (US & CANADA) [(FILL CURRENT TIME)]	70
PACIFIC TIME (US & CANADA) [(FILL CURRENT TIME)]	71
ALASKA [(FILL CURRENT TIME)]	72
HAWAII [(FILL CURRENT TIME)]	73
BAJA CALIFORNIA [(FILL CURRENT TIME)]	93

OTHER ADULT PROXY REQUESTED FOR YOUTH (P2_E_B6A_3=1)

[YOUTH] [PROXY NAME FROM P2_E_B7]

P2_E_B9. How is [NAME FROM P2_E_B7] related to [YOUTH]? (P18M-VI.G3/NLTS2012, J1d)

INTERVIEWER: WHAT IS THE RELATIONSHIP OF THE PROXY TO THE YOUTH?

CODE ONE ONLY

PARENT OR GUARDIAN	.1
SIBLING	.2
OTHER FAMILY MEMBER	.3
STAFF FROM [YOUTH]'S SCHOOL	.4
STAFF FROM AN AGENCY/SERVICE PROVIDER	.5
OTHER PERSON	.99
DON'T KNOW	.D
REFUSED	.R

ALL CONSENTING (P2 A consent=1) IF P2_E_B6A_2=1: you / IF P2_E_B6=0, D, R OR P2_E_B6A = 1, 4-R: [YOUTH] / IF P2_E_B6A_3=1: [YOUTH PROXY (P2 E B7)]] P2 E B10. In general, what's the best time to reach [you/YOUTH/[YOUTH PROXY] by telephone? (NEW) PROBE: Are weekdays or weekends better? Are mornings, afternoons, or evenings best? WEEKDAY MORNINGS1 WEEKDAY AFTERNOONS2 WEEKEND DAY......4 WEEKEND EVENING......5 REFUSEDR ALL CONSENTING (P2 A CONSENT=1) [send/give] [you/EP] FILL PHONE IF P2 A MODE=1 OR 3 OR 4/FILL FIELD IF P2 A MODE = 2 OR Thanks for answering these questions. We'll [send/give] [you/EP] a gift P2 E B11. card for completing this interview. Would [you/EP] like a Walmart or a Target gift card? [IF MODE = PHONE: The gift card will be mailed with a thank you letter. It should arrive in the next 2-3 weeks. IF MODE = FIELD: You will need to sign your name on the tablet to show that you received it.1 ALL CONSENTING (P2_A_CONSENT=1) WHERE YOUTHWITHDRAWN = 1 OR YOUTHFINAL = 1 Thanks for your time today, we appreciate it! Have a great day. P2 E B12. PARENT INTERVIEW IS COMPLETE1 **TERMINATE** (DISP = 13) YOUTH CASE IS PENDING AND YOUTH IS ELIGIBLE FOR THE SURVEY: ALL CONSENTING (P2 A CONSENT=1) WHERE YOUTHDECEASED = 0 AND YOUTHWITHDRAWN = 0 AND YOUTHFINAL = 0

IF P2_E_B6A_2=1: [you about YOUTH], [you], [continue]
IF P2_E_B6=0, D, R OR P2_E_B6A = 1, 4-R: [YOUTH], [(he/she)], [speak]
IF P2_E_B6A_3=1: [YOUTH'S PROXY about YOUTH], [YOUTH'S PROXY], [speak]

P2_E_B13. Now I'd <u>like</u> to begin the next interview with [YOUTH/ you about YOUTH/ YOUTH's PROXY about YOUTH]. Would [(he/she)/you/YOUTH PROXY] be available to (continue/speak) now?

IF NEEDED: The next interview should take 20-35 minutes to complete, depending on [YOUTH's] experiences.

CLOSING: Thanks for your time today, we appreciate it! Have a great day.

YES –BEGIN YOUTH INTERVIEW NOW	CLOSE PARENT
	OPEN YOUTH RECORD (DISP = 13)
NO – SET APPT FOR YOUTH INTERVIEW	CLOSE PARENT
	OPEN YOUTH RECORD

SET CALLBACK FOR YOUTH (DISP = 13)

P2 E B13 = 1

FILL TEXT BASED ON SURVEY MODE

P2 E Break1.

IF MODE = CATI, FILL: >>INSTRUCTION: CLICK THROUGH THE REMAINING ITEMS TO STATUS THIS CASE AS COMPLETE. YOU MUST REACH THE "FINISHED" SCREEN FOR THE CASE TO CLOSE PROPERLY. ONCE FINISHED, CLOSE THE PARENT CASE AND OPEN THE YOUTH SURVEY. SELECT THE YOUTH RECORD TO BEGIN THE YOUTH INTERVIEW.<<

IF MODE = WEB, FILL: >>INSTRUCTION: CLICK THROUGH THE REMAINING ITEMS TO STATUS THIS CASE AS COMPLETE. ONCE FINISHED, CLOSE THE CONFIRMIT TAB AND RETURN TO SMARTFIELD TO OPEN THE YOUTH SURVEY. SELECT THE YOUTH RECORD IN SMARTFIELD, ADD AN ATTEMPT FOR THE YOUTH CASE, AND BEGIN THE YOUTH INTERVIEW.<<

CONTINUE	1	FINALIZE C	ASF

P2 E B13 = 2

FILL TEXT BASED ON SURVEY MODE

P2_E_Break2.

IF MODE = CATI, FILL: >>INSTRUCTION: CLICK THROUGH THE REMAINING ITEMS TO STATUS THIS CASE AS COMPLETE. YOU MUST REACH THE "FINISHED" SCREEN FOR THE CASE TO CLOSE PROPERLY. ONCE FINISHED, THE SYSTEM WILL BRING UP THE NEXT PARENT CASE. ONLY SET AN APPOINTMENT FOR THE YOUTH CASE IF IT IS A FIRM APPT.<<

IF MODE = WEB, FILL: >>INSTRUCTION: CLICK THROUGH THE REMAINING ITEMS TO STATUS THIS CASE AS COMPLETE. ONCE FINISHED, CLOSE THE CONFIRMIT TAB AND RETURN TO SMARTFIELD TO IDENTIFY THE NEXT PARENT CASE TO WORK. ONLY SET AN APPOINTMENT IN SMARTFIELD FOR THE YOUTH CASE IF IT IS A FIRM APPT.<<



Appendix C. PROMISE Five-Year Survey Youth Questionnaire



OMB Expiration Date: 02/28/2022

PROMISE 60-Month Follow-Up Survey: Youth Questionnaire

FINAL CATI SPECIFICATIONS - 3.29.19



Administrative Notes:

- **Field Period.** The PROMISE 60-month parent and youth surveys will be administered beginning 60 months after random assignment. The parent and youth surveys will be deployed independently and fielded concurrently. They may be completed in any order (parent then youth or youth then parent). We anticipate that for the majority of cases, the parent interview will be completed first, followed by the youth.
- **Consent** for participation in all interviews (parent 18-month and 60-month and youth 18-month and 60-month) was collected from parents at enrollment. All youth provided **assent** at enrollment.
- **Eligibility.** Deceased youth are ineligible for the survey. Youth who withdrew from the PROMISE evaluation will be classified as eligible for weighting and response rate computations but will be removed from all survey outreach.
- The **target respondent** is the youth who enrolled in the PROMISE evaluation and provided assent to take part. If the youth is unable to complete the interview on his/her own or with the support of a trusted adult, we will allow a proxy to complete it on the youth's behalf.
- **Mode and length.** This instrument is designed for an **interviewer administration** and will take approximately 20-35 minutes to complete. Interviews will be conducted in **English or Spanish**. Spanish language cases will be flagged in advance whenever possible.
- **Programming logic** is used to route respondents to the next applicable item or section based on the responses provided. The **target universe** for each item (based on skip logic or other criteria) is shown in the bar above the item number, along with fills denoted by text in brackets. Formatting is used to guide interviewing staff on question administration. Text shown in **ALL CAPS** is not read aloud. **Underlined** text is emphasized. Item sources are designated at the end of the question text in parentheses. Items repeated from the PROMISE 18-month survey are designated with (P18M-...). Items **newly added** for the 60-month instrument are highlighted in **blue** (these items were not part of the 18-month survey).

Sections of the youth survey questionnaire:

Section	Description	Items	Asked of Self- Reporting Youth	Asked of Youth's Proxy
A	Introduction	Y2_A_Mode to Y2_A_Q8	YES	YES
В	Youth education and training	Y2_B_A1 to Y2_B_B6	YES	YES
С	Youth employment and work-based experiences	Y2_C_Intro to Y2_C_A32	YES	YES
D	Youth's health and well-being	Y2_D_Intro to Y2_D_D8	YES	YES
E	Youth's self-determination and expectations for the future	Y2_E_A1 to Y_E_E6	YES	NO
F	Youth's knowledge of SSA benefits and work incentives	Y2_F_Intro to Y2_F_A5	YES	NO
G	Youth contact information	Y2_G_Intro to Y2_G_A7	YES	YES

TEXT FILLS FOR SPECIFIC SITES AND STATES

PRGM State	Health Insurance Marketplace Name	State-Specific Name for Medicaid	State- Specific Name for TANF	State-Specific Name for Vocational Rehabilitation Agency	State-Specific Name for American Job Center	State-Specific Name for S-Chip	SNAP program name (2/2018)	ABLE program name
AR		Arkansas Medicaid	TANF	Arkansas Rehabilitation Services	Workforce Center	ARKids	SNAP	-
CA	Covered California	Medi-Cal	CalWORKs	California Department of Rehabilitation	America's Job Center of California	Healthy Families	CalFresh	CalABLE
MD	Maryland Health Connection	Maryland Medicaid Program	Temporary Cash Assistance (TCA)	Division of Rehabilitation Services	One Stop Career Centers	Maryland Children's Health Program (MCHP)	Food Supplement Program (FSP)	Maryland ABLE Program
NY	NY State of Health	New York Medicaid	Family Assistance (FA)	Adult Career and Continuing Education Services – Vocational Rehabilitation (ACCES- VR)	Career Center	Child Health Plus	SNAP	NY ABLE Program
WI		ForwardHealth Medicaid	TANF	Division of Vocational Rehabilitation	Job Center	BadgerCare Plus	FoodShare Wisconsin	-
AZ		AHCCCS (pronounced 'access')	Cash Assistance (CA)	Arizona Rehabilitation Services Administration	Arizona @ Work	KidsCare	Arizona Nutrition Assistance NA)	-
СО	Connect for Health Colorado	Health First Colorado	Colorado Works	Colorado Division of Vocational Rehabilitation	Colorado Workforce Center	Child Health Plan Plus (CHP+)	Colorado Food Assistance Program	Colorado ABLE
MT		Montana Medicaid and HMK <i>Plus</i> : Passport to Health (Passport)	TANF	Montana Vocational Rehabilitation	Job Service	Healthy Montana Kids	SNAP	Montana ABLE
ND		North Dakota Medicaid	TANF	North Dakota Division of Vocational Rehabilitation	Job Service	Healthy Steps	SNAP	ABLE Plan for North Dakota
SD		South Dakota Medicaid	TANF	Division of Rehabilitation Services	South Dakota Department of Labor and Regulation	Children's Health Insurance Program (CHIP)	SNAP	-

PRGM State	Health Insurance Marketplace Name	State-Specific Name for Medicaid	State- Specific Name for TANF	State-Specific Name for Vocational Rehabilitation Agency	State-Specific Name for American Job Center	State-Specific Name for S-Chip	SNAP program name (2/2018)	ABLE program name
UT	federal marketplace	Utah Medicaid	TANF	Utah State Office of Rehabilitation	Utah Department of Workforce Services Employment Center	Children's Health Insurance Program (CHIP)	Food Stamp Program	-

PROGRAMMER: ACROSS THE SPECIFICATIONS, THE "ENROLLING PARENT," THE TARGET RESPONDENT FOR THE PARENT SURVEY, IS ABBREVIATED AS "EP." FILL THE FIRST NAME OF THE EP UNLESS OTHERWISE SPECIFIED.

Program	AR PROMISE	CaPROMISE	MD PROMISE	NY PROMISE	WI PROMISE	ASPIRE- ARIZONA	ASPIRE- COLORADO	ASPIRE- MONTANA	ASPIRE- NORTH DAKOTA	ASPIRE- SOUTH DAKOTA	ASPIRE- UTAH
Program State Fill:	Arkansas	California	Maryland	New York	Wisconsin	Arizona	Colorado	Montana	North Dakota	South Dakota	Utah

Variables from 60-month parent survey data to flow through to youth survey include:

Parent questionnaire item	Youth questionnaire item	Note
P2_A_YthLiv	Y2_A_Q5	If youth instrument completed on same day as parent instrument, fill Y2_A_Q5 with answer from P2_A_YthLiv
P2_A_Q5	Y2_A_Q2	If youth sex from sample load file = . and $P2_A_Q5$ populated, use $P2_A_Q5$ to fill logic in reference to youth sex at $Y2_A_Q2$
P2_A_Q7	Y2_A_Q7	If parent respondent is proxy for youth instrument (P2_E_B6a=2), fill Y2_A_Q7 with answer from P2_A_Q7
P2_A_Q7a	Y2_A_Q7a	If parent respondent is proxy for youth instrument (P2_E_B6a=2), fill Y2_A_Q7a with answer from P2_A_Q7a
P2_E_B2	Y2_G_A1	Fill address from P2_E_B2 in parent instrument to address listed in fill at Y2_G_A1. Override sample file address
P2_E_B4	Y2_G_A3	Fill phone number from P2_E_B4 in parent instrument to phone listed in fill at Y2_G_A3. Override sample file phone number
P2_E_B6a	Y2_A_Supt and Y2_A_Supts_Spec	If P2_E_B6a=1, set Y2_A_Supt=1 and Y2_A_Supts_Spec=2 in youth instrument

Project Decision Points:

Variable	Description	Values
FedProject	Study is federally funded	Yes (1)
RecordProject	Project will record all calls	Yes (1)
UseLocating	Project will include a locating component	Yes (1)
UseField	Project includes an in-person field component	Yes (1)
Fieldcalls	Project allows field staff (either Mathematica or from a grantee site) to call in and complete survey with phone interviewer. Requires that project provides list of possible staff calling in for dropdown selection by phone interviewer.	Yes (1)
ProxyOkay	Project allows completion of survey with a proxy.	Yes (1)
InterpOkay	Project allows completion of survey with a household translator.	Yes (1)
InstLang	Languages the instrument has been programmed for	English, Spanish
ExtraTrans	Project will use an external translation services for languages other than English, Spanish	No (0)
ExtraTransLang	Languages supported by external translation services	None
HandleDeceased	Project decision on how to handle cases where the sample member is reported as deceased	Terminate (0), go to youth if parent deceased
HandlePrison	Project decision on how to handle cases where the sample member is reported as incarcerated. If locating is selected and proxyok=1, we will attempt to contact the respondent through locating first before using a proxy.	Locating (1)
AdvRemails	Project decision on whether advance letter remails are allowed	Yes (1)
AdvEmails	Project decision on whether advance emails are allowed	No (0)
PaymentType	The type of payment triggered by a completed survey, or indication that there is no incentive.	None (0)
AllowWeb	The project will allow respondents to complete on web	No (0)
SMUpdateName	Project wants to collect an updated name for sample member	No (0)
SMUpdatePhone	Project wants to collect updated contact phone information for sample member	No (0)
SMUpdateAddress	Project wants to collect updated contact address information for sample member	No (0)
SMUpdateEmail	Project wants to collect updated contact email address information for sample member	No (0)
SMAltContacts	Project wants to collect updated contact alternative contacts for sample member	No (0)
NumAltContacts	Number of alternative contacts collected	0

History Review

PROGRAMMER:

PULL IN FIELDS FROM 60-MO INTERVIEW HISTORY FILE FOR INTERVIEWER REVIEW

Call Attempt

HISTORY REVIEWED OR DAILRESULT = 6

FILL RESPONDENT PHONE NUMBER AND EXTENSION FROM PRELOAD

DISABLE CLICK TO DIAL (1) IF FEDPROJECT = 0 AND (CURPHNTYPE = CELL (C) OR UNKNOWN (U) OR EMPTY)

DISABLE FIELD STAFF CALLING IN IF FIELDCALLS = 0

DialNumber. phone number details:

phone number= [phone number]

extension= [extension]

CODE ONE ONLY

CLICK TO DIAL1	DIALRESULT
MANUAL DIAL	MANUALDIAL
QUICK EXIT	EXIT, NO
	STATUSUPDATE
RESPONDENT CALLING IN	CALLIN
TRANSFER FROM ANOTHER INTERVIEWER5	CALLIN
FIELD STAFF CALLING IN	FIELDINFO

FIELDCALLS = 1 AND DIALNUMBER = 6

FieldInfo. Hello, my name is [INTERVIEWER NAME]. May I have your name?

INSTRUCTION: SELECT NAME OF FIELD INTERVIEWER/SITE STAFF MEMBER

DROPDOWN: FILL LIST OF FIELD INTERVIEWERS OR GRANTEE STAFF FROM PROJECT

PROGRAMMER: GO TO CALLIN

DIALNUMBER = 2

ManualDial.

PHONE NUMBER DETAILS:

PHONE NUMBER = [PHONE NUMBER]

EXTENSION = [EXTENSION]

INSTRUCTION: ENTER PHONE NUMBER ABOVE, NO DASHES.

HARD CHECK: IF ENTERED NUMBER DOES NOT MATCH LOADED NUMBER: THE PHONE NUMBERS DO NOT MATCH. PLEASE CORRECT.

DIALNUMBER = 1 OR MANUALDIAL = RESPONSE

DialResult.

INSTRUCTION: CODE RESULT OF DIALING

CODE ONE ONLY

SOMEONE ANSWERS	HELLO
NO ANSWER2	FINISHED (DISP = 31)
BUSY3	FINISHED (DISP = 2)
VOICEMAIL/ANSWERING DEVICE4	SKIP BOX
	DIALRESULT
PHONE/LINE PROBLEMS (NOT IN SERVICE, DISCONNECTED) 5	FINISHED (DISP = 32)
NEED TO REDIAL THE NUMBER6	DIALNUMBER

PROGRAMMER SKIP BOX DIALRESULT:

IF DIALRESULT = 4 AND VMFREQ = LEAVEMESSAGE, GO TO MESSAGESCRIPT. ELSE, GO TO FINISHED AND SET DISP = 33.

DIALRESULT = 4 AND VMFREQ = LEAVE MESSAGE

MessageScript.

Hi! This message is for [FullName]. I'm calling from Mathematica Policy Research to follow up on a letter we sent inviting you to take part in an important Social Security Administration study. You'll get a \$30 gift card for completing the interview. Please call us at 844-306-5011 to get started. Thanks!

¡Hola! Este mensaje es para [FullName]. Estoy llamando de Mathematica Policy Research llamando para dar seguimiento a una carta que enviamos invitándole a tomar parte en un importante estudio de la Administración del Seguro Social. Recibirá una tarjeta de regalo de \$30 por completar la entrevista. Por favor llámenos al 844-306-5011 para empezar. ¡Gracias!

INSTRUCTION: DID YOU LEAVE THE MESSAGE?

CODE ONE ONLY

YES	1
NO	0

PROGRAMMER SKIP BOX MESSAGE SCRIPT

IF MESSAGESCRIPT = 1, GO TO FINISHED AND SET DISP = 34. IF MESSAGESCRIPT = 2, GO TO FINISHED AND SET DISP = 33.

FirstContact

DIALRESULT=1

Hello. Hello, my name is [INTERVIEWER NAME]. I'm calling from Mathematica Policy Research on behalf of the Social Security Administration about an important national study.

May I please speak to [FULLNAME]?

Hola, mi nombre es [INTERVIEWER NAME]. Estoy llamando de Mathematica Policy Research en nombre de la Administración del Seguro Social como parte de un importante estudio nacional. ¿Puedo hablar con [FULLNAME], por favor?

INTERVIEWER: IF YOUTH IS UNAVAILABLE, ASK FOR PARENT/GUARDIAN OF YOUTH OR ANOTHER ADULT CLOSE TO YOUTH, SO YOU CAN FIND A BETTER TIME TO REACH THE YOUTH.

PROGRAMMER BOX HELLO

IF PROXY INFORMATION UPDATED FROM PARENT INSTRUMENT (Y2_CURRENTSTATE=2 [PROXY]), SHOW RESPONSE OPTIONS 1-4, 10 & 16.

CODE ONE ONLY

SPEAKING TO [FIRSTNAME]1	SAMPMEMB
[FIRSTNAME] COMES TO THE PHONE2	SAMPMEMB
NEED TO CALLBACK (NO APPT)3	THANKS (DISP = 36)
NEED TO CALLBACK (SET APPT)4	SETAPPT
[FIRSTNAME] HAS A HEALTH PROBLEM5	HEALTHPROB
[FIRSTNAME] IS IN AN INSTITUTION (HOSPITAL, GROUP HOME, JAIL) 6	INSTITUTION
[FIRSTNAME] HAS MOVED/HAS NEW NUMBER7	KNOWWHERE
[FIRSTNAME] DOES NOT SPEAK ENGLISH8	LANG
NEVER HEARD OF [FULLNAME]/WRONG NUMBER9	THANKS (DISP = 37)
HUNG UP DURING INTRODUCTION (HUDI)10	FINISHED (DISP=35)
[FIRSTNAME] IS DECEASED11	DECEASED
SPEAKING TO SPOUSE/PARTNER OF [FIRSTNAME]12	NEEDREP
SPEAKING TO OTHER ADULT IN HOUSEHOLD WITH [FIRSTNAME]13	NEEDREP
[FIRST NAME] UNAVAILABLE TO DO INTERVIEW14	NEEDREP

SPEAKING TO YOUTH'S PROXY	NEEDREP
YOUTH IS DECEASED16	DECEASED 2

PROGRAMMER SMVERIFIED BOX HELLO

IF HELLO=1 OR 2 AND SMVERIFIED = 0, SET SMVERIFIED = 1.

(DIALNUMBER = 4 OR 5) OR FIELDINFO = ANSWERED

Callin. Hello, my name is [INTERVIEWER NAME]. May I ask your name?

Hola, mi nombre es [INTERVIEWER NAME]. ¿Puedo preguntarle su nombre?

CODE ONE ONLY

SPEAKING TO [FIRSTNAME]1	SKIP BOX CALLIN
[FIRSTNAME] CALLED TO MAKE APPOINTMENT2	SETAPPT
[FIRSTNAME] CALLED TO REFUSE	REFUSALREASON
SOMEONE ELSE CALLED TO REFUSE4	REFUSALREASON
SOMEONE ELSE CALLED TO SAY [FIRSTNAME] DECEASED5	DECEASED
[FIRSTNAME] HAS A HEALTH PROBLEM6	HEALTHPROB
[FIRSTNAME] IS IN AN INSTITUTION (HOSPITAL, GROUP HOME, JA	IL) 7 INSTITUTION
[FIRSTNAME] HAS MOVED/HAS NEW NUMBER8	KNOWWHERE
[FIRSTNAME] DOES NOT SPEAK ENGLISH9	LANG
SPEAKING TO YOUTH'S PROXY12	NEWNAMEREP
YOUTH IS DECEASED13	DECEASED_2

PROGRAMMER SMVERIFIED BOX CALLIN

IF CALLIN = 1 AND SMVERIFIED = 0, SET SMVERIFIED = 1

PROGRAMMER SKIP BOX CALLIN

IF CALLIN = 1 AND DIALNUMBER = 6 (FIELD CALL), GO TO SAMPMEMB.

IF CALLIN = 1 AND DIALNUMBER NE 6 AND PHONE NUMBER LOADED, GO TO CALLINNUM.

IF CALLIN = 1 AND DIALNUMBER NE 6 AND NO PHONE NUMBER LOADED, GO TO CALLINBESTNUM.

IF CALLIN = 1 AND DIALNUMBER NE 6 AND PHONE NUMBER LOADED

FILL NUMBER FROM CURRENT LOADED NUMBER

CallinNum. INTERVIEWER: DID THE RESPONDENT CALL IN FROM [FILL NUMBER]?

CODE ONE ONLY

YES		1	SAMPMEMB
NO, DIFFERENT NUMBER			CALLINBESTNUM
UNKNOWN OR RESTRICTED NUMBER			CALLINBESTNUM
			O, LEINBEOTHOW
(CALLNILIM = 2 - 3) C	DR (CALLIN = 1 AND DIALNUMBER NE 6 AND NO PHONE	NIIIMRE	ER LOADED)
CallinBestNum.			<u> </u>
Callingestivum.	In case we get disconnected, is the phone number you one to use to call you back?	are can	ing from the best
	Por si nos desconectamos, ¿es el número de teléfono de llamarle de vuelta?	del que	llama el mejor para
	COD	E ONE	<u>ONLY</u>
YES	1	CALL	INNEWNUM
NO	0	CALL	INNEWNUM
DON'T KNOW	d	вох	CALLIN SETPHONE
REFUSED	r	вох	CALLIN SETPHONE
CALLINBESTNUM =	0 OR 1		
PROGRAMMER- EX	TENSION MAY BE MISSING		
CallinNewNum.	allinNewNum. IF CALLINBESTNUM = 1 Please tell me the number you are calling from, area code first.		
	Por favor dígame el número del que llama, empezando	con el	código de área.
IF CALLINBESTNUM = 0 Please give me the best telephone number to use, area code first.			rst.
Por favor dígame el mejor número de teléfono para llamarle, empezando con el código de área.			
INSTRUCTION: CONF	IRM PHONE WITH RESPONDENT BEFORE CONTINUING		
	<u> </u> <u> </u> - <u> </u> - <u> </u> - <u> </u> (1-999) (0-9999)		
ls th	ere an extension number?		
¿Hay un número de extensión?			
	<u> </u> (0-99999)		
DON'T KNOW	d	вох	CALLIN SETPHONE
REFUSED	r	вох	CALLIN SETPHONE

SOFT CHECK: IF PHONE NE 10 DIGITS: PHONE NUMBER SHOULD BE 10 NUMERIC DIGITS, NO SPACES, DASHES, PARENTHESES OR OTHER PUNCTUATION (OR EMPTY)

SOFT CHECK: IF AREA CODE LE 200: AREA CODE SHOULD BE GREATER THAN 200

SOFT CHECK: IF EXCHANGE LE 199: EXCHANGE SHOULD BE GREATER THAN 199

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CALLINNEWNUM = PHONE PROVIDED

CallInNewNumTZ. What time zone is that in?

¿En qué zona horaria está?

IF NEEDED: What time is it there?

¿Qué hora es ahí?

INSTRUCTION: A TIME ZONE IS REQUIRED. USE ORIGINAL TIME ZONE OR STATE IF NEEDED.

CODE ONE ONLY

EASTERN TIME (US & CANADA) [(FILL CURRENT TIME)]	62
INDIANA (EAST) [(FILL CURRENT TIME)]	63
CENTRAL TIME (US & CANADA) [(FILL CURRENT TIME)]	65
ARIZONA [(FILL CURRENT TIME)]	68
MOUNTAIN TIME (US & CANADA) [(FILL CURRENT TIME)]	70
PACIFIC TIME (US & CANADA) [(FILL CURRENT TIME)]	71
ALASKA [(FILL CURRENT TIME)]	72
HAWAII [(FILL CURRENT TIME)]	73
BAJA CALIFORNIA [(FILL CURRENT TIME)]	. 93

PROGRAMMER BOX CALLIN SETPHONE

ALL SCENARIOS FOR CALLIN GO TO SAMPMEMB.

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Health Problem Questions

HELLO = 5 OR CALLIN = 6

HealthProb.

INSTRUCTION: CODE THE TYPE OF HEALTH PROBLEM

CODE ONE ONLY

SHORT-TERM HEALTH PROBLEM (BETTER DURING PROJECT) 1	CALLLATER
LONG-TERM HEALTH PROBLEM (NOT GETTING BETTER SOON)2	HEALTHPROBTYPE

HEALTHPROB = 2

HealthProbType.

INSTRUCTION: CODE THE TYPE OF HEALTH PROBLEM

CODE ONE ONLY

SENSORY IMPAIRMENT (DEAF/BLIND)	AMPRELAY
VOCAL/SPEECH IMPAIRMENT	AMPRELAY
PHYSICAL IMPAIRMENT	CALLLATER
COGNITIVE/INTELLECTUAL IMPAIRMENT	SKIP BOX
	HEALTHPROBTYPE
OTHER IMPAIRMENT5	SKIP BOX
	HEALTHPROBTYPE

PROGRAMMER SKIP BOX HEALTHPROBTYPE

IF (HEALTHPROBTYPE = 4 OR 5) AND PROXYOKAY = 1, GO TO NEEDREP. IF (HEALTHPROBTYPE = 4 OR 5) AND PROXYOKAY = 0, GO TO THANKS AND SET DISP = 40.

HEALTHPROBTYPE = 1 OR 2

him IF SAMPMEMBSEX = MALE; her IF SAMPMEMBSEX = FEMALE; him or her IF SAMPMEMBSEX = UNKNOWN

él IF SAMPMEMBSEX = MALE; ella IF SAMPMEMBSEX = FEMALE; él o ella IF SAMPMEMBSEX = UNKNOWN

AmpRelay. I can increase the volume of my voice or [FIRSTNAME]'s voice, or we could use a relay service. Would either of these enable [him / her / him or her] to complete the interview?

Puedo aumentar el volumen de mi voz o la voz de [FIRSTNAME], o podríamos utilizar un servicio de retransmisión. ¿Permitiría alguno de éstos que [él / ella / él o ella] completara la entrevista?

CODE ONE ONLY

YES - INCREASE VOLUME ON PHONE	RESPAVAIL
YES - USE RELAY SERVICE2	RELAYPHONE
NO3	SKIP BOX AMPRELAY
DON'T KNOW d	SETAPPT

PROGRAMMER SKIP BOX AMPRELAY

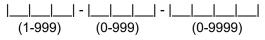
IF AMPRELAY = 3 AND PROXYOKAY = 1, GO TO NEEDREP.
IF AMPRELAY = 3 AND PROXYOKAY = 0, GO TO THANKS AND
SET DISP = 40.

AMPRELAY = 2

RelayPhone.

May I have the telephone number of the relay service we should use to reach [FIRST NAME]?

¿Podría tener el número de teléfono del servicio de retransmisión que debemos utilizar para contactar a [FIRSTNAME]?



DON'T KNOW.......d SETAPPT

SOFT CHECK: IF PHONE NE 10 DIGITS:

PHONE NUMBER SHOULD BE 10 NUMERIC DIGITS, NO SPACES, DASHES, PARENTHESES OR OTHER PUNCTUATION (OR EMPTY)

SOFT CHECK: IF AREA CODE LE 200: AREA CODE SHOULD BE GREATER THAN 200

SOFT CHECK: IF EXCHANGE LE 199: EXCHANGE SHOULD BE GREATER THAN 199

AMPRELAY = 1 OR (AMPRELAY = 2 AND RELAYPHONE = RESPONSE)

RespAvail. Is [FIRSTNAME] available now?

¿Está [FIRSTNAME] disponible ahora?

CODE ONE ONLY

YES	SKIP BOX RESPAVAIL
NO – NEEDS CALL BACK	SETAPPT
DON'T KNOWd	SETAPPT

PROGRAMMER SKIP BOX RESPAVAIL

IF RESPAVAIL = 1 AND AMPRELAY = 1, GOTO AMPPHONE.

IF RESPAVAIL = 1 AND AMPRELAY = 2, GO TO CALLRELAY.

AMPRELAY = 1 AND RESPAVAIL = 1

AmpPhone.

INSTRUCTION: INCREASE VOLUME ON PHONE (USING JABBER) AND ASK GATEKEEPER TO CALL [FIRSTNAME] TO THE PHONE.

CODE ONE ONLY

[FIRSTNAME] COMES TO THE PHONE	SAMPMEMB
NEED TO CALLBACK 2	SETAPPT

PROGRAMMER SMVERIFIED BOX AMPPHONE

IF AMPPHONE = 1 AND SMVERIFIED = 0, SET SMVERIFIED = 1

RESPAVAIL=1 AND AMPRELAY = 2

CallRelay.

INSTRUCTION: CALL RELAY SERVICE USING PHONE PROVIDED BY ANSWERING PARTY. IF THE CONNECTION IS MADE, CODE 1 BELOW AND CONTINUE. IF NOT, CODE 2.

CODE ONE ONLY

[FIRSTNAME] COMES TO THE PHONE	SAMPMEMB
NEED TO CALLBACK	SETAPPT

PROGRAMMER SMVERIFIED BOX CALLRELAY

IF AMPPHONE = 1 AND SMVERIFIED = 0, SET SMVERIFIED = 1

HEALTHPROB = 1 OR HEALTHPROBTYPE = 3

CallLater. Will [FIRSTNAME] be able to talk on the telephone if I call back in a week?

If [FIRSTNAME] is unavailable, a parent or guardian of [FIRSTNAME] can complete the interview on [FIRSTNAME]'s behalf.

¿Será [FirstName] capaz de hablar por teléfono si vuelvo a llamar en una semana?

Si [FIRSTNAME] no está disponible, un padre o tutor de [FIRSTNAME] puede completar la entrevista en nombre de [FIRSTNAME].

CODE ONE ONLY

YES/MAYBE - CALLBACK1	SETAPPT
NO0	SKIP BOX CALLLATER
DON'T KNOW d	SETAPPT
CONDUCT INTERVIEW WITH YOUTH'S PROXY	NEEDREP

PROGRAMMER SKIP BOX CALL LATER

IF CALLLATER = 0 AND PROXYOKAY = 1, GO TO NEEDREP.

IF CALLLATER = 0 AND PROXYOKAY = 0, GO TO THANKS AND SET DISP = 40.

HELLO = 11 OR CALLIN = 5 OR HEALTHPROBTYPE = 6

Deceased. I am very sorry to hear that (he/she) passed away. Please accept my condolences.

Siento mucho oír que (él/ella) falleció. Por favor acepte mis condolencias.

PROGRAMMER SKIP BOX DECEASED

GO TO FINISHED AND SET DISP = 41 FOR BOTH YOUTH AND PARENT INSTRUMENT

IF PARENT INSTRUMENT AND YOUTHDECEASED = 0 AND YOUTHWITHDRAWN = 0 AND YOUTHFINAL = 0

[YOUTH]

BreakOff1. INSTRUCTION: ASK IF [YOUTH] IS AVAILABLE TO COMPLETE AN INTERVIEW NOW.

IF [YOUTH] <u>IS AVAILABLE</u>, CODE 1 BELOW. ONCE THE PARENT RECORD IS CLOSED, OPEN THE YOUTH RECORD TO BEGIN THE YOUTH INTERVIEW.

IF [YOUTH] IS <u>NOT AVAILABLE</u>, CODE 2 BELOW. ONCE THE PARENT RECORD IS CLOSED, OPEN THE YOUTH RECORD TO MAKE AN APPOINTMENT FOR THE YOUTH INTERVIEW.

CODE ONE ONLY

YES, [YOUT	H] IS AVAILABLE TO COMPLETE INTERVIEW	1	FINISHED (DISP = 41)
NO, [YOUTH] IS UNAVAILABLE TO COMPLETE		
INTERVIEW		2	BREAKOFF1PHONE
DDE ALOEE1 - 2			
BREAKOFF1 = 2			
[YOUTH]			
BreakOff1Phone.	What's the <u>best</u> telephone number at which to reach ['¿Cuál es el <u>mejor</u> número de teléfono para contactar a	_	
SAME NUME	BER USED AS THIS CALL1	PROGF	RAMMERBOX BREAKOFF1
DIFFERENT	PHONE NUMBER2	BREAK	OFF1PHONE
DON'T KNO\	<i>N</i> d	PROGE	RAMMERBOX BREAKOFF1
REFUSED	r	PROGF	RAMMERBOX BREAKOFF1
BREAKOFF1PHON	E = 2		
[YOUTH]			
PROGRAMMER- E	XTENSION MAY BE MISSING		
BreakOff1Phone_Pl	noneNum. Please give me [YOUTH]'s telephone number, a first.	area co	de
	Por favor deme el número de teléfono de [PRO empezando con el código de área.	XY FIR	ST NAME],
INSTRUCTION: CON	NFIRM PHONE WITH RESPONDENT BEFORE CONTINUING	G	
	_ -		
	(1-999) (0-999)		
ls t	there an extension number?		
НS	lay un número de extensión?		
	<u> </u>		
DON'T KNO\	N	d	
REFUSED		r	

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SOFT CHECK: IF PHONE NE 10 DIGITS: PHONE NUMBER SHOULD BE 10 NUMERIC DIGITS, NO SPACES, DASHES, PARENTHESES OR OTHER PUNCTUATION (OR EMPTY)

SOFT CHECK: IF AREA CODE LE 200: AREA CODE SHOULD BE GREATER THAN 200

SOFT CHECK: IF EXCHANGE LE 199: EXCHANGE SHOULD BE GREATER THAN 199

PROGRAMMER SKIP BOX BREAKOFF1PHONE_PHONENUM

IF BREAKOFF1PHONE_PHONENUM = D OR R, GO TO THANKS (DISP = 41).

BREAKOFF1PHONE_PHONENUM = PHONE PROVIDED

BREAKOFF1PHONETZ. What time zone is that in?

¿En qué zona horaria está?

IF NEEDED: What time is it there?

¿Qué hora es ahí?

INSTRUCTION: A TIME ZONE IS REQUIRED. USE ORIGINAL TIME ZONE OR STATE IF NEEDED.

CODE ONE ONLY

EASTERN TIME (US & CANADA) [(FILL CURRENT TIME)]	. 62
INDIANA (EAST) [(FILL CURRENT TIME)]	. 63
CENTRAL TIME (US & CANADA) [(FILL CURRENT TIME)]	. 65
ARIZONA [(FILL CURRENT TIME)]	. 68
MOUNTAIN TIME (US & CANADA) [(FILL CURRENT TIME)]	. 70
PACIFIC TIME (US & CANADA) [(FILL CURRENT TIME)]	. 71
ALASKA [(FILL CURRENT TIME)]	. 72
HAWAII [(FILL CURRENT TIME)]	. 73
BAJA CALIFORNIA [(FILL CURRENT TIME)]	. 93

PROGRAMMER SKIP BOX BREAKOFF1PHONETZ GO TO THANKS AND SET DISP = 41

HELLO=16

Deceased_2. I am very sorry to hear that (he/she) passed away. Based on this, we will not need to complete an interview with you. Please accept my condolences.

Siento mucho oír que (él/ella) falleció. Basado en esto, no necesitaremos completar una entrevista con usted. Por favor acepte mis condolencias.

YOUTH DECEASED 1 FINISHED (DISP = 41)

PROGRAMMER BOX DECEASED_2

SET DISP = 41 FOR BOTH PARENT AND YOUTH INSTRUMENT

Institution Questions

HELLO = 6 OR CALLIN = 7

Institution. INSTRUCTION: CODETYPE OF INSTITUTION.

CODE ONE ONLY

HOSPITAL 1	HOMESOON
NURSING HOME2	CAPABLE
ASSISTED LIVING FACILITY	CAPABLE
GROUP HOME4	CAPABLE
JAIL OR PRISON 5	HOMESOON

INSTITUTION = 1 OR 5

the hospital IF INSTITUTION = 1, jail or prison IF INSTITUTION = 5

del hospital IF INSTITUTION = 1, de la cárcel o prisión IF INSTITUTION = 5

HomeSoon. Do you expect [FirstName] to come home from [the hospital / jail or prison] within a week or two?

IF INSTITUTION = 5, FILL: IF NEEDED: Or is it possible to contact (him/her) by phone in the prison?

¿Espera que [FirstName] vuelva a casa [del hospital /de la cárcel o prisión] en una o dos semanas?

IF INSTITUTION = 5, FILL: IF NEEDED: O, ¿es posible contactarle por teléfono en la prisión?

CODE ONE ONLY

YES, ARRANGE CALLBACK	1
NO – NOT HOME SOON	0
DON'T KNOW	d
REFUSED	r
NO – NOT HOME SOON BUT CAN CONTACT [FIRSTNAME]	
IN JAIL OR PRISON	2

PROGRAMMER SKIP BOX HOMESOON

IF HOMESOON = 1, D OR R, GO TO SETAPPT.

IF HOMESOON = 0 AND INSTITUTION = 1 (HOSPITAL), GO TO CAPABLE.

IF HOMESOON = 0 AND INSTITUTION = 5 (PRISON) AND PROXYOKAY = 1, GO TO NEEDREP.

IF HOMESOON = 0 AND INSTITUTION = 5 (PRISON) AND PROXYOKAY = 0 AND HANDLEPRISON = 0 (TERMINATE), GO TO THANKS AND SET DISP = 42.

IF HOMESOON = 0 AND INSTITUTION = 5 (PRISON) AND PROXYOKAY = 0 AND HANDLEPRISON = 1 (LOCATING), GO TO FACILITY.

IF HOMESOON=2 GO TO INCARCERATED

(INSTITUTION= 2 - 4) OR (INSTITUTION = 1 (HOSPITAL) AND HOMESOON = 0)

him IF SAMPMEMBSEX = MALE; her IF SAMPMEMBSEX = FEMALE; him or her IF SAMPMEMBSEX = UNKNOWN he IF SAMPMEMBSEX = MALE; she IF SAMPMEMBSEX = FEMALE; he or she IF SAMPMEMBSEX = UNKNOWN his IF SAMPMEMBSEX = MALE; her IF SAMPMEMBSEX = FEMALE; his or her IF SAMPMEMBSEX = UNKNOWN himself IF SAMPMEMBSEX = MALE; herself IF SAMPMEMBSEX = FEMALE; himself or herself IF SAMPMEMBSEX = UNKNOWN

él IF SAMPMEMBSEX = MALE; ella IF SAMPMEMBSEX = FEMALE; él o ella IF SAMPMEMBSEX = UNKNOWN él mismo IF SAMPMEMBSEX = MALE; ella misma IF SAMPMEMBSEX = FEMALE; él mismo o ella misma IF SAMPMEMBSEX = UNKNOWN

Capable.

I am calling about an interview we would like to conduct with [FirstName]. A letter explaining why we are calling was recently sent to [him / her / him or her]. Would [he / she / he or she] be able to answer questions [himself / herself / himself or herself] or would someone need to answer on [his / her / his or her] behalf?

IF NEEDED: If [FIRSTNAME] is unable to respond, a parent or guardian of [FIRSTNAME] can complete the interview on [FIRSTNAME]'s behalf.

Estoy llamando sobre una entrevista que nos gustaría llevar a cabo con [FIRSTNAME]. Recientemente se le envió una carta a [él / ella / él o ella] explicando por qué estamos llamando. ¿Sería [él/ella/ él o ella] capaz de responder preguntas [él mismo / ella misma / él mismo o ella misma] o alguien tendría que responder en su nombre?

IF NEEDED: Si [FIRSTNAME] no puede responder, un padre o tutor de [FIRSTNAME] puede completar la entrevista en nombre de [FIRSTNAME].

CODE ONE ONLY

[FIRSTNAME] IS ABLE TO RESPOND	FACILITY
[FIRSTNAME] IS UNABLE TO RESPOND	SKIP BOX CAPABLE
DON'T KNOW d	FACILITY
REFUSEDr	SKIP BOX CAPABLE

PROGRAMMER SKIP BOX CAPABLE

IF (CAPABLE = 2 OR R) AND PROXYOKAY= 1, GO TO NEEDREP.

IF (CAPABLE = 2 OR R) AND PROXYOKAY= 0. GO TO THANKS AND SET DISP = 43.

(CAPABLE=1 OR D) OR (HOMESOON = 0 AND INSTITUTION = 5 (PRISON) AND PROXYOKAY = 0 AND HANDLEPRISON = 1 (LOCATING))

Facility. What is the name of the facility?

¿Cuál es el nombre de la instalación?

CODE ONE ONLY

	(STRING 60)
DON'T KNOW	d
REFUSED	r

PROGRAMMER SKIP BOX FACILITY

IF INSTITUTION=5 AND HOMESOON = 0 AND HANDLEPRISON = 1 (LOCATING), GO TO THANKS AND SET DISP = 42 AND LOCTYPE = 2.

IF INSTITUTION=5 AND HOMESOON = 0 AND HANDLEPRISON = 0 (TERMINATE), GO TO THANKS AND SET DISP = 42.

IF INSTITUTION=1-4 AND (CAPABLE = 1 OR D) AND FACILITY = R, GO TO THANKS AND SET DISP = 43.

IF INSTITUTION=1-4 AND (CAPABLE = 1 OR D) AND (FACILITY = D OR ANSWERED), GO TO CONTACT.

(CAPABLE = 1 OR D) AND (FACILITY = D OR ANSWERED)

Contact. Do you have the name of the administrator or a contact person there?

¿Tiene el nombre del administrador o una persona de contacto allí?

CODE	ONF	ONI	Υ

YES	NEWNAMEFAC
NO	FACADDR
DON'T KNOW d	FACADDR
REFUSEDr	THANKS (DISP = 43)

CONTACT = 1

PROGRAMMER: REQUIRE THAT SOME AMOUNT OF TEXT BE ENTERED IN FIRST NAME OR LAST NAME

NewNameFac. Please give me the correct spelling of his or her full name.

Por favor dígame la manera correcta de escribir el nombre completo de él o ella..

INSTRUCTION: CONFIRM SPELLING OF NAME WITH RESPONDENT BEFORE CONTINUING

First name?	
¿Primer nombre?	
	(STRING 20)
FIRST NAME	
Middle initial	
¿Inicial de segundo nombre?	
	(STRING 1)
MIDDLE INITIAL	

Last name? ¿Apellido? _____ (STRING 30) LAST NAME (CONTACT= 0 OR D) OR NEWNAMEFAC = ANSWERED hospital IF INSTITUTION =1; nursing home IF INSTITUTION = 2; assisted living facility IF INSTITUTION = 3; group home IF INSTITUTION = 4 FacAddr. What is the address of the [hospital / nursing home / assisted living facility / group home]? ¿Cuál es la dirección del [hospital/ hogar de ancianos//centro de vivienda asistida/ hogar colectivo]? INSTRUCTION: CONFIRM ADDRESS WITH RESPONDENT BEFORE CONTINUING What is the first line of the address? ¿Cuál es la primera línea de la dirección? (STRING (60)) Street Address Line 1 Is there an apartment or unit number for this address? ¿Hay un número de apartamento o unidad en esta dirección? (STRING (60)) Street Address Line 2 And what is the zip code? ¿Cuál es el código postal? (STRING (10)) ZIP Code Town or city? ¿Pueblo o ciudad? (STRING (20)) City State? ¿Estado? (STRING (2)) State DON'T KNOW......d **FACPHONE**

Mathematica® Inc.

THANKS (DISP = 43)

REFUSED.....r

FACADDR = ANSWERED OR D
PROGRAMMER- EXTENSION MAY BE MISSING

FacPhone. May I please have the telephone number of the hospital/group home/assisted living facility?

¿Puedo tener el número de teléfono del hospital/hogar colectivo/centro de vivienda asistida?

INSTRUCTION: CONFIRM PHONE WITH RESPONDENT BEFORE CONTINUING

Please give me the telephone number, area code first.

Por favor deme el número de teléfono, empezando con el código de área.

Is there an extension number?

¿Hay un número de extensión?

(0-99999)

DON'T KNOW....... d THANKS (DISP = 43)

REFUSED.....r THANKS (DISP = 43)

SOFT CHECK: IF PHONE NE 10 DIGITS: PHONE NUMBER SHOULD BE 10 NUMERIC DIGITS, NO SPACES, DASHES, PARENTHESES OR OTHER PUNCTUATION (OR EMPTY)

SOFT CHECK: IF AREA CODE LE 200: AREA CODE SHOULD BE GREATER THAN 200

SOFT CHECK: IF EXCHANGE LE 199: EXCHANGE SHOULD BE GREATER THAN 199

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FACPHONE = PHONE PROVIDED

NewPhoneTZFac. What time zone is that in?

¿En qué zona horaria está?

IF NEEDED: What time is it there?

¿Qué hora es ahí?

INSTRUCTION: A TIME ZONE IS REQUIRED. USE ORIGINAL TIME ZONE OR STATE IF NEEDED.

CODE ONE ONLY

EASTERN TIME (US & CANADA) [(FILL CURRENT TIME)]	. 62
INDIANA (EAST) [(FILL CURRENT TIME)]	. 63
CENTRAL TIME (US & CANADA) [(FILL CURRENT TIME)]	. 65
ARIZONA [(FILL CURRENT TIME)]	. 68
MOUNTAIN TIME (US & CANADA) [(FILL CURRENT TIME)]	. 70
PACIFIC TIME (US & CANADA) [(FILL CURRENT TIME)]	. 71
ALASKA [(FILL CURRENT TIME)]	. 72
HAWAII [(FILL CURRENT TIME)]	. 73
BAJA CALIFORNIA [(FILL CURRENT TIME)]	. 93

PROGRAMMER SKIP BOX FACPHONE

IF PARENTDECEASED = 1 OR PARENTWITHDRAWN = 1 OR PARENTAGENCY = 1 OR PARENT FINAL = 1, GO TO THANKS AND SET DISP = 36

IF PARENTDECEASED = 0 AND PARENTWITHDRAWN = 0 AND PARENTAGENCY = 0 AND PARENTFINAL = 0, GO TO BREAKOFF2

APPEND NEWNAMEFAC, NEWFACADDR, NEWFACPHONE, AND NEWFACPHONETZ TO CALL HISTORY NOTE

IF PARENTDECEASED = 0 AND PARENTWITHDRAWN = 0 AND PARENTAGENCY = 0 AND PARENTFINAL = 0

BreakOff2. [INSTRUCTION: ASK IF [PARENT] IS AVAILABLE TO COMPLETE AN INTERVIEW NOW.

IF [PARENT] <u>IS AVAILABLE</u>, CODE 1 BELOW. ONCE THE YOUTH RECORD IS CLOSED, OPEN THE PARENT RECORD TO BEGIN THE PARENT INTERVIEW.

IF [PARENT] IS <u>NOT AVAILABLE</u>, CODE 2 BELOW. ONCE THE YOUTH RECORD IS CLOSED, OPEN THE PARENT RECORD TO MAKE AN APPOINTMENT FOR THE PARENT INTERVIEW.]

CODE ONE ONLY

YES, [PARENT] IS AVAILABLE TO COMPLETE INTERVIEW	1	THANKS (DISP = 36)
NO, [PARENT] IS UNAVAILABLE TO COMPLETE		
INTERVIEW	2	BREAKOFF2PHONE

Mathematica® Inc.

BREAKOFF2 = 2		
[PARENT].		
BreakOff2Phone.	What's the best telephone number at which to reach [Y	OUTH/PARENT]?
	¿Cuál es el <u>mejor</u> número de teléfono para contactar a	[YOUTH/PARENT]?
	R USED AS THIS CALL1	PROGRAMMERBOX BREAKOFF2
	HONE NUMBER2	BREAKOFF2PHONE
DON'T KNOW	d	PROGRAMMERBOX BREAKOFF2
REFUSED	r	PROGRAMMERBOX BREAKOFF2
BREAKOFF2PHONE	= 2	
[PARENT].; PROGRA	MMER- EXTENSION MAY BE MISSING	
BreakOff2Phone_Pho	oneNum. Please give me [PARENT]'s telephone number,	area code first.
Por favor deme el nú	mero de teléfono de [PARENT'S], empezando con el códi	go de área.
INSTRUCTION: CONF	IRM PHONE WITH RESPONDENT BEFORE CONTINUING	
	- -	
	(1-999) (0-999) (0-9999)	
ls th	ere an extension number?	
¿Ha	y un número de extensión?	
	(0-99999)	
DON'T KNOW		d
REFUSED		r
	NE NE 10 DIGITS: PHONE NUMBER SHOULD BE 10 NUMERIC D THER PUNCTUATION (OR EMPTY)	IGITS, NO SPACES, DASHES,
SOFT CHECK: IF AREA	A CODE LE 200: AREA CODE SHOULD BE GREATER THAN 200	
SOFT CHECK: IF EXCH	HANGE LE 199: EXCHANGE SHOULD BE GREATER THAN 199	
L		

C.29

BREAKOFF2PHONE PHONENUM = PHONE PROVIDED BREAKOFF2PHONETZ. What time zone is that in? / ¿En qué zona horaria está? What time is it there? / ¿Qué hora es ahí? IF NEEDED: INSTRUCTION: A TIME ZONE IS REQUIRED. USE ORIGINAL TIME ZONE OR STATE IF NEEDED. CODE ONE ONLY EASTERN TIME (US & CANADA) [(FILL CURRENT TIME)]62 CENTRAL TIME (US & CANADA) [(FILL CURRENT TIME)]65 MOUNTAIN TIME (US & CANADA) [(FILL CURRENT TIME)]......70 PACIFIC TIME (US & CANADA) [(FILL CURRENT TIME)]......71 ALASKA [(FILL CURRENT TIME)].......72 HAWAII [(FILL CURRENT TIME)]73 BAJA CALIFORNIA [(FILL CURRENT TIME)]93 PROGRAMMER SKIP BOX BREAKOFF2PHONETZ GO TO THANKS AND SET DISP = 36 HOMESOON = 2 INCARCERATED. What is the name of the place where [FIRSTNAME] is being held? ¿Cómo se llama el lugar donde [NAME] está detenido(a)? (STRING 200) NAME OF PRISON DON'T KNOW......d REFUSED.....r INCARCERATED= ANSWERED OR d INCARCERATED 2. In what city or town is it located? ¿En qué ciudad o pueblo está ubicado? (STRING 50) NAME OF CITY/TOWN

Ι	DON'T KNOW d
F	REFUSEDr
INCARC	ERATED= ANSWERED OR d
INCARC	ERATED_3 In what state is it located?
ć	¿ En qué estado está ubicado?
١	_ (DROPDOWN LIST)
\$	STATE
[DON'T KNOW d
F	REFUSEDr
HOMES	OON=2
INCARC	ERATED_4 When is [FIRSTNAME] expected to be released?
•	¿Cuándo se espera que [NAME] sea puesto(a) en libertad?
Ī	PROBE: I just need a month and year. Your best estimate is fine.
	Sólo necesito un mes y año. La mejor estimación que me puede dar está bien.
I	INTERVIEWER: ENTER MONTH ON NEXT SCREEN OR CODE DON'T KNOW.
F	PROGRAMMER: COLLECT DATE WITH SEPARATE FIELDS
E	ENTER DATE ON NEXT SCREEN1
5	SERVING A LIFE SENTENCE
INCARC	CERATED_4= 1
INCARC	ERATED_MONTH When is [FIRSTNAME] expected to be released?
ć	¿Cuándo se espera que [NAME] sea puesto(a) en libertad?
F	PROBE: I just need a month and year. Your best estimate is fine.
	Sólo necesito un mes y año. La mejor estimación que me puede dar está bien.
	
	(1-12)

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PROGRAMMER: COLLECT DATE WITH SEPARATE FIELDS	
DON'T KNOW	d
REFUSED	r

INCARCERATED 4=1 INCARCERATED_YEAR When is [FIRSTNAME] expected to be released? ¿Cuándo se espera que [NAME] sea puesto(a) en libertad? PROBE: I just need a month and year. Your best estimate is fine. Sólo necesito un mes y año. La mejor estimación que me puede dar está bien. (2019-2099) PROGRAMMER: COLLECT DATE WITH SEPARATE FIELDS DON'T KNOW......d REFUSED.....r HOMESOON=2 INCARCERATED 5 Do you know [FIRSTNAME]'s inmate number? ¿Y usted sabe el número de preso(a) de [NAME]? INTERVIEWER: ENTER NUMBER OR CODE DON'T KNOW (STRING 50) INMATE NUMBER DON'T KNOW......d REFUSED.....r

PROGRAMMER SKIP BOX INCARCERATED

IF PARENTDECEASED = 1 OR PARENTWITHDRAWN = 1 OR PARENTAGENCY = 1 OR PARENT FINAL = 1, GO TO THANKS AND SET DISP = 42

IF PARENTDECEASED = 0 AND PARENTWITHDRAWN = 0 AND PARENTAGENCY = 0 AND PARENTFINAL = 0, GO TO BREAKOFF3

APPEND INCARCERATED, INCARCERATED_2, INCARCERATED_3, INCARCERATED_4, INCARCERATED_MONTH, INCARCERATED_YEAR, AND INCARCERATED_5 TO THE END OF THE CALL HISTORY NOTE

IF PARENTDECEASED = 0 AND PARENTWITHDRAWN = 0 AND PARENTAGENCY = 0 AND PARENTFINAL = 0

[YOUTH]

BreakOff3. [INSTRUCTION: ASK IF [YOUTH] IS AVAILABLE TO COMPLETE AN INTERVIEW NOW.

IF [YOUTH] <u>IS AVAILABLE</u>, CODE 1 BELOW. ONCE THE PARENT RECORD IS CLOSED, OPEN THE YOUTH RECORD TO BEGIN THE YOUTH INTERVIEW.

IF [YOUTH] IS <u>NOT AVAILABLE</u>, CODE 2 BELOW. ONCE THE PARENT RECORD IS CLOSED, OPEN THE YOUTH RECORD TO MAKE AN APPOINTMENT FOR THE YOUTH INTERVIEW.]

[INSTRUCTION: ASK IF [PARENT] IS AVAILABLE TO COMPLETE AN INTERVIEW NOW.

IF [PARENT] <u>IS AVAILABLE</u>, CODE 1 BELOW. ONCE THE YOUTH RECORD IS CLOSED, OPEN THE PARENT RECORD TO BEGIN THE PARENT INTERVIEW.

IF [PARENT] IS <u>NOT AVAILABLE</u>, CODE 2 BELOW. ONCE THE YOUTH RECORD IS CLOSED, OPEN THE PARENT RECORD TO MAKE AN APPOINTMENT FOR THE PARENT INTERVIEW.]

<u>CODE ONE</u>	ONLT
YES, [PARENT] IS AVAILABLE TO COMPLETE INTERVIEW1	THANKS (DISP = 42
NO, [PARENT] IS UNAVAILABLE TO COMPLETE	
INTERVIEW2	BREAKOFF3PHONE
BREAKOFF3 = 2	
[PARENT].	

CODE ONE ONLY

BreakOff3Phone.

What's the best telephone number at which to reach [PARENT]?

¿Cuál es el mejor número de teléfono para contactar a [PARENT]?

SAME NUMBER USED AS THIS CALL1	PROGRAMMERBOX BREAKOFF3
DIFFERENT PHONE NUMBER2	BREAKOFF3PHONE
DON'T KNOWd	PROGRAMMERBOX BREAKOFF3
REFUSEDr	PROGRAMMERBOX BREAKOFF3

BREAKOFF3PHONE = 2
[PARENT]; PROGRAMMER- EXTENSION MAY BE MISSING
BreakOff3Phone_PhoneNum.
Please give me [PARENT]'s telephone number, area code first.
Por favor deme el número de teléfono de [PARENT], empezando con el código de área.
INSTRUCTION: CONFIRM PHONE WITH RESPONDENT BEFORE CONTINUING
<u> </u>
(1-999) (0-999)
Is there an extension number?
¿Hay un número de extensión?
_ _ _ _ (0-99999)
DON'T KNOW d
REFUSEDr
SOFT CHECK: IF PHONE NE 10 DIGITS: PHONE NUMBER SHOULD BE 10 NUMERIC DIGITS, NO SPACES, DASHES, PARENTHESES OR OTHER PUNCTUATION (OR EMPTY)
SOFT CHECK: IF AREA CODE LE 200: AREA CODE SHOULD BE GREATER THAN 200
SOFT CHECK: IF EXCHANGE LE 199: EXCHANGE SHOULD BE GREATER THAN 199

PROGRAMMER SKIP BOX BREAKOFF3PHONE_PHONENUM

IF BREAKOFF3PHONE_PHONENUM = D OR R, GO TO THANKS (DISP = 42).

BREAKOFF3PHONE_PHONENUM = PHONE PROVIDED

BREAKOFF3PHONETZ. W

What time zone is that in?

¿En qué zona horaria está?

IF NEEDED: What time is it there?

¿Qué hora es ahí?

INSTRUCTION: A TIME ZONE IS REQUIRED. USE ORIGINAL TIME ZONE OR STATE IF NEEDED.

CODE ONE ONLY

EASTERN TIME (US & CANADA) [(FILL CURRENT TIME)]	. 62
INDIANA (EAST) [(FILL CURRENT TIME)]	. 63
CENTRAL TIME (US & CANADA) [(FILL CURRENT TIME)]	. 65
ARIZONA [(FILL CURRENT TIME)]	. 68
MOUNTAIN TIME (US & CANADA) [(FILL CURRENT TIME)]	. 70
PACIFIC TIME (US & CANADA) [(FILL CURRENT TIME)]	. 71
ALASKA [(FILL CURRENT TIME)]	. 72
HAWAII [(FILL CURRENT TIME)]	. 73
BAJA CALIFORNIA [(FILL CURRENT TIME)]	. 93

PROGRAMMER SKIP BOX BREAKOFF3PHONETZ

GO TO THANKS AND SET DISP = 42

Know Where Questions

HELLO = 7 OR CALLIN = 8

KnowWhere. Do you or does anyone there have a phone number for [FirstName]?

If you do not have contact information for [FIRSTNAME], please let me know if you have it for a parent or guardian of [FIRSTNAME].

INTERVIEWER: IF RESPONDENT HAS CONTACT INFO FOR BOTH, COLLECT FOR [FIRSTNAME] AND SELECT 1 BELOW.

¿Tiene usted o alguien ahí un número de teléfono para [FIRSTNAME]?

Si no tiene información de contacto de [FIRSTNAME], por favor dígame si tiene la información de contacto del padre o tutor de [FIRSTNAME].

INTERVIEWER: IF RESPONDENT HAS CONTACT INFO FOR BOTH, COLLECT FOR [FIRSTNAME] AND SELECT 1 BELOW.

CODE ONE ONLY

YES	KNOWWHEREPHONE
NO0	THANKS (DISP = 37)
DON'T KNOW d	THANKS (DISP = 37)
REFUSEDr	THANKS (DISP = 37)
YES HAVE CONTACT INFO FOR PARENT OR GUARDIAN	
OF [FIRSTNAME]3	KNOWWHEREPHONE

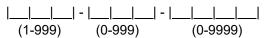
KNOWWHERE = 1, 2, 3

PROGRAMMER- EXTENSION MAY BE MISSING

KnowWherePhone. Please give me the telephone number, area code first.

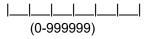
Por favor deme el número de teléfono, empezando con el código de área.

INSTRUCTION: CONFIRM PHONE WITH RESPONDENT BEFORE CONTINUING



Is there an extension number?

¿Hay un número de extensión?



SOFT CHECK: IF PHONE NE 10 DIGITS: PHONE NUMBER SHOULD BE 10 NUMERIC DIGITS, NO SPACES, DASHES, PARENTHESES OR OTHER PUNCTUATION (OR EMPTY)

SOFT CHECK: IF AREA CODE LE 200: AREA CODE SHOULD BE GREATER THAN 200 SOFT CHECK: IF EXCHANGE LE 199: EXCHANGE SHOULD BE GREATER THAN 199

KNOWWHEREPHONE = PHONE PROVIDED

KnowWherePhoneTZ. What time zone is that in?

¿En qué zona horaria está?

IF NEEDED: What time is it there?

¿Qué hora es ahí?

INSTRUCTION: A TIME ZONE IS REQUIRED. USE ORIGINAL TIME ZONE OR STATE IF NEEDED.

CODE ONE ONLY

EASTERN TIME (US & CANADA) [(FILL CURRENT TIME)]	. 62
INDIANA (EAST) [(FILL CURRENT TIME)]	. 63
CENTRAL TIME (US & CANADA) [(FILL CURRENT TIME)]	65
ARIZONA [(FILL CURRENT TIME)]	. 68
MOUNTAIN TIME (US & CANADA) [(FILL CURRENT TIME)]	. 70
PACIFIC TIME (US & CANADA) [(FILL CURRENT TIME)]	. 71
ALASKA [(FILL CURRENT TIME)]	. 72
HAWAII [(FILL CURRENT TIME)]	. 73
BAJA CALIFORNIA [(FILL CURRENT TIME)]	. 93

PROGRAMMER SKIP BOX KNOWWHEREPHONETZ

GO TO THANKS AND SET DISP = 38 (NEW NUMBER).

Language Questions

HELLO = 8 OR CALLIN = 9

Lang. INSTRUCTION: CODE LANGUAGE NEEDED TO COMPLETE INTERVIEW IF KNOWN:

CODE ONE ONLY

SPANISH	. 10	
FRENCH	. 12	
CHINESE	. 4	
RUSSIAN	. 25	
GERMAN	. 7	
HUNGARIAN	. 14	
VIETNAMESE	. 42	
OTHER LANGUAGE	. 99	OTHERLANG
DON'T KNOW	. d	

PROGRAMMER SKIP BOX LANG

IF LANG = INSTLANG (ONE OF THE PROGRAMMED LANGUAGES – ENGLISH OR SPANISH), GO TO DIFFLANG.

IF (LANG NE INSTLANG OR LANG = D) AND PROXYOKAY = 1, GO TO NEEDREP.

IF (LANG NE INSTLANG OR LANG = D) AND PROXYOKAY = 0 AND INTERPOKAY = 1, GO TO NEEDREP.

IF LANG NE INSTLANG AND PROXYOKAY = 0 AND INTERPOKAY = 0 AND EXTRATRANS = 1 AND LANG = EXTRATRANSLANG (EXTERNAL TRANSLATION IN THIS LANGUAGE), GO TO SETAPPT.

IF LANG NE INSTLANG AND PROXYOKAY = 0 AND INTERPOKAY = 0 AND EXTRATRANS = 1 AND LANG NE EXTRATRANSLANG. GO TO THANKS AND SET DISP = 44.

IF LANG NE INSTLANG AND PROXYOKAY = 0 AND INTERPOKAY = 0 AND EXTRATRANS = 0, GO TO THANKS AND SET DISP = 44.

LANG = 99	
OtherLang. SPECIFY OTHER LANGUAGE	
	(STRING 15)

PROGRAMMER SKIPBOX OTHERLANG.

IF LANG = 99 AND PROXYOKAY = 1, GO TO NEEDREP.

IF LANG = 99 AND PROXYOKAY = 0 AND INTERPOKAY = 1, GO TO NEEDREP.

ELSE, GO TO THANKS AND SET DISP = 44.

LANG = INSTLANG (ENGLISH OR SPANISH)

FILL LANG FROM LIST

DiffLang. Please allow me a moment to locate a [LANG] speaking interviewer.

Por favor deme un momento para localizar a un encuestador que hable [LANG].

INSTRUCTION: PLACE SAMPLE MEMBER ON HOLD AND ALERT A SUPERVISOR TO TRY AND LOCATE A [LANG] SPEAKING INTERVIEWER.

IF AN INTERVIEWER IS NOT AVAILABLE, SCHEDULE AN APPOINTMENT WITH RESPONDENT.

IF AN INTERVIEWER IS AVAILABLE, TRANSFER CALL AND SCHEDULE A CALLBACK FOR TOMORROW.

PROGRAMMER SKIPBOX DIFFLANG

IF DIFFLANG = 1, LAUNCH APPOINTMENT BOX, SET LANGUAGE = LANG, GO TO THANKS AND SET DISP = 1.

IF DIFFLANG = 2, SET LANGUAGE = LANG, GO TO SETAPPT AND SET (DISP = 1).

Proxy/Interp Questions

IF (PROXYOKAY=1 AND (AMPRELAY=3 OR (CALLLATER=0, 2, 3) OR (HEALTHPROBTYPE=4 OR 5) OR (HOMESOON = 0 AND INSTITUTION = 5 (PRISON)) OR (CAPABLE = 2 OR R) OR (LANG NE INSTLANG) OR (LANG = D OR 99)))
OR (PROXYOKAY=0 AND INTERPOKAY=1 AND ((LANG NE INSTLANG) OR (LANG = D OR 99)))
OR (PROXYOKAY=1 AND HELLO=12, 13, 14, 15) OR (PROXYOKAY=1 AND CALLIN=10, 11, 12) OR (PROXYOKAY=1

OR (PROXYOKAY=1 AND HELLO=12, 13, 14, 15) OR (PROXYOKAY=1 AND CALLIN= 10, 11, 12) OR (PROXYOKAY=1 AND CALLATER=2,3)

FILL PROXY IF PROXYOKAY = 1, INTERPRETER IF (PROXYOKAY = 0 AND INTERPOKAY = 1)

DISABLE RESEPONES OPTION PROXY LIVES ELSEWHERE (4) ONLY IF PROXYOKAY = 0

NeedRep.

INTERVIEWER: IF SPEAKING TO PROXY ALREADY, DO NOT READ PROXY TEXT BELOW AND SELECT APPLICABLE RESPONSE OPTION.

Is it possible to speak with a parent or guardian of [FIRSTNAME]?

¿Es posible hablar con un padre o tutor de [FIRSTNAME]?

IF INTERPOKAY = 1

INTERVIEWER: READ TEXT IF YOUTH CAN COMPLETE AN INTERVIEW WITH THE ASSISTANCE OF AN INTERPRETER. DO NOT READ IF SPEAKING TO PROXY.

We are looking for someone who is 18 years or older who [lives with [SampMembFULLNAME] to help (him/her) by interpreting the interview for us. Are you 18 years of age or older and live with [SampMembFULLNAME]?]

Estamos buscando a alguien que tenga 18 años o más que [vive con [SampMembFULLNAME] para ayudarle a (él/ella) interpretando la entrevista para nosotros. ¿Tiene usted 18 años o más y vive con [SampMembFULLNAME]?]

ALL: Is now a good time?

¿Es buen momento ahora?

CODE ONE ONLY

YES, SPEAKING TO FAMILY MEMBER/FRIEND WHO WILL ACT AS [PROXY]1	NEWNAMEREP
YES, SPEAKING TO [PROXY], BUT IT IS NOT A GOOD TIME2	NEWNAMEREP
[PROXY] COMES TO PHONE3	NEWNAMEREP
[PROXY] LIVES HERE AND NOT CURRENTLY AVAILABLE4	NEWNAMEREP
PROXY LIVES ELSEWHERE5	NEWNAMEREP
NO [PROXY] AVAILABLE6	SKIP BOX NEEDREP
DON'T KNOWd	SKIP BOX NEEDREP
YES, SPEAKING TO FAMILY MEMBER/FRIEND WHO WILL ACT AS [INTERPRETER]7	NEWNAMEREP
YES, SPEAKING TO [INTERPRETER], BUT IT IS NOT A GOOD TIME8	NEWNAMEREP
[INTERPRETER] COMES TO PHONE	NEWNAMEREP
[INTERPRETER] LIVES HERE AND NOT CURRENTLY AVAILABLE 10	NEWNAMEREP
INTERPRETER LIVES ELSEWHERE 11	NEWNAMERED

NO [INTERPRETER] AVAILABLE	. 12	SKIP BOX NEEDREP
----------------------------	------	------------------

PROGRAMMER SMVERIFIED BOX NEEDREP

IF NEEDREP = 1 – 4 AND 7-10 AND SMVERIFIED = 0, SET SMVERIFIED = 1

NEEDREP = 1 - 5, 7-11

your su nombre completo IF NEEDREP = 1 - 3 OR 7-9; his or her el nombre completo de él o ella IF NEEDREP = 4 - 5 OR 10-11

PROGRAMMER: ONLY MIDDLIE INITIAL IS ALLOWED TO BE MISSING

NewNameRep.

Please give me the correct spelling of [your / his or her] full name.

Por favor dígame la manera correcta de escribir [su nombre completo / el nombre completo de él o ella].

INSTRUCTION: CONFIRM SPELLING OF NAME WITH RESPONDENT BEFORE CONTINUING SPECIFY NAME

Fi	rst	na	m	Δ	7

¿Primer nombre?

_____ (STRING 20)

FIRST NAME

Middle initial

¿Inicial del segundo nombre?

_____ (STRING 1)

MIDDLE INITIAL

Last name?

¿Apellido?

_____ (STRING 30)

LAST NAME

DON'T KNOW......d

REFUSED.....r

PROGRAMMER SKIP BOX NEWNAMEREP.

IF NEWNAMEREP HAS NAME PROVIDED, SET REPTYPE AND GO TO REPREL. IF NEWNAMEREP = D OR R, GO TO THANKS AND SET DISP = 36 (CALLBACK).

PROGRAMMER SET REPTYPE

IF (NEEDREP = 7-11 AND INTERPOKAY = 1, SET REPTYPE = 1 (INTERPRETER). IF (NEEDREP = 1-5 AND PROXYOKAY = 1, SET REPTYPE = 2 (PROXY) AND UPDATE RESPONDENT TO PROXY.

NEEDREP = 1 - 5, 7-11 AND NEWNAMEREP = ANSWERED (NOT D OR R)

They están ellos relacionados IF NEEDREP = 4 – 5 or 10-11, ELSE, you está usted

RepRel. And how are [they / you] related to [FIRSTNAME]?

¿Y cómo [están ellos relacionados / está usted] relacionado(a) con [FIRSTNAME]?

CODE ONE ONLY

PARENT	4	
OTHER (SPECIFY)	8	OTHERREL
STAFF PERSON FROM YOUTH'S SCHOOL	11	
ADULT SIBLING OR OTHER FAMILY MEMBER	12	
SOMEONE FROM AN AGENCY/SERVICE PROVIDER	13	
FAMILY MEMBER LIVING IN HOUSEHOLD	14	
NON-FAMILY MEMBER LIVING IN HOUSEHOLD	15	
DON'T KNOW	d	TERMINATE
REFUSED	r	TERMINATE

SOFT CHECK: IF REPREL= D OR R PRIOR TO TERMINATE READ:

This helps us document who completed each interview. Your name will be kept private and will not be linked to your answers in any reports we create. Are there any questions or any concerns you have about this question that I could help address?

PROGRAMMER: IF REPREL= D OR R, ROUTE AS REFUSAL. INTERVIEW SHOULD NOT CONTINUE.

PROGRAMMER SKIP BOX REPREL

IF REPREL = 8, GO TO OTHERREL. ELSE, GO TO SKIP BOX NEEDREP.

REPREL= 8		
OtherRel.		
INSTRUCTION: SPECIFY OTHER RELATIONS	HIP.	
	(STRING 20)	GO TO SKIP BOX NEEDREP.
OTHER RELATIONSHIP		

PROGRAMMER SKIP BOX NEEDREP

IF NEEDREP = 1 OR 3, 7 OR 9 (SPEAKING TO PROXY/INTERPRETER), GO TO SAMPMEMBBOX.

IF NEEDREP = 2 OR 8 (SPEAKING TO BUT NOT GOOD TIME), GO TO SETAPPT.

IF NEEDREP = 4 OR 10 (PROXY/INTERPRETER NOT AVAILABLE), GO TO NEEDREPBESTBUM.

IF NEEDREP = 5 OR 11 (PROXY/INTERPRETER LIVES ELSEWHERE), GO TO NEEDREPPHONE. IF (NEEDREP = 6 OR D) AND PROXYOKAY = 1, GO TO THANKS AND SET DISP = 45. IF (NEEDREP = 12) AND INTERPOKAY = 1, GO TO THANKS AND SET DISP = 44). NEEDREP = 4 OR 10 AND NEWNAMEREP = ANSWERED (NOT D OR R) [FIRST NAME] FROM NEWNAMEREP NeedRepBestNum. Is this telephone number I reached you on the best number to use to call [PROXY FIRST NAME]? ¿Es este número de teléfono donde le contacté a usted el mejor número para Ilamar a [PROXY FIRST NAME]? CODE ONE ONLY YES......1 **SETAPPT NEEDREPPHONE** DON'T KNOW......d THANKS (DISP = 36) REFUSED.....r THANKS (DISP = 36) (NEEDREP = 5 OR 11 AND NEWNAMEREP = ANSWERED (NOT D OR R)) OR NEEDREPBESTNUM = 0 [FIRST NAME] FROM NEWNAMEREP PROGRAMMER- EXTENSION MAY BE MISSING Please give me [PROXY FIRST NAME]'s telephone number, area code first. NeedRepPhone. Por favor deme el número de teléfono de [PROXY FIRST NAME], empezando con el código de área. INSTRUCTION: CONFIRM PHONE WITH RESPONDENT BEFORE CONTINUING _|_|_|-| (1-999)(0-999)(0-9999)Is there an extension number? ¿Hay un número de extensión? (0-999999)DON'T KNOW......d

SOFT CHECK: IF PHONE NE 10 DIGITS: PHONE NUMBER SHOULD BE 10 NUMERIC DIGITS, NO SPACES, DASHES, PARENTHESES OR OTHER PUNCTUATION (OR EMPTY)

REFUSED.....r

SOFT CHECK: IF AREA CODE LE 200: AREA CODE SHOULD BE GREATER THAN 200

SOFT CHECK: IF EXCHANGE LE 199: EXCHANGE SHOULD BE GREATER THAN 199

PROGRAMMER SKIP BOX NEEDREPPHONE

IF (NEEDREPPHONE = D OR R) AND NEEDREP = 5, GO TO THANKS (DISP = 45).

IF (NEEDREPPHONE = D OR R) AND NEEDREP = 11, GO TO THANKS (DISP = 44).

IF (NEEDREPPHONE = D OR R) AND NEEDREPBESTNUM = 0, GO TO THANKS (DISP = 36).

NEEDREPPHONE = PHONE PROVIDED

NeedRepPhoneTZ. What time zone is that in?

¿En qué zona horaria está?

IF NEEDED: What time is it there?

¿Qué hora es ahí?

INSTRUCTION: A TIME ZONE IS REQUIRED. USE ORIGINAL TIME ZONE OR STATE IF NEEDED.

CODE ONE ONLY

EASTERN TIME (US & CANADA) [(FILL CURRENT TIME)]	62
INDIANA (EAST) [(FILL CURRENT TIME)]	63
CENTRAL TIME (US & CANADA) [(FILL CURRENT TIME)]	65
ARIZONA [(FILL CURRENT TIME)]	68
MOUNTAIN TIME (US & CANADA) [(FILL CURRENT TIME)]	70
PACIFIC TIME (US & CANADA) [(FILL CURRENT TIME)]	71
ALASKA [(FILL CURRENT TIME)]	72
HAWAII [(FILL CURRENT TIME)]	73
BAJA CALIFORNIA [(FILL CURRENT TIME)]	93

PROGRAMMER SKIP BOX NEEDREPPHONETZ GO TO THANKS AND SET DISP = 38 (NEW NUMBER).

NEWNAMEREP = NAME PROVIDED

YOUR SU DIRECCIÓN IF NEEDREP = 1-3 OR 7-9; HIS OR HER EL DIRECCIÓN DE ÉL O ELLA IF NEEDREP = 4-5 OR 10-11

NeedRepAddr. And [your/his or her] address? ¿Y [su dirección/el dirección de él o ella]?

INSTRUCTION: CONFIRM ADDRESS WITH RESPONDENT BEFORE CONTINUING

What is the first line of the address? ¿Cuál es la primera línea de la dirección? (STRING (60)) Street Address Line 1 Is there an apartment or unit number for this address? ¿Hay un número de apartamento o unidad en esta dirección? (STRING (60)) Street Address Line 2 And what is the zip code? ¿Cuál es el código postal? (STRING (10)) ZIP Code Town or city? ¿Pueblo o ciudad? (STRING (20)) City State? ¿Estado? (STRING (2)) State DON'T KNOW......d

REFUSED.....r

SampMemb Questions

(HELLO = 1 OR 2) OR CALLINNUM = 1 OR AMPPHONE = 1 OR CALLRELAY = 1

IF QUALIFIED LEVEL LT 2 (INT NOT STARTED), DISPLAY RESPONSE CHOICE (2), ELSE HIDE.

your name was given IF NEEDREP = 4 - 5; ELSE, you volunteered

[PROMISE/ASPIRE]: IF PROGRAMNAME FROM SAMPLE LOAD = MD PROMISE, WISCONSIN PROMISE, CAPROMISE, NYS PROMISE, OR AR PROMISE MDP, FILL PROMISE. ELSE, FILL ASPIRE.

SampMemb.

IF HELLO = 2 (COMES TO PHONE) AND REPTYPE = 0-2 (ALL)

Hi, my name is [INTERVIEWER]. I'm calling on behalf of the Social Security Administration about an important study.

Hola, mi nombre es [INTERVIEWER]. Estoy llamando en nombre de la Administración del Seguro Social acerca de un importante estudio.

IF QL LT 2 (INTERVIEW NOT STARTED) AND REPTYPE = 0 - 1

We're following up on a letter we sent inviting you to take part in the [PROMISE/ASPIRE] 60-Month Survey. The goal of this survey is to learn more about your education, work experiences, future goals, and day-to-day life.

Estamos dando seguimiento a una carta que enviamos invitándole a tomar parte en la Encuesta de 60 Meses de [PROMISE/ASPIRE]. El objetivo de esta encuesta es aprender más sobre su educación, experiencias laborales y beneficios que pueda recibir. La participación de cada persona es voluntaria, pero muy importante y todas las respuestas se mantendrán de manera estrictamente confidencial.

IF QL GE 2 (INTERVIEW STARTED) AND REPTYPE = 0 - 2 (ALL)

I'm calling to finish the interview we are conducting about [your/FIRSTNAME's] education, work experiences, and health and well-being. Is now a good time?

Estoy llamando para terminar la entrevista que estamos llevando a cabo sobre [su educación y experiencias laborales /la educación y experiencias laborales de [FIRSTNAME]], y [su salud y bienestar/salud y bienestar de [FIRSTNAME]]. ¿Es buen momento ahora?

IF QL LT 2 (INTERVIEW NOT STARTED) AND REPTYPE = 2 (PROXY)

We are conducting an important study for the Social Security Administration. The questions are about the education, work experiences, and health and well-being of [SampMemFULLNAME], and we wanted to interview [SampMembFULLNAME]. But I understand that [SampMembFULLNAME] is unable to be interviewed and [you volunteered/your name was given] as someone who could answer on [his/her] behalf.

Estamos llevando a cabo un importante estudio para la Administración del Seguro Social. Las preguntas son acerca de la educación, experiencias laborales y salud y bienestar de [SampMemFULLNAME], y queríamos entrevistarle a [SampMemFULLNAME]. Pero entiendo que [SampMembFULLNAME] no puede ser entrevistado(a) y [usted se ofreció/nos dio su nombre] como alguien que podría responder por [él/ella].

CODE ONE ONLY

BEGIN INTERVIEW 1	SAMPMEMBBOX
DID NOT RECEIVE OR DOES NOT RECALL THE LETTER2	NOLETTER
NOT A GOOD TIME3	SETAPPT
HUNG UP DURING INTRODUCTION4	VERSMCONTACT

PROGRAMMER SMVERIFIED BOX SAMPMEMB

IF SAMPMEMB = 1 AND SMVERIFIED = 0, SET SMVERIFIED = 1.

PROGRAMMER SKIP BOX SAMPMEMB

IF (CURPHNTYPE = CELL (C) OR UNKNOWN (U) OR EMPTY) AND (DIALNUMBER = 1, 2 4, OR 5), GO TO SAFETY.

IF (CURPHNTYPE = CELL (C) OR UNKNOWN (U) OR EMPTY) AND DIALNUMBER = 6 (FIELD CALL IN), GO TO CONFIRMREC BOX.

IF CURPHNTYPE = LANDLINE (L) AND REPREL= 1 - 7, GO TO CONFIRMREC BOX.

IF CURPHNTYPE = LANDLINE (L) AND SAMPMEMB = 1, GO TO CONFIRMREC BOX.

No Letter Questions

SAMPMEMB = 2

NoLetter. I'm sorry the letter did not reach you. I'd be happy to read the letter to you now or answer any questions you may have about the survey.

Can we begin now?

Siento que la carta no le llegó. Con gusto puedo leerle la carta ahora o contestar cualquier pregunta que pueda tener sobre la encuesta.

¿Podemos empezar ahora?

CODE ONE ONLY

BEGIN INTERVIEW 1	SKIP BOX SAMPMEMB
WANTS ANOTHER LETTER	READLETTER
NOT A GOOD TIME3	SETAPPT

NOLETTER = 2

ReadLetter. May I read the letter to you and then we can begin?

¿Puedo leerle la carta y luego podemos empezar?

INSTRUCTION: READ LETTER TO RESPONDENT AND CONTINUE.

CODE ONE ONLY

PROGRAMMER SKIP BOX READLETTER

IF ADVEMAILS = 1, GO TO EMAILEXIT.

IF ADVEMAILS = 0 AND ADVREMAILS = 1, GO TO SENDLETTEREXIT.

IF ADVEMAILS = 0 AND ADVREMAILS = 0, GO TO THANKS AND SET DISP = 5.

Standard Questions

(DIALNUMBER = 1, 2 4, OR 5) AND (CURPHNTYPE = CELL (C) OR UNKNOWN (U) OR EMPTY) AND ((SAMPMEMB = 1-2) OR (REPREL= 1-8))

Safety. Are you in a place where you can safely talk on the phone and answer my questions?

¿Está en un lugar donde puede hablar por teléfono y responder a mis preguntas de forma segura?

PROBE IF NEEDED: For example, are you driving?

Por ejemplo, ¿está conduciendo?

CODE ONE ONLY

YES, BEGIN INTERVIEW	SKIP BOX
	CONFIRMREC
NOT A GOOD TIME2	SETAPPT
DON'T KNOW d	SETAPPT
REFUSEDr	SETAPPT

PROGRAMMER SKIP BOX CONFIRMREC

IF RECORDPROJECT = 0 (NO), SKIP TO NEXT QUESTION TO BEGIN INTERVIEW.

IF RECORDPROJECT = 1 (YES), CONTINUE TO CONFIRMREC.

RECORDPROJECT = 1 (YES)

ConfirmRec. This call may be monitored or recorded for quality assurance purposes.

Esta llamada puede ser monitoreada o grabada para control de calidad.

INSTRUCTION: CODE 0 ONLY IF RESPONDENT OBJECTS TO BEING RECORDED.

CODE ONE ONLY

BEGIN INTERVIEW	GO TO P2_A_MODE.
BEGIN INTERVIEW – PERMANENTLY STOP RECORDING THIS CALL 0	GO TO P2 A MODE.

SOFT CHECK: IF CONFIRMREC = 0, INTERVIEWER PLEASE CONFIRM THE RESPONDENT SAYS HE/SHE DOES NOT WANT TO BE RECORDED.

CONFIRMREC= 1 OR 0

NextQuestion. SURVEY SHOULD THEN CONTINUE TO THE NEXT UNANSWERED

ALL PRIOR REQUIRED SURVEY QUESTIONS ANSWERED

LastQuestion. GO TO CONTACT INFO SECTION BOX

Appointments and Breakoffs

HELLO = 4 OR CALLIN = 2 OR AMPRELAY = D OR RELAYPHONE = D OR (RESPAVAIL = 0 OR D) OR AMPPHONE = 2 OR CALLRELAY = 2 OR (CALLLATER = 1 OR D) OR (HOMESOON = 1, D OR R) OR (LANG NE INSTLANG AND PROXYOKAY = 0 AND INTERPOKAY = 0 AND EXTRATRANS = 1 AND LANG = EXTRATRANSLANG) OR DIFFLANG = 2 OR ((NEEDREP = 2 OR (NEEDREP = 4 AND REPTYPE = 1)) AND ((REPREL = 1 - 7, D, OR R) OR OTHERREL = ANSWERED)) OR SAMPMEMB = 3 OR NOLETTER = 3 OR (SAFETY = 2, D, OR R)

SetAppt. When would be a good time to callback?

¿Cuándo sería una hora conveniente para volver a llamar?

INSTRUCTION: MAKE AN APPOINTMENT USING THE 'APPOINTMENT' ICON OR PRESS <CTRL-A> TO INVOKE THE APPOINTMENT MAKING DIALOG.

PROGRAMMER: NO FORWARD OPTION

PROGRAMMER SKIP BOX SETAPPT

IS PHONE LOADED FOR CURRENT RESPONDENT, GO TO CONFPHONEEXIT. IF NO PHONE LOADED FOR CURRENT RESPONDENT, GO TO NEWPHONEEXIT.

IF TERMINATE BUTTON SELECTED
DISABLE WEBFINISH (5) IF ALLOWWEB = 0
If you prefer IF ALLOWWEB = 1
Si prefiere IF ALLOWWEB = 1

KindOfExit. INSTRUCTION: RECORD THE KIND OF EXIT.

<u></u>	CONTENT
REFUSES TO CONTINUE1	REFUSALREASON
RESPONDENT WILL CALL US BACK2	THANKS (DISP = 47)
RESPONDENT REQUESTED LETTER	NOLETTEREXIT
CALL DROPPED4	SKIP BOX THANKS
	(DISP = 49)
CALL BACK ON NEW PHONE NUMBER6	NEWPHONEEXIT
PROXY NEEDED FOR YOUTH7	THANKS (DISP = 40)

CODE ONE ONLY

KINDOFEXIT=1 OR (CALLIN = 3 OR 4)

RefusalReason.

INSTRUCTION: INDICATE REASON FOR REFUSAL.

 CODE ONE ONLY

 CONFIDENTIALITY
 1

 NOT INTERESTED
 2

 INTERVIEW TOO LONG
 3

 DOESN'T BELIEVE STUDY WILL MAKE A DIFFERENCE
 4

 DOESN'T LIKE TOPIC OR ORGANIZATION
 5

 DID NOT SPECIFY/NO REASON GIVEN
 6

 OTHER REASON (SPECIFY)
 7

 DOES NOT REMEMBER ENROLLING IN PROMISE/ASPIRE
 8

REFUSALREASON = 7

OtherRefusalReason.

INSTRUCTION: SPECIFY THE OTHER REASON.

(STRING 200)

PROGRAMMER REFUSALREASON CALL HISTORY BOX

APPEND REFUSAL REASON TO THE END OF THE CALL HISTORY NOTE. IF REFUSAL REASON = 7, APPEND OTHERREFUSALREASON TEXT.

REFUSALREASON = 1 - 6 OR OTHERREFUSALREASON = ANSWERED

RefusalSeverity.

INSTRUCTION: SELECT SEVERITY OF REFUSAL.

CODE ADAMANT (2) IF RESPONDENT:

- MENTIONED CALLING POLICE
- THREATENED LEGAL ACTION (LAWYER OR ATTORNEY GENERAL) OR VIOLENCE
- STATED DO NOT CALL ME AGAIN

ELSE, CODE SOFT REFUSAL (1)

CODE ONE ONLY

 SOFT
 1 THANKS (DISP = 5)

 ADAMANT
 2 THANKS (DISP = 39)

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KINDOFEXIT = 3

[PROMISE/ASPIRE]: IF PROGRAMNAME FROM SAMPLE LOAD = MD PROMISE, WISCONSIN PROMISE, CAPROMISE, NYS PROMISE, OR AR PROMISE MDP, FILL PROMISE. ELSE, FILL ASPIRE.

NoLetterExit.

The letter explained that the study is being conducted by researchers from Mathematica Policy Research. This study seeks to improve services and help the Social Security Administration and the U.S. Departments of Education, Health and Human Services, and Labor better understand the experiences of people enrolled in the [PROMISE/ASPIRE] programs. The study is paid for by the Social Security Administration.

Mathematica Policy Research was hired to conduct this survey. Through the survey, researchers hope to learn more about your employment, educational experiences, and any benefits you receive. This voluntary interview takes about 20-35 minutes to complete. Your input is critical to the success of the study, as only you can tell us about your unique experiences.

La carta explicaba que el estudio está siendo realizado por investigadores de Mathematica Policy Research. Este estudio busca mejorar servicios y ayudar a la Administración del Seguro Social y a los Departamentos de Educación, Salud y Servicios Humanos y Trabajo de los Estados Unidos a comprender mejor las experiencias de las personas inscritas en los programas [PROMISE/ASPIRE]. El estudio está financiado por la Administración del Seguro Social.

Mathematica Policy Research fue contratada para llevar a cabo esta encuesta. A través de la encuesta, los investigadores esperan aprender más sobre su empleo, experiencias educativas y cualquier beneficio que recibe. Completar esta entrevista voluntaria lleva unos 20-35 minutos. Su opinión es fundamental para el éxito del estudio, dado que solamente usted puede contarnos acerca de sus experiencias únicas.

CODE ONE ONLY

CONTINUE INTERVIEW	LAST QUESTION
WANTS ANOTHER LETTER	READLETTEREXIT

NOLETTEREXIT = 2

ReadLetterExit. May I read the letter to you? / ¿Puedo leerle la carta?

INTERVIEWER: IF RESPONDENT ASKS YOU TO READ THE LETTER, READ IT FROM HARD COPY

CODE ONE ONLY

YES, READ THE LETTER 1	LAST QUESTION
NO, WANTS ANOTHER LETTER FIRST	SKIP BOX READLETTEREXIT

PROGRAMMER SKIP BOX READLETTEREXIT

IF ADVEMAILS = 1, GO TO EMAILEXIT.

IF ADVEMAILS = 0 AND ADVREMAILS = 1, GO TO SENDLETTEREXIT.

IF ADVEMAILS = 0 AND ADVREMAILS = 0, GO TO THANKS AND SET DISP = 5.

((READLETTER = 0 OR READLETTEREXIT = 0) AND ADVEMAILS = 0 AND ADVREMAILS = 1) OR ((READLETTER = 0 OR READLETTEREXIT = 0) AND ADVEMAILS = 1 AND (EMAILEXIT= 2-3) AND ADVREMAILS = 1)

SendLetterExit.

Okay, I'll send another letter and will call back in a few days.

Muy bien, le enviaré otra carta y le llamaré de nuevo en unos días.

CODE ONE ONLY

ENTER 1 TO COLLECT/CONFIRM ADDRESS 1 SKIP BOX SENDLETTEREXIT

PROGRAMMER SKIP BOX SENDLETTEREXIT

IF ADDRESS LOADED, GO TO CONFLETTERADDRESS. IF NO ADDRESS LOADED, GO TO NEWLETTERADDRESS.

SENDLETTEREXIT = 1 AND ADDRESS LOADED

FILL ADDRESS WITH RESPONDENTS ADDRESS FROM PRELOAD

ConfLetterAddress. Please of

Please confirm the address we have on file.

Por favor confirme la dirección que tenemos en archivo.

The address we have is:

La dirección que tenemos es:

ADDRESS: [ADDRESS]

Is that correct?

¿Es correcta?

CODE ONE ONLY

YES, CORRECT1	THANKS (DISP = 46)
NO, EDIT ADDRESS2	NEWLETTERADDRESS
NO. SEND TO NEW ADDRESS	NEWLETTERADDRESS

(CONFLETTERADDRESS = 2 OR 3) OR (SENDLETTEREXIT = 1 AND ADDRESS = BLANK)

IF CONFLETTERADDRESS = 2, FILL ADDRESS WITH ADDRESS

NewLetterAddress. Please tell me the best address to send the letter.

Por favor dígame la mejor dirección para enviar la carta.

INSTRUCTION: CONFIRM ADDRESS WITH RESPONDENT BEFORE CONTINUING

What is the first line of the address? ¿Cuál es la primera línea de la dirección? (STRING (60)) Street Address Line 1 Is there an apartment or unit number for this address? ¿Hay un número de apartamento o unidad en esta dirección? (STRING (60)) Street Address Line 2 And what is the zip code? ¿Cuál es el código postal? (STRING (10)) ZIP Code Town or city? ¿Pueblo o ciudad? (STRING (20)) City State? ¿Estado? (STRING (2)) State

REFUSED.....r

PROGRAMMER SKIP BOX NEWLETTERADDRESS

IF NEWLETTERADDRESSADDRESSHAS ADDRESS, GO TO THANKS AND SET DISP = 46.

IF NEWLETTERADDRESS = R, GO TO THANKS AND SET DISP = 5.

SETAPPT = APPT

FILL PHONE WITH SAMPLE MEMBERS PHONE FROM PRELOAD

ConfPhoneExit. Please confirm the phone number we have on file.

Por favor confirme el número de teléfono que tenemos en archivo.

The phone number we have is:

El número de teléfono que tenemos es:

PHONE:

[PHONE]

Is that correct?

¿Es correcto?

CODE ONE ONLY

YES, CORRECT1	SKIPBOX PHONEEXIT
NO, EDIT PHONE2	NEWPHONEEXIT
NO, NEW PHONE	NEWPHONEEXIT
CALL ENDED BEFORE ASKING4	SKIPBOX PHONEEXIT
REFUSEDr	SKIPBOX PHONE EXIT

PROGRAMMER SKIP BOX CONFPHONEEXIT

IF (CONFPHONEEXIT = 1 OR R), GO TO THANKS AND SET DISP = 1. KEEP CURRENT PHONE. IF CONFPHONEEXIT = 4, GO TO FINISHED AND SET DISP = 1. KEEP CURRENT PHONE. IF CONFPHONEEXIT = 2-3, GO TO NEWPHONEEXIT.

(SETAPPT = APPT AND (CONFPHONEEXIT = 2 OR 3 OR NO PHONE LOADED)) OR KINDOFEXIT = 6

IF CONFPHONE = 2, FILL LOADED PHONE

PROGRAMMER- EXTENSION MAY BE MISSING

FILL SECOND INTERVIEWER INSTRUCTION ONLY IF KINDOFEXIT = 6

NewPhoneExit.

Starting with the area code, please give me the best telephone number to use to call you back.

Comenzando con el código de área, por favor deme el mejor número de teléfono para llamarle de vuelta.

INSTRUCTION: CONFIRM PHONE WITH RESPONDENT BEFORE CONTINUING

IF KINDOFEXIT = 6 DISPLAY THE FOLLOWING INSTRUCTION:

INSTRUCTION: MAKE NOTE OF MPRID SO YOU CAN CALL RESPONDENT BACK AFTER COLLECTING NUMBER.

|__|_| - |__| - |__| - |__| (1-999) (0-9999)

Is there an extension number?

¿Hay un número de extensión?

CALL ENDED BEFORE ASKING1	SKIP BOX NEWPHONEEXIT
DON'T KNOWd	SKIP BOX NEWPHONEEXIT
REFUSEDr	SKIP BOX NEWPHONEEXIT

SOFT CHECK: IF PHONE NE 10 DIGITS: PHONE NUMBER SHOULD BE 10 NUMERIC DIGITS, NO SPACES, DASHES, PARENTHESES OR OTHER PUNCTUATION (OR EMPTY)

SOFT CHECK: IF AREA CODE LE 200: AREA CODE SHOULD BE GREATER THAN 200

SOFT CHECK: IF EXCHANGE LE 199: EXCHANGE SHOULD BE GREATER THAN 199

PROGRAMMER SKIP BOX NEWPHONEEXIT

IF (NEWPHONEEXIT = D OR R) AND (SETAPPT = APPT AND (CONFPHONEEXIT = 2 OR 3 OR NO PHONE LOADED)), GO TO THANKS AND SET DISP = 1. KEEP CURRENT PHONE.

IF NEWPHONEEXIT = 1 AND (SETAPPT = APPT AND (CONFPHONEEXIT = 2 OR 3 OR NO PHONE LOADED)), GO TO FINISHED AND SET DISP = 1. KEEP CURRENT PHONE.

IF (NEWPHONEEXIT = D OR R) AND KINDOFEXIT = 6, GO TO THANKS AND SET DISP = 36. KEEP CURRENT PHONE.

IF NEWPHONEEXIT = 1 AND KINDOFEXIT = 6, GO TO FINISHED AND SET DISP = 36. KEEP CURRENT PHONE.

IF PHONE COLLECTED AT NEWPHONEEXIT, CONTINUE TO NEWPHONETZEXIT.

	PHONE PROVIDED	THAS	NEWPHONEEXI
--	----------------	------	-------------

NewPhoneTZExit.	What time zone is that in	?
-----------------	---------------------------	---

¿En qué zona horaria está?

IF NEEDED: What time is it there?

¿Qué hora es ahí?

INSTRUCTION: A TIME ZONE IS REQUIRED. USE ORIGINAL TIME ZONE OR STATE IF NEEDED.

CODE ONE ONLY

EASTERN TIME (US & CANADA) [(FILL CURRENT TIME)]	62
INDIANA (EAST) [(FILL CURRENT TIME)]	63
CENTRAL TIME (US & CANADA) [(FILL CURRENT TIME)]	65
ARIZONA [(FILL CURRENT TIME)]	68
MOUNTAIN TIME (US & CANADA) [(FILL CURRENT TIME)]	70
PACIFIC TIME (US & CANADA) [(FILL CURRENT TIME)]	71
ALASKA [(FILL CURRENT TIME)]	72
HAWAII [(FILL CURRENT TIME)]	73
BAJA CALIFORNIA [(FILL CURRENT TIME)]	93

PROGRAMME SKIPBOX NEWPHONETZEXIT

IF (SETAPPT = APPT AND (CONFPHONEEXIT = 2 OR 3 OR NO PHONE LOADED)), GO TO THANKS AND SET DISP = 1. SET NEWPHONE AS NEW PHONE. IF KINDOFEXIT = 6, GO TO THANKS AND SET DISP = 36. SET NEWPHONE AS NEW PHONE.

DISP = ANY (1, 5, 13, 36, 37, 38, 39, 40, 42, 43, 44, 45, 46, 47, 48, 50, 51)

Thanks. Thank you very much for your time.

Muchisimas gracias por su tiempo.

CODE ONE ONLY

PROGRAMMER SKIP BOX THANKS

IF SMVERIFIED = 0 AND (SETAPPT = APPT OR (KINDOFEXIT=1 - 6) OR READLETTEREXIT = 0 OR (REFUSALSEVERITY = 1 OR 2) OR HELLO = 8 OR CALLIN = 9 OR SAMPMEMB = 4), GO TO VERSMCONTACT. ELSE, GO TO FINISHED.

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SMVERIFIED = 0 AND (SETAPPT = APPT OR (KINDOFEXIT=1 - 6) OR READLETTEREXIT = 0 OR (REFUSALSEVERITY = 1 OR 2) OR HELLO = 8 OR CALLIN = 9 OR SAMPMEMB = 4)

[SAMPLE MEMBER NAME] IF REPTYPE = 0-1

[SAMPLE MEMBER NAME] OR HIS/HER PROXY IF REPTYPE = 2 (PROXY)

[SAMPLE MEMBER NAME] IF REPTYPE = 0-1

[SAMPLE MEMBER NAME] OR PROXY IF REPTYPE = 2 (PROXY)

FILL SAMPLE MEMBER NAME FROM PRELOAD

VerSMContact.

INSTRUCTION: INDICATE IF [SAMPLE MEMBER NAME] HAS BEEN VERIFIED AT THIS NUMBER.
INSTRUCTION: VERIFIED MEANS YOU SPOKE TO [[SAMPLE MEMBER NAME] / [SAMPLE MEMBER NAME] OR VIA AN INTERPRETER / [SAMPLE MEMBER NAME] OR HIS/HER PROXY].

CODE ONE ONLY

VERIFIED. SPOKE WITH [[SAMPLE MEMBER NAME] / [SAMPLE MEMBER NAME] OR PROXY] AT THIS NUMBER	FINISHED
NOT VERIFIED. DID NOT SPEAK WITH [[SAMPLE MEMBER NAME] / [SAMPLE MEMBER NAME] OR PROXY] AT THIS NUMBER2	FINISHED
UNSURE WHO YOU WERE SPEAKING TO	FINISHED

PROGRAMMER SMVERIFIED BOX VERSMVERIFIED

IF VERSMCONTACT = 1, SET SMVERIFIED FLAG = 1.

Δ	

Finished.

THE STATUS OF CASE [MPRID] IS:

[LOGICAL STATUS] [STATUS DESCRIPTION]

ONLY LEAVE A NOTE IF NECESSARY. OTHERWISE, CLICK CONTINUE.

SEE A SUPERVISOR IF THE STATUS DOES NOT MATCH THE OUTCOME OF THE CALL ATTEMPT.

INSTRUCTION: ENTER CASE NOTES.

(STRING 200)

Section A Introduction

		Asked of	Asked of
		Self-Reporting Youth	Youth's Proxy
Α	Introduction	YES	YES

CONFIRMREC= 0 OR 1

Y2_A_MODE. PLEASE RECORD BELOW THE MODE IN WHICH YOU ARE COMPLETING THIS INTERVIEW. THIS HELPS US FILL IN TEXT IN LATER ITEMS AND STATUS THE CASE. (P18M-fieldLoc)

	CODE ONE ONLY
TELEPHONE INTERVIEW	1
FIELD INTERVIEW: IN-PERSON	2
FIELD INTERVIEW: BY PHONE	3
PAPER QUESTIONNAIRE	4
TELEPHONE INTERVIEW – FIELD CALL IN	5

PROGRAMMER: MISSING NOT ALLOWED.

PROGRAMMER: IF CHANNEL USED IS CAWI – PRESENT ONLY OPTIONS 2 AND 3 ABOVE. IF CHANNEL USED IS CATI – PRESENT ONLY OPTIONS 1, 4, AND 5 ABOVE.

Y2 A MODE = 1 OR 2 OR 3 OR 4 OR 5

Y2_A_Supt.

IF SPEAKING WITH YOUTH, READ: Before we begin, will you be completing the interview on your own or would you prefer to have a trusted adult there to help if needed? And will you need any kind of special technology? (P18M-VII.A3, rev)

IF NEEDED: Special technologies can help people with disabilities complete an interview by telephone. These could include: voice amplification for people with hearing impairments or relay services for those who use sign language. Others may benefit from help from a <u>person</u>, where a trusted adult joins you for the interview, providing support, as needed.

IF SPEAKING WITH <u>PROXY</u>, SELECT "SUPPORT NEEDED - PERSON" BELOW AND DO NOT READ THE NEXT ITEM.

	CODE ONE C	<u>ONLY</u>
SUPPORT NEEDED – PERSON	1	GO TO
SUPPORT NEEDED - TECHNOLOGYY2_A_SUPTS_SPEC	2	GO TO
NO SUPPORT NEEDED	0	GO TO Y2_A_INTRO
DON'T KNOW	d	GO TO Y2_A_INTRO

REFUSED......r GO TO Y2_A_INTRO
PROGRAMMER: DO NOT ALLOW BLANK

HARD CHECK: IF Y2_A_PROXY = 1 AND Y2_A_SUPTS NE 1: INTERVIEWER – IN THE PRIOR ITEM, THE CASE WAS MARKED AS NEEDING A PROXY. IN THIS ITEM, NO PROXY IS RECORDED. PLEASE CORRECT THIS OR PRIOR ITEM FOR CONSISTENCY.

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SUPPORT NEEDED FOR YOUTH INTERVIEW (Y2 A SUPT = 1 OR 2)

Y2 A Supts Spec. What technologies or supports should we have available? (P18M-VII.A3, rev) PROBE: Anything else? INTERVIEWER: PLEASE MAKE NOTE OF ANY ASSISTIVE TECHNOLOGIES REQUESTED IN THE YOUTH CASE NOTES. IF "OTHER" TECHNOLOGY IS SPECIFIED AND CANNOT BE ACCOMMODATED IMMEDIATELY, SET APPOINTMENT TO CONTINUE. IF SPEAKING WITH PROXY, SELECT "ADULT WILL PROXY FOR YOUTH" BELOW AND DO NOT READ THE ITEM. CODE ALL THAT APPLY ADULT WILL ASSIST WITH YOUTH INTERVIEW......1 GO TO Y2_A_INTRO ADULT WILL PROXY FOR YOUTH......2 GO TO Y2_A_PRXY-NME GO TO Y2 A INTRO VOICE AMPLIFICATION......4 GO TO Y2 A INTRO **GO TO APPT** GO TO Y2 A INTRO DON'T KNOW.......d GO TO Y2 A INTRO REFUSED.....r GO TO Y2 A INTRO PROGRAMMER: IF MODE IS WEB (I.E. A FIELD INTERVIEW), DISABLE (DO NOT PRESENT) RESPONSE OPTION 5. SOFT CHECK: IF Y2 A SUPTS SPEY2 C 2=1 May I confirm that [YOUTH] would not be able to answer any of the questions on [his/her] own, even with support from you or another trusted adult? YOUTH PROXY IDENTIFIED (Y2 A SUPTS SPEC 2=1) AND NEWNAMEREP = . [YOUTH] [your/(his/her)] Y2_A_PrxyNme. Would you please tell me [(his/her)/your] first and last name? (P18M-VII.A4) IF NEEDED: This tells us who answered the questions on [your/YOUTH]'s behalf. INTERVIEWER: IF YOU ALREADY KNOW THE NAME OF THE PROXY, ENTER THE NAME BELOW AND DO NOT READ THE ITEM. (STRING 30) FIRST NAME (STRING 1) MIDDLE INITIAL (STRING 60)

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LAST NAME

DON'T KNOW	d	TERMINATE
REFUSED	r	TERMINATE
SOFT CHECK: IF Y2_A_PrxyNme = D OR R: This helps us document who [(His/Her])/Your] name will be kept private and will not be linked to your		
PROGRAMMER : IF Y2_A_PrxyNme = D OR R, ROUTE AS REFUSAL	INTERVIEW SHOU	LD NOT CONTINUE.
YOUTH PROXY IDENTIFIED (Y2_A_SUPTS_SPEC_2=1) AND (Y2_NEEDREPPHONE = .	A_PRXYNME. NE D	OR R) AND
[Y2_A_PRXYPHNE]		
Y2_A_PrxyPhne. May I please have [your/ (his/her)] telephone num	nber? (P18M-ProxyP	hone2)
Please give me the telephone number, area	code first.	
<u> </u> - - - - - - - - - - - - - - - - -		
Is there an extension number?		
<u> </u>		
DON'T KNOW	d	
REFUSED	r	
SOFT CHECK: IF Y2_A_PRXYPHNE NE . : I have recorded [Y2_A_	PRXYPHNE] is that	correct?
Y2_A_PRXYPHNE = PHONE PROVIDED		
Y2_A_PrxyPhneTZ. What time zone is that in?		
IF NEEDED: What time is it there?		
INSTRUCTION: A TIME ZONE IS REQUIRED. USE ORIGINAL TIME	ZONE OR STATE IF	NEEDED.
	CODE ONE ONLY	
EASTERN TIME (US & CANADA) [(FILL CURRENT TIME)]	62	
INDIANA (EAST) [(FILL CURRENT TIME)]	63	
CENTRAL TIME (US & CANADA) [(FILL CURRENT TIME)]	65	
ARIZONA [(FILL CURRENT TIME)]	68	
MOUNTAIN TIME (US & CANADA) [(FILL CURRENT TIME)]	70	
PACIFIC TIME (US & CANADA) [(FILL CURRENT TIME)]	71	
ALASKA [(FILL CURRENT TIME)]	72	
HAWAII [(FILL CURRENT TIME)]	73	
BAJA CALIFORNIA [(FILL CURRENT TIME)]	93	

YOUTH PROXY IDENTIFIED (Y2_A_SUPTS_SPEC_2=1) AND (Y2_A_PRXYNME NE D OR R) AND NEEDREPADDR = .

Y2_A_PrxyAdd. And (your/(his/her) address? (P18M-Add2)

IF NEEDED: If you don't know the exact address, the city and state are helpful too.

STREET ADDRESS LINE 1

STREET ADDRESS LINE 2	STRING (25)
CITY	STRING (25)
STATE	STRING (2)
<u> </u> ZIP CODE (00501-99950)	
DON'T KNOW	d
REFUSED	r
YOUTH PROXY IDENTIFIED (Y2_A_SUPTS_SPEC_2=1) AND (Y2_A_PRXYNI REPREL = .	ME. NE . OR D OR R) AND
[YOUTH] [Y2_A_PXY-NME]	
	\// A = \/\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \

Y2_A_PrxyRel. How [are you/is [Y2_A_PXY-NME] related to [YOUTH]? (P18M-VII.A5/NLTS2012, J1d)

INTERVIEWER: WHAT IS THE RELATIONSHIP OF THE PROXY TO THE YOUTH?

CODE ONE ONLY

STRING (25)

PARENT OF YOUTH	1	
ADULT SIBLING OR OTHER FAMILY MEMBER	2	
STAFF PERSON FROM [YOUTH]'S SCHOOL	3	
SOMEONE FROM AN AGENCY/SERVICE PROVIDER	4	
FAMILY MEMBER LIVING IN HOUSEHOLD	5	
NON-FAMILY MEMBER LIVING IN HOUSEHOLD	6	
OTHER RELATIONSHIP	99	
DON'T KNOW	d	TERMINATE
REFUSED	r	TERMINATE
PROGRAMMER: MISSING VALUE NOT ALLOWED		

SOFT CHECK: IF Y2_A_PRXYREL= D OR R PRIOR TO TERMINATE READ: This helps us document who completed each interview. Your name will be kept private and will not be linked to your answers in any reports we create. Are there any questions or any concerns you have about this question that I could help address?

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PROGRAMMER: IF Y2 A PrxyRel= D OR R, ROUTE AS REFUSAL. INTERVIEW SHOULD NOT CONTINUE.

YOUTH PROXY IDENTIFIED (Y2_A_PRXYREL=1-6 OR 99) OR REPREL = 4, 8, 11-15

[you/PROXY NAME]

Y2_A_Prxy_Avail. READ IF NEEDED. IF SPEAKING TO PROXY, SELECT "ABLE TO BEGIN."

Would [you/PROXY NAME] be available to speak now? (P18M-Proxy2 available)

YES – ABLE TO BEGIN INTERVIEW NOW 1	GO TO Y2_A_INTRO
NO – NOT ABLE TO BEGIN INTERVIEW NOW	SET CALLBACK
DON'T KNOW d	SET CALLBACK
REFUSEDr	TERMINATE

PROGRAMMER: IF Y2 A Prxy Avail = R, ROUTE AS REFUSAL. INTERVIEW SHOULD NOT CONTINUE.

PROGRAMMER: IF Y2 A Prxy Avail = 0 or D, ROUTE TO SET APPOINTMENT.

PROGRAMMER BOX 1

IF PROXY IDENTIFIED (Y2_A_PRXY_AVAIL=1), PROCEED WITH INTERVIEW LOGIC TO POPULATE FILLS BASED ON PROXY REPORT. IF YOUTH SURVEY RESPONDENT <u>SWITCHES TO PROXY</u> MID-WAY THROUGH, APPLY PROXY LOGIC SHOWN AS THOUGH Y2_A_PRXY_AVAIL=1 AND SET Y2_CURRENTSTATE= 2 (PROXY).

POTENTIAL YOUTH SURVEY RESPONDENT (Y2 A SUPT= 1 OR 2 OR 0)

IF YOUTH (Y2_A_SUPT= 0 OR 2) IF PROXY, Y2_A_PROXY_AVAIL=1

[PROMISE PROGRAM] [\$30/\$40/\$50] [YOUTH]

PROGRAMMER: IF CURRENT DATE > INCENTIVECUTOFFDATE, FILL \$30.

IF CURRENT DATE <= INCENTIVECUTOFFDATE, FILL \$40 IF INCENTIVEGROUP = A.

IF CURRENT DATE <= INCENTIVECUTOFFDATE, FILL \$50 IF INCENTIVEGROUP = B.

Y2_A_Intro. IF YOUTH: About five years ago, you enrolled in a study called [PROMISE PROGRAM NAME]. You may remember completing a consent form explaining that the study includes two interviews. This is the final one. You'll receive [\$30/\$40/\$50] for completing this 20 to 35-minute interview. There are questions about your education, experiences with jobs, your hopes for the future, and your health and well-being.

IF PROXY: We are conducting a national study for the Social Security Administration. This study includes two interviews. This is the second and final one. You'll receive [\$30/\$40/\$50] for completing this 20 to 35-minute interview. There are questions about [YOUTH]'s education, experiences with jobs, and about [YOUTH]'s health and well-being. (P18M-I.ELIG, rev)

IF NEEDED: All your answers will be held in strict confidence. Nothing you say will affect any benefits or services you may receive, now or in the future. We can start now and take a break whenever you need one.

The length of the interview ranges based on your experiences. For most people, we expe	ct
the interview will take 24 minutes to complete, but it can range from 20 to 35 minutes.	

CONTINUE1	
REFUSEDr	TERMINATE - REFUSA

PROGRAMMER: MISSING VALUE NOT ALLOWED.

POTENTIAL SURVEY RESPONDENT (Y2_A_INTRO=1)

IF YOUTH (Y2_A_SUPT= 0 OR 2) IF PROXY, Y2_A_PROXY_AVAIL=1
[you/YOUTH] [R IS YOUTH (Y2_A_HELLO=1 OR 2)/R IS PROXY (Y2_A_Prxy_Avail=1)]

Y2_A_Consent. Before we begin, may I confirm that you read the letter that we sent [you/YOUTH]? On the back, there was information about how SSA can use and share the information you provide. Would you like me to read that to you now? Or would you prefer to begin the interview . . . (P18M-VII.A2_1)

IF REQUESTED, READ:

<u>IF R IS YOUTH FILL</u>: Section 1110 of the Social Security Act, as amended, authorizes us to request this information. We will use this information to evaluate the impact of services provided to you (the minor participant or household member) during your participation in the Promoting Readiness of Minors in SSI (PROMISE) project. Providing us this information is voluntary. Failing to provide us with all or part of the information will not affect the SSI benefits that you, your child, or other household members receive now or in the future.

We may use the information for the administration of our programs, including sharing information: (1) To comply with Federal laws requiring the release of information from our records (e.g., to the Government Accountability Office and the Department of Veterans Affairs); and, (2) To facilitate audit, investigative, or statistical research activities necessary to assure the integrity and improvement of our programs (e.g., to the Bureau of Census and to private entities under contract with us). A complete list of when we may share your information with others, called routine uses, is available in our Privacy Act System of Records Notice entitled, Supplemental Security Income Studies, Surveys, Records and Extracts (Statistics), 60-0203. Additional information about this and other system of records notices and our programs are available from our website at www.socialsecurity.gov or at your local Social Security office.

<u>IF R IS PROXY, FILL</u>: Section 1110 of the Social Security Act, as amended, authorizes us to request this information. We will use it to evaluate the impact of any services provided to [YOUTH] during (his/her) participation in a national study. Providing us this information is voluntary. Failing to provide us with all or part of the information will not affect the SSI benefits that [YOUTH], (his/her) child, or other household members receive now or in the future.

We may use the information for the administration of our programs, including sharing information: (1) to comply with Federal laws requiring the release of information from our records (e.g., to the Government Accountability Office and the Department of Veterans Affairs); and (2) to facilitate audit, investigative, or statistical research activities necessary to assure the integrity and improvement of our programs (e.g., to the Bureau of Census and to private entities under contract with us). A complete list of when we may share this information with others, called routine uses, is available in our Privacy Act System of Records Notice entitled, Supplemental Security Income Studies, Surveys, Records and Extracts (Statistics), 60-0203. Additional information about this and other system of records notices and our programs are available from our website at www.socialsecurity.gov or at a Social Security office.

	<u>CODE ONE</u>		
OK TO BEGIN INTERVIEW NOW	1		
NOT A GOOD TIME	2	SET CALLBACK	
REFLISED	r	TERMINATE - REFUSAL	

PROGRAMMER: IF MODE IS <u>WEB</u> (I.E. A FIELD INTERVIEW), DISABLE (DO NOT PRESENT) RESPONSE OPTION 2.

PROGRAMMER: DO NOT ALLOW MISSING VALUE

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ALL CONSENTING (Y2_A_CONSENT = 1)		
[your/YOUTH's] [YOUTH FIRST AND LAST NAME] [with/for]		
Y2_A_Q1. May I double check the spelling of [your/YOUTH's AND LAST NAME], is that correct? (P18M-VII.A4)		YOUTH FIRST
IF NEEDED: This helps us document who we completed the name will be kept in confidence and will not be any reports we create. Are there any question may have about answering this question that	oe linked to [your/Y ns I can answer or a	OUTH's] answers in any concerns you
CORRECT AS SHOWN - CONTINUE	1	GO TO Y2_A_Q2
CORRECTIONS NEEDED	99	
REFUSED	r	TERMINATE - REFUSAL
YOUTH NAME TO BE CORRECTED (Y2 A Q1=99)		
(,		
Y2_A_Q1A. RECORD YOUTH NAME BELOW: (P18M-VII.A4	!)	
	_ (STRING 30)	
[FIRST NAME]		
	_ (STRING 1)	
[MIDDLE INITIAL]		
•	(STRING 30)	
[LAST NAME]	_ (0.1110.00)	
REFUSED	r	TERMINATE - REFUSA
	I	TERMINATE - REPUSA
PROGRAMMER: MISSING VALUE NOT ALLOWED.		
SOFT CHECK: IF Y2_A_Q1A=r, PRIOR TO TERMINATE ASK; This this interview [with/for]. [Your/YOUTH's] name will be kept in con [your/YOUTH's] answers in any reports. Are there any questions question that I could help address?	fidence and will no	t be linked to
IF PROXY (Y2_A_Prxy_Avail=1) AND YOUTH SEX =. FROM SAMPL	E LOAD FILE	
[YOUTH]		
L		
Y2_A_Q2. Is [YOUTH] male or female? (P18M-I.Q4)		
IF NEEDED: This information helps the computer fill in "h questions ahead.	e" or "she" to desc	ribe [YOUTH], in the
	CODE ONE	<u>ONLY</u>
YOUTH IS MALE	1	

Appendix C

YOUTH IS FEMALE	2
DON'T KNOW	d
REFUSED	r

PROGRAMMER BOX 2

FILL LOGIC IN REFERENCES TO YOUTH: IF YOUTH MALE: LOAD FILE = 1 OR IF Y2_A_Q2 = 1 THEN: USE MALE FILLS (HIM, HIS, HE). IF YOUTH FEMALE: LOAD FILE= 2 OR IF Y2_A_Q2=2 THEN: USE FEMALE FILLS (HER, SHE). IF UNKNOWN: LOAD FILE= . AND Y2_A_Q2 = D OR R THEN: PRESENT BOTH FILLS (HIM/HER), (HE/SHE), (HIS/HER).

ALL CONSENTING (Y2_A_CONSENT=1)

[your/YOUTH's] [you/YOUTH] [Are you/Is YOUTH]

Y2_A_Q3. The first few questions ask about [your/YOUTH's] household and living situation. [Are you/Is YOUTH]... (NLTS-W4, Q20)

INTERVIEWER: PROBE, FOR <u>CURRENT</u> MARITAL STATUS. IF ONCE DIVORCED, BUT NOW REMARRIED, THE STATUS WOULD BE "MARRIED."

 CODE ONE ONLY

 Engaged,
 1

 Single, never married,
 2

 Married,
 3

 In a marriage-like relationship,
 4

 Divorced,
 5

 Separated, or
 6

 Widowed?
 7

 DON'T KNOW
 d

 REFUSED
 r

SOFT CHECK: IF Y2_A_Q3=d or r; This information helps us know which types of questions to ask about [your/YOUTH's] household. Are there any questions I can answer or any concerns you may have about answering this question that I could help address?

YOUTH ENGAGED, MARRIED OR IN MARRIAGE-LIKE RELATIONSHIP (Y2_A_Q3= 1 OR 3 OR 4)

[your/EP's] [fiancé/spouse/partner] [you/YOUTH]

Y2_A_Q4. Does [your/YOUTH's] [fiancé/spouse/partner] live in the same household with [you/YOUTH]? (P18M-I.Q3)

	CODE ONE ONLY
YES	1
NO	0
DON'T KNOW	d
REFUSED	r

ALL CONSENTING YOUTH AND PROXIES (Y2 A CONSENT=1)

[Do you/Does YOUTH] [EP] [YOUTH] [you live/YOUTH lives] [you no longer live/YOUTH no longer lives] [you do/YOUTH does]

Y2_A_Q5.	[Do you/Does YOUTH] live with [EP], with another parent or legal guardian, in a
	group home or institution, or somewhere else? (P18M-I.RTYPE)

INTERVIEWER: IF YOUTH RAN AWAY AND PROXY HAS NO CONTACT. CODE AS INDEPENDENT. PROBE ALL REFUSALS. THIS ITEM SUPPORTS IMPORTANT ROUTING. INTERVIEWER: IF CASE NOTES SHOW THE EP IS DECEASED. DO NOT ASK YOUTH IF THEY LIVE WITH THE EP, JUST READ THE REMAINING RESPONSE OPTIONS. CODE ONE ONLY YOUTH LIVES WITH [EP]......1 YOUTH LIVES WITH OTHER PARENT OR GUARDIAN [NOT EP] 2 OTHER SETTING (NOT WITH PARENT/GUARDIAN): GROUP HOME, INSTITUTION, OR BOARDING SCHOOL3 YOUTH INDEPENDENT: DOES NOT LIVE WITH PARENT/GUARDIAN 4 REFUSED.....r PROGRAMMER: MISSING VALUE NOT ALLOWED. SOFT CHECK: IF Y2_A_Q5=3: May I confirm I have recorded correctly that [you live/YOUTH lives] in a group home, institution, or boarding school? SOFT CHECK: IF Y2 A Q5 =4: May I confirm I have recorded correctly that [you no longer live/YOUTH no longer lives] with any parent, a foster parent, or any legal guardian? And [you do/YOUTH does] not live in a group home or institution? YOUTH LIVING INDEPENDENTLY (Y2 A Q5=4) [you/YOUTH] [your/YOUTH's] [RESPONSE TO Y2_A_Q6] Y2 A Q6. Including [you/YOUTH], how many people live or stay in [your/ YOUTH's] household in total? (YTD36M-X.C2) | | PEOPLE IN HOUSEHOLD (1-25) DON'T KNOW.......d REFUSED.....r SOFT CHECK: IF Y2 A Q6>10; May I confirm I've recorded [Y2_A_Q6] people live or stay in this household at this time?

ALL CONSENTING (Y2_A_CONSENT=1)
[you were/YOUTH was] [Y2_A_Q7]
Y2_A_Q7. For verification purposes, can you please tell me the month and year [you were/YOUTH was] born? (P18M-I.Q5a, rev)
PROGRAMMER: COLLECT DATE WITH SEPARATE FIELDS
DO NOT PROGRAM YEAR RANGE AS HARD CHECK
<u> _// </u>
(1-12) (1997- 2002)
DON'T KNOW d GO TO Y2_A_Q7A
REFUSEDr GO TO Y2_A_Q7A
PROGRAMMER: MISSING NOT ALLOWED.
SOFT CHECK: IF Y2_A_Q7 YEAR OUTSIDE OF 1997-2002 RANGE; THE YEAR YOU ENTERED IS OUTSIDE OF THE ALLOWABLE YEAR OF BIRTH FOR ENROLLED YOUTH. ASK FOR CONFIRMATION ON THE YEAR OF BIRTH AND, IF NEEDED, ENSURE YOU ARE SPEAKING TO YOUTH. SOFT CHECK: IF Y2_A_Q7 NE BLANK; May I confirm, I have recorded [Y2_A_Q7]?
VO. A. OZ DEODONOE IO VALID DATE AND AVOLITIL DOD ON EU E OD D. D.
Y2_A_Q7 RESPONSE IS VALID DATE AND ≠ YOUTH DOB ON FILE OR D, R
[you were/YOUTH was]
Y2_A_Q7A. And one more time, just so I can confirm that I am speaking to the right person, what was the month and year [you were/YOUTH was] born? (P18M-I.Q5b)
PROGRAMMER: COLLECT DATE WITH SEPARATE FIELDS
DO NOT PROGRAM YEAR RANGE AS HARD CHECK
<u> </u>
(1-12) (1997- 2002)
DON'T KNOW d
REFUSEDr
PROGRAMMER: MISSING NOT ALLOWED.
SOFT CHECK: IF Y2_A_Q7A YEAR OUTSIDE OF 1997-2002 RANGE; THE YEAR YOU ENTERED IS OUTSIDE OF THE ALLOWABLE YEAR OF BIRTH FOR ENROLLED YOUTH. ASK FOR CONFIRMATION ON THE YEAR OF BIRTH AND, IF NEEDED, ENSURE YOU ARE SPEAKING TO YOUTH. SOFT CHECK: IF Y2_A_Q7A DOES NOT MATCH YOUTH MONTH AND YEAR OF BIRTH IN SAMPLE FILE; Thanks for this information. I have recorded [Y2_A_Q7A], is that correct?

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ALL CONSENTING (Y2 A CONSENT=1)

Y2_A_Q8. : IF R IS CONTINUING, SELECT "ABLE TO CONTINUE" BELOW. IF R IS NOT ABLE TO CONTINUE AND EP NEEDS TO COMPLETE INTERVIEW, CHECK WHETHER EP IS AVAILABLE. IF SO, SET CALLBACK FOR YOUTH AND SELECT "CONTINUE WITH PARENT INTERVIEW" BELOW. IF NOT, SET CALLBACK FOR YOUTH AND SELECT "PARENT UNAVAILABLE" BELOW. IF R IS NOT ABLE TO CONTINUE AND EP DOES NOT NEED TO COMPLETE INTERVIEW, SET CALLBACK FOR YOUTH AND SELECT "PARENT COMPLETE OR INELIGIBLE" BELOW.

PROGRAMMER: IF PARENTDECEASED = 1 OR PARENTWITHDRAWN = 1 OR PARENTAGENCY = 1 OR PARENTFINAL = 1, SHOW OPTIONS 1, 4, AND 5 BELOW. ELSE, SHOW OPTIONS 1, 2, 3, AND 5 BELOW.

YOUTH SURVEY R ABLE TO CONTINUE1	GO TO Y2_B_A1
YOUTH SURVEY R BREAK OFF – CONTINUE WITH PARENT INTERVIEW 2	SET CALLBACK, CLOSE YOUTH RECORD, OPEN PARENT RECORD
YOUTH SURVEY R BREAK OFF – PARENT UNAVAILABLE	SET CALLBACK
YOUTH SURVEY R BREAK OFF – PARENT COMPLETE OR INELIGIBLE 4	SET CALLBACK
YOUTH SURVEY R BREAK OFF – PROXY NEEDED FOR YOUTH5	SET CALLBACK

PROGRAMMER BOX: CALLBACKS

ROUTE THROUGH ITEMS IN SECTION I BEFORE RESUMING THE INSTRUMENT. R'S WILL VERIFY THESE ITEMS WITH PRIOR RESPONSES SHOWN ON THE SCREEN. THIS HELPS US CONFIRM WE ARE SPEAKING WITH THE SAME R AS BEFORE, TO UPDATE THE INFO FOR THE NE R, OR UPDATE KEY VARIABLES THAT IMPACT IMPORTANT LOGIC LATER IN THE INTERVIEW.

Variable Name	Descriptor	Action Step for each variable below: Yes (Y) / No (N)		
		Repeat /confirm at CB	Save prior respon se(s)	Keep or remove resulting data in later routing paths if answer adjusts path
Hello.	Speaking with	Υ	Υ	Remove
NeedRep.	IF NEEDED: Speak with proxy	Y – if new R	N	Remove
NewNameRep.	Proxy/interpreter name	Y – if new R	N	N/A
NeedRepPhone.	Proxy/interpreter phone number	Y – if new R	N	N/A
RepRel.	Proxy/interpreter relation to youth	Y – if new R	N	Remove
NeedRepAddr.	Proxy/interpreter address	Y – if new R	N	N/A
Y2_A_Supt.	R needs interview supports / AT	Y – if new R	N	Remove
Y2_A_Supts_Spec.	What technologies?	Y – if new R	N	Remove
Y2_A_Prxy_Avail.	Proxy available to speak	Y – if new R	N	N/A

Y2_A_Intro.	Survey scope info	N	N	N/A
Y2_A_Consent.	Consent	N	N	N/A
Y2_A_Q1.	Youth name confirmed	Y – if new R	N	Remove
Y2_A_Q1A.	Update youth name	Y – if new R	Υ	N/A
Y2_A_Q2.	Youth gender	N	N	N/A
Y2_A_Q3.	Youth marital status	Υ	Υ	Do not remove
Y2_A_Q4.	Youth and spouse live together	Υ	Υ	Do not remove
Y2_A_Q5.	Youth living situation	Υ	Υ	Do not remove
Y2_A_Q6.	N people in household	Υ	Υ	N/A
Y2_A_Q7.	Validation: Youth DOB	Υ	Υ	N/A
Y2_A_Q7A.	Validation: Youth DOB (repeat)	Υ	Υ	N/A
Y2_A_Q8.	R continue	N	N	N/A

Section B Education and Training

		Asked of Self-Reporting Youth	Asked of Youth's Proxy
В	Education and Training	YES	YES

SECTION Y2_B_A. YOUTH'S EDUCATIONAL STATUS AND CREDENTIALS

ALL CONSENTING (Y2 A CONSENT=1)

[Are you/Is (YOUTH)], [Do you/does (YOUTH)], [you/(him/her)], [YOU/(he/she)] [If you attend/If (YOUTH) attends]

Y2_B_A1. The first question is about school.

[Are you/Is (YOUTH)] <u>currently</u> attending or enrolled in school? Please include high school, adult basic education or GED courses, vocational or trade school, or college or university courses. (P18M-VIII.A1, rev/YTD-12 I.A1)

IF NEEDED: [If you attend/If (YOUTH) attends] a transition program or (take/takes) special

courses for youth ages 18-22 through the school district, this counts as currently

being in school.

IF SUMMER: [If you are/If (YOUTH) is] off school for the summer, will [you/ (he/she)] be going

back to school in the fall?

INTERVIEWER: CODE "YES" IF ON SUMMER BREAK.

PROBE: [(Do you/ Does YOUTH] go to school?

YES1	
NO	GO TO Y2_B_A4
DON'T KNOW d	GO TO Y2_B_A5
REFUSEDr	GO TO Y2_B_A5

SOFT CHECK: IF Y2_B_A1=D OR R: Are there any questions I can answer to help address any concerns you have about this question? All the information you provide will be kept private. Your name will not be linked to your answers in any reports about this study.

YOUTH IN SCHOOL NOW (Y2 B A1=1)

Y2_B_A2. What type of school is this? (P18M-VIII.A2/YTD-12 I.B2, rev)

INTERVIEWER:

Y2 B A2=99

IF '<u>HIGH SCHOOL</u>' PROBE: Does that school serve a variety of students? Or does it serve <u>only</u> students with disabilities or other special needs?

IF 'COLLEGE' PROBE: Is that a trade school, a 2-year college, or a 4-year college/university?

IF <u>'ALTERNATIVE SCHOOL'</u> PROBE: Is that in a regular high school serving a variety of students? Or is it a stand-alone program for youth with disabilities or other special needs?

IF 'ONLINE SCHOOL' PROBE: Is that online school for high school or a program after high school? Is it a high school program serving a variety of students or is it an online program that serves only students with disabilities or other special needs?

IF <u>'PRIVATE SCHOOL'</u> PROBE: Is that a regular private school serving a variety of students? Or is it a special private school that serves only students with disabilities or other special needs?

VOCATIONAL OR TRADE PROGRAMS CAN BE OFFERED AT THE HIGH SCHOOL AND POST-SECONDARY LEVEL. PROBE TO CLARIFY WHICH CATEGORY BEST APPLIES.

IF YOUTH ATTENDS MORE THAN ONE TYPE OF SCHOOL, ASK FOR THE ONE WHERE HE/SHE SPENDS THE MOST TIME.

CODE ONE ONLY

REGULAR HIGH SCHOOL SERVING A VARIETY OF STUDENTS (INCLUDES VOCATIONAL OR TRADE, MAGNET, CHARTER, PRIVATE, OR ONLINE SCHOOLS)	GO TO Y2_B_A3
SPECIAL HIGH SCHOOL THAT SERVES ONLY STUDENTS WITH DISABILITIES	GO TO Y2_B_A3
HOME SCHOOL (BY PROFESSIONAL OR PARENT)3	GO TO Y2_B_A3
POSTSECONDARY: VOCATIONAL, TECHNICAL, OR TRADE SCHOOL 4	GO TO Y2_B_A3
POSTSECONDARY: 2-YEAR OR COMMUNITY COLLEGE 5	GO TO Y2_B_A3
POSTSECONDARY: 4-YEAR COLLEGE OR UNIVERSITY 6	GO TO Y2_B_A3
POSTSECONDARY: MASTERS, PHD, OR OTHER ADVANCED DEGREE PROGRAM7	GO TO Y2_B_A3
GED OR OTHER ADULT EDUCATION PROGRAM8	GO TO Y2_B_A3
TRANSITION PROGRAM9	GO TO Y2_B_A3
ADULT LIFE SKILLS CLASSES	GO TO Y2_B_A3
ANOTHER TYPE OF SCHOOL (SPECIFY)	GO TO Y2_B_A2_SPEC
DON'T KNOW d	GO TO Y2_B_A3
REFUSEDr	GO TO Y2_B_A3

Y2_B_A2_Spec. What type of school is this? (P18M-VIII.A1/YTD-12 I.B2, rev)

_____ (STRING 150)

YOUTH IN SCHOOL NOW (Y2 B A1=1)

[Do you/Does YOUTH] [you/(him/her)] [you take/YOUTH takes]

Y2 B A3. [Do you/Does YOUTH] receive any services, supports, or accommodations to help [you/ (him/her)] in school?

This can include: accommodations in how [you take/YOUTH takes] tests or complete assignments - such as more time for tests or taking tests in different settings, having an aid or staff person assigned to help [you/(him/her)] in class, adaptations to a classroom space, or technology or special equipment. (P18M-VIII.B1, rev)

PROBE: [Do you/Does YOUTH] have any special help or supports in school because of a disability or health condition?

YES1	GO TO Y2_B_A5
NO0	GO TO Y2_B_A5
DON'T KNOW d	GO TO Y2_B_A5
REFUSEDr	GO TO Y2 B A5

NOT CURRENTLY ATTENDING SCHOOL (Y2 B A1=0)

[you/YOUTH]

Y2 B A4 Why did (you/YOUTH) stop going to school? (P18M- VIII.A3/YTD-12 I.C5)

PROBE: Why [are you/is YOUTH] no longer taking classes at school? / Did [you/YOUTH]

graduate or complete [your/ (his/her)] classes, or did [you/ (he/she)] leave for some

other reason? What was the reason?

PROBE: Any other reasons?

INTERVIEWER: IF R SAYS 'JUST STOPPED GOING' OR 'DIDN'T WANT TO GO' PROBE AS TO WHY/WHAT WAS THE REASON THEY STOPPED GOING OR DIDN'T WANT TO GO.

IF 'BORED' CODE - DIDN'T LIKE SCHOOL.

IF 'TOO HARD' CODE - POOR GRADES/NOT DOING WELL IN SCHOOL.

CODE ALL THAT APPLY GRADUATED 1 POOR GRADES/NOT DOING WELL IN SCHOOL......2 ILLNESS OR DISABILITY4 GENERAL DISCIPLINARY PROBLEMS6 OLDER THAN STUDENT AGE LIMIT/AGED OUT......7

PERSONAL OR FAMILY PROBLEM(S)	8
COVID-19 PANDEMIC	9
WANTED/NEEDED/FOUND A JOB	10
TOO EXPENSIVE/COULDN'T AFFORD IT	11
DIDN'T GET SERVICES OR SUPPORT NEEDED	12
OTHER (SPECIFY)	99
DON'T KNOW	d
REFUSED	r
Y2_B_A4_99=1	
Y2_B_A4_Spec. SPECIFY WHY STOPPED GOING TO SCHO	OOL: (P18M- VIII.A3/YTD-12 I.C5)
	(STRING 150)
ALL CONSENTING (Y2_A_CONSENT=1)	
[you have/YOUTH has]	
[[] Ca have/ 1 Co 111 has]	

Y2_B_A5. What is the <u>highest</u> grade or year of school that [you have/YOUTH has] <u>finished</u>? (P18M-vIII.A9/YTD12, I.D1)

	CODE ONE ONLY
8TH GRADE OR LESS	1
9TH GRADE/FRESHMAN IN HS	2
10TH GRADE/SOPHOMORE IN HS	3
11TH GRADE/JUNIOR IN HS	4
12TH GRADE/SENIOR IN HS	5
SOME COLLEGE OR TECHNICAL SCHOOL	6
POSTSECONDARY: VOCATIONAL, TECHNICAL, OR TRADE SCHO	OOL7
POSTSECONDARY: 2-YEAR OR COMMUNITY COLLEGE	8
POSTSECONDARY: 4-YEAR COLLEGE OR UNIVERSITY	9
POSTSECONDARY: MASTERS, PHD, OR OTHER ADVANCED DEC	
UNGRADED SCHOOL/PROGRAM	11
HOME SCHOOLED	12
OTHER	99

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Appendix C

DON'T KNOW	d
REFUSED	r

SOFT CHECK: IF Y2_B_A5= r: This information is really important to the study. Are there any concerns you have about answering it that I may be able to help address?

SOFT CHECK: IF Y2_B_A5= d: This information is really important to the study. Can you tell me a bit more about your school experience? From there, we can figure out how to answer this question.

ALL CONSENTING (Y2 A CONSENT=1)

[CURRENT MONTH], [CURRENT YEAR - 1 YEAR], [have you/has YOUTH]

Y2_B_A6. In the past year, that is since [CURRENT MONTH] [CURRENT YEAR – 1 YEAR] [have you/has YOUTH] been <u>suspended</u> or <u>expelled</u> from school? (P18M-VIII.A7 rev/NEW)

INTERVIEWER: IF INTERVIEW IS BEING CONDUCTED IN SUMMER, ASK YOUTH/PROXY TO

REFER TO THE MOST RECENT ACADEMIC YEAR.

IF YOUTH WAS NOT IN SCHOOL IN THE PAST YEAR. SELECT "NO" BELOW.

IF YOUTH IS IN SCHOOL ($Y2_B_A1=1$) AND HIGHEST GRADE ($Y2_B_A5=5-12$ OR 99) OR IF YOUTH NOT IN SCHOOL ($Y2_B_A1=0$)

[Do you/Does YOUTH]

Y2_B_A7. Some young people finish high school with a diploma, others get a certificate of completion. Others do not finish high school but then go on to complete a GED, also known as a general equivalency degree or general education degree.

[Do you/Does YOUTH] have a... (P18M-VIII.A8a-c, rev/ YTD-12 I.D2)

IF NEEDED: The GED is a battery of tests, based on courses and/or guided self-study, that when passed result in the award of a certificate that is recognized in the United States as the legal equivalent of a high school diploma. A high school diploma documents that a student completed the number and type of class credits required for graduation in their state. A certificate of completion does not have course or grade requirements. Those who exit high school with this certificate are eligible to participate in their school's graduation ceremonies.

Select one per row

	YES	NO	DON'T KNOW	REFUSED
a. GED? IF NEEDED: This is also known as a general equivalency degree or general education degree.	1	0	D	R
b. High school diploma or a certificate of completion from high school?	1	0	D	R

SOFT CHECK: IF Y2_B_A7a=1 and Y2_B_A7b = 1; INTERVIEWER: YOU HAVE RECORDED "YES" FOR BOTH OF THESE ITEMS. PROBE AS TO WHETHER THE YOUTH GRADUATED FROM HIGH SCHOOL OR NOT AND HAVE THE R PICK THE APPROPRIATE CATEGORY. USE THE DEFINITIONS ABOVE AS NEEDED.

IF YOUTH IS IN SCHOOL (Y2_B_A1=1) AND HIGHEST GRADE (Y2_B_A5 = 5-12 OR 99)

OR IF YOUTH NOT IN SCHOOL (Y2_B_A1=0)

[you/YOUTH] [were you/was YOUTH] [you/(he/she)]

Y2_B_A8_MO. When did [you/YOUTH] leave high school? (NLTS-2007, Q12)

PROBE: What was the month and year [you/YOUTH] left high school? Your best guess is

fine.

PROBE: How old [were you/was YOUTH] when [you/ (he/she)] left high school?

Did [you/YOUTH] finish in the winter, summer, or some other time of the year?

IF YOUTH IS STILL IN SCHOOL, SUCH AS IN A PROGRAM FOR YOUTH AGES 18-22, RECORD "STILL IN A SCHOOL PROGRAM" BELOW, IN BOTH THE MONTH

AND YEAR FIELDS.

	MONTH	
	(1-12)	
	STILL IN A SCHOOL PROGRAM	13
	DON'T KNOW	d
	REFUSED	r
Y2_B	_A8_YR.	
	_ _ YEAR	
	(1997 TO CURRENT YEAR)	
	STILL IN A SCHOOL PROGRAM	13
	DON'T KNOW	d
	REFUSED	r

ALL CONSENTING (Y2 A CONSENT=1)

[you are/YOUTH is] [I do/YOUTH does] [I need/YOUTH needs] [I do/YOUTH does] [I'm/YOUTH is] [I have/YOUTH has] [my/YOUTH's]

Y2_B_A9. I'm going to read a list of challenges people sometimes face in furthering their education or training after high school. For each, please tell me whether it will be a challenge for [you /YOUTH] or not. (NLTS2012-Par-FU E4, rev)

PROBE: Will that be a challenge or not?

PROBE: There are no right or wrong answers, this is about your opinions and experiences.

INTERVIEWER: IF YOUTH DOES NOT UNDERSTAND THE RESPONSE OPTIONS, ASK, "DOES

THIS APPLY TO YOU OR NOT?" IF YOUTH SAYS IT APPLIES, SELECT 'WILL BE A CHALLENGE.' IF YOUTH SAYS IT DOES NOT APPLY, SELECT 'WILL NOT BE A

CHALLENGE.'

PROGRAMMER: RANDOMIZE THE SEQUENCE OF THE ROWS

		YES, WILL BE A CHALLENGE	NO, WILL NOT BE A CHALLENGE	DK	REF
a.	[You do/YOUTH does] not have enough <u>information</u> about education or training options for after high school.	1	0	d	r
b.	[You <u>need/YOUTH needs]</u> to work and cannot attend school while working.	1	0	d	r
C.	[You do/YOUTH does] not know how to get <u>financial aid</u> or help paying for school.	1	0	d	r
d.	[You don't/YOUTH doesn't] do well in school.	1	0	d	r
e.	[You have/YOUTH has] physical or mental health issues that would make it difficult.	1	0	d	r
f.	Schools cannot <u>accommodate</u> [your/ YOUTH's] <u>disability</u> .	1	0	d	r
g.	<u>Transportation</u> is a challenge.	1	0	d	r

SECTION Y2_B_B. YOUTH'S TRAINING

ALL CONSENTING (Y2_A_CONSENT=1)	
[CURRENT MONTH], [CURRENT YEAR – 1 YEAR], [you/YOUTH]	

Y2_B_B1.	In the <u>last year</u> , since [CURRENT MONTH] [CURRENT YEAR - 1 YEAR], did [you/
	(YOUTH)] receive a training diploma, certificate, or license? (NEW)

PROBE: This training program could be for a number of purposes – to explore career interests, to help you find a job, or to build skills needed for living independently.

YES	1
NO	0

Appendix C

DON'T KNOW	. d
REFUSED	. r

ALL CONSENTING (Y2_A_CONSENT=1)

[ARE YOU/IS YOUTH] [YOU/YOUTH]

Y2_B_B2. [Are you/ Is YOUTH] <u>currently</u> in a training program or taking classes <u>outside of school</u> to help [you/ YOUTH] learn job skills or get a job? (P18M-VIII.C2/YTD-12 I.A1a)

YES1	
NO	GO TO Y2_B_B5
DON'T KNOWd	GO TO Y2_B_B5
REFUSEDr	GO TO Y2_B_B5

YOUTH IN TRAINING PROGRAM (Y2 B B2=1)

Y2_B_B3. What type of training is this? (P18M-VIII.C3, rev/YTD-12 I.B2, rev)

PROBES:

Is the training focused on <u>learning a trade</u> or building skills needed for a <u>specific job</u>?

Is the training helping you learn <u>life skills</u> – like how to prepare food, manage money, or other skills you need to live on your own?

Is the training focused on helping you <u>become a leader</u>, to <u>stand up for yourself</u>, and get what you need from others?

Any other training in the past year?

INTERVIEWER:

IF R PROVIDES THE NAME OF THE PLACE WHERE TRAINING WAS PROVIDED, PROBE TO ASK WHAT KINDS OF THINGS HE/SHE LEARNED FROM THAT PLACE.

IF 'DVR (DEPARTMENT OF VOCATIONAL REHAB) CODE: VOC, TECH, BIZ OR TRADE SCHOOL (1).

IF 'RESUME WRITING', 'JOB INTERVIEWING', OR 'JOB SHADOWING' CODE: JOB SKILLS TRAINING (3).

CODE ALL THAT APPLY

VOCATIONAL, TECHNICAL, BUSINESS, OR TRADE SCHOOL/PROGRAM	. 1
LIFE SKILLS TRAINING	. 2
JOB SKILLS TRAINING	. 3
LEADERSHIP SKILLS/SELF-DETERMINATION SKILLS TRAINING	. 4
OTHER TRAINING PROGRAM (SPECIFY)	. 99
DON'T KNOW	. d
REFUSED	. r

YOUTH IN TRAINING PROGRAM (Y2 B B3 99=1) [you/YOUTH] [you/YOUTH] [you need/YOUTH needs] [your/(his/her)] [your/(him/her)] Y2_B_B3_Spec. SPECIFY TYPE OF TRAINING YOUTH RECEIVED: (P18M-VIII.C3/YTD-12 I.B2, rev) PROBES: Is the training focused on learning a trade or building skills needed for a specific Or helping [you/YOUTH] learn life skills - like how to prepare food, manage money, or other skills [you need/YOUTH needs] to live on [your/ (his/her)] own? Or was it helping [you/YOUTH] become a leader, to stand up for [your/him/her)] self, and get what [you need/ (he/she) needs] from others? Any other training in the past year? (STRING 150) YOUTH IN TRAINING PROGRAM NOW (Y2 B B2=1) [Do you/Does YOUTH] [you/(him/her)] [you take tests or complete assignments/YOUTH takes tests or completes assignments] [Do you/Does YOUTH] receive any services, supports, or accommodations to help [you/ Y2 B B4. (him/her)] in this training program? (P18M-VIII.B1, rev) IF NEEDED: This can include accommodations in how [you take tests or complete assignments/YOUTH takes tests or completes assignments] - such as more time for tests or taking tests in different settings, having an aid or staff person assigned to help [you/(him/her)] in class, adaptations to a classroom space, or special technology or equipment. PROBE: [Do you/Does YOUTH] have any special help or supports in school because of a disability or health condition? YES......1 DON'T KNOW......................... d

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REFUSED.....r

ALL CONSENTING (Y2 A CONSENT=1)

[you have/YOUTH has] [have you/has YOUTH] [your/(his/her)]

IF $Y2_B_A3 = 0$, D, R, FILL [school,]

Y2_B_B5. I'm going to read a list of services some people receive to help <u>prepare them</u> for the future. For each, please tell me whether [you have/YOUTH has] received this service from someone who is not part of [your/(his/her)] family. (NEW)

PROBE: These may come from more than one place or any kind of service provider.

CODE ONE PER ROW

PROGRAMMER: RANDOMIZE SEQUENCE OF ROWS PRESENTED.

	YES	NO	DON'T KNOW	REFUSED
a. In the past year, [have you/has YOUTH] received <u>any</u> supports or services in getting or keeping a job?	1	0	d	r
b. In the past year, [have you/has YOUTH] received <u>any</u> supports or services in <u>continuing [your/ (his/her)] education</u> beyond high school?	1	0	d	r
c. IF NEEDED: In the past year, [have you/has YOUTH] received any supports or services in:	4	0	a	
Getting accommodations for [school,] work or living independently?	1	0	d	ľ

ALL CONSENTING (Y2 A CONSENT=1)

Y2_B_B6. : IF R IS CONTINUING, SELECT "ABLE TO CONTINUE" BELOW. IF R IS NOT ABLE TO CONTINUE AND EP NEEDS TO COMPLETE INTERVIEW, CHECK WHETHER EP IS AVAILABLE. IF SO, SET CALLBACK FOR YOUTH AND SELECT "CONTINUE WITH PARENT INTERVIEW" BELOW. IF NOT, SET CALLBACK FOR YOUTH AND SELECT "PARENT UNAVAILABLE" BELOW. IF R IS NOT ABLE TO CONTINUE AND EP DOES NOT NEED TO COMPLETE INTERVIEW, SET CALLBACK FOR YOUTH AND SELECT "PARENT COMPLETE OR INELIGIBLE" BELOW.

PROGRAMMER: IF PARENTDECEASED = 1 OR PARENTWITHDRAWN = 1 OR PARENTAGENCY = 1 OR PARENTFINAL = 1, SHOW OPTIONS 1, 4, AND 5 BELOW. ELSE, SHOW OPTIONS 1, 2, 3, AND 5 BELOW.

YOUTH SURVEY R BREAK OFF – PARENT COMPLETE OR INELIGIBLE 4	SET CALLBACK
YOUTH SURVEY R BREAK OFF – PROXY NEEDED FOR YOUTH 5	SET CALLBACK

Section C Employment and Work-Based Experiences

		Asked of Self-Reporting Youth	Asked of Youth's Proxy
С	Employment and Work-Based Experiences	YES	YES

SECTION Y2_C_A. YOUTH EMPLOYMENT

ALL CONSENTING (Y2_A_CONSENT = 1)
[you have/YOUTH has], [you/YOUTH]

Y2_C_Intro. Next I'll ask questions about jobs that [you have/YOUTH has] had in the past 12 months. This includes <u>any</u> job or jobs [you/YOUTH] may have now, as well as jobs that ended in that timeframe. (P18M-IX-INTRO, rev)

CONTINUE 1

ALL CONSENTING (Y2_A_CONSENT = 1)

[HAVE YOU/HAS YOUTH], [CURRENT MONTH], [CURRENT YEAR – 1 YEAR], [RA MONTH] [RA YEAR], [YOU DO/YOUTH DOES], [YOU ARE/YOUTH IS], [YOUR/(HIS/HER)], [YOU GET/YOUTH GETS]

Y2_C_A1. [Have you/ Has YOUTH] worked at a job or a business at any time in the past year, since [CURRENT MONTH] [CURRENT YEAR – 1 YEAR]?

This includes any job or jobs [you/YOUTH] may currently have as well as jobs that have ended in the past year. Please include all jobs in the past year, even if [you/YOUTH] only worked for a short time. Include paid or unpaid jobs, but not chores around the house, even if [you are/YOUTH is] paid to do them.

A job could be a school-sponsored job or a work study job. Jobs include internships, apprenticeships and volunteer work even if (you/YOUTH) didn't get paid. A job could be working for a business or organization or work (you do/YOUTH does) on [your/ (his/her)] own, such as babysitting or dog walking, that (you get/YOUTH gets) paid to do. (P18M- IX.A3/YTD36M-II.A1)

YES1	
NO	GO TO Y2_C_A25
DON'T KNOWd	GO TO Y2_C_A25
REFUSEDr	GO TO Y2_C_A25

PROGRAMMER: DO NOT ALLOW BLANKS

SOFT CHECK, IF Y2_C_A1=0: May I confirm I have recorded this correctly, that (you have/YOUTH has) not worked in the past year, paid or unpaid, even volunteer or community service work?

SOFT CHECK, IF $Y2_C_A1=D$ OR R: This information is really important to the study. Are there any questions or concerns you have about this question that I can help address?

PROGRAMMER: IF Y2_C_A1=0, D, OR R – CASE MEETS QUALIFIED LEVEL TO CONSIDER PARTIAL COMPLETE.

YOUTH WORKED IN PAST Y	EAR (Y2	С	A1=1
------------------------	---------	---	------

[HAVE YOU/HAS YOUTH], (YOU/YOUTH), (HAVE/HAS), [YOU (are or were)/YOUTH (is or was)], [CURRENT MONTH], [CURRENT YEAR – 1 YEAR]

Y2_C_A2. How many jobs [have you/has YOUTH] had within the past <u>year, since [CURRENT MONTH] [CURRENT YEAR - 1 YEAR]?</u>

Please include jobs that [you/YOUTH] currently [have/has] as well as jobs that ended within the past year. Please include jobs at which [you (are or were)/YOUTH (is or was)] self-employed. Do <u>not</u> include chores around the house, even if (you are/YOUTH is) paid to do them. (P18M-IX.A4/YTD36M-II.A1_num)

INTERVIEWER:

JOBS SUCH AS BABYSITTING COUNT AS ONE 'JOB' EACH (SELF EMPLOYED AS A . . .). PROBE TO CONFIRM THESE ARE $\underline{\text{NOT}}$ COUNTED IN TERMS OF THE NUMBER OF TIMES SUCH A JOB WAS PERFORMED IN THE PAST YEAR. IF YOUTH DOES NOT KNOW HOW MANY JOBS, (1) ASK HIM/HER TO LIST THEM OUT AND YOU HELP COUNT THE JOBS. OR (2) TO START WITH THE

NUMBER HE/SHE KNOWS AND ADD MORE AS NEEDED UPON PROMPT AT

END OF SERIES.

_ JOBS	GO TO BOX 3
(01-99)	
DON'T KNOWd	GO TO BOX 3
REFUSEDr	GO ТО ВОХ 3

SOFT CHECK: May I confirm I have recorded that (You have/YOUTH has) had [FILL Y2_C_A2] jobs in the past year?

Y2	C	Α1	=1
	\sim	, v i	

[WERE YOU/ WAS YOUTH], [YOU/(HE/SHE)]

Y2_C_A2A. [Were you / Was YOUTH] <u>paid</u> or did [you / (he/she)] <u>receive income</u> through selfemployment in <u>any</u> of these jobs? (P18M-IX.A2)

PROBE: Self-employed means that you work for yourself or own your own business.

YES	1
NO	0
DON'T KNOW	d
REFUSED	r

SOFT CHECK IF Y2_C_A2A=D: This information is really important to the study. How about we talk about each job one at a time to see if any were ones where you got paid or received money for the work you did?

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SOFT CHECK IF Y2_C_A2A=R: This information is really important to the study. All the information you provide will be kept private. Are there any concerns you have about answering this question that I may be able to help with?

PROGRAMMER: IF Y2_C_A1=1 AND Y2_C_A2A=1, 0, D, OR R - CASE MEETS QUALIFIED LEVEL TO CONSIDER PARTIAL COMPLETE.

.....

BOX 3

IF WORKED IN PAST YEAR (Y2_C_A1=1) and NUMBER OF JOBS (Y2_C_A2) = DK or R, TREAT AS 1 JOB. (Y2_C_A4 ONWARD IN LOOP, AS APPLICABLE, ASKED FOR EACH JOB AT Y2_C_A2 – UP TO 8 JOBS.

YOUTH WORKED IN PAST YEAR (Y2_C_A1=1) AND HAD AT LEAST 1 JOB NUM OR NUMBER OF JOBS WAS UNKNOWN: (Y2_C_A2>0 OR D OR R)

[YOU HAVE/YOUTH HAS], [YOUR/HIS/HER], [YOU/YOUTH], [WORK/WORKS], [YOU ARE/HE IS/SHE IS] [CURRENT MONTH] [CURRENT YEAR – 1 YEAR]

- Y2_C_A3. <u>IF Y2 C A2 = D OR R, FILL</u>: Now, I would like to get more information about the job where you worked in the past year. What is the name of the place [you/YOUTH] currently [work/works] at or worked at most recently?
 - <u>IF Y2 C A2 = 1, (ONE JOB), FILL:</u> Now, I would like to get more information about this job. What is the name of the place [you/YOUTH] currently [work/works] at or worked at most recently?
 - <u>IF Y2 C A2 > 1, FIRST JOB</u>, FILL: Now, I would like to get more information about <u>each</u> <u>job [you have/YOUTH has]</u> had in the past year. I'd like to start with [your/ (his/her)] most recent job and work backwards. What is the name of the place [you/YOUTH] currently [work/works] at or worked at most recently?
 - <u>IF Y2 C A2 > 1, AND LOOPING TO NEXT JOB</u> FILL: Now, I'd like to get more information about each of the <u>other jobs</u> [you have/YOUTH has] had <u>in the past year</u>. What is the name of the next place [you have/ (he/she) has] worked at since [CURRENT MONTH] [CURRENT YEAR 1 YEAR]? (P18M-IX.A5/YTD36M-II.A2)

PROBE: Please include jobs at which [you were/YOUTH was] self-employed.

IF R CANNOT REMEMBER THE NAME OF THE JOB, PROVIDE SOME KIND OF DESCRIPTION OF JOB BELOW. FOR EXAMPLE: PIZZA PLACE; THE OFFICE BUILDING; THE BOOK STORE. THIS KEEPS EACH SET OF EMPLOYMENT EXPERIENCES SEPARATE IN FOLLOW UP QUESTIONS.

	NAME OF PLACE WORKED OR TYPE OF SE	LF-	
	EMPLOYMENT (1-8)	DK	REF
a.	Name of place worked – 1 (ST	RING 150) d	r
b.	Name of place worked – 2 (ST	RING 150) d	r
C.	Name of place worked – 3 (ST	RING 150) d	r
d.	Name of place worked – 4 (ST	RING 150) d	r
e.	Name of place worked – 5 (ST	RING 150) d	r
f.	Name of place worked – 6 (ST	RING 150) d	r
g.	Name of place worked – 7 (ST	RING 150) d	r
h.	Name of place worked – 8 (ST	RING 150) d	r

SOFT CHECK IF Y2_C_A3a-h= D OR R: I'm collecting the name of each place worked (or type of self-employment) to help us in the questions that come up next, so we can keep them separate for people who report more than one job. All the information you provide will be kept private.

BOX 4

USE "NAME OF PLACE" PROVIDED IN Y2_C_A3a-h, AS FILL FOR [NAME OF PLACE] IN LOOPS FOR Y2_C_A4-Y2_C_A23. IF "NAME OF PLACE" WAS NOT PROVIDED IN Y2_C_A3a-h, USE "THIS JOB" AS FILL.

IF JOB IS POPULATED (LOOP 1-8, PER VALUE IN Y2 C A3a-h)

[(Are or were) you/(Is or was) YOUTH] [NAME OF PLACE] [you work for yourself/YOUTH works for him/her self] [own your own/owns his/her own]

Y2 C A4. IF YOUTH LISTED AN EMPLOYER CODE "1" BELOW AND MOVE ON.

IF EMPLOYER WAS NOT SPECIFIED OR UNCLEAR, ASK: [(Are or were) you/ (Is or was) YOUTH] self-employed at [NAME OF PLACE]? By self-employed we mean [you work for yourself/YOUTH works for (him/her) self] or [own your own/owns (his/her) own] business. (P18M-IX.A5)

IF NEEDED: If [you were/ YOUTH was] working for an employer or company at [NAME OF PLACE], it is not self-employment.

WORK(ED) FOR AN EMPLOYER	. 1
SELF EMPLOYED	. 2
DON'T KNOW	. d
REFUSED	. r

SEQUENCE BEGINS WITH START, END DATES – SO AS TO EXCLUDE OUT OF RANGE JOBS FROM FURTHERING IN THE LOOP.

IF JOB IS POPULATED (LOOP 1-8, PER VALUE IN Y2 C A3a-h)

[you/(he/she)] (NAME OF PLACE) FILLED FROM RESPONSE TO Y2_C_A3a-h for (NAME OF PLACE) SELF-EMPLOYED LOGIC DRIVEN IF Y2 C A4=2

Y2_C_A5. When did [you/ (he/she)] start working at [NAME OF PLACE]? (P18M-IX.A8/YTD36M-II.B4)

HARD CHECK: IF YEAR IS GT CURRENT YEAR OR YEAR IS EQUAL TO CURRENT YEAR AND MONTH IS GREATER THAN CURRENT MONTH; YOU HAVE RECORDED A YEAR IN THE FUTURE. PLEASE GO BACK AND CORRECT.

IF JOB IS POPULATED (LOOP 1-8, PER VALUE IN Y2 C A3a-h)

[Do you/Does YOUTH] NAME OF PLACE FILLED FROM RESPONSE TO Y2_C_A3a-j EMPLOYER FILLS: IF Y2 C A4=1; SELF-EMPLOYED FILLS IF Y2 C A4=2

REFUSED.....r

Y2_C_A6. IF WORKED FOR EMPLOYER: [Do you/Does YOUTH] still work at [NAME OF PLACE]? (P18M- IX.A6/YTD36M-II.B1).

IF SELF-EMPLOYED: [Do you/Does YOUTH] still (work at) [NAME OF PLACE]?

YES	GO TO BOX 5
NO	GO TO Y2_C_A7
DON'T KNOW d	GO TO BOX 5
REFUSEDr	GO TO BOX 5

NOT CURRENT JOB (Y2_C_A6=0)

[you/(he/she)], [your/(his/her)], (Is/Was) [NAME OF PLACE]

Y2_C_A7. When did [you/ (he/she)] stop working at [NAME OF PLACE] . . . (P18M-IX.A16/YTD36M-II.D4)

PROBES: In which month did [you/ (he/she)] stop? /What was the weather like?

Was it around a holiday or [your/ (his/her)] birthday? /Was it during the school year or during the summer? / (ls/Was) this a summer job?

INTERVIEWER:	IF "STILL WORKING" AT THIS JOB, CORRECT RESPONS QUESTION.	E TO PRIOR
PROGRAMMER:	COLLECT DATE WITH SEPARATE FIELDS	
_ / _	_	GO TO BOX 5
MONTH YEAR		
(1-12) (CURREN	T INTERVIEW YEAR OR YEAR PRIOR TO INTERVIEW)	
STOPPED WORK	ING MORE THAN ONE YEAR AGO0	GO TO BOX 6
DON'T KNOW	d	GO TO Y2_C_A8
REFLISED	r	GO TO V2 C A8

SOFT CHECK: IF Y2_C_A7_YEAR > CURRENT YEAR OR Y2_C_A7_YEAR = CURRENT YEAR AND Y2_C_A7_MONTH > CURRENT MONTH; YOU HAVE RECORDED A DATE IN THE FUTURE, PLEASE GO BACK AND CORRECT THE RESPONSE.

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DATE YOUTH STOPPED WORKING JOB NOT PROVIDED (Y2 C A7= D OR R)

[you/(he/she)] [NAME OF PLACE]

Y2_C_A8. How long did [you/ (he/she)] work at [NAME OF PLACE]? (P18M-IX.A16A/YTD36M-II.D4)

PROBE: Your best estimate is fine.

|__|_|WEEKS OR MONTHS OF EMPLOYMENT (ALLOWABLE RANGE: 1-99)

Y2_C_A8_UNIT.

WEEKS	GO TO BOX 5
MONTHS	GO TO BOX 5
DON'T KNOWd	GO TO BOX 5
REFUSEDr	GO TO BOX 5

HARD CHECK: IF Y2_C_A8 = EMPTY AND Y2_C_A8_Unit 1-2; INTERVIEWER: PLEASE PROVIDE A RESPONSE AND SELECT A UNIT, OR SELECT DON'T KNOW/REFUSED.

BOX 5

CONTINUE THROUGH LOOP IF:

- JOB IS CURRENT JOB (Y2_C_A6=1); OR
- IT IS NOT CLEAR THAT JOB IS CURRENT JOB (Y2_C_A6=D OR R); OR
- JOB IS <u>NOT</u> CURRENT JOB (Y2_C_A6=0) <u>AND</u> JOB OCCURRED IN LAST YEAR (Y2_C_A7_MONTH-YEAR WITHIN PAST 12 MONTHS); OR
- JOB IS <u>NOT</u> CURRENT JOB (Y2_C_A6=0) <u>AND</u> IT IS NOT CLEAR THAT JOB OCCURRED IN PAST YEAR (Y2_C_A8_UNIT=D OR R).

TENSE FILLS:

- ONCE IN LOOP IF <u>CURRENT</u> JOB (Y2_C_A6 =1) APPLY PRESENT TENSE FILLS.
- IF NOT A CURRENT JOB (Y2_C_A6 = 0) APPLY PAST TENSE FILLS.
- IF <u>UNKNOWN</u> (Y2_C_A6= D OR R), PRESENT BOTH OPTIONS IN THE PARENTHESIS

IF A CURRENT JOB (Y2_C_A6= 1)

[(do you/does YOUTH] [NAME OF PLACE] [your/(his/her)] [have you/has (he/she)] [(you/(he/she)]

Y2_C_A9. What [do you/does YOUTH] do at [NAME OF PLACE]? (P18M- IX.A7/YTD36M-II.B3)

PROBE: What are [your/ (his/her)] responsibilities? What kinds of things [have you/has (he/she)] done there? Tell me what [(you/ (he/she)] (do/does) when [you/ (he/she)] (get/gets) to work? Then what?

IF SELF-EMPLOYED: What [do you/does (he/she)] do (at/as a self employed) [NAME]?

INTERVIEWER: RECORD VERBATIM AND CODE ONE BELOW.

(STRING 150)

Y2_C_A9_Code. APPLY CODE BELOW. INTERVIEWER: IF 'SORTING/FOLDING CLOTHES' CODE TO 'STOCK CLERK- RETAIL (19).

	CODE ONE ONLY
ASSEMBLY WORK (SORTING, STUFFING)	1
ANIMAL CARE (DOG WALKING, GROOMING, VETERINARY HELPER)2
CAMP COUNSELOR	3
CASHIER—GROCERY STORE, FAST FOOD PLACE, RETAIL	4
CHILD CARE—BABYSITTING/MOTHERS HELPER, TEACHER'S AIDE	5
CLEANING—JANITOR/MAID	6
CLERICAL—FILING, RECEPTIONIST, DATA ENTRY	7
COMPUTER WORK—DATA ENTRY/PROGRAMMING/WEB PAGE DEV	/ELOPMENT 8
DELIVERY PERSON – FOOD, NEWSPAPERS, OR PRESCRIPTIONS	9
FOOD SERVICE—BUS BOY, WAITER/WAITRESS, HOST, COOK	10
GARDENING AND GROUNDS MAINTENANCE	11
HEALTH CARE AIDE—PERSONAL CARE ATTENDANT, NURSE'S AID	E12
MILITARY	13
SALES - RETAIL	14
SKILLED LABOR—PLUMBER, CARPENTER, ELECTRICIAN	15
STOCK CLERK— RETAIL (GROCERY OR DRUG STORE, ETC)	16
OTHER, NOT LISTED ABOVE	99
DON'T KNOW	d
DEFLICED	"

IF A CURRENT JOB (Y2_C_A6= 1)

[you/(he/she)], [PROMISE PROGRAM]

Y2_C_A10. How did [you/ (he/she)] find this job? (P18M- IX.A9/YTD36M-II.B5)

PROBE: How did [you/ (he/she)] hear about this job?

INTERVIEWER: IF 'JOB FAIR' CODE: DIRECT APPLICATION TO EMPLOYER (6).

CODE ONE ONLY

NEWSPAPER AD	GO TO Y2_C_A11
INTERNET/WEBSITE2	GO TO Y2_C_A11
EMPLOYMENT AGENCY (PRIVATE)	GO TO Y2_C_A11
SPECIAL EDUCATOR, VOCATIONAL EDUCATOR, COUNSELOR, OR OTHER SCHOOL STAFF4	GO TO Y2_C_A11
FRIENDS, RELATIVES, COMMUNITY MEMBERS (E.G. CHURCH)5	GO TO Y2_C_A11
DIRECT APPLICATION TO EMPLOYER 6	GO TO Y2_C_A11
VOC REHAB OR OTHER SERVICE AGENCY	GO TO Y2_C_A11
AMERICAN JOB CENTERS (UNEMPLOYMENT OFFICE, FORMERLY KNOWN AS ONE STOPS OR WORKFORCE DEVELOPMENT CENTERS) 8	GO TO Y2_C_A11
[PROMISE PROGRAM]9	GO TO Y2_C_A11
OTHER SOURCE - SPECIFY	GO TO
DON'T KNOWd	GO TO Y2_C_A11
REFUSEDr	GO TO Y2_C_A11

YOUTH FOUND JOB THROUGH OTHER SOURCE (Y2_C_A10_99=1)

Y2_C_A10_Spec. SPECIFY HOW YOUTH FOUND JOB: (P18M- IX.A9/YTD36M-II.B6)

(STRING 150)

CURRENT JOB OR JOB WORKED IN PAST YEAR (Y2_C_A6=1 OR Y2_C_A7_MONTH-YEAR WITHIN PAST 12 MONTHS OR D OR R)

[(do/did you)/(does/did) YOUTH] [do you/does (he/she)] [Do you/Does YOUTH]

Y2_C_A11. How many hours per week [(do/did you)/ (does/did) YOUTH] usually work at this job? (P18M- IX.A10)

PROBE: Which days [do you/does (he/she)] work? /What time [do you/does (he/she)] start work? /What time [do you/does (he/she)] finish work?/[Do you/Does YOUTH] take a break for lunch?

INTERVIEWER: IF JOB DID NOT HAVE USUAL HOURS, (SPORADIC WORK OR ONE-TIME OPPORTUNITY) RECORD AS SUCH BELOW

|__|_ | HOURS PER WEEK USUALLY WORKED (1-98) GO TO Y2_C_A13

 NO USUAL HOURS
 99
 GO TO Y2_C_A12

 DON'T KNOW
 d
 GO TO Y2_C_A12

 REFUSED
 r
 GO TO Y2_C_A12

SOFT CHECK: IF Y2_C_A11 > 50; May I confirm I have correctly recorded [Y2_C_A11]?

YOUTH USUAL HRS PER WEEK WORKED DK, REF, OR NO USUAL HRS (Y2_C_A11 = D, R, OR 99)

[Do you think you work/Do you think YOUTH works]

Y2_C_A12. [Do you think you work/Do you think YOUTH works] ... (P18M-X.A10, YTD36M-II.B6)

 CODE ONE ONLY

 Less than 10 hours per week?
 1

 10-20 hours per week?
 2

 21-30 hours per week?
 3

 31- 35 hours per week?
 4

 More than 35 hours per week?
 5

 Or was this a one-day or short-term opportunity?
 6

 DON'T KNOW
 d

 REFUSED
 r

CURRENT JOB OR JOB WORKED IN PAST YEAR (Y2_C_A6=1 OR Y2_C_A7_MONTH-YEAR WITHIN PAST 12 MONTHS OR D OR R)

[you are/(he/she) is]/[you were/(he/she) was] FILL [NAME OF PLACE] FROM APPLICABLE JOB IN LOOP FOR Y2_C_A5a-j

Y2_C_A13. Next, I'd like to ask you some questions about how [you are/ (he/she) is]/ [you were/ (he/she) was] paid at [NAME OF PLACE].

[Do/Did) you/ (Does/did) YOUTH] get <u>paid by the hour</u> or by how many <u>things</u> [you/ (he/she)] [(make/do/sell)/ (makes/does/sells)]? (P18M-IXA11/YTD36M-II.C1)

PROBE: [Are you/Is YOUTH] paid a certain amount per day, per week, per month, or per year?

[Do you/Does YOUTH] get a salary?

INTERVIEWER: IF R WAS PAID AS A SINGLE DAY OR ONE TIME EVENT, SELECT HOUR/DAY/WEEK OPTION BELOW.

HOUR, DAY, WEEK, MONTH, YEAR1	GO TO Y2_C_A15
THINGS2	GO TO Y2_C_A14
UNPAID JOB	GO TO Y2_C_A19
PAID SOME OTHER WAY (SPECIFY)	GO TO Y2_C_A13_SPEC
DON'T KNOWd	GO TO Y2_C_A19
REFUSEDr	GO TO Y2 C A19

YOUTH PAID IN OTHER WAY (Y2 C A13=99	YOUTH	PAID IN	OTHER WAY	(Y2 C	A13=99
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Y2_C_A13_Spec.	SPECIFY HOW YOUTH WAS PAID AT THIS JOB: (P18M-IXA11/YTD36M-II.C1)
IF R SAYS	JOB WAS 'UNPAID' GO BACK TO Y2_C_A13 AND CORRECT RESPONSE TO UNPAID.
	(STRING 150) GO TO Y2_C_A16

YOUTH PAID BY THINGS (Y2 C A13=2) [(are/were) you)/(is/was) YOUTH] [(do or did you)/(does (he/she))] [you (make/do/sell)/(he/she) makes/does/sells] [(do or did you)/does (he/she) (make/do/sell)] Y2_C_A14. About how much [(are or were) you)/ (is or was) YOUTH] paid on this job? (P18M-IX.A12/YTD36M-II.C2) IF R SAYS JOB WAS 'UNPAID' GO BACK TO Y2 C A13 AND SELECT "UNPAID." How much [(do or did you)/ (does (he/she)] get paid for each thing [you (make/do/sell)/ (he/she) makes/does/sells]? Y2 C A14 amtthing RECORD AMOUNT PER THING \$|__|_| PER/THING (1-999) Y2_C_A14_hrsthing. How many things [(do or did you)/does (he/she) (make/do/sell)] in an hour? RECORD THINGS PER HOUR |__|,|__| |__| THINGS/HOUR (1-999) GO TO Y2_C_A16 HARD CHECK: IF Y2 C A14 AMTTHING IS EMPTY AND Y2 C A14 HRSTHING IS POPULATED, OR Y2_C_A14_HRSTHING IS EMPTY AND Y2_C_A14_AMTTHING IS POPULATED: BOTH THE AMOUNT PAID PER THING BOX AND THINGS PER HOUR BOX MUST BE FILLED OUT BEFORE MOVING ON TO THE NEXT ITEM. PLEASE MAKE CORRECTIONS, WHERE NEEDED. IF PAID BY TIME PERIOD (HR, DAY, MONTH, YEAR) (Y2_C_A13 = 1) [(are or were) you)/(is or was) YOUTH] Y2_C_A15. About how much [(are or were) you)/ (is or was) YOUTH] paid on this job? (P18M-IX.A12/YTD36M-II.C2) IF R SAYS JOB WAS 'UNPAID' GO BACK TO Y2 C A13 AND CORRECT RESPONSE TO UNPAID. \$ | | | |, | | | DESCRIPTION (0-500000) Y2 C A15 Unit. **RECORD UNIT:** PER HOUR......1 GO TO Y2_C_A16 GO TO Y2 C A16 GO TO Y2_C_A16 EVERY OTHER WEEK4 GO TO Y2 C A16 GO TO Y2_C_A16 GO TO Y2 C A16 GO TO Y2_C_A16 OTHER WAY 8 GO TO Y2_C_A16 DON'T KNOW.......d GO TO Y2_C_A16

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GO TO Y2 C A16

REFUSED......r

PAID JOB (Y2_C_A13	3=1, 2, OR 99)
[YOU/YOUTH]	
Y2_C_A16. (Does/	/Did) this job offer <u>health insurance</u> ? (P18M-IX.A13//YTD36M-II.C3)
PROBE:	It doesn't matter if [you take/YOUTH takes] this benefit or not. We just want to know whether or not it is <u>offered</u> to [you/YOUTH].
YES	1
NO	0
DON'T KNOW.	d
REFUSED	r
PAID JOB (Y2_C_13=	=1, 2, OR 99)
[YOU/YOUTH]	
Y2_C_A17. (Does/	/Did) this job offer paid vacation or sick leave? (P18M-IX.A13//YTD36M-II.C3)
PROBE:	It doesn't matter if [you take/YOUTH takes] this benefit or not. We just want to know whether or not it is offered to [you/YOUTH].
YES	1
NO	0
DON'T KNOW.	d
REFUSED	r
PAID JOB (Y2_C_13=	=1, 2, OR 99)
[YOU/YOUTH]	
Y2_C_A18. (Does/Did	d) this job offer any kind of pension or retirement plan? (P18M-IX.A13//YTD36M-II.C3)
PROBE:	It doesn't matter if [you take/YOUTH takes] this benefit or not. We just want to know whether or not it is offered to [you/YOUTH].
YES	1
NO	0
DON'T KNOW.	d
DEELIGED	r

CURRENT JOB OF PAST 12 MONTHS	R JOB WORKED IN PAST YEAR (Y2_C_A6=1 OR Y2_C_A7_MONTH-YEAR WITHIN OR D, R)
	this job, (do/did) most of the other workers have disabilities? (P18M-IX.A14//YTD36M-D1)
YES	1
NO	0
DON'T KNO	Wd
REFUSED	r
CURRENT JOB OF PAST 12 MONTHS	R JOB WORKED IN PAST YEAR (Y2_C_A6=1 OR Y2_C_A7_MONTH-YEAR WITHIN OR D, R)
[NAME OF PLACE]	
Y2_C_A20. (Is/Was work-s II.D2)	s) this job at [NAME OF PLACE] part of any <u>school-sponsored</u> work activities like a tudy job, an internship, or part of a school-based business? (P18M-IX.A15//YTD36M-
INTERVIEW	ER: IF JOB WAS PART OF A SCHOOL-SPONSORED JOB AT FIRST, BUT YOUTH IS NO LONGER IN SCHOOL, SELECT "NO."
YES	1
NO	0
DON'T KNO	Wd
REFUSED	r
CURRENT JOB OF PAST 12 MONTHS	R JOB WORKED IN PAST YEAR (Y2_C_A6=1 OR Y2_C_A7_MONTH-YEAR WITHIN OR D, R)
[your/[his/her]] [you	/[him/her]]
<mark>Y2_C_A21</mark> . Was th [you/[h	ere someone, either from [your/[his/her]] school or from an agency, who went with im/her]] to this job and helped [you/[him/her]] to learn the job? (NLTS-FU, P21)
PROBE:	This person can sometimes be called a <u>job coach</u> . His or her job is to help people learn the skills needed for a job while doing their job, as opposed to learning these skills at other places.
YES	1
NO	0
DON'T KNO	Wd
REFLISED	r

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BOX 6

IF JOBS IN Y2_C_A2 >1, CONTINUE WITH OTHER JOB(S) IN LOOPS (a-h) FOR ITEMS Y2_C_A4 THROUGH Y2_C_A21 AS APPLICABLE FOR EACH JOB. IF NO MORE JOBS, GO TO Y2_C_A22 – UNLESS Y2_C_A22 WAS ASKED (Y2_C_A22 = 1, 0, D, OR R) THEN, GO TO Y2_C_A31.

YOUTH REPORTED JOB(S) IN PAST YEAR (Y2 C A2>0)

[YOU/YOUTH], [YOUR/YOUTH], [YOU DO/YOUTH DOES], [YOU ARE/YOUTH IS] [YOUR/[HIS/HER]]

Y2_C_A22. Thank you for telling me about (this job/these jobs), I just want to be sure we haven't missed any job [you/ (YOUTH)] had in the past year. We just spoke about [your/YOUTH's] job(s) at:

[FILL JOB(S) FROM A5a-h]

Did (you/YOUTH) have <u>any other jobs</u> during the <u>past year</u>, even ones that lasted for just a short time? Do <u>not</u> include chores that (you do/YOUTH does) around the house, even if [you are/YOUTH is] paid to do them. (P18M- IX.A19/YTD36M-II.F2)

PROBE:

A job is work, either paid or unpaid, other than work around the house. A job could be a school sponsored job or a work study job. Jobs include internships, apprenticeships, and volunteer work, even if you don't get paid. A job could be working for a business or organization or work that [you do/[he/she] does] on [your/[his/her]] own such as babysitting or dog walking.

YES1	
NO	GO TO Y2_C_A31
DON'T KNOWd	GO TO Y2_C_A31
REFUSEDr	GO TO Y2_C_A31

YOUTH WORKED OTHER JOBS IN PAST YEAR NOT SPECIFIED (Y2 C A22=1)

[YOU/YOUTH], [CURRENT MONTH], [CURRENT YEAR - 1 YEAR] [YOU WERE/YOUTH WAS]

Y2 C A23. How many other jobs did [you/YOUTH] have during the past year?

Please do not include jobs you already told me about. Please include all jobs, even if [you/YOUTH] only worked for a short period of time. Please include jobs at which [you were/YOUTH was] self-employed or volunteered. (P18M-IX.A20/YTD36M-II.F2 num)

PROBE: That is since [CURRENT MONTH] [CURRENT YEAR – 1 YEAR]?

_ JOBS	
(01-99)	
DON'T KNOW d	GO TO Y2_C_A31
REFUSEDr	GO TO Y2_C_A31

SOFT CHECK IF Y2_C_A23>1: May I confirm that [you have/YOUTH has] had [FILL Y2_C_A23] jobs since this time last year, in addition to the jobs you have already told me about?

Y2 C A23 >0

[YOU/YOUTH], [NUMBER IN Y2_C_A24]

Y2_C_A24. Did any of these jobs last more than two weeks? (P18M- IX.A20a/YTD36M-II.F3)

YES	GO TO BOX 7
NO0	GO TO Y2_C_A31
DON'T KNOW d	GO TO Y2_C_A31
REFUSEDr	GO TO Y2 C A31

SOFT CHECK: To confirm, (you/YOUTH) had [value from Y2_C_A23] job(s) that lasted more than two weeks?

BOX 7

IF YOUTH HAD MORE JOBS THAT LASTED MORE THAN 2 WEEKS (Y2_C_A24=1) $\underline{\text{AND}}$ HAS REPORTED FEWER THAN 8 JOBS TOTAL (Y2_C_A2 <8), GO TO Y2_C_A2 AND ADD ADDITIONAL JOBS (UP TO 8 TOTAL ACROSS JOB LOOPS). RETURN THROUGH THE LOOP AS NEEDED FOR EACH NEW JOB.

YOUTH NOT WORKED IN PAST YEAR OR PAST YEAR WORK STATUS UNKNOWN (Y2_C_A1=0, D, OR R)

YOUTH NOT WORKING NOW OR WORK STATUS NOT KNOWN (Y2_C_A6 = 0 OR D OR R AT \underline{ALL} LOOPS)

[Have you/Has YOUTH]

Y2_C_A25. [Have you/Has YOUTH] been <u>looking for work</u> during the last four weeks? (NBS-B28/YTD36M-II.G4)

1E9	
NO	GO TO Y2_C_A27
DON'T KNOW d	GO TO Y2_C_A28
REFUSEDr	GO TO Y2_C_A28

YOUTH NOT WORKING NOW, LOOKING FOR WORK (Y2_C_A25=1)

[you/YOUTH] [FILL ONE STOP OFFICE NAME FOR PROGRAM STATE] [VR PROGRAM NAME IN PROGRAM STATE]

Y2_C_A26. I'm going to read you a list of things that some people do to look for work. Please tell me what [you/YOUTH] did during the last four weeks to look for work.

In the last four weeks, did [you/YOUTH] ... (NBS, B29 rev/YTD36M-II.G5 rev)

CODE ONE PER ROW

	YES	NO	DK	REF
	150	NO	DK	KEF
 a. Contact your state's One Stop office, [FILL], Workforce Development office, or unemployment office? 	1	0	d	r
b. Ask friends or relatives?	1	0	d	r
c. Look through job advertisements in a newspaper or on the internet?	1	0	d	r
d. Contact the State Vocational Rehabilitation Agency or [STATE VR NAME]?	1	0	d	r
e. Contact any employers in person, by mail, or by phone?	1	0	d	r
f. Do anything else that I didn't mention?	99	0	d	r

YOUTH NOT LOOKING FOR WORK RIGHT NOW (Y2_C_A25=0)

[have you/has YOUTH]

Y2_C_A27. Why [have you/has YOUTH] decided <u>not</u> to look for work right now? (NLTS2-W4, Q60)

PROBE: Any other reasons?

INTERVIEWER: CODE ALL THAT APPLY, READ ALOUD ONLY IF NEEDED.

CODE ALL THAT APPLY

DISABILITY IS TOO SEVERE	1
DON'T HAVE A WAY TO GET TO A JOB (TRANSPORTATION)	2
DON'T KNOW HOW TO FIND A JOB	3
DON'T WANT TO LOOK FOR WORK RIGHT NOW	4
DON'T NEED OR WANT A JOB RIGHT NOW	5
FAMILY DOES NOT WANT ME TO WORK	6
FEAR OF LOSING BENEFITS (LIKE SSI) IF I WORK	7
IN SCHOOL OR TRAINING PROGRAM	8
NO ONE WOULD HIRE ME - GAVE UP LOOKING	9
NOT INTERESTED IN THE KINDS OF JOBS I COULD GET	10
NO JOBS AVAILABLE	11
RAISING CHILDREN AND CHOSE NOT TO WORK NOW	12
WAITING TO HEAR ABOUT A JOB/START A JOB	13
OTHER REASON NOT LISTED ABOVE	14
DON'T KNOW	d
REFUSED	r

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YOUTH NOT WORKING NOW, LOOKING FOR WORK OR DK/REF (Y2 C A25=1 OR D OR R)

[you are/YOUTH is] [Are you/is YOUTH] [You/YOUTH] [you want/[he/she] wants] [You do/YOUTH does] [You are/YOUTH is] [You do/YOUTH does] [you need/[he/she] needs] [you/YOUTH] [You/YOUTH] [you are/[he/she] is]

Y2_C_A28. I'm going to read a list of reasons why some people do not work. For each, please tell me if it is a reason why [you are/YOUTH is] not currently working. [Are you/is YOUTH] not working because . . . (NBS-2017, B25/CPS)

PROBE: I need to read the entire list even though some of the reasons may not apply to you. If a reason does not apply, please just say so.

INTERVIEWER: IF RESPONDENTS SAYS 'DOES NOT APPLY' CODE AS 'NO'.

PROGRAMMER: RANDOMIZE THE SEQUENCE OF THESE ITEMS.

		YES	NO	DK	REF
a.	[You/YOUTH] cannot find a job [you want/[he/she] wants]?	1	0	d	r
b.	[You do/YOUTH does] not have <u>reliable transportation</u> to and from work?	1	0	d	r
C.	[You are/YOUTH is] caring for children or others?	1	0	d	r
d.	[You do/YOUTH does] <u>not want to lose benefits</u> [you need/[he/she] needs] like Social Security, disability insurance, workers' compensation, or Medicaid?	1	0	d	r
e.	A physical or mental condition prevents [you/YOUTH] from working?	1	0	d	r
f.	[You/YOUTH] cannot find a job that [you are/[he/she] is] qualified for?	1	0	d	r
g.	[You are/ YOUTH is] <u>attending school</u> and cannot work at the same time?	1	0	d	r

YOUTH NOT WORKING NOW, LOOKING FOR WORK OR DK/REF (Y2_C_A25=1 OR D OR R)	
[you are/YOUTH is]	

Y2_C_A29. Are there any <u>other</u> reasons why [you are/YOUTH is] not working at this time that I have not yet mentioned? (YTD36M-II.G7/NBS B26)

YES1	
NO	GO TO Y2_C_A31
DON'T KNOW d	GO TO Y2_C_A31
REFUSEDr	GO TO Y2_C_A31

OTHER REASON WHY NOT WORKING NOW (Y2 C A29=1) [are you/is YOUTH] Y2 C A30 Spec. Why [are you/is YOUTH] not working at this time? (NBS 2017, BP4a, rev, CPS) INTERVIEWER: RECORD VERBATIM THEN CODE ALL THAT APPLY (STRING 750) Y2 C A30 Code. **CODE ALL THAT APPLY** WAITING TO FINISH SCHOOL OR A TRAINING PROGRAM1 ON LAYOFF (TEMPORARY OR INDEFINITE)2 SLACK WORK/BUSINESS CONDITIONS......3 LEAVE (MATERNITY/PATERNITY, PERSONAL) AND VACATION......4 PREVIOUS ATTEMPTS TO WORK HAVE BEEN DISCOURAGING5 CANNOT GET HELP NEEDED WITH PERSONAL CARE. [INCLUDES HELP DRESSING AND BATHING TO GET READY FOR WORK, OR EATING LUNCH, OR USING THE RESTROOM AT WORK.]......6 DO NOT HAVE SPECIAL EQUIPMENT OR MEDICAL DEVICES NEEDED IN WORKPLACES ARE NOT ACCESSIBLE TO, OR LACK ACCOMMODATIONS FOR PEOPLE WITH A DISABILITY8 OTHER REASON 9 DON'T KNOW......d REFUSED.....r ALL CONSENTING (Y2 A CONSENT=1) Y2_C_A31. PROGRAMMER: INSERT DATE SECTION Y2 C A (YOUTH EMPLOYMENT) WAS COMPLETED. POPULATE DATE AS [MM/DD/YYYY] THEN CONTINUE. (P18M-IX.A21)

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CONTINUE 1

ALL CONSENTING (Y2_A_CONSENT=1)

Y2_C_A32.IF R IS CONTINUING, SELECT "ABLE TO CONTINUE" BELOW. IF R IS NOT ABLE TO CONTINUE AND EP NEEDS TO COMPLETE INTERVIEW, CHECK WHETHER EP IS AVAILABLE. IF SO, SET CALLBACK FOR YOUTH AND SELECT "CONTINUE WITH PARENT INTERVIEW" BELOW. IF NOT, SET CALLBACK FOR YOUTH AND SELECT "PARENT UNAVAILABLE" BELOW. IF R IS NOT ABLE TO CONTINUE AND EP DOES NOT NEED TO COMPLETE INTERVIEW, SET CALLBACK FOR YOUTH AND SELECT "PARENT COMPLETE OR INELIGIBLE" BELOW.

PROGRAMMER: IF PARENTDECEASED = 1 OR PARENTWITHDRAWN = 1 OR PARENTAGENCY = 1 OR PARENTFINAL = 1, SHOW OPTIONS 1, 4, AND 5 BELOW. ELSE, SHOW OPTIONS 1, 2, 3, AND 5 BELOW.

YOUTH SURVEY R ABLE TO CONTINUE1	GO TO Y2_D_INTRO
YOUTH SURVEY R BREAK OFF – CONTINUE WITH PARENT INTERVIEW 2	SET CALLBACK, CLOSE YOUTH RECORD, OPEN PARENT RECORD
YOUTH SURVEY R BREAK OFF – PARENT UNAVAILABLE	SET CALLBACK
YOUTH SURVEY R BREAK OFF – PARENT COMPLETE OR INELIGIBLE 4	SET CALLBACK
YOUTH SURVEY R BREAK OFF – PROXY NEEDED FOR YOUTH 5	SET CALLBACK

Section D Health and Well-Being

		Asked of Self-Reporting Youth	Asked of Youth's Proxy
D	Health and Well-Being	YES	YES

SECTION Y2 D A. Youth LIVING ARRANGEMENTS AND PARENTHOOD

ALL CONSENTING (Y2_A_CONSENT=1)	
[YOUR/YOUTH'S]	
Y2_D_Intro. The next set of questions ask about [your/YOUTH's] living situation, healt	th, and well-being.
CONTINUE	1
CONTINUE	1

Y2_D_A1. Where [do you/does YOUTH] live now? If [you stay/YOUTH stays] in more than one place, where [do you/does YOUTH] stay most often? (YB2014, A0-A1/NLTS2-W4, 18)

ALL CONSENTING (Y2_A_CONSENT=1)

[you/(he/she)] [your/(his/her)] [Do you/Does YOUTH] [you are/(he/she) is]

Y2_D_A2. I am going to ask about biological children, adopted, foster, and any other children for whom [you/(YOUTH)] may be responsible, even if they are not living in [your/(his/her)] household right now. [Do you/Does YOUTH] have any children for whom [you are/ (he/she) is] responsible? (YTD-36M, X.D1, rev)

YES	
NO	GO TO Y2_D_B1
DON'T KNOW d	GO TO Y2_D_B1
REFUSEDr	GO TO Y2_D_B1

YOUTH HAS CHILD(REN) RESPONSIBLE FOR (Y2_D_A2= 1)	
[your/YOUTH's]	
Y2_D_A3. (Is this child/ Are any of these children) [your/ YOUTH's] <u>biological</u> chi	ld (ren)? (YTD-36M, X.D4
YES1	
NO0	GO TO Y2_D_B1
DON'T KNOWd	GO TO Y2_D_B1
REFUSEDr	GO TO Y2_D_B1
YOUTH HAS BIOLOGICAL CHILD(REN) (Y2_D_A3 = 1)	
[your/YOUTH's] [IF NUM CHILDREN >1, FILL "FIRST"] [Y2_D_A5]	
Y2_D_A4. INTERVIEWER, IF YOUTH HAS MORE THAN ONE CHILD, CHANGE TEX ABOUT THE FIRST CHILD ONLY.	CT AS NEEDED TO ASK
What month and year was [your/ YOUTH's] (first) child born? (NEW)	
PROBE: Your best guess is fine.	
INTERVIEWER: HELP YOUTH CAPTURE MONTH WITH PROBES BY SEA PROBE FOR YEAR WITH MAJOR LIFE EVENTS.	SON, AS NEEDED.
PROGRAMMER: COLLECT DATE WITH SEPARATE FIELDS	
<u> _ / _ </u>	
MONTH YEAR	
(1-12) (1997-2021)	
DON'T KNOWd	
REFUSEDr	

SOFT CHECK: IF Y2_D_A4_year is \leq YOUTH'S YEAR OF BIRTH; I recorded that your first or oldest child was born in [FILL Y2_D_A4]. What part should I correct?

SOFT CHECK: IF Y2_D_A4_YEAR > CURRENT YEAR or Y2_D_A4_YEAR = CURRENT YEAR and Y2_D_A4_MONTH > CURRENT MONTH; YOU HAVE RECORDED A DATE IN THE FUTURE, PLEASE GO BACK AND CORRECT THE RESPONSE.

SECTION Y2_D_B. YOUTH HEALTH AND HEALTH INSURANCE

ALL CONSENTING (Y2_A_CONSENT = 1)	
(your/ YOUTH's) [your/ (his/her)]	

Y2_D_B1. In general, would [(you/YOUTH] say that [your/ (his/her)] health is . . . (P18M- XII.A1/YTD36M VI.B1/SF1)

	CODE ONE ONLY
Excellent,	1
Very good,	2
Good,	3
Fair, or	4
Poor?	5
DON'T KNOW	d
REFUSED	r

ALL CONSENTING (Y2_A_CONSENT = 1)

[ARE YOU/IS (YOUTH)] [you/YOUTH]

Y2_D_B2. The next questions are about health insurance, including health insurance obtained through employment or purchased directly, as well as government programs like Medicaid and Medicare. [Are you/Is (YOUTH)] covered by <u>any</u> kind of health insurance or some other kind of health care plan? (P18m- XII.C1/YTD36M-XI.A2, rev/NHIS, rev)

PROBE: This includes private insurance, as well as other types of health insurance [you/YOUTH] may receive or purchase through government programs.

YES1	
NO0	GO TO Y2_D_C1
DON'T KNOW d	GO TO Y2_D_C1
REFUSEDr	GO TO Y2_D_C1

SOFT CHECK: IF Y2_D_B2=0:

May I confirm that I have recorded your answer correctly – that is that [you are/YOUTH is] not covered by <u>any</u> kind of health insurance at this time. This includes private insurance, as well as any insurance you may get through government programs.

YOUTH COVERED BY INSURANCE (Y2 D B2=1)

[Are you/is YOUTH], [you have/YOUTH has] [STATE MEDICAID NAME] [PROGRAM STATE]

Y2_D_B3. What kind of health insurance or health care plan [are you/is YOUTH] now covered by? If [you have/ YOUTH has] more than one kind of insurance, please let me know. (P18M- IV.A3, 4, 5, 6 - rev/NHIS, rev)

PROBE: Anything else?

IF NEEDED:

<u>Private health insurance</u> includes any health insurance other than [STATE MEDICAID NAME], Medicare, or TRICARE.

[STATE MEDICAID NAME] is the name for the <u>Medicaid program</u> in [PROGRAM STATE]. Medicaid provides health coverage to eligible low-income adults, children, pregnant women, elderly adults, and people with disabilities.

INTERVIEWER: IF THE YOUTH NO LONGER LIVES IN [PROGRAM STATE], BUT IS ENROLLED IN (HIS/HER) CURRENT STATE, RECORD AS 'YES' BELOW.

Medicare is the federal health insurance program for people with disabilities.

TRICARE is a health insurance program for military service members and their families.

The children's health insurance program (S-CHIP) is free or low-cost health insurance for uninsured children under age 19. This program helps reach uninsured children whose families earn too much to qualify for Medicaid, but not enough to get private coverage.

SOFT CHECK: IF <u>YOUTH</u> IS REPORTED TO HAVE INSURANCE (Y2_D_B2=1) BUT INSURANCE TYPE IS NOT REPORTED (Y2_D_B3_1 THROUGH Y2_D_B3_7 = 0)

May I confirm I have correctly recorded that [you/YOUTH] have/has health insurance coverage? IF NOT COVERED RETURN TO Y2_D_B2 TO CORRECT THE RESPONSE.

IF COVERED, RETURN TO APPLICABLE ITEM(S) TO UPDATE TYPE OF COVERAGE.

YOUTH (COVERED	BY PRIVATE INSURANCE PUCHASED ON OWN (Y2_D_B3_2=1)	
STATE N	MARKETF	PLACE NAME] – FILL IF CA, CO, MD, NY	
2_D_B3 <i>i</i>	<u>in</u>	as this private insurance purchased through the <u>Affordable Care Act</u> surance exchange, sometimes called [state marketplace name,] <u>Healt bamaCare</u> ? (P18M-IV.A9/NHIS, modified)	
YE	ES	1	
NO	O	0	
DO	ON'T KNC	W d	
RE	EFUSED	r	
VII CON	ISENTING	G (Y2_A_CONSENT = 1)	
you/YOL		nearly constitutes not in two this with the law. These port succetions	
you/YOL 2_D_C1.	Young [you/Y fullest	people sometimes get in trouble with the law. These next questions a OUTH] may have had with the police or courts. All of your answers wi extent of the law. (YB 2014, F0/YTD36M, IX.B1)	
you/YOL 2_D_C1.	Young [you/Y fullest DNTINUE	OUTH] may have had with the police or courts. All of your answers wi extent of the law. (YB 2014, F0/YTD36M, IX.B1)	
you/YOL 2_D_C1. C0	Young [you/Y fullest DNTINUE	OUTH] may have had with the police or courts. All of your answers wi extent of the law. (YB 2014, F0/YTD36M, IX.B1)	
you/YOL 2_D_C1. C0	Young [you/Y fullest DNTINUE ISENTING u/Has YO	OUTH] may have had with the police or courts. All of your answers wi extent of the law. (YB 2014, F0/YTD36M, IX.B1)	Il be kept private to
you/YOL 2 D C1. CO ALL CON	Young [you/Y fullest DNTINUE ISENTING u/Has YO [Have your please	OUTH] may have had with the police or courts. All of your answers wi extent of the law. (YB 2014, F0/YTD36M, IX.B1) G (Y2_A_CONSENT = 1) UTH] you/ Has YOUTH] ever been arrested or taken into custody for a crime include probation or parole violations, but do not include minor motol (4, F1)	e or illegal offense? or vehicle violation ag arrested with
you/YOL CO LLL CON Have you 2_D_C2.	Young [you/Y fullest DNTINUE ISENTINU I/Has YO [Have : Please (YB20' PROBE	OUTH] may have had with the police or courts. All of your answers wi extent of the law. (YB 2014, F0/YTD36M, IX.B1) G (Y2_A_CONSENT = 1) UTH] you/ Has YOUTH] ever been arrested or taken into custody for a crime include probation or parole violations, but do not include minor moto (4, F1) An arrest includes being arrested with or without charges, or bein charges dropped. An arrest is any time someone is taken into cus legal authority. This excludes traffic citations, other citations (suc	e or illegal offense? or vehicle violation ag arrested with
you/YOL CO ALL CON Have you 2_D_C2.	Young [you/Y fullest DNTINUE ISENTING u/Has YO [Have Please (YB20') PROBE	OUTH] may have had with the police or courts. All of your answers wi extent of the law. (YB 2014, F0/YTD36M, IX.B1) G (Y2_A_CONSENT = 1) UTH] you/ Has YOUTH] ever been arrested or taken into custody for a crime include probation or parole violations, but do not include minor moto 14, F1) An arrest includes being arrested with or without charges, or being charges dropped. An arrest is any time someone is taken into custody for a crime charges dropped. An arrest is any time someone is taken into custody for a crime charges dropped. An arrest is any time someone is taken into custody for a crime charges dropped. An arrest is any time someone is taken into custody for a crime include probation.	e or illegal offense? or vehicle violation ag arrested with
you/YOL CO ALL CON Have you 2_D_C2.	Young [you/Y fullest DNTINUE ISENTINU U/Has YO [Have Please (YB20') PROBE	OUTH] may have had with the police or courts. All of your answers wi extent of the law. (YB 2014, F0/YTD36M, IX.B1) G (Y2_A_CONSENT = 1) UTH] you/ Has YOUTH] ever been arrested or taken into custody for a crime include probation or parole violations, but do not include minor moto 14, F1) : An arrest includes being arrested with or without charges, or bein charges dropped. An arrest is any time someone is taken into custody for a crime charges dropped. An arrest is any time someone is taken into custody for a crime include probation or parole violations, but do not include minor motor include probation or parole violations, but do not include minor motor includes being arrested with or without charges, or being charges dropped. An arrest is any time someone is taken into custody includes in the control of the police.	e or illegal offense? or vehicle violation og arrested with stody by police or ch as littering or

IF ARRESTED (Y2_D_C2=1)	
[have you/has YOUTH] [you/YOUTH] [you were/YOUTH was] [you have/YOUTH has] [Y2_D_	_C3]
72_D_C3. How many times [have you/has YOUTH] been arrested or taken into custody offense? (YB2014, F2)	y for a crime or illeg
PROBE: An <u>arrest</u> includes being arrested with or without charges, or being charges dropped. An arrest is any time someone is taken into custlegal authority. This excludes traffic citations, other citations (sucloitering), testifying, or being questioned by the police.	stody by police or
IF YOUTH SAYS "0", PROBE: In the last question, you said [you/YOUTH] had but just answered [you were/ YOUTH was] arrested 0 times. Would back and change your answer about being arrested or change the [you have/YOUTH has] been arrested?	d you like to go
_ ARRESTS	
(1-99)	
DON'T KNOWd	
REFUSEDr	
SOFT CHECK: Y2_D_C3 = 15-99; I just want to be sure I recorded your answer correctly You said that [you have/YOUTH has] been arrested or taken into custody for a crime or [Y2_D_C3] times. Is this correct?	
YOUTH ARRESTED >0 TIMES (Y2_D_C3 >0)	
[Were you/Was YOUTH]	
2_D_C4. [Were you/Was YOUTH] ever <u>convicted</u> or did [you/YOUTH] ever <u>plead guilty</u> (YTD-36M-IX.D1, D2/JC-J26, rev)	<u>y</u> to any charges?
IF NEEDED: A conviction means a person was proven or declared guilty of an o United States, a person is convicted after a legal trial.	ffense. In the
YES1	
NO0	GO TO Y2_D_C7
DON'T KNOWd	GO TO Y2_D_C7
REFUSEDr	GO TO Y2_D_C7
YOUTH CONVICTED OR IF PLEAD GUILTY TO CHARGE (Y2_D_C4= 1)	
[you/YOUTH] [are you/is YOUTH]	
2_D_C5. Did [you/YOUTH] serve time or [are you/is YOUTH] currently serving time adult prison, jail, or other correctional facility on (that conviction/those conviction plea(s)? (YTD36M, IX.E2-rev/JC-30)	
YES1	
NO0	GO TO Y2_D_C7
DON'T KNOWd	GO TO Y2_D_C7
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REFUSED	r	GO TO Y2_D_C7
SERVED TIME OR CURRENTLY SERVING TIME FOR CON	VICTIONS (Y2_D_C5= 1)	
[have you/has YOUTH]		
Y2_D_C6. How much time in total [have you/has YOUTH] correctional facility? You may answer in days,		
INTERVIEWER: IF NO TIME SPENT, LEAVE THIS SCREEN.	FIELD BLANK AND CODE 5 O	N THE NEXT
TIME SPENT		
(0-99)		
DON'T KNOW	d	
REFUSED	r	
Y2_D_C6_Unit. INTERVIEWER: ENTER UNIT.	IF NO TIME WAS SPENT, COD	DE '5' BELOW.
PROGRAMMER: DO NOT ALLOW DK OR REFUSED.		
	CODE ONE	<u>ONLY</u>
DAYS	1	
WEEKS	2	
MONTHS	3	
YEARS	4	
NO TIME SPENT	5	
HARD CHECK: IF Y2_D_C6 = EMPTY AND Y2_D_C6_unit 1 BE 5 SINCE YOU DID NOT ENTER AN AMOUNT. PLEASE 0		UNIT CAN ONLY
HARD CHECK: IF Y2_D_C6 = 1 – 99 AND Y2_D_C6_UNIT = YOU CANNOT CODE 5 HERE. PLEASE CORRECT.	5; INTERVIEWER: Y2_D_C6 IS	S NOT BLANK;
YOUTH ARRESTED, EVER (Y2_D_C2=1)		
[Have you/Has YOUTH]		
Y2_D_C7. [Have you/ Has YOUTH] been arrested in the	e past year?	
PROBE: An arrest includes being arrested with charges with charges dropped. An arrest is any time so authority. This excludes traffic citations, other being questioned by the police. (NLTS2012-FU	omeone is taken into custody l citations (such as littering or	by police or legal
YES	1	GO TO BOX 8
NO	0	GO TO BOX 8
DON'T KNOW	d	GO TO BOX 8
REFUSED	r	GO TO BOX 8

SECTION Y2_D_D. HOUSEHOLD BENEFITS AND INCOME FOR INDEPENDENT YOUTH

	$\boldsymbol{\cap}$	v	0
0	u	А	O

CONTINUE TO Y2_D_D-INTRO IF YOUTH IS INDEPENDENT OR STATUS IS UNKNOWN (Y2_A_Q5 = 3 OR 4, D OR R). ALL OTHERS (Y2_A_Q5 = 1 OR 2) GO TO SECTION V BOX 9

INDEPENDEN	IT YOUTH OR WHERE INDEPENDENCE NOT KNOWN (Y2_A_Q5=3, 4, [D, OR R)
[your/YOUTH's	s] [your/(his/her)]	
Y2_D_D_Intro.	The next set of questions ask about <u>benefits</u> [your/YOUTH's] house well as [your/ (his/her)] household income. This information helps r understand how family finances affect students' ability to go to coll goals after high school. Your answers are important to the success be kept private. (NEW)	researchers better lege or pursue other
0011111		
INDEPENDEN	IT YOUTH OR WHERE INDEPENDENCE NOT KNOWN (Y2_A_Q5=3, 4, [D, OR R)
[Do you/Does `	YOUTH] [STATE NAME FOR TANF]	
ter	o you/Does YOUTH] or does anyone in [your/YOUTH's] household rec mporary assistance for needy families or [STATE NAME FOR TANF]? (.B1)	
IF NEE	DED: The Temporary Assistance for Needy Families (TANF) program with financial assistance and related support services. These prochildcare assistance, job preparation, and work assistance.	
YES	1	
NO	0	GO TO Y2_D_D2
DON'T	KNOW d	GO TO Y2_D_D2
REFUS	EDr	GO TO Y2_D_D2
YOUTH'S HOL	USEHOLD RECEIVES BENEFITS FROM TANF (Y2_D_D1=1)	
[your/YOUTH's	s] [STATE NAME FOR TANF]	
Y2_D_D1a.	How much money did [your/YOUTH's] household get from TANF, or TANF] last month? (YTD 36M XI.B1a, rev)	r [STATE NAME FOR
PRO	OBE: Your best guess is fine.	
INTERV	/IEWER: RECORD IN WHOLE DOLLARS.	
\$, _	_ _ _	
(0-9,000	0)	
DON'T	KNOW	d
DEELIG	ED	~

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 $SOFT\ CHECK:\ IF\ Y2_D_D1a > \$500:\ \ \textbf{May\ I\ confirm\ I\ have\ correctly\ recorded\ last\ month's\ TANF\ benefit\ as\ \$[Y2_D_D1a]?$

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	oes YOUT	H] [or STATE NAME	FOR SNAP] [your/YOU	TH's]	
Y2_D_D2.	SNAP, t		oes anyone in [your/YO utrition Assistance Pro		
IF N	NEEDED:	provided on an ele	monthly supplement for ectronic card, called an grocery stores. This pro	EBT card that is used I	ike an ATM card a
YES	S			1	
NO	٠			0	GO TO Y2_D_D3
DO	N'T KNOV	V		d	GO TO Y2_D_D3
REF	FUSED			r	GO TO Y2_D_D3
YOUTH'S	HOUSEH	OLD RECEIVES SN	AP BENEFITS (Y2_D_D	02=1)	
[your/YOU	JTH's] [or s	STATE NAME FOR	SNAP]		
INT	PROBE: TERVIEWE ,		is fine. WHOLE DOLLARS.		
(0-1	1,500)				
DO	N'T KNOV	V			.d
REI	FUSED				г
SOET CHI		2_D_D2a >\$500: Ma	y I confirm I have corre	ectly recorded last mon	th's SNAP benefit
as \$[Y2_D					
as \$[Y2_D	DENT YO	JTH OR WHERE IN	DEPENDENCE NOT KN	OWN (Y2_A_Q5=3, 4, E), OR R)
as \$[Y2_D		UTH OR WHERE IN 'H] [your/ YOUTH's]	DEPENDENCE NOT KN	OWN (Y2_A_Q5=3, 4, D), OR R)
as \$[Y2_D	oes YOUT [Do you housing	H] [your/ YOUTH's]	DEPENDENCE NOT KNoes anyone in [your/YOng rent, such as throug	OUTH's] household rec	eive any governme
INDEPENI [Do you/Do Y2_D_D3.	[Do you housing XII.D1c/	[H] [your/ YOUTH's] /Does YOUTH] or d assistance in payi YTD36M-XI.B3) This is also known	oes anyone in [your/YO	OUTH's] household reco	eive any governme ection 8? (P18M-
INDEPENI [Do you/Do Y2_D_D3.	oes YOUT [Do you housing XII.D1c/	H] [your/ YOUTH's] /Does YOUTH] or d assistance in payi YTD36M-XI.B3) This is also knowr funding to help pe	oes anyone in [your/YOng rent, such as throug	OUTH's] household reco th public housing or Se e Voucher Program. Se	eive any governme ection 8? (P18M-
INDEPENI [Do you/Do Y2_D_D3.	oes YOUT [Do you housing XII.D1c/ NEEDED:	H] [your/ YOUTH's] /Does YOUTH] or d assistance in payi YTD36M-XI.B3) This is also knowr funding to help pe	oes anyone in [your/YOng rent, such as through as the Housing Choice ople pay their rent.	OUTH's] household reco th public housing or Se e Voucher Program. Se	eive any governme ection 8? (P18M-
INDEPENI [Do you/Do Y2_D_D3. IF N YES	oes YOUT [Do you housing XII.D1c/ NEEDED:	H] [your/ YOUTH's] /Does YOUTH] or d assistance in payi YTD36M-XI.B3) This is also knowr funding to help pe	oes anyone in [your/YOng rent, such as through as the Housing Choice ople pay their rent.	OUTH's] household receipt public housing or See Voucher Program. See	eive any governme ection 8? (P18M- ction 8 provides

	1
YOUTH HOUSEHOLD RECEIVES INCOME FROM PUBLIC-HOUSING OR SECTION 8	8 (Y2_D_D3=1)
[your/YOUTH's]	
Y2_D_D3a. How much did [your/YOUTH's] household receive from housing ass (such as through public housing or Section 8) last month? (YTD 36M XI.B3a	
PROBE: Your best guess is fine.	
INTERVIEWER: RECORD IN WHOLE DOLLARS.	
\$,	
(0-5,000)	
DON'T KNOW d	
REFUSEDr	
SOFT CHECK: IF Y2_D_D3a > \$1,500: May I confirm I have correctly recorded last benefit as \$[Y2_D_D3a]?	month's housing
INDEPENDENT YOUTH OR WHERE INDEPENDENCE NOT KNOWN (Y2_A_Q5=3, 4,	, D, OR R)
[your/ YOUTH's] [YOUTH]	
Y2_D_D4. Does anyone in [your /YOUTH's] household receive any income from Solution disability? (P18M-XII.D1d, rev/YTD36M-XI.C1)	SSI or SSDI because of a
IF NEEDED: SSI and SSDI provides payments to aged, blind, and disabled children).	persons (including
YES1	
NO0	GO TO Y2_D_D5
DON'T KNOWd	GO TO Y2_D_D5
REFUSEDr	GO TO Y2_D_D5
YOUTH REPORTS HOUSEHOLD INCOME SSI OR SSDI (Y2_D_D4 = 1)	
[your/ YOUTH's]	
Y2_D_D4a. How much did [your/ YOUTH's] household receive from SSI or SSDI <u>las</u>	st month? (YTD36M-XI.C
PROBE: Your best guess is fine.	
INTERVIEWER: RECORD IN WHOLE DOLLARS	
\$ <u> , </u>	
(0-9,999)	
DON'T KNOWd	
REFUSEDr	

SOFT CHECK: IF Y2_D_D4a > 1,000: May I confirm I have correctly record last month's SSI/SSDI benefit as $[Y2_D_D4a]$? Mathematica® Inc. C.122

INDEPENDENT YOUTH OR WHERE INDEPENDENCE NOT KNOWN (Y2_A_Q5=3, 4, D, OR R)	
[Do you/Does YOUTH] [your/YOUTH's]	

Y2_D_D5. [Do you/Does YOUTH] or does anyone in [your/YOUTH's] household receive retirement income from social security, a retirement plan, pension, 401k, or any other source of retirement income? (NEW)

IF NEEDED:

PROBE:

When you work and pay Social Security taxes, you earn "credits" toward <u>Social Security benefits</u>. Once you retire, and so long as you accumulated enough credits, you are eligible to receive a Social Security benefit payment each month. It is based on how much you earned during your working career, and the age at which you decide to retire.

<u>Survivors' benefits</u> are an extension of the Social Security program that pays out a portion, or all of the benefits, of a deceased individual to their surviving spouse or dependent children.

Under a <u>retirement plan</u>, such as a 401(k) or 403(b), the employee or employer (or both) contribute a percentage of an employee's earnings annually. These contributions are then invested, and the employee ultimately receives the balance following retirement.

A <u>pension</u> plan promises a specified monthly benefit at retirement. It may state this benefit as an exact dollar amount or may calculate through a formula using salary and years of service.

YES	
NO	GO TO Y2_D_D6
DON'T KNOW d	GO TO Y2_D_D6
REFUSEDr	GO TO Y2_D_D6

YOUTH'S HOUSEHOLD HAS RETIREMENT INCOME FROM SOCIAL SECURITY (Y2_D_D5=1)	
[your/YOUTH's]	

Y2_D_D5a. How much did [your/YOUTH's] household receive in retirement income from all sources last month? (New)

Your best guess is fine.

SOFT CHECK: IF Y2_D_D5a > \$1,500: May I confirm I have correctly recorded last month's retirement income as [Y2_C_D5a]?

IX C		
INDEPEN	DENT YOUTH OR WHERE INDEPENDE	NCE NOT KNOWN (Y2_A_Q5=3, 4, D, OR R)
[CURREN	T MONTH – 1 MONTH (PRIOR MONTH ⁻	TO CURRENT ONE], [CURRENT YEAR],
[IF Y2_D_I	D5=1 FILL: retirement earnings, or] [your/	/YOUTH's]
Y2_D_D6.	What were the total earnings of <u>all</u> pe [CURRENT MONTH – 1 MONTH] [CUR	ersons in [your/YOUTH's] household last month, that is in RRENT YEAR]?
	members worked before taxes. Do no	ssions, bonuses and tips from all jobs that all household of include [Fill: retirement earnings,] public benefits or other nousehold may have received. (PROMISE 18M-XII.D3, rev)
INT	ERVIEWER: IF NO INCOME THAT M	ONTH, RECORD "0."
\$	_ _, _ (ALLOWABLE RAN	NGE: 0-99,999) GO TO Y2_D_E7
DOI	N'T KNOW	d GO TO Y2_D_D6a
REF	FUSED	r GO TO Y2_D_D6a
REFUSED	OR DON'T KNOW HOUSEHOLD INCOM	ME LAST MONTH (Y2 D. D6=D OR R)
	T MONTH - 1 MONTH] [CURRENT YEA	(= = /
ear whi	nings from salaries and other work. Ho ich of the following ranges <u>best</u> descrit	provide an exact number for [your/YOUTH's] household's owever, it would be extremely helpful if you could tell us bes [your/YOUTH's] total household earnings from CURRENT MONTH - 1 MONTH] [CURRENT YEAR]. Were s (PROMISE 18M, XII.D3-rev)
PRO		[retirement earnings or,] public benefits, or other jobs or wages that [your/YOUTH's] household may have
		CODE ONE ONLY
Les	s than \$500,	1
\$50	0 to less than \$1,500,	2
\$1,5	500 to less than \$2,500,	3
\$2,	500 to less than \$3,500,	4
\$3,	500 to less than \$4,500,	5
\$4,5	500 to less than \$5,500,	6
\$5,5	500 to less than \$6,500, or	7
\$6,5	500 or more?	8

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DON'T KNOW......d

REFUSED.....r

INDEPE	NDENT YOUTH OR WHERE INDEPENDENCE NOT KNOWN (Y2_A_Q5=3, 4, D,	OR R)
[your/YO	UTH's] [you/YOUTH]	
Y2_D_D7.	[<u>Do you/Does YOUTH</u>] or does anyone in [your/YOUTH's] household recei source you have not already told me about - such as other kinds of public child support or alimony, interest, dividends, or money from friends and fa	assistance, money fr
	Please <u>do not</u> include wages, salary, commissions, bonuses and tips from household members worked. (YTD36M, XI.F1-rev)	all jobs that all
ΥI	≣S1	
N	0 0	GO TO Y2_D_D8
D	ON'T KNOW d	GO TO Y2_D_D8
RI	EFUSEDr	GO TO Y2_D_D8
YOUTH'S	S HOUSEHOLD HAS INCOME FROM OTHER SOURCES (Y2_D_D7=1)	
[your/YO	UTH's]	
	a. How much money did [your/YOUTH's] household receive from these <u>other</u> Please <u>do not</u> include wages, salary, commissions, bonuses and tips from household members worked. (YTD-36M, XI.F2-rev)	
	ROBE: Your best guess is fine. ITERVIEWER: RECORD IN WHOLE DOLLARS	
	, (1-99,999)	
	EFUSEDr	
SOFT CI	HECK: IF Y2_D_D7 > \$1500: May I confirm I have correctly recorded \$[Y2_C_I	O7al?
ALL CON	SENTING (Y2_A_CONSENT = 1)	
Y2_D_D8	3. : IF R IS CONTINUING, SELECT "ABLE TO CONTINUE" BELOW. IF R IS NOT ABL AND EP NEEDS TO COMPLETE INTERVIEW, CHECK WHETHER EP IS AVAILABLE. IF CALLBACK FOR YOUTH AND SELECT "CONTINUE WITH PARENT INTERVIEW" BELO CALLBACK FOR YOUTH AND SELECT "PARENT UNAVAILABLE" BELOW. IF R IS NOT CONTINUE AND EP DOES NOT NEED TO COMPLETE INTERVIEW, SET CALLBACK F SELECT "PARENT COMPLETE OR INELIGIBLE" BELOW.	SO, SET W. IF NOT, SET ABLE TO
	PROGRAMMER: IF PARENTDECEASED = 1 OR PARENTWITHDRAWN = 1 OR PARENTFINAL = 1, SHOW OPTIONS 1, 4, AND 5 BELOW. ELSE, SHOW OPTIONS BELOW.	
Y	OUTH SURVEY R ABLE TO CONTINUE1	GO TO BOX 9
Ϋ́	OUTH SURVEY R BREAK OFF – CONTINUE WITH PARENT INTERVIEW 2	SET CALLBACK, CLOSE YOUTH RECORD, OPEN PARENT RECORD

YOUTH SURVEY R BREAK OFF – PARENT UNAVAILABLE3	SET CALLBACK
YOUTH SURVEY R BREAK OFF – PARENT COMPLETE OR INELIGIBLE 4	SET CALLBACK
YOUTH SURVEY R BREAK OFF – PROXY NEEDED FOR YOUTH	SET CALLBACK

Section E Self-Determination and Expectations for the Future

		Asked of Self-Reporting Youth	Asked of Youth's Proxy
Ш	Self-Determination and Expectations for the Future	YES	NO

PROGRAMMER BOX 9

THIS SECTION IS ASKED IF YOUTH IS SELF-REPORTING YOUTH ONLY.

INTERVIEWS NOW IN PROXY MODE (Y2_CURRENTSTATE=2 (PROXY)) SHOULD GO TO SECTION Y2_F_BOX 10.

ELSE, IF IN SELF-REPORTING MODE (Y2_CURRENTSTATE=1 (SELF)), CONTINUE TO Y2_E_A1.

ACROSS THIS SERIES, THE SOURCE IS THE ADOLESCENT SELF-DETERMINATION SCALE-SHORT FORM, DERIVED FROM THE ARC'S SELF-DETERMINATION SCALE. ABBREVIATED TO ("ARC SD SCALE, QXX").

SECTION Y2_E_A. SELF-DETERMINATION: AUTONOMY

SELF-REPORTING YOUTH (Y2_CURRENTSTATE = 1 (SELF))

Y2_E_A1. Now I am going to read some statements. For each, please tell me the answer that best tells how you act in that situation. There are no right or wrong answers. (P18M- XI.A1)

PROBE: Tell me the answer that best tells how you act in this situation. If your disability limits you from actually performing the activity, but you have control over the activity – such as a personal care attendant, answer <u>as if</u> you performed that activity.

PROGRAMMER: DO NOT RANDOMIZE SEQUENCE OF THESE ITEMS.

CODE ONE PER ROW

		OBE SIZE EXTROVE					
		I <u>do not do</u> that even if I have the chance	I do that sometimes when I have the chance	I do that most of the time I have the chance	I do that every time I have the chance	DK	REF
a.	"My friends and I choose activities that we want to do." The choices are	1	2	3	4	d	r
b.	"I write letters, texts, or talk on the phone to friends and family." The choices are	1	2	3	4	d	r
C.	"I go to restaurants that I like." The choices are	1	2	3	4	d	r
d.	"I choose gifts to give to family and friends." IF NEEDED: The choices are	1	2	3	4	d	r
e.	"I go to movies, concerts, and dances." IF NEEDED: The choices are	1	2	3	4	d	r

CODE ONE PER ROW

		I <u>do not do</u> that even if I have the chance	I do that sometimes when I have the chance	I do that most of the time I have the chance	I do that every time I have the chance	DK	REF
f.	"I plan weekend activities that I like to do." IF NEEDED: The choices are	1	2	3	4	d	r
g.	"I decorate my own room." IF NEEDED: The choices are	1	2	3	4	d	r

SECTION Y2_E_B. SELF-DETERMINATION: PSYCHOLOGICAL EMPOWERMENT

SELF-REPORTING YOUTH (Y2_CURRENTSTATE = 1 (SELF))

Y2_E_B1. Next, I am going to read you two statements. Please tell me the one that <u>best</u> describes <u>you</u>. Choose only one answer. There are no right or wrong answers. (P18M-XI.B1-/ARC SD Scale, 47)

9	CODE ONE ONLY
Trying hard at school doesn't do me much good, or	1
Trying hard at school will help me get a good job	2
DON'T KNOW	d
REFUSED	r
SELF-REPORTING YOUTH (Y2_CURRENTSTATE = 1 (SELF))	

Y2_E_B2. Which statement best describes you? (P18M-XI.B2-/ARC SD Scale, 49)

PROBE: There are no right or wrong answers.

SELF-REPORTING YOUTH (Y2_CURRENTSTATE = 1 (SELF))

Y2_E_B3. READ IF NECESSARY: Which statement best describes you? (P18M-XI.B3-/ARC SD Scale, 51)

SELF-REPORTING YOUTH (Y2_CURRENTSTATE = 1 (SE	LF))
2_E_B4. READ IF NECESSARY: Which statement best	describes you? (P18M-XI.B4-/ARC SD Scale, 53)
	CODE ONE ONLY
I do not make good choices, or	1
I can make good choices	2
DON'T KNOW	d
REFUSED	r
SELF-REPORTING YOUTH (Y2_CURRENTSTATE = 1 (SE	ELF))
Y2_E_B5. READ IF NECESSARY: Which statement best	describes you? (P18M-XI.B5-/ARC SD Scale, 57)
	CODE ONE ONLY
My choices will not be honored, or	1
I will be able to make choices that are important to	o me2
DON'T KNOW	d
REFUSED	r
SELF-REPORTING YOUTH (Y2_CURRENTSTATE = 1 (SE	LF))
Y2_E_B6. READ IF NECESSARY: Which statement best	describes you? (P18M-XI.B6-/ARC SD Scale, 55)
	CODE ONE ONLY
I will have a hard time making new friends, or	1
I will be able to make friends in new situations	2
DON'T KNOW	d
REFUSED	r
SECTION Y2_E_C. SELF-DETERMINATION: SELF-REALIZ	'ATION
SELF-REPORTING YOUTH (Y2_CURRENTSTATE = 1 (SE	ELF))
	ease tell me whether you think each of these desc ED: There are no right or wrong answers. (P18M-

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PROGRAMMER: DO NOT RANDOMIZE SEQUENCE OF THESE ITEMS.

IF NEEDED: You agree or you don't agree?

CODE ONE PER ROW

	Agree	Don't agree	DK	REF
a. I know what I do best. (Q65)	1	2	d	r
b. I like myself. (Q68)	1	2	d	r
c. I am confident in my abilities. (Q72)	1	2	d	r
d. Other people like me. (Q71)	1	2	d	r
e. It is better to be yourself than to be popular. (Q63)	1	2	d	r
f. I know how to make up for my limitations. (Q70)	1	2	d	r
g. I am loved because I give love. (Q64)	1	2	d	r

SECTION Y2_E_D. SELF-DETERMINATION: AGENTIC ACTION

Y2_E_D1. IF NEEDED: Please tell me whether you think this statement describes how you feel about yourself or not. There are no right or wrong answers. (Self-Determination Inventory: Student Report SDI: SR, Agentic Action series)

IF NEEDED: You agree or you don't agree?

PROGRAMMER: DO NOT RANDOMIZE SEQUENCE OF THESE ITEMS.

CODE ONE PER ROW

	Agree	Don't agree	DK	REF
a. I think of more than one way to solve a problem. (Q2)	1	2	d	r
b. I set my own goals. (Q7)	1	2	d	r
c. I figure out ways to get around obstacles. (Q11) IF NEEDED: An obstacle is something that gets in your way.	1	2	d	r
d. I think about each of my goals. (Q14)	1	2	d	r
e. I take action when new opportunities come my way. (Q19) IF NEEDED: An opportunity is a chance or a possibility.	1	2	d	r
f. I come up with ways to reach my goals. (Q21)	1	2	d	r

SECTION Y2_E_E. YOUTH'S EXPECTATIONS FOR THE FUTURE

SELF-REPORTING YOUTH (Y2_CURRENTSTATE = 1 (SELF))	
---	--

Y2_E_E_Intro. My next questions are about what you think will happen in the future. (P18M- XI.D.Intro)

SELF-REPORTING YOUTH (Y2_CURRENTSTATE = 1 (SELF))

How far do you think you will get in school? (P18M- XI.D1) Y2 E E1.

PROBE: What is the highest level of schooling you think you will complete?

CODE A CERTIFICATE OF COMPLETION OR ATTENDANCE AS "HIGH SCHOOL INTERVIEWER: DIPLOMA." IF "COLLEGE" PROBE AS TO WHETHER THAT IS A 2-YEAR OR A 4-

YEAR COLLEGE.

CODE ONE ONLY Less than high school - will not graduate or get a GED......1 High school diploma or certificate of completion,......2 Vocational, technical, or trade school,.....4 4-year college or university, or a6 Master's, PhD, or other advanced degree?7 DON'T KNOW.......d REFUSED.....r

SELF-REPORTING YOUTH (Y2_CURRENTSTATE = 1 (SELF))

Y2 E E2. When you are age 25, do you think you will be living ... (P18M- XI.D2)

With parent/guardian(s), sibling(s) or other relative(s),	1
On your own or with a spouse or partner,	2
In a group home or institution, or in an,	3
Other living situation?	4

CODE ONE ONLY

DON'T KNOW.......d REFUSED.....r

SELF-REP	ORTING YOUTH (Y2_CURRENTS	TATE = 1 (SELF))
Y2_E_E3.		do you think it is that you will earn enough to support yourself family ? Do you think you (P18M- XI.D3, rev)
		CODE ONE ONLY
Defi	nitely will,	1
Prob	oably will,	2
Prob	oably won't, or	3
Defi	nitely won't?	4
DON	N'T KNOW	d
REF	USED	r
SELE DED	ORTING YOUTH (Y2 CURRENTS	TATE = 1 (OFLE)
	· – · –	(
Y2_E_E4.	when you are age 25, now likely without <u>financial</u> help from <u>gove</u>	do you think it is that you will earn enough to support yourself rnment benefit programs? Do you think you (P18M- XI.D3)
		CODE ONE ONLY
Defi	nitely will,	1
Prol	oably will,	2
Prol	oably won't, or	3
Defi	nitely won't?	4
DON	N'T KNOW	d
REF	USED	r
SELF-REP	ORTING YOUTH (Y2_CURRENTS	TATE = 1 (SELF))
		do you think it is that you will be working at a paid job? Do you
	•	CODE ONE ONLY
Defi	nitely will,	1
Prol	oably will,	2
Prol	oably won't, or	3
Defi	nitely won't?	4

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DON'T KNOW.......d

REFUSED.....r

SELF-REPORTING YOUTH (Y2_CURRENTSTATE = 1 (SELF))

Y2_E_E6.IF R IS CONTINUING, SELECT "ABLE TO CONTINUE" BELOW. IF R IS NOT ABLE TO CONTINUE AND EP NEEDS TO COMPLETE INTERVIEW, CHECK WHETHER EP IS AVAILABLE. IF SO, SET CALLBACK FOR YOUTH AND SELECT "CONTINUE WITH PARENT INTERVIEW" BELOW. IF NOT, SET CALLBACK FOR YOUTH AND SELECT "PARENT UNAVAILABLE" BELOW. IF R IS NOT ABLE TO CONTINUE AND EP DOES NOT NEED TO COMPLETE INTERVIEW, SET CALLBACK FOR YOUTH AND SELECT "PARENT COMPLETE OR INELIGIBLE" BELOW.

PROGRAMMER: IF PARENTDECEASED = 1 OR PARENTWITHDRAWN = 1 OR PARENTAGENCY = 1 OR PARENTFINAL = 1, SHOW OPTIONS 1, 4, AND 5 BELOW. ELSE, SHOW OPTIONS 1, 2, 3, AND 5 BELOW.

YOUTH SURVEY R ABLE TO CONTINUE	GO TO BOX 10
YOUTH SURVEY R BREAK OFF – CONTINUE WITH PARENT INTERVIEW 2	SET CALLBACK, CLOSE YOUTH RECORD, OPEN PARENT RECORD
YOUTH SURVEY R BREAK OFF – PARENT UNAVAILABLE 3	SET CALLBACK
YOUTH SURVEY R BREAK OFF – PARENT COMPLETE OR INELIGIBLE 4	SET CALLBACK
YOUTH SURVEY R BREAK OFF – PROXY NEEDED FOR YOUTH	SET CALLBACK

Section F Knowledge of SSA Benefits and Work Incentives

		Asked of Self-Reporting Youth	Asked of Youth's Proxy
F	Knowledge of SSA Benefits and Work Incentives	YES	NO

PROGRAMMER BOX 10

CONTINUE TO Y2_F_INTRO IF SELF-REPORTING YOUTH (Y2_CURRENTSTATE = 1 (SELF)).

IF PROXY (Y2_CURRENTSTATE=2 (PROXY)) GO TO Y2_G_A1.

SELF-REPOR	TING YOUTH (Y2_CURRENTSTATE = 1 (SELF))
Y2 F Intro	Next, I'll ask about some Social Security Administration policies and programs. Not

SELF-REPORTING YOUTH ()	Y2	CURRENTSTATE = 1	(SELE)	١
SELI-KEFOKTING TOOTIT	1 4	CONNENIONALE	OLLI)	,

Y2_F_A1. My first question is about the "Student Earned Income Exclusion." It is for youth under age 22 who are in school when they are working. In 2020, you could earn up to \$1,900 per month or up to \$7,670 per year and not have it counted when Social Security figured your benefit.

Have you ever heard of the <u>student earned-income exclusion before today</u>? (YTD36M-V.E2 rev, NBS-E12, rev)

everyone is familiar with these, so if you don't know the answer to a question, that's OK

INTERVIEWER: IF 'DON'T KNOW', PROBE TO SEE IF RE-READING THE DEFINITION WOULD BE USEFUL. IF NOT, CODE AS DON'T KNOW.

	CODE ONE ONLY
YES	1
NO	0
DON'T KNOW	d
REFUSED	r

PROGRAMMING NOTE: THIS ITEM WILL GET AN ANNUAL TEXT UPDATE ONCE THE NEW INCOME LIMITS ARE POSTED FOR 2019 AND 2020.

SELF-REF	PORTING YOU	JTH (Y2_CURRENTSTATE = 1 (SELF))		
Y2_F_A2.		rity offers something called a "Plan for Achieving Self-Support" or a "PASS Plan." It aside money to be used to help you reach a work goal. The money set aside does not benefits.		
		ver heard of the Plan for Achieving Self-Support or a <u>PASS Plan</u> before today? B3/NBS E3, rev)		
INT	ERVIEWER:	IF 'DON'T KNOW', PROBE TO SEE IF RE-READING THE DEFINITION WOULD BE USEFUL. IF NOT, CODE AS DON'T KNOW.		
		CODE ONE ONLY		
YE	S	1		
NO		0		
DO	N'T KNOW	d		
RE	FUSED	r		
SELF-REF	PORTING YOU	JTH (Y2_CURRENTSTATE = 1 (SELF))		
Y2_F_A3.	earnings ov	rity has a rule called the <u>1 for 2 earnings exclusion</u> where one-half of your er \$85 are not counted when Social Security figures your SSI benefit. Have you of the <u>1 for 2 earnings exclusion</u> before today? (NBS modified)		
		(Only if respondent questions the \$85 figure) Social Security does not count \$20 of any source and \$65 of earnings before applying the 1 for 2 earnings exclusion.		
INT	ERVIEWER:	IF 'DON'T KNOW', PROBE TO SEE IF RE-READING THE DEFINITION WOULD BE USEFUL. IF NOT, CODE AS DON'T KNOW.		
		CODE ONE ONLY		
YE	S	1		
NO		0		
DO	N'T KNOW	d		
RE	FUSED	r		
SELF-REF	PORTING YOU	JTH (Y2_CURRENTSTATE = 1 (SELF))		
Y2_F_A4.	"Achieving	v a special kind of savings account called an <u>ABLE account.</u> ABLE stands for a Better Life Experience." Up to \$100,000 saved in an ABLE account does not esource under SSI rules. Have you ever heard of an <u>ABLE account</u> before V)		
INTERVIEV	ERVIEWER : IF 'DON'T KNOW', PROBE TO SEE IF RE-READING THE DEFINITION WOULD BE USEFUL. IF NOT, CODE AS DON'T KNOW.			
		CODE ONE ONLY		
YE	S	1		
NO		0		

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DON'T KNOW.......d

REFUSED.....r

SELF-REPORTING YOUTH (Y2_CURRENTSTATE = 1 (SELF))

Y2_F_A5. I'm going to read you a statement. Please tell me if you think it is true or <u>not</u> <u>true</u>. (NEW)

IF NEEDED: Is that statement true or not true?

PROBE: If you are not sure, that's OK, you can tell me that, as well.

PROGRAMMER: RANDOMIZE SEQUENCE OF THESE ITEMS.

CODE	ONE		
(.()))		PER	RUW

		TRUE	NOT TRUE	DK	REF
a.	Children receiving SSI are automatically eligible for SSI as adults.	1	2	d	r
b.	People who get SSI (Supplemental Security Income) are <u>not</u> allowed to work at a job for pay.	1	2	d	r
C.	People who receive SSI benefits must report any money they get from working to the Social Security Administration (SSA).	1	2	d	r

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Section G	Conto	ct Information
Section O	Coma	ot illioilliation

Y2_G_A3

		Asked of Self-Reporting Youth	Asked of Youth's Proxy
G	Contact Information	YES	YES

ALL CONSEN	ALL CONSENTING (Y2_A_CONSENT=1)				
[you/YOUTH]					
Y2_G_Intro.	The last set of questions will be about how to contact [you/YOUTH].	(NEW)			
ENTER	1 TO CONTINUE1				
ALL CONSENT	ING (Y2_A_CONSENT = 1)				
[YOUR/YOUTH	'S] [YOUTH MAILING ADDRESS FROM SAMPLE FILE] [do you/does YOU	JTH]			
	at is [your/YOUTH's] home address? [IF ADDRESS NE . FILL: Is it [YOI ILING ADDRESS FROM SAMPLE FILE]?	UTH			
IF NEED	PED: This is where we will mail [your/ YOUTH's] thank you letter and p this interview. (P18M-XIII.B1/YTD-BL-Q5 rev)	ayment for			
PROBE	What street [do you/does YOUTH] live on? In what town? If you dethe full address, that's OK, just share as much as you can remem				
SAME A Y2_G_A	DDRESS AS SHOWN ABOVE1	GO TO			
ADDRES Y2_G_A	SS ABOVE NOT CORRECT – UPDATE AS FOLLOWS:99	GO TO			
DON'T h Y2_G_A	NOWd 3	GO TO			
REFUSE	:Dr	GO TO			

YOUTH ADDRESS UPDATED: (Y2_G_A1= 99)
[YOUR/YOUTH'S]

Y2_G_A2. What is [your/YOUTH's] home address? (P18M- XIII.B1)

INTERVIEWER:	IF REFUSES, PROBE FOR ZIP CODE.
STREET 1/APT #	
CITY	

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STATE	
ZIP	
DON'T KNOW	d
REFUSED	r

ALL CONSENTING (Y2_A_CONSENT = 1)	
[YOUR/(YOUTH)'S], POPULATE FILL FOR [YOUTH PHONE] FROM SAMPLE FILE	
Y2_G_A3. What is the best telephone number to reach [you/ (YOUTH)] at? Is it [you another number? (P18M- XIII.B2)	ıth phone] or
SAME PHONE NUMBER AS ABOVE1 Y2_G_A5	GO TO
DIFFERENT PHONE NUMBER – UPDATE BELOW99	
DON'T KNOWd Y2_G_A5	GO TO
REFUSEDr Y2_G_A5	GO TO
YOUTH PHONE UPDATED (Y2_G_A3 = 99)	
[YOU/YOUTH]	
PROGRAMMER- EXTENSION MAY BE MISSING	
Y2_G_A4_PhoneNum. What is the best telephone number to reach [you. (YOUTH)] at? (P18M-XIII.B2) _ _ (0-999) (0-9999) DON'T KNOW	
Y2_G_A4_PHONENUM = PHONE PROVIDED	
Y2_G_A4TZ. What time zone is that in? IF NEEDED: What time is it there?	
INSTRUCTION: A TIME ZONE IS REQUIRED. USE ORIGINAL TIME ZONE OR STATE II $\underline{\text{CODE ONE ONL}}$	
EASTERN TIME (US & CANADA) [(FILL CURRENT TIME)]62	
INDIANA (EAST) [(FILL CURRENT TIME)]63	
CENTRAL TIME (US & CANADA) [(FILL CURRENT TIME)]65	

ARIZONA [(FILL CURRENT TIME)]	68	
MOUNTAIN TIME (US & CANADA) [(FILL CURRENT TIME)]	70	
PACIFIC TIME (US & CANADA) [(FILL CURRENT TIME)]	71	
ALASKA [(FILL CURRENT TIME)]	72	
HAWAII [(FILL CURRENT TIME)]	73	
BAJA CALIFORNIA [(FILL CURRENT TIME)]	93	
ALL CONSENTING (Y2_A_CONSENT = 1)		
FILL PHONE IF Y2_A_MODE=1 OR 3 OR 4/FILL FIELD IF Y2_A_MODE = 2 OR	5.	
Y2_G_A5. Thanks for answering these questions. We'll [send/give] [you/YO completing this interview. Would [you/YOUTH] like a card to Wall card?		
PHONE: The gift card will be mailed with a thank you letter. It should arrive weeks.	e in the	next 2-3
FIELD: You will need to sign your name on the tablet to show that you re		
WALMART	1	
TARGET	2	
ALL CONSENTING (Y2_A_CONSENT = 1) WHERE PARENTDECEASED = 1 OF PARENTWITHDRAWN = 1 OR PARENTAGENCY = 1 OR PARENTFINAL = 1	R	
Y2_G_A6. Thanks for your time today, we appreciate it! Have a greater	•	
YOUTH INTERVIEW IS COMPLETE	1	TERMINATE
ALL CONSENTING (Y2_A_CONSENT = 1) WHERE PARENTDECEASED = 0 AND PARENTWITHDRAWN = 0 AND PARENTAGENCY = 0 AND PARENTFINAL = 0	ND	
[EP]		
Y2_G_A7. Thanks for your time today, we appreciate it! Now I'd like to begin with [EP]. Would (he/she) be available to speak now?	n the nex	t interview
IF NEEDED: The parent interview should take about 25-35 minutes to	complete) .
BEGIN PARENT INTERVIEW NOW	1	CLOSE YOUTH RECORD, OPEN PARENT RECORD

PARENT

ALL CONSENTING (Y2 A CONSENT = 1) WHERE PARENTDECEASED = 0 AND PARENTWITHDRAWN = 0 AND PARENTAGENCY = 0 AND PARENTFINAL = 0 [EP] Y2 G A8 PhoneNum. What is the best telephone number for [EP]? | |-| | |-| | | | | (0-999)(0-999)(0-9999)DON'T KNOW D REFUSEDR Y2_G_A8_Extension. Is there an extension number? (0-999999)Y2 G A8 = PHONE PROVIDED Y2 G A8TZ. What time zone is that in? IF NEEDED: What time is it there? INSTRUCTION: A TIME ZONE IS REQUIRED. USE ORIGINAL TIME ZONE OR STATE IF NEEDED. CODE ONE ONLY EASTERN TIME (US & CANADA) [(FILL CURRENT TIME)]......62 INDIANA (EAST) [(FILL CURRENT TIME)]......63 CENTRAL TIME (US & CANADA) [(FILL CURRENT TIME)]......65 ARIZONA [(FILL CURRENT TIME)]68 MOUNTAIN TIME (US & CANADA) [(FILL CURRENT TIME)]70 PACIFIC TIME (US & CANADA) [(FILL CURRENT TIME)]71 ALASKA [(FILL CURRENT TIME)]72 HAWAII [(FILL CURRENT TIME)]73 BAJA CALIFORNIA [(FILL CURRENT TIME)]......93 ALL CONSENTING (Y2_A_CONSENT = 1) WHERE PARENTDECEASED = 0 AND PARENTWITHDRAWN = 0 AND PARENTAGENCY = 0 AND PARENTFINAL = 0 [EP] What is [EP's] home address? Y2 G A9. IF REFUSES, PROBE FOR ZIP CODE. INTERVIEWER:

STREET 1/APT #	
CITY	
STATE	
ZIP	
DON'T KNOW	d

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 $Y2_G A7 = 1$

FILL TEXT BASED ON SURVEY MODE

Y2_G_Break1.

IF MODE = CATI, FILL: >>INSTRUCTION: CLICK THROUGH THE REMAINING ITEMS TO STATUS THIS CASE AS COMPLETE. YOU <u>MUST</u> REACH THE "FINISHED" SCREEN FOR THE CASE TO CLOSE PROPERLY. ONCE FINISHED, CLOSE THE YOUTH CASE AND OPEN THE PARENT SURVEY. SELECT THE PARENT RECORD TO BEGIN THE PARENT INTERVIEW.<<

IF MODE = WEB, FILL: >>INSTRUCTION: CLICK THROUGH THE REMAINING ITEMS TO STATUS THIS CASE AS COMPLETE. ONCE FINISHED, CLOSE THE CONFIRMIT TAB AND RETURN TO SMARTFIELD TO OPEN THE PARENT SURVEY. SELECT THE PARENT RECORD IN SMARTFIELD, ADD AN ATTEMPT FOR THE PARENT CASE, AND BEGIN THE PARENT INTERVIEW.<<

CONTINUE1	FINA	ALIZE (CASE
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Y2 G A7 = 2

FILL TEXT BASED ON SURVEY MODE

Y2_G_Break2.

IF MODE = CATI, FILL: >>INSTRUCTION: CLICK THROUGH THE REMAINING ITEMS TO STATUS THIS CASE AS COMPLETE. YOU <u>MUST</u> REACH THE "FINISHED" SCREEN FOR THE CASE TO CLOSE PROPERLY. ONCE FINISHED, THE SYSTEM WILL BRING UP THE NEXT YOUTH CASE. <u>ONLY</u> SET AN APPOINTMENT FOR THE PARENT CASE IF IT IS A <u>FIRM APPT</u>.<<

IF MODE = WEB, FILL: >>INSTRUCTION: CLICK THROUGH THE REMAINING ITEMS TO STATUS THIS CASE AS COMPLETE. ONCE FINISHED, CLOSE THE CONFIRMIT TAB AND RETURN TO SMARTFIELD TO IDENTIFY THE NEXT YOUTH CASE TO WORK. ONLY SET AN APPOINTMENT IN SMARTFIELD FOR THE PARENT CASE IF IT IS A FIRM APPT.

CONTINUE1	FINALIZE
	CASE



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